



## PUBLIC HEALTH UNIT INFECTION PREVENTION AND CONTROL LAPSE REPORT

### Initial Report

Premise/facility under investigation (name and address)	Northern Tattoo Ink North Bay, also known as Northern Custom Tattoo Piercing, located at 68 Lakeshore Drive, North Bay, Ontario P1A 2Z3.
Type of premise/facility: (e.g., clinic, personal services setting)	Personal Services Setting
Date Board of Health became aware of IPAC lapse	December 5, 2023
Date of Initial Report posting	December 12, 2023
Date of Initial Report update(s) (if applicable)	Not applicable
How the IPAC lapse was identified	Other
Summary Description of the IPAC Lapse	<p>A compliance inspection was conducted at the facility on November 30, 2023, where:</p> <ul style="list-style-type: none"><li>▪ Full client records were not available, including pertinent information missing.</li><li>▪ Sterilization records were not available.</li><li>▪ Spore test challenge records were not available.</li><li>▪ Expired piercing tools/equipment were observed.</li><li>▪ Piercing tools/equipment were observed to be stored in water damaged packages.</li><li>▪ Lot numbers and expiry dates were not being recorded on client jewelry packages.</li><li>▪ Active signs of reprocessing observed.</li></ul>



## IPAC Lapse Investigation

Did the IPAC lapse involve a member of a regulatory college?	No
If yes, was the issue referred to the regulatory college?	Not applicable
Were any corrective measures recommended and/or implemented?	Yes
Please provide further details/steps	<p>Corrective measures as follows:</p> <ol style="list-style-type: none"> <li>1. Appropriate client records must be maintained (1 year on-site, 2 years thereafter).</li> <li>2. Appropriate sterilization records must be maintained, including critical parameters (1 year on-site, 2 years thereafter).</li> <li>3. Appropriate spore test challenge records must be maintained (1 year on-site, 2 years thereafter).</li> <li>4. Expired items must not used.</li> <li>5. Appropriate sterilization must be carried out, including but not limited to overloading the unit, and ensuring that moisture is not within packaging.</li> <li>6. 3 consecutive negative/passed spore test results must be obtained from a laboratory prior to use of sterilizer following a prolonged inactive use period.</li> </ol>
Date any order(s) or directive(s) were issued to the owners/operators. (if applicable)	November 30, 2023, Health Protection and Promotion Closure Order Served.

## Initial Report Comments and Contact Information

Any Additional Comments (Do not include any personal information or personal health information)	A compliance inspection was conducted November 30, 2023, where a closure order was issued. Corrective measures were required as indicated. Re-inspection date has not yet been scheduled.
--	---



## Final Report

Date of Final Report posting:	January 16, 2024
Date any order(s) or directive(s) were issued to the owner/operator (if applicable)	On December 18, 2023, the Health Protection and Promotion Closure Order that had been previously served, was rescinded.
Brief description of corrective measures taken	On December 18, 2023, a re-inspection was conducted by Public Health Inspector's. Previous non-compliance items had since been addressed and rectified. Facility was permitted to re-open as of December 18, 2023.
Date all corrective measures were confirmed to have been completed	December 18, 2023

---

## Final Report Comments and Contact Information

Any Additional Comments  
(Do not include any personal information or personal health information)

---

### If you have any further questions, please contact:

Name	Robert A-Muhong
Title	Program Manager, Environmental Health
E-mail address	<a href="mailto:robert.a-muhong@healthunit.ca">robert.a-muhong@healthunit.ca</a>
Phone number	705-474-1400 ext. 5320

---