

Infection Control Guidelines for Personal Appearance Services 2012

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Introduction

Skin that is intact, that is without cuts, abrasions or lesions, is a natural defence against infection. Infections can enter the body through cuts and sores or on sharp objects which pierce the skin.

Personal appearance services that involve skin penetration (whether accidental or intentional) can spread blood-borne diseases such as HIV, hepatitis B and hepatitis C. These diseases are spread by blood-to-blood contact, eg. by instruments that are contaminated with blood from an infected person and used on another person without adequate processing.

Personal appearance services that do not penetrate the skin may spread superficial infections such as staphylococcal bacteria, cold sores, ringworm, scabies and head lice. These infections can be easily transferred from person to person, by contact with unwashed hands or via soiled instruments.

It should be assumed that all blood and body substances are potentially infectious and special care should always be taken to avoid direct contact with these substances. Even invisible traces of infected blood can potentially spread blood-borne diseases.

Proper hand washing, use of clean and/or sterile instruments, safe waste disposal, safe procedures and clean premises all contribute to preventing the transmission of infections.

Preventing infection is good for everyone

Minimising infection risks from personal appearance services is good for the community, personal appearance service businesses, and their customers and staff.

Infection control guidelines

Under the *Public Health (Infection Control for Personal Appearance Services) Act 2003*, Infection Control Guidelines are provided for personal appearance services to help minimise the risk of infection. These guidelines provide information on how to protect operators and clients, and are based on current infection control practice.

The Act and these Guidelines do not apply to personal appearance services provided in a health-care facility (eg. cosmetic surgery). Acupuncture is not considered to be a personal appearance service. Acupuncturists will need to comply with the provisions of Chapter 4 – Infection control for health care facilities of the *Public Health Act 2005*.

What is a personal appearance service?

A personal appearance service is a hairdressing, beauty therapy or skin penetration procedure (eg. tattooing or piercing) that is provided as part of a business transaction. The terms "hairdressing", "beauty therapy" and "skin penetration" are described in the Glossary of Terms.

What is a higher risk personal appearance service?

A higher risk personal appearance service involves any of the following skin penetration procedures, in which the release of blood or other body substance is an expected result:

- body piercing, other than closed ear or nose piercing
- implanting natural or synthetic substances into a person's skin, eg. hair or beads
- scarring or cutting a person's skin using a sharp instrument to make a permanent mark, pattern or design
- tattooing (including cosmetic tattooing or semi-permanent makeup).

What is a non-higher risk personal appearance service?

A non-higher risk personal appearance service is hairdressing, beauty therapy or a skin penetration procedure that is not a higher risk personal appearance service (eg. closed ear or nose piercing).

What is my legal obligation to minimise infection risks?

The Act requires that business proprietors and operators who provide personal appearance services to the public must take all reasonable precautions and care to minimise infection risks to clients.

How can this obligation be fulfilled?

If an operator or business proprietor adopts and follows the ways of minimising infection risks set out in these Guidelines, they will be complying with their legal obligations.

Operators and business proprietors may use another way of minimising infection risks. If another means is used, the operator or proprietor may need to demonstrate to the local council or to a Court that the measures they have taken meet the statutory obligation to minimise infection risks.

Who enforces the legislation?

Local councils are responsible for administering and enforcing the Act.

1. Guideline - Standard infection control precautions

This Guideline applies to all personal appearance services.

1.1 Introduction

1.1.1 Standard precautions

'Standard Precautions' are work practices required to achieve a basic level of infection control and are recommended when providing any personal appearance service.

Standard Precautions assume that all blood and body substances are potentially infectious and aim to prevent transmission of infections including HIV, hepatitis B and hepatitis C.

Standard Precautions involve work practices such as personal hygiene, particularly hand washing before and after contact with clients, appropriate reprocessing of re-usable equipment and instruments, management of contaminated linen and waste, and the use of personal protective equipment (eq. gloves).

1.2 Hand hygiene

1.2.1 When should hands be washed?

Hand washing is generally considered to be the most important measure in preventing the spread of infection. Hand washing removes significant numbers of infectious agents when it is done properly. The risk of infection is minimised by washing your hands:

- immediately before you perform a personal appearance service
- before putting on and after removing gloves
- after contact with blood or other body substances
- after contact with used instruments, jewellery and surfaces contaminated with (or which may have been contaminated with) blood and body substances
- before contact with instruments that penetrate the skin
- after other activities which may cause contamination of the hands and forearms, eg. smoking, eating, using the toilet, touching part of your body whilst performing a procedure
- before a skin penetration procedure is undertaken, and whenever an operator leaves the procedure area and then returns to resume the procedure
- · whenever hands are visibly soiled
- in any other circumstances when infection risks are apparent.

1.2.2 How to wash your hands

Method 1 - Use running water and liquid soap

- remove hand jewellery and watches
- wet hands
- use liquid soap with running water
- wash hands vigorously including backs of hands, wrists, thumbs, between fingers, and forearms for a minimum of 20 seconds (see figure 1)
- rinse hands well with running water
- thoroughly dry hands with a single use clean dry material, eg. Clean disposable paper towels
- if hand-controlled taps are used, turn the taps off with a paper towel. Do not contaminate hands by turning off the tap with clean hands or forearms.

Use this method:

- (a) before providing the first personal appearance service for the working day
- (b) when hands are contaminated with blood or body substances

(c) whenever possible throughout the working day.

Method 2 - Use a alcohol based hand sanitiser

- remove hand jewellery and watches
- dispense recommended amount of sanitiser into palm of one hand
- spread sanitiser over all surfaces of hands including backs of hands, wrists, thumbs, between fingers, forearms, and allow to dry without wiping (see figure 1).

This method may be used, provided Method 1 is used before providing the first personal appearance service for the working day and when hands are contaminated with blood or body substances. If method 2 is used five times in a row on the sixth wash use method 1.

How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

Duration of the entire procedure: 20-30 seconds



Apply a palmful of the product in a cupped hand, covering all surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Once dry, your hands are safe.

FIGURE 1 Source: World Health Organisation (WHO), 2009.

1.2.3 Other hand washing tips

- use dispensers for liquid soap
- clean and dry dispensers before re-filling with fresh soap (do not top up dispensers)
- use clean, disposable, single-use paper towels or roller towels for drying hands
- place soap, paper towels and a waste receptacle near the hand basin.

1.3 Skin lesions

- cover visible skin lesions (eg. cuts, abrasions, and/or infections) on exposed parts of your body with an adhesive water-resistant dressing. Change the covering regularly or when the dressing becomes soiled
- hand care is also important as a means of preventing rashes and lesions, because intact skin is a natural defence against infection
- use hand cream to minimise sensitivity and irritation caused by repeated hand washing and wearing gloves
- wear gloves whenever the skin of the hand is grazed, torn, cracked or broken (wearing gloves does not eliminate the need for hand washing)
- before using hand cream under gloves, check the label to see whether it is oilbased or aqueous. As oil-based hand cream can cause latex gloves to deteriorate, the use of aqueous hand cream is recommended.

1.4 Exposure to blood and body substances

1.4.1 How to manage client bleeding

If a client bleeds during a procedure (either accidentally or more than expected during a skin penetration procedure):

- put on clean disposable gloves (if not already wearing them)
- place a clean dressing on the wound and apply pressure to stop the bleeding
- if appropriate (eg. after shaving nicks), apply a styptic substance to stop the bleeding, using a single-use applicator and take care not to contaminate the stock solution
- place soiled disposable sharp instruments into a sharps container
- place soiled re-usable instruments into a smooth surfaced impervious container to await cleaning and sterilisation
- dispose of soiled dressings into a waste bin
- clean work area surfaces (eg. benches, chairs or floors) that have been soiled with blood or other body substances, as soon as possible, using water, detergent and a disposable cloth (see Guideline 2.1.2)
- dispose of cloths used for wiping up blood
- remove gloves and dispose of them
- wash hands thoroughly.

1.4.2 How to manage operator exposure to blood or other body substances

If you as an operator are cut or pricked, or are exposed to a client's blood or body substances:

- if the exposure involves a cut or puncture, encourage bleeding by applying gentle pressure, and wash with liquid soap and water
- if the exposure does not involve a cut or puncture, wash with liquid soap and water
- if your eyes are splashed, rinse open eyes several times with water or normal saline (gently but thoroughly)
- if blood or other body substance gets in the mouth, spit it out and then rinse out the mouth with water several times without swallowing the water
- if clothing is soiled, remove clothing and shower if necessary
- report the incident immediately to your manager or employer.

1.5 Instruments and wax

In cases where businesses do not have adequate sterilisation or decontamination facilities, single-use disposable instruments and materials should be used.

1.5.1 Skin penetration instruments

When using instruments for skin penetration procedures:

- use disposable instruments, or re-useable instruments that have been processed through a cleaning, disinfection or sterilisation process as described in Guidelines 1.6 and 5
- do not re-use hollow (hypodermic) needles as they cannot be effectively cleaned and sterilised
- ensure disposable sterile equipment packaging (including jewellery) is labelled with the manufacturer's statement that the instruments are sterile
- ensure the packaging maintains the sterility of the instrument.

1.5.2 Depilatory wax

When using wax (eg. for hair epilation):

- use the wax once only and then dispose of it (recommended); or
- re-use wax that has been decontaminated as described in Guideline 3.5.

1.6 Cleaning and storage of re-usable instruments

Before re-using instruments, clean or decontaminate them. Some instruments may also need to be disinfected or sterilised – see the following Process Chart.

Process chart for cleaning instruments

PROCESS	COMMENT
Cleaning	Most instruments used in personal appearance services can be decontaminated by being washed in warm water and detergent, rinsed in hot running water and dried. Exceptions include instruments or parts of instruments that contain an electrical motor or component, or instruments used to penetrate the skin.
Disinfection	 For some instruments, a higher level of decontamination is required (eg. hair cutting scissors should be cleaned and disinfected if they accidentally penetrate skin). For some instruments, disinfection is required because decontamination using water and detergent is not practical (eg. Electric hair clippers which cannot be immersed in water).
Sterilisation	This level of decontamination is required for instruments (or parts of instruments) which are: • intended to penetrate skin, hair follicle or mucous membrane; • likely to have been in contact with blood or body substances; and • able to undergo a sterilisation process. See Guideline 5

When developing the above process chart, factors considered included the type of personal appearance service, the type and intended use of the instrument, the likelihood of exposure to blood, the likelihood of disease transmission, the infectious agents likely to be encountered, the desired results, and the practicality of the process.

1.6.1 Cleaning instruments

- clean all instruments and equipment contaminated with blood or body substances soon as practicable after they become contaminated
- clean instruments by:
 - using a dedicated sink for instruments only
 - using Cleaning Method 1 for instruments or parts of instruments that can be immersed in water
 - using Cleaning Method 2 for instruments or parts of instruments that can not be immersed in water
- useful cleaning aids include:
 - small brush with firm plastic bristles eg. toothbrush (avoid wooden brushes)
 - light-grade nylon or similar non-abrasive scouring pad
 - disposable pipe cleaner
- for cleaning instruments like electric hair clippers and shaving razors see Guidelines
 3.2.1

Cleaning Method 1

Use for all instruments or parts of instruments that can be immersed in water.

- when cleaning instruments, wear intact and water-resistant rubber or plastic gloves
- rinse the instrument in luke-warm water to remove gross visible blood and body substances
- dismantle the items where necessary
- ensure equipment used to clean instruments is clean and in good condition
- fully immerse the instrument, where practical, in warm water and suitable detergent, and scrub with a clean brush or other suitable device, paying particular attention to interior surfaces. In the case of tubes, the brush should pass completely through the tube in one direction. Alternatively a dishwasher can be used
- the formation of potentially hazardous aerosols is minimised when the scrubbing action is performed under water, OR by agitation using an ultrasonic cleaner. Use ultrasonic cleaners in accordance with manufacturer's instructions
- rinse the instrument in running hot water
- dry instruments to be sterilised with a clean non-linting cloth. Dry other instruments by air drying or with clean disposable paper towels
- wash hands as per Guideline 1.2 before and after cleaning the instruments.

Cleaning Method 2

Use this method for instruments that cannot be immersed in water due to size and/or safety issues (eg. hair steamers and dryers, parts of electric powered instruments).

- wear water-resistant rubber or plastic gloves when cleaning instruments or equipment
- wipe the instrument with a disposable paper towel moistened with warm water and detergent, and allow it to air dry intact.

1.6.2 Managing and storing instruments

- workflow remove re-useable instruments and jewellery from the contaminated area
 to the cleaning area for cleaning and, when dry, move them to the clean storage area.
 This will help ensure that clean re-usable instruments and jewellery are not
 contaminated by soiled instruments
- store clean, disinfected and sterilised instruments and jewellery to protect them from contamination, dust and vermin (eg. in sealable, clean, impervious, smooth surface containers).

1.6.3 Care of cleaning equipment

After using equipment for cleaning instruments (eg. cloths, scourers and brushes):

· wash in warm water and detergent

- rinse in hot water
- allow to dry and store it in a clean dry place.

Maintain the equipment in a good condition and replace when it becomes unserviceable.

1.7 Smoking, eating and drinking

While attending to clients, or cleaning or disinfecting instruments, do not smoke, eat or drink. These activities allow close contact with the mouth and may transfer infectious agents to the hands, which can then be spread to the client, and vice versa. Smoking in the workplace is prohibited.

1.8 Linen and clothing – laundry and storage

- place soiled linen and clothing in either a container capable of being cleaned or one that is lined with a disposable liner
- rinse off any gross contamination before washing linen and clothing
- · wash soiled linen and clothing in detergent and water, then rinse and dry
- domestic washing machines can be used for cleaning linen and clothing
- store clean, dry linen in a clean and dry environment free from dust, insects and vermin.

1.9 Animals

As a general rule animals should not be allowed in places where personal appearance services are provided, as they may be a potential source of infection (eg. ringworms). However, the rights, needs, and circumstances of people with disabilities and special needs should be considered.

Under the *Guide, Hearing and Assistance Dogs Act 2009*, a person with a disability who relies on a guide, hearing or assistance dog to reduce the person's need for support may be accompanied by the guide, hearing or assistance dog in a public place or public passenger vehicle. A person with a disability who relies on a guide, hearing or assistance dog to reduce the person's need for support does not commit an offence merely by taking the guide, hearing or assistance dog into a public place or public passenger vehicle.

This could include for example, a place of business where hairdressing, beauty therapy, tattooing or body piercing services are provided.

The *Anti-Discrimination Act 1991* prohibits discrimination (whether direct or indirect) on the basis of a person's impairment including failing to supply goods and services to a person. The Act contains a 'health' exemption. That is, a person may do a discriminatory act that is reasonably necessary to protect public health, or to protect the health and safety of people at a place of work. However if you discriminate on that basis, you may be called upon to demonstrate to the Anti-Discrimination Commission why the health risks could not have been managed in a non-discriminatory manner.

1.10 Clothing and footwear

- · wear clean clothing when attending to clients
- wear closed, puncture resistant footwear especially when handling sharp instruments capable of puncturing the skin if dropped eg. needles.

2. Guideline - Environmental cleaning and waste disposal

This Guideline applies to all personal appearance services.

2.1 Cleaning and maintenance of premises

The physical environment where personal appearance services are provided should be kept in a clean condition and enable good infection control practices to be implemented. Cleaning procedures may require the use of personal protective equipment such as masks where vigorous cleaning actions are used.

2.1.1 General cleaning

- maintain working surfaces in a clean condition, particularly surfaces on which instruments to be used on clients are placed
- use detergent mixed with warm water to clean all work surfaces
- use cleaning equipment (eg. cloths, mops and brushes) that is clean
- use a vigorous cleaning action when cleaning work surfaces
- allow the surface to dry
- maintain floors and walls in a clean condition through normal cleaning processes (eg. sweeping and removal of visible dirt).

2.1.2 Cleaning inanimate surfaces (eg. benches, floors) soiled with blood and body substances

Spot cleaning

• wipe the spot with absorbent material (eg. paper towels) and then clean the surface with detergent and warm water.

Spills of blood or body substance

- if a spill of blood or body substance occurs, wipe the spill up with absorbent material (eg. paper towels)
- clean the surface with detergent and warm water
- leave the surface for 10 minutes in contact with cotton wool or disposable towels soaked with chlorine-based disinfectant of approximately one part liquid household bleach to 10 parts water, freshly diluted
- dispose of contaminated materials used to clean up the spill in a waste container (see Guideline 2.2.1).

2.2 Waste disposal

2.2.1 General waste

- place waste into a container, which is smooth, impervious and has a suitable lid
- empty the container regularly into your main waste bin
- use of a disposable liner can reduce the need to clean the container.

2.2.2 Sharps disposal

- take care to prevent injuries during the disposal of sharps. The potential for transmission of blood-borne diseases is greatest when sharps are handled
- dispose of used sharps in accordance with the Environmental Protection (Waste Management) Regulation 2000. That is, dispose of the used sharp after use into a rigid-walled, puncture resistant container and seal or securely close the container
- dispose of sharps immediately to protect operators, staff and clients from injury. Place sharps disposal containers as close as practical to where a procedure is undertaken so they can be easily accessed by the operator
- ensure sharps containers are not accessible to visitors, particularly children

- ensure sharps containers are not overfilled
- ensure items are not forcefully inserted into sharps containers
- refer to Guideline 1.4.2 if you are pricked when disposing of a sharp.

2.2.3 Clinical waste

Tattooing and body piercing are the only two personal appearance service industries where clinical waste may be produced. However, if the waste does not contain free-flowing blood or body fluids, it is not clinical waste. This means that waste with a small amount of dried blood (e.g. cotton wool ball with a spot of dried blood) does not have to be disposed of as clinical waste.

3. Guideline - Non-higher risk services

3.1 Materials and instruments used in non-higher risk personal appearance services

When dealing with materials and instruments used in providing services to clients:

- clean, disinfect or sterilise instruments and materials, depending on the instrument and its use (see Guidelines 1.6 and 5)
- apply materials (eg. cosmetics, creams, powders or nail polish) to a client with clean, single use equipment OR with equipment that has been cleaned as per Guideline
 1 6 1
- do not apply cosmetic testers (eg. lipsticks) directly to the face or mouth, this will avoid potential infections such as cold sores
- to avoid cross contamination, dispense sufficient material (eg. cream) from the original container into another clean container (to be used for one client only) or onto a single use applicator
- place single-use disposable instruments (eg. applicators) in a waste container after use on a client and do not re-use on another client
- do not apply materials to a client if it has been applied to another person, with the exception of wax (see Guideline 3.5)
- handle, store and use all materials applied to a client in a way that minimises contamination
- clean and sterilise instruments that do not normally penetrate skin but which may become contaminated with blood and body substances (eg. razors, manicure instruments) before using them on another client (see Guideline 5). Exceptions include scissors and electric hair clippers (see Guideline 3.2)
- clean and sterilise items intended to pierce skin, eg. electrolysis needles, jewellery studs used in closed ear and nose piercing (see Guideline 5)
- clean the client's skin immediately before a skin penetration procedure (see Guideline 4.1).

3.2 Hairdressing

Refer to Guideline 3.1 for general information about materials and instruments used in hairdressing.

3.2.1 Cleaning instruments

Clean re-useable instruments as per the cleaning instructions in Guideline 1.6 before being used on a person. When cleaning scissors or electric hair clippers after accidental contamination with blood, follow the special instructions below.

Routine cleaning of hair cutting scissors

Clean scissors as per Guideline 1.6.

Cleaning hair cutting scissors after accidental contamination with blood

- clean the scissors as per Guideline 1.6; and
- disinfect the cleaned scissors with either:
 - a 70-80% ethyl alcohol soaked wipe, or
 - a 60-70% isopropyl alcohol soaked wipe, or
 - a cloth or tissue soaked in methylated spirits.

Cleaning electric hair clippers

 clean electric hair clippers as part of routine cleaning and immediately after accidental contamination with blood

- disconnect the clippers from the power source
- remove hair from the clipper teeth
- clean the clipper teeth with a plastic brush dampened with 70%-80% ethyl alcohol or 60%-70% isopropyl alcohol solution or methylated spirits. Wipe over other visible accessible areas with a clean cloth dampened with detergent and water as per Guideline 1.6.1
- allow clipper teeth and other cleaned areas to air dry
- clean the cleaning brushes and cloths as per Guideline 1.6.3.

Cleaning and sterilising other instruments following accidental contamination with blood

If other re-useable instruments become contaminated with blood, clean and sterilise them (see Guideline 5) before using on another person.

3.2.2 Head lice treatments

- use a non-chemical treatment (eg. white hair conditioner and comb) or a chemical (insecticidal) treatment (by following the instructions on commercially available head lice products). For a fact sheet on both forms of treatment see the Queensland Health website at www.health.qld.gov.au
- clean instruments used in head lice treatments (eg. combs) as per Guideline 1.6.1, Method 1
- kill head lice and their eggs which stick to linen by:
 - washing the linen in a washing machine using the hot water cycle; or
 - placing the linen in a hot clothes-dryer cycle for 15 minutes; or
 - soaking the linen in near boiling water for 30 minutes.

3.3 Shaving

Method 1 (highly recommended)

- shave the area using a single-use disposable safety razor or a single-use disposable open straight blade razor
- use the razor for one client only and dispose of it immediately after use.

Method 2

- shave the area using a re-useable razor handle that has been cleaned and incorporates a single-use disposable razor blade
- use the razor blade for one client only and dispose of it immediately after use.

Method 3

- shave the area using a re-useable open straight blade razor (cut throat razor) which has been cleaned (see Guideline 1.6)
- if the razor is contaminated with blood or body substances, clean and sterilise it as per Guideline 5 before re-using on another person.

3.4 Beauty and nail treatments

- refer to Guideline 3.1 for general information about materials and instruments used in personal appearance services, including applying cosmetic and other materials to clients, and the use of cosmetic 'testers' (eg. lipsticks)
- clean and store re-useable instruments used in applying cosmetics, manicures/pedicures as per Guideline 1.6
- clean and sterilise re-useable instruments (eg. used for extractions or digging out hairs) that have come into contact with blood, before they are used on another client, as per Guideline 5.

3.5 Depilatory waxing (including paraffin treatment)

- heat and strain re-usable wax to remove hair and reheat it to at least 130°C for 15 minutes before it is used on another client. Use a thermometer to check the temperature of the wax
- place the strained material (hair and other matter) in the waste container and clean the strainer after each use
- clean wax pots and tongs daily to remove the build up of hair and other matter
- clean spatulas before re-using on another person, or use disposable spatulas. Wax
 may become contaminated by dipping a spatula into the wax pot, transferring wax to
 the area of the skin from where the hair is to be removed and then dipping the spatula
 into the wax pot.

3.6 Electrolysis

- clean each client's skin as per Guideline 4.1
- ensure all needles used in electrolysis are sterile
- single-use disposable needles are recommended
- if non-disposable needles are used, clean and then sterilise them before re-use as per Guideline 5
- if a single sterile needle is used to remove as many hairs as necessary from a client on a single occasion, dispose of the needle in a sharps container. The needle should not be kept for future use by the operator or client
- clean needle holders with warm water and detergent and dry them
- if bleeding occurs, see Guideline 1.4.1 for advice.

3.7 Closed ear, nose and navel piercing instruments

When performing closed ear, nose and navel piercing:

- mark the site to be pierced before cleaning the site
- clean each client's skin as per Guideline 4.1
- clean closed piercing instruments as per Guideline 1.6.1
- use closed piercing instruments such as closed ear, nose and navel piercing guns strictly in accordance with the manufacturer's instructions.
- use a closed ear piercing instrument, only for piercing ears and not for piercing any other part of the body
- use a closed nose piercing instrument, only for piercing noses and not for piercing any other part of the body
- use a closed navel piercing instrument, only for piercing navels and not for piercing any other part of the body
- avoid bringing the closed piercing instrument into contact with the person's skin or mucous membrane
- ensure the closed piercing instrument is fitted with a sterilised single-use disposable cartridge containing assembled sterilised jewellery and fittings. It should be noted that some instruments need the jewellery stud and clasp to be directly fitted into the instrument. This allows the cartridge to be discarded
- do not re-use jewellery or fittings on another person unless it has first been sterilised as per Guideline 5
- if bleeding occurs, see Guideline 1.4.1.

3.8 Foot spas

Clean foot spas between clients:

- drain the water from the spa
- wipe the foot spa clean with a cloth, soap and water to remove all contamination
- · flush the spa after cleaning and
- use an alcohol wipe or a alcohol spray to wipe the surface of the spa.

At the end of each day all the components of the foot spa should be thoroughly cleaned and dried.

4. Guideline - Skin penetration procedures

This Guideline applies to all personal appearance services where skin penetration occurs. This includes non-higher risk services such as electrolysis, closed ear and nose piercing.

4.1 Preparing a client's skin for a skin penetration procedure

- if the area to be penetrated is visibly dirty, use soap and water to clean the area
- if the area of the skin to be penetrated requires hair to be tied back or removed, follow these procedures
 - if the client has head hair that may touch the site to be penetrated, ask them to tie back their hair so the site is not potentially contaminated
 - shave the area by following the method in Guideline 3.3
 - where possible, use a single-use disposable safety razor. If another type of razor is used, then clean as per Guideline 3.3
- antiseptics are not needed for piercings inside the mouth. Ensure the client's mouth (including tongue, teeth and gums) is clean, eg. clean with a toothbrush
- clean the piercing site with warm water and a liquid soap before genital piercing is done. Antiseptics are not needed for genital piercing
- before inserting the skin penetration instrument or performing a procedure associated with the insertion or removal of jewellery, apply antiseptic to the skin at and around the piercing site. Use one of the following antiseptics in accordance with manufacturer's instructions:
 - 70% 80% v/v ethyl alcohol
 - 60% 70% v/v isopropyl alcohol
 - alcoholic (isopropyl and ethyl) formulations of 0.5 to 4% w/v chlorhexidine
 - 10% aqueous povidone-iodine (1% w/v available iodine)
 - 30% or 70% alcoholic aqueous povidone-iodine
- before applying an antiseptic, ask the client whether they are allergic to an ingredient in the antiseptic proposed to be used. If the client says they are allergic, use another antiseptic that does not contain that ingredient
- if individually packaged 70% ethyl or isopropyl alcohol swabs are used to prepare skin, check the package is intact before opening and if it isn't, throw away and use one that is intact
- where additional skin preparation is needed after initial skin swabbing, use a fresh alcohol swab
- if the skin undergoes cleaning and softening before an extraction process (eg. For blackheads, pimples), do not use a skin antiseptic as this may further irritate already sensitive skin
- pour antiseptic to be used on a client into a clean, dry container (eg. open dish) from the stock solution. Discard any leftover antiseptic in the container after use. Clean and dry the container before being used on the next client, or use a disposable container.
- swab the skin penetration site in a circular/spiral motion starting at the centre of the site, and ensuring the swab remains moist during swabbing
- ensure the skin penetration site is dry before the skin is pierced and do not touch the site by hand after swabbing
- do not use antiseptics that have passed the manufacturer's "use by" date.

4.2 Gloves

- wear gloves where there is a risk of exposure to blood or body substances, to protect the hands from contamination
- clean hands before putting on and after removing gloves
- gloves can have defects such as tiny holes even when they are new or can be damaged while in use or in storage. Inspect gloves before each use, and throw away if peeled, cracked, discoloured, torn or punctured

- wear sterile gloves if direct hand contact will occur with that part of the sterile instrument or jewellery that actually penetrates the skin. Otherwise wear clean, single use disposable gloves
- if you suffer a reaction from wearing a particular type of glove, use another type of glove
- use general-purpose rubber gloves when:
 - cleaning skin penetration instruments
 - cleaning up blood and body substance spills
- wash general-purpose rubber gloves in detergent, rinse and leave standing up to drain and dry after each use
- to reduce the risk of fungal transmission between operators, ensure that each pair of cleaning gloves is worn only by one operator
- using disposable gloves does not substitute for, or eliminate the need for hand washing
- do not re-use disposable single use gloves
- · discard gloves:
 - after contact with each client
 - as soon as they are torn or punctured
 - when performing separate procedures on the same client where there is a risk of transfer of infectious agents from one part of the body to another
 - when they touch unsterile items or surfaces.

4.3 Use of face protection

If there is a chance of blood spraying from a puncture site, use face protection such as a face shield.

4.4 Precautions when handling sharps (instruments that penetrate skin)

- do not pass contaminated sharps (eg. needles, jewellery and trocars) by hand between persons. Place them in a suitable container (eg. kidney dish, sharps waste container) before passing
- place contaminated instruments that are not being thrown away in a suitable container (eg. kidney dish). Ensure the container is clearly identified, set aside from sterile, clean or unused instruments and materials, and not accessible to children
- check floors regularly for any accidentally dropped instruments.

4.5 Single-use disposable instruments

When using single-use disposable instruments, place them in a waste container after use on the client and do not re-use on another client.

5. Guideline - Sterilising instruments

This Guideline applies to all higher risk personal appearance services. It may also apply to non-higher risk services, for example, if instruments become contaminated with blood or body substances.

5.1 Sterilising instruments and jewellery

Sterilise the following instruments and jewellery:

- all re-useable instruments (except tattooing machine motors) and jewellery that are used when providing higher risk services
- jewellery used in other skin penetration procedures (eg. closed ear/nose piercing)
- any re-useable instrument that has penetrated the skin or mucous membrane, and becomes contaminated with blood or body substances (eg. Instruments used for extractions, razors). This does not include haircutting scissors and electric hair clippers (refer to Guideline 3.2.1).

5.2 Australian/New Zealand Standard AS/NZS 4815

A way to minimise infection control risks when cleaning and sterilising instruments and jewellery listed in 5.1 above is to follow the 'Australian New Zealand Standard AS/NZS4815: Office based health care facilities not involved in complex processes – cleaning, disinfecting and sterilising reusable medical and surgical instruments and equipment, and maintenance of the associated environment'.

A copy of the AS/NZS 4815 can be obtained from Standards Australia, GPO Box 5420, Sydney NSW 2001 Ph: 1300 65 46 46 (www.standards.com.au).

6. Guideline – Body piercing and tattooing

6.1 Body Piercing

6.1.1 Instruments

- use clean and sterile instruments when piercing a person or enlarging a piercing
- use clean and sterile instruments when inserting or adjusting jewellery
- do not re-use hollow (hypodermic) needles
- use instruments or other items that will not rust or corrode as a result of being cleaned in detergent and water, or sterilised.

6.1.2 Choice of jewellery

- clean and sterilise jewellery before using on a person
- use jewellery featuring low or non-allergenic qualities, of a grade suitable for piercing into the body. Some examples include high quality stainless steel, titanium, niobium, palladium and 18 carat gold
- use jewellery that is highly polished, smooth and free from surface imperfections such as pitting.

6.1.3 Embedded jewellery

- do not surgically remove jewellery from a client
- if jewellery requires surgical removal, advise the client that this procedure should be performed by a medical practitioner.

6.2 Tattooing (including cosmetic tattooing, micro-pigmentation)

6.2.1 Ink (including pigments and dyes)

- · do not re-use ink, pigments or dyes and water
- store ink at all times in a way that prevents contamination
- use water or other liquid for mixing with ink only if it is free of contamination (eg. use treated drinking water, ethyl alcohol).

6.2.2 Stencils and outlines

- ensure stencils are clean before applying them to a client's skin
- single-use stencils are recommended
- apply clean soapy water to assist with fixing the stencil to the client's skin. The soapy water may be either:
 - poured from a stock mixture (freshly made each day) into a clean container and used on one client only
 - made up separately for each client in a clean container, with any mixture left at the end of the procedure thrown away
 - a mixture freshly made each day and applied from a squeeze bottle that drizzles from the nozzle.
- do not apply stencils with re-useable applicators (eg. deodorant sticks)
- remove, from a stock supply, lubricating jelly that is applied to the tattoo site and place in a clean container using a clean implement. Use this jelly exclusively on one client only. Throw away any jelly left in the container at the end of the procedure
- clean all implements after use (eg. paintbrushes used to mark the outline of a tattoo on a client's skin).

6.2.3 Tattoo needles and needle bar

Ensure that tattoo needles and needle bars, tubes or barrels used on a client are clean and sterile.

6.2.4 Cleaning the motor of the tattoo gun's handpiece

After a tattooing procedure for each client is completed, wipe the motor of the tattoo gun's handpiece with a clean paper towel moistened with warm water and detergent and allow it to dry. This will remove any gross contamination.

6.2.5 Removing needles from the tattoo gun needle bar

- If an operator intends to break the needle from the needle bar before disposing into a sharps waste container, clean and sterilise the needle and needle bar before breaking the needle. The risk of needle stick injury when breaking off the needle from the needle bar is high
- if the needle is removed from the needle bar carefully by heating and liquefying the soldered joint, and is disposed into a sharps waste container, there is no need to clean and sterilise the needle and needle bar.

6.2.6 Cosmetic tattooing or micro-pigmentation machines

- ensure the machine or needle tips, needles and the machine barrel casing are clean and sterile
- after the tattooing procedure for each client is completed, wipe the casing covering
 the motor with a clean paper towel moistened with warm water and detergent and
 allow the casing to air dry. This will remove any gross contamination.

7. Records

Records required to be kept include but are not limited to the following:

- Client records:
 - o Name address and date of birth of the client,
 - o date of high risk personal appearance service procedure performed,
 - o site and type of high risk personal appearance service procedure,
 - o operator who provided the service/administered the procedure, and
 - o instruments used (including sterilising batch number).
- Sterilisation records:
 - o Date of sterilisation cycle process,
 - Exposure time and temperature,
 - o maintenance and
 - validation certificate
- Staff immunisation
- Staff training and qualifications
- Needlestick injuries in the workplace

Glossary of Terms

Antiseptic

A substance that is applied to the skin or living tissue of a person to inhibit the growth of infectious agents.

Applicator

A spatula or similar instrument for mixing or spreading lotions, pigments, potions or wax.

Beauty therapy

A procedure intended to maintain, alter or enhance a person's appearance including facial or body treatments, application of cosmetics, manicure or pedicure, application of or mending artificial nails, and epilation (hair removal) by electrolysis or hot or cold wax.

Body piercing

The process of penetrating a person's skin or mucous membrane with a sharp instrument for the purpose of implanting jewellery or other foreign material through or into the skin or mucous membrane. The term 'body piercing' does not include closed ear and nose piercing procedures.

Body substance

Any secretion or fluid from the human body other than blood.

Business proprietor

A person conducting a business that provides personal appearance services.

Cleaning

The removal of all foreign material (eg. soil/organic material) from objects, and the reduction of infectious agents from surfaces. Cleaning is normally done with water and detergents.

Closed ear and nose piercing

A process of piercing a person's ear or nose with a closed piercing instrument that does not come into contact with the skin or mucous membrane, and is fitted with a sterilised, single-use disposable cartridge containing sterilised jewellery and fittings (ie. stud and clasp).

Detergent

A substance that enhances the cleaning action of water or other liquid.

Disinfectant

A substance that, when applied to inanimate surfaces or instruments, can kill or remove pathogenic micro-organisms.

Disinfect

To reduce the number of potentially infectious micro-organisms on an item or surface to safe levels.

Hairdressing

A procedure intended to maintain, alter or enhance a person's appearance involving facial or scalp hair. This includes cutting, trimming, styling, colouring, treating or shaving the hair.

Hepatitis B and C

Forms of viral hepatitis that can result in acute and chronic hepatitis, cirrhosis of the liver or cancer of the liver. A vaccine is available for hepatitis B.

Higher risk personal appearance service

A personal appearance service involving any of the following skin penetration procedures, in which the release of blood or other body substance is an expected result:

- body piercing, other than closed ear or nose piercing
- implanting natural or synthetic substances into a person's skin, eq. hair or beads
- scarring or cutting a person's skin using a sharp instrument to make a permanent mark, pattern or design
- tattooing (including cosmetic tattooing or semi-permanent makeup).

Human Immuno-deficiency virus (HIV)

The virus that causes AIDS (Acquired Immune Deficiency Syndrome). This virus attacks white blood cells that are a vital part of the body's immune system.

Infection

For the purpose of these guidelines, infection means the entry of infectious agents into the body or the introduction of parasites into and onto the body that may or may not result in disease.

Infectious agent

An organism (virus, rickettsia, bacteria, fungus, protozoan or helminth) that is capable of producing infection or infectious disease.

Infectious disease

The harmful result of infection by micro-organisms.

Infection control

A way of minimising the risks of spreading infection.

Instruments

Includes sharps, tools and other items used in providing personal appearance services.

Jewellery

A decorative item (not a pigment or dye) placed in the body or under the skin or mucous membrane during or following skin penetration, including the clasps or fittings.

Non-higher risk personal appearance service

A non-higher risk personal appearance service includes hairdressing, beauty therapy or a skin penetration procedure that is not a higher risk personal appearance service (eg. Closed ear or nose piercing).

Operator

An individual who personally provides a personal appearance service to a client.

Pathogenic micro-organism

An organism capable of causing a disease in a susceptible person.

Personal appearance service

Beauty therapy, hairdressing or skin penetration procedure that is provided as part of a business transaction.

Sharps

Any object or device with rigid corners, edges or points designed and capable of cutting or penetrating the skin. This includes but is not limited to needles, punches, jewellery and razors.

Skin penetration

A procedure to alter or enhance a person's appearance that involves piercing, cutting, scarring, scraping, puncturing, or tearing a person's skin or mucous membrane with an instrument.

Soil

Dirt or debris which may protect or assist the growth of infectious agents. Includes organic matter, blood and body substances.

Sterile

The absence of all infectious agents.

Sterilise

To make an item free of all living micro-organisms. In practice this involves a combination of cleaning (which removes many micro-organisms prior to sterilisation) and sterilisation (which reliably kills all remaining micro-organisms). Sterilisation processes need to be validated.

Styptic substance

A commercially available substance that helps to stop bleeding from small cuts or nicks (eg. from shaving).

Tattooing /cosmetic tattooing

Tattooing means to penetrate the skin and insert into it colour pigments to make a permanent mark, pattern, design or colouration of the skin. Tattooing also includes any process that penetrates the skin and inserts into it colour pigments to make a semi-permanent mark, pattern or design on the skin, eg. cosmetic tattooing or semi-permanent make-up.

Validate

To demonstrate that a process is both reliable and repeatable. With sterilisation, this means that a steriliser's mechanical functioning is first shown to be correct and reliable, followed by a demonstration that intended sterilising conditions are being reliably achieved in packs/loads being sterilised, and that monitoring methods are being correctly interpreted.