



At or better than target.  
Continue to monitor.



Within 5% of target. Monitor  
and take action as appropriate.



Below target by more than 5%.  
Take action and monitor progress.



No target identified  
or available.

## WHAT IS BEING MEASURED?

Clostridium difficile (C. difficile) is a common bacterium that is found in the environment and occurs naturally in some people. It does not actually originate in hospitals, but is more frequently present in the stool of some hospitalized patients. C. difficile infections (CDI) sometimes occur when antibiotics are prescribed and can spread when individuals come into contact with objects contaminated with fecal bacteria.

The CDI rate is a quality indicator of the effectiveness of infection control and antibiotic stewardship practices. Examples of those practices include: hand hygiene, environmental cleaning, and optimal use of antibiotics to improve patient outcomes yet contain bacterial resistance to antibiotics. This measure is calculated by tracking the number of hospital acquired CDI cases that meet a Ministry of Health and Long-Term Care (MOHLTC) definition relative to the number of days patients are in Bluewater Health (known as “patient days”).

## WHY IS THIS IMPORTANT?

The CDI rate is a mandatory publicly reported safety measure for Ontario hospitals. Bluewater Health monitors this indicator monthly and remains focused on lowering our rates. C.difficile, the bacterium that is the cause of CDI, can cause mild to life-threatening illness.

## WHAT IS THE TARGET?

Bluewater Health compares its rate each month against the provincial rate, which varies month to month. For the fiscal year 2017-18, Bluewater Health aims for a rate less than 0.20.

## HOW ARE WE DOING?

In the past year there has been some fluctuation in the CDI rate at Bluewater Health. The Number of Hospital Acquired CDI cases is 0.15 for the most recent month.

## WHAT ACTIONS ARE WE TAKING?

Regular auditing is underway to improve hand hygiene compliance and to ensure environmental cleaning practices remain aligned with applicable standards. Environmental cleaners and sporicidals that are known to kill C.difficile are used to clean entire units of patients with CDI. The Antibiotic Stewardship Committee actively reviews antibiotic use and ordering practices.

## WHERE CAN I LEARN MORE ABOUT THIS MEASURE?

- MOHLTC [see website](#)
- OHA [see website](#)
- Contact us

Month	Rate of hospital acquired CDI per 1,000 patient days/month		Number of Hospital acquired CDI cases/month	
	CEEH of Bluewater Health	Bluewater Health in Sarnia	CEEH of Bluewater Health	Bluewater Health in Sarnia
June 2016	0	0	0	0
July	0	0	0	0
Aug	0	0.15	0	<5
Sept	0	0	0	0
Oct	0	0.28	0	<5
Nov	0	0.29	0	<5
Dec	0	0	0	0
Jan	0	0	0	0
Feb	0	0.32	0	<5
March	0	0.29	0	<5
April	0	0.15	0	<5
May	0	0.14	0	<5
June 2017	0	0.15	0	<5

Preferred trend/  
direction



**FREQUENCY REPORTED:** Monthly

**NEXT UPDATE:** August 2017