

COPY

# **CODE OF PRACTICE FOR** **CHIROPODY/PODIATRY**

This code of practice covers pedicure, chiropody and podiatry.

## **SCOPE**

### ***CHIROPODY***

Chiropody is the practical care of the feet using a variety of materials and techniques, such as caustics, liquid nitrogen, cryotherapy and electrotherapy. Local anaesthetics may be applied for minor surgery by state registered chiropodists.

Chiropody covers the routine care of corns, callouses and nails, and provides treatment for verrucae. Minor surgery may be given for in-growing toe nails and resistant verrucae.

### ***PODIATRY***

Podiatry is the bio-mechanics of the foot and the provision of functional foot orthoses for postural and gait imbalances. This involves the detailed examination of the lower limbs and the making of plaster casts from which foot orthotics (insoles), are prescribed.

Orthotics can be useful for alleviating foot, knee, back and hip pain, callosities, and shin splints. It can also prevent bunions. Elsewhere, it is especially effective for the treatment of lower limb sports injuries.

## **PEDICURE**

Treatment of feet and toenails; may include a foot scrub, massage, and some dry skin removal, and cut, file soak, cuticle removal and varnish of the toenails. Uses a variety of conventional beauty products and nail care equipment (nails file, scissors, etc).

The purpose is a cosmetic effect, to strengthen nails, and to prevent ingrowing toe nails.

### Hazards

- damage from scissors and other equipment.

## **CONDUCT OF THE BUSINESS**

The business operator shall ensure the following:

- # Good order and moral conduct in the premises
- # No poster, advertisement, etc., shall be displayed which is unsuitable for general exhibition
- # All clients in any part of the premises shall be decently and properly attired, unless receiving treatment in accordance with this code of practice
- # Neither the operator nor the client shall be under the influence of drugs, alcohol or other substances
- # All treatments must be undertaken in conditions of appropriate privacy

## **RESPONSIBILITIES**

The business operator shall:

- # Take all reasonable precautions for the safety of all persons using the premises
- # Ensure compliance at all times with the relevant provisions of the Health and Safety at Work etc., Act 1974, and associated legislation (see LAW)
- # Carry out and implement the findings of a risk assessment of the business as required by the Management at Work Regulations 1992 (see LAW)
- # Ensure that a 'responsible person' is in charge of the premises at all times, and that he/she is familiar with, and implements, the requirements of the relevant codes of practice
- # Take out employer's liability (where appropriate) and public liability insurance cover (see INSURANCE)
- # Ensure that all persons carrying out special treatments are suitably qualified or trained, and are competent (see TRAINING AND COMPETENCY)
- # Notify the local authority in writing of any proposed change in his name or private address, of changes in the business address, of changes to the treatments provided, or to the nature of the business carried on at the premises

## **RESPONSIBLE PERSON**

The business operator shall ensure that a 'responsible person' is in charge of the premises at all times, and that he/she is familiar with, and implements, the requirements of the relevant codes of practice.

Responsible persons shall be nominated in writing by the business operator, and this notification shall be continuously available for inspection at the premises.

The responsible person shall:

- # Be in charge of the premises
- # Be on site at all times when the public are on site
- # Be assisted as necessary by suitable adult persons to ensure adequate supervision
- # NOT be engaged in any other duties which will prevent him/her from exercising general supervision

## **CLEANLINESS**

For the purposes of cleanliness, the following shall be observed:

- # All instruments, towels, materials and equipment used in the premises shall be appropriately cleaned, disinfected and/or sterilised
- # Tables, couches and seats shall be wiped down with a suitable disinfectant between the treatment of each client, and thoroughly cleaned at the end of each working day
- # Where tables or couches are used, they shall be covered with a disposable paper sheet, which shall be changed for each client
- # 'No Smoking' notice/s shall be displayed in the treatment area(s)

## **PERSONAL HYGIENE**

Any person carrying out any special treatment must ensure that:

- # Any open boil, sore, cut or other open wound is effectively covered by an impermeable dressing
- # They shall not carry out any special treatment if they are suffering from an acute respiratory infection

- # Hands are kept clean and are washed immediately prior to carrying out any treatment
- # They shall refrain from smoking or consuming food and drink during the course of the treatment

## **INFECTION CONTROL**

### ***GENERAL***

For the purposes of adequate infection control, the following should be noted:

- # All chiropodists shall wear clean, special purpose, clothing
- # Hands and nails shall be washed in antibacterial hand-wash prior to any treatment
- # All hard surfaces shall be cleaned and disinfected before and after each client (see DISINFECTION)

### ***RE-USABLE EQUIPMENT***

Re-usable equipment shall be effectively sterilised, following a recognised procedure, as follows:

- # Put through an ultrasonic cleaner
- # Rinse
- # Air dry in a clean environment
- # Place in a steam bench top steriliser, making sure equipment does not overlap each other and that hinged items are in the open position
- # Store in sterile conditions and keep covered for use
- # Items not used within two to three hours to be re-sterilised
- # Disposable items and wooden items, such as spatulas, to be disposed of after use
- # Any razors used on a client to be disposed of as a 'sharps'

Only autoclaves which are CE marked or comply with BS3970: Part 4 1990 are suitable.

All gowns, wraps or other protective clothing, paper or other covering, towel, cloth or other such articles used in treatment shall be clean, in good repair, and so far as is appropriate, sterile.

### ***MINOR SURGERY***

Prior to piercing, the chiropodist shall 'surgical scrub' with a suitable bactericidal soap and hot water. Areas to be washed include nails, hands and elbows. These shall be dried with clean disposable paper. New disposable gloves shall be worn for each client.

The chiropodist shall wear clean overalls or a suitable, disposable apron, between clients.

In every case, skin in the area being treated must be appropriately cleansed using a skin-safe antiseptic solution prior to carrying out the surgery.

A 'No Touch' technique, eg: using sterilised forceps or disposable gloves, shall be used as much as possible to reduce the risk of infection and injury to the skin and soft tissue.

### **DISINFECTANTS**

Disinfectants do not sterilise, they only reduce the number of some microbes. Disinfection is needed for table tops and general surfaces in the treatment area, and also for needles and other contaminated equipment and materials prior to disposal. Sterilisation - the destruction of all microbes - is achieved by heating in an autoclave or dry heat steriliser.

### ***DISINFECTANT PREPARATION***

AGENT: Hypochlorite (bleach)

PREPARATION: Make up daily, dilute to 70 per cent bleach/water.

USE: Corrodes metal. Excellent for other materials and for disinfection of needles prior to disposal

AGENT: 70 per cent spirit/alcohol (surgical spirit)

PREPARATION: Do not dilute

USE: Suitable for skin, table tops, metals (except needles, holders and tubes)

AGENT: Clear phenolics (Hycolin)

PREPARATION: Make up daily, dilute according to manufacturers' instructions

USE: Suitable for table tops, damp wiping of equipment, taking all due precautions against electrocution

## **REFUSE**

Rubbish shall be stored in covered receptacles and suitable arrangements made for its proper disposal.

## **TRAINING/COMPETENCY**

Treatment shall only be given by qualified chiropodists/podiatrists who have met the criteria for training and competency, as acknowledged by professional organisations.

All chiropodists/ podiatrists shall:

# Display a name badge in a manner approved by the local authority. The name shall correspond with that shown on their record of training/ competency

# Be vaccinated against hepatitis B, and shall produce a medical certificate to that effect.

Those eligible for State Registration as a chiropodist must have obtained qualifications which are approved by the Chiropodists Board of the Council for Professions Supplementary to Medicine. State registered chiropodists are entitled to use the letters S.R.Ch after their names.

Their names are held on a national register, and enquirers are welcome to contact it directly at:

Registration Department (Chiropody), Park House, 184 Kennington Park Road, Kennington, London SE11 4BU

tel: 020 7840 9802

fax: 020 7820 9684

## ***CONTACT LIST OF PROFESSIONAL ORGANISATIONS***

The British Chiropody and Podiatry Association,  
New Hall, 149 Bath Road,  
Maidenhead, Berks SL6 4LA  
tel: 01628 621100/632449/632440  
fax: 01628 674483

The Institute of Chiropodists,  
27 Right Street,  
Southport,  
Merseyside PR9 0TL  
tel: 01704 546141

The Society of Chiropodists and Podiatrists,  
53 Welbeck Street,  
London W1M 7HE  
tel: 0207 486 3381  
fax: 0217 935 6359

The Guild of Complementary Practitioners,  
Liddell House, Liddell Close,  
Finchampstead,  
Berkshire,  
RG40 4NS  
tel: 0118 973 5757  
fax: 0118 973 5767  
e-mail: info@gcpnet.com

## **HAZARDS**

In chiropody/podiatry, the following hazards are recognised:

- # Infection from unsterilised equipment
- # Incompetent chiropodist/podiatrist causing further damage of the foot/lower leg, eg: during minor surgery/manipulations
- # Electrocution from electrical equipment

## **CONTRA-INDICATIONS**

The operator shall discuss the client's medical history and ask whether he/she has suffered from the following:

- # Allergic responses, eg: to anaesthetics, adhesive plasters, jewellery metals
- # Diabetes
- # Eczema
- # Haemorrhaging/haemophilia
- # Heart disease
- # Hepatitis A, B and C
- # High blood pressure
- # HIV
- # Impetigo
- # Psoriasis
- # Seizures, e.g., epilepsy
- # Any illness that requires the use of blood thinning medication, eg: aspirin
- # Any other medical condition, eg: one that requires steroid treatment

Where any of the above conditions exists, or there is a past history, written authorisation from the client's doctor is required.

## **AFTERCARE ADVICE**

Invasive treatment will require keeping infection away from the site of treatment. Dressings must be kept clean, and replaced as necessary.

The advice of the chiropodist/podiatrist should be followed for the specific treatments (see APPENDIX 3).

## **PREMISES**

The following points shall be adhered to:

- # All internal walls, doors, windows, partitions, floors, floor coverings, and ceilings shall be kept clean and in such good repair as to enable them to be effectively cleaned
- # Effective pest control measures such as pest proofing, and appropriate treatments, shall be carried out as necessary, and proper records kept

- # The floor of the treatment area shall be provided with a smooth, impervious surface
- # There shall be a minimum of 45 square feet of floor space for each operator in the establishment
- # No animals of any kind shall be allowed on the premises, except service animals used by persons with disabilities, e.g., guide dogs for the blind. Fish aquariums shall be allowed in waiting rooms
- # All furniture and fittings in the premises shall be kept clean. Furniture in the treatment area (eg: tables, couches and seats) shall be covered with a smooth, impervious surface, so that they can be effectively cleaned
- # There shall be an adequate, constant supply of clean hot and cold water at a wash basin, as well as sanitising soap or detergent, a nailbrush, and disposable towels. The wash basin shall be easily accessible to the practitioner and for his/her sole use. It should preferably be wrist or foot operated
- # There shall be suitable and sufficient sanitary accommodation for clients and practitioners
- # There shall be adequate clean and suitable storage for all items, so as to avoid, as far as possible, the risk of contamination
- # The premises shall be adequately lighted and ventilated
- # Suitable and sufficient means of heating to a reasonable room temperature, appropriate to the treatment provided, shall be provided
- Suitable screening to provide privacy shall be provided

## **REGISTRATION CERTIFICATE**

The registration certificate shall be conspicuously exhibited at all times to the satisfaction of the local authority. It must be clearly visible by all persons using the premises, and adequately protected against theft, vandalism or defacement.

## **RECORD KEEPING/INFORMATION**

A record shall be kept of the establishment, as follows:

- # Establishment name and address
- # Hours of operation
- # Operator's name and address

A copy of this code of practice shall be kept on public display.

Anyone under 16 years of age shall be accompanied by a parent/guardian who shall sign a consent form.

Every client shall read and sign a consent form, which contains details of name, address, age, medical history, etc. (see APPENDIX 1). These forms shall be kept for a period of at least three years after the cessation of current treatment, and shall be available for inspection at all times. This is so alleged cases of infection can be epidemiologically studied. It also enables checks on clients' ages.

Similarly, records (see APPENDIX 2), including name, address, date and type of treatment received, shall be confidentially kept for all treatments, again, for a period of at least three years after the treatment has finished. These shall be made available to the authorised officer upon request, and with the written consent of the client.

Any contra-indications, eg: heart conditions, diabetes, epilepsy, etc., for each treatment will be discussed with the client prior to any treatment.

Users are to be given written information to take away about contra-indications and risks of treatment, together with aftercare advice (see APPENDIX 3). This shall be noted on their record card, which they shall sign and date.

The name, address, and phone number of the local health authority and environmental health department, shall be clearly displayed so that the public can report complaints or seek additional information.

All infections, complications or diseases resulting from any body art procedure that become known to the operator shall be reported to the local environmental health department within 24 hours.

## **FIRST AID**

There must be a first aid kit on site that complies with the Health and Safety (First Aid) Regulations 1981, and it is recommended that at least one person on site holds an HSE approved basic first aid qualification.

## **INSURANCE**

The business must have third party liability, to cover claims for damages or negligence, as well as employer's liability insurance.

## **AUTHORISED OFFICERS**

Authorised Officers will carry written authorisations and proof of identity, which they will produce on request. They shall be admitted during opening hours, and at any other reasonable time to all parts of the premises. They may bring with them anyone else who is deemed necessary for the purposes of the inspection, eg: a medical practitioner.

**APPENDIX 1**  
**CONSENT FORM**

NAME OF PREMISES:

ADDRESS OF PREMISES:

LOCAL AUTHORITY REGISTRATION NO:

I hereby declare that I give (full name of therapist) my full consent to  
(treatment).....  
.....  
.....

The information given below is true to the best of my knowledge:

I have had/currently suffer from the following:

- Heart condition/pacemaker: No/Yes
- Epilepsy: No/Yes
- Haemophilia: No/Yes
- HIV/hepatitis:No/Yes
- High blood pressure: No/Yes
- Diabetes: No/Yes
- Skin conditions, eg: psoriasis No/Yes
- Allergies, eg: plasters: No/Yes
- Taking blood thinning medication, eg: aspirin: No/Yes
- Concurrent drug treatments, such as antihistamines, steroids and aspirin:  
No/Yes
- Implants, as a result of surgery/artificial joints: No/Yes
- Psychiatric disorders: No/Yes
- Radiotherapy: No/Yes
- Seizures, e.g., epilepsy: No/Yes
- Surgical procedures: No/Yes
- Pregnancy: No/Yes

I will follow the verbal and written aftercare instructions, which have been given to me.

Print full name

Address

Age          Date of birth

Signature of client

Date

**APPENDIX 2**  
**TREATMENT RECORD INFORMATION**

CLIENT NAME:

ADDRESS:

TEL: WORK/HOME:

DATE OF BIRTH:

GENERAL HEALTH:

CONTRA-INDICATIONS:

DATE CONSENT FOR TREATMENT OBTAINED (and signed for consent card):

GP's NAME AND ADDRESS:

IS GP's CONSENT REQUIRED:

DATE GP's CONSENT OBTAINED IF NECESSARY:

ANY SPECIAL MEDICAL/OTHER INFORMATION:

TREATMENT DETAILS:

DATE OF TREATMENT(S):

NAME OF THERAPIST/OPERATOR:

TREATMENT HISTORY:

DATE CONTRA-INDICATIONS/AFTERCARE ADVICE LEAFLET SIGNED FOR:

SIGNATURE/DATE OF CLIENT:

SIGNATURE/DATE OF THERAPIST/OPERATOR:



## **APPENDIX 3**

### **CONTRA-INDICATIONS AND AFTERCARE ADVICE**

#### ***CONTRA-INDICATIONS***

The operator shall discuss the client's medical history and ask whether he/she has suffered from the following:

- # Allergic responses- to anaesthetics, adhesive plasters and jewellery metals
- # Diabetes
- # Eczema
- # Haemorrhaging/haemophilia
- # Heart disease/pacemaker
- # Hepatitis A, B and C
- # High blood pressure
- # HIV infection
- # Impetigo
- # Psoriasis
- # Seizures, e.g., epilepsy
- # Any condition requiring blood thinning medication, eg: aspirin
- # Any other relevant medical condition, eg: where steroid treatment was required

Where any of the above conditions exist, or there is a past history, written authorisation from the client's doctor is required.

#### ***AFTERCARE ADVICE***

Invasive treatment will require keeping infection away from the site of treatment. Dressings must be kept clean, and replaced as necessary.

The advice of the chiropodist/podiatrist should be followed for each specific treatment.

## **APPENDIX 4** **SUPPORTING INFORMATION**

### **LAW**

Business operators shall familiarise themselves with the following legislation:

#### ***THE HEALTH AND SAFETY AT WORK ETC ACT 1974***

This requires employers and self-employed people to ensure the health, safety and welfare of persons attending their businesses.

#### ***HEALTH AND SAFETY (FIRST AID) REGULATIONS 1981***

There must be a first aid kit on site that complies with the Health and Safety (First Aid) Regulations 1981.

#### ***ELECTRICITY AT WORK REGULATIONS 1989***

All portable electrical appliances used within the premises are to be maintained regularly in accordance with the Electricity at Work Regulations 1989.

#### ***HEALTH AND SAFETY (FIRST AID) REGULATIONS 1981***

There must be a first aid kit on site that complies with the Health and Safety (First Aid) Regulations 1981 under the control of a responsible person.

#### ***THE CONTROLLED WASTE REGULATIONS 1992***

This require a duty of care to ensure that all clinical waste (i.e. dressings, swabs and used needles) is collected and disposed of by a licensed contractor in an approved incinerator.

#### ***THE MANAGEMENT AT WORK REGULATIONS 1999***

The business operator shall carry out, and implement the findings of, a workplace risk assessment of the business as required by the Management at Work Regulations 1999.

The outcome of the risk assessment must be used to implement safe working practices.

### ***DISABILITY DISCRIMINATION ACT 1995***

Access should be provided for disabled people at the premises as required by the Disability Discrimination Act 1995.

### ***CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH REGULATIONS***

Chemicals and biohazard substances, eg: disinfectants, body fluids, contaminated equipment and wastes etc, shall be assessed in accordance with the requirements of these regulations (SI 1999/437 at the time of writing, but subject to regular update).

The outcome of the risk assessment must be used to implement safe working practices.

### **MAINTENANCE**

The following points must be adhered to:

- # All systems, eg: fire safety equipment, boilers, electrical equipment, etc, provided in the premises shall be maintained regularly by competent persons, and records kept
- # All equipment used in connection with special treatments shall be serviced/maintained in accordance with the manufacturers/suppliers recommendations, and records kept

### **NUISANCE/COMPLAINTS**

The responsible person shall ensure that there is no noise or other type of nuisance arising from the operation of the business.

## **PEOPLE WITH DISABILITIES**

Access should be provided for disabled people at the premises. Business operators are reminded of their duties under the Disability Discrimination Act 1995.

## **ELECTRICITY**

The business operator shall ensure that all portable electrical appliances used within the premises are maintained regularly in accordance with the Electricity at Work Regulations 1989. Records of this maintenance must be available on the premises.

The business operator shall ensure that the fixed electrical installation is inspected by a competent electrical engineer and a copy of the current certificate is available at the premises.

## **FIRE PRECAUTIONS**

The following precautions need to be noted:

- # All fire exits, staircases and other means of escape shall be kept unobstructed, immediately available, and clearly signed, in accordance with the council's requirements, and any requirements of the fire authority
- # All fire-resisting and smoke stop doors shall be maintained self-closing, and shall not be secured open
- # All exit doors shall be available for access and egress whilst the public are on the premises
- # A notice(s) reading "No Smoking" shall be prominently displayed within the treatment area

**Revision record**

<b>date</b>	<b>originator</b>	<b>note</b>