

## Infection Prevention and Control (IPAC) Lapse Report

## **Initial Report**

Premise/facility under investigation:

Ajax Women's Health Clinic

Address:

301-300 Rossland Rd E., Ajax ON., L1Z 0M1

Type of premise/facility: Medical Clinic

### **IPAC Lapse Details**

Date board of health became aware of potential IPAC lapse: 2023-12-28

Date IPAC lapse was linked to premise/facility: 2024-01-02

Date of initial report posting: 2024-01-09

How the potential IPAC lapse was identified: Complaint

Summary description of the IPAC lapse:

- Reprocessing and recordkeeping not meeting the PIDAC Best Practices for Cleaning, Disinfection and Sterilization of Medical Equipment/Devices.
- No method for hand hygiene available in the reprocessing area.

#### **IPAC Lapse Investigation**

Did the IPAC lapse involve a member of a regulatory college? Yes

If yes, was the issue referred to the regulatory college? Yes

Names of regulatory college and stakeholders notified:

College of Physicians and Surgeons of Ontario on 2024-01-03

Were any corrective measures recommended and/or implemented? Yes

Please provide further details/steps:

 Ensure that medical equipment/devices that were previously sterilized are reprocessed and sterilized again with proper monitoring in place.

- Ensure that the sterilizer is tested with a BI in a process challenge device (PCD) each
  day the sterilizer is used, with each type of cycle used that day and, in every load,
  containing an implantable device.
- Ensure that all medical equipment/devices are sterilized in the open, unlocked position.
- Ensure sterilized packages have proper labels.
- Ensure there is a plan in place to replace the sterilizer with one that has a printout/USB.
- Verify and record physical parameters, chemical indicator monitoring results, load contents and person responsible for each sterilization cycle.
- Provide a dedicated hand washing sink and/or ABHR dispensers that are conveniently located in or near all reprocessing and preparation areas.
- Ensure that alcohol-based hand rub (ABHR) at 70-90% is used and must not be passed its expiry date.
- Ensure cleaning brush is cleaned, disinfected, dried and stored after each use.
- Ensure proper training is provided to all staff involved with reprocessing.
- Maintain and create written infection prevention and control policies and procedures.

Date any order(s) or directive(s) were issued to the owner/operator:

- Order of a Public Health Inspector served (2024-01-03).
- Report of Inspection provided (2024-01-02, 2024-01-04)

# **Final Report**

Date of final report posting: 2024-01-09

Date all corrective measures were confirmed: 2024-01-08

Brief description of corrective measures taken:

Re-inspection conducted 2024-01-04.

All reprocessing, ABHR and training requirements were observed in compliance.

2024-01-08

• All policies and procedures were approved.

### **Final Report Comments and Contact Information**

Any additional comments: Operator education and resources provided.

If you have any further questions, please contact the Durham Health Connection Line:

Telephone: 1-800-841-2729, or email us.