IHFD SSI DASHBOARD

INFORMATION ON HOW THE INDICATORS ARE CALCULATED

How IHFD SSI INDICATORS are calculated:

The IHFD collects data on hip fracture patients (aged 18 years and over) through a portal on the HIPE system in collaboration with the Healthcare pricing office and reports on patients over the age of 60.

 The inclusion and exclusion criteria for Surgical site infection dashboards.

 INCLUSION CRITERIA Analysis is based on IHFD records as captured on the HIPE IHFD Portal software. It includes cases that were: (i) discharged cases a quarter in arrears (ii) diagnosed on HIPE with either a hip fracture due to injury or with a specified type of fracture, other than periprosthetic, on IHFD add-on screens. (iii)aged 60 years and over. (iiii) had an operation

EXCLUSION CRITERIA (i) patients aged 59 years or under (ii) Non operative management

INDICATOR 1: The operative site was prepared with an alcohol containing antiseptic solution prior to incision
Out of all the patients who had surgery, what was the percentage who skin was prepared and cleansed using an antiseptic solution.
Analysis:
The total number of patient's who had surgery and answered 1.2.8 below– expressed as a percentage.
Cases were included if answered yes to:

1.iodine with alcohol

2. Chlorohexidine with alcohol/chloroprep

8.Other

Additional Information: Click on the details

Display the Numerator and dominator of solution used compared to National

INDICATOR 2: Surgical Prophylactic antibiotics (SAP) are administered prior to surgery.

Out of all the patients who had surgery, what was the percentage who received SAP prior to surgery
Analysis:
The total number of patients who had surgery that answered yes to received SAP
Cases were included if
Answered yes to received SAP prior to surgery – expressed as a percentage.

INDICATOR 3: Percentage of patients that had a dressing applied

Out of all the patients who had surgery what percentage had a wound dressing applied to cover the surgical wound in the operating room.

Analysis:

The total number of patients who had surgery and had a dressing applied in the operating room - expressed as a percentage.

Cases were included if they answered one of the options below:

- o 01.aquacel
- o 02.dry dressing ie mepore
- o 03. jubilee method
- o 04. mepilex
- o 05. opsite
- o 06. pressure dressing
- o 07.negative pressure dressing
- o 88. Other

Additional Information: Click on the details

Will display the numerator and denominator of the skin closure method used in surgery.

- o Sutures
- o Staples
- o Glue
- o Combination
- o Other

INDICATOR 4: Duration of Surgery

Analysis**:** Number of patients that had surgery, Time to knife to skin and finish time populated

Cases are included

If the time is less than 2 hrs in duration this will be displayed as % of patients who had surgery in <2hrs

INDICATOR 5: Percentage of patients diagnosed by a clinician of having a surgical site infection

Analysis:

Number of patients based on dataset definition who had an operation and had a surgical site infection diagnosis documented (Yes)– expressed as a percentage categorised by superficial, deep Organ/Space displayed in a bar graph and number.

Cases were included if answered:

Yes

KQI 6: Was normothermia maintained

Definition:

Within 1hour of the end of an operation, a patients temperature is between 35.5 ° and 37.5 ° non rectal. Between 36 ° and 38 ° for a rectal measurement. Temperature should be recorded in the recovery room.

Analysis:

The total number of patients who had surgery and were diagnosed as having a surgical site infection diagnosed by a clinician and answered yes to having normothermia maintained– expressed as a percentage.

Cases were included if:

- o If had surgery
- o Had a surgical site infection superficial deep, organ/space

Coverage

Number of cases with IHFD data: Displays the number of hip fractures that have the additional data added by the local audit coordinator within the IHFD portal dataset.

Expected number based on HIPE cases: Displays the number of cases coded by HIPE as a hip fracture that we expect the local audit coordinator to review and add the additional data required within the IHFD portal dataset