

Phone: (805) 781-5544 Fax: (805)781-4211

Email: ehs@co.slo.ca.us

BODY ART TEMPORARY EVENT ORGANIZER PACKET

Attached are instructions for event sponsors and body art participants. The information should be read carefully.

The event sponsor must work with the Department of Environmental Health to ensure that artists and vendors are in compliance with applicable laws and guidelines. Sponsors must provide access to a potable water source and restrooms, supply sharps containers for each booth where body art procedures are offered, ensure adequate trash pickup, and provide for acceptable sharps disposal pickup by an authorized medical waste hauler.

Event sponsors must ensure that all artists who participate in the event are registered with a Local Enforcement Agency (LEA) within the State of California, such as the County of San Luis Obispo EHS, to engage in the practice of tattooing, body piercing, branding or applica-tion of permanent cosmetics. The Body Art Event Sponsor must submit an application to obtain a Body Art Event Permit which entails a sponsor fee and a fee for each booth where body art procedures may be done. Operating without being registered or operating a tem-porary event without a permit is a misdemeanor. In addition to the penalties available pursuant to Article 6 (commencing with Section 119323), a sponsor or practitioner who violates this subdivision shall be subject to closure of the temporary body art event or a penalty not to exceed three times the cost of the permit or both closure and the penalty.

If your event will have food vendors, check with our office to see if a temporary food facility sponsor permit is required.

All forms and fees must be completed and submitted either to the above mailing address or in person to the Department of Environmental Health. Please submit applications at two weeks prior to event.

If you have any questions, please call (805)781-5544

Thank you for your cooperation, and we hope you have a successful event.

BODY ART TEMPORARY EVENT SPONSOR RESPONSIBILITIES

- 1. Submit applications and fees 2 weeks prior to event.
- 2. Work closely with the Division of Environmental Health to assure a safe and successful event.
- 3. Be familiar with your artist's operations and Body Art Temporary Event requirements (see attached).
- 4. Ensure that the facility, cleaning area, and booth requirements are met (see attached).
- 5. Provide the Department with the following:
 - A. Completed Body Art Temporary Event Sponsor Application.
 - B. Booth and Artist List which includes:
 - 1. Booth # or Location which should be clearly defined on floor layout.
 - 2. Booth Name.
 - 3. Artist Names within each booth.
 - 4. Registration Number received from the County of San Luis Obispo Environmental Health Services Division (or other California LEA).
 - C. Site Map that includes the location of:
 - 1. Each booth offering body art procedures
 - 2. Restrooms
 - 3. Artist-only hand wash stations.
 - 4. Cleaning and sterilizing areas (if provided).
 - 5. Vendor supply locations.

BODY ART TEMPORARY EVENT REQUIREMENTS

FACILITY REQUIREMENTS

- 1. Obtain all necessary permits to conduct business in the jurisdiction where the event will be held, including, but not limited to, valid permits issued by a local enforcement agency.
- 2. Shows, conventions, and educational demonstration events must be held in permanent building large enough to enclose the entire event.
- 3. Access to potable water supply.
- 4. Restrooms that have flush toilets supplied with toilet paper, and hand wash sinks supplied with potable warm running water, soap, and single-use paper towels to which practitioners have direct access.
- 5. Sharps waste containers for each demonstration booth.
- 6. Frequent trash pickup from demonstration booths.
- 7. The name, telephone number, and directions to an emergency room near the body art temporary event shall be posted in a conspicuous location.
- 8. Certain supplies must be available to the body art practitioners at your event. The supplies that must be on-hand for purchase include but are not limited to: Pre-sterilized needles, pre-sterilized tubes, pre- sterilized piercing equipment, plastic bags, barrier film, clip cord coves, plastic wrap, ink caps, nitrile and latex gloves, single-use tubes of water based and petroleum based lubricants and absorbent dressing materials. Standard client consent form, medical history forms, aftercare instructions and single-use instrument logs shall also be available for the practitioner.
- 9. Commercial self-contained hand wash stations are required for every 2 booths. Each hand wash station shall consist of at least:
 - a. Warm water (100 degrees Fahrenheit) dispensed from a free-flowing spigot.
 - b. An interior container to catch wastewater.
 - c. Hand cleanser dispensed from pump or motion detector container.
 - d. Single use paper towels.

DECONTAMINATION AND CLEANING AREA REQUIREMENTS

The decontamination and cleaning area must be separated from any procedure area by at least five feet or by a cleanable barrier. This area should include:

- 1. Autoclave
- 2. Biohazard sink with hot and cold running water.
- 3. Work area.
- 4. Personal protective equipment.

BOOTH REQUIREMENTS

- 1. Have floor space of at least 50 square feet for every practitioner working in that booth.
- 2. Floor, tables and chairs must be non-porous and easily cleanable.
- 3. Used exclusively for performing body art.
- 4. Constructed with a partition of at least three feet in height separating the procedure area from the public.
- 5. Equipped with adequate light available at the level where the practitioner is performing body art.
- 6. Used exclusively for performing body art.
- 7. Not allow animals within the confines of the booth.

ARTIST REQUIREMENTS

- 1. Current Certificate of Registration issued by County of San Luis Obispo (or other California LEA). Certificate may be displayed or in a folder. Note: If certificate is issued by jurisdiction outside of SLO county, it is valid in San Luis Obispo County for no more than five consecutive days, or 15 days total, in any one calendar year.
- 2. Photo Identification. Make available upon request by the inspector.
- 3. Evidence of bloodborne pathogens training (BBPT) taken within a year of the date of the event.
- 4. Certificate may be displayed or in a folder. Note: If obtaining your Certificate of Registration from the County of San Luis Obispo you must obtain your BBPT from an approved provider.
- 5. Use only approved equipment; instruments that are not of safe design may be subject to impoundment.
- 6. Use appropriate personal protective equipment while performing body art procedures.
- 7. Artists shall properly cover or bag their tattoo machine & clip cord when in use, and use barrier film or bags for other procedural items.
- 8. Artists shall not smoke, eat or drink while performing a body art procedure.
- 9. Artists shall clean and disinfect client chair, table and tattoo machine between clients.
 - a. Acceptable disinfectants include Opti-cide 3, Madacide, EcoTru Professional or any EPA- registered hospital-grade cleaner and disinfectant.



HEPATITIS B VACCINE DECLINATION FORM

THE FOLLOWING STATEMENT OF DECLINATION OF THE HEPATITIS B VACCINE MUST BE SIGNED BY AN EMPLOYEE WHO:

- CHOOSES **<u>NOT</u>** TO ACCEPT THE VACCINE.
- HAS HAD APPROPRIATE TRAINING REGARDING HEPATITIS B, HEPATITIS B VACCINATION, THE EFFICACY, SAFETY, METHOD OF ADMINISTRATION AND BENEFITS OF VACCINATION, GIVEN FREE OF CHARGE TO THE EMPLOYEE.

I UNDERSTAND THAT DUE TO MY OCCUPATIONAL EXPOSURE TO BLOOD OR OTHER POTENTIALLY INFECTIOUS MATERIALS I MAY BE AT RISK OF ACQUIRING HEPATITIS B VIRUS (HBV) INFECTION. I HAVE BEEN GIVEN THE OPPORTUNITY TO BE VACCINATED WITH HEPATITIS B VACCINE, AT NO CHARGE TO MYSELF. HOWEVER, I DECLINE HEPATITIS B VACCINATION AT THIS TIME. I UNDERSTAND THAT BY DECLINING THIS VACCINE I CONTINUE TO BE AT RISK OF ACQUIRING HEPATITIS B, A SERIOUS DISEASE. IF IN THE FUTURE I CONTINUE TO HAVE OCCUPATIONAL EXPOSURE TO BLOOD OR OTHER POTENTIALLY INFECTIOUS MATERIALS AND I WANT TO BE VACCINATED WITH HEPATITIS B VACCINE, I CAN RECEIVE THE VACCINATION SERIES AT NO CHARGE TO ME.

NAME OF EMPLOYEE (PLEASE PRINT)
NAME OF BUSINESS WHERE EMPLOYED (PLEASE PRINT)

EMPLOYEE SIGNATURE:	DAT	re:

THIS STATEMENT IS NOT A WAIVER; EMPLOYEES CAN REQUEST AND RECEIVE THE HEPATITIS B VACCINATION AT A LATER DATE IF THEY REMAIN OCCUPATIONALLY AT RISK FOR HEPATITIS B.

AN EMPLOYER CAN NOT REQUIRE:

- EMPLOYEES TO WAIVE LIABILITY IN ORDER TO RECEIVE THE VACCINE.
- PARTICIPATION IN PRE-SCREENING AS A PREREQUISITE FOR RECEIVING THE VACCINE.

COUNTY OF SAN LUIS OBISPO HEALTH AGENCY ENVIRONMENTAL HEALTH SERVICES DIVISION

2156 Sierra Way STE. B, San Luis Obispo, CA 93401 PO Box 1489, San Luis Obispo, CA 93406 Phone: (805) 781-5544 Fax: (805)781-4211 Email: ehs@co.slo.ca.us

COUNTY ଟ SAN LUIS OBISPO

BODY ART TEMPORARY EVENT ORGANIZER APPLICATION

EVENT INFORMATION										
NAME OF EVENT										
EVENT START DATE EVENT END DATE										
EVENT LOCATION										
TIME OF SETUP HOURS OF OPERATION										
ORGANIZER INFORMATION										
EVENT SPONSOR NAME										
SPONSOR MAILING ADDRESS										
SPONSOR PHONE NUMBER										
SPONSOR EMAIL ADDRESS										
EVENT DETAILS										
1. EXPECTED NUMBER OF BOOTHS OFFERING BODY ART										
2. EXPECTED NUMBER OF BODY ART SUPPLY VENDOR BOOTHS										
 EXPECTED NUMBER OF ARTISTS OFFERING BODY ART 										
4. MOBILE BODY ART VEHICLES AT EVENT: YES 🔲 NO 🔲 (ENSURE										
5. EXPECTED NUMBER OF ARTISTS OFFERING BODY ART										
	RTMENT REQUIREMENTS AS STATED IN THE BODY ART TEMPO-									
RARY EVENT REQUIREMENTS YES NO 6. ANY FOOD VENDORS WITH EVENT YES NO										
7. (IF YES, ALL FOOD VENDORS MUST HAVE A REQUIRED TEMPORARY	ΕΩΩΩ ΕΔΟΙΙ ΙΤΧ ΩΒ ΜΩΒΊΙ Ε ΕΩΩΩ ΕΔΟΙΙ ΙΤΧ ΗΕΔΙ ΤΗ PERMIT									
PLEASE ADD PARTICIPATING FOOD VENDORS ON A SEPARATE LIST).										
8. WILL THERE BE A PLANNING/ SAFETY MEETING FOR BODY ART PAR										
IF YES, MEETING DATE MEETING TIME	MEETING LOCATION									
9. INFECTION CONTROL PLAN SUBMITTED: YES 🗌 NO 🗌										
10. CLEANING AND STERILIZING FACILITIES PROVIDED FOR BODY ARTIS	rs: yes 🔲 no 🛄 location									
	NG ENOUGH EQUIPMENT TO DO THE ENTIRE EVENT. IF AN ART- SE OFFERING BODY ART. YES NO NO INITIAL									
11. WATER SOURCE: WELL 🔲 WATER SYSTEM 🔲 NAME										
12. WASTE WATER DISPOSAL: SEWER 🔲 SEPTIC 🔲										
13. NUMBER OF RESTROOMS WITH HOT AND COLD RUNNING WATER_										
14. LICENSED MEDICAL WASTE DISPOSAL COMPANY FOR EVENT: NAME PHONE NUMBER										
15. DESCRIBE GARBAGE/WASTE STORAGE AND REMOVAL										
NAME SIGN.	ATURE DATE									
FOR OFFICE	USE ONLY									
DATE RECEIVED RECEIVED BY ASSIGNED TO	ENTERED BY ENTERED DATE									
PE# AMOUNT DUE AMOUNT PAID	PE# AMOUNT DUE AMOUNT PAID CHECK OR CC AUTH # CASH									
PR#SR#FA#	INVOICE NUMBER									
INSPECTOR APPROVED	DATF									

	Person in charge																				
	Booth#																				
	Booth Name																				
	County Where Registered																				
Art	Local Artist	Yes	No																		
	BBP Training	Yes	No																		
	HepB	Yes	No																		
	Body Art Practitioner Registration #																				
	Artist Name																				



APPLICATION FOR TEMPORARY REGISTRATION FOR BODY ART

BODY ART PRACTITIONER INFORMATIO	N		
NAME			
MAILING ADDRESS			
TELEPHONE NUMBER			
EMAIL ADDRESS			
COUNTY WHERE CURRENTLY REGISTERED A			
REGISTRATION NUMBER			
NAME(S) OF BODY ART FACILITY WHERE EM			
1. INDICATE THE SERVICES YOU WILL BE PRO	VIDING, CHECK ALL T	HAT APPLY:	
TATTOOING PERMANENT COSMETICS			
BODY PIERCING			
BRANDING			
2. HAS PROVIDED THE FOLLOWING			
DENTIFICATION (AGE 18 OR OLDER)			
VALID BODY ART REGISTRATION HEPATITIS B VACCINATION DOCUMENTION			
		ICE OF IMMUNITY	ACCINATION DECLINATION
BLOOD-BORNE PATHOGEN TRAINING	CERTIFICATE		
DECLARE THAT TO THE BEST OF MY KNOWLEDGE			
PLY WITH AND CONFORM TO ALL CONDITIONS, (NS, ISSUED PURSUANT TO TH TY AND CITY ORDINANCES.	E CALIFORNIA HEALTH AND SAFETY
I HAVE RECEIVED A COPY OF AND READ THE E			E BODY ART ACT, AND I HEREBY
CERTIFY THAT I HAVE KNOWLEDGE OF,			
NAME	SIGNA	TURE	DATE
	FOR OFFICE US	E ONLY	
DATE RECEIVED RECEIVED BY	ASSIGNED TO	ENTERED BY	ENTERED DATE
PE# AMOUNT DUE	_ AMOUNT PAID	CHECK OR CC AUTH #	CASH
PR#\$R#	FA#		/IBER
INSPECTOR APPROVED		DAT	E

PRACTITIONER REQUIREMENTS FOR TEMPORARY EVENTS

This check list 1s designed for temporary event organizers and participating practitioners. This guidance document contains a list of requirements that practitioners are expected to understand and implement at a Temporary Body Art Event. These requirements will meet public health and safety standards established in California's H&S Code Chapter 638 Safe Body Art Law (Section 119308, 119309, 119310, 119311,119317 and 119318).

- □ ALL PRACTITIONERS MUST HAVE A VALID PRACTITIONER REGISTRATION A registration is considered valid if it was issued from any jurisdiction within California; valid within one year of the issue date; and or valid within the noted expiration date.
- PRACTITIONER REGISTRATIONS MUST BE VISUALLY DISPLAYED The registration must be present at the time of the event. If you do not want to be interrupted during your inspection, visually display your registration on you or at your booth. If your registration does not have a current 10 photo be prepared to provide a photo ID upon request.
- □ NO FOOD OR DRINK No food, drink, or tobacco products are allowed in the booth. Clients and practitioners shall not eat or drink within the booth. if the client or you needs to eat, drink or smoke, the client and you must leave the booth. *Remember, the booth is the procedure area.*
- CLEAN ENVIRONMENT The only way to maintain a clean and sanitary environment in the procedure area is to be neat and organized. You should have only items necessary to apply your craft. Store personal effects out of the way and away from the work stations in the booth. Under the table is appropriate. Keep ail trash generated in the lined waste can. Help notify the sponsor to maintain regular trash pick-up from your booth. *Remember, the booth is the procedure area.*
- **FORMS AND PAPERWORK** You are required to have ail necessary forms and documents to perform body art. These forms include but are not limited to: Client Consent; Medical History; Aftercare Instructions; Client Procedure Log; and or separate Procedure Log to document the use of disposable instruments; disposable instrument invoice ; jewelry mili certifications ; etc.
- □ WASH YOUR HANDS It is your responsibility! Wash and dry your hands with the *soap and water* just prior to and *after every procedure*. Commercial hand washing stations have been provided. Make sure you know where your closest stations are. Notify the sponsor to ensure that hand washing stations are maintained for your use. Remember that hand sanitizer cannot take the place of hand washing. By washing your hands properly and at the appropriate times you will not only protect the health of your customers but your own health as well.
- □ PERSONAL PROTECTIVE EQUIPMENT For every procedure, put on *a new disposable bib* or *lap pad*, and *clean disposable examination gloves*. if the gloves are compromised either by touching objects outside of the client and direct work station or develop a hole or rip, throw away that set, wash your hands and put on a new pair. If the gloves are removed before completion of the procedure, throw away that set, wash your hands and put on a new pair.
- TATTOO MACHINE "Bag" the tattoo machine as well as the power cord with a disposable plastic sheath. Discard the plastic sheath after the completion of each procedure. *Inspect and clean the machine after each use.*
- SINGLE USE Needles, ink caps, gloves, aprons, paper towels, dental bibs, cord covers, machine bags, plastic wrap, stencils, marking pens or other coverings for chairs and workstations shall be single use. Document the use of disposable instruments such as needle tubes in peel packs on the client procedure Jog, along with the date and name of the practitioner. Maintain instrument purchase records by the practitioner/tattoo company of use. JEWELRY shall be pre-sterilized in individual peel packs.
- RE-USEABLE INSTRUMENTS Re-usable instruments must be pre-sterilized in peel packs. The peel pack must have the date of sterilization and the initials of person who completed the sterilization load. SOILED INSTRUMENTS After the procedure, place soiled instruments in a hard plastic container with a water "tight" fitting lid. Clearly label the container with the contents (i.e. soiled or dirty instruments) and use for the direct transfer of the instruments to the Decontamination Sterilization.
- DISINFECTION AND DECONTAMINATION Clean and disinfect ail surfaces or objects in the work station that have been in contact with the client or materials utilized during the procedure with an industry standard disinfectant. Items include, but are not limited to: arm rests, chairs, tables, trays, tattoo machines etc.
- SHARPS WASTE A properly labeled container for sharps waste must be provided by the event organizer. Dispose of ail used needles, razors, grommets, and other sharps waste in the sharps container. Locate the sharps container within arms reach of the practitioners. Return the sharps container to the event organizer for disposal at the conclusion of the event.