



Together. A passion for hain.

CONTENTS

Table of Contents

PAR	T ONE .		1					
1.	Introdu	uction	1					
2.	Guideline objectives							
3.	Businesses covered by the guidelines1							
4.	Knowledge of the guidelines1							
5.	Disclaimer of liability							
6.	Further information 2							
7.	References							
PAR	PART TWO							
8.	Hygiene standards							
	8.1.	Hand hygiene	3					
	8.2.	Cleaning	8					
9.	Person	Personal protective equipment						
10.	Disposal of sharp equipment							
11.	Management of cuts and blood exposures							
12.	Hairdre	Hairdresser health						
	12.1.	Infections	.12					
	12.2.	Hairdresser with a contagious condition	.13					
	12.3.	Immunisation	.13					
13.	Workp	lace safety	13					
14.	Mobile hairdresser							
PAR	T THRE		.15					
15.	. Design and Construction of Premises							
	15.1.	General	.15					
	15.2.	Hand basins and sinks	. 15					
	15.3.	Cleaning areas	.15					
PAR	PART FOUR							
16.	Hairdre	essing industry dealing with COVID-19	16					
	16.1	Simple ways to prevent the spread of COVID-19 in your salon	.16					
	16.2	Things to consider when you or your employees travel	.17					
	16.3	Getting your salon ready for re-opening after COVID-19 measures	.18					
Glossary 19								
	Definit	ion of terms	. 19					

PART ONE

1. Introduction

This document aims to provide a set of recommendations to upscale hair salon standards. They include implementation of best practice hygiene procedures for personnel hygiene, equipment cleaning, premises cleaning and workplace health and safety.

Transmission of infection can occur during hairdressing procedures. The recent outbreak and spread of COVID-19 caused mandatory / necessary salon closures to respect the measure of social distancing (1,5 -2 meters). With salons re-opening business, it is to be expected that higher levels of hygiene and additional standards for health & safety are needed to reinstall customer trust and loyalty. Procedures using items such as razors, scissors, combs, clippers and hairpins already are classified as infection risk procedures because these items can accidentally pierce the skin. Skin infections on the scalp and neck can be spread through hairdressing procedures. HIV, hepatitis B and hepatitis C can also be transmitted through blood contact. Blood does not have to be visible on equipment or working surfaces for infection to be transmitted.

2. Guideline objectives

The Guidelines provide information and recommendations to:

- support and provide considerations for minimising the risk of transmission of micro-organisms between hairdressers and their clients
- considerations to further upscale best practice hygiene procedures
- ensure that only appropriately cleaned equipment is used on each client
- promote a safe working environment for staff

3. Businesses covered by the guidelines

The Guidelines apply to and should be followed by:

- a person (a *proprietor*) engaged in the business of hairdressing
- a person (a hairdresser) who carries on the occupation of hairdressing
- hairdressing businesses including home-based businesses
- mobile hairdressing services

4. Knowledge of the guidelines

Entrepreneurs in hairdressing should ensure that all staff members are aware of the salon standards and understand the relevant information and or procedures to follow.

5. Disclaimer of liability

These guidelines reflect accepted current best practice in infection control practices for businesses and staff performing hairdressing procedures. It reflects the best available data at the time the guideline was prepared. The results of future studies may require revisions to the recommendations in this guideline to reflect new data.

The authors of these guidelines have made considerable efforts to ensure the information upon which they are based is accurate and up to date. Nevertheless, hairdressers and employees are strongly recommended to confirm that the information contained within them, is correct by way of independent sources. It is the responsibility of hairdressers and employees to monitor for updates, we recommend to regularly check information of World Health Organization <<u>https://www.who.int</u> > When updates occur, inform yourself and all team members of any changes to infection control practices.

While infection control practices in accordance with these guidelines will ordinarily be considered safe and legally compliant, alleged adherence to these guidelines is not a valid defense to disciplinary or enforcement action, including criminal prosecution, for inadequate or unsafe infection control practices.

The recommendations contained in these guidelines do not indicate an exclusive course of action or standard of care or be deemed inclusive of all proper methods of care nor exclusive of other methods of care reasonably directed to obtaining the same results. The authors accept no responsibility as well as no tortious or other liability for any inaccuracies, information perceived as misleading, or the success or failure of any recommendation detailed in the guidelines. It is the sole responsibility of hairdressers and other employees to prevent the transmission of infections.

The authors accept no tortious or other liability whatsoever in respect to any action or consequence arising from the use of these guidelines, or representations made in relation to adherence to these guidelines.

The inclusion of links to external websites does not constitute an endorsement of those websites nor the information or services offered.

6. Further information

In case a local Hairdressing Branch Organisation is existing, it is advised to also check with them if hairdressing salon standards and/or guidelines for Health & Safety in hairdressing might be available and regularly updated online

7. References

World Health Organization: <u>https://www.who.int</u>



PART TWO

8. Hygiene standards

The following sections provide information on recommended hygiene standards as well as practical methods for implementing these standards.

PLEASE NOTE! Standard hygiene practices require everyone to assume that all blood and body substances, such as sweat, droplets from sneezing or coughing are potential sources of infection.

8.1. Hand hygiene

Hand hygiene using liquid soap, or an alcohol-based hand rub is an essential element of good personal hygiene.

Hands must be washed with soap and water when soiled.

An alcohol-based hand rub can be used to sanitise clean hands.

Ideally a salon installs a basin designated for HAND WASHING ONLY that is not used for cleaning equipment or washing eating and drinking tools.

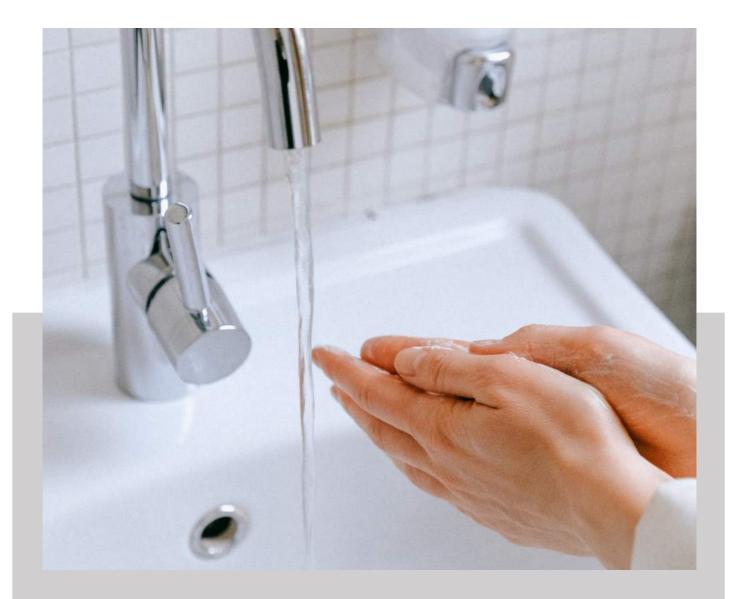
Hand hygiene should be performed:

- before and after contact with each client
- after eating or smoking
- after going to the toilet
- after blowing your nose, coughing or sneezing
- after handling dirty laundry
- after contact with blood or other body liquids
- after removing protective gloves

8.1.1. Hand hygiene using liquid soap and water

Washing your hands with liquid soap and running water loosens, dilutes and flushes off dirt and germs. It is the combination of running water, rubbing your hands and the detergent in the soap that helps loosen the dirt, remove the germs and rinse them off your skin.

- a. A routine hand wash involves: (See Diagram on next page. Sourced from World Health Organization)
 - wetting hands thoroughly and then lathering with liquid soap
 - vigorously rubbing hands together for at least 20 to 30 seconds
 - rinsing hands under warm running water
 - drying hands with a disposable paper towel or a fresh, clean cloth towel
 - If cloth towels are used a fresh, clean towel should be used each time
- b. A moisturising cream dispensed by a pump pack can also be used after hand washing to prevent skin damage and improve skin condition.
- c. If re-useable liquid soap containers are used the container and the pump should be cleaned and dried prior to refilling. Failure to do this could result in the contamination of the liquid soap.
- d. Cake/bar soap should not be used as it might transfer germs from one person to the next.
- e. A break in the skin increases the risk of the individual contracting an infection. Cuts, wounds and abrasions on the hands should be covered with a waterproof adhesive plaster which should be changed when the dressing becomes soiled or wet.



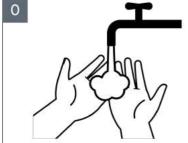
<u>Diagram – hand washing using liquid soap</u>

How to Wash Hands

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

ODuration of the entire procedure: **40-60 seconds**

4







Wet hands with water;



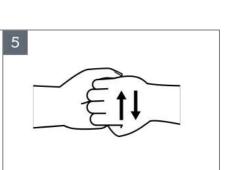
Right palm over left with interlaced fingers and vice versa



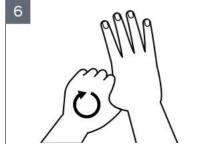
Apply enough soap to water all hand



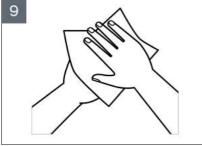
Palm to palm with fingers interlaced;



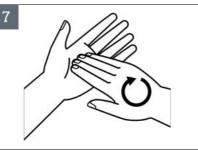
Backs of fingers to opposing palms with fingers interlocked;



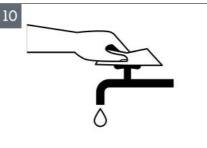
Rotational rubbing of left thumb clasped in right palm and vice versa;



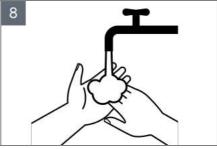
Dry hands thoroughly with a single use towel



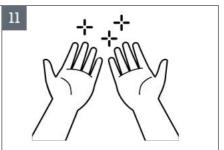
Rotational rubbing, backwards and forwards with clasped fingers of right palm and vice versa;



Use towel to turn off faucet;



Rinse hands with water;



Your hands are now safe.

8.1.2. Hand Hygiene using an alcohol-based hand rub

Alcohol-based hand rubs can be a fast and effective way to sanitise hands. They can reduce the number of germs on your hands. They do not remove dirt from your hands.

An alcohol-based hand rub should contain between 60% – 80% alcohol.

An alcohol-based hand rub may be used for hand hygiene when hands are not soiled.

Apply alcohol hand rub using the following method:

- apply the amount of hand rub recommended by the product manufacturer to the palms of hands
- rub hands together, making sure you cover in between fingers, around thumbs and fingertips
- rub until hands are dry

(See Diagram on next page. Sourced from World Health Organization)



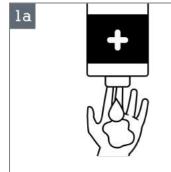
Diagram – hand rub using a sanitiser

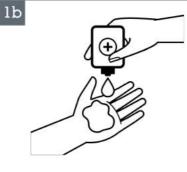
How to sanitise hands using a Hand Rub!

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

 $\check{\mathcal{O}}$ Duration of the entire procedure: **20-30 seconds**

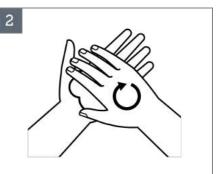
4



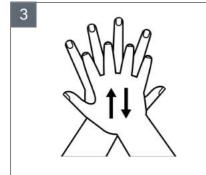


Apply a palmful of the product in a cupped hand,

Amount of product should allow to cover all surfaces of both hands,



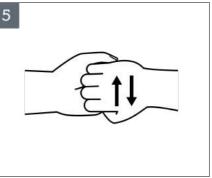
Rub hands palm to palm;



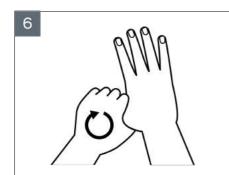
Right palm over left with interfaced fingers and vice versa;



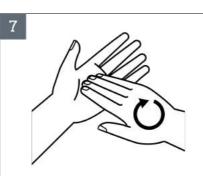
Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



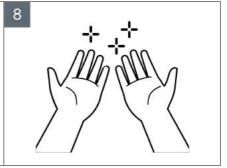
Rotational rubbing of left thumb clasped in right palm and vice versa



Rotational rubbing, backwards and

forwards with clasped fingers of right hand in left palm and vice

versa;



Once dry, hands are safe.

8.2. Cleaning

8.2.1. Detergent

A detergent is required to be used to remove protein residues and organic matter from equipment. Disinfectants are not cleaning products and must not be used for cleaning.

- Detergents that can be used include dishwashing liquid, liquid soap, and shampoo
- Detergent must be thoroughly rinsed from all items after cleaning
- Disinfectant should only be used on equipment or surfaces that have first been cleaned with a detergent based product

8.2.2. Equipment cleaning

Equipment must be cleaned after each client use. Blades used for shaving, including neck shaving, must be disposed of after each client use into a designated sharps container. Blades must not be reused.

a. COMBS, BRUSHES, ROLLERS etc. should be cleaned as follows:

- Remove all visible hair or other materials from the equipment
- Rinse under warm running water to remove loosened debris
- Fill a sink or bowl with warm water and detergent
- The equipment should be immersed and scrubbed under water to minimise aerosols and splashing
- Rinse in warm to hot water to remove any residue
- All equipment should be dried after the cleaning process using a clean dry cloth
- Visually inspect the cleanliness of all items
- b. SCISSORS should be cleaned after each client as follows:
 - Using a cloth remove all visible hair, paying attention to the hinge joint
 - Clean as per manufacturer's instructions
 - Dry with a clean cloth
- c. CLIPPER CLEANING
 - Using a small brush remove any hair from the clippers
 - Wipe over all parts of the clippers with a 70% alcohol preparation (small alcohol wipes in individual sachets are ideal for this)
 - Allow to dry before reusing

NOTE! Clipper cleaning is the only exception to the rule of cleaning with a detergent based product prior to applying a disinfectant. The use of water on clippers may lead to corrosion, due to the water penetrating the clipper heads. Alcohol based products evaporate and are non-corrosive.

d. UV LIGHT CABINETS are optional. The use of UV sterilization, or ultraviolet germicidal irradiation, has been found to be extremely effective. Sources of UV sterilization can kill over 99% of viruses, bacteria, and fungi in a short amount of time

8.2.3. Cleaning blood contaminated equipment

- a. If equipment was in contact with blood, it should be cleaned while wearing protective gloves and processed as follows:
 - Combs, brushes, rollers etc. clean thoroughly using detergent and water as described in Section 8.2.2(a)
 - Disinfect the equipment by immersing in 70% alcohol solution or hospital grade disinfectant
 - If using 70% alcohol solution, there is no need to rinse
 - If using hospital grade disinfectant rinse the items under hot water, then dry (ensure manufacturer's instructions are followed for concentration and contact time)
 - Check the 'use by date' before using disinfectants; discard any expired product
 - Equipment should be stored dry and must not be stored in a disinfectant or left soaking for an extended time
- b. Cleaning CLIPPERS after being in contact with blood, a sore or damaged skin:
 - Using a brush remove any collected hair from the clippers
 - Dismantle clippers
 - Parts that can be immersed in water should be cleaned using detergent and warm water and then dried
 - wipe over each part with a 70% alcohol preparation **OR** immerse in a disinfectant solution as per the manufacturer's instructions
 - if immersed in disinfectant rinse thoroughly under warm/hot water, then dry
 - **Parts not able to be immersed in water** must be wiped over with a 70% alcohol preparation and allowed to dry completely
 - Reassemble clippers
 - The brush used to remove hair from the clippers should also be washed in warm soapy water and then dried

8.2.4. Laundry

- a. Disposable neck wraps are preferred for use on each client. If using cloth neck wraps, they must be washed before being re-used on another client
- b. Towels must be washed after each client use
- c. Used cape's and gowns should be washed daily or ideally buy into enough protective gowns to allow them only to be used ones
- d. All used towels and other cloth items must be placed into a container, separate from the clean linen
- e. All used towels and other cloth items must be:
 - washed in a washing machine with a water temperature of a minimum of 60o C for not less than 10 minutes using a laundry detergent
 - when washed in a cooler wash program use add on top of a laundry detergent a laundry sanitiser to the water
 - alternatively towels and other cloth items are washed by a commercial laundry
- f. Washed items must be hung out to dry or dried immediately in a drier
- g. All clean items should be stored in a designated clean area

TABLE 1: Equipment cleaning requirements

Equipment	Reason / risk	When to clean	How	Additional information
Safety razors Straight Edge razors with changeable single-use blade only	Potential for skin infections or blood- borne virus transmission	After each client	Dispose of blade/ razor into sharps container. Wash the handle in warm water and detergent. Rinse in hot running water. Dry with clean cloth	Use a new blade for each client. Blades must NEVER be reused
Electric Clippers	Potential for infection transmission	After each client	Remove hair. Wipe clipper blade attachment with a 70% alcohol wipe	
Scissors	Potential for infection transmission or infestation	After each client	Use a cloth to remove all visible hair. Especially check the scissor hinge joint. Clean as per manufacturer's instructions. Dry with a clean cloth	
Combs Hairbrushes Neck Brushes Hair pins/clips Rollers	Potential for infection or infestation	After each client and if dropped on the floor	Remove any hair. Wash in warm water and detergent. Rinse in hot running water. Dry	
Scissors/combs/ hairpins etc. exposed to blood	Potential for blood- borne virus transmission	As soon as possible after scissors have been exposed to blood (attend to injury first). This must be done prior to re-use	Wash in warm soapy water; Dry with cloth. Wipe with 70% alcohol, allow to dry	Where possible dispose of any items that have pierced the client or hairdresser's skin
Clippers exposed to blood	Potential for blood- borne virus transmission	As soon as possible after clippers have been in contact with blood (attend to injury first)	Clean and disinfect as per Section 8.2.3(b).	
Shaving brushes	Potential for infection if previous client has facial skin lesions or infection	After each client	Rinse free of hair and shaving cream. Wash in detergent and water. Rinse in hot running water. Dry	
Dye mixing bowls Shaving bowls	Potential for contamination	After each client	Wash in warm water and detergent. Rinse. Dry with cloth	Store dry
Towels	Potential for infection if previous client has skin lesions or infection	After each client	Launder as per Section 8.2.4	
Cloth neck wraps/ capes/gowns	Potential for infection if previous client has skin lesions or infection	After each client unless clean towel/ paper is used around neck	Launder as per Section 8.2.4	
Equipment trolley	Prevention of dust and hairs from accumulating or contaminating clean equipment	At least weekly, more frequently if required	Use cloth to remove hair. Wash with warm water and detergent. Dry with cloth	Cover when not in use

8.2.5. Premises cleaning

- a. A routine and regular cleaning schedule of the premises is required. Routine cleaning should include:
 - cleaning of bench tops, mirrors, chairs, drawers, basins, sinks, floors and skirting boards
 - use of a detergent-based cleaner
 - mops and other cleaning equipment must be washed in detergent and water and stored dry after use
- b. Disinfectants are not to be used for routine environmental cleaning as they do not have cleaning properties. They should only be used when blood or other body fluid has contaminated a surface. The surface must be cleaned with detergent and water prior to the application of the disinfectant. Disinfectants should be used as per manufacturer's instructions.
- c. All hair must be swept from the floor as soon as possible after each client and disposed of immediately into a lidded, general waste bin.
- d. Equipment used for cleaning the premises must be kept clean and in good repair.

9. Personal protective equipment

All persons engaged by the business must have available to them when necessary, appropriate personal protective equipment, to enable them to safely perform their duties.

- a. Protective equipment may include:
 - disposable gloves
 - general purpose utility gloves for premises cleaning
 - aprons
- b. Gloves:
 - wearing gloves is not a substitute for hand hygiene
 - hands should be washed after removal of gloves
 - disposable gloves must not be reused
 - reusable utility gloves should be washed regularly in warm soapy water and be stored dry

10. Disposal of sharp equipment

The management and safe disposal of sharp equipment is the responsibility of the person who used that equipment.

- a. Blades must only be used on one person and then discarded.
- b. Cutthroat razors with a permanent/non-changeable blade are NOT recommended. If used, they should be thoroughly cleaned and sanitized after every client.
- c. All used blades should be disposed of into an appropriate container as soon as possible after a procedure.
- d. Sharps containers should:
 - not be overfilled
 - be positioned for easy access
 - be out of reach of children (opening should be above 1.2m from floor level)
 - be closed before disposal

11. Management of cuts and blood exposures

Accidental blood exposures can happen to hairdressers and clients by piercing the skin with sharp equipment.

- a. Sharp equipment such as razors, scissors, combs, clippers and hairpins can accidentally pierce the skin. Blood and body fluids do not have to be visible on equipment or working surfaces for infection to be transmitted. Both clients and operators are at risk.
- b. If a **client or a hairdresser** is cut in the course of a hairdressing procedure, the hairdresser involved must ensure the following procedures are carried out:
 - If a **hairdresser** is cut, they must immediately wash their hands and apply a clean dry waterproof dressing to their wound
 - If a **client** is cut the hairdresser should wash their hands and put on disposable gloves to assist the client in managing the injury. The hairdresser must not touch blood with bare hands
 - If disposable gloves are not available the client must be given a clean, dry dressing to apply pressure to their own wound until the bleeding stops
 - When the client's bleeding has stopped the contaminated dressings should be placed immediately into a rubbish bin. The dressing and the appliance must be handled carefully to avoid any skin contact with blood
 - Apply a clean dry dressing to the cut
 - Equipment contaminated with blood must be disposed of (if possible) or cleaned and then disinfected (as per section 8.2.3)
 - Any person who has handled contaminated dressings or equipment must wash their hands thoroughly, even if they were wearing gloves at the time
 - It is unlikely, but if an incident involves the transfer of blood of the client to the blood of a hairdresser or hairdresser to a client, the wound must be immediately washed with soap and water. Do not squeeze the area. The affected person should seek medical advice as soon as possible after the incident
 - Keep a record and report the incident to the proprietor or manager of the business

12. Hairdresser health

All staff should maintain an appropriate level of hygiene and cleanliness when attending to clients.

12.1. Infections

Infections that can be transmitted during hairdressing due to equipment not being cleaned properly may include impetigo (also known as school sores), head lice, tinea and ringworm. Blood borne infections such as hepatitis B, hepatitis C and HIV could occur if there is a blood exposure, however the risk is very low.

12.2. Hairdresser with a contagious condition

A hairdresser who has a contagious condition that may be transmitted to a client or colleague, is required to take reasonable precautions (appropriate to the condition) to minimise the risk of transmission of the condition. Reasonable precautions include:

- use of waterproof dressings where broken skin or infections occur on exposed parts of a hairdresser's body that may come in contact with the client
- precautions advised by a medical practitioner or a public health officer

12.3. Immunisation

- a. The Proprietor or Manager of a business should discuss with all hairdressing staff their option to be immunised against hepatitis B.
- b. There is currently no immunisation available for hepatitis C or for HIV.

13. Workplace safety

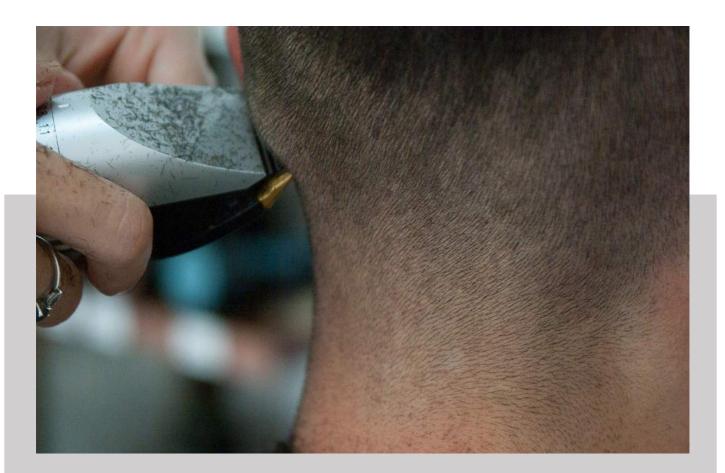
Employers have a responsibility to provide a safe work environment for all employees. Employees have a responsibility to engage in safe work practices.

- a. With regards to infection control, a safe work environment involves the provision of adequate staff training, appropriate facilities and equipment. Workplace procedures should be developed and documented. The documented procedures should be available to all staff. It is recommended that a system be in place to ensure proof of reading of these documents by all staff. The procedures should be consistent with the Guidelines and should include:
 - methods of hand hygiene
 - cleaning procedures for all hairdressing equipment and premises cleaning
 - handling and disposal of sharp equipment
 - handling used towels, wraps and capes
 - laundering procedures
 - management of cuts and blood exposures; and
 - information on appropriate staff immunisation
- b. Material Safety Data Sheets for all chemicals, including cleaning products and hair dyes, should be readily available on the hairdressing premises. All containers should be labelled with the correct contents.
- c. Employers should ensure that their staff are aware of the Guidelines and that a copy is available for reference.

14. Mobile hairdresser

Anyone who carries out hairdressing procedures away from fixed premises is seen as a mobile hairdresser and should adhere to the guidelines.

- a. Mobile hairdressers must:
 - maintain personal hygiene standards
 - perform hand hygiene before and after each client (see Section 8.1 Hand Hygiene.
 - clean all equipment before being reusing on another client
 - store clean unused equipment in a separate container from used equipment
 - ensure that used uncleaned equipment being transported from one premises to another is securely stored in labelled, rigid, airtight washable containers
 - ensure that facilities are available to adequately store all equipment, linen and waste safely before and after use and while in transit
- b. Equipment carried by mobile hairdressers should include:
 - alcohol-based hand rub
 - liquid soap
 - disposable hand towels
 - disposable gloves
 - a sharps container if using blades
 - labelled, rigid, airtight washable containers to hold used equipment



PART THREE

15. Design and Construction of Premises

15.1. General

- a. The correct design of premises will assist the business proprietor to follow the Guidelines.
- b. Planning for new construction or major renovation may require consultation between the proprietor/ manager, the architects/designers, and Health Protection Experts and/or Health & Safety guidelines such as these.
- c. The positioning of sinks/basins should be considered during the design phase as they may be difficult and/or expensive to rectify after completion of the works.
- d. Workplace health and safety and cleaning issues should be considered at all stages of the design and construction of the premises.

15.2. Hand basins and sinks

Each premises should have a basin designated for hand washing ONLY that is not used for cleaning equipment or washing of eating and drinking utensils.

- a. Hand basins should be:
 - located in main salon area
 - installed and maintained in such a way that they are accessible at all times for hand washing
 - at least 300mm x 350mm at the mouth (top) of the basin
 - supplied with hot and cold running water through a single outlet
- b. Sinks used for cleaning equipment, or kitchen sinks used for cleaning eating and drinking utensils must not be used for hand washing.
- c. A hand basin located in a toilet is not suitable as the salon hand basin, as it may always not be accessible by staff.
- d. A paper towel dispenser must be installed adjacent to the hand washing basin and be supplied with paper towel at all times.
- e. If there is a toilet on the premises, the toilet hand basin should be supplied with paper towel.

15.3. Cleaning areas

- a. Cleaning sink sizes should be large enough to allow immersion of the largest appliance to be cleaned.
- b. All fixtures and fittings located in the cleaning area should be designed to allow easy cleaning. Materials used in these fixtures and fittings should be able to withstand cleaning agents.
- c. Wall, floor and bench surfaces should be smooth, impervious and seamless to facilitate cleaning. Floor surfaces should be non-slip.

PART FOUR

16. Hairdressing industry dealing with COVID-19

How COVID-19 spreads:

When someone who has COVID-19 coughs or exhales they release droplets of infected fluid. Most of these droplets fall on nearby surfaces and objects, such as desks, tables or telephones. People could catch COVID-19 by touching contaminated surfaces or objects, and then touching their eyes, nose, or mouth. If they are standing within 1,5 – 2 meters of a person with COVID-19 they can catch it by breathing in droplets coughed out or exhaled by them. In other words, COVID-19 spreads in a similar way to flu. Most persons infected with COVID-19 experience mild symptoms and recover. However, some experience more serious illness and may require hospital care.

Risk of serious illness rises with age: people over 40 seem to be more vulnerable than those under 40. People with weakened immune systems and people with conditions such as diabetes, heart and lung disease are also more vulnerable to serious illness.

This document gives advice on:

- 16.1 Simple ways to prevent the spread of COVID-19 in your workplace
- 16.2 Things to consider when you and your employees travel
- 16.3 Getting your salon ready for re-opening after COVID-19 measures or closures in your community

16.1 Simple ways to prevent the spread of COVID-19 in your salon

The low-cost measures below will help prevent the spread of infections in your workplace, such as colds, flu and stomach bugs, and protect your customers, contractors and employees.

Employers should start doing these things now, even if COVID-19 has not arrived in the communities where they operate. These measures can reduce working days lost due to illness and stop or slow the spread of COVID-19 if it arrives at one of your workplaces.

- Make sure your workplaces are clean and hygienic:
 - Surfaces (e.g. desks and tables) and objects (e.g. telephones, workspaces, client chairs) need to be wiped with disinfectant regularly
 - Why? Because contamination on surfaces touched by employees and customers is one of the main ways that COVID-19 spreads
- Promote regular and thorough handwashing by employees, contractors and customers:
 - Put sanitizing hand rub dispensers in prominent places around the workplace. Make sure these dispensers are regularly refilled–Display posters promoting handwashing
 - o Ask your local public health authority for these or consult www.WHO.int
 - Combine with other communication measures such as offering guidance from occupational health and safety officers, briefings at meetings and information on intranet sites to promote handwashing
 - o Make sure that staff, and customers have access to places where they can wash their hands with soap and water
 - Why? Because washing kills the virus on your hands and prevents the spread of COVID-19

- Promote good respiratory hygiene in the workplace:
 - Display posters promoting respiratory hygiene. Combine this with other communication measures such as guidance from occupational health and safety officers, briefing at meetings and information on the intranet etc
 - Provide paper tissues and disposable towels at your workplaces, along with closed bins for hygienically disposing of them
 - Why? Because good respiratory hygiene prevents the spread of COVID-19
- Advise employees to consult national travel advice before going on business or holiday trips
- Brief your employees, and customers that if COVID-19 starts spreading in your community anyone with even a mild cough or low-grade fever (37.3 C or more) needs to stay at home
- They should also stay home (or work from home) if they have had to take simple medications, such as paracetamol/acetaminophen, ibuprofen or aspirin, which may mask symptoms of infection
 - Make clear to employees that they will be able to count this time off as sick leave
 - Keep promoting the message that people need to stay at home even if they have only mild symptoms of COVID-19
 - Display posters with this message in your workplaces. Combine this with other communication channels commonly used in your organization or business
 - Your occupational health services, local public health authority, or other partners may have developed campaign materials to promote this message

16.2 Things to consider when you or your employees travel

- Before traveling:
 - Make sure your organization and employees have the latest information on areas where COVID-19 is spreading. You can find this at: <u>https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/</u>
 - Based on the latest information, your organization should assess the benefits and risks related to upcoming travel plans
 - Avoid sending employees who may be at higher risk of serious illness (e.g. older employees and those with medical conditions such as diabetes, heart and lung disease) to areas where COVID-19 is spreading
 - Make sure all persons travelling to locations reporting COVID-19 are briefed by a qualified professional (e.g. staff health services, health care provider or local public health partner)
 - Consider issuing employees who are about to travel with small bottles of alcohol-based hand rub. This can facilitate regular handwashing
- While traveling:
 - Encourage employees to wash their hands regularly and stay at least 1,5 2 meters away from people who are coughing or sneezing
 - o Ensure employees know what to do and whom to contact if they feel ill while travelling
 - Ensure that your employees comply with instructions from local authorities and any local restrictions on travel, movement or large gatherings where they are travelling
- When employees return from travelling:
 - Employees who have returned from an area where COVID-19 is spreading should monitor themselves for symptoms for 14days and take their temperature twice a day
 - If they develop even a mild cough or low-grade fever (i.e. a temperature of 37.3 C or more) they should stay at home and self-isolate. This means avoiding close contact (less than 1 m) with other people, including family members. They should also call their healthcare provider or the local public health department, giving them details of their recent travel and symptoms

16.3 Getting your salon ready for re-opening after COVID-19 measures

- Develop a plan for what to do if someone becomes ill with suspected COVID-19 at one of your salon workplaces:
 - The plan should cover putting the ill person in a room or area where they are isolated from others in the workplace, limiting the number of people who have contact with the sick person and contacting the local health authorities
 - Consider how to identify persons who may be at risk, and support them, without inviting stigma and discrimination. This could include persons who have recently travelled to an area reporting cases, or other personnel who have conditions that put them at higher risk of serious illness (e.g. diabetes, heart and lung disease, older age)
 - Tell your local public health authority or branch organisation you are developing the plan and seek their support for input
 - If there is an outbreak of COVID-19 in your community the health authorities may have advise people to avoid public transport and crowded places. In a lot of cases hair salons are closed for longer period based on authority measures or a complete lockdown to lower the curve of COVID 19 outbreak
 - Develop a business plan including additional services such as online sales or vouchers for later use sold during the outbreak in the communities where your business operates
- Prepare for when businesses are allowed by authorities to re-open again:
 - The plan will help prepare your organisation for after the measures taken during an outbreak of COVID-19
 - consider reorganising the salon with more space between workstations (to allow 1,5 m. distance between chairs)
 - o Raise all possible hygiene standards to help your business operating while your employees stay safe
 - Consider protective masks for salon staff to ensure clients cannot be infected even by employees without any symptoms of COVID 19
 - The plan should address how to keep your business running even if a lower number of employees and or clients are allowed or willing to enter your salon, either due to local restrictions or because they are concerned or focused on extra safety
 - Communicate to your employees and clients about the plan and make sure they are aware of what they need to do, or not do, under the plan
 - Emphasise key points such as the importance of staying away from the salon even if when only mild symptoms are present after having to take simple medications (e.g. paracetamol, ibuprofen) that may cover up COVID 19 symptoms
 - Be sure your plan addresses the mental health and social consequences of a case of COVID-19 appears in the salon team or in their private family situation and offer information and support
 - Your local or national public health authority may be able to offer support and guidance in developing your plan
- Remember: Now is the time to prepare for COVID-19. Simple precautions and planning can make a big difference. Action now will help protect your employees and your business

How to stay informed:

- Find the latest information from World Health Organization on where COVID-19 is spreading: <u>https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/</u>
- Advice and guidance from WHO on COVID-19
 <u>https://www.who.int/emergencies/diseases/novel-coronavirus-2019</u>
 <u>https://www.epi-win.com/</u>

Glossary

Definition of terms

Authorities consulted:	World Health Organization - https://www.who.int			
Cleaning:	the physical removal of foreign material such as dust, soil, blood, secretions, excretions and micro-organisms. Cleaning physically removes rather than inactivates micro-organisms. Cleaning is accomplished with water, detergents and mechanical action, and must precede disinfection.			
Contamination:	the introduction of micro-organisms and/or foreign matter.			
COVID -19:	coronavirus disease 2019. For public advice and latest info consult website WHO: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public			
Detergent:	a cleaning agent composed of a 'surface wetting agent' which reduces surface tension, a 'builder' which is the principle cleaning agent, and a 'sequestering' or 'chelating' agent to suspend the soil.			
Disinfectant:	a substance used to reduce a range of micro-organisms.			
General Waste:	form the bulk of waste produced and is not more of a public health risk than domestic or household waste.			
Hand hygiene:	keeping hands clean. This can be done by using soap and water, or an alcohol-based hand rub, and is the most effective ways to reduce the spread of germs.			
Head lice:	infestation of small parasitic insects that live mainly on the scalp and neck.			
Hepatitis B:	a disease of the liver caused by the Hepatitis B virus. The virus can be found in the body fluids (such as blood) of an infected person and is usually spread when these fluids enter the body of someone who is not infected. This may happen through penetration of the skin via wounds or cuts. The disease can range from a short-term illness through to a chronic infection resulting in liver damage, liver cancer or death.			
HIV:	Human Immunodeficiency Virus.			
Hygiene:	conditions or practices conducive to maintaining health and preventing disease, especially through cleanliness.			
Hygienic:	an environment in which protective measures have been taken to limit the spread of infectious diseases.			
Impetigo:	a very contagious infection of the skin; common in children; localized redness develops into small blisters that gradually crust and erode.			
Infection:	invasion of the body with organisms that have the potential to cause disease.			
Infection Control:	strategies that minimise the risk of infection to practitioners, patients and clients.			
Micro-organism:	a bacteria, virus, fungus, mold or yeast.			
Mobile hairdresser:	a person who performs hairdressing procedures away from fixed premises.			
Ringworm:	a fungal infection that can affect any part of the body. Ringworm of the scalp and beard begins as a small pimple. It spreads outward leaving fine, scaly patches of temporary baldness. Infected hairs become brittle and break off easily.			
Sharps:	any objects capable of inflicting penetrating injury, including razor blades, scissors and clippers.			
Tinea:	a fungal infection. On the scalp it appears as a small papule that spreads peripherally leaving fine, scaly patches of temporary baldness. Infected hairs become brittle and break off easily. This mainly affects children.			