

Supplemental Table 1: Full Survey Responses Across 159 Acute Care Hospitals

Survey Domains and Individual Items	Survey Responses n/N (%)
Infection Control Policies to Decrease Transmission	
Time point at which contact precautions are generally initiated	
Onset of diarrhea (not qualified)	43 (27.0%)
Onset of diarrhea not due to another underlying cause (eg, laxative)	89 (56.0%)
After 3 episodes of diarrhea	9 (5.7%)
After receipt of positive laboratory result	<6 (0.6%)
After advice of IPAC professional	11 (6.9%)
Other	6 (3.8%)
Individuals with authority to initiate contact precautions/isolation	
Front-line staff	158 (99.4%)
IPAC staff	151 (95.0%)
Unit manager	142 (89.3%)
Physician	151 (95.0%)
Other	12 (7.5%)
Isolation procedures for patients with suspected CDI	
Always placed in a single room	60 (37.7%)
Placed in a single room or cohorted if single room not available	88 (55.3%)
Remains in current room until case is confirmed	<6 (2.5%)
Other	7 (4.4%)
Policy in place to monitor/audit compliance with contact precautions	64 (40.3%)
Compliance results reported back to hospital staff	54 (30.4%)
Antimicrobial Stewardship	
Implemented antimicrobial stewardship for high risk antibiotics	48 (30.2%)
Hospital has antibiotic management committee or stewardship team	37 (23.3%)
IPAC team has internal support from a pharmacist	125 (78.6%)
System in place for auditing compliance with antibiotic stewardship	26 (16.4%)
Antibiotic compliance results reported back to staff	15 (9.4%)
Environmental cleaning	
Hospital disinfectant used for environmental cleaning on daily basis	
Quaternary ammonium	88 (55.3%)
Accelerated hydrogen peroxide	105 (66.0%)
Bleach	15 (9.4%)
Other	17 (10.7%)
Don't know	<6 (2.5%)
Hospital disinfectant used for CDI room or during CDI outbreak	
Quaternary ammonium	33 (20.8%)
Accelerated hydrogen peroxide	119 (74.8%)

Bleach	37 (23.3%)
Other	41 (25.8%)
Don't know	<6 (1.9%)
Frequency of CDI room cleaning	
Once daily	6 (3.8%)
Twice daily	146 (91.8%)
As needed, or other	7 (4.4%)
How often is CDI equipment cleaned	
Once daily	29 (18.2%)
Twice daily	80 (50.3%)
As needed	34 (21.4%)
Other	16 (10.1%)
Housekeeping staff receive training on disinfection procedures	158 (99.4%)
Auditing system to monitoring compliance to these procedures	115 (72.3%)
Cleaning compliance results reported back to staff	112 (70.4%)
Memory aids to health care providers regarding hand hygiene	159 (100%)
Memory aids for family members regarding hand hygiene	155 (97.5%)
Hand hygiene compliance rates reported back to staff	154 (96.9%)
Diagnostic testing	
Laboratory location for CDI testing	
Onsite hospital laboratory	74 (46.5%)
Offsite hospital laboratory	68 (42.8%)
Public health laboratory	66 (41.5%)
Testing Method for CDI	
Standard culture followed by cytotoxin neutralization assay	19 (11.9%)
Polymerase chain reaction	26 (16.4%)
Toxin A/B testing by commercial enzyme immunoassay kits	125 (78.6%)
Other	8 (5.0%)
Average Turn Around Time	
Within 24 hours	85 (53.5%)
Between 24-48 hours	58 (36.5%)
Greater than 48 hours	15 (9.4%)
Treatment	
Algorithms or care pathways for treatment of patients with CDI	108 (67.9%)
Vancomycin is first line treatment for patients with CDI	24 (15.1%)
Leadership and Culture	
Highest level of administration to which IPAC reports	
Senior administration (CEO or board)	52 (32.7%)
Senior management (eg, Director of nursing or inpatient services)	86 (54.1%)
Quality manager/committee/program	7 (4.4%)
Other	14 (8.8%)
Frequency of IPAC committee meetings	

Monthly or 12 times/year	29 (18.2%)
Less than monthly (5-11 times/year)	68 (42.8%)
Quarterly (every 3 months, 4 times/year)	57 (35.8%)
Bi-annually, as needed or rarely	<6 (3.2%)
Amount of paid educational time for IPAC staff	
None	6 (3.8%)
<1 work day / year	10 (6.3%)
1-5 work days / year	86 (5.4%)
>5 work days / year	44 (27.7%)
Unknown	13 (8.2%)
Infection control materials located in area accessible to all staff	153 (96.2%)
Frequency of Reviewing CDI data to review trends/identify clusters	
Rarely	12 (7.5%)
Regularly – every few months	9 (5.7%)
Regularly – every week or month	29 (18.2%)
Each time a case is identified	109 (68.6%)

IPAC – Infection prevention and control; CEO – Chief executive officer; CDI – *Clostridium difficile* infection