

DCP 1 Pt 1: 201X

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**ANTIGUA AND BARBUDA CODE OF PRACTICE**  
**DCP 1 Pt 1: 201X Code of Practice for Beauty, spa and wellness entities: Part 1**  
**– General requirements**

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**ANTIGUA AND BARBUDA BUREAU OF STANDARDS**  
OLD PARHAM ROAD  
P.O. BOX 1550  
ST. JOHN'S  
ANTIGUA  
W.I.

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## FOREWORD

The Antigua and Barbuda Bureau of Standards (ABBS) is a statutory body established under the Standards Act of 1987, Cap 411 of the revised Laws of Antigua and Barbuda. The Standards Act mandates the Bureau to promote and encourage the maintenance of mandatory and voluntary standards in relation to goods, services, processes and practices. The Bureau also has the responsibility for monitoring the manufacture of goods and the production of services to both local and international standards. In executing its mandate, the ABBS focuses on the quality and competitiveness of products and services; the health and safety of the consumer; and the protection of the environment.

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**ATTACHMENT PAGE FOR ABNS AMENDMENT SHEETS**

## ANTIGUA AND BARBUDA CODE OF PRACTICE

## DCP 1 Pt 1: 201X

## Code of Practice for Beauty, spa and wellness entities: Part 1 – General requirements

## Committee Representation

This Antigua and Barbuda National Standard was prepared under the supervision of the Beauty, Spa and Wellness Technical Committee, which at the time comprised of the following members: -

<b>Members</b>	<b>Representing</b>
Tricia Greenaway ( <b>Chairperson</b> )	Beauty, Spa and Wellness Association
Danella Phillip-Raeburn ( <b>Vice Chairperson</b> )	Caribbean Academy of Cosmetology & Trichology
Alecia Joseph-Edwards	Antigua and Barbuda Institute of Continuing Education (ABICE)
Fay C. Shantia Weatherill	Ministry of Tourism and Economic Development
Jackisha Williams	Prices and Consumer Affairs Division, Ministry of Foreign Affairs, International Trade and Immigration
Jomica Carbon-Constant	Ministry of Foreign Affairs, International Trade and Immigration
Padmore Jeremiah	Wag's Celebrity Master Barber Shop
Valarie Williams	Ministry of Health, Wellness and the Environment
Varecia Smith ( <b>Technical Secretary</b> )	Antigua and Barbuda Bureau of Standards
Carlton Best ( <b>Recording Secretary</b> )	Antigua and Barbuda Bureau of Standards

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## Introduction

This National Code of Practice is . This edition of the standard was approved by the Standards Council on and came into effect on .

The beauty, spa and wellness industry of Antigua and Barbuda has seen significant growth within the last five years. The sector has responded to the consumers demand for health and wellness programmes, for fitness level improvement, healthy lifestyle, education and solving personal problems such as stress and depression. The sector has also responded to consumers interest in beauty and spa facilities, there has been an emergence of micro, small and medium enterprises offering services for spa therapies and beauty treatments.

The development of this code of practice is seeks to provide guidelines and requirements for the establishment and operation of beauty, spa and wellness facilities in Antigua and Barbuda.

The Antigua and Barbuda National Code of Practice was adopted to address the following concerns:

- 1) the increase in demand for the provision of safe and hygienic services;
- 2) the need for updated guidelines in keeping with scientific and technological advances within the industry;
- 3) the need to provide quality services consistent with improved customer satisfaction, safety and security; and
- 4) the need to promote sustainable development and care for the environment by proper waste disposal practices.

This code of practice establishes the minimum requirements for the provision of quality services by beauty and wellness practitioners and is intended to cultivate a culture of health and safety practices as well as professionalism within the beauty, health and wellness sector in Antigua and Barbuda.

This code of practice can be used as a tool by competent authorities under any programme of certification or licensure.

In preparation of this document, considerable assistance was derived from the following documents:

- SLCP 13- 1 2012 Code of Practice for Beauty and Wellness

# 1 Scope

This national code of practice establishes minimum operational and hygienic requirements that should be complied with by a service provider of beauty treatments.

This national code of practice does not apply to medical, dental or similar facilities.

This national code of practice does not apply to facilities that offer remedial services or similar services for the treatment of diseases or injuries.

# 2 Terms and definitions

For the purposes of this document, the following terms and definitions apply:

## 2.1 beauty treatment

hairdressing, skin therapy, aroma therapy, any skin piercing process (including tattooing) or other service offered by a facility for the enhancement of personal beauty or wellbeing

## 2.2 beauty and wellness

provision of cosmetology and massage therapy services described as beauty treatments

NOTE Annex A provides examples of beauty and wellness facilities.

## 2.3 care home

any institution that cares for persons, except persons who require hospitalisation, who cannot be cared for at their home

## 2.4 child

a person who is under eighteen years of age

## 2.5 client

a person who has undertaken beauty treatment from a service provider or a regular customer of a service provider

## 2.6 clinical waste

waste containing human or animal tissue, blood or other body fluids or excretions, drugs or other pharmaceutical products, used swabs, dressings, syringes or other such used devices

## 2.7 equipment implements

includes brushes, utility gloves, skin penetrating instruments and other implements or tools used in performing any beauty treatment

## 2.8 early warning devices

includes smoke detectors, fire alarm, siren or similar devices

## 2.9 facility

an establishment that includes the facilities for providing a beauty treatment

## 2.10 national competent authority

government or statutory body which has the primary responsibility for a field specified by national legislation

## 2.11 non-hazardous waste

solid or liquid waste generated from normal household or commercial activity and is classified as non-hazardous

EXAMPLE Product packaging, food scraps, newspapers, clothing, bottles, paper.

**2.12 potential client**

a person who is not a client of a professional service provider and may or may not have undergone client consultations

**2.13 proprietor**

a person who owns, manages or operates a facility

**2.14 recognised qualification**

any certificate, diploma, degree from a university or other institution which is authorised by the relevant national competent authority to offer training in the beauty and wellness sector

**2.15 record**

a database containing details of all transactions and services conducted by a professional service provider

**2.16 sharps**

includes razors, scissors, clippers, needles and similar objects

**2.17 service provider**

a person who has a recognised qualification to provide services in a beauty and wellness facility

EXAMPLE A service provider may be a hairdresser, barber, manicurist, pedicurist, massage therapist or an employee who carries out duties in keeping with the services being offered.

**2.18 auxiliary staff**

an employee of a professional service provider and includes cleaners, trainees and other assistants employed by a service provider or who work under the supervision of a service provider

**2.19 vulnerable person**

a person whose ability to give consent to a beauty treatment is affected, by reason of: -

- a) mental, physical or other disability;

NOTE Classified based on person's inability to take care of themselves particularly against significant harm or exploitation.

- a) age; and

- b) illness;

### **3 General Requirements**

#### **3.1 Ethical considerations**

**3.1.1** A service provider and his or her staff shall follow the principles and practices prescribed by this standard.

**3.1.2** A service provider and his or her staff shall provide a quality of service that is:

- a) honest;
- b) prompt and reliable; and
- c) polite and courteous to potential clients and clients.

### **3.2 Advertising services offered at a facility**

A service provider and his or her staff shall:

- a) inform potential clients and clients of the type of service and any conditions applicable to any service being offered at a facility;
- b) inform potential clients and clients of the cost of a service and any additional costs of a service being offered, prior to any beauty treatment;
- c) ensure that adequate advertising signs are displayed in a prominent place within the facility;
- d) not make any exaggerated claims of the abilities or curative purposes of any beauty treatment; and
- e) establish and maintain business hours which shall be advertised in a prominent place within the facility.

### **3.3 Vulnerable person or child**

**3.3.1** A service provider shall obtain the written permission of the parent or legal guardian of a vulnerable person or child before performing any beauty treatment on that person.

**3.3.2** A service provider shall take all the necessary steps to verify that the written permission given to him or her was actually obtained from the parent or legal guardian of that vulnerable person or child.

**3.3.3** The parent or legal guardian of a child or vulnerable person can have the option of being present during a beauty treatment.

## **4 Operational requirements**

### **4.1 Client consultation**

**4.1.1** A service provider shall conduct a consultation session with a client or potential client before a beauty treatment.

**4.1.2** In conducting a consultation session, a service provider shall: -

- a) evaluate a client's readiness for a beauty treatment; and
- b) advise the client of the potential risks and other important information related to a beauty treatment.

**4.1.3** After a consultation session, a service provider shall create a record card for a client.

#### **4.2 Client record card**

**4.2.1** A client shall be required to sign a record card before a beauty treatment is performed on that client to acknowledge the following:

- a) that he or she is acting on his or her own free will;
- b) that he or she is aware of the risks involved in undertaking a beauty treatment; and
- c) that he or she is not under the influence of drugs or alcohol.

**4.2.2** After a client signs his or her record card the service provider shall sign the record card.

**4.2.3** The service provider shall store client records in accordance with clause 9.

#### **4.3 Post - service care**

**4.3.1** A service provider shall provide a client with adequate aftercare instructions:

- a) to ensure that the maximum benefits of the service are achieved;
- b) to prevent any adverse reactions after the beauty treatment; and
- c) to enable the client to know how to deal with any unexpected reactions.

NOTE Post service care instructions should be given verbally and written where applicable.

**4.3.2** Clients shall also be informed of the expected healing time where applicable.

#### **4.4 Infection control measures**

**4.4.1** A service provider shall maintain an infection control log book to document:

- a) any infections discovered; and
- b) any infection control measures undertaken at the facility.

**4.4.2** A service provider and staff shall adopt internationally accepted procedures to prevent the transmission of infectious diseases.

**4.4.3** A service provider shall keep an adequate supply of cleaning, disinfecting and sterilizing equipment for use in the usual day to day operations and for busy days.

**4.4.4** All instruments shall be cleaned, disinfected and sterilized before and after performing a beauty treatment on every client.

**4.4.5** Where a client's skin is cut accidentally by an instrument, this instrument shall be immediately disposed of or cleaned and sterilized before being used a second time.

## **5 Hygienic requirements**

## **5.1 Hand washing**

**5.1.1** Hands shall be washed thoroughly with water and soap or an antibacterial cleanser.

**5.1.2** Hands shall be dried with single-use paper towels or a hand dryer before treating every client and after engaging in any activity that contaminates the hands.

## **5.2 Protective attire**

**5.2.1** A service provider and his or her staff shall wear clean outer clothing or a clean overgarment when attending to a client.

**5.2.2** Other protective attire that should be worn includes:

- a) disposable gloves;
- b) when mixing chemicals, aprons and gloves;
- c) when using sharps, protective footwear; and
- d) when conducting any skin penetrating practice, protective eyewear.

## **5.3 Use of razor blades**

**5.3.1** A new single-use disposable razor blade shall be used for each client.

**5.3.2** Used razor blades shall be placed in a sharps container.

**5.3.3** Reusable cut throat razors shall not be used in a facility.

## **5.4 Use of makeup, waxes and lotions**

**5.4.1** Make-up, lotions, depilatory waxes and gels shall be administered with a clean and single use applicator with each new application.

## **5.5 Cleaning equipment**

**5.5.1** Protective clothing, disposable and durable gloves shall be worn when cleaning equipment.

**5.5.2** Splashing while cleaning instruments should be avoided.

**5.5.3** All equipment shall be cleaned before being disinfected or sterilized.

**5.5.4** All equipment shall be cleaned by using mild alkaline detergents in the pH range of 8.0 to 10.8.

**5.5.5** Common household detergents should not be used to clean equipment prior to disinfecting or sterilising.

**5.5.6** Brushes, utility gloves and other cleaning equipment shall be kept in a clean and serviceable condition.

**5.5.7** Cleaning shall be performed using the method provided in Annex B or any other approved method by the national competent authority.

## **5.6 Disinfecting equipment**

**5.6.1** Skin penetrating equipment that is not used in the direct process of skin penetrating shall be cleaned and disinfected.

**5.6.2** Equipment shall be disinfected in accordance with the method provided in Annex C or any other method approved by the national competent authority.

## **5.7 Sterilising equipment**

**5.7.1** Needles and needle holding equipment, such as a tattooing gun bar or nozzle, sharps and other skin penetrating equipment shall be in a sterile condition immediately prior to use.

**5.7.2** Reusable skin penetrating instruments shall not be used to perform beauty treatments.

**5.7.3** Handling of implements and/or tools shall be done with forceps or gloved hands.

**5.7.4** Equipment shall be sterilised in accordance with the method provided in Annex D or any other method approved by the national competent authority.

# **6 Facility requirements**

## **6.1 Physical requirements**

All facilities which are intended to be used for beauty treatments shall:

- a) be constructed in compliance with building standards as established by the competent authority;
- b) be kept clean and in a state of good repair, and where applicable the facility should be kept sanitised;
- c) be properly ventilated;
- d) have adequate and efficient lighting in all parts of the premises to facilitate proper cleaning and inspections of the facility;
- e) have an appropriate number of restrooms which shall be accessible to clients during operating hours;
- f) be equipped with male and female restroom with a continuous supply of toilet paper, running water, liquid or granulated soap, single use disposable paper towels or electric hand dryers and a waste receptacle;
- g) have, in working areas, a sufficient number of easily accessible hand wash basins that are equipped with a piped supply of hot and cold running water, soap, single use paper towels or hand dryer;
- h) have, for the sole purpose of cleaning instruments and equipment, an easily accessible sink in the working area that provides a constant supply of hot water, with a minimum of 63°C and cold water;

- i) have an adequate supply of cleaning equipment, cleaning, disinfecting, sanitising and sterilising agents;
- j) have, in an area used for performing beauty treatment, floors, walls, ceilings, fixtures and fittings constructed from materials that are continuously smooth, impervious, and easy to clean;
- k) have an adequate water supply system, such as, water stored in water tanks, buckets, cistern and other water storage items;
- l) water supply storages shall be covered from contaminants;
- m) have a separate room or other suitable facility for the storage of clothing and personal effects of staff personnel;
- n) have adequate and sufficient covered waste receptacles that are made of materials that can be easily cleaned; and
- o) be kept clean and safe and free from vermin and offensive odours on the outside.

## **6.2 Storing equipment, materials and other items**

**6.2.1** Separate storage facilities shall be provided for clean or soiled laundry, cleaning equipment, beauty products and other chemicals, products or materials.

**6.2.2** The storage of clean laundry shall be in dust-proof containers.

**6.2.3** Chemicals and hazardous material shall be stored separately away from electrical sources.

**6.2.4** A service provider shall keep the material safety data sheet (MSDS) for all chemicals stored at the facility.

## **6.3 Waste disposal**

**6.3.1** A service provider shall practice proper waste management to maintain proper infection control.

**6.3.2** General non-hazardous waste and clinical waste shall be kept in separate bins.

**6.3.3** Clinical waste shall be:

- a) labelled "biohazard" or "clinical waste";
- b) removed from the bin when the waste bag is two thirds full;
- c) sealed securely;
- d) marked with a point of origin label prior to disposal; and
- e) disposed of by the service provider or collected by a licensed disposal agency.

**6.3.4** A foot-operated bin with a lid should be used to place general non-hazardous waste.

NOTE Flip lid bins shall not be used as hands can easily be contaminated while using them.



**6.3.5** Any rotting waste shall be wrapped or sealed in a disposable container to prevent leaking of fluids and offensive odours.

**6.3.6** A service provider shall take all reasonable steps to ensure that all waste material is stored on the premises without creating an unsanitary condition.

**6.3.7** All waste shall be removed from the premises as often as necessary but at least once a week.

**6.3.8** Aerosols, batteries and broken glass shall not be placed in bags for disposal.

## **6.4 Policy on food, drinks, smoking and animals**

**6.4.1** Where refreshments are served at a facility, single use utensils shall be used, unless the facility is equipped with adequate dishwashing facilities.

**6.4.2** Food, drinks and other snacks shall be served to persons in the waiting area of the facility.

**6.4.3** Food or drink shall be kept separate from other storage areas, such as areas used for storing chemicals.

**6.4.4** A service provider and auxiliary staff shall not smoke, consume alcohol or use any illicit drug in a facility.

**6.4.5** A service provider or his or her staff shall not keep animals at the facility unless it is a registered disability assist animal.

## **7 Health and safety requirements**

### **7.1 Health status of a service provider and his or her staff**

**7.1.1** A service provider shall have a health and safety policy at the facility and ensure that all staff adheres to the requirements.

**7.1.2** A service provider and his or her staff members shall obtain a valid health certificate from the national competent authority.

**7.1.3** A person who is suffering from, suspects that he or she is suffering from or is a carrier of an infectious skin condition or other communicable disease shall not perform any beauty treatment on a client unless he or she has been declared safe by a medical practitioner.

**7.1.4** A service provider and staff shall be immunised against Hepatitis B.

**7.1.5** Any staff member handling sharps shall ensure that the tetanus immunisation is valid at all times.

**7.1.6** A service provider and staff shall keep copies of their immunisation cards at their workplace for inspection at any time.

NOTE Immunisation should not be a replacement for good hygienic practices.

**71.7** A service provider or staff member who is under the influence of alcohol or sensory impairing drugs shall not carry out any beauty treatment on a client.

**7.1.8** Any potential contact with blood or other body fluids shall be approached with all the necessary precautions in accordance with Annex E or other suitable control measures.

NOTE There is still no vaccine available against HIV or Hepatitis C.

## **7.2 Fire safety**

**7.2.1** A service provider and the proprietor of a facility shall ensure that the facility meets the established requirements for fire safety by having adequate:

- a) firefighting equipment; and
- b) fire prevention equipment and systems in the facility.

**7.2.2** Firefighting equipment shall be serviced, tested and maintained in a manner recommended by the national competent authority.

**7.2.3** A service provider and the proprietor of a facility shall keep a record of servicing, tests and other maintenance procedures undertaken for fire safety equipment.

**7.2.4** Records kept shall be made available for inspection upon the request of the national competent authority.

**7.2.5** Firefighting equipment shall be easily accessible at all times by being located close to access points, near stairways, corridors and areas of particular risk.

**7.2.6** Water supplies for firefighting purposes shall be available and adequate at all times.

**7.2.7** Early warning devices shall be installed in a facility and shall be kept in a good condition.

**7.2.8** Facilities shall have adequate public liability and building fire insurance.

**7.2.9** Fire hazards and incidents shall be reported immediately to the national competent authority.

**7.2.10** Fire incidents shall be recorded in a fire log which shall be kept by the professional service provider and proprietor and shall be made available upon the request of the national competent authority.

## **7.3 Training in fire safety**

**7.3.1** A service provider and staff shall be well trained in fire safety and shall be able to test early warning devices regularly.

**7.3.2** Training shall be based upon an agreed plan of action to be taken in the event of a fire.

**7.3.3** Training in fire safety shall include:

- a) handling firefighting equipment;
- b) periodic emergency drills with the results documented; and

- c) familiarization with written emergency procedures.

#### **7.4 Exits**

**7.4.1** Exits shall be maintained to allow free egress from the facility at all times.

**7.4.2** Corridors, stairways and other passages shall be free from obstructions.

**7.4.3** Emergency exits shall be clearly marked "FIRE EXIT" which should be located above or adjacent to the emergency exit at all times.

**7.4.4** Emergency stairways shall exit into open air on the ground level.

**7.4.5** Stairways which exceed 1.2 m or 3.9 ft in width shall have handrails on both sides.

**7.4.6** Exit doors shall be easily opened from within without the use of a key.

#### **7.5 Emergency guidelines and procedures**

**7.5.1** Emergency lighting shall be provided and made accessible in public areas and escape routes where regular lighting fails.

**7.5.2** Facilities shall have a written emergency plan which should contain responses to natural or man-made disasters and which shall be reviewed periodically.

**7.5.3** Emergency call data shall be posted in a conspicuous place within the facility with the telephone numbers of the:

- a) fire service;
- b) police station;
- c) ambulance service;
- d) nearest hospital;
- e) national emergency management organization;
- f) any other agency the service provider deems necessary.

**7.5.4** Medical emergencies shall be managed in a manner to ensure the health and safety and well-being of all persons within the facility.

**7.5.5** After a report is made of an incident or accident, appropriate remedial action shall be taken to prevent or treat the accident which occurred.

#### **7.6 Electric safety**

**7.6.1** All service providers shall be fully trained in the use of any electrical equipment used at the facility.

**7.6.2** All electronic equipment shall be tested regularly.

**7.6.3** Where a fault is discovered with any electrical equipment:

- a) stop the use of the electronic equipment immediately;
- b) label the electronic equipment as faulty;
- c) report the discovery to the appropriate person; and
- d) complete and submit an incident report if applicable.

## **7.7 First aid**

- 7.7.1** A facility shall be properly stocked with a first aid kit.
- 7.7.2** First aid kit shall be checked and restocked every three (3) months.
- 7.7.3** Staff shall be trained in first aid and CPR.
- 7.7.4** At least one member of staff on duty at the facility should be trained in first aid.

## **8 Staff requirements**

### **8.1 Service providers**

- 8.1.1** A service provider shall be able to demonstrate his or her competency in his or her area of practice by recognised qualifications.
- 8.1.2** A service provider shall encourage continued professional development for all staff.

### **8.2 Dress code**

- 8.2.1** A professional appearance shall be maintained at all times.
- 8.2.2** A service provider and staff shall not wear a top that covers the lower arm.
- 8.2.3** Sleeveless garments shall not be worn or allowed.
- 8.2.4** A service provider and staff shall wear shoes that have a low-heel and that are enclosed.
- 8.2.5** A service provider or staff shall not wear any hand jewellery while on duty.
- 8.2.6** Appropriate adaptation shall be made for religious dress codes.

NOTE Excessive exposure of body parts, for example cleavage and thighs are inappropriate.

### **8.3 Staff and client relations**

- 8.3.1** The proprietor shall establish and maintain a policy for professional relationships between staff and clients.
- 8.3.2** A service provider and staff members shall maintain a professional relationship with clients.

**8.3.3** A service provider or staff member shall not require a client to remove his or her clothes unnecessarily.

**8.3.4** Modesty towels shall be used when appropriate for beauty treatment.

**8.3.5** All areas of the body shall be covered other than the area being treated.

## **8.4 Confidentiality**

**8.4.1** A service provider and staff shall keep a client's records as being strictly confidential.

**8.4.2** Information given to a service provider and staff shall be used by the professional service provider only for the purpose for which it was given.

**8.4.3** A service provider and staff shall not discuss a client's records or any other information about the client without that client's written consent.

**8.4.4** A client's record or other information about a client shall only be disclosed upon a request made by the client's doctor or legal authorities.

## **9 Record keeping**

**9.1** A service provider and staff shall create and maintain a secure database or record keeping system for the efficient operation of the facility.

**9.2** The database or record keeping system of a facility shall safely store:

- a) client's information;
- b) staff information;
- c) maintenance of equipment and facility records; and
- d) records that verify that the facility is continually adhering to this Code of Practice.

**9.3** A client's record should be kept for a minimum of five years, unless there is reason to keep it for an indefinite period.

**9.4** A client's record should be updated at every visit and where paper records are kept the client should counter-sign any changes that are made.

**9.5** A client's record shall be kept safe:

- a) in the case of a paper record, the client's record shall be kept in a cabinet or other form of storage that is locked and not easily accessible to anyone; and
- b) in the case of computer records, these should be protected by a password.

**9.6** Client records shall contain:

- a) general information about the client, such as;
  - 1) the name of the client;

- 2) the address of the client;
  - 3) any contact information of the client; and
  - 4) medical conditions of the client.
- b) the consent form signed by the client or, his or her guardian in the case of a child or vulnerable adult, to undertake a specific treatment;
  - c) the risks associated with any beauty treatment to be performed on that client;
  - d) the procedures that should be followed if an unexpected reaction to a beauty treatment occurs;
  - e) details of specific aftercare advice or an aftercare note that was given to the client after consultation with the client and after the client provides evidence to the service provider which includes:
    - 1) the date and time of release of the client from the facility;
    - 2) the condition in which the client left the facility on his or her release date;
    - 3) any recommendations for aftercare.
  - f) the reaction of the client to a beauty treatment;
  - g) and any relevant information or comments made by the client or service provider in relation to a beauty treatment.

**9.7** Client records shall be legible in ink or typed, signed and dated by the client.

**9.8** A service provider shall have an incident or accident log.

**9.9** Staff members shall report every incident or accident to their employer.

**9.10** After a report is made of an incident or accident, appropriate remedial action shall be taken to prevent or treat the accident which occurred.

## **10 Complaints**

**10.1** The facility shall have a policy to address any grievance and complaints made by a client.

**10.2** A client who is dissatisfied with a beauty treatment provided by a service provider shall indicate his or her dissatisfaction with the beauty treatment at the time of his or her dissatisfaction to the service provider and staff.

**10.3** Complaints shall be handled confidentially, fairly and promptly.

**10.4** Service providers and their staff shall be courteous and offer constructive solutions to complaints made by a client.

**10.5** A complaint shall:

- a) be made in writing;
- b) be recorded by the service provider;
- c) be acknowledged by the service provider within five working days;
- d) contain particulars of the matter complained of;
- e) identify the person against whom the complaint is made; and
- f) identify the complainant.

**10.6** The complaints procedure shall be accessible to all clients, monitored regularly, reviewed and evaluated periodically.

**Annex A**  
(informative)

**Examples of Beauty and Wellness Facilities**

Beauty and Wellness facilities include the following examples:

- a) hair salon;
- b) barber shop;
- c) spa;
- d) skin piercing facility;
- e) tattoo parlour; and
- f) esthetic parlours



**Annex B**  
(informative)

**Cleaning method**

- B.1** The following cleaning method should be followed:
- a) rinse the equipment in warm water (15-30°C) to remove any blood or body fluids. Hot water used at this stage will cause coagulation and the substances will stick to the instrument. Cold water will harden fats, making cleaning more difficult;
  - b) wash the equipment in a sink filled with warm water and a mild alkaline detergent to remove all visible soiling (strong alkaline detergents may damage some instruments). Hold the items low in the sink to limit the generation of aerosols during scrubbing. Use of a scouring pad can assist in removing stains;
  - c) rinse the equipment thoroughly in hot running water;
  - d) dry with a clean lint free disposable towel. Drying prevents residues from damaging equipment during disinfection or sterilization and also the over dilution of disinfection solutions; and
  - e) store under cover in a clean, dry and dust free environment.
- B.2** Alternatively all equipment shall be cleaned in accordance with manufacturers' specifications.

## **Annex C** (informative)

### **Disinfecting methods**

#### **C.1 High-level disinfection (HLD) by boiling**

High-level disinfection is best achieved by moist heat such as boiling in water (100°C for one-minute holding time), which kills all organisms except for a few bacterial spores. It is important to note that boiling equipment items in water will not achieve sterilization.

Steps of boiling:

- a) clean all items to be high-level disinfected;
- b) open all hinged instruments and disassemble those with sliding or multiple parts. Place bowls and containers upright so they fill with water. Make sure that all items are completely submerged because the water should touch all surfaces for HLD to be achieved;
- c) cover the pot or close the lid on the boiler and bring the water to a gentle, rolling boil;
- d) once the water is in a rolling boil, start timing for at least 1 minute. Use a timer or make sure to record when the boiling begins. From this point on do not add or remove any water or items;
- e) lower the heat to keep the water at a gentle, rolling boil. Too vigorous boiling may damage items and will speed the evaporation of the water;
- f) after 1-minute holding time, remove items using dry, high-level disinfected pickups;
- g) place items to air-dry on a high-level disinfected tray or on a high-level disinfected container that is away from dust and insects and in a low-traffic area. Never leave boiled instruments and other items in water that has stopped boiling; they can become contaminated as the water cools;
- h) store the dry items in a high-level disinfected and covered container and use items immediately or keep in a covered, dry, high level disinfected container and use within one week;
- i) the boiler should be emptied and dried daily.

#### **C.2 HLD by mechanical - thermal disinfection**

Disinfection by hot water can also be performed in specially constructed washing machines (e.g., for linen, dishes and cutlery). In these machines the processes of cleaning, of hot water disinfection, and of drying are combined in a very effective procedure, providing some items ready for use (e.g., respiratory circuits) or safe to handle (e.g. surgical instruments). The thorough initial rinsing and washing removes most of the microorganisms and results in shorter disinfection times. If machines are used, they should be regularly maintained and checked for efficacy.

## Annex D (informative)

### Sterilizing using moist heat

#### D.1 Autoclave

If an autoclave is to be used for sterilization, cleaned needles and sharps should be subjected to saturated steam under pressure at the following appropriate time and temperature ratios:

**Table D.1 – Ratios for autoclave sterilization**

Temperature	Holding Time (mins)	Pressure (kPa)
<b>120</b>	<b>15</b>	<b>103</b>
<b>126</b>	<b>10</b>	<b>138</b>
<b>134</b>	<b>3</b>	<b>206</b>

Needles should always be removed with sterile forceps to avoid any contamination. It is important that autoclaves are checked and serviced regularly to ensure that their operating times and pressures are appropriate.

## **Annex E** (informative)

### **Precautions against HIV and Hepatitis C**

The following recommendations have been developed by a competent authority for use in health care settings. Many of these same recommendations are also applicable in research labs where work with blood or other body fluids is being conducted.

#### **E.1 Universal precautions**

All workers shall routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure when contact with blood or other body fluids is anticipated. Gloves shall be worn for touching blood and body fluids, mucous membranes, or non-intact skin of all patients, for handling items or surfaces soiled with blood or body fluids, and for performing venipuncture and other vascular access procedures. Gloves shall be changed after contact with each patient. Masks and protective eyewear or face shields shall be worn during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of mucous membranes of the mouth, nose, and eyes. Gowns or aprons shall be worn during procedures that are likely to generate splashes of blood or other body fluids.

Hands and other skin surfaces shall be washed immediately and thoroughly if contaminated with blood or other body fluids. Hands shall be washed immediately after gloves are removed.

All workers shall take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures; when cleaning used instruments; during disposal of used needles; and when handling sharp instruments after procedures. To prevent needlestick injuries, needles should not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After sharps are used, they should be placed in puncture-resistant containers for disposal; the puncture-resistant containers should be located as close as practical to the use area.

Pregnant workers are not known to be at greater risk of contracting HIV infection than workers who are not pregnant; however, if a worker develops HIV infection during pregnancy, the infant is at risk of infection resulting from prenatal transmission. Because of this risk, pregnant workers should be especially familiar with and strictly adhere to precautions to minimize the risk of HIV transmission.

**Annex F**  
(informative)

**Contents of written emergency procedures**

**Written emergency procedures should contain the following:**

- a) the action on discovering a fire;
- b) the action upon hearing the fire alarm;
- c) the process of raising the alarm, including knowing the location of the alarm call points and alarm indicator panels;
- d) the correct method of calling the fire brigade;
- e) the location and use of firefighting equipment;
- f) the precise location of escape routes, including the use of any stairway not in regular use;
- g) the method of operating any special escape door that is fastened;
- h) how to close doors at the time of a fire and on hearing a fire alarm;
- i) the correct method for stopping and disconnecting electrically or gas-operated machines and for isolating power supplies;
- j) the operations of all escape doors not in regular use to ensure that they function satisfactorily;
- k) the evacuation plan and procedure; and
- l) any other general fire precautions.