# INFECTION PREVENTION AND CONTROL PLAN (IPCP)

# WITH ONSITE AUTOCLAVE

**FACILITY NAME:** _____ **FACILITY ID:** _____

**ADDRESS:** _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

**OWNER'S NAME:** _____ **PHONE:** _____

**CONTACT PERSON:** _____ **EMAIL:** _____

The owner, employees and practitioners of the above body art facility have developed this Infection Prevention and Control Plan to prevent accidents, to eliminate or minimize occupational exposure to blood or other body fluids, and to break the cycle of cross-contamination between practitioners and clients. This plan is intended to comply with the Safe Body Art Act.

This plan is effective as of (date) _____

Location of IPCP at the facility: _____

*All body art practitioners and employees have access to the plan and can review it at any time during their work shifts.*

*The facility owner is responsible for administering the IPCP and providing training to all practitioners that operate in the facility. Training will be provided annually and whenever changes are made to this document or any practices. Changes must be immediately reflected in this document and resubmitted to the Sacramento County Environmental Management Department (EMD) for review.*

*IPCP training records must be available for inspection upon request and maintained on site for a period of **3** years.*

*Note: Each practitioner is required to have proof of annual Bloodborne Pathogen (BBP) certification and a current valid body art practitioner registration from an approved provider.*

## CHANGES TO IPCP

| Date | Change | Page number |
|---|---|---|
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## ANNUAL TRAINING LOG

**I certify that I received the following Infection Protection Control Plan training, required annually or when a change occurs.**

| Date | Name | Trainer Initials | Notes/Comments |
|---|---|---|---|
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# PROCEDURES FOR CLEANING AND DECONTAMINATING PROCEDURE CONTACT SURFACES

Describe how each workstation and procedure area will be cleaned and decontaminated:

_____

_____

_____

_____

What EPA registered decontamination and disinfecting solutions will be used?

1. _____ Contact Time: _____
2. _____ Contact Time: _____
3. _____ Contact Time: _____

What surfaces and objects will be disinfected? _____

_____

_____

_____

_____

_____

_____

_____

How often will these surfaces and objects be disinfected? _____

_____

_____

## PROCEDURES FOR PROTECTING CLEAN INSTRUMENTS AND STERILE INSTRUMENT PACKS FROM EXPOSURE TO DUST AND MOISTURE DURING STORAGE

Where will sterilized packaged instruments be stored?

When evaluating sterilized equipment, what things are you looking for to ensure they are safe to use?

Are sterilization packages opened in front of the customer prior to the procedure?

YES NO

What will be done with a compromised sterilized package?

## A SET UP AND TEAR DOWN PROCEDURE FOR ANY FORM OF BODY ART PERFORMED AT THE FACILITY, PREVENTION OF CROSS CONTAMINATION

*Wash and dry hands. Put on a clean apron, bib or lap pad over clean clothing. Put on any personal protective equipment that is appropriate for the task. Don clean, previously unused, disposable examination gloves on both hands just prior to the procedure. Gloves shall be worn throughout the procedure. If gloves come into contact with an object or surface other than the client's prepared skin or material to be used for the procedure, or if a glove is torn or punctured, both gloves shall be removed, hand hygiene performed, and new, clean, previously unused, disposable gloves shall be donned. If gloves are removed for any reason during a procedure, hand hygiene shall be performed prior to donning new, clean, previously unused, disposable examination gloves.*

*The practitioner shall wear disposable gloves on both hands when touching, decontaminating, or handling a surface, object, instrument, or jewelry that is soiled or that is potentially soiled with human blood.*

Describe the set up and tear down procedure for each of the stations. Use additional pages if needed.

| SET UP PROCEDURES | TEAR DOWN PROCEDURES |
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Describe the location of gloves available within your facility: _____

Describe the use of barrier film, dental wraps, absorbent pads, paper towels, aprons, bibs, and any film used in your facility prior to the performance of body art and describe what equipment is covered and with what type of barrier is used in each instance:

How will skin be prepared prior to the procedure? If skin at the procedure site is to be shaved, describe the solution used to prepare the skin, type of razor, and the method of razor disposal:

What solution or transfer agent is used to apply stencils or mark work sites?

Tattoo/Permanent Make Up: _____

Piercing or Branding: _____

When covering a procedure site, a sterile dressing must be used. (Plastic wrap not approved)
What type of sterile dressing (s) are used? _____

What Personal Protective Equipment (PPE) is worn during body art procedures?

_____

_____

_____

_____

Washing of contaminated instruments: _____

*PPE must be disposable or washed by a commercial laundry service.*

*Proper handwashing is a key component to preventing cross-contamination. All sinks must be permanently plumbed and equipped with hot and cold running water, containerized liquid soap, and single-use paper towels that are dispensed from a wall-mounted, touchless dispenser that is accessible at all times to the practitioner.*

Describe the location of each handwashing sink in your facility:

_____

_____

Describe when handwashing is required in your facility:

_____

_____

_____

Who is responsible for ensuring hand sinks are properly stocked? _____

*An instrument or reusable item that does **not** come in contact with non-intact skin or mucosal surfaces shall be washed with a solution of soap and water, using a brush that is small enough to clean the interior surfaces and decontaminate after each procedure.* This washing will occur at the sink located at:

_____

_____

# PROCEDURES FOR SAFE HANDLING AND DISPOSAL OF SHARPS WASTE

*The sharps waste container shall be labeled with the words "sharps waste" or with the international biohazard symbol and the word "BIOHAZARD".*

*Each procedure area shall have a container for the disposal of sharps waste. Sharps waste containers must be easily accessible to the practitioner.*

*Sharps waste shall be removed and disposed of by a waste hauler or removed and transported through a mail-back system authorized by the State Department of Public Health. Section 119314 (e)(3)(A)*

What items are disposed of in the sharps container?

_____

_____

Location of <u>each</u> sharps container in your facility:

_____

_____

List the licensed Medical Waste Hauler or mail-back system used for the disposal of sharps containers:

Business Name: _____

Address: _____

City, State, Zip: _____

How often are sharps picked up by the disposal company?

_____

Where are full sharp containers stored, prior to disposal in your facility?

_____

_____

What are the procedures for cleaning up an accidental spill?

_____

_____

# FACILITY MANAGEMENT

Describe the cleaning procedures and frequency for each of these areas:

| |
|---|
| Customer waiting area: |
| Procedure areas: |
| Restroom: |
| Break room: |
| Decontamination and Sterilization Area: |

When and where are animals allowed in your facility? _____

Trash receptacles and disposal of trash: List the location of receptacles, use of disposable liners, where liners are stored, and frequency of trash removal. What items will go into the trash receptacles?

Where will eating, drinking and smoking be allowed by employees and customers?

# RECORDKEEPING

*~~D~~isposable, single-use, pre-sterilized instruments are used, the following records must be maintained for a minimum of **90 days after use**.*

1. A record of purchase:
   Where are these records maintained?

   _____

2. *Written proof on company or laboratory letterhead showing that the presterilized instruments have undergone a sterilization process. Written proof shall clearly identify the instruments sterilized by name or item number and shall identify the lot or batch number of the sterilizer run.*

   This written proof will be maintained in the facility at:

   _____

3. *Documentation must be kept of all procedures, the practitioner performing the procedure, client name, lot numbers of presterilized instruments used, and date of procedure.*

   Where are these records maintained?

   _____

*All information gathered from the client that is personal medical information and that is subject to the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) or similar state laws shall be maintained or disposed of in compliance with those provisions.*

Consent and medical questionnaires will be stored at: _____

The location of the first aid kit is: _____

The location of the nearest healthcare (open 24 hours) facility is:

NAME: _____ PHONE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

# PROCEDURES FOR DECONTAMINATING, PACKAGING, STERILIZING AND STORING REUSABLE INSTRUMENTS

*An instrument or other reusable item that comes into contact with non-intact skin or mucosal surfaces shall either be single-use or be washed, decontaminated, packaged and sterilized after each procedure.*

*Sterilizers shall be loaded, operated, decontaminated, and maintained according to the manufacturer's directions. Only steam autoclave equipment manufactured for the sterilization of* ***medical instruments*** *shall be used. Autoclaves must have mechanical indictors for time, temperature and pressure.*

**Make and Model of Autoclave**: _____

**Time, Temperature, PSI**: List the temperature, duration of time, and PSI of the autoclave at that temperature required for sterilization: _____

_____

Describe the procedure used for decontaminating instruments or other reusable items prior to placing into the autoclave. Indicate whether instruments are manually or machined washed and packaged.

_____

_____

_____

_____

List all Personal Protective Equipment (PPE) worn when cleaning and washing instruments and equipment:

_____

_____

_____

*A reusable item that cannot be immediately washed, decontaminated, and sterilized following the completion of the body art procedure shall be placed in a basin of water with or without detergent.*

What type of container ~~that~~ is used to store the instruments when soaking or washing. What type solution is used?

Location of the soaking instruments: _____

Is an ultrasonic machine used for washing and cleaning instruments? YES ____ NO ____
*Ultrasonic machines must be used per manufacturer's instructions.*

*All chemical bottles must be labeled.*

*Washed instruments to be sterilized shall first be sealed in sterilization packages that contain either a sterilizer indicator or internal temperature indicator. The outside of the pack shall be labeled with the date sterilized, the initials of the person operating the sterilizing equipment and contents of the package unless it has a clear window.*

*Decontamination and sterilization area must be more than 5 feet from the procedure area or separated by a solid, cleanable barrier.*

If applicable, how will the decontamination and sterilization barrier be cleaned and how often?

Instruments are packaged for sterilization as follows:

| INSTRUMENT TYPE | SPECIAL REQUIREMENTS | PACKAGING MATERIAL |
|---|---|---|
| **Hinged** | Must be in "open" position | Sterilization packs |
| **Grips** | | Sterilization packs |
| | | |
| | | |
| **Jewelry** | | Sterilization packs or open if for immediate use |
| | | |

*Sterilization equipment shall be tested using a commercial biological indicator ("spore test") monitoring system after the initial installation, after any major repair, and at least once per month. The expiration date of the monitor shall be checked prior to each use.*

Biological indicators monitoring test results shall be recorded in a log that shall be kept on site, located _____ for minimum of 3 years after the date of the results. Describe actions taken when a spore test has failed.

_____

_____

_____

_____

*Each sterilization load shall:*
*A) Be monitored with mechanical indicators for time, temperature and pressure*
*B) Include a* ***Class V integrator***
*C) Each sterilization pack shall have an* ***indicator***

*A written log of each sterilization cycle shall be maintained for* ***3*** *years and shall include all of the following information:*

a. *The date of the load.*
b. *A list of the contents of the load.*
c. *The exposure time and temperature.*
d. *The results of the Class V integrator.*
e. *For cycles where the results of the biological indicator (spore test) monitoring are positive, how the items were cleaned, and proof of a negative test before reuse.*

The current log will be kept in the following location: _____

Older logs will be kept for three years in the following location: _____

Describe how you load your sterilizer/tray and where you place your Class V integrator in each load:

_____

_____

Sterilized items are left in this location to fully dry for this length of time: _____

# JEWELRY STANDARDS FOR PIERCING

## (For Facilities Offering Piercing Services Only)

*Jewelry placed in newly pierced skin shall be sterilized prior to piercing as specified in Section 119315 or shall be purchased pre-sterilized. Sterile jewelry packs shall be evaluated before use and, if the integrity of a pack is compromised, including but not limited to, being torn, wet or punctured, the pack shall be discarded or reprocessed before use.*

*Only jewelry made of ASTM F 138, ISO 5832-1 and AISI 316L or AISI 316LVM implant grade stainless steel, solid 14-karat through 18-karat yellow or white gold, niobium, ASTM F 136 6A4V titanium, platinum, or other materials found to be equally biocompatible shall be placed in newly pierced skin.*

*All jewelry placed in newly pierced skin will meet the above requirements.*

# BRANDING STANDARDS

*Branding shall not be done with another client in the procedure area. During the procedure, the practitioner and the client shall wear appropriate protective face filter masks.*

*All other standards outlined above in the IPCP shall be followed for branding.*

# ADDITIONAL INFORMATION