



| Skin Piercing Pre Application Checklist | | |
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| Employer or Dutyholder | | |
| Name and address of premise Details of any other businesses also operating from the premises | | |
| Activity applied for | | |
| Description of equipment used | | |
| Description of process | | |
| Any other treatments offered on the premise | | |
| Cleanliness of premise and fittings | Yes | No |
| Internal walls, doors, windows, floor, ceiling kept clean and in good repair | | |
| Waste bin with pedal/ refuse collection/ correct disposal arrangements | | |
| Needles, razors or other sharp items used in treatment disposed of in sharps container | | |
| All furniture and receptacles kept clean | | |
| Any table, couch or item which may become contaminated with blood or bodily fluids or any surface which a needle, instrument or equipment is placed immediately prior to treatment, has a clean and impervious surface which is cleaned and disinfected immediately after use and at end of each working day. | | |
| Any table or couch in contact with client's skin is covered by use of a disposable paper sheet or plastic film wrap or similar which is changed for every client. | | |



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| Eating and drinking is prohibited in the treatment area (exception of water for client) Prominent notices should be displayed prohibiting eating and drinking. | | |
| No animals permitted in treatment area (except guide dogs) | | |
| Treatment area | Yes | No |
| Clinical area physically separate from non-clinical areas and all treatment conducted only in the treatment area. | | |
| Floor of the treatment area is smooth and impervious to water. | | |
| Area is well-lit and ventilation is sufficient. | | |
| Cleaning & sterilisation of needles, instruments, materials & equipment | Yes | No |
| Any gown or other protective clothing is clean and in good repair. If not single use covering the material must be adequately cleaned and sterilized where practicable. | | |
| All needles/razors/sharps are single use and disposed of in sharps bin. | | |
| Any single use instrument, equipment or parts of an instrument that touches a client are sterile. | | |
| If petroleum jelly is place on clients skin, it is removed with a clean spatula which is then disposed of or cleaned & sterilized before re-use. | | |
| Equipment such as tattoo machines and clip cords are covered with plastic which is renewed between clients and disposed of appropriately | | |
| Elastic bands or needle runners used on tattoo machines to apply pressure are changed between clients and disposed of appropriately | | |
| Tattoo stencils and marker pens are single use and are disposed of appropriately | | |



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| Only ink that is dispensed into single use pots or pre-packed single use containers is used. | | |
| Plastic film wrap used to cover tattoos is clean and used straight from the pack and is secured by use of hypo-allergenic tape. | | |
| A sink which is separate from the wash hand basin in the treatment area is available locally for general purposes with a constant supply of hot & cold running water | | |
| Sterilisation equipment is available (unless only pre-sterilised items are used) and is serviced/tested/maintained in accordance with manufacturer's instructions. Record maintained. vacuum autoclaves are needed for hollow tubes, tips and grips | | |
| Clean and suitable storage provided for equipment used. | | |
| List disinfectants used | | |
| Record keeping | Yes | No |
| To control spread of infection records are retained of all clients treated name, address, DOB above 18 years, nature of treatment, medical history health assessment, including alcohol and drugs, name of operator and signed consent form | | |
| After care: is both verbal and written advice provided? | | |
| Personal hygiene & Health & Safety | Yes | No |
| Operator has good personal hygiene. | | |
| Operator washes hands thoroughly before and after each treatment with soap and warm water. | | |
| Operator wears single use disposable gloves during entire treatment procedure | | |
| Operator has no open lesions or skin conditions. If present to be adequately covered. | | |
| Lap pad worn by operator to protect clothing which is laundered after each client. | | |
| Operator immunized against Hepatitis B | | |
| A response procedure for accidental exposure to blood and body fluid is available at the premises. | | |
| Risk assessment / procedure for lone working | | |



| Waste disposal | Yes | No |
|--|------------|-----------|
| Waste sharps placed in puncture resistant container with tight fitting lid and proof of proper disposal. | | |
| Waste bins lidded and lined with plastic bag, preferably foot operated bin | | |
| Wastes handled with gloved hands | | |
| Additional info | Yes | No |
| Registration and local byelaws displayed | | |
| Public Liability Insurance in place | | |
| Details of training completed for treatment offered | | |
| Training completed for blood borne pathogens. | | |
| Details of sharps contract | | |