

Tattooing - Code of Practice 13

Special Treatment Premises

1.0 Purpose

The purpose of this Code of Practice (COP) is to support the policy decisions and conditions of licence adopted by the Council in respect of Special Treatments Establishments.

2.0 Scope

This COP details specific requirements for tattooing activities in addition to those laid down in the Regulations applicable to all special treatment licensed premises.

3.0 Definitions

3.1 Tattooing

This is a process whereby the outer layers of the skin are punctured with a dye-loaded needle and colour is inserted into the dermal (lower layer) to achieve a permanent design. This action causes local inflammation and bleeding. Precautions are necessary to prevent the possible spread of blood-borne infection. For the purposes of this COP tattooing will include micropigmentation, semi-permanent make up, tampoos and any treatment that involves breaking the skin and placing pigments, dyes or other coloured substances under the layer of the skin to provide a cosmetic enhancement of the skin.

3.2 Cleaning

This is a physical process which removes soil e.g. dust, dirt and organic matter, along with a large proportion of germs. Cleaning with hot water and detergent breaks up grease and dirt on floors and surfaces. Cleaning is also essential prior to disinfection and sterilisation of instruments and equipment.

3.3 Disinfection

For the purposes of these treatments a high level disinfectant relates to disinfectants capable of reducing the number of viable bacteria and blood borne viruses including Hepatitis B & C and HIV but which may not necessarily inactivate some viruses and bacterial spores. Where the disinfectant requires dilution this must be carried out in accordance with the manufacturer's instructions using clean potable water. Once diluted the disinfectant must be used in accordance with the manufacturer's instructions. Immersion must be in accordance with the manufacturer's instructions

3.4 Sterilisation

Refers to a treatment cycle that renders equipment free from viable micro-organisms i.e. capable of killing bacteria, fungi, viruses and bacterial spores.

3.5 Ultrasonication

This is an effective cleaning method with minimal handling of contaminated equipment. This cleaning attacks every surface, including apertures and recesses. Cleaning agents are added to the bath. Some cleaning agents are also disinfectants which will reduce the bacterial load.

4.0 Client consultation

4.1 A full client consultation must be carried out at the time of a first visit.

This include the following:

4.11 Medical history

a.) Eczema

Psoriasis

Haemophilia

d.) Heat disorders/disorders

Blood thinning agents

High/low blood pressure

Medication

Nursing Mothers

Pregnancy

Epilepsy

Diabetes

l.) Allergies

4.12 Contra indications noted

4.13 Area to be treated

4.14 Treatment plan

4.15 Date of treatment

4.16 Date of birth of the client

4.17 Name of tattooist who carried out the treatment

4.18 This record should be signed by the client as a declaration of agreement to treatment having understood all the associated risks.

4.2 A record of subsequent treatments must be kept.

4.3 Consultation records must be available for inspection by an authorised officer (on presentation of written consent from the client); copies of aftercare advice must be available for inspection.

5.0 Standard Infection control Procedures

5.1 Staff and client health

a.) All staff must be vaccinated against Hepatitis B

Tattooing must not be carried out on or within 10cms of an infected area of skin, a rash, cut or other wound.

5.2 Blood Spillage

5.21 Where any blood spillage occurs it shall be cleaned up as soon as possible using the procedure stated below:

a.) Put on disposable gloves and apron

Place disposable paper towels on blood spillage

Pour bleach on top of paper towels and leave for 2 minutes

Use paper towels to mop up spillage and then place them into clinical waste yellow bags

Discard gloves into yellow plastic bag

Wash and dry hands thoroughly then decontaminate with alcohol hand rub

Any contaminated clothes should be handled as little as possible and then only with gloves on. They should be pre-washed then washed on a hot cycle of 64°C for 10mins or 70°C for a minimum of 3 mins or discarded as clinical waste

This procedure must be documented and made available for all staff in the case of such an event.

5.3 Sharps Injury

It is recommended that the licensee provides a written needle stick injury procedure.

The procedure shall include the following:

What action to take in the event of such an injury

Encourage bleeding by squeezing gently

Do not suck wounds

Wash well with soap and warm running water

Cover with a dry dressing

e.) Seek medical advice as soon as possible at the local Accident and Emergency Department

Recording of any puncture wound or contamination of broken skin, mouth or eyes and report the incident to the employer where necessary

If an infection occurs as a result of the incident, it should be reported to the Local authority by telephone (RIDDOR)

5.4 Protective clothing

a.) Single use disposable plastic aprons should be worn for each client

Hot wash with detergent is sufficient for cleaning work clothes

Tattooists should routinely wear disposable single use vinyl or latex gloves while carrying out treatments.

Gloves should be changed between clients or when otherwise contaminated during the procedure

Gloves should be replaced with new gloves if there is evidence of tearing or puncture

6.0 Qualifications

6.1 Only tattooists who are registered with Barnet Council shall carry out tattooing at the premises. However, it remains the responsibility of the licensee to ensure that all tattooists are competent. Any person carrying out tattooing must be suitably qualified in tattooing and be able to show proof of having undergone a suitable apprenticeship with an experienced tattooist.

6.2 Until such time as an externally verified tattooing qualification is offered all tattooists will be required to have training in the area of hygiene. If it is found that the tattooist cannot show a high level of competence in infection control procedure when inspected, then they may be asked to complete Level 2 certificate in Salon Hygiene offered by the Royal Institute of Public Health or an equivalent qualification.

6.3 They must also be able to demonstrate an adequate knowledge of the following when questioned by an authorised officer.

a.) Health & Safety

Personal hygiene

Infection control

Client consultation

Aftercare advice

f.) Contra-indications

6.4 Tattooing procedures should not be carried out by persons under the age of 18 years

6.5 The tattooing procedure

Tattooing must not be carried out on or within 6 inches of an infected area of the skin, a rash, cut or other wound.

6.51 Pre-procedure

a.) Hands should be washed and dried thoroughly

Surfaces must be clean and free from extraneous matter

All equipment not required in the tattooing procedures must be stored in a clean enclosed environment to protect from risk of environmental contamination

Assemble machine, cover and place on clean surface.

Use new elastic bands for each treatment

Dye should be dispensed into clean, single use disposable pigment caps ensuring sufficient quantity to complete procedure

Wash rinse and dry hands thoroughly apply alcohol rub
Disposable gloves should now be put on
If the area requires shaving, disposable razors should be used and disposed of immediately into a sharps container.

6.52 Procedure

a.) The skin must be disinfected before any procedure is carried out
Clean water in a clean plastic cup should be used to rinse needles when changing dyes/inks. Discard after use
Dettol/savlon used for transferring stencils should be used sparingly.
Use of deodorant sticks between clients is not advised. Single use sticks should be used.

The sharpness of the needles should not be tested on the operator or the client before use

If a solution is used to wash off excess dye this should be by use of an appropriate trigger spray bottle which is emptied and cleaned daily

Any instrument accidentally touched by the operator or contaminated in any way must be replaced

Petroleum jelly on the wound after tattooing is not recommended for optimum healing. Petroleum jelly use in any other part of the tattooing process must be decanted from the tub using a disposable spatula, which is discarded after use. The petroleum jelly must then be spread using a fresh, disposable spatula.

A sterile dressing should be placed over the tattooed area.

6.53 After Procedure

a.) Place used needles or other contaminated waste directly in sharps container/yellow bag immediately after use(see GN clinical Waste)
Dismantle machine and place either into plastic container marked 'dirty instruments' to await cleaning and ultrasonic bath or place directly into ultrasonic bath.
Wipe over protective cover of tattoo motor with alcohol and mild detergent between clients and dry afterwards.
Wash and dry hands

6.6 Cleaning and Sterilising of Equipment

a.) All needles should be single use disposable. Under no circumstances should single use equipment be sterilised and reused on another client.
All surfaces that come into contact with staff equipment or clients must be cleaned at least daily with a suitable high level disinfectant. This will include areas such as door and cupboard handles, light switches etc and any other contact points
Any surfaces used during treatments must be cleaned with a suitable high level disinfectant prior to each use
Surfaces used during the treatment e.g. couch/chair must be wiped with a suitable disinfectant after each client and when preparing for the next
Other instruments that have accidentally penetrated the skin or are contaminated with blood must be properly cleaned and sterilised before further use
This should be carried out using the method stated below (decontamination and cleaning of utensils)

6.7 Decontamination and Cleaning of Utensils

a.) All disposable parts must first be removed and disposed of safely (see Guidance Note 5 – Clinical Waste)
Where heavy soiling has occurred, the equipment shall be rinsed under running water wearing the appropriate protective equipment (heavy duty gloves, protective eye wear and disposable plastic apron)
The equipment must then be fully submerged in a correctly functioning ultrasonic

cleaning bath. The cleaning solution used shall be made and used in accordance with the manufacturer's guidance.

The time of immersion shall be in accordance with the manufacturer's guidance. At each change of solution the ultrasonic cleaner should be cleaned thoroughly inside and out with a suitable neutral detergent and soft brush

The equipment shall then be rinsed in clean water before being placed in the steriliser

e.) Any equipment that cannot be sterilized in an autoclave must be thoroughly cleaned as above then immersed in a suitable high-level disinfectant and then sterilised using a suitable chemical sterilising method before and after use on each client

6.8 Sterilisation

a.) All instruments used in the procedure to pierce a person's skin or objects in contact with broken skin that are not disposable, should be sterilised in an autoclave. Steam sterilisers without a vacuum phase must not be used for the sterilisation of wrapped items or instruments with narrow lumens e.g. needle tubes.

c.) Unwrapped items must be kept in a dry, clean airtight container and used within 3 hours of sterilisation or must be re-sterilised before use.

All autoclaves used at the premises shall be chosen and used in accordance with the standards laid down in the current publication of the following

- MDA BD2002 (06) – Bench-top steam sterilizers – Guidance on purchase, operation and maintenance
- MDA DB 9804 – The validation and periodic testing of bench-top vacuum steam sterilizers.

7.0 Aftercare

7.1 Clients should be given verbal and written after care advice appropriate to the position and size of tattoo they have had.

This should also include advice of any possible complications.

8.0 Age

The Tattooing of Minors Act 1969 prohibits the tattooing of anyone in Great Britain under the age of 18 years old, unless it is carried out by a medical practitioner for medical reasons.

9.0 Record keeping/Informed consent

9.1 Records kept must include steps taken to verify the age of the client. E.g. photocopy of proof of age where appropriate (proof of age must include date of birth and a photograph)

9.2 Before any tattooing takes place, the tattooist or other competent person shall fully explain the potential side effects and problems that can occur to the client.

9.3 This informed consent must be recorded and signed by the client. For these purposes, a printed pro-forma should be used. – see client consultation

10.0 Use of Anaesthetics

Only operators who have attended an appropriate course on use of topical anaesthetics will be permitted to use them.

11.0 Complaints procedure

11.1 The licensee shall provide a written procedure to deal with complaints from customers. All complaints shall be recorded along with details of the following:

What action was taken to resolve the complaint

Any changes made in response to the complaint

11.2 A copy of the complaints procedure shall be kept at the premise at all times. A copy of all complaints and the above details shall be kept at the premises for a period of at least 2 years.

12.0 Review

This Code of Practice will be reviewed regularly and updated in light of current industry guidance and legal opinion. Any changes will be notified to licensees and will be attached as conditions to your licence with effect from the date of the next renewal of your licence.