

Initial Report

Premises/Facility under investigation (name and address)

8524181 Canada Inc. Professional Corporation – Mobile Foot Care
11 Granger Street
Maple, Ontario L6A 1B5

Type of Premises/Facility

Foot care

Date Board of Health became aware of IPAC lapse (yyyy/mm/dd) 2023/05/03	Date of Initial Report posting (yyyy/mm/dd) 2023/05/29
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Date of Initial Report update(s) (if applicable) (yyyy/mm/dd)	How the IPAC lapse was identified Referral
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Summary Description of the IPAC Lapse

- Inadequate cleaning & disinfection of patient care/medical equipment/devices
- Concerns with reprocessing of reusable foot care equipment/devices

IPAC Lapse Investigation	Yes	No	N/A	Please provide further details/steps
Did the IPAC lapse involve a member of a regulatory college?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	College of Nurses of Ontario (CNO)
If yes, was the issue referred to the regulatory college?	<input checked="" type="checkbox"/>	<input 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 fore Premises/Facility:

- Obtain written reprocessing instructions from the manufacturer for equipment/device reprocessing that are compatible with current published reprocessing standards and guidelines.
- Package medical equipment/devices for sterilization to ensure that steam can circulate around and through equipment/devices and contact all surfaces.
- Label each package with date processed, sterilizer used, cycle or load number and the health care provider's initials in a manner that does not puncture or dampen the package.
- Place Chemical Indicators appropriately in (internal) and on (external) each package, if not built into the pouch/package. Ensure where the sterilizer does not have a printer, a Type 5 Chemical Indicator is placed in each package.
- Check, verify and sign sterilizer mechanical display, print out or Universal Serial Bus (USB) for each cycle. If the sterilizer does not have a printer, record time and temperature at intervals during each cycle.

Infection Prevention and Control Lapse Report

IPAC Lapse Investigation

Yes	No	N/A	Please provide further details/steps
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- Do not use Biologic Indicators past their expiry date.
- Test sterilizer with a Biologic Indicators in a process challenge device (PCD) each day the sterilizer is used and with each type of cycle used that day.
- Incubate a control Biological Indicator from the same lot number as the test Biologic Indicators, and unexposed to sterilant, according to the Manufacturer's Instructions for Use each day that routine Biologic Indicators are incubated.
- Monitor, maintain, and review a log of test results during sterilization and record all required information as per "PIDAC Best Practices for Cleaning, Disinfection and Sterilization of Medical Equipment/Devices in All Health Care Settings, 3rd Edition, May 2013".
- Follow Manufacturer's Instructions for Use when using disinfectant wipes and the correct contact time required for disinfection is achieved.

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

Verbal order was issued on April 6, 2023, followed by written order on April 18, 2023.

Initial Report Comments and Contact Information:

Verbal order was issued on April 6, 2023, followed by written order on April 18, 2023, ordering operator to cease providing the services requiring use of medical equipment/devices requiring sterilization.

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

If you have any further questions, please contact
Health Connection

Telephone Number
1-800-361-5653

Email Address
Health.inspectors@york.ca

Final Report

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

2023/05/29

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

2023/05/18

Brief description of corrective measures taken

Prior to resuming sterilization operator is to notify YRPH of their intention to engage in reprocessing/sterilization of medical equipment/devices.

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

Final Report Comments and Contact Information

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



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

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Health Connection

Telephone Number
1-800-361-5653

Email Address
Health.inspectors@york.ca