



Methicillin-resistant Staphylococcus aureus (MRSA) – *Frequently Asked Questions*

What is MRSA?

Staphylococcus aureus is a germ that lives on the skin and mucous membranes of healthy people. Occasionally S. aureus can cause an infection. When S. aureus develops resistance certain antibiotics, it is called methicillin-resistant Staphylococcus aureus, or MRSA.

What causes MRSA?

Colonization occurs when bacteria are present on or in the body without causing illness. MRSA can colonize the nose, skin and moist areas of the body.

Infection occurs when bacteria get past the person's normal defenses and cause disease (e.g. skin bacteria getting into the bloodstream via an intravenous catheter). Infections with MRSA may be minor, such as pimples and boils, but serious infections may also occur, such as surgical wound infections and pneumonia.

How is MRSA spread?

MRSA is spread from one person to another by contact, usually on the hands of caregivers. MRSA can be present on the caregiver's hands either from touching contaminated material excreted by the infected person or from touching articles contaminated by the skin of a person with MRSA, such as towels, sheets and wound dressings. MRSA can live on hands and objects in the environment.

What will be publicly reported?

Each quarter the hospital will post its rate and number of new cases of new MRSA bacteraemia on its website.

What is bacteraemia?

Bacteraemia is the presence of bacteria in the bloodstream and is referred to as a bloodstream infection.

What determines the rate?

The total number of new cases of MRSA bacteraemia acquired in the hospital in a quarter is divided by the total number of patient days for that quarter. Patient days are the number of days spent in a hospital for all patients. The results are multiplied by 1000. This represents the rate of hospital acquired associated MRSA bacteraemia associated with the reporting facility per 1000 patient days for that quarter (e.g. 2 cases for that quarter / 30,000 days for that quarter = 0.000006 x 1000 = 0.06 per 1000 patient days). The rates of infection will be calculated by quarter.

What will the healthcare system do with the rate information?

Hospital acquired infection rates provide one measure of patient safety and quality of care. The rate of hospital acquired MRSA bacteraemia can be used to analyze any trends of infection, sources of infection and general surveillance of MRSA bacteraemia. It can also assist hospitals to evaluate the effectiveness of infection prevention and control interventions and make further improvements based on this improvements based on this information.

Hand hygiene: everyone's responsibility

Good hand hygiene is the single-most effective way to prevent the spread of infectious diseases. Healthcare staff, physicians, volunteers, patients, and visitors ALL have a role in maintaining a healthy environment.