**MRSA Prevention Implementation Plan**

Name of Hospital:

Current MRSA Bacteremia Rate/SIR:

Improvement Goal (Percent Reduction):

Number of Events Needed to Prevent to Reach Goal:

Members of MRSA Prevention Team (Include team members position):

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Driver for Improvement** | **Expected Outcomes** | **Plans/Gaps** | **Tools and Resources** | **List Steps to implementation** | **Person Responsible** | **Expected Date of Completion** |
| Identify the executive sponsor | Executive sponsor will facilitate a system-level perspective on quality and safety challenges.  Sponsor commits to provision of resources for implementation. |  | [Senior Leader Safety Worksheet](http://www.tnpatientsafety.com/pubfiles/mrsa/action-plan/2019/Senior%20Leader%20Safety%20Checklist.pdf)  [Senior Leader Safety Checklist](http://www.tnpatientsafety.com/pubfiles/mrsa/action-plan/2019/CEO_Senior%20Leader%20Checklist.pdf)  [How to Engage the Senior Executive to Reduce HAIs](https://www.youtube.com/watch?v=e2aimG4453U) (6:25 mins) |  |  |  |
| Engage a multi-disciplinary MRSA prevention team | Successful implementation of plan requires collaborative efforts from multiple disciplines. Examples of team members include nursing, infection preventionists, quality improvement specialists, pharmacy, environmental services, microbiologists, laboratory technicians, marketing team, surgical team, epidemiologists, physicians, etc.… |  | [Engaging the Team](http://www.tnpatientsafety.com/pubfiles/mrsa/action-plan/2019/Engaging%20the%20Team.pdf)  [Quality Improvement Team Information Form](http://www.tnpatientsafety.com/pubfiles/mrsa/action-plan/2019/Quality%20Improvement%20Team%20Information%20Form.pdf)  [Assemble the Team](https://www.youtube.com/watch?v=Q0kCSIEdbqQ)  (Video, 10.40mins) |  |  |  |
| Conduct a risk assessment | Facilities should conduct risk assessment to identify gaps in prevention efforts. |  | [Acute Care Facility MDRO Activity Assessment Tool](https://www.cdc.gov/HAI/pdfs/prevent/MDRO-Facility-Assessment_7_28.pdf) |  |  |  |
| Implement ICU decolonization Strategies | Interventions against MRSA infection require decolonization of skin with CHG and decolonization of nares with antibiotic/antiseptic agents. |  |  |  |  |  |
| Decolonize patients undergoing high- risk surgical procedures | Patients undergoing orthopedic, neuro, and cardiothoracic procedures should be decolonized to reduce risk. |  |  |  |  |  |
| Identify other gaps based on risk assessment | Strategies to address other gaps should be planned and implemented. |  | [MDRO Top Ten Checklist](http://www.hret-hiin.org/Resources/mdro/17/multidrug-resistant-organism-infections-mdro-top-ten-checklist.pdf) |  |  |  |
| Engage IT in implementation | IT involvement may include electronic triggers for MRSA prevention, flags for patient history of MRSA, documentation of completion of actions or audit tools. |  |  |  |  |  |
| Ensure education and competency of healthcare workers | Healthcare workers who have the training, knowledge and skills needed for implementation of plan are more likely to implement actions. |  | [Shield Protocol Training Module](http://www.tnpatientsafety.com/pubfiles/mrsa/action-plan/2019/Shield%20Protocol%20Training%20Module.pdf)  [CHG Flyer for Staff](http://www.tnpatientsafety.com/pubfiles/mrsa/action-plan/2019/CHG%20Flyer%20for%20Staff.pdf)  [Pages 29-31 Strive Document](http://www.tnpatientsafety.com/pubfiles/mrsa/action-plan/2019/Strive%20Document.pdf) |  |  |  |
| Audit practice | Successful implementation requires regular auditing of completion, proper application of products, and identify opportunities for improvement. |  | [CHG Bathing Staff Skill Assessment](http://www.tnpatientsafety.com/pubfiles/mrsa/action-plan/2019/CHG%20Bathing%20Staff%20Skill%20Assessment.pdf)  [Pages 29-31 Strive Document](http://www.tnpatientsafety.com/pubfiles/mrsa/action-plan/2019/Strive%20Document.pdf) |  |  |  |
| Engage patients and families in implementation | Educate patient and family to gain support for plan. Patient and families engagement is vital in driving best practices for safety processes. |  | [Patient Talking Points on CHG Bathing](http://www.tnpatientsafety.com/pubfiles/mrsa/action-plan/2019/Patient%20Talking%20Point%20on%20CHG%20Bathing.pdf) |  |  |  |

**PDSA: Conducting Test of Change**

(Keep it simple)

* Identify one step that you can take by next week towards implementing your plan:
* Identify a unit where the test will be conducted:
* Identify resources needed to conduct test of change:
* Determine how to gather information from test of change:
* What did you learn from the test that will be applied to subsequent tests of change:

**Sources**

AHRQ Core CUSP Toolkit Available at <https://www.ahrq.gov/hai/cusp/modules/assemble/index.html>

MRSA Guide to Patient Safety Tool (STRVE) available at <https://psep.med.umich.edu/uploads/5/6/5/0/56503399/strive_mrsa_gps_tool_20180608_attrib.pdf>

UCI Health Hospital Decolonization Toolkit Available at <http://www.ucihealth.org/shield/hospital-decolonization-toolkit>

Centers for Disease Control and Prevention