THE ASSOCIATION OF PROFESSIONAL PIERCERS
Recommended Response & Recovery Interim Protocols

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The Association of Professional Piercers (APP) is an international health and safety organization. It is a nonprofit voluntary alliance dedicated to the dissemination of information about body piercing. Governed by a voluntary elected Board of Directors, the APP is a united group of piercing professionals that freely shares information to help fellow members, piercers, healthcare professionals, legislators, health inspectors, and the general public get the best and most up-to-date information about body piercing.

For most countries around the world, the COVID-19 pandemic has forced the closure of body art facilities (including body piercing, tattooing, and other elective body art procedures). As countries seek to reopen their economies and ease measures like forced business closings and social distancing, the APP has sought to give accurate, appropriate, and achievable guidelines for all body artists to follow to decrease the spread of COVID-19 and lower the impact in their workplace.

We continue to recommend that body art professionals follow local, state or provincial, and national guidelines regarding closure of non-essential business operations and, within these guidelines, make decisions that are best for them and their individual situations.

The COVID-19 pandemic has had a terrible impact on all body art businesses and the people who work in them. It has sickened and killed hundreds of thousands worldwide. Through it all, body artists have stuck together, freely shared information, and readied themselves to return to work and serve their clientele. The Association of Professional Piercers would like to thank the body piercing and body art community for their resiliency, professionalism, and commitment to health and safety.

During this pandemic, information continues to evolve very quickly. The authors of this document will make every effort to make regular updates as new and better information becomes available. If you have suggestions for improvements to this document please email the secretary of the APP at secretary@safepiercing.org
THE IMPORTANCE OF LOCAL GUIDELINES

Because COVID-19 has affected different parts of the world in dramatically different ways, it is important to follow local, state or provincial, and national guidelines. This means taking measures to keep yourself informed of what these rules, guidelines, and policies are and regularly researching updated information from reliable sources.

In the United States, the Center for Disease Control (CDC) has developed a way for local communities to determine their risks going forward and their path to reopening their economies:

“Public health control activities by level of COVID-19 community transmission”

- None to Minimal – Evidence of isolated cases or limited community transmission, case investigations underway, no evidence of exposure in large communal setting, e.g., healthcare facility, school, mass gathering.
- Minimal to Moderate – Widespread and/or sustained transmission with high likelihood or confirmed exposure within communal settings with potential for rapid increase in suspected cases.
- Substantial – Large scale community transmission, healthcare staffing significantly impacted, multiple cases within communal settings like healthcare facilities, schools, mass gatherings etc.”

These categories will no doubt play a large role in your local government’s assessment of when non-essential businesses may resume business. If body art isn’t specifically addressed in your local rules and guidelines, please contact your local health agency for direction, or if that is not possible, follow the closest comparative standard such as the rules applied to cosmetology and massage therapy industries.

CDP - Clean, Distance, and Protect

The APP has developed a three-pronged approach for body art facilities (BAFs) and staff members to follow in addition to their normal precautionary measures. These measures are built upon enhanced Cleaning, continued social Distancing, and expanded use of Personal Protective Equipment (PPE). We call this the “CDP” approach. We recommend that BAF management institutes protocol training and ensures staff participation. This training must take place before any staff member is allowed to return to work. Management should solicit input from non-managerial staff members who are potentially exposed for this protocol development. This training should include, but not be limited to universal precautions, the effective use of disinfectants, antiseptics, and personal protective equipment (PPE), cross contamination prevention, and hazard communication.

CLEAN

Cleaning should always take place wearing appropriate PPE for the task at hand. In general, disinfection should take place with an EPA approved (or international equivalent) hard-surface disinfectant.

Enhanced Cleaning Protocols include but are not limited to:

a. Disinfecting regularly used surfaces, such as countertops, pens, tablets, seating areas, bathrooms, and door handles between clients
b. Hand hygiene for practitioners and other customer service employees before and after every interaction with a new customer
c. Encourage customers to use touchless payment options, when available. Minimize handling cash, credit cards, reward cards, and mobile devices, where possible.
d. Each new customer should be given the opportunity to perform hand hygiene (hand washing or hand sanitizer) when they enter the BAF
e. If jewelry is handled by a customer, immediate disinfection of that jewelry should be performed (an alternative would be to have customers wear gloves before handling jewelry, or disallowing handling of any jewelry in the facility)
f. HEPA filter air filtration (filters to be changed while wearing appropriate PPE)
g. Increasing ventilation to outside air by opening windows or adjusting air conditioning in office and waiting areas
h. Waiting areas: Minimum 6 total air changes per hour with air movement inwards in relationship to adjacent areas
i. Procedure room: Minimum 6 total air changes per hour with air movement outwards in relationship to adjacent areas
j. Processing and decontamination room: Minimum 6 total air changes per hour with air movement inwards in relationship to adjacent areas
k. Keep your facility as well ventilated as possible for increased exchange of outside air.

Additional suggestions
- OSAP COVID-19
- OpenWHO Infection Prevention and Control (IPC) for Novel Coronavirus
- OSHA Guidance on Preparing Workplaces for COVID-19

3 https://www.cdc.gov/infectioncontrol/guidelines/environmental/appendix/air.html#AppendixI
4 https://www.cdc.gov/infectioncontrol/guidelines/environmental/appendix/air.html#tableb1
5 ibid
6 ibid
DISTANCE

Social distancing is one of the key practices of the COVID-19 pandemic response. As forced closures of non-essential businesses are lifted, social distancing measures are still needed to be utilized to prevent the spread of the virus. In addition, because body art can be planned in advance, this is an opportunity for staff members to screen customers and eliminate unnecessary face-to-face interactions.

Social Distancing measures in body art facilities include but are not limited to:

a. Making every effort to keep 6-feet or more apart unless a procedure is taking place
b. Minimizing the amount of customers in the BAF. This includes switching to performing procedures by “appointment only”, (no walk-ins)
c. Limiting body art procedure areas to the customer and the artist/technician only
d. Limiting customer companions to digital means (via digital conferencing applications) unless required by law (minor piercings, genital piercing)
e. Screening clients for symptoms digitally or by phone before entering facility
f. Limiting employees on staff to minimum
g. Strongly considering special accommodations for personnel who are members of a vulnerable population
h. Moving as many services as possible to video conferencing/email (troubleshooting, for example)
i. Marking areas on the body art facility floor to designate a 6-foot perimeter distancing
j. Encouraging clients to wait in their cars until their artist/technician is ready. At a bare minimum closing off waiting areas and contacting customers via phone when their artist/technician is ready for their procedure.
k. Refusing service to any client who arrives with symptoms
l. Refusing to allow symptomatic employees to work
m. Asking employees to self monitor their temperature before leaving for work
n. Develop and agree to a response plan in case someone in the workplace becomes ill with symptoms of COVID-19. This plan should include at least:
   i. – Identify a room or area where someone who is feeling unwell or has symptoms can be safely isolated
   ii. – Have a plan for how they can be safely transferred from there to a health facility.
   iii. – Know what to do if a staff member tests positive for COVID-19 during or just after their work shift
   iv. – Agree to the plan in advance with your partner health care provider or health department.

o. If employee develops symptoms at work, follow the protocol you’ve developed, gather together the names of the clients they worked with, and contact your local department of health.

Additional suggestions

- Monitor and record employee temperature with a non-contact thermometer device in the facility several times a day (if allowed by local law).
- Monitor and record each client’s temperature non-contact thermometer device (if allowed by local law and client consents to this).

Protect

The use of personal protective equipment (PPE) is already an every-procedure-practice in body art facilities. Once again, due to the airborne nature of the novel coronavirus, more extensive and new PPE practices are recommended during this pandemic until new information is gathered.

The enhanced use of PPE includes but is not limited to:

- PPE use such as gloves and face protection by all employees, including customer service employees, management, and artists/technicians.
- The use of facemasks, eye protection, face shields for all body art procedures
- All employees wearing new disposable gloves for each interaction with a new customer, and performing hand hygiene whenever gloves are changed
- Advising customers before entering the facility, regardless of symptoms, to put on a cloth face covering or facemask
- BAF and its staff should assess exposure risks of performing individual procedures based on the data available and their general understanding of the procedure. Appropriate policies should be made and reviewed regularly

Additional suggestions

- Use discretion and consider reducing non-essential nasal and oral procedures until we have more relevant data.
- If available, set up hand sanitizer and face masks for clients at the entrance of the BAF.
- Post visual media (e.g., signs, posters) at the entrance and in strategic places (e.g., waiting areas, entrances) to provide instructions (in appropriate languages) about hand hygiene and respiratory hygiene and cough etiquette. Instructions should include wearing a cloth face covering or facemask for source control, and how and when to perform hand hygiene.

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9 [Rational use of personal protective equipment for coronavirus disease (COVID-19) and considerations during severe shortages](https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html)