

AT A GLANCE: DHB SSI IMPROVEMENT STORIES

Timing is everything at Nelson Marlborough DHB

Nelson Marlborough DHB (NMDHB) has improved antibiotic timing and dose out of sight.

Antibiotic timing performance increased from 92 per cent in July to September 2013 to achieving the performance target of 100 per cent in April to June 2014. Antibiotic dose performance increased from 26% in July to September 2013 to 99 per cent in April to June 2014 (target is 95 per cent).

Former head of orthopaedics at NMDHB, Dr Allan Panting (and now Dr Alex Rutherford), as well as infectious diseases physician, Dr Richard Everts, and NMDHB SSII champions worked hard to engage surgeons and gain support for the SSII Programme.

Alongside this, the antibiotic prophylaxis intervention guidelines were published, evidence for the antibiotic intervention was provided to surgeons, and Dr Arthur Morris, clinical lead, SSII Programme, visited the DHB to discuss the SSII Programme and its interventions. The NMDHB team believe this range of factors helped to gain support and improve performance.

Written December 2014.

Relationships support SSI antibiotic improvements at Lakes DHB

Lakes DHB is improving well against the SSII Programme's antibiotic timing intervention, where the right antibiotic should be given within 0 to 60 minutes of knife to skin.

The DHB sits at 99 per cent compliance with this intervention, which they credit to building good relationships with surgeons and anaesthetists over time. They also contact the appropriate people if they notice that performance against this intervention is dropping, to find out why.

For correct antibiotic duration, Lakes DHB believes that the change in the process recommended in the intervention guidelines enhanced consistency, which helped them to improve performance.

Written December 2014.

Engagement with anaesthetists at Auckland DHB improves antibiotic dosing

Auckland DHB increased the dose of antibiotic prophylaxis that its orthopaedic patients receive, after data showed that the dose given often differed to best-practice guidance from the SSII Programme.

Auckland DHB's SSII Programme champions met with the clinical director and quality improvement lead for anaesthesia to discuss the data and provide evidence on the benefits of using two grams cefazolin instead of one gram.

Anaesthetists now receive a graph every month tracking their use of two grams cefazolin. Performance has risen from 85 per cent in July to September 2013, to achieving above the performance target of 95 per cent in January to March 2014 and sustaining 95 per cent in April to June 2014. If Auckland DHB's SSII champions had not engaged with anaesthetists, improvement may have remained unchanged or occurred at a slower rate.

Written February 2015.

Time out improves cefazolin dosing at Northland DHB

At Northland DHB steady improvement in the administration of two grams of cefazolin has been achieved.

This improvement in process has been supported by a change in the 'time out' checklist at the start of surgery: the surgeon now asks 'has two grams of cefazolin has been given', rather than, 'has the antibiotic been given'.

In the April to June 2014 surveillance period, Northland DHB reached 97 per cent compliance with the two grams cefazolin dosing intervention (target is 95 per cent.)

Written February 2015.

Waitemata DHB drops weight-based antibiotic dosing for hip and knee surgery

At Waitemata DHB, weight-based antibiotic prophylaxis dosing had been introduced not long before the implementation of the SSII Programme.

In late 2013, the SSII Programme made the recommendation for a single adult dose of two grams cefazolin as prophylaxis for hip and knee replacement procedures.

The DHB audited adherence to its new policy and decided to switch to the SSII Programme's single dose regimen to ensure adequate antibiotic prophylaxis for all patients. After reviewing data provided by the SSII Programme, it became apparent that weight-based dosing still resulted in a significant number of patients being under-dosed.

In the April to June 2014 surveillance period, Waitemata DHB reached 97 per cent compliance with the two grams cefazolin dosing intervention (target is 95 per cent.)

Written February 2015.