

C-Section wound care management training Summary of presentation for trainer

The following information provides a summary of the information and what should be covered during the training session. It provides a summary by slide and overall objectives and outcomes that should be met following this training.

The presentation will take 30-40 minutes to deliver. There is an accompanying booklet to this presentation which can be found via the WHAIP intranet.

Slide 2: Slide shows what will be covered in the training, briefly talk through this, and explain the purpose of the training. If you haven't got time to address surveillance, it is discussed in the booklet that is provided at the end of this training session.

Talk about overall purpose of training in Wales, reducing surgical site infections in c-section wounds.

Slide 3: Introduction to SSIs acquired after a c-section, focusing on cost to the NHS and patient. Use the slide citations as further reading for the topic.

Slide 4: Introduce the Wound Care Pathway. This is a suggested pathway, available to all Wales, with the view to incorporating it into local caesarean pathways. The pathway is a set of interventions aiming to minimise infection in elective caesarean sections in Wales.

Slides 5-7:

These slides detail the Wound Care Pathway mentioned in slide 4. A copy of the pathway can be found in the training booklet and on the WHAIP website, along with further details of each intervention.

For these slides, talk through the three stages of interventions, and what will be covered:

Slide 5 Pre-operative	Slide 6 Intra-operative	Slide 7 Post-operative
Wound care booklet MRSA screening Hair removal Daily showers/baths	Hair removal Antibiotic administration Skin preparation Body temperature Glucose levels	Wound dressing (application and removal) Advice to mother Assessing wound (aseptic) WHAIP surveillance

^oPlease refer trainees to ANTT training for Wales (http://howis.wales.nhs.uk/sitesplus/888/page/64404)

Further reading:

Tanner, J., Norrie, P., & Melen, K. 2011. Preoperative hair removal to reduce surgical site infection. *Cochrane Database Syst Review*. Issue 11.

Department of Health. 2011. High Impact Intervention – Care bundle to prevent surgical site infection. http://webarchive.nationalarchives.gov.uk/20120118164404/hcai.dh.gov.uk/files/2011/03/2011-03-14-hii-prevent-surgical-site-infection-final.pdf [Accessed 21/01/2015]. (And references in this document)



Slide 8: Provides important information to understanding how an infection may occur. It provides a summary of how infection may occur due to opening of the skin, instruments used and the environment during surgery. Ensure that the difference between wound colonisation and wound infection is highlighted.

Slide 9: Provides information on how a wound infection can be recognised. Talk through these various infection characteristics.

Slides 10-13: These slides provide examples of characteristics that might be seen in a healthy wound, a superficial wound, a deep wound and an organ/space wound.

Three types of SSIs – superficial, deep and organ/space.

WHAIP diagnostic tool can be found in the training booklet or online (via WHAIP intranet).

Slide 10: Healthy wound – would have some redness. Please ensure that trainees note that this is **not** an infected wound.

Slide 11: Superficial SSI – Provides the definition of a superficial SSI. Point out the infection characteristics.

Slide 12: Deep SSI – Provides the definition of a deep SSI. Point out the infection characteristics.

Slide 13: Organ/space SSI – Provides the definition of an organ/space SSI. Point out the infection characteristics.

Slide 14: Summary of how to take a swab, if an infection is suspected (as mentioned in the Wound Care Pathway). Important to mention key requirements, hand hygiene, swab from wound tissue fluid and use sterile equipment.

Slide 15: This slide details the procedure to follow when taking a sample from a suspected infected wound (follows the Royal Marsden Hospital Manual of Clinical Nursing Procedures, 9th ed. – Procedure guideline 10.22, Swab sampling: wound).

Talk through the process and highlight key aspects from the previous slide.

- Hand hygiene
- 2. Take swab from wound tissue fluid avoid exudates and touching wound margin (if required, clean wound with saline to remove dry exudate or other surface contaminants). Use sterile swab
- 3. Place specimen into sterile container
- 4. Rewash/decontaminate hands

Mention that expressed tissue fluids are likely to contain true infective organisms and less likely to contain surface contaminants. Local practice will often advocate cleaning with saline prior to taking the swab to minimise collection of the surface contaminants.

Slide 16: This slide provides detail on the moments where hand hygiene is required – this should be known to the audience. Hand hygiene is one of the key components in infection prevention (Humphreys, 2009).

Talk through the WHO 5 moments for hand hygiene, explaining key 5 moments.

Further reading:

Humphreys, H. 2009. Preventing surgical site infection. Where now? *Journal of Hospital Infection*, 73, (4) 316-322 available from: http://www.sciencedirect.com/science/article/pii/S0195670109001807



Slide 17: This slide provides a summary on the c-section SSI surveillance carried out by WHAIP. You will need to ensure that you cover the purpose of the surveillance, how it is undertaken, who's responsibility it is and how the data collected is used. If you are short of time, this section is covered in more detail in the training booklet.

Slide 18: This slide provides key points from the training presentation – re-iterate them these key points to the trainees.

Slide 19: This slide has been left blank intentionally for local trainers to add any other information. Suggestions of 'other information' include:

- Local health board or hospital contacts
- Messages for your specific health board or hospital.

Slide 20: This slide provides full details of the references used through the presentation – useful as further reading.