

**Patients' Experience of MRSA Screening ... What Can We Learn?**  
**Dr. Carol Pellowe, King's College, London**  
**A Webber Training Teleclass**



**Patients' Experience of MRSA Screening ... What Can We Learn?**

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**Background**

- MRSA screening mandatory since 2009
- Patients' perceptions, awareness and cooperation implicit
- Pathfinder 2011 found poor communication and misinformation between staff and patients

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**Background**

- Colonisation 2% n=28,892 (range 0.8-6.6%)
- 18% isolates heterogenous community
- Anecdotal evidence of refusals to be screened and non adherence to decolonisation protocol

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**Study aim**

To learn about patients' experiences of :

- the MRSA screening process,
- being identified as MRSA negative or positive and
- the MRSA decolonisation process,

with a view to designing a better patient experience

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**The study**

- DH PRP funded
- IPC teams at GSTFT and Lewisham
- 2 patient reps on study team
- July – December 2012
- Report April 2013
- Patient interviews recorded
- Satisfaction survey questionnaire

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**The patient interviews**

- MRSA negative
- MRSA positive newly diagnosed
- MRSA history

Local PI reviewed MRSA reports and made first contact

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**The patients**

- 20 interviews 12 women 8 men
- Age range 25 – 85 years
- Average 55.1 years
- 4 negative
- 9 new positive screens
- 7 history of MRSA, 4 positive this time

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**The patients**

- 12 emergency admissions
- 6 elective admissions
- 2 transferred from another hospital

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**Findings**

**Most knew about the screen**

- “No I knew that I'd get screened.... I don't mind” (G8)
- “I was asked by the attending nurse to take a swab and I was informed it was for MRSA” (G3)
- “This is the first time I've been properly swabbed and screened” (G4)

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**Findings**

**Information leaflets only used at Lewisham**

*“They give you leaflets about what happens when you are coming into hospital. And in it it does say that you will be screened for MRSA” (L2)*

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**Findings**

**Negatives not routinely told the result**

“No I had to ask...yeah tell me things in advance let me know the process. And you know to give me reassurance. That you'll give me the results as soon as they come back, you know that there is nothing to worry about. Just to reassure me. (G1)

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**Findings**

**MRSA Unclear information**

- “Very scary really. I don't think they really explain things to you, cos I only had it in my nose but when they said that was positive but they didn't tell me that at the start with, so it was a bit worrying when they say you've got MRSA” (G2)
- Eh the doctor erm tell me, tell me about a little infection in my blood. I don't know about the illness or, or any other things (L9)

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**Findings Decolonisation**

*No that was very easy. They explained for me how, how it should be used, the shower gel and the cream for my nose (L7)*

*The hibsicrub is quite simple and straightforward. But the the ointment, the way the instructions, they are a little bit confusing... at first because at first I was using the actual tube but later I realise they wanted you to use the er index finger to put it on. Er but I think that perhaps using like a gauze would be much better. (L6)*

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**Findings-**

● **Mixed views on Isolation**

“Really I can't complain much because this is a fantastic room. I've got so nice view and I've got privacy when my family comes. I've got my own bathroom toilet. I've got this basin here and I feel very hot so I've got my little fan from home.” (G10)

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**Findings-**

“I does tend to get boring, being alone all the time... cos all I can see is people walking past.....No it's mainly on the bed, see people walking past (and nobody pops in?) no or only if I ring my bell” (G8)

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**Findings-**

**Isolation in a bay**

“ I've got to put these things on, cos this is a designated corner, area and that don't help. Well not one of these folk has spoken to me since I've been in here you know...But of course when I come and sat in here with all that red (*points to apron and gloves*), no one looks at me anymore. It's a bit bad really to me.” (G7)

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**Interim thoughts**

- **Patients accept and approve of screening BUT** problems with
- Communication
- Information
- Isolation

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**Satisfaction Survey**

- November – December
- Target 300
- Norovirus season
- GSTFT 273, Lewisham 140
- Patients completed the questionnaire with free text at end

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**Respondents**

- 70% over 45 years old
- 35% over 65 years old
- 60% white 14.8% black
- Lewisham 51.4% emergency
- GSTFT 51.6% elective

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**Knowledge of MRSA**

- 42.6% Fair understanding
- 64.8% of these had been hospitalised before
- 20.5% Poor knowledge
- 34 had been MRSA +ve in the past

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**Screening**

- 339 (82.15%) agreed to be screened
- 6 refused
- 56 no offer
- >90% elective agreed
- 79% emergency
- 56.7% screened on admission
- 40.5% in the last week

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**Reasons for Acceptance**

- 98.3% felt it was the right thing to do
- 89% wanted to know if they had MRSA
- 20 ( 9.3%) felt pressurised into screening
- *"I think it is one procedure that needs to be carried out in hospital environment. As you come into contact with lots of other people. It is in the best interests of myself and others."* (M 77)

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**Pressurised into test**

- Non white patients were:
- more likely to feel pressurised (p 0.035)
  - Less likely to believe it benefited them (p 0.011)
  - Older patients less likely to feel pressurised or that they could not refuse

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**Information on screening**

- Leaflets available at both trusts
  - 57.9% reported receiving no information
  - 15.8% received a leaflet
  - 47.1% no opportunity to ask questions
- "More information would be good, to see a leaflet. I don't know what MRSA stands for, just a hospital illness."* (F51)

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**Screening procedure**

- GSTFT 45% shared between HCW & patient
- Lewisham 67.4% taken by HCW
- >95% accurately recalled where swab were taken from
- >90% did not find it painful, embarrassing or uncomfortable

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**MRSA result**

- **59% had not been told result and wanted to know**
  - 16.8% did not want to know
  - 15.1% had been given their result
  - 8 MRSA positive
- "What is the purpose of doing MRSA for patient without let them know the result?" (F)*

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**Patients' opinions on screening**

- 98.3% MRSA screening right policy
- 96.2% felt patients benefited
- 94.6% screening helps reduce infections
- Women worried more than men about contracting MRSA in hospital (p 0.027)
- Black patients more likely to feel positive people could be discriminated against (p 0.001)

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**Patients' opinions on screening**

- Black patients and those with little or poor knowledge more likely to agree that screening can be upsetting (p 0.005, 0.002)
- 16-29 year old more likely to hold negative views
- 87.4% prefer own room if positive

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**Patients' opinions on screening**

*"I think all people should be screened if they are coming into hospital. If they refuse then their admission should be refused." (M77)*

*"I think NHS staff would not discriminate against patients with MRSA but other patients might do." (M57)*

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**Positive MRSA patients**

- 7 men 1 woman
- 4 elective
- 5 no opportunity to ask questions
- Those treated at home least problems
- In hospital had confidence in staff to manage MRSA and consistent approach

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**Issues this raises**

- Patients approve and are supportive of screening
- Knowledge associated with previous admissions, refusal with poor knowledge
- Many did not recall being screened
- Younger and Black and Asian patients more likely to feel pressurised into screening

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**Issues this raises**

- Dearth of information despite leaflets, or opportunity to ask questions
- Need more than a leaflet
- Target young and ethnic groups
- Are patient swabs taken properly?
- Is screening mundane to staff?

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**Limitations**

- 1 geographical area
- 1 Trust short
- Survey target not met
- Questionnaire elements not completed: too complicated or patients too sick?

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**What now?**

- Rewriting MRSA information sheet to include Negative result
- Make it consistent across Trusts
- MRSA treatment leaflet
- In service on decolonisation
- Presentations within trusts and national conferences including SURF


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**Thanks to:**  
**The study team, the patients,  
 ward staff**

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