



HEALTH QUALITY & SAFETY
COMMISSION NEW ZEALAND
Kupu Taurangi Hauora o Aotearoa

Surgical Site Infection Improvement Programme champions webinar

SSII Surgical Site Infection
Improvement Programme



15 March 2023

Opening karakia

E te huinga
Whāia te mātauranga, kia mārama
Unuhia te anipā,
te nguha, kia mahea
Kia whai take ngā mahi katoa
Tū māia, tū kaha
Aroha atu, aroha mai
Tātou i a tātou katoa
Hui e tāiki e

For this gathering
seek knowledge, for understanding
draw out the anxiety
and uncertainty, clear it away
have purpose in all that you do
stand tall, be strong
let us show respect
for each other.
It is complete



Agenda

Time	Item	Presenter
1.00 pm	Welcome Opening karakia	Amanda Wood – IPC specialist Jeanette Bell – project manager
1.05 pm	District team introductions	Waitematā, Waikato, Taranaki, Wairarapa, Capital, Coast and Hutt Valley
1.20 pm	Update from national monitor	Michelle Taylor
1.40 pm	Data analyst update	Grace Clendon
1.50 pm	VLAD FAQs General update	Ruth Barratt – IPC specialist
1.55 pm	Q&A	Amanda Wood
1.55 pm	Close Closing karakia	Amanda Wood Jeanette Bell

District team introductions and hot topics

Introducing the SSIP champions from:

- Waitematā
- Wairarapa
- Taranaki
- Capital, Coast and Hutt Valley
- Waikato



Waikato SSIIP champions

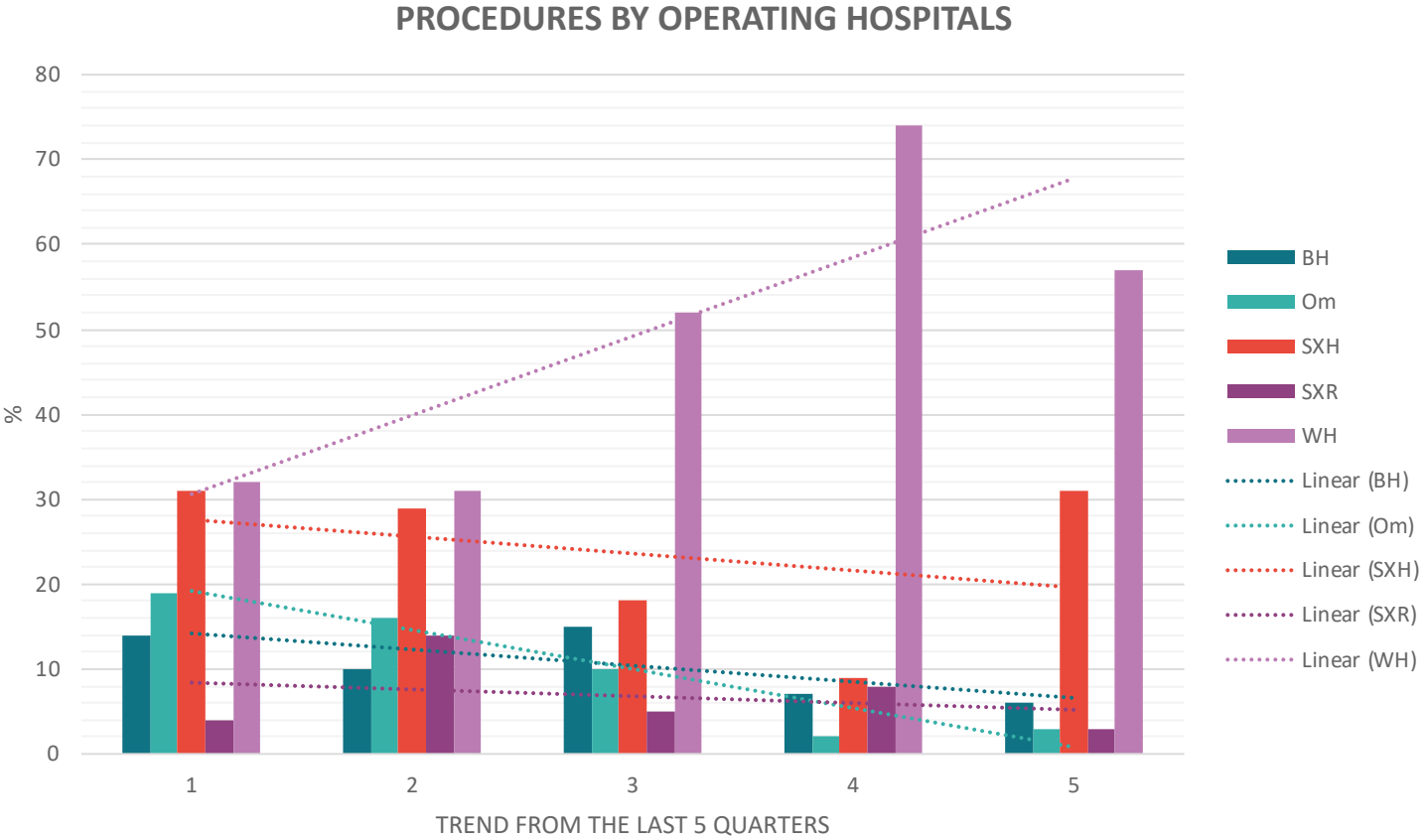


Under surveillance portfolio and managed by:

- Siew Ling Ong CNS-IPC
- Louise Blane RN IPC



Keeping track of the number of procedures and ensuring we capture them all



How do we know we have captured all our procedures?

- Linked in with our business analyst
- Gave her access to our database to 'dump' all the procedures – in hospital and outsourced
- It was with this link that we found we had engaged a new contractor, which wasn't captured in IC Net



National monitor update

Michelle Taylor

Clinical support lead

National ICNet Service Hub



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Commission ICNet systems review

SSI data collection forms

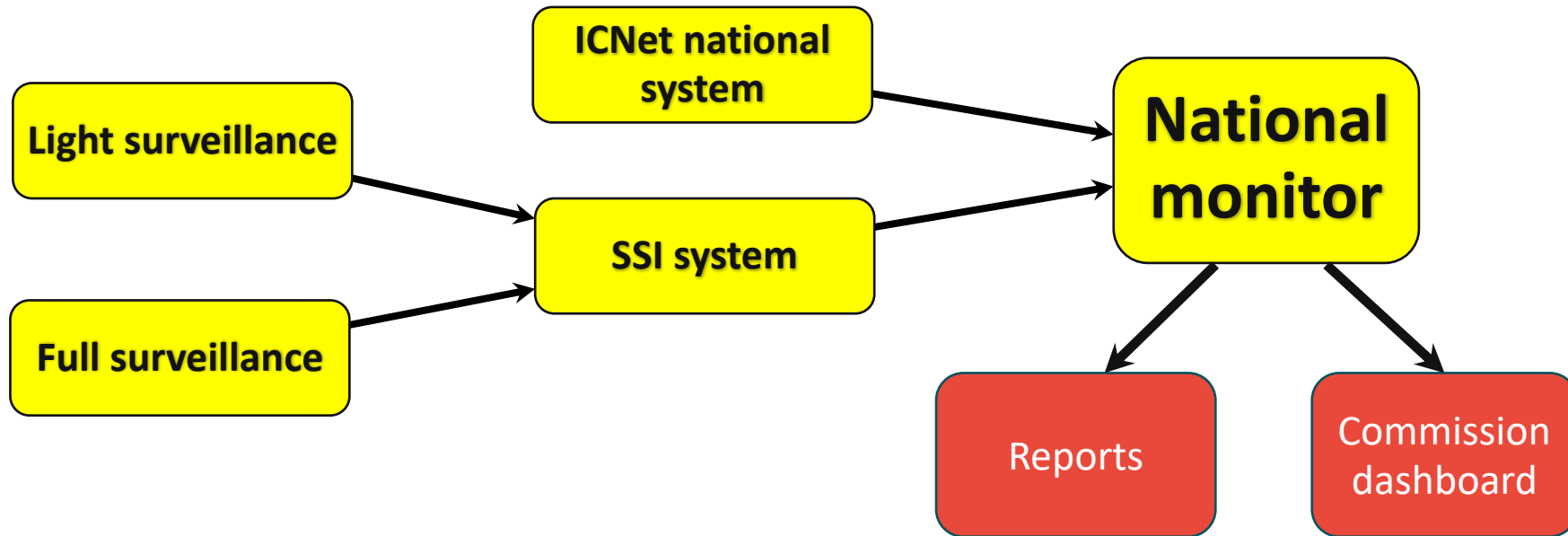
- Electronic data collection form
- Input data
- Full surveillance
 - Complete all data fields
- Light surveillance
 - CSV upload

National monitor

- Data warehouse
- Reporting system
- Receive both orthopaedic and cardiac surgical data

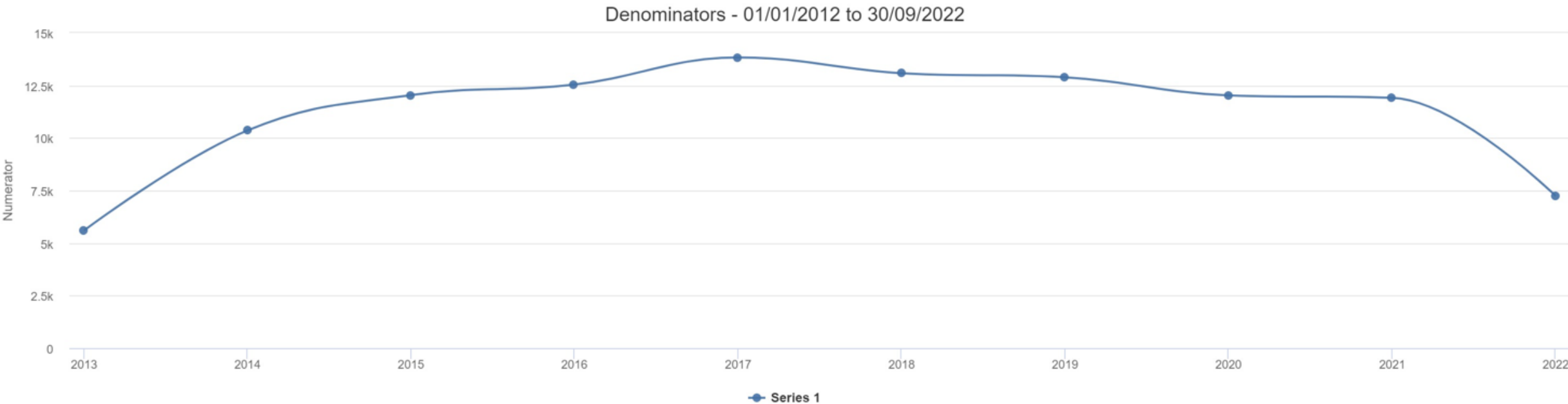


Data flow



Number of surgeries submitted to national monitor

January 2013 – September 2022



Common data entry errors

Common orthopaedic data issues

- ***Bilateral versus unilateral***
- Age: babies having hip replacements
- Organ space: cardiac infection
- Light surveillance: infection and data not all completed

Common cardiac data issues

- Paediatric weight missing



National monitor questions



Data analyst update

Grace Clendon

Orthopaedic and cardiac dashboard updates

New look to match Commission colours

SSII orthopaedic surgery – overview



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Summary of findings for July to September 2022

This report presents the results of the national orthopaedic surgery Surgical Site Infection Improvement Programme (SSIIIP) for the period 1 July 2013 to 30 September 2022. The dashboard is refreshed quarterly. (Last published December 12, 2022).

Since 1 October 2020, health districts have been able to choose whether to conduct light surveillance, or to continue with full surveillance. Under light surveillance, process measure data is only required for SSI cases, so quality and safety marker reporting of the SSI process measure ends for districts when they adopt this model. Currently 14 districts have opted to move to light surveillance (see table below). We are still reporting full surveillance districts' process measures but not an overall New Zealand result from October 2020 onwards.

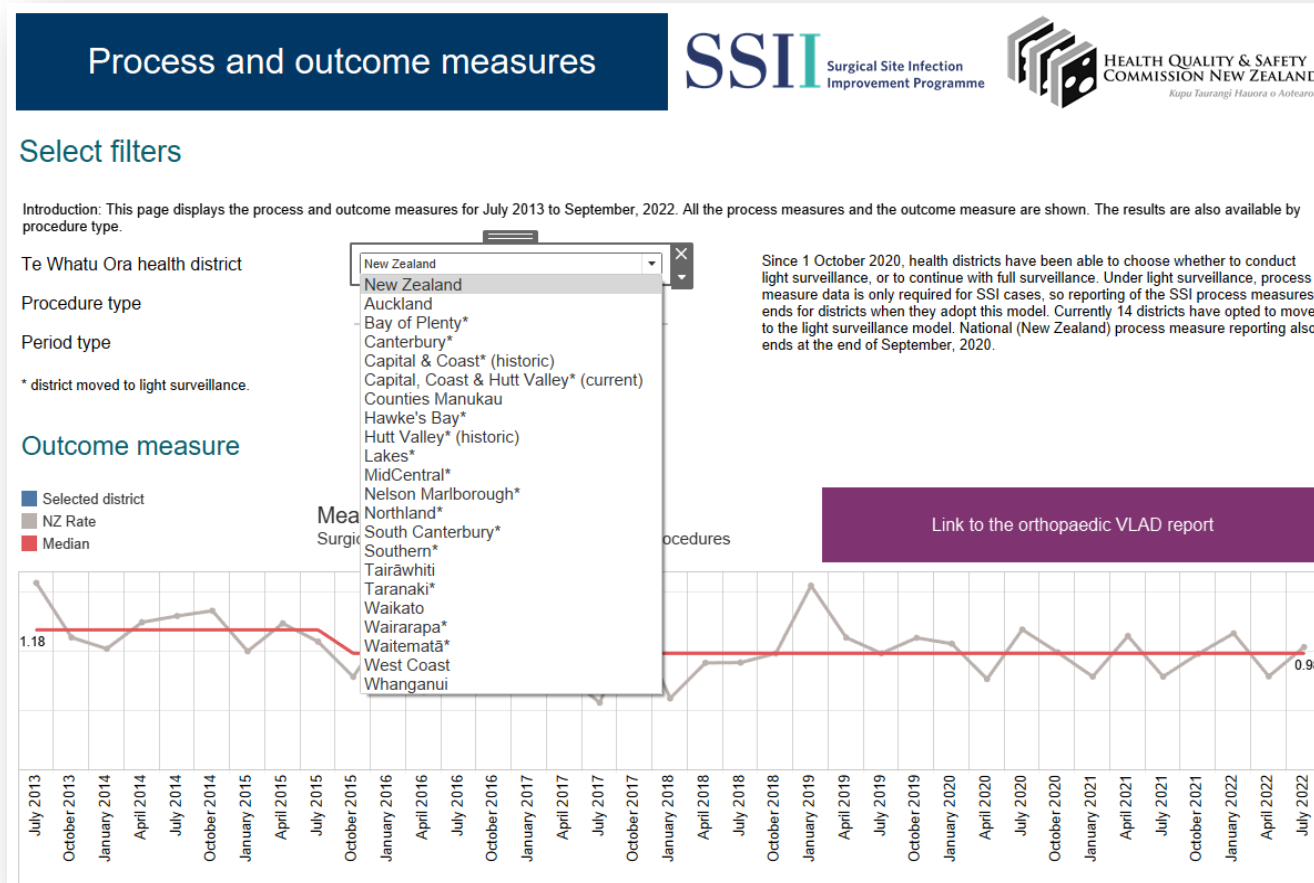
Incomplete data will not be displayed.
This dashboard uses the new Te Whatu Ora – Health New Zealand district names to refer to the former district health boards. Learn more [here](#).

Procedures and infections

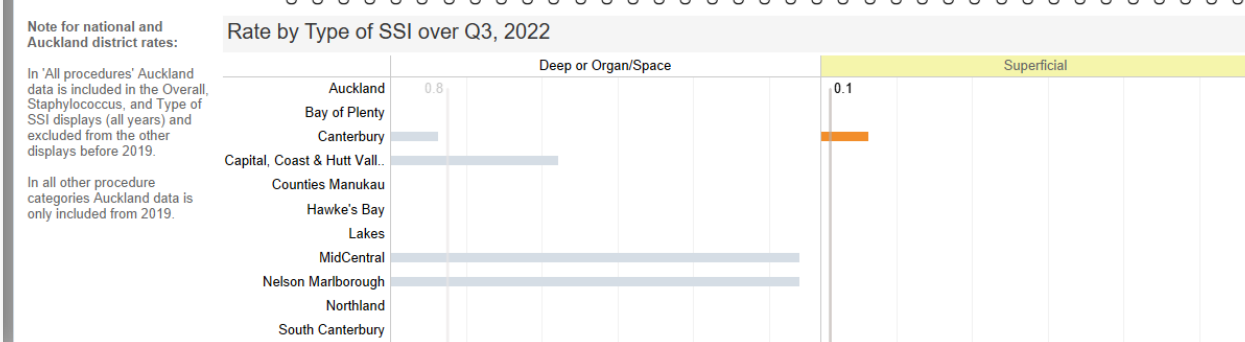
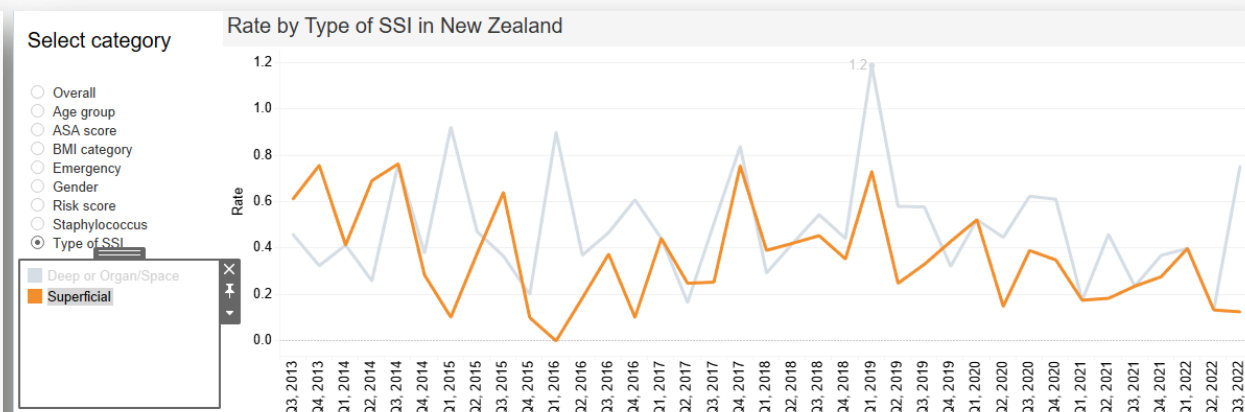
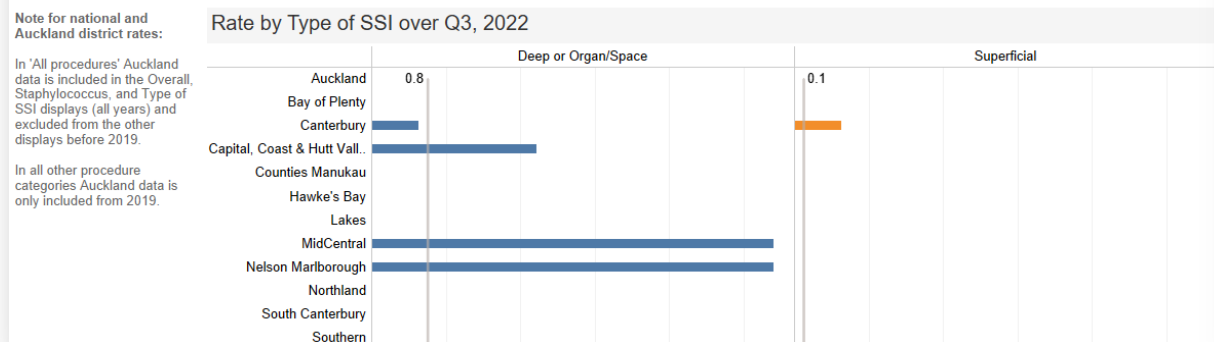
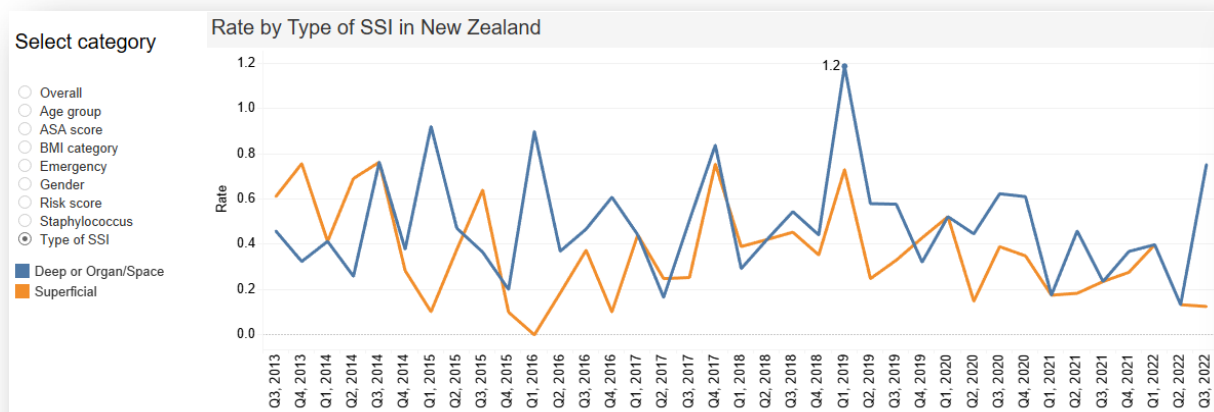
- 19 health districts performed 1929 hip and knee arthroplasty procedures.
- There were 20 surgical site infections (SSIs). Four were superficial and 16 were deep or organ/space.
- The SSI rate per 100 procedures for the quarter was 1.0 percent (95 percent CI 0.67–1.60).
- The cumulative SSI rate is 1.0 percent (95 percent CI 0.97–1.10).



- Changing from DHBs to Te Whatu Ora districts
- Have kept shortened district names in alphabetical order



- New ability to highlight variables on risk factor analysis graphs
- New feature to highlight variables on risk factor analysis graphs
- Click on the line or legend to highlight; click on it again to stop



Variable life-adjusted display (VLAD) FAQs

Infections Methodology

▼ DHB


Select DHB

Whanganui

Enter password

Show chart ⓘ

Surgical site infection orthopaedic variable life-adjusted display chart

 **Download**
[Data \(csv\)](#)
[Metadata \(csv\)](#)
[FAQs\(pdf\)](#)

The surgical site infection (SSI) variable life-adjusted display (VLAD) chart is a way of tracking orthopaedic SSIs in your district health board (DHB). It shows **cumulative expected against observed infections** in your DHB. It was developed to support DHBs using both full and light surveillance monitoring. The model for DHBs using full surveillance monitoring is risk-adjusted while the model for DHBs using light surveillance monitoring is not. The status boxes provide a warning or alert of increases in SSI risk.

Together, the VLAD chart and the status boxes give a picture of performance against expected while also serving as a system to detect an increase in SSI risk.

At a glance:

The jagged black **VLAD line** tracks the outcome of each orthopaedic procedure. When a procedure results in an infection, the VLAD line goes down and when there is a procedure with no infection, it goes up. The VLAD chart **shows cumulative excess or avoided infections**.

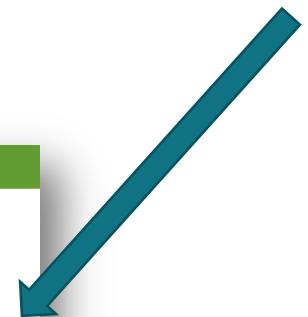
The **status box** indicates the following:

- If the status box is red and says 'Alert', there has been a statistically significant increase in SSI risk. The red dot on the chart marks when the cumulative increase in SSI risk exceeded the threshold for statistical significance.
- If the status box is yellow and says 'Warning', there may have been an increase in SSI risk, but it is not yet statistically significant. The yellow dot on the chart marks when the cumulative increase in SSI risk exceeded the warning threshold. A series of yellow dots is a series of procedures that remain above the warning threshold. They will show as a yellow line. This is a period of time when the SSI risk is still increased.
- If the status box is green and says 'Normal', there is no indication of an increase in SSI risk.
- The status is calculated based only on procedures occurring in the 12 months before the most recent procedure in each DHB.

Whanganui

Status box

Normal



General update

- March IPC newsletter – check your email spam/junk
- New website resources: www.hqsc.govt.nz/our-work/infection-prevention-and-control
- World Hand Hygiene Day planning
- Peripheral intravenous catheter collaborative planning
- Surgical skin antiseptics agents
- Seeking patient/consumer stories



Have you a question about the SSIP?



Upcoming SSIIP dates



March

- 31 March: quarterly QSM, SSIIP dashboard and VLAD reports published
- 31 March: end of SSIIP quarter

April

- 1 April: quarterly SSIIP investigation summary form Q1 2023 investigations due
- 12 April 1.00 pm: quarterly SSIIP investigation meeting
- 28 April: quarterly SSIIP data for Q4 2022 procedures due

Closing karakia

Kua mutu a tātou mahi
Ka tae te wā
mō te whakairi te kete
I te kete kōrero,
I te kete whakaaro
Hei tiki atu anō mā tatou
Tauwhirotia mai mātou katoa
Ō mātou hoa
Ō mātou whānau
Āio ki te Aorangi.
Hui e tāiki e.

Our work has finished
the time has arrived
to gather one's thoughts in the basket
that contains discussion
and concepts
that we may use it again in the future
protect us all
our colleagues
our families
peace to the universe.
it is complete.