

# Body Art Facility Inspection Procedure

<b>Original Effective Date:</b> August 4, 2017	<b>Review / Revision Date:</b>	<b>Environmental Procedure:</b> 2017.08.038
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**Maintenance Steward:** Environmental Health Supervisor in charge of the Generalist Programs      History:  New    Revised    Archived

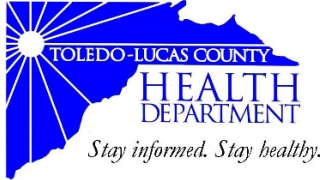
**Organizational Scope:**  
 Full Agency    Administration    Community Services    Environmental Health    Health Services

**Frequency of Review:**  
 Annually    Biennially    5 Years    As Needed    Other:

**Location:**  
*G-Drive:* G: → Users → Common → Policies & Procedures  
*Website:* [www.lucascountyhealth.com/employee-login/](http://www.lucascountyhealth.com/employee-login/)  
*Hardcopy:* Environmental Health Supervisor's Office  
*Archived Version(s):* Procedure Manual Generalist Office

**Requisite Signatures**

<input checked="" type="checkbox"/> _____ Health Commissioner	08-04-17 Date
<input checked="" type="checkbox"/> _____ Director of Environmental Health & Community Services	8/3/2017 Date



## Body Art Facility Inspection Procedure

### I. Scope

This procedure applies to all generalist sanitarians in the Environmental Health Division of the Toledo-Lucas County Health Department (TLCHD).

### II. Purpose

The purpose of this procedure is to provide generalist sanitarians with an understanding of the expectations and processes that are required to conduct thorough inspections of licensed body art facilities.

### III. Background

Body art facilities are regulated by the Ohio Department of Health (ODH) and administered by the Toledo-Lucas County Health Department under Chapter 3730.01 of the Ohio Revised Code and Chapter 3701-9 of the Ohio Administrative Code (OAC).

### IV. Provisions/Procedures

#### A. Plan Approval

1. Upon receipt of the Body Art Establishment Planning Application and payment the application shall be logged onto the Body Art Plan Review Log located on the G: Drive in the order that the applications are received.
  - a. At time of plan submission and payment, the facility shall be provided the *Application to Operate a Body Art Establishment* to complete and attached to the submitted plans.
2. The Body Art Establishment Planning Application shall be reviewed by a sanitarian.
  - a. Once plans have been received they shall be acted upon within thirty (30) days by a sanitarian.
  - b. TLCHD may request additional information or return incomplete plans to the applicant.
  - c. Plans are valid for one (1) year from date of receipt and are nontransferable.
  - d. Plan approval/disapproval letters shall be sent following plan review.

3. Once plans have been reviewed and deemed complete a pre-license inspection shall be conducted.

#### **B. Pre-License Inspection**

1. Upon approval of the Body Art Establishment Planning Application a TLCHD sanitarian shall perform a standard inspection as outlined below.
  - a. If the body art facility is not approved by TLCHD, a re-inspection shall be performed until final approval is obtained.

#### **C. Standard Inspection**

1. Standard body art inspections shall be conducted a minimum of once per licensing year.
2. Conduct body art inspection per regulations outlined in Ohio Revised Code (ORC) Chapter 3730.01 and Ohio Administrative Code (OAC) Chapter 3701-9.
3. Record all violations and/or observations on a paper inspection form.
4. Review all violations and/or observations with operator/representative and obtain signature.
5. Provide copy of inspection report to operator/representative.
6. Place copy of inspection report in appropriate TLCHD body art file.
7. Update appropriate Excel inspection tracking sheet on the G: Drive.

#### **D. Re-inspection**

1. A re-inspection shall be conducted if an imminent threat to public or environmental health is observed during the standard inspection or when deemed necessary by the TLCHD sanitarian in order to ensure compliance.
2. Record all violations and/or observations on paper inspection form.
3. Review all violations and/or observations with operator/representative and obtain signature.
4. Provide copy of inspection report to operator/representative.
5. Place copy of inspection report in appropriate TLCHD body art file.

6. Update appropriate Excel inspection tracking sheet on the G: Drive.

#### **E. Complaint Inspection**

1. Conduct a complaint inspection once an official HealthSpace complaint is received.
2. A complaint inspection shall focus on the highlighted issue(s) on the official HealthSpace complaint.
  - a. A complaint inspection may be considered a standard inspection if all additional requirements for a standard inspection are completed.
3. Record all violations and/or observations on a paper inspection form.
4. Review all violations and/or observations with operator/representative and obtain signature.
5. Provide copy of inspection report to operator/representative.
6. Place copy of inspection report in appropriate TLCHD body art file.
7. Update appropriate Excel inspection tracking sheet on the G: Drive.
8. Update official HealthSpace complaint and place copy of complaint in appropriate file.

#### **F. Consultation**

1. A consultation may be requested by the sanitarian or by the operator/representative.
2. Consultations are to be used to discuss questions and/or concerns related to the body art facility.
3. During a consultation a standard inspection does not need to be completed.
4. A record of the consultation shall be made on an inspection form and a copy placed in the appropriate body art file.

#### **G. Emergency Procedure**

1. In the event that an immediate threat or hazard to human health is observed by the sanitarian, the Environmental Health Supervisor or Environmental Health Director shall be contacted as soon as possible.

## V. Maintenance

### A. Review

1. The *Body Art Facility* standard operating procedure is to be reviewed every five years or when the Ohio Department of Health (ODH) updates Chapter 3730.01 of the Ohio Revised Code (ORC) or Chapter 3701-9 of the Ohio Administrative Code (OAC) to ensure compliance with both agency and accreditation standards.

### B. Revision

1. All changes made to this standard operating procedure are to be noted on the **Record of Change**. Substantial changes will require renewed signatures from all applicable parties. This includes changes to the intent, scope, procedures, or policy statement.
2. Changes in style, format, grammar or minor error correction will not require renewed signatures but must be indicated on the Record of Change.

## VI. Glossary

- A. **Licensing Year:** January 1 – December 31

**Record of Change**  
(Required for all procedures)

Date of Change	Changes Made By	Changes Made/Notes	Approved By