

Initial Report

Premise/Facility under investigation (name and address)

**Dr. Asia Kreichman
206-7117 Bathurst Street
Vaughan, Ontario
L4J 2J6**

Type of Premises/Facility

Dental Clinic

Date Board of Health became aware of IPAC lapse (yyyy/mm/dd)

2020/01/31

Date of Initial Report posting (yyyy/mm/dd)

2020/03/04

Date of Initial Report update(s) (if applicable) (yyyy/mm/dd)

How the IPAC lapse was identified

Complaint

Summary Description of the IPAC Lapse

During an inspection on January 31, 2020, York Region Public Health noted that there is no one-way work flow from dirty to clean to prevent cross-contamination of dental instruments; brushes used for manual cleaning of dental instruments were not changed, replaced or sterilized at the end of the day; hand hygiene in the reprocessing area was being carried out in the same sink as manual cleaning of dental instruments; sterilizer was not tested with a biological indicator (BI) in a process challenge device (PCD) for each type of cycle and for each day the sterilizer was used; a Type 5 or 6 chemical indicator in a PCD was not used to justify the release of sterilized loads of dental equipment/devices prior to BI results; sterilization monitoring logs were not kept to document biological, chemical and physical parameters; personal protective equipment (PPE) was not readily accessible for staff in the reprocessing area; alcohol-based hand rub (ABHR) was not provided in the reprocessing area.

IPAC Lapse Investigation	Yes	No	N/A	Please provide further details/steps
Did the IPAC lapse involve a member of a regulatory college?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If yes, was the issue referred to the regulatory college?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The College of Physicians and Surgeons of Ontario
Were any corrective measures recommended and/or implemented?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Please provide further details/steps

The clinic must ensure the following:

- **Create a one-way work flow from dirty to clean in the dental instrument reprocessing area to prevent cross-contamination**
- **Brushes used for manual cleaning of dental instruments are inspected frequently and changed when soiled; sterilize or dispose of brushes at end of day**
- **Sterilizer is tested with a biological indicator (BI) in a process challenge device (PCD) each day the sterilizer is used and with each type of cycle used that day**
- **Dental equipment/instruments are only released when the BI results are available; if quarantine pending BI results is not possible, evaluation of a Type 5 or 6 chemical indicator (CI) in a PCD and the specific cycle parameters are used to justify the release of sterilized loads**
- **Records are kept to document that biological indicator, chemical indicators and physical parameters (time, temperature and pressure) have been met for every sterilization cycle**
- **PPE is available and readily accessible in the reprocessing area (including gloves, gown, mask, eye protection)**
- **Provide 70% ABHR in the reprocessing area to conduct hand hygiene**

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

2020/01/31

Initial Report Comments and Contact Information

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

Inspection report was provided to the clinic on January 31, 2020 outlining corrective measures to be implemented. The operator was educated on site and instructed to use multi-use equipment that was reprocessed in accordance with Provincial Infectious Diseases Advisory Committee Best Practices for Cleaning, Disinfection and Sterilization of Medical Equipment/Devices in All Health Care Settings, May 2013 ("PIDAC"). A re-inspection will be conducted to ensure corrective measures have been implemented.

If you have any further questions, please contact
Health Connection

Telephone Number 1-800-361-5653	Email Address Health.inspectors@york.ca
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Final Report

Date of Final Report posting (yyyy/mm/dd)
2020/03/04

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

Brief description of corrective measures taken

A re-inspection was conducted on February 19, 2020. At the time of re-inspection, clinic staff demonstrated proper reprocessing practices as per PIDAC best practices. All corrective measures have been put into place.

Date of all corrective measures were confirmed to have been completed (yyyy/mm/dd)
2020/02/19

Final Report Comments and Contact Information

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

If you have any further questions, please contact
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