Reducing Hysterectomy SSI Using a Bundled Approach

February 2018

A partnership of the Healthcare Association of New York State and the Greater New York Hospital Association
# Agenda

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<th>Speaker</th>
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<td>NYSPFP Staff</td>
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<td>SSI Rates in New York</td>
<td>NYSPFP Staff</td>
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<td>Yale GYN SSI Reduction Project: An Effective and Sustainable Healthcare Initiative for Reducing the SSI Rate in Hysterectomy Using a Gynecology Specific Bundle</td>
<td>Linda L. Fan, MD, FACOG, Yale School of Medicine</td>
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<td>Heidi Rillstone, RN, Yale New Haven Hospital</td>
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<td>Hospital Questions and Discussion</td>
<td>Hospital Participants Facilitated by NYSPFP Staff</td>
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Why Focus on Surgical Site Infections?

- 2.6% of 30 million operations per year are complicated by SSI (800,000 – 2 million SSI annually)
- SSI accounts for 38% of HAI in surgical patients
- SSIs are associated with:
  - Increased length of stay
  - Increased hospital costs (estimated increase of $1,300 – $5,000 per case)
  - Increased patient morbidity and mortality
  - Increased readmission rates

References:
2. Poulson KB, Bremmelgaard A, Sorensen AI, Raahave D, Petersen JV. Epidemiol Ifect. 1994; 113(2): 283-295
NYSPFP SSI SIR: Colon

Baseline 1/15 – 12/15: 1.15
Comparison 7/17 – 9/17: 0.87
Percentage change: 24.43 %
NYSPFP SSI SIR: Hip Replacement

Baseline 1/15 – 12/15: 1.00
Comparison 8/16 – 10/16: 0.90
Percentage change: 10.73 %
NYSPFP SSI SIR: CABG

Baseline 1/15 – 12/15: 1.03
Comparison 7/17 – 9/17: 1.04
Percentage change: 0.51%
NYSPFP SSI SIR: Hysterectomy

Baseline 1/15 – 12/15: 1.09
Comparison 7/17 – 9/17: 1.16
Percentage change: 6.19%
NYS compared to National Abdominal Hysterectomy SSI Rate

-40.6% improvement from baseline period (07/01/2015 – 12/31/2015) to performance period (07/01/2017 – 09/30/2017)

Above graphic From CMS RAISE report generated in December 2017.
Surgery Bundle Elements Applicable Across Other Surgical Service Lines

- Normothermia
- Glucose Control
- Antimicrobial Prophylaxis
- Increased Perioperative Oxygenation
- Skin Preparation
- Clean Standardized Fascia Close
- Wound Management
- Colon Specific: Mechanical Bowel Preparation in Combination with Oral Antibiotics

Materials available on www.nyspfp.org
# Implementation of Cross Applicable Bundle Elements

<table>
<thead>
<tr>
<th>Surgical subspecialties where implementation of bundle has begun</th>
<th>% of hospitals that have started implementation in NYSPFP (n=108)*</th>
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<tbody>
<tr>
<td>Hysterectomy</td>
<td>50%</td>
</tr>
<tr>
<td>Cardiac Surgery</td>
<td>15%</td>
</tr>
<tr>
<td>Orthopedics (Hip/Knee prosthesis)</td>
<td>57%</td>
</tr>
<tr>
<td>Our hospital has not begun</td>
<td></td>
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<tr>
<td>implementation of the colon bundle on any other surgical subspecialties</td>
<td>23%</td>
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<tr>
<td>Other</td>
<td>15%</td>
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*Data as of 2/12/2018
Yale GYN SSI Reduction Project: An Effective and Sustainable Healthcare Initiative for Reducing the SSI Rate in Hysterectomy Using a Gynecology Specific Bundle

Linda L. Fan, MD, FACOG
Yale School of Medicine

Heidi Rillstone, RN,
Yale New Haven Hospital
Hospital Discussion and Questions

Hospital Participants
Facilitated by NYSPFP Staff
Next Steps

- Contact your project manager to discuss:
  - Implementing hysterectomy bundle elements in your hospital’s workflow
  - Hardwiring the advanced colon bundle elements into workflow
  - Consider adding Early Recovery After Surgery (ERAS) elements when applicable to all surgical lines in your quality improvement plans.