

Hamilton Public Health Services

Hamilton Infection Prevention and Control (IPAC) Lapse Report

Final IPAC Investigation Report					
Premise/Facility under Investigation (name & address)					
Saberton Denture & Implant, 289 Queenston Rd, Hamilton ON L8K 1H2					
Type of Premise/Facility					
Measuring and fitting of dentures and implants (no invasive procedures)					
Date of Final Report Posting	Date of Final Report update(s) if				
June 22, 2020	applicable				
	Not applicable				
Brief Description of Corrective Measures Taken					
Hamilton Public Health Services (PHS) has verified, based on the information collected during re-inspection of the premises that all corrective measures recommended by PHS have been implemented.					
Date all corrective measures	Date and list of any order(s) or				
were confirmed to have been	directive(s) that were issued to				
completed	the owner/operator (if				
lupa 12, 2020	applicable)				
June 12, 2020	Not applicable				
If you have any further questions, please contact: Infectious Diseases Program, Hamilton Public Health Services 905-546-2063 or infectious.disease@hamilton.ca					
Date of Initial Report Posting	Date of Initial Report update(s)				
March 30, 2020	if applicable				
	Not applicable				
How Board of Health became awa	are of potential IPAC lapse?				
Complaint received on Mar 10, 2020					
 Summary Description of IPAC Lapse During an inspection conducted by Hamilton Public Health Services on March 12, 2020, the following IPAC lapses were identified: Improper practices related to reprocessing of lab instruments. Improper practices related to high-level disinfection of lab equipment/instruments. Reprocessed, sterile items not being stored and maintained sterile until point-of-use. Insufficient cleaning of non-critical surfaces and equipment. Lack of appropriate PPE. 					

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I PAC Lapse	Yes	No	N/A	Details		
Investigation						
Did the IPAC lapse	\boxtimes			College of Denturists of		
involve a member of a				Ontario		
regulatory college?						
If yes, was the issue	\boxtimes			March 18, 2020		
referred to the						
regulatory college?						
Corrective measures recommended and/or implemented						
The following corrective measures were recommended based on current						
evidence and best practice documents:						
All instruments/equipment must be single-use or able to be sterilized						
as per manufacturer's instructions for use. Follow Public Health						
Ontario's document, IPAC best practices for Cleaning, Disinfection						
and Sterilization, May 2013.						
				indard for the College of		
Denturists of Ontario; work towards compliance with the College of						
Denturists of Ontario Draft Guideline: Infection Prevention and						
Control, March 2020).					
 Ensure all sterilization 	on cyc	les wi	th para	ameters are verified and logged		
as per document above.						
If performing high-level disinfection of non-critical instruments and						
devices, follow the PHO document named above.						
 Operate and maintain ultrasonic cleaner as per manufacturer's 						
instructions for use.						
 Sterile equipment m equipment. 	iust be	e store	ed sepa	arately from non-sterile or dirty		
	ork fl	איר fra	om dirt	ty to clean. Keen area		
 Ensure a one-way work flow, from dirty to clean. Keep area uncluttered and clean. 						
		terile	until p	oint-of-use		
 Maintain sterile items as sterile until point-of-use. Ensure a supply of PPE is available and is appropriately used. 						
 Provide alcohol-based hand rub for hand hygiene. 						
 Replace porous surfaces with non-porous, cleanable surfaces. 						
 Discard all instruments/devices that can not be cleaned properly 						
prior to sterilization (i.e. rusted instruments).						
 Ensure there is a written cleaning schedule for reprocessing area. 						
 All storage containers must be cleaned between clients. 						
 Staff providing reprocessing must be appropriately knowledgeable 						
and/or trained.						
 Develop policies and procedures for reprocessing. 						
Date and list of any order(s) or directive(s) that were issued to						
the owner/operator (if applicable)						
	аррп	Capie)			
Not applicable						

Additional Comments:

An inspection report was given to the premises/facility owner noting corrective measures. Information, education and resources were provided. Owner voluntarily closed 3 premises to implement corrective measures. All clinic locations closed as a result of the current COVID-19 pandemic.

A re-inspection was completed on June 12, 2020 prior to the premises reopening which verified the recommended corrective measures had been implemented. An inspection of the remaining two premises was completed prior to reopening, no issues identified.