

Preventing The Transmission of Methicillin-Resistant Staphylococcus Aureus in the Hospital Setting: Perspectives from Health Care Workers

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Background

- Addressing the problem of colonization of methicillin-resistant staphylococcus aureus (MRSA) is essential in creating healthier environments for patients and health care workers (HCWs)
- As the leading cause of nosocomial infections in hospitalized patients, MRSA is associated with increased morbidity and mortality

Purpose

• To evaluate original research exploring HCWs perspectives towards MRSA transmission prevention practices

Conclusions

- Some HCWs are more confident about their knowledge of MRSA transmission and prevention practices than others
- HCWs overestimated their compliance to preventive practices
- Barriers to compliance of prevention practices include: lack of knowledge or time, decreased staff to patient ratios, and being afraid or insecure about working with patients on MRSA precautions

Implications

- Knowledge of first-hand experiences of HCWs will provide information that can inform future education and skill building interventions to decrease the transmission of MRSA
- Interventions need to include ways to increase comfort level of HCWs when working with patients who have MRSA, especially those with less formal training.

Reference	Design Purpose	Sample and	Major Results	Limitations/ Evidence Level/ Quality
		Setting		
Andersson et al (2016) Experiences of nursing staff caring for patients with methicillin-resistant staphylococcus aureus International Nursing Review, 63(2), 233-241.	Design: Qualitative descriptive original research study using semi structured interviews Purpose: To describe nursing staffs' experiences of caring for patients with MRSA in Sweden.	Inclusion Criteria: Participant should have nursed at least one patient with MRSA. Sample included all women, working on surgical, medical, orthopedic and rehabilitation units in an urban area, in Stockholm. N= 15 interviews • 8 RNs, (22–61 yrs. old) and 7 assistant nurses (34–59 yrs. old). *RNs had 10 mos34 years of experience and nurse assistants had 7 - 22 yrs.	 Increased levels of knowledge on MRSA helps HCWs confidence and security in their role as caregivers. Responses from participants were presented in three themes were: feeling ignorant, afraid and insecure, feeling competent and secure and feeling stressed and overworked "Feeling ignorant, afraid and insecure" included HCWs feeling that they lacked 	<u>Limitation:</u> Selection bias may have occurred being that the most positive an well-informed participant may have been chosen
Kapil et al (2015) Hand hygiene in reducing transient flora on the hands of healthcare workers: An educational intervention. Indian Journal of Medical Microbiology, 33(1), 125-8.	Design: Quantitative, descriptive, cross sectional original research study Purpose: To evaluate the role of hand hygiene in reducing the bacterial flora on HCW's hands.		importance of hand hygiene before touching patients (esp if attendants as	
Seibert et al (2014) Knowledge, perceptions, and practices of methicillin-resistant staphylococcus aureus transmission prevention among health care workers in acute-care settings. American Journal of Infection Control, 42(3), 254-254.	Design: Original research Quantitative, descriptive, cross sectional Purpose: To evaluate knowledge, perceptions, and practices related to MRSA among a diverse sample of HCWs at an acute care hospital.	Medical, nursing, allied health, and support services staff at an acute-care hospital in Virginia N= 276 surveys, 104 blinded observations	 Each professional group overestimated how well they applied their prevention of MRSA knowledge to their profession More than 90% of HCWs agreed that MRSA was a national problem, but fewer than ½ believed that it was local problem w/ in the hospital in which they worked. Each professional group perceived their peers to be less cautious at prevention practices than themselves Direct observations noted that all HCWs had significantly lower compliance to hand hygiene recommendations, but self-reported rates were higher All groups of HCWs had limited knowledge about the duration of time that MRSA can live on surfaces and about the effectiveness of alcohol rubs at removing MRSA from their hands. 	Limitation: Results may be overestimate of the levels of knowledge, perceptions, and practices in the HCW's population due to this study being self-selected. Limitation: Findings may not be generalizable to other HCW populations due to the study being conducted at only one facility. Evidence level: III Quality Rating: High
Seibert et al (2014) Preventing transmission of MRSA: A qualitative study of health care workers' attitudes and suggestions. American Journal of Infection Control, 42(4), 405-405.	Design: Qualitative descriptive design Purpose: To examine HCWs' attitudes about MRSA, perceptions of challenges to MRSA, barriers to MRSA prevention, and suggestions for preventing the spread of MRSA in the acute care settings.	16 RNs, 1 physician, 6 allied health professionals, and 3 support staff at an acute-care hospital in Virginia N= 26 interviews *42 volunteered to be interviewed, but only 26 completed the process. *Sample was a purposive sample with HCWs engaged in direct patient care or with jobs requiring entry into patient care areas.	 HCWs expressed it as their duty to protect their patients & were aware of possible MRSA transmission when hand hygiene and contact precautions are neglected 15 noted compliance to recommended practices of PPE including gloving, gowning, and hand hygiene while 13 noted being noncompliant. Interview content inductively developed 7 categories and themes from responses: "Perceptions/attitudes, contact precautions, time, knowledge/education, communication, hand hygiene and contamination" Time= barrier when HCWs are in a rush & staff to patient ratio is high. Continuous education is essential in preventing the transmission of MRSA. Ineffective communication=a major barrier to preventing implementation of recommended practices Gloving only protected HCWs and not patients from contamination 	Limitation: Self-selective sample that may disproportionately included nurses (limiting perspective of the other professional groups) Limitation: Some interviews were rushed since they occurred during working hours resulting in some participants not being able to give in depth explanations Evidence level: III Quality rating: High