Body Art Facility Inspector Training

2021 Needs Assessment



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Method s

The needs assessment survey instrument was developed using the BAMC components and from input from the Body Art Education Alliance, NEHA Body Art Committee, and our body art program staff. The target audience for the needs assessment included environmental health specialists and professionals working in the regulatory aspect of b ody art. The survey was created using a digital survey tool and disseminated via email and digital newsletters to members, and was promoted from and Tw 807c 0.007 Tr 0.27 a-0.04 Tld

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Figure 1. Respondents by Region



Experience and Training

Determining current experience is i mportant to understand the foundation for training needs. Respondents' experience with conducting body art facility inspections is mixed. Overall, 32% indicated they have moderate experience, 29% indicated they have no experience, and 26% indicated they have some experience (Figure 2). Only 12% of the respondents indicated they have great experience with conducting body art facility inspections.

Figure 2. Experience of Respondents Conducting Body Art Facility Inspection

Furthermore, less than one half the respondents (49%) feel qualified to conduct a b ody art facility inspection. While at the same time, 80% of the respondents feel that training and professional development opportunities around body art facility inspections are important in their role.

Many respondents have no body art inspection training with 38% indicating no formal training, only on the job experience, and another 22% indicating no experience at all. Webinars were the most frequently identified form of training accessed (Figure 3). In addition, most responden, In (f)8.1 ()11 (tr)0.9 5d(,)- (p)8.4 ([((d)19.i)-1 (o ih-9.3 (c(h)919.3 (c(2r)9(g)]n72)

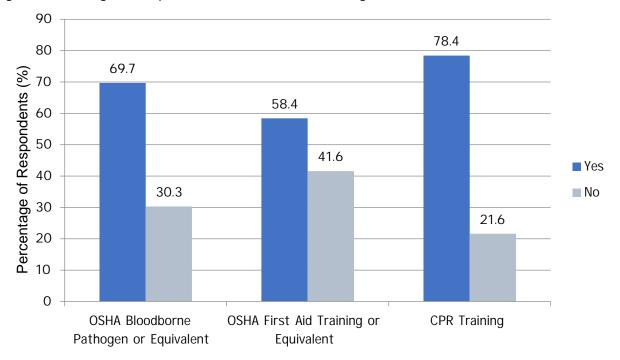


Figure 4. Training of Respondents in Bloodborne Pathogens, First Aid, and CPR

Overall Assessment Findings

The Body Art Facility Inspector Training needs assessment asked respondents to rate each component area of a body art facility inspection as to whether training was needed . Answer options included no training needed, somewhat needed, greatly needed, and not sure. To differentiate what areas might require more attention in a training program for body art facility inspections, components were groupe d as high need, moderate need, somewhat needed , and no need. The cut offs we selected are subjective and are meant to help differentiate need.

The components with a high need for training , identified as those areas with 285% of the respondents who indicated training was somewhat or greatly needed (Table 1) and include:

- x Specific Considerations for Procedures
- x Jewelry Standards
- x Sanitation and Sterilization
- x Procedure Set Up and Break Down
- x Exposure Control Plan and Infectious or Biomedical Waste Management Plan
- x Recordkeeping Requirements
- x Body Art Definitions and Term s

Many of the component areas assessed were rated as a moderate need for training. These were identified as those components with between 80–85% of respondents indica ting they somewhat or greatly needed training in the area (Table 1) and include:

x Biomedical Waste

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Body Art Facility Inspection Component	No Training Needed (%)	Somewhat Needed (%)	Greatly Needed (%)	Not Sure (%)	
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required treatment by a licensed medical practitioner, or any notifiable diseases reported by the body artist to the department and MedWatch (MedWatch is the Safety Information and Adverse Event Reporting Program of the Food and Drug Administration [FDA]). Lastly, aftersterilized properly. For example,an autoclave, ultrasonic, and sterilization room orsterilization area may not be required if the body art establishmentuses only presterilizedand disposable instruments, materials, and supplies. 8(a1..1(ia)-1w8.7(e),8

Figure 12. Training Need s for Procedure Set Up and Break D own

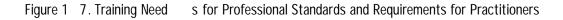
Preparation and Care of the Procedure Site

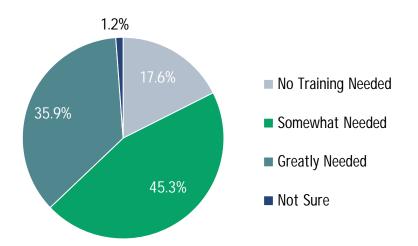
The BAMC provides suggested steps to prepare area on the client's body where they are receiving b worn prior to, during, and after the procedure an antiseptic and properly shaved if necessary person and disposed of after use . Lastly , p and care for a procedure site, meaning the ody art. For instance, g loves must be . The procedure site should be prepared with . Single -use items are to be used on only one

Biomedical Waste

Biomedical waste needs to be handled and disposed of appropriately. As explained in the BAMC, t here should be a written operating plan for infectious or biomedical waste. Proper indoor and outdoor storage must be followed and should not exceed 30 days. Biomedical waste (except sharps) must be packaged and sealed at the point of origin in impermeable, red plastic bags . S

Most respondents agreed that training on the professional standards and requirements for is need ed. More respondents training on the topic practitioners , however, indicated is somewhat needed (45%) than greatly needed (36%; Figure 17). Respondents mentioned clarification was needed around h epatitis B vaccination , specifically if it can be required and if there is a waiver.





Body Art Prohibitions

The BAMC describes c ircumstances when a b ody art procedure cannot take place . These prohibitions include:

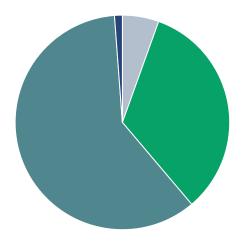
- xBody art procedures cannot be performed on any person
(minors only with parent or legal guardian consent)under the age of 18
or on those under the influenceof drugs and/or alcoholor on those under the influence
- x B ody art procedures cannot be performed on skin surfaces that exhibit evidence of sunburn, rash, pimples, boils, and infections, or which manifest any evidence of unhealthy conditions
- x Body art establishments cannot be operated without necessary licenses, and it is prohibited to obtain license by means of fraud, misrepresentation, or con cealment

The need for training on b ody art prohibitions was mixed. Almost one quarter of the respondents (24%) indicated no training was needed, 42% said it was somewhat needed , and 33% said it was greatly needed (Figure 18) . Respondents asked for specific information around proof of parent or legal guardianship, how to document parental consent for a minor, and what defines healthy skin .

- xJewelry used for initial piercing on individuals>12 years must be ASTM F2999compliantand initial piercing onindividuals112 yearscompliantcompliant112 yearsmust be ASTM F2923
- x Receipts and material certificates include required information and are retained for a required length of time

Most respondents (60%) indicated a great need for training on jewelry standards. An additional 33% indicated it was somewhat needed (Figure 20) . Some respondents expressed that more information is needed on material certificates and how to associate that certificate with the correct jewelry , as well as guidance on identifying approved jewelry. In addition, one person pointed out material certificates can be difficult for the operator to obtain and they need training on problem -solving in such instances.

Figure 20. Training Need s for Jewelry Standard s



Inspections and Penalties for Violations

The BAMC guidelines for the body art facility inspection s and assigning penalties for violations include :

- x Department personnel must inspect each b ody art facility prior to issuing a license
- x The inspector must be allowed entry to the facility when it is occupied
- x The operator in a b ody art facility must not conceal, falsify, interfere, or make false statements
- x The department must advise the operator in writing of its findings and instruct the operator to take specific steps to correct any violations

x If at any time the d

rated with high confidence was the ability to encourage a collaborative working Perturbition of the operator (()10. e) 9% confident or very confident) and to build rapp ort with the operator to gain trust and support (78% confident or very confident ; Figure 21). Professional skills with lower confidence were educat ing and providing operators with advice on correctly following law s and safety guidelines (53% confident or very confident) in19 (an p

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Needed Resources

Respondents were asked what resources or tools would be helpful to conduct a b ody art facility inspection and a variety of suggestions were provided. An individual suggested a n inspector training program (like Standard 2 of the FDA Voluntary National Retail Food Regulatory Program Standards) could be very helpful and ideally would include some sort of joint inspection training and/or field work training. Another individual suggested a similar action for doing joint inspections with other b ody art inspectors . For some jurisdictions , sample ordinances, statistics, and ex amples of why a body art establishment should be inspected to protect public health would be beneficial ,

Conclusion

The Body Art Facility Inspector Training Needs Assessment reached respondents in all regions of the nation and one territory. Most respondents were from a local health department. The overall results of the Body Art Facility Inspector Training Needs Assessment revealed a need for training across each component area of the BAMC except handwashing . Across all topic areas, t he percent age of respondents who perceived no training need for components was far less than those who indicated a need . The strongest areas of training need include :

- x Spec ific Considerations for Procedures
- x Jewelry Standards
- x Sanitation and Sterilization
- x Procedure Set Up and Break Down
- x ES013 Tc5.5 (he)1.8 (s)6 Tw 0.2ancleerelani3estrudeus (dux)1.5 (n)-9.nTw 2.815 0 Terreto

Training preferences for the length of a training were mixed and
dependent on the amount of content included in a training session.most likely will beprefer a full
(65%) as well as synchronous...Most
virtual...content............</

As a training program is developed, the following recommendations based on Body Art Facility Inspector Training Needs Assessment results should be considered :

x Keep in mind the extent of need identi fied for each training component. Some areas may need a more comprehensive review **10 d300 (30)**