

# **STOCKPORT METROPOLITAN BOROUGH COUNCIL**

## **CODE OF PRACTICE FOR ACUPUNCTURIST**

The purpose of the code is not only to provide guidance to the byelaws relating to the practice of acupuncture, but also to include preferred advice on those matters of practice, which are of importance in achieving the high standards of hygiene and safety necessary. The Acupuncturist must ensure for themselves and their assistants that they have received sufficient and adequate training in the practice of hygiene and safety in connection with their work. Adequate professional indemnity and public liability insurance is considered obligatory.

Incorrect hygienic procedures can result in damage to the health of both the acupuncturist and their patient. This is particularly relevant in the risk of contracting viral hepatitis. Special reference is made to this elsewhere in the appendices.

The best means of avoiding cross-infection is to use disposable equipment where available, in preference to other types. It also needs to be emphasised that ultrasonic equipment only cleans but does not sterilise instruments.

### **1. PREMISES**

#### **1.1 General**

Acupuncturist's surgeries must be clean and be capable of being kept clean. All internal parts of the structure of the premises should be maintained in a clean condition and kept in proper repair. Wallpaper should not be used as a wall covering unless it is of a durable and washable type. The surface of the floor should be continuous. A wash hand basin with hot and cold water supply and properly connected to the drainage system is essential and should be located in the acupuncturist's work room; water heaters of the "top-up" type are not permitted. It is preferable for the taps to be foot or elbow operated. Soap, preferably in liquid form, and approved hygienic means of drying hands must be available and readily accessible. Such hand drying facilities include disposable and machine auto-rolled towels.

## 1.2 **Table tops and Other Working Surfaces**

The table tops, shelves and other working surfaces must have a smooth impervious surface (preferably stainless steel or glass), be in good repair and kept clean with the frequent use, at least once each session, of a suitable disinfectant. Shelves, cabinets, cupboards, etc must contain only equipment, which is used in connection with the business of the acupuncturist.

## 1.3 **Chairs, Seats or Couches**

The surface of any chair, seat or couch should have a smooth impervious surface such as vinyl, etc in good repair. They should be kept clean and washed with detergent and hot water regularly. Patients should sit or lie on a disposable paper sheet rather than on the bare surface. Fabric chairs should not be used.

## 1.4 **Ventilation**

Ventilation shall be such as to provide a minimum of six air changes per hour and must be capable of keeping an odour free environment. The Environmental Health Officer of the local District Council will be able to give advice on how to comply with this provision.

## 1.5 **Artificial Lighting**

Adequate artificial lighting must be provided and maintained. A suitable standard over all for the premises would be 500 lux with a higher level of 1000 lux “free from glare at all working areas in the treatment room”.

## 2. **EQUIPMENT**

Recommended Equipment for Hygienic Practice:

- Autoclave or other approved sterilisation equipment.
- Paper tissues and towels.
- Autoclavable equipment for handling and storage of needles, e.g.
- Stainless steel kidney dishes and forceps.

- Alcohol impregnated swabs (pre-packed) / separate cotton wool swabs and alcohol (BPC).
- Disinfectants (see 5)

### 3. **PREPARATION OF ACUPUNCTURE EQUIPMENT**

- 3.1 Only sterilised solid needles are to be used for the purpose of acupuncture. The needles must be considered contaminated after each use and therefore need to be sterilised after each use.
- 3.2 As many needles as are required for one day can be estimated and sterilised in advance of a day's work, then kept in a sterile container until used.
- 3.3 'Seven Star Hammers', if used, must be either sterilised in an Autoclave or kept separate for each patient and boiled for 10 minutes between uses.
- 3.4 Equipment used to contain or handle the needles (e.g. kidney dishes, forceps, etc) must be sterile at the beginning of each session. These can be sterilised at the same time as each new batch of needles.
- 3.5 Needles after use on each client should be placed in a suitable dish, e.g. stainless steel kidney dish and then washed with water to remove contamination. The clean needles are then ready for sterilisation, which should be undertaken as detailed in appendix "A"

### 4. **DISPOSAL OF EQUIPMENT**

- 4.1 All needles to be discarded should be disinfected by placing them in a solution of hypochlorite before disposal.
- 4.2 Equipment used to hold or contain the needles should be similarly treated when it is necessary for them to be discarded.

- 4.3 Needles should then be placed in stout cardboard or metal 'sharps disposal' boxes such as are used in hospitals. The boxes should be clearly marked 'DANGER CONTAMINATED NEEDLES'.
- 4.4 All waste matter – paper towels, tissue, etc, should be disposed of in suitable receptacles lined with a leak-proof sealable plastic bag and provided with close fitting lids.
- 4.5 Used disinfectants must be carefully poured down the sink after use and flushed with running water.
- 4.6 The advice of the local Environmental Health Officer must be sought about the final disposal of the sealed bags and 'sharps disposal' boxes from the premises.

## 5. **DISINFECTANTS**

- 5.1 Disinfectants are necessary where it is not practicable to sterilise equipment and instruments. They do not sterilise, that is, kill all germs, but their proper use will reduce the number of germs to the extent that they pose little danger of infection. Two disinfectants frequently used are hypochlorite and glutaraldehyde. These disinfectants will neutralise most viruses, especially the hepatitis ones. Hypochlorite can corrode metals and therefore is useful only for wiping table tops etc. Solutions of hypochlorite need to be made up each day but weekly preparation is adequate for glutaraldehyde. Manufacturer's instructions regarding the correct concentrations should be strictly followed. Disinfectants other than those indicated here may be used, but they would not be superior or cheaper than the ones recommended. It is better to familiarise oneself with only one or two disinfectants. Not all disinfectants are equally destructive against germs. For example, even high strengths of alcohol used as disinfectant have only a weak effect on destroying the hepatitis B virus.

## 5.2 Preparation and use of Disinfectants

<u>Agent</u>	<u>Preparation</u>	<u>Uses</u>
Hypochlorite	Make up daily add 50 millilitres of Hypochlorite to 1 litre of water	Excellent for wiping and cleaning all materials except metals
Glutaraldehyde	Make up weekly according to instructions	Wiping and cleaning all materials including metal

## 6. HEALTH & PERSONAL HYGIENE

### 6.1 Health of the Acupuncturist

An acupuncturist must ensure that their own health including personal hygiene does not endanger in any way the health of patients.

Personal Hygiene - observance of a high standard of personal hygiene is essential. Hands should be frequently washed, especially before and after each treatment. All cuts and wounds must be washed and dressed with a waterproof dressing immediately. The acupuncturist should wear clean, washable or disposable clothing while carrying out their practice. Acupuncturists must refrain from smoking, eating or drinking, whilst engaged on a treatment. Nails must be kept short and clean. A first aid kit, the contents of which should comply with the requirements of the Health and Safety (First Aid) Regulations 1981 must be kept on the premises and should also be available for the use of customers.

Personal Health – An acupuncturist who is suffering from an infectious disease can transmit germs to their client in various ways, including, for example, through breaks and punctures in the skin during treatment. Consult your family practitioner early about any personal illness that may be of infectious nature. Ensure that the practitioner knows that you are engaged in the practice of acupuncture. Medical advice should always be sought if a cut is sustained with the apparatus that is being used on a patient who is suspected of suffering from infective hepatitis.

## 6.2 **Health of the Patient**

Ensure that the part of the body to be treated is clean, free of any cuts or wounds or disease. It is essential to enquire if the patient has a history of infective hepatitis and is not currently suffering from it. The areas to be pierced should be cleaned at the start of treatment with an alcohol impregnated swab. Other cleaning agents, if use, should also have adequate disinfectant properties. Medical attention may be necessary if a treated part becomes inflamed or infected. Immediately before use, any paper or other disposable material used as a covering on a chair, seat or couch, and any towel, cloth or other article which is applied to the patient's skin shall be clean and shall not previously have been used in connection with any other patient.

## 7. **REGISTER OF PATIENTS**

Names and addresses of all patients and dates of attendance should be recorded in a suitable register (see Appendix "C").

## 8. **HEALTH & SAFETY AT WORK**

8.1 Acupuncturists must comply with the provisions of the Health & Safety at Work etc Act 1974 which places a duty on them to conduct their undertaking in such a way as to ensure, so far as is reasonably practicable, that persons who may be affected thereby are not exposed to risks to their health or safety. This duty extends to both patients and employees. It is by following recognised standards that this duty can be fulfilled. In connection with safety aspects, particular attention is drawn to the following.

8.2 All floors, passages and stairs shall be of sound construction and properly maintained and should be kept free from obstruction and from any substance likely to cause persons to slip. A substantial handrail must be provided to every staircase. A two-way lighting system must be provided to every staircase.

- 8.3 Every dangerous part of machinery must be effectively guarded. Machinery should be subjected to regular inspection and preventative maintenance where necessary.
- 8.4 All electrical installations should be in accordance with Institution of Electrical Engineers Regulations for the Electrical Equipment of Buildings. Both the installation and portable appliances should be subjected to regular examination. Care should be taken to keep cables as short as possible and routed in such a way as to prevent a risk of tripping.
- 8.5 Accidents must be dealt with in accordance with the provisions of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995. This will involve the reporting of all major accidents to employees and members of the public to the office of the enforcing authority without delay, and by telephone if possible, with written confirmation being made within seven days. Other injuries to employees, which result in more than three days' absence from work, excluding the day of the accident, are also notifiable.
- 8.6 Where five or more persons are employed, it is the duty of every employer to prepare and as often as may be appropriate, revise a written statement of their general policy with respect to the health and safety of their employees and the organisation, and arrangements for the time being in force, for carrying out that policy, and to bring the statement and any revision of it to the notice of all of their employees.

9) **INFORMATION & ADVICE**

- 9.1 Information on acupuncturists is available from the three organisations listed overleaf, who were concerned in the production of this Code of Practice.

British Acupuncture Association and Register  
34 Alderney Street  
London, SW1V 4EU

Register of Oriental Medicine  
16 Cottenham Park Road  
Wimbledon  
London SW20

Traditional Acupuncture Society  
115 Loxley Road  
Stratford-on-Avon  
Warwickshire, CV37 7DS

- 9.2 The Environmental Health Officer is the authorised officer for the purposes of this code of practice and the relevant byelaws. Their address and telephone number is:

Commercial Team (Health & Safety)  
Metropolitan Borough of Stockport  
Communities, Regeneration & Environment Directorate  
Stopford House  
Piccadilly  
Stockport, SK1 3XE

Tel. No. 0161 474 4208

Fax. No. 0161 474 4369

E-mail: [commercial.team@stockport.gov.uk](mailto:commercial.team@stockport.gov.uk)

## APPENDIX "A"

It is strongly suggested that sterilisation is carried out by one of these two methods:

1. Use of Autoclave (moist heat)  
(Recommended method)

Temp. Degrees C	Minimum holding time in minutes, once the required temperature has been achieved
121	15
126	10
134	3

2. Oven dry heat

Temp. Degrees C	Minimum holding time in minutes, once the required temperature has been achieved
160	45
170	18
180	8
190	2

## **APPENDIX “B”**

### **ACUTE VIRAL INFECTIVE HEPATITIS**

Viral hepatitis is believed to consist of several distinct disease entities, a common feature of which is infection of the liver, which may lead to clinical “yellow jaundice”. The infection is caused by different viruses of which hepatitis A and hepatitis B viruses are the commonest and most well known.

#### **HEPATITIS A**

Hepatitis A (formerly “infectious hepatitis”) is normally transmitted by the faecal-oral route in the same way as most of the enteric infections that cause “food poisoning”. It has an incubation period of about four weeks. It is a common infection in conditions of poor sanitation and overcrowding. Infected shell fish can be a cause of the infection and there is an increased incidence among travellers to countries with inadequate sanitation.

#### **HEPATITIS B**

Hepatitis B was formerly known as “serum hepatitis”. Although various body fluids such as saliva, urine etc. have been implicated in the spread of infection, infectivity appears to be essentially related to blood. Hepatitis B virus is spread through the blood system either by penetration of the skin with infected needles, razors, etc. – or contact with broken skin from contaminated apparatus or surfaces. It usually has a longer incubation period of from six weeks to six months. Hepatitis B must be recognised as an occupational hazard to acupuncturists. It is often acquired by exposure to the blood of apparently healthy people for example, symptomless carriers of the virus or from patients incubating the infection but not yet ill. It is thus essential that the acupuncturist is aware of the risk of contracting the infection and employs a high standard of care in their practice at all times.

High standards of hygiene and safety consciousness will greatly reduce the incidence of Hepatitis B. The risk to patients of the infection from unwise procedures must also not be underestimated.

## **APPENDIX “C”**

### **REGISTER OF PATIENTS**

In an investigation of an outbreak of viral hepatitis, nothing is more important than that an accurate record has been kept of names and addresses of all patients and dates of treatments. It will be appreciated that it is difficult for a practitioner to remember these details without recording them at the time of treatment. Acupuncturists will know that Hepatitis B has a long and varied incubation period and lack of recorded information about patients' treatment at a relevant time will prevent the proper investigation of any cross-infection related to Hepatitis B.

The source of an outbreak of a disease needs to be quickly identified from the available records. The acupuncturist can, in most cases, continue to carry on their normal business once he has made such records available to the appropriate authority. The alternative may well be the acupuncturist is involved in prolonged and protracted investigations.

The difficulty of obtaining accurate information is well recognised but the process of registration of the practice and public education should assist in overcoming the reluctance on the part of the patient to give proper and adequate information.

Environmental Health Officers can give advice on the setting up of such records, and on routine visits to the premises they will wish to confirm that records are being maintained. Access to an individual's personal records shall only be available to an authorised officer of the local authority and shall be subject to the usual safeguards of professional confidentiality.

### **ACKNOWLEDGEMENT**

NORMAN D NOAH  
PUBLIC HEALTH LABORATORY SERVICE

Communicable Disease Surveillance Centre