

## **Modified Contact Precautions: Preventing MDRO Transmission and Providing for Patient Care Needs**

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**Background:** Bethesda Hospital is a Long Term Acute Care Facility serving a variety of patient populations, including ventilator weaning and patients with complex medical needs.

Many patients are admitted with a history of Multi-Drug-Resistant-Organisms (MDROs), including Methicillin Resistant Staphylococcus aureus (MRSA), or have multiple risk factors for acquisition of MDROs. Others are found through admission screening and a small number develop MDROs later.

**Challenges:** Contact Precautions are effective at preventing transmission of MDROs, but what about when the need to prevent transmission conflicts with the need to provide care and improve outcomes?

- Movement and exercise are important to improve circulation, strength and endurance. These are important for wound healing, ability to perform transfers/ADLs and vent weaning.
- It is difficult to exercise when confined to a single room, especially when many pieces of medical equipment are needed.
- Specialized therapy equipment can often only be used in the therapy department.
- Patients confined to their rooms often become depressed or lack motivation to do the necessary things to improve their condition.

### **Methods:**

Followed culturing/screening criteria for removing patients from Contact Precautions.

- Many patients remained consistently positive.
- Revolving door - many patients met the criteria, but were positive again before end of stay.

Followed “Modified Contact Precautions”

- Based on Body Substance Isolation instead of patient isolation
- Used to determine parameters for allowing patients on Contact Precautions to be out of their rooms, while still preventing transmission.

### **Outcome:**

Ventilator weaning and VAP rates are better than comparatives.

The overall incidence of healthcare-associated MRSA has decreased across the entire hospital, including respiratory and complex medical units.

### **Future:**

A multi-disciplinary team is looking at placement of isolation supplies, patient supplies and room set up using Lean Flow/5S principles.

Considering establishment of a “safe zone” at room entry where PPE is not needed in order to improve communication with patients while continuing to prevent transmission.