

IMPROVING SSI DATA COLLECTION MAKES LIFE EASIER FOR WAITEMATA DHB

Collecting surgical site infection (SSI) data for the national orthopaedic SSI Improvement (SSII) Programme is now quicker and easier for Waitemata DHB (WDHB) thanks to help from its decision support team.

“Decision support made some excellent changes to the way we collect SSI data,” says Bev Hopper, WDHB’s SSII Programme data collector.

“The data we need is now predominantly captured electronically through our patient information management system and through a system called ‘safer sleep’ that anaesthetic technicians and anaesthetists use,” she adds.

This data populates Bev’s orthopaedic SSI data collection form, which is far easier than collecting most of the data manually, as in the past.

“It’s hugely beneficial to have a report that’s almost populated. The data I need to collect manually is getting less and less,” says Bev.

This is just one of several improvements that WDHB has established since implementing the national SSII Programme, which seeks to reduce harm caused to patients from SSIs.

In addition to providing a nationally consistent approach for collecting and reporting SSI data, the national SSII Programme promotes culture change and provides guidance on practice improvements that reduce SSIs.

One of WDHB’s biggest achievements has been engaging orthopaedic surgeons and anaesthetists and encouraging them to change the antibiotic they use for hip and knee arthroplasty. They have now moved from using gentamicin and cefazolin to cefazolin alone, in line with SSII Programme clinical practice recommendations.

“Dr Bhally, our infectious disease physician discussed the rationale for reducing the use of gentamicin to cefazolin alone. He explained that there wouldn’t be a sudden increase in infections when gentamicin was stopped,” says Bev.

In addition, WDHB changed from weight based antibiotic dosing, which wasn’t always occurring, to giving patients a standard two grams cefazolin, as recommended by the SSII Programme.

“We have made huge improvements in standardising our antibiotic use,” says Bev.

“We used data to show surgeons and anaesthetists that we should change to a standard two grams cefazolin.

“We were able to show them the weights coming through and the dosing of antibiotics compared to the weight. They could see very clearly what they were doing,” adds Bev.

“They agreed with the standardisation and it’s working really well,” adds Bev.

Correct use of cefazolin at WDHB has increased significantly since 2013. WDHB went from giving two grams cefazolin 65 per cent of the time in September to December 2013 to 97 per cent in April to June 2014 – achieving the national quality and safety marker.

WDHB is also making great gains in stopping antibiotic use after surgery within 24 hours. Continuing antibiotic use until drains or catheters are removed is of no known benefit, while excessive antibiotic use promotes antibacterial resistance without any effect on SSI rates.

“A lot of the improvements have come over time by really promoting the National Orthopaedic SSI Report each quarter,” says Bev.

To do this, Bev sends the report directly to the clinical director of orthopaedics, the quality department, director of nursing and director of infection control. She also prints the report as a booklet and leaves it on the consultants’ meeting table. Every quarter, the WDHB SSII team get time at the end of registrar training and they use this to present the latest data via PowerPoint slides.

“It shows everyone how well they are improving, and of course everyone really likes to see they are making improvements in the SSII Programme,” says Bev.

Story written March 2015.

IMPROVEMENT TIPS FROM BEV

- Communication with the right people: surgeons, anaesthetists, theatre and ward staff to ensure they understand the SSII Programme and the important role they play within it.
- Distributing and presenting the SSII Programme’s National Orthopaedic SSI Report among the key groups above. Highlight improvement that has occurred and point out focus areas for improvement.
- Talk about the SSII Programme. Keep awareness about the SSII Programme high, particularly within the orthopaedic department.