

Checklist for fit-out - Hair / Beauty / Skin Penetration (HBS) Premises

Customer Name(s): _____ **Phone:** _____ **Email:** _____

Existing HBS Business: Yes / No **Premises Address:** _____

Authorised Officer: _____ **Date:** / /

Item	Details	Standards/ Guidelines	Discussed
Review by	Meeting at Council / Drawn Plans / onsite inspection		Please circle
Who was present	Names other than above:		
Registration Form Completed	Yes / No / Received and being processed / Form given to customer		Please circle
Premise Type	Permanent or Temporary (eg shop, home based, stall, mobile)		Please circle
Fit out	To start / in progress / completed		Please circle
Operational Target Date	If known, please note		
Adequate Skills/Knowledge	Discussed / Operating experience / Previous training / Knowledge of Act and Guidelines		Please circle
Relevant Guidelines	Needed: Hairdressing / Skin Penetration / Both – do they have a copy for staff		Yes / No / NA
Risk Management	Blood / Body Fluid Injury Management Plan – written & sighted		Yes / No / NA
Temperature Control	Supply of tea/ coffee / food		Yes / No / NA
	If Yes, Temperature Control Method in place		Yes / No / NA
Washing Dishes	Where is crockery stored/ washed? Hot wash, not in an area that can contaminate. Complying		Yes / No / NA
Hand wash facility	Hand wash only basins available in areas hands likely to be contaminated		Yes / No / NA
	Staff toilets – complying hand wash facility		Yes / No / NA
	Continually stocked with single use towel and soap		Yes / No / NA
	Single mixer tap with warm running potable water		Yes / No / NA
	An agreement in place		Yes / No / NA
Sterilising (not disinfecting)	Is sterilising re-usable equipment needed		Yes / No / NA
	If Yes, Is access to an autoclave available or known		Yes / No / NA
	If an autoclave is on site, is there a copy of the Australian Standard for operating available		Yes / No / NA
Design & Cleanliness	Adequate space to facilitate cleaning and sanitising of equipment i.e. adequate space to permit work flow from 'dirty' to 'clean' tools, dishes, linen		Yes / No / NA
	Workflow to allow cleanliness		Yes / No / NA
Touch points, walls, floor & ceilings	Are they clean? (If no are the smooth impervious surfaces to allow effective cleaning).		Yes / No / NA
Floor	Smooth /impervious at work stations etc (If existing business & carpet are there adequate plastic mats)		Yes / No / NA
Fixtures	Clean (Smooth/impervious): chairs/ beds / cupboards / bench tops / equipment / hand wash		Yes / No / NA
Pedicure	Plumbed in, can they be disinfected effectively		Yes / No / NA
Spray tanning	Process/equipment in place to prevent planter wart / fungal spread where client stands		Yes / No / NA
Toilets	Clean and in good repair?		Yes / No / NA
Ventilation	Does activity warrant mechanical ventilation? Yes / No / Monitor If Yes, is it installed?		Yes / No / NA

Storage area	Personal items (bags etc) / chemicals / air dry mops / other stored in a manner to prevent contamination		Yes / No / NA
Chemicals	MSDS and correct labelling eg spray bottles. Discuss use as per manufacturer recommendations		Yes / No / NA
Water disposal	Dirty mop water – where? (not on ground, in sink or hand basin where can cross contaminate)		Yes / No / NA
Garbage Area (inside & outside)	Able to be kept clean and contain waste and lid closed.		Yes / No / NA
	Blood or body fluid contaminated waste – does double bagging occur or best practice known?		Yes / No / NA
Sharps	Are there sharps, disposable razors involved with the services provided		Yes / No / NA
	Is there a sharps container that meets the Australian Standards		Yes / No / NA
	Is disposal via an accredited method eg contract service/ council or other agency (who?)		Yes / No / NA
Pest Control Prevention	Consider - sealed floors, ceiling, walls, and screens on windows, doors, management system or contractor		Yes / No / NA
Recommended documentation / information	Resources, Council letters, data base to be kept current, council and SA Health websites		Yes / No / NA
Safe Drinking Water Act	Discussed & provided fact sheet / Included in letter		Yes / No / NA
Advice letter	Sent: Yes - Post / Email / Personal (collected or delivered) / No		Yes / No / NA
Recommend onsite Meeting	Yes Date: / / No Not yet & customer will be in touch		Yes / No / NA
Advice Disclaimer	Inform customer of the following advice disclaimer.		Yes / No / NA
Business Registration	Registration form available on Council website Public Health page and is requested before business operating. Once processed by council an acknowledgment letter will be issued for operators records. This can be displayed for customer's awareness of business being on inspection schedule.	Completed	Yes / No

As part of our service to local premises, Council provides advice about meeting requirements. While Council endeavors to provide comprehensive advice, the onus is on proprietors to familiarise themselves with their legal obligations and act accordingly. The advice given is not meant to take the place of a proprietors obtaining professional, independent advice about the design and fit-out of their premises.

In addition authorised officers regulate under the SA Public Health Act 2011 by conducting inspections which may occur during operation. If an appointment is made by an authorised officer for a routine inspection, a responsible person who can comment on behalf of the business must be available during the inspection. The time it requires to inspect can vary but allowing an hour for blocking out of appointments is a guide. An inspection report will be provided for your records.

NB: Other Council requirements may apply. Planning and Building must be met before Health applies.

Referred to: Planning Officer: _____ (eg additional signage, change of use)

Building Officer: _____ (eg building & fire safety requirements)

Further information is available at: www.mountgambier.sa.gov.au

Notes/Comments:
