

## Region of Waterloo Public Health Infection Prevention and Control Lapse

<b>INITIAL REPORT</b>	<b>Last Updated on:</b>
Premise/facility under investigation (name and address)	Monarch Dentistry 51 Benton St. Kitchener, ON, N2G 3H5
Type of premise/facility (e.g. medical clinic, multi-service PSS)	Dental Office
Date Board of Health became aware of IPAC lapse	September 16 <sup>th</sup> , 2019
Date of Initial Report Posting	September 30 <sup>th</sup> , 2019
Date of Initial Report update(s) (if applicable)	
Source of IPAC lapse information (e.g. routine inspection, public complaint etc.)	Public complaint received on September 13 <sup>th</sup> , 2019
Summary Description of the IPAC lapse	<ol style="list-style-type: none"> <li>1. Incorrect packaging of instruments prior to sterilization.</li> <li>2. Insufficient quality monitoring of sterilization processes.</li> <li>3. Incomplete and improper sterilization of dental equipment packages.</li> <li>4. Use of partially sterilized dental equipment.</li> </ol>
<b>IPAC Lapse Investigation</b>	
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)	Public Health Ontario
Concise description of the corrective measures required	<p>Immediate corrections made and next day site visit provided (September 17, 2019) for verification of the following requirements:</p> <ul style="list-style-type: none"> <li>• Sterilization equipment replaced;</li> <li>• Implementation of quality monitoring of sterilization processes and documentation;</li> <li>• Demonstration of proper loading of sterilizer and ensuring completion of sterilization cycles; and</li> <li>• Re-sterilization of all instruments with appropriate labelling.</li> </ul>
Please provide further details/steps	<p>Practice requirements to be verified on re-inspection (date to be determined):</p> <ol style="list-style-type: none"> <li>1. Reprocessing staff must complete formal reprocessing education and demonstrate competence.</li> </ol>

	2. Premise must demonstrate maintenance of proper sterilization processes and quality monitoring.
Date any order(s) or directive(s) were issued to the owners/operators (if applicable)	
<b>FINAL REPORT</b>	
	<b>Last Updated on:</b>
Date of Final Report posting:	October 21 <sup>st</sup> , 2019
Date any order(s) or directive(s) were issued to the owners/operators (if applicable)	n/a
Brief description of corrective measures taken	Practice requirements have been met: <ol style="list-style-type: none"> <li>1. Reprocessing staff have completed formal reprocessing education and have demonstrated competence.</li> <li>2. Premise has demonstrated correct packaging of instruments, appropriate sterilization practices and quality monitoring of sterilization processes.</li> </ol>
Date all corrective measures were confirmed to have been completed	October 18 <sup>th</sup> , 2019
<b>Final Report Comments and Contact Information</b>	
Any additional comments	
<b>If you have any further questions, please contact:</b>	
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