

THE ROYAL BOROUGH OF KENSINGTON AND CHELSEA

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LONDON LOCAL AUTHORITIES ACT 1991

APRIL 2017

STANDARD CONDITIONS FOR PREMISES LICENSED TO PROVIDE MASSAGE AND SPECIAL TREATMENTS UNDER PART 11 OF THE LONDON LOCAL AUTHORITIES ACT (Section 10 London Local Authorities Act 1991)

THE ROYAL BOROUGH OF KENSINGTON AND CHELSEA ESTABLISHMENTS FOR SPECIAL TREATMENTS

Standard Conditions with regard to the Management of Establishments for Special Treatments licensed by the Royal Borough of Kensington and Chelsea.

Division into parts:- These Conditions are divided into parts as follows:

Part 1	-	General
Part II	-	Conditions which apply to all premises
Part III		Conditions applying to premises providing laser and intense pulse light treatments (IPL)
Part IV		UV Tanning / Tanning Booths
Part V		Cosmetic Piercing
Part VI		Tattooing
Part VII		Semi Permanent Make – Up Micro pigmentation
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PART 1 - GENERAL

Introduction		 These Conditions are applicable to all premises offering relevant Special Treatments and do not in any way replace or reduce the underlying statutory duty of employers to comply with the requirements of any other regulations relating to the construction and use of these premises. These Conditions will be reviewed and updated regularly. Additional conditions may also be applied to a licence relating to a specific establishment, or to a Specific Treatment, or to the approval of a person giving a Special Treatment. Any variations to a Special Treatment licence shall be approved in advance by the Council in writing.
Definitions	1.	In these Conditions, unless the context requires otherwise, the following expressions shall have the following meanings:
	1.1	<i>"The Council"</i> means the Royal Borough of Kensington and Chelsea.
	1.2	 <i>"Clinical Waste"</i> means (a) Any waste which consists wholly or partly of human or animal tissue, blood or other body fluids, excretions, drugs or the pharmaceutical products, swabs or dressings, or syringes, needles or other sharp instruments, being waste which, unless rendered safe, may prove hazardous to any person coming into contact with it; and
		(b) Any other waste arising from medical, nursing, dental, veterinary, pharmaceutical or similar practice, treatment, care, teaching or research, or the collection of blood for transfusion, being waste which may cause infection to any person coming into contact with it.
	1.3	<i>"Escape lighting"</i> means lighting obtained from a source independent of the general supply for the building provided to assist people to leave the Establishment for Special Treatment without the aid of normal lighting.
	1.4	<i>"Establishment for Special Treatment"</i> shall have the meaning as described in Section 4 of the London Local Authorities Act 1991.

	1.5	<i>"Licence"</i> means a Special Treatment Licence granted under the Section 6 of the London Local Authorities Act 1991.
	1.6	<i>"Licensee"</i> means the person or company or partnership named within the Licence.
	1.7	<i>"Normal lighting"</i> means all lighting, other than escape lighting, permanently installed in those parts of the Establishment for Special Treatment to which the public have access and includes purely decorative lighting but not lighting installed solely for advertising purposes.
	1.8	"Officer" means any officer authorised in writing by the Council.
	1.9	<i>"Public"</i> means any person other than a member of staff admitted to the Establishment for Special Treatment.
	1.10	<i>"Special Treatment"</i> means a Treatment that can only be carried out under and in accordance with a Special Treatment Licence granted pursuant to Part 2 of the London Local Authorities Act 1991
	1.11	<i>"MHRA"</i> means the Medicines and Healthcare Products Regulatory Agency
Notes	1.12	In these Conditions except where the context demands otherwise the singular includes the plural and the masculine includes the feminine.
	1.13	Where there is a reference to a British Standard in these Conditions it shall be deemed to be a reference to the Standard in force at the time.
	1.14	Where there is a reference to the consent or agreement of the Council in these Conditions such consent or agreement shall be given in writing and may be given on such terms and conditions or subject to such restrictions as may be so specified.

1.15	Where in these Conditions there is a requirement to notify
	the Council in writing such notification should be
	addressed to the:
	Licensing Team
	Royal Borough of Kensington and Chelsea
	(please check our website www.rbkc.gov.uk for
	our current address) or call us on 020 7341 5152
	email: <u>licensing@rbkc.gov.uk</u>

PART II CONDITIONS WHICH APPLY TO ALL PREMISES			
		b) A notice showing the name of the person in charge of the Establishment for Special Treatment, at the time that it is open to the public pursuant to the licence, shall be displayed in a prominent position at the Establishment for Special Treatment.	
Trade name and Style	2.2	 a) The Establishment for Special Treatment shall only be carried on in the trade name and style or title specified in the licence and at the address mentioned therein. The licensing authority shall be notified in writing within 28 days of any change in the trade name, style or title. b) All potiese and advertisements published or issued by 	
		b) All notices and advertisements published or issued by, or on behalf of, the Establishment for Special Treatments shall bear the trade name or style or title specified in the licence.	
Licensee responsibility	2.3	a) The Licensee shall notify the Council in writing of any change in the Licensee's private address, principal place of business, company name, registered office, or registered number with Companies House, within 28 days.	
		b) The Licensee shall take out a third party insurance with a liability cover of at least £2,000,000 and shall submit evidence of such cover upon request.	
Special Treatments Permitted	2.4	No Special Treatments, other than those specified in the licence or otherwise approved by the Council, shall be carried out at the Establishment for Special Treatment.	
Use of the Special Treatment Licence	2.5	The special treatment licence may not be used until such time as the Part B fee for regulating this licensing regime is paid to the Council.	
Age Related Treatments	2.6	a) Where legal or advisory age restrictions are in place for certain treatments the premises must have a policy that requires people who appear to be under the age of 18 to	

		be asked to produce identification showing their photograph, date of birth and a holographic mark. Examples of acceptable ID include photo card driving licences, passports, or proof of age ID cards bearing the
		PASS hologram, and other forms of ID which meets the criteria.b) Staff who work in Special Treatment premises must be
		made aware of the existence and content of the age verification policy. Details of checks carried out should be written on the client record.
		c) In any event no treatment shall be carried out on a child less than 16 years of age unless a parent or legal guardian is present and a written letter of consent is obtained.
Persons allowed to give treatment	2.7	a) Licensed treatments shall only be provided by a special treatment practitioner or by a person undertaking training who is under the direct supervision of a special treatment practitioner. (A special treatment practitioner is a person who provides a special treatment to a client, often known as a therapist)
		b) The Persons approved to give special treatments shall have been assessed by the licence holder to have sufficient training, knowledge and experience to carry out their treatments safely and competently. (See the Council's Guidance Notes for therapists administering treatments in an establishment licensed to provide Special Treatments)
		c) Newly qualified therapists must be supervised until the licence holder is satisfied that they are competent to practice. Trainees can only carry out licensed treatments under the supervision of a practitioner who has attained the relevant qualification and/or experience for that licensed treatment.
		 d) Records shall be kept on the premises of every special treatment practitioner or trainee practitioner who provides licensed treatments on the premises (whether or not directly employed, self-employed or otherwise engaged) and shall include the following information: (i) Full name (ii) Home address (iii) Date of birth
		 (iii) Date of bitti (iv) A photograph of the practitioner (v) Full list of treatments offered by that practitioner at the premises

		 (vi) Details of the qualification and/or training attained/completed and the awarding body, including copies of such qualifications (vii) For a trainee the records must also indicate the name(s) of the training supervisor and a list of treatments that person is supervising e) The records described above shall be kept on the premises whilst the special treatment practitioner or trainee practitioner is employed and/or carrying out special treatments at the premises and for a period of 2 years from the date when the special treatment practitioner or trainee practitioner or trainee practitioner at the premises employment and/or providing treatment at the premises
Personal Soliciting	2.8	No person shall seek to obtain custom for the Establishment for Special Treatment by means of personal soliciting outside or in the vicinity of the Establishment for Special Treatment.
Conduct of the Premises	2.9	a) No poster, advertisement etc. shall be displayed which is unsuitable for general exhibition.b) The licence holder and any authorised person shall ensure that no part of the premises is used by persons for soliciting or other immoral purposes.
Admittance of Public	2.10	The public shall not be admitted to any part or parts of the Establishment for Special Treatment other than those which have been approved by the Council.
Health and Safety	2.11	The Licence Holder should ensure that suitable and sufficient health and safety risk assessments of the special treatments are carried out by a competent person in accordance with Management of Health and Safety at Work Regulations 1992. Where there 5 or more persons employed then the assessments must be written.
Clothing and Changing Facilities	2.12	With the exception of those persons receiving treatment in accordance with the conditions of the licence, all persons present in any part of the Establishment for Special Treatment shall be decently and properly attired. Suitable changing accommodation shall be provided.
Display of Conditions	2.13	A copy of these Conditions shall be kept at the Establishment for ``Special Treatment at all times.

Use of Anaesthetic	2.14	Anaesthetic
		 a) No local anaesthetic administered by injection shall be given other than by a medically qualified practitioner. b) No prescription only medicines may be administered to a client by a therapist. c) Topical anaesthetic based creams, gels, sprays and similar preparations are available at pharmacies and may be purchased and administered by the client themselves prior to treatment if so desired. A detailed consultation assessing contraindications must be carried out. This should be written on the client record. (<i>The Medicines (Sale of Supply) (Miscellaneous Provisions) Regulations 1980)</i>
Records to be kept	2.15	a) With the exception of saunas, spa pools and steam rooms, the name, address and date of birth of all persons receiving Special Treatments at the establishment shall be recorded. Also to be included is the type of treatment given, the name of the person giving the treatment and the date the treatment was given. This information must be in English, unless previously agreed in writing by the Council. These records shall be kept for a minimum of 12 months, and shall be kept on the premises for a minimum period of two weeks after the treatment took place and shall be readily available for inspection upon the request of an authorised officer.
		b) A consultation shall be carried out and a medical questionnaire completed in respect of every customer receiving a Special Treatment at the premises (with the exception of saunas, spa pools and steam rooms). Any contra-indications e.g. Heart conditions, diabetes, epilepsy etc for each treatment shall be discussed with the client prior to any treatment, and the client shall sign a record card to say that they have been made aware of the risks involved. The therapist carrying out the treatment will sign and date the form confirming that he/she has discussed the treatment and any health issues.
		c) These consultation records shall be kept at the premises for Special Treatment throughout the period that the customer continues to receive treatments, and for a period of two weeks after the treatment has finished. These records shall be available for inspection by an authorised officer.d) Upon completion of the treatment these records shall be kept for a period of twelve months.

Price Tariff	2.16	All Special Treatments provided at the Establishment for
		Special Treatment shall be clearly listed in a price tariff. This tariff shall also clearly show the cost of any additional services provided at the Establishment for Special Treatment together with VAT thereon if applicable, and shall be displayed in such a position that it can easily be read by persons before entering the Establishment for Special Treatment.
Admission of Council Officers	2.17	Authorised officers of the Council, on presentation of their
		written authorisations and proof of identity, shall be admitted at all reasonable times to all parts of the premises.
Alterations	2.18	a) No change of use of any part of the Establishment for Special Treatment from that approved by the Council shall be made until the Council's consent has been obtained.
		b) Alterations or additions, whether permanent or temporary, to the means of lighting, sanitation or ventilation or to the structure or layout of the Establishment for Special Treatment shall not be made except with the prior consent of the Council. This condition shall not require notice to be given to the Council of any work which is necessary for their efficient maintenance and which is carried out in accordance with these conditions.
		c) Notice in writing shall be given to the Council of any alteration or addition proposed to be made and such notice shall be accompanied by full details and, if necessary, by drawings (in duplicate). The work shall not be started until the consent of the Council has been obtained.
		 d) Alterations to the layout of the premises may require the submission of an application to vary the Special Treatment licence. (Any alteration to the premises may require planning permission.)
Sanitary accommodation	2.19	 a) There must be suitable and sufficient provision of sanitary conveniences for staff and clients with adequate provision of wash hand basins with hot and cold water supply. [The Workplace (Health, Safety and Welfare) Regulations 1992.]

		b) All sanitary conveniences must be suitably and
		sufficiently ventilated. [The Workplace (Health, Safety and Welfare) Regulations 1992.]
		c) A separate wash-hand basin must be available for the WC provided.
Treatment Room	2.20	Each Special Treatment room shall:
		a) be maintained in a clean and structurally sound condition, including walls, floors and floor coverings; doors windows
		b) be suitably and sufficiently lighted and ventilated. [The Workplace (Health, Safety and Welfare) Regulations 1992)
		c) be provided with a suitable wash-hand basin or basins with a suitable supply of hot and cold water, together with soap, and either a supply of disposable towels or a clean towel at all times;
		d) have suitable and sufficient means for heating to a reasonable room temperature appropriate for the special treatment provided;
		e) be provided with suitable screening to maintain privacy where more than one person is being treated.
Showers	2.21	In premises providing body treatments involving the application of heat by saunas, solarium, steam bath or other baths suitable and sufficient showering facilities shall be provided (or appropriately mixed) running water.
Sharps / Contaminated Waste	2.22	A sufficient number of suitable contaminated waste containers shall be provided and:
		a) Used needles, blades and any other sharps, for disposal, shall not be placed in with the normal refuse but shall be kept in a special "sharps" container and disposed of as clinical waste.
		b) Swabs, dressings, coverings, wax strips, etc, contaminated by blood, body secretions or other body fluids shall also be placed in an approved receptacle and disposed of as clinical waste.
		c) Clinical waste and offensive / hygiene waste must be disposed of at regular intervals through a licensed waste

		 recommendation of the Electrical Engineer b) The portable electrical equipment used in connection with the Special Treatment shall be inspected and a certificate of that inspection be submitted to the Council. This certificate may be submitted at intervals between 1 and 5 years dependent upon the recommendation of the Electrical Engineer c) The inspection shall be in accordance with guidance note 3 to BS 7671
		 c) The inspection shall be in accordance with guidance note 3 to BS 7671. d) The certificate shall be signed by a corporate member of the Institution of Electrical Engineers (IEE) or by a contractor currently enrolled with the National Inspection Council for Electrical Installation Contracting (NICEIC), or, with the approval of the Council, another competent person or contractor currently registered with the National Association for
Ventilation	2.27	Professional Inspectors and Testers' (NAPIT). Any mechanical ventilation system shall be maintained in

		operation during the whole of the time the public are on the Establishment for Special Treatment. NOTE: Care should be taken to ensure that neither noise nor vibration arising from the running of the equipment will cause annoyance or discomfort to residents living nearby.
Naked flames	2.28	Subject to the findings of the Fire Risk Assessment, no candles or oil burners shall be placed in any exit routes or in any common parts or areas within the premises. In treatment rooms any naked flame must be under the constant supervision of a therapist and clear of all combustible materials.

Part III Special Conditions applicable to Laser and I.P.L Treatments		
		In compiling these 'Standard Conditions' due regard has been given to the MHRA Guidance relating to Laser and IPL treatments.
Expert Medical Practitioner	3.1	The Licence holder shall employ the services of an Expert Medical Practitioner (EMP) to produce the 'treatment protocol' document which shall be kept on site. (Appendix A outlines the information required in this document). The 'treatment protocol' must be followed at all times. Arrangements shall be made for the EPM to be available to give advice to the Licence Holder on an on-going basis.
Laser Protection Advisor Local Rules	3.2	a) The Licence holder shall employ the services of a certified Laser Protection Advisor (LPA) who will assist in the production of the 'local rules' document (A specimen laser 'local rules' document is attached as Appendix B). Arrangements shall be made for the LPA to be available to give advice to the Licence Holder on an on-going basis. The 'local rules' should be updated within 5 years or shorter period as recommended by the Laser Protection Adviser
		b) The 'local rules' shall be updated if there are any changes made to the equipment in use, changes in procedure or changes to the treatment room if these affect the safe use of the Laser/IPL.
		c) Persons employed to carry out laser/IPL treatments from the date of these Standard Conditions shall be trained to a national recognised qualification of Level 4 standard. The Core of Knowledge Certificate training should comply with the recommendations contained in pages 67 and 68 of the MHRA document 'Lasers, intense light source systems and LEDs – guidance for safe use in medical, surgical, dental and aesthetic practices' (September 2015)
		 An authorised user should: i) understand the general nature of optical radiation ii) be familiar with the intended purpose of the optical radiation equipment iii) understand the meaning of the warning labels associated with optical radiation equipment

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		 iv) understand the health hazards, including effects on tissue, which can arise from the use of laser, IPL or other optical radiation equipment v) understand the equipment-related hazards that arise from the use of optical radiation devices vi) be familiar with the safety precautions required when using optical radiation devices vii) be familiar with hazard control procedures viii) be aware of additional precautions that may be necessary when undertaking non-routine activities with the equipment ix) be familiar with the content of contingency plans within the local rules and other related emergency procedures.
		Any training on the specific equipment in use at the premises shall also be recorded. Such training should be refreshed every 3-5 years.
		Authorised user register: The premises should have a register of authorised users of class 3B or 4 lasers and IPL systems.
		d) A suitably qualified member of staff on the premises shall be identified as the Laser Protection Supervisor (LPS). They will have day to day responsibility for ensuring the local rules are followed. In the case of multi-site businesses, a LPS shall be identified for each site.
		e) A treatment register shall be completed every time the Laser/IPL is operated, including the following information:
		 the name of the person treated (including a second means of identification); the date and time of treatment; the name and signature of the Laser/IPL operator; the nature of the Laser/IPL treatment given the treatment parameters any accidents or adverse effects.
Laser/IPL Controlled Area	3.3	a) The area around working Lasers/IPL's shall be controlled to protect other persons while treatment is in progress. The controlled area shall be clearly defined and not used for other purposes.

 A suitable safety warning sign or light entry system which complies with current British Standards shall be in place on the door of the controlled area. b) All Lasers/IPL's shall comply with current standards
(BS EN 60601-2-22 and/or BS 60601-2-57) and shall display labels identifying them, their wavelength or range of wavelengths and the maximum output power of the radiation emitted. The labels shall be clearly visible on the front or side of the machine.
c) The door to the controlled area shall be fitted with a suitable lockable device which can be operated from the outside in an emergency.
d) Any windows in the controlled area shall be fitted with opaque blinds approved by the LPA.
e) The controlled areas shall be kept clear of clutter, mirrors shall be avoided, or fitted with an opaque blind, and jewellery shall not be worn.
f) Surfaces within the controlled area shall be of a matt or eggshell finish.
g) Protective eyewear shall be worn by everyone within the controlled area whenever there is a risk of exposure to Laser/IPL's. All protective eyewear shall be marked with the wavelength range and protection offered as detailed in the local rules document. The eyewear shall be in a clean serviceable condition.
 h) The Laser Protection Supervisor shall ensure that the key to any Laser/IPL equipment is kept in a secure and separate area when not in use and that only authorised users have access to the key. In the case of password protected Laser/IPL equipment the licence holder must ensure that only authorised users have access to the password.

Part IV UV Tanning / Tanning Booths		
Equipment	4.1	a) Ultra Violet (UV) tanning equipment must be operated and maintained in accordance with manufacturer's instructions and HSE guidelines IND (G) 209 (rev 2) 'Reducing the health risks from ultra violet (UV) tanning equipment'. See link: <u>http://www.hse.gov.uk/pubns/indg209.pdf</u> .
		b) A record of maintenance and servicing, and copies of the electrical engineer's report, must be kept on the premises for inspection at all reasonable times.
		c) The HSE poster 'UV Tanning Equipment' shall be displayed in or near each tanning cubicle where it can be easily read by clients. See link: <u>http://www.hse.gov.uk/pubns/misc869.pdf</u>
Ages	4.2	No persons under the age of 18 shall be offered the use of UV tanning equipment, permitted to use UV tanning equipment or allowed to be present in a Restricted Zone. (<i>The Sunbeds (Regulation) Act 2010</i>)
Output	4.3	Operators shall ensure that they operate in accordance with EN60335 2 27: Household and similar electrical appliances – Safety Part 2 27
Skin Type	4.4	Suitable tanning advice must be given to all clients relative to their skin type. The length of time that a client uses the tanning equipment shall be controlled by the management and based on an assessment by a trained therapist to include factors such as the client's type of skin and power output of the UV tanning equipment.
Alarm	4.5	There must be a non-verbal alarm system in the vicinity linked to a manned reception area for summoning help when users are left unattended. The alarm should continue to sound until it is manually switched to the 'off' position in order to silence it. The user must be made aware of the alert mechanism and how to use it. Operation verification test records shall be available at the premises for inspection at all reasonable times. Emergency devices shall be fitted within easy reach of a person using the equipment. These devices when operated shall switch off the Ultra Violet lamps and audibly summon assistance (in the case of the lay down beds it must also raise the upper canopy, or panel unit).

Goggles	4.6	a) All clients shall be provided with suitable protective eye equipment which meets relevant British and European Standards, free of charge, and instructed in their use.
		b) All goggles must be disinfected between clients or single use disposable goggles provided.
		c) Arrangements shall be made to ensure that the surface of the tanning equipment is cleaned and disinfected after each use in accordance with manufacturer's instructions.

	Part	V Cosmetic Piercing
Consultation	5.1	A consultation with the client shall take place prior to the treatment, this shall include medical history, and a patch test shall be carried out as deemed necessary as a result of the consultation. Every client shall read and sign a consent form prior to treatment.
Ages	5.2	a) Clients must be over the age of 18 for all types of body piercing other than ear, nose, labret, eyebrow or navel.b) No body piercing shall be administered to any person under the age of 16 with the exception of ear and nose piercing.
		piercing.c) Persons aged between 16 and 18 must provide identification which includes a photograph and date of birth as detailed in Part 2, Condition 2.5.d) Anyone under the age of 16 must be accompanied by a parent or guardian. The parent/guardian must sign a
		 consent form at the time of the piercing. e) Piercing of the nipples or genitalia for both sexes under the age of 16 is prohibited. (Under the Sexual Offences Act 1956 girls and boys under the age of 16 cannot give legal consent to intimate sexual contact under any circumstances therefore this can be regarded as an assault offence.)
Records	5.3	Records of the Hepatitis B status of all piercers shall be kept at the premises. It is recommended that each piercer is vaccinated against Hepatitis B.
	5.4	Licence holders will operate in accordance with the current Guidance 'Tattooing and Body Piercing Toolkit' issued in partnership by the Chartered Institute of Environmental Health, Public Health England, Health and Safety Laboratory and the Tattooing and Piercing Industry Union http://www.cieh.org/policy/Tattooing_and_body_piercing_guidance_toolkit.html
		http://www.cieh.org/policy/Tattooing_and_body_pierc

	Part VI Tattooing		
Consultation	6.1	A consultation with the client shall take place prior to the treatment, this shall include medical history, and a patch test should be carried out as deemed necessary as a result of the consultation. Every client shall read and sign a consent form prior to treatment.	
Ages	6.2	No tattoo shall be carried out on a client under the age of 18 years. (<i>The Tattooing of Minors Act 1969</i>)	
Records	6.3	Records of the Hepatitis B status of all tattooists shall be kept at the premises. It is recommended that each tattooist is vaccinated against Hepatitis B.	
	6.4	Licence holders will operate in accordance with the current Guidance 'Tattooing and Body Piercing Toolkit' issued in partnership by the Chartered Institute of Environmental Health, Public Health England, Health and Safety Laboratory and the Tattooing and Piercing Industry Union: http://www.cieh.org/policy/Tattooing_and_body_piercing_g_guidance_toolkit.html	

Part VII Semi-Permanent Make Up / Micropigmentation

Consultation	7.1	A consultation with the client shall take place prior to the treatment, this shall include medical history, and a patch test should be carried out as deemed necessary as a result of the consultation. Every client shall read and sign a consent form prior to treatment.
Ages	7.2	No semi-permanent make up/ micropigmentation shall be carried out on a client under the age of 18 years in accordance with the Tattooing of Minors Act 1969.
Records	7.3	Records of the Hepatitis B status of all therapists shall be kept at the premises. It is recommended that each therapist is vaccinated against Hepatitis B.
	7.4	Licence holders will operate in accordance with the current Guidance 'Tattooing and Body Piercing Toolkit' issued in partnership by the Chartered Institute of Environmental Health, Public Health England, Health and Safety Laboratory and the Tattooing and Piercing Industry Union: http://www.cieh.org/policy/Tattooing_and_body_piercing_g_uidance_toolkit.html

Part VIII Sauna / Steam Room / Spa Baths		
Thermometer	8.1	A thermometer shall be provided indicating the temperature inside the sauna/steam room and the temperature created by the infrared sauna.
Alarm	8.2	a) There must be a non-verbal alarm system in the vicinity linked to a manned reception area for summoning help when users are left unattended. The alarm should continue to sound until it is manually switched to the 'off' position in order to silence it. The user must be made aware of the alert mechanism and how to use it. Emergency devices shall be fitted within easy reach of a person using the equipment.
		b) Operation verification test records shall be available at the premises for inspection at all reasonable times.
Maintenance	8.3	Regular maintenance shall be carried out by a competent engineer in accordance with manufacturer and supplier recommendations. Records of all maintenance visits shall be available at the premises at all reasonable times.
Clock	8.4	A clock shall be visible to users from inside the sauna/steam room/infrared sauna.
Temperature Control	8.5	The temperature control device shall not be accessible to users of the sauna/steam room/infrared sauna.
Hot Coals	8.6	Hot coals in the sauna shall be protected by a guard rail or barrier.
Hygiene	8.7	a) Shower facilities shall be provided close to the sauna/steam room/infrared sauna.
		b) A supply of fresh drinking water shall be available close to the sauna/steam room/infrared sauna free of charge.
Safety Guidelines	8.8	Safety guidelines on the use of the sauna/steam room/infrared sauna shall be clearly displayed nearby. These guidelines shall include the following:
		 All jewellery to be removed Drink plenty of water before use No eating or drinking in the sauna/ steam room/ infrared sauna

		• Avoid use if suffering from high blood processing or beart
		• Avoid use if suffering from high blood pressure or heart problems
		• Do not eat immediately before use
		• Maximum time of use 20 minutes
		Seek doctor's permission to use if pregnant
		• Do not use if under 16 years of age
		• Do not enter if suffering with swollen joints
		• Do not enter if suffering with a fever
		• Seek doctor's permission to use if taking medication
		• People with silicone implants should avoid use of the infrared sauna
		• Drink plenty of water after use
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Heated Spa Baths	8.9	The spa must be managed and maintained to avoid the risk of Legionnella with regard to the Health and Safety Guidance: HSG282 The Control of Legionella and other infectious agents in Spa Pool Systems. Microbiological test reports must be held and available at the premises for a minimum of 5 years in accordance with HSG282.
Log Book	8.10	A log book must be available for recording daily poolside tests to include pH, chlorine or bromine levels, water clarity, temperature, number of bathers. The log-book should state acceptable limits for all tests and record action taken in the event of an unsatisfactory result. The log-book must be held at the premises and be available for inspection at all reasonable times.
Operation	8.11	The spa pool must be operated and maintained in accordance with manufacturer's instructions and the Health and Safety Guidance HSG282 The Control of Legionella and other infectious agents in Spa Pool Systems. Records shall be available at the premises for inspection at all reasonable times.
Alarm	8.12	There must be a non-verbal alarm system in the vicinity linked to a manned reception area for summoning help when users are left unattended. The alarm should continue to sound until it is manually switched to the 'off' position in order to silence it. The user must be made aware of the alert mechanism and how to use it. Emergency devices shall be fitted within easy reach of a person using the equipment.
Records	8.13	Operation verification test records shall be available at the premises for inspection at all reasonable times.
Shower Facilities	8.14	Shower facilities shall be provided close to the spa and clients advised to shower before entering the spa.

Fresh Water	8.15	A supply of fresh drinking water shall be available close to the spa free of charge.
Safety Guidelines	8.16	Safety guidelines on the use of the spa shall be clearly displayed nearby each spa.
		 These guidelines shall include the following: Do not use the spa under 16 years of age Maximum time in the spa is 15 minutes Do not use the spa if you are pregnant Do not use the spa if under the influence of drugs, alcohol or medication Seek doctor's permission to use if suffering from obesity or with a medical history of heart disease, low or high blood pressure, circulatory system problems Seek doctor's permission to use if using medications Do not use the spa if you have any sores or open wounds Take care when entering and exiting the spa. Wet surfaces may be slippery

Part IX Manicure / Pedicure/ Nail Enhancements

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Standards	9.1	All therapists shall be qualified to a standard which is approved by the Council.
Consent	9.2	Signed parental consent shall be obtained for all clients under 16 years old.
Hygiene	9.3	a) The condition of the client's nails should be examined prior to any treatment and if there is any presence or suspicion of any infection etc they should be referred for medical treatment.
		b) Any cotton wool etc which has come into contact with nail liquids shall be disposed of into suitably covered receptacles.
		c) Nail files, wooden spatulas, cotton wool and any other equipment not to be thoroughly cleaned and disinfected are single use only and shall be disposed of as clinical waste after use.
		d) Dispensed nail liquids and other products shall be kept in covered, labelled containers at all times when not in use.
		e) The use of electric drills/files on a client's natural nail is prohibited.
		f) All equipment shall be thoroughly cleaned and disinfected between use on each client.
Nail Enhancements	9.4	All therapists shall be qualified to a standard which is approved by the Council.
Consent	9.5	Signed parental consent shall be obtained for all clients under 16 years old.
Equipment	9.6	a) The use of electric drills/files on a client's natural nail is prohibited.
		b) Electric drills/files shall only be used on the surface of the artificial nail and must not be used to blend the artificial nail to the natural nail.
		c) Electric files/drills shall only be used by therapists who have had specific training in their use.

d) All equipment shall be thoroughly cleaned and disinfected between use on each client.
e) Where nail extensions are carried out suitable air filtering and extraction must be provided to remove dust and chemicals from the air and preferably fitted at work top level. Suitable dust and chemical filters should be fitted and the equipment operated and maintained in good working order in accordance with manufacturer's instructions.

APPENDIX A

Laser /IPL Treatment Protocol Document

- 1. A treatment protocol must be produced by an expert medical practitioner (EMP) in relation to the licence holder's equipment/premises.
- 2. The treatment protocol sets out the necessary pre-treatment checks and tests, the manner in which the Laser/IPL is to be applied, the acceptable variations in the settings used, and when to abort a treatment.
- 3 The treatment protocol should be signed and dated by the EMP to confirm authorisation, should be reviewed annually and include a projected date for review. The protocol should also include availability of the EMP to provide advice.
- 4. A separate treatment protocol should be in place for each Laser/IPL in use at the licensed premises.
- 5. The treatment protocol must include the following:
 - name and technical specifications of the equipment
 - contraindications
 - treatment technique general
 - treatment technique hair reduction
 - client consent prior to treatment
 - cleanliness and infection control
 - pre-treatment tests
 - post-treatment care
 - recognition of treatment-related problems
 - emergency procedures
 - permitted variation on machine variables
 - procedure in the event of equipment failure

APPENDIX B

CONTENT OF LASER/IPL LOCAL RULES DOCUMENT

1) Potential Hazards

List all types of hazards including fire, skin and eye injuries, electrical etc.

2) Device Description

Description of all devices including output, serial numbers etc.

3) Treatment Protocol

Reference to separate document produced by the Expert Medical Practitioner.

4) Written Procedures

Supported by reference to user manual/training manual etc.

- 5) Adverse Incident Procedure
 - a) Details of actions that shall be taken in cases of emergency e.g. eye exposure
 - b) Name, address and telephone number of the local accident and emergency department.
 - c) Any incidents must also be reported to The Royal Borough's Licensing Team on 020 7341 5152, <u>licensing@rbkc.gov.uk</u>
- 6) Emergency Shutdown Procedure

Instructions as set down in manufacturer's manual or treatment protocol.

7) Register of Authorised Users

Details of trained personnel with signed declarations of individuals.

8) Laser Protection Advisor

Contact details and availability of the LPA to provide advice.

- 9) Laser Protection Supervisor
 - a) One Authorised User shall be nominated as the Laser Protection Supervisor to ensure that the register is maintained and the local rules are adhered to
 - b) Name of the Laser Protection Supervisor

10) Record of Laser use

A register shall be kept which will separately record the following information every time the IPL is operated

- The name and date of birth of the person treated
- date of treatment
- the operator
- the treatment given
- any accident or adverse effects.
- 11) Laser/IPL Operator Training
 - a) All Laser/IPL 'authorised users' shall hold the Core of Knowledge Training Certificate (which complies with the recommendations contained in pages 67 and 68 of the MHRA document 'Lasers, intense light source systems and LEDs – guidance for safe use in medical, surgical, dental and aesthetic practices' [September 2015]), together with specific training on the use of on site equipment provided by the supplier of the Laser/IPL. Persons employed to carry out laser treatments from the date of these Standard Conditions (April 2017) shall be trained to Level 4 standard
 - b) Details of all training shall be recorded in the Register of Authorised Users or a separate Training Register.
- 12) Controlled Area designation and access
 - a) The room in which the Laser/IPL is used shall be designated a 'Controlled Area' and the laser shall only be used in this area. Approved warning signs shall be fitted to the door i.e. 'Controlled Area', 'Eye Protection' etc.
 - b) A notice should be fixed to the Laser/IPL indicating that its use is subject to the Local Rules.
- 13) Register of Authorised Users

A register shall be kept of personnel authorised to operate the equipment.

- 14) Safe Operation of device
 - a) No more than one Laser/IPL shall be switched on during the client treatment.
 - b) When the Laser/IPL is in operation the number of persons in the room shall be kept to a minimum.
 - c) The Laser/IPL shall not be enabled to fire unless it is directed towards the treatment site or a beam stop.

- d) The Authorised User shall be careful to avoid reflections of the beam from instruments/equipment in close proximity to the beam path, matt/non reflective surfaces etc. shall be provided.
- e) Whenever the device is unattended by an Authorised User, the laser shall be switched off and the key withdrawn and placed in safe custody by the Authorised User.
- 15) Operator responsibility
 - a) It is the responsibility of the equipment Authorised User to be aware of the nature of the hazard involved and to be familiar with the manufacturer's operating instructions.
 - b) During the operation of the Laser, or IPL, the Authorised User is responsible for the safety of all persons present, including the client and themselves.
- 16) Protective eyewear

Protective eyewear shall be provided and clearly marked for the laser. It is important that the correct goggles are used e.g. the use of a coloured sticker or other identifier on the goggles matches a similar identifier on the laser or IPL. The Authorised User shall instruct all personnel in the Controlled Area to wear goggles suitable for the laser being used.

- 17) Application of local rules
 - a) The laser shall only be used in accordance with these local rules.
 - b) Authorised Persons shall sign statements that they have read and understood these local rules.
 - c) The local rules shall be kept in the treatment room/s at all times.