



Infection Prevention and Control Lapse Report Main Street Medical Centre

Initial Report

Premise/facility under investigation

Main Street Family Medical Centre
1251 Stittsville Main St
Ottawa, Ontario
K2S 2E5

Type of premise/facility

Medical Clinic & Walk in

Date Board of Health became aware of IPAC lapse

2018-04-25

Date of Initial Report posting

2018-07-17

Date of Initial Report update(s)

N/A

How the IPAC lapse was identified

In response to a public complaint regarding infection prevention and control (IPAC) in this medical clinic, OPH inspected the premises, interviewed staff, and concluded that an IPAC lapse has occurred.

Summary Description of the IPAC Lapse

Reprocessing of reusable medical equipment

- No one-way flow in reprocessing area noted to prevent cross contamination
- No dedicated area/sink for cleaning instruments
- Inappropriate brushes used for cleaning medical equipment
- Medical instruments inconsistently rinsed (instead of cleaning) with tap water or placed directly into container with high level disinfectant without cleaning
- Test strips to assess potency/efficacy of high level disinfectant not present at clinic
- No schedule for changing high level disinfectant to ensure its potency/efficacy

- No dedicated area for sterilizing instruments
- Autoclave (medical device used to sterilize and disinfect instruments through steam and pressure): no documentation for monitoring of time, temperature and pressure of autoclave, no internal chemical indicator supplies present at clinic, no biological indicator supplies present at clinic, no documentation of chemical or biological indicator results, no record of autoclave servicing

Reprocessing of single-use (non-reusable) medical equipment

- Some single-use disposable equipment had been repackaged for reuse
- Evidence that single-use disposable phlebotomy tourniquets were re-used

Medication storage and preparation

- Multidose vials not labelled with date opened
- Storage of food items in medication fridge
- Spray dispenser for antiseptic skin cleanser (used for skin preparation prior to procedures)

Specimen handling

- Urine testing done on the same countertop as medical instrument reprocessing, blood collection, and medication preparation
- Full urine specimen containers noted in garbage

Environmental cleaning

- A single sink present/used for hand hygiene and cleaning of medical equipment for reprocessing, which is a risk for cross-contamination
- Inadequate environmental cleaning products: expired products; household cleaning products used (instead of medical grade)
- Inadequate environmental cleaning process
- Furniture unable to be adequately cleaned: broken/taped charting area counter, cloth chairs in patient care areas
- Use of disinfecting solutions not as per manufacturer's instructions

Hand hygiene

- Expired alcohol based hand rub (ABHR), no liquid soap available at sinks

Policies and procedures

- No IPAC policies or procedures

Occupational health and safety

- Non-safety engineered needles present at clinic
- Overfilled sharps container
- No eyewash station
- Masks, eye protection and gown personal protective equipment (PPE) not present at the clinic

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?

College of Physicians and Surgeons of Ontario

Were any corrective measures recommended and/or implemented?

Yes

Please provide further details/steps

Reprocessing of reusable medical equipment

- All procedures requiring surgical equipment required to cease until OPH provides written permission to resume

Reprocessing of single-use (non-reusable) medical equipment

- Single-use medical equipment is to be used only once, then discarded appropriately

Medication storage and preparation

- Ensure all multi-dose medications are dated and labelled as per manufacturer's instructions
- Ensure medication preparation area is a dedicated area, and is kept separate from other procedures
- Operator to provide hand hygiene sink or ABHR where medication is prepared
- Replace spray dispenser antiseptic skin cleaner with a pour-top
- Food is not to be stored in medication fridges

Specimen handling

- Urine samples are to be tested in a designated area, separate from medication preparation
- Dispose of patient urine samples in toilet and discard empty container in garbage
- Tourniquets are to be used only once, then discarded
- Single-use blood collection tube holders recommended

Environmental cleaning

- Provide appropriate, unexpired, environmental cleaning products with Health Canada drug identification number (DIN)
- Routine cleaning and disinfection of touch surfaces and floors to be done daily
- Treatment areas to be cleaned and disinfected between patients and when visibility soiled

- Repair/replace charting area counter top
- Install eyewash station
- Provide name of cleaning contractor and clinic cleaning schedule to OPH

Hand hygiene

- Do not top up ABHR, obtain un-expired ABHR, ensure ABHR is at point of care, and ensure soap is available at all sinks

Policies and Procedures

- Develop written IPAC policies and procedures based on the most current best practices by June 24, 2018; provide those to OPH for review

Occupational Health and Safety

- Operator to remove all non-safety engineered needles from the clinic
- Replace overfilled sharps container when filled
- Provide staff with the appropriate PPE at point of care,
- Operator to obtain eyewash station and have available for use.

Education

- Ensure all staff, including physicians, complete Public Health Ontario's IPAC Core competencies online modules for the clinical office practice and provide Certificate of Completion

Date any order(s) or directive(s) were issued to the owners/operators (if applicable)

- A verbal directive was provided to the clinic owner to cease all medical procedures requiring sterile surgical equipment on April 25, 2018.
- A written directive to cease all medical procedures requiring surgical equipment was provided to and acknowledged by the clinic owner and the clinic's current physicians on April 27, 2018.

Initial Report Comments and Contact Information

Any Additional Comments

N/A

If you have any further questions, please contact:

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For general updates regarding this investigation, continue to monitor this report.

The results of routine inspections are posted on the [Ottawa Public Health Disclosure website](#).

Interim Report

Date of Interim Report posting:

2018-07-17

Date of Interim Report Update(s)

2018-07-17

Date corrective measures were confirmed to have been completed

2018-04-25

- Direction provided to cease all procedures requiring surgical equipment until clinic receives written approval by OPH to resume specified procedures
- Observed disposal of used single use items
- Observed disposal of undated multi-dose vials

2018-04-27

- Observed replacement of expired environmental cleaning wipes; alcohol based hand rub available at point of care and hand hygiene soap available at each sink

2018-04-30

- Clinic indicated replacement of counter top in charting area
- Clinic indicated it does not intend to restart reprocessing reusable surgical equipment; instead it intends to switch to single use items only

2018-05-02

- Observed the area designated for urine sample processing
- Confirmed provision of appropriate Personal Protective Equipment (PPE) at point of care

2018-05-09

- Confirmed installation of eyewash station
- Confirmed existence of environmental cleaning contract and obtained cleaning schedule

2018-05-10

- Confirmed completion of Public Health Ontario's IPAC Core Competencies Course by all clinic staff and Certificates of Completion issued

2018-05-28

- Observed single-use suture kits at clinic that were purchased on April 27, 2018 and reviewed use of single-use suture kits not accounted for (used)
- Confirmed all multi-dose medications labelled, and flip-tops present on all antiseptic skin cleaner dispensers; observed the area designated for medication storage, no food storage in medication fridges.

- Directed the removal of all non-safety engineered needles and the replacement of filled sharps containers

2018-06-08

- Observed evidence of inadequate environmental cleaning
- Required staff to remove waste and disinfect surfaces in examination rooms.

2018-06-15

- Conducted joint visit with College Physician and Surgeons of Ontario (CPSO)
- Confirmed new environmental cleaning service contract for clinic

2018-07-12

- Observed single-use disposable equipment and implementation of best practices for clinic to resume some minor surgical procedures that OPH had previously required the clinic to cease. (Any procedure requiring the use of a needle driver cannot yet resume.)

Final Report

Date of Final Report posting:

Date of Final Report Update(s)

Date all corrective measures were confirmed to have been completed

Brief description of corrective measures taken

Final Report Comments and Contact Information

Any Additional Comments

If you have any further questions, please contact:

Name:

Title:

Email address:

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