Clostridium Difficile

Reducing infections using an evidence-based practice initiative

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BACKGROUND: Nosocomial Clostridium difficile (C. difficile) infections are adverse incidents that affect immunocompromised hospitalized patients. High-touch surface areas within the patient’s environment are frequently overlooked and are a source of microscopic bacterial transmission.

OBJECTIVES: This article examines whether the use of a standardized protocol for cleaning high-touch surface areas would reduce the incidence of hospital-acquired C. difficile infection.

METHODS: The initiative targeted five high-touch surfaces, and nurses were educated about these findings. Baseline data on the C. difficile infection rate was collected from four specialty medical-surgical oncology units. A pilot period of the Five by Five initiative evaluated C. difficile infection rates after staff cleaning of these high-touch surfaces.

FINDINGS: This initiative accounted for a statistically significant reduction in C. difficile infections. The use of a standardized cleaning initiative was effective in reducing C. difficile infections. Nursing staff perceived that the education was easy to remember and supported efficient implementation.

KEYWORDS
nosocomial; Clostridium difficile; high-touch areas; evidence-based practice

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