

Appendix 3

Further explanation of the consolidated model byelaws

The following is a summary of the key changes and additions provided for in the consolidated Model Byelaws, with a brief explanation in each case as to the purpose:

1. Section 2(1)(c) encourages the use of treatment needles to be single use and disposable rather than sterilised and reusable.

This amendment attempts to further reduce the risk of cross contamination from client to client and minimise handling of the needles by the operator.

2. Section 2(1)(e) specifies in detail the equipment to be disinfected and increases the frequency of this process to 'after each use' in addition to the previous requirement of 'at the end of each working day' only.

This ensures thorough understanding by the operator of exactly which pieces of equipment are to be disinfected in addition to the frequency of the process, reducing further client to client cross contamination risks.

3. Section 2(1)(g) introduces a new requirement to prevent eating, drinking and smoking in treatment areas in addition to notices stating 'No Smoking' and 'No Eating or Drinking' being prominently displayed in the treatment area.

This reduces the risk of contamination from client to client and practitioner to client by removal of activities that increase this risk.

4. Section 2(2)(a) introduces the requirement to provide treatment, other than that for ear and nose piercing (section 2(2)(b)) in a treatment area used solely for providing treatment.

This not only determines specific areas in which activities are carried out that are more at risk from bodily fluid spillages but also protects the client's dignity given the likely body/skin exposure.

5. Section 2(3)(a) introduces the requirement for treatment areas (other than for ear and nose piercing) to be provided with a smooth impervious floor surface.

This enables thorough cleaning and disinfection of floor areas following body fluid spillages potentially more likely to be associated with these practices i.e. tattooing, semi-permanent skin colouring, acupuncture, electrolysis and body piercing, (other than nose and ear), further reducing cross contamination risks.

6. Section 3(1) and 3(1)(a)(iii) introduces both needles and jewellery to the list of items to be clean and sterile.

This provides a more specific and updated list of items to be included in these processes ensuring the reduction in cross contamination risk.

7. Section 3(1)(a)(iv) changes the wording used by the previous byelaws regarding the dye used in tattooing and semi-permanent skin colouring from 'bacteriologically clean' to 'sterile'.

This brings uniformity to the wording in the byelaws and reduces any risk of confusion.

8. There is some rearrangement of the wording in Section 3(1)(b) of the new combined model byelaws, however, the context is the same as the existing byelaws.

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9. Section 4(1)(a)(ii) requires any open lesion on any exposed part of the operator to be effectively covered by an impermeable dressing.

The existing byelaws specifically name the type of wounds to be effectively covered by an impermeable dressing. This potentially excludes other wounds which, if not appropriately dressed and protected, could also pose cross contamination risks. This change seeks to address the anomalies.

10. Section 4(1)(a)(iii) introduces the requirement for the operator to wear disposable examination gloves that have not previously been used with another client (with the exception of acupuncture in certain circumstances as set out in section 4(3)(a – d) of the model consolidated byelaws and is highlighted in section 3.13 below).

This aims to reduce the risk of cross contamination from client–client, operator–client and client–operator by providing a barrier to body fluids and surface bacteria.

11. Section 4(1)(b)(i) of the new, combined model byelaws removes the requirement for a nail brush to be available for the hand hygiene of operators.

Nail brushes are proven to be potential sources of high levels of bacteria. The removal of their use eliminates this cross contamination risk.

12. Section 4(2) states that in premises where only a hygienic piercing instrument is used (i.e. for ear and nose piercing), the washing facilities provided can be shared with people other than the piercing operator.

This is a new risk based approach.

13. Section 4(3)(a-d) spells out under which circumstances disposable gloves should be worn during the practice of acupuncture.

This ensures a reduction in client-client, client-operator cross contamination in the higher risk elements of acupuncture treatment.

14. Section 5 of the new model combined byelaws makes provision for the practice of acupuncture, tattooing, semi-permanent skin colouring, cosmetic piercing and electrolysis by registered persons to be carried out elsewhere from their registered premises on request. Whilst the requirements relating to the premises cannot therefore be applied the requirement remains for compliance relating to the operator as stated in section 3 (1)(a) and 4(1)(a) of the new model byelaws.

This allows clients to receive treatment in the comfort and security of a premises of their choice, if they so wish, and at the operators' agreement (e.g. at home). This will ensure operator associated risks of cross contamination are controlled.