

York Region Infection Prevention and Control Lapse Report

Initial Report					
Premises/Facility under investigation (name	and ad	ldress))		
Nails For You Upper Canda Mall					
G5-17600 Yonge Street					
Newmarket, Ontario, L3Y 4Z1					
Type of Premises/Facility					
Personal Service Setting					
Date Board of Health became aware of IPAC lapse (yyyy/mm/dd)		Date of Initial Report posting (yyyy/mm/dd)			
2025/07/17			2025/07/24		
Date of Initial Report update(s) (if applicable (yyyy/mm/dd)		How the IPAC lapse was identified			
		Complaint			
Summary Description of the IPAC Lapse					
 Cleaning and disinfection of reusable equip "Public Health Ontario: Guide to Infection F Edition, July 2019". Disinfectant not used as per the Manufacture required contact time. 	reventio	n and	Contro	ol in Personal Service Settings, 3rd	
IPAC Lapse Investigation	Yes	No	N/A	Please provide further details/steps	
Did the IPAC lapse involve a member of a regulatory college?		\boxtimes			
If yes, was the issue referred to the regulatory college?			\boxtimes		
Were any corrective measures recommended and/or implemented?	\boxtimes				
Please provide further details/steps	 Corrective measures for Premises/Facility: 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, July 2019". Use disinfectants in accordance with the Manufacturer's Instructions for Use (MIFU). 				
Date any order(s) or directive(s) were issued N/A	d to the	owner	/opera	ator (if applicable) (yyyy/mm/dd)	
Initial Report Comments:					
Operator was provided with education on corre	ctive me	easures	S.		
Any additional Comments: (Please do not in information)	iclude a	iny pei	rsonal	information or personal health	
If you have any further questions, please conta Health Connection	ct:				
Telephone Number	Email Address				
1-800-361-5653	Health.inspectors@york.ca				



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Final Report

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

2025/07/24

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

N/A

Brief description of corrective measures taken

Corrective measures were confirmed to have been implemented on July 18,2025.

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

2025/07/18

Final Report Comments and Contact Information

Reinspection was conducted, and all corrective measures were confirmed to have been implemented on July 18, 2025

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	Email Address
1-800-361-5653	Health.inspectors@york.ca