***Epidemiology and Infection***

**Using Positive Deviance in the prevention and control of MRSA infections in a Colombian hospital. A time-series analysis.**

N. M. OLARTE ESCOBAR, I. A. VALDERRAMA MÁRQUEZ, J. AVILA QUIROGA, T. GORETTY TRUJILLO, F. GONZÁLEZ,M. I. GARZÓN AGUILAR, J. ESCOBAR-PÉREZ.

**SUPPLEMENTARY MATERIAL**

**Guide sheet for Discovery and Action Dialogue (DAD).**

**Purpose**: To explore the MRSA issue with unit staff, ancillary staff and discover existing successful practices to prevent or eliminate MRSA, as well as generate new solutions to be acted by the participants.

**Generic six prompting question to ease into the discovery:**

1. How do you whether your patient has MRSA or carries MRSA germ?
2. In your own practices, what do you do to prevent spreading MRSA to other patients or staff?
3. What prevents you from doing these things all the time?
4. In there anyone who has a way of doing things that helps them to overcome these barriers? How?
5. Do you have any ideas?
6. What can we do now? Any volunteers?

In addition to these questions, the following “drill down” probing questions are useful in discovering concrete PD practices.

**Sample PD question**:

* Is there anyone here or on the unit who has overcome this barrier successful? How?
* Is there anybody here who can do consistently? or – Who has been successful at doing X or Y?
* Would you mind sharing what you do about….?
* Who is he/she? who are they?
* What does individual or team do to overcome the named barrier?
* How to involve that person or group/unit?
* How to learn from that person or group/unit?

If **NO** ask: “So nobody in your unit or in the hospital is able to……?

* So who are they? How are you going to find out? What do you want to do to find out?

**Sample actionable questions** To identify who is going to do what about it.

* What do you all think about what so and so shared with us?
* Is there anything we can learn from that and apply tomorrow?
* How can apply and amplify that?

(inclusive) PD is about enabling people to practice new behaviors that work, so.

* What are the ways we can practice these new behaviors that we have identified together?

Note: usually this type of questions wil result in the group deciding to investigate more (via observations, trials, search for info, etc). Some individual usually volunteer to observe, or go and talk informally with the person/unit in question.

**Sample questions to generate new IDEAS and latent solutions**

* (Direct) What are some ideas that you have in mind to address this problem?
* (Inclusive) What we can do now or how can we start doing different tomorrow?
* (Direct) Who could help us accomplish?
* (Neutral) What would it take to get these ideas and existing solutions implemented?

The group may come up with a “to do” list with individual assignments, and the facilitator or IDC staff having to find answer to technical questions/queries.

**Sample questions for next steps**

* (Follow-up) When do you want all of us, plus other, to meet or/and communicate again?
* Expending networks (horizontally) questions raised both within units, depart, and steering/resource team?
* Who else needs to be in this conversation?
* How can we involve them?
* What is the first step, who is going to contact this person/them? When?
* How can we expend our network?
* Do we need a contact person in the unit? What for?
* Who wants to volunteer to be a MRSA prevention point person for the unit, department, clinic, etc.?
* How can we address others MRSA issue (transport, inpatient clinics, etc) between departments?

**Sample tasks for closure**

Ask someone to summarize what was said, most importantly what the group decided to do (to do list with who, what, when, where).

Set-up a follow-up meeting within the unit?

Set-up a date for outsiders (resource team) to come back?