

Leamington Mennonite Home
Long Term Care

**INFECTION CONTROL
POLICY AND PROCEDURE**

CATEGORY: Disease-Specific Precautions	SUBJECT: Clostridium Difficile Infection Management	SECTION: H POLICY: 10
DATE: July 12, 2022	Administrator's Signature: _____ <i>J. M.!</i>	
REVISION DATES: December 2023, June 2024	IPAC Lead's Signature: _____ <i>L. Coppola, RN.</i>	

CLOSTRIDIUM DIFFICILE INFECTION MANAGEMENT

POLICY:

To ensure the proper detection and management of Clostridium Difficile and prevent transmission within the Home. Clostridium Difficile is an anaerobic, spore – forming, gram positive bacillus. C Difficile is the leading infectious cause of antibiotic – associated diarrhea, due to overgrowth of C Difficile colonizing the bowel when the resident is exposed to antibiotic or chemotherapeutic agents.

PROCEDURE:

The IPAC Lead or designate will:

- 1) Utilize a surveillance mechanism to count and keep track of the number of confirmed cases of CDI within the Home according to the standardized case definition and maintain a summary record.
- 2) Review and analyze this data on an ongoing basis to identify any clusters. This record will be submitted as a report to the Infection Prevention & Control Committee and DNPC at quarterly meetings.
- 3) Dialogue with the local Public Health Unit to determine if an outbreak is occurring.
- 4) Ensure prompt identification and isolation of CDI cases.
- 5) Reinforce Hand Hygiene Program.
- 6) Ensure use and discussion of antibiotic stewardship program.
- 7) Ensure appropriate Housekeeping policies and procedures for CDI cases, including use of sporicidal cleaner: *Accel Rescue*.

The Nurse will:

- 1) Initiate Contact Precautions:

- At onset of diarrhea (three or more episodes in a 24-hour period) and prior to receipt of *C. difficile* test results.
 - On every admission or readmission to the Home from hospital (see 3-Day Isolation Policy)
 - When there is a suspected or confirmed case of CDI; or
 - When there is toxic mega colon or pseudomembranous colitis.
- 2) Place out *Just the Facts Worksheet: C Difficile* for PSW staff and email the fact sheet to department leaders to relay to their staff.
- 3) Collect stool samples per doctor's orders:
- Stool samples are to be collected in sterile urinary collection containers
 - Add stool to the sterile collection container until it is 50% full. Do not overfill.
 - Collect specimens only from individuals with diarrhea. Formed stools will not be accepted.
 - Rectal swabs or leaking samples will not be accepted.
 - If positive results return then notify the Medical Director for orders. Registered Staff will update the resident's plan of care to reflect the Contact precaution protocol and notify all departments.
- 4) Contact Precautions for CDI should include:
- A private room is preferred; or
 - In a semi-private room:
 - Maintain physical separation and draw privacy curtain between residents to promote separation of items
 - A covered garbage pail is to be placed inside the resident's room
 - A laundry hamper for soiled items is to be placed inside the resident's room. Laundry bags are to be hand delivered to the laundry room, not thrown down the laundry chute
 - Proper signage is to be placed on the door to educate staff and visitors
 - Provide an easily accessible personal protective equipment supply cart (gowns, gloves, sanitizer)
 - Dedicate a commode chair and other personal care items for the resident's use – Resident is not to use shared bathroom. Commode is to be cleaned and disinfected after each use. See Policy & Procedure on Equipment Cleaning – Resident Care & Medical.
 - Signage will be placed on the resident's door notifying visitors to see the Registered Staff before entering the room. Registered Staff are to educate the visitors on contact precautions and hand hygiene. Visitors will be required to gown and glove for all visits.
 - BP cuffs, stethoscope etc. will be disinfected after contact with resident.
 - A resident on contact precautions should be showered
 - No bathing in the whirlpool tub
 - The shower chair or bath table is to be properly cleaned and disinfected following bathing
 - Following bathing all personal clothing/towels etc. are to be placed in an isolation bag and delivered to laundry.

- Proper hand hygiene is the number one way of preventing the transmission of C Difficile. Therefore, handwashing/hand sanitizing must be done after all direct resident contact. Gloves are to be used for all resident care. Hands are to be washed/sanitized prior to and after donning gloves.
 - Gowns are to be worn for direct resident contact. Gowns used for personal care will be discarded after each use. Gowns are to be donned prior to entering the room and removed before leaving the room.
- 5) Discontinue Contact Precautions only in consultation with IPAC Lead:
- When the resident has had at least 48 hours without diarrhea
 - Re-testing for C. difficile is not necessary and is not recommended to determine when precautions may be discontinued
 - Do not discontinue Contact Precautions until the room/bed space has been cleaned with sporicidal cleaner

The Personal Support Worker will:

- 1) Handle and dispose of stool, employing methods that minimize transmission of C. difficile spores.
- 2) Not use cleaning wands to clean bedpans/commode pans.
- 3) Follow contact precautions.

The Housekeeping staff will:

- 1) Follow routine resident room cleaning for CDI, which includes:
 - Twice daily cleaning and disinfection of resident room and bathroom using a sporicidal cleaner
 - Dedicated toilet brush in bathroom. Discard when Contact Precautions are discontinued, or the resident is transferred.
 - Cleaning includes side rails, commodes, door knobs, light switches, call bells, drawer handles, and closet door handles.
 - Laundry can be washed using normal wash and dry cycles.
 - Cleaning should be conducted from least contaminated surfaces to most contaminated surfaces.
 - Dedicated cleaning cloths and mop heads are to be used and changed on a daily basis.
 - See *Policy & Procedure C. Difficile Room Cleaning* for more detailed housekeeping/laundry information.

The Dietary staff will:

- 1) Provide resident tray service until clear.
- 2) Provide disposable dishes for all meals. Dishes are to be disposed of in the resident's garbage.