

Long-Term Care Survey Alert

INFECTION CONTROL: Enlist Staff To Hait Methicillin-Resistant Staph

These simple strategies will go a long way to lower your infection rates.

If you're looking for the most likely culprits for transmitting MRSA, look no further than caregivers' own hands. Staff who don't follow standard precautions can transmit methicillin-resistant Staph germs from resident to resident.

The good news: Using a staff education strategy and identifying residents at high risk for MRSA colonization can head off potentially serious infections in your facility.

Key point: All staff should follow the adage: "If it's wet and it's not yours, don't touch it--wear gloves and wash your hands before and after," says medical director **Duncan MacLean, CMD**.

The problem: CNAs and other caregivers are most likely to forget to follow standard precautions when they are rushed or in an emergency, says **Jane Niemi, RN, MSN, NHA**, a consultant with **LTCQ Inc**. in Lexington, MA.

Solution: While you want to emphasize the importance of following standard precautions in all cases, identify residents at higher risk for being colonized with MRSA so staff will pay additional attention to infection control. According to Niemi, the list includes residents who meet one or more of the following criteria:

- Have a previous history of a wound being colonized or an MRSA infection;
- Are receiving chemotherapy for cancer or otherwise immunocompromised;
- Have been admitted after a prolonged hospitalization or after an operative procedure, including an outpatient preoperative procedure;
- Have invasive devices (i.e. catheters, gastric tubes, trach tubes, surgical drains);
- Received treatment with broad-spectrum antibiotics.

Clinical gem: If your facility admits a resident with a serious wound diagnosed as a brown recluse spider bite, you might really be looking at a community- or hospital-acquired MRSA infection. Culture any necrotic lesion with MRSA in mind, advises **Steven Warren, MD, DPA,** a nursing home medical director who spoke on wound care management at the March 2006 **American Medical Directors Association** annual conference. The cases of brown recluse spider-bite wounds he has cared for in nursing homes occurred in a part of the country where the spiders are known to inhabit--and the spiders were actually caught. "And the diagnosis was made by biopsy," Warren tells **Eli**.

To print a map showing where brown recluse spiders and related species live, go to http://spiders.ucr.edu/http://spiders.ucr.edu/images/colorloxmap.gif.