

Region of Waterloo Public Health Infection Prevention and Control Lapse

Initial Report	Details/Description
Premise Premise/facility under investigation (name and address)	North Dumfries Dentistry Ayr 32 Northumberland St, Ayr, ON N0B 1E0
Type of premise/facility (e.g. medical clinic, multi-service PSS)	Dental Office
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
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	<ol style="list-style-type: none"> 1. Preparation of instruments for sterilization not meeting best practices. 2. Insufficient quality monitoring of sterilization processes. 3. Incomplete Policies and Procedures on premise. 4. Improper storage of sterilized instruments

IPAC Lapse Investigation	Answers/Explanation
Did the IPAC lapse involve a member of the regulatory college?	Yes – Royal College of Dental Surgeons of 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 22 nd , 2020.
Please provide further details/steps	Practice requirements to be verified on reinspection (date to be determined): <ol style="list-style-type: none"> 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 22 nd , 2020.



Region of Waterloo
PUBLIC HEALTH AND
EMERGENCY SERVICES

Initial Report Comments

If you have any further questions, please contact: Jessica Hill, Registered Dental Hygienist, jesshill@regionofwaterloo.ca, 519-575-4400, ext. 5275

Final Report	Details/Description
Date of Final Report posting:	July 24 th , 2020
Date any order(s) or directive(s) were issued to the owners/operators (if applicable)	N/A
Brief description of corrective measures taken	1. Reprocessing staff have completed formal reprocessing education and have demonstrated competence. 2. 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 completed	July 23 rd , 2020

If you have any further questions, please contact: Jessica Hill, Registered Dental Hygienist, jesshill@regionofwaterloo.ca, 519-575-4400, ext. 5275