2026

Personal Service Guidelines

Environmental Health

Chief Public Health Office

Preface

The purpose of these guidelines is to clarify the expectations of operators of personal service establishments and to provide guidance on the prevention of health hazards.

The guidelines were adopted from the following reference documents: The *Guidelines for Personal Service Establishments*, Health Protection Branch, Ministry of Health, British Columbia.

Ontario Agency for Health Protection and Promotion (Public Health Ontario). Guide to infection prevention and control in personal service settings. 3rd ed., 1st revision. Toronto, ON: Queen's Printer for Ontario; 2019.

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Introduction

The purpose of this guideline is to support personal service establishments in meeting the requirements of the *Personal Services Regulations*. It provides evidence based, technical information to help prevent injuries and reduce the risk of infection transmission to clients and workers during the delivery of personal services.

A personal service establishment is any premises or business that provides personal services for compensation, excluding areas used exclusively as a dwelling.

Personal services include hair, esthetic, nail, piercing, tattooing, body modification, and other prescribed services. Examples are provided in Table 1.

All personal services in Prince Edward Island are subject to the *Public Health Act*, the *Personal Services Regulations*, and these Guidelines.

Health risks associated with personal service procedures vary based on the invasiveness of the service. Many procedures carry the potential for serious injuries or infections, including bloodborne illnesses and bacterial skin infections.

Infections such as:

- Hepatitis B;
- Hepatitis C;
- Human Immunodeficiency Virus (HIV);
- Mycobacterium;
- Pseudomonas; and
- fungal skin or nail conditions.

Can spread by:

- use of unclean instruments and surfaces;
- poor hand hygiene;
- reuse of single-use items; and
- contaminated products.

When contaminated hands, tools, surfaces or products:

- come in contact with the client's body including skin, eyes, nose or mouth; or
- through a cut, tear, or open wound on the client's skin.

Having proper infection prevention and control practices in place will protect clients, workers and businesses.

Table 1: Examples of Personal Services[1]

Non-Invasive Services	Non-Invasive Services, increased risk of contact with blood/body fluids	Invasive Services
• Hair services • Massage[2] • Mud/steam bath • Cosmetic application • Cupping[2] • Facial (non-invasive) • Foot baths (non-pedicure) • Services involving energy-emitting equipment (laser, cryolipolysis, etc.)	• Manicure • Pedicure • Shaving • Teeth whitening[2] • Waxing, lash and brow tinting • Eyelash extensions • Threading/tweezing • Tattoo Removal	• Body piercing • Tattooing • Micro-pigmentation • Blood letting • Body modification • Ear piercing • Electrolysis • Invasive facials • Ear Piercing

[1] The inclusion of a personal service in Table 1 does not imply that the Department of Health and Wellness endorses these services as safe or useful, regardless of whether or not these *Guidelines for Personal Service Establishments* are followed.

[2] Services covered by these guidelines do not include services reserved for members of a college or professional association. The *Regulated Health Professions Act* makes it an offence for a non-member to practice the regulated health profession which has a distinct and identifiable scope of practice.

Prohibited Services and Products

Prohibited Services

- Implanting eye jewelry under the conjunctiva (i.e. extraocular implant)
- Scleral tattooing
- Services involving aquatic species (i.e. fish pedicure)

Prohibited Products

- A list of cosmetic ingredients that are prohibited or restricted for sale in Canada can be found at Health Canada's Cosmetic Ingredient Hotlist: Prohibited and Restricted Ingredients.
- Examples of products that are not to be sold in Canada include:
    - Methyl methacrylate (MMA) – used in nail sculpting services
    - Ear candling or coning devices

Facility Requirements

Site Plan and Reviews

A site plan should be submitted for any new personal service establishment or if extensive renovations are being completed on an existing one. Submit a site plan to an environmental health officer for review prior to any work being completed.

The site plan should include:

- the location of all client services, storage areas, washrooms, reprocessing area, chemical storage areas, laundry facilities and seating areas;
- a listing of all equipment;
- information on floor, wall, counter, shelving and ceiling finishes;
- information on the lighting and ventilation;
- the source of potable water, including a recent water sample result if on a private well;
- waste and sewage disposal information (including sharps disposal), and
- procedures describing cleaning, disinfection and sterilizing practices.

Design Criteria

Personal service establishments, new and existing, must adhere to the following design criteria:

- Client service areas must be separate from areas used for living, dining or sleeping.
- Client service areas must be separate from cleaning, disinfection and sterilization areas.
- If an establishment has more than one personal service station, it must be designed to prevent cross-contamination between services.
- Floors and walls must be smooth, non-absorbent and easily washable.
- Work surfaces must be smooth, non-absorbent, durable and easily washable.
- Convenient access to a washroom for staff and clients.
    - Access to a washroom in a shared space is acceptable (e.g. public washroom in a shopping centre).

Storage Space

- There must be adequate storage space in the establishment to reduce clutter and disorganization, help to keep the establishment clean and sanitary, and reduce contamination.
- Storage space must be easily cleanable.

- Allow enough space to:
    - keep clean, ready-to-use equipment and instruments separate from dirty equipment and instruments, and store in a manner to prevent contamination;
    - store employee and client personal items;
    - have adequate shelving to store extra supplies;
    - store cleaning equipment and chemicals;
    - store client information and records; and
    - enough counter space to allow for hygienic, safe and efficient procedures.

Water Supply, Lighting and Ventilation

Water Supply

A potable water supply is required for handwashing, instrument, equipment, and surface cleaning, and the safe operation of the personal service establishment.

Potable water is water that meets or exceeds the standards respecting contaminants established in the Guidelines for Canadian Drinking Water Quality and supporting documents published by Health Canada.

If the establishment is on a private water supply, the water must be sampled and tested at least once every 12 months for bacteriological analysis.

Lighting

Adequate lighting is required to allow operators to:

- properly perform services and duties;
- identify skin or hair conditions which may be unsuitable for service; and
- complete adequate cleaning.

Ventilation

Adequate ventilation is required to prevent airborne hazards and remove unwanted odors in the establishment. All ventilation systems should be professionally designed. Ensure ventilation systems are maintained, cleaned and openings are free from obstructions or sources of contamination

Adequate exhaust ventilation is required if using chemical disinfectants, steam sterilization or acrylic nail application.

Sink Requirements

Personal service establishments must have at least one sink for hand washing that is accessible from each client service area. Handwashing sinks must be supplied with hot and cold potable

running water and must have liquid soap and single use towels for drying hands - hand dryers are not permitted.

Establishments that are using instruments that require intermediate or high-level disinfection and/or sterilization must have an additional sink designated for instrument reprocessing, ideally a two-compartment sink.

It is not acceptable to use a washroom sink to clean instruments.

A reprocessing sink can only be used for handwashing if:

- The sink is cleaned and disinfected using a low-level disinfectant before switching from handwashing to reprocessing instruments
- There is a written procedure, posted at the sink, outlining how the sink will be decontaminated.

Mobile Sink Requirements

- Permitted only for handwashing purposes
- Cannot be used for reprocessing reusable instruments
- Running hot and cold potable water under pressure (heater and pump required)
- Direct hook-up to source water (potable) and waste disposal (grey water)
- Ensure tanks are large enough to hold enough water for at least one day
- Empty and refill potable water tank daily
- Empty grey-water tank daily and dispose of in a sanitary manner in accordance with local/provincial disposal requirements
- Water lines and tanks cleaned and disinfected at least weekly following manufacturer's instructions
- Maintain a cleaning and disinfection log

Waste Disposal

Waste must be disposed of in a lined garbage bin which is durable, pest proof and easily cleanable. Ensure waste receptacles are located at each client service station and waste is disposed of according to municipal/provincial requirements. Any service area where sharps are used must be equipped with appropriate sharps disposal receptacles.

The establishment must be connected to a municipal sewer system or an approved onsite private sewage disposal system.

Laundry Cleaning and Storage

Linens must be laundered by mechanical washing and mechanical drying when:

- They have made contact with worker or client skin, body, nails, hair
- They have in contact with equipment that touches mucous membranes or punctures or breaks the skin
- They are visibly soiled

Put soiled laundry in a bag or container with a lid and handle as little as possible with gloved hands. Do not rinse soiled laundry before laundering to reduce cross contamination.

Wash and dry on high temperature settings. Store clean laundry in a clean and protected environment, separate from soiled linen.

Hand Hygiene

Hand Washing

Hand washing sinks must be:

- Separate from washroom establishments;
- Accessible without touching door handles or curtains;
- Exclusive to the personal services establishment;
- Accessible for use while procedures are being performed; and
- Supplied with potable hot and cold running water under pressure, dispensable liquid hand soap, single use towels and a lined waste bin accessible without using hands (i.e. sensor or food pedal).

One of the most effective methods to stop the spread of infection is proper hand hygiene before, during and after providing treatments to clients.

If only instruments that require low level disinfection are used to provide services (i.e. barbering, hairstyling, massage, etc.) then the washroom hand sink is suitable for hand washing before and after performing client services.

Hand Washing Process

1. Wet hands with warm water
2. Apply soap
3. Use liquid hand soap and warm water to wash all parts of your hands and wrists.
4. Scrub palm to palm with fingers interlinked, under nails, tips of fingers into opposing palm, between fingers, backs of hands and around thumbs (15-20 seconds).
5. Rinse under warm running water.
6. Dry with a clean single use towel.
7. Turn off running water with towel.

Post Handwashing Poster (Appendix A) at handwashing sinks.

Alcohol Based Hand Rub (ABHR)

Rubbing hands with ABHR is an acceptable alternative for hand washing when hands are not visibly soiled.

If ABHR is provided, ensure ABHR has a Drug Identification Number (DIN) or a NPN (Natural Product Number) on the label and an alcohol content of 60-90%.

ABHR below 70% may not be effective against Norovirus.

To facilitate proper use, ensure dispensers are located at each client service area and avoid placing ABHR at handwashing sinks to prevent confusion with liquid hand soap.

Do not top up containers.

ABHR Process

1. Apply 1-2 pumps of product to palms of dry hands
2. Rub hands together, palm to palm
3. Rub in between and around fingers
4. Rub back of each hand with palm of other hand
5. Rub fingertips of each hand in opposite palm.
6. Rub each thumb clasped in opposite hand
7. Rub hands until product is dry (minimum 15 seconds), do not use paper towel

Post Hand Rub poster (Appendix B) where dispensers are located.

When Hand Hygiene is Necessary

- When hands are soiled or have contacted soiled items
- Before setting up equipment and instruments
- Between clients
- When hands become soiled during different procedures on the same client
- Before putting on gloves and other PPE that will be worn while providing a personal service
- After removing gloves and other PPE that are worn while providing a personal service
- Before and after performing invasive procedures
- Before and after reprocessing
- After personal activities (e.g. using the washroom, coughing, blowing nose, eating, smoking)

Glove Use

Gloves protect hands from contamination from chemicals and potentially infectious materials (blood and/or other body fluids). They are intended to be an extra level of protection.

Wearing gloves is not a substitute for hand hygiene.

Gloves must be worn when providing a personal service involving hand contact with mucous membrane or broken or punctured skin (tattooing, piercing, extractions, invasive facials, eyelash extensions etc.).

Workers must wear gloves if they have broken skin on their hand (rash, cut, sore, cracked or splitting skin, etc.) and there will be client contact.

Select gloves appropriate to the task:

- Non-sterile disposable examination gloves can be used for most procedures or services
- Sterile disposable gloves must be worn for procedures requiring sterile technique
- Latex free
- Fitted to the hands (not too large or too small)
- Wear while cleaning and instrument reprocessing
- Compatible with chemicals (e.g. nitrile gloves not compatible with some disinfectants)
- Disposable is preferred
    - If reusable rubber gloves are used (e.g. household utility gloves), they must be designated for a specific task and be cleaned, disinfected and hung to dry after each use

Workers must:

- Perform hand hygiene before putting on gloves
- Change gloves between procedures on the same client and between clients
- Remove gloves after the activity for which they were used
- Avoid touching the outer surfaces of gloves with bare hands
- Discard gloves immediately into the nearest waste receptacle
- Do not reuse or wash disposable gloves or use ABHR on gloved hands
- Perform hand hygiene after gloves are removed

Other types of Personal Protective Equipment (PPE)

Additional PPE should be worn if there is a risk the activity may contaminate the worker's skin or clothing with blood or other body fluids or chemicals.

Consider the use of gowns, aprons, arm barriers if there is a risk of splashes or sprays. Discard or launder after each use. Do not select barriers that have to be pulled over the head to remove.

Consider the use of masks/respirators if there is a potential risk for a splash or spray of blood/body fluid/chemicals to the face.

It is recommended that masks and eye protection are worn during nail filing due to the generation of nail dust.

If a rotary tool is used a fit-tested, seal-checked N95 respirator is recommended.

Consider the use of eye protection when performing a procedure where there is potential for splashes or sprays of blood/body fluids/chemicals to the eyes.

Reprocessing Areas

Reprocessing refers to the cleaning, disinfection, and sterilization process of reusable equipment and instruments so that they are safe and effective for reuse.

Establishments that provide personal services using instruments that require disinfection using intermediate and/or high-level disinfectants or sterilization, a designated reprocessing area must be in place that is equipped with a dedicated:

- space to hold contaminated instruments (e.g. counter space for storage before the sink);
- sink(s) for cleaning and rinsing instruments during reprocessing (a double sink is best practice);
- area to dry equipment after rinsing (e.g. counter space with a drying rack);
- area for packaging critical equipment that will be sterilized (only applicable if steam sterilization is performed on site);
- area for reprocessing equipment (e.g. counter space for ultrasonic cleaner, disinfection containers, and/or sterilizer); and
- clean storage area (closed cupboards or drawers to prevent contamination).

If low risk personal services are offered and only non-critical items are used, a separate sink for cleaning instruments and equipment may not be required if there is a sink available that meets the requirements below.

The reprocessing sink(s) must be:

- connected to a permanent potable water system, supplied with hot and cold running water under pressure (e.g. plumbed in);
    - mobile sinks are not permitted for reprocessing;
- large enough to accommodate the largest instrument/equipment to be cleaned; and
- clean, organized and clutter free.

Reprocessing areas cannot be in the following areas:

- Client service areas
- High traffic areas or waiting rooms
- Washrooms
- Bedrooms or rooms where people sleep
- Staff break rooms

- Where people eat or prepare food
- Where staff store their personal belongings

Preventing Cross Contamination During Reprocessing

- Ensure one-way workflow from dirty to clean.
- Label each area, post procedures to follow for workers performing reprocessing.
- For small spaces, consider installing partitions to prevent contamination generated from splashes and sprays when cleaning and rinsing instruments.
- Provide gloves and ABHR if a separate handwash sink is not available within the reprocessing area.

See Appendix C for a Suggested Reprocessing Area Design and Layout

Instrument and Equipment Requirements

The following sections cover procedures that must be implemented in personal service establishments during the use of instruments and equipment.

General Use

- Only use durable instruments and equipment maintained in good repair which are suitable to the service.
- Discard damaged, broken and expired instruments and equipment.
- Clean and disinfect or sterilize reusable instruments, equipment and work contact surfaces after each use.
- Clean and disinfect or sterilize instruments and equipment touched or handled during the procedure, even if they were not used.
- Store disinfected and sterilized instruments and equipment in a clean, dry environment which prevents possible contamination.
- Maintain a designated space for storing personal items separate from client supplies.

Safe Use and Storage of Cosmetic Products

Cosmetic products are substances or mixtures of substances that are manufactured, sold, or represented for use by application on or injection into the body for the purpose of cleansing, enhancing, preserving or altering the appearance of the skin, hair or nails. Examples include lotions, make up, wax, scrubs, cleansers, polish, pigments etc.

Check expiry dates on products prior to each service and discard expired products.

If cosmetic products are decanted from the original container, ensure containers are labelled with information about the product identity and manufacturer, including expiry date. Keep

original containers and manufacturer's instructions for use within the establishment for workers to reference. Dispense products in a way that prevents contaminating the bulk supply. Avoid dipping hands or fingers into products and do not double dip.

Do not top up partially empty containers of product. Instead, use product until container is empty. Empty containers must be cleaned and dried before re-filling.

Tip: keep extra containers on hand to allow for easy refilling.

Use single-use items to dispense products, such as wooden sticks, mascara wands, make-up applicators. Products may be dispensed into smaller containers or portions for use on a single client. Unused products must be discarded after each client.

For pencil style make-up applicators, clean the tip with a low-level disinfectant and sharpen between uses. Clean and disinfect the sharpener daily. Only use on intact skin.

Clean and disinfect reusable applicators (make up brushes, hair dye brushes) between each use. Do not double dip applicators into original product containers to prevent contamination. Alternatively, use single-use, disposable applicators.

Apply powder or liquid styptic products with a disposable applicator. Styptic pencils are not acceptable due to cross contamination from the sharpener.

Invasive Procedure Equipment

Cover instruments, equipment and work surfaces with a single-use moisture impervious barrier and discard after each use. Examples include:

- Tattoo or pigmentation machines
- Electrolysis or tattoo machine clip cords
- Electrolysis or facial equipment control panels
- Pigment or spray or squeeze bottles
- Equipment trays
- Client chairs and beds

Disinfect motors and frames of all equipment which may become contaminated daily or after obvious contamination.

Do not use sterile instruments or equipment if they become contaminated.

Discard or re-sterilize any sterile instrument stored in pouches that have become wet or soiled, as the moisture and contaminants can be absorbed into the package, compromising sterility

Energy Emitting Devices

Energy emitting devices may be used to provide certain personal services, such as electrolysis, laser hair removal, laser tattoo removal, facials etc. Energy emitting devices for cosmetic treatments must comply with Health Canada requirements under the *Radiation Emitting Devices Act* and the *Medical Devices Regulations*.

Ensure the manufacturer's instructions for use are followed in the use and maintenance of these devices, unless otherwise directed by an Environmental Health Officer. There may be instances where the manufacturer's instructions for reprocessing these devices do not align with local infection prevention and control standards and an Environmental Health Officer will provide specific directions to ensure equipment is safe for reuse. Manufacturer's instructions, and any additional direction provided by Environmental Health Officers, must be kept on site in a location that is accessible to personal service workers

Workers are required to follow any post-service care instructions that are specified in the manufacturer's instructions after providing a personal service using energy-emitting equipment

Single Use Equipment and Instruments

Equipment and instruments designed to be single-use or made of material that does not withstand cleaning and disinfection or sterilization must be discarded immediately after they are used. This includes the following:

- Porous materials, such as pumice stones
- Absorbent materials, such as foam, sponge, or cardboard

Any equipment in packaging with wording that indicates it cannot be re-used:

- Single use
- Not for reuse
- Do not reuse
- Disposable
- Discard after single use
- Do not use twice
- Or the single-use symbol (2 in a circle that is crossed out)

Single use equipment and instruments cannot be kept for future use, even for use on the same client. If single use items (e.g. nail files, to separators etc.) are sent home with the client, they cannot be brought back to the establishment for reuse.

See Appendix D - Examples of Disposable and Reusable Equipment and Instruments by Personal Service

Sharps

Sharp-edged equipment (sharps) includes any object or instrument capable of causing punctures or cuts. Examples include needles, filaments, blades, lancets, razors, scalpels.

- Only use sterile, single-use items to penetrate the skin and/or mucous membranes
- Do not reuse single-use items (even on the same client)

- Examine packaging and discard if not intact or appears damaged or compromised in any way
- Visually inspect needles for sharpness and defects before using and do not test needles for sharpness on client or worker skin
- Clean and sterilize needles which require modification or attachment to other items before use
- Do not bend, take apart, recap or otherwise manipulate sharps after use to prevent needle-stick injury
- Retrieve broken or dropped sharps in a manner to prevent accidental pokes or cross contamination

Sharps Disposal

Sharps must be discarded immediately after use into a puncture-resistant container with a tight-fitting lid (CSA approved sharps container).

Sharps containers must not be over-filled. Seal and replace when contents reach the "fill line" marked on the container or when ¾ full.

Transporting sharps, even for short distances, increases the risk of exposure to bloodborne infections. Sharps containers must be near where services are provided (e.g. in each client service area where sharps are used).

Dispose of sharps container according to requirements outlined by the Island Waste Management Corporation. Many pharmacies provide and dispose of sharps containers. Contact your local pharmacy for more information.

Single-Use Pre-Sterilized Instruments

Often single-use disposable instruments come pre-packaged and sterile. They can be used to reduce the risk of transmitting diseases via critical instruments and equipment that cannot be adequately disinfected or sterilized between uses. Prepackaged sterile instruments can also be used when the operator does not have the time or infrastructure to properly sterilize.

When using pre-sterilized, single-use instruments, the following information is to be available on the package:

- Proof of sterility from the manufacturer
- An indication the instrument/equipment is single use only
- The process or method used for sterilization (steam, ethylene oxide etc.)
- Expiration date
- Name of the manufacturer

The following should be done to reduce the risk associated with single-use instruments:

- Check the integrity of the packaging before using and only use if it is undamaged
- Discard if the package is compromised
- Adhere to the expiration date if printed on the package and discard once expired
- Check for defective, discolored or soiled instruments/equipment and discard if found
- Ensure all operators are educated about opening sterile instruments
- Open instruments only at the point of use, with gloved hands and in full view of the client
- Discard immediately following the service
- Do not reprocess items labeled as single-use

Storage of Sterile Instruments and Equipment

- Store sterilized instruments and equipment on their edge to prevent contamination:
    - in a clean, dry, dust free area at least 15 cm off the floor and 1 metre away from sources of moisture such as drains and sinks
    - in moisture-resistant, cleanable containers (not cardboard) labelled “sterile”
    - in a secure area where they cannot be tampered with by unauthorized persons
    - in an order so the most recently sterilized items will be used last (first-in-first-out)
- Handle sterile instruments and equipment as little as possible during storage and prior to use to prevent compromising sterility

Opening Sterile Packages

- Check the packaging to ensure its integrity has not been compromised (e.g. visually inspect for discoloration, dampness, dust, soil, tears) before opening. If the integrity of the package is questionable, the item must be cleaned, repackaged, and re-sterilized.
- Check the results of the chemical tape or chemical monitor; if no change in colour has occurred, do not use until the equipment or instrument has been cleaned, repackaged, and re-sterilized.
- For items purchased sterile, check for defects in the equipment or instruments prior to use and check that it is not beyond the expiry date, if applicable.
- Open sterile packages at point of use.
- Wear gloves when reassembling any items prior to use.

Infection Prevention and Control

Each personal service establishment must establish, maintain and follow detailed written operating procedures to ensure customer and worker safety. These procedures must be tailored to the services provided. The goal is to prevent the spread of infection or illness to customers and workers.

A written infection prevention plan is required. This plan must include the classification of instruments and equipment, cleaning, disinfection and sterilization procedures and sanitary transportation and storage. An Infection Prevention Plan Template is available online.

Personal Service Operator

The personal service operator is responsible for reducing the risk of spreading infections:

- Workers with communicable diseases or conditions must avoid providing services or take necessary precautions to prevent the spread of illness to clients
- Ensure an illness policy is in place and followed by all workers
- Recommend workers have up-to-date immunizations (e.g. Hepatitis B)
- Do not eat, smoke or drink in the service areas or while performing a service
- Wear protective coverings during procedures where body fluid contact is possible to protect eyes, nose, mouth and uncovered skin
- Workers must maintain good personal hygiene including practicing proper hand hygiene and wearing clean clothing while providing services

Client

Before performing a procedure, the operator must make sure the client is protected by taking these precautions:

- Inspect the treatment area for cuts, wounds, rash, fungus or visible skin disease
    - If present, refuse the service and advise the client to seek a health assessment by a medical professional
- Ensure equipment is visibly clean and in good condition and repair, do not use if visibly soiled or there are signs of disrepair including cracks, pitted surfaces, rust or corrosion etc.

For services involving contact with mucous membranes or those that may break the skin:

- Cleanse the applicable area of the customer's body
- For invasive procedures that involve puncturing the skin, apply an antiseptic product to the applicable area of the customer's body according to the manufacturer's instructions

    - Antiseptics are to be used prior to tattooing, piercing, micropigmentation, body modifications, electrolysis, waxing, laser hair removal, except where contraindicated (oral or genital piercings)
- For piercing inside the mouth, ensure client's mouth (tongue, teeth, gums) cleaned with toothbrush
- For piercing of the genitals, clean site with liquid soap and water

Suitable antiseptics must have DIN or NPN on label. Examples included isopropyl or ethyl alcohol (70-90%), chlorhexidine gluconate (2-4%), benzalkonium chloride, and povidone-iodine solution. Soaps, body cleansers, body washes are not considered antiseptics.

If dispensing from a container, dispense onto cotton swab and apply to the skin. Discard after each application. Do not dilute or top up antiseptics.

Aftercare Instructions

After performing an invasive procedure (puncturing skin or mucous membrane), personal service workers must provide after-care instructions, both verbally and in writing. Aftercare information may include, but is not limited to, the following:

- directions to clean hands immediately before touching the site
- the expected healing time of the site
- a description of possible complications and their signs and symptoms
- advice on how to deal with slight redness, pain, or swelling
- a recommendation to consult with a healthcare provider within 24 hours if any signs of an infection develop following the procedure
- for tattoo/micropigmentation, information on use of single-use dressings

Training

Personal service operators must have adequate training to recognize, prevent and respond to health hazards that may occur during a procedure.

The personal service establishment owner is responsible for ensuring all operators and workers have the skills and knowledge to refrain from behaviour or practice that risks contaminating a customer, the worker, a work surface or equipment.

Animals

Animals can carry microorganisms that can cause serious illness in humans. The following guidelines are to be in place to prevent the risk of transmission of infection when providing personal services within a establishment.

- Animals are not permitted in client service areas where invasive services are provided
- Animals are not permitted in reprocessing areas

- Animals are not permitted where clean instruments and equipment are stored
- Surfaces in areas where animals have been present must be cleaned and disinfected using a low-level disinfectant
- Workers and clients must perform hand hygiene after handling animals or their environment (e.g. cage)
- Animal enclosures and aquariums must be maintained in clean and sanitary condition
    - Cleaned outside of operating hours
    - There must be a sink designated for cleaning (not reprocessing or handwash sinks)
    - Dispose aquarium water in designated sink or toilet
- Any contaminated areas or sinks must be cleaned and disinfected with low-level disinfectant

Service animals are permitted within a personal service establishment but should be restricted from reprocessing areas or areas where invasive procedures are performed if possible. For more information, refer to Prince Edward Island Human Rights Commission Fact Sheet.

Blood and Body Fluid Exposure Response Procedures

Blood and body fluids may contain pathogens such as hepatitis B, hepatitis C and human immunodeficiency virus (HIV). Anyone exposed to blood or body fluids is at risk of infection.

Cause of Exposure

The following could result in exposure to blood and/or body fluids:

- Needle stick or cut from a contaminated sharp
- Splashing or transfer onto broken skin (e.g. open cut, wound or dermatitis) or a mucous membrane (e.g. eyes, mouth or nose)

Procedure for Blood and Body Fluid Exposure

If an accidental puncture wound or abrasion occurs to an operator or client, the following steps should be taken:

- Wear single-use disposable gloves
- If the area is bleeding, allow it to do so for a short time to reduce the amount of contamination which may enter the body
- Wash the area with soap and water, apply antiseptic and cover the area with a clean bandage
- If a mucous membrane has been splashed, thoroughly flush it with water for 15 minutes

- Advise that they contact a healthcare provider to discuss the possible need for blood tests or post exposure treatment when there is a possibility of exposure to another person's blood or body fluid
- Document the incident, recording:
    - Full name, mailing address and phone number for both people involved in the exposure, if known
    - The full name of the operator
    - The date of the incident
    - The site of the incident and circumstances surrounding it
    - The action taken

See Appendix E for a Record of Injury or Accidental Exposure to Blood or Body Fluid

Records

The operator must keep records and documentation on-site in a secure location not generally accessible to workers or clients (e.g. locked file cabinet, locked drawer) for a minimum of one year, and on file, whether on-site or off-site, for a minimum of two years.

Electronic records are acceptable.

Client Records

Records must be kept on site for all customers that receive services using critical equipment. This includes all invasive services (e.g. tattooing, piercing, body modification, micro pigmentation, microneedling, extractions, electrolysis).

These records must include:

- The name of the personal services worker providing the service
- The client's full name and contact information
- The date and details of the service
- Information that would identify each critical instrument or equipment used (e.g. lot numbers, sterilization dates)

See Appendix F for a Sample Customer Record for Services Using Critical Equipment

Sterilization Records

Personal service establishments that re-use critical instruments or equipment or perform sterilization must maintain records of sterilization. Records must include:

- The name and type of sterilizer used
- Date and time sterilizer used

- Equipment that was sterilized
- Repairs or maintenance performed on the sterilizer
- Result of any checks or tests done on sterilizers
- Record of all monitoring performed on each load
    - Physical indicator results (temperature, pressure, time)
    - Chemical indicator results (internal and external indicators, Type 5 chemical indicator)
    - Biological indicator results (spore test)

Refer to Appendix G for a Sample Sterilization Log

High-Level Disinfection Log

Personal service establishments that re-use semi-critical instruments/equipment and/or reprocess using high-level disinfectants must maintain records that include:

- The name of the disinfectant
- The concentration of the disinfectant
- The date the disinfectant was prepared or decanted
- The date the solution must be discarded (e.g. expiry date, reuse claim), if applicable
- Results of daily concentration testing (test strip results)
- Initials of the worker performing the activities (decanting, diluting, changing solution, testing concentration etc.)
- The elapsed contact time instruments have been fully immersed in the disinfectant

Refer to Appendix H for a sample High Level Disinfection Log

Classification of Instruments and Equipment

The cleaning, disinfecting or sterilizing procedure required will depend on the intended use of the instrument or equipment.

Table 2: Instrument and Equipment Classification

Classification	Instrument/Equipment	Minimum Level of Disinfectant or Sterilization Required
Non-critical	Does not touch the client directly or only comes in contact with intact skin.	Low-level disinfectant
	Intended to contact intact skin, but risk of contact with non-intact skin.	Intermediate-level disinfectant
Semi-critical	Intended to contact non-intact skin or a mucous membrane – but does not penetrate it. Includes equipment, instruments or items that are used to hold, manipulate or contact a critical item.	High-level disinfectant
Critical	Punctures the skin or contact the puncture site prior to puncturing.	Sterilization

Some tattooing or body-modification equipment or items are not considered critical because they do not directly penetrate the skin. However, due to the invasive nature of these procedures, the proximity of these items to punctured skin, and the significant risk for blood/body fluid contact, they are to be treated as critical items for reprocessing purposes. Examples include reusable tattoo machine grips (other than pen style machines with needle cartridges equipped with backflow preventing membranes), tubes, and tips of tattoo machines, clamps for skin folds in body piercing, and reusable scalpel handles.

Appendix D is designed to help operators determine the disinfection or sterilization level required before and after the instrument/equipment is used.

Environmental Cleaning

Walls, floors, and ceilings have a low risk of transmission of infection and must be cleaned according to a fixed schedule and when visibly soiled.

Work surfaces such as chairs, tables, counters, beds, basins etc. are more likely to become contaminated with microorganisms, which can then be transferred onto the hands of workers to customers, or to equipment and instruments, potentially increasing the risk of infection.

Work surfaces must be cleaned and disinfected after each service or use.

Steps for environmental cleaning:

- Use a one-step cleaner and disinfectant or a detergent cleaner followed by a low-level disinfectant
- Follow the manufacturer's instructions for use
- Follow safety data sheet for selecting PPE
- Manually clean with friction to remove visible soil

Barriers and Protective Covers

Barriers and protective covers reduce contamination of surfaces and equipment that cannot be easily cleaned and disinfected. Protective covers include disposable moisture, impermeable material (e.g. plastic), launderable reusable cloth (e.g. linen), or a disposable paper cover or sheet.

Protective covers must be changed between clients and care must be taken to avoid the contamination of surfaces when removing or changing the cover. All used linen is considered soiled and must be laundered after each client use. Once uncovered, the surface must be cleaned and disinfected with a low-level disinfectant.

Reusable equipment, instruments, or items that cannot be easily or adequately cleaned, disinfected or sterilized between each use (e.g. tattoo or pigmentation machines, instrument handles, clip cords, electrolysis control panels, pigment, spray bottles used during service) must be covered with single-use, disposable covers (e.g. plastic wrap) and the cover must be discarded after each use. Once uncovered, the surface must be cleaned and disinfected with a low-level disinfectant.

Cleanup of Blood and Body Fluid Spills

Surfaces that are contaminated with small amounts of blood and body fluids must be cleaned and low-level disinfected immediately following this process:

- Workers assemble required supplies and put on disposable gloves
- For large spills, cover material with 1:10 dilution of household bleach or a high-level disinfectant to inactivate bloodborne viruses, this reduces the exposure risk during cleanup
- Use absorbent material to contain the spill
- Clean and then low-level disinfect the surfaces
- Dispose of gloves and absorbent material into a sealed garbage bag
- Workers perform hand hygiene

Reprocessing Equipment and Instruments

General principles:

- Check integrity of equipment and instruments
- Cracked, chipped, rusted, pitted and damaged equipment and instruments cannot be effectively reprocessed, discard and replace
- Products and processes must be compatible with equipment materials
- Follow manufacturer’s instructions or consult with an Environmental Health Officer

Cleaning

Cleaning must occur before disinfection or sterilization. If an instrument, equipment or surface is not clean it cannot be properly disinfected or sterilized. Cleaning will remove visible dirt, allowing the disinfection or sterilization processes to work effectively.

Pre-Cleaning and Soaking

Cleaning of reusable equipment and instruments must occur immediately after use to prevent any organic material (e.g. blood, body fluids, tissue) that is present from drying. If immediate cleaning is not possible keep the equipment/instruments wet with detergent and water or enzymatic cleaner until they can be cleaned.

Avoid prolonged soaking as it may lead to formation of biofilm making disinfection less effective.

Pre-cleaning and soaking process:

- Workers performing cleaning must wear appropriate PPE (face protection, disposable gown, rubber gloves, etc.)
- Equipment and instruments that consist of multiple parts must be taken apart, according to the manufacturer's instructions
- If the reprocessing sink has been used for handwashing, it must be decontaminated before it is used for equipment and instrument cleaning:
    - Clean basin, taps, counters with detergent and water
    - Rinse
    - Disinfect with a low-level disinfectant

Manual Cleaning

- Fill the sink with warm water (enough to cover the largest item to be cleaned) and add detergent or enzymatic cleaner as directed by the manufacturer
- Provide cleaning brushes, appropriate for the size of each piece of equipment to clean all surfaces including hinges, coils, valves, clamps, crevices, tubes or spaces that may trap microorganisms
- Scrub instruments and equipment below the water surface to prevent aerosolizing the cleaning chemicals and contaminants

Mechanical Cleaning

Ultrasonic Cleaners

Ultrasonic cleaners are devices that use high-frequency sound waves (ultrasound) to clean objects. Their use is strongly recommended for equipment and instruments that have joints, crevices, lumens or other areas that are difficult to manually clean.

- If used, ultrasonic cleaners must be Health Canada and CSA approved

- Equipment and instruments must first be disassembled and manually cleaned to remove visible soil
- Follow the manufacturer's instructions for use
- Select a detergent solution suitable for the instruments, equipment and the ultrasonic cleaner
- Ensure the equipment and instruments are completely immersed in the detergent solution
- Always operate the ultrasonic cleaner with the lid closed to prevent microorganisms from becoming aerosolized and potentially contaminating surrounding surfaces
- Change the detergent solution at least daily, or more frequently if
    - the solution becomes visibly soiled and/or
    - the manufacturer's instructions specify more frequent changes
- Clean the basin before refilling with fresh detergent
- Low level disinfection is recommended

Washer-Disinfectors

Washer-disinfectors are mechanical washing systems that remove soil and clean equipment and instruments prior to high-level disinfection or sterilization.

Noncritical equipment and instruments that require a minimum of low-level disinfection may be reprocessed in a washer-disinfector. Washer disinfectors are not to be used for intermediate or high-level disinfection.

Washer-disinfectors must be installed, maintained, loaded, and operated in accordance with manufacturer's instructions.

Rinsing and Drying

After cleaning, rinse with clean water to dislodge soil and remove detergent residue that may interfere with disinfection or sterilization.

Dry instruments before disinfection to prevent dilution of disinfectants.

Dry instruments fully before packaging for sterilization.

Acceptable drying methods include (consult equipment manufacturer's instructions):

- Air dry in drying racks
- Manual drying using a lint free cloth, soft absorbent towel

Visually inspect equipment and instruments to ensure cleanliness and integrity prior to disinfection or sterilization.

After Cleaning

Materials used for cleaning (e.g. rubber gloves, brushes, etc.), sinks, countertops and containers are to be cleaned and disinfected (low-level) after each cleaning session.

Perform hand hygiene after removing PPE.

Disinfection

Disinfection is a process that kills some or all disease-causing micro-organisms from surfaces of inanimate objects. Thorough cleaning is required before disinfection.

Based on the level of risk, equipment and instruments are classified as non-critical, semi-critical, or critical. The requirement to disinfect or sterilize and the type of disinfectant permitted is based on these classifications. See Table 2: Instrument and Equipment Classification.

Disinfectants come in varying strengths and are applied according to the type of surface or instrument used. Choosing the right disinfectant can be confusing; the information below will help to determine what level of disinfection product to use and how to identify it.

Levels of Disinfection

When using a chemical disinfectant, it is important to follow the manufacturer's directions. All products being used as a disinfectant must have a Drug Identification Number (DIN) or a Medical Device License (MDL).

Low-Level Disinfection

Low-level disinfection is a process capable of killing most vegetative bacteria, some fungi, enveloped viruses and some non-enveloped viruses. Low-level disinfection is required for non-critical items where there is no direct contact or only contact with the client's intact skin. Low-level disinfection is also appropriate for most environmental surfaces.

When selecting a low-level disinfectant make sure the manufacturer's label has a DIN and a general disinfectant claim.

Refer to Appendix D for examples of non-critical items by service.

The active ingredient in low-level disinfectants may be quaternary ammonium (QUATs), sodium hypochlorite or phenols.

Intermediate-Level Disinfection

Intermediate-level disinfection is a process capable of killing vegetative bacteria, mycobacteria, most fungi, enveloped viruses and most non-enveloped viruses. Intermediate-level disinfection is required for non-critical items where there is risk of contact with non-intact skin or mucous membranes.

When selecting an intermediate-level disinfectant, ensure the manufacturer's label has a DIN, a general disinfectant claim, a broad-spectrum virucidal claim and a tuberculocidal or mycobactericidal claim.

Refer to Appendix D for examples of semi-critical items by service.

The active ingredient in intermediate-level disinfectants may be alcohol, sodium hypochlorite, or enhanced action hydrogen peroxide (0.5%).

High-Level Disinfection

High-level disinfection is a process capable of killing vegetative bacteria, mycobacteria, fungi, enveloped and non-enveloped viruses, as well as some, but not necessarily high numbers of bacterial endospores.

High-level disinfection is required for semi-critical items (equipment/instruments that come in contact with, but is not intended to puncture, mucous membranes or non-intact skin. High-level disinfection is also required for equipment, instruments or items used to hold, manipulate or contact a critical item. High-level disinfectants require a medical device license which may not be on the label. Refer to Health Canada's Medical Devices Active Licence Listing (MDALL) to verify high-level disinfectants used have a MDL.

High-level disinfectants can be identified by their label, which may include the terms high-level disinfectant or chemical sterilant or sporicidal.

Refer to Appendix D for examples of semi-critical items by service.

The active ingredients in high-level disinfectants may be sodium hypochlorite, enhanced action accelerated hydrogen peroxide (2-7%), peracetic acid, glutaraldehyde, ortho-phthalaldehyde.

High-level disinfectants and liquid chemical sterilants cannot be used to reprocess instruments or equipment classified as critical, refer to sterilization below.

UV light sterilizers and boiling are not acceptable ways to disinfect equipment or instruments.

Disinfection Process

When using disinfection products, always follow the manufacturer's instructions for each product including:

- Dilution and mixing instructions
- Storage
- Contact time
- Reuse period
- Rinsing after disinfection
- Ventilation requirements
- Safety requirements (personal protective equipment, eye wash stations etc.)
- Use by/expiry dates
- Disposal

Determine the level of disinfection required based on the intended use of the instrument/equipment (refer to Table 2 and Appendix D).

Choose a disinfectant and concentration that meets the appropriate level of disinfection. Verify that the disinfectant has a DIN or MDL.

EPA or FDA numbers issued in the United States are not recognized in Canada.

Equipment and Instruments

- Wear personal protective equipment, as required by the manufacturer's instructions.
- Items must be fully immersed in the disinfectant solution for the appropriate time to ensure microorganisms are destroyed
    - Provide soaking containers of adequate size to fully cover the largest piece of equipment or instrument that requires disinfection
- Avoid prolonged soaking as it can damage instruments and equipment
- Do not store items in disinfectant when not in use
- Do not top up prepared solutions with fresh solution
    - Dump container, clean, rinse, dry and mix or prepare fresh solution
- Label containers if decanted from original container
- Verify that the solution is at or above the minimum effective concentration using an appropriate test strip
    - Test trips shall be used and stored in accordance with manufacturer's instructions
    - A high-level disinfectant solution must be discarded when the test strip shows it is not at the minimum effective concentration
- Concentrations checks must be recorded daily for high-level disinfectant solutions (Sample High-Level Disinfection Log)
- Remove instruments or equipment from solution using appropriately disinfected tongs
- Handle disinfected items with clean hands
- If rinsing is required (by the manufacturer), rinse with potable water
- Air dry on a drying rack or manually dry with a lint free cloth that is laundered after each use
    - Ensure items are completely dry before putting them into storage
- Store clean instruments and equipment in a manner to protect from contamination
- Ensure reprocessed equipment is stored separately and identifiable from contaminated equipment to prevent accidental use
- Store in clean bags, packages or covered containers in a clean, dry environment such as a cupboard or drawer

Disinfectant Wipes

- Ready-to-Use (RTU) pre-moistened disinfectant wipes may be used for cleaning and disinfection of non-critical instruments, equipment and surfaces
- Manufacturer's instructions for disinfectant wipes must be followed
- Wipes must remain in the original container and must remain closed when not in use
- Wipes are not appropriate for instruments with difficult to reach surfaces such as hinges, crevices, lumens etc.
- Refer to the instrument and equipment manufacturer's instructions for information on proper disinfection

To ensure effective disinfection using a disinfectant wipe:

- Consider the size of the item or surface to be cleaned and disinfected and the size of the wipe
- Ensure the surface is kept wet for the required contact time (may require more than one wipe)
- Consider the amount and condition of visible soil
- Heavily soiled or dried on debris may require soaking rather than using a wipe
- Discard wipes if they become dry, do not add liquid to dried wipes

Work Surfaces and Equipment that Cannot be Soaked

- Clean first, unless using a Health Canada approved combination cleaner and disinfectant
- Apply the disinfectant with a single use cloth or paper towel to all surfaces for the required contact time as per the manufacturer's directions
- Rinse, if necessary, with potable water and dry with a clean paper towel or allow to air dry

After Disinfection

- Dispose of submersion disinfectant solutions according to the manufacturer's label
- Clean and low-level disinfect materials used for disinfection (rubber gloves, etc.), sinks, countertops and containers after each cleaning session
- Perform hand hygiene after removing PPE

Sterilization

Critical instruments must be sterile and remain sterile until point of use.

Sterilization is the complete destruction of all microbial life, including vegetative bacteria, bacterial spores, fungi, fungal spores and viruses. Sterilization is required for all critical instruments after thorough cleaning.

Operators must ensure adequate sterilization methods are applied or that only single-use, pre-packaged sterile instruments and equipment are used. Tests and records which show the efficacy of any method used for sterilization are required.

Types of Sterilizers

A personal service establishment that reprocesses critical equipment must use steam sterilization with the use of a steam sterilizer (autoclave). This process uses saturated steam under pressure. Equipment that cannot withstand high heat is to be purchased pre-sterilized.

Sterilizer Selection and Maintenance

Two types of table-top sterilizers are gravity displacement and dynamic air removal sterilizers. Dynamic air removal is the preferred method for sterilizing packaged and hollow instruments.

Ensure sterilizers are suitable for sterilizing the specific piece of reusable equipment used to perform personal services, refer to manufacturer's instructions.

- Sterilizer must be capable of producing dry packages.
- Sterilizers must meet standards established by Health Canada and the CSA Group
- When purchasing a sterilizer, operators can verify those that are licensed for sale by Health Canada by checking the Medical Devices Active License Listing
- The product label and/or manufacturer's instructions for use will feature the CSA mark, the letters CSA inside a circle, or operators can use the CSA Group Product Listing website to look up the manufacturer or model number to confirm the certification is active
- Sterilizers must be in good working order and maintained and operated in accordance with manufacturer's instructions, including:
    - Installation of the unit
    - Operation instructions followed
    - Preventative maintenance
    - Cleaning
    - Packaging of instruments/equipment
    - Loading
    - Temperature, pressure, time requirements
- The manufacturer's instructions for use must be kept on site and be readily accessible to personal service workers that perform sterilization
- It is recommended that sterilizers be equipped with a paper printout or electronic recording of physical parameters (time, temperature, pressure)

Other types of sterilizers are not permitted for use in personal service establishments, including:

- Dishwasher
- Boiling
- UV light or irradiation
- Glass bead sterilizers
- Microwave ovens
- Domestic ovens
- Pressure cookers
- Dry heat sterilizers
- Chemiclaves and chemical sterilants

Testing Sterilizers

To verify that a sterilizer is functioning correctly, operators must run qualification tests on a sterilizer at the following occasions:

- Before putting a new sterilizer to use
- After relocating a sterilizer
- After repairing a sterilizer
- After mechanical malfunctions

A satisfactory test includes:

- At least one biological indicator (spore test) with a negative result (e.g. no growth)
- One chemical indicator on the outside of a test pack showing successful colour change
- One type/class 5 indicator on the inside of a test pack showing all 3 parameters (time, temperature, pressure) reached required limits
- Verification of exposure time at the necessary sterilization temperature and pressure

If using a dynamic air removal sterilizer using pre-vacuum cycles, the sterilizer must also be tested with an air removal test in an otherwise empty sterilizer.

Refer to the manufacturer's instructions for use for the types and placements of biological and chemical indicators for qualification testing.

Sterilizers, including back up sterilizers, are not to be used until the results of all tests are confirmed to be satisfactory. Keep records of all testing on file. To prevent interruptions in operations, it is recommended that a supply of pre-packaged sterile instruments/equipment be available.

Packaging of Equipment and Instruments

- To ensure critical items remain sterile until point of use, instruments and equipment must be packaged prior to sterilization

- Ensure items are cleaned and completely dry prior to packaging, any remaining moisture will remain after sterilization and compromise sterility
- Provide paper-plastic peel pouches designed for steam sterilization
    - Incorrect packaging or pouches can inhibit sterilization or fail to properly protect the contents after sterilization
- Equipment and instruments in packages (e.g. clamps, forceps, or scissors) are to be in an open and unlocked position to ensure all surfaces are in direct contact with the steam during sterilization
- Do not overfill packages, place single items or small groups of instruments that are used together to perform a service in each pouch
- Ensure instruments are not touching each other or overlapping
- Ensure items are not touching the seams of the pouch
- If there are multiple items in a single pouch, all items must be reprocessed after opening the package, even if they are not used in providing the personal service (e.g. sterility compromised)
- Each pouch must be equipped with internal and external chemical indicators
- Label the pouches with the date, sterilizer (if more than one in the establishment), and a load number
    - Labelling must be done in a manner that does not tear or puncture the packaging
    - It is best to label before filling the pouches
    - Use soft tipped permanent marker
    - Write only on the plastic side of the pouch or on the folded seal
- Follow the manufacturer's instructions for sealing the pouch (e.g. fold on the indicated line)
- The presence of moisture in or on the packages or pouches after sterilization is an indicator of **sterilization failure**
- A drying cycle is required for all sterilization cycles for wrapped or packaged items
- Do not handle it until it's cool to touch

After Sterilization

- Dispose of any chemical products according to the manufacturer's instructions
- Clean and low-level disinfect materials used for sterilization, sinks, countertops and containers after each use
- Perform hand hygiene after removing personal protective equipment

Sterilization Monitoring Requirements

Table 3 below outlines three types of monitoring requirements to ensure sterilization is achieved. Each must be included in a regular maintenance schedule, documented and followed for each sterilizer.

Conduct all three types of monitoring on each sterilizer.

Table 3: Sterilizer Monitoring Requirements

Monitoring Type	Monitoring Requirements
Physical (Mechanical)	Keep monitoring records of temperature, duration, pressure, date and user's name for each load. See Appendix G for a sample sterilization log sheet. Sign and date the printout (if available) of the mechanical parameters reached during each cycle in the logbook.
Chemical (Process)	During each cycle, ensure every instrument package contains a temperature sensitive indicator designed to change color during the sterilization process. Use a chemical indicator which is compatible with the type of sterilizer being used. For each load, include a packaged Class 5 chemical indicator to verify that the contents were present for the correct exposure to the sterilant. Class 5 indicators react the presence of saturated steam and temperature but also do not change color until enough time has passed.
Biological (Spore Testing)	Chemical monitoring alone does not guarantee sterilization, as proper time and pressure are contributing factors. A commercially available preparation of heat-resistant spores must be used to verify the sterilizer is working properly. A passing test is one that a testing lab determines is negative for spore colony growth.

Physical Monitoring

The following physical parameters must be monitored and documented for each sterilization load:

- The sterilization temperature during the sterilization phase
- The length of time the sterilization temperature was maintained (not the total time of the cycle)
- The pressure reached and maintained during the sterilization process

It is recommended that the sterilizer be equipped with a paper printout that provides the details of the mechanical parameters met during each cycle. If there is no printout, the worker operating the sterilizer must observe and document the required mechanical parameters, and sign and date the record.

- Load numbers must be assigned to each sterilized load
- Load numbers must be recorded on each sterilized package in each load

- Workers must sign and date the printout and/or logbook confirming that these parameters are correct
- Records must be kept on site for 12 months and filed for 2 years

Equipment and instruments processed in each load must be recorded (e.g. lot number) so that the equipment and instruments can be identified and held as necessary in the case of a failed (positive) spore test

Chemical Monitoring

Chemical indicators do not indicate that instruments and equipment are sterile. They do not replace the need to use a biological indicator but do indicate that the package has been processed through a sterilization cycle.

All chemical indicator results are to be examined, verified for success, documented and kept on site for 12 months and file for a period of 2 years.

There are 6 Classes/Types of Chemical Indicators, the following are appropriate for use in personal service establishments where sterilization is performed:

- Class/Type 1 – Indicators respond to one or more variables. Examples include indicator tapes. Useful in identifying which packages have been through a sterilization cycle. Appropriate for use as external chemical indicators.
- Class/Type 2 – Indicators for use in specific tests. Example includes the air removal (i.e. Bowie-Dick) test, which indicates whether a dynamic air removal-type sterilizer has properly evacuated the air from the load. To be performed each day a dynamic air removal (i.e. pre-vacuum) sterilizer is used before the first load is processed when, or as often as is indicated in the sterilizer's manufacturer's instructions for use.
- Class/Type 4 – Multi-variable indicator. Indicators react with 2 or more critical variables in the sterilization cycle. Appropriate for use as an internal indicator. They may be integrated into the sterilization pouches or be placed inside the pouch with the instruments during packaging.
- Class/Type 5 or 6 – Indicators react to all critical variables in the sterilization cycle (time, temperature, presence of steam). They may be integrated into the sterilization pouches or be placed inside the pouch with the instruments during packaging. **At least one Class/Type 5 or 6 chemical indicator must be included in each sterilization load and packaged in the same manner as the equipment being sterilized.**

Biological Monitoring

Biological monitoring verifies the ability of the sterilizer to kill microorganisms. A biological indicator (BI) is to be used to test each actively used sterilizer. Geobacillus (formerly Bacillus) stearothermophilus spores are used to test steam sterilizers.

A spore test using a BI must be performed at least monthly:

- Package the spore strip(s) within a "test pack"

- Test pack = A package used to test the performance of a sterilizer that presents a challenge to the sterilization process that is equal to or greater than the challenge posed by the most difficult piece of equipment that is routinely sterilized. A test pack is composed of:
    - The same packaging that you routinely use for sterilization
    - The largest or bulkiest instruments that are sterilized
    - The BI
    - An internal CI (Class 5)
- Test packs must be processed in a full load, this will present the necessary sterilization challenge to the BI
- Place test pack in the coldest area of the sterilization chamber (refer to manufacturer's instructions for proper placement)
- After completing the sterilization cycle, open the test pack and retrieve the spore strip
- Package according to the manufacturer's instructions and send the spore strips to an approved laboratory for testing
    - Pass = Negative test results (e.g. no spore growth on sterilized strip, growth observed in unprocessed control strip), indicates a that the sterilizer is operating properly
    - Fail = Positive test results (e.g. spore growth observed in both the sterilized strip and unprocessed control strip), indicate that the sterilizer may not be operating effectively

Biological indicator testing equipment is commercially available. If it is performed in-house, a monthly spore test sent to an approved laboratory is still required.

Results of all spore tests must be documented and kept on site for 12 months and on file for at least 2 years.

A copy of the most recent spore test must be posted in a location that is easily visible to customers upon entering the premises.

Positive Biological Indicator Results

In the event of a failed spore test, follow the steps below:

- Repeat the test
- Recall and do not use any items sterilized since the last passed spore test, including any equipment and instruments in the failed load
- If the repeat test passes and there is no indication of a system malfunction, re-sterilize the items that were sterilized since the last negative spore test, prior to use and continue operation as normal

If the second test fails:

- Stop invasive services using instruments from the defective sterilizer
- Provide alternative means of sterilization or use single-use disposable sterile instruments only
- Assess whether failure is due to operational error or if repair, maintenance, or replacement of the sterilizer is necessary
- Contact Environmental Health
- It may be necessary to notify all clients who may have been treated with inadequately sterilized instruments or equipment
    - Having good client records will minimize the number of clients that will need to be contacted
- Have the sterilizer repaired and biologically tested until a passed result is obtained
- Re-sterilize all items sterilized since the last passed test (as there is no way to know when the sterilizer stopped being effective)
- A back up plan should be in place in case of sterilizer malfunction
    - Have an adequate supply of packaged, sterilized instruments and equipment
    - Have a functioning and tested back-up sterilizer

Keep records on file of each biological monitoring result, including date of the sterilizer run, operator, date sent to the lab, date results were received and the results.

Refer to Appendix G for a Sample Sterilization Log Sheet

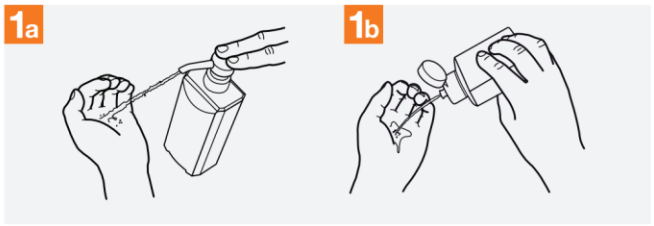
Appendix A – Hand Washing Poster

Appendix B – Alcohol-Based Hand Rub Poster

How to Handrub?

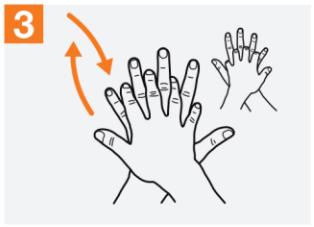
RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

Duration of the entire procedure: 20-30 seconds



Apply a palmful of the product in a cupped hand, covering all surfaces;

Rub hands palm to palm;

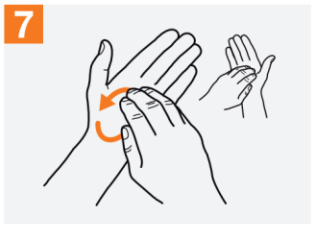


Right palm over left dorsum with interlaced fingers and vice versa;

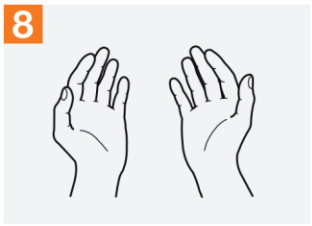
Palm to palm with fingers interlaced;

Backs of fingers to opposing palms with fingers interlocked;

Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;

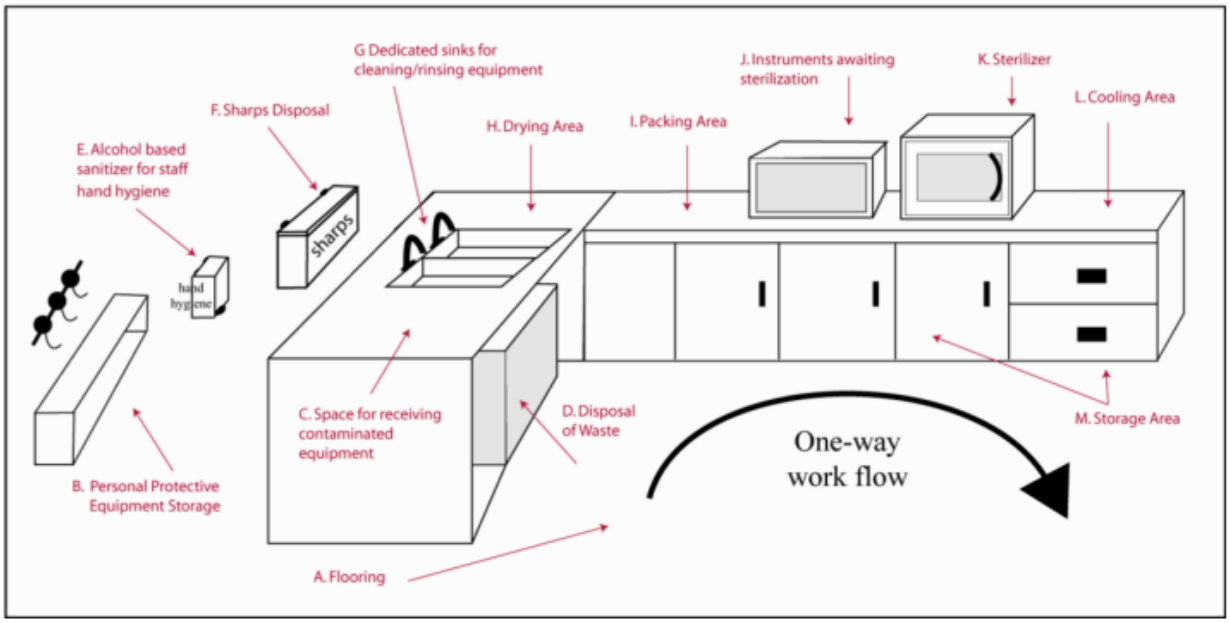


Once dry, your hands are safe.

World Health Organization | Patient Safety – A World Alliance for Safer Health Care | SAVE LIVES Clean Your Hands

May 2009

Appendix C – Suggested Reprocessing Area Design and Layout



Source: College of Physicians and Surgeons of Alberta. Accessible from https://cpsa.ca/wp-content/uploads/2022/02/Suggested-Layout-for-MDR-Area.pdfsted-Layout-for-MDR-Area.pdf

A. Flooring and surface finishes – Smooth and easy to clean, without seams, pores, fabric, hidden hinges or unsealed wood.

B. Personal Protective Equipment Storage – dedicated space for gloves, eye protection, masks, gowns etc. used when performing reprocessing. Ensure it is located in an area that will not be splashed.

C. Counter space for receiving contaminated equipment.

D. Disposal of Waste – Under the sink is recommended for waste bins as this area cannot be used for clean item storage.

E. ABHR dispenser. Best practice would be to have a dedicated handwashing sink as well.

F. Sharps Disposal – Sharps container for secure biohazard disposal.

G. Dedicated sink for cleaning/rinsing equipment. 2 compartment is recommended.

If using an Ultrasonic Cleaner, place between sink and drying area.

H. Drying Area – An area for drying after cleaning/rinsing.

I. Packing Area – A clean separate area for packing equipment for sterilization (if applicable).

J. Instruments awaiting sterilization – A labeled container for instruments awaiting sterilization is recommended.

K. Sterilizer – Avoid storage over top of the sterilizer due to steam produced by the sterilization. Place log book near the sterilizer.

L. Cooling Area – A clean area for allowing sterilized packs to cool before storage

M. Storage Area – Sterilized items stored minimum 1 meter away from wet areas (i.e. sinks, sterilizer)

Appendix D - Examples of Disposable and Reusable Equipment and Instruments by Personal Service

Personal Service	Critical	Semi-Critical	Non-Critical	Non-Critical	Single-Use
	Sterilization Required	**High-Level Disinfection**	**Intermediate-Level Disinfection**	**Low-Level Disinfection**	**Discarded after each use**
Hair Services	• reusable straight razors with fixed blades		• non-critical items that have accidentally nicked the skin	• combs, • brushes, • mixing bowls, • scissors, • hair cutting blades, • handles for hair cutting blades and razors, • clippers, • hooks for cap highlights, • rollers, • hair clips, • hair caps, • hooks for highlights, • disinfectant containers for holding instruments	• disposable razors, • shaving blades, • neck strips, • needles for hair extensions and weaves, • styptic products, • gloves

Personal Service	Critical	Semi-Critical	Non-Critical	Non-Critical	Single-Use
	Sterilization Required	High-Level Disinfection	Intermediate-Level Disinfection	Low-Level Disinfection	Discarded after each use
Nail Services (manicure, pedicure)		• grater style foot files, • callus blade holders	• clippers, • nippers, • nail cutters, • nail cleaner scoops, • diamond/metal nail files, • diamond/metal drill bits or burs, • cuticle pushers, • foot file handles (sticker on handle style), • pedicure basins (without liners), • recirculating foot basins,	• rotary/dremel file handle, • manicure bowls/trays, • pedicure basins (with liners), • nail drying/curing stations, • tweezers for applying nail art, • nail brushes, • work surfaces (trays, stools, chairs, tables)	• callus (credo) blades, • pumice stones, • buffer blocks, • emery boards, • paper/carboard sanding bands, • foam/cardboard nail files, • cuticle pushers (wooden), • foam sandals, • foot files (sticker on metal handle style)

Personal Service	Critical	Semi-Critical	Non-Critical	Non-Critical	Single-Use
	Sterilization Required	**High-Level Disinfection**	**Intermediate-Level Disinfection**	**Low-Level Disinfection**	**Discarded after each use**
Tattoo and Micropigmentation	• Tattoo grips, tubes and tips, • reusable ink caps or trays			• client chairs/beds, neck/arm rests, • work counters and table tops, • containers used to hold contaminated instruments, • surfaces and equipment with protective covers including: ○ clip cords, lamp handles, service trays, spray bottles, tattoo machines and control panels, pen style tattoo machine grips	• needles, • needle bars, • needle cartridges, • disposable grips, • ink caps, • leftover ink, • stencils, • antiseptic swabs, • instrument and surface barriers and protective covers

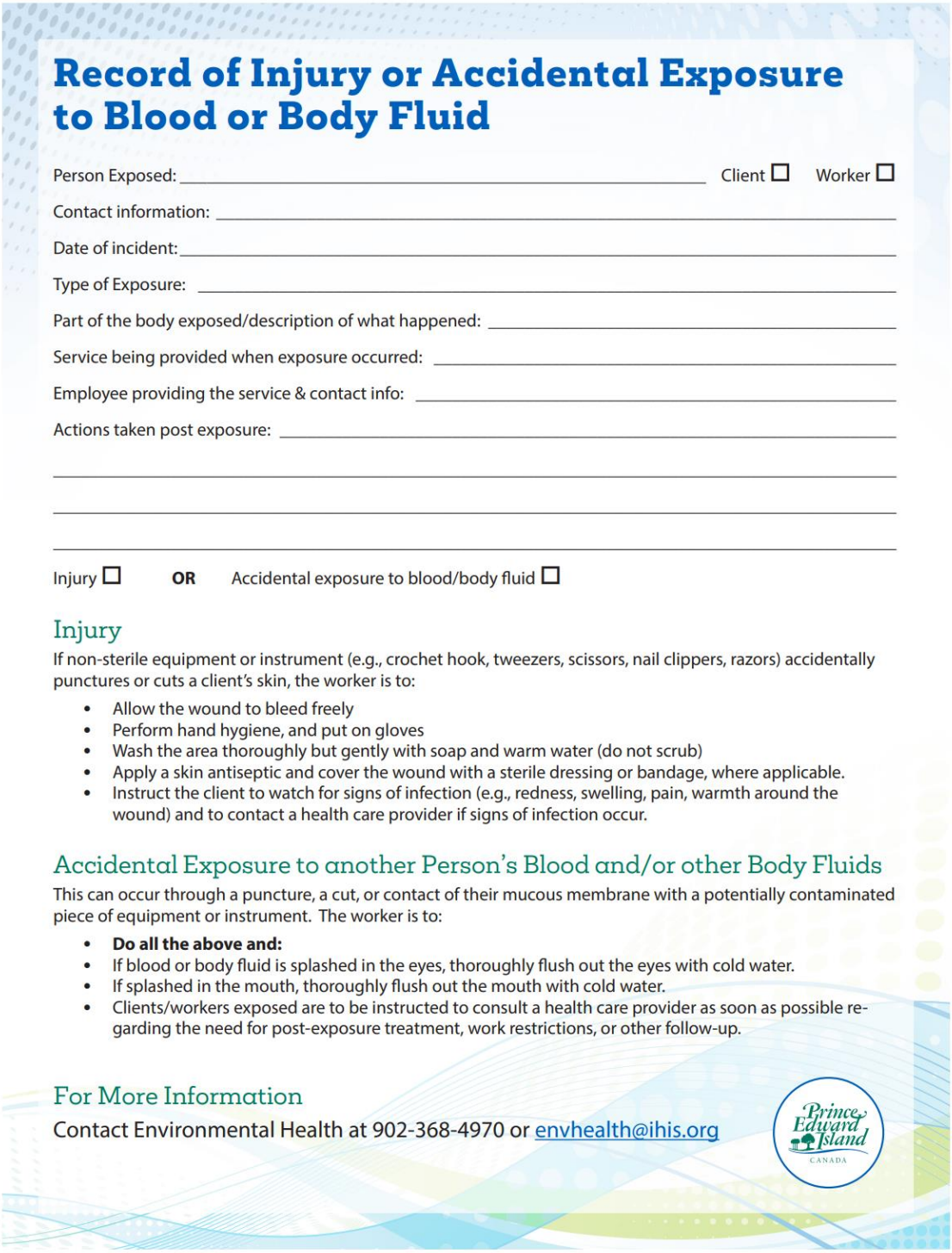
Personal Service	Critical	Semi-Critical	Non-Critical	Non-Critical	Single-Use
	Sterilization Required	**High-Level Disinfection**	**Intermediate-Level Disinfection**	**Low-Level Disinfection**	**Discarded after each use**
Body Piercing	• forceps and clamps, • jewellery used for initial piercing • jewellery purchased in bulk, • tapers, • open-ended receiving tubes with diameter large enough for proper cleaning, • ring-opening and ring-closing pliers, • calipers, tongs, connectors	• Items used to hold or manipulate sterile items	• new jewellery when replacing piercing jewellery on fully healed piercings	• client chairs/beds, neck/arm rests, • work counters and table tops, • containers used to hold contaminated instruments, • surfaces and equipment with protective covers	• gloves, • razors, • presterilized piercing needles and cannulas, • closed-ended receiving tubes, • disposable clamps and forceps, • dermal punch, • elastic bands, • corks, • toothpicks and marking ink, • swabs/gauze for cleaning and aftercare

Personal Service	Critical	Semi-Critical	Non-Critical	Non-Critical	Single-Use
	Sterilization Required	**High-Level Disinfection**	**Intermediate-Level Disinfection**	**Low-Level Disinfection**	**Discarded after each use**
Earlobe Piercing	• Jewellery used for initial piercing		• Mechanical earlobe piercing device that holds a single-use, disposable sterile cartridge • systems that use stud adaptor and clasp retainer are not recommended but if used, stud holder and clasp retainer are to be sterile, single-use, disposable	• client chairs/beds, neck/arm rests, • work counters and table tops, • containers used to hold contaminated instruments, • surfaces and equipment with protective covers	• cartridge, • stud holder, • marking ink and toothpick, • gloves, • swabs used to apply antiseptics or ointments, • unused jewellery in open package

Personal Service	Critical	Semi-Critical	Non-Critical	Non-Critical	Single-Use
	Sterilization Required	High-Level Disinfection	Intermediate-Level Disinfection	Low-Level Disinfection	Discarded after each use
Electrolysis and Hair Removal (laser, waxing)		• Any equipment, instrument or item used to hold, manipulate or contact a sterile needle, • needle/probe holder or permanent attached pin device, • Removable tip/cap (single-use or high-level disinfection after each use) • Tweezers used to expose ingrown hairs	• laser heads, tips and wands, • tweezers used to remove hair from the hair follicle, • UV eye goggles for multiple-client use (single use recommended)	• surfaces and equipment with protective covers including: o machine buttons, knobs, displays o magnifying lamps • scissors	• electrolysis needles, • electrolysis sponge covers/electrodes, • single use removable electrolysis tip/cap, • single-use conductive-gel pads, • eyebrow razors, • eyebrow-threading threads, • lancets and needles used to remove ingrown hairs, • roll-on wax cartridges, • waxing applicator sticks, • waxing strips • swab/applicators used to apply skin antiseptic and ointments, • barriers/protective covers

Personal Service	Critical	Semi-Critical	Non-Critical	Non-Critical	Single-Use
	Sterilization Required	**High-Level Disinfection**	**Intermediate-Level Disinfection**	**Low-Level Disinfection**	**Discarded after each use**
Other Services (make-up application, facials, eyelash tinting and extensions, microblading)		• equipment used for facials that contacts non-intact skin (e.g., acne treatments, microdermabrasion), • microblade handles, • microneedle roller handles, • tweezers/comodone loops used for extractions	• equipment used for facials that contacts intact skin, • tweezers to apply fake lashes	• chairs, beds, service tables, • facial steamer reservoirs, magnifying lamp handles and arms, • makeup brushes	• applicators for tint, makeup, and ointment, • bags used for paraffin wax treatment, • lancets or needles used for facial extractions, • microblades, • microneedle rollers, • paraffin wax and waxing applicators, • unused decanted products (lotions, makeup, wax, eyelashes, etc.)

Appendix E – Record of Injury or Accidental Exposure to Blood or Body Fluid



Record of Injury or Accidental Exposure to Blood or Body Fluid

Person Exposed: _____ Client ☐ Worker ☐

Contact information: _____

Date of incident: _____

Type of Exposure: _____

Part of the body exposed/description of what happened: _____

Service being provided when exposure occurred: _____

Employee providing the service & contact info: _____

Actions taken post exposure: _____

_____

_____

_____

Injury ☐ **OR** Accidental exposure to blood/body fluid ☐

Injury

If non-sterile equipment or instrument (e.g., crochet hook, tweezers, scissors, nail clippers, razors) accidentally punctures or cuts a client's skin, the worker is to:

- Allow the wound to bleed freely
- Perform hand hygiene, and put on gloves
- Wash the area thoroughly but gently with soap and warm water (do not scrub)
- Apply a skin antiseptic and cover the wound with a sterile dressing or bandage, where applicable.
- Instruct the client to watch for signs of infection (e.g., redness, swelling, pain, warmth around the wound) and to contact a health care provider if signs of infection occur.

Accidental Exposure to another Person's Blood and/or other Body Fluids

This can occur through a puncture, a cut, or contact of their mucous membrane with a potentially contaminated piece of equipment or instrument. The worker is to:

- **Do all the above and:**
- If blood or body fluid is splashed in the eyes, thoroughly flush out the eyes with cold water.
- If splashed in the mouth, thoroughly flush out the mouth with cold water.
- Clients/workers exposed are to be instructed to consult a health care provider as soon as possible regarding the need for post-exposure treatment, work restrictions, or other follow-up.

For More Information

Contact Environmental Health at 902-368-4970 or envhealth@ihis.org

Prince Edward Island CANADA

Appendix F – Sample Customer Record for Services Using Critical Equipment

Customer Record for Services Using Critical Equipment

Critical equipment includes tattoo and micro-pigmentation needles and needle cartridges, piercing needles and equipment, electrolysis needles, sharps used for micro-blading, micro-needling cartridges and rollers, etc.

Premises Name: _____

Service Provider Name: _____

Client Name: _____

Client Age/DOB: _____

Client Address: _____

Client Phone Number: _____ Email: _____

Date of Service: _____

Type of Procedure: _____ Part of Body: _____

Explanation of procedure/risks: ☐ _____ Aftercare Instructions Provided: verbally ☐ written ☐

Lot Numbers and Expiry Dates of all pre-packaged sterile equipment used:

Equipment:	Lot:	Expiry Date:
Equipment:	Lot:	Expiry Date:
Equipment:	Lot:	Expiry Date:
Equipment:	Lot:	Expiry Date:
Equipment:	Lot:	Expiry Date:
Equipment:	Lot:	Expiry Date:
Equipment:	Lot:	Expiry Date:
Equipment:	Lot:	Expiry Date:

Notes: _____

_____

_____

_____

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Appendix G – Sample Sterilization Log

Load #	Date	Physical Monitoring			Load Contents	External Chemical Indicator (each pouch/package)		Internal Chemical Indicator (each pouch/package)		Type 5 Chemical Indicator (one per load)		Initials
		Time (mins)	Temp (°C/°F)	Pressure (psi)		Pass √	Fail X	Pass √	Fail X	Pass √	Fail X	

Sample Sterilization Record
Environmental Health

Appendix H – Sample High-Level Disinfection Log

High-Level Disinfectant Log for Personal Service Establishments

High-level disinfectant (HLD) must be tested daily to confirm its minimum effective concentration. Some HLDs can be reused for multiple days. Always follow the disinfectant and test strip manufacturer's instructions.

High-Level Disinfectant Information

Name of Disinfectant	
Lot Number	
Expiry Date	
Maximum Number of reuse days	

High-Level Disinfectant Test Strip Information

Name of Test Strip		
Lot #		
Expiry Date		
Date Opened		

*Use the 2nd column if you open a new bottle of test strips during the reuse period

Month: _____

Day	Date	Result (Pass/Fail)	Tested by	Date Poured	Day	Date	Result (Pass/Fail)	Tested by	Date Poured	Day	Date	Result (Pass/Fail)	Tested by	Date Poured
1					11					21				
2					12					22				
3					13					23				
4					14					24				
5					15					25				
6					16					26				
7					17					27				
8					18					28				
9					19					29				
10					20					30				
										31				

Sample High-Level Disinfection Log January 2026