

BUSINESS DETAILS

IN AN EMERGENCY CALL:

Salon/Spa Manager:
Business Contact Number:
Clients:

SERVICE DETAILS

Purpose:
Date:

Benefit: Develops expertise in handling specialist equipment. | Encourages confidence through rigorous safety measures. | Ensures compliance with health and safety legislation. | Promotes safe disposal practices and workplace hygiene. | Protects reputation through professionalism and client care. | Supports awareness of infection control standards.

HAZARDS

HAZARD	RISK	RISK BENEFIT	MEASURE	RISK TO	RISK LEVEL
Aseptic technique breach during invasive work	Pathogen transfer, prolonged healing, infection	Advanced techniques deliver refined, predictable outcomes.	Establish a clean field with skin prep, sterile drape, new gloves and single-use consumables. Avoid touching non-sterile items mid-procedure; change gloves if contaminated; document field set-up and any deviations with corrective notes. (ALL)	Staff, clients	Before Measure: High After Measure: Med
Blood spill clean-up failures	Environmental contamination, infection spread, client exposure	Appointments resume quickly after unexpected incidents.	Keep spill kits with chlorine granules, absorbents and PPE at each zone. Cordon area, apply to full contact time, lift and re-clean, bag as clinical waste, supervisor sign-off, and restock kits immediately after any use; log the event. (ALL)	Staff, clients	Before Measure: High After Measure: Med

HAZARD	RISK	RISK BENEFIT	MEASURE	RISK TO	RISK LEVEL
Blood splash to eyes or mouth	Eye infection, ingestion of pathogens	Close facial detailing proceeds comfortably and with confidence.	Wear eye protection for dermaplaning, extractions and brow work; mask both parties for close facial tasks. Keep eyewash within ten seconds; if splashed, irrigate fifteen minutes, document fully, and review technique and positioning at debrief. (ALL)	Staff	Before Measure: High After Measure: Med
Client bleeding risk not assessed	Excess bleeding, bruising, delayed healing	More clients can pursue desired looks through tailored plans.	Screen for anticoagulants, clotting disorders, alcohol use and uncontrolled diabetes; adapt or defer. Use firm pressure and hemostatic pads, limit treatment area, give tailored aftercare, and record decisions and advice in the client file. (ALL)	Clients	Before Measure: High After Measure: Med
Client movement or startle with exposed sharps	Accidental cuts, needlestick injuries, exposure	Detailed work is achievable even during long, delicate sessions.	Pre-brief still points and signals, give countdowns before critical passes, and pause for coughs or sneezes. Anchor hands, avoid chasing moving targets, and note individual triggers to adapt sequencing and breaks next visit. (ALL)	Clients, staff	Before Measure: High After Measure: Med
Dull blades increasing force and slips	Cuts, skin tears, scarring	Silky finishes and crisp lines that set work apart.	Open a fresh blade per client; test edge on a safe medium; retire at the first drag; maintain correct angles and light pressure; stock ample blades so no one feels pressured to reuse or overstretch a tool to finish a service. (ALL)	Clients	Before Measure: High After Measure: Med
Needlestick injury during microneedling or injectables	Needlestick injury, infection, exposure to bloodborne pathogens	Collagen-stimulating and corrective treatments stay available on site.	Open single-use needles or cartridges chairside; use a neutral zone and never recap. Place a sharps bin at point-of-use, drop immediately after use, keep hands behind tips, and log device lots for traceability and rapid look-back. (ALL)	Staff, clients	Before Measure: High After Measure: Med

HAZARD	RISK	RISK BENEFIT	MEASURE	RISK TO	RISK LEVEL
Percutaneous injury with razors or scalpels	Cuts, bleeding, infection, scarring	Ultra-precise edging and dermaplaning glow remain achievable in-house.	Use sterile single-use blades, stabilise skin, cut away from fingers, and stop at any breach. Don gloves, dress the wound, quarantine tools for reprocessing, record the incident, and review root cause before resuming services. (ALL)	Staff, clients	Before Measure: High After Measure: Med
Reuse or poor reprocessing of reusable instruments	Cross-contamination, infection, client harm	High-precision tools remain in circulation for premium results.	Prefer single-use. If reusable, clean, ultrasonic, and sterilise; pouch with indicators, store sealed, and open at the chair. Track cycle IDs and run weekly audits with spot checks on packaging integrity and storage conditions. (ALL)	Staff, clients	Before Measure: High After Measure: Med
Staff competency and scope creep	Improper technique, injury, poor results	Access to advanced services delivered by trusted practitioners.	Maintain a competency matrix for dermaplaning, microblading, microneedling and injectables; require supervised sign-off and CPD refresh; restrict unsupervised work outside scope; review incidents for targeted training. (ALL)	Staff	Before Measure: High After Measure: Med
Tool failure or breakage during use	Injury, blood exposure, treatment interruption	Complex sets complete reliably in a single sitting.	Inspect needles, cartridges and handles before opening; discard if bent, loose or expired. Keep sterile spares chairside; if failure occurs, stop, manage exposure, document fully, switch to verified stock, and review supplier lots. (ALL)	Staff, clients	Before Measure: High After Measure: Med
Use of non-sterile pigments or diluents	Infection, allergic reactions, poor healing	Natural-looking microbladed and PMU results that last as intended.	Purchase sterile, lot-coded pigments and sterile diluent; decant to single-use cups, never top up, and discard leftovers. Record lot and site per client and change micro-brushes between dips to avoid back-contamination. (ALL)	Clients	Before Measure: High After Measure: Med

HAZARD	RISK	RISK BENEFIT	MEASURE	RISK TO	RISK LEVEL
Documentation and traceability gaps	Loss of data, delayed response to incidents, quality issues	Results refine over time and client trust grows through transparency.	Record client ID, site, device, needle size, pigment lot, sterilisation cycle ID, operator and date; capture photos where permitted; retain records per policy to enable rapid look-back and quality improvement after reviews. (ALL)	Staff	Before Measure: Med After Measure: Low
Hepatitis B and immunisation gaps in staff	Exposure to bloodborne pathogens, infection risk	The team confidently delivers high-value sharps services daily.	Offer Hep B vaccination with titre follow-up; document status confidentially, advise non-responders, and reinforce standard precautions regardless. Include checks at onboarding and annual reviews, with access to occupational advice. (ALL)	Staff	Before Measure: Med After Measure: Low
Improper on-site transport of sharps	Spills, accidental contact, injury	Multi-room workflows continue smoothly during peak periods.	Never hand-pass sharps; return to a tray, then to a mounted bin. Move sealed bins only in rigid caddies, keep routes clear of clients, and document any spill or near miss with corrective actions and brief the team before the next shift. (ALL)	Staff	Before Measure: Med After Measure: Low
Overfilled or distant sharps containers	Sharps injuries, improper disposal, increased exposure risk	Swift, safe turnover across busy chairs without stoppages.	Mount UN-approved bins within arm's reach at every station; label date and operator; replace at two-thirds full; lock lids for transport; never floor-stand in client reach; include checks on opening and closing routines with a visible log. (ALL)	Staff, clients	Before Measure: Med After Measure: Low
Sharps bin tampering by clients or children	Needlestick injuries, contamination, exposure to sharps	Family-friendly access to services without restricting menus.	Mount bins high, within staff control, and lock lids between sessions. Keep treatment doors closed, explain not to touch, and relocate bins if curiosity is noted. Record tampering and add reminders to the opening checklist. (ALL)	Clients, children	Before Measure: Med After Measure: Low

HAZARD	RISK	RISK BENEFIT	MEASURE	RISK TO	RISK LEVEL
Storage and expiry of sharps and sterile packs	Compromised sterility, infection risk	The full range of precise tools remains ready whenever needed.	Store packs dry, sealed and dated; rotate first-expiry-first-out; check integrity and expiry before opening; discard compromised stock; never pre-open; record lot and pack ID immediately after use for reliable traceability. (ALL)	Staff	Before Measure: Med After Measure: Low
Unclear post-exposure incident pathway	Delayed response, further transmission risk, stress	Close-contact services continue with assurance around rare events.	Post a simple flow: stop, bleed, wash, cover, report, risk assess, seek medical advice, source consent where lawful, and follow post-exposure guidance. Stock incident forms and bite sticks; debrief within twenty-four hours with actions logged. (ALL)	Staff	Before Measure: Med After Measure: Low
Waste segregation and clinical uplift gaps	Compliance breaches, contamination, regulatory penalties	Invasive services stay available without compliance interruptions.	Segregate sharps, contaminated dressings and general waste; store clinical bags in locked bins; retain collection manifests and reconcile volumes; audit monthly and act on variances within twenty-four hours with retraining if needed. (ALL)	Staff	Before Measure: Med After Measure: Low
Unpredicted risks	Illness, injury, death		Ongoing dynamic risk assessment carried out by all staff. Any observed potential hazards should be reported to the manager immediately and corrective action taken if required. (ALL)	All	N/A

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Extra notes & service evaluation:

NOTES

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Completed by

Reviewed/Approved by

Risk Assessment Date

Review Required Date