one TOGETHER
to reduce risk of surgical site infections
Surgical site infections (SSIs) account for 16% of healthcare associated infections and are associated with considerable morbidity, mortality and increased costs of care.

OneTogether is a partnership between leading professional organisations with an interest in the prevention of SSIs. Our mission is to promote and support the spread and adoption of best practice to prevent SSIs across the surgical patient pathway. By connecting UK infection prevention associations, key industry partners and the health care community we strive to improve overall patient care.

OneTogether aims to:

- **RAISE** the profile of infection prevention and the scientific data supporting the practice.
- **ENGAGE** healthcare professionals and institutions to make a difference at every level to reduce SSI and improve patient outcomes.
- **SHARE** best practice across all specialties.

**TIME** to make a difference

**IMPACT** of SSIs

- 5% of all surgical patients develop a SSI
- Costs at least £3000 to treat
- 5 times more likely to be readmitted
- Quality of life likely to be significantly affected
- Twice as likely to die
- Double stay in hospital

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STANDARDS AND GUIDANCE: reducing the risk of infection on the patient’s surgical pathway

1 Skin Preparation

1.1 Washing
Recommendation
NICE recommends that patients should shower or have a bath on the day before, or on the day of surgery.

1.2 Hair Removal
Recommendation
NICE recommends that hair should not be shaved or cut before surgery because it increases the risk of SSI. If hair must be removed, then clippers with disposable heads are recommended.

1.3 Skin Disinfection
Recommendation
NICE recommends that the skin should be disinfected immediately prior to the incision with chlorhexidine or povidone-iodine (alcoholic or aqueous solution).

1.4 Preventing Skin Recolonisation
Recommendation
NICE recommends that if an incise drape is used, this should be iodophor impregnated unless the patient has an iodine allergy.

2 Prophylactic Antibiotics
Recommendation
NICE recommends that if there must be a local guide to antibiotic prescribing including advice on appropriate surgical prophylaxis. Surgical prophylaxis should be given intravenously or in a single dose of antibiotic within 60 minutes before the incision is made. It must be continued for a long enough period to achieve activity throughout the operation is sufficient.

3 Perioperative warming
Recommendation
NICE recommends that perioperative warming should be used to prevent core temperature falls below 36°C. Intravenous fluids (500ml or more) and blood products should be warmed to 37°C using a fluid warming device.

4 Instrument Management
Recommendation
All pre-sterilised instruments must be checked for evidence that they have been sterilised. Instruments should be laid up in a clean area, as close to the operating theatre as possible, and protected from contamination. All instruments must be completely assembled at all times.

5 Surgical Environment
Recommendation
An effective air changing ventilation system should be in operation. The doors to the operating theatre should remain closed and traffic in and out of theatre restricted to a minimum to ensure efficiency of the ventilation.

6 Wound Management
Recommendation
NICE recommends that surgical incisions should be covered with an appropriate interactive dressing at the end of the operation.

7 Surveillance
Recommendation
The risk of SSI should be monitored using a standardised surveillance methodology to provide feedback to surgeons and the surgical team about the quality of infection prevention in the operating theatre. Surveillance of infection rates is essential to provide patients with accurate information about the risk of SSI associated with the operation.

References
5. Association for Perioperative Practice (2011) Standards and Recommendations for Safe Perioperative Practice. 3rd Ed.

To request surgical safety posters for your hospital, please email Sophie Singh at ssingh@mmm.com
OneTogether aims to provide a collection of free tools to help practitioners reduce the risk of surgical site infection. These tools are created in collaboration with health care practitioners from across the UK which are easy to follow and implement.

TOOLS AVAILABLE NOW
- Standards and Guidance posters
- Infection Prevention Self-Assessment Tool (from April 2016)

FUTURE WORK PROGRAMMES
- Creation of an infection prevention charter for each element of practice across the surgical pathway
- Build a resource of easily accessible education and training tools to empower the health care community on evidence based recommended practice.

The POWER of collaboration

Variability in knowledge of, and availability, of policy

Conflict of ideas/opinion

Importance of practice to prevent SSI not recognised

Poor knowledge of evidence

Lack of standards to support best practice

Ownership and responsibilities not defined

Lack of leadership

Collaborating TODAY for tomorrow’s future

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To gain access to all these tools and to ensure your invitation to future expert conferences join OneTogether today.

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