

Shire of Carnarvon

## NOTIFICATION FOR SKIN PENETRATION BUSINESS

Health (Skin Penetration Procedures)  
Regulation 1998



### Business Contact Details

Name of Premises: \_\_\_\_\_

Address of Premises: \_\_\_\_\_

Business Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Applicant 1

Name:			
Signature:		Date:	
Address:			
Telephone Number:		Mobile:	

### Applicant 2

Name:			
Signature:		Date:	
Address:			
Telephone Number:		Mobile:	

### **Indicate Skin Penetration Type**

(If more than one please indicate **all** the business type conducted on the premises  
A skin penetration procedure is any procedure which involves the tearing, cutting, puncturing or shaving of the skin and includes services such as

- Acupuncture
- Beauty treatments
- Body piercing
- Cosmetic enhancements and
- Tattooing.

Other Detail Please

<b>Describe Proposed Business Operation</b> <b>Please outline the extent and nature of additional Skin Penetration not identified above</b>

## Compliance Skin Penetration

Skin penetration establishments are required by law to notify the local government in which they intend to operate in and must comply with the *Health (Skin Penetration Procedures) Regulations 1998*. The Regulations outline minimum standards of infection control such as basic hygiene, disinfection and sterilisation requirements

<b>1</b>	<b>PREMISES STANDARDS</b>	<b>R</b>
a	Floor, walls & ceilings	
b	Shelves, fittings & fixtures	
c	Separate work area	
d	Sinks (2) or sink + hand basin	
e	Hand basin	
f	Lighting	
g	Linen storage	
h	Sharps Container	
l	Cleaning and Sanitising Products	

<b>2</b>	<b>HYGIENE</b>	
a	Disposable wax spatulas/ladles	
b	Disposable needles	
c	Hand washing between Clients	
d	Gloves/Gowns/Aprons	
e	Waste bins in area	
g	Use by dates of disinfectant	
h	Skin Disinfecting Solution:	
	(i) 70% W/W isopropyl alcohol	
	(ii) 80% V/V ethyl alcohol	
	(iii) 60% V/V isopropyl alcohol	
	(iv) Alcoholic (isopropyl and ethyl forms of 0.5-4% W/V chlorhexadine)	
	(v) 10% W/V aqueous or alcoholic providine iodine (1% W/V iodine)	

<b>3</b>	<b>POLICIES AND PROCEDURES</b>	
a	Maintenance Schedule	
b	Cleaning Schedule	
c	Blood Spill Management Policy	
d	Needle stick injury policy	
e	No animals	
f	No smoking	

<b>4</b>	<b>CLEANING APPLIANCES</b>	<b>R</b>
a	Storage of cleaning equipment	
b	All equipment sterilised/disinfected	
c	Appropriate Disinfection;	
	(i) 80C for 2min,	
	(ii) 75C for 10min,	
	(iii) 70C for 15min, or	
	(iv) Chemical - 2% Glutaraldehyde.	
d	Appropriate Sterilisation:	
	moist heat;	
	(i) 121C ,103kPa, 15psi, 15min,	
	(ii) 126C, 138kPa, 20psi, 10min,	
	(iii) 132C, 186kPa, 27psi, 4min, or	
	(iv) 134C, 206kPa, 30psi, 3min.	
	dry heat;	
	160C for 1 hour.	

<b>5</b>	<b>ACUPUNCTURE</b>	
a	Skin swabs	
b	Disposable needles	

<b>6</b>	<b>BEAUTY THERAPY</b>	
a	Single use wax	
b	Single use electrolysis needles	
c	Tweezers and nozzles scrubbed	
d	Dry store appliances	

<b>7</b>	<b>BODY PIERCING</b>	
a	Sterilisable jewellery used	

<b>8</b>	<b>TATTOOING</b>	
a	Disposable razors	
b	Single use inks	

### Declaration:

I, the person making this application declare that:

- the information contained in this application is true and correct in every particular

**Signature of applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

In the case of a company, the signing officer must state position in the company.