**IPAC MDRD Investigation Tool**

**INSTRUCTIONS**

**IMPORTANT**: in discussion with **IPAC Manager** and **Medical Microbiologist on Call**, decide on the need to organize meeting and inform key stakeholders if a significant MDRD problem is confirmed.

**What this tool is and how it can help you?**

The Infection Prevention and Control (IPAC) MDRD investigation summary document is used to summarize the essential components of an issue / incident. It is a way for all partners – leaders all the way to frontline staff – to document what they know (or do not know) about the issue / incident. This document can be used as a guide to inform next steps and future improvements in the overall process. This document can also help gain clarity and set the stage for action.

**Advice for completing and using this tool:**

* **Who:** Anyone who is involved in reviewing the issue / incident can write the investigation summary document.
* **When:** The investigation summary document is helpful at the stage where the issue / incident has been reported to IPAC and an investigation has been completed. Completing the tool is recommended before moving ahead with completing any action items.
* **What:** This is useful for any event which either did affect or could have affected the patient
* **How:** The document is intended to be brief, focusing on the high-level overview of the issue / incident. The document is intended to be reviewed by the Infection Control Practitioner’s direct report to ensure all important aspects of the issue / incident is captured in each section. Once the proposal is reviewed, the document can be submitted to Senior IPAC Leadership.

**Note**: Content written in *italics* are examples or suggestions for consideration only. Please delete or replace with content appropriate to the specifics of the MDRD investigation.

# Purpose

This document outlines the events and background of the **[Insert Location]** **[Insert Issue/ Incident]**.

The following describes the purpose of this investigation summary:

1. *Example: Post-incident follow-up*
2. *Example: Accreditation preparation activities*
3. *Example: Onsite MDRD modified IPAC reviews*
4. *Example: IPAC support for gaps identified*

# Situation

*In one or two sentences, outline the issue / incident. Include the following information:*

* *A short overview of the issue / incident*
* *Date of occurrence*
* *Date the occurrence was reported to IPAC*
* *If any patient were involved*
* *Type of device/instrument and accessories used e.g.,*
* *Endoscopy (bronchoscope, flexible gastrointestinal endoscope, duodenoscope, etc.)*
* *The picture of the device including the channel/valves*
* *The picture of the part in question if applicable*
* *Surgical instruments*
* *Brief description of occurrence – for example, failure in cleaning and High-level disinfection identified and confirmed*
* *Was the device quarantined following identification (yes, no)?*
* ***If no, ensure that device is quarantined***

# Background

Interior Health is committed to stringent health safeguards and in providing a reliable, high-quality system for **[Insert Department/Program area]** to ultimately minimize infection risks. To achieve this goal, the **[Insert Department/Program area]** must have an infrastructure that supports training and competencies, quality measurement, and proper management.

# Process Summary (if applicable)

*[Provide a high-level summary of the process involved in this issue / incident, as applicable.]*

# Summary of Events

*Describe the timeline of events as they have occurred leading up to the issue / incident being reported to IPAC. Include the following information:*

* *Who was involved in the issue / incident*
* *Who and when was the notification sent to leadership and stakeholders*
* *Were there any immediate actions taken prior to IPAC investigation*
* *Did the device have possible structural damage and was it sent for repair*
* *Were MDRD processes followed regarding notification?*
* *Review current MDRD available notification procedures on InsideNet and discuss the situation with MDRD team. Review OR/endoscopy unit documentation, compliance with protocols for the duration of the problem*

# Assessment

*Before you can document the event, you need to conduct the investigation. The following are suggestions to do that – consult with your manager, the Medical Director and your investigation partners:*

# Case investigation

* *Identify the index patient*
* *Identify the index procedure. Provide a brief description of the procedure and any problems encountered during this procedure (e.g., for endoscopies, was biopsy performed; any bleeding noted in documents)*
* *If available, record most recent HIV, Hepatitis B and Hepatitis C screening*
* *Create a case definition*
* ***Who*** *–which patients exposed,* ***What*** *procedure was performed,* ***When*** *was the time frame of exposure,* ***Where*** *– which sites affected,* ***How*** *– how patients were exposed*

*Exposed patient identification and investigation (record in patient line list below):*

* *Identify exposed patients*
* *Record what procedures these patients underwent. Identify the duration and nature of exposure (e.g. for endoscopies, was biopsy performed; any bleeding noted in documents)*
* *Identify if any patients were exposed prior to instrument quarantine*
* *If available, record most recent HIV, Hepatitis B and Hepatitis C screening*
* *Develop a line listing and include these data fields (reach out to your manager if you need support)*
* *Patient PHN/MRN*
* *MRP /surgeon/surgical assist/operator of endoscope*
* *Type of procedure*
* *Any evidenced issues or problems important for investigation*
* *Tabulate and orient the data in terms of person, time, and place*
* *Sort according to the procedure, instrument/endoscope used, and chronological order in which device/accessories are used*
* *Note: A retroactive assessment of cases prior to occurrence might be needed in certain situations.*

# IPAC Investigation Findings

*This section describes all the investigative findings the IP was able to gather by either conducting a multidisciplinary meeting with appropriate stakeholders or speaking with the appropriate staff involved with the issue / incident.*

*Include the following information*

* *Multidisciplinary meeting membership (if assembled) and when the investigation occurred*
* *Determination of what led to the issue / incident*
* *Quality assurance results*
* *Risk assessment (if performed)*
* *Laboratory results or findings (if performed)*
* *Any relevant best practice guidelines or standards*

*Note: any screenshots, tables, lab results, or other attachments can be included in the Appendix section.*

# Action Items Identified

*This section outlines post-issue / post incident action items identified by IPAC. This may include the following information:*

* *How many action items have been identified*
* *How many remaining action items need to be addressed*
* *Who is responsible in completing the action items*
* *When the action items are expected to be completed*

Recommendations

# Current Actions

*This section lists all the supportive and/or corrective actions taken within three months.*

*Examples:*

* *Ongoing communication with stakeholders / department leaders*
* *In-person site visit*
* *Who will be performing the site visit*
* *When the site visit will occur*
* *What is the purpose / agenda for the site visit*
* *Any potential challenges when performing the site visit (e.g., staff absences, renovations, etc.)*
* *Recommendations to site leadership*

# Subsequent Actions

*This section lists all the supportive and/or corrective actions scheduled for longer than three months.*

*Examples:*

* *Frontline staff education sessions held quarterly*
* *New committee or working group to allow frequent touch base and communication*

Appendix

Appendix A : *[Insert additional supporting documents as appendices, Example, meeting minutes or Instruction/ Equipment MIFU]*

Appendix B : *[Insert additional supporting documents as appendices, Example, Meeting Minutes or Instruction/ Equipment MIFU]*

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| --- | --- | --- | --- |
| Effective Date | March 28, 2025 | | |
| Last Reviewed |  | | |
| Partners Reviewed |  | | |
| Approved By | IPAC | | |
| Owner | Infection Prevention and Control | | |
| Revision History | Date | Section | Revision |
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