



2023 Excellence in Quality Award (101-300 Beds) Comanche County Memorial Hospital Reduction of Hospital Acquired Clostridioides difficile

Aim Statement

Decrease hospital-acquired Clostridioides difficile by 30%, by Aug. 31, 2023.

Interventions

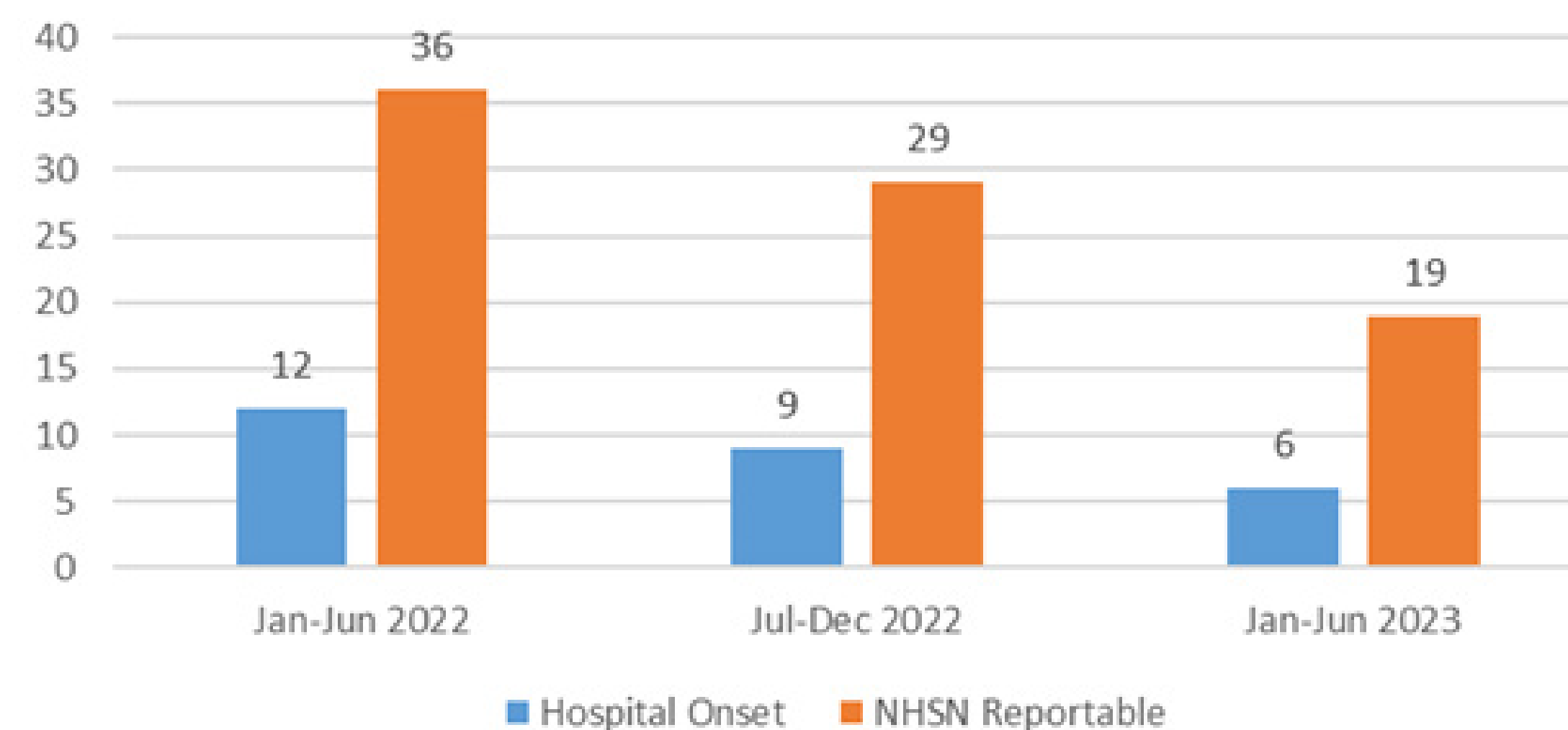
- Implemented a new SCAN algorithm to ensure appropriateness of C. diff testing.
- Scan algorithm and disseminated to staff via posters, laminated cards and new employee orientation.
- Medical executive committee reviewed all orders for C. diff testing appropriateness.
- Infection Prevention Team reviewed all C. diff testing orders for compliance with SCAN.

What We Learned

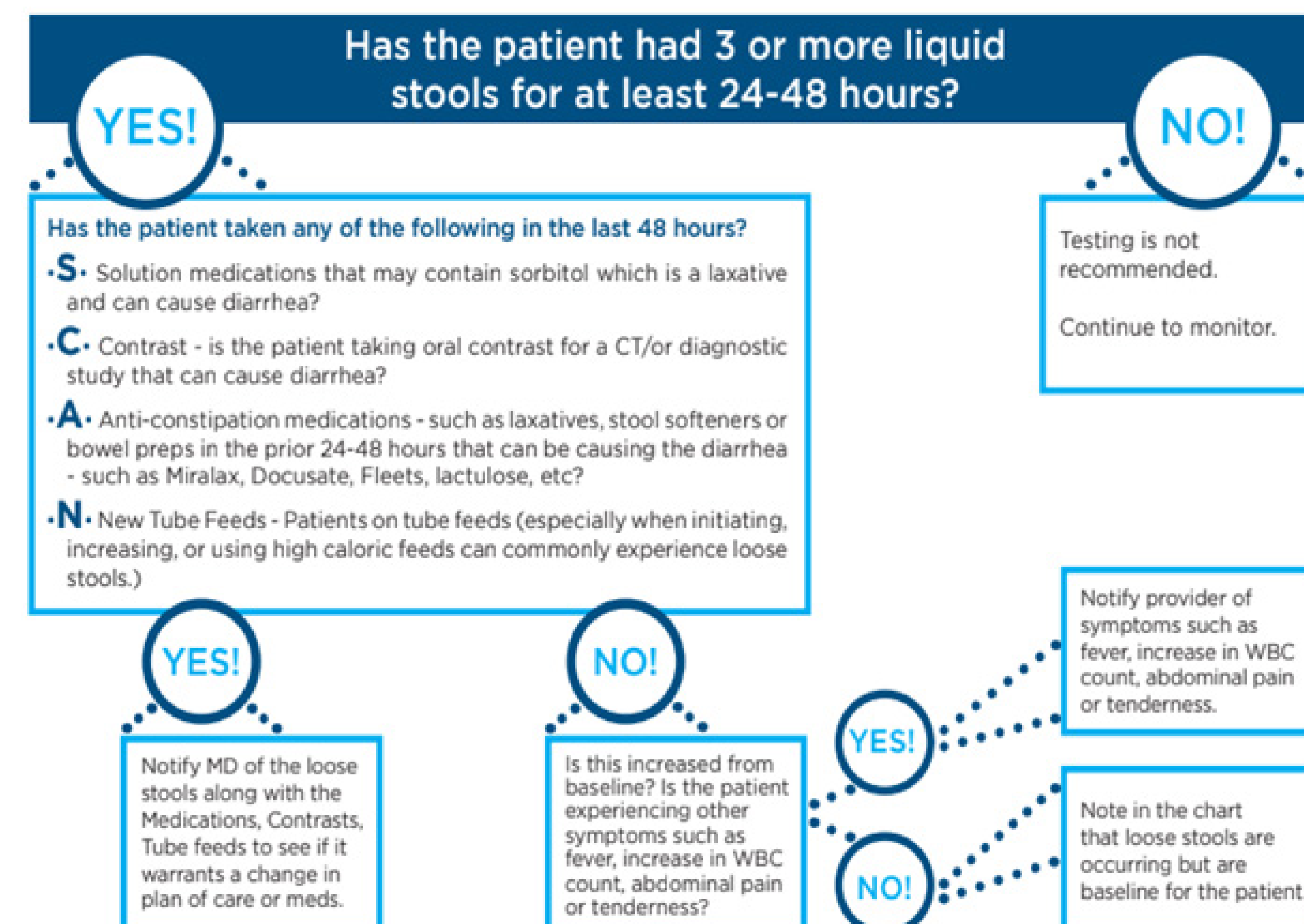
- Communication between the infection Prevention Team, nursing leadership and lab staff was key to creating culture change.
- Active monitoring of all request for appropriateness of C. diff testing resulted in cancellation of >70 tests for not meeting testing criteria.

Outcomes

Hospital Onset C. diff Compared to All Inpatient NSHN C. diff Lab ID Events



SCAN Algorithm



Next Steps

- Continue to evaluate all C. diff lab test request for appropriateness.
- Apply the review process to other hospital-acquired infections to reduce infections across the board.

Team Members



Left to Right: Melissa Alvillar RN, Chief Nursing Officer; Amber James, RN Infection Preventionist; Meagan Garibay RN, Infection Preventionist; Heather Love, RN, Administrative Director of Quality. Not pictured: Alisa Engler, Infection Preventionist; Dr. Scott Michener, Chief Medical Officer.