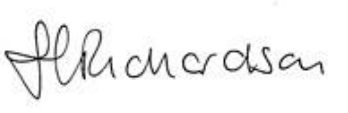
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Standard Conditions for Special Treatment Premises

Prescribed under section 10(1) of The London Local Authorities Act 1991 (as amended)

Date Approved: 12 June 2024
Effective From: 1 July 2024



Deputy Director of Housing and Strategic Planning

Notes

Except where the context demands otherwise the singular includes the plural and the masculine includes the feminine.

Nothing in these conditions shall be construed as interfering with (i) the discretion of the licence holder or his representative regarding the admission of any person or (ii) the need to strictly comply with all relevant statutory requirements.

All references to a British Standard (BS) shall be deemed to refer to the current standard.

These conditions are divided into the following parts:

- Part I - General conditions relating to management and conduct of premises
- Part II - General conditions that apply to all premises
- Part III - Specific terms and conditions
- Appendix A – List of documents required to be available at the Licensed Premises at all times.
- Appendix B – Cleaning schedule

Health and safety at work

While these standard conditions are applied to a licence for any special treatment, they do not in any way replace or reduce any of the underlying statutory duties of employers to comply with the requirements of the Health and Safety at Work etc Act 1974 and any associated Regulations and Codes of Practice.

The requirements to manage health and safety are wide ranging in nature and may overlap, to some extent, with some of the conditions listed below. Employers and self-employed persons are required by the Management of the Health and Safety at Work Regulations 1999 to assess and manage the risks to their workers and any others (i.e. clients), who may be affected by their business so as to identify what measures are needed to avoid or control the risks.

Control of substances hazardous to health (COSHH)

The Control of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH) requires that the risks must be assessed for any hazardous substances. Substances that fall under this legislation include, but are not limited to, chemicals in beauty and cleaning products, blood and other bodily fluids, and nail dust. The COSHH assessments should identify the necessary precautions that need to be taken to prevent, as far as reasonably practicable, exposure and to ensure safe use and storage.

Electricity at Work Regulations 1989

Under the Electricity at Work Regulations 1989 the electrical installation for the premises shall be inspected, tested and maintained at a prescribed frequency. This should be carried out in accordance with the current British Standard 7671.

Regulatory Reform (Fire Safety) Order 2005

All licensed premises are required to carry out a fire risk assessment to identify the general fire precautions measures needed to prevent fires and keep people safe, including the provision of means of escape, emergency lighting, fire detection, fire-fighting equipment etc. The risk assessment must be recorded and

reviewed regularly. The licence holder shall ensure that means of escape are maintained and kept free from obstruction at all times, and that fire-fighting equipment is maintained. This is enforced by the Fire Authority.

Equality and Diversity

All licence holders must comply with the Equality Act 2010.

Modern Slavery

The Modern Slavery Act 2015 categorises offences of Slavery, Servitude and Forced or

Compulsory Labour and Human Trafficking. These crimes include holding a person in a position of slavery, servitude, forced or compulsory labour, or facilitating their travel with the intention of exploiting them soon after. Under the Modern Slavery Act 2015, the maximum sentence for an offence is life imprisonment. A person involved in any part of exploitation, be that the movement harbouring, or recruitment of an individual for the purpose of exploitation, can be prosecuted under the Modern Slavery Act 2015.

Licence holders should use the 'Stronger Together' toolkit for UK employers and labour providers which can be used to tackle modern slavery in businesses at https://www.stronger2gether.org/.

Victims of modern slavery can be referred to the Local Authority, the police or the Modern Slavery Helpline 08000 121 700 for support.

Admission of Council Officers

Authorised Officers of the Council, on production of their credentials, shall be admitted immediately at all reasonable times to all parts of the premises.

The Officers of the London Borough of Bexley are authorised to inspect on behalf of the Council. The Officers can note during any inspection the matters, which are not in accordance with the conditions of the licence, or which may present a hazard to the public. Subsequently the Officers can give a written notification to the licence holder or their responsible representatives on these matters. Officers of the Fire Authority are authorised to inspect licensed establishments for special treatments under the provisions of Section 15(1) of the London Local Authorities Act 1991 (as amended).

Documentation

A checklist of documents that shall be held at the premises for inspection by any authorised officer is contained in Appendix A.

Offences and Penalties

If there is use of any premises where a licence is in force in other than in accordance with the terms, conditions, or restrictions to which the licence is held then the holder of the licence or other person concerned in the conduct or management of the premises shall be guilty of an offence and liable on summary conviction to a fine not exceeding level 4 on the standard scale. Please be advised that monitoring for compliance with conditions may take place during the period of the licence, and formal action may be taken if you breach the conditions.

Any person who intentionally obstructs any person acting in the exercise of powers under section 15 of the Act shall be liable on summary conviction to a fine not exceeding level 3 on the standard scale.

The Council may refuse to grant, renew or transfer a licence on any of the grounds set out in section 8 of the Act. A variation application can also be refused.

If the licence holder fails to renew before the licence expires, and continues to offer licensable treatments, this is an offence and the occupier or other persons concerned in the conduct or management of the premises shall be guilty of an offence and liable on summary conviction to a fine not exceeding level 4 on the standard scale.

Duration of Licence

Licences are granted for a maximum period of twelve months. A renewal application must be made **before** the current licence expires in order that it can run consecutively. The onus is on the licence holder to ensure that a valid renewal application is made before the licence expires.

Exemption

Members of some professional bodies and certain health practitioners are exempted under the legislation. If you feel you may be exempt from licensing, you will need to complete an Exemption form and supply the Council with a copy of the membership certificate for your professional body. The Council will then determine your exemption status.

Definitions

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

'All reasonable times' means hours of operation, whenever the premises are open for the purposes of the licence.

'Approval of the Council' or **'Consent of the Council'** means the prior approval or consent of the London Borough of Bexley in writing. 'Approved' or 'permitted' means, approved or permitted in advance by the Council in writing.

'Authorised officer' means any person authorised in writing by the Council and officers of the Fire Authority.

'Body fluids' means fluids such as blood, serum, saliva and other fluids that are secreted or excreted from the body that may be contaminated with blood that present a risk of infection transmission in the context of special treatments.

'Certificate' means a written report or reports of inspection and satisfactory condition completed by an appropriately qualified engineer or other competent person.

'Client' means any person undergoing or intending to undergo special treatment.

'Council' means London Borough of Bexley.

'Emergency lighting' (safety lighting) means lighting obtained from a source independent of the usual day to day supply to the building which, in the event of a failure of the normal supply, will assist clients and staff to leave the premises safely.

'Establishment for special treatment' has the meaning set out in Section 4 of the London Local Authorities Act 1991 (as amended). It applies to the following treatments: massage, manicure, acupuncture, tattooing, cosmetic piercing, chiropody, light, electric or other special treatment of a like kind or vapour, sauna or other baths.

'Fire Authority' means the London Fire Brigade or any successor authority.

'Inspect/inspection' means to carry out a visual inspection accompanied by such other test as may be necessary, in the opinion of the competent person carrying out the inspection, to enable the completion of a certificate of satisfactory condition.

'**Licence'** means a licence for the giving of special treatment as defined in Section 4 of the London Local Authorities Act 1991 (as amended).

'Licensed treatments' means those treatments that can only be carried out under and in accordance with a special treatment licence granted pursuant to Part II of the London Local Authorities Act 1991 (as amended).

'Lighting' means all lighting, other than escape/emergency lighting, permanently installed in those parts of the premises to which the public have access.

'Practitioner' includes any therapist/tattooist/cosmetic piercer/beautician/operator involved in providing licensable special treatments.

'Premises' includes any part of premises licensed by the Council, any associated areas, equipment and fittings.

'Premises Manager' means the person in charge of the premises whilst the premises are open for the purposes of operating under the licence, and as such are concerned with the conduct and management of the premises. This person may either be the licence holder, or a person appointed by him in writing.

'**Single use'** means a disposable device that is used on one client during a single procedure. It must not be re-used and must be disposed of immediately after use.

Any package with this symbol on the outer pack  is for single use only and must not be re-used.

'Sharps' include any device used to puncture or lacerate the skin and includes needles (and anything attached to them such as syringes/cartridges), scalpels, blades, razors, scissors, microblading tools, lancets, broken glass items, such as ampules or vials etc.

'**Special Treatment'** means a treatment that falls into one or more of the following categories: massage, manicure (including nail extensions/false nails), acupuncture (including electrolysis), tattooing (including semi-permanent make-up, micropigmentation, microblading, temptoos), cosmetic piercing, chiropody, pedicure, light, electric or other special treatment of a like kind and vapour, sauna or other baths.

'Staff' means any person, whether or not employed by the licence holder, concerned in the management, control or supervision of the premises who has been given specific responsibilities under these conditions.

'**Suitable qualifications'** means those listed on the London Borough of Bexley website under Special Treatment Licence - Accepted Qualifications.

Dispensation or Modification of conditions

1. These conditions may be dispensed with or modified by the Council in any special case.
2. The Council may in giving consent under these conditions impose such other conditions as it shall specify in writing.
3. If the licence holder wishes any of the terms of the licence to be varied an application must be made to the Council and if the Council so requires the application must be advertised.

PART I - GENERAL CONDITIONS RELATING TO MANAGEMENT AND CONDUCT OF PREMISES

1. Exhibition of Licence

The relevant licence, which includes Annex A, or a clear copy shall at all reasonable times be prominently exhibited within the premises in a position where it can easily be read by clients.

2. Person in charge of Licensed Premises and general responsibilities

a. The licence is personal to its holder. The licence cannot be transferred to anyone else unless the procedure prescribed in the Act has been followed, and the Council has granted the application to transfer the licence.
b. The licence holder shall be in charge of the premises at all reasonable times. The licence holder may authorise in writing a premises manager to deputise for him. If he does so, this written authorisation must be kept on the premises and be readily available for inspection by any Police Officer or Authorised Officer.

NOTE: Hereinafter in these conditions, the Licence holder shall mean the Licence holder or Premises Manager as appropriate.

c. The licence holder shall at all reasonable times admit to the premises any Police Officer or Officer of the Fire Authority, or any Authorised Officer of the Council, whose written authority will be provided on request.
d. The licence holder shall be familiar with all the relevant provisions of the London Local Authorities Act 1991 Part II (as amended) and all licence conditions which shall be kept on the premises at all times and shall take responsibility for any breaches of said conditions.
e. The licence holder shall ensure that 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, medical history, contra-indications and aftercare advice etc.
f. The licence holder shall not engage in any duties which would adversely affect the general supervision of the premises and shall be accountable for all activities in the premises at all times.
g. The licence holder shall ensure that valid public liability insurance with an appropriate level of cover is held in respect of the premises and all special treatments provided, but at least £2,000,000.00. The insurance must cover all practitioners providing the treatments, unless they have their own appropriate insurance to the same minimum level of cover.
h. The licence holder shall ensure that Employer liability insurance, where applicable, with an appropriate level of cover is held in respect of the premises and all special treatments provided, but at least £2,000,000.00.
i. The licence holder shall ensure professional indemnity insurance is in place for all treatments offered at the premises.
j. Insurance documents shall be available at the premises for inspection by an Authorised Officer at all reasonable times and shall be submitted to the Council on request.

3. Conduct of the Premises

a. The licence holder shall ensure good order in the premises at all times.
b. The licence holder shall ensure that no part of the premises is used for soliciting, indecent behaviour, including sexual intercourse or providing sexual services or the offer of any sexual or other indecent

service for reward or gain. The licence holder shall take all reasonable steps to exclude from the premises any other person who has committed such an act in the premises.

c. Except with the written consent of the Council, the licence holder shall not employ at the licensed premises any person who has been notified in writing that the Council considers unsuitable to be employed in such premises.

d. The licence holder shall ensure that all advertising of the business is conducted in an appropriate manner. No mentions or suggestions of a sexual or erotic nature, wording or visual, is permitted on any poster, advertisement, photograph, sketch, synopsis, programme, notice, flyer, website and social media content issued or published by or on behalf of the licence holder.

e. The licence holder shall ensure that any reference to individual practitioners does not mention the physical or other attributes of practitioners in any posters, advertisements, flyers, photographs, sketches, synopses, programmes, notices, websites and social media content issued or published by or on behalf of the licence holder.

f. If the licence holder is notified by the Council in writing that it objects under this condition to a poster, advertisement, flyer, photograph, sketch, synopsis, programme, website or social media content, it shall not be displayed, sold or supplied and must be removed from circulation in the premises, outside the premises or from websites and publications/social media.

g. Special treatments not on the licence shall not be advertised or offered.

h. The licence holder shall ensure that no nuisance originates from the premises, specifically no noise, odour or light shall emanate from the premises nor vibration be transmitted through the structure of the premises.

i. The licence holder shall not permit for the door of any room or place in the establishment for the time being in use for the giving of special treatment to be locked during the period that the client is therein. However, where a special treatment is being performed without a special treatment practitioner in attendance, such as in the use of sunbeds or tanning booths, such booths or cubicles may be locked from the inside provided that the staff have the means of opening the booth/cubicle in the event of an emergency. Also, where a cosmetic laser or IPL treatment is being performed the room may be locked from the inside during operation of the equipment to prevent unauthorised access, providing that other staff have the means of opening the door in the event of an emergency. The licence holder shall ensure that whenever more than one person is being treated in a room, sufficient screening is provided to maintain privacy.

j. The licence holder shall ensure that, with the exception of those persons receiving treatment in accordance with the conditions of the licence, all clients present in any part of the establishment shall be decently and properly attired and separate changing accommodation for males and females shall be provided where appropriate.

k. The licence holder will take action to ensure that there is no modern slavery and/or human trafficking in the premises; work with the Police and officers from the local authority to prevent modern slavery and human trafficking offences being committed; and provide relevant information at the premises to ensure victims can access support.

The licence holder shall ensure a 'Stop The Traffik' poster is on display in a prominent position where both practitioners and any other staff at the premises can see it.

4. Display of Tariff

A price list of all the treatments offered, including VAT, shall be provided prior to treatment, in a prominent position in reception where it is clearly visible to the public at all times or freely available on a website/leaflet/social media. Where the charge for treatments is on 'an hourly basis', for example tattooing, then this list shall show the hourly rate to be charged including VAT.

5. Fixed Electrical Installation

The licence holder shall ensure that a satisfactory Electrical Installation Condition Report from a competent person at the appropriate intervals, at least once in every 5 years or a shorter period as specified on the Report, shall be available at the premises for inspection by an Authorised Officer at all reasonable times and shall be submitted to the Council on request.

6. PAT testing of Portable Electrical Appliances

a. The licence holder shall ensure that all portable electrical appliances used within the licensed premises are visually checked prior to use to ensure safety and inspected at least once a year by a competent person and a completion certificate of that inspection kept at the premises for inspection by an Authorised Officer at all reasonable times and shall be submitted to the Council on request.
b. The licence holder shall ensure that any defective electrical item is taken out of use immediately and either disposed of or clearly labelled, DEFECTIVE DO NOT USE, until made safe.

7. Heating, including portable gas heating and gas fired appliances

a. Suitable and sufficient heating shall be provided and maintained. Treatment rooms must be kept at a temperature that ensures client comfort throughout a treatment.
b. The licence holder shall ensure that a current gas safety certificate is available at the premises at all reasonable times for inspection by an Authorised Officer and shall be submitted to the Council on request.
c. All portable heating appliances, including those utilising cylinders or containers of gas under pressure, shall not be used at the premises except with the prior consent of the Council and in accordance with such conditions as the Council may consider necessary.

NOTE: The use of liquid petroleum gas in cylinders is unlikely to be approved.

8. Material Safety Data Sheets

Material Safety Data Sheets for all hazardous substances/chemicals used at the premises shall be made available for inspection by an Authorised Officer at all reasonable times and shall be submitted to the Council on request.

9. Trade/Clinical Waste

Evidence of trade waste and clinical waste contracts and records/invoices to demonstrate the correct disposal of all types of waste shall be available on the premises for inspection at all reasonable times by an Authorised Officer and shall be submitted to the Council on request.

10. Change of Treatments or Details

a. The type(s) of treatment provided under the licence shall not be changed without first making the appropriate application and agreement reached by the Council.
b. The licence holder shall notify the Council, in writing, of any change of the licence holder's private address or registered office address within 14 days of the change taking place.

11. Alterations

a. No alterations, including any temporary alterations, shall be made to the premises without the prior consent of the Council. This condition shall not require to be given in respect of routine maintenance work.

b. Where the works necessitate for the premises to be closed for a period of time, the premises shall not re-open, for the purpose of the licence, without the prior consent of the Council.

NOTE: Any consent under this condition does not relieve the licence holder of any need to seek a variation in the terms of the licence.

PART II - GENERAL CONDITIONS THAT APPLY TO ALL PREMISES

1. Persons who can give treatment

a. Licensed treatments shall only be provided by a practitioner named on the licence to provide those treatments listed.
b. Special treatments shall only be carried out by practitioners who are aged 18 or over. The only exception to this is set out in e) below.
c. Guest practitioners, part-time, temporarily employed practitioners or practitioners on trial shall not provide licensable treatments on clients unless they have been added to the licence following prior consent by the Council.
d. Apprentice/trainee tattoo artists or cosmetic piercers shall not carry out special treatments without the consent of the Council. Apprentice/trainee tattoo artists or cosmetic piercers shall be aged 18 or over, must be named on the licence as an apprentice/trainee practitioner and shall only carry out these special treatments under the direct supervision of a suitably experienced tattoo artist or cosmetic piercer who has been approved by the Council and named on the licence.
e. Trainees or apprentices who are on work experience placement as part of a recognised traineeship (skills development programme) to help 16 to 24-year olds - or 25-year olds with an education, health and care (EHC) plan or as part of a recognised apprenticeship shall not carry out special treatments without the consent of the Council. Apprentice/trainee practitioners meeting these criteria must be named on the licence as an apprentice/trainee practitioner and shall only carry out named special treatments under the direct supervision of a suitably experienced special treatment practitioner who has been approved by the Council and is named on the licence. Evidence of the traineeship or apprenticeship must be provided to the Council on request. The individual named treatments to be provided as part of the traineeship or apprenticeship must be agreed by an Authorised Officer of the Council.
f. The title of apprentice shall not be removed without the consent of the Council.

2. Qualifications

a. Only suitably qualified and experienced practitioners listed on the premises licence shall provide treatments. Suitable qualifications for all treatments shall be Ofqual regulated.
b. The licence holder shall make an application to the Council at least 28 days before any new practitioners starts work at the premises to provide licensable treatments and they shall not commence work until the application has been approved by the Council.
c. The licence holder shall ensure that all special treatment practitioners providing licensed treatments are suitably qualified and trained to the satisfaction of the Council.
d. Evidence of qualifications, and continuing professional development (CPD), shall be available for inspection by an Authorised Officer of the Council at all reasonable times and shall be submitted to the Council for approval on request.
e. Training must cover infection control.
f. For tattooing and cosmetic piercing, where there is no recognised qualification for the special treatment being carried out, and the practitioner is only able to rely on experience and training, the Council will have regard to evidence of the relevant training, apprenticeship and/or references to past work.
g. Any practitioner may be required to successfully complete an infection control course, to be specified by the Council, and/or to satisfactorily complete a questionnaire on infection control and/or competency interview by an Authorised Officer of the Council. Any practitioner failing to satisfactorily complete the questionnaire may be required to undertake further training to improve their knowledge,

by successfully completing a course specified by the Council, before they can be included as a licensed practitioner on the premises licence.

h. Any practitioner may be required to re-take an infection control course, to be specified by the Council, periodically, at a time interval to be set by the Council, to ensure knowledge is refreshed.

i. Training in the use of specific on-site equipment shall also be undertaken, to the satisfaction of the Council, with the manufacturer/supplier and where applicable relevant certificates etc. must be available for inspection by an Authorised Officer of the Council at all reasonable times and shall be submitted to the Council for approval on request.

j. Qualifications not taken within the UK will not be accepted unless accompanied by a certificate of Comparability which is available through UK ENIC (formally UK NARIC). The qualification must be at the equivalent level of the list of Ofqual regulated qualifications accepted by the Council.

k. Where a new treatment or the status of a listed treatment changes to become licensable, any practitioner that wishes to offer such treatment shall be required to complete the necessary training to the level required by the Council and the licence holder shall make the appropriate variation application.

l. Copies of relevant qualifications, CPD, and/or training shall be kept on the premises whilst the special treatment practitioner or apprentice/trainee practitioner is employed and/or carrying out special treatments at the premises and for a period of 3 years from the date when that practitioner or the apprentice/trainee practitioner ceases employment and/or ceases providing treatments at those premises.

3. Age Restrictions

a. Where legal or age restrictions are in place as part of the Standard Conditions for certain treatments, the business must have an age verification policy in place at the premises.

b. The age verification policy operated at the premises shall be 'Challenge 25'. This means that whilst an age-restricted service may be made available to persons aged over the minimum age limit, any person who appears under 25 years of age shall be required to provide proof of age using an acceptable form of ID. The only forms of ID that may be accepted shall be:

i) Proof of age card bearing the PASS hologram logo;
ii) Passport;
iii) UK photo driving licence; or
iv) Military ID card.

c. Notices advertising that the premises operate a 'Challenge 25' scheme shall be displayed in a clear and prominent position at the entrance to the premises.

d. Where an age challenge is made, it must be recorded, and the form of ID provided must be noted on the client record card or in a book, or other form of record, a version of which must be in English. Where the record is kept other than on a client record card, the date, time and circumstances of any challenge made in accordance with the 'Challenge 25' scheme shall be recorded. These records shall be kept on the premises at all times they are open and shall be made available for inspection immediately upon demand by any Authorised Officer. The licence holder shall frequently check the book to ensure that all staff are using it.

e. All staff whose responsibilities include the making available of an age-restricted service shall receive training on induction and at regular intervals on:

i) The terms, conditions and restrictions of this licence;
ii) The operation of the 'Challenge 25' scheme;
iii) Types of acceptable ID; and
iv) The method of recording challenges.

f. Such training shall be recorded, a version of which must be kept in English, and these records shall, on request, be made available to any authorised officer immediately upon demand.

4. Client Records

a. The client records shall include the name of the person receiving treatment, including walk-ins/one offs, the time of admittance for treatment and the name of the special treatment practitioner providing that treatment. In the case of persons being treated by an apprentice/trainee, the entry shall include both - the name of the person giving treatment and that of the person supervising.
b. In the case of treatments to persons under 16, in addition to the Challenge 25 requirements above, the records shall include a signed consent form from a parent or guardian, prior to giving treatment, and shall meet the requirements of any additional conditions relating to consent specified under specific treatments in Part III.
c. The records must include details of medical history checks. This record must be signed by either the client/parent/guardian (as appropriate) as a declaration of agreement to proceed with the treatment having been explained and understanding any associated risks.
d. All personal information held on clients must be treated in accordance with the Data Protection Act 2018 and the General Data Protection Regulation (GDPR). This includes secure storage of the information, no passing on any of the information to other organisations without permission of the client and safe disposal of the information, such as shredding, when information is no longer required.
e. Client records shall be kept for a minimum of 3 years.

5. Client Consultation

a. A full client consultation must be carried out at the time of the initial visit and prior to any treatment.
b. This must include a thorough medical history in relation to the treatment being requested and a full explanation of any possible contra-indications and risks.
c. Where any medical conditions exist, the client must confirm to the practitioner that they have taken advice from their GP regarding the treatment before any treatment can be commenced.

6. Visual assessment

a. An assessment of the condition of the area to be treated must be carried out in advance prior to commencing treatment. Treatments must not be carried out on damaged or infected nails or in a close proximity (within 10 cm) of any infected area of skin, a rash, cut, broken skin or any other wound or abrasion.
b. Where necessary, relevant notes/diagrams shall be made regarding conditions, areas not to be treated.

7. Medicines prohibited from use by practitioners

a. No prescription only medicines (POMs) are to be administered by any practitioner.
b. All injectable anaesthetics are classified as POMs and therefore no anaesthetic injections must be administered by any practitioner.
c. The use of TAG45 or other such products which are not licensed for use in the UK is prohibited.
d. The use of ActFAST or other similar products containing epinephrine or adrenalin is prohibited.

8. Use of Topical Anaesthetics

a. Other topical pharmacy only (P medicines) anaesthetics shall not be obtained and applied by the practitioner. Such products may be obtained and applied by the client and the client shall be advised to read the full instructions and contra-indications prior to use.
b. Topical anaesthetics that advise that the product must not be used on broken skin shall not be applied part way through a procedure.

9. Infection control

9.1 Structure

Internal walls, doors, windows, partitions, floors or floor coverings, ceilings, heating, lighting and ventilation, in all parts of the premises used by the client and practitioner shall be constructed of smooth impervious materials which are easy to clean and must be maintained in good repair and condition.

9.2 Lighting

Lighting must be suitable and sufficient to ensure safe operation of the premises and to facilitate effective cleaning and infection control. Premises may have different levels of lighting for treatments and cleaning activities.

9.3 Ventilation

There must be suitable and sufficient means of natural or mechanical ventilation in each treatment room, and wherever practicable this should be direct to the external air. The ventilation system must be constructed in such a way as to enable for all parts of it requiring cleaning, or replacement to be easily accessible. It must be serviced and maintained regularly by a competent person to ensure that it is in a satisfactory operational order at all times. Extract units must be positioned in such a way as not to cause noise or any other nuisance to any neighbouring properties.

9.4 Animals

All animals, apart from assistance animals, are not permitted on the premises.

9.5 Personal Hygiene

a. Practitioners carrying out treatments must ensure that: -
   I. their hands are always kept clean and washed immediately before and after carrying out a treatment, and at other times as dictated by infection prevention and control practices;
   II. they maintain a high degree of personal cleanliness and wear suitable, clean and appropriate clothing and personal protective equipment;
   III. they do not smoke or consume food or drink during the course of a treatment.

b. Practitioners shall not carry out any treatments whilst afflicted by either a known or suspected ailment or being a carrier of a disease likely to be transmitted during treatment.

c. Practitioners carrying out treatments shall ensure that any open sores, cuts, boils, broken skin or other open wounds are effectively covered with waterproof impermeable dressings. If such cuts are on the hands, gloves shall be worn over the waterproof dressings.

9.6 Personal protective equipment (PPE)

a. Practitioners must wear suitable personal protective equipment when carrying out the treatment. Single use PPE shall be disposed of immediately after use.

b. Practitioners must wear single use, disposable, non-sterile gloves, such as vinyl or nitrile gloves, whilst carrying out the treatment as required in Part III Specific Terms and Conditions.

c. Latex gloves should be avoided, however, where Latex gloves are used, these should be non-powdered and low protein and the HSE advice in the note below shall be followed.

d. Clients and staff must be asked about allergies to ensure a safe glove is chosen.

e. Gloves must be changed for each client, and practitioners shall not move from one client to the next without thorough hand washing and new gloves being worn for each client.

NOTES

More information on the selection of gloves, latex gloves and the risks of asthma, urticaria, and allergic reactions is available on the HSE website https://www.hse.gov.uk/skin/employ/latex.htm.

9.7 Cleanliness of Structure, Furniture and Fittings

a. All parts of the premises used by the clients and the practitioners shall be kept capable of being kept clean and must be kept in a tidy condition and clean.
b. Mop heads used for cleaning the floor shall be either disposed of or washed in a washing machine at the end of each day at a temperature of at least 60°.
c. All furniture and fittings in treatment areas shall be of a suitable smooth and impervious material, kept clean and in such good repair as to enable them to be effectively cleaned.
d. All tables, trolleys, couches used by clients in the treatment area and any other surface on which equipment is placed immediately prior to treatment shall have a smooth impervious surface that is wiped down between clients with a suitable disinfectant using a correct process and kept in good repair to enable them to be effectively cleaned and disinfected.
e. Where tables or couches are used, they must be covered by a disposable paper sheet /towel or similar which must be changed for each client.
f. Seats must have a smooth impervious surface and must be wiped down regularly with a suitable disinfectant using a correct process or between clients where appropriate.
g. Surfaces which may be in direct or indirect contact with body fluids shall be cleaned and disinfected immediately with an appropriate disinfectant.

9.8 Cleanliness of Equipment

a. Adequate facilities and arrangements must be provided for the cleaning, disinfecting and, where required, sterilisation of work tools, equipment, uniforms, gowns, towels etc.
b. Equipment, instruments etc. shall NOT be used on more than one client unless it has been disinfected and/or sterilised between clients as appropriate.
c. Adequate storage for all items must be provided to avoid, as far as possible, the risk of contamination.
d. Before use in connection with a treatment, any gown, wrap or any other protective clothing, paper or other covering, towel, cloth or other such articles used in the treatment must be:
    I. clean and in good repair, and, so far as is appropriate, sterile and
    II. must not have 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, sterilised.
e. The licence holder must 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.
f. Wherever possible, pumps, spatulas or dispensers shall be used for creams etc. to avoid the need for fingers to be used and therefore reduce the risk of contamination.

9.9 Decontamination, disinfection and sterilisation

a. Procedures for the decontamination, disinfection and sterilisation of equipment shall be provided at the premises where necessary.
b. Glass bead sterilisers, UV light boxes, hot air ovens and water boilers and any other type of equipment deemed inappropriate for sterilisation **must not** be used for sterilisation purposes.
c. A suitable autoclave for the types of items being sterilised must be used for sterilisation. This must be strictly in accordance with the manufacturer's instructions and in compliance with the current version of Medical Devices Agency MDA DB2002 (6) MDA DB9804. Regular checks and maintenance must be carried out in accordance with the current Health Technical Memorandum (HTM).

d. A written scheme of examination and any test results shall be available for inspection by an Authorised Officer at all reasonable times.
e. Where chemicals are used to achieve sterilisation, the licence holder is responsible for having documented evidence that the chemical used is fit for purpose and is used accordance with the manufacturers' instructions following the most recent and current COSHH Risk Assessment.
f. All needles/razors must be single use in date and disposable.
g. Equipment and furniture must be cleaned, disinfected and/or sterilised to an appropriate level depending upon their use.
h. Used equipment must be stored separate to clean disinfected/sterilised equipment.

A cleaning schedule is contained in Appendix B. For clarification definitions of cleaning, disinfection and sterilisation are provided below: -

Cleaning is a process that removes foreign material (e.g. soil, organic material, micro-organisms) from an object. Detergents, such as washing up liquid and multi-purpose cleaners are commonly used for cleaning.

Disinfection is a process that reduces the number of pathogenic microorganisms, but not necessarily bacterial spores, from inanimate objects or skin, to a level which is not harmful to human health. Commonly used disinfectants include chlorine bleach and products labelled as antibacterial. Disinfection will not achieve the same reduction in microbial contamination as sterilisation. **The efficacy of the disinfection process will be reduced if prior cleaning has not been performed.**

Sterilisation is a process that destroys all microorganisms, including bacterial spores. The only way body art practitioners can achieve this is via steam sterilisation i.e. by using a suitable autoclave. Where instruments are hollow and/unwrapped (including solid items) a vacuum autoclave (Type B or S) with drying cycle must be used. Pressure cookers are not suitable for body art instrument sterilisation as they cannot automatically monitor the sterilisation process to ensure that all required parameters are met. Baby bottle steam sterilisers do not reach sufficient temperatures and therefore are not suitable for body art instrument sterilization. Bench-top sterilisers or transportable sterilisers should conform to the standard BS EN 13060 and BS EN ISO 17665. However, the manufacturer instructions should take precedent over the schedule from BS EN 13060 and BS EN ISO 17665.

Categorisation of risks.

A general categorisation of the risks that items pose regarding transmission of infection and the minimum decontamination standard that should be applied is set out below:

High Risk

- Items introduced into normally sterile body areas or in contact with a break in skin or any mucous membrane.
- Decontamination (minimum standard): Sterile or sterile single use

Medium Risk

- Definition: In contact with intact mucous membranes
- Decontamination (minimum standard): Disinfection or single use

Low Risk

- In contact with intact skin.

- Decontamination (minimum standard): Clean or clean and disinfect if contaminated with blood or body fluid.

Minimal risk

- Not normally in contact with skin e.g. floors and walls
- Decontamination (minimum standard): No specific treatment required, domestic cleaning. Spills or splashes of blood or bodily fluid should be safely cleared.

10. Wash hand basins

Adequate hand washing facilities are essential to providing good personal hygiene.
The licence holder shall ensure that:

a. A permanently plumbed in wash hand basin must be easily and permanently accessible to practitioners to permit washing of hands immediately prior to and during any treatment.
b. Wash hand basins must be located to reduce the likelihood of re-contamination of hands after washing i.e. the practitioner must not make hand contact with any potentially contaminated surfaces, such as door handles after hand washing.
c. All wash hand basins must be properly drained and supplied with permanently piped in running hot and cold, or appropriately mixed, water. It is best practice to have a hands-free (infra-red, knee operated, elbow operated or foot operated) mixer tap installed at the wash hand basin which is capable of delivering constant warm running water.
d. A suitable splashback must be provided which is smooth, impervious and easy to clean.
e. Any sealant between the splashback and sink must be kept clean and in good condition.
f. Antibacterial liquid hand soap, with moisturiser and either a hand dryer or paper towels or a supply of clean cloth towels must be available at all times.
g. The use of shared towels is prohibited.
h. Hand washing equipment such as bowls of water, flannels, nail brushes, bars of soap and cloths are easily contaminated by micro-organisms and must therefore not be used.

Below gives the minimal provision of wash hand basins (WHB) acceptable for different treatments.

- **Provision of sunbeds treatments only**: requirement is for a WHB in the W.C (toilet)
- **Provision of massage treatments only**: requirement is for a WHB in the W.C (toilet) plus a WHB in a communal area
- **Provision of nail treatments only**: requirement is for a WHB in the W.C (toilet) plus a WHB in a communal area
- **Provision of all other treatments**: requirement is for a WHB in the W.C (toilet) plus a WHB in every treatment room.

NOTES

The purpose of hand washing is to remove or destroy any micro-organisms that have been picked up on the hands, thereby preventing their transmission to others and protecting oneself. The use of disposable gloves will not always prevent the contamination of hands by micro-organisms. Good hand washing procedures are therefore essential. It is also recommended that a hand sanitiser/disinfectant is used prior to any sterile procedure following effective handwashing, as the hands must already be clean for this to be effective.

All practitioners must wash their hands:

- Before starting and leaving work
- After going to the toilet
- Before and after eating and drinking
- After smoking
- After using a tissue or handkerchief
- After any cleaning procedures
- Before using disposable gloves
- After removing disposable gloves
- Whenever hands are visibly dirty or may have been contaminated
- Before and after any situation which involves direct client contact and between clients.

Whilst handwashing is vital to maintaining hygiene and infection control the practitioner must have due regard to the risk of dermatitis and use appropriate products.

Further information available via the Health and Safety Executive (HSE)
https://www.hse.gov.uk/skin/employ/highrisk/healthcare.htm.

Antibacterial soap provided should contain a moisturiser. It is also recommended that a separate moisturiser is used at the end of the day to replace lost natural skin oils and protect the hands. Each practitioner should have their own supply and a communal pot should not be used.

11. Sinks

a. A deep sink or dishwasher must be provided for the cleaning of equipment. It must be of a size that the largest piece of equipment that needs cleaning could fit within it and be capable of being washed effectively underneath the water level where necessary for infection control.
b. This sink must be separate to any wash hand basin(s). Equipment must not be washed in the wash hand basins.
C. Where a sink for a sole purpose of washing the work equipment is not provided, the licence holder must demonstrate and prove how effective the cleaning of equipment is carried out.

12. Chemical usage

a. All substances held on the premises and used in the special treatments must be held in suitable containers that are properly labelled.
b. Containers must be tightly sealed when not in use.
c. The manufacturers' instructions for the correct use of the chemical shall be followed.

13. Waste storage and disposal

Any waste produced in connection with the business, including hazardous or offensive waste, must be collected in a sufficient number of suitable leak proof containers and handled and disposed of to ensure full compliance with all relevant legislation.

Hazardous (Clinical) waste

Disposable needles and other sharps must always be disposed of as hazardous waste and must be placed in a compliant BS 7320/UN 3291 yellow 'sharps' container with an orange lid. The fill line shall not be exceeded.

Offensive Waste

a. Soft waste from body-piercing or tattooing practice can normally be assumed to present no risk of infection, unless an indication to the contrary is provided by a healthcare professional (Department of Health 2012). However, as waste contaminated with non-infectious body fluids is capable of causing offence, it would be classed as 'offensive' waste.
b. Items such as used gloves, aprons, swabs, small dressings cotton wool, paper roll, and plastic protective covers (used to cover machine, cord, soap bottles, etc.), ink caps and leftover ink in caps contaminated with bodily fluid arising from special treatments is considered as offensive waste where it is generated in quantity (one bag of 7kg or more in any one collection period).
c. Hazardous waste bags shall be suitably marked and kept in a secure area whilst awaiting collection.
d. Offensive waste must be placed into a yellow and black stripped bag (tiger bag) for disposal, compliant with BS EN ISO 7765:2004 and BS EN ISO 6383:2004.
e. Where offensive waste is generated in small quantities (under 7kg per collection) such items can be placed in general waste bags for commercial waste.

General Waste

a. A sufficient number of lidded foot operated pedal bins shall be provided to the satisfaction of the Council for the purpose of receiving other rubbish, dust and refuse from the premises.
b. All accumulations or collections of rubbish, dust and refuse, unless immediately removed from the premises or destroyed, shall be placed in the pedal bins and kept there until removed or destroyed.
c. No hot ashes, cinders or similar shall be placed in the pedal bins.
d. Rubbish, dust and refuse shall be removed regularly from the premises.
e. All bins must be maintained in a clean, intact and good operational condition and placed in such positions as to ensure that the levels of hygiene of any treatments is not compromised.

14. First Aid

a. A suitably and sufficiently stocked first aid box shall be available in the premises, and where applicable, this should include sanitised ice packs or single use instant cold packs and/or eye wash facilities.
b. The first aid provisions must reflect all known contra-indications for all individual treatments provided at the licensed premises.
c. It is recommended that one person working in the premises is trained in basic first aid techniques.

15. Sharps Injury

a. Where there is a risk of sharps injury, there must be a written procedure for dealing with needle/ sharps injuries.
b. All staff must be made aware of the procedure. The procedure must be available on the premises at all times and made available for inspection by an Authorised Officer.
c. All such sharps injuries and near misses (an event that, while not causing harm, has the potential to cause injury or ill health) must be recorded.

NOTES
What to do if you receive a sharps injury:

If you suffer an injury from a sharp which may be contaminated:

- Encourage the wound to gently bleed, ideally holding it under running water
- Wash the wound using running water and plenty of soap
- Don't scrub the wound whilst you are washing it

- Don't suck the wound
- Dry the wound and cover it with a waterproof plaster or dressing
- Seek urgent medical advice as effective prophylaxis (medicines to help fight infection) are available
- Report the injury to your employer (if applicable).

Only hospitals with Accident and Emergency (A & E) facilities can assist with sharps injuries. Urgent Care Centres or Minor Injury Units cannot deal with such incidents. The local A&E address and postcode should be included in the procedure.

What vaccinations are available to protect against blood borne viruses?

Currently there are no vaccines for Hepatitis C or HIV available in the UK, therefore robust infection control practices must be followed at all times.

It is strongly recommended that all practitioners at risk of a sharps injury, particularly those carrying out tattooing/body piercing/acupuncture/electrolysis, receive a full course of Hepatitis B vaccine.

It has been proven, that, where a client is positive for hepatitis B and is highly infective, any skin penetrating injury carries around 30% risk of further infection.

Hepatitis vaccinations should be paid for by the employer. If a tattooist refuses to get vaccinated, it is recommended that the employer requires them to sign a disclaimer form.

Records should be kept that demonstrate the vaccination status of all tattooists working at the premises.

16. Blood/Bodily Fluid Spillage

a. Where there is a risk of blood spillages occurring, there must be a written procedure for dealing with blood spillages.
b. All staff must be made aware of and trained in this procedure. The procedure must be available on the premises at all times and be made available for inspection by an Authorised Officer.
c. A suitable spillage kit must be available in the treatment room for cleaning up blood or other bodily fluids where there is a risk of blood spillages. The kit must be in date.

17. Aftercare

Appropriate aftercare advice must be provided following each treatment. This must include information on actions to take if any adverse conditions occur. This shall be provided verbally and in writing for the client to take away.

18. WC facilities

Adequate WC facilities for both staff and clients must be provided and they must be: -

a. Maintained in good order and kept clean;
b. Each WC must have access to a designated wash-hand basin located either within the WC or just to the outside of the WC;
c. The wash-hand basin must be provided with hot and cold running water (or a mixed tap that provides warm running water).
d. A suitable splashback must be provided which is smooth, impervious and easy to clean.
e. Any sealant between the splashback and sink must be kept clean and in good condition.

f. Liquid antibacterial hand soap, which contains a moisturiser, and either a hand dryer or paper towels or a supply of single use clean cloth towels must be available at all times.
g. Each WC must be lockable;
h. Each WC must be suitably and sufficiently lit and ventilated.

PART III - SPECIFIC TERMS AND CONDITIONS

- MST 1 - NAIL TREATMENTS
- MST 2 - MASSAGE (ALL TYPES)
- MST 3 - TANNING AND ULTRA VIOLET LIGHT TREATMENTS
- MST 4 - TATTOOING, MICRO PIGMENTATION, SEMI-PERMANENT MAKE-UP, MICROBLADING, TEMPTOOS OR TREATMENT OF A LIKE KIND
- MST 5 - EAR & NOSE PIERCING (USING A GUN)
- MST 6 - COSMETIC PIERCING INCLUDING EAR/NOSE PIERCING WITHOUT A GUN
- MST 7 - ELECTROLYSIS & ELECTRICAL EPILATION
- MST 8 - SAUNA, STEAM ROOM, SPA POOLS & BATHS
- MST 9 - NON-SURGICAL LASERS, INTENSE PULSE LIGHT (IPL) & LIGHT TREATMENTS
- MST 10 - ACUPUNCTURE
- MST 11 - ELECTRIC TREATMENTS

N.B. All the following conditions are in addition to the conditions in Part 1 and Part 11.

MST 1 - Nail Treatments

1. AGE RESTRICTIONS

No child under the age of 16 shall be permitted to have nail treatments without a parent or a guardian being present. In addition, the parent/guardian must sign a consent form for the child to have the treatment.

2. INFECTION CONTROL

a. Where gloves are worn, practitioners must wear single use, disposable, non-sterile gloves, such as vinyl or nitrile gloves, whilst carrying out the treatment.
b. Latex gloves should be avoided, however, where Latex gloves are used these should be non-powdered and low protein and the HSE advice in Part II section 9.6 shall be followed.
c. Clients and staff must be asked about allergies to ensure a safe glove is chosen.
d. Gloves, if worn, must be changed for each client, and practitioners must not move from one client to the next without thorough hand washing and new gloves being worn for each client.
e. Wherever possible, pumps, spatulas or dispensers shall be used for creams etc. to avoid the need for fingers to be used and therefore reduce the risk of contamination.
f. Practitioners must either sanitise the client's hands/feet prior to treatment with a suitable skin sanitising product or request them to wash their hands/feet.
g. All reusable metal equipment, such as metal files, cuticle clippers and cuticle knives etc. must be washed and scrubbed with a general-purpose detergent (e.g. washing up liquid) and water. Once physically clean, the equipment must be dried and disinfected to an appropriate level for its intended use.
h. After cleaning and disinfection this equipment must be stored in a clean, dry and airtight container until use to prevent further contamination.

i. UV light boxes are **not** an acceptable method of sterilisation and shall not be used to achieve disinfection of equipment used for nail or pedicure treatments. A UV light steriliser may be used in addition to another means of disinfection and/or to store items in following disinfection.
j. Any equipment that cannot be either sterilised or disinfected, is considered to be of a single use and must be properly disposed of after each client.
k. All abrasive files, emery boards, rasps, buffers, blocks, toe separators or other porous equipment etc. must be single use. All such equipment shall not be kept for the same client to use for a future visit, as bacteria can breed during storage and lead to an infection.
l. Any non-porous/metal tools and implements contaminated with blood, however small must be sterilised in an autoclave or safely disposed of. Disinfection of such items is not sufficient and shall not be relied upon. Contaminated disposable items and porous items must be disposed of.
m. UV light boxes are **not** an acceptable method of sterilisation and shall not be used to achieve disinfection of equipment used for nail or pedicure treatments. A UV light steriliser may be used in addition to another means of disinfection and/or to store items in following disinfection.

3. PROHIBITIONS

a. The use of products containing Methyl Methacrylate (MMA) is prohibited.
b. The use of razors or scalpels or blades for pedicure treatments is prohibited.
c. The use of sharp holed foot graters/cheese graters/pedicure files/rasps etc. with a risk of injury is prohibited.
d. The use of electric drills/files on a client's natural nail is prohibited.

4. ELECTRIC DRILLS/FILES

a. Electric drills/files may only be used on the surface of the artificial nail and **must not** be used to blend the artificial nail to the natural nail.
b. Only practitioners with specific training in the use of electric drills/files, and who are competent in their use, are permitted to use them.
c. Metal file/drill bits etc. shall be cleaned with a suitable general-purpose detergent and disinfected between use on each client.
d. Sanding bands should be considered disposable and a new one used for each hand. Under no circumstances should these be used on more than one client.

5. VENTILATION

a. Where nail extensions are carried out, suitable air filtering and extraction must be provided to remove dust and chemicals from the air, and preferably fitted at work top level.
b. Suitable dust and chemical filters should be fitted, and the equipment operated and maintained in a good working order and in accordance with the manufacturers' instructions.
c. Low odour products should be used wherever possible.

6. PRODUCTS

A cosmetic product acquired for use on a client shall be labelled at the time of acquisition in accordance with the legal requirements applying to such a cosmetic product supplied by retail, and such labelling must be visible throughout the life of the product.

MST 2 - Massage (all types)

1. AGE RESTRICTIONS

No child under the age of 16 shall be permitted to have a massage without a parent or a guardian being present. In addition, the parent/guardian must sign a consent form for the child to have the treatment.

2. INFECTION CONTROL

If towels and fabric sheets are used in addition to couch roll, clean towels and sheets must be used for each client.

MST 3 - Tanning/Ultra Violet Light Treatments

1. AGE RESTRICTIONS

Any child under the age of 18 is prohibited from being offered or using any UV tanning equipment and from being allowed to be present in a restricted zone (in accordance with the Sunbed (Regulation) Act 2010).

2. RECORD KEEPING

a. Clients whose skin is prone to UV damage, such as Skin Type 1 (Fitzpatrick classification of skin types) shall not be permitted to use tanning equipment.
b. The client record must be signed by the client as a declaration of agreement to proceeding with the treatment having been explained and understanding any associated risks, and contra-indications associated with ultra violet radiation, particularly with regard to drugs and medical conditions.
c. A suitable gap must be provided between sessions, at least 48 hours for the first two sessions, and a minimum of 24 hours thereafter. It is advised that 48 hours is given between all subsequent sessions.
d. Client consultation cards detailing all sunbed sessions, including the duration of sessions, must be kept at the premises at all times for a period of 3 years and shall be available for inspection by an Authorised Officer at all reasonable times.
e. The licence holder shall ensure that clients do not to exceed 50 sessions per annum (in line with EU guidance).
f. Records of all maintenance visits and servicing and copies of the engineer's report shall be kept at the premises and be available for inspection by an Authorised Officer at all reasonable times.
g. Records of the tubes fitted and compliance to 0.3W/m2 for each sunbed shall be kept on the premises and be available for inspection by an Authorised Officer at all reasonable times.

3. INFECTION CONTROL

a. The surface of the sunbed must be disinfected after each use in accordance with manufacturers' instructions and with cleaning materials specified by the manufacturer. The disinfectant must have a contact time of at least one minute unless longer is required by the manufacturer.
b. Single use disposable goggles must be provided or, alternatively, the goggles must be appropriately disinfected in between the clients use in accordance with manufacturers' instructions.

4. OPERATIONAL PROCEDURES

a. The licence holder must ensure compliance with guidance on the current Sunbeds Regulations, HSE guidance and must follow the manufacturers' instructions.

b. Suitable tanning advice must be given to all clients relative to their skin type. The length of time that a client uses the tanning equipment shall be controlled by the management and based on an assessment by a trained practitioner to include factors such as the client's type of skin and power output of the UV tanning equipment.
c. Adequate means of ventilation must be provided to all treatment rooms and cubicles.
d. All fans must be adequately guarded.
e. Private shower, sink facilities or suitable wet wipes must be available to allow the client to remove any skin creams and make-up. The operator must advise the client on the importance of removing creams and make up.
f. All lockable booths must be able to be opened from the outside in an emergency.
g. An automatic timer must be fitted to the equipment, so that the user is unable to increase the time spent using the UV tanning equipment.
h. An emergency device must be fitted within easy reach of a person using the equipment. This device must switch off all UV equipment.
i. 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 and might not be heard. 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. Operation verification test records shall be available at the premises for inspection at all reasonable times.
j. Suitable goggles or equivalent, which meet relevant British and European standards for the protection of the eyes of users of the equipment must be provided free of charge and clients must be instructed in their use.
k. The Health and Safety Executive 'UV Tanning Equipment' notice providing clear and accurate information on the health risks from exposure to Ultra Violet light must be clearly displayed near each sunbed.

5. TUBES AND TUBE REPLACEMENT

a. The maximum permissible output for all UV tubes is 0.3w/m2 and manufacturers' instructions must be followed. Tubes must be replaced at intervals recommended by the manufacturer, together with the Ultra Violet transmitting plastic sheet if fitted.
b. Replacement tubes shall be identical or compatible with those supplied by the manufacturer.
c. All tubes in a bed or cabinet must be replaced at the same time.
d. Tanning times must be suitably adjusted by a competent person when new tubes have been installed.

6. TANNING ACCELERATORS

Tanning accelerators shall only be purchased from reputable suppliers to ensure compliance with the current Cosmetic Products (Safety) Regulations, and product information must be held for any tanning accelerators sold.

7. TANNING INJECTIONS

a. The sale/supply of tanning injections is prohibited.
b. The sale of nasal tanning sprays is prohibited.

8. TANNING OPERATORS

a. At least one person must be available at the premises at all times who, as a minimum, must be suitably qualified and should have been trained in the type(s) of tanning equipment used at the premises, and able to assess skin types to ensure safe tanning to the satisfaction of the Council.

b. This person(s) must carry out the initial client consultation, complete records and supervise all tanning transactions to ensure that these terms and conditions are adhered to. Any person(s) who may perform this role must be listed on the special treatment premises licence.

MST 4 – Tattooing/Micro Pigmentation/Semi-permanent make-up/Microblading/Temptoos or treatment of a like kind

Tattoo removal (also see conditions for the use of laser where applicable) are also covered by these conditions.

1. AGE RESTRICTIONS

No tattooing, micropigmentation, semi-permanent make-up, microblading or treatment of a like kind (hereinafter referred to as tattooing) shall be carried out on a child under the age of 18 years. This is prohibited under the Tattooing of Minors Act 1969.

2. CLIENT CONSULTATION

a. A detailed client consultation card shall be used including medical history considering health conditions and contra-indications specific to tattooing and the client must be advised of all potential complications and risks prior to proceeding.
b. Every client shall read and sign a consent form prior to treatment.
c. No client shall be treated if they are under the influence of drugs or alcohol.
d. Tattooing must not be carried out on or within 10cms of an infected area of skin, a rash, cut or other wound.

3. PERSONAL PROTECTIVE EQUIPMENT

a. All practitioners must wear clean, suitable clothing when tattooing. If any clothing becomes soiled, it must be changed prior to attending to the next client.
b. Single use disposable aprons shall be worn whilst carrying out the treatment and shall be changed if there is a break in treatment or there is contamination that may lead to infection.
c. Practitioners must wear single use, disposable, non-sterile gloves, such as vinyl or nitrile gloves, whilst carrying out the treatment.
d. Latex gloves should be avoided, however, where Latex gloves are used, these should be non-powdered and low protein and the HSE advice in Part II section 9.6 shall be followed.
e. Clients and staff must be asked about allergies to ensure a safe glove is chosen.
f. The integrity of gloves worn must be checked throughout the treatment.
g. New gloves must be used for each client and/or if there is a break in the treatment and non-sterile equipment is touched.
h. Face and eye protection shall be worn where there is a risk of splashing of blood/bodily fluids into the face.
i. Any PPE used must be changed between each client.

4. INFECTION CONTROL, CLEANING AND STERILISATION

a. All surfaces that come into contact with staff equipment or clients and any surfaces used during treatments must be cleaned and disinfected daily and between each client.
b. Single use impervious barrier film and paper towel (couch roll) shall be placed on the couches/treatment chair, equipment liable to contamination and working surfaces in the treatment room and shall be changed between each client.

c. Any treatment chair/couch must be disinfected after each client, ensuring removal of any organic matter prior to disinfection. The manufacturers' instructions must be followed for any products used.
d. Tattoo machines and electric cables/clip cords shall be covered with clear plastic during a tattoo which is securely taped and disposed of between clients. The tattoo machines and electric cables/clip cords shall be disinfected between each client.
e. Single use grips shall be disposed of between each client, re-usable metal grips shall be cleaned and sterilised between clients (see points p to z below).
f. Cartridge needles must contain a backflow preventer (also known as a membrane/safety membrane/barrier). Manufacturer's proof of this shall be available for inspection by an Authorised Officer at all reasonable times.
g. Elastic bands and grommets (aka "rubber nipples"), if used, shall be changed between clients.
h. Equipment designed as single use must never be re-used and must be disposed of appropriately.
i. All needles, needle housings/needle covers, needle bars, caps, cups, rings, tubes, razors, blades, microblading tools, pigment, stencils, wooden spatulas, swabs must be single use, in date and disposed of appropriately after use (See Part II, section 13 Waste storage and disposal). Needles and razors must never be re-sheathed after use and must be disposed of immediately after use into a sharps container.
j. Metal microblading tools with replacement blade or needle holders can only be re-used with prior consent of the Council where there is access to ultrasonic cleaning and an autoclave for effective sterilisation, otherwise a single use microblading tool shall be used.
k. The practice of de-soldering or breaking off needles is not permitted, both the needle bar and attached needle must immediately be discarded into a sharps bin after every use.
l. Sterile items must be in date and must be opened immediately prior to use in front of the client.
m. The client's skin must be cleaned prior to tattooing using a solution containing alcohol or appropriate sanitising skin wipes.
n. Only sterile inert pigment dispensed into single use pots or pre-packed in single use vials, shall be used. Leftover ink after use shall be disposed of. Ideally the pots should be pre-packed and sterile, if they are not sterile, the level of cleanliness before use should be at a level comparable to that achieved for disinfected hand piece components.
o. Inks shall be purchased from reputable suppliers that are accompanied by the manufacturer's product quality information/hazard date sheets and must be used within their sell by date. Lists of ingredients of inks shall be requested from suppliers and made available to clients and authorised officers of the Council on request.
p. Any equipment or instruments that have been contaminated with blood, however small, must be cleaned as soon as possible and sterilised or safely disposed of.
q. The layout of any decontamination area shall flow along a defined process from dirty (i.e. used and contaminated), through to clean.
r. If manual washing is carried out this shall take place in a dedicated, deep sink, connected to mains drainage, located in a dirty area. Items must be fully submerged under the water during cleaning to prevent any spray or aerosol being generated, prior to ultrasonic cleaning. The temperature of the water should be below 35°c to prevent blood coagulating on the equipment. Staff shall wear suitable disposable apron and eye protection during this process.
s. Any cleaning equipment, such as brushes, must be dedicated for that purpose and should be cleaned, disinfected and autoclaved at the end of each day and kept dry, or disposed of. Brushes must not be stored wet in any disinfectant and should be replaced on a regular basis.
t. Items that have been manually cleaned, followed by ultrasonic cleaning must be handled with care.
u. Where disinfection is carried out prior to ultrasonic cleaning, instruments or equipment must be submerged in an instrument bath containing an appropriate instrument disinfectant that is capable of killing bacteria and blood borne viruses, including Hepatitis B, Hepatitis C and HIV. Suitable PPE as above must be worn, and manufacturers' instructions followed.
v. Ultrasonic cleaners shall be operated, and any enzymatic agents used, in accordance with manufacturers' instructions. The lid/cover must be in place during use to prevent aerosol formation. The bath must not be overloaded and all instruments in the bath must be fully submerged, and the water changed as soon as visibly soiled or every four hours.

w. Any equipment /instruments must be visually checked prior to sterilisation to determine the need for further cleaning, then rinsed and dried using paper towels.

x. Where sterilisation is carried out, documented procedures shall be available for:

I. The validation of the sterilisation process. Wrapped or hollow items must be sterilised in a vacuum steam steriliser (Type B).

II. The method of inspection of packing and seals, copies of steriliser maintenance details and verification records.

III. The storage facilities and practices for sterile packs.

y. The licence holder shall ensure that records of inspection by a competent person for pressure vessels, and any records of checks and tests carried out, shall be available for inspection by an Authorised Officer at all reasonable times.

z. Practitioners must ensure that all instruments and equipment, once sterilised, must be kept sterile until used.

5. AFTERCARE

Aftercare advice shall, as a minimum, include the information from the CIEH Toolkit and shall be provided both verbally and in writing to the client.

6. CIEH TOOLKIT AND GUIDANCE

The licence holder and all practitioners licensed to carry out tattooing shall adhere to the requirements and recommendations of national standards and guidance relevant to

tattooing, which by definition includes, permanent make-up, micropigmentation, microblading or any other procedure of a like kind, as procedures that penetrate the skin or mucous membrane for the purpose of insertion of ink to create a permanent or long-lasting design.

The Chartered Institute of Environmental Health (CIEH) in conjunction with Public Health England (PHE) and the Tattoo and Piercing Industry Union have issued a Toolkit detailing safe practice with regard to hygienically undertaking tattooing and skin piercing. It is expected that the practitioners adhere to the requirements and recommendations contained within this document.

The document is freely available on the internet entitled Tattooing and body piercing guidance Toolkit https://www.cieh.org/media/2004/tattooing-and-body-piercing-guidance-toolkit-july-2013.pdf

MST 5 - Ear & Nose Piercing (using a gun/instrument)

1. AGE RESTRICTIONS

No child under the age of 16 shall be permitted to have their ear or nose pierced without a parent or a guardian being present. In addition, the parent/guardian must sign a consent form for the child to have the treatment.

2. CLIENT CONSULTATION

a. A detailed client consultation card shall be used including medical history considering health conditions and contra-indications specific to tattooing and the client must be advised of all potential complications and risks prior to proceeding.

b. Every client shall read and sign a consent form prior to treatment.
c. No client shall be treated if they are under the influence of drugs or alcohol.
d. Cosmetic Piercing must not be carried out on or within 10cms of an infected area of skin, a rash, cut or other wound.

3. INFECTION CONTROL

a. All piercers must wear single use non-sterile, latex free gloves such as vinyl or nitrile which must be disposed of after each client.
b. All work surfaces shall be cleaned and disinfected before and after each client.
c. The client's skin must be cleaned prior to piercing using a solution containing alcohol or appropriate sanitising skin wipes.
d. Piercing must not be carried out on or within 10cms of an infected area of skin, a rash, cut or other wound.
e. Only pre-sterilised single use studs from undamaged packaging may be used.
f. Studs must be opened immediately prior to use in front of the client.
g. Nose piercings shall not be fitted with a back and must be suitable for nose piercing.

4. JEWELLERY

a. All jewellery which may come into contact with broken skin or mucous membranes must be sterile.
b. To minimise the risk of infection and allergic reaction, all jewellery must be of a suitable grade, for example surgical stainless steel, titanium, niobium, platinum and solid 14 carat or 18 carat gold or other appropriate material such as sterile medical plastic.
c. **The following unsuitable materials must not be used:**
   I. Any jewellery which contains more than 0.05% nickel shall not be used, as this may cause an allergic reaction.
   II. Non-surgical stainless steel/Grade 316 stainless steel shall not be used as they do not comply with the current legislation relating to nickel safety as the nickel content is too high.
   III. Any gold-plated jewellery shall not be used as the plating will eventually wear exposing the skin to metal allergy.
   IV. Gold higher than 18 carat shall not be used as it is too soft and the potential exists for scratching or pitting of the metal which may increase the risk of infection at the piercing site.
   V. Gold lower than 14 carat shall not be used shall not be used as it tends to be lower in quality and has the potential to contain metal impurities which may lead to an allergic response.
   VI. Sterling silver shall not be used as silver is alloyed with 7.5% copper or a mixture of other metals, which makes it reactive.
   VII. Fine silver shall not be used as it is too soft, damages easily which may increase the risk of infection at the piercing site.
   VIII. Dense low porosity plastic shall not be used as clients may be sensitive to this & cannot always be sterilised.

MST 6 - Cosmetic Piercing including ear/nose piercing without a gun/instrument

1. AGE RESTRICTIONS

a. Clients must be over the age of 18 for all types of body piercing other than ear, nose, lip (labret), eyebrow or navel.

b. No child under the age of 16 shall be permitted to have their ear, nose, lip, eyebrow or navel pierced without a parent or a guardian being present. In addition, the parent/guardian must sign a consent form for the child to have the treatment.
c. Any other form of body modification involving the removal of parts of the body or mutilation such as tongue splitting is prohibited and is an offence of causing grievous bodily harm with intent.

2. PROTECTIVE CLOTHING

a. All practitioners must wear clean, suitable clothing when piercing. If any clothing becomes soiled, it must be changed prior to attending to the next client.
b. Single use disposable aprons shall be worn whilst carrying out the treatment and shall be changed if there is a break in treatment or there is contamination that may lead to infection.
c. Practitioners must wear single use, disposable, non-sterile gloves, such as vinyl or nitrile gloves, whilst carrying out the treatment.
d. Latex gloves should be avoided, however, where Latex gloves are used, these should be non-powdered and low protein and the HSE advice in Part II section 9.6 shall be followed.
e. Clients and staff must be asked about allergies to ensure a safe glove is chosen.
f. The integrity of the gloves must be checked throughout the treatment.
g. New gloves must be used for each client and/or if there is a break in the treatment and non-sterile equipment is touched or the integrity of the glove has come into question.
h. Face and eye protection shall be worn where there is a risk of splashing of blood/bodily fluids into the face.
i. Any PPE used must be changed between each client.

3. INFECTION CONTROL

a. All surfaces that come into contact with staff, equipment or clients must be disinfected daily.
b. Any surfaces used during treatments must be cleaned and disinfected prior to each use in accordance with the manufacturers' instructions.
c. Any treatment chair/couch must be disinfected after each client ensuring removal of any organic matter prior to disinfection. The manufacturers' instructions must be followed for any products used.
d. Equipment designed as single use must never be re-used and must be disposed of appropriately (See Part II, section 13 Waste storage and disposal).
e. Sterile items and sterile jewellery must be in date and must be opened immediately prior to use in front of the client.
f. Body piercing must not be carried out on or within 10cms of an infected area of skin, a rash, cut or other wound.
g. The client's skin must be cleaned prior to piercing using a solution containing alcohol or appropriate sanitising skin wipes.
h. Any equipment that is to be re-used and has been contaminated with blood, however small, must be cleaned and sterilised.
i. The layout of any decontamination area shall flow along a defined process from dirty (i.e. used and contaminated), through to clean.
j. If manual washing is carried out this shall take place in a dedicated, deep sink, connected to mains drainage, located in a dirty area. Items must be fully submerged under the water during cleaning to prevent any spray or aerosol being generated, prior to ultrasonic cleaning. The temperature of the water should be below 35°c to prevent blood coagulating on the equipment. Staff shall wear suitable disposable apron and eye protection during this process.
k. Any cleaning equipment, such as brushes, must be dedicated for that purpose and should be cleaned, disinfected and autoclaved at the end of each day and kept dry, or disposed of. Brushes must not be stored wet in any disinfectant and should be replaced on a regular basis.
l. Items that have been manually cleaned, followed by ultrasonic cleaning must be handled with care.

m. Where disinfection is carried out prior to ultrasonic cleaning, instruments or equipment must be submerged in an instrument bath containing an appropriate instrument disinfectant that is capable of killing bacteria and blood borne viruses, including Hepatitis B, Hepatitis C and HIV. Suitable PPE as above must be worn, and manufacturers' instructions followed.

n. Ultrasonic cleaners shall be operated, and any enzymatic agents used, in accordance with manufacturers' instructions. The lid/cover must be in place during use to prevent aerosol formation. The bath must not be overloaded and all instruments in the bath must be fully submerged, and the water changed as soon as visibly soiled or every four hours.

o. Any equipment /instruments must be visually checked prior to sterilisation to determine the need for further cleaning, then rinsed and dried using paper towels. Where sterilisation is carried out, documented procedures shall be available for:

I. The validation of the sterilisation process. Wrapped or hollow items must be sterilised in a vacuum steam steriliser (Type B).

II. The method of inspection of packing and seals, copies of steriliser maintenance details and verification records.

III. The storage facilities and practices for sterile packs.

p. The licence holder shall ensure that records of inspection by a competent person for pressure vessels, and any records of checks and tests carried out, shall be available for inspection by an Authorised Officer at all reasonable times.

q. Practitioners must ensure that all instruments and equipment, once sterilised, must be kept sterile until used.

4. JEWELLERY

a. All jewellery which may come into contact with broken skin or mucous membranes must be sterile.

b. To minimise the risk of infection and allergic reaction, all jewellery must be of a suitable grade, for example surgical stainless steel, titanium, niobium, platinum and solid 14 carat or 18 carat gold or other appropriate material such as sterile medical plastic.

c. The following unsuitable materials must not be used:

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

II. Non-surgical stainless steel/Grade 316 stainless steel shall not be used as they do not comply with the current legislation relating to nickel safety as the nickel content is too high.

III. Any gold-plated jewellery shall not be used as the plating will eventually wear exposing the skin to metal allergy.

IV. Gold higher than 18 carats shall not be used as it is too soft and the potential exists for scratching or pitting of the metal which may increase the risk of infection at the piercing site.

V. Gold lower than 14 carats shall not be used shall not be used as it tends to be lower in quality and has the potential to contain metal impurities which may lead to an allergic response.

VI. Sterling silver shall not be used as silver is alloyed with 7.5% copper or a mixture of other metals, which makes it reactive.

VII. Fine silver shall not be used as it is too soft, damages easily which may increase the risk of infection at the piercing site.

Dense low porosity plastic shall not be used as clients may be sensitive to this & cannot always be sterilised.

5. AFTERCARE

Aftercare advice shall, as a minimum, include the information from the CIEH Toolkit and shall be provided both verbally and in writing to the client.

6. CIEH TOOLKIT

The Chartered Institute of Environmental Health (CIEH) in conjunction with Public Health England (PHE) and the Tattoo and Piercing Industry Union have issued a Toolkit detailing safe practice with regard to hygienically undertaking tattooing and skin piercing. It is expected that the practitioners adhere to the requirements and recommendations contained within this document.

The document is freely available on the internet entitled Tattooing and body piercing guidance Toolkit. Toolkit https://www.cieh.org/media/2004/tattooing-and-body-piercing-guidance-toolkit-july-2013.pdf

MST 7 - Electrolysis & Electrical Epilation

1. AGE RESTRICTIONS

a. No child under the age of 16 shall be permitted to have electrolysis/electrical epilation without a parent or a guardian being present.
b. In addition, the parent/guardian must sign a consent form for the child to have the treatment.

2. CLIENT CONSULTATION

a. A consultation with the client shall take place prior to any treatment, this shall include medical history considering health conditions and contra-indications to electrolysis and electrical epilation and the client must be advised of all potential complications and risks prior to proceeding.
b. Every client shall read and sign a consent form prior to treatment.

3. PROTECTIVE CLOTHING

a. All staff must wear clean, suitable clothing when carrying out the treatment. If any clothing becomes soiled, it must be changed prior to attending to the next client.
b. Practitioners must wear single use, disposable, non-sterile gloves, such as vinyl or nitrile gloves, whilst carrying out the treatment.
c. Latex gloves should be avoided, however, where Latex gloves are used, these should be non-powdered and low protein and the HSE advice in Part II section 9.6 shall be followed.
d. Clients and staff must be asked about allergies to ensure a safe glove is chosen.
e. The integrity of the gloves must be checked throughout the treatment.
f. New gloves must be used for each client and/or if there is a break in the treatment and non-sterile equipment is touched or the integrity of the glove has come into question.
g. Face and eye protection shall be worn where there is a risk of splashing of blood/bodily fluids into the face.
h. Single use disposable aprons shall be worn.

4. INFECTION CONTROL

a. All surfaces that come into contact with staff, equipment or clients must be disinfected daily.
b. Any surfaces used during treatments must be disinfected before and after use.
c. Any treatment chair/couch must be disinfected before and after each client.
d. Any equipment that has been contaminated with blood, however small, must be cleaned and sterilised.
e. All needles/razors must be single use and disposed of appropriately after use (See Part II, section 12 Waste storage and disposal).

f. Any other equipment or instruments, such as tweezers, that have been contaminated with blood, however small, must be cleaned as soon as possible and sterilised (in accordance with g to p below) or must be safely disposed of.
g. The layout of any decontamination area for cleaning equipment shall flow along a defined process from dirty (i.e. used and contaminated), through to clean.
h. If manual washing is carried out this shall take place in a dedicated, deep sink, connected to mains drainage, located in a dirty area. Items must be fully submerged under the water during cleaning to prevent any spray or aerosol being generated, prior to ultrasonic cleaning. The temperature of the water should be below 35°c to prevent blood coagulating on the equipment. Staff shall wear suitable disposable apron and eye protection during this process.
i. Any cleaning equipment, such as brushes, must be dedicated for that purpose and should be cleaned, disinfected and autoclaved at the end of each day and kept dry, or disposed of. Brushes must not be stored wet in any disinfectant and should be replaced on a regular basis.
j. Items that have been manually cleaned, followed by ultrasonic cleaning must be handled with care.
k. Where disinfection is carried out prior to ultrasonic cleaning, instruments or equipment must be submerged in an instrument bath containing an appropriate instrument disinfectant that is capable of killing bacteria and blood borne viruses, including Hepatitis B, Hepatitis C and HIV. Suitable PPE as above must be worn, and manufacturers' instructions followed.
l. Ultrasonic cleaners shall be operated, and any enzymatic agents used, in accordance with manufacturers' instructions. The lid/cover must be in place during use to prevent aerosol formation. The bath must not be overloaded and all instruments in the bath must be fully submerged, and the water changed as soon as visibly soiled or every four hours.
m. Any equipment /instruments must be visually checked prior to sterilisation to determine the need for further cleaning, then rinsed and dried using paper towels.
n. Where sterilisation is carried out, documented procedures shall be available for:

- The validation of the sterilisation process. Wrapped or hollow items must be sterilised in a vacuum steam steriliser (Type B).
- The method of inspection of packing and seals, copies of steriliser maintenance details and verification records.
- The storage facilities and practices for sterile packs.

o. The licence holder shall ensure that records of inspection by a competent person for pressure vessels, and any records of checks and tests carried out, shall be available for inspection by an Authorised Officer at all reasonable times.
p. Practitioners must ensure that all instruments and equipment, once sterilised, must be kept sterile until used.

MST 8 - Sauna, Steam Room, Spa Pools & Baths

1. AGE RESTRICTIONS

Treatments/usage restricted to clients over the age of 16.

2. RECORD KEEPING

a. Daily, weekly, monthly and any other periodical cleaning and maintenance records must be available for inspection by an Authorised Officer at all reasonable times.
b. Maintenance and electrical safety records must be available for inspection by an Authorised Officer at all reasonable times.
c. There must be a written procedure detailing the action to be taken in the event that the alarm mechanism is used. All relevant personnel must be familiar with the procedure.

3. SPA POOLS/JACUZZI/BATH (hereinafter referred to as spas)

a. All licence holders/practitioners must manage and maintain spas to avoid the risk of legionella and must have regard to the Health and Safety Executive's Approved Code of Practice and Guidance L8, "The Control of Legionella Bacteria in Water Systems".
b. The licence holder shall ensure that the spa pool is operated and maintained in accordance with the manufacturers' instructions and the HSE Publication The control of legionella and other infectious agents in spa-pool systems HSG 282.
c. A log book/records of the free chlorine levels/total active bromine, the pH levels of the spa, temperature, water quality and numbers of bathers must be taken at regular intervals. These records should state acceptable limits for all tests and record action taken in the event of an unsatisfactory result and must be made available for inspection by an Authorised Officer at all reasonable times.
d. The licence holder must be able to demonstrate that the microbiological quality of the spa pool water is satisfactory and that guidance within HSG 282 is followed for microbiological testing and recommended actions.
e. Microbiological test results must be held and available at the premises in accordance with L8 above, for inspection by an Authorised Officer at all reasonable times.
f. The licence holder must have a written procedure that must be followed in the event of an unsatisfactory microbiological result or any other health concerns associated with use of the pool.
g. Pool Safety Operating Procedures must be prepared and be available for inspection by an Authorised Officer at all reasonable times. There must be a non-verbal alarm system in the vicinity linked to a manned reception area for summoning help when the users are 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. Emergency devices shall be fitted within easy reach of a person using the equipment. Operation verification tests shall be available at the premises for inspection by an Authorised Officer at all reasonable times.
h. All equipment shall be of sound mechanical construction and regularly maintained. Records of maintenance should be made available for inspection by an Authorised Officer at all reasonable times.
i. The licence holder shall have a written procedure detailing steps to be taken to ensure that the maximum bather load for the facility is not exceeded.
j. A notice providing information on the use of the spa pool must be clearly displayed near each unit. A rest area for users should be provided and a supply of drinking water shall be available close to the spa free of charge.
k. The spa pool must be emptied and refilled at regular intervals in accordance with the manufacturer's guidance and usage but in any event at least weekly.
l. Shower facilities shall be provided close to the spa and clients advised to shower before entering the spa.
m. Eating, drinking or shaving is prohibited in the spa.

4. SAUNA

a. The sauna room must have a glazed panel to allow safe access and egress by clients and supervising staff.
b. A thermometer shall be provided indicating the temperature inside the sauna.
c. A non-verbal emergency assistance device shall be provided either in the sauna room or immediately adjacent to it. Any saunas installed after January 2013 must have a non-verbal alarm linked to a manned reception area. 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.
d. A clock or other time keeping device shall be visible to users from inside the sauna.
e. The temperature control device shall not be accessible to users of the sauna.
f. The hot coals in the sauna shall be protected by a guard rail or barrier.
g. Shower facilities shall be provided close to the sauna.

h. A supply of fresh drinking water shall be available close to the sauna free of charge.
i. A notice providing accurate information on the safe use of the sauna must be clearly displayed near the unit.
j. The clients must wear bathing costume/shorts in the sauna.
k. Eating, drinking or shaving is prohibited in sauna.
l. Regular maintenance shall be carried out by a competent engineer in accordance with manufacturer and supplier recommendations. Records of all maintenance shall be available at the premises for inspection by an Authorised Officer at all reasonable times.

5. STEAM ROOMS

a. The floor of the equipment must be impervious; laid to fall to promote drainage and easily cleaned. It should also be constructed of a non-slip material.
b. 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. The temperature must not exceed 50^{o}C.
c. Temperature control must remain under the control of the licence holder.
d. The steam room must have a glazed panel to allow safe access and egress by the clients and supervising staff.
e. The door must have an internal handle to allow the client to exit the room when required.
f. There must be a non-verbal alarm system that can be heard in manned areas for summoning help when users are left unattended. Steam rooms installed after January 2013 must have a non-verbal alarm linked to a manned reception area. 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.
g. All equipment shall be of sound mechanical construction.
h. A clock or timer must be visible in order to monitor time elapsed in the steam room.
i. A notice providing accurate information on the safe use of the steam room must be clearly displayed near each unit.
j. Clients should be advised to sit on a towel in the steam room to reduce the risk of infection and burning.
k. Shower facilities shall be provided close to the sauna.
l. A supply of fresh drinking water shall be available close to the sauna free of charge.
m. The licence holder shall implement a procedure whereby all steam rooms are checked regularly for cleanliness and for state of health of the user e.g. signs of fainting.
n. The clients must wear a bathing costume or shorts in the steam room.
o. Eating, drinking or shaving is prohibited in the steam room.
p. Regular maintenance shall be carried out by a competent engineer in accordance with manufacturer and supplier recommendations. Records of all maintenance shall be available at the premises for inspection by an Authorised Officer at all reasonable times.

6. FACIAL STEAMERS

The manufacturers' instructions shall be followed at all times when using facial steamers for use and cleaning.

7. CLEANING/ INFECTION CONTROL

The sauna/steam room/baths/facial steamer must be cleaned and disinfected regularly following the relevant guidance and in accordance with manufacturers' instructions and with cleaning materials specified by the manufacturer.

8. OPERATORS

At least one person must be available at the premises at all times who has had, as a minimum, specific manufacturer's training for the equipment used within premises or an equivalent level of training deemed suitable by an Authorised Officer of the Council.

MST 9 - Non-Surgical Lasers, Intense Pulse Light (IPL) & Light Treatment

The conditions in this part refer specifically to Class 3B lasers, Class 4 lasers and Intense Light Source systems (ILS), commonly called Intense Pulsed Lights (IPLs) used for non-surgical cosmetic procedures.

1. AGE RESTRICTIONS

No child under the age of 16 shall be permitted to have laser/IPL/Light treatment without a parent or a guardian being present and written consent from their GP. In addition, the parent/guardian must sign a consent form for the child to have the treatment.

2. VISUAL ASSESSMENT

a. An assessment of the condition of the area to be treated must be carried out prior to commencing treatment. Where necessary notes/diagrams should be made regarding conditions and areas not to be treated.
b. Treatments must not be carried out on or in close proximity of an infected area of skin, a rash, cut, abrasion, broken skin or any other skin damage giving rise to a risk of infection.

3. AUTHORISED USER REGISTER

a. A register of all personnel trained, qualified and authorised to operate laser/IPL equipment must be kept at the licensed premises at all times.
b. The licence holder shall ensure that clients receive treatment only from appropriately trained and competent laser/IPL operators.
c. The licence holder shall ensure that all operators of lasers and IPLs use them only for treatments for which they have been trained and are competent.

4. CLIENT CONSULTATION

Operators must ensure patient/client safety by:

a. checking with patients/clients if they have (or have had) any medical condition or are having (or have had) any treatment for which laser or intense light treatment would be a contraindication (such conditions should be listed in the treatment protocol);
b. This includes taking a history of any medication or herbal remedies and if they have ceased the date at which they were stopped;
c. where appropriate, covering the skin outside the area being treated;
d. where appropriate, checking the skin type and pigmentation prior to treatment.

5. RECORD KEEPING

a. Records must be kept for every client, including walk-ins/one offs. The records must include details of medical history checks and steps taken to verify the age of the client, including their date of birth and, where appropriate, the type of identification provided.

b. Arrangements must be in place to ensure valid written consent is gained from the client by the laser/IPL operator including an explanation of risks, benefits and complications of treatment. Additional arrangements are in place for seeking consent from persons under 18 years of age from appropriately trained laser/IPL operators. Arrangements should follow Department of Health guidance.

c. These records must be signed by either the client themselves or by the parent/guardian (as appropriate) as a declaration of agreement to proceeding with the treatment having been explained and understanding any associated risks. In addition, a treatment register must be kept. The register must either be in the form of a bound spine book so that any removal of entries cannot be hidden (i.e. not a spring binder) or an equivalent software system where the editing history is clear and cannot be erased).

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

i. the name of the person treated (including a second means of identification, such as a date of birth);
ii. the date and time of treatment;
iii. the name and signature of the laser/IPL operator;
iv. the nature of the laser/IPL treatment given, including location on the body;
v. the treatment parameters and details (this should be correlated to the clients records to ensure full details are kept on their records);
vi. any potential adverse effects.

6. INFECTION CONTROL

a. Couches, tables and trolleys must be wiped with a suitable disinfectant between clients. If cloth towels are used, a clean towel must be used for each client.

b. Couch roll must be changed between clients.

c. Where any hair needs to be removed, disposable razors must be used and disposed of safely after each client.

7. LASER/ IPL TREATMENT OPERATION AND PROTOCOL DOCUMENT

a. The licence holder shall ensure that clients receive treatments using class 3B and class 4 lasers and IPLs in accordance with safe and appropriate procedures.

b. Laser/IPL must be operated and maintained in accordance with manufacturers' instructions. A record of maintenance and servicing and copies of the electrical engineer's report must be kept on the premises for inspection by an Authorised Officer at all reasonable times.

c. Laser/IPL must be operated and managed with reference to current version of the "Essential Standards Regarding Class 3B and Class 4 Lasers and Intense Light Sources in Nonsurgical Applications" (British Medical Laser Association) and "Lasers, intense light source systems and LEDs - guidance for safe use in medical, surgical, dental and aesthetic practices" (Medicines and Healthcare products Regulatory Agency).

d. The licence holder must ensure that a 'treatment protocol' document is produced and signed by an Expert Registered Healthcare Professional (ERHP)in relation to the equipment being used. The treatment protocol must be traceable, should be signed and dated by the ERHP to confirm authorisation and validity, and should be reviewed either when there is a change of treatments or if evidence comes to light that shows a change is in the clients' interests.

e. The treatment protocol must be retained at the premises at all times and be available for inspection by an Authorised Officer at all reasonable times.

f. The treatment protocol sets out the necessary pre-treatment checks and tests, the manner in which the laser/IPL is to be applied, the acceptable variations in the settings used, and when to abort a treatment.
g. A separate treatment protocol should be in place for each different laser/IPL in use at the licensed premises.
h. The treatment protocol must include the following:

i. name and technical specifications of the equipment;
ii. contraindications;
iii. technique
iv. obtaining client consent prior to treatment
v. record keeping requirements and treatment process (step by step guidance)
vi. cleanliness and infection control within the treatment environment;
vii. pre-treatment tests
viii. post-treatment care;
ix. recognition of treatment-related problems;
x. procedure if anything goes wrong;
xi. permitted variation on machine variables/settings;

The arrangements must provide evidence by which the ERHP provides on-going support and advice.

8. LASER & IPL LOCAL RULES AND RISK ASSESSMENT

a. The licence holder shall engage the services of a certificated (RPA2000, ASLP or PHE) Laser Protection Adviser (LPA) to produce the local rules document for the use of any laser and IPL devices, including those that are being used on a trial or demonstration basis.
b. A copy of the Local Rules must be in place on site, issued signed and dated by both the licence holder/employer and the LPA. Local Rules should be reviewed annually including a projected date for review. Where there are no changes, this may be reviewed by the Licence Holder, with a record that this was reviewed by the Licence Holder only. Where there are any changes, for example to the laser, room or eyewear, this must involve the LPA in the review.
c. The local rules must be up to date and reflect current equipment, facilities and working practices. For more information see section 13 below on Laser & IPL Local Rules.
d. A copy of the LPA's certificate must be available at the premises for inspection by an Authorised Officer at all reasonable times.
e. The LPA shall either be approved by http://www.rpa2000.org.uk/list-of-certificate-holders/ or http://www.laserprotectionadviser.com/
f. The licence holder shall ensure that they have access to safety advice from the LPA. There should be evidence of this on-going support and advice when appropriate and this must be available for inspection by an Authorised Officer at all reasonable times.
g. The licence holder shall ensure that the LPA has carried out an initial site visit and shall, together, produce a laser/IPL risk assessment of the establishment. The risk assessment should be signed, dated and include a date for the next review/assessment. The risk assessment and an audit report must be available for inspection by an Authorised Officer at all reasonable times.
h. The licence holder shall ensure that a laser/IPL safety audit is completed every year and an on-site visit every four years by the LPA.
i. A copy of the last LPA audit report must be available onsite for review by the Authorised Officer at all reasonable times. If a copy is not available, the licence holder must contact the LPA who wrote the Local Rules and request a copy of the last audit or ensure a new audit is carried out.
j. If there are any significant changes with respect of the Laser/IPL operations at the premises, i.e. change of room, change of Laser/IPL equipment or change in any additional treatments offered, then a further inspection by the LPA will be required at that time rather than waiting for any review date. Any changes must be documented.

k. While the changes in relation to the laser user(s) will not require a new risk assessment, the 'user register' must be updated with names and copies of their qualifications and training.
l. Both the local rules and the treatment protocol must be available for reference, in close proximity to each machine.

9. APPLICATION OF LOCAL RULES

a. The laser/IPL must only be used in accordance with the local rules.
b. Authorised Persons must sign the statements confirming that they have read, accept and understand, and agreed to work to the local rules. These statements must be available at the premises for inspection by an Authorised Officer at all reasonable times.

10. LASER/IPL CONTROLLED AREA

a. The licence holder shall ensure that the treatment environment in which class 3B and class 4 lasers and IPLs are used is safe.
b. The area around working lasers/IPL shall be controlled to protect other persons while treatment is in progress. The controlled area shall be clearly defined and not used for any other purposes, or as access to other areas when laser/IPL treatment is being carried out.
c. While the equipment is being operated, the authorised user is responsible for the safety of all persons in the Controlled Area. No other laser or IPL should be in the 'Ready' state in the same Controlled Area at the same time.
d. A suitable safety warning sign ('Eye Protection must be worn' and 'Laser Controlled Area') or light entry system complying with current British Standards shall be displayed on the outside of the door(s) to the controlled area.
e. All lasers/IPL shall comply with current standards BS EN 60601-2-22:2013 for medical lasers and BS 60601-2-57: 2011 for IPLs and shall identify their wavelength or range of wavelengths and the maximum pulse fluence/energy/power of the radiation emitted.
f. The door to the controlled area shall be fitted with a suitable locking device which can be operated from the outside in an emergency.
g. Any windows in the controlled area shall be fitted with opaque blinds approved by the LPA.
h. The controlled areas shall be kept clear of clutter, mirrors shall be avoided, and jewellery shall not be worn.
i. Surfaces within the controlled area shall be of a matt or eggshell finish.
j. Effective protective eyewear shall be worn by everyone within the controlled area whenever there is a risk of exposure to laser/IPL/HILED. All protective eyewear shall be marked with the wavelength range and protection offered as detailed in the local rules document by the LPA. They shall be in a clean serviceable condition.
k. When the laser/IPL is in operation, the number of persons in the room shall be kept to a minimum.
l. For all lasers with a key switch, the laser protection supervisor shall ensure that the key to any laser/IPL equipment is kept in a secure and separate area when not in use and that only authorised users have access to the key. Equivalent arrangements shall exist for equipment protected by passwords instead of a key switch.
m. The operating key must not be left unattended with the laser/IPL equipment.
n. Lasers/IPL shall be serviced annually. The servicing and ongoing maintenance records must be kept within the 'Local Rules' document.
o. A notice must be fixed to the laser/IPL unit indicating that its use is subject to the Local Rules.

11. TRAINING OF AUTHORISED USERS

a. The licence holder shall ensure that clients will receive treatment from appropriately trained and competent laser/IPL operators.

b. Only suitably qualified practitioners listed on the premises licence may operate and provide laser or IPL treatments.
c. All authorised users of laser/IPL shall be trained to at least the Core of Knowledge Certificate level. The records of training shall be kept at the premises with the local rules.
d. All operators must attend operator training which is system specific and treatment specific. Such training on the specific equipment in use at the premises shall be recorded and shall be refreshed where necessary.
e. Core of Knowledge training should be refreshed every 5 years.
f. A level 4 or Level 5 regulated qualification in the list of accepted qualifications by the London Borough of Bexley must be held by all practitioners operating the laser.
g. All records of training shall be available for inspection by an Authorised Officer at all reasonable times.
h. Training shall only be provided by appropriate people / training providers.

12. LASER PROTECTION SUPERVISOR

a. A suitably qualified member of staff on the premises shall be identified, in writing, as the laser protection supervisor they will have day to day to responsibility of ensuring that the local rules are followed.
b. The laser protection supervisor must also repeat the Core of Knowledge training periodically and at least every 5 years.

13. LASER & IPL LOCAL RULES

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

Device Description:
Description of all devices including output, serial numbers, date of manufacture etc.

Treatment Protocol:
Reference to a separate document produced by the Expert Medical Practitioner.

Written Procedures:
Supported by reference to user manual/training manual etc.

Adverse Incident Procedure:
Details of actions that shall be taken in cases of emergency, such as eye exposure.
Name, address and telephone number of local accident and emergency department. A specialist eye A&E is preferred.

Any incidents must also be reported to the Health & Safety team at the London Borough of Bexley.

Emergency Shutdown Procedure:
Instructions as set down in the manufacturer's manual or treatment protocol.

Register of Authorised Users:
Details of trained personnel with signed declarations of individuals that they act in this way and also have read and will endeavor to follow the local rules.

Laser Protection Adviser & Laser Protection Supervisor:
Name and contact details of the LPA, LPS. Duties of the LPS.

MST 10 – Acupuncture

1. AGE RESTRICTIONS

No child under the age of 16 shall be permitted to have acupuncture without a parent or a guardian being present.

In addition, the parent/guardian must sign a consent form for the child to have the treatment.

2. INFECTION CONTROL

a. All practitioners must wear clean, suitable clothing during acupuncture treatments. If any clothing becomes soiled, it must be changed prior to attending to the next client.
b. Practitioners must wear single use, disposable, non-sterile gloves, such as vinyl or nitrile gloves, whilst carrying out the treatment.
c. Latex gloves should be avoided, however, where Latex gloves are used, these should be non-powdered and low protein and the HSE advice in Part II section 9.6 shall be followed.
d. Clients and staff must be asked about allergies to ensure a safe glove is chosen.
e. The integrity of gloves worn must be checked throughout the treatment.
f. New gloves must be used for each client and/or if there is a break in the treatment and non-sterile equipment is touched.

MST 11 - Electric Treatments

1. AGE RESTRICTIONS

No child under the age of 16 shall be permitted to have electric treatments without a parent or a guardian being present. In addition, the parent/guardian must sign a consent form for the child to have the treatment.

2. OPERATION

Any equipment must be operated and maintained in accordance with manufacturers' instructions.

Appendix A Checklist - Documents required to be available at the Licensed Premises at all times

This Appendix acts as checklist of the records which must be kept on site and available for inspection by an authorised Council officer at all reasonable times. These records may be paper or electronic (except where display to public is required).

1. The Licence

a) Display the current licence

b) Licence Standard Conditions currently in force for the premises

2. General Responsibilities

a) Display a copy of the Employer's Liability certificate (where applicable)
b) Public liability and professional indemnity certificates
c) Valid documentation confirming the safety of the fixed wiring throughout the premises
d) Valid documentation confirming the safety of portable electrical appliances (PAT test)
e) Gas safety certificate
f) Copies of material safety data sheets for all products used
g) Control of Substances Hazardous to Health Regulations (COSHH) risk assessment
h) Contract with waste management company and valid waste transfer documents
i) Qualification certificates and records of training/Continuing Professional Development (CPD)
j) Display Challenge 25 poster
k) Evidence of Challenge 25 and records of age challenges
l) Written client records
m) Client consultation records
n) Records of visual assessments
o) Sharps injury procedure (where there is a risk)
p) Written procedure for blood/bodily fluid spillage (where there is a risk)
q) Written aftercare advice
r) Risk assessments for each special treatment
s) Fire safety risk assessment
t) Display Health and Safety Law Poster
u) Accident book

3. Maintenance and Inspection of other Systems and Equipment

Valid maintenance and inspection records for all other systems and equipment used in the premises. This will include but not be limited to the records listed here:

a) Fire safety equipment
b) Heating and ventilation systems
c) Local exhaust ventilation equipment
d) Equipment emergency call or stop buttons (where applicable)
e) Equipment used to deliver special treatment
f) Validation documentation for sterilisation process (where applicable)
g) Maintenance and verification records for steriliser (where applicable)
h) Pressure vessel inspection records by a competent person (where applicable)

4. Ultra Violet Tanning Equipment

a) Records of tanning equipment maintenance and testing by competent engineer
b) Records of UV tube replacement and evidence of compliance with 0.3w/m^2
c) Records of alarm system maintenance and testing
d) Display HSE poster 'UV Tanning Equipment'
e) Product information for tanning accelerator or other products sold

5. Heated Spa Baths

a) Records of spa pool maintenance by competent engineers
b) Records of water treatments to control Legionella bacteria
c) Microbiological water testing
d) Procedure for unsatisfactory results/health concerns
e) Records of spa pool operation and safe operating procedures
f) Records of alarm system maintenance and testing
g) Display guidelines for safe use

6. Sauna/ Steam Room/ Infra-Red Sauna

a) Records of alarm system maintenance and testing
b) Display guidelines for safe use
c) Records of sauna/ steam room/ infra-red sauna unit maintenance by competent engineer

7. Non-surgical cosmetic lasers/Intense Pulsed Light

a) Written treatments register
b) Records of laser/IPL equipment maintenance and examination by competent engineer
c) Copies of instructions from manufacturers and suppliers
d) Treatment Protocol document
e) Local Rules Document
f) Risk assessment
g) Laser Protection Advisor certification

Appendix B - Cleaning Schedule

Item	Frequency	Method
Treatment surfaces (work surface, seat, couch)	After use Prior to use as necessary where there has been a longer gap in treatments.	Treatment area surfaces cleaned and dried between each client using hot water with detergent and then disinfected using a suitable anti-bacterial disinfectant. Use disposable cloths/paper towels If contaminated with blood use a blood spillage kit/clean with suitable disinfectant against blood borne viruses
Other surfaces, not high risk	At least daily	Use general purpose detergent and hot water Dry thoroughly Use disposable cloths/paper towels.
Hand wash basins and sinks	Daily	Standard detergent
Floors	Daily	Suction clean to remove dust. The clean/mop with hot water and detergent If contaminated with blood use a blood spillage kit/clean with disinfectant against blood borne viruses
Liquid soap dispensers. **These should be of cartridge type and should not be 'topped up'**	Weekly	Wash with hot water and detergent
Bins	As required	Empty bins daily If contaminated, clean with soapy water and dry thoroughly and if necessary use a blood spillage kit/ clean with disinfectant against blood borne viruses if contaminated with blood

Walls and ceilings	As required	Routine cleaning not required Clean periodically with hot water and general-purpose detergent Clean with disinfectant against blood borne viruses if contaminated with blood