

Preventing Surgical Site Infections at Ross Memorial Hospital

Background

- On April 30, 2009, eligible hospitals in Ontario, including the Ross Memorial Hospital began posting their Surgical Site Infection (SSI) prevention percentages on their websites.
- The goal of this new patient safety indicator is to ensure one of the most important steps in preventing SSIs is being used i.e., ensuring that antibiotics are administered at a certain time, just before a hip or knee joint replacement surgery.
- Studies have shown that antibiotic prophylaxis administration just before a joint replacement is a good way to reduce the chance of infection.
- The public reporting of this indicator will reveal the percentage of all eligible patients who get antibiotics at the right time, just before a "first time" joint replacement surgery.

What is a Surgical Site Infection?

A surgical site infection (SSI) occurs at the site of a surgical incision. Germs can get into the incision area, and cause an infection. It can develop within 30 days of an operation, or sometimes even up to one year if an implant (such as a knee or hip joint implant) is used. Infections can be minor, or occasionally they can increase complications that result in a longer length of stay in the hospital, or an increased readmission rate for patients. Post-operative SSIs are the most common health care-associated infections in surgical patients.

How do patients get a surgical site infection?

There are various factors that could put a patient at risk of an SSI. For example, patients that have poor circulation, certain medical conditions, or shave themselves before surgery (this causes little nicks and cuts in the skin where germs can enter) have an increased risk of infection. To try to reduce the number of surgical site infections, the Ross Memorial ensures preventative measures are practiced, such as the administration of prophylactic antibiotics, and clipping (not shaving) of body hair. Our hospital is committed to keeping our patients as safe as possible from infection.

What is being publicly reported with the SSI prevention percentages?

The SSI prevention percentage refers to the use of antibiotics that help prevent surgical site infections from occurring in hip and knee joint replacement surgeries – that is, the percentage of hip/knee replacement surgical patients that received prophylactic antibiotic within the appropriate time prior to surgery during the reporting period. Hospitals are not measuring actual surgical site infections.

The first reporting period will cover March 2009 only. Future reporting periods will include data from the three months prior to the reporting month. The Ministry of Health and Long-Term Care will post the previous quarter's data, by hospital site, on its website, www.ontario.ca/patientsafety.

Why are hospitals only reporting on hip and knee joint replacement surgeries for the SSI prevention percentage?

Reporting on joint replacement surgeries is a good place to start. Hip and knee joint replacements are common surgeries in a hospital. Studies have shown that antibiotic prophylaxis administration just before a joint replacement is a good way to reduce the chance of infection.

How frequently will hospitals have to publicly report on their SSI prevention percentages?

Hospitals will to enter their data into the Web-Enabled Reporting system for SSI prevention on a monthly basis. Public reporting or posting to the website will occur on a quarterly basis occurring every April, July, October and January. The first reporting period will cover the month of March.

What is the method of calculation for the SSI prevention percentage?

The method of calculation is the percentage of primary hip/knee surgical patients who are given an antibiotic starting at an appropriate time prior to the skin incision.

Percent of knee/hip joint replacement surgical patients who received "on-time" Prophylactic Antibiotics # of Hip/Knee joint replacement surgeries who received usual antibiotics within 60 min of skin incision # of Hip/Knee joint replacement surgeries who received vancomycin within 120 min of skin incision

Total number of patients during the reporting period who had a primary knee/hip joint replacement surgical procedure

X 100 %

Where will the public be able to access this information?

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Beginning April 30, 2009, the public can access the Ross Memorial Hospital's SSI prevention percentages on our website, www.rmh.org, or on the Ministry of Health and Long-Term Care's site, www.ontario.ca/patientsafety.

Will you be reporting on deaths caused by Surgical Site Infections?

The goal of SSI prevention is to ensure one of the most important steps in preventing an SSI is being used. We are reporting on the compliance of a best practice used to help prevent surgical site infections, not the rate, of SSIs or deaths caused by SSIs.

Can the SSI prevention percentages be used as a guide to choosing hospitals?

No. SSI prevention percentages should not be used as a guide to choosing which hospital to seek care at. These percentages represent only a snapshot of an isolated area of a hospital's performance. Like other indicators, it is important to look at SSI prevention percentages in a broader context.

What can patients do to help reduce their chances of infection?

Follow the pre-operation instructions given to you by your surgeon and health care team. Frequent hand cleaning is another way to prevent the spread of infection. Hand hygiene involves everyone in the hospital, including patients.

More patient-specific information is available at www.ontario.ca/patientsafety and www.oha.com/patientsafetytips and www.oha.com/cleanhandsprotectlives.

Our Commitment

Public reporting of our patient safety scores is important because it will allow us to work with a standardized approach across the province. Our commitment to our patients is one of safety and continuous improvement. We monitor our results closely, identifying areas for improvement and implementing strategies to ensure our patients are safe.

Who can I contact to learn more?

Ross Memorial's Infection Prevention & Control team can be reached at 705-324-6111 Leanne Harding ext 4508 Sharon Connell ext 4527