

# Code of Practice 10: Chiropody

## Purpose

The purpose of this code of practice (COP) is to support the policy decisions and conditions of licence adopted by the council in respect of special treatments establishments.

## Scope

This COP details specific requirements for chiropody activities in addition to those laid down in the regulations applicable to all special treatment licensed premises. This code of practice does not relate to chiropodist/podiatrist as registered under the HPC register, as they are exempt. Nor does it relate to chiropodists who are members of any of the exempted professional bodies listed at the end of this code of practice.

## Definitions

### Chiropody/podiatry

- This is the practical care of the feet using a variety of materials and techniques, such as caustics, liquid nitrogen, cryotherapy and electrotherapy. State registered chiropodists may apply local anaesthetics for minor surgery. Chiropody covers the routine care of corns, calluses, nails and provides treatment for verrucae.

### Biomechanics

- This is the biomechanics of the foot and the provision of functional foot orthoses for postural and gait imbalances. This involves the detailed examination of the lower limbs and the making of plaster

casts from which foot orthotics (insoles) are prescribed.

- Orthotics can be useful for alleviating foot, knee, back and hip pain, callosities and shin splints. It can also prevent bunions. It is effective for the treatment of lower limb sports injuries.

### Cleaning

- This is a physical process which removes soil eg dust, dirt and organic matter, along with a large proportion of germs. Cleaning with hot water and detergent breaks up grease and dirt on floors and surfaces. Cleaning is also essential prior to disinfection and sterilisation of instruments and equipment.

### Disinfectant

- For the purposes of these treatments, a high-level disinfectant relates to disinfectants capable of reducing the number of viable bacteria and blood borne viruses including Hepatitis B and C and HIV but which may not necessarily inactivate some viruses and bacterial spores.
- Where the disinfectant requires dilution, this must be carried out in accordance with the manufacturer's instructions using clean potable water. Once diluted the disinfectant must be used in accordance with the manufacturer's instructions. Immersion must be in accordance with the manufacturer's instructions.

### Sterilisation

- Refers to a treatment cycle that renders equipment free from viable micro-organisms i.e. capable of killing bacteria,



fungi, viruses and bacterial spores. For the purpose of this code of practice, sterilisation refers to the use of a bench top steam steriliser.

### **Ultrasonication**

- This is an effective cleaning method with minimal handling of contaminated equipment. This cleaning attacks every surface, including apertures and recesses. Cleaning agents are added to the bath. Some cleaning agents are also disinfectants that will reduce the bacterial load.

### **Client consultation**

A full client consultation must be carried out at the time of a first visit. This includes the following:

- medical history
  - allergic response such as anaesthetic agents, adhesive plaster, metals nuts, drugs or dressings
  - arthritis
  - haemorrhaging/haemophilia
  - heart disease
  - hepatitis
  - high blood pressure
  - diabetes
  - impetigo
  - kidney disease
  - liver disease
  - seizures, such as epilepsy
  - any illness requiring medication to control blood viscosity
  - conditions involving compromise of the immune system
  - circulatory problems
  - any other medical or surgical condition
  - contra indications noted
- date of treatment
- date of birth of client
- area to be treated
- treatment plan

This record should be signed by the client as a declaration of agreement to treatment having understood all the associated risks. A record of subsequent treatments must be kept.

Consultation records must be available for inspection by an authorised officer and copies of aftercare advice must be available for inspection.

## **Standard infection control procedures**

### **Staff health**

- All staff must be vaccinated against Hepatitis B.

### **Blood spillage**

Where any blood spillage occurs, it shall be cleaned up as soon as possible using the procedure stated below:

- put on disposable gloves and apron
- place disposable paper towels on blood spillage
- pour bleach on top of paper towels and leave for two minutes
- use paper towels to mop up spillage and then place them into yellow clinical waste bags
- discard gloves into yellow plastic bag
- wash and dry hands thoroughly then decontaminate with alcohol hand rub
- any contaminated clothes should be handled as little as possible and then only with gloves on
- they should then be pre-washed, then washed on a hot cycle of 64 Celsius for 15 minutes, or 70 Celsius for a minimum of three minutes, or discarded as clinical waste

This procedure must be documented and made available for all staff in the case of such an event.

### **Sharps injury**

The licensee shall provide a written needle stick injury procedure. The procedure shall include the following:

- what action to take in the event of such an injury
- encourage bleeding by squeezing gently
- do not suck wounds
- wash well with soap and warm running water
- cover with a dry dressing
- seek medical advice as soon as possible at the local Accident and Emergency Department

- recording of any puncture wound or contamination of broken skin, mouth or eyes and report the incident to the employer where necessary
- if an infection occurs as a result of the incident, it should be reported to the local authority by telephone

### **Protective clothing**

- All practitioners should wear clean, freshly laundered, special purpose clothing, such as a white coat.
- Hot wash with detergent is sufficient for cleaning work clothes.
- Practitioners should routinely wear disposable single use vinyl or latex gloves while carrying treatments.
- Gloves should be changed between clients or when otherwise contaminated during the procedure.
- Gloves should be replaced with new gloves if there is evidence of tearing or puncture.

### **Minor surgery**

- Before undertaking any form of minor surgery, the practitioner must be competent and have received appropriate and suitable training to undertake the procedure.
- The skin this must be disinfected before any procedure is carried out with alcohol.
- A no-touch sterile technique should be used, for example using sterile forceps or sterile disposable gloves.
- Place used needles or other contaminated waste directly in sharps container/yellow bag.

### **First aid**

At all times that the premises are used for chiropody, there shall be at least one person at the premises that holds an up to date certificate in emergency first aid treatment.

### **Qualifications**

Any person carrying out chiropody/podiatry must be suitably qualified in chiropody/podiatry. This would include:

- a degree in chiropody/podiatry giving state registration status and therefore exemption

- a qualification that facilitates membership to one of the professional bodies listed below, this would also give exemption status
- a foreign qualification verified by a body such as UK Naric to compare to UK equivalent qualification

They must also be able to demonstrate the following when questioned by an authorised officer:

- health and safety
- personal hygiene
- infection control
- client consultation
- aftercare advice
- contra-indications

All chiropodists must be registered with the Health Professionals Council (HPC) due to recent changes in legislation. This legislation has made common professional titles such as chiropodist protected by law and anyone who uses this title must register with the (HPC). The usual route to registration is via an approved course. This legislation also contains provision for unregistered professionals who have not taken an approved course to apply for admission to the register provided they meet certain criteria. That route, which was open for two years only, ended July 2005 and was called 'Grandparenting'. Currently, the only route is via an approved course.

### **Cleaning and sterilising**

- Where it is available, single use disposable equipment shall be used eg needles, razors.
- All needles should be single use disposable.
- Under no circumstances should single use equipment be sterilised and reused on another client.
- All surfaces that come into contact with staff equipment or clients must be cleaned at least daily with a suitable high level disinfectant.
- This will include areas such as door and cupboard handles and any other contact points.

- Any surfaces used during treatments must be cleaned with a suitable high level disinfectant prior to each use.
- Surfaces used during the treatment eg couch/chair must be wiped with a suitable disinfectant after each client and when preparing for the next.
- Other instruments that have accidentally penetrated the skin or are contaminated with blood must be properly cleaned and sterilised before further use.
- This should be carried out using the method stated below (decontamination and cleaning of utensils).

### Decontamination and cleaning of used utensils

- All disposable parts must first be removed and disposed of safely.
- Where heavy soiling has occurred, the equipment shall be rinsed under running water wearing the appropriate protective equipment (heavy duty gloves, protective eye wear and disposable plastic aprons).
- The equipment must then be fully submerged in a correctly functioning ultrasonic cleaning bath.
- The cleaning solution used shall be made and used in accordance with the manufacturer's guidance.
- The time of immersion shall be in accordance with the manufacturer's guidance.
- At each change of solution the ultrasonic cleaner should be cleaned thoroughly inside and out with a suitable neutral detergent and soft brush.
- The equipment shall then be rinsed in clean water before being placed in the steriliser.

### Sterilisation

All instruments used in the procedure to pierce a person's skin e.g. clamps forceps or objects in contact with broken skin, should be sterilised in an autoclave. All autoclaves used at the premises shall be chosen and used in accordance with the standards laid down in the current publication of the following:

- MDA BD2002 (06) - bench-top steam sterilizers, guidance on purchase, operation and maintenance
- MDA DB 9804 - the validation and periodic testing of bench-top vacuum steam sterilisers

### Aftercare

Clients should be given verbal and written after care advice appropriate to the treatment they have had. This should also include advice of possible complications. Invasive treatment will require keeping infection away from the site of treatment. Dressing must be kept clean and replaced as necessary.

### Age

Anyone under the age of 18 must be accompanied by a parent or guardian. The parent/guardian must sign a consent form at the time of the treatment.

### Record keeping/informed consent

Records kept must include steps taken to verify the age of the client, e.g. photocopy of proof of age where appropriate. Before any procedure takes place, the practitioner or other competent person shall fully explain the potential side effects and problems that can occur to the client. This informed consent must be recorded and signed by the client, for these purposes, a printed pro-forma should be used.

### Use of anaesthetics

Only operators who have attended the appropriate course on use of topical anaesthetics will be permitted to use them.

### Complaints procedure

The licensee shall provide a written procedure to deal with complaints from customers. All complaints shall be recorded along with details of the following:

- What action was taken to resolve the complaint
- Any changes made in response to the complaint

A copy of the complaints procedure shall be kept at the premise at all times. A copy of all complaints and the above details shall be kept at the premises for a period of at least 2 years.

## Review

This code of practice will be reviewed regularly and updated in light of current industry guidance and legal opinion. Any changes will be notified to licensees and will be attached as conditions to your licence with effect from the date of the next renewal of your licence.

Up to date copies are available from  [www.hillingdon.gov.uk](http://www.hillingdon.gov.uk) or by phoning our office on  01895 250191.

## Further information

### The British Chiropody and Podiatry Association

New Hall, 149 Bath Road, Maidenhead,  
Berks, SL6 4LA

 01628 621100

 01628 674483

### The Institute of Chiropodists

27 Right Street, Southport,  
Merseyside, PR9 0TL

 01704 546141

### The Society of Chiropodists and Podiatrists

53 Welbeck Street, London W1M 7HE

 0207 486 3381

 0217 935 6359

### The Health Professional Council

Park House, 184 Kennington Park Road,  
London SE11 4BU

The following Hillingdon Council Guidance Notes should be consulted in conjunction with this code of practice:

- Hand washing
- Decontamination
- Use of Anaesthetics
- Bench Top Steam Sterilisers