Reduction of MRSA Infection in Obstetrics

The Problem

Clusters of MRSA infections were noted among newborns and mothers recently discharged from BIDMC.
Labor and Delivery, 5 and 6 Feldberg Nurseries, and Post Partum Units were identified as environments of care where improved processes of infection control would result in a decreased number of infections for these patients.
Guidelines established by the DPH, CDC, and the Association of peri-Operative Nurses provided goals for target conditions. The plan was to improve infection control among three groups of stake-holders -- patients, providers, and visitors.

Aim/Goal

Decrease the incidence of hospital-acquired MRSA skin and soft tissue infection among mothers and their newborns immediately; confirm providers' knowledge of best practices for infection control.

The Team

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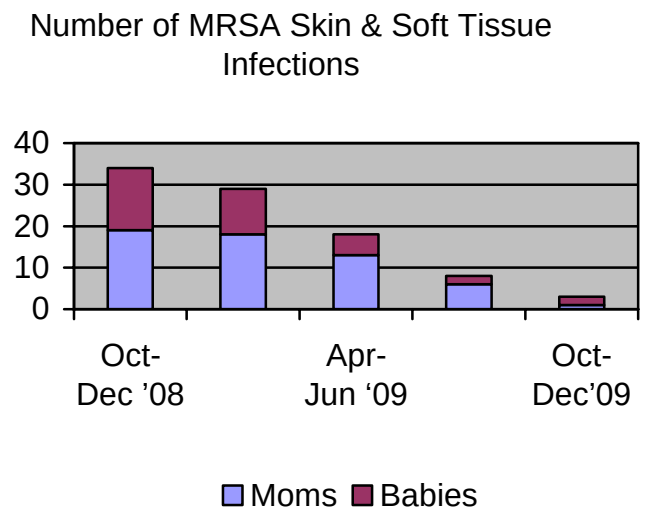
The Interventions

- Mandatory on-line education on Infection Control
- Instruction + audits in ideal surgical skin preparation
- On-the-ground education for providers, patients, visitors on hand hygiene and natural history of MRSA
- Chlorhexidine application for mothers and newborns; triple dye cord care
- Increased visibility of electronic "flags" for colonized patients on L&D
- Standardized processes for cleaning of re-usable equipment
- Universal glove use in the nurseries for direct contact with babies
- Weekly interdisciplinary meetings to assess the success of interventions
- Screening of staff for MRSA carrier status, and appropriate decolonization

The Results/Progress to Date



Lessons Learned

Local champions were a key to success. Interventions were initially met with skepticism, but simple, iterative, blame-free messages about multiple changes in practice led to broad-based acceptance. A surprise was the enthusiasm of patients and their families in participating in our ongoing efforts to improve Infection Control, as the 3 targeted groups -- providers, patients, and families -- came together to promote patient safety.

Next Steps/What Should Happen Next

- Enhanced screening for staff for MRSA colonization
- Obstetrical Simulation exercise to reinforce principles; continuous audits
- L&D RN's to participate in structured peri-op coursework
- Dissemination of lessons learned to other units and outside of BIDMC

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