#### Request for Service

**Activity Comments:** 

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-032512 - SALT LAKE NAILS

214 W 600 S

**SALT LAKE CITY, UT 84101** 

Date: 06/11/2018 Time: 8:43 am Assigned To: LERSLERPHANT, PATOM Status: Resolved Method Received: Phone Referred To: Date: Date Resolved: 06/11/2018 EHS: LERSLERPHANT, PATOM No Notified Requester: Conditions: Had a pedicure, not cleaning bath and instruments, got red bumps on top of feet and ankles, itchy, June 4, \*\*has picture of her feet\*\* Service Requested By: Owner/Facility: TERRAH NGUYEN Address: 214 W 600 S Address: 99999 City, State & Zip: SLC UT, 84101 City, State & Zip: Phone Number: home Phone Number: home **Property Owner:** Address: City, State & Zip: Phone Number: no phone listed Comments: Date: 6/11/18 Reporting Area: Cosmetology EHS: LERSLERPHANT, PATOM 45 min Activity Description: Complaint Investigation (Field) **Activity Time: Activity Comments:** Site visit. Talked to 2 managers (one of the is Traci, the manager whom I spoken with the last complaint). They put the pedicure tools into individually wrapped set inside a sterilization pouches and store them in a sterilized container. (They autoclave the tools onsite) They also show me all the cleaning chemical and cleaning procedure they employ on the chair and foot tub. I recommended that management routinely remind their employee of the correct sanitary procedures in which they have to follow strictly. Date: Reporting Area: EHS: **Activity Minutes: Activity Comments:** Date: Reporting Area: EHS: **Activity Minutes: Activity Comments:** EHS: Date: Reporting Area: **Activity Minutes: Activity Comments:** EHS: Date: Reporting Area: **Activity Minutes:** 

DEPARTMENT

Request Number 153730

UTENV\_REPORT\_0029.rpt Page 1 06/12/2018

#### COMPLAINT ID: CO0001120

#### COMPLAINT DISPOSITION

Received by: Carl Shupe on 2018 Jan 18

Assigned to: Edward Parker on 2018 Jan 18

Resolved Date: 2018 Feb 05 Status:

CLOSED

Related ID: No Related ID

Program/Element: CF00 - COMMERCIAL FACILITIES PROGRAM

Approved by: EE0015756 - Blackham, Rachelle on 2018 Feb 05

#### COMPLAINT

Complainant had a manicure. The operator, , also the owner, had fungus on his fingernails while working on the complainant. He was not wearing any gloves during the process, nor was any hand washing observed.

The complainant's daughter also went to this facility and contracted fungus on her toe nails and has recently lost six toe nails.

The tools may be used without disinfection between each customer.

#### SITE INFORMATION

#### PROPERTY INFORMATION

Pro Nail

Contact Information

Property Owner Information

Location

Site Address: 2146 N Main St Unit 522

LAYTON, UT 84041

Address Not Specified

Property Owners Name not Specified

Address Not Specified

Parcel ID:

Number Not Specified No Email Specified

#### ACTIVITY REPORT

Date of Activity Service Code & Comments

 $0.80 \, hrs$ 

Serial Employee ID and Name

01/18/18 CONSULTATION

Rec'd.

0.50 hrs DA0004865 EE0014312 - Shupe, Carl

01/24/18 COMPLAINT INVESTIGATION

0.05 hrs DAPHFDAQL EE0016246 - Parker, Edward

Rachelle and I stopped by to investigate the complaint. Only 1 employee was there with a client so we told them we would come back later to discuss the complaint.

01/24/18

COMPLAINT INVESTIGATION

0.25 hrs DAQMSTGFD EE0016246 - Parker, Edward

Rachelle Blackham and I visited the facility and spoke with the owner, . He said that he does not work on customers that have nail fungus and that he does not have nail fungus. We did not observe evidence to suggest that he did have any type of infections on his hand or nails. We then had him show us the sanitization process for the foot soaks. They essentially did not have any type of sanitization process. The soaking tubs were scrubbed with a used sponge and soap. They had a possible sanitizer but said that they do not use it because the customers don't like it. We educated him on sanitizing the tubs. We will email our findings to DOPL in case they would like to take actions.

There are no further actions at this time.

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-032512 - SALT LAKE NAILS

214 W 600 S

**SALT LAKE CITY, UT 84101** 

Date: 04/18/2018 Time: 10:48 am Assigned To: LERSLERPHANT, PATOM Status: Resolved

Method Received: Phone Referred To: Date:

Date Resolved: 04/18/2018

Notified Requester: No EHS: LERSLERPHANT, PATOM

Request Number 152285

Conditions: Received a cut on finger from file, not disinfecting between customers.

Owner/Facility: TERRAH NGUYEN Service Requested By:

Address: 214 W 600 S

City, State & Zip: SLC UT, 84101

Phone Number: home

Property Owner:

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By: ANON ANON

Address:

City, State & Zip: 99999

Phone Number: home (999) 999-9999

Comments:

Date: 4/18/18 Reporting Area: Cosmetology EHS: LERSLERPHANT, PATOM

Activity Time: 35 min Activity Description: Complaint Investigation (Field)

Activity Comments: Site visit. Talked to the general manager (Traci). Quizzing her on the proper disinfection steps along

with the tools that they are using. Her answer regarding disinfection were satisfactory, but I also recommended her to go over the disinfection steps with all of her employees just to make sure

everyone is one the same page.

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Request Number 151946

Premise: 35-033217 - WHITNEE ELLSWORTH

8846 S REDWOOD RD

(1700 W)

**WEST JORDAN, UT 84088** 

Date, 04/04/2010 Tille, 10.00 all Assigned to. 1112/1110, 1011	Date:	04/04/2018	Time: 10:05 am	Assigned To:	TREVINO, TOM	Status: Op
--	-------	------------	----------------	--------------	--------------	------------

Method Received: Phone Referred To: Date:

Date Resolved:

Notified Requester: No EHS:

Conditions: HM Comp works in the office next door to this establishment, there is a strong odor

coming from the nail salon in suite C212.

Owner/Facility: WHITNEE ELLSWORTH

Address: 8846 S REDWOOD RD

City, State & Zip: WEST JORDAN UT, 84088

Phone Number: home

Property Owner:

City, State & Zip:

Phone Number: no phone listed

Service Requested By:

Address:

City, State & Zip: 99999

Phone Number: home

Comments:

Address:

Date: 4/9/18 Reporting Area: Cosmetology EHS: MCCORMICK, HEATHER

Activity Time: 15 min Activity Description: Complaint Investigation (Office)

Activity Comments: Out of Office on 4/6/2018,

Called Lynn from DOPL and she will investigate if they have changed ownership and are required to have source capture systems. At this time no further action can be taken by the health department.

Date: Reporting Area: EHS: Activity Minutes:

Date: Reporting Area: EHS: Activity Minutes:

Activity Comments: EHS: Activity Minutes:

Date: Reporting Area: EHS: Activity Minutes:

Activity Comments:

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Request Number 151849

Premise: 35-045572 - BONNIE NAILS LLC 5414 W DAYBREAK PKWY (11400 S)

SOUTH JORDAN, UT 84009

Date: 04/02/2018 Time: 8:24 am Assigned To: MACCOURTNEY, COOPER Status: Resolved

Method Received: Phone Referred To: Date:

Date Resolved: 04/02/2018

Notified Requester: No EHS: MACCOURTNEY, COOPER

Conditions: Some girls working there don't have licenses - comp was cut 3 times during mani/pedi.

Owner/Facility: JIMMY LE

Address: 5414 W DAYBREAK PARKWAY C3

City, State & Zip: SOUTH JORDAN UT, 84009

Phone Number: home

Property Owner:

Address: City, State & Zip:

City, State & Zip.

Phone Number: no phone listed

Service Requested By: ANON ANON

Address:

City, State & Zip: 99999

Phone Number: home (999) 999-9999

Comments:

Date: 4/2/18 Reporting Area: Cosmetology EHS: WOLF, JOSHUA

Activity Time: 45 min Activity Description: Joint Field Activity

Activity Comments: JFA with Cooper

Date: 4/2/18 Reporting Area: Cosmetology EHS: MACCOURTNEY, COOPER

Activity Time: 45 min Activity Description: Complaint Investigation (Field)

Activity Comments: Site visit to nail salon with Josh. Spoke with the manager Lee (Jimmy, the owner was not present).

She said the client had thin nails and they accidently cut the cuticle. They said they did provide first aid and they cleaned the wound and provided a band aid. We checked a few licenses and verified them with Driver's Licenses. We also looked at the stations. We had them throw away a used file that

was stored in the drawer. Also found used dremmel tips stored that had not been cleaned.

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-017144 - T & T NAILS, INC

250 W 2100 S

(2100 S)

**SALT LAKE CITY, UT 84115** 

Date: 03/30/2018	Time: 2:54 pm	Assigned To:	LEE, LORA	Status: Resolved
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Method Received: Email Referred To: Date:

Date Resolved: 04/02/2018

Notified Requester: No EHS: LEE, LORA

Conditions: Comp states there are several people there who are practicing without a DOPL License.

See attached.

Owner/Facility: THUAN VAN LE

Address:

City, State & Zip: WEST VALLEY UT, 84119

Phone Number: home

**Property Owner:** 

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By:

Request Number 151842

Address:

City, State & Zip: 99999

Phone Number: home

Comments:

Date: 4/2/18 Reporting Area: Cosmetology EHS: LEE, LORA

Activity Time: 15 min Activity Description: Complaint Investigation (Office)

Activity Comments: I spoke to Kerry regarding this complaint; we agreed since the only aspect of the complaint was

operators without DOPL's that this should be referred to DOPL. I scanned the complaint and emailed it to tmagana@utah.gov.

Complete

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint Reporting Area: Cosmetology

Premise: 35-049395 - NAILED 2 3369 S HIGHLAND DR

**MILLCREEK TS, UT 84106** 

Date: 03/21/2018 Assigned To: TORRES-GEORGE, ZACH Status: Resolved Time: 1:13 pm

Method Received: Phone Referred To: Date:

> Date Resolved: 03/22/2018

EHS: TORRES-GEORGE, ZACH No Notified Requester:

Address:

City, State & Zip:

DEPARTMENT

Request Number 151655

Conditions: Salon has no sanitation practices, work on people with fungus, don't clean the pedicure

chair, aesthetician uses a drill to take off acrylic and gel polish.

ANON Service Requested By: Owner/Facility: TRICIA BENNION

Address: City, State & Zip: SALT LAKE CITY UT, 84108

Phone Number: home Phone Number: home

**Property Owner:** Address:

City, State & Zip:

Comments:

Phone Number: no phone listed

Date: 3/22/18 Reporting Area: Cosmetology EHS: TORRES-GEORGE, ZACH

15 min Activity Description: Complaint Investigation (Field) **Activity Time:** 

**Activity Comments:** Site visit. I spoke with the manager on duty. Clorox wipes and barbicide are used to disinfect tools

> and surfaces. If a client has a fungal infection on their nails, staff are instructed to refer them to the appropriate medical professional. Licensed Nail Technicians are employed at the location and use the small Dremel tools commonly seen in nail salons. The facility meets our regulations. Complete. ZTG

Date: Reporting Area: EHS: **Activity Minutes:** 

**Activity Comments:** 

Date: Reporting Area: EHS: **Activity Minutes:** 

**Activity Comments:** 

EHS: Date: Reporting Area: **Activity Minutes:** 

**Activity Comments:** 

EHS: Date: Reporting Area: **Activity Minutes:** 

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-046800 - CREATIVE NAIL

241 E 12300 S

(12300 S)

DRAPER, UT 84020

Date: 03/08/2018 Time: 2:36 pm Assigned To: DUCKWORTH, DAVID Status: Resolved

Method Received: Phone Referred To: Date: 03/12/2018

Date Resolved: 03/12/2018

Notified Requester: No EHS: DUCKWORTH, DAVID

Request Number 151327

Conditions: Nail fungus growing after complaint went in for an appointment. Complainant doesn't

think they are cleaning their tools. \*Follow up with complainant

Owner/Facility: CREATIVE NAIL

Address:

City, State & Zip: WEST JORDAN UT, 84081

Phone Number: home

work (801) 554-0633

**Property Owner:** 

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By:

Address:

City, State & Zip:

Phone Number: home

Comments:

Date: 3/12/18 Reporting Area: Cosmetology EHS: DUCKWORTH, DAVID

Activity Time: 5 min Activity Description: Complaint Investigation (Field)

Activity Comments: see routine inspection, discussed complaint and reviewed disinfection practice with owner.

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

Activity Comments:

Date: Reporting Area: EHS: Activity Minutes:

Activity Comments:

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint Reporting Area: Cosmetology

Premise: 35-032984 - SISI NAIL SALON LLC

3544 W 6200 S

(6200 S)

TAYLORSVILLE, UT 84118

Date: 03/02/2018 Time: 10:36 am Assigned To: BENNETT, JAMES Status: Resolved

Method Received: **Email** Referred To: Date:

> Date Resolved: 04/24/2018

EHS: BENNETT, JAMES No Notified Requester:

Extremely dirty; not cleaning tools between clients; wiping pedicure tubs with dirty rags -Conditions:

and not using cleaner; paraffin wax is scraped off and put back into container for reuse.

Owner/Facility: JESSICA BUI

Address:

City, State & Zip: KEARNS UT, 84119 Phone Number: home

work (801) 831-3558

**Property Owner:** 

Address:

City, State & Zip:

Phone Number: no phone listed

ANON ANON Service Requested By:

Request Number 151179

Address:

City, State & Zip:

Phone Number: no phone listed

Comments:

Date: 4/24/18 Reporting Area: Cosmetology **EHS: BENNETT, JAMES** 

Activity Description: Complaint Investigation (Field) 1 hr / 0 min **Activity Time:** 

Field Inspection, ongoing problems with this facility. Still having issues with disinfection and reusing **Activity Comments:** 

products. Stations are still dirty, they claim they are renovating facility, will need to conduct

additional followup inspection.s.

EHS: PLUTA, JAMIE Date: 3/14/18 Reporting Area: Cosmetology

Activity Description: Complaint Investigation (Field) Activity Time: 30 min

**Activity Comments:** I went to the property and found that the complaint was verified. I met with Ngoc Danos who said that

> she would have the owner call me regarding the issues. I told them that they would need to meet with us next week with a written plan of how they would remain in compliance. She agreed. Please see

attached inspection results. JSP

Date: 3/6/18 EHS: PLUTA, JAMIE Reporting Area: Cosmetology

Activity Description: Complaint Investigation (Office) **Activity Time:** 2 min I received the complaint. I will go to the property and investigate. JSP **Activity Comments:** 

Date: Reporting Area: EHS: **Activity Minutes:** 

# **Request for Service**

Request Type: Complaint
Reporting Area: Cosmetology

SALT LAKE COUNTY HEALTH DEPARTMENT

Request Number 150736

Premise: 35-044798 - COLOR MY NAILS

85 E 7200 S (7200 S)

MI	DVALE, UT 84	1047		
Date: 02/12/2018	Time: 9:46 am	Assigned To: BC	OURKE, GERARD	Status: Resolved
Method Received:	Phone	Referred To:		Date:
		Date Resolved:	02/15/2018	
		Notified Requeste	r: No	EHS: BOURKE, GERARD
Conditions: Poor	ven <mark>tilation in nail s</mark>	alon. Strong fumes, o	causing headaches.	
Owner/Facility: GLI Address: 85 E 7200 S City, State & Zip: MII Phone Number: hom  Property Owner: Address: City, State & Zip: Phone Number: no p	DVALE UT, 84047		Service Requested By: Address: City, State & Zip: Phone Number: home work	
Comments:				
Date: 2/15/18 Activity Time: 10 r	Reporting Area: Cosmin Acti		EHS laint Investigation (Office)	S: BOURKE, GERARD
Activity Comments:	Gbourke left a voice requirements.	email for	referring him to Midv	ale City for ventilation

Date: Reporting Area: Activity Comments:		EHS:	Activity Minutes:
Date:	Reporting Area:	EHS:	Activity Minutes:
Date:	Reporting Area:	EHS:	Activity Minutes:
Date:	Reporting Area:	EHS:	Activity Minutes:









#### General frm\_Complaint

Weber-Morgan Health Department

Date May 29, 2018

Time 09:26 AM

Assigned To Nella Forsberg

Complaint # 2018-0529-8805

Complainant

First Name:

e-Mail:

**Business Name:** 

Address:

Last Name:

Home Phone: Work Phone:

Location of Complaint

Occupant

First Name:

Business Name: Lynn's Nails

Address: 3606 W 5600 S

Roy UT 84067

Home Phone:

Work Phone: (801) 985-0867

Last Name:

Location Description:

Property Owner

First Name:

e-Mail:

Business Name: Lynns's Nails

Address: 3606 W 5600 S

Roy UT 84067

Last Name:

**Home Phone:** 

Work Phone: (801) 985-0867

Comments:

Nature of Complaint

Had a pedicure 5/25/18 @4:30 pm. The worker used a metal cheese grader which caused several cuts on the bottom of feet. Has health concerns for customers.

Status

Open

**Complaint Type** Cosmetology

Received By

Gina Kelly

Referred to Attorney

Action

**Action Taken:** 

Investigation Date Jun 13,

Complainant left no phone # with the complaint. I called the salon 6/1/18 to discuss complaint with the salon, but language barrier will require in person visit. Checked spread sheet and can't find where we have inspected Lynn's. Call to DOPL. They had complaint/s about the salon also and wanted to see the salon as well. On 6/13/18 Lynne A. and Elisa C. of DOPL met me at Lynn's Nails. We conducted an Inspection where we found many items of concern, WMHD; no backflow protection, wrong concentration of sanitizer (barbicide, sanitizer for foot bath after cleaning); barbicide not changed frequently enough, pedicure kits were dirty and had dirty instruments in them; no soap at the bathroom sink. no hot water at the bathroom sink (owner said that customers are told to use the hand sink by the pedicure bowls); products not labeled; towels seemed dirty and were not stored properly (In enclosed cabinet or container); credo planer, blades and "cheese grater" microplaners were present, new and used; no master estheticians licensed to work here (but blades are being used-unallowed); some utensils in the UV cabinet were not properly cleaned first, UV cabinet is not being used properly (bag use, towel blocking UV from bottom shelf; excess personal items on the premises; Roy

business license expired 12/31/17.

Salon owner (Thanh Nguyen) was issued a citation from DOPL and a Notice to Comply from WMHD. Notice to Comply is attached. Salon owner has until June 30, 2018 to have plumbing repaired. The backflow fix is per SLCHD Cosmetology Backflow Protection and Cross Control Requirements brochure: PVB on hot and cold water lines upstream of the spas and 12" above the basin of the foot spa. Discussed and left with owner: SLC pamphlet about backflow and EPA guide to Preventing Pedicure Foot Spa Infections.

Complaint will be left open until backflow and other issues are resolved.

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-024126 - 3D NAIL SALON

7695 S STATE ST

(100 E)

MIDVALE, UT 84047

Date: 11/21/2017 Time: 8:01 am Assigned To: BOURKE, GERARD Status: Resolved

Method Received: Phone Referred To: Date:

Date Resolved: 11/21/2017

Notified Requester: No EHS: BOURKE, GERARD

Conditions: The salon is allowing a client to smoke her E-cigarette while getting her nails done.

Owner/Facility: ADRIANA RIVEROS

Address: 7695 S STATE ST

City, State & Zip: MIDVALE UT, 84047

Phone Number: home

Service Requested By: ANON ANON

Request Number 148818

Address:

City, State & Zip:

Phone Number: no phone listed

**Property Owner:** 

Address:

City, State & Zip:

Phone Number: no phone listed

Comments:

Date: 11/21/17 Reporting Area: UICAA EHS: BOURKE, GERARD

Activity Time: 30 min Activity Description: Complaint Investigation (Field)

Activity Comments: Site visit, spoke with Adriana. She was not aware of the reported activity, but will advise her staff to

not permit smoking inside or within 25 feet of the entrance.

Date: Reporting Area: EHS: Activity Minutes:

Date: Reporting Area: EHS: Activity Minutes:

Activity Comments: EHS: Activity Minutes:

Date: Reporting Area: EHS: Activity Minutes:

Activity Comments:

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology



Request Number 148544

**Activity Minutes:** 

Premise: 35-0013922 - WILD ORCHID NAILS CORPORATION

3898 W INNOVATION DR

(13400 S)

**RIVERTON, UT 84065** 

Date: 11/07/2017 Time: 3:25 pm Assigned To: BOURKE, GERARD Status: Resolved

Method Received: Phone Referred To: Date:

Date Resolved: 11/13/2017

Notified Requester: No EHS: BOURKE, GERARD

Conditions: Store is dirty, garbages, walls, floors, stations not sanitary. Suspects this is where she

picked up her nail infection.

Owner/Facility: CHRISTOPHER XUAN NGUYEN

Address: 3898 W INNOVATION DR STE A City, State & Zip: RIVERTON UT, 84065

Phone Number: home

work (801) 856-4685

Reporting Area:

Property Owner:

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By: ANON ANON

Address:

City, State & Zip:

Phone Number: no phone listed

Comments:

Date: 11/13/17 Reporting Area: Cosmetology EHS: BOURKE, GERARD

Activity Time: 1 hr / 0 min Activity Description: Complaint Investigation (Field)

Activity Comments: Site visit with Heather. Upon entry, a dog came and barked at us, and the nail techs began taking

files, sanding sponges etc. and discarding them. Some equipment is coated with debris, and general cleanliness is poor. Amanda escorted us but was not able to understand English very well. We

EHS:

discussed discarding single use items and not allowing pets in the salon.

**Activity Comments:** 

Date:

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Request Number 148298

Premise: 35-030262 - GLAM NAILS

3649 W SOUTH JORDAN PKWY

(10575 S)

**SOUTH JORDAN, UT 84095** 

Date: 10/27/2017 Time: 4:41 pm Assigned To: MACCOURTNEY, COOPER Status: Resolved

Method Received: Phone Referred To: Date:

Date Resolved: 11/03/2017

Notified Requester: No EHS: MACCOURTNEY, COOPER

Conditions: Very dirty floors, sink, etc. Suspects that they re-use tools and supplies.

Owner/Facility: DUNG MAI

Address:

City, State & Zip: WEST JORDAN UT, 84081

Phone Number: home

Property Owner:

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By:

Address:

City, State & Zip:

Phone Number: no phone listed

Comments:

Date: 11/3/17 Reporting Area: Cosmetology EHS: MACCOURTNEY, COOPER

Activity Time: 10 min Activity Description: Complaint Investigation (Office)

Activity Comments: Sophia called back. She thought I had come to follow up on backflow testing. She sent in proof that

the PVB's had been tested for 2017. She explained that they use liners in the pedicure chairs, clean with barbacide, and use single use foam buffers/files. She sent in pictures of their supply of single use

buffers.

CLOSED

Date: 11/3/17 Reporting Area: Cosmetology EHS: MACCOURTNEY, COOPER

Activity Time: 20 min Activity Description: Complaint Investigation (Field)

Activity Comments: Site visit, spoke with Sophia the manager. The facility was very busy, they said they are less busy in

the mornings Mon-Wed, will follow up next week.

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology



Request Number 148236

Premise: 35-018150 - TOP NAILS & HAIR BEAUTY SCHOOL LLC

1735 W 5400 S

(5400 S)

**TAYLORSVILLE, UT 84118** 

Date: 10/26/2017 Time: 8:35 am Assigned To:	: CLEGG, GREGORY	Status: Resolved
---	------------------	------------------

Method Received: Email Referred To: Date:

Date Resolved: 10/30/2017

Notified Requester: No EHS: CLEGG, GREGORY

Conditions: The students with very little training are working on the public with no supervision. See

the attached email.

Owner/Facility: HUONG NGUYEN

Address:

City, State & Zip: WEST JORDAN UT, 84084

Phone Number: home

Property Owner:

City, State & Zip:

Address:

Phone Number: no phone listed

Service Requested By:

Address:

City, State & Zip: 99999

Phone Number: home

Comments:

Date: 10/30/17 Reporting Area: Cosmetology EHS: CLEGG, GREGORY

Activity Time: 30 min Activity Description: Complaint Investigation (Field)

Activity Comments: Spoke with Van and Jasmine owners of the college and salon. They both claim there is supervision

on every student in the college. Complete.

Date: Reporting Area: EHS: Activity Minutes: Activity Comments:

Date: Reporting Area: EHS: Activity Minutes:

Activity Comments:

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

Status Closed

Complaint Type Cosmetology

Received By Gina Kelly

#### Referred to Attorney

#### Investigation Date Apr 04, 2018

4-4-18 - Visited the facility and conducted an inspection. Multiple issues were observed:

-The operator was not mixing Barbicide in a precise manner. Told the operator to measure the correct amount of Barblcide for her solutions (2 oz of Barblcide to 32 oz of water).

-Instruments were being disinfected in a Nova Heat Sterilizer (Model NV-2088). Told the operator that this unit may not be reliable and would have to be proven effective in order to use it. Told her to sanitize equipment in Barbicide for the entire contact time (10 minutes) and she could use the heat sterilizer after this step has been completed.

-Linens and bedding in the eyelash extension room were only being changed weekly. Told the operator to change out bedding and linens after each use and to store linens in closed containers.

-The floor in the area where the nail stations are is carpet. Told the operator that the floors and walls must be smooth, durable, and easily-cleanable.

-The shampoo basin and foot bath chairs lacked adequate backflow protection. Told the operator that she must have appropriate backflow protection installed on water lines that services this equipment.

General cleanliness and sanitation were also discussed with the operator. She said that the foot bath basins are cleaned with a bleach solution after each use and that they are completely disassembled and cleaned with a Barbicide solution every night. She refuted the claim that nail instruments are never cleaned and disinfected. Told the operator to ensure that surfaces that are regularly touched by customers (chair handles, counter surfaces, etc.) are disinfected on a regular basis.

4-11-18 - Spoke to Chow, the plumber hired to correct the plumbing violations. Told him that a spill-resistant vacuum breaker (SVB) or pressure vacuum breaker (PVB) must be installed on the water lines that service the foot bath chairs, while an atmospheric vacuum breaker (AVB) must be Installed on the shampoo basin sprayer. Chow asked if he could place the PVBs or SVBs on the hot and cold water lines that service all of the chairs and I told him that he could as long as the water lines do not service any other fixtures downstream of the PVBs or SVBs.

5-15-18 - Received an e-mail from the operator that all of the violations had been corrected other than the carpeted flooring in the nail technician area.

6-14-18 - Visited the facility for a follow-up inspection. The following were observed:

-There was an AVB installed on the shampoo bowl sprayer.

-There were PVBs installed on the hot and cold water lines that service the foot bath chairs.

-Re-usable Instruments are now disinfected in Barblcide for at least 10 minutes before they are placed in the heat sterilizer.

-The Barbicide is now being mixed with the correct ratio of Barbicide-to-water.

-The entire facility is being cleaned daily and deep cleaned once per week.

-The linens, towels, bedding, etc. are now being stored in closed containers. The linens and bedding in the eyelash extension area are now replaced with clean linens after each customer use.

-The operator is working with her landlord to replace the carpet in the nail technician area. She said that her landlord didn't believe that the health department had a problem with carpet, so I told her that I would give him a call and discuss our concerns with him [Huang - 385-205-0889].

Total Time (Min)

Completion Date Jun 14, 2018

Registered Environmental Health Specialist Ryan R Klinge

#### General frm\_Complaint

Weber-Morgan Health Department

Date Mar 29, 2018 Time 02:52 PM Assigned To Ryan R Complaint # 2018-0329-1084 First Name: Last Name: e-Mail: **Business Name:** Address: Home Phone: Work Phone: Occupant First Name: Last Name: Business Name: Perfect Nails Address: 3637 Washington Blvd Ogden UT 84403 Home Phone: Work Phone: (801) 612-1167 Location Description: Property Owner First Name: Last Name: e-Mail: Business Name: Perfect Nails Address: 3637 Washington Blvd Ogden UT 84403 Home Phone: Work Phone: (801) 612-1167

#### Comments:

Nature of Complaint

Customer received manicure and got a nall fungus. Facility does not use sanitizer or disinfect. Facility is dirty. Has pictures of green nalls. Elisa would like a inspector to call her.









#### General frm\_Complaint

Weber-Morgan Health Department

Date Mar 24, 2017

Time 10:14 AM

Assigned To Ablgail A

Complaint # 2017-0327-2037

Weymouth

Complainant

First Name: e-Mail:

Last Name:

**Business Name:** 

Address:

Home Phone: Work Phone:

**Location of Complaint** 

Occupant

First Name:

Last Name:

Business Name: Terry's Nails and Spa

Address: 2315 N Washington Blvd

**Home Phone:** 

Work Phone: (801) 737-1239

N. Ogden UT 84414 Location

2315 N Washington Blvd. N. Ogden, Utah 84414

Description:

**Property Owner** 

First Name:

Last Name:

e-Mail:

**Business Name:** 

Address:

Home Phone: Work Phone:

Comments:

Nature of Complaint

March 15, 2017 had Pedicure. Technician used cheese grater looking object. Took huge chunk out of her left foot. Foot is still very sore. Concerns they are not using proper equipment. Also referred her to DOPL.

Status

Complaint Type

Received By

Cosmetology

Closed

Nanette Rogers

Referred to Attorney

Action

Action Taken:

**Completion Date** Jun 02, 2017

**Investigation Date** May 17,

2017

Referred complaint to DOPL. Investigated for basic cleanliness. Facility was okay.

Total Time (Min) 45

Registered Environmental Health

Specialist

Abigail A Weymouth

**Related Documents** 

No documents found

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-032470 - BELLS NAILS

10483 S REDWOOD RD SOUTH JORDAN, UT 84095

Date: 09/20/2017 Time: 11:09 am Assigned To: MACCOURTNEY, COOPER Status: Resolved

Method Received: Email Referred To: Date:

Date Resolved: 09/25/2017

Notified Requester: No EHS: MACCOURTNEY, COOPER

Request Number 147297

Conditions: Extremely dirty, pools of dirty water gather around the pedicure chairs, the owner hides a

blade in a red plastic box and uses the razor blade to razor off dead skin of the clients feet, one of the male workers does not have DOPL license, reuse pumice stones, owner

double dips her wax stick and uses the same one on other clients.

Owner/Facility: NGO NGUYEN Service Requested By: ANON ANON

Address: 10483 REDWOOD RD

City, State & Zip: SOUTH JORDAN UT, 84095 City, State & Zip: 99999

Phone Number: home (999) 999-9999

**Property Owner:** 

Address:

City, State & Zip:

Phone Number: no phone listed

Comments:

Date: 9/25/17 Reporting Area: Cosmetology EHS: MACCOURTNEY, COOPER

Activity Time: 30 min Activity Description: Complaint Investigation (Field)

Activity Comments: Spoke with the manager on duty, he thought he knew who complained and it was an upset customer.

He showed me the appropriate disinfecting chemicals and explained appropriate disinfection

techniques and procedure. The DOPL licenses were up to date and the standing water complaint was

Address:

unfounded.

CLOSED

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

# **Request for Service**

**Activity Comments:** 

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-045572 - BONNIE NAILS LLC

**5414 W DAYBREAK PKWY** 

(11400 S)

**SOUTH JORDAN, UT 84009** 

Date: Activity Comments:	Reporting Area:	EHS	š:	Activity Minutes:
Date: Activity Comments:	Reporting Area:	EHS	S:	Activity Minutes:
	CLOSED			
Activity Comments:	Went to the salon. Sinstruments, they all EPA Registered dis and he said they clean, salon. She thought	Spoke with the nail techs, they so use a UV Sanitizer, but the infectant they use in the pediction very thoroughly and haven and asked if there was anything they had to have an autoclave the DR. thought probably came	showed that they use barbaci use the chemical first. They a ure baths. Called Jimmy, the o 't had other problems. I called ng that seemed unsanitary or for the tools, I advised her the	also showed me an owner ( ) it the comp ( ) not appropriate at the
Date: 9/18/17 Activity Time: 45	Reporting Area: Cosi	metology ivity Description: Complaint Ir		COURTNEY, COOPER
Comments:	ACCENT IN			
Property Owner: Address: City, State & Zip: Phone Number: no	phone listed			
	AYBREAK PARKWAY ( DUTH JORDAN UT, 84	Add City	dress: y, State & Zip: 99999 one Number: home	
Martin Martin Committee Co	10.22	us infection after receiving	FOR DOUBLE BUTTON SANTER	<u>,                                      </u>
LIA TRACT DAGGETS				S: MACCOURTNEY, COOPER
		Date Resolved: 09/18	3/2017	
Method Received:	Phone	Referred To:	Dat	te:
Date: 09/08/2017	Time: 4:53 pm	Assigned To: MACCO	URTNEY, COOPER Sta	tus: Resolved
	JUIN JUNDA	.,		

HEALTH DEPARTMENT

Request Number 147011

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Request Number 146607

Premise: 35-017842 - DAVI NAILS 1686

5469 S REDWOOD RD

(1700 W)

**TAYLORSVILLE, UT 84123** 

Date: 08/28/2017	EGG, GREGORY Status:	Resolved
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Method Received: Email Referred To: Date:

Date Resolved: 08/29/2017

Notified Requester: No EHS: CLEGG, GREGORY

Conditions: The product that was being used was in blank, unidentified bottles and containers. No

licenses or permits posted. Extremely dirty. The same nail tools were used on the

complainant, a customer after her, and the nail technician.

Owner/Facility:	NGUNG THI NGUYEN

Address:

City, State & Zip: SALT LAKE CITY UT, 84119

Phone Number: home

work (801) 861-5242

Property Owner:

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By:

Address:

City, State & Zip: 99999

Phone Number: home

#### Comments:

Date: 8/29/17 Reporting Area: Cosmetology EHS: CLEGG, GREGORY

Activity Time: 30 min Activity Description: Complaint Investigation (Field)

Activity Comments: Spoke with Nancy and Wendy Nguyn. Dirty utensils and UV container. The bottles are not labeled.

Nancy and Wendy will clean up and label bottles. Complete.

Date: Reporting Area: EHS: Activity Minutes:

Date: Reporting Area: EHS: Activity Minutes:

Activity Comments:

Activity Comments.

Date: Reporting Area: EHS: Activity Minutes:

Activity Comments:

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-0015939 - TOP TIP NAILS

756 E FORT UNION BLVD

(7200 S)

MIDVALE, UT 84047

Date: 08/21/2017 Time: 8:24 am Assigned To: BOURKE, GERARD Status: Open

Method Received: Phone Referred To: Date:

Date Resolved:

Notified Requester: No EHS:

Conditions: Complainant had a viral infection from a pedicure done at Top Tip Nails. She noticed the

workers were sharing equipment, and not cleaning after each client.

Owner/Facility: BINH T NGUYEN

Address:

City, State & Zip: RIVERTON UT, 84065

Phone Number: home

work (801) 467-4986

**Property Owner:** 

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By: ANON ANON

DEPARTMENT

Request Number 146377

Address:

City, State & Zip: 99999

Phone Number: home (999) 999-9999

Comments:

Date: 9/1/17 Reporting Area: Cosmetology EHS: BOURKE, GERARD

Activity Time: 1 hr / 0 min Activity Description: Complaint Investigation (Field)

Activity Comments: Site visit. Nail tools are stored dirty. Used nail files are not being discarded after use. No disinfectant

mixing directions or mixing cup onsite. The barbicide jar is not tall enough to fully submerge the nail

brush handles. Rotary tips are stored dirty in an old sanding sponge. Unknown where the disinfectant is being mixed (somewhere else?)

Date: 8/24/17 Reporting Area: Cosmetology EHS: BOURKE, GERARD

Activity Time: 45 min Activity Description: Complaint Investigation (Field)

Activity Comments: Site visit, spoke with Hui Chen. 2 nail stations had used nail files/sponges, and disinfectants are not

being used according to manufacturers directions. (mixing ratios and wet contact time. Will make

another visit to verify correction of critical items.

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-020310 - RELAX NAILS

110 N 900 W (900 W)

SALT LAKE CITY, UT 84116

Date: 08/08/2017 Time: 3:24 pm Assigned To: REID, BRIAN Status: Resolved

Method Received: Phone Referred To: Date:

Date Resolved: 08/10/2017

Notified Requester: No EHS: TORRES-GEORGE, ZACH

Request Number 145990

Conditions: ZTG - No ventilation in nail salon, acetone levels are high.

Owner/Facility: LONG KY LAM

Address:

City, State & Zip: WEST VALLEY UT, 84120

Phone Number: home

work (603) 233-8016

Property Owner:

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By:

Address:

City, State & Zip: 99999

Phone Number: home (999) 999-9999

Comments:

Date: 8/10/17 Reporting Area: Cosmetology EHS: TORRES-GEORGE, ZACH

Activity Time: 30 min Activity Description: Complaint Investigation (Field)

Activity Comments: Site visit. There was a strong smell of acetone when I walked through the door. All the stations being

used had small fans and the HVAC system was operating. The facility was due for inspection; see

inspection dated 8.10.17.

Resolved, ZTG

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint Reporting Area: Cosmetology Request Number 145510

Premise: 35-0000918 - SONG's NAILS

3159 W 5400 S

(5400 S)

**TAYLORSVILLE, UT 84118** 

Date: 07/25/2017 Time: 1:54 pm Assigned To: CLEGG, GREGORY Status: Resolved

Phone Method Received: Referred To: Date:

> 07/26/2017 Date Resolved:

EHS: CLEGG, GREGORY No **Notified Requester:** 

Using same nail equipment on different clients, used razor to take off callus. Conditions:

Owner/Facility: BAO NGUYEN

Address: 3159 W 5400 S

City, State & Zip: TAYLORSVILLE UT, 84118

Phone Number: home

Work (801) 966-4456

**Property Owner:** 

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By: ANON ANON

Address:

99999 City, State & Zip:

Phone Number: home (999) 999-9999

Comments:

Date: 7/26/17 Reporting Area: Cosmetology EHS: CLEGG, GREGORY

Activity Description: Complaint Investigation (Field) **Activity Time:** 

**Activity Comments:** Ms. Song is the owner . She will make sure all the instruments are disinfected.

Instruments soaking in barbicide. Complete.

EHS: Date: Reporting Area: **Activity Minutes: Activity Comments:** Date: Reporting Area: EHS: **Activity Minutes: Activity Comments:** EHS: Date: Reporting Area: **Activity Minutes:** 

**Activity Comments:** 

EHS: Date: Reporting Area: **Activity Minutes:** 









#### General frm\_Complaint

Weber-Morgan Health Department

Date Nov 27, 2017

Time 10:05 AM

Assigned To Brett Bunderson Complaint # 2017-1127-5096

Complainant

First Name:

Last Name:

e-Mail:

**Business Name:** 

Address:

**Home Phone:** 

Work Phone:

Location of Complaint

Occupant

First Name:

Last Name:

Business Name: Da-VI Nalls

Address: 4848 900 W

Home Phone:

Riverdale UT 84405

Work Phone: (801) 392-9447

Location Description:

**Property Owner** 

First Name:

**Last Name:** 

e-Mail:

Business Name: Da-Vi Nails Walmart Supercenter

Address: 4848 900 W

**Home Phone:** 

Riverdale UT 84405

Work Phone: (801) 392-9447

Comments:

**Nature of Complaint** 

Two complainant received a pedicure 11/24/17 and has concerns for sanitation and safety of facility. Employee reused razor on different customers without sanitizing. Complainant witnessed employee putting towels that were used on customers back in the warmer and reusing them on new customers. Has concerns for how hot the paraffin wax is.

Status Closed

**Complaint Type** 

Received By

Cosmetology

Glna Kelly

Referred to Attorney

Action

**Action Taken:** 

Investigation Date Dec 06,

Razor's were not observed to be in use at the time of the complaint investigation. Staff stated that razor's are only used for 1 customer and then discarded. Staff also stated that towels were only used on one customer and then washed between uses.

Total Time (Min)

Registered Environmental Health

Completion Date Dec 07, 2017

120

Specialist Brett Bunderson

**Related Documents** 

No documents found









#### General frm\_Complaint

Weber-Morgan Health Department

Date Jan 06, 2017

Time 04:59 PM

Assigned To Ryan R Klinge

Complaint # 2017-0106-4418

Complainant

First Name:

Last Name:

e-Mail:

**Business Name:** 

Address:

Home Phone:

Work Phone:

Location of Complaint

Occupant

First Name:

Business Name: C.T. Nails

Address: 4811 Harrison Ogden UT 84403

Last Name:

**Home Phone:** Work Phone:

Location

4811 Harrison Blvd. Ogden, Utah 84403

Description:

Property Owner

First Name:

e-Mail:

**Business Name:** 

Address:

Last Name:

Home Phone: Work Phone:

Comments:

Nature of Complaint

Had pedicure and manicure on Thursday Dec. 29, 2016, 12:00 noon. Employee named Julie used cheese grater looking thing on her foot. Took a big chunk out of her heal. She put her bloody heal back in foot bath. Concern for sanitation procedures. They are re-using files.

Status

Closed

Complaint Type

Cosmetology

Received By

Nanette Rogers

Referred to Attorney

Action

Action Taken:

**Investigation Date** 2-9-17: Visited the facility and conducted a sanitation inspection. The facility uses bleach and quaternary ammonium sanitizing solutions for sanitizing foot baths and other equipment/surfaces. They use single-use nail files as well. The manager said that Utah Division of Occupational and Professional Licensing had conducted an inspection and written a citation for using micro planes as well as for an employee who was working without a license. She said that they had since removed all of the micro planes from the facility and switched to a single-use sandpapery-block product.

2-13-17: Spoke to Alisa with Utah DOPL. She said that nail technicians may not use micro planes, rasps, graters, or engage in waxing. She said that an esthetician license is required to use these pieces of equipment.

Total Time (Min)

Registered Environmental Health

**Completion Date** Jan 03, 2018

Specialist Ryan R Klinge

#### Request for Service

Request Type: Complaint Reporting Area: Cosmetology



Request Number 143911

Premise: 35-023065 - HONEYS ANGELIQUE NAILS

2836 S 5600 W

(5600 W)

**WEST VALLEY CITY, UT 84120** 

Date: 05/31/2017 Time: 1:31 pm Assigned To: BENNETT, JAMES Status: Resolved

Method Received: Phone Referred To: Date:

> 06/05/2017 Date Resolved:

EHS: BENNETT, JAMES No **Notified Requester:** 

Fungus has grown multiple times underneath her nail. Conditions: Service Requested By: Owner/Facility: BRANDON FARNSWORTH

Address:

City, State & Zip: WEST JORDAN UT, 84081

Phone Number: home

**Property Owner:** 

Address: City, State & Zip:

Phone Number: no phone listed

Address:

City, State & Zip:

Phone Number: home

cell

Comments:

Date: 6/5/17 Reporting Area: Cosmetology **EHS: BENNETT, JAMES** 

Activity Description: Complaint Investigation (Field) **Activity Time:** 

Poor disinfection practices in pedicure chairs, performed routine inspection while on site. **Activity Comments:** 

Date: 6/2/17 **EHS: BENNETT, JAMES** Reporting Area: Cosmetology

Activity Description: Complaint Investigation (Office) 15 min **Activity Time:** 

Attempted to contact comp to get more information **Activity Comments:** 

EHS: Date: Reporting Area: **Activity Minutes:** 

**Activity Comments:** 

Date: Reporting Area: EHS: **Activity Minutes:** 

**Activity Comments:** 

EHS: Date: Reporting Area: **Activity Minutes:** 

**Activity Comments:** 

EHS: Date: Reporting Area: **Activity Minutes:** 

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Request Number 143406

Premise: 35-039273 - POSH NAILS

3428 E BENGAL BLVD

(7430 S)

**COTTONWOOD HEIGHTS, UT 84121** 

Date: 05/09/2017 Time: 1:10 pm Assigned To: WILLIAMS, RANDY Status: Resolved

Method Received: Phone Referred To: Date:

Date Resolved: 05/09/2017

Notified Requester: No EHS:

Conditions: PEDICURE comp encountered and bacterial infection.

Owner/Facility: DIEM LUONG

Address:

City, State & Zip: SALT LAKE CITY UT, 84120

Phone Number: home

work (801) 599-6383

Property Owner:

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By:

Address:

City, State & Zip: COTTONWOOD HTS UT, 84121

Phone Number: home

Comments:

Date: 5/11/17 Reporting Area: Cosmetology EHS: WILLIAMS, RANDY

Activity Time: 45 min Activity Description: Complaint Investigation (Field)

Activity Comments: spoke to comp on phone the other day who said the person who put the lotion on had the bottle

contact her skin. SV. I talked to the salon owner and she showed me the plastic disposable cups they use for lotions and creams. She said she did fire a person a few weeks back who was not doing

a good job and that may have been the person who did comp's nails.

Date: 5/9/17 Reporting Area: Cosmetology EHS:

Activity Time: 1 hr / 30 min Activity Description: Complaint Investigation (Field)

Activity Comments: SV. Waited about 35 minutes for owner to show me how they do all their disinfecting. She does not

measure the disinfectant. The disinfectant in the glass jar looked blue and free of material in it. I reiterated to her that putting undisinfected equipment in bags and putting them in the UV unit is not

an approved means of disinfecting.

I had her show me how they disinfect the foot baths. They use a single use cover for each customer. Owner mentioned the place was sold and she will be leaving in July. Called and LVMCB for comp.

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-0016274 - SKY NAILS

725 E 2100 S (2100 S)

**SALT LAKE CITY, UT 84105** 

Date: 05/08/2017 Time: 8:44 am Assigned To: LEE, LORA Status: Resolved

Method Received: Phone Referred To: Date:

Date Resolved: 05/12/2017

Notified Requester: No EHS: LEE, LORA

Conditions: Comp injured during pedicure, toe nail falling off and infected, comps says her friend has

gotten an infection from this salon before as well.

Owner/Facility: LIEM HUYNH

Address:

City, State & Zip: SOUTH JORDAN UT, 84095

Phone Number: home

**Property Owner:** 

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By:

Address:

City, State & Zip: SALT LAKE CITY UT, 84103

DEPARTMENT

Request Number 143347

Phone Number: home

work

Comments:

Date: 5/12/17 Reporting Area: Cosmetology EHS: LEE, LORA

Activity Time: 15 min Activity Description: Complaint Investigation (Field)

Activity Comments: Solution was put through the pedicure basin jets every morning and every night, not between each

use. I informed them they need to run solution through the jets after every use and run it for as long

as the label directions state.

Complete

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Request Number 142726

Premise: 35-025060 - STOP 4 NAILS

5221 W 3500 S

(3500 S)

**WEST VALLEY CITY, UT 84120** 

Date: 04/11/2017 Time: 2:37 pm Assigned To: BENNETT, JAMES	Status: Resolve	ea
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Method Received: Phone Referred To: Date:

Date Resolved: 04/13/2017

Notified Requester: No EHS: BENNETT, JAMES

Conditions: COMP went and had pedicure at this establishment and incurred a toe infection, comp

asked for her money back and it was thrown back at her and asked never to visit the

establishment again, tn is

Owner/Facility:	PHUOC TRUONG
-----------------	--------------

Address:

City, State & Zip: WEST JORDAN UT, 84081

Phone Number: home (

Property Owner:

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By:

Address:

City, State & Zip:

Phone Number: home

#### Comments:

Date: 4/13/17 Reporting Area: Cosmetology EHS: BENNETT, JAMES

Activity Time: 15 min Activity Description: Complaint Investigation (Office)

Activity Comments: Will conduct annual inspection

Date: 4/13/17 Reporting Area: Cosmetology EHS: BENNETT, JAMES

Activity Time: 15 min Activity Description: Complaint Investigation (Office)

Activity Comments: Attempted to contact comp

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-016184 - NAILS 4 U

3812 W 7800 S

(7800 S)

**WEST JORDAN, UT 84084** 

Date: 04/03/2017 Time: 1:29 pm Assigned To: MACCOURTNEY, COOPER Status: Resolved

Method Received: Email Referred To: Date:

Date Resolved: 04/07/2017

Notified Requester: No EHS: MACCOURTNEY, COOPER

Conditions: Not cleaning pedicure tubs after use, not cleaning utensils after use, just rinse them off

in water in the pedicure tubs, both comp and her Mom developed infections in their

toenails within about 12 hours.

Owner/Facility: BRIAN NGUYEN

Address: City, State & Zip: DRAPER UT, 84020

Phone Number: home

**Property Owner:** 

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By:

Address:

City, State & Zip: 99999

EHS: TORRES-GEORGE, ZACH

Request Number 142508

Phone Number: home

Comments:

**Activity Time:** 

Date: 4/7/17 Reporting Area: Cosmetology

15 min Activity Description: Joint Field Activity

Activity Comments: JFA with Cooper. ZTG

Date: 4/7/17 Reporting Area: Cosmetology EHS: MACCOURTNEY, COOPER

Activity Time: 15 min Activity Description: Complaint Investigation (Field)

Activity Comments: Site visit with ZTG. Spoke with the owner, Brian. They use liners in the pedicure chairs, he adequately

described their cleaning process for their tools and had an appropriate disinfectant. Unfounded

complaint

CLOSED

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Request Number 141820

Premise: 35-025060 - STOP 4 NAILS

5221 W 3500 S

(3500 S)

**WEST VALLEY CITY, UT 84120** 

Date: 03/03/2017 Time: 3:44 pm Assigned To: BENNETT, JAMES Status: Resolved

Method Received: Phone Referred To: Date:

Date Resolved: 03/06/2017

Notified Requester: No EHS: LEE, LORA

Conditions: LL Strong smell, creating light headedness, also has rash in eyebrow area.

Owner/Facility: PHUOC TRUONG

Address:

City, State & Zip: WEST JORDAN UT, 84081

Phone Number: home

Property Owner:

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By:

Address:

City, State & Zip:

Phone Number: home

Comments:

Date: 3/6/17 Reporting Area: Cosmetology EHS: LEE, LORA

Activity Time: 30 min Activity Description: Complaint Investigation (Field)

Activity Comments: Reviewed waxing procedures with the two on site that offer this service - - no violations were observed.

They do not have air intakes/ventilation at each station only the facility ventilation, however we do not

enforce this. Complete

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

**Activity Comments:** 

Date: Reporting Area: EHS: Activity Minutes:

#### Request for Service

Request Type: Complaint
Reporting Area: Cosmetology

Premise: 35-045505 - RUIJIAN LIU

1323 W 7900 S 103

(7900 S)

**WEST JORDAN, UT 84088** 

Date: 02/09/2017 Time: 11:20 am Assigned To: MACCOURTNEY, COOPER Status: Resolved

Method Received: Email Referred To: Date:

Date Resolved: 02/09/2017

Notified Requester: No EHS: MACCOURTNEY, COOPER

Conditions: Nails are being done throughout the day and the smell is very strong through entire

building. Only one bathroom for building, comp is calling this Jennifer Nails but we have it

in our system as Ruijian Liu.

Owner/Facility: RUIJIAN LIU

Address:

City, State & Zip: IVINS UT, 84738

Phone Number: home

Property Owner:

Address:

City, State & Zip:

Phone Number: no phone listed

Service Requested By: ANON ANON

Request Number 141304

Address:

City, State & Zip: 99999

Phone Number: home (999) 999-9999

Comments:

Date: 2/9/17 Reporting Area: Cosmetology EHS: MACCOURTNEY, COOPER

Activity Time: 5 min Activity Description: Complaint Investigation (Office)

Activity Comments: Referred complaint to West Jordan Building Inspector Bill Bailey (801 569-5052)

Date: Reporting Area: EHS: Activity Minutes:

Date: Reporting Area: EHS: Activity Minutes:

Activity Comments:

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Date: Reporting Area: EHS: Activity Minutes:

# Weber-Morgan Health Department

477 23<sup>rd</sup> Street, Ogden, UT 84401 Phone: (801) 399-7160

# **NOTICE TO COMPLY**

	Date:	6/13/18	_	
	Name:	LYNNS NAILS		
	Address:	3606 W. 56005	· ~	
	City:	Roy, UT	-	I Tune 30th
		on is called to a potential health thr	eat: Fix plum	bing by June 30th
_	No back	eflow prevention on p	redicure statio	ins-install backflow
	So that	pedicure water ordisir	Fectant doesn't go	into drinking water
	Barbicide	- dilute according to p	acrage, change o	nt least every 24 hrs
-	Must have	soap and hot water	at the handsink.	
.*	Clean + Sa	nifize all pedicure k	its, tools, surface	es,
) N	Jean towe Job blades of You are hereby expiration of the law requires. Weaking	Is must be kept in enclosed of any kind allowed y notified to correct this complaint by his time you have not corrected this result in a not working property questions concerning this notice play	osed container or with out Master E natter, such further action w by fools are not	r cabinet before USC sthetician License If at the rill be taken as the
	,	sonal items (blankets,	The state of the s	helf
بر	Signature of R		Licensed Environmenta	l Health Scientist
	Left at	residence	NEUA FO	RSBERG-
	7	septic\oldfile\notice to comply.wpd		
Backfle EPA Dis	ow pamp. infection	Alet left I document left		

# Weber-Morgan Health Department Division of Environmental Health 477 23<sup>rd</sup> Street, Ogden, UT 84401 Phone: (801) 399-7160 \* Fax: (801) 399-7168

# **GENERAL REMARKS**

	Name: Perfect Nails Date: 4-4-18
	Address: 3637 Washington Blud Ogden, UT. 84403
TH'S	- Properly Sanitize scrusuble equipment in Burbicide for at least 10 minutes (Currently using NV-208B Sterilizer). You can use the
av.	1 Sterilize Coutter Spaking in Dachicide.
T A	Mix Barbicide appropriately (202 Barbicide 15 3doz of water) and hunge it according to manufacturer recommendations (when cloudy/sol
X.	The shampoo basin lacks backflow protection, An atmospheric vacuum
fr.	breaker is required on stampoo basin sprayers. The foot bath chairs luck backflow protection on the incoming water
	lines, pressure or poll-lesistant vacuum breakers must be installed on The
P. B.	customers. Re-usable equipment must be cleared & sanitized between customers.
UNY CENT	for each customer (currently charging them needly).
Aring Control	The cuspet in the nail tech wears not easily-clearable t should be replaced with
Contract Con	Ensure that the facility is cleaned regularly to prevent the buildup of residues.
, j	A follow-up inspection will be scheduled in the future the Lating
	rinh - Owner