



## Prevention/Control Checklist for Schools – Staph Infections

For the control and prevention of *Staphylococcal infections*, including community acquired-Methicillin-Resistant *Staphylococcus aureus* (CA-MRSA) in the school setting.

### General cleaning strategies:

- Routinely clean environmental surfaces with an all-purpose cleaner, using the product in accordance with the manufacturer's instructions.
- Ensure that high-touch surfaces (e.g., doorknobs, light switches, drinking fountains, faucet handles, and surfaces in and around toilets) are cleaned on a daily basis.
- Promptly clean and decontaminate body fluid contamination of surfaces using either a 1:10 dilution of household chlorine bleach (1 part bleach in 9 parts water, prepared fresh on a daily basis) or an EPA-approved disinfectant.

### Strategies for cleaning sport/athletic-related equipment and items:

- Clean items used in sporting and/or athletic-related activities (e.g., wrestling mats) after each use with an all-purpose cleaner, using the product in accordance with the manufacturer's instructions.
- Promptly clean and decontaminate items that have visible soiling with blood or other body fluids using either a 1:10 dilution of household chlorine bleach (1 part bleach in 9 parts water, prepared fresh on a daily basis) or an EPA-approved disinfectant.

### Additional measures for preventing *Staphylococcal* skin infections:

- Advise students, faculty, and staff regarding the importance of hand hygiene to reduce the spread of infectious diseases.
- Encourage good hygiene, including showering and washing with soap after all practices and competitions.
- Advise students of the importance of avoiding contact with drainage from skin lesions of other players
- Ensure availability of adequate soap and hot running water for hand washing in all bathrooms.
- Provide individual-use towels for use during all practices and competitions. Wash after one use.
- Don't store wet, dirty clothing in lockers.
- Discourage sharing of personal items (e.g. deodorant, razors, towels, water bottles).
- Keep cuts and abrasions clean and covered with clean, dry bandages until healed.

- ❑ Do not allow sports/athletic participants with draining wounds or infections to participate in practices or games until the wound has stopped draining. Permit the sports/athletic participant to participate in non-contact activities if wounds are covered and the infected person observes good hygienic practices (e.g. hand washing, showering, and laundering clothes).
- ❑ Train sports/athletic participants and coaches in recognition of wounds that are potentially infected.
- ❑ Encourage sports/athletic participants to report wounds and skin lesions to coaches and encourage coaches to assess participants regularly for wounds and skin lesions.
- ❑ Ensure that practice uniforms and PE uniforms are laundered on a weekly basis, or more frequently if feasible.
- ❑ Encourage sports/athletic participants who have non-healing, draining skin lesions and wounds to seek medical attention.
- ❑ Determine if household or other close contacts of a student with skin lesions have infections compatible with MRSA. If so, encourage them to seek medical attention.
- ❑ Students and their parents, faculty and staff should be provided information about what MRSA is, how it is spread and how it can be prevented.
- ❑ Clusters of doctor-diagnosed cases (defined by Illinois Department of Public Health as 3 or more) should be reported to the Cook County Department of Public Health at 708-633-8030 under IDPH Rules and Regulations for the Control of Communicable Disease Section 690.295.

*Adapted from the Illinois Department of Public Health MRSA Guidance, October 2005*

## **Reference Materials**

CDC. Public Health Dispatch: Outbreaks of Community-Associated Methicillin-Resistant *Staphylococcus aureus* Skin Infections --- Los Angeles County, California, 2002-2003. MMWR February 7, 2003; Vol. 52, No. 5, page 88. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5205a4.htm>

CDC. Methicillin-Resistant *Staphylococcus aureus* Infections Among Competitive Sports Participants --- Colorado, Indiana, Pennsylvania, and Los Angeles County, 2000-2003. MMWR August 22, 2003; Vol. 52, No. 33, pages 793-795. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5233a4.htm>

CDC CA-MRSA Website including fact sheet, Frequently Asked Questions and Education Materials. [http://www.cdc.gov/ncidod/dhqp/ar\\_mrsa\\_ca.html](http://www.cdc.gov/ncidod/dhqp/ar_mrsa_ca.html)

Howe WB. Preventing Infectious Diseases in Sports. *The Physician and Sportsmedicine* 2003; 31: 23-29. (<http://www.physsportsmed.com/issues/2003/0203/howe.htm>)

**Additional references used to develop recommendations for schools:**

CDC. Guideline for Hand Hygiene in Health-Care Settings. MMWR October 25, 2002; Vol. 51, No. RR-16. (<http://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf>)

CDC. Guidelines for Environmental Infection Control in Health-care Facilities. MMWR 2003; Vol. 52, No. RR-10. (<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm>)

**Illinois Department of Public Health materials for MRSA:**

Basic Hygiene Guidelines for the Prevention of Staphylococcal Infections in Schools  
(<http://www.idph.state.il.us/health/infect/hygiene.htm>)

Recommendations for the Prevention of Staphylococcal Infections for Schools  
(<http://www.idph.state.il.us/health/infect/schoolstaphrecs.htm>)

IDPH Health Beat Fact Sheet on MRSA  
(<http://www.idph.state.il.us/public/hb/hbmrsa.htm>)