

# York Region Infection Prevention and Control Lapse Report

Initial Report				
Premises/Facility under investigation (name Mon Sheong Foundation O/A Mon Sheong Ric 11199 Yonge Street Richmond Hill, Ontario L4S 1L2		-		m Care Centre
Type of Premises/Facility				
Long-Term Care				
Date Board of Health became aware of IPAC lapse (yyyy/mm/dd)				
2023/06/15  Date of Initial Report update(s) (if applicable) (yyyy/mm/dd)		2023/06/21 How the IPAC lapse was identified		
		Referral		
Summary Description of the IPAC Lapse		rtcicii	<u>ai</u>	
Concerns with reprocessing of reusable for	ot care e	quipm	ent/de	vices
IPAC Lapse Investigation	Yes	No	N/A	Please provide further details/steps
Did the IPAC lapse involve a member of a regulatory college?	$\boxtimes$			College of Nurses of Ontario (CNO)
If yes, was the issue referred to the regulatory college?	$\boxtimes$			
Were any corrective measures recommended and/or implemented?	$\boxtimes$			
Please provide further details/steps	<ul> <li>Corrective measures for Premises/Facility:         <ul> <li>Use single-use foot care equipment/devices or clean and sterilize reusable foot care equipment/devices after each use in accordance with the "PIDAC Best Practices for Cleaning, Disinfection and Sterilization of Medical Equipment/Devices in All Health Care Settings, 3rd Edition, May 2013".</li> </ul> </li> <li>Reprocess reusable foot care equipment/devices in a reprocessing sink that is physically separate from the resident care area and the designated clean/sterile storage areas.</li> <li>Have written infection prevention and control policies</li> </ul>			
	and procedures that are based on the most current best practices guidelines for the sterilization of reusable foot care equipment/devices.  d to the owner/operator (if applicable) (yyyy/mm/dd)			
2023/06/16				
Initial Report Comments:	Oro	/iooo		
Operator was ordered to cease providing foot of	are serv	rices.		



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### 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	Email Address	
1-800-361-5653	Health.inspectors@york.ca	

#### Final Report

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

2023/06/30

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

Operator was allowed to resume the provision of foot care services on 2023/06/26 because the conditions of the initial Order were met. The conditions of the initial Order must continue to be followed.

#### Brief description of corrective measures taken

The Operator demonstrated the corrective measures to provide single-use, sterile foot care devices and equipment. The Operator has in place and has demonstrated knowledge of written infection prevention and control policies and procedures, that are based on the most current best practices guidelines, for the use of single-use sterile devices and equipment.

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

2023/06/26

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

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

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