

| GEPH Infection Prevention and Control Lapse Report | |
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| Initial Report | |
| Premise/facility under investigation (name and address) | Grand River Orthodontics docbraces Simcoe 191 Queensway West Simcoe, Ontario N3Y 2M8 |
| Type of premise/facility: (E.g. clinic, personal services setting) | Orthodontics office |
| Date Board of Health became aware of IPAC lapse | March 12, 2025 |
| Date of Initial Report posting | April 7, 2025 |
| Date of Initial Report update(s) (if applicable) | |
| How the IPAC lapse was identified | Inspection of clinic in Brantford owned and operated by the same staff. |
| Summary Description of the IPAC Lapse | <p>Findings based on inspection in Brantford clinic:</p> <ul style="list-style-type: none"> • At time of the investigation the instrument/equipment manufacturer's instructions for use (MIFUs) were not available for review • Missing or incomplete documentation and sterilization logs (e.g., load items, tests for ultrasonic cleaner, etc.). • Internal integrators not used in some reprocessed items (e.g., IPR strips, green polishing stones). • Semi-critical items (i.e., hand piece motors) not high-level disinfected or sterilized. • Inconsistent disassembling of instruments (e.g., two-piece mouth mirrors) observed during the inspection. • Sterilized items (e.g., IPR strips, green polishing stones) with no type 5 integrator released prior to knowing the BI results for the day. • Some instruments did not follow the sterilization requirements and/or the time, temperature and pressure parameters set by the manufacturer. • During the complaint inspection it was observed that the disinfection and sterilization of reusable instruments on site |

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| | did not follow Provincial Infectious Disease Advisory Committee (PIDAC) Best Practices for Cleaning, Disinfection and Sterilization of Medical Equipment/Devices (May 2013). |
| IPAC Lapse Investigation | |
| Did the IPAC lapse involve a member of a regulatory college? | Yes i) College of Dental Hygienists of Ontario (CDH) ii) Royal College of Dental Surgeons of Ontario (RCDSO) |
| If yes, was the issue referred to the regulatory college? | Yes |
| Were any corrective measures recommended and/or implemented? | Yes |
| Please provide further details/steps | <ul style="list-style-type: none"> • Facility is to provide the manufacturer's instructions for use (MIFU) of all instruments and equipment to review if sterilization parameters have been met. • Lines in the suction machines are to be flushed as per MIFU • Documentation to be completed in full. • Appropriate Personal Protective Equipment (PPE) is to be based on clinical risk assessment and available to staff. • Items are to be reprocessed as per the MIFU, accompanied with an internal integrator (i.e., type 4 or 5) • At minimum, high-level disinfect (sterilization is preferred) semi-critical items between use (i.e., hand piece motors). • If holding back the processed load/package is not possible, evaluation and documentation of a process challenge device (PCD) containing a Type 5 or 6 chemical indicators and checking, verifying and documenting the specific cycle physical parameters may be used to justify the release of routine loads. |
| Date any order(s) or directive(s) were issued to the owners/operators (if applicable) | March 19, 2025 and April 1, 2025 |
| Initial Report Comments and Contact Information | |
| Any Additional Comments | |
| If you have any further questions, please contact: | |
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| Phone number | 519-753-4937 ext. 251 |
| Final Report | |

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| Date of final report posting | May 13, 2025 |
| Date any order(s) or directive(s) were issued to the owner/operator (if applicable) | |
| Brief description of corrective measures taken | <ul style="list-style-type: none"> • Manufacturer's instructions for use (MIFU) of all instruments and equipment reviewed and available on-site. • Instruments and equipment reprocessed and sterilized with correct parameters as per MIFU. • Lines in the suction machines are flushed as per recommendations. • Documentation completed in full. • Appropriate PPE attained. • Internal chemical indicators (type 5) observed in all sterilized pouches. • Facility to move to using single-use disposable impression trays. • Semi-critical items (e.g., hand piece motors) are at a minimum high-level disinfected (sterilization is preferred) between use. • Sterilized instruments and equipment are not released until BI result is confirmed to have passed. |
| Date all corrective measures were confirmed to have been completed | April 9, 2025 |
| Final report comments | |
| Final Report Contact Information. If you have any further questions, please contact | |
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