



FEATURE

Should I Be Worried?

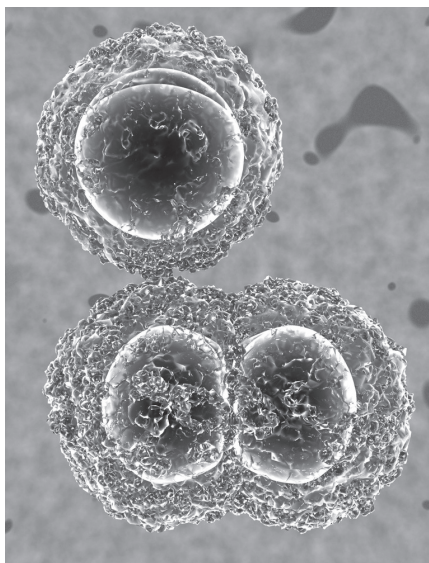
By Pat Weaver

MRSA and other infectious exposures on my bus.

One of your drivers just left your office after telling you he suspects one of his passengers has a “dangerous infection,” in his words. He overheard a conversation on the bus between two passengers, one of whom had just come from the doctor’s office. He heard them say “flesh-eating bacteria” and saw a big bandage on the passenger’s arm. Your driver is worried and wants you to do something about it. He watched a TV special on “super-bugs”—bacteria that can’t be killed with antibiotics, and doesn’t want to take any chances—for himself or for other passengers on the bus.

What now? How should you respond to your driver? Is there a policy that covers this? This article will define MRSA and provide some facts about any

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potential danger to your drivers or passengers, and what precautions you can take to minimize risk.

What is MRSA? Is it really a flesh-eating bacteria?

First of all, MRSA is not the same as necrotizing fasciitis (flesh eating disease). Most MRSA cases don't lead to contracting the flesh-eating disease, although it is possible in rare cases, according to Lisa Young of the Denver Health Medical Center (Young and Price, 2008).

MRSA is an abbreviation for Methicillin-Resistant Staphylococcus Aureus." MRSA is a type of Staph infection resistant to some of the antibiotics often used to treat Staph infection, but there are still antibiotics available to kill MRSA bacteria, according to the Center for Disease Control (CDC).

A person most likely to get MRSA would be someone in a hospital or nursing home who has other conditions making him or her sick, and is being, or has been, treated with antibiotics. Such "health care-associated" MRSA infections are more commonly seen as surgical-wound infections; however, urinary tract infections, bloodstream infections and pneumonia have been documented. MRSA is also common in general community settings, known as "community-associated" MRSA. For people who are generally healthy and who have not been in a hospital or a nursing home, community-associated MRSA infections are usually skin infections.

People who have MRSA bacteria on their skin or who are infected may be able to spread it to other people.

Are we likely to encounter someone with MRSA on our vehicles?

According to the CDC, MRSA in the community is widespread and anyone can be exposed. "A certain percentage of the population has the [MRSA] bacteria present in their system, but it doesn't necessarily cause disease," according to Joseph Scaletta, Director of the Healthcare-Associated Infections Program at the Kansas Department of Health and Environment (KDHE). The reality is that the germs can be encountered anywhere, but there are factors that are most associated with the spread of MRSA skin infections and there are steps you can take as an agency and as individuals to minimize risk.

Risk factors associated with the spread of MRSA are:

- close skin-to-skin contact,
- openings in the skin such as cuts or abrasions,
- contaminated items and surfaces,
- crowded living conditions,
- poor hygiene,
- Participating in some sports, including football, wrestling and fencing.

How will I know if someone is infected ?

Staph bacteria, including MRSA, can cause a skin infection that may look like a pimple or boil and can be red, swollen, painful, or have pus or other drainage. However, the reality is that you don't know whether a person on one of your vehicles has a MRSA infection, or any other kind of infectious disease for that matter, any more than you know if the person who just passed their grocery cart to you in the grocery store or who sits next to you at church has one.

A policy of standard precautions throughout your workplace is a tool available to you and your staff, and should be standard operating procedure in your agency to protect your employees. Universal precautions generally include frequent hand washing, avoiding hand-to-face contact, avoiding contaminated areas, handling trash carefully, maintaining barrier protection between you and the contamination, and using Personal Protective Equipment (PPE) such as gloves, when appropriate.

What should we do? Should we transport someone with MRSA?

In its fact sheet "MRSA and the Workplace," the Center for Disease Control recommends that "exclusion from work should be reserved for those with wound drainage that cannot be covered and contained with a clean, dry bandage and for those who cannot maintain good hygiene practices." Consistent with this standard, some transit agencies have adopted policies and Rider Rules of Conduct that require open wounds to be covered (see sidebar on next page for sample policies).

What other precautions should we have in place?

Good hygiene practices by employees and throughout your facilities is essential. Employees should be encouraged to cover any breaks in their skin and to wash their hands frequently with soap and water (or an alcohol-based hand rub for use on the bus). Make sure the vehicles and your facility are equipped with disinfecting surface cleaner and disposable towels.

Disinfectants effective against Staph are most likely effective against MRSA and are readily available from grocery stores. Check the label on the back of the container to be sure. For more information on cleaning, read the CDC resource listed in the sidebar below.

The **Center for Disease Control** (CDC) also has a good description of standard precautions:

<http://www.cdc.gov/HAI/settings/outpatient/outpatient-care-gl-standared-precautions.html>

The **Red Cross** produces a useful fact sheet on preventing the spread of bloodborne pathogens:

http://www.redcross.org/images/MEDIA_CustomProductCatalog/m4240177_PreventingSpreadBloodbornePathogensFactandSkill.pdf



Vehicles should be equipped with bloodborne pathogen kits, and employees should be trained on standard precautions, including proper disposal of clean-up materials. Talk to your local health department or American Red Cross for available training. Encourage employees and passengers alike to avoid touching personal items that may have come into contact with infected skin, such as used bandages.

So, back to your driver who reported the suspected “dangerous infection.” Reassure that driver that you have his or her best interests in mind, along with the best interests of that passenger and other passengers. Find out as much detail as you can and document the information on an Incident Report. Ask for and document specific details from the driver to determine whether there was a likely exposure.

“Drivers are more likely to come in contact with environmental surfaces, which may be considered low risk if standard precautions are followed,” says Scaletta. If there is a question, follow your policies regarding follow-up with a health care professional.

Does your agency have a policy in place regarding requirements with transporting passengers with open sores and wounds, and are drivers and passengers aware of the policy? Make sure that the passenger or caretaker is aware

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Sample Policies Associated with Open Sores and Wounds

This policy is posted on the website at Valley Metro, Phoenix, Arizona. It is consistent with universal precautions, without assumption of the presence of a particular disease or condition:

Passengers with Open Sores and Wounds

When using the bus, passengers with disabilities who have health-related open sores and wounds need to ensure that all sores and wounds are properly covered.

Passengers with disabilities who have open sores and wounds shall be transported unless their medical condition presents a direct threat to other passengers. Any passenger, including passengers with disabilities, may be refused access to public transportation if visible body fluid leakage or dripping is occurring while at the bus stop. The passenger may also be requested to exit the bus if leakage or dripping occurs after they have boarded. Such leakage or dripping can create a biohazard to other passengers on the bus.

The existence of wounds and sores may limit securement on all securement points. The operator shall secure as many points as possible and transport the passenger.

Source: <http://www.valleymetro.org/accessibility>, accessed November 28, 2012.

Other transit systems post a simple policy on their Rider Rules of Conduct:

“Riders are asked to follow these rules of conduct to ensure the safety and comfort of all riders and the operator: . . . No discharge of bodily fluids or open wounds.”

Source: Metro, McAllen, Texas. <http://www.mcallen.net/metro/services/ada.aspx>, accessed November 28, 2012

Sources

- FAQs about “MRSA”, (Methicillin-Resistant Staphylococcus aureus). Center for Disease Control, accessed November 26, 2012. http://www.cdc.gov/mrsa/pdf/SHEA-mrsa_tagged.pdf
- Infectious Disease Epidemiology and Response. Kansas Department of Health and Environment. <http://www.kdheks.gov/epi/index.html>, accessed November 30, 2012.
- Interview with Joseph M. Scaletta, MPH, RN, CIC; Director, KDHE Healthcare-Associated Infections Program. Kansas Department of Health and Environment, Bureau of Epidemiology and Public Health Informatics. December 14, 2012.
- MRSA and the Workplace. Center for Disease Control, accessed November 26, 2012. <http://www.cdc.gov/niosh/topics/mrsa/>
- Lisa M. Young and Connie S. Price. Community-Acquired Methicillin-Resistant Staphylococcus aureus Emerging as an Important Cause of Necrotizing Fasciitis. *Surgical Infections*. August 2008, 9(4): 469-474. Doi:10.1089/sur.2007.52.

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that a ride will be denied if open sores and wounds are not covered properly. Do you have bloodborne pathogen kits on board? Are your drivers and others with a potential for exposure trained on standard precautions?

We've listed some additional sources of information on MRSA on page 15. Be sure to give them a look. Another good resource for Kansas transit agencies for any questions you might have is the Kansas Department of Health and

Environment (KDHE). To contact Joseph Scaletta at KDHE, call (785) 296-4090 or email jscaletta@kdheks.gov. Your county health department also can be a useful resource to you and can provide information on the availability of bloodborne pathogen training and other relevant training.