Region of Waterloo Public Health Infection Prevention and Control Lapse				
INITIAL REPORT Last Updated on:				
Premise/facility under investigation	North Dumfries Dentistry Ayr			
(name and address)	32 Northumberland St, Ayr, ON N0B 1E0			
Type of premise/facility	Dental Office			
(e.g. medical clinic, multi-service PSS)				
Date Board of Health became aware of IPAC lapse	June 17 th , 2020			
Date IPAC lapse was linked to the premise/facility	June 17 th , 2020			
Date of Initial Report Posting	June 23 rd , 2020			
Date of Initial Report update(s) (if applicable)				
Source of IPAC lapse information (e.g. routine inspection, public complaint etc.)	Public complaint received on Friday June 12 th , 2020			
Summary Description of the IPAC lapse	 Preparation of instruments for sterilization not meeting best practices. Insufficient quality monitoring of sterilization processes. Incomplete Policies and Procedures on premise. Improper storage of sterilized instruments 			
IPAC Lapse Investigation				
Did the IPAC lapse involve a member of the regulatory	Yes – Royal College of Dental Surgeons of			
college?	Ontario			
If yes, was the issue referred to the regulatory college?	Yes			
Were other stakeholders notified? (e.g. Ministry)	No			
Concise description of the corrective required	Verbal directive to re-sterilize all instruments in the office provided on June 17 th , 2020. Practice must immediately implement all corrective actions identified in letter sent to practice June 22nd, 2020.			
Please provide further details/steps	Practice requirements to be verified on reinspection (date to be determined): 1. Reprocessing staff must complete formal reprocessing education and demonstrate competence. 2. Premise must demonstrate appropriate quality monitoring of sterilization processes. 3. All re-usable dental equipment must be verified as sterile and appropriately packaged, labelled and stored.			
Date any order(s) or directive(s) were issued to the owners/operators (if applicable)	Verbal directive to re-sterilize all instruments using appropriate quality indicators in office on June 17 th , 2020. Practice must immediately implement all corrective actions identified in letter sent to practice June 22nd, 2020.			
Initial Report Comments and Contact Information				
Any additional comments				
If you have any further questions, please contact:				

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FINAL REPORT		Last Updated on:			
Date of Final Report posting:		July 24 th , 2020			
Date any order(s) owners/operators	or directive(s) were issued to the (if applicable)	n/a			
Brief description of	of corrective measures taken	 Reprocessing staff have completed formal reprocessing education and have demonstrated competence. Premise has demonstrated correct packaging of instruments, appropriate sterilization practices and quality monitoring of sterilization processes. 			
Date all corrective measures were confirmed to have been		July 23 rd , 2020			
completed					
Final Report Comments and Contact Information					
Any additional comments					
If you have any further questions please contact:					
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