PUBLIC HEALTH UNIT INFECTION PREVENTION AND CONTROL LAPSE REPORT

Initial Report

Premise/facility under investigation:	Glenn's Foot Care Services 12 B Albert Street Parry Sound, ON P2A 3A4
Type of premise/facility: (e.g., clinic, personal services setting)	Mobile Foot Care Services
Date Board of Health became aware of IPAC lapse	2026-03-03 (date complaint received)
Date of Initial Report posting	
Date of Initial Report update(s) (if applicable)	
How the IPAC lapse was identified	Complaint from a member of the public
Summary Description of the IPAC Lapse	• Observed improper reprocessing of reusable foot care equipment and devices. • Lack of policies and procedures for reprocessing and emergency situations (such as during utility outages), sterilization failures, failed BIs and compromised packaging) • Lack of policies and procedures for IPAC practices related to foot care

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/steps	Conduct pre-qualification of sterilizer with 3 consecutive Biological Indicators (BI), using a process challenge device (PCD) and notify NBPSHDU of the results. Use Single Use Sterile Devices in the interim until reprocessing issues are resolved. Do not use any multi-use instruments that require reprocessing until NBPSDHU has provided direction to resume. Obtain reusable foot care equipment/devices with manufacturers' instructions for use indicating how the equipment/device is to be cleaned and sterilized. Test sonification performance, of the ultrasonic cleaner, at least weekly, preferably each day it is used, using a commercial method or foil test in accordance with the manufacturer's instructions. Ensure this is maintained in a log. Pre-clean equipment of gross soil immediately at the point-of-use. If cleaning cannot be done immediately, store the equipment/device in such a way as to prevent organic matter from drying on it. Rinse equipment/devices after ultrasonic cleaning and dry with a lint-free cloth. Use a PCD with a biological indicator and Type 5 chemical indicator each day the sterilizer is used and with each type of cycle used that day. Document results in a sterilizer/reprocessing log book. Maintain logs of the sterilizer's physical parameters and chemical indicators for every cycle. Install a dedicated hand-washing sink and/or ABHR in the decontamination area. Use personal protective equipment (gloves, gown, mask, eye

protection) for procedures that are likely to result in splashes or sprays of blood or other body fluids.

Update reprocessing area physical parameters to meet CSA requirements.

Use ABHR that has a label and that is not topped up or refilled.

Dispense multiuse products in a manner to avoid contamination.

Do not store clean equipment and instruments under the sink.

Update reprocessing policies and procedures to include emergency situations, compromised packaging, sterilization failures and failed BIs.

Create an IPAC policy and procedure for foot care services.

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

Initial Report Comments and Contact Information

Any Additional Comments (Do not include any personal information or personal health information)	

Final Report

Date of Final Report posting:	2026-08-05
Date any order(s) or directive(s) were issued to the owner/operator (if applicable)	N/A
Brief description of corrective measures taken	Single use sterile disposable items are now used and discarded after use in an appropriate puncture-resistant sharps container at point-of-use. Multi-dose products in use are dispensed in a manner that prevents contamination of the product. ABHR observed to be in a container with the manufacturer label with a NPN and a minimum alcohol concentration of 70%. Medical supplies or equipment are not stored under or adjacent to sinks. Policies and procedures related to foot care have been developed and reviewed by the NBPSDHU.
Date all corrective measures were confirmed to have been completed	2026-07-30

Final Report Comments and Contact Information

Any Additional Comments
(Do not include any personal information or personal health information)

If you have any further questions, please contact:

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