

<p>The 4 infection prevention Best Care Always! Interventions:</p> <ul style="list-style-type: none"> • VAP: Ventilator-associated Pneumonia • CLABSI: Central line - associated Bloodstream Infections • SSI: Surgical Site Infections • UTI: Urinary Tract Infections <p>Best Care Always Pilot Intervention:</p> <ul style="list-style-type: none"> • Antibiotic Stewardship 	<p>Prevent surgical site infections (SSI): May 2011</p> <p>Background:</p> <ul style="list-style-type: none"> • Surgical site infections are the second most common type of adverse event occurring in hospitalised patients in the United States. Surgical complications, including surgical site infections, were the most frequent type of adverse event reported in the 2004 Canadian Adverse Event Study. • Surgical site infections can increase mortality, re-admission rate, length of stay and costs in terms of more out-patient / wound clinic visits, emergency room visits, radiology services, laboratory investigations, antimicrobial therapy and home wound care services for patients who acquire a healthcare-associated SSI. <p>Intervention:</p> <p>There are 4 key components of the SSI Bundle:</p> <ul style="list-style-type: none"> • Appropriate use of prophylactic antibiotics (including appropriate selection, timing and duration / discontinuation) • Appropriate hair removal: Avoid shaving; where depilation is necessary, use of clippers or depilatory creams • Maintain post-operative glucose control (*for major cardiac surgery patients cared for in an ICU) • Post-operative normothermia (** for all open abdominal surgery patients). <p>*Glucose Control: Review of evidence shows that the degree of hyperglycemia in the postoperative period correlates with the rate of SSI in patients undergoing major cardiac surgery. Although glucose control may benefit other surgical populations, for the BCA Campaign, this measure will apply only to the cardiac surgery population for the purposes of national measurement.</p> <p>**Normothermia: Evidence suggests that patients have a decreased risk of surgical site infection if they are not allowed to become hypothermic during the peri-operative period. Although temperature control may benefit other surgical populations, for the BCA Campaign, this measure will only apply to the colorectal or open abdominal surgical population for the purposes of measurement of compliance.</p> <p>Additional evidence-based components of good quality surgical care may be added by each individual facility.</p> <p>Compliance with the SSI bundle has been most successful when all elements are executed together.</p>
<p>Goal:</p> <p>To reduce Surgical Site Infections (SSI) by consistently and effectively implementing all elements of the “SSI Bundle.”</p>	
<p>A “bundle” is a collection of processes needed to effectively and safely care for patients undergoing particular treatments with inherent risks. Several interventions are “bundled” together and, when combined, significantly improve patient outcomes.</p>	

<p>References and Resources:</p> <p>1. Institute for Healthcare Improvement. http://www.IHI.org</p> <p>2. Safer Healthcare Now campaign. http://www.saferhealthcarenow.ca</p> <p>3. A Compendium of strategies to prevent healthcare-associated infections in acute care hospitals: <i>Infect Control Hosp Epidemiol</i> 2008; 29: S12 – S21. http://www.shea-online.org/about/compendium.cfm</p>	<p>We are engaging with our collaborative partners to understand any key differences for the South African setting and will be updating the SSI one-pager as this work is finalised.</p> <p>For more in depth information and implementation guidelines consult the “Getting Started Kits”</p> <p>Intervention Measures:</p> <p>The aim is measurement of compliance to the elements and individual goals will be set by each participating facility.</p> <p>Examples of measurements and goals of compliance are:</p> <ol style="list-style-type: none"> 1. SSI rate: Goal - decrease the SSI rate by 30% in one year. <p>Definition of SSI:</p> <p>An infection related to a surgical intervention</p> <ul style="list-style-type: none"> • that occurs within thirty days of surgery; <p style="text-align: center;">OR</p> <ul style="list-style-type: none"> • within one year of surgery if an implantable device is placed. <p>SSI’s are further differentiated as superficial, deep incisional or organ/ space, depending on the location of the infection within the wound.</p> <p>There must be no evidence that the infection was present or incubating at the time of incision.</p> <p><i>This (summarised) definition must be read together with the full CDC/NHSN surveillance criteria in order to diagnose a SSI in practice.</i></p> <p>The Website contains the full Getting Started Kit, and links to other resources for this strategy.</p>
<p>Institute for Healthcare Improvement. 5 Million Lives Campaign www.ihl.org</p> <ul style="list-style-type: none"> • Safer Healthcare Now! Campaign. www.saferhealthcarenow 	
<p>We wish to thank and acknowledge the Institute for Healthcare Improvement (IHI) and the Canadian Safer Healthcare Now! campaigns, particularly the extensive resources made available on their websites. Links are provided to both these websites for further support.</p> 	