BODY ART FACILITY INFECTION PREVENTION AND CONTROL PLAN GUIDELINE

In accordance with the California Health and Safety Code (HSC), section 119313, a body art facility shall maintain and follow a written Infection Prevention and Control Plan (IPCP), provided by the owner or established by the practitioners, specifying procedures to achieve compliance with the Safe Body Art Act.

The facility owner shall file a copy of the IPCP with the Local Enforcement Agency (San Joaquin County Environmental Health Department) and maintain a copy at the body art facility.

The facility owner shall provide onsite training on the facility's IPCP to the body art practitioners and employees or individuals involved with decontamination and sterilization procedures.

The facility owner shall provide training when initially assigning tasks where occupational exposures may occur, anytime there are changes in the procedures or tasks or when adopting new technology for use in the body art facility, but not less than once each year. The facility owner shall maintain records of training on-site for three years.

The facility owner shall maintain a current IPCP and update the Plan whenever there are changes to any of the procedures or tasks or when the facility adopts new technology for use in the facility.

Name of Body Art Facility: _____

Site Address: _____

City, State, Zip: _____

Type of Body Art Facility: _____

Contact Person: _____ Telephone: _____

A. Decontamination and Disinfection: Describe the procedures for decontaminating and disinfecting of workstation and surfaces. (HSC 119308 (b), 119309 (a)(b)(c)(d)(e))

1. Workstation surfaces/counter tops:

_____

_____

_____

2. Workstation chairs/stools:

_____

_____

_____

_____

3. Trays:

4. Armrests:

5. Headrests:

6. Procedure area:

7. Tables:

8. Tattoo machine and Clip Cord:

9. Reusable instruments, calipers, needle tubes, etc., portable light fixtures or other:

10. Permanent Cosmetic Machine: _____

B. Reusable Instruments or Disposable: Describe the procedures used for decontaminating, sterilizing, packaging and storing of reusable instruments. Include the procedures for labeling of sterilized peel-packs. Indicate whether the body art facility uses all pre-sterilized, single-use and disposable instruments. Describe the record keeping logs and procedure logs maintained on-site when using 100% pre-sterilized, single-use and disposable instruments. (HSC 119309, 119315)

1. Needle tubes:

2. Calipers:

3. Other instruments:

C. Storage: Describe the storage location and equipment used for the storage of clean and sterilized instrument peel packs to protect the packages from exposure to dust and moisture. (HSC 119315 (c))

D. Set Up and Tear Down of Workstation: Describe the procedure for setting up and tearing down the workstation for the following procedures. (HSC 119308, 119309 (c), 119311, and 119313 (b)(4))

1. Tattoo:

2. Piercing:

3. Permanent Cosmetics:

4. Branding:

E. Prevention of Cross Contamination: Describe the techniques used to prevent the contamination of instruments, tattoo machine, trays, tables, chairs, clip cords, power supplies, squeeze bottles, inks, pigments, lamps, stools, soaps and the procedure site or other items during a body art procedure. Include barriers provided to prevent cross contamination. Describe how the procedure site is prepared for a body art procedure. (HSC 119308, 119309, and 119311 (c)(d)(e)(f))

F. Sharps containers: Describe the procedures for the safe handling of sharps and indicate the location of the sharps containers. Indicate disposal frequency for sharps waste. (HSC 119314 (e))

G. Sharps Disposal: Describe the disposal of sharps used during a body art procedure. (HSC 119308 (b)(3) and 119311 (g))

1. Needles and needle bars:

2. Razors:

3. Other sharps or single-use marking pens used on open skin:

H. List the Medical Waste Hauler, Mail-Back System or Alternative Treatment Technology for the disposal of sharps containers:
(HSC 119314 (e))

Medical Waste Hauler _____

Street Address _____

City, ST, Zip _____

I. Sterilization of Jewelry: Describe the procedure for the sterilization of jewelry prior to placing into newly pierced skin. (HSC 119310 (a) and 119315)

J. Sterilization Equipment: List the equipment used in the decontamination and sterilization room and describe the procedure for decontaminating instruments prior to placing inside the autoclave. Indicate whether instruments are manually washed or machine washed, such as with an Ultrasonic machine. Include the material used for soaking dirty instruments in the machine, such as Tergazyme. (HSC 119309 (b)(e)(g), 119314 (c), and 119315 (b))

K. Disinfection Products: List the disinfectant products used at the body art facility. (HSC 119301 (k) and 119308 (b)(6))

L. Time and Temperature: List the duration of time and temperature of the autoclave required for the sterilization of clean instruments. Indicate whether a sterilization log is maintained on-site. Indicate whether each sterilization load is tested using Class 5 integrators. (HSC 119315 (b)(3)(5))

Time _____
Temperature _____
Psi _____

M. Personal Protective Equipment: List the personal protective equipment used during a body art procedure. (HSC 119308 (a) and 119309 (j))

N. Handwashing Sink: List the locations of the handwash sinks and describe the items supplied at each sink. (HSC 119314 (b)(3))

O. Aftercare Procedure: Describe the written recommendations and care provided to the client after a body art procedure. List the type of bandages or wrappings provided after a body art procedure. (HSC 119303 (4) and 119308 (b))

P. Procedure for an Accidental Spill: Describe the clean-up and disinfection procedure taken when there is an accidental spill of sharps. (HSC Code 119309 (a)(b)(c))

Q. Trash Receptacles and disposal of contaminated trash: List the type of trash receptacles and their location throughout the body art facility. Describe the procedure for the disposal of contaminated items, such as gloves. (HSC 119311 (a) and 119314 (d))

R. Negative/Failed Spore Test: Describe the procedure conducted when a monthly spore test has failed. Indicate whether the facility maintains a spore test log on-site. (HSC 119315 (b)(2)(4))

S. Commercial Ink or Pigment Manufacturers: List the manufacturer for the inks or pigments used at the body art facility. Describe the procedure for dilution of inks. Only use sterile water for dilution of inks or pigments. (HSC 119311 (b)(c)(d)(e))

T. Permanent Cosmetic Machine Name and Manufacturer: Provide the model name and number for the permanent cosmetic machine used. (HSC 119311 (i)(j))

U. Service Animals: Describe the facility's policy regarding service animals allowance in procedure or decontamination and sterilization areas. (HSC 119314 (f))

Maintain a copy of this document in your files. Submit one copy to the Local Enforcement Agency.

I hereby certify that all body art practitioners performing body art at this facility and employees or individuals involved with decontamination and sterilization procedures have been trained with the procedures and information contained in this document and to the best of my knowledge and belief, the statements made herein are correct and true.

Signature: _____ Date: _____

Sterilization Procedures

When a body art facility is equipped with a decontamination and sterilization room and will be sterilizing reusable instruments and body art jewelry, the following sterilization procedures must be followed:

1. Clean instruments to be sterilized shall first be sealed in peel-packs that contain either a sterilizer indicator or internal temperature indicator. The outside of the pack shall be labeled with the name of the instrument, the date sterilized, and the initials of the person operating the sterilizing equipment.

2. Sterilizers shall be loaded, operated, decontaminated and maintained according to manufacturer's directions, and shall meet all of the following standards:

- Only equipment manufactured for the sterilization of medical instruments shall be used.

- Sterilization equipment shall be tested using a commercial biological indicator monitoring system after the initial installation, after any major repair, and at least once per month. The expiration date of the monitor shall be checked prior to each use.

- Each sterilization load shall be monitored with mechanical indicators for time, temperature, pressure, and, at a minimum, Class V integrators. The Class V integrator gives an immediate response on whether the sterilization has been achieved. Each individual sterilization pack shall have an indicator.

- Biological indicator monitoring test results shall be recorded in a log that shall be kept on site for two years after the date of the results.

- A written log of each sterilization cycle shall be retained on site for two years and shall include all of the following information:
  (a) The date of the load.
  (b) A list of the contents of the load.
  (c) The exposure time and temperature.
  (d) The results of the Class V integrator.
  (e) For cycles where the results of the biological indicator monitoring test are positive, how the items were cleaned, and proof of a negative test before reuse.

3. Clean instruments and sterilized instrument packs shall be placed in clean, dry, labeled containers, or stored in a labeled cabinet that is protected from dust and moisture. Use clean gloves to handle sterilized packages to prevent cross contamination of the sterilized item when the package is opened for use.

4. Sterilized instruments shall be stored in the intact peel-packs or in the sterilization equipment cartridge until time of use.

5. Sterile instrument packs shall be evaluated at the time of storage and before use. If the integrity of a pack is compromised, including, but not limited to, cases where the pack is torn, punctured, wet, or displaying any evidence of moisture contamination, the pack shall be discarded or reprocessed before use.

6. A body art facility that does not afford access to a decontamination and sterilization area that meets the standards of subdivision (c) of Section 119314 of the California Health and Safety Code or that does not have sterilization equipment shall use only purchased disposable, single-use, pre-sterilized instruments. In place of the requirements for maintaining sterilization records, the following records shall be kept and maintained for a minimum of 90 days following the use of the instruments at the site of practice for the purpose of verifying the use of disposable, single-use, pre-sterilized instruments:

- A record of purchase and use of all single-use instruments.
- A log of all procedures, including the names of the practitioner and client and the date of the procedure.

OPERATING CONDITIONS FOR AUTOCLAVE

Cleaning: Remove all material on the instruments during the cleaning process to ensure that the sterilization process is achieved. The cleaning process can be a manual cleaning or by use of an ultrasonic machine.

Packaging: Package the instruments with hinges in the open position to ensure that the ridges and crevices of the instruments are sterilized.

Loading: Load the autoclave with the packages upright on their sides. Peel packs should be on edge with the plastic side next to a paper side to allow for steam penetration. Do not overload the autoclave to allow proper flow of the steam to achieve sterilization.

Steam Sterilization: Temperature should be 121°C or 250° F; pressure should be 106kPa (15lbs/in2); 30 minutes for packaged items. At a higher temperature of 132° C or 279° F, pressure should be 30 lbs/in2; 15 minutes for packaged items.

Allow all items to dry before removing them from the autoclave. Use clean gloves to handle packaged items.

Pressure settings (kPa or lbs/in2) may vary slightly depending on the autoclave used. Follow manufacturer's recommendations for your autoclave.

Exposure time begins only after the autoclave has reached the target temperature.

Source: Adopted from Principles and Methods of Sterilization in Health Sciences.
JJ Perkins. 1983

Sterilization Log

Date	Load #	Contents	Operator	Time	Temp	Psi	Temp Indicator Results	Attach Integrator Here	Spore Test Results	Action Taken due to Failed Result