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NHS Harrogate and Rural District CCG Clostridium Difficile Policy

Clostridium Difficile Infection (CDI) is associated with significant morbidity and mortality.

Individuals most at risk of CDI are ≥ 65 years and who are currently receiving antibiotics or have received them in the previous three months. Prudent antibiotic prescribing reduces the risk of CDI and of relapsing infection which occurs in 20% of cases. Broad-spectrum agents, in particular should not be prescribed unless there is a clear clinical need. Guidance on prescribing of antibiotics should follow the North Yorkshire Antibiotic Prescribing guideline for Primary Care distributed to practices in October 2015 available electronically via [HaRD CCG website](#).

The following policy has been agreed across the CCG:

1. All Clostridium Difficile Infections and colonisations to be recorded as Major Active or Significant Active Problem with no time lapse – this includes notes summarised when patients register with a new general practice.
2. Root cause analysis requests from provider organisations to be completed promptly.
3. Consider using Major alert messages (Pop up Boxes) as medical record loaded on GP computer system
4. Entry to be made on medical record as Allergy Unspecified or Allergy Antimicrobials with free text of “Clostridium Difficile Infection *with date*” or “Clostridium Difficile colonisation *with date*”.
5. Entry to be made via special notes for Out of Hours Service to record “Clostridium Difficile Infection *with date*” or “Clostridium Difficile colonisation *with date*”
6. Prescribing of antibiotics should follow the North Yorkshire Antibiotic Prescribing guideline for Primary Care. Clindamycin, Co-amoxiclav, Quinolones and Cephalosporins should be avoided. In more complex cases advice can be sought by discussion with a Consultant Microbiologist - available through the switchboard Harrogate and District Foundation Trust 24 hours per day – 01423 885959