

Instructions for Using the MRSA Toolkit

Flip Chart – Instructions on How to Assemble

The flip chart included in the MRSA Education toolkit is intended to provide the educator with a method to talk to patients about MRSA.

The information covered in the flip chart mirrors the same information found in the brochure; however, the flip chart serves as a way for the educator to present the information to the patient and while allowing the patient to ask questions.

Assembly:

To put together the flip chart you will need a binder (for the study we used “flip chart binders” or “display binders” if you use the search terms you should be able to find a similar item). Some of these binders come with clear sheets and some do not so you may have to buy clear sheets to go in the binders.



**** Note - You have to print the flip chart on single-sided sheets of paper.** Set the flip chart up so one side is facing you. Bring the clear sheets of the binder to the side in front of you. Insert the first slide, title slide, facing away from you so when you flip it over it will be the first slide the patient will see.



Slide 1 (patient-facing)

2. Do the same thing with slide 2 and then flip to the next clear sheet.

Slide 2 (patient-facing)



What is MRSA?

- ❖ MRSA (pronounced: mersa) stands for Methicillin-Resistant *Staphylococcus Aureus*.
- ❖ It is a germ (bacteria) that cannot be killed by the antibiotics (medicines) usually used to kill germs.
- ❖ Germs like MRSA are all around us – in homes, communities, and hospitals.
- ❖ Because common antibiotics cannot kill MRSA, if you are infected with MRSA it can be very hard to treat.

3. Take slides 3 and 4 and place them back to back. Insert so slide 3 is facing you. You will notice that slide 3 is the “nurse” side to slide 2, and provides some instruction on how to speak to the patient about the slide they are viewing.

What is MRSA? (Nurse)

- ❖ Be sure to show the patient how MRSA is written, and pronounce it for them several times.
- ❖ The most important thing to note here is that MRSA is a germ that cannot be killed by common antibiotics.
- ❖ Make sure the patient understands that MRSA is everywhere, not just in the hospital.
- ❖ Make sure the patient understands that MRSA carriers are not treated, and that MRSA infections are. Infections can be difficult to treat because common antibiotics do not kill MRSA.

Slide 3 (nurse-facing)



Why it matters ...

As a Veteran with a spinal cord injury, you may be at higher risk of having or getting MRSA due to:

- having wounds or pressure ulcers
- frequent use of antibiotics
- use of catheter devices such as a urinary catheter
- spending more time in the hospital
- frequent contact with other people who might carry MRSA



Slide 4 (patient-facing)

4. Continue pairing the next two slides together (5&6, 6&7, etc) you should notice that when you flip to the next page that the slide that the patient is viewing matches the slide that you are viewing.

Why it matters (Nurses)

Explain to the patient that, as a person with spinal cord injury, they may be at higher risk for having or getting MRSA.

The reasons for this include:

- having wounds or pressure ulcers
- frequent use of antibiotics
- use of catheter devices such as a urinary catheter
- spending more time in the hospital
- frequent contact with other people who might carry MRSA

Allow the patient to ask questions.

Slide 5 (nurse-facing)

If you test positive for MRSA you ...

- have a greater chance of getting sick (infected) from MRSA.
- may pass MRSA on to other patients or your provider.
- may pass MRSA on to your family, friends, or loved ones.



Picture of MRSA Infections on the skin.



Slide 6 (patient-facing)

If you test positive for MRSA you... (Nurse)

Explain to the patient that just because they are MRSA positive does not mean they will get sick or get an infection. Being a MRSA carrier does not mean you will receive treatment for MRSA, but it does mean that you:

- have a greater chance of getting sick with MRSA.
- may pass MRSA on to other patients or your provider.
- may pass MRSA on to your family, friends, or loved ones.

7

Slide 7 (nurse-facing)



What can you do?

1. Know your MRSA status! (Ask your provider for the results **every time** you are tested.)
2. Always clean all of your personal equipment.
3. Always clean your hands, if you can't clean them on your own, ask for help!
4. Ask your provider, family, and other visitors to clean their hands too!

When do you wash your hands?



Slide 8 (patient-facing)

What can you do? (Nurse)

For this slide, it is important to emphasize the 4 main points. If the veteran also remembers some of the details, that is great!

Read details underneath each bullet.

1. Know your MRSA status! (Ask your provider for the results of your test **every time** you are tested.)
2. Always clean all of your personal equipment
 - Wheelchairs
 - Adaptive equipment
 - Gloves or Wrist guards
 - Ask for help if you cannot clean these items on your own!
3. Always clean your hands, if you can't clean them on your own, ask for help!
 - Before and after eating
 - After sneezing
 - After bowel or bladder care
 - After group activities like physical therapy and games
 - Before and after you leave any hospital room!
4. Ask your provider, family, and other visitors to clean their hands too!

9

Slide 9 (nurse-facing)

Cleaning your hands makes a BIG difference!

MRSA on the hands before hand hygiene is gone after hand hygiene



Donskey, C.J and Eckstein, B.C. *The Hands Give it Away*. N Eng J Med; 360, 3: e3.

10

Slide 10 (patient-facing)

Cleaning your hands makes a BIG difference! (Nurse)

Explain to the patient that the image on the left shows MRSA on the hands of a provider.

The provider then washed their hands ...

The second image shows that after the provider washed her hands, the MRSA that was on her hands was no longer there!

11

Slide 11 (nurse-facing)

Things to Remember When Washing Hands

Alcohol hand sanitizer OR soap and water can be used to clean your hands.

- Use soap and water if your hands are visibly soiled.



When washing your hands be sure to:



- Rub hands together vigorously long enough to sing "Happy Birthday" (or about 15 seconds).



- Rinse hands and wrists.
- When drying hands, be sure to dry from fingertips down to your wrists.



- Use a paper towel to turn off the faucet and to open the door to leave the restroom.

12

Slide 12 (patient-facing)

Things to Remember When Washing Hands – (Nurse)

Alcohol hand sanitizer OR soap and water can be used to clean your hands.

- Use soap and water if your hands are visibly soiled.

When washing your hands be sure to:

- Rub hands together vigorously long enough to sing “Happy Birthday” (or about 15 seconds)
- Rinse hands and wrists.
- When drying hands, be sure to dry from fingertips down to your wrists.
- Use a paper towel to turn off the faucet and to open the door to leave the restroom.

13

Slide 13 (Final Slide – nurse -facing)

**** Note that final slide is the 13th slide and it will not have a slide to pair with it. This slide should be inserted facing you.**

When using the flip chart:

1. The slides intended for the nurse are labeled “nurse” and the others are intended for the patient.
2. The slides labeled “nurse” are intended to provide the educator with talking points for each slide they are showing the patient, and indicate points at which they should ask the patient if they have any questions.
3. **The brochure** should be given to patients after the education to take home.

Patient Aptitude Test

The patient aptitude test is used to make sure the patient leaves the educational session with the 5 most important points in the brochure.

The patient should be able to recite the main points listed for each of the 5 sections (i.e. What is MRSA? – MRSA is resistant to antibiotics or medicine & MRSA is a bug, germ, or bacteria.)

If the patient is unable to recite these points, the educator should repeat these points to the patient, and ask them to repeat them back to them.

Once the patient is able to demonstrate recall for each of the main points, the patient should receive a check in the “check if answered column”. The educator should also record the number of times they had to repeat the information, and any comments they feel are relevant about the exchange.