Introduction to Hygiene in Beauty and Spa Therapy

INTRODUCTION

The aim of this booklet is to give therapists information about the types of infection which can occur in a salon or spa, the requirements of the law and inspection and practical advice on how to avoid the spread of infection.

This guidance covers infection control suitable for most beauty therapy treatments. It does not cover procedures for piercing, other than of the ear lobe using single use cartridge equipment.

Attention to hygiene and infection control has always been important in delivery of beauty and spa therapy treatments and is an integral part of the National Occupational Standards, which form the basis for beauty and spa therapy qualifications. The ever changing range of treatments and services means this needs to be kept under review for the protection of clients and therapists alike. The growth in the provision of intimate waxing services, the increase in providing complimentary snacks as well as drinks, new viruses and the increase in antibiotic resistant bacteria – all present new considerations for preventing cross-infection.

Whether you are a new therapist or someone who has run a salon or spa for years, we hope you find this guide interesting and informative.

Who are we protecting?

Infections caught as a result of beauty or spa treatments are extremely rare. However, the potential is there and good practice can significantly reduce the risk of cross-infection in the salon or spa. It is important to make sure that infection is controlled and not transmitted from person to person within the salon or spa, or taken out of the surroundings where a wide range of people could be infected.

The transfer of infection from one person to another is called cross-infection.

People with active diseases are an obvious source of infection and anyone suffering from obvious diseases should not treat clients or be treated. However, some people may be harbouring disease or be symptomless carriers in which case they may not be aware of the potential problems.
What are we protecting against?

There are four main types of infectious agents –

1. Bacteria

Bacteria are single cell living organisms that exist either as single cells (vegetative form) or as spores. The vegetative forms of bacteria are easily killed by the application of moisture or the use of chemicals, but the spores are much more resistant.

There is a wide range of bacteria. Many bacteria exist in the body e.g. the throat or the intestines and are harmless unless they are transmitted outside their normal environment.

It is essential that the risk of creating bacteria is reduced in the salon or spa, e.g. cotton wool pads should only be moistened before each treatment session, or at the beginning of each day, and then unused ones discarded at the end of the day. Leaving them to stand longer that this encourages bacteria to breed.

Under suitable conditions bacteria multiply rapidly, releasing toxins which can result in localised infection, pain or more chronic conditions, delaying healing and possibly resulting in scarring.

Most bacterial infections can be treated successfully with antibiotics.

Some of the common bacteria that could be present in a salon or spa are shown in the following table:

<table>
<thead>
<tr>
<th>Type of bacteria</th>
<th>Characteristics</th>
<th>Transmission/Diseases</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Staphylococcus aureus</em></td>
<td>Normally present in the nasal passages and on the skin. 30% of the population will carry it at any one time.</td>
<td>Spread by direct contact, coughing and sneezing. Causes skin infections such as boils or impetigo etc.</td>
</tr>
<tr>
<td><em>Streptococcus pneumoniae</em></td>
<td>Normally present in the throat.</td>
<td>Spread directly by infected droplets when coughing or sneezing, or indirectly through contaminated articles e.g. used tissues. 75% of bacterial pneumonia is caused by this bacterium.</td>
</tr>
<tr>
<td><em>Escherichia coli</em></td>
<td>Normally present in the intestines of animals. There are many strains.</td>
<td>Spread by oral-faecal contamination (not washing hands after going to the toilet), contact with infected animals and contaminated food. Can cause urinary tract infection, septicaemia, kidney disorders and diarrhoea.</td>
</tr>
<tr>
<td><em>Salmonella</em></td>
<td>Common on raw meats and poultry.</td>
<td>Spread person to person by oral-faecal route and by poor food handling/cooking. Causes food poisoning.</td>
</tr>
<tr>
<td><em>Pseudomonas</em></td>
<td>Can be water borne; they are a higher risk in the spa environment in under-chlorinated water.</td>
<td>Causes opportunistic infections, causing disease when a person’s immune system is already impaired. Can infect wounds, burns and can cause severe urinary tract infections.</td>
</tr>
</tbody>
</table>

**Impetigo**

*Staphylococcus aureus* and *Streptococcus pneumonia* can be spread by direct contact, sneezing and coughing.

Water borne bacteria are a higher risk in the spa environment and can cause opportunistic infections.
2. Viruses

Viruses are minute particles that can only reproduce within living cells. They can mutate to form new strains.

Viral infections are of far more concern in a beauty therapy setting than bacteria, especially blood borne viruses that cause Hepatitis B and C and HIV. They are not treatable by antibiotics. Common viruses that are of concern in a salon are described below.

**Hepatitis B**

Hepatitis B is highly infectious and found in blood and some other body fluids. It is very robust, being able to survive for long periods of time on work surfaces etc. and can be transmitted by very small volumes of blood – too small to see.

About 1 in 300 people are carriers of Hepatitis B. They do not appear ill themselves, but can still pass on the virus.

Hepatitis B is a notifiable disease but, due to its long incubation period, (2-6 months) the original source of the infection is often difficult to determine.

Hepatitis B virus can be destroyed by autoclaving.

A vaccine is available and is strongly advisable for therapists who are involved in electrical epilation, ear lobe piercing or other services where they could come into contact with blood.

**Hepatitis C**

This is present in blood and is usually transmitted through intravenous drug use and the sharing of needles. There is a small risk of infection via cuts or open wounds and this can be minimised by good hygiene practices.

Hepatitis C can be destroyed by autoclaving but vaccination against Hepatitis C is not available at the present time.

**HIV/AIDS**

Infection with HIV occurs primarily by contact with infected blood or via sexual contact. Transmission via blood is only usually a problem if fresh blood from an infected person passes directly into another person’s body by blood transfusion. The virus interferes with the immune system and impairs the body’s resistance to infection.

This leads to opportunistic infections from organisms that are normally present in the body but kept under control by the immune system. There are several stages to the disease with no obvious symptoms in all but the late stages of infection. It is only when the immune suppression occurs that patients are said to be suffering from Acquired Immune Deficiency Syndrome (AIDS).

No vaccination is available for HIV and although there is no known cure for AIDS, the onset of AIDS can be slowed by the use of antiretroviral drugs as part of the treatment for HIV.

**Herpes**

Herpes simplex virus is one of a family of herpes viruses all of which, once caught, remain in the body. There are two types that can cause symptoms on the face (facial cold sores), the genitals or on the hands and fingers (whitlows). About seven in ten adults already carry herpes simplex virus type 1 and one in ten already carry type 2 but may be symptomless.

The virus is passed directly from skin to skin. It enters easily through mucous membranes and through breaks in the skin on other parts of the body.
3. Fungal infections

Some fungi can cause a variety of infections of the skin and mucous membranes. The following fungi could be encountered in the salon:

**Candida albicans**

This is a common fungus found in the mouth and throat where it can cause thrush.

**Ringworm**

This is caused by a group of fungi, usually of the *Trichophyton* species. They can infect the skin, the scalp (*Tinea capitis*), the foot (*Tinea pedis*, commonly known as Athlete’s Foot) and the groin (*Tinea cruris*).

**Tinea versicolor**

This is a common scaly skin infection caused by a fungus known as *Malassezia furfur*. The condition is also known as *Pityriasis versicolor*.

In many cases, fungal infections are kept in check by competition from bacteria. If broad-spectrum antibiotics are given to control bacteria, fungal infections increase.

4. Infestations

Certain insects are associated with infections in humans, either as carriers of disease or by causing the infection themselves. These include lice and the scabies mite.

The three common lice which spread disease by sucking human blood are:

- pediculosis capitis – the head louse
- pediculosis corporis – the body louse
- pediculosis pubis – the pubic or crab louse

Scabies is caused by the scabies mite, *Sarcoptes scabiei*.

Lice and mites do not normally carry disease but they burrow into the skin causing intense itching. This, together with scratching, can result in secondary infection.

**What to do if your client has an infectious condition**

You are most likely to identify infectious conditions during the consultation process. Do not offer treatments or services to any client who exhibits signs of an infectious condition, as you would if you found any other contra-indication. Discreetly explain why the treatment cannot be carried out and encourage the client to seek medical advice.

In beauty salons and spas, consultations usually take place in the privacy of a treatment room. However, if it is busy and you are using an open area for initial consultation and discover a contra-indication, ensure you cannot be overheard or wait until privacy can be assured.

As a beauty or spa therapist, you are not qualified to diagnose medical conditions, so it is important you do not name specific infections or contra-indications when referring a client to their general practitioner, for example.

If the client tries to insist that you carry out the treatment, remember that besides the risk to the client and of cross-infection to you, your colleagues and other clients, it is the long-term professional reputation of you and your salon or spa that is more important than the income from one client.
How is infection transmitted?

The major routes of transmission are:

- by injection
- by direct contact
- by inhalation – breathing in
- by ingestion – swallowing

Injection
Whenever the skin is pierced, e.g. accidentally during electrical epilation or during micro-pigmentation and ear lobe piercing, there is a risk of cross-infection.

Direct contact
Faecal material and occasionally urine can contain infectious organisms, which can be passed from person to person by direct contact, e.g. not washing hands after going to the toilet, or during intimate waxing if inadequate skin preparation has taken place. The risk of serious infection is increased in the presence of wounds, which can themselves become sources of further infection, e.g. by producing pus.

Contaminated equipment, towels, cotton wool pads etc. in contact with the skin can cause infections such as impetigo and, if wounds are present, Streptococci and Staphylococci may be introduced into the body.

Fungal and insect infestations can be spread by direct contact.

Inhalation
Respiratory infections such as colds and flu are spread by coughing or sneezing. The mouth and throat are exposed to airborne organisms that the body rejects via the coughing/sneezing reflex. In a spa environment, aerosols or water droplets can be inhaled due to the vigorous agitation of water, making legionella bacteria easy to spread if the water is not maintained correctly, through accurate management of water cleanliness, disinfection, chlorination and chemical levels.

The Health and Safety Executive (HSE) has partnered with the Health Protection Agency to develop the publication ‘Management of Spa Pools—Controlling the Risks of Infection’

Further information can be found at www.hse.gov.uk/legionnaires/spa-pools.htm

Ingestion
Organisms can be swallowed and infect the digestive system causing, for example, food poisoning and resulting in symptoms such as diarrhoea and dehydration.

Common causes of this are consuming contaminated food or water and touching the mouth with contaminated hands following failure to wash hands after handling food or using the toilet. Clients must also be advised not to immerse their faces in spa pools.
How can infection be prevented?

Salon and spa design

A well designed salon or spa can go a long way towards making infection control simple and the following guidelines should be followed:

- walls and floors should be capable of being cleaned easily and solid flooring, rather than carpets, is advisable
- work surfaces should have a hard, impervious surface such as laminate or stainless steel
- chairs and couches should have a cleanable, impervious surface such as vinyl
- washing facilities with hot and cold water are essential to enable the therapist to wash hands between each client and these facilities should be as close as possible to the working area
- ideally taps should be infrared, elbow or foot controlled and disposable paper towels should be used, rather than fabric reusable towels
- toilet facilities should be suitable for use by anyone in the salon or spa and should be kept clean
- there should be adequate storage space for materials and equipment
- sufficient room should be allocated for sterilisation equipment, if used
- spa environments must have adequate ventilation, drainage and disinfection measures and have been installed by reputable installers and commissioning engineers, to ensure so far as reasonably practical, that it is safe and without risks to health at all times
- there should be separate disposal facilities and procedures for general waste, waste contaminated with human tissue and body fluids (Group A clinical waste) and sharps (Group B clinical waste)
- there should be provision of rest facilities and an area to eat and drink away from the treatment and storage areas; eating and drinking should not be allowed in the treatment area
- areas where appointments are made, money handled etc. should ideally be separate from the treatment area

Personal hygiene

All members of staff in a salon or spa must maintain a high standard of personal hygiene and cleanliness. This contributes to high standards of client care, as well as good hygiene practice. The following guidelines should be followed:

- well-trimmed nails and long hair tied back
- minimal jewellery, particularly around the hands, wrists and arms
- clean uniforms, washed at high temperatures, such as 60 degrees C and above, with short sleeves. Long sleeves can become contaminated, causing cross-infection when touching the client
- hands must be washed before and after treating a client and after handling food, using the toilet, handling money etc. Use soap, preferably from a liquid soap dispenser where the whole assembly is disposed of, once the soap has run out
- disposable gloves should be worn where there is, or may be, contact with mucous membranes such as during intimate waxing, or blood or serum where spotting may occur during waxing areas of the body with coarse hair, and other treatments such as bio skin jetting, micro-dermabrasion and micropigmentation
gloves should be replaced after each client
• any cuts or abrasions should be covered with a waterproof dressing
• regular showering/bathing to remove dirt from hands, arms etc. and also to prevent body odour

Types of gloves

Traditionally, single use latex surgical gloves have been used as a protection against infection. However, there are an increasing number of cases of latex allergy which can, in extreme circumstances, result in anaphylactic shock and even death. Alternative types of gloves are available, such as nitrile or PVC, and these should be used in beauty and spa situations. If anyone using latex gloves, or in contact with latex, shows signs of skin irritation or an allergic reaction, further contact should be prevented.

With micropigmentation, gloves that are CE-marked for use with biological agents are recommended in case the therapist comes into contact with used pigment.

Care should be taken to put gloves on and take them off correctly, so that the inside of one glove is not contaminated by contact with the outside of the other. Users should be trained to discard disposable gloves by inverting them as they take them off so that contaminated surfaces are enclosed when discarded in the waste.

Remember, the use of disposable gloves does not eliminate the need for good hand hygiene.

Hand washing

Hand washing should take place prior to and after any physical contact with the client or any possible blood or body fluid exposure.

To be sufficiently effective for prevention of cross-infection in a salon or spa situation, this involves a thorough 10-20 second wash of the hands and wrists using water and a liquid soap, followed by a thorough drying. Single use paper towels are preferred to fabric, reusable towels.

If taps cannot be turned off without using the hands, using a paper towel over the tap to turn it off can prevent recontamination.

Areas of the hands most frequently missed, when washing

The areas of the hand which are particularly prone to harbouring micro-organisms are between the fingers, the finger tips and the thumb, identified in the diagram in red; and the back of the hand and the wrists that are identified in peach. These areas should be thoroughly cleaned as part of a normal, thorough hand washing.
The Health and Safety Executive website publish a Skin care chart, showing how to wash hands correctly.

You can find it at:

**Sterilisation, disinfection and cleaning**

Although the total removal of micro-organisms, such as bacteria from the working environment, is desirable, this is impossible in practice.

The greatest risk of cross-infection occurs when the skin is cut or pierced and the equipment used for this, particularly needles, **must** be sterile. Using disposable, single use equipment, or sterilising the equipment between each client, or a combination of both can achieve this.

Work surfaces need to be disinfected with a chemical disinfectant such as bleach, whereas other surfaces such as walls and floors need cleaning with detergents and hot water.

**Sterilisation**

Sterilisation is the total removal or destruction of all living micro-organisms and is an absolute term. There is no such thing as 'partial sterilisation' – an object is either sterile or it isn’t!

The most reliable method of sterilising equipment is moist heat using steam under pressure, such as an autoclave. It is important that the correct type of autoclave is purchased for the type of sterilisation required by the equipment placed in it.

More detailed guidance can be found in Section 6 of “Guidelines for Control of Infection in Special Treatments (Tattooing and Piercing)” courtesy of the South West London Health Protection Team.

What follows is an overview.

Effective sterilisation using a benchtop steriliser relies upon correct use and maintenance of the unit, which can be complex and time consuming. All persons operating benchtop autoclaves should have received training on the safe use of transportable autoclaves and follow manufacturers’ instructions. Training is often provided by manufacturers but needs to be requested by the operator. All training should be documented.

Traditional benchtop steam autoclaves (non-vacuum) are considered suitable for solid or unwrapped items. Pouches or other wrappings must **NOT** be used in these autoclaves.

If your salon or spa uses ‘wrapped/pouched items’, such as gauze swabs, or instruments with lumens, such as tubes, ideal sterilisation practice is to use a vacuum autoclave. This is to ensure that all parts of the load (especially hollow tubes) are exposed to steam at the required temperature. It is important that such a steriliser has a vacuum drying cycle as well, so that resultant loads are dry at the end of the cycle. Wet, or damp, pouches cannot be regarded as sterile as bacteria can penetrate into them.

For both types of autoclave, however, it is essential that the instruments are thoroughly cleaned by manual means to remove visible contamination **BEFORE** they are autoclaved. Do not overload the autoclave. It is important to allow room between the various items of equipment so that heat penetration can take place.

The time required depends on the actual temperature setting. Commonly three minutes at 134 degrees C will kill all organisms.

Most equipment will have a temperature and pressure gauge and readings should be taken and recorded together with the sterilisation time for the first cycle each day. It is recommended that these records be kept for a minimum of two years.
To further ensure that the autoclave is working effectively coloured paper strips or tapes can be used which change colour in the autoclave when sterilisation conditions have been achieved.

Autoclaves must always be used and maintained strictly according to the manufacturers’ instructions.

Single Use Equipment

Equipment such as needles for electrical epilation and needles and needle covers/tips used for micropigmentation, microlances used for milia extraction and equipment for ear lobe piercing etc. can be purchased in single use sealed sterile packs. These should only be opened immediately prior to use, as once equipment is exposed to the air it will be open to contamination by micro-organisms.

Such sharp single use equipment must be disposed of safely after use, as Group B clinical waste.

Clean towels and linen must be provided for each client. Dirty towels must be laundered at a minimum of 60 degrees C.

Disinfection

This is the removal of micro-organisms by chemical or physical means. The level of decontamination depends on duration of exposure to lethal levels of disinfectants. Unlike sterilisation, disinfection does not remove all micro-organisms but reduces the population to safe levels. Disinfection does not usually kill bacterial spores. You must not rely on disinfection where sterilisation would be appropriate.

Many disinfectants deteriorate when stored or are inactivated by other contaminants. They should therefore be made up freshly, according to the manufacturers’ instructions.

The process of disinfection is not usually as well-controlled as the process of steam sterilisation. Disinfection has an inherently lower quality assurance than sterilisation and must be performed thoroughly and carefully.

Equipment/surface disinfecting

The disinfectants used are highly active chemicals and must be handled with care. The concentration of the disinfectant used is usually a compromise between maximum effectiveness and prevention of health risks to the user.

As with sterilisation, gross contamination (visible dirt etc.) should be removed from equipment and surfaces before disinfecting. This is because organic material (dead skin, blood etc.), as well as detergents, can deactivate the disinfectant.

Hypochlorite solutions (bleach) are recommended for disinfecting work surfaces and general equipment and for cleaning up blood and other body tissue spillages. Unfortunately, normal household bleach does not have a standard concentration. Commonly given guidance is that normal household bleach, based on the usual concentration of sodium hypochlorite of around 5.25%, should be diluted 1:100 with water for general use and 1:10 for blood spillages, vomit, urine etc.

Work surfaces should be disinfected regularly to help prevent cross-infection, as well as for aesthetic reasons of salon and spa cleanliness. Work surfaces includes taps, door handles, light switches, telephones and computer equipment. Since these are in constant use by staff and/or clients and in the case of electrical equipment, not suitable for wet cleaning, the hands must be washed between touching these and susceptible treatment sites on clients.

A disposable paper cover should be used on couches etc. for each client.

Glutaraldehyde Health Warning

Once widely used for disinfection, glutaraldehyde can now only be used under strictly controlled conditions, such as in medical laboratories and must not be used in salons or spas. Glutaraldehyde is a respiratory sensitizer and over a period of time it can cause serious asthma. Misuse can result in prosecution.
Skin Preparation

Household bleach is not for use on the body. For treatments with a risk (intentional or otherwise) of release of body fluids, the most common skin disinfectant is ethyl or isopropyl alcohol (a 70% solution in water) sometimes with the addition of chlorhexidine. The disinfectant should be bought as a solution or as impregnated disposable wipes.

Application of Products and Use of Equipment

All products including oils, peroxides and disinfectants should be dispensed either by using disposable spatulas in the case of solids or thick liquids, or by pouring into a separate container in small quantities before use, making sure that the containers do not become contaminated.

NEVER return unused products, such as peroxide, to the original containers as this can cause cross-infection.

NEVER use the same spatula for different products.

Wherever possible, purchase products in single use packs.

In waxing, current accepted practice is that a new spatula is used for each client. Many therapists also use a new spatula for each new area of the body to be waxed. However, increasingly therapists are moving to the use of single client pots, cartridges and disposable applicator heads.

If not using single client equipment, the risk of cross-infection can be further reduced by using a new spatula for each dip into the wax pot, and this is increasingly recommended.

Further guidance can be found in the Habia Code of Practice – Waxing Services.

Aftercare advice for all treatments, particularly for waxing, ear lobe piercing, micropigmentation, electrical epilation and micro-dermabrasion, need to be stressed to the client and, ideally, reinforced with written aftercare instructions to help avoid post-treatment infections.

You must ensure the safety and purity of the pigments that you intend to use for micropigmentation. Some imported pigments have been found to contain high levels of contaminating bacteria and fungi, despite claiming to be sterile. Some colours contain high levels of nickel and copper, which could cause adverse skin reactions in some individuals, so it is very important to ask clients about any known allergies. It is good practice to purchase only those pigments from reputable suppliers that are accompanied by a detailed product data sheet, confirming their sterility, suitability for human intra-dermal injection and that comply with your requirements under the Control of Substances Hazardous to Health (COSHH).

Remember that all chemicals used must be assessed under COSHH and users informed of any risks identified.

Electrical epilation needles must be disposable single use.
**Ear Jewellery**

All jewellery used for ear lobe piercing should be sterile.

The use of nickel containing jewellery is subject to the Dangerous Substances and Preparations (Nickel)(Safety) Regulations. If nickel containing jewellery is used, ask the supplier to confirm that it complies with the regulations.

Silver is not suitable for new or unhealed piercings due to its property of tarnishing easily and the fact that micro-organisms can become trapped in the soft metal.

The recommended metals are as follows:

- surgical stainless steel
- titanium (6AL-4V)
- gold, of at least 14 carat

Many gold alloys may not be suitable due to possible allergic reaction whilst 18 carat gold is usually too soft.

**What does the law require in relation to hygiene?**

The Environmental Health Department of the local authority is responsible for ensuring that businesses offering beauty and spa treatments and services comply with the relevant law. You should complete a form OSR1 and send to the local authority when you start your business. You may also need to apply for a Special Treatment License too, depending upon your individual local authority.

There are many pieces of legislation that apply to the running of a salon or spa. These are covered in the Habia Health and Safety Pack for Salons. Legislation of particular relevance to salon and spa hygiene and preventing cross-infection is described below.

**The Health and Safety at Work Act Regulations**

This Act requires employers and the self-employed to look after the health and safety of themselves, their employees and any other persons who may be affected by their activities.

**The Management of Health and Safety at Work Act Regulations**

This Act requires employers to assess the risk to health and safety of employees and clients, which could arise in the salon or spa and take the appropriate action to minimise or eliminate the risk. The Act also requires the employer to document such assessments and make staff aware of any procedures required.

**Workplace (Health, Safety and Welfare) Regulations**

These regulations cover all businesses and require employers to:

- maintain the workplace and all equipment in a safe condition
- provide adequate heating and lighting
- provide suitable toilets and washing facilities
- maintain the workplace in a clean condition and provide facilities for storing and disposing of waste safely
Local Government (Miscellaneous Provisions) Act and Local Government Act (Section 120)

The 1982 Act allows local authorities to make bylaws and these cover electrical epilation, ear lobe piercing and tattooing.

The 2003 Act amends the 1982 Act to cover micropigmentation and all cosmetic body piercing. Micropigmentation is the insertion of pigment into the dermal layer of the skin, also known as semi-permanent make-up.

Each local authority is free to introduce its own bylaws under the Acts but, in practice, they tend to follow the ‘model bylaws’.

The relevant bylaws set the standards for cleanliness of premises and fittings, cleanliness of registered persons and their assistants and for the cleansing and, where appropriate, sterilisation of instruments, materials and equipment used in connection with the activities.

For cosmetic body piercing, both the person undertaking the activity and the premises must be registered with the relevant local authority where the local authority has adopted the Act, and a certificate does not mean the premises are safe. This can only be confirmed following a visit from a local authority Environmental Health Officer.

Greater London Council (General Powers) Act and London Local Authorities Act

These Acts cover the London Boroughs and require registration of both the premises and the practitioner for any premises offering ‘special treatments’.

These are defined as:
- massage
- manicure (and nail services generally)
- tattooing, including micropigmentation
- cosmetic piercing
- chiropody
- light, electric or other special treatments of a like kind e.g. UV treatments
- vapour, sauna or other baths

What records do I need to keep?

If you have less than five employees the records you have to keep legally are minimal. However, if you have to defend yourself in a court of law, the fact that you can produce records will be in your favour.

Therefore, it is recommended and good practice that you keep the records outlined below:
- if you have five or more employees you must record the significant findings of your COSHH assessment
- your autoclave sterilisation records
- the treatments given to clients, together with dates and any contra-indications
- suppliers and product batch numbers

How do I dispose of waste safely?

Most waste produced in beauty salons or spas is not contaminated by human tissue and can be disposed of as general waste. However, some treatments can produce contaminated (clinical) waste, including waxing (blood spotting), electrical epilation, micro-dermabrasion, micropigmentation, bio skin jetting or milia extraction.

Cotton wool, cloths and anything contaminated with human tissues are designated as Group A clinical waste under the Environmental Protection Act and the Controlled Waste Regulations.

Apart from sharps, clinical waste should be placed in yellow refuse sacks which should be sealed with a plastic tie or a heat sealer, when no more than ¾ full. Do not place clinical waste in general rubbish.
Needles are designated as Group B clinical waste, which means they should be put in purpose-made yellow sharps boxes, made of a hard substance such as plastic. Do not overfill the boxes which should be sealed when ¾ full.

All clinical waste must be disposed of using a waste carrier registered for carrying and disposal of clinical waste.

Small companies, like salons and spas, must ensure that the waste carrier is registered and delivers the waste to a licensed waste management site where the waste can be dealt with by incineration at high temperature.

Contact your local authority for advice concerning waste carriers and disposal in your area.

<table>
<thead>
<tr>
<th>Waste</th>
<th>Container</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Group A – High Risk</strong></td>
<td>Yellow sack</td>
<td>⇒ keep separate from all other waste&lt;br&gt;⇒ waste assessed as infectious or hazardous should be autoclaved prior to approval</td>
</tr>
<tr>
<td>⇒ all human tissue including blood e.g. waste from cosmetic fillers and colonic irrigation&lt;br&gt;⇒ cotton wool, cloths and anything contaminated with human tissue&lt;br&gt;⇒ waste materials where assessment indicates a risk to staff handling them, e.g. items used to mop blood spills accidentally incurred during treatments such as, waxing, electrical epilation, comedone extraction&lt;br&gt;⇒ soiled surgical dressings, swabs and soiled contents of first aid hygiene packs</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Group B – High Risk</strong></td>
<td>Sharps container</td>
<td>⇒ keep separate from all other waste</td>
</tr>
<tr>
<td>⇒ discarded syringes, needles, cartridges, small items of broken glass e.g. syringes used for cosmetic fillers, syringes used for administering injectable treatments and needles used in electrical epilation and bio skin jetting&lt;br&gt;⇒ sharp instruments e.g. microlances used in milia extraction</td>
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</tr>
<tr>
<td><strong>Group C – Most Hazardous</strong></td>
<td>Yellow sack</td>
<td>⇒ autoclave prior to disposal&lt;br&gt;⇒ keep separate from all other waste</td>
</tr>
<tr>
<td>⇒ microbiological cultures&lt;br&gt;⇒ potentially infected waste from laboratories&lt;br&gt;⇒ viable genetically modified organisms</td>
<td></td>
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</tr>
<tr>
<td><strong>Group D –</strong></td>
<td>Secure container e.g. bottles, jars</td>
<td>⇒ do not dispose of in a yellow sack or sharps container</td>
</tr>
<tr>
<td>⇒ pharmaceutical and chemical waste</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Group E – Lowest Risk</strong></td>
<td>Yellow sack or straight to sewer</td>
<td>⇒ keep separate from all other waste</td>
</tr>
<tr>
<td>⇒ items used to dispose of urine, faeces and other bodily secretions e.g. cotton wool or wipes used to cleanse the skin prior to treatments&lt;br&gt;⇒ other bodily secretions assessed as not falling within Group A</td>
<td></td>
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</tr>
</tbody>
</table>

Where to go for more information

*Department of Health website [www.dh.gov.uk](http://www.dh.gov.uk)*

Downloads of specific legislation and associated guidance, including:

- Local Government Act - Regulation of Cosmetic Piercing and Skin-Colouring Businesses: Guidance on Sections 120 and Schedule 6

*Health and Safety Executive (HSE) website [www.hse.gov.uk](http://www.hse.gov.uk)*

A wide range of advice, downloads and products, some for specific industries, including:

- blood borne viruses in the workplace: guidance for employers and employees
- selecting protective gloves for work with chemicals
- operating spa pools
Habia website www.habia.org

- Health and Safety for Salons Beauty Therapy Pack
  (with an optional update subscription service)
- Guidance on the safe use of lasers and IPL for hair removal
- Hygiene for Beauty Therapists
- Hygiene for Hairdressers and Barbers

Clinical Waste Disposal

Further information on how to dispose of clinical and human hygiene waste can be found in guidance from the Health Services Advisory Committee or by contacting your local Environment office, or your local authority Environmental Health Department.

Health Service Advisory Committee Safe Disposal of Clinical Waste HMSO, London

Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anaphylactic Shock</td>
<td>The severest form of an allergic reaction, which is a medical emergency</td>
</tr>
<tr>
<td>Antiretroviral drugs</td>
<td>Drugs specifically designed to block the action of retro-viruses, a very rudimentary type of virus of which HIV is the most notorious</td>
</tr>
<tr>
<td>Bacterial spores</td>
<td>A highly resistant, resting phase displayed by some types of bacteria. Spores are formed in response to adverse changes in the environment. The original cell replicates its genetic material and one copy of this becomes surrounded by tough coating. They are harder to destroy than bacteria</td>
</tr>
<tr>
<td>Chronic</td>
<td>A condition that continues for a long time and constantly reoccurs</td>
</tr>
<tr>
<td>Clinical waste</td>
<td>Clinical or contaminated waste is any waste that is contaminated by blood or body fluids</td>
</tr>
<tr>
<td>Impervious</td>
<td>A surface that does not allow infection to pass through it</td>
</tr>
<tr>
<td>Impetigo</td>
<td>A contagious skin disease, caused by bacteria. The skin appears red and itchy, then blisters appear which burst to form crusts. Commonly found around the mouth and ears</td>
</tr>
<tr>
<td>Intravenous</td>
<td>Injecting drugs in to the vein</td>
</tr>
<tr>
<td>Micro-organisms</td>
<td>Organisms that are not visible to the naked eye, such as bacteria</td>
</tr>
<tr>
<td>Micropigmentation</td>
<td>The application of semi-permanent pigment inserted into the dermal layer of the skin, also known as semi-permanent make-up and cosmetic tattooing</td>
</tr>
<tr>
<td>Nitrile</td>
<td>A material that is used to make disposable gloves</td>
</tr>
<tr>
<td>Opportunistic Infections</td>
<td>Micro-organisms that are normally harmless to a healthy person but debilitate a person whose immune system is weak from conditions such as HIV/AIDS, or undergoing chemotherapy treatment for cancer</td>
</tr>
<tr>
<td>PVC</td>
<td>A material that can be used to make disposable gloves</td>
</tr>
<tr>
<td>Secondary Infection</td>
<td>An infection that is caused by the aggravation of a pre-existing primary infection or break in the skin (e.g. from psoriasis, eczema). For example, a secondary infection from head lice can be impetigo</td>
</tr>
<tr>
<td>Septicaemia</td>
<td>Blood poisoning caused by micro-organisms in the blood. Seen on the skin as a rash in meningitis sufferers</td>
</tr>
<tr>
<td>Sterile</td>
<td>Free from all micro-organisms</td>
</tr>
</tbody>
</table>
About Habia....

Habia is recognised by Government as the Standards Setting Body for the hair and beauty industries and plays an essential role in maintaining and improving professionalism within them. Part of the SkillsActive group, the Sector Skills Council for Active Leisure, Learning and Well-being, allows the hair and beauty industries more opportunities and access to a wealth of experience and resources for the sector.

Through its drive to raise standards that are held in high regard and respected worldwide, Habia provide a solid benchmark for education and industry and a voice to Government. Habia works closely with education and the industry providing up to date information on education, qualifications and skills and, as a not for profit organisation, Habia invests all surplus revenue back into funding projects that will benefit the hair and beauty industries.

Habia's responsibilities and duties are many and varied; developing the Standards that form the basis of all UK recognised hair and beauty qualifications, the creation of Codes of Practice and Industry Guidelines, the creation of and supported by Government Register of Professional Beauty Therapists, advanced skills training and CPD opportunities to educators as well as additional skills and business related support to those working in industry.

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