Cincinnati Children’s Hospital Medical Center determined that there was substantial potential for improvement in its surgical site infection (SSI) rate. They set a goal to reduce the combined Class I and Class II rates to 0.5 per 100 procedure days. Staff emphasized the proper administration of all aspects of their pediatric specific initiative, including correct pre-operative antibiotic administration, skin preparation and intraoperative oxygen and temperature management. Most importantly, staff made modifications to ensure that approaches were appropriate for the pediatric population. For example, they adapted the pediatric surgical site infection bundle and established pediatric dosing limits and parameters as “one size never fits all.”

Achievements

• From January 2006 to January 2008, reduced preventable surgical site infection rates from 1.3 per 100 procedure days to .54 per 100 procedure days.
• Created a new, tailored pediatric surgical site infection bundle that decreased infection rates and improved efficiency. This bundle is already being used by other children's hospitals in the U.S.
• Enabled more rapid root cause analysis and identification of areas for improvement and variations in care. In turn, these variations in care helped identify particular procedures that were at “higher risk” than others. A standard process was developed that eliminated variability and developed specific protocols for higher risk patients.
• Accelerated internal and external transparency of quality and safety data; surgical site infections were one of the first outcomes posted on the hospital's Web site.