

LONDON BOROUGH OF CROYDON SPECIAL TREATMENTS LICENSING

Regulations made by the London Borough of Croydon under Section 10 (1) of the London Local Authorities Act 1991, prescribing standard conditions applicable to all Special Treatment premises located in the London Borough of Croydon.

STANDARD LICENSING CONDITIONS FOR PREMISES OPERATING SPECIAL TREATMENTS

**STANDARD CONDITIONS IN FORCE FROM 1 APRIL 2019 FOR
PREMISES OPERATING SPECIAL TREATMENTS LICENCED BY THE
LONDON BOROUGH OF CROYDON**

Standard Conditions for Premises Operating SPECIAL TREATMENTS

PART I – General	3-4
1) Definitions	3
2) Dispensation/modification of rules	4
3) References	4
PART II – Conditions Applicable to all Premises	5-9
1) The Licence	5
2) Responsibility of the Licensee	5-6
3) Conditions of Licensed premises	6
4) Conduct of the Premises	6
5) People with Disabilities	6
6) Authorised Officers	6
7) Electricity	6
8) Personal Hygiene	6
9) Cleaning	6-7
10) Refuse	7
11) Record Keeping	7
12) Maintenance	7
13) Qualifications / Training	7-8
14) Anaesthetic	8
15) Control of Substances Hazardous to Health	8
16) Aftercare	8
17) First Aid	8
18) Language	9
19) Emergency Assistant Device	9
20) Exemption from Licence	9
21) New Licensable Activities	9
PART III - Additional Conditions for Specific Treatments	10-16
1) Sauna	10
2) Heated Spa Baths	10
3) Ultra Violet Tanning Equipment	11
4) Tattooing	11-12
5) Semi Permanent Make Up/Micropigmentation	12-13
6) Electrolysis	13
7) Body Piercing	13-14
8) Artificial Nails	15
9) Laser/Intense Pulse Light (IPL)	15-16
Appendix A – Certification to be held at Licensed Premises	17
Appendix B – Sample Tattoo/Piercing Consent Form	18
Appendix C – Ultrasonic Cleaning Procedure and Verification Tests	19-20
Appendix D – Non Vacuum Sterilising Procedure & Verification Tests	21-22
Appendix E – Vacuum Sterilising Procedure & Verification Tests	23-24
Appendix F - Laser /IPLS Treatment Protocol Document	25
Appendix G - Laser/IPLS Local Rules Document	26-27

STANDARD CONDITIONS FOR PREMISES OFFERING SPECIAL TREATMENTS

Revised conditions for premises licensed by the London Borough of Croydon in force from 1 April 2019.

INTRODUCTION These Standard Conditions are applicable to all premises offering special treatments. Their application does not in any way however, replace or reduce the underlying statutory duty of employers and self-employed persons to comply with the requirements of the Health and Safety at Work etc. Act 1974 and any associated regulations and codes of practice which may be applicable to these premises. It is an offence to use premises or part of premises for special treatments except under and in accordance with a special treatment licence.

Part I – GENERAL

Definitions

In these rules, unless the context otherwise requires:-

Act means Part II of the London Local Authorities Act 1991 (as amended).

Approval of the Council or Consent of the Council means the written approval or consent of the Council as Licensing Authority in writing.

Approved, Accepted or Permitted means approved, accepted or permitted by the Council in writing.

Council means the London Borough of Croydon.

Special Treatment means massage, electric treatments, light treatments, water treatments, skin piercing, **tattooing** and other treatments of a like kind.

Establishment for Special Treatment has the meaning set out in section 4 of the London Local Authorities Act 1991 (as amended).

Fire Authority means the Chief Officer and Chief Executive of the London Fire and Civil Defence Authority.

Licence Holder/Authorised Person means a person who is responsible for compliance with the standard conditions at all times that the premises are open for business.

Licence means a special treatment licence granted under section 6 of the London Local Authorities Act 1991 (as amended).

Premises means any premise within the Council's area licensed for special treatments and includes all installations, fittings etc.

Operative - the person carrying out any special treatment including tattooing and body piercing premises, is an approved operative as named on the licence.

Authorised Officer means an Officer appointed by the Place Department.

Dispensation or Modification of Rules

- 1) These rules may be dispensed with or modified by the Council if there is a health and safety risk at which time the Licensee will be notified in writing.
- 2) The Council may, in granting a licence or giving any written approval or consent under these rules, impose such terms, conditions, or restrictions as it shall specify in writing.
- 3) If the Licensee wishes any licence terms, conditions or restrictions to be varied, an application (Appendix I) must be made to the Council, and if the Council so requires, the application must be advertised.

References

- 1) Tattooing and Body Piercing Guidance Toolkit dated 8 August 2013 endorsed by CIEH, PHE, HSL and TPIU
- 2) Where premises refer to being a member of professional body and therefore consider they are exempt from a special treatment licence, the onus is placed on the premises to provide such evidence by completing an Exemption Registration located at the end of the Application Form.

PART II - Conditions applicable to all premises

1) The Licence

- a) The current licence or a clear copy shall at all times be prominently exhibited at the premises in a position where it can easily be read by customers.
- b) The licence is personal to its holder. The licence cannot be transferred to any other person unless the procedure prescribed in the Act has been followed, and the Council has granted the application.
- c) The licence is only valid in respect of the premises named on the licence.
- d) Licences are granted for a maximum period of twelve months. This being the period from the 1st April - 31st March of the following year. A renewal application must be made before the current licence expires in order that it can run consecutively. If the licensee fails to apply, and continues to offer licensable treatments, this is an offence under London Local Authorities Act 1991 (c. xiii) 14 Enforcement of Part II (1).
- e) A licence will be issued in the name of the applicant and will include the names of individual operatives approved by the Council.

2) Responsibility of the Licence Holder/Authorised Person

- a) The licence holder may authorise a responsible person to be in charge of the premises during opening hours.
- b) The licence holder/authorised person shall take all reasonable precautions for the safety of all persons using the premises and ensure compliance at all times with the relevant provisions of the Health and Safety at Work etc. Act 1974, and other associated legislation.
- c) The licence holder/authorised person shall be accountable for all activities in the premises at all times.
- d) The licence holder shall take out employer's liability (where applicable) and public liability insurance cover. A copy of the current certificate(s) shall be displayed in a prominent position in the premises.
- e) The licence holder shall ensure that all special treatment practitioners have attained the minimum level of qualification and/or training before permitting them to provide treatments on their premises.
- f) The licence holder must ensure that Section F of the Councils application form is completed for all therapists/operatives practitioners offering a special treatment on the premises.
- g) The licence holder must advise the Council of any new therapists/operatives or practitioners before they commence working on the premises.
- h) For all special treatment premises, including tattooing and body piercing premises, the Council shall list the names of all operatives on the licence following their approval. Trainee/Apprentices shall appear on the licence named as such. No other persons other than those named on the licence are permitted to carry out special treatments.
- i) The licence holder/authorised person shall ensure that no nuisance arises from the business, e.g. odours, noise etc.
- j) The licence holder/authorised person shall ensure that opening times are displayed in a prominent position.
- k) No alterations (including temporary alterations) shall be made to the premises, without prior consent of the Council. This condition shall not require to be given in respect of routine maintenance works. Where works necessitate the premises being closed for a period of time, the premises shall not re-open for the purpose of the licence, until the licensee has been notified in writing by the council.

- l) Qualifications for all operatives providing a special treatment must be sent to the Local Authority for verification to enable a licence to be processed or for the individual to be placed on the licence.
- m) Licence holders and operative/therapists will be issued with ID Cards. These are to be displayed at all reasonable times whilst working at the licensed premises for which it is issued.
- n) Licence holder to display for a stated duration, a Notice as provided by the Council on the outside of the premises which will state the intended use of the premises.
- o) An Application will not be considered until the Application Fee has been paid in full.
- p) Licence holder to provide all documentation as requested on the Application Form within 28 days. Failure to provide these will result in the Application being rejected and returned to the applicant. An administration fee will be retained.
- q) If on Inspection of New Applications conditions are not being complied with, a licence will not be granted until such conditions have been rectified.

3) Conditions of Licensed Premises

- a) The licence holder/authorised person shall be familiar with all the conditions contained in this document and take responsibility for any breaches of said conditions.
- b) The licence holder shall ensure that all persons carrying out special treatments in the licensed premises are familiar with all the conditions contained in this document.

4) Conduct of the Premises

- a) No poster, advertisement etc. shall be displayed which is unsuitable for general exhibition.
- b) The licence holder/authorised person shall ensure that no part of the premises is used by persons, for soliciting or other immoral purposes.

5) People with Disabilities

It is the policy of the Council that access for disabled people should be provided at business premises licensed for special treatments. Licensees are, therefore strongly encouraged to provide such facilities so as to enable the admission of disabled people and are reminded of the duties imposed by the Equality Act 2010.

6) Authorised Officers

On presentation of their written authorisations and proof of identity shall be admitted at all reasonable times to all parts of the premises.

7) Electricity

- a) The licence holder shall ensure that all portable electrical appliances used within the licensed premises are maintained regularly in accordance with the Electricity at Work Regulations 1989. Records of this maintenance must be available at the premises.
- b) The licence holder shall ensure that the fixed electrical installation is inspected by a competent electrical engineer in accordance with the Electricity at Work Regulations 1989 and a copy of the current certificate is available at the premises.

8) Personal Hygiene

- a) If an operative has any open boil, sore, cut or other open wound it must be effectively covered by an impermeable dressing.
- b) A wash hand basin shall be provided in all treatment rooms

9) Cleaning

- a) All floor surfaces must be made of suitable washable material.

- b) Mop heads used for cleaning the floor should either be disposable or washed in a washing machine at the end of each day.

10) Refuse

- a) Any waste produced in connection with the business that is classified as 'hazardous' including sharps must be collected and disposed of by a licenced contractor. A waste transfer document shall be available at the premises for inspection.
- b) Any 'hazardous' waste bags shall be suitably marked and whilst awaiting collection shall be stored in a secure area.

11) Record Keeping

- a) Records including name, address and age of customer receiving the treatment(s) plus date & type of treatment received shall be kept for all treatments, for a period of at least 3 years.
- b) Any contra-indications e.g. Heart conditions, diabetes, epilepsy etc. for each treatment shall be discussed with the client/customer prior to any treatment, and the client shall sign a record card to say that they have been made aware of the risks involved.

12) Maintenance

All systems i.e. fire safety equipment, boilers, sterilisers etc. provided in the premises shall be serviced/maintained regularly by competent persons in accordance with the manufacturers/suppliers recommendations. Records shall be available on site for inspection.

13) Qualifications/Training

- a) All persons carrying out special treatments shall hold suitable qualifications in the treatments they carry out. Suitable qualifications means those listed on the Croydon Council website under Special Treatment Licence or those deemed suitable by the Council. Training in the use of specific on site equipment shall also be undertaken with the manufacturer/supplier and where applicable relevant certificates etc. shall be submitted to the Council for approval.
- b) Verification and consideration of all qualifications and certificates will be carried out by the Council.
- c) If no National Qualifications are available (e.g. tattooing) -
Where there are no nationally recognised qualifications for a special treatment, therapists/operatives must provide references and evidence of past work and proof of when and where their apprentice or training was undertaken.
- d) Working towards a Qualification (In Training) -
The Council require evidence of relevant training that is or will be undertaken for any specific treatment including when and where an apprenticeship or training was/is being undertaken.

It will be the responsibility of the licence holder to ensure trainees are supervised at all times and are competent to carry out the treatments.

Trainees should complete Section F of the application form, indicating the training programme and expected course completion date. Evidence of training, e.g. a letter from the college, must be sent with the application.

Trainees will only be registered for a maximum period of 1 year in the first instance. After successful completion of training the therapist/operative may be included on the licence upon sending the final qualification awarded to the Council.

- e) Trainee Practitioner Supervision
The council understands that due to the nature of some of the special treatments it will be necessary for trainee special treatment practitioners to provide treatments to demonstrate that they can meet the minimum level.
- f) The requirement of this condition is to allow trainees to learn and gain experience but only under the supervision of a practitioner who has firstly attained the required qualification and/or training for the treatment that the trainee is giving and secondly will directly supervise that trainee whilst the treatment is being conducted.
- g) The licence holder should also, as best practice, instruct one of their most experienced and knowledgeable special treatment practitioner's to undertake the supervision role for trainees. The supervisor must have direct supervision over the trainee whilst the treatment is being carried out. It is also good practice for the licensee to monitor the supervision that is being given on occasions to ensure that the supervisor is providing adequate guidance, instructions and support to the trainee.
- h) There is a requirement that the licensee specifies the supervising special treatment practitioners name and the treatments that they are supervising on the trainee special treatment practitioner's personal training and qualification record.
- i) Public Liability Insurance must cover any treatment delivered by a trainee.

14) Anaesthetic

- a) The administration of local anaesthetic by injection other than by medically qualified practitioners is an offence.
- b) Lignocaine based creams or Ametop gels are available at pharmacies and may be purchased by the client and administered to themselves prior to treatment if so desired. It is an offence for any anaesthetic substance to be applied to the client by the operative under any circumstances.

15) Control of Substances Hazardous to Health Regulations 2002

- a) Substances which fall under the above Regulations e.g. Barbicide, bleach, nail monomers etc. shall be assessed in accordance with the requirements of those Regulations and all the necessary precautions taken to ensure their safe use and storage.
- b) The safety data sheets for all products used in connection with the business, shall be available at the premises.

16) Aftercare

- a) Each client shall be provided with written aftercare advice for each treatment they receive and confirmation of this shall be recorded on their client record card.
- b) Clients shall sign for receipt of this advice.

17) First Aid

- a) It is recommended that one person working in the premises is trained in basic first aid techniques in accordance with the First Aid at Work Regulations 2010.

- b) A first aid box shall be available in the premises in accordance with the First Aid at Work Regulations 2010.

18) Language

At least one person shall be present in the premises at all times who has an acceptable level of spoken and written English in order to satisfactorily discuss client records, aftercare advice etc.

19) Emergency Assistance Device

All special treatment equipment e.g. uv tanning beds, sauna's and spa's shall have fitted either on or close by to the equipment a device to summon assistance in an emergency. The device shall be connected to a staffed area.

20) Exempt from Licence

Members of some professional bodies and certain health practitioners are exempted under the London Local Authorities Act 1991/2000. If you feel you may be exempt from licensing or registration you will need to complete an Exemption Form and supply us with a copy of the membership certificate for your professional body. We will then determine your exemption status.

21) New Licensable Activities

- a) Where either a new treatment or the status of a listed treatment changes to become licensable, any operative that offers such treatment in the borough will require to complete the necessary training to the level required by the Council.
- b) Depending on the treatment and the level of training required, the Council will advise the length of time that the training must be undertaken within.
- c) Operatives must refer to the "In Training" Section of this document and follow the guidelines as set out.

PART III – Additional conditions for specific treatments

1) Sauna

- a) A thermometer shall be provided indicating the temperature inside the sauna.
- b) An emergency assistance device shall be provided on or adjacent to the sauna, in accordance with Part II condition 19
- c) A clock shall be visible to users, from inside the sauna.
- d) The temperature control device shall not be accessible to users of the sauna.
- e) The hot coals in the sauna shall be protected by a guard rail or barrier.
- f) Shower facilities shall be provided close to the sauna.
- g) A supply of fresh drinking water shall be available close to the sauna.
- h) The following Safety guidelines on the use of the sauna shall be displayed nearby.
 - Children under 15 shall not use the sauna
 - All jewellery to be removed
 - Drink plenty of water before using the sauna
 - No eating or drinking in the sauna
 - Avoid use if suffering from high blood pressure or heart problems
 - Do not eat immediately before using the sauna
 - Maximum time spent in sauna 15-20 mins
 - Drink plenty of water after use

2 Heated Spa Baths

- a) The spa water shall be suitably treated to prevent the growth of legionella bacteria by means of automatic dosing equipment in accordance with the Approved Code of Practice L8 entitled 'Control of Legionella Bacteria in Water Systems' produced by the Health and Safety Executive.
- b) Water tests shall be carried out at 4 hourly intervals to ascertain the chlorine, Ph. etc. levels of the water. Written records of the results shall be kept on the premises.
- c) The spa shall be fitted with an automatic close down device, which operates approx. every 15 minutes for a period of 5 minutes.
- d) The following Safety guidelines on the use of the spa shall be displayed nearby.
 - Children under 15 shall not use the spa
 - Maximum time in the spa is 15 minutes
 - Do not use the spa if you are pregnant
 - Do not use the spa if under the influence of drugs, alcohol or medication
 - Persons suffering from obesity or with a medical history of heart disease, low or high blood pressure, circulatory system problems should consult a doctor before using the spa
 - Persons using medications should consult a doctor before using the spa
 - Persons with sores or open wounds should not use the spa
 - Take care when entering and exiting the spa. Wet surfaces may be slippery
- e) Shower facilities shall be provided close to the spa.
- f) A supply of fresh drinking water shall be available close to the spa.
- g) An emergency assistance device shall be provided on or adjacent to the spa, in accordance with Part II condition 19.

3) Ultra Violet Tanning Equipment

- a) No persons under the age of 18 shall be permitted to use tanning equipment. Photographic ID should be requested if there is any doubt concerning age.
- b) All persons operating sunbeds shall be suitably trained by the supplier in the operation of the equipment and hold a relevant certificate which shall be kept at the licensed premises.
- c) Prior to the use of tanning equipment a record card shall be completed & signed by the user to acknowledge that they have been made aware of and understand the contra-indications associated with ultra violet radiation, particularly with regard to drugs and medical conditions. A record of the frequency of visits shall also be recorded.
- d) The length of time that a client uses the tanning equipment shall be controlled by the management and based on the users' skin type, power of the sunbed, and age of the tubes etc.
- e) To comply with Conditions 3 (c) and (d) a trained member of staff shall be present at all times at the licensed premises therefore unstaffed tanning premises are prohibited.
- f) The maximum permissible output for all new uv tubes from the 23rd July 2010 is 0.3w/m².
- g) An emergency assistance device shall be provided on or adjacent to each tanning cubicle, in accordance with Part II condition 19.
- h) Each tanning unit shall be fitted with an emergency stop button.
- i) All users shall be provided with protective eye equipment free of charge
- j) Arrangements shall be made to ensure that the tanning equipment is cleaned between clients.
- k) The length of exposure time shall be reduced when the tubes have been replaced and suitable warning signs to that effect displayed.
- l) HSE guidelines IND (G) 209 on UV tanning shall be displayed in each tanning cubicle.
- m) Regular maintenance shall be carried out, to include replacement of tubes. Records of all maintenance visits shall be available at the premises at all times.
- n) The HSE recommend a maximum of 20 ultra violet tanning sessions per year, clients shall be advised when they have reached this number and made aware of this recommendation. If the client still wishes to continue with further exposure then their written consent shall be recorded on their client record card.

4) Tattooing

- a) No tattoo shall be carried out on a client who has not reached their 18th birthday in accordance with the Tattooing of Minors Act 1969.
- b) A tattoo may only be performed by an approved person who is named on the licence, in accordance with Part II 2 (f) of these conditions. Guest tattooists shall not carry out treatments unless they have been previously notified to the Council and are named on the licence.
- c) The administration of local anaesthetic is prohibited in accordance with Part II condition 14.
- d) It is recommended that each operative is vaccinated against Hepatitis B. Records of the Hepatitis B status of all operatives shall be kept at the premises.
- e) Prior to treatment every client shall read and sign a consent form, which contains details of medical history, name, address, age. Photographic proof of age i.e. driving licence or passport may be requested and the details of this should be entered onto the consent form. An example of consent form is attached in Appendix B. These forms shall be kept on the licensed premises for a period of at least 3 years, and be available for inspection at all times
- f) Disposable paper towel shall be used on the couches in the treatment room which shall be changed between clients.

- g) All operatives shall wear non sterile, non powdered, low protein latex, vinyl or nitril gloves.
- h) Disposable plastic aprons shall be provided for use in the premises.
- i) A blood spillage kit which is in date shall be available in the treatment room and all operatives aware of the correct procedure for dealing with a spillage.
- j) The skin shall be cleaned with 70% isopropyl alcohol wipes prior to the piercing
- k) Needles, pigment caps, stencils, razors and wooden spatulas are single use only and shall be disposed of as hazardous waste after use.
- l) Tattoo motors and clip cords shall be covered with clear plastic during a tattoo and changed between clients.
- m) Elastic bands used on the motors shall be changed between clients.
- n) Any waste generated by the treatment which is classified as hazardous must be secured in appropriate waste bags and stored in a secure area whilst awaiting collection. A waste transfer note shall be available on site when waste is removed.
- o) Sharps containers shall comply with British Standard BS7320/UN3291. The label on the container shall be completed with the address or postcode of the premises. Sharps containers shall be sited above floor level and below shoulder level.
- p) The sharps container shall be collected when it is $\frac{3}{4}$ full. A waste transfer note shall be available on site for each container collected.
- q) An accessible wash hand basin shall be fitted within each treatment room provided with hot and cold running water, preferably by mixer taps. Liquid soap and a paper towel dispenser shall also be fitted in this area.
- r) In addition to the wash hand basin, a deep sink with hot and cold running water shall be provided exclusively for washing used equipment; this should be fitted in a separate 'dirty' area away from the clean operating area.
- s) Used instruments shall be manually cleaned in the sink before undergoing the ultrasonic process, cleaning shall occur below water level rather than under running water. Staff shall wear a suitable disposable plastic apron during this process.
- t) Reusable instruments shall then be put through a cycle in an ultrasonic cleaner in accordance with Appendix C. The verification tests outlined in Appendix C shall be undertaken at the specified intervals and results shall recorded in the site logbook.
- u) Following Ultra Sonic cleaning any reusable instruments etc. shall then be sterilised in a bench top autoclave.
If a non-vacuum type autoclave is used then the instruments should be sterilised in accordance with Appendix D.
- v) The verification tests outlined in Appendix D shall be undertaken at the specified intervals and results recorded in the site logbook
- w) If a vacuum type steriliser is used then the instruments should be sterilised in accordance with Appendix E.
- x) The verification tests outlined in Appendix E shall be undertaken at the specified intervals and results recorded in the site logbook.
- y) Non sterile cling film shall be used to cover the tattoo.
- z) A written aftercare leaflet shall be given to each client in accordance with general condition 16.

5) Semi-permanent make up/micropigmentation

- a) A consultation with the client shall take place prior to the treatment, this shall include medical history, and a patch test may be carried out.
- b) A blood spillage kit which is in date shall be available in the treatment room and all operatives aware of the correct procedure for dealing with a spillage
- c) All walls, floors, surfaces, seating etc. shall be made of washable material.

- d) An accessible wash hand basin should be fitted within the treatment area provided with hot and cold running water, preferably by mixer taps. Liquid soap and a paper towel dispenser should also be fitted in this area.
- e) All operatives shall wear non sterile, non powdered, low protein latex, v vinyl or nitril gloves.
- f) The administration of local anaesthetic is prohibited in accordance with Part II condition 14.
- g) Needles, needle housing/cap/tubes/needle bars etc. shall be single use disposable.
- h) Sharps containers shall comply with British Standard BS7320/UN3291. The label on the container shall be completed with the address or postcode of the premises. Sharps containers shall be sited above floor level and below shoulder level.
- i) The sharps container shall be collected when it is $\frac{3}{4}$ full. A waste transfer note shall be available on site for each container collected.
- j) It is recommended that each operative is vaccinated against Hepatitis B. Records of the Hepatitis B status of all operatives shall be kept at the premises.
- k) In addition to the wash hand basin, a deep sink with hot and cold running water shall be provided exclusively for washing used equipment; this should be fitted in a separate 'dirty' area away from the clean operating area.
- l) Used instruments shall be manually cleaned in the sink before undergoing the ultrasonic process, cleaning shall occur below water level rather than under running water. Staff shall wear suitable disposable plastic aprons etc. during this process.
- m) Reusable instruments shall then be put through a cycle in an ultrasonic cleaner in accordance with Appendix C.
- n) The verification tests outlined in Appendix C shall be undertaken at the specified intervals and results shall recorded in the site logbook.
- o) Following Ultra Sonic cleaning any reusable instruments etc. shall then be sterilised in a bench top autoclave.
- p) If a non-vacuum type is used then the instruments should be sterilised in accordance with Appendix D.
- q) The verification tests outlined in Appendix D shall be undertaken at the specified intervals and results recorded in the site logbook
- r) If a vacuum type steriliser is used then the instruments should be sterilised in accordance with Appendix E.
- s) The verification tests outlined in Appendix E shall be undertaken at the specified intervals and results recorded in the site logbook.
- t) A logbook must be kept on site which contains details of manufacturer's instructions and results of all tests carried out on the ultrasonic and autoclave, the logbook must be available for inspection at all times by an authorised Council officer.
- u) A written aftercare leaflet shall be given to each client in accordance with Part II condition (16)

6) Electrolysis

Individual pre-wrapped sterilised needles shall be used and disposed of in a sharps box after each client.

7) Body Piercing

- a) A piercing may only be performed by an approved person who is named on the licence, in accordance with Part II 2 (f) of these conditions. Guest piercers shall not carry out treatments unless they have been previously notified to the Council and are named on the licence
- b) Piercings with the exception of nipple and genitals may be carried out with written parental consent under the age of 16.

- c) Piercings with the exception of the genitals may be carried out on 16-18 year olds with either parental consent or a valid photographic identification e.g. passport or driving licence.
- d) Genital piercing may be carried out on anyone over 18 years of age with a valid photographic identification e.g. passport or driving licence. Details of ID shall be entered on the consent form.
- e) Prior to treatment every client or parent/guardian shall complete and sign a consent form in accordance with Appendix B. Photographic ID shall be requested and recorded on the consent form for anyone who appears to be under 18.
- f) The following guns are approved for ear piercing, Inverness, Blomdahl, Caress 2000, Caflon, Studex, Tripps, Perfex, Medisept
- g) The following guns are approved for nose piercing, Studex, Blomdahl, Coren, Medisept, Inverness Dr Pierce. Jewellery fitted with a stud shall not be used in nose piercing.
- h). The administering of local anaesthetic is prohibited in accordance with Part II condition 14.
- i) Any waste generated by the treatment which is classified as hazardous must be secured in appropriate waste bags and stored in a secure area whilst awaiting collection. A waste transfer note shall be available on site when waste is removed.
- k) Sharps containers shall comply with British Standard BS7320/UN3291. The label on the container shall be completed with the address or postcode of the premises. Sharps containers shall be sited above floor level and below shoulder level.
- l) The sharps box shall be collected when it is $\frac{3}{4}$ full. A waste transfer note shall be available on site for each box collected.
- m) An accessible wash hand basin shall be fitted within each treatment room provided with hot and cold running water, preferably by mixer taps. Liquid soap and a paper towel dispenser shall also be fitted in this area.
- n) In addition to the wash hand basin, a deep sink with hot and cold running water shall be provided exclusively for washing used equipment; this should be fitted in a separate 'dirty' area away from the clean operating area.
- o) Used instruments shall be manually cleaned in the sink before undergoing the ultrasonic process, cleaning shall occur below water level rather than under running water. Staff shall wear suitable disposable plastic aprons etc. during this process.
- p) Reusable instruments shall then be put through a cycle in an ultrasonic cleaner in accordance with Appendix C.
The verification tests outlined in Appendix C shall be undertaken at the specified intervals and results shall recorded in the site logbook.
- q) Following Ultra Sonic cleaning any reusable instruments etc. shall then be sterilised in a bench top autoclave.
If a non-vacuum type is used then the instruments should be sterilised in accordance with Appendix D.
- r) The verification tests outlined in Appendix D shall be undertaken at the specified intervals and results recorded in the site logbook
- s) If a vacuum type steriliser is used then sterilised in accordance with Appendix E. the instruments should be
- t) The verification tests outlined in Appendix E shall be undertaken at the specified intervals and results recorded in the site logbook.
- u) A written aftercare leaflet shall be given to each client in accordance with general condition 16.
- v) Any jewellery which contains more than 0.05% nickel shall not be used, as this may cause an allergic reaction.
- w) All jewellery shall be sterilised in the autoclave prior to use in the piercing.

8) Artificial Nails

- a) Written records containing clients name, address, telephone number, date of treatments and operatives name shall be kept for each client. These shall be kept for a period of at least 3 years and be available at the premises for inspection.
- b) The condition of the client's nails should be examined prior to any treatment and if there is any presence or suspicion of any infection etc. they should be referred for medical treatment.
- c) All operatives shall be qualified to NVQ level issued by one of the OFQUAL/CQF recognised awarding bodies Copies of qualifications shall be available for inspection at the premises.
- d) An assessment shall be carried out of all products used in connection with the treatment e.g. Acetone, Ethyl Methacrylate etc. under the Control of Substances Hazardous to Health Regulations 2002. Copies of safety data sheets for all products used shall be available on the premises.
- e) Products containing Methyl Methacrylate (MME) shall not be used.
- f) All products used in the premises shall be stored in suitably labelled containers, specifying details of contents, supplier etc.
- g) Floor coverings shall be made of impervious material which can be easily cleaned.
- h) Any cotton wool etc. which has come into contact with nail liquids shall be disposed of in suitably covered receptacles.
- i) Dispensed nail liquids shall be kept in covered containers at all times when not in use.
- j) The use of electric drills/files on a clients natural nail is prohibited.
- k) Electric drills/files shall only be used on the surface of the artificial nail and must not be used to blend the artificial nail to the natural nail.
- l) Electric files/drills shall only be used by operatives who have had specific training in their use.
- m) File/drill bits etc. shall be cleaned between use on each client.
- n) In rooms where nail extensions are carried out suitable air filtering and extraction shall be provided to remove dust and chemicals from the air and preferably fitted at the nail table.

9) Non Surgical Lasers/IPLS

- a) The licence holder shall employ the services of an Expert Medical Practitioner to produce the 'treatment protocol' document which must be kept on site. (Appendix F outlines the information required in this document)
- b) The Licence holder shall employ the services of a certificated Laser Protection Advisor who will assist in the production of the 'local rules' document (A specimen laser local rules document is attached as Appendix G). The 'local rules' shall be updated if there are any changes made to the equipment in use, changes in procedure or treatment room if these affect the safe use of the laser/IPL.
- c) All authorised users of laser/IPLS shall be trained to at least the Core of Knowledge Certificate level and records of such training shall be kept on site with the local rules. Any training on the specific equipment in use at the premises shall also be recorded. Such training should be refreshed every 3-5 years.
- d) A suitably qualified member of staff on the premises shall be identified as the laser protection supervisor. The laser protection supervisor will have day to day to responsibility of ensuring the local rules are followed.
- e) A treatment register shall be completed every time the laser/IPLS is operated, including the following information:
 - the name of the person treated including the details of the identification shown
 - the date and time of treatment;
 - the name and signature of the laser/IPLS operator;

- the nature of the laser/IPLS treatment given
- the treatment parameters
- any accidents or adverse effects.

Laser/IPL Controlled Area

- f) The area around working lasers/IPLS shall be controlled to protect other persons while treatment is in progress. The controlled area shall be clearly defined and not used for other purposes.
A suitable safety warning sign or light entry system which complies with current British Standards shall be in place on the door of the controlled area.
- g) All lasers/IPLS shall comply with current standards BS EN 606012-22 for medical lasers and BS 60601-2-57 and shall display labels identifying them, their wavelength or range of wavelengths and the maximum output power of the radiation emitted. The labels shall be clearly visible on the front or side of the machine.
- h) The door to the controlled area shall be fitted with a suitable device which can be operated from the outside in an emergency
- i) Any windows in the controlled area shall be fitted with opaque blinds approved by the Laser Protection Advisor.
- i) The controlled areas shall be kept clear of clutter, mirrors shall be avoided and jewellery shall not be worn.
- k) Surfaces within the controlled area shall be of a matt or eggshell Finish.
- l) Protective eyewear shall be worn by everyone within the controlled area whenever there is a risk of exposure to laser/IPLS. All protective eyewear shall be marked with the wavelength range and protection offered as detailed in the local rules document. They shall be in a clean serviceable condition.
- m) The laser protection supervisor shall ensure that the key to any laser/IPLS equipment is kept in a secure and separate area when not in use and that only authorised users have access to the key.
- n) Lasers/IPLS shall be serviced annually and a record kept of servicing and repairs with the local rules document.

APPENDIX A

CERTIFICATION REQUIRED TO BE AVAILABLE AT THE LICENSED PREMISES

1) Electricity

All applicants and licence holders are required to hold valid documentation confirming the safety of the fixed wiring throughout the premises. All works must be carried out by a competent electrical engineer in accordance with the Electricity at Work Regulations 1989, e.g. NICEIC 'Periodic Inspection Report for an Electrical Installation'.

2) Sterilisers/Electrical Equipment

Valid documentation confirming the safety/calibration of all sterilisers and the safety of electrical equipment connected with the business e.g. autoclaves, ultrasonic cleaners, ultra violet cabinets, sunbeds, lasers, electrical light equipment etc.

3) Fire Risk Assessment and additional Fire Certificates

A copy of the Fire Risk Assessment, Fire extinguisher certificates and fire alarm certificates should be kept up to date and held on the premises.

4) Clinical Waste

Where clinical waste such as sharps requires disposal, a clinical waste agreement should be in place and kept for inspection on the premises.

5) Trade Waste

All applicants and licence holders shall hold a copy of the licence of the contractor who is removing the trade waste. Copies of transfer documents for the removal of trade waste should also be held.

6) Insurance

A copy of the employers liability (where applicable) and public liability certificates should be available for inspection.

7) Training

All certificates of qualifications relevant to the licensed treatments shall be available for inspection.

8) Gas Certification

Where Gas is supplied on the premises, a certificate is required to be in place and available for inspection.

APPENDIX B

SPECIMEN TATTOOING/PIERCING CONSENT FORM

(Name & Address of premises)

I hereby declare that I give (piercer/tattoo artist's name) my full consent to (pierce/tattoo) me and that the information given below is true to the best of my knowledge.

I have/suffer from the following:

Heart Condition /Pacemaker	NO/YES
Epilepsy	NO/YES
Haemophilia	NO/YES
HIV/Hepatitis	NO/YES
High Blood Pressure	NO/YES
Diabetes	NO/YES
Skin condition e.g. Psoriasis	NO/YES
Allergies i.e. plasters	NO/YES
Taking blood thinning medication e.g. aspirin	NO/YES

I understand that no form of anaesthetic will be used in the procedure.

I understand that every care will be taken to ensure that the procedure is carried out in a hygienic way, which includes the use of disposable or pre-sterilised equipment.

I will follow the verbal and written aftercare instructions which have been given to me.

I AM NOT UNDER THE INFLUENCE OF ALCOHOL OR DRUGS. I HAVE REQUESTED THIS PIERCING / TATTOO OF MY OWN FREE WILL

Print Full Name.....

Address

.....

AGE Date of Birth..... Type of ID

Identification Number on ID

Signature of clientGuardian if under 16

Date..... Tattoo/piercing site

.....

APPENDIX C

ULTRASONIC CLEANING PROCEDURE

The following procedure should be displayed in the disinfection area.

Place instruments in a basket. Open or dismantle instruments where appropriate. The lid must be closed when in operation.

Use the detergent at the dosage as recommended by manufacturer (e.g. low-foaming enzymic, effective at low temperatures)

After completion of the cycle, rinse thoroughly to remove detergent residues, by immersing in clean water (unless machine has an automatic rinse cycle)

Drain and dry items

Empty, clean and dry bath at the end of the day

ULTRASONIC TESTS

All results must be recorded in the log book

Table showing recommended tests and frequency for Ultrasonic Bath

Test	Weekly	Quarterly	Yearly
Automatic Control Test	Y		
Safety Checks	Y		
Cleaning Efficacy		Y	
Ultrasonic Activity		Y	
Service/Portable appliance test			Y

Automatic Control Test

The principle behind the Automatic Control Test is to create a continuous performance record that is unique to the machine. This ensures that any deviation from normal performance can be identified.

- The cycle time (min 3-6 mins) and temperature (40-50 c) must remain consistent with results of previous tests.
- The machine should display 'Complete Cycle' message
- There is no observed deviation from normal performance
- The must be updated logbook

Safety Checks

Safety checks ensure Operator Safety and correct cycle function and usually consist of:

- Check safety valve operation
- Check door pressure interlock
- Check door cycle start interlock

- Check door in-cycle interlock
- Check condition of door seal
- Check that filters and strainers are free from blockages
- Record all checks in the logbook

Cleaning Efficacy

These tests are done to prove that the machine is reducing the amount of contamination on an instrument to an acceptable level during the cycle.

Test Soil

Test Soil is used to mimic contaminants that would be found on an instrument prior to processing. Test kits can be purchased from supplier. Record results in the logbook.

Ultrasonic Activity

The ultrasonic activity is tested to check that the cleaner is cavitating correctly.

The recommended procedure is the Aluminium Foil Test. A 5cm foil strip is held using forceps in the centre of the bath for 3 minutes. Inspect the foil. The edges of the foil should be serrated with pitting and /or perforation of the centre of the strip. Alternatively use a commercial kit, which shows a colour change if the ultrasonic bath is producing sufficient cavitation. Record the results in the logbook.

The water must be changed after this test has been carried out as particles of foil remain in the water.

Service

A yearly service is recommended by a competent engineer.

The appliance should also be checked yearly for electrical safety as part of the premises portable appliance maintenance programme.

Appendix D

NON VACUUM STERILISATION PROCEDURE

The following procedure should be displayed in the sterilisation area.

Type N - Non Vacuum – suitable for solid instruments only

Fill the reservoir with water (sterile water is recommended) at the beginning of the day.

Ensure maximum surface exposure of instruments by opening or dismantling instruments.
Do not overload.

Bowls, kidney dishes etc. should be inverted and placed at an angle to allow draining and the steam to contact all surfaces of the vessel.

On completion of the cycle instruments may be stored in a clean plastic container and must be used within 3-4 hours after this time if not used they must be re sterilised.

The reservoir should be drained at the end of the day when cooled and the chamber left clean and dry overnight.

AUTOClave VERIFICATION TESTS

Type N - Non Vacuum machines – suitable for solid instruments only

All results must be recorded in the log book

Test	Weekly	Quarterly	Yearly
Automatic Control Test	Y		
Safety Checks	Y		
Service/Portable appliance test			Y

Automatic Control Test – weekly

This test will provide accurate details of the maximum temperature and pressure reached during the 'hold time' within the steriliser during a typical cycle.

The test should be carried out at the beginning of the day.

The autoclave should be empty and the most frequently used cycle selected (e.g. 134°C, unwrapped without drying), or a test cycle if the autoclave is programmed with this feature.

If the unit has a printer installed the print out of the test cycle should be retained and recorded in the logbook.

If the autoclave does not have a printer, the following information must be observed and recorded manually in the logbook.

- Cycle time
- Sterilization 'hold time' (i.e. the length of time temperature is held at either 134°C or 121°C during the cycle)
- Temperature
- Pressure

Safety Checks - Weekly

The door seals should be checked for signs of deterioration and leaks and results recorded in the logbook.

Check the performance of the door safety devices and record result in the logbook.

Service – annual

The steriliser should receive an annual service from a qualified engineer in accordance with the manufacturers' recommendation.

The steriliser should be checked yearly by a competent engineer as part of the premises portable appliance maintenance programme.

A copy of the reports to be kept in the log book.

APPENDIX E

VACUUM STERILISATION PROCEDURE

The following procedure should be displayed in the sterilisation area

Type B- Vacuum – suitable for hollow or porous instruments.

Fill the reservoir with water (sterile water is recommended) at the beginning of the day.

The instruments should be placed in suitable pouches which may have an indicator strip on them which changes colour after the cycle is complete.

Once sterilised the pouches can be stored for up to 6 months, the date of sterilisation should be written on the pouch.

The pouches should be stored above floor level, away from direct sunlight and in a secure, dry and cool environment.

The reservoir should be drained at the end of the day when cooled and the chamber left clean and dry overnight.

VACUUM AUTOCLAVE VERIFICATION TESTS

Type B- Vacuum – suitable for hollow or porous instruments

All results must be recorded in the log book

Table showing recommended tests and frequency for Type N Autoclave

Test	Weekly	Quarterly	Yearly
Automatic Control Test	Y		
Safety Checks	Y		
Steam Penetration Tests		Y	
Service/Portable appliance test			Y

Automatic Control Test – weekly

This test will provide accurate details of the maximum temperature and pressure reached during the 'hold time' within the steriliser during a typical cycle.

The test should be carried out at the beginning of the day.

The autoclave should be empty and the most frequently used cycle selected (e.g. 134°C, unwrapped without drying), or a test cycle if the autoclave is programmed with this feature. If the unit has a printer installed the print out of the test cycle should be retained and recorded in the logbook.

If the autoclave does not have a printer, the following information must be observed and recorded manually in the logbook.

- Cycle time
- Sterilization 'hold time' (i.e. the length of time temperature is held at either 134°C or 121°C during the cycle)
- Temperature
- Pressure

Safety Checks - weekly

The door seals should be checked for signs of deterioration and leaks and results recorded in the logbook.

Check the performance of the door safety devices and record result in the logbook

Steam Penetration Test – quarterly

This test is used in order to check that the air removal stage of the steriliser is effective.

The method used must be in accordance with the manufacturers' guidance in order to be effective.

The Bowie and Dick or Helix tests are the most commonly used and are available in pack form from suppliers.

The pack is placed in the centre of the chamber, select a standard cycle, the same cycle must be used each time the test is performed.

At the end of the cycle examine the test sheet and record the results in the logbook.

Service – annual

The steriliser should receive an annual service from a qualified engineer in accordance with the manufacturer's recommendation

The steriliser should be checked yearly by a competent engineer as part of the premises portable appliance maintenance programme.

A copy of the reports to be kept in the log book

APPENDIX F

Laser /IPLS Treatment Protocol Document

A treatment protocol must be produced by an expert medical practitioner (EMP) in relation to the licence holders' equipment/premises.

The treatment protocol sets out the necessary pre-treatment checks and tests, the manner in which the laser/IPLS is to be applied, the acceptable variations in the settings used, and when to abort a treatment.

The treatment protocol should be signed and dated by the EMP to confirm authorisation, should be reviewed annually and include a projected date for review.

A separate treatment protocol should be in place for each laser/IPLS in use at the licensed premises.

The treatment protocol must include the following:

- name and technical specifications of the equipment
- contra indicators
- treatment technique – general
- treatment technique – hair reduction
- client consent prior to treatment
- cleanliness and infection control
- pre-treatment tests
- post-treatment care
- recognition of treatment-related problems
- emergency procedures
- permitted variation on machine variables
- procedure in the event of equipment failure

APPENDIX G

CONTENT OF LASER/IPLS LOCAL RULES DOCUMENT

1) Potential Hazards

List all types of hazards including fire, skin and eye injuries, electrical etc.

2) Device Description

Description of all devices including output, serial numbers etc.

3) Treatment Protocol

Reference to separate document produced by the Expert Medical Practitioner.

4) Written Procedures

Supported by reference to user manual/training manual etc.

5) Adverse Incident Procedure

- a) Details of actions that shall be taken in cases of emergency e.g. eye exposure
- b) Name, address and tel. no of local accident and emergency department.
- c) Any incidents must also be reported to Croydon Council, list of their contact details,

6) Emergency Shutdown Procedure

Instructions as set down in manufacturers' manual or treatment protocol.

7) Register of Authorised Users

Details of trained personnel with signed declarations of individuals.

8) Laser Protection Advisor

Contact details of the LPA

9) Laser Protection Supervisor

- a) One Authorised User shall be nominated Laser Protection Supervisor to ensure that the register is maintained and the local rules are adhered to
- b) Name of the laser protection supervisor

10) Record of laser use

A register shall be kept which will separately record the following information every time the IPL is operated

- the name and date of birth of the person treated
- date of treatment
- the operator
- the treatment given
- any accident or adverse effects.

11) Laser/IPL Operator Training

- a) All laser/IPL 'authorised users' shall hold the Core of Knowledge Training Certificate together with specific training on the use of on-site equipment provided by the supplier of the Laser/IPLS.

- b) Details of all training shall be recorded in the Register of Authorised Users or a separate Training Register.

12) Controlled Area designation and access

- a) The room in which the laser/IPLS is used shall be designated a 'Controlled Area' and the laser shall only be used in this area. Approved warning signs shall be fitted to the door i.e. 'Controlled Area', 'Eye Protection' etc.
- b) A notice should be fixed to the laser/IPLS indicating that its use is subject to the Local rules.

13) Register of Authorised Users

A register shall be kept of personnel authorised to operate the equipment.

14) Safe Operation of device

- a) No more than one laser/IPL shall be switched on during the client treatment.
- b) When the laser/IPL is in operation the number of persons in the room shall be kept to a minimum.
- c) The laser/IPL shall not be enabled to fire unless it is directed towards the treatment site or a beam stop.
- d) The Authorised User shall be careful to avoid reflections of the beam from Instruments/equipment in close proximity to the beam path, matt/non reflective surfaces etc. shall be provided.
- e) Whenever the device is unattended by an Authorised User, the laser shall be switched off and the key withdrawn and placed in safe custody by the Authorised User.

15) Operator responsibility

- a) It is the responsibility of the equipment Authorised User to be aware of the nature of the hazard involved and to be familiar with the manufacturer's operating instructions.
- b) During the operation of the laser (or IPL) the Authorised User is responsible for the safety of all persons present, including the client and themselves.

16) Protective eyewear

Protective eyewear shall be provided and clearly marked for the laser. It is important that the correct goggles are used e.g. the use of a coloured sticker or other identifier on the goggles matches a similar identifier on the laser or IPL. The Authorised User shall instruct all personnel in the Controlled Area to wear goggles suitable for the laser being used.

17) Application of local rules

- a) The laser shall only be used in accordance with these local rules.
- b) Authorised Persons shall sign statements that they have read and understood these local rules.
- c) The local rules shall be kept in the treatment room/s at all times.