
Initial Report

Premises/Facility under investigation (name and address)

Luxury Lashes
123 Woodbury Crescent
Newmarket, ON, L3X 2T3

Type of Premises/Facility

Personal Service Settings

Date Board of Health became aware of IPAC lapse (yyyy/mm/dd)	Date of Initial Report posting (yyyy/mm/dd)
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2025/03/24

2025/04/07

Date of Initial Report update(s) (if applicable) (yyyy/mm/dd)	How the IPAC lapse was identified
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Complaint

Summary Description of the IPAC Lapse

- Cleaning and disinfection of reusable equipment/tools was not conducted in accordance with "Public Health Ontario: Guide to Infection Prevention and Control in Personal Service Settings, 3rd Edition, July 2019".
- Disinfectant used for reprocessing of reusable equipment was not accompanied by a Health Canada Drug Identification Number (DIN), Natural Product Number (NPN) or Class 2 Device License.

IPAC Lapse Investigation	Yes	No	N/A	Please provide further details/steps
Did the IPAC lapse involve a member of a regulatory college?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If yes, was the issue referred to the regulatory college?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Were any corrective measures recommended and/or implemented?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Please provide further details/steps	Corrective measures for Premises/Facility: <ul style="list-style-type: none"> Clean and disinfect all equipment/tools after each use in accordance with the "Public Health Ontario: Guide to Infection Prevention and Control in Personal Service Settings, 3rd edition, First Revision: July 2019." Use disinfectants for the reprocessing of reusable equipment/devices that have an expiry date, a Drug Identification Number (DIN), Natural Product Number (NPN), and/or Medical Device License (MDAL) with Health Canada (with exception of Chlorine Bleach). 			

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

Corrective measures were implemented, and education provided 2025/03/24.

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

If you have any further questions, please contact:
Health Connection



York Region
Infection Prevention and Control Lapse Report

Telephone Number

1-800-361-5653

Email Address

Health.inspectors@york.ca

Final Report

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

2025/04/07

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

Brief description of corrective measures taken

Corrective measures were implemented, and education was provided 2025/03/24.

All equipment/tools are cleaned and disinfected after each use in accordance with the "Public Health Ontario: Guide to Infection Prevention and Control in Personal Service Settings, 3rd edition, First Revision: July 2019."

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

Reinspection conducted and all corrective measures were confirmed to have been completed 2025/03/27.

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.

Health Connection

Telephone Number

1-800-361-5653

Email Address

Health.inspectors@york.ca