An acute care elderly unit within a community hospital

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Objective:
An acute care elderly unit within a community hospital has an average rate of 2 per 1000 patient days of hospital-occurring Clostridium difficile infections. A Clostridium difficile knowledge deficit among staff nurses accompanied by inappropriate diagnostic testing for Clostridium difficile was identified as potential causes. Purpose: To implement a Clostridium difficile diagnostic algorithm in order to improve the rate of hospital-occurring Clostridium difficile infections caused by inappropriate diagnostic testing. Methods: The acute care elderly unit consists of 34 beds with approximately 150 patients per month. A Clostridium difficile diagnostic algorithm was implemented on the unit for staff nurses to identify appropriate diagnostic samples when their patients have loose stool and/or when the healthcare provider orders the test. Nursing and patient care technician education was administered and was measured by a completion rate. The use of the algorithm was measured by weekly chart reviews on collected tests. The number of intensive care unit transfers related to Clostridium difficile as well as positive and hospital-occurring Clostridium difficile were measured by weekly extraction of lab data from the health record and chart review. All data were analyzed using run-chart analysis. Preliminary Results: The plan is to discuss final results of our findings in terms of the rate of education completion, appropriate diagnostic tests, intensive care transfers, positive tests, and hospital-occurring Clostridium difficile tests. Preliminary Conclusions: The plan is to discuss final conclusions of the algorithm in decreasing hospital-occurring Clostridium difficile infection rate and practice implications.

Biography

Laura Harrison received her doctorate in Gender Studies from Indiana University. Her first book, Brown Bodies, White Babies: The Politics of Cross-racial Surrogacy (NYU Press, 2016) examines the implications of surrogacy arrangements for contemporary understandings of race, kinship, and gender. Her next book project, Losing Sleep: Risk, Responsibility, and Infant Sleep Safety entails a multi-sited analysis of debates surrounding infant sleep safety, and how the ability to protect oneself from state intervention into childrearing is stratified by race and class privilege. Her work on subjects ranging from surrogacy, reproductive politics, representations of motherhood, race and public health, reproductive justice, and gender and feminist backlash appears in journals including Signs, Frontiers, Feminist Formations, Genders, Feminist Media Studies, and Women's Studies International Forum.

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