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CITY OF WOLVERHAMPTON COUNCIL

Working together for Better Regulation

Special Treatments: Managing the risk of infection

Charlotte Rose
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Public Health England

Birmingham City Council

Train the Trainer: Risks Associated with Microblading

Semi-permanent Make up

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Microblading

The new form of cosmetic tattooing to create effects to enhance, correct and define the features of the face

Features include:

- Eyebrows
- Natural lip line
- Eyeline – upper & lower

Issues faced by Officers across the West Midlands

- Re – useable hand tools with no or lack of suitable sterilisation
- Lack of general IPC knowledge (including hand washing and sharps management)
- Lack of suitable training
- No knowledge or awareness of the Tattoo Toolkit or other readily available guidance around Micropigmentation
- The use of unlicensed topical numbing creams
- Act Fast – remote prescribing – Topical Adrenaline
- Lack of general facilities and management
- Poor or absence of Consultation
- Lack of documentation

- As a result a number of **Prohibition Notices** were served

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Tackling the Trainers – our approach

- Quickly established that the root cause of the problem was due to the lack of and or poor content of training provided by Trainers across the West Midlands and beyond (January 2019 – 28 Training Providers)
- Wolverhampton and Birmingham City Council, Environmental Health decided to merge forces along with PHE Infection Prevention Nurse's to tackle the issue linked with Training providers. We created a bespoke awareness event, known as "Train the Trainer: Risks Associated with Microblading". Our aim has been to educate and raise awareness on the risks associated with Microblading, inclusive of Legal Compliance, and to demonstrate the basic principles of hand washing techniques
- Working Group – 'West Midlands Special Treatments Group', attended by Regulatory Officers
- Working with Local Colleges – encouraging the introduction of Level 4 Training – VTCT approved
- Public Health Leaflet – launched across the UK, January 2019

SEMI PERMANENT MAKE UP - MICROBLADING TREATMENTS ARE YOU AT RISK?

Chartered Institute of Environmental Health

Please Insert Local Authority Logo Here

What is microblading?

Microblading is a form of tattooing; it is carried out using a blade, which is made up of a row of fine needles. The blade is dipped into a coloured pigment (ink) and then placed into the upper layer of the skin with a slicing motion to create fine hair like strokes. The results are natural looking fuller eyebrows.

What are the risks?

The microblading procedure involves puncturing the skin and inserting a pigment (ink). If the microblading equipment is re-used between clients, it will become contaminated and can result in causing localised infection at the site of the puncture or the transmission of blood-borne viruses, for example, Hepatitis B, Hepatitis C or HIV. Allergic reactions to the pigment, numbing cream and ointments used as well as scarring from repeated procedures are also associated risks of microblading.

Common symptoms of infection to look out for:

- Fever
- Swelling
- Tenderness
- Discharge – yellow/green/brown colour
- Off-putting smells

If you experience any of the above symptoms, please seek medical advice and report your concerns to your Local Environmental Health Department.

Please Insert Local Authority Contact Details Here

What training is required?

There is no mandatory, legally-required training for people offering microblading treatments. However, since microblading is an invasive procedure, Technicians offering microblading treatments should have some level of knowledge and experience in infection prevention and control (IPC) procedures associated with the treatment.

How do I find a salon using safe microblading practices?

- Choose a business that is licensed and/or registered with the Local Authority. Businesses are required by law to display their Licence or Certificate of Registration along with the local byelaws if these apply in your area.
- Research the business. Visit their website or look at their social media page, For example, look at their Facebook, Instagram and Twitter accounts to see if anyone has mentioned anything about poor hygiene or infection following the procedure.
- They must arrange a patch test with you, preferably 48 hours prior to treatment. This will test whether you have an allergy to any of the pigments or inks.
- You should always expect to complete a health questionnaire or consultation before the treatment to minimise any adverse health effects
- When you visit for your consultation have a look to see that the room where the procedure is being carried out is in an enclosed, dedicated space away from the public and other beauty treatments.
- Look at the cleanliness of the salon or room where the procedure is being carried out and the condition of the equipment including the treatment bed. It should be in good repair, clean, orderly and free from clutter. Ideally there should be a wash hand basin in the room. If not, there should be one easily accessible to the room.
- On the day of your treatment pay attention to how the Technician sets up their work station. It should be on a clean, clutter free trolley or work surface and already laid out prior to the procedure.
- Check the microblading blade and hand tool is pre-packaged, single use, sterile and discarded after the treatment into a yellow sharps bin. Reusable equipment such as scissors, tweezers and callipers should be cleaned and disinfected between clients to protect against infections and be stored in a suitable clean container. Pencils used for marking the skin are single use only.
- Check that the Technician washes their hands and changes their gloves regularly during the procedure. This should be done before they start the procedure and put on their gloves and if they leave the room or take a break. Proper hand-washing and appropriate use of gloves helps to protect the Technician and yourself from infection.

See NHS choices website for more information
https://www.nhs.uk/conditions/cosmetic-treatments/permanent-make-up/

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Train the Trainer

- Three bespoke awareness events incorporating IPC techniques and Legal Compliance – attended by Training providers, Technicians, EHO's and PHE Colleagues
- One to one site visits and manual reviews
- Providing education on safe operating skills, demonstrations, legal compliance, and a single use approach
- Produced a Toolkit pack: Pre Consultation/Medical Questionnaire, Microblading IPC Procedure (step by step), Snippets from the Tattoo Toolkit, Hand Washing Poster, Copy of our Bye Laws and Legislation associated with the Registration process
- In total we have engaged with 28 Training Academies:
  - West Midlands based: 16 (reviewed manuals, changes implemented)
  - Out of Area referrals: 5 (reviewed manuals, suggested changes & referred to relevant Local Authority for action)
  - To further work with: 4
  - Looking to open (advice provided): 1
  - No longer operating: 2
- Established that each Training Academy trains on average 5 – 20 students per week
- Course costs - £500 - £8,000
- Course content: home learning, two – five day practical training, one model demonstration on site, followed by 5 – 15 case studies submitted via photographs to the trainer before signing off with Certification

Train the Trainer – concerns/challenges

- Many of the Trainers have trained over sea's or are self taught with limited experience, skills and knowledge to deliver suitable training for safe working practices
- Mobile Technicians – lack of or poor facilities, sharps management and clinical waste concerns
- Pop up events – Wedding & Beauty Shows
- Unregistered Semi-permanent make up artists – commonly known as 'Scratchers' in the Tattoo Industry
- Act Fast – the use of Topical Adrenaline – remote prescribing
- Unlicensed Topical Numbing Cream – conflicting messages – CIEH & MHRA
- Lack of supervision after practical training
- Manual reviews: The Business Protection from Misleading Marketing Regulations 2008 - providing a service to another business which is misleading, they are claiming to be able to train safely in microblading, however the offence is that they can't

We have seen a positive change across the West Midlands with Technicians taking a single use approach via the advice from Training providers.

Figures

- 11 Authorities: 600 Registered Technicians (January 2019)
- Summer of 2018 An estimated 70% of Technicians were using re-useable tools

Hand Tools

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Effective Sterilisation – Tattoo Toolkit

Methods observed for re – useable tools:

- Rinsing with boiling water
- Antibacterial wipes
- UV Boxes
- Glass bead sterilisers
- Barbicide soaking
- General lack of awareness on decontamination & sterilisation stages of cleaning

Hollow instruments: sterilise using vacuum autoclave (type B or S) with drying cycle

Dry heat & Glass Bead sterilizers

- Dry heat and Glass Bead sterilizers are commonly used within beauty establishments, more commonly seen where SPM takes place

- Such types of equipment are unsuitable for your tools because;
  - they are unable to reach high temperatures
  - they have no interlock system

- The CIEH Tattoo and Body Piercing toolkit requires that any hollow instruments that are deemed as re-useable are to be sterilized in a vacuum steam steriliser (with a drying cycle)
- -Type S or N

Sensitivity: NOT PROTECTIVELY MARKED

Decontamination & Sterilisation of re-useable equipment

Designated equipment sink

Ultra-sonic water bath

Verification strips

Vacuum autoclave

Sterilized equipment

Sensitivity: NOT PROTECTIVELY MARKED

Single use approach

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Standard infection prevention & control precautions

A simple, consistent and effective approach to infection prevention & control

Minimise contact with blood and body fluids by ensuring safe working practices, protective barriers and a safe working environment

NHS

Hand-washing technique with soap and water

cleanyourhands campaign

NHS National Patient Safety Agency

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Adapted from World Health Organization *Guidelines on Hand Hygiene in Health Care*

Nails – are you manicured??

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Dedicated hand wash sink

Running water

Liquid Soap

Elbow/Wrist taps

Paper towels

Hand Wash Poster

Hand Wash Basins

When Alcohol Gel Should Not Be Used

- If hands are visibly soiled or potentially contaminated with body fluids
- (National Institute for Health and Care Excellence, 2012).

PPE

- Think……
- Why do you need it????

Prepare & Protect

Guidance for healthcare staff on personal protective equipment

PUTTING ON personal protective equipment (PPE)

The type of PPE used will vary based on the type of exposure anticipated, and not all items of PPE will be required.

The order for putting on PPE is: APRON, SURGICAL MASK, EYE PROTECTION and GLOVES.

APRON (OR GOWN)
- Pull over head and fasten at back of waist

SURGICAL MASK (OR RESPIRATOR)
- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit check respirator

EYE PROTECTION (GOGGLES/FACE SHIELD)
- Place over face and eyes and adjust to fit

GLOVES
- Extend to cover wrist

REMOVING personal protective equipment (PPE)

PPE should be removed in an order that minimises the potential for cross-contamination.

The order for removing PPE is GLOVES, APRON, EYE PROTECTION and SURGICAL MASK.

GLOVES
- Grasp the outside of the glove with the opposite gloved hand; peel off
- Hold the removed glove in the gloved hand
- Slide the fingers of the ungloved hand under the remaining glove at the wrist
- Peel the second glove off over the first glove
- Discard in a lined waste bin

APRON (OR GOWN)
- Unfasten or break ties
- Pull apron away from neck and shoulders, touching inside only
- Fold or roll into a bundle
- Discard in a lined waste bin

EYE PROTECTION (GOGGLES/ FACE SHIELD)
- Handle only by the headband or the sides
- Discard in a lined waste bin

SURGICAL MASK (OR RESPIRATOR)
- Unfasten the ties – first the bottom, then the top
- Pull away from the face without touching front of mask/respirator
- Discard in a lined waste bin

USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF INFECTION
- Keep hands away from face
- Limit surfaces touched in the patient environment
- Change gloves if they became torn or heavily contaminated
- Regularly perform hand hygiene
- Always clean hands after removing gloves

PERFORM HAND HYGIENE IMMEDIATELY AFTER REMOVING ALL PPE

All PPE should be removed before leaving the area and disposed of as healthcare waste.

FOR MORE INFORMATION CONTACT:

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Produced by Williams Lea for the Department of Health, NHS England and Public Health England in conjunction with HSE.

- Disposable Nitril Gloves
- Disposable Apron
- Disposable Hair net
- Disposable Face mask
- Barrier tape: hand contact surfaces e.g. door handle, lamp, trolley handles and lamp handle
- Disposable couch roll
- Disposable plastic covering for head end of treatment bed

Sharps Management

- 85% of injury is a result of incorrect disposal
- Ensure that boxes are:
- Labelled
- Never too full
- Stored at the correct height

Sharps Injury

1. Encourage bleeding where skin is punctured or broken.

   Do not suck the wound.

2. Wash thoroughly with mild liquid soap under running warm water.

   Do not use a scrubbing brush.

3. If eyes are involved, wash immediately with water for 5-10 minutes (use tap water, or sterile water if available).

   If the mouth is contaminated, rinse with plenty of water.

4. Any cuts/punctures should be covered with a waterproof plaster.

5. Where there is considerable contamination of unbroken skin, remove contaminated clothing and wash all affected areas with copious amounts of water.

6. Remember to seek medical advice at the local Emergency Department as prophylactic treatment (if required) ideally needs to be given ideally within one hour and no later than 72 hours. If relevant and if possible, it is helpful if the details of the client whose needle was involved in the incident were brought to the Emergency Department in a sealed envelope to help enable the risk assessment process

   → **The priority is to seek advice/ medical attention immediately, at a local Emergency Department, ideally within one hour of the injury occurring**

7. Ensure that your manager or immediate senior is informed immediately of the incident.

   The person who has received the injury should complete an incident form as per local guidelines.

Reference:
Health and Safety Executive (2012) How to deal with an exposure incident. Blood Borne Viruses Guidance. (http://www.hse.gov.uk/biosafety/blood-borne-viruses/how-deal-exposure-incident.htm)

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Treatment Room

- Sole use for Treatment
- Washable non slip floor covering
- Smooth and readily cleansable walls and ceiling
- Adequate storage to protect materials and equipment from environmental contamination
- Cleansable treatment bed covered with disposable non flammable couch roll
- Non Hand Contact Fixed Receptacle for soft tissues
- Wash hand basin for sole use of operator
- Sharps container stored above floor level
- Suitable lighting

National Colour Coding

RED Bathrooms,Toilets

BLUE General areas

GREEN Catering

YELLOW Isolation areas

Environmental Cleaning: examples of hard surface disinfectants

Legal Requirements

Registration – Local Government (Miscellaneous Provisions) Act 1982

Requirements to Register with the Local Authority – both the technician and the premises

Mobile Therapy is strictly prohibited

One off Registration fee with an inspection by the local Environmental Health Officer to check compliance with the Local Bye Laws

London Boroughs and Wales – Licensing Scheme with strict conditions (Annual fee's apply)

Bye Laws

Structural Requirements

Hygiene Requirements

Other: Designated Hand Wash Facilities

Cleansable walls/floors/doors/equipment

Clutter free environment

Designated Treatment Room

Clinical Waste Storage

Other Legislation

Health & Safety at Work etc. Act 1974

The Management of Health and Safety at Work Regulations 1999

The Workplace (Health, Safety and Welfare) Regulations 1992

The Control of Substances Hazardous to Health Regulations 2002

Tattoo Minors Act 1969

Environmental Protection Act 1990

Enforcement

- **Prohibition Notices:** where an inspector is of the opinion that, as carried on or likely to be carried on by or under the control of the person in question, the activities involve or, as the case may be, will involve a **risk of serious personal jury**
- **Improvement Notices:** where an inspector is of the opinion that a person in contravening one or more of the relevant statutory provision, or that the contravention will continue or be repeated

****Its time to promote single use – for a cheaper and most importantly safer approach to practice****

Next steps

- Additional Training Days for EH Professionals, Trainers & Technicians - 2019
- BBV National Surveillance forms – better reporting to include Semi-permanent Make Up
- A National Guidance Document
- Taking a single use approach to practice across the West Midlands
- Promote supervised practice – for all case studies before Certification
- To incorporate better standards – to complete an IPC Course in addition to the Training provided by the Academy and have Level 3 Beauty as a minimum starting point

Other concerns: Special Treatments

- Micro-needling
- Derma-planing
- Injectables
- Body Modification
- Non Surgical Face Lift
- Chemical peels
- Facial Bleaching
- Microdermabrasion
- Wet Cupping/Fire Cupping
- Laser/IPL
- Pedicures

Investigations

Contact

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