CareVille
CARE TAILORED TO YOU

MRSA Policy

Date Written	
Author(s)	
Version	
Date Signed Off	
Reviewed by	

Date: [ ]

Review Data

Initial Production

Name	Role/Department	RACI	Date

R = Responsible for writing the policy; **A** = Accountable; **C** = Consulted; **I** = Informed

Change History

Version	Date	Details of Change	Author

Emergency Contact Details

Name	Email	Mobile

CQC Fundamental Standards

Regulation Number	Regulation Details
Regulation 12: Safe care and treatment	Care and treatment must be provided in a safe way for service users including assessing the risk of, and preventing, detecting and controlling the spread of, infections.

Key Lines of Enquiry

KLOE	How this applies to Access to Files and Records
Safe	Ensuring that the risk of contamination is minimised promotes the overall safety of the service.

Related Documents

This policy should be read in conjunction with our:

- HS01 - Health and Safety Policy
- CM24 - Infection Control Policy
- CMN07 - Notifications Policy

PolicyStatement

Policy Aims

The purpose of this policy is to ensure that good and safe working practices are in place across the company and to set out clear guide lines for all staff and managers to follow.

This policy sets out Careville Ltd's commitment to adhere to the following infection control legislation:

- The Health and Safety at Work Act 1974 and the Public Health Infectious Disease Regulation 1998, which places a duty on the organisation to prevent the spread of infection.
- The Control of Substances Hazardous to Health Regulations 2002 (COSHH) which places upon employers to control dangerous substances in the work place.
- The Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)

Careville Ltd ensures that our service users and staffs wellbeing is paramount, and service users, their families and staff working for the organisation are as safe as possible from MRSA. All staff in the organisation are trained to be aware of the causes of the spread of MRSA and aware of preventative measures. Service users that have been diagnosed with the M.R.S.A receive the highest quality of care and are not discriminated against.

Key Question: What exactly is MRSA?

MRSA (sometimes referred to as the superbug) stands for Methicillin-resistant Staphylococcus Aureus (SA). SA is a bacterium from the Staphylococcus Aureus family.

About one in three of us carries SA on the surface of our skin, or in our nose, without developing an infection. This is known as being colonised by the bacteria. However, if SA bacteria get into the body through a break in the skin they can cause infections such as boils abscesses or impetigo and can prevent wounds from healing properly, or cause pneumonia to develop. If SA gets into the blood-stream they can cause more serious infections such as septicaemia. Most SA infections can be treated with antibiotics such as Methicillin (a type of penicillin). However, SA is becoming increasingly resistant to most commonly used antibiotics.

MRSA bacteria are those types of SA bacteria that are resistant to Methicillin (and usually to some of the other antibiotics that are normally used to treat SA infections). MRSA is no more infectious than other types of SA bacteria. However, MRSA infections are more difficult to treat due to the antibiotic resistance of the bacteria. When MRSA does cause an infection, it is especially problematic in elderly or vulnerable people who are debilitated and can be dangerous, and potentially even life threatening. Antibiotics can still be used to treat MRSA, the infection may simply require a much higher dose over a much longer period, or the use of an antibiotic to which the bacteria is not resistant.

M.R.S.A can be spread by hand from people who do not wash their hands properly between contact. It can also be become contactable in such things as bedding and clothes, and extremely vigorous cleaning and infection techniques are required to eradicate it or halt its growth.

Preventing MRSA

MRSA does not constitute a hazard to healthy people, and according to Department of Health guidelines, the implementation of sound infection control techniques, especially rigorous attention to hand washing is sufficient to control the spread of bacteria.

Therefore, in this organisation:

- All staff should comply with Careville Ltd's infection control policies and procedures and adhere to best practice in infection control at all times.
- All staff should adhere to Careville Ltd's hand washing policy at all times, ensuring that their hands are thoroughly washed and dried on arrival and before leaving the clients home, between seeing each and every service user where direct contact is involved, after handling any body fluids or waste or soiled items, after using the toilet and before handling food stuffs.
- Careville Ltd believes, and consistent with modern infection control evidence and knowledge, that hand washing is the single most important method of preventing the spread of infection, whether a service user is a known carrier of MRSA or not.
- All staff should use the hygienic hand rub provided.
- All staff should adhere to Careville Ltd's protective clothing policy and disposable gloves and aprons should always be worn when dealing with blood or bodily fluids or assisting with bodily care.

- Gloves and aprons should be changed and disposed of after each procedure or contact and always between contacts with different service users.
- Cuts, sores and wounds on staff and service users should be covered with suitable dressings.
- Blood and bodily fluid spills should be dealt with immediately according to Careville Ltd's infection control policy.
- Staff should ensure that visiting health care professionals dispose of clinical waste according to Careville Ltd's infection control policy by using the yellow clinical waste bags provided.
- Service users and staff should not need routine screening for MRSA unless there is a clinical reason for such screening to be performed, (for example a wound getting worse or new sores appearing). Screening would only be requested by a G.P or by a local consultant in communicable disease control.
- If a service user's wound gets worse or does not respond to treatment staff will contact and inform the service user's G.P immediately. Staff must also notify the Locality Manager/Senior Manager.
- Service users diagnosed with MRSA will have their clothes placed in a red plastic bag provided and placed in the washing machine where it will dissolve.

Service Users Infected with MRSA

Our organisation will not discriminate against a service user colonised with MRSA and would not refuse a service to a potential client. Service users who are diagnosed with MRSA will be treated in a positive, sensitive, and caring manner equally to other service users

- When arranging care/support for a new service user, the relevant manager should always ask at the initial assessment, if there is any record that the applicant is colonized or infected with MRSA, and this should be entered into the plan of care.
- Support staff should always inform a hospital if a service user that they care for who is admitted to hospital is known to be infected with MRSA.
- Area/Locality managers should seek and follow expert infection control advice from the consultant in communicable disease control and or community infection control nurse in any case where support is required and for any service user with MRSA who has post-operative wound or a catheter.
- A service user diagnosed with MRSA should not be socially isolated. Staff will promote quality of life to all service users, and encourage them to continue normal social contact with other service users, family, and friends.
- Support staff diagnosed with eczema or psoriasis or other exfoliating skin conditions should not perform personal care on service users with MRSA. Staff who have been diagnosed with these skin conditions must inform their locality manager, who will allocate replacement staff in accordance with (Standard 11) Safe working practices.

Key Question: Does MRSA need to be reported?

MRSA is not a notifiable infection under the reporting of injuries, diseases, and dangerous occurrences regulations 2013 (RIDDOR), which oblige the organization to report the outbreak of notifiable diseases to the health and safety executive.

The presence of MRSA in a service user can only be ascertained by the laboratory investigation of swabs and any positive result will be notified to the service users G.P.

Careville Ltd's Managers and Team Leaders should liaise with all relevant members of the healthcare team to revise the service user's plan of care and to ensure that everybody involved in the care of the service user is informed.

Training

All new staff will be encouraged to read Careville Ltd's policies on infection control as part of their induction process. Staff will receive training covering basic information about infection control annually. The Clinical Director is responsible for organizing and co-ordinating training.

Key Points to Take Away

- Service users that have been diagnosed with the M.R.S.A receive the highest quality of care and are not discriminated against.
- M.R.S.A can be spread by hand from people who do not wash their hands properly between contact. It can also be become contactable in such things as bedding and clothes, and extremely vigorous cleaning and infection techniques are required to eradicate it or halt its growth.
- MRSA is not a notifiable infection under the reporting of injuries, diseases, and dangerous occurrences regulations 2013 (RIDDOR), which oblige the organisation to report the outbreak of notifiable diseases to the health and safety executive.
- All new staff will be encouraged to read Careville Ltd's policies on infection control as part of their induction process

Policy Review

A Director will review this policy at least once a year to make any updates needed.

Authorisation and Signature

This Policy is the authorised version agreed by the Directors of Careville Ltd. All employees are expected to follow this policy and failure to do so could result in disciplinary action.

Director's Signature

Director