

**Initial Report**

**Premises/Facility under investigation (name and address)**

Mackenzie Richmond Hill Hospital  
10 Trench Street  
Richmond Hill, ON, L4C 4Z3

**Type of Premises/Facility**

Hospital – Hemodialysis Unit

<b>Date Board of Health became aware of IPAC lapse (yyyy/mm/dd)</b>	<b>Date of Initial Report posting (yyyy/mm/dd)</b>
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2023/03/21

2023/03/31

<b>Date of Initial Report update(s) (if applicable) (yyyy/mm/dd)</b>	<b>How the IPAC lapse was identified</b>
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Referral

**Summary Description of the IPAC Lapse**

1. Concerns with adherence to aseptic technique when connecting central vascular catheters.
2. Inadequate cleaning & disinfection of patient care equipment/devices and environmental surface.
3. Inappropriate use of gloves and missed indications for hand hygiene.

IPAC Lapse Investigation	Yes	No	N/A	Please provide further details/steps
Did the IPAC lapse involve a member of a regulatory college?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If yes, was the issue referred to the regulatory college?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Were any corrective measures recommended and/or implemented?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Please provide further details/steps

**Corrective measures for Premises/Facility:**

- Follow and maintain aseptic technique during connection process for central vascular catheter access lines.
- Follow indications and established moments for hand hygiene.
- Change and remove gloves when indicated.
- Follow Manufacturer's Instructions for Use when using disinfectant wipes, and the correct contact time required for disinfection is achieved.
- Clean and disinfect patient care devices/equipment, and environmental surfaces, in according to infection prevention and control best practices.
- Handle and store patient care supplies in a manner to prevent cross-contamination.
- Transport waste safely, and in a manner to prevent cross-contamination.



**York Region  
Infection Prevention and Control Lapse Report**

Date any order(s) or directive(s) were issued to the owner/operator (if applicable) (yyyy/mm/dd)

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**Initial Report Comments and Contact Information**

**Any additional Comments: (Please do not include any personal information or personal health information).**

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If you have any further questions, please contact  
Health Connection

Telephone Number  
1-800-361-5653

Email Address  
[Health.inspectors@york.ca](mailto:Health.inspectors@york.ca)

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**Final Report**

**Date of Final Report posting (yyyy/mm/dd)**

2023/03/31

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**Date any order(s) or directive(s) were issued to the owner/operator (if applicable) (yyyy/mm/dd)**

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**Brief description of corrective measures taken**

A re-inspection was conducted on March 30, 2023. All corrective measures were implemented, and no concerns were noted at the time of re-inspection.

**Date of all corrective measures were confirmed to have been completed (yyyy/mm/dd)**

2023/03/30

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**Final Report Comments and Contact Information**

**Any Additional Comments: (Please do not include any personal information or personal health information)**

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