

Organizational model of the Hospital University Federico II of Naples for monitoring the correct application of procedures and care behaviors aimed at preventing surgical site infections

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SPECIFIC OBJECTIVES

The Committee of the Hospital Infection University Federico II of Naples, in the strategies for the control of surgical site infections (SSI), has implemented an operational approach aimed not only to the development of educational projects, and to 'updated guidelines and procedures, monitoring device for checking the correct implementation of procedures and specific care behaviors for staff access to blocks operators such as:. These include sanitation, proper use of personal protective equipment, compliance with the sterilization process and managing

MATERIALS AND METHODS

To ensure the correct application of the cleaning procedure was developed that identifies an array of liability and responsibility to monitor critical points during the execution of the procedure. The activity for sterilization, however, has been developed a checklist which compilation has two aims: to monitor the correct application of the procedure and training and continuous information of personnel activity. Access to block operators, finally, was encoded by developing a procedure that identifies the criteria for allocating and scheduling operating room, the tools for monitoring and verification of these criteria, as well as the duration of operations and operators health board.

This procedure was coded through graphical representations, such as Gantt chart, and checklist of information collection.

RESULTS

The instruments of feedback developed and shared with the staff involved in operating theaters has proved a valuable tool for monitoring and immediate identification of potential risks related to care, allowing the immediate implementation of corrective measures to prevent the onset of ' adverse event of an infectious nature.

CONCLUSIONS

Among health care-related infections of surgical site infections (SSI) is one of the most common complications in hospitalized patients, leading to an increased length of stay, cost and mortality. Although their occurrence is also associated with modifiable risk factors are known to hospital infections, and also the ISC, potentially preventable account for 30% of those occurred (ISTISAN 01 / 4). An integrated strategy of prevention of SSI requires the implementation of a monitoring device in the form of operating a network in which each actor involved are trained and empowered the government processes of each jurisdiction and critical control point becomes measurable and capable of targeted and timely intervention. Added value of this strategy are the traceability of processes and feedback dialectic between operators and technical committee, the real tools of continuous improvement of quality and safety of care.