Infection Prevention and Control Lapse Report

Dr. Ralph Zabel

Initial Report

Premise/facility under investigation

Dr. Ralph Zabel
1 Centrepointe Dr., Suite 202
Ottawa, On
K2G 6E2

Type of premise/facility

Ophthalmology Practice

Date Board of Health became aware of IPAC lapse

2019-06-13

Date of Initial Report posting

2019-07-05

Date of Initial Report update(s)

2019-07-08

How the IPAC lapse was identified

In response to a public complaint regarding infection prevention and control (IPAC) practices of this practitioner, OPH conducted an inspection and determined that an IPAC lapse had occurred.

Summary Description of the IPAC Lapse

Reprocessing of reusable medical equipment:

- Deficiencies in cleaning and low-level disinfection (LLD) of shared equipment
- Insufficient level of disinfection of semi-critical equipment (i.e., reusable tonometer prisms)

Hand Hygiene:

- Insufficient hand hygiene supplies available at point of use (e.g., soap, Alcohol Based Hand Rub (ABHR))
Medication:

- Multidose eye drops not dated when opened and discarded according to manufacturer’s instructions for use (MIFUs)
- Multidose eye drops not refrigerated after opening according to MIFUs

**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

**Were any corrective measures recommended and/or implemented?**
Yes

**Please provide further details**

Reprocessing of reusable medical equipment

- Reprocess semi-critical medical equipment, including tonometer prisms, using high-level disinfection (HLD) at a minimum and according to provincial best practice documents and MIFUs.
- Use chemical test strips to determine whether an effective concentration of active ingredients is present in the HLD and log the results.
- Perform reprocessing of medical equipment in a designated area with dirty to clean flow and regularly disinfect the reprocessing environment with a low-level hospital disinfectant.
- Complete and retain a permanent record of reprocessing.
- Clean and disinfect shared equipment between patients with a low-level hospital disinfectant.

Hand Hygiene

- Ensure ABHR (70%) is available at point of use for hands that are not visibly soiled.
- Designate a sink for hand hygiene with an adequate supply of soap and paper towels to use when hands are visibly soiled.

Medication

- Date multidose eye drops when opened and discard according to the MIFUs.
- Refrigerate multidose eye drops when indicated by the MIFUs.
On 2019-06-18, the practitioner stopped using reusable tonometer prisms until they could be high-level disinfected.

**Initial Report Comments and Contact Information**

**Any Additional Comments**

On 2019-06-18 the practitioner obtained disposable tonometer prisms for use until he sets up a system to high level disinfect his reusable tonometers.

**Initial Report update(s)**

A second site inspection was conducted on 2019-06-25. The practitioner had initiated a set up for high-level disinfection of re-usable tonometer prisms. Some recommendations were made to improve the dirty to clean flow and the cleaning process.

**If you have any further questions, please contact:**

- **Title:** Dominique Bremner, Program Manager
  Infection Prevention and Control Inspections and Investigations
  Ottawa Public Health
  
  **E-mail address:** IPAC/PCI@ottawa.ca
  
  **Phone number:** 613-580-2424 ext. 26325

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.

**Final Report**

**Date of Final Report posting:**

2019-07-09

**Date of Final Report Update(s)**

**Date all corrective measures were confirmed to have been completed**

2019-07-04

**Brief description of corrective measures taken**

Reprocessing of reusable medical equipment

- Acceptable set-up for high-level disinfection of semi-critical medical equipment is available in a designated reprocessing space with dirty to clean flow.
Procedures are in place to clean and high-level disinfect semi-critical medical equipment according to provincial best practice documents and MIFUs and to document the process.

The practitioner is using hospital low-level disinfectant for environmental surfaces and to disinfect shared equipment between patients.

Hand Hygiene

- ABHR (70%) is available at point of use for hands that are not visibly soiled.
- A designated hand hygiene sink with an adequate supply of soap and paper towels is available to use when hands are visibly soiled.

Medication

- Outdated multidose eye drops have been discarded.
- Refrigerating multidose eye drops where appropriate.

Final Report Comments and Contact Information

Any Additional Comments

A final site visit occurred on 2019-07-04. The practitioner had instituted all corrective measures.

If you have any further questions, please contact:

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Infection Prevention and Control Inspections and Investigations
Ottawa Public Health

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