A qualitative study on factors influencing the implementation of a Clostridium difficile risk prediction tool in the Scottish secondary care setting

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BACKGROUND
- From the early 2000s, Clostridium difficile infection (CDI) has become a health care burden which is mainly associated with 4C antibiotics consumption (Clindamycin, co-amoxiclav, cephalosporins, ciprofloxacin). CDI is potentially fatal especially in elderly and immunocompromised people with symptoms ranging from diarrhoea to severe colitis.
- In Scotland ~1300 CDI cases were reported in 2018 of which ~380 were reported as community acquired CDI cases.
- In order to support clinicians during antibiotic prescribing, a mathematical algorithm has been created, which aims to inform the patient’s risk to contract CDI using patient data.

METHODS
- In order to understand the perception of clinicians in secondary care for the development of a CDI tool, four podiatrists from NHS Fife have been interviewed to identify their prescribing pattern, their perception on CDI and introduction of a CDI tool during their consultations.
- The interviews were transcribed and analysed in NVivo.
- This study was conducted between April-May 2019.

CONCLUSION
- Although podiatrists don’t see many cases of CDI and don’t prescribe 4C antibiotic frequently, would like to have a CDI tool for patient safety netting purposes.
- However due to incomplete patient data and allocation of the data into different systems, the CDI tool can’t be integrated into their prescribing system.
- As podiatrists are comfortable in using mobile phones during consultations and have longer appointment time with patients, a mobile phone app or website that requires input of the patient data could be developed.

FUTURE WORK
- Currently a test version website of the CDI tool is under development.
- Feedback on the tool's layout, its ease of use and usability in practice is under investigation.
- Following the completion of the investigation, the CDI tool will be amended upon clinician's feedback.
- Subsequently the final format of the CDI tool, will be tested using patient case scenarios.