

# New Legal Requirements for Personal Services Settings

What you need to know about Ontario Regulation 136/18

# Ontario Regulation 136/18 for Personal Service Settings

- This new Ontario Regulation for Personal Service Settings took effect July 1, 2018 under the Health Protection and Promotion Act (HPPA)
- The Regulation has a set fine list of ticketable fines
- Public Health Inspectors (PHIs) enforce the Regulation through inspections
- Supported by **Ministry of Health and Long-Term Care Personal Service Setting Guidelines (2018)**
- Public Health Ontario (PHO) plans to release **Best Practice Recommendations** for Personal Service Settings

# Definition

Health Protection &  
Promotion Act

## Personal Service Setting (PSS)

- A premise at which personal services are offered where there is a risk of exposure to blood or body fluids
- Includes premises at which the following are offered:
  - Hairdressing and barbering
  - Tattooing
  - Body piercing
  - Nail services
  - Electrolysis
  - Other aesthetic services

# Application

Section 2.

## What is a premises?

- A premise ***may include***, but is not limited to, a vehicle, convention, exhibition, fair, festival, or tradeshow
  - This would also include home-based businesses

Inspected  
**1x/year**  
(at minimum)

## Mobile/travelling premises

- The dwelling of a person receiving a personal service is ***not*** subject to the regulation; however....
  - Inspection can/will occur at a minimum of one of the following locations:
    - Where the equipment is reprocessed or stored
    - Where the business' head office is located
    - Where the vehicle is stored (e.g. a motor home)
    - Where the PSS operator resides

# Application

## Section 2. (2)

### Hospitals, Long-Term Care Homes & Retirement Homes

- Exempt from the PSS regulation; however...
  - If personal services are offered in these settings, inspection will occur on a routine basis to identify potential health hazards
  - Where a health hazard is identified, the Medical Office of Health (MOH) and/or PHIs should consider issuing an order under s.13 of the HPPA, where warranted

# Application

## Section 2. (2) (d)

### Regulated Health Professionals (RHP)

- Where personal services are primarily provided by RHPs who are engaged in the practice of their profession, the RHP is exempt from the requirements of the PSS Regulation.
- RHPs must be engaged in the practice of their profession to be exempt
- Where personal services are primarily provided by an RHP outside the scope of their profession, the PSS would be subject to the PSS Regulation
- For example, a Nurse performing botox injections under a Medical Director or Physician would be exempt from the Regulation as this is within their scope. However, if there are additional personal services offered at the operation, such as eyelash extensions or manicures, then this operation will be inspected under the Regulation

*The Health Unit may be involved in the investigation of an infection control-related complaint made against a Regulated Health Professional*

# Regulated Health Professionals

The Regulated Health Professionals Act (RHPA), 1991, and associated health profession Acts, set out the governing framework for the regulated health professions in Ontario.

Self-Governing Health Professions	
Audiology & Speech Language Pathology	Medicine
Chiropody	Midwifery
Chiropractic	Naturopathy
Dental Hygiene	Nursing
Dental Technology	Occupational Therapy
Dentistry	Opticianry
Denturism	Optometry
Dietetics	Pharmacy
Homeopathy	Physiotherapy
Kinesiology	Psychology
Massage Therapy	Psychotherapy
Medical Laboratory Technology	Respiratory Therapy
Medical Radiation Technology	Traditional Chinese Medicine

# Notification

## Section 3.

- Every operator of a PSS must provide notice to the Medical Officer of Health (MOH) of the Health Unit is required *at least 14 days before*:
  - Commencing operation
  - Providing additional services
  - Reconstruction
  - Renovation
  - Move physical locations (either permanently or temporarily)



# Disclosure

## Section 4.

### Website disclosure

- Health Units are required to post inspection results of a PSS on their website as per the *Infection Prevention and Control Disclosure Protocol, 2018*

### Onsite disclosure

- Mandatory onsite disclosure of inspection results is not a requirement of the PSS regulation, unless it is requested by the PHI

# Types of Services

## Section 7.

### Prohibited Services

- Scleral tattooing or implantation of eye jewelry under the conjunctive
- Ear candles/cones
  - Ear candles/cones have been safety concerns, including the risk of burns, fires, and medical complications
  - Sale and importation for medical reasons is prohibited in Canada by Health Canada
- Any personal service involving live aquatic species, including fish pedicures

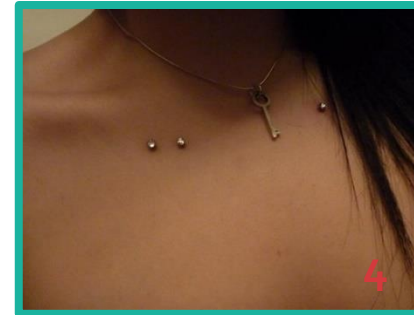


# Types of Services

## Section 1.

### Invasive

- Body & Ear piercing
- Microblading
- Micropigmentation
- Tattooing
- Implants, surface dermals
- Facials with extractions
- Waxing w/ ingrown removal
- Invasive facials
- Etc....



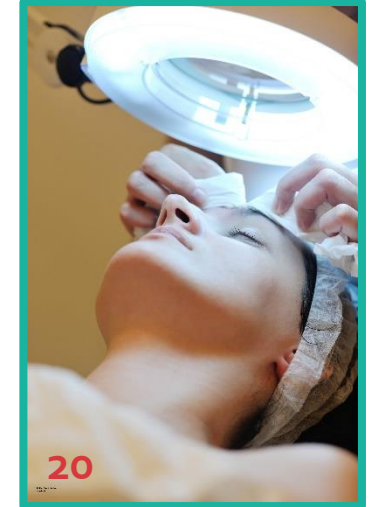
*"introduction of equipment or instruments into the body through body cavities, and by cutting, puncturing, or otherwise entering intact skin or mucus membranes"*

# Types of Services

## Section 1.

### Non-invasive

- Hair cut & styling
- Facials
- Facial & body waxing
- Eyelash tinting & extensions
- Hair colour
- Massage
- Teeth whitening
- Manicure/pedicure



# Client Information

## Section 5.

- **Name** and **contact information** (i.e. phone number) must be collected from every client prior to providing both invasive and non-invasive services
  - If a person chooses not to provide their information, the PSS operator must not provide the service

# Information re: Invasive Procedures

## Section 6.

- **Before** providing an **invasive** procedure...
  - The operator performing the procedure must provide the client with an explanation and information about any risks associated with the procedure **before** providing the invasive procedure
- This should be captured in documentation (discussed later)

# Setting Requirements

Section 8. (1) 3.

## Personal services in a dwelling

- Cannot be provided in a room or part of a room that is used as a dwelling
- Screens, curtains, etc. to partition part of a room used as a dwelling is not permitted
- Only parts of the dwelling used for services and reprocessing are subject to inspection

**Dwelling:** a room or part of a room that is used for dining, sleeping, or preparing, selling, handling, eating or storing food

# Setting Requirements

Section 8. (1) 1., 2., 7., 9.

“Any setting must be free from every condition that may constitute a health hazard or adversely affect the sanitary operation of the personal service setting”

## Floors, Walls & Ceilings

- In good repair
- Easily cleanable
- Smooth & impermeable
- Maintained in a sanitary manner

## Work Surfaces

- Able to be readily cleaned and disinfected

## Lighting & Ventilation

- Sufficient to enable sanitary operation and maintenance



# Setting Requirements

Section 8. (1) 4.

## Provision of Water

- Hot and cold running water under pressure must be provided
- Premises on private water systems should submit regular water samples

# Setting Requirements

Section 8. (1) 5., 6.

## Handwashing Sinks

- At least one sink used only for hand washing within the premises that is;
  - Conveniently located to the work area
  - Accessible at all times
  - Continuously supplied with potable hot and cold running water under pressure
- “There must be a supply of soap in a dispenser and a method of hand drying that uses single-service products or a hot air dryer”
- “...accessible at all times” means a sink is *available* and not that it is continuously accessible
- Can be located in a bathroom

# Setting Requirements

Section 8. (1), (3)

## Reprocessing Sink

- Required if any reusable equipment is used
- Separate from the handwashing sink
- Not located in room with a toilet
- Capable of immersing the biggest piece of equipment
- Has adequate counter space to prepare equipment for use and re-use (*i.e. allows for one-way work flow; dirty → clean*)
- "*Sufficiently separated*" from where personal services are provided as to prevent contamination

# Setting Requirements

Section 8. (1) 5., (3)

## Handwashing Sink

- Used only for handwashing
- **Not** a two-compartment sink shared with reprocessing
- Can be located in a bathroom
  - *However, ideally is located as close to service area as possible*

## Reprocessing Sink

- Can be multi-purpose
- A two compartment sink is ideal, but not required
- Cannot be located in a washroom or in areas at risk of contamination

Hand sanitizer should also be made available at or near workstations

Premises may be able to repurpose an existing sink into a handwashing or reprocessing sink

# Setting Requirements

Section 8. (1) 8., (3)

## Waste Storage and Disposal

- Premises should be equipped with receptacles for waste and laundry appropriate for the sanitary operation and maintenance for the setting
- Waste should be collected and removed as often as necessary
- Additional requirements for ***biomedical wastes***:
  - Placed in an impervious bag or receptacle
  - Labelled as biomedical waste
  - Disposed of in biohazard bag or container according to provincial requirements
  - For biomedical waste other than sharps – stored in locked fridge if on site for more than 4 days

# Setting Requirements

Section 8. (1) 8.

## Timelines for Compliance

### One year (from July 1, 2018)

- Floors, walls, ceilings, furniture, surfaces, etc.
- Room as part of a dwelling
- Potable hot & cold water
- Hand sinks, soap dispenser, hand drying products
- Lighting
- Reprocessing sink

### Immediately

- Free from every condition that may constitute a health hazard
- Storage of wastes

# Animals

## Section 9.

- Animals are not permitted, except service animals
- If part of a dwelling, animals are not permitted in the room(s) that are serving as the PSS
- Live aquatic species that are for display or stored in sanitary tanks are permitted
- Service animals are permitted

# Equipment

Section 10. (1) (2) (3)

## Equipment Maintenance

- Maintained in good repair and in a sanitary condition
- Maintained in accordance to **manufacturer's instructions**; instructions kept on site
  - Electronic copies are permitted provided they are accessible to every person providing the service or using the equipment
- **Or**, maintained as per guidance of Public Health if manufacturer's instructions are not available or incorrect



# Classification of Equipment

Non-Critical	Semi-Critical	Critical
<ul style="list-style-type: none"> <li>• Instruments that come in contact with intact skin or not mucous membranes</li> </ul>	<ul style="list-style-type: none"> <li>• Instruments that may come in contact with non-intact skin or mucous membranes but are not intended to penetrate the skin</li> <li>• Items that hold critical items</li> </ul>	<ul style="list-style-type: none"> <li>• Instruments that penetrate the skin or enters the body (i.e. invasive items)</li> </ul>
<ul style="list-style-type: none"> <li>• Intermediate to Low Level Disinfection</li> </ul>	<ul style="list-style-type: none"> <li>• High to Intermediate Level Disinfection</li> </ul>	<ul style="list-style-type: none"> <li>• Sterilization</li> </ul>
<ul style="list-style-type: none"> <li>• Example: combs, brushes</li> </ul>	<ul style="list-style-type: none"> <li>• Example: nail files, cuticle pushers, tweezers</li> </ul>	<ul style="list-style-type: none"> <li>• Example: piercing instruments, forceps, reusable microblading handles</li> </ul>

# Equipment

## Section 10. (4)

### Reusable Equipment

- Cleaned and disinfected as often as necessary to prevent disease transmission; i.e.
  - Between each use, *or*
  - Covered with single-use disposable cover
    - Cover must be changed between clients, being careful not to contaminate
    - If it becomes visibly soiled or contaminated, surfaces shall be cleaned and disinfected
    - Equipment should be uncovered and then cleaned and disinfected (low-level) at the end of each day

# Equipment

## Section 10. (5)

### Single Use Equipment

- Single use equipment or any equipment that cannot readily be cleaned and disinfected or sterilized must be discarded **immediately** after use
  - E.g. any sharps or blades, including credo blades, micro blading cartridges, razors, tattoo needles, straight razor blades
  - E.g. single use emery boards, orange sticks, wax rollers, ink caps



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# Equipment

Section 10. (6)

## Sharps

- Sterile and for single use
- Packaging must not be damaged, previously opened, or compromised in any way



# Equipment

Section 10. (7)(8)

## Sharps containers

Sharps containers shall:

- Be compliant with applicable standards
- Be clearly **identifiable**
- Be designed so that used sharps may be dropped in with one hand
- **Be easily accessible at every point of use**
- Not be filled with disinfectant or over-filled with sharps
- Be sealed and replaced when the contents reach the fill line marked on the container or when  $\frac{3}{4}$  full



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# Equipment

Section 10. (9)(10)

## Sterilizers

- Must be licensed for sale by Health Canada, and meet standards established by Health Canada and Canadian Standards Association
- Monitored to ensure the process is effective:
  - ***Mechanical/physical indicators***
    - Length of time that the sterilization temperature was maintained
    - Temperature during sterilization
    - Pressure reached and maintained during sterilization
  - ***Biological indicators*** – at least once every 2 weeks
    - Performed for analysis and for determination of whether the sterilization process passed or failed
    - Submitted to a laboratory capable of performing biological indicator (BI) testing and certified to industry standards
  - ***Chemical indicators***
    - Placed inside each package, container, or bundle

# Equipment

Section 10. (9)(10)

## Sterilizers (cont.)

- When a chemical indicator fails to change colour, mechanical monitoring shows suboptimal sterilization time or temperature, or moisture is observed in/on packages after sterilization, **the equipment in that load shall not be used**
- If the PSS operator receives a report from a lab indicating that the sterilizer has failed/positive BI test, the PSS operator:
  - Takes the necessary actions to address the cause and consequences
  - **Immediately inform the Health Unit**
- PSS operators shall run tests to verify a sterilizer is functioning correctly

# Unacceptable Sterilizers

- Dishwashers
- Boiling
- UV light or irradiation
- Glass bead sterilizers
- Microwave ovens
- Pressure cookers
- Flash sterilization
- Chemiclaves
- Glutaraldehyde



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# Products

Section 11. (1) (2)

## Products

- Stored and dispensed in a manner which prevents contamination

## Disinfectants

- Must have a drug identification number (DIN) or natural product number (NPN) assigned by Health Canada
  - **Chlorine bleach/sodium hypochlorite** does not require a DIN or NPN
- Must be used as per manufacturers instructions

# Hygiene

## Section 12. (1) (2)

### Hygiene Requirements

- Practice good personal hygiene
- Refrain from smoking while providing a personal service
- Cleans hands **prior to** providing a service
- Cleans hands **after** providing a service

### Alcohol Based Hand Rub (ABHR) or “Hand Sanitizer”

- Appropriate for when hands are not visibly soiled
- **Should be provided within reach of each station where services are provided**
- Be at least 70% alcohol
- Equipped with a DIN, NPN, or MDLL

# Hygiene

## Glove use

- Workers must wear gloves when it is anticipated that hands will be in contact with blood and/or other body fluids, non-intact skin, mucous membranes, contaminated equipment, and chemicals used in cleaning and reprocessing
- Reusable rubber gloves must be:
  - Used only for reprocessing or environmental cleaning
  - Cleaned, disinfected, and hung to dry after each use
  - Regularly checked for holes and degrading rubber
  - Should be labelled with staff names; each staff performing reprocessing and cleaning should have their own pair

# Operator training

## Section 13.

- MOH/PHI shall assess the knowledge of the PSS operator in the operation and maintenance of the PSS, and any relevant practices that may prevent or reduce the risk of disease transmission
- MOH/PHI **may require** training or re-training
  - If multiple infractions are noted
  - The PSS operator doesn't appear competent or knowledgeable in the regulatory requirements or in the safe operation of the premises

# Operator Training

## Section 13.

- Training may include:
  - On-site education from a MOH/PHI during an inspection
  - Fact sheets
  - Charts
  - Posters
  - Directing the PSS operator to IPAC education sessions or courses
- Minimum competencies may include:
  - Prevention of blood-borne infections
  - Infection prevention practices specific to the services being provided
  - Cleaning and disinfection and/or sterilization of equipment
  - Ability to follow manufacturer's or Boards instructions
  - Adherence to the regulatory requirements




# Record keeping

## Section 14.

- Every PSS operator shall keep the following records:
  - Sterilization records
  - **Disinfection records** – *high level*
  - Records relating to invasive procedures
  - Records related to accidental exposures to blood or body fluids
- Records are to be stored at the PSS in a secure location for one (1) year, then kept readily available for an additional two (2) years
- PSS operators shall provide the records to the MOH/PHI as requested

# Public Health Inspector areas



-  **Carmen Broasca**  
519-376-9420 Ext. 1357
-  **Gillian Jordan**  
519-376-9420 Ext. 1379
-  **Sarah Lee**  
519-376-9420 Ext. 1392

# Picture references and credits

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