



An Initiative of the Florida Hospital Association  
Hospital Improvement Innovation Network

## Reducing Surgical Site Infections – Colon

### Resource Guide

*As a Mission to Care FHA HIIN participating hospital, you have shown great dedication and commitment to eliminating harm to patients in your organization. While great progress is being made in eliminating harm across multiple measures, reducing surgical site infections (SSI) for patients undergoing colon procedures continues to be a challenge for almost 50 percent of participating hospitals, with many seeing an increase in the number of harms related to SSI-Colon.*

#### Why is it Important?

Surgical site infections in general are some of the most common hospital associated infections (HAI) reported and can be disproportionately higher among patients that have had colon surgery. Patients who acquire SSI are known to have significant patient complications with adverse clinical outcomes.

Preventing SSI-Colon requires a multidisciplinary approach with patient and family engagement to successfully address the complexity of multiple variables specific to patients and patient populations, processes, organizational factors and surgical practice.

#### Recommendations

As an organization who is working to reduce SSI-Colon, please take the time to review some of the fundamentals that may help to propel you toward eliminating this harm.

##### 1. Perform a Gap Analysis

Ensure that you have in place, standardized, evidence-based protocols specific to colon surgeries that include the following:

- Appropriate perioperative skin antisepsis practices and other basic aseptic techniques
- Protocols for screening/decolonization of patients preoperatively
- Antibiotic guidelines that address timing, selection, dosing/re-dosing and discontinuation
- Manage and monitor patients perioperatively for normothermia, glucose control and oxygenation

##### 2. Data Review

It will be necessary to review retrospective data to determine any priorities or trends that are contributing to the SSI-Colon patient outcomes. You may find that the identified trends align with the “gaps” identified in the gap analysis. Important things to look for with respect to trends are:

- Patient demographics and co-morbidities
- Clinical practice alignment with protocols
- Providers
- Location
- Organisms

##### 3. Identify a Provider “Champion” such as a Surgeon

Providers are a critical member of the multidisciplinary team and can provide great insight and support.

#### 4. **Cross-Cutting and Innovative Strategies**

In healthcare, we continue to learn how fundamental care can impact the recovery and outcomes for our patients. Accelerate your improvement by ensuring these fundamental practices are in place to support the ongoing efforts to reduce “harm” in your organization:

- **UP Campaign**

The [SOAP UP](#) component of the [UP Campaign](#) reinforces the importance of basic hand hygiene practices that will reduce the risk of HAI including SSI.

- **Enhanced Recovery After Surgery (ERAS)**

ERAS is a group of standardized, multimodal interventions all designed to improve patient communication, satisfaction and outcomes and reduce length of stay. We currently see that hospitals who are early adopters of the ERAS bundle have fewer patients experiencing SSI. Elements of the bundle include:

- Diet
- Fluid
- Pain Management
- Ambulation

For more information on how ERAS has had a significant impact on reducing SSI, view the virtual events and other resources available online:

- [Recording](#) of a webinar presented by Centers for Medicare and Medicaid Services (CMS) National Content Developers on SSI reduction
- [The Joint Commission Center for Transforming Healthcare - Reducing Colorectal Surgical Site Infections Project](#)
- [AHRQ ERAS Patient Safety Project](#)
- [Centers for Disease Control and Prevention's National Healthcare Safety Network \(CDC NHSN\) Surveillance for SSI Events](#)
- [ERAS Safety Network to Accelerate Performance \(SNAP\):](#)
  - [Colorectal Surgery Summary Recommended Resources](#)
  - [Colorectal Order Set for Pre-Admit Testing/Pre-Op Holding Orders](#)
  - [A Guide to Bowel Surgery](#)

#### 5. **Additional Resources**

- [SSI Change Package](#)
- [SSI Top Ten Checklist](#)
- [SSI Documentation Review Checklist](#) (NHSN)
- [SSI Review Template](#)
- [SSI Prevention Strategies](#)
- [Surgical Case Review Template](#)
- [CDC HICPAC Guideline – GAP Analysis for SSI](#)
- [Colorectal SSI Prevention Bundle](#)
- [Colorectal Surgery Surgical Site Infection Bundle](#) (Mayo Clinic)
- [New Study: Improving SSI Outcomes through a Colorectal SSI Prevention Bundle](#) (*AORN Journal*, May 2018)
- [Supplemental Guidance for the Prevention of SSI: An Evidence-Based Perspective](#) (Wisconsin Division of Public Health)
- [Watch Past Virtual Trainings](#)
- [HRET HIIN Resource Library](#)
- [SOAP UP](#)

### **What is your organization doing to reduce SSI-Colon?**

FHA is interested in learning how you are working to eliminate HAI specific to SSI-Colon in your organization. If you have any questions, or would like to network with hospitals who have achieved success in reducing or eliminating SSI-Colon, we urge you to contact the FHA Improvement Advisor Team at [HIIN@fha.org](mailto:HIIN@fha.org) or 407-841-6230.