SOP Template: Incident Reporting and Documentation for Infection Control Breaches

This SOP details the **incident reporting and documentation for infection control breaches**, outlining the process for identifying, reporting, and documenting any breaches in infection control protocols. It emphasizes timely notification, accurate record-keeping, and thorough investigation to prevent the spread of infection, ensure compliance with health regulations, and promote a safe healthcare environment.

1. Purpose

To provide a standard procedure for reporting and documenting infection control breaches to minimize infection risk and comply with regulatory requirements.

2. Scope

This SOP applies to all healthcare personnel, including clinical and non-clinical staff, contractors, and visitors within the facility premises.

3. Responsibilities

- **All Staff:** Identify and immediately report any suspected or actual infection control breaches.
- **Supervisors/Managers:** Ensure staff awareness of reporting procedures and assist in investigations.
- **Infection Control Team:** Oversee incident review, investigation, documentation, and follow-up actions.

4. Definitions

Infection Control Breach
　　　An event in which established protocols meant to prevent the spread of infection are not followed.
Incident Report
　　　A complete formal record detailing the circumstances and response to an infection control breach.

5. Procedure

1. **Identification of Breach**
   - Any staff who observes or suspects an infection control breach must take immediate action to mitigate risk if safe to do so.
2. **Immediate Reporting**
   - Report the breach verbally to the immediate supervisor and Infection Control Team within **1 hour** of discovery.
   - Complete the Infection Control Breach Incident Report Form (see example template below) within **24 hours** of the incident.
3. **Documentation**
   - Record details accurately, including date, time, persons involved, breach description, immediate actions taken, and witnesses.
   - Retain documentation in accordance with facility policy and privacy standards.
4. **Investigation**
   - The Infection Control Team will initiate a review of the recorded breach within **48 hours**.
   - Conduct interviews, review surveillance footage (as applicable), and collect any supporting evidence.
5. **Follow-up and Corrective Actions**
   - Implement corrective measures and provide feedback/education to staff as needed.
   - Document outcomes and monitor for recurrence.
6. **Notification**
   - Notify external authorities or regulatory agencies if required by law or institutional policy.

6. Documentation Template Example

Section	Details
Date & Time of Incident:	
Location:	

Person(s) Involved:	
Description of Breach:	
Immediate Actions Taken:	
Witnesses:	
Reported by:	
Date Reported:	
Investigation Summary:	
Corrective Actions / Recommendations:	
Follow-up / Outcome:	

7. References

- Facility Infection Control Policy
- Local and National Infection Prevention Guidelines

8. Review & Approval

This SOP shall be reviewed annually or upon significant policy updates. Approved by Infection Control Committee.