

Background/Rationale:

- *C. difficile* infection (CDI) is a common cause of acute diarrhea in nursing homes.
- Individuals with CDI serve as a source for bacterial spread to others, through the contamination of caregiver hands and shared equipment.
- Contamination of a resident's skin and environment is greatest when a resident has diarrhea from CDI but hasn't started on appropriate treatment.
- Early identification of CDI can limit the spread of *C. difficile* by reducing the time from symptom onset to starting therapy.
- Rapid containment through implementation of contact precautions for symptomatic residents can reduce contamination.
- Contact precautions include use of gowns/gloves and dedicated equipment during care of residents with new diarrhea.
- It's critical to understand when and when not to send *C. difficile* laboratory testing.
- Extending or initiating unnecessary therapy for *C. difficile* colonization can prevent the reestablishment of normal bacterial flora in the intestines.

Current activities survey:

SECTION 1. KNOWLEDGE AND COMPETENCY				
		YES	NO	N/A
	Early identification			
Q1	Do direct care personnel* identify and communicate new or worsening diarrhea?			
Q2	Do nursing personnel* obtain a stool specimen for <i>C. difficile</i> testing only when a resident is having watery diarrhea?			
Q3	Do nursing personnel know the appropriate way to collect and submit a stool specimen for <i>C. difficile</i> testing?			
Q4	Do medical personnel* know the <i>C. difficile</i> testing (e.g., EIA “toxin” vs. molecular “PCR”) being performed by the laboratory?			
	Rapid containment			
Q5	Do healthcare personnel* know what precautions are used to prevent the spread of <i>C. difficile</i> ?			
Q6	Do nursing personnel know to implement contact precautions for residents known or suspected of having CDI?			
Q7	Do residents with CDI and their family members receive education about the use of hand washing and contact precautions to prevent transmission of CDI?			
SECTION 2. INFECTION PREVENTION POLICIES AND INFRASTRUCTURE				
		YES	NO	N/A
	Early identification			
Q1	Is there a protocol for notifying medical personnel when a resident develops new or worsening diarrhea?			
Q2	Does your nursing home have a policy that allows nursing personnel to collect and order a stool for <i>C. difficile</i> testing?			
Q3	Is there a protocol for notifying medical personnel of the results of a <i>C. difficile</i> test?			
	Rapid containment			
Q4	Does your nursing home have a policy that allows nursing personnel to implement contact precautions when a resident develops new or worsening diarrhea?			
Q5	Is there a visual tool (e.g., sign) used to communicate to healthcare personnel and visitors when contact precautions are in use for a resident with known or suspected CDI?			
Q6	Are there adequate supplies of gowns/gloves immediately available in all resident care areas*?			
Q7	Does your nursing home dedicate resident equipment when contact precautions for CDI are in use?			
Q8	Does your nursing home have a policy or procedure to provide separate toilets for residents with CDI who are sharing a room with residents without CDI?			

* Healthcare personnel - All paid and unpaid persons working in the healthcare setting; Direct care personnel – All persons interacting with and/or providing hands-on care for residents; Nursing personnel – All persons who provide nursing care to residents including implementing orders and documenting resident condition in the record; Medical personnel – All persons who provide and document medical assessments and care to residents including writing orders and prescriptions; Resident care areas - Areas in the nursing home where direct resident care is provided (for example, resident rooms, common bathing room, therapy rooms, procedure/exam rooms, etc.)