

Ministry of Health
and Long-Term Care

Ministère de la Santé
et Soins de longue durée



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February 23, 2009

Dear Colleagues:

**NEW - REVISED REQUIREMENTS FOR REPORTING ON SURGICAL SITE
INFECTION PREVENTION (SSI) ON APRIL 30, 2009**

Data for SSI will be required for March only. For future reporting, data for 3 months will be required for this indicator.

SSI data is to be reported for all primary full and partial hip and knees joint replacements (not revisions) by all hospitals performing these surgeries.

A letter from John McKinley, ADM, Health System Information Management and Investment (HSIMI), with revised data definitions and collection processes for SSI will be sent to hospitals in the near future.

Surgical Site Infection Prevention

Since the OHA webcast on February 3, 2009, it has become apparent that there is a need to provide greater clarity on the SSI indicator. As a result, the Ministry has agreed to revise the reporting requirements for SSI. This revision has been made in collaboration with the Ontario Hospital Association and Safer Healthcare Now.

SSI data is to be reported for all primary total, partial and hemi hip and knee joint replacements (not revisions) by all hospitals performing these surgeries.

Time for antibiotic administration will be measured from the antibiotic **infusion start time to skin incision start time**. The goal should be to have the antibiotic completely infused within 0 to 60 minutes of skin incision. For regular antibiotics (such as clindamycin or cefazolin) the start time should be 0 to 60 min before skin incision. For vancomycin the start time is extended to 0 to 120 min prior to skin incision. This allows for the longer infusion time of vancomycin.

As noted in the January 22, 2009 John McKinley letter, Hospitals will be required to publicly report on a quarterly basis, the percentage of primary hip/knee surgical patients with

antibiotic administration within the appropriate time prior to surgery. **Data for SSI will be required for March only.** For future reporting, data for 3 months will be required.

Hospitals that have questions specifically related to the case definition and public reporting requirements of SSI should contact the OHA. Hospitals that have questions specifically related to SSI continuing improvement should contact:

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The OHA has archived the videoconferences and webcasts held on February 3, 2009 on *Update on Public Reporting: CLI, VAP, and SSI*. Please visit www.oha.com.

Questions or further clarification related to reporting details should be directed to Sten Ardal, Director Health Analytics, Health System Information Management and Investment, at 416-327-6483.

Please do not hesitate to contact me directly at michael.baker@uhn.on.ca if you have any questions, wish to discuss these issues further or have suggestions for the future of the Patient Safety Initiative.

Sincerely,

Original Signed By

Michael Baker M.D.
Executive Lead – Patient Safety

cc: Hon. David Caplan, MPP
Minister of Health and Long-Term Care

Ron Sapsford
Deputy Minister
Ministry of Health and Long-Term Care