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NHS

Care Pathway for service users with *Clostridium difficile*

This Care Pathway should be used in a care setting by healthcare workers caring for service users with *Clostridium difficile (C. difficile)* who have diarrhoea.

It should be used in association with your *C. difficile* Policy and followed until the service user is symptom free for 48 hours and has passed a formed stool (a negative stool specimen is not required).

Name of service user:		Date of birth:	
Aim: To safely care for a service user with *C. difficile* reducing the risk of complications of the illness and preventing the spread of *C. difficile* to other service users.			

	Action	Actioned: Date and initials	Reason if not actioned: Date and initials
1.	The service user requires isolation nursing in their room. The room should preferably have en-suite facilities, or if not, an allocated commode which will stay in their room. The door to the service user's room should, be kept closed. If this is not possible due to a risk, e.g. falls, the reason should be documented in their records.		
2.	Equipment required for isolation nursing, e.g. disposable apron and gloves, waste bags, should be available inside and, where possible, immediately outside the room.		
3.	If a *C. difficile* card and leaflet has been sent to the service user, this has been implemented and is documented in their records.		
4.	Aperients should be omitted and an accurate record of each bowel movement, using the Bristol Stool Form Scale, should be documented.		
5.	To prevent dehydration, fluid intake should be encouraged and recorded. The GP should be contacted if there are any concerns as subcutaneous or intravenous fluid support may be required.		
6.	A daily documented review of the service user's condition should be made whilst they are symptomatic, using the Daily Assessment of *C. difficile* infection table.		
7.	As directed by the GP, observations of temperature, pulse, respirations and blood pressure should be undertaken and recorded. Urgent medical advice should be sought if the service user's condition deteriorates.		

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8.	Administer antibiotic treatment for *C. difficile* if prescribed, e.g. metronidazole 400 mgs for 10 days. (Antibiotic treatment is available in the form of syrup if the service user has difficulty taking tablets.)		
9.	Disposable apron and gloves should be worn by **all** staff when entering the room, whether providing hands-on care or not: • A new disposable apron and gloves should be worn for each new task undertaken • Aprons and gloves should be removed and hands washed with liquid soap, warm running water and dried with paper towels immediately before leaving the service user's room		
10.	All staff should wash their hands thoroughly with liquid soap and warm running water, then dry them with paper towels: • After each episode of care/intervention • Before leaving the service user's room **Alcohol handrub must not be used as it does not kill *C. difficile* spores.**		
11.	Assistance with hand hygiene should be given to the service user after using the commode or toilet and always before meals and drinks. If the service user is unable to wash their hands, moist skin cleansing (non-alcohol) wipes should be used.		
12.	Visitors should be asked to wash their hands before leaving the room. Disposable apron and gloves are not required to be worn by visitors unless they are providing 'hands on care'.		
13.	The service user's room and en-suite should be kept tidy and free from clutter to enable effective cleaning.		
14.	The room and en-suite must be cleaned and then disinfected with a sporicidal product, e.g. Milton liquid, at least once daily. Milton liquid at a dilution of 1:20 (50 mls Milton in 1 litre of water) and a fresh solution should be made daily. All hard surfaces should be wiped with the solution, especially surfaces touched by the service user. Single use disposable cleaning cloths should be used. A designated colour coded mop and bucket (yellow) should be used. The bucket should be cleaned, then disinfected with Milton after use and the mop head should be laundered as infectious laundry. **Note: Milton Antibacterial Spray is not effective against *C. difficile* spores.**		
15.	Medical equipment should be single patient use or kept in the room until isolation is no longer needed. Items must be cleaned then disinfected at minimum daily, additionally		

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	if visibly soiled, and also before being taken out of the room. A sporicidal product must be used, e.g. Milton at a dilution of 1:20 (50 mls Milton in 1 litre of water) and a fresh solution should be made daily.		
16.	**All** surfaces of the commode or toilet should be cleaned (including frame, seat, under seat, lid, arms, flush handle) then disinfected with Milton at a dilution of 1:20 (50 mls Milton in 1 litre of water) after each use. Used commodes/slipper pans should be covered with a lid or paper towelling during transportation to the sluice/dirty utility room. If a washer disinfector is not available, pan and lid should be emptied, cleaned, washed then disinfected with the Milton solution.		
17.	All used and soiled linen including clothing should be washed as 'infected laundry' and placed in a water soluble (alginate) bag inside the correctly coloured laundry bag, this should be removed immediately from the service user's room to the laundry. Disposable apron and gloves should always be worn when handling used and/or soiled linen and clothing.		
18.	Waste should be placed in a foot operated bin with a lid and disposed of as infectious/clinical waste as directed by the waste contractor.		
19.	If the service user requires transfer to another healthcare facility, such as a hospital, the transferring ambulance service and staff at the destination must be notified of the infection before transfer and documentation provided, e.g. Inter-health and Social Care Infection Control Transfer Form and *C. difficile* card.		
20.	Isolation of the service user may be discontinued when they have had no diarrhoea for 48 hours and have passed a formed stool, Bristol Stool Chart 1-4. There is no need to submit further faeces samples for clearance.		
21.	Once isolation is discontinued, the room must be deep cleaned (see Environmental cleanliness policy for details). Hard surfaces should be disinfected using a sporicidal product, e.g. Milton at a dilution of 1:20 (50 mls Milton in 1 litre of water). It is very important to deep clean the room thoroughly to prevent the service user re-infecting themselves.		
22.	If symptoms re-occur, the service user should be isolated, a stool sample obtained if over 28 days since the last sample was tested and their GP should be informed.		

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