PLEASE NOTE: Legislative Information *cannot* perform research, provide legal advice, or interpret Maine law. For legal assistance, please contact a qualified attorney.

An Act Regarding the Prevention and Reporting of Methicillin-resistant Staphylococcus Aureus

Be it enacted by the People of the State of Maine as follows:

Sec. 1. 22 MRSA c. 1684-A is enacted to read:

CHAPTER 1684-A

PREVENTION OF MRSA INFECTION

§ 8761. Prevention of virulent infection

There is established under this chapter a system for preventing MRSA infections in order to improve the health of citizens of the State and the quality of health care.

§ 8762. Definitions

As used in this chapter, unless the context otherwise indicates, the following terms have the following meanings.

- 1. Center. "Center" means the Maine Center for Disease Control and Prevention.
- **2. Cohorted.** "Cohorted" means the placement of 2 patients with positive MRSA cultures in a room together.
- **3. Decolonization.** "Decolonization" means eliminating MRSA colonization from the naris or nose and from the body.
- **4. Exposure to MRSA.** "Exposure to MRSA" means close personal contact between a person who is infected or colonized with MRSA and a person who is not infected or colonized with MRSA.
- **5. Hospital.** "Hospital" means a hospital licensed under chapter 405 or a state institution as defined in Title 34-B, section 1001, subsection 8.
- **6. Isolation.** "Isolation" means the placement of a patient who is infected with MRSA in a separate private room.
- 7. MRSA. "MRSA" means methicillin-resistant Staphylococcus aureus, a highly virulent drugresistant strain of the Staphylococcus bacterium.
- **8.** MRSA colonization. "MRSA colonization" means that the patient has tested positive, through a culture of a body part or fluid, for the presence of the MRSA infection, does not exhibit symptoms of MRSA infection, but is able to spread MRSA infection from one body part to another or from the patient's body to the body of another person.

- **9.** MRSA infection. "MRSA infection" means an active disease caused by MRSA with symptoms of infection such as fever, swelling, redness, drainage from a wound, cough and malaise.
 - 10. Nursing facility. "Nursing facility" means a nursing facility licensed under chapter 405.
- 11. Patient. "Patient" means a person receiving care or treatment on an inpatient basis in a hospital.

§ 8763. Screening of patients; recording results

A hospital that admits a patient for care or treatment shall administer a MRSA screening test to the patient upon admission. Follow-up screening cultures must be done weekly or on transfer to another department and on discharge of the patient in order to identify all colonized and infected patients so that they are cared for in isolation or cohorted to minimize spread of MRSA to other patients. The screening test must test for MRSA through a nasal culture and through a culture of all open wounds or sores and other body parts, as medically indicated. The results of the MRSA screening test must be recorded in the patient's record. If paper records are used in the hospital, a red form must be used for positive MRSA-cultured patients and a green form for negative-cultured patients. If electronic records are used in the hospital, the positive cultures must be coded in the hospital computer system in a manner that is easily recognizable to hospital staff in all departments.

§ 8764. Reporting to and by the center

The center shall establish a system for accepting information on patient MRSA colonization and MRSA infection filed under the requirements of this chapter and for dissemination of information to the public.

- 1. Reporting requirements. All hospitals shall report to the center information regarding all persons for whom it has provided services, health care or treatment whom the hospitals know to have been colonized or infected with MRSA. The report must indicate whether the patient was colonized or infected with MRSA prior to arrival at the hospital or during hospitalization. The report must include the site on the body that tested positive for MRSA, whether the patient tested positive at the time of admission to the hospital or after admission, and deaths because of or related to MRSA.
- 2. Dissemination of information. The center shall disseminate information to the public about MRSA infection and deaths resulting from or related to MRSA infection. Information released to the public must distinguish between positive MRSA cultures on admission and positive cultures during hospitalization and must identify the hospital that reported the information. The center shall organize MRSA-related information submitted by hospitals under this section and shall post the information on the center's publicly accessible website.

§ 8765. Protective measures

All hospitals shall implement protective measures to minimize exposure to MRSA. The protective measures must apply to the care and treatment of all patients.

- 1. <u>Isolation</u>; <u>cohorting</u>; <u>decolonization</u>. The procedures and protective measures under this section must include procedures to prevent exposure to MRSA infection.
 - A. A patient who tests positive for MRSA colonization or MRSA infection must be placed in isolation or, if a separate room is not available, may be cohorted with another patient known to have a positive culture for MRSA.
 - B. A patient who is admitted with a fever of unknown origin must be placed in a separate room until the cause of infection is known.
 - C. The hospital shall consider decolonization of all patients who test positive for MRSA. If the hospital determines decolonization is in order, the hospital shall institute decolonization with nasal mupirocin 3 times a day for 5 days and 5 daily baths with antiseptic detergent unless medically contraindicated or precluded by time constraints.
- **2. Environmental precautions.** The procedures and protective measures under this section must include procedures to protect the patient, the staff and the health of the environment in the hospital. The hospital shall monitor staff and patient care to encourage compliance with the procedures and protective measures. The procedures must include, as appropriate to the situation:
 - A. Hand washing before entering and after exiting the room of a patient who has been exposed to or colonized or infected with MRSA and before and after patient care, the use of gloves and gowns and other protective gear as appropriate, frequent cleaning and disinfecting of all medical equipment used on the patient and daily cleaning of all parts of the patient room touched by the patient and staff, including over bed tables, bed rails, remote controls and telephones;
 - B. The wearing of a mask if the patient infected with MRSA or the health care worker has respiratory symptoms, the wearing of gloves by any staff known to be ill, not encouraging an ill health care worker to work and not offering direct-care assignments to ill health care workers;
 - C. If protective gear becomes soiled with body fluids during care of a patient infected with MRSA, staff must wash their hands and change their protective gear before performing any new procedure such as changing a catheter, inserting intravenous lines or changing dressings;
 - <u>D</u>. When leaving the room of a patient infected with MRSA and between care of 2 patients cohorted in the same room, staff must wash their hands and remove and replace their protective gear and dispose of their used protective gear properly;
 - E. If a patient infected with MRSA is cohorted with another patient, the precautions listed in paragraphs A to C must be taken as appropriate to patient care;
 - F. Encouraging patients infected with MRSA to wash their hands frequently;

- G. Retaining in the room of a patient who is colonized or infected with MRSA for the duration of the patient's stay, and not using on other patients, all individual blood pressure cuffs, medical instruments, thermometers, stethoscopes, tourniquets, intravenous pumps and other medical devices used on the patient; and
- H. Upon the departure of a patient infected with MRSA from the patient's room, the room must be disinfected with appropriate cleansers using a method of cleaning that includes soaking surfaces with disinfectant for a period of time and wiping clean with clean cloths.

§ 8766. Notification to staff and patients

A hospital shall provide to staff and patients information about MRSA, MRSA transmission, MRSA colonization, exposure to MRSA and control of MRSA infection including situations of close contact. Standard information about symptoms of MRSA infection must be given. For the purposes of this section, "close contact" includes circumstances in which the patient is cared for by a hospital caregiver who is infected with MRSA or shares a room with another patient who is infected with MRSA.

- 1. Staff. The hospital shall provide information under this section to all staff of the hospital as part of the training for new employees and continuing health care training on infectious disease and the prevention of disease.
- 2. Patients. The hospital shall provide information under this section to all patients whose close contact with MRSA or MRSA colonization or MRSA infection the hospital learns of while the patient is receiving health care or treatment from the hospital.
- 3. Former patients. The hospital shall provide information under this section to all recently discharged patients whose close contact with MRSA, exposure to MRSA or MRSA infection the hospital learns of after the patient has been discharged.

§ 8767. Transfer and discharge

A hospital or nursing facility may not refuse to admit, readmit or provide treatment or care for a person who has been colonized or infected with MRSA on the basis of the person's MRSA status. When a patient who is known to have been colonized or infected with MRSA is discharged to another hospital or to a nursing facility, a red form indicating exposure to MRSA or MRSA infection, similar to the form filed in the patient's record in the hospital under section 8763, must be transferred with the patient.

§ 8768. Rulemaking

The department shall adopt rules to implement this chapter that reflect the most recent best practices in health care in accordance with nationally recognized standards for reducing antibiotic-resistant infections. Rules adopted pursuant to this section are major substantive rules as defined in Title 5, chapter 375, subchapter 2 A.

SUMMARY

HP0713, LD 1038, item 1, 124th Maine State Legislature An Act Regarding the Prevention and Reporting of Methicillin-resistant Staphylococcus Aureus

This bill establishes a system for preventing methicillin-resistant Staphylococcus aureus, or MRSA, infections in order to improve the health of Maine citizens and the quality of health care. It establishes a system for testing hospital patients for MRSA upon admission and periodically during admission. It requires hospitals to establish procedures and protective measures to minimize exposure to MRSA infection, including procedures with regard to wearing a mask, the use of gloves and gowns, hand washing, washing and disinfecting portions of the patient's room and assignment of staff known to be ill. It requires reporting of positive MRSA test results, whether the patient was infected or colonized prior to admission to the hospital and MRSA deaths. It requires the Department of Health and Human Services, Maine Center for Disease Control and Prevention to disseminate information on MRSA exposure and infection and information reported by hospitals. It requires hospitals to provide information regarding MRSA to staff, patients and former patients. The bill prohibits hospitals and nursing facilities from refusing to admit, readmit or provide treatment or care for a person who has been infected with MRSA on the basis of that person's MRSA status. It directs the Department of Health and Human Services to adopt rules to implement the law.