STANDARD LICENSING CONDITIONS
FOR PREMISES OFFERING
SPECIAL TREATMENTS

STANDARD CONDITIONS IN FORCE
3rd JULY 2012 FOR PREMISES OFFERING
SPECIAL TREATMENTS LICENSED BY
THE LONDON BOROUGH OF NEWHAM
# Standard Conditions For Premises Offering

**Special Treatments**

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STANDARD CONDITIONS FOR PREMISES OFFERING SPECIAL TREATMENT

Revised conditions for premises licensed by the London Borough of Newham in force from 1st April 2011.

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.

Part 1 - GENERAL

Definitions

1) In these rules, unless the context otherwise requires:-


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 Newham.

Special Treatment means massage, electric treatments, light treatments, water treatments, skin piercing 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 Emergency Planning 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 premises within the Council’s area licensed for special treatments and includes all installations, fittings etc.

**Operative** – the person carrying out the special treatment and, for tattooing and body piercing premises, is an approved operative as named on the licence.

**Authorised Officer** means an Officer appointed by the Public Protection (Commercial Team) of the Environment Directorate

**Dispensation or Modification of Rules**

2) (a) These rules may be dispensed with or modified by the Council in any special case.

(b) 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.

(c) If the licensee wishes any licence terms, conditions or restrictions to be varied, an application must be made to the Council, and if the Council so requires, the application must be advertised.

**References**


PART II - (GENERAL) 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 patrons.

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.

e) A licence will be issued in the name of the applicant and, for the purposes specified in Part II (2 (f)), will include the names of individual operatives approved by the Council.

f) Where a therapist is exempt under the Act, then current details of their membership of the relevant body shall be kept at the premises, and made available to Council Officers for verification.

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 should be displayed in a prominent position in the premises.

e) The licence holder/authorised person shall ensure that all operatives carrying out ‘special treatments’ are suitably trained/qualified and evidence of such shall be submitted to the Council for approval.

f) For 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 body piercings or tattooing.

g) The licence holder/authorised person shall ensure that no nuisance arises from the business, e.g. odours, noise etc.

3) Charge 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 the 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 treatment. Licensees are, therefore strongly encouraged to make reasonable adjustments for disabled people in the way they deliver their services and are reminded of the duties imposed by the Equality Act 2010.

6) Planning Consent

All applicants must contact the Council's Planning department to check whether planning permission is required. The issue of a special treatment licence does not indicate that planning consent has been granted by the Council for the premises to be used for such treatments. It is the applicant’s responsibility to obtain planning consent separately. The Licensing Department of the Council will notify its Planning Department of any application for a special treatment licence that it has received.

7) Authorised Officers

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.
8) Lighting

All lighting shall be maintained in full working order.

9) Electrical Safety

a) The licence holder shall ensure that the fixed electrical installation is periodically inspected by a competent electrical engineer in accordance with the British Standard 7671 and complies with the Electricity at Work Regulations 1989.

A copy of the current certificate must be kept at the licensed premises and available for inspection by an authorised officer

(b) The licence holder shall ensure that all portable electrical appliances 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

10) Gas appliances

(a). All gas appliances and installations at the premises shall be inspected for safety at intervals not exceeding 12 months by a registered Gas Safe engineer.

A copy of the current certificate must be kept at the licensed premises and available for inspection by an authorised officer

11) Pressure Systems

Any equipment operating under pressure shall be inspected for safety by a competent person. All pressure systems shall be operated in accordance with the current version of the Pressure Systems (Safety) Regulations 2000.

12) Personal Hygiene

Any person carrying out any special treatment must ensure that:

a) Any open boil, sore, cut or other open wound is effectively covered by an impermeable dressing.

b) Hands are kept clean and are washed immediately prior to carrying out any treatment.

c) They refrain from smoking or consuming food and drink during the
course of the treatment.

d) They wear suitable, clean and where appropriate, protective clothing.

**A wash hand basin should be provided in all treatment rooms**

**13) Refuse**

Waste produced in connection with the business that is classified as ‘hazardous’ including sharps must be collected and disposed of by a licence contractor. A waste transfer document shall be available at the premises for inspection.

Any ‘hazardous’ waste bags shall be suitably marked and whilst waiting collection shall be stored in a secure area.

**14) Record Keeping**

Before any treatment is administered to another, the operative or another competent person, shall interview the person to be treated

The interview shall be conducted in a manner that is clearly understood by the person to be treated. Where this is not possible, treatment shall not be given.

During the interview the following details must be recorded:

(a) The full name and address of the person to be treated
(b) The age of the client (if under 18)
(c) The treatment to be given
(d) The dates on which the treatment is given
(e) The name of the person giving the treatment the client’s relevant medical history, including any contra indications to the treatments to be given
(f) The clients consent to receive the treatment. (see *informed consent* below)

If records are written in a language other than English, then the licensee shall provide a written translation into English, of each record within 2 days of the record being taken

All records concerning special treatments shall be kept securely at the licensed premises for at least 3 years.

The records should be readily available for inspection by an authorised officer.
15) **Informed Consent**
The operative or another competent person, shall inform the person receiving the treatment of any possible complications and/or side effects of the treatment, and ensure that they fully understand these. The items discussed shall be recorded along with the clients’ details. The person receiving the treatment shall sign the record to show that they understand what they have been told and consent to the treatment.

16) **Proof of Age/Identity** – therapists should indicate where they have taken steps to verify age/identity of clients, either by recording the relevant information on the treatment record form, or by photocopying relevant documentary evidence provided by the client.

17) **Maintenance**
All internal walls, doors, windows, partitions, floors and floor coverings ceilings, heating lighting and ventilation, in any part of the premises used by the client and operator must able to be kept clean and be maintained in good repair and condition.

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

All equipment used in connection with special treatments shall be serviced/ maintained in accordance with the manufacturers/suppliers recommendation, and records kept.

18) **Training**
All persons carrying out special treatments shall hold suitable qualifications in the treatments they carry out. Training in the use of specific on site equipment shall also be undertaken with the manufacturer/supplier.

Qualifications/Training certificates etc shall be submitted to the council.

19) **Anaesthetic**
Administration of local anaesthetic injections other than by medically qualified Practitioners (dentist/doctor) is an offence.

Lidocaine/Ligoncaine based creams or Ametop gels are available at all pharmacies and may be purchased by the clients 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 circumstance.

**20) Control of Substances Hazardous to Health Regulations 2002 (as amended)**

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

**21) Aftercare**

a) Each client shall be provided with written aftercare advice for each treatment they receive, and confirmation of this should be recorded on their client record card.

b) Clients should also sign for receipt of this advice.

**22) Infectious Diseases**

No person known or suspected to be suffering from, or to be a carrier of a disease likely to be transmitted through the administration of a treatment shall be permitted to undertake such treatments.

**23) 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

**24) Immunisations**

The Council recommends that all operatives who come into contact with blood and other body fluids are immunised against infectious diseases (e.g. hepatitis). Information on this is available from the therapists GP or from the Health Protection Agency.

**25) Verbal Communication**

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 and aftercare advice etc.
26) **Emergency Assistance Device**

All special treatment equipment e.g. tanning beds, sauna’s/steam rooms 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.

27) **Alcohol and drugs**

No operative shall give or person receive a treatment whilst under the influence of alcohol or non-prescribed drugs.

28) **Animals**

Animals are prohibited in the treatment rooms/area.

29) **Smoking**

Smoking is prohibited in the treatment rooms/area, and signs indicating this shall be prominently displayed.

30) **Blood Spillage**

There must be a written procedure for dealing with blood spillages.

All staff must be made aware of the procedure.

31) **Sharps Injury**

There must be a written procedure for dealing with needle/sharps injuries.

All staff must be made aware of the procedure.

32) **Cleanliness of Equipment**

a) A documented cleaning schedule shall be provided by the license holder and retained at the premises for inspection

b) Where necessary, adequate facilities must be provided for the cleaning, disinfecting and sterilization of work tools, equipment, protective clothing, gowns, towels etc.

c) Adequate storage for all items must be provided so as to avoid, as far as possible the risk of contamination.
d). Before use in connection with treatment, any gown, wrap or other protective clothing, paper or other covering, towel, cloth or other such articles used in the treatment:

i) Is clean and in good repair, and, so far as is appropriate, is sterile;

ii) Has not previously been used in connection with any other client unless it consists of a material which can be and has been adequately cleaned and, so far as is appropriate, sterilized.

(d). A licensee shall ensure that any needle, metal instrument, or other item of equipment used in treatment or for handling instruments and needles used in treatment so far as is appropriate, is in a sterile condition and kept sterile until it is used.
PART III - Additional Conditions for Specific Treatments

1) Sauna and Steam Rooms

**Sauna**
a) A thermometer must be provided indicating the temperature inside the unit.

**Steam room**
a) The operator must be aware of the temperature the unit is operating at. Ideally there should be a thermometer located inside the unit. If this is not fitted the temperature inside the unit must be checked regularly and in accordance with usage and a log maintained of the temperature.

d) The temperature control device shall not be accessible to users of the sauna/steam room

b) There must be a non-verbal alarm system linked to a manned reception area for summoning help when users are left unattended in accordance with **Part II condition 27**. The alarm should continue to sound until it is manually switched to the ‘off’ position in order to silence it.

c) The user must be aware of the alert mechanism and how to use it.

d) The licensee shall have a written policy detailing the action to be taken in the event of the alert mechanism being used. This shall be communicated to all relevant personnel.

g) A clock or timer must be visible in order to monitor time elapsed in the sauna/steam room.

**e)** The sauna/steam room door must have a glazed panel to allow safe access and egress by clients and supervising staff.

The door must have an internal handle to allow the client to exit the room when required.

i) Clients should be advised to sit on a towel in the sauna/steam room to reduce the risk of infection and burning.

**h)** The hot coals in the sauna shall be protected by a guard rail or barrier.

j) The licensee shall provide a procedure whereby all sauna and steam rooms are checked on a half hourly basis for cleanliness and for state of health of the user. E.g. signs of fainting.

k) Shower facilities/plunge pool should be provided. Where a plunge pool is provided adequate arrangements must be made for the water to be circulated, filtered and disinfected.
l) A rest area for users must be provided.

m) A supply of fresh drinking water shall be available close to the sauna

n) A full client consultation must be carried out at the time of a first visit, prior to use of the sauna/steam room in accordance with Part II Condition 15

o) The following Safety guidelines on the use of the sauna shall be displayed nearby *
   - Children under 15 shall not use the sauna/steam room
   - All jewellery to be removed
   - Drink plenty of water before using the sauna/steam room
   - No eating or drinking in the sauna/steam room
   - Avoid use if suffering from high/low blood pressure or heart problems
   - Do not eat immediately before using the sauna/steam room
   - Maximum time spent in sauna 10-15 minutes/steam room 6-12 minutes**
   - Drink plenty of water after use

*This list is not exhaustive
**based on a temperature range of 85°C - 100°C for sauna and up to 50°C with a relative humidity of 80 – 100% for steam room

n) The surface of the sauna/steam room must be cleaned and disinfected each day in accordance with manufacturer's instructions and with cleaning materials specified by the manufacturer.
2) Spa pools

a) The spa pool must be operated and maintained in accordance with the joint HSE/HPA guidance, Management of Spa Pools: Controlling the Risks of Infection.

b) Regular cleaning of the spa pool, balance tanks, all associated components and the area around the spa pool must be carried out. Cleaning products must be suitable for the purpose and not compromise disinfection of the spa pool water.

A documented cleaning schedule must be set up detailing:
- Frequency of cleaning of each part of the system
- Cleaning products designated for each part
- Action required in the event problems are encountered noted

The schedule must be monitored and tasks signed off by a competent person.

The spa pool must be emptied and refilled at regular intervals in accordance with the manufacturer's guidance and usage but in any event emptied and physically cleaned at least every week. Cleaning must include the balance tank and underside of lids or covers.

The licensee shall provide a procedure whereby the spa pool is checked on a half hourly basis.

Routine microbiological water samples must be taken from the pool and balance tanks at appropriate intervals based on risk assessment, as a minimum this should include tests taken monthly for:
- Aerobic colony count
- Coliforms
- Escherichia coli
- Pseudomonas Aeruginosa

And quarterly for:
- Legionella *

*All operators must refer to the Health and Safety Executive Approved Code of Practice and Guidance (ACOP) L8, “The Control of Legionella Bacteria in Water Systems”.

Test reports must be held at the premises for a minimum of 5 years and be available for inspection by authorised officers in accordance with ACOP L8 and HPA guidance for Spa Pools.

The licensee must have a written policy of action to be taken in the event of an unsatisfactory microbiological result or other health concerns associated with use of the pool.
d) There must be a non-verbal alarm system in the vicinity linked to a manned reception area for summoning help when users are left unattended. The alarm should continue to sound until it is manually switched to the ‘off’ position in order to silence it. The user must be made aware of the alert mechanism and how to use it.

e) The licensee shall have a written policy detailing the action to be taken in the event of the alert mechanism being used. This shall be communicated to all relevant personnel.

f) All equipment shall be of sound mechanical construction and regularly maintained. Records of maintenance should be held for inspection by authorised officers.

g) The electrical safety, including the adequate earthing and insulation of all equipment, should be examined periodically by a qualified electrical engineer or approved contractor registered with the National Inspection Council for Electrical Installation Contracting (NICEIC) who should report in writing the result of his inspection. Equipment must be regularly serviced in accordance with the manufacturer’s instructions and a record of such services and copies of the electrical engineers report must be kept on the premises for inspection by authorised officers.

h) The licensee shall have a written procedure detailing steps taken to ensure the maximum bather load for the facility is not exceeded.

i) A notice providing information on the use of the spa pool must be clearly displayed near each unit.

j) A rest area for users should be provided.

l) The water circulation system must be run for a minimum of 3 hours/day and preferably continuously.

m) Water jets must be operated for a minimum of 1 hour/day.

n) The pool must be drained and refilled if left unused for 5 days or more.

o) No one under the age of 16 must be allowed to use the spa/Jacuzzi

p) Shower facilities shall be provided close to the spa.

q) A supply of fresh drinking water shall be available close to the spa.

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.
3) Ultra Violet Tanning Equipment

a) Effective from 9th April no persons under the age of 18 shall be permitted to use tanning equipment. If there is any doubt concerning age photographic ID should be requested.

b) All person 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) A trained member of staff shall be present at all times at the licensed premise and unstaffed tanning premises are prohibited.

d) Adequate Ventilation must be provided to treatment rooms and cubicles.

e) Shower or sink facilities must be available to allow the client to wash off any skin creams and make-up.

f) 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.

g) The length of time that a client uses the tanning equipment shall be controlled by the management and based on the user type of skin, power of the sunbed, and age of the tubes etc.

h) An automatic timer must be fitted to the equipment so that the user is unable to increase the time spent using the tanning equipment.

i) Users of tanning equipment shall have access to an emergency assistance device, which is connected to the reception area.

j) Each tanning unit shall be fitted with an emergency stop button.

k) All users shall be provided with protective eye equipment free of charge.

l) Arrangements shall be made to ensure that the tanning equipment is cleaned between clients.

m) The length of exposure time shall be reduced when the tubes have been replaced and suitable warning signs to that effect displayed.

n) HSE guidelines (UV Tanning Equipment INDG209(rev2)) on UV tanning shall be displayed in each tanning cubicle, copies of this document can be obtained from HSE books on telephone number 01787 881165.
o) 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 for inspection by an authorised officer.
4) Tattooing

a) No tattoo shall be carried out on a client who has not reached their 18th Birthday. This is a legal requirement under 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/temporary tattooists shall not carry out treatments unless they have been previously notified to the council and are named on the licence.

c) All walls, floors, surfaces, seating etc shall be made of a washable material.

d) The administration of local anaesthetic is prohibited in accordance with Part II, paragraph 19.

e) 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.

f) Prior to treatment every client shall read and sign a consent form, which must contain details of medical history, name, address, age etc. Photographic proof of age may be requested and details should be entered onto the consent form.

e. These forms shall be securely stored on the licensed premises for a period of at least 3 years, and be available for inspection at all times. An example of consent form is attached in Appendix B.

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 nitrile gloves and disposable plastic aprons.

h) 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.

i) The skin shall be cleaned with 70% isopropyl alcohol wipes prior to the piercing.

j) Needles, pigment caps, stencils, razors and wooden spatulas are single use only and shall be disposed of as hazardous waste after use.

k) Tattoo motors and clip cords shall be covered with clear plastic during a tattoo and changed between clients.

l) Elastic bands used on the motors shall be changed between clients.
m) Sharps containers shall comply with British Standard BS 7320:1990 and UN3291 and carry the ‘kitemark’. Sharps containers should be sited above floor level and below shoulder level. A waste transfer note shall be available on site when waste is removed.

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) An accessible wash hand basin should be fitted within the operating 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.

p) In addition to the wash hand basin, a deep sink with hot and cold running water should be provided exclusively for washing used equipment. This should be fitted in a separate ‘dirty’ area away from the clean operating area.

q) 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.

r) 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 be recorded in the site logbook

s) Following ultrasonic 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

t) The verification tests outlined in Appendix D shall be undertaken at the specified intervals and results recorded in the site logbook.

u) If a vacuum type steriliser is used then the instruments should be sterilised in accordance with Appendix E

v) The verification tests outlined in Appendix E shall be undertaken at the specified intervals and results recorded in the site logbook.
w) A logbook must be kept on site which contains details of manufacturers' 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.

x) Cling film shall be used to cover the tattoo.

y) A written aftercare leaflet shall be given to each client in accordance with part II paragraph 21
5) Electrolysis

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

b) Sharps containers shall comply with British Standard BS 7320:1990 and UN3291 and carry the 'kitemark'. Sharps containers should be sited above floor level and below shoulder level. A waste transfer note shall be available on site when waste is removed.

c) 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.

d) Written aftercare instructions shall be given to each client in accordance with part II paragraph 21.
6) 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.

Records of the consultation, the result of the patch test and any treatment given must be recorded and the client must read and sign a consent form. Records must be kept for 3 years.

b) All walls, floors, surfaces, seating etc shall be made of a washable material.

c) The administration of local anaesthetic is prohibited in accordance with Part II, paragraph 19

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) All operatives shall wear non sterile, non powdered, low protein latex, vinyl or nitrile gloves and disposable plastic aprons.

f) 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

g) Needles, needle housing/caps/tubes/needle bars etc shall be single use disposable.

h) Sharps containers shall comply with British Standard BS 7320:1990 and UN3291 and carry the ‘kitemark’. Sharps containers should be sited above floor level and below shoulder level. A waste transfer note shall be available on site when waste is removed.

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.

j) An accessible wash hand basin should be fitted within the operating 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.

k) In addition to the wash hand basin, a deep sink with hot and cold running water should be provided exclusively for washing used equipment. This should be fitted in a separate ‘dirty’ area away from the clean operating area.

l) Any re-usable items of equipment should be manually cleaned in the sink before undergoing the ultrasonic process, cleaning should occur below water
level rather than under running water. Staff shall wear a suitable disposable plastic apron during this process.

m) 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 be recorded in the site logbook.

n) Following ultrasonic cleaning any reusable instruments etc shall then be sterilised in a bench top autoclave.

o) If a non-vacuum type autoclave is used then the instruments should be sterilised in accordance with Appendix D

p) The verification tests outlined in Appendix D shall be undertaken at the specified intervals and results recorded in the site logbook.

q) If a vacuum type steriliser is used then the instruments should be sterilised in accordance with Appendix E

r) The verification tests outlined in Appendix E shall be undertaken at the specified intervals and results recorded in the site logbook.

s) A logbook must be kept on site which contains details of manufacturers 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 officer.

t) A written aftercare leaflet shall be given to each client in accordance with part II paragraph 21
7) Ear Piercing/Body Piercing

a) A piercing may only be performed by an approved person who is named on the licence, in accordance with Part II paragraph 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) The administration of local anaesthetic is prohibited in accordance with Part II, paragraph 19

c) 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.

d) All operatives shall wear non sterile, non powdered, low protein latex, vinyl or nitrile gloves and disposable plastic aprons.

e) Piercings, with the exception of nipple and genitals, may only be carried out under the age of 16 with written parental consent.

f) Piercings with the exception of the genitals may be carried out on 16-18 year olds with either parental consent or a photographic identification which includes a photograph and date of birth e.g. passport and sign a consent form. Details of ID shall be entered on the consent form.

g) 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.

h) 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. These records shall be kept for at least 3 years and be available for inspection by an authorised officer.

i) The following guns are approved for ear piercing, Inverness, Blomdahl, Caress 2000, Caflon, Studex, Tripps, Perfex, Medisept, Coren

1) Ear piercing guns which are designed for ear piercing must not be used for nose piercing.

j) Guns designed for nose piercing must be able to be sterilised between clients.

k) Jewellery

1) Studs fitted with butterflies may not be used for nose piercings
2) Only pre-sterilised single use studs from undamaged packaging may be used.

3) Studs must be opened immediately prior to use in front of the client. (This applies to ear and nose piercing when using the relevant piercing gun.)

4) Any jewellery which contains more than 0.05% nickel shall not be used, as this may cause an allergic reaction.

k) The client’s skin must be cleaned prior to piercing using a solution containing alcohol or wipes.

l) A written aftercare leaflet shall be given to each client in accordance with part II paragraph 21

m) All work surfaces must be cleaned and disinfected after each client. A solution of 70% alcohol or bleach may be used to clean surfaces etc.

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 BS 7320:1990 and UN3291 and carry the ‘kitemark’. Sharps containers should be sited above floor level and below shoulder level. A waste transfer note shall be available on site when waste is removed.

p) All walls, floors, surfaces, seating etc shall be made of washable material.

q) An accessible wash hand basin should be fitted within the operating 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.

In addition to the wash hand basin, a deep sink with hot and cold running water should be provided exclusively for washing used equipment. This should be fitted in a separate ‘dirty’ area away from the clean operating area.

r) Any reusable items of equipment should be manually cleaned in the sink before undergoing the ultrasonic process, cleaning should occur below water level rather than under running water. Staff shall wear a suitable disposable plastic apron during this process.

s) All jewellery to be used for body piercing shall be sterilised in the autoclave prior to use in the piercing.
t) Reusable instruments shall then be put through a cycle in an ultrasonic cleaner in accordance with Appendix C

u) The verification tests outlined in Appendix C shall be undertaken at the specified intervals and results shall be recorded in the site logbook

v) Following ultrasonic cleaning any reusable instruments etc shall then be sterilised in a bench top autoclave.

w) If a non-vacuum type autoclave is used then the instruments should be sterilised in accordance with Appendix D

x) The verification tests outlined in Appendix D shall be undertaken at the specified intervals and results recorded in the site logbook.

y) If a vacuum type steriliser is used then the instruments should be sterilised in accordance with Appendix E

z) The verification tests outlined in Appendix E shall be undertaken at the specified intervals and results recorded in the site logbook.

A logbook must be kept on site which contains details of manufacturers 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 officer.
8) Artificial Nails

a) Written records containing 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 for inspection by an authorised officer.

b) The condition of the clients 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 (as amended). 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.

h) Any cotton wool etc which has come into contact with nail liquids shall be disposed of in suitably covered receptacles.

g) Floor coverings shall be made of impervious material which can easily be cleaned.

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 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 form the air and at the nail treatment table.
9) Non surgical Lasers/IPLS

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)

The licence holder shall employ the services of a certified 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

All authorised users of the lasers/IPLS shall be trained to at least the core of knowledge Certificate level and records of such training shall be kept on site within 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.

A suitably qualified member of staff on the premises shall be indentified as the laser protection supervisor. The laser protection supervisor will have day to day responsibility of ensuring the local rules are followed.

A treatment register shall be completed every time the laser/IPLS is operated, including the following information:

- The name of the person treated inc 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**

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 entry light system which complies with current British Standards shall be in place on the door of the controlled area.

All lasers/IPLS shall comply with current standards BS EN 60601-2-22 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 machine.

The door to the controlled area shall be fitted with a suitable device which can be operated by the Laser Protection Advisor.

The controlled areas shall be kept clear of clutter, mirrors shall be avoided and jewellery shall not be worn.

Surfaces within the controlled areas shall be of a matt or eggshell finish.

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.

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.

Laser/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**

• All applicants and licence holders are required to hold valid documentation confirming the safety/calibration of all sterilisers which are used in connection with the business e.g. autoclaves, ultrasonic cleaners, ultra violet cabinets etc. All works must be carried out by a competent engineer.

3) **Controlled Waste**

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

4) **Insurance**

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

5) **Training**

• All certificates of qualification relevant to the licensed treatments shall be available for inspection.
CONSENT FORM

(Appendix B)

(Name & Address of premises)

I hereby declare that I give (piercer/tattoo artists 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……………………
Signature of client ……………………………………………………………
Signature of Guardian (if client under 18)
………………………………………………………………………………………… Date……………….
Tattoo/piercing site……………………………………………………………………
Name of Piercer……………………………………………………………………..
Ultrasonic Cleaning Procedure-
the disinfection procedure used prior to sterilising the instruments.

Operating 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

REQUiRED TESTS AND FREQUENCY FOR ULTRASONIC BATH

All results must be recorded in the logbook.

<table>
<thead>
<tr>
<th>Test</th>
<th>Daily</th>
<th>Weekly</th>
<th>Quarterly</th>
<th>Yearly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Automatic Control Test</td>
<td></td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safety Checks</td>
<td></td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cleaning Efficacy</td>
<td></td>
<td></td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>Ultrasonic Activity</td>
<td></td>
<td></td>
<td>Y</td>
<td></td>
</tr>
</tbody>
</table>

**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 Machine logbook must be updated
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 5cm² 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.
Sterilisation Process

process used to render an object free from viable micro-organisms which could cause infection.

Type N - Non Vacuum – suitable for solid instruments only

Operating procedure

The following procedure should be displayed in the sterilisation area.

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.

REQUIREDS TESTS AND FREQUENCY FOR AUTOCLAVE

All results must be recorded in the log book

<table>
<thead>
<tr>
<th>Test</th>
<th>Weekly</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Automatic Control Test</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Safety Checks</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service/portable appliance test</td>
<td></td>
<td></td>
<td>Y</td>
</tr>
</tbody>
</table>

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

A copy of the reports to be kept in the log book.
STERILISATION PROCEDURE- Type B- Vacuum

Suitable for hollow or porous instruments.

The following procedure should be displayed in the sterilisation area

Operating Procedure

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.

AUTOCLAVE RECOMMENDED VERIFICATION TESTS

All results must be recorded in the logbook

<table>
<thead>
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<th>Test</th>
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<th>Quarterly</th>
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</tr>
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<tbody>
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<td></td>
</tr>
<tr>
<td>Safety Checks</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Steam Penetration Tests*</td>
<td></td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>Service/portable appliance test</td>
<td></td>
<td></td>
<td>Y</td>
</tr>
</tbody>
</table>

* These tests may be done at the same time

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 manufacturer’s 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 by a competent engineer as part of the premises potable appliance maintenance programme

A copy of the reports to be kept in the log book.
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 test, 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/IPLA in use at the licensed premises.

The treatment protocol must include the following:

- Name and technical specifications of the equipment
- Contraindications
- 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
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/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 incident must also be reported to Newham council, list of their contact details

6. **Emergency Shutdown Procedure**

Instructions as set down in manufacturer’s manual or treatment protocol

7. **Register of authorised users**

Details of trained personnel with signed declaration 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 of a beam site.

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 manufacturers operating instructions.

b) During the operation of the laser (or IPL) the Authorised User is responsible for the safety of the 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 of 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.