

## Appendix Two - Draft Wirral C.diff Strategic Plan

Vision statement: A place where C.diff is rare, identified early and treated effectively

| Public Health and ICB priorities<br>Clinical leads: Nathalia Cano Pereira and Lorna Quigley   | Primary and Domiciliary Care priorities<br>Clinical Lead: Diane Atherton  | Community (including complex care settings) Priorities<br>Clinical Lead: Helen Wilcox  | Hospital Settings Priorities<br>Clinical Lead: Jay Turner-Gardner   |
|---|---|--|---|
| <b>Monitoring of assurance relating to embeddedness of standard infection control precautions and training – ICB Lead: Lorna Quigley</b>  |   |  |   |
| <b>Monitoring of assurance relating to embeddedness of transmission-based precautions and training – ICB Lead: Lorna Quigley</b>  |   |  |   |
| <ul style="list-style-type: none"> <li>• C.diff awareness campaign</li> <li>• Prevention of UTIs – hydration campaign</li> <li>• Antibiotic resistance and stewardship leadership</li> <li>• Develop a C.diff dashboard including baseline data and trajectories for improvement</li> <li>• Establish systemwide C.diff learning forum</li> </ul> | <ul style="list-style-type: none"> <li>• Antibiotic prescribing in the community requires robust antimicrobial stewardship to prevent unnecessary use.</li> <li>• Actions to improve practice relating to antibiotic prescribing across Primary Care (GP, Pharmacy and Dental services)</li> <li>• Early identification of C.diff, in partnership with care sector</li> <li>• Treatment in the community – with oversight from Virtual Ward as required</li> <li>• Hospital avoidance priorities</li> <li>• Sampling in general practice</li> </ul> | <ul style="list-style-type: none"> <li>• Prevention of UTIs and delivery of enhanced hydration project</li> <li>• Preventative AMR through IPC education and training plan</li> <li>• Development of Community C.diff / diarrhoea care plan to support effective community management and avoid unnecessary hospital admissions</li> <li>• Establish joint NHS review panel</li> </ul> | <ul style="list-style-type: none"> <li>• Early identification of C.diff</li> <li>• Timely isolation of patients with diarrhoea</li> <li>• Hospital based antibiotic prescribing</li> <li>• Make recommendations regarding Estates &amp; Facilities considerations which would reduce the risk of transmission</li> <li>• Collaborative Continence steering group</li> <li>• Monthly collaborative CDT group looking at the Wirral wide Journey</li> </ul> |
| <b>Measures of success – first year of strategy (Q3 24/25 – Q2 25/26)</b>   |   |  |   |
| <ul style="list-style-type: none"> <li>• Evaluation if impact of C.diff awareness and hydration campaigns</li> <li>• Development of System wide C.diff prevention dashboard, including data relating to antibiotic prescribing across system</li> </ul>   | <ul style="list-style-type: none"> <li>• Achievement of performance targets set for improvements in antibiotic prescribing across primary and community care aligned with national benchmarks</li> <li>• Reduction in community cases of C.diff – monitored monthly</li> </ul>  | <ul style="list-style-type: none"> <li>• Evaluation of impact of enhanced hydration project for complex settings</li> <li>• Implementation and evaluation of Community C.diff pathway</li> </ul>   | <ul style="list-style-type: none"> <li>• Achievement of performance targets set for improvements in antibiotic prescribing across hospital services aligned with national benchmarks</li> <li>• Reduction in hospital initiated cases of C.diff – monitored monthly</li> </ul>  |
| <b>Annual quality improvement report presented to Health Protection Board October 2025 outlining impact of system wide C.diff learning forum</b>  |   |  |   |