



## PUBLIC HEALTH UNIT INFECTION PREVENTION AND CONTROL LAPSE REPORT

### Initial Report

Premise/facility under investigation (name and address)	MK Nails located at 1867 O'Brien Street, North Bay, Ontario P1B 5Y7
Type of premise/facility: (e.g., clinic, personal services setting)	Personal Services Setting
Date Board of Health became aware of IPAC lapse	4/20/2023
Date of Initial Report posting	4/25/2023
Date of Initial Report update(s) (if applicable)	Not applicable
How the IPAC lapse was identified	Other
Summary Description of the IPAC Lapse	<p>Complaint received 4/4/2023. A client reported an injury during service resulting in an infection. Onsite investigation occurred on 5/4/2023 where:</p> <ul style="list-style-type: none"><li>• A proper reprocessing area was not available for reusable equipment to be cleaned and disinfected, as required.</li><li>• Reusable equipment, including tweezers and dremel bits were observed not to be cleaned as required after each use.</li><li>• Reusable equipment, including tweezers, manicure/pedicure tools and dremel bits were observed not to be disinfected as required after each use.</li><li>• One disinfectant did not have a Drug Identification Number (DIN) and another disinfectant was not being used as per manufacturer's instructions.</li><li>• Staff were not washing their hands, as required, after removing gloves and before and after services.</li><li>• Records of accidental exposures to blood not kept.</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	Corrective measures as follows: <ol style="list-style-type: none"><li>1) All reusable equipment must be cleaned and disinfected at a reprocessing area that meets the requirements.</li><li>2) Clean all reusable equipment after each client.</li><li>3) Disinfect all reusable equipment after each client.</li><li>4) Use disinfection products that have a DIN and is used as per manufacturer's instructions.</li><li>5) Wash hands before and after each service and at other times, when necessary.</li></ol>
Date any order(s) or directive(s) were issued to the owners/operators (if applicable)	Issued report of inspection detailing infractions and directives on 5/4/2023.

## Initial Report Comments and Contact Information

Any Additional Comments (Do not include any personal information or personal health information)	Complaint investigation was conducted 5/4/2023, a yellow conditional pass resulted from this investigation. Corrective measures were required as indicated above. Re-inspections occurred on 11/4/2023 and 25/4/2023 where some corrective measures are outstanding.
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## Final Report

Date of Final Report posting:

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

Brief description of corrective measures taken

Date all corrective measures were confirmed to have been completed

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## Final Report Comments and Contact Information

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

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

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