



<p>Team Name: Staff Development, Infection Prevention & Control</p> <p>Team Lead: Director - Staff Development, Infection Prevention & Control</p> <p>Approved by: Regional Lead - Acute Care & Chief Nursing Officer</p>	<p>Reference Number: CLI.8011.PL.017</p> <p>Program Area: Infection Prevention & Control</p> <p>Policy Section: Infection Prevention & Control</p>
<p>Issue Date: May 5, 2022</p> <p>Review Date:</p> <p>Revision Date: April 24, 2023</p>	<p>Subject: <i>Clostridioides</i> (formerly <i>Clostridium</i>) <i>difficile</i> Infection (CDI) Management</p>

POLICY SUBJECT:

Clostridioides (formerly *Clostridium*) *difficile* Infection (CDI) Management

PURPOSE:

All suspect or confirmed cases of *Clostridioides* (formerly *Clostridium*) *difficile* Infection (CDI) are managed as recommended by Manitoba Health, Seniors and Active Living to reduce the risk of transmission to others.

BOARD POLICY REFERENCE:

Executive Limitation (EL-02) Treatment of Clients
 Executive Limitation (EL-3) Treatment of Staff

POLICY:

Southern Health-Santé Sud (SH-SS) works to prevent the transmission of CDI in all care areas by providing consistent CDI management direction to all acute care facilities, personal care homes and community programs.

IMPORTANT POINTS TO CONSIDER:

- All suspect/confirmed cases of *Clostridioides difficile* Infection (CDI) – formerly known as *Clostridium difficile* or *C. difficile*, are placed on Contact Precautions until at least 48 hours after diarrhea has resolved. In addition, “Increased cleaning & disinfection frequency (minimum of two times a day)” is checked off on signage.
- As soon as possible after CDI is suspected, an unpreserved stool specimen is collected for *C. difficile* toxin testing and sent to Cadham Lab. Specimen must consist of a liquid or loose stool sample which takes the shape of the container. Formed stools will not be tested.

- Hand hygiene with soap and water is recommended over the use of alcohol-based hand rub (ABHR) before and after providing direct client care for suspect/confirmed CDI cases given the increased efficacy of spore removal with soap and water.

PROCEDURE:

- Follow the Manitoba Health Communicable Disease Management Protocol – *Clostridioides difficile* Infection (CDI) for the management and treatment of all suspect/confirmed cases <https://www.gov.mb.ca/health/publichealth/cdc/protocol/cdi.pdf>.
 - Notify site Infection Control Practitioner (ICP) of all cases of CDI.
 - ICP reviews the CDI case to determine if case definitions are met.
 - In the event of a CDI Outbreak, the Regional Infection Prevention & Control (IP&C) Coordinator reports the outbreak to Canadian Network for Public Health Intelligence (CNPHI).
- Educate confirmed CDI client/families by providing and reviewing the Client Fact Sheet – *Clostridioides difficile* (CLI.8011.SG.006.SD.01).
- Follow Routine Practices and Additional Precautions for the management of all suspect/confirmed CDI cases, including Acute Care, Long Term Care, Ambulatory/Clinic Setting and Home Health Care. Please refer to Appendix V – Elements that Comprise Contact Precautions – page 162 <https://www.gov.mb.ca/health/publichealth/cdc/docs/ipc/rpap.pdf>.
- For additional clarification, see steps below:
 - Accommodation
 - If a single room is not available, cohorting with another CDI case is acceptable.
 - If client must share a room, a spatial separation of at least one metre must be maintained between infected client and other clients/their visitors. Roommates and all visitors must be able to comply with required precautions in place.
 - Avoid choosing roommate who is at high risk of complications if infection occurs or with conditions that may facilitate transmission (e.g., immunocompromised or open wounds).
 - In a shared room, the client with diarrhea is assigned use of the toilet. All roommates and bathroommates are assigned a commode.
 - Signage
 - Follow Contact Precautions, with “Increased cleaning & disinfection frequency (minimum of two times a day)” checked off on signage.
 - Environmental cleaning
 - Clean and disinfect all horizontal surfaces and high touch surfaces in the client room **twice daily**.
 - Daily cleaning with a sporicidal agent is required in the event of an outbreak, with increased cases of CDI or if there is evidence of repeated cases of CDI in the same rooms.
 - Upon discontinuation of Contact Precautions or client discharge, terminal cleaning of the room/bed space is required; including changing privacy curtain.

- Patient flow
 - Ensure CDI client performs hand hygiene before leaving their room, assisting as necessary.
 - Avoid transfer within facility unless medically indicated.
- Handling of deceased bodies
 - Follow the same precautions (Routine Practices and Contact Precautions) for handling deceased bodies.
- Waste, laundry, dishes & cutlery
 - No special precautions are required – Routine Practices are sufficient.
- Discontinuation of precautions
 - Discontinue Contact Precautions under the direction of the IPC/designate, when client has had at least 48 hours without diarrhea (stool is formed or normal for client prior to discontinuing precautions).
 - Discontinue Contact Precautions only after the room or bed space/bathroom have been terminally cleaned.
- Recurrence of symptoms
 - If diarrhea reoccurs, place client immediately on Contact Precautions.
 - Send stool specimen for *C. difficile* toxin testing and consider further treatment.

SUPPORTING DOCUMENTS:

[CLI.8011.PL.017.SD.01](#) Client Fact Sheet – *Clostridioides difficile*

[CLI.8011.PL.017.SD.01.F](#) Client Fact Sheet – *Clostridioides difficile* - French

REFERENCES:

Manitoba Health, Public Health Branch (February 2019). *Communicable Disease Management Protocol – Clostridioides Difficile Infection (CDI)*.

<https://www.gov.mb.ca/health/publichealth/cdc/protocol/cdi.pdf>

Manitoba Health, Seniors and Active Living (June 2019). *Routine Practices and Additional Precautions: Preventing the Transmission of Infection in Health Care*.

<https://www.gov.mb.ca/health/publichealth/cdc/docs/ipc/rpap.pdf>

Ontario Agency for Health Protection and Promotion, Provincial Infectious Diseases Advisory Committee (January 2013). *Annex C – Testing, Surveillance and Management of Clostridium difficile*. Annexed to: Routine Practices and Additional Precautions in All Health Care Settings. Toronto, ON.