

# CDI Best Practices Checklist



Audit of Current Practices	Yes	No
• Have you recently reviewed your current practices for C. difficile reduction?		
• Do you routinely audit practices quarterly unless there is a CDI infection?		
Multidisciplinary Team	Yes	No
• Do you have a hospital multidisciplinary team working on CDI reduction?		
• Do you have the following hospital representation on the team?		
» A physician champion		
» A nurse champion		
» Infection preventionist		
» Pharmacist		
» Environmental services worker		
» Quality staff member		
• Do you or members of your team meet regularly to review practices?		
CDI Isolation Precautions	Yes	No
• Are patients with three or more watery stools per day placed into CDI Isolation Precautions?		
• Is there a check done to make sure the patient who has watery diarrhea has not been on laxatives, lactulose, tube feeds, chemo, stool softener, or a new antibiotic?		
• Is there a nurse-driven protocol which allows nurses to place patients in CDI precautions without a physician order?		
• Is the patient placed into a private room?		
• Is everyone washing their hands with soap and water after leaving a CDI isolation room?		
• Are gowns and gloves used when caring for the patient?		
• Is there dedicated equipment such as a stethoscope, blood pressure equipment, and thermometer for the patient?		
• Is reusable equipment wiped down with a sporicidal agent such as a bleach wipe or another EPA-approved disinfectant before leaving the patient's room?		
• Are patients with CDI kept in isolation precautions until their discharge?		

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Testing Protocols	Yes	No
• Do stools sent to the laboratory take the shape of the containers?		
• Does the laboratory have the authority to reject stool samples which do not take the shape of the container?		
• Does your lab perform a 2-step testing protocols, if so which of the following protocols is followed:		
» Toxin A & B EIA testing and confirmation by NAAT (PCR)		
» NAAT Testing then Toxin A & B EIA		
» GDH testing then Toxin A & B EIA		
• If you have a negative NAAT test, is there a policy to reject stool specimens on the patient that are sent within 7 days of the initial test?		
Cleaning and Disinfecting	Yes	No
• Are EVS staff trained in cleaning and disinfection of patient rooms on hire and annual review?		
• Are staff trained on donning and doffing of CDI PPE?		
• Does your facility use a sporicidal EPA-approved disinfectant for cleaning of CDI precautions rooms when the patient is in the room?		
• Does your facility use a sporicidal EPA approved disinfectant for cleaning and disinfecting of CDI precaution rooms when the patient is discharged from the hospital?		
• Are curtains (if present) changed upon discharge?		
• Are high touch surfaces in patients' rooms monitored for cleanliness by either using a fluorescent dye, ATP, or other method?		
• If surfaces are monitored for cleanliness in your hospital, do they routinely monitor CDI rooms?		
• If a sampling of surfaces is monitored, are the surfaces tested rotated each month?		
• Are the results of the environmental testing shared with staff and the appropriate committees such as Infection Prevention and Quality?		
• Does your facility use an additional method of disinfection such as UV light or hydrogen peroxide vapor after rooms are cleaned?		
• Was the patient previously in this patient room also positive for C.diff?		
• Were there any other cases of C.diff on this unit at this time?		

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Education and Competencies	Yes	No
• Have you had a hospital wide education campaign on the importance of CDI reduction?		
• Do you have a hands-on competency for all staff on hand hygiene?		
• Do you have a hands-on competency for donning and doffing of PPE?		
• If you perform staff competencies, how often are they done?		
• Do you have educational material for patients and family members about CDI reduction efforts?		
• Do you engage the patient and family/visitors on the importance of CDI reduction strategies including hand hygiene?		

Antimicrobial Stewardship Practices	Yes	No
• Does your facility have an Antimicrobial Stewardship Program?		
• Does your pharmacy encourage the limitation of fluoroquinolones?		
• Does your pharmacy work to reduce broad spectrum antibiotic use?		
• Does your pharmacy discourage the use of proton pump inhibitors?		
• Does your pharmacy encourage de-escalation of antibiotics when cultures are resulted?		
• Does your pharmacy monitor duration of antibiotics and encourage the shortest duration for abx?		

Quality Improvement Practices	Yes	No
• Do you have administrative support for CDI reduction interventions?		
• Do you perform a root cause analysis or defect analysis on all CDIs to determine if they could have been prevented?		
• Do you share outcome data with front line staff on CDI SIRS or infection rates?		
• If applicable, do you share process measures such as EVS cleanliness monitoring with staff and relevant committees?		
• Do you post data on your unit/s of days since the last CDI?		

For more information:  
<https://qi.ipro.org/>



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