

**Woodstock Site** 410 Buller Street Woodstock, ON N4S4N2

## **Initial and Final IPAC Lapse Report**

Part A: IPAC Lapse Description				
Premise/Facility under investigation (name and address):				
West Lorne Dental Clinic – 188 Main St., West Lorne, ON, NOL 2P0				
Type of Premise/facility (e.g., medical clinic, multi-service personal	service setting): [	Dental Clinic		
Date the Medical Officer of Health or designate became aware of IPAC lapse: Wednesday, July 5, 2023				
Date IPAC lapse was linked to the premise/facility: Wednesday, July 5, 2023				
Source of IPAC lapse information (e.g., routine inspection, public complaint etc.): Public Complaint				
Summary Description of IPAC Lapse (4-5 sentences maximum):				
Semi-critical, detachable dental devices were not being sterilized.				
<ul> <li>Semi-critical, permanently attached dental devices were not</li> </ul>				
Some dental devices were in the "closed/locked" position	AND were not f	ully disassem	bled during the	
cleaning/sterilization process.				
Inadequate storage of reprocessed critical and semi-critical	al dental devices	•		
Inappropriate setup of reprocessing area.	•			
The available logs for all tests completed on the sterilizers w				
Did the lapse involve a member of a regulatory college?	⊠Yes	□No	□NA	
If yes, was the issue referred to the regulatory college?  If any like here were at here to held your patients?	⊠Yes ⊠Yes	□No □No	□NA □NA	
If applicable, were other stakeholders notified?			INA	
A concise description of the corrective measures required to address the lapse:				
Detachable dental devices must be cleaned and sterilized (as	s per manufacture	er's instruction	ns) after each	
patient.				
Permanently attached dental devices must be covered with		_	•	
Reusable dental devices must be in the "open" and "unlocke	•	disassembled	(as per	
manufacturer's instructions) prior to cleaning and sterilizing.				
Dental devices are to be stored in a manner that prevents possible damage AND contamination to the item				
and its packaging.				
The reprocessing area must allow for one-way workflow.				
<ul> <li>Logs of the sterilizer(s) are to be maintained and include the following: load control label (sterilizer number,</li> </ul>				
load number, and date of sterilization); chart/printout of physical parameters of the sterilization cycle; load				
contents; person responsible; CI monitoring results; BI monitoring results; any malfunction and appropriate				
action taken.				
Please provide further detail/steps, if applicable:				

Date any order(s) or directive(s) issued to the owners/operators, if applicable: Thursday, July 6, 2023		
Part B: Initial Report		
Date of Initial Report posting: <b>Thursday, July 13, 2023</b>		
Date of Initial Report update(s), if applicable: Click or tap to enter a date.		
Additional comments or revisions (indicate the date of revision):		
If you have further questions about this report, please contact communications@swpublichealth.ca		
July 13, 2023		
Signature Date		
Part C: Final Report		
Date of Final Report posting: Click or tap to enter a date.		
Additional order(s) or directive(s) issued to the owners/operators, if applicable: Click or tap to enter a date.		
Brief description of corrective measures taken:		

Date all corrective measures were confirmed to have been completed:

Additional comments:

If you have further questions about this report, please contact communications@swpublichealth.ca		
	Click or tap to enter a date.	
Signature	Date	