

CAN DO, WILL DO, ATTITUDE DRIVES IMPROVEMENT AT HAWKE'S BAY DHB



Hawke's Bay SSII Programme champions
Jacquie Cornish and Margaret Drury.

A 'can do, will do' attitude among the orthopaedic team at Hawke's Bay District Health Board (DHB) has enabled a smooth local roll-out of the Surgical Site Infection Improvement (SSII) Programme.

For SSII Champions Margaret Drury, an infection prevention and control advisor at the DHB and Jacquie Cornish, assistant charge nurse for orthopaedic and acute surgery, this has made all the difference to the success of the Programme so far.

"When we were getting ready to launch the Programme we knew we needed one hundred per cent buy-in from surgeons and other orthopaedic healthcare staff," said Margaret.

"I had signalled for a number of years the possibility of a national SSI programme and we had also been undertaking clean orthopaedic surveillance for a while, so luckily it wasn't a big surprise to our surgeons.

"We drew upon the already very good rapport and respect that we, particularly Jacquie, had with surgeons and anaesthetists and took a personal, informal approach to engaging each of them," she said.

"The response was always 'absolutely, we will do whatever you say we need to do'," added Margaret.

Rather than implementing the SSII Programme incrementally, Hawke's Bay DHB launched the Programme as a whole.

"We were already aligned with the skin preparation intervention and we stopped using razors many years ago," said Margaret.

"We focused our attention on the surgical antibiotic prophylaxis intervention, ensuring consistency in giving the 2 grams of antibiotic prophylaxis.

“We also spent time clarifying and educating the orthopaedic ward team about the three doses of cefazolin that should be given post-operatively, so that everyone knows what should be happening,” Margaret explained.

This includes healthcare staff being aware that certain data must be collected and if they aren't aware, Margaret always takes the opportunity to inform them about the importance of recording data accurately.

“If I don't have complete data I go and pull the notes. In one case I saw no antibiotics had been given intra-op or pre-knife to skin and that concerned me,” says Margaret.

“I investigated and the anaesthetist was a locum. He had given the antibiotics, but didn't fill out the form.

“That gave me an opportunity to educate that it must be filled out at the time it is administered, otherwise it is recorded as not being given.

“So the need to have complete and accurate data is essential,” she adds.

According to Margaret the biggest challenge has been collecting denominator data, because it was a whole new data set to collect. But some challenges have led to improvements.

“We amended the data collection form so that our perioperative staff don't need to turn the page; everything is on one page for them, making their job easier,” explains Margaret.

“Other than that it's been about keeping theatre staff up to date with some of the minor tweaks that have happened at a national level such as data that wasn't mandatory, but is now mandatory. It is getting easier now that the Programme is maturing.

“Data collection does have some resource requirements to capture and input it into the database, but it's not that onerous anymore. In fact it's quite quick because I have developed a process and everyone is generally very good at contributing their parts of the data,” says Margaret.

“I love a challenge. Before we couldn't compare apples with apples, but now we will have a rate of SSI arthroplasty surgery in 20 DHBs in New Zealand. That's a huge positive, and makes it all worthwhile,” she adds.

Story written in March 2014.

MARGARET'S TIPS

- Identify two or three key stakeholders and communicate with them on an individual basis in the first instance.
- Don't try to complicate a process that can be quite simple.
- Use your colleagues and your networks like IPC. Call upon your buddy DHB or other DHBs that are going through the same things. Use your regional groups too.
- Keep communicating!