

Massage and Special Treatment Standard Conditions (2021)

- Standard conditions for premises licensed to provide massage and special treatment under Part 11, Section 10(1) of the London Local Authorities Act 1991 (as amended).

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LONDON BOROUGH OF EALING

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Introduction

The licence conditions cover day-to-day operational matters at premises offering special treatments. They are attached as conditions to all special treatment licences granted by the Council and their continued compliance is essential to safeguard the health and safety of occupants of these premises. These conditions do not in any way replace or reduce the underlying statutory duty of employers to comply with the requirements of any other regulations relating to the construction and use of these premises.

Additional conditions may also be applied to a licence relating to a specific establishment, or to a specific treatment, or to the approval of a person giving special treatment(s).

A licence shall be required if any of the treatments offered at the premises are listed in the latest version of the London Special Treatment Group's A-Z of Treatments & Therapies when determining whether a particular treatment or therapy is classified as a Special Treatment or not. This list is not exhaustive and from the time of publication there may be additional treatments which are considered by this authority to become a licensable treatment.

The Council will refer to the OFQUAL Register of Regulated Qualifications (<https://register.ofqual.gov.uk/>) when determining whether a particular qualification is regulated, and the awarding body is recognised.

The Council will refer to the latest version of the of the London Special Treatment Group's List of Bodies of Health Practitioners Granted Exemption when considering whether a body of health practitioners or the treatment proposed meet the criteria set out in Part 11 of the Act to be exempt for the requirement to be licensed.

The Council will refer to published guidance and standards when considering the standards of safety management systems, infection prevention and control, training

and qualifications expectations, equipment safety, supervision and premises management expected to be demonstrated at a special treatment premises.

Definitions

In this document, unless the context otherwise requires:-

Act means Part II of the London Local Authorities Act 1991 (as amended by London Local Authorities Act 2000 Section 27 and 28).

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

Approved, Accepted or Permitted means approved, accepted or permitted by the council in writing, this may be given on such terms and conditions or subject to such restrictions as may be so specified.

Authorised Officer means an Officer appointed and approved in writing by the Council to apply the London Local Authorities Act 1991 (as amended) and may also be appointed under the Health & Safety at Work etc. Act 1974.

Clinical Waste means

(a) Any waste which consists wholly or partly of human or animal tissue, blood or other body fluids, excretions, drugs or the pharmaceutical products, swabs or dressings, or syringes, needles or other sharp instruments, being waste which, unless rendered safe, may prove hazardous to any person coming into contact with it; and

(b) Any other waste arising from medical, nursing, dental, veterinary, pharmaceutical or similar practice, treatment, care, teaching or research, or the collection of blood for transfusion, being waste which may cause infection to any person coming into contact with it.

Council means the London Borough of Ealing.

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

Fire Authority means the London Fire Commissioner on behalf of London Fire Brigade.

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

Licence Holder means a person who holds a Licence or company or partnership name within the Licence responsible for compliance with the standard conditions at all times.

'MHRA' means the Medicines and Healthcare Products Regulatory Agency.

Premises means any premises within the Council's area used, intended to be used or represented as being used as an establishment for special treatments and includes all installations, fittings, etc.

Special Treatment means massage, manicure, acupuncture, tattooing, cosmetic skin piercing, body piercing, chiropody, light, electric or other special treatment of a like kind or vapour, sauna or other baths as defined in the Act.

Where in these conditions there is a requirement to notify the Council in writing such notification should be addressed to the: Licensing Team, Ealing Council, Perceval House, 14-16 Uxbridge Road, Ealing, W5 2HL.

Dispensation or Modification of Standard Conditions

These standard conditions may be dispensed with or modified by the Council in any special case.

The Council may in granting a licence or giving any written approval or consent under these standard conditions, impose such terms, conditions, or restrictions as it shall specify in writing.

If the licence holder wishes any licence terms, conditions, or restrictions to be varied, an application must be made to the Council in writing. The Council may grant or refuse a variation application. If the Council so requires, the application must be advertised.

1. Conditions applicable to all premises

1.1 The Licence

- a) The current licence or a clear copy shall at all times be prominently displayed at the premises in a position where it can be easily read by customers/members of the public.
- b) A copy of these standard conditions shall be kept at the premises licensed for Special Treatments at all times.
- c) The licence is personal to its holder. The licence cannot be transferred to any other person unless the procedure prescribed in the Act has been followed, and the Council has granted the application.
- d) The licence is only valid in respect of the premises named on the licence.
- e) No Special Treatments, other than those specified in the licence or otherwise approved by the Council, shall be carried out at the licensed premises.
- f) Licences are granted for a maximum period of twelve months. This being the period from 1st April – 31st March of the following year.
- g) The licence shall be renewed before expiry if it is to continue. A licence application or renewal is not deemed to be valid unless a completed application form and the correct fee have been received by the Council as the Licensing Authority.
- h) Where the business is to be operated from a residential premises, written proof of consent from the owner, landlord, and freeholder (as applicable) shall be supplied to the Council.
- i) The names of approved persons to carry out treatments will only be specified on a licence for establishments which carry out body piercing, tattooing and laser and

intense pulse light treatments. For all other establishments it is the licence holder's responsibility to ensure that all persons carrying out treatments are suitably trained/qualified.

1.2 Responsibility of the Licence Holder

a) The Licence holder shall notify the Council in writing of any change in the Licence holder's private address, principal place of business, company name, registered office or registered number with Companies House, within 28 days.

b) The Licence holder shall take all reasonable precautions for the safety of all persons using the premises. The Licence holder shall ensure compliance at all times with the relevant provisions of the Health and Safety at Work etc Act 1974, and other associated legislation.

c) The Licence holder shall ensure that suitable and sufficient health and safety risk assessments of the special treatments are carried out by a competent person in accordance with Management of Health & Safety at Working Regulations 1992. Where there is 5 or more persons employed then the assessment must be written.

d) The Licence holder or a responsible person nominated by the Licence holder shall be in charge of and present at the premises during the whole time it is open to the public. A written record of this nomination shall be kept at the premises for inspection by any authorised officer.

e) The Licence holder shall take out public liability insurance for the treatments they administer to the sum of at least £2 million, which must include and name all the treatments that are provided at the premises. A clear copy of the insurance certificate and the schedule of insurance cover shall be retained at the premises for inspection by authorised officers. The Licence holder shall take out employer's liability insurance where applicable.

g) The Licence holder shall ensure that all persons carrying out 'special treatments' are suitably trained/qualified (whether or not directly employed, self-employed or other otherwise engaged)

h) Licensed treatments shall only be provided by a special treatment practitioner/ or by a person undertaking training who is under the direct supervision of a special treatment practitioner. (A special treatment practitioner is a person who provides a special treatment to a client, often known as a therapist).

i) The persons approved to give special treatments shall have been assessed by the licence holder to have sufficient training, knowledge and experience to carry out their treatments safely and competently.

j) Newly qualified therapists must be supervised until the licence holder is satisfied that they are competent to provide special treatments to members of the public. Trainees can only carry out licensed treatments under the supervision of a practitioner who has attained the relevant qualification and/or experience for that licensed treatment.

k) Records shall be kept on the premises of every special treatment practitioner or trainee practitioner who provides licensed treatments on the premises (whether or not directly employed, self-employed or otherwise engaged) and shall include the following information:

(i) Full name.

(ii) Home address.

(iii) Date of birth.

(iv) A photograph of the practitioner.

(v) Full list of treatments offered by that practitioner at the premises.

(vi) Details of the qualification and/or training attained/completed and the awarding body, including copies of such qualifications.

(vii) For a trainee the records must also indicate the name(s) of the training supervisor and a list of treatments that person is supervising.

(l) The records described above shall be kept on the premises whilst the special treatment practitioner or trainee practitioner is employed and/or carrying out special treatments at the premises (whether or not directly employed, self-employed or other otherwise engaged) and for a period of 2 years from the date when the special treatment practitioner or trainee practitioner ceases employment and/or providing treatments at the premises.

1.3 Persons in charge of Licensed Premises

a) The Licence holder, or a responsible person nominated by the Licence holder for the purpose, shall be in charge of and present at the premises for Special Treatments during the whole time that it is open to the public. That nominated responsible person shall speak and write English to an acceptable standard. Such written nomination shall be available for inspection by any authorised Officer of the Council.

b) A notice showing the name of the person in charge of the licensed premises at the times that it is open to the public pursuant to the licence, shall be displayed in a prominent position at the licensed premises.

c) The responsible nominated person shall be familiar with all the licence conditions.

1.4 Conduct of the Premises

a) The licence holder shall ensure no posters, advertisements, etc., shall be displayed which is unsuitable for general exhibition.

b) The licence holder and any responsible nominated person shall ensure that no part of the premises is used by persons for soliciting or other immoral purposes.

1.5 People with Disabilities

It is the policy of the Council that access for disabled people should be provided at business premises licensed for special treatments. Licensees are, therefore, strongly encouraged to provide such facilities so as to enable the admission of disabled people and are reminded of the duties imposed by the Disability Discrimination Act 1995.

1.6 Authorised Officers

Authorised officers who carry written authorisations and proof of identity which they will produce on request, shall be admitted at all reasonable times to all parts of the premises.

1.7 Premises

All Special Treatments provided at the premises for Special Treatments shall be clearly listed in a price tariff. This tariff shall also clearly show the cost of any additional services provided at the premises for Special Treatments inclusive of VAT. It shall be displayed in such a position that it can easily be read by persons before entering the premises for Special Treatments.

1.8 Alterations

a) No change of use of any part of the premises for Special Treatments from that approved by the Council shall be made until the Council's consent has been obtained.

b) Alterations or additions, whether permanent or temporary, to the means of lighting, sanitation, ventilation or to the structure or layout of the premises for special

treatments shall not be made except with the prior consent of the Council. This condition shall not require notice to be given to the Council of any work to the premises which is necessary for their efficient maintenance and which is carried out in accordance with these conditions.

c) Notice in writing shall be given to the Council of any alteration or addition proposed to be made and such notice shall be accompanied by full details and, if necessary, by drawings (in duplicate). The work shall not be started until the consent of the Council has been obtained.

d) Alterations to the layout of the premises may require the submission of an application to vary the Special Treatments licence. (Any alteration to the premises may require planning permission).

1.9 Sanitary accommodation

There must be suitable and sufficient provisions of sanitary accommodation for staff and clients with adequate provision of wash hand basins with a hot and cold water supply. (The Workplace (Health, Safety and Welfare) Regulations 1992).

1.10 Treatment Room(s)

Each Special Treatment room shall:

a) be maintained in a clean and structurally sound condition, including walls, floors and floor coverings, doors, windows.

b) be suitably and sufficiently lighted and ventilated. (The Workplace (Health, Safety and Welfare) Regulations 1992).

c) be provided with a suitable wash-hand basin or basins with a suitable supply of hot and cold water, together with soap, and either a supply of disposable towels or a clean towel at all times;

d) have suitable and sufficient means for heating to a reasonable room temperature appropriate for the special treatments provided'

e) be provided with suitable screening to maintain privacy where more than one person is being treated.

1.11 Personal Hygiene

Any person carrying out any special treatments must ensure that:

any open boil, sore, cut or other open wound is effectively covered by an impermeable dressing;

hands are kept clean and are washed immediately prior to carrying out any treatment(s);

they refrain from smoking or consuming food and drink during the course of the treatment(s).

1.12 Lighting

All lighting (including escape lighting) shall be maintained in full working order.

1.13 Ventilation

a) Effective and efficient natural or mechanical means of ventilation shall be provided throughout the special treatment premises.

b) Any mechanical ventilation system shall be maintained in an efficient and effective working order and shall comply with the relevant British Standard. The system shall be capable of full operation at all times the public are on the premises for special treatments.

NOTE: Care should be taken to ensure that neither noise nor vibration arising from the running of the equipment will cause annoyance or discomfort to residents living nearby.

1.14 Electricity

a) The licence holder shall ensure that all portable electrical appliances used within the licensed premises are maintained in a safe working condition at all times in accordance with the Electricity at Work Regulations 1989. Records of this maintenance must be available at the premises at all times.

b) The licence holder shall ensure that the entire fixed electrical installation (including the escape lighting) shall be inspected by a competent electrical engineer and a copy of the current inspection certificate is available at the premises at all times. A competent electrical engineer is a corporate member of the Institution of Electrical Engineers (IEE) or by a contractor currently enrolled with the National Inspection Council for Electrical Installation Contracting (NICEIC), or with the approval of the Council, another competent person or contractor currently registered with the National Association for Professional Inspectors and Testers' (NAPIT).

1.15 Refuse

a) Any waste produced in connection with the special treatments premises, including clinical waste, must be collected in a sufficient number of suitable covered, leak proof containers and handled and disposed of to ensure full compliance with all relevant legislation.

b) A contract should be arranged with an appropriate waste disposal company or the Council's Cleansing Department for the safe and proper disposal of clinical waste e.g. used/damaged needles in a sharps container, swabs etc which would have been in contact with the skin. Any 'clinical' waste bags and sharps boxes shall be suitably marked and whilst awaiting collection shall be stored in a secure area. Evidence of

trade waste contract(s), waste carrier licences and/or waste transfer notes shall be available at the premises for inspection at all reasonable times.

1.16 Record Keeping

A client consultation shall be carried out with all potential clients for all special treatments to explain the treatment, identify any contraindications e.g. heart conditions, diabetes, epilepsy, etc., explain possible adverse effects and agree the proposed treatment with the client prior to any treatment, and the client shall sign a record card to say that they have been made aware of the risks involved.

Written client records (with the exception of saunas, spa pools and steam rooms) shall be kept at the premises for all persons receiving Special Treatments. Client records shall including client name, address, date of birth, date and type of treatment given, medical history (where relevant), details of any accident or adverse effects from the treatment given and the therapist's name who gave the treatment. These records shall be kept on the premises for a minimum of 3 years and be readily available for inspection upon the request of an authorised officer.

Written client record cards shall be in English, unless previously agreed in writing by the Council.

1.17 Maintenance

a) All systems and equipment provided in the premises, such as but not limited to gas installation and equipment, fire safety equipment, sterilisers and autoclave equipment, sunbeds, lasers and Intense Pulse Light devices, saunas, steam rooms, spa pools, and any other equipment used to provide Special Treatments shall be serviced and maintained regularly by a competent person(s) in accordance with the systems and equipment's manufacturer and supplier recommendations.

Written records of the service and maintenance inspections on all systems and equipment shall be available at the premises at all times for inspection upon the request of an authorised officer or submitted to the Council on request.

1.18 Training

a) All persons carrying out Special Treatments shall hold a nationally regulated qualification or complete training of an equivalent standard to the satisfaction of the Council which meets National Occupational Standards in the treatments they carry out. Where there are no regulated qualifications for a particular Special Treatment or where a therapist is relying on experience and training the Council will have regard to evidence of relevant training, apprenticeship and/or references of past work.

b) Relevant training qualification certificates or a clear copy for all persons carrying out special treatments shall be available at the premises for inspection at all reasonable times, and for a period of two years from the date that the therapist ceases providing Special Treatments at the premises.

d) Any person carrying out Special Treatments shall be trained in the use of all equipment and products associated with the delivery of those Special Treatments to the satisfaction of the Council.

1.19 Anaesthetic

a) No local anaesthetic administered by injection shall be provided/given to customers/clients by a person providing Special Treatments at the premises. Medically qualified and registered persons are the only persons able to administer local anaesthetics.

b) No prescription only medicines may be administered to a client by a person providing Special Treatments at the premises. Medically qualified and registered persons are the only persons able to administer prescription only medicines.

1.20 Control of Substances Hazardous to Health Regulations 2002 (As Amended).

- a) Substances including but not limited to chemicals in beauty and cleaning products, blood and other bodily fluids and nail dust which fall under the above quoted Regulations shall be assessed (risk assessment) in accordance with the requirements of those Regulations and all the necessary precautions taken to prevent, as far as reasonably practicable, exposure; and to ensure safe use and storage.

- b) Safety data sheets for all products used in connection with the special treatments provided at the premises shall be available at the premises at all times for inspection by authorised officers.

- c) All substances and products held on the premises and used in Special Treatments must be held/contained in suitable containers that are properly labelled.

1.21 Aftercare

Each client shall be provided with verbal and written aftercare advice for each treatment they receive and confirmation of this shall be recorded on their client record card. This must include information on actions to take if any adverse conditions to the treatment provided at the premises occurs.

1.22 First Aid

- a) A suitable and sufficiently stocked first aid box shall be available in the premises at all times.

- b) At least one person who is qualified in basic first aid techniques to a suitable standard shall be present in the special treatment premises at all times.

1.23 Fire Safety

The licence holder shall comply with the requirements of all relevant legislation, the requirements of the Council and the London Fire Brigade. The requirements of the London Fire Brigade include carrying out a fire risk assessment, provision of proper means of escape and provision of suitable and sufficient fire-fighting equipment. The licence holder shall ensure that the means of escape from the premises are maintained and kept free from obstruction at all times.

2. Additional Conditions for Manicure/Pedicure/Nail Enhancements/Extensions Premises

- 2.1 All nail treatment therapists/practitioners shall be qualified to a standard which is approved by the Council.
- 2.2 Signed parental consent shall be obtained for all nail treatments provided to all clients under 16 years old.
- 2.3 The condition of the client's nails should be examined by the therapists/practitioners prior to any treatment(s) and if there is any presence or suspicion of any infection etc., the client should be advised to seek medical treatment.
- 2.4 Any cotton wool etc., which has come into contact with nail liquids shall be disposed of in a suitably covered receptacle(s)/bin(s).
- 2.5 Nail files, wooden spatulas, cotton wool and any other equipment not to be thoroughly cleaned and disinfected are single use only and shall be disposed of as clinical waste after use.
- 2.6 Dispensed nail liquids and other products shall be kept in covered labelled containers at all times when not in use.
- 2.7 All equipment shall be thoroughly cleaned and disinfected between use on each client.

- 2.8 The use of electric drills/files on client's natural nails are prohibited.
- 2.9 Electric drills/files shall only be used on the surface of the artificial nail and must not be used to blend the artificial nail to the natural nail.
- 2.10 Electric files/drills shall only be used by therapists/practitioners who have had specific training in their use.
- 2.11 Local exhaust ventilation shall provide at all nail treatment station(s)/nail bar(s)/nail treatment table(s) where nail extensions are carried out. Suitable air filtering and extraction must be provided to remove dust and chemicals from the air, preferably fitted at work top level. The exhaust ventilation, air filtering and extraction equipment shall be operated and maintained in good working order in accordance with the manufacturer's instructions.

3. Additional conditions for Tattooing/Temptooing

- 3.1 All persons carrying out Tattooing/Temptooing treatments will be required to provide evidence such as a Certificate of Competence that they have undertaken a course in Infection Control.
- 3.2 No tattoo shall be carried out on a client under the age of 18 years in accordance with the Tattooing of Minors Act 1969.
- 3.3 Records of the Hepatitis B status of all therapists/practitioners shall be kept at the premises. It is recommended that each therapist/practitioner is vaccinated against Hepatitis B.
- 3.4 All tattooists/practitioners shall hold a valid first aid certificate.
- 3.5 A consultation with every client shall take place prior to the treatment, this shall include medical history, and a patch test should be carried out as deemed necessary as a result of the consultation.

3.6 Every client shall read and sign a consent form, which contains details of medical history, name, address, age etc. An example is attached in Appendix D. These forms shall be kept for a period of at least three years and be available for inspection at all times by an authorised officer.

3.7 All walls, floors, surfaces, seating etc., in treatment rooms shall be of non-porous material.

3.8 Under the Controlled Waste Regulations 1992, you have a duty of care to ensure that all clinical waste i.e. dressings, swabs etc (infected or not) and used needles are collected and disposed of by a licensed contractor in an approved incinerator.

3.9 The bags and sharps container shall be yellow and whilst awaiting collection be stored in a secure area.

3.10 A copy of the contractor's licence and transfer notes shall be available for inspection at all times.

3.11 The licence holder shall document, maintain and up-date a procedures manual to ensure that good practice is used in the premises. The contents of the manual should include, but is not limited to:

- hand hygiene;
- the use of personal protective equipment;
- the management of exposure to body fluids;
- the cleaning and disinfection of tattoo premises (including all equipment and surfaces);
- waste management;
- aftercare procedures;

3.12 Where the business premises carries out sterilisation, documented procedures shall be available for:

- the validation of the sterilisation process;
- the method of inspection of packing and seals, copies of steriliser maintenance details and verification records;

- the storage facilities and practices for sterile packs.

3.13 A body fluid spillage kit which is in date shall be available in the treatment room.

All therapists should be instructed in the correct procedure for dealing with body fluid spillage.

3.14 Any re-usable items of equipment shall be put through an ultrasonic cleaner, they should then be rinsed and dried prior to sterilisation.

3.15 All equipment which is to be used shall be kept in sterile packets or closed containers before use.

3.16 Swabs, pigment caps, stencils, razors, wooden spatulas, pens and other equipment not to be sterilised are single use only and shall be properly disposed of as special waste after use.

3.17 The licence holder and all therapists authorised by the Council to carry out tattooing shall adhere to the requirements and recommendations of national standards and guidance relevant to tattooing.

3.18 A written aftercare leaflet shall be given to each client, which also gives contact details of the premises where the treatment took place.

4. Additional conditions for semi-permanent make up / micropigmentation/ microblading.

4.1 All persons carrying out semi-permanent make up/micropigmentation and microblading treatments will be required to provide evidence such as a Certificate of Competence that they have undertaken a course in Infection Control.

4.2 A consultation with the client shall take place prior to the treatment, this shall include medical history, and a patch test should be carried out for adverse reactions to pigments intended to be used as deemed necessary as a result of the consultation. Every client shall read and sign a consent form prior to treatment (Example of a consent form is shown at Appendix D).

4.3 No semi-permanent make up/micropigmentation shall be carried out on a client under the age of 18 years in accordance with the Tattooing of Minors Act 1969.

4.4 Records of Hepatitis B status of all therapists/practitioners shall be kept at the premises for inspection by an authorised officer. It is recommended that each therapist is vaccinated against Hepatitis B.

4.5 All walls, floors, surfaces, seating etc., within the treatment room(s) shall be of a non-porous material.

4.6 Under the Controlled Waste Regulations 1992, you have a duty of care to ensure that all clinical waste i.e. dressings, swabs etc (infected or not) and used needles are collected and disposed of by a licensed contractor in an approved incinerator.

4.7 The bags and sharps containers shall be yellow and whilst awaiting collection be stored in a secure area.

4.8 A copy of the contractor's licence and transfer notes shall be available for inspection at all times by an authorised officer.

4.9 The licence holder shall document, maintain and up-date a procedures manual to ensure that good practice is used in the premises. The contents of the manual should include, but is not limited to:

- hand hygiene;
- the use of personal protective equipment;
- the management of exposure to body fluids;
- the cleaning and disinfection of the permanent make up/micropigmentation/microblading premises (including all equipment and surfaces);
- waste management;
- aftercare procedures;

4.10 Where the business premises carries out sterilisation, documented procedures shall be available for:

- the validation of the sterilisation process;
- the method of inspection of packing and seals, copies of steriliser maintenance details and verification records;
- the storage facilities and practices for sterile packs.

4.11 A body fluid spillage kit which is in date shall be available in the treatment room. All therapists should be instructed in the correct procedure for dealing with body fluid spillage.

4.12 Any re-usable items of equipment shall be put through an ultrasonic cleaner, they should then be rinsed and dried prior to sterilisation.

4.13 All equipment which is to be used shall be kept in sterile packets or closed containers before use.

4.14 Swabs, pigment caps, stencils, razors, wooden spatulas, pens and other equipment not to be sterilised are single use only and shall be properly disposed of as special waste after use.

4.15 The licence holder and all therapists authorised by the Council to carry out permanent make up/micropigmentation/microblading shall adhere to the requirements and recommendations of national standards and guidance relevant to permanent make up/micropigmentation and microblading.

4.16 A written aftercare leaflet shall be given to each client, which also gives contact details of the premises where the treatment took place.

5. Additional conditions for Cosmetic Piercing, Ear Piercing, Nose Piercing and Navel Piercing

5.1 All persons carrying out cosmetic piercing will be required to provide evidence such as a Certificate of Competence that they have undertaken a course in Infection Control.

- 5.2 Details of all client's names, addresses and ages shall be recorded.
- 5.3 Anyone under 16 years of age are only allowed ear and nose piercings and shall be accompanied by a guardian/parent who shall read and sign a consent form (See example of a consent form at Appendix D).
- 5.4 Persons aged 16-18 shall show identification which includes a photograph and date of birth, e.g. passport or driving licence and shall read and sign a consent form (See example of a consent form at Appendix D).
- 5.5 Persons over 18 years of age shall read and sign a consent form confirming that they are over 18.
- 5.6 Records of the Hepatitis B status of all piercers shall be kept at the premises. It is recommended that each piercer is vaccinated against Hepatitis B.
- 5.7 All walls, floors, surfaces, seating etc within the treatment room(s) shall be of non-porous material.
- 5.8 Under the Controlled Waste Regulations 1992, you have a duty of care to ensure that all clinical waste i.e. dressings, swabs etc (infected or not) and used needles are collected and disposed of by a licensed contractor in an approved incinerator.
- 5.9 The bags and sharps containers shall be yellow and whilst awaiting collection be stored in a secure area.
- 5.10 A copy of the contractor's licence and transfer notes shall be available for inspection at all times by an authorised officer.
- 5.11 A solution of 70% alcohol or bleach may be used to clean surfaces etc.
- 5.12 Operatives shall wear disposable gloves whilst in contact with the client's skin.
- 5.13 Only one of the following approved guns may be used to perform ear piercing, Inverness, Coren, Caress, Caflon, Studex, Tripps or Poly Dots Cassette.

- 5.14 If a piercing gun is to be used for nose piercing any part which comes into contact with the inside of the nose shall be sterilised between clients.
- 5.15 Studs fitted with butterflies may not be used for nose piercings.
- 5.16 The licence holder shall document, maintain and up-date a procedures manual to ensure that good practice is used in the premises. The contents of the manual should include, but is not limited to:
- hand hygiene;
 - the use of personal protective equipment;
 - the management of exposure to body fluids;
 - the cleaning and disinfection of the cosmetic piercing premises (including all equipment and surfaces);
 - waste management;
 - aftercare procedures;
- 5.17 Where the business premises carries out sterilisation, documented procedures shall be available for:
- the validation of the sterilisation process;
 - the method of inspection of packing and seals, copies of steriliser maintenance details and verification records;
 - the storage facilities and practices for sterile packs.
- 5.18 A body fluid spillage kit which is in date shall be available in the treatment room. All therapists should be instructed in the correct procedure for dealing with body fluid spillage.
- 5.19 Any re-usable items of equipment shall be put through an ultrasonic cleaner, they should then be rinsed and dried prior to sterilisation.
- 5.20 All equipment which is to be used shall be kept in sterile packets or closed containers before use.

- 5.21 Swabs, razors, wooden spatulas, pens and other equipment not to be sterilised are single use only and shall be properly disposed of as special waste after use.
- 5.22 The licence holder and all therapists authorised by the Council to carry out cosmetic piercing shall adhere to the requirements and recommendations of national standards and guidance relevant to cosmetic piercing.
- 5.23 Administration of local anaesthetic injections other than by medically qualified practitioners is an offence.
- 5.24 Under the Medicines Act 1968, local anaesthetic creams, sprays, gels etc are prescription only medicines and pharmacy medicines which may only be sold by pharmacists for medical application on the patient only. Their use prior to a body piercing is therefore an offence.
- 5.25 Any jewellery which contains more than 0.05% nickel shall not be used, as this may cause an allergic reaction.
- 5.26 A written aftercare leaflet shall be given to each client, which also gives contact details for the premises where the treatment took place.

6. Additional conditions for other body piercings

- 6.1 All persons carrying out body piercing treatments will be required to provide evidence such as a Certificate of Competence that they have undertaken a course in Infection Control.
- 6.2 Clients must be over 18 years of age.
- 6.3 Piercers should be vaccinated against Hepatitis B.
- 6.4 All walls, floors, surfaces, seating etc within the treatment room(s) shall be of non-porous material.

6.5 Every client shall read and sign a consent form, which contains details of medical history, name, address, age etc. An example of a consent form is shown in Appendix D. These forms shall be kept for a period of at least three years and be available for inspection at all times.

6.6 Under the Controlled Waste Regulations 1992, you have a duty of care to ensure that all clinical waste i.e. dressings, swabs etc (infected or not) and used needles are collected and disposed of by a licensed contractor in an approved incinerator.

6.7 The bags and sharps containers shall be yellow and whilst awaiting collection be stored in a secure area.

6.8 A copy of the waste contractor's licence and transfer notes shall be available for inspection at all times.

6.9 All body piercers shall hold a valid first aid certificate.

6.10 A solution of 70% alcohol or bleach may be used to clean surfaces etc

6.11 The licence holder shall document, maintain and up-date a procedures manual to ensure that good practice is used in the premises. The contents of the manual should include, but is not limited to:

- hand hygiene;
- the use of personal protective equipment;
- the management of exposure to body fluids;
- the cleaning and disinfection of the body piercing premises (including all equipment and surfaces);
- waste management;
- aftercare procedures;

6.12 Where the business premises carries out sterilisation, documented procedures shall be available for:

- the validation of the sterilisation process;

- the method of inspection of packing and seals, copies of steriliser maintenance details and verification records;
- the storage facilities and practices for sterile packs.

6.13 A body fluid spillage kit which is in date shall be available in the treatment room. All therapists should be instructed in the correct procedure for dealing with body fluid spillage.

6.14 Any re-usable items of equipment shall be put through an ultrasonic cleaner, they should then be rinsed and dried prior to sterilisation.

6.15 All equipment which is to be used shall be kept in sterile packets or closed containers before use.

6.16 Swabs, razors, wooden spatulas, pens and other equipment not to be sterilised are single use only and shall be properly disposed of as special waste after use.

6.17 The licence holder and all therapists authorised by the Council to carry out body piercing shall adhere to the requirements and recommendations of national standards and guidance relevant to body piercing.

6.18 All needles used for piercing shall be of the disposable type and placed in a sharps container after use.

6.19 Administration of local anaesthetic injections other than by medically qualified practitioners is an offence.

6.20 Under the Medicines Act 1968, local anaesthetic creams, sprays, gels etc are prescription only medicines and pharmacy medicines which may only be sold by pharmacists for medical application on the patient only. Their use prior to a body piercing is therefore an offence.

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

6.22 A written aftercare leaflet shall be given to each client, which also gives contact details of the special treatment premises where the treatment took place.

7. Additional conditions for Electrolysis.

7.1 All persons carrying out Electrolysis treatments will be required to provide evidence such as a Certificate of Competence that they have undertaken a course in infection control.

7.2 A consultation with the client shall take place prior to the treatment, this shall include medical history, and a patch test shall be carried out. Every client shall read and sign a consent form prior to treatment (An example of a consent form is shown at Appendix D).

7.3 Anyone under the age of 18 must be accompanied by a parent or guardian. The parent/guardian must sign a consent form at the time of the treatment.

7.4 Records of Hepatitis B status of all electrolysis/sclerotherapy practitioners shall be kept at the premises. It is recommended that each electrolysis/sclerotherapy practitioner is vaccinated against Hepatitis B.

7.5 All walls, floors, surfaces, seating, etc., in treatment rooms shall be of non-porous material.

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

7.7 Under the Controlled Waste Regulations 1992, the licence holder and practitioners have a duty of care to ensure that all clinical waste i.e. dressings, swabs etc (infected or not) and used needles are collected and disposed of by a licensed contractor in an approved incinerator.

7.8 The bags and sharps containers shall be yellow and whilst awaiting collection be stored in a secure area of the licensed premises.

7.9 A copy of the waste contractor's licence and transfer notes shall be available for inspection by an authorised inspector at all times.

7.10 The licence holder shall document, maintain and up-date a procedures manual to ensure that good practice is used in the premises. The contents of the manual should include, but is not limited to:

- hand hygiene;
- the use of personal protective equipment;
- the management of exposure to body fluids;
- the cleaning and disinfection of the electrolysis premises (including all equipment and surfaces);
- waste management;
- aftercare procedures;

7.11 Where the business premises carries out sterilisation, documented procedures shall be available for:

- the validation of the sterilisation process;
- the method of inspection of packing and seals, copies of steriliser maintenance details and verification records;
- the storage facilities and practices for sterile packs.

7.12 A body fluid spillage kit which is in date shall be available in the treatment room. All therapists should be instructed in the correct procedure for dealing with body fluid spillage.

7.13 Any re-usable items of equipment shall be put through an ultrasonic cleaner, they should then be rinsed and dried prior to sterilisation.

7.14 All equipment which is to be used shall be kept in sterile packets or closed containers before use.

7.15 Swabs, razors, wooden spatulas, pens and other equipment not to be sterilised are single use only and shall be properly disposed of as special waste after use.

7.16 The licence holder and all therapists authorised by the Council to carry out electrolysis shall adhere to the requirements and recommendations of national standards and guidance relevant to electrolysis.

7.17 A written treatment aftercare instructions leaflet shall be given to each client, which also gives contact details of the special treatment premises where the treatment took place.

8. Additional conditions for Laser and Intense Pulse Light Treatments

In compiling these 'Standard Conditions' due regard has been given to the Medicines & Healthcare Products Regulatory Agency (MHRA) Guidance relating to Laser and IPL treatments.

8.1 The Licence holder shall employ the services of an Expert Medical Practitioner (EMP) to produce the 'treatment protocol' document which shall be kept on site. (Appendix A outlines the information required in this document). The 'treatment protocol' must be followed at all times. Arrangements shall be made for the EMP to be available to give advice to the Licence Holder on an on-going basis.

8.2 Laser Protection Advisor Local Rules shall be followed:

a) The Licence holder shall employ the services of a certified Laser Protection Advisor (LPA) who will assist in the production of the 'local rules' document (A specimen laser 'local rules' document is attached as Appendix B).

Arrangements shall be made for the LPA to be available to give advice to the Licence holder on an on-going basis. The 'local rules' should be updated within 5 years or shorter period as recommended by the Laser Protection Adviser.

b) The 'local rules' shall be updated if there are any changes made to the equipment in use, changes in procedure or changes to the treatment room if these affect the safe use of the Laser/IPL.

c) Persons employed to carry out Laser/IPL treatments from the date of these Standard Conditions shall be trained to a national recognised qualification of Level 4 standard. The Core Knowledge Certificate training should comply with the recommendations contained in pages 67 and 68 of the MHRA document 'Lasers, intense light source systems and LEDs – guidance for safe use in medical, surgical, dental and aesthetic practices' (September 2015).

8.3 An authorised user will:

- a) understand the general nature of optical radiation
- b) be familiar with the intended purpose of the optical radiation equipment
- c) understand the meaning of the warning labels associated with optical radiation equipment
- d) understand the health hazards, including effects on tissue, which can arise from the use of a laser, IPL or other optical radiation equipment
- e) understand the equipment-related hazards that arise from the use of optical radiation devices
- f) be familiar with the safety precautions required when using optical radiation devices
- g) be familiar with hazard control procedures
- h) be aware of additional precautions that may be necessary when undertaking non-routine activities with the equipment
- i) be familiar with the optical radiation local rules
- j) be familiar with the content of contingency plans within the local rules and other related emergency procedures.

8.4 Any training on the specific equipment in use at the premises shall also be recorded. Such training should be refreshed every 3-5 years.

8.5 The premises will have a register of authorised users of class 3B or 4 lasers and IPL systems.

8.6 A suitably qualified member of staff on the premises shall be identified as the Laser Protection Supervisor (LPS). They will have day to day responsibility for ensuring the local rules are followed. In the case of multi-site businesses, a LPS shall be identified for each site.

8.7 A treatment register shall be completed every time the Laser/IPL is operated, including the following information:

- the name of the person treated (including a second means of identification);
- the date and time of treatment;
- the name and signature of the Laser/IPL operator;
- the nature of the Laser/IPL treatment given;
- the treatment parameters;
- any accidents or adverse effects.

8.8 The following shall be implemented in relation to the Laser/IPL Controlled Area:

- a) The area around working Lasers/IPL's shall be controlled to protect other persons while treatment is in progress. The controlled area shall be clearly defined and not used for other purposes.
- b) A suitable safety warning sign or light entry system which complies with current British Standards shall be in place on the door of the controlled area.
- c) All Lasers/IPL's shall comply with current standards (BS EN 60601-2-22 and/or BS 60601-2-57) and shall display labels identifying them, their wavelength or range of wavelengths and maximum output power of radiation emitted. The labels shall be clearly visible on the front or side of the machine.

- d) The door to the controlled area shall be fitted with a suitable lockable device which can be operated from the outside in an emergency.
- e) Any windows in the controlled area shall be fitted with opaque blinds approved by the LPA.
- f) The controlled areas shall be kept clear of clutter, mirrors shall be avoided, or fitted with an opaque blind, and jewellery shall not be worn.
- g) Surfaces within the controlled area shall be of a matt or eggshell finish.
- h) Protective eyewear shall be worn by everyone within the controlled area whenever there is a risk of exposure to Laser/IPL's. All protective eyewear shall be marked with the wavelength range and protection offered as detailed in the local rules document. The eyewear shall be in a clean serviceable condition.
- i) 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. In the case of password protected Laser/IPL equipment the licence holder must ensure that only authorised users have access to the password.

9. Additional conditions for the use of Ultra Violet Radiation – Tanning Equipment/ Bed(s)/Tanning Booth(s)

9.1 The use of any tanning equipment (Tanning Bed(s)/Tanning Booth(s)) shall be supervised by trained and competent operatives in the operation and use of that equipment.

9.2 Ultra Violet (UV) tanning equipment must be operated and maintained in accordance with manufacturer's instructions and Health & Safety Executive

guidelines INDG209 (rev 2) 'Reducing the health risks from ultra violet (UV) tanning equipment'. See link: <http://www.hse.gov.uk/pubns/indg209.pdf>.

- 9.3 Operators shall ensure that they operate in accordance with the current edition of EN60335-2-27 for the safety of electrical appliances incorporating emitters for exposing skin to ultra-violet or infrared radiation.
- 9.4 HSE guidelines INDG209 on UV tanning advice to users shall be displayed in each tanning equipment (tanning bed/tanning booth) area/cubicle.
- 9.5 No persons under the age of eighteen (18) shall be permitted to use UV tanning equipment or allowed to be present in the tanning equipment restricted zone (The Sunbeds (Regulations) Act 2010).
- 9.6 Prior to the use of any tanning equipment (tanning bed(s)/tanning booth(s)), a record card shall be completed and signed by the user to acknowledge that they have been made aware of and understand the contra-indications associated with the use of the tanning equipment, particularly with regard to drugs and medical conditions. A record of the frequency of user visits shall also be recorded.
- 9.7 The length of time that a client is allocated to use the tanning equipment (tanning bed/tanning booth) shall be controlled by the trained operative(s) and based on the users type of skin, health/medical condition, power of the sunbed, and age of the tanning equipment tubes.
- 9.8 The tanning equipment (tanning bed/tanning booth) shall be fitted with a non-verbal emergency alarm system linked to a manned reception area for summoning help when users are left unattended. The alarm should continue to sound until it is manually switched to the 'off' position in order to silence it. The user must be made aware of the alert mechanism and how to use it. Operation verification test records for the emergency alarm system shall be available at the premises for inspection by authorised officers at all reasonable times. The emergency alarm shall be fitted within easy reach of a person using the tanning equipment (tanning bed/tanning booth). These devices (emergency stop button) when operated shall

switch off the Ultra Violet lamps and audibly summon assistance (in the case of the lay down beds it must also raise the upper canopy, or panel unit).

9.9 All clients/users shall be provided with suitable protective eye equipment which meets relevant British and European Standards, free of charge, and instructed in their use.

9.10 Arrangements shall be made to ensure that the surface(s) of the tanning equipment (tanning bed/tanning booth) is cleaned and disinfected after each clients' use in accordance with manufacturer's instructions.

9.11 Regular maintenance and servicing shall be carried out on all tanning equipment, to include replacement of tanning equipment tubes. Copies of the electrical engineer's report on all maintenance and servicing visits should be retained for a period of at least two years and be available for inspection by authorised officers at all reasonable times.

10. Additional conditions for the use of Sauna(s)/Infrared Sauna(s)/Steam Room(s)

10.1 A thermometer shall be provided indicating the temperature inside the sauna/infrared sauna/steam room.

10.2 There must be a non-verbal alarm system within the treatment equipment/vicinity linked to a manned reception area for summoning help when users are left unattended. The alarm should continue to sound until it is manually switched to the 'off' position in order to silence it. The user must be made aware of the alert mechanism and how to use it. Emergency devices shall be fitted within easy reach of a person using the treatment equipment.

10.3 Emergency devices operation verification test records shall be available at the premises for inspection by an authorised officer at all reasonable times.

- 10.4 Regular maintenance shall be carried out on all treatment equipment by a competent engineer in accordance with manufacturer and supplier recommendations. Records of all maintenance visits shall be available at the premises for inspection by an authorised officer at all reasonable times.
- 10.5 A clock shall be visible to users, from inside the sauna/infrared sauna/steam room.
- 10.6 The temperature control device shall not be accessible to users of the sauna/infrared sauna/steam room.
- 10.7 The hot coals in the sauna shall be protected by a guard rail or barrier.
- 10.8 Shower facilities shall be provided close to the sauna/Infrared sauna/steam room.
- 10.9 A supply of fresh drinking water shall be available close to the sauna/infrared sauna/steam room free of charge.
- 10.10 Safety notice guidelines on the use of the sauna/infrared sauna/steam room shall be clearly displayed nearby. These safety notice guidelines shall include the following:
- All jewellery to be removed
 - Drink plenty of water before use
 - No eating or drinking in the sauna/steam room/infrared sauna
 - Avoid use if suffering from high blood pressure or heart problems
 - Do not eat immediately before use
 - Maximum time of use is 20 minutes
 - Seek Doctor's permission to use if pregnant
 - Do not use if under 16 years of age
 - Do not enter if suffering from swollen joints
 - Do not enter if suffering with a fever
 - Seek Doctor's permission to use if taking medication
 - People with silicone implants should avoid use of the infrared sauna

- Drink plenty of water after use

Additional Conditions for the use of Spa Pool(s)/Bath(s)

- 10.11 The spa must be operated and maintained to avoid the risk of Legionella with regard to the Health and Safety Guidance: HSG282 The Control of Legionella and other infectious agents in Spa Pool Systems. Microbiological test reports must be held and available for inspection by an authorised officer at the premises for a minimum of 5 years in accordance with HSG282.
- 10.12 The Operation verification test records shall be available at the premises for inspection by an authorised officer at all reasonable times.
- 10.13 A logbook must be available for recording daily poolside tests to include pH, chlorine or bromine levels, water clarity, temperature, number of bathers. The logbook should state acceptable limits for all tests and record action taken in the event of an unsatisfactory result. The logbook must be held at the premises and be available for inspection by an authorised officer at all times.
- 10.14 The spa pool must be operated and maintained in accordance with the manufacturer's/supplier's instructions.
- 10.15 There must be a non-verbal alarm system in the spa pool/bath vicinity linked to a manned reception area for summoning help when users are left unattended. The alarm should continue to sound until it is manually switched to the 'off' position in order to silence it. The user must be made aware of the alert mechanism and how to use it. Emergency devices shall be fitted within easy reach of a person using the equipment.
- 10.16 Shower facilities shall be provided close to the spa pool/bath and clients advised to shower before entering the spa pool/bath.

10.17 A supply of fresh drinking water shall be available close to the spa pool/bath free of charge.

10.18 The spa pool/bath shall be controlled by a device which automatically shuts down the jets after a period of five minutes for a period of five minutes rest.

10.19 User safety notice guidelines located near to each spa pool/bath shall be clearly displayed. These safety notice guidelines shall include the following:

- Do not use the spa pool/baths under 16 years of age
- Maximum time in the spa pool/bath is 15 minutes
- Do not use the spa pool/bath if you are pregnant
- Do not use the spa pool/bath if under the influence of drugs, alcohol or medication
- Seek Doctor's permission to use if suffering from obesity or with a medical condition
- history of heart disease, low or high blood pressure, circulatory system problems
- Seek Doctor's permission to use if using medications
- Do not use the spa pool/bath if you have any sores or open wounds
- Take care when entering and exiting the spa pool/bath. Wet surfaces may be slippery

Additional conditions for the use of Flotation Tank(s)

10.20 Shower facilities shall be provided close by flotation tanks.

10.21 A supply of fresh drinking water shall be provided near to the flotation tanks.

10.22 The water shall be filtered and purified between clients.

APPENDIX A

Laser/IPL Treatment Protocol Document

1. A treatment protocol must be produced by an expert medical practitioner (EMP) in relation to the licence holder's equipment/premises.
2. 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.
3. The treatment protocol should be signed and dated by the EMP to confirm authorisation, should be reviewed annually and include a projected date for review. The protocol should also include availability of the EMP to provide advice.
4. A separate treatment protocol should be in place for each Laser/IPL in use at the licensed premises.
5. The treatment protocol must include the following:
 - name and technical specifications of the equipment
 - contraindications
 - treatment technique – general
 - treatment technique – hair reduction
 - client consent prior to treatment
 - cleanliness and infection control
 - pre-treatment tests
 - post-treatment care
 - recognition of treatment-related problems
 - emergency procedures
 - permitted variation on machine variables
 - procedure in the event of equipment failure.

APPENDIX B

Content of Laser/IPL Local Rules Document

- 1) Potential Hazards
List all types of hazards including fire, skin and eye injuries, electrical, etc.
- 2) Device Description
Description of all devices including output, serial numbers etc.
- 3) Treatment Protocol
Reference to separate document produced by the Expert Medical Practitioner.
- 4) Written Procedures
Supported by reference to user manual/training manual etc.
- 5) Adverse Incident Procedure
 - a) Details of action that shall be taken in cases of emergency e.g. eye exposure
 - b) Name, address and telephone number of the local accident and emergency department.
 - c) Any incidents must also be reported to The London Borough of Ealing Licensing Team on 0208 825 6655, or e-mail licensing@ealing.gov.uk
- 6) Emergency Shutdown Procedure
Instructions as set down in manufacturer's manual or treatment protocol
- 7) Register of Authorised Users
Details of trained personnel with signed declarations of individuals
- 8) Laser Protection Advisor
Contact details and availability of the LPA to provide advice
- 9) Laser Protection Supervisor
 - a) One Authorised User shall be nominated as the Laser Protection Supervisor to ensure that the register is maintained and the local rules are adhered to
 - b) Name of the Laser Protection Supervisor
- 10) Record register of Laser use
A register shall be kept which will separately record the following information every time the IPL is operated
the name and date of birth of the person treated
date of treatment
the operator
the treatment given
any accident or adverse effects.
- 11) Laser/IPL Operator Training
 - a) All Laser/IPL 'authorised users shall hold the Core of Knowledge Training Certificate (which complies with the recommendations contained in pages 67 and 68 of the MHRA document 'Lasers, intense light source systems and LEDs – guidance for safe use in medical, surgical, dental and aesthetic

practices' (September 2015), together with specific training on the use of on site equipment provided by the supplier of the Laser/IPL. Persons employed to carry out laser treatments from the date of these Standard Conditions (.....) shall be trained to Level 4 standard

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

12) Controlled Area designation and access

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

13) Register of Authorised Users

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

14) Safe Operation of device

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

15) Operator responsibility

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

16) Protective eyewear

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

17) Application of local rules

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

APPENDIX C

CERTIFICATE REQUIRED TO BE AVAILABLE AT THE LICENSED PREMISES

1) Electricity

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

2) Sterilisers

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

3) Controlled Waste

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

4) Insurance

- A copy of the employer's liability (where applicable) and public liability certificates should be available.

5) Training

- All certificates of qualification relevant to the licensed treatment must be available.

APPENDIX D

CONSENT FORM

(Name & Address of premises)

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

I have/suffer from the following:

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

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

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

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

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

Print Full Name

Address

.....

AGE Date of Birth Type of ID

Signature of client Guardian if under 16

.....

Date.....Tattoo/Piercing Site.....

Licensing Team
Ealing Council
Perceval House
14-16 Uxbridge Road
Ealing
W5 2HL
licensing@ealing.gov.uk
020 8825 6655