

Monthly Team Checkup Tool for MRSA Prevention

ICU & Non-ICU

Please answer the following questions related to methicillin-resistant *Staphylococcus aureus* (MRSA) prevention with respect to your unit for the month. If not applicable at this time, select N/A as your response.

Question 1 [Intensive Care Unit (ICU) Only]. In the past month, what percentage of all patients received daily decolonization with chlorhexidine gluconate (CHG) treatments?

- Less than 25 percent
- 25 to 50 percent
- 51 to 75 percent
- Greater than 75 percent
- N/A

Question 1 [Non-ICU Only]. In the past month, what percentage of high-risk patients with central lines or lumbar drains received daily decolonization with chlorhexidine gluconate (CHG) treatments?

- Less than 25 percent
- 25 to 50 percent
- 51 to 75 percent
- Greater than 75 percent
- N/A

Question 2 [ICU Only]. In the past month, what percentage of all patients received 5 days of MRSA intranasal decolonization treatment?

- Less than 25 percent
- 25 to 50 percent
- 51 to 75 percent
- Greater than 75 percent
- N/A

Question 2 [Non-ICU Only]. In the past month, what percentage of high-risk patients with central lines or lumbar drains received 5 days of MRSA intranasal decolonization treatment?

- Less than 25 percent
- 25 to 50 percent
- 51 to 75 percent
- Greater than 75 percent
- N/A

Question 3. In the past month, what percentage of all patients known to have MRSA colonization or infection were placed on contact isolation precautions?

- Less than 25 percent
- 25 to 50 percent
- 51 to 75 percent
- Greater than 75 percent
- N/A

Question 4. In the past month, what percentage of patients who had central lines inserted received the elements of the CLABSI prevention central-line insertion bundle?

- Less than 25 percent
- 25 to 50 percent
- 51 to 75 percent
- Greater than 75 percent
- N/A

Question 5. In the past month, what percentage of patients who had central lines inserted received the elements of the CLABSI prevention central line maintenance bundle?

- Less than 25 percent
- 25 to 50 percent
- 51 to 75 percent
- Greater than 75 percent
- N/A

Question 6. In the past month, what percentage of high-touch surfaces in the patient care rooms were adequately cleaned and disinfected both daily and for terminal cleaning? (Estimate based on your standard assessment of cleaning procedures.)

- Less than 25 percent
- 25 to 50 percent
- 51 to 75 percent
- Greater than 75 percent
- N/A

Question 7. In the past month, what was the percentage of hand hygiene adherence among healthcare personnel on the unit? (Estimate based on your standard assessment of hand hygiene.)

- Less than 25 percent
- 25 to 50 percent
- 51 to 75 percent
- Greater than 75 percent
- N/A

Question 8. In the past month, how often did your team participate in CUSP meetings? [IF “THE CUSP TEAM DID NOT MEET” IS SELECTED, SKIP TO QUESTION 10.]

- Once
- Twice
- The Comprehensive Unit-based Safety Program (CUSP) team did not meet
- Other:

Question 9. In the past month, in which of the following CUSP activities did your team participate? Check all that apply.

- Identifying how patients may be harmed in your unit (e.g., Staff Safety Assessment)
- Senior executive walk rounds
- A morning briefing or huddle to discuss the patients
- Multidisciplinary rounding stating specific goals for the patient that day (e.g., Daily Goals)
- Learning from defects or adverse events
- N/A

Question 10. In the past month, which of the following methods did your CUSP team members employ to disseminate information and educate your unit's personnel regarding MRSA prevention evidence-based practices? Check all that apply.

- Internal seminar
- Infection Prevention visit/talk/report
- MRSA Project webinar
- In-services/demonstrations
- Developed a new written policy
- Posted evidence-based guidance
- Other:

Question 11. In the past month, how many times did the AHRQ Safety Program for MRSA Prevention team meet or review your unit's MRSA data with your unit's senior executive or another member of senior leadership (C-suite)?

- Once.
- Twice.
- More than twice.
- The team did not meet or review MRSA data with leadership this month.
- The unit does not currently have a senior executive for the MRSA Prevention Program.

Question 12. In the past month, did anyone share the MRSA prevention data report (Infection Prevention report) with your unit's CUSP team?

- Yes
- No

Question 13. In the past month, how many times did your team share your unit's MRSA prevention data report broadly with the unit's personnel? [IF THE REPORT WAS NOT SHARED, SKIP TO QUESTION 15.]

- Once.
- Twice.
- More than twice.
- Continuous sharing of data (e.g., bulletin boards, online portals).
- The MRSA prevention data report was not shared with the unit's personnel.

Question 14. How were the data provided to your unit’s personnel? Check all that apply.

- Verbal report
- Poster
- Written report
- Continuous sharing of data (e.g., bulletin boards, online portals)
- Other:

Question 15. In the past month, how many people permanently left the CUSP team, unit, or organization?

Question 16. In the past month, how many people joined the CUSP team, unit, or organization?

Question 17. In the past month, has a disruptive event distracted unit personnel from the MRSA Prevention work (e.g., emergency response, reorganization, sentinel event, accreditation activities, loss of key personnel)? [IF NO, SKIP TO QUESTION 19.]

- Yes
- No

Question 18. What event distracted unit personnel from the MRSA Prevention work (e.g., emergency response, reorganization, sentinel event, accreditation activities, loss of key personnel)?

Question 19. In the past month, did any of the following significantly slow your team's progress? Check all that apply.

- Insufficient knowledge of evidence-supporting interventions
- Insufficient team member consensus regarding goals
- Not enough time to complete all the tasks for this project
- Insufficient quality improvement skills or resources
- Not enough buy-in from physician staff in your area
- Not enough buy-in from nursing staff in your area
- Not enough buy-in from other personnel in your area
- Burden of data collection
- Insufficient leadership support
- Other: