

2002-2003 INFORMED COSMETOLOGY UPDATE (FBOC* Course # 0007563)

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*FBOC=Florida Board of Cosmetology

INSTRUCTIONS

Please follow the instructions listed below to complete this program:

1. Read the sections of the program for which you wish to receive credit.
2. Remove the Self-Assessment Answer Sheet located on page 67 and Business Reply Envelope included in the booklet.
3. Print your name, mailing address, license number and telephone number in the space provided on the Self-Assessment answer sheet. Your signature and cosmetology license number are required to receive your certificate of completion. **The Florida Board of Cosmetology requires the license number of each course participant. Failure to provide this information may result in fines and penalties, including non-renewal of your license.**
4. Answer the questions in the Self-Assessment and record your answers on the answer sheet. Please make dark marks. There is a required passing score of 75 percent or more to earn your certificate.
5. Place your completed answer sheet, course evaluation, and check/money order for \$25.00 (pricing may vary using coupons through September 30, 2002), payable to **INFORMED**, in the Business Reply Envelope. Seal envelope and place in mail.
6. Upon receipt of your answer sheet and payment, INFORMED will process your Self-Assessment and course evaluation and mail your certificate of completion and a corrected answer sheet. Your certificate is proof of completion of the approved continuing education course(s) required for renewal of your cosmetology license during an audit. **Always Keep Original Certificate.**
7. A copy of your certificate will be maintained on file at INFORMED's offices for five years. If you should misplace your original certificate, call to request a duplicate.

INFORMED will notify the FBOC of the course(s) you have completed.

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Once we have acknowledged that you have received a passing score, you may use your credit card to pay for this activity or mail in your completed self-assessment answer sheet along with a check or money order in the enclosed envelope.

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OBJECTIVES

Completion of the Sterilization and Sanitation portion (3 credit hours) of this program will better enable participants to:

1. Describe the ways in which bacteria grow and spread on unsanitized tools and implements.
2. Recognize the difference between sterilization, disinfection and sanitation.
3. Discuss the effectiveness of different types of disinfectants used in the salon.
4. Recognize the importance of the Material Safety Data Sheet with regard to disinfectants used in the salon.

Completion of the Board of Cosmetology laws and rules portion (2 credit hours) of this program will better enable participants to:

1. Define “cosmetology” as set forth in the Florida Cosmetology Act.
2. List individuals who are exempt from the Florida Cosmetology Act.
3. List the requirements for licensure in the State of Florida.
4. Discuss the continuing education requirements for cosmetologists in the State of Florida.
5. Discuss safety and sanitation requirements for salons.
6. Discuss the requirements for operating a mobile salon in the State of Florida.
7. List the Board requirements for individuals who limit their practice to hair wrapping and hair braiding.
8. Identify the three license statuses and discuss how to make an inactive license active.
9. Discuss disciplinary guidelines for breaking Board rules.

Completion of the HIV/AIDS portion (2 credit hours) of this program will better enable participants to:

1. Describe the difference between HIV infection and AIDS.
2. Describe the ways in which HIV can infect an individual.
3. Discuss how cosmetologists can protect themselves from infection with HIV.
4. Explain how individuals with HIV infection are medically treated.
5. Use effective infection control procedures in the salon.
6. Discuss how individuals can be tested for HIV infection.
7. Provide a compassionate response to individuals with HIV/AIDS.
8. Summarize Florida law dealing with HIV and AIDS.

Completion of the Chemical Make-Up of Hair, Skin and Nails portion (2 credit hours) of this program will better enable participants to:

1. Recognize the significance of pH factors on the hair, skin and nails.
2. Recognize the dangers of over-treatment with chemical agents.
3. Recognize conditions under which chemical treatment should be avoided.
4. Describe the effects of chemical products on the hair, skin, and nails.
5. State the safety precautions for use of products on the hair skin and nails.
6. Discuss the specific areas certain products are designed to treat.
7. Recognize the ingredients of specific chemical products.

Completion of the Environmental Issues portion (1 credit hour) of this program will better enable participants to:

1. Determine the Agency that requires Material Safety Data Sheets (MSDSs) in the salon.
2. Describe the methods by which contaminants enter the body.
3. List measures that should be taken in the event of a chemical accident.
4. Describe procedures for disposing of hazardous materials.
5. Discuss Rule 61G5-20.002 regarding proper ventilation and cleanliness of salons.

Completion of the Workers’ Compensation portion (1 credit hour) of this program will better enable participants to:

1. Define and discuss workers’ compensation.
2. Describe the difference between “employee” and “independent contractor.”
3. Discuss types of injuries that will and will not be covered under workers’ compensation.
4. Discuss the benefits of temporary total disability compensation.
5. Delineate an injured employee’s obligations to their employee.

Completion of the OSHA Hazard Communication portion (1 credit hour) of this program will better enable participants to:

1. List the four main chemical hazard categories used in creating a chemical inventory.
2. Discuss the required contents of a Material Safety Data Sheet (MSDS).
3. Discuss proper labeling procedures for hazardous materials.
4. Outline the components of an effective Hazard Communication Program (HCP).
5. List employer requirements for providing hazardous material training.

Completion of the Tax Responsibility portion (4 credit hours) of this program will better enable participants to:

1. Determine the taxability of income.
2. Recognize the specific tax forms on which certain types of income are to be reported.
3. Discuss record keeping responsibilities of the Personal Service Professional, especially with regard to reporting tips to employers.
4. Determine the similarities of and differences between “Employer,” “Employee,” “Independent Contractor” and “Booth Renter.”
5. Identify the tax responsibilities of each of these types of workers.
6. Identify which business expenses are deductible and which are not.
7. Identify the benefits of properly reporting income and the disadvantages of not doing so.
8. Discuss the different types of retirement plans and opportunities available to Personal Service Professionals.
9. Identify educational credits and benefits available to Personal Service Professionals that wish to attend college or other post-secondary educational institutions.
10. Identify specific resources and publications made to the Personal Service Professional for further assistance in understanding tax responsibilities.

SECTION I: STERILIZATION AND SANITATION

Introduction

Possibly the most important issue for personal service workers is the proper sterilization and sanitation of all instruments and work areas. This is true for all cosmetologists, nail technicians, piercers and estheticians. The habits that you form with regard to disinfection and sanitation are of such importance because they affect the health and well being of both you and your clients. Proper sanitation not only ensures that you and your clients are protected from disease, but it also improves the appearance of your workstation along with how your clients perceive you as a professional personal service worker.

1. Bacteriology

To properly understand the need for proper disinfection and sanitation, it is important to understand the cause and nature of how disease is spread and prevented. Proper sanitation procedures are part of a field of study known as **bacteriology**. Bacteriology is the science that deals with the study of microorganisms called **bacteria**.

Bacteria are tiny, one-celled vegetable (meaning that they are organic or plant-like) microorganisms that can be found just about anywhere. Bacteria thrive in dust, dirt, trash, and diseased tissues; nearly anything that you come in contact with. A single bacteria cell is known as a bacterium. Bacteria are often called germs.

Bacteria are so small that they cannot be seen by the naked eye. You must use a microscope to see a single bacterium.

They are, in fact, so small that it may take up to two thousand bacteria cells to cover the head of a pin. Bacteria reproduce very quickly and will become visible as a mass when a **colony** of bacteria grow together in the same place.

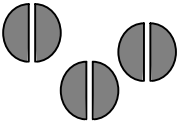
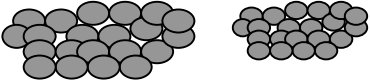
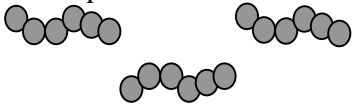
Two Basic Groups of Bacteria

Bacteria are divided into two basic groups: beneficial types and harmful types. The beneficial types of bacteria perform many useful tasks. They may eat or “decompose” trash or human waste. They may be used to fertilize soil, or in the creation of antibiotics used to actually fight disease. These beneficial types of bacteria are known as **Non-Pathogenic Organisms** and include saprophytes which live and feed off dead matter. Of the two groups of bacteria, the beneficial, or non-pathogenic, is the largest by far.

The harmful types of bacteria produce sickness or disease by invading plant or animal (human) tissue. The harmful types of bacteria are known as **Pathogenic Organisms** and include parasites, which require living tissue to grow. It is these types of bacteria that the personal service worker must control in the work place in order to properly reduce the spread of germs or disease.

Growth and Reproduction

Bacteria all have the ability to grow and multiply (reproduce). They do this by obtaining food from their surroundings. Bacteria grow and multiply best when they are in warm, dark, dirty, and damp places but they can also grow in cool, dry, well-lit areas. As long as there is sufficient food for them to eat, they will continue to multiply.

Table 1. The Three Classifications of Pathogenic (harmful) Bacteria:		
<p>1. Cocci: pronounced <i>KAHK-sigh</i> are round in shape and may appear singly or in groups. This type of bacteria usually produces pus in people that are infected with it. Because of the way that <i>cocci</i> grow, they are divided into three sub-groups described below.</p>		
<p>1. Diplococci: grow in half-circle shaped pairs and cause pneumonia</p> 	<p>2. Staphylococci: grow in bunches. Infection with this type of bacteria usually only affects a small area of the body such as with a boil or pimple.</p> 	<p>2. Streptococci: grow in chains. Infection with this type of bacteria affects a large portion of the body. Blood poisoning, for example.</p> 
<p>2. Bacilli: pronounced <i>ba-SILL-igh</i> are rod-shaped. This is the most common type of harmful bacteria and is the most difficult to destroy. Bacilli produce diseases such as tetanus, typhoid, and tuberculosis.</p>		
<p>3. Spirilla: pronounced <i>spee-RILL-ah</i> are spiral (or corkscrew) in shape. Spirilla produce diseases such as cholera and syphilis.</p>		

As long as a bacteria cell keeps eating, it will grow. As the cell takes in the food, growth will continue until it can grow no more. When this stage is reached, the cell will split in two, forming what is known as “daughter cells.” Under the right conditions, this process can repeat very quickly, allowing a single bacteria cell to form many millions of daughter cells in the course of a day. When conditions are not favorable for growth, one of two things will occur: 1) The cells will simply die, or 2) the cells will form a shell or “spore” that will protect it until conditions become suitable for growth. Spore-forming bacteria may remain inactive for long periods of time and may be spread to others during these inactive periods.

Movement

Because bacteria are very small, it is easy for them to be moved around. They can blow about in the air. They can live and move in water. And they can be carried or moved by you or your clients. Dirty hands and instruments are common ways in which bacteria are spread. If you use dirty

equipment or instruments or have dirty hands when you work on a client, you may well be spreading bacteria to them. Similarly, if your client has dirty hair or hands and you make contact with them without using proper sanitation measures, you may become infected from them.

Some bacteria (bacilli and spirilla) are able to move on their own. These bacteria have tiny hair-like projections called *flagella* and *cilia*. The cells use these projections like a swimmer’s arms to move them through liquids.

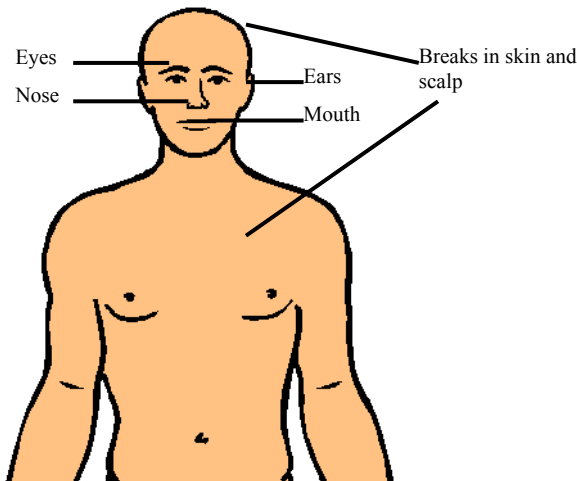
Bacterial Infections

A bacterial infection cannot occur without the presence of pathogenic bacteria. When the body is unable to manage bacteria and their toxins, an infection occurs. A pus-containing boil or pimple indicates a local infection. Bacteria, waste matter, blood cells (living and dead), body cells, and decayed tissue are all found in pus. When the bloodstream carries bacteria and toxins throughout the entire body, a general infection is said to have occurred.

A disease becomes contagious when it is able to spread from one person to another by contact. Common infectious diseases or conditions that may hinder or prevent the personal service worker from performing their job include the common cold, tuberculosis, head lice, ringworm, etc.

The most common sources of contagion among personal service workers are unclean instruments, unclean hands, sharing of eating and drinking utensils, uncovered coughing or sneezing, open sores and using towels on more than one client.

Figure 1. How bacteria enters the body



Harmful bacteria may enter the body through any of the following ports:

1. Breaks in the skin like scratches or cuts.
2. The nose through breathing.
3. The mouth through breathing or swallowing food or liquids.
4. The eyes through dirt or rubbing.
5. The ears through dirt or scratching.

The body fights infection by preventing the entrance of harmful bacteria through:

1. Unbroken skin (first line of defense).
2. Antitoxins that attack toxins produced by harmful bacteria.
3. White blood cells that destroy bacteria.

4. Secretions such as perspiration and digestive juices that destroy bacteria before they are able to infect.

Other Infectious Agents

There are several other types of organisms that can cause disease in people that are not classified as bacteria. These other infectious agents include:

1. **Parasites.** Parasites are organisms that attach themselves to and live off of other living organisms without giving anything in return. There are both plant parasites, also known as fungus, and animal parasites. Plant parasites include mold, mildew, and certain types of yeast. They can cause contagious diseases such as ringworm and a scalp disease known as favus. Animal parasites can also cause contagious diseases. Scabies, for example, is caused by the itch mite which burrows under the skin. Head lice are another example of infection caused by animal parasites.
2. **Filterable Viruses.** This type of virus consists of living organisms so small that they are able to pass through a porcelain filter. These viruses are responsible for respiratory diseases such as the common cold and for certain gastrointestinal (digestive tract) infections.

Any personal service worker that contracts a contagious disease caused by the parasites listed above should not try to treat the conditions themselves, but should contact a physician for proper care.

Immunity

Immunity is the body's ability to attack and destroy bacteria that have entered the body and resist infection. There are two types of immunity; natural and acquired.

Natural immunity is the body's natural resistance to disease. Much of natural immunity is inherited but may be enhanced through a clean and healthy lifestyle.

Acquired immunity is developed by the body after it has once overcome a disease. For instance, after an individual contracts and recovers from mononucleosis (mono), that individual will not contract that disease again. Acquired immunity may also come from inoculation against diseases. For example, the diphtheria and polio vaccines that are given to us when we are children.

Some people may have immunity to certain diseases and still be able to transmit the disease to others. These individuals are known as *carriers*. Typhoid and diphtheria are diseases that can be spread in this way. The carrier will not produce symptoms of the disease but is equally as infectious as someone who does.

Exercise 1. - Matching

Match the term or phrase in column 1 with the phrase that best explains it in column 2.

COLUMN 1	COLUMN 2
1. Bacteriology	a. Harmful types of bacteria that include parasites.
2. Bacteria	b. Harmful bacteria that grow in circle-shaped pairs and cause pneumonia.
3. Pathogenic organisms	c. The body's first line of defense against infection.
4. Diplococci	d. The most common type of harmful bacteria and the most difficult to destroy.
5. Bacilli	e. Developed by the body after it has once overcome a disease.
6. Flagella and cilia	f. Tiny, one-celled vegetable micro-organisms
7. Unbroken skin	g. The science that deals with the study of micro-organisms called bacteria

Exercise 1. Mix and Match (continued)

8. Plant parasites	h. Individuals who have immunity to certain diseases but are able to transmit the disease to others.
9. Acquired immunity	i. Include mold, mildew and certain types of yeast.
10. Carriers	j. Tiny hair-like projections that some bacteria use to move.

2. Cleanliness and Infection Control

Introduction

Your clients expect to see a clean salon. A clean working environment reflects the pride that you take in your craft and instills a feeling of confidence among your clientele. It also makes for a good first impression on new people entering your salon.

True cleanliness, though, consists not only of sweeping the hair up off the floor or keeping your nail station shiny. Without true cleanliness, you may be responsible for spreading disease to the people you depend upon most: your clients.

Not only is true cleanliness and infection control an important issue to your clients for their safety, it is also required by federal and state regulations.

Carelessness in the area of infection control could cause very serious injury or sickness.

Fighting germs will be a constant and ongoing job in your salon. But if you know how to properly prevent the spread of disease, it is not that difficult a task.

Contamination

Contamination can be defined as the presence of dirt, oils, or microbes on any type of surface. **Surface** can mean walls, floors, skin, instruments, etc. All objects have surfaces and, unless certain actions are taken, these surfaces are more than likely to be contaminated.

The dirt, oils and microbes that cause contamination are known as contaminants and almost anything can be considered to be a contaminant. Fingernail dust on an emery board, makeup on a tissue, blood on a pair of scissors, even hair in a comb may be considered a contaminant.

Surfaces that look clean, even tools that have been rinsed with water or even soaked in sanitizer will probably still contain bacteria, fungus, dirt or viruses that would make them contaminated.

Decontamination

No matter how hard you try, you will not be able to keep all surfaces free from contamination. Microscopic bacteria are simply too abundant to completely eliminate from the workplace. However, as a personal service professional, you must be constantly looking out for disease-causing agents (germs).

Decontamination is the act of removing disease-causing agents (pathogens) and other substances from your tools or work surfaces. There are three levels of decontamination. These are known as sterilization, sanitation and disinfection. Within the salon, however, only sanitation and disinfection are practical.

Table 2. KEEP IT CLEAN!

The following guidelines are recommendations for keeping your salon looking clean and professional.

1. Floors should be swept clean whenever needed.
2. Hair, cotton balls, etc. should be picked up immediately.
3. Deposit all waste materials in a metal waste receptacle with a self-closing lid.
4. Mop floors and vacuum carpets daily.
5. It is important to control all types of dust.
6. Windows, screens and curtains should be clean.
7. Regularly clean fans, ventilation systems, air conditioners and humidifiers.
8. All work areas must be well lighted.

Table 2. KEEP IT CLEAN! (cont.)

9. Salons need both hot and cold running water.
10. Restrooms must be clean and tidy.
11. Remember to clean bathroom door handles.
12. Toilet tissue, paper towels and pump-type antiseptic liquid soap must be provided.
13. Wash hands after using restroom and between clients.
14. Clean sinks and drinking fountains regularly.
15. Separate or disposable drinking cups must be provided.
16. The salon must be free from insects and rodents.
17. Salons should never be used for cooking or living quarters.
18. Food must never be placed in refrigerators used to store salon products.
19. Eating, drinking and smoking is prohibited in the salon.
20. Waste receptacles must be emptied regularly throughout the day.
21. Employees must wear clean, freshly washed clothing.
22. Always use freshly laundered towels on each client.
23. Capes or other coverings should not contact client's skin.
24. Makeup, lipstick, puffs, pencils and brushes must never be shared.
25. Clean cotton balls or sponges should be used to apply cosmetics and creams.
26. Remove products from containers with clean spatulas, not fingers.
27. All containers must be properly marked, tightly closed and properly stored.
28. The outside of all containers must be clean.
29. Soiled or dirty linen are to be removed from the workplace and properly stored for cleaning.
30. Do not place any tools, combs, curlers or bobby pins in your mouth or pockets.
31. Client gowns and headbands should be properly cleaned before being reused.
32. All tools and implements should be properly cleaned before each use and stored in a covered container.
33. Professionals should avoid touching their face, mouth or eye area during services.
34. No pets or animals should ever be allowed in salons except Seeing Eye dogs.

Source: Milady's Standard Textbook of Cosmetology. Milady Publishing, 1996

Sterilization

Sterilization can be defined as the act of completely destroying all living organisms on a surface. Using this definition, you can see that this is the most effective type of decontamination. Sterilization even destroys bacterial spores, which are the hardest to kill of any life form known to man.

The most popular method of sterilization is the steam autoclave. The steam autoclave is very similar to a pressure cooker. Steam is injected into the autoclave chamber at very high pressure. When this is done, the extreme heat and pressure are able to get into every bit of surface area of the instruments or tools in the autoclave. When left in the autoclave for a sufficient amount of time, all living organisms will be killed.

Another popular method of sterilization is the use of dry heat. While the steam autoclave is much like a pressure cooker, the use of dry heat is more like an oven. Objects or instruments are placed in an oven-like chamber and “cooked” until all living organisms are killed.

As mentioned, sterilization is impractical in the salon setting, even though it is, by far, the most effective form of decontamination. This is because it is a very difficult and time-consuming process.

Because they use needles and lancets that penetrate the surface of the skin, many piercers and estheticians feel that they should use one of these methods of sterilization to decontaminate these instruments. For the reasons mentioned above this is still an impractical approach. The simpler and more cost-effective method would be to use pre-sterilized lancets and needles that are used only once and then discarded.

Many professionals in the personal service industry often use the terms “sterilization” and “sanitization” interchangeably. This is incorrect and should not be done. For example, a nail technician may tell the client that they are sterilizing the nail plate. This cannot be done, as sterilizing the nail plate would destroy it. The correct term would be to sanitize the nail plate. Further discussion of sanitization follows in the next section.

Sanitization

Sanitization, which may also be called sanitation, is the lowest level of decontamination. Again, these terms are *not* interchangeable with sterilization.

Sanitization may be defined as the act of *significantly reducing* the presence of pathogens on a surface. In the salon, this is accomplished by cleaning instruments, combs, brushes, countertops, etc. with soap or detergents.

It is important to remember that sanitized surfaces will still contain pathogens after they have been washed regardless of how clean they may appear. You may feel that washing your hands with anti-bacterial soap is an excellent way of cleaning your skin and, indeed, this *is* a method of sanitization. However, regardless of how clean your hands may appear afterward, they are still covered with microorganisms that are found in the water.

Disinfection

Disinfection is the second of the three levels of decontamination. It falls below sterilization only due to the fact that disinfection does not kill all living microorganisms (bacterial spores remain after this process). Disinfection *controls* microorganisms on surfaces of instruments.

Though disinfection does not destroy bacterial spores, it is the best line of defense against the spread of disease in the

salon setting due to its practicality and ease. The complete elimination of bacterial spores is crucial only in physician offices or hospital settings.

Disinfectants are designed for use only on *non-living* surfaces such as tools, instruments, or countertops. They are not to be used on human tissue. Disinfectants should never be used as hand cleaners. They are professional-strength substances designed to quickly destroy certain living organisms and may be quite damaging to skin, hair, and nails.

Federal law requires manufacturers to include crucial information with their disinfectants. This information includes directions for proper use, safety precautions, a list of active ingredients, and an information sheet known as a Material Safety Data Sheet.

It is important to read all materials that accompany disinfectants to ensure that they are used correctly. Disinfectants that are misused are potentially very dangerous to you and your clients. Always use these substances in strict accordance with the manufacturer's instructions.

EPA Approval

All disinfectants used in the salon setting must be approved by the Environmental Protection Agency (EPA) and by each individual state. Upon approval, the EPA will provide the disinfectant with an EPA registration number. You should always look for this number when choosing a disinfectant. If you are not the individual responsible for choosing disinfectants, then you should check for this number to make sure your salon is using a disinfectant that is both safe and effective.

Hospital Grade Disinfectants

It cannot be overemphasized that proper use of disinfectants is critical in the salon. The best way to ensure that you are using

disinfectants properly is to frequently consult and review the manufacturer's instructions that accompany the products. Reviewing these instructions is critical because manufacturers will often add new information that is very important.

The cosmetology professional should only use disinfectants of the very highest quality. High quality disinfectants perform two very crucial jobs in the salon setting. They must be **bactericidal**, which means that they kill harmful bacterial, and **fungicidal**, which means that they kill fungus.

Disinfectants that perform both of these jobs are known as hospital grade (or level) disinfectants. Salon owners and personal service workers should use only those disinfectants that are hospital grade. Most of the hospital grade disinfectants currently available are virucidal, meaning that they destroy viruses, as well as bactericidal and fungicidal. All tools and implements used in the salon except for those that come in contact with blood or other body fluids (pus, saliva, etc.) should be disinfected by thoroughly immersing them in an EPA-registered, hospital grade, bactericidal, fungicidal, virucidal disinfectant used in strict accordance with the manufacturer's instructions.

Tools and implements that come in contact with blood or other body fluids need to be disinfected in solutions which are **tuberculocidal** as well as bactericidal, fungicidal, and virucidal. Tuberculocidal disinfectants are those that have been proven to be effective in killing tuberculosis bacteria and are known as hospital level/tuberculocidal disinfectants. Tools and implements that have come in contact with blood should be disinfected by thoroughly immersing them in an EPA-registered, hospital grade/tuberculocidal

disinfectant used in strict accordance with the manufacturer's instructions.

Use Disinfectants Properly!

Even if the salon owner or cosmetology professional is careful to make sure that the proper disinfectants have been purchased for the salon, these disinfectants cannot properly do their job if they are not used correctly. It is important that all tools and implements be cleaned before soaking them in the disinfecting solution. Failing to do so can contaminate the solution and decrease its effectiveness. Hair, oil, nail filings, and makeup are all among contaminants that not only decrease the effectiveness of the solution, but may also cause the solution to appear dirty or cloudy which may cause clients to perceive the salon as being unclean.

“Wet sanitizers” is often the term used by some cosmetologists to describe the containers used to disinfect tools and implements. From our discussion here, it is clear to see that this term is incorrect. Disinfectant solutions do not merely sanitize instruments, they actually disinfect them.

It is important that all disinfecting solutions be changed once every day unless the manufacturer's instructions indicate otherwise.

The Occupational Safety and Health Administration (OSHA)

The Occupational Safety and Health Administration (OSHA) is a part of the United States Department of Labor that was created to ensure the safety of employees in the workplace by the creation and enforcement of safety and health standards.

Two of the most important functions of the Occupational Safety and Health Act of 1970 are the education of employees about dangerous substances used in the workplace and regulating employee exposure to these substances. This Act established the Hazard Communication Rule. This rule requires chemical manufacturers to assess the

hazards associated with their products and to release that assessment through labeling and through the Material Safety Data Sheet.

Material Safety Data Sheets, briefly discussed earlier, provide all information relevant to that product. This information includes, but is not limited to the chemical contents of the product and the hazards related to those chemicals, the temperature at which the product may catch fire and the proper storage procedures for the product.

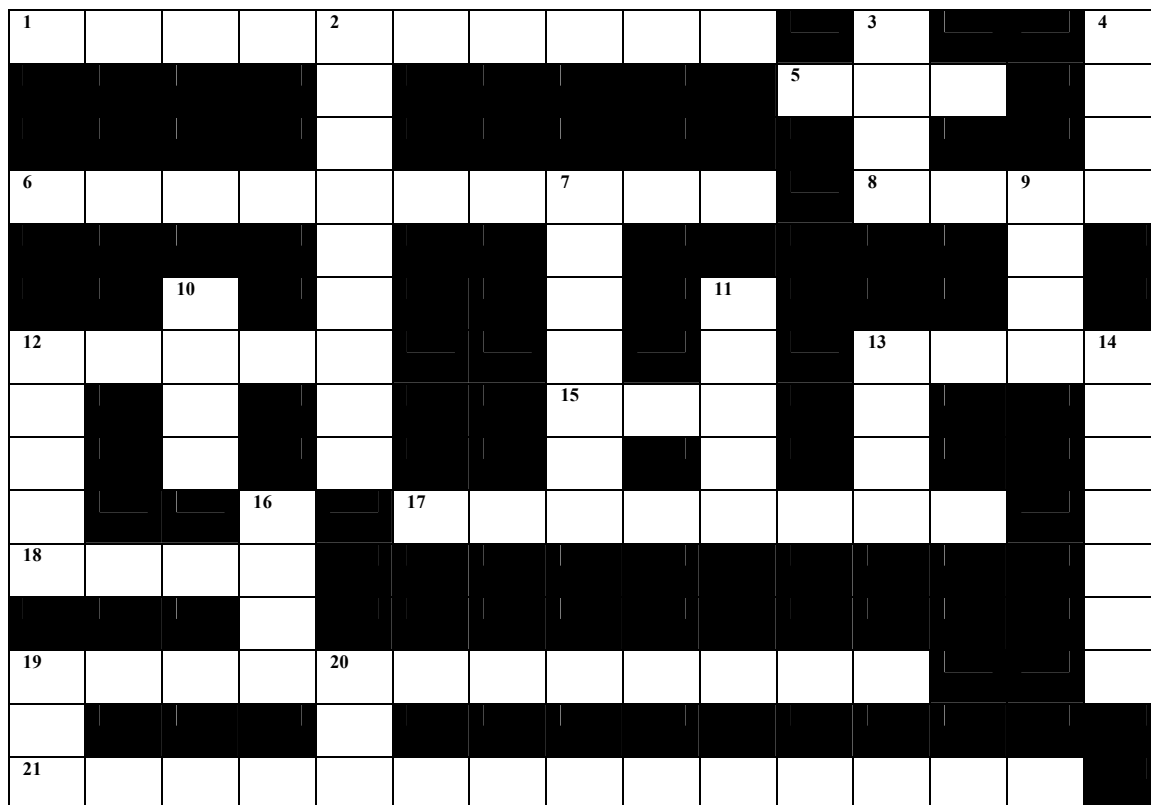
Material Safety Data Sheets should be made available to all salon employees for all products used in the salon. Material Safety Data Sheets are available from distributors and manufacturers of the different products.

The regulation of hazardous materials by OSHA is very important in the field of cosmetology. The types of chemicals used in this industry are potentially dangerous to the health and well-being of both the personal service worker and to the clients they serve. It is critical for the cosmetologist to be familiar not only with the chemical makeup of the products that they use or recommend to clients, but with the proper storage, disposal and method(s) of mixing these chemicals. For further information regarding the OSHA Hazard Communication Standard, see Section VII of this booklet.

Antiseptics

Before moving on to the discussion of specific types of disinfectants used in the salon, we will add a quick note about antiseptics. Antiseptics can slow the growth of bacteria and some are able to kill them. However, it is important to remember that they are *not* disinfectants and should never be used as a replacement for disinfectants. Antiseptics are considerably weaker than disinfectants. They should be used as sanitizers and are safe for application to the skin.

Exercise 2 – Crossword



ACROSS

1. An _____ should be used as a sanitizer and is safe for application to the skin.
5. Disinfectants are designed for use only on _____-living surfaces.
6. Meaning to kill fungus.
8. _____-up, lipstick, puffs, pencils and brushes should never be shared.
12. Only hospital _____ disinfectants should be used in the salon.
13. Contamination is the presence of dirt, _____ or microbes on a surface.
15. All disinfectants should have an _____ approval number.
17. _____ Safety Data Sheet
18. Make sure your salon is using a disinfectant that is both _____ and effective.
19. Dirty surfaces are said to be _____.
21. Effective in killing tuberculosis bacteria.

DOWN

2. The only type of pets that should be allowed in the salon are these types of dogs.
3. Bacterial spores are the hardest to kill of any life _____ known to man.
4. Disinfecting solution should be changed _____ a day unless the manufacturer's instructions indicate otherwise.
7. Two methods of sterilization are the steam autoclave and _____. (2 wds.)
9. The process of disinfection does not _____ bacterial spores.
10. Professionals should avoid touching their _____, mouth or eye area during services.
11. Where the client is during services.
12. A common term for disease-causing organisms.
13. Part of the U.S. Dept. of Labor that ensures safety in the workplace.
14. _____ can mean walls, floors, skin, etc.
16. _____ rooms should be clean and tidy.
19. What cosmetologists sometimes do to hair.
20. Regularly clean fans, ventilation systems, _____ conditioners and humidifiers.

3. Specific Types of Disinfectants

Quaternary Ammonium Compounds (Quats)

The most popular type of salon disinfectants are quaternary ammonium compounds, commonly known as quats. Quats used today are considered to be very safe, efficient and fast acting. Older formulas, which were known as single-phase quats, relied on only one quat and are not sufficiently effective for use against many types of bacteria and viruses (i.e., tuberculosis and HIV). New formulas, called super quat formulas, use several different quats mixed together to increase effectiveness.

Most of the currently available quat solutions will effectively disinfect tools and instruments in around 15 minutes. It is important to consult the manufacturer's instructions concerning the use of these solutions because some tools may become damaged if left in the solution for too long. Fine steel, for example may rust or become damaged after long-term exposure to water or quat solutions.

To avoid damaging tools and implements, you should make every effort to keep them separated during disinfection. This should reduce or eliminate the corrosion of metal surfaces. Also, metal implements such as nail clippers and scissors should be oiled periodically to keep them working properly and to reduce the likelihood of corrosion.

Quats are not only effective as disinfectant soaking solutions but may also be used for cleaning countertops and tables. Again, though, it is important to consult the manufacturer's instructions as to the proper use of quats in this manner.

Phenolic Disinfectants (Phenols)

Phenolic disinfectants, commonly known as phenols, are another very popular type of disinfectant used in salons today. Phenols, like quats, have been used for years and can be highly effective and safe if used correctly and in accordance with the manufacturer's guidelines.

Phenols do have one disadvantage over quats in that certain types of rubber or plastic materials

may be weakened, softened, corroded or discolored when disinfected using phenols.

It is very important to make sure that phenols do not come in contact with your or your client's skin. Phenols can irritate the skin causing a rash or itching or loss of skin. Concentrated (undiluted) phenols can also burn the eyes and skin severely. Some phenols are also poisonous if swallowed so it is very important that they be clearly labeled and kept out of the reach of children.

Alcohol Disinfectants

Many people misunderstand the term *alcohol*, thinking that it refers only to the rubbing alcohol found in your medicine cabinet or to the type of alcohol that you may drink. In reality, there are thousands of types of alcohols.

The three most common types of alcohol include the two mentioned above, isopropyl (or rubbing) alcohol, ethyl alcohol (the type found in distilled spirits), and additionally methyl alcohol (or methanol).

Ethyl and isopropyl alcohol are often used in the salon to disinfect tools and implements. Alcohol disinfectants are only effective if they are used in the proper concentrations. Ethyl alcohol must be in concentrations of 70% or more and isopropyl alcohol must be 99-100% concentrated.

While for the most part effective, alcohol disinfectants are not nearly as desirable as quats and phenols for several reasons. First, alcohols are highly combustible (flammable) and are dangerous to keep in the salon. Second, alcohol is slow acting and less effective than quats or phenols. Third, alcohol evaporates very quickly when exposed to the air, which means it must be replaced often and the vapors that are formed during evaporation have been found to cause nausea and headaches. Fourth, alcohols have a tendency to corrode and damage tools and dull the edges of sharp instruments.

Bleach Disinfectants

Sodium hypochlorite, also known as household bleach, can be effective when used as a disinfectant and has often been used as such in

the past. However, bleach has been replaced by newer and more effective solutions mainly because they share many of the drawbacks found when using alcohol disinfectants (corrosion of tools, slow acting, fumes, etc.).

Alcohols and bleach are not specifically designed or tested for use in disinfecting salon tools and implements and are therefore not recommended for this type of use.

As stated before, quats may be used to clean any surface including floors, sinks or restrooms unless stated otherwise in the manufacturer's instructions. However, these solutions can be expensive and it may be impractical to use them. As an alternative, you may want to use household-type disinfectants such as Lysol® or Pine-Sol®. These products will effectively disinfect the surfaces mentioned above. However, you must *never* use these products to disinfect salon tools or implements because they are household level and are not designed for this type of use.

Ultrasonic Cleaners

Ultrasonic cleaners (baths) are only effective when combined with a proper type of disinfectant. Ultrasonic baths use high-frequency sound waves that create bubbles in the liquid that powerfully clean implements and tools. These bubbles are able to penetrate into the very smallest crevices of the devices and effectively clean them. However, these devices merely sanitize tools and implements unless used in conjunction with a proper disinfecting solution.

Ultrasonic cleaners can be an expensive addition to your (or your salon's) disinfecting process. They are by no means "required equipment." Many systems safely and effectively disinfect tools and implements without the use of these devices. Many cosmetology professionals, however, believe that the ultrasonic cleaner's ability to clean in areas that brushing alone could never penetrate is well worth the money.

Formalin

Formalin was once recommended as a disinfectant to be used in dry cabinet sanitizers.

This is no longer true. Although formalin is an effective disinfectant, it is not safe for use in the salon.

Formalin tablets release a gas called formaldehyde which is a suspected carcinogen (causes cancer). Formaldehyde can be extremely irritating to the eyes, nose throat and lungs. It can also be poisonous if inhaled. Formaldehyde can cause skin rashes and allergies, dryness and irritation.

If used for a sufficient length of time, formaldehyde may cause symptoms much like those of chronic asthma or bronchitis which will continue and worsen with continued use.

In short, it is no longer safe or practical to use formalin as a salon disinfectant.

Safety

Safe and proper use of disinfectants is critical and cannot be overemphasized. Disinfectants are potent, professional-strength solutions that can be very dangerous or hazardous if used in ways not delineated in the manufacturer's instructions. Many disinfectants, especially in their concentrated form, are poisonous if swallowed and they can cause severe damage to the eyes and skin.

Figure 2. Always Label Disinfecting Solutions Properly

DANGER!!



PHENOLS!!

This container holds a phenol disinfecting solution that may be harmful or deadly if swallowed.

All containers should be properly labeled.
Never use any solution in an unlabelled container.

The salon professional must always remember to use caution when using and/or mixing disinfecting solutions. It is important that you

always wear gloves when working with these highly toxic solutions to protect your hands from potential damage. Also, be sure to label all disinfectant products to insure that you know what you are using and *never* use solutions that have not been labeled (see **Figure 2**). Be sure to keep all disinfectants and other potentially hazardous solutions and products far out of the reach of children.

When removing tools and implements from a disinfecting solution, use tongs or a draining basket and make sure the utensils are dry before using them. Do NOT pour alcohol, phenols, quats or any type of disinfecting solution directly on your hands. Direct contact with disinfectants, as mentioned above, can cause serious irritation or disease of the skin. If, by accident, you do come in direct contact with these solutions, immediately wash your hands with an antiseptic soap and rinse and dry them thoroughly. Regarding soap used in the salon, you should never use bar soap. Bar soap can actually act as a breeding ground for bacteria. Pump-style liquid antiseptic soap is a far more sanitary alternative.

When mixing disinfecting solutions, do so carefully taking extra care to properly measure all products to make sure that they work at their highest level of efficiency.

Disinfection of Other Surfaces

As we have discussed, it is very important for the salon professional to properly clean and disinfect all tools and implements that they use. But to ensure that the spread of bacteria is efficiently controlled, many other surfaces must be considered since any surface may become contaminated and able to spread disease. Tables and countertops immediately come to mind when considering these other surfaces, but there are several other surfaces to think about. Mirrors, telephone receivers, cabinet handles, doorknobs, and even cash registers may harbor bacteria and should be sanitized on a regular basis. A rule of thumb for the salon professional to remember is that any surface that is touched by clients or staff members can

become contaminated and must be sanitized regularly.

Dirty ceiling fans, air conditioners (especially the filters), and humidifiers can actually harbor bacteria and blow them around the salon. These things should also be cleaned regularly. Chairs can contain bacteria as can hair dryers, brushes, curlers, pins, etc and should be disinfected.

To properly disinfect a surface such as a counter or tabletop, you should first clean the surface with a suitable household level cleaner (such as Lysol® or Pine-Sol® as mentioned earlier). Then, apply a disinfecting solution and let it sit for at least ten minutes (or according to the manufacturer's instructions). After that, wipe the surface dry and apply another thin coating of disinfecting solution. Allow this to air dry and, at that time, the surface should be properly disinfected.

If you take a moment to consider all the surfaces that may become contaminated with disease-causing viruses and bacteria, you will begin to see just how critical proper sanitation and disinfection of the salon can be.

Electronic or Bead Sterilizers

This is another instance where the term "sterilizer" is used improperly. Not only are electronic or bead sterilizers unable to sterilize tools and implements properly, they don't even disinfect them. Because they are marketed with the term sterilizer, this may mislead the salon professional into thinking that tools and implements are safe when they really aren't.

Sterilization can occur only when the implements are heated to at least 325 degrees Fahrenheit for at least 30 minutes. Disinfection can occur only when the entire implement (including the handle) is fully submerged in a properly mixed disinfecting solution. Electronic and bead sterilizers accomplish neither of these necessary steps and are ineffective. Use of these devices can in fact be hazardous to the health and well being of your clients.

Proper Storage

Once you have taken the steps to safely and effectively decontaminate tools and implements, it is important that they be stored in areas where they will remain free from contamination. Otherwise, all the efforts that have gone into proper disinfection will be lost. The best type of container to use for the storage of disinfected tools and implements is the Ultraviolet (UV) sanitizer. It is important to remember, though, that these containers will *not* disinfect tools and implements and that storage in the UV sanitizer should not replace proper disinfection procedures.

If it is impractical in your salon to use a UV sanitizer or if you simply choose not to use one, you should store disinfected tools and implements in a dry, covered container. Remember, though, that the container that you should choose to use must also be disinfected. If it is not, your storage container may serve to recontaminate the tools that you have taken such care to disinfect.

Professional Responsibility

As a conscientious salon professional, you have a personal interest and a professional responsibility to your clients to insure that the salon is clean, safe, and free from the possibility of infection. Clients who witness you taking such great care to make sure that all the instruments you use on them are clean and safe will appreciate your efforts and are much more likely to become regular customers.

You also have a responsibility to protect yourself from germs and dirt. Being in a salon all day leaves you vulnerable to the multitude of bacteria and viruses that can grow there. Also, cuts and nicks that are common to the profession may provide ports of entry into your body for these bacteria. It is critical to your health and well being that you take every precaution necessary to sanitize and disinfect your tools, your work area and the entire salon.

Finally, you have a responsibility to the cosmetology profession. When any one person does not adhere to proper cleanliness and sanitization precautions, it is a smear on

everyone in the salon and, indeed, on the profession as a whole.

Exercise 3. – Fill In the Blank

1. The three most common types of alcohol are _____, _____, and _____.
2. Quat solutions will effectively disinfect tools and instruments in around _____.
3. The best type of container to use for the storage of disinfected tools and implements is the _____.
4. Formalin tablets release a gas called _____.
5. Ultrasonic baths use _____ that create bubbles in the liquid that powerfully clean implements and tools.
6. Sterilization can occur only when implements are heated to at least _____ degrees for at least _____ minutes.
7. It is important that you always wear _____ when working with toxic disinfecting solutions.

SELF-ASSESSMENT

Choose True or False for each question and mark your answers on the Self-Assessment answer sheet on page 67.

1. A visible mass of bacteria grown in the same place is referred to as a “colony.”
 TRUE FALSE
2. When a single bacteria cell can grow no more, it splits in two, which forms a pair of cells known as “Twin Cilia.”
 TRUE FALSE
3. Sterilization is more effective than sanitation because it is a less expensive means of disinfection.
 TRUE FALSE
4. The document that provides information about the chemical contents of a product and the hazards related to those chemicals is the Material Safety Data Sheet.
 TRUE FALSE
5. Currently, the most popular type of salon disinfectants are super quaternary ammonium compound (Quat.) formulas.
 TRUE FALSE
6. Bacteria grow best when they are in warm, dark, dirty and damp areas.
 TRUE FALSE
7. Streptococci bacteria grow in half-circle shaped pairs.
 TRUE FALSE
8. Food may be stored in refrigerators used to store salon products.
 TRUE FALSE

9. Phenols can irritate the skin causing a rash or a loss of skin.
 TRUE FALSE

10. Sanitization and sanitation are two distinctly different concepts.
 TRUE FALSE

Answers to Exercises

Exercise 1. - Matching

1. G, 2. F, 3. A, 4. B, 5. D,
6. J, 7. C, 8. I, 9. E, 10. H

Exercise 2. – Crossword

A	N	T	I	S	E	P	T	I	C		F		O
				E						N	O	N	N
				E							R		C
F	U	N	G	I	C	I	D	A	L		M	A	K
				N			R						I
			F	G			Y		C				L
G	R	A	D	E			H		H		O	I	L
E		C		Y			E	P	A		S		U
R		E		E			A		I		H		R
M			R				M	A	T	E	R	I	A
S	A	F	E										A
			S										C
C	O	N	T	A	M	I	N	A	T	E	D		E
U				I									
T	U	B	E	R	C	U	L	O	C	I	D	A	L

Exercise 3. – Fill in the Blank

1. isopropyl, ethyl and methyl (methanol).
2. 15 minutes.
3. UV sanitizer.
4. Formaldehyde
5. High-frequency sound waves
6. 325, 30.
7. Gloves.

SECTION II: FLORIDA BOARD OF COSMETOLOGY LAWS & RULES

I. General Provisions.

- A.** What Florida laws control the activities of cosmetologists?

The Florida Cosmetology Act can be found at Chapter 477 of the Florida Statutes. In addition, Florida Administrative Code Chapters 61G5-17 (activities of the Board of Cosmetology), 61G5-18 (regulating the activities of cosmetologists), 61G5-20 (cosmetology salons), 61G5-22 (school curriculum), 61G5-24 (fee schedules for registration), 61G5-25 (licensure status), 61G5-29 (specialty licensing), 61G5-30 (disciplinary guidelines), and 61G5-31 (hair braiding) all impact cosmetologists.

- B.** What activities constitute “cosmetology”?

The Act defines “cosmetology” as any of the following activities when done for compensation:

1. The mechanical or chemical treatment of the head, face, or scalp for aesthetic rather than medical purposes including but not limited to hair shampooing, hair cutting, hair arranging, hair coloring, permanent waving, hair relaxing, non-invasive hair removing (waxing), and facials.
2. Manicuring, which includes the cutting, polishing, tinting, coloring, cleansing, adding, or extending nails and the massaging of hands. The affixing of artificial nails is not covered by the Act if the nails are affixed by a simple adhesive. Acrylic nails are covered.
3. Pedicuring, which includes the shaping, polishing, tinting, or cleansing of the toenails, and massaging or beautifying of the feet.

- C.** How is “compensation” defined?

Compensation includes the payment of money or its equivalent, the receipt of property, the performance of a service, or the receipt of anything of value in exchange for cosmetology services. *See F.A.C. §61G5-18.00015.*

EXAMPLE: *You agree to cut your friend’s hair in exchange for babysitting services. You are providing cosmetology services for compensation and must comply with the Act and regulations.*

- D.** Does the Florida Cosmetology Act apply to everyone performing cosmetology services?

No. The following persons are exempt from the Act when practicing cosmetology pursuant to their professional or occupational duties:

1. Physicians, including commissioned medical and surgical officers of the United States Armed Services.
2. Nurses registered under the laws of this state.

- 3.** Persons practicing barbering under the laws of this state.

- 4.** Persons employed as cosmetologists in federal, state, or local institutions, hospitals, or military bases whose practice is limited to inmates, patients, or authorized military personnel of such institutions. A cosmetologist so employed loses the exemption if he or she engages in any freelance cosmetology for compensation.

EXAMPLE: In addition to working as a cosmetologist at a military base, you cut hair for friends and family members to earn a little extra money. You lose your exemption and must be licensed pursuant to the Act.

- 5.** Persons whose practice is limited to the application of cosmetic products to another person in connection with the sale or attempted sale of the products. Because of this provision, the department store personnel selling products such as Clinique™ or Estee Lauder™ cosmetics are exempt from the Act.

- 6.** Persons whose practice is limited to hair shampooing.

- 7.** Persons whose practice is limited to the giving of manicures, where the manicures are performed in a barbershop licensed pursuant to Chapter 476 of the Florida Statutes and said person has been practicing these activities prior to October 1, 1985.

- E.** You have graduated from an accredited cosmetology school and have taken the licensure examination. Must you wait until you receive your examination results and license before practicing cosmetology?

Not necessarily. You are eligible to practice cosmetology subject to the following conditions:

1. All of your cosmetology services are supervised by a licensed cosmetologist.
2. All cosmetology services are provided in a salon having a current and active license.

Also, you must provide the salon with a copy of your application for licensure prior to performing any cosmetology services. When you receive the results of your licensure examination, you must provide those results to the salon. Similarly, any applications for reexamination must be provided to the salon license holder. Under this exemption, it’s two strikes and you’re out. If you fail the licensure examination twice, you must cease the practice of cosmetology until you have taken and passed the examination and have received your license to practice cosmetology. *F.A.C. §61G5-18.0055*

II. The Board of Cosmetology.

- A.** Who makes up the Florida Board of Cosmetology?

The Board of Cosmetology (“Board”) is made up of seven members, all of whom are appointed by the Governor, and subject to approval by the state Senate.

Five of the Board members shall be licensed cosmetologists and shall have engaged in the active practice of cosmetology for at least five (5) years. The other two Board members shall be laypersons. §477.015(2), FLA. STAT.

B. What are the qualifications needed to become a Board member?

Each Board member must currently be a Florida resident and must have been a Florida resident for at least five (5) continuous years. §477.015(2), FLA. STAT.

C. What purpose does the Board serve?

The Board's function is to carry out the provisions of the Cosmetology Act. F.A.C. §61G5-17.001.

D. Who controls the activities of the Board?

The Board is under the supervision of the Department of Business and Professional Regulation. Each Board member is accountable to the Governor for the proper performance of Board duties. Moreover, the Governor may remove Board members for neglect of duty, incompetence, or unprofessional or dishonorable conduct.

E. Are board members paid for their participation on the Board?

Yes. Board members receive \$50.00 for each day spent in the administration of official Board business up to a maximum of \$2,000.00 per year. Board members also receive per diem and mileage from their place of residence to the place of meeting and return.

III. Qualifications for Licensure.

A. General Qualifications.

1. How old must a person be to apply for licensure as a cosmetologist?

The applicant must be at least 16 years old or have received a high school diploma or GED equivalency. §477.019, FLA. STAT. and F.A.C. § 61G5-18.001.

2. What are the educational requirements of an individual applying for licensure?

In addition to having a high school diploma or a GED equivalency, the applicant must have received a minimum of 1200 hours of training according to standards established by the Board. This training must include the requirement of completion of services directly related to the practice of cosmetology at one of the following:

- a. A cosmetology school licensed pursuant to Chapter 246 of the Florida Statutes;
- b. A cosmetology program within the public school system;
- c. The Cosmetology Division of the Florida School for the Deaf and Blind; or,

d. Any other government-operated cosmetology program in Florida.

3. What about cosmetologists holding active licenses from other states?

If the applicant is a cosmetologist holding an active license from another state or country, the applicant need not repeat cosmetology training in Florida provided the applicant has been licensed for at least one (1) year. §477.019, FLA. STAT. Additionally, the applicant is not required to take the Florida licensure examination providing the out-of-state license was issued based upon personal qualifications substantially similar to or greater than the qualifications required of Florida applicants.

4. Other than the licensure examination, are there any other requirements to apply for licensure?

Yes. Applicants must pay an original licensure fee of \$25.00 and an examination fee of \$50.00. F.A.C. § 61G5-24.002.

IV. Cosmetologists and Specialists Distinguished.

A. How do specialists differ from cosmetologists?

Cosmetologists may register as a specialist in manicuring/pedicuring/nail extensions and/or facials including hair removal. The designation indicates that the specialist has completed additional training in the area of the specialty.

B. How much additional training must an individual obtain to register as a specialist?

1. To register as a specialist in facials, the applicant must complete 260 hours to meet specified learning objectives in the areas of Florida laws and rules, sanitation and sterilization, and facials, including skin care and hair removal. Whereas the cosmetologist must complete ten (10) facial services to qualify for a cosmetologist license, the specialist applicant must complete forty (40) such services. Upon completion of these requirements, the school shall issue a certificate of completion to the applicant.

2. To register as a nail specialist, the applicant must complete his or her cosmetology training plus the minimum curriculum for nail specialty training. At a minimum, the nail specialty training must include the following:

- a. Five hours of instruction on Florida's laws and rules on the practice of cosmetology;
- b. Four hours of instruction on HIV/AIDS;
- c. Four hours of instruction on sanitation;
- d. Two hours of instruction on ethics;
- e. Eighty-five hours of instruction on nail theory, practice, and related subjects.

Additionally, the nail specialist must have completed 20 manicures, 10 pedicures, 15 tips with overlay, 15 sculpts using a form, 10 nail

wraps and/or mending, 10 nail fill-ins, 5 artificial nail removals, and 10 polishings and nail art. This requirement is substantially more than that required of a cosmetologist. By way of comparison, the cosmetologist is required to provide 20 nail services overall. *F.A.C. §61G5-22.015 and 22.016.*

V. License Renewal

- A.** How often must cosmetologists renew his or her license?

Every two years on or before October 31. The fee for renewal of an active license is \$25.00 for a regular Cosmetology license and \$30.00 for a specialty license. Furthermore, the Board imposed a one-time special assessment fee of \$30.00 upon all licensees during their license renewal dates in 1999 and 2000. *F.A.C. §61G5-24.020*

- B.** Are there any exemptions from the renewal requirement?

Yes. Spouses of military personnel are exempted from the renewal requirement in cases where they are absent from their home state because of their spouse's duties with the Armed Forces.

- C.** Are cosmetologists subject to any continuing educational requirements?

Yes. Prior to the expiration of each biennial (two-year) licensure period, the cosmetologist must complete a minimum of 16 hours of continuing education, which shall include, at a minimum, all of the following, as they relate to the practice of cosmetology:

1. Two (2) hours of instruction regarding HIV/AIDS and other communicable diseases. This training must consist of education regarding the modes of transmission of the disease, infection control procedures, clinical management, prevention of HIV/AIDS, and a discussion of the attitudes toward HIV and AIDS and the appropriate behavior in dealing with individuals infected with the virus or having the disease.
2. Three (3) hours of instruction regarding sterilization and sanitation techniques.
3. One (1) hour of instruction regarding Occupational Safety and Health Administration (OSHA) regulations.
4. One (1) hour of instruction regarding issues of workers' compensation laws as they pertain to the practice of cosmetology.
5. Two (2) hours of instruction regarding the state and federal laws and regulations as they apply to the practice of cosmetology.
6. Two (2) hours of instruction regarding chemical makeup as it pertains to skin, hair, and nails.
7. One (1) hour of instruction regarding environmental issues.

8. Four (4) hours of additional instruction in any of the subjects set forth above or other subjects that relate to the practice of cosmetology.

- D.** What are the license renewal requirements for specialists?

Like cosmetologists, specialists must renew their registration every two years.

- E.** Do the continuing education requirements for specialists differ from the requirements for cosmetologists?

No. The biennial continuing education requirements set forth above apply to both cosmetologists and specialists.

- F.** What happens if the continuing education requirements are not met?

Any cosmetologist or specialist who the Board finds has failed to comply with the continuing education requirements must take a continuing education refresher course of such hours, not to exceed forty-eight (48). The exact number of hours required shall be determined by the Board after considering the total number of hours already completed and any explanation offered regarding the failure to complete all of the continuing educational requirements. This refresher course shall be in addition to all other continuing educational requirements imposed on the licensee. So, what's the bottom line? *Complete the required 16 hours of continuing education every two years, or subject yourself to up to 48 hours of instruction for failure to comply.*

VI. Cosmetology Salons

- A.** How is "salon" defined?

A salon is defined as any establishment or place of business where cosmetology or any specialty is practiced for compensation. *F.A.C. 61G5-20.001*. A "specialty salon" is a salon where any or all of the specialties (manicuring, pedicuring, or facials) are performed. A "specialty salon" need not limit cosmetology services to the specialties to qualify as a "specialty salon." *§ 477.013(8), FLA. STAT.*

- B.** Can cosmetology services be performed outside of a salon?

Under certain circumstances, yes. If a client is unable to go to a salon because of ill health, then cosmetology services may be performed outside of a licensed salon. However, the following procedures must be followed:

1. The arrangements for the services must be made through a licensed salon.
2. The salon's appointment book must list the client's name and address and the services to be performed.

3. The salon's appointment book must be made available to a investigator or inspector of the Department. F.A.C. §61G-20.0015.

EXAMPLE: *You are a licensed cosmetologist who has a friend who travels a lot on business. Because of the extensive business travel, your friend has trouble getting to the salon to get her hair cut. Every four to six weeks, your friend calls you at home and you go to her house in the evening to cut her hair. Is this practice unlawful? Yes, it violates the regulations because the client does not suffer from ill health. Moreover, the appointments are not arranged through a licensed salon and are not recorded in a licensed salon's appointment book.*

C. What if the unlicensed location is a hospital, nursing home, or similar facility?

In those institutions, cosmetology services may be rendered to patients, inmates, or residents who because of ill health cannot travel to a licensed salon.

EXAMPLE: *You are a licensed cosmetologist providing services to a nursing home. A nurse that works at the home was unexpectedly included in a business dinner and wishes to make a good impression. So, she asks you to trim her hair on her lunch hour. Would doing so be unlawful? Yes, because it violates the regulations. If cosmetology services at a nursing home or other institutional location provides services to employees or other non-qualified persons, then the location must be a licensed salon. F.A.C. § 61G5-20.0015(2).*

D. What about photography studio salons (e.g. the "glamour shot" photographers)? They routinely provide cosmetology services. Must they be licensed?

No, provided they limit their cosmetology services as follows:

1. Only hair arranging and the application of cosmetic products may be performed.
2. The services may only be performed on the client to prepare him or her for the photographic session.
3. Shampooing of hair, hair coloring, hair cutting, permanent waving of hair, hair relaxing, hair removal, manicuring, pedicuring, and any other service defined as cosmetology may not be performed in an unlicensed photography studio salon.
4. All hair arranging and cosmetic application must be performed by a licensed cosmetologist or under the supervision of a licensed cosmetologist.
5. When performing hair-arranging services, the photography studio salon shall use either disposable hair arranging implements or shall use a wet or dry sanitizing system approved by the Environmental Protection Agency.

EXAMPLE: *You work as a cosmetologist for an unlicensed photography studio salon. A client arrives wanting a photography session to surprise her*

husband for his birthday. However, she has not washed her hair expecting that you would do that as part of arranging her hair. Can you do so? No, the regulations specifically prohibit hair shampooing by an unlicensed facility. F.A.C. §61G5-20.0015(3).

E. What are the requirements for obtaining a salon license? Prior to opening a salon, the owner must:

1. Submit to the Department of Business and Professional Regulation the appropriate application.
2. Pay the salon license fee of \$50.00 and a nonrefundable salon application fee of \$45.00.
3. Meet certain safety and sanitation requirements. F.A.C. §61G5-20.002(1).

F. What are the safety and sanitation requirements for a salon? F.A.C. §61G5-20.002(1-4).

1. Ventilation. Each salon must be well ventilated. Walls, ceilings, furniture and equipment shall be kept free from dust. Hair may not be allowed to accumulate on the floor and must be disposed of in a closed container. Salons that provide extending or sculpturing of nails must provide those services in an area separate from the other services and ventilation must be adequate to safely disperse all fumes.

2. Lavatory Facilities. Each salon must have on the premises, within 300 feet of the salon, adequate lavatory facilities. To be considered adequate, the facilities must contain, at a minimum, a toilet, a sink with running water, toilet tissue, soap or other hand cleaning material, sanitary towels or hand blow dryer, and waste receptacle. The lavatory must also be well ventilated and well lit.

3. Home Salons. Licensed salons may be located within one's home, provided the facilities comply with paragraphs 1 and 2, above. Moreover, the salon must be separate from the living quarters by a permanently constructed wall. A separate entrance must be provided so that the salon may be reached by some way other than through the living quarters.

EXAMPLE: *You are a licensed cosmetologist who has a home salon. Your salon is set up in a converted garage. Whenever a client needs to use the restroom, you direct them to the bathroom in the house. Does the salon qualify for a license? No. For a home salon to qualify for licensure, the lavatory facilities must have an entrance from the salon other than through the living quarters.*

4. No animals. No animals shall be permitted in the salon except fish in closed aquariums and animals trained to assist the visually impaired, hearing impaired, or physically disabled.

5. Shampoo Bowls: Each salon must have shampoo bowls equipped with hot and cold running water. The shampoo bowls must be located where cosmetology services are to be performed. A specialty salon that limits its practice to manicuring, pedicuring, or

facials need not have shampoo bowls, but must have a sink or lavatory with running water.

6. Linens. Each salon must keep clean linens in a closed, dustproof cabinet. All soiled linens must be kept in a closed receptacle, unless the open container of soiled linens is kept in an area entirely separate from the area where cosmetology services are provided. A sanitary neck strip or towel must be placed against the client's neck to prevent direct contact between the client's skin and the shampoo cape.

EXAMPLE: *You own a salon. For the convenience of your hairdressers, each station contains a waste basket in which to place soiled linens. Does this practice comply with the regulations? Maybe. To comply, the waste containers must be closed containers. If they are open containers, then the containers must be kept in a place separate and apart from where services are provided, for example, in a back room.*

7. Containers. Salons must use containers for waving lotions or other preparations of such a type that will prevent contamination of the unused portion. All creams shall be removed from the container with a spatula to prevent contamination of the unused portion.

8. Sterilization and Disinfection. It is absolutely prohibited to use a brush, comb, or other article on more than one patron without being disinfected. Each salon must have sufficient combs, brushes, and implements to allow for adequate disinfecting practices. The practice of carrying combs or implements in pockets is also prohibited.

9. Sanitizers. All salons must be equipped with and utilize wet sanitizers with hospital level disinfectant or EPA approved disinfectant. The wet sanitizers must be covered and must be large enough to permit complete immersion in the disinfectant.

10. Disinfection practices: Proper disinfection practices include washing the brush, comb, or implement with soap and water, and then immersing the appropriate disinfectant.

- a. For combs and brushes, remove all hair first. Then wash and immerse in disinfectant.
- b. Implements containing a cutting edge may be wiped with a hospital level or EPA approved disinfectant.

11. Storage of implements: After being disinfected, implements shall be stored in a clean closed cabinet separate from undisinfected items such as pens, pencils, money, paper, etc. Rechargeable items, such as clippers, may be stored outside a cabinet provided that the area where they are located is clean and the cutting edges have been disinfected. Ultraviolet irradiation may be used to store instruments after they have been cleaned and disinfected.

12. Salon space: No cosmetology salon or specialty salon may be operated in the same licensed space allocation with any other business which adversely affects the sanitation of the salon. Each salon must contain a minimum of 200 square feet of floor space. No more than two cosmetologists may be employed in a salon having only the minimum floor space.

G. How do the safety and sanitation requirements for specialty salons differ from cosmetology salons?

A specialty salon practicing only one of the specialties must have a minimum of 100 square feet used in the performance of the specialty service and shall meet all of the sanitation requirements set forth above. Moreover, for each additional employee providing specialty services, an additional 50 square feet service area is required. *F.A.C. § 61G5-20.002(5).*

H. How often must salon licenses be renewed?

All salon licenses must be renewed every two years on or before November 30 of each even-numbered year.

I. What happens if the salon license renewal is delinquent?

A delinquent salon license shall expire at the end of the biennium in which it becomes delinquent. After expiration, the salon must submit a new salon license application, the delinquent license fee, and all other applicable renewal fees. Until such time as the new license is issued for and received by the salon, all cosmetology and specialty services shall cease. *F.A.C. §61G5-20.005.*

EXAMPLE: *You own a cosmetology salon and overlooked renewing your salon license. You have submitted all of the required documentation to renew your delinquent license. One of your best clients is getting married tomorrow and wants you to do her hair and the hair of all six of her attendants. You called the Board and were notified that your salon's license has been reissued. The license will be sent in tomorrow's mail. Can you provide cosmetology services for the wedding? No. The license must be issued to and received by the salon before any cosmetology services are provided.*

J. Can a salon license be transferred from one licensee to another?

No. A salon license is non-transferable. The person acquiring the salon must submit his or her own application for salon licensure. Similarly, if a salon relocates, the salon license for the old location can be transferred to the new location only by filing a new application and fee and obtaining departmental approval. *F.A.C. §61G5-20.006.*

K. What are the inspection requirements for salons?

The Department of Business and Professional Regulation shall inspect all proposed salons prior to the

issuance of a salon license. Thereafter, each salon must be inspected at least once each year.

L. Must the salon license be displayed in a public place?

Absolutely. Additionally, the licenses of all cosmetologists employed by the salon must be displayed in a conspicuous place. The licenses of all cosmetologists must contain a photograph of the licensee. The photograph must be at least 2” by 2” and less than two years old.

M. Must any other documentation be displayed to the public?

Yes. The most recent inspection sheet and the sanitation rules adopted by the Board must also be displayed for public viewing.

N. May cosmetologists having a communicable disease perform cosmetology services?

No. If a cosmetologist or specialist has a visible disease, pediculosis, or open sores suggesting a communicable disease, then the cosmetologist or specialist is prohibited from providing cosmetology services until they obtain a doctor’s statement stating that the disease or condition is not in the infectious, contagious, or communicable stage. *F.A.C. §61G5-20.007.*

O. May cosmetology services be performed on persons having a visible communicable disease?

No. A cosmetologist is prohibited from providing services to a person having a visible disease, pediculosis, or open sores suggestive of a communicable disease, until the client furnishes a statement from a doctor stating that that disease is not in an infectious, contagious, or communicable stage. *F.A.C. § 61G5-20.007.*

VII. Mobile Salons.

A. Are mobile cosmetology or specialty salons permitted in the State of Florida?

Yes. Although there was period of time within which the Board was prohibited from issuing new licenses to mobile salons, the issue has now been resolved in favor of issuing such licenses. However, there are special requirements that mobile salons must meet to obtain licensure.

B. What are the special requirements for mobile salons?
F.A.C. §61G5-20.010.

1. The operation of mobile cosmetology salon must at all times comply with local laws and ordinances regulating businesses in all areas in which the mobile salon operates.

EXAMPLE: You operate a mobile salon in your hometown. Your salon consists of a recreational vehicle that has been converted to cosmetology use and complies with all of Florida’s laws. A

cosmetology convention is being held in Orlando next month and you intend to take your mobile salon to the convention and offer your services to the attendees. Can you? Yes, provided you comply with Orlando’s local laws and ordinances. At a minimum, you will need to obtain the appropriate business and occupational licenses from each city in which you offer your services.

2. Each mobile salon must comply with all licensure and operating requirements that apply to salons operating at fixed locations.

3. Each mobile salon must file with the Board a written monthly itinerary which lists the dates and locations of every site where the mobile salon will be operating. A list of operating hours must also be provided. The mobile salon may only operate at those locations listed on its itinerary.

EXAMPLE: You own a mobile salon and have spent three days providing services to the residents of an assisted living facility. Another assisted living facility across the street requests that you spend the next three days at their facility providing services to its residents. Assuming it fits into your schedule, can you? No. The mobile salon can only provide services at those locations listed on the itinerary submitted to the Board.

4. The mobile salon must list its salon name and license number in lettering at least 5” high and legibly displayed on at least two exterior sides of the mobile salon.

5. If the mobile salon is a motor vehicle, the vehicle identification number shall be included on the application for licensure and shall be listed on the monthly itinerary provided to the Board.

6. Each mobile salon must have a telephone or other means of telecommunications by which it can be contacted by Department personnel.

7. Each mobile salon must maintain a permanent business address at which correspondence from the Department can be received. The business address must be in the inspection area of the local district office where records of appointments, itineraries, license numbers of employees and similar information shall be kept. Post office box or private mailbox addresses may not be used for these purposes.

8. Each mobile salon shall be equipped with a functional lavatory that contains a self-contained flush chemical toilet with a holding tank. The lavatory shall otherwise be in substantial compliance with those requirements imposed upon salons at a fixed location.

9. Each mobile salon shall have storage capacity for at least 35 gallons of clean water for each cosmetologist working in the salon. Additionally, the mobile salon shall have storage capacity for storage

of wastewater equal to or greater than the required storage for clean water.

10. The mobile salon shall promptly cease operating when any of the following occur:

- a.** The salon's clean water supply is depleted or so diminished that further cosmetology services cannot be completed.
- b.** The salon's wastewater capacity has reached capacity.
- c.** The salon's lavatory is in need of servicing.

11. Each mobile salon shall comply with all applicable state and local environmental and sanitation regulations.

12. No cosmetology services may be performed on any patrons within the mobile salon while it is in motion.

VIII. Change in Licensure Status.

A. What are the different statuses available for licensees?

There are three: active status, inactive status, and delinquent status. *F.A.C. §61G5-25.001-.003*

B. What are the differences between the three?

1. Active Status. A licensee having an active cosmetology license may perform all cosmetology services in accordance with Florida law.

2. Inactive Status. Any licensee having an active cosmetology license may elect to place the license on inactive status by filing an application for inactive status. The licensee may convert the inactive status to active status at any time provided he or she has met the continuing educational requirements and pay the appropriate reactivation fees. However, if the licensee's cosmetology license has been inactive for more than two consecutive biennial licensure cycles, there is an additional requirement to reactivate the license. The licensee must also submit a statement affirming that he or she has read within the last 30 days the laws and rules regulating the practice of cosmetology. In any event, the licensee having an inactive license cannot provide cosmetology services.

EXAMPLE: You are a licensed cosmetologist and recently had a child. You decide to be a stay-at-home parent and place your license on inactive status. However, from time to time, friends and family members ask that you cut their hair. You do so and they pay you a small amount in return. Can you do this? No. You cannot provide cosmetology services for compensation while having an inactive license.

13. Delinquent status. A delinquent license is one in which the licensee fails to elect either active or inactive status or the registration expires. The delinquent licensee must affirmatively apply for active or inactive status during the licensure cycle in which the license becomes delinquent. Failure to do

so will render the license null and void. Here again, a cosmetologist having a delinquent license cannot provide cosmetology services.

IX. Hair Braiding, Hair Wrapping and Body Wrapping.

A. May persons licensed only as a hair braider perform hair wrapping or body wrapping?

No, Registrants are allowed to perform only those services for which they are specifically licensed.

B. What are the educational requirements for persons limiting their practice to hair braiding?

They must complete a two-day 16-hour course that has been approved by the Board. The course must contain 5 hours of instruction on HIV/AIDS and other communicable diseases, 5 hours of instruction on sanitation and sterilization, 4 hours of instruction on disorders and diseases of the scalp, and 2 hours of instruction on laws and rules of the Board affecting hair braiding. The person completing the educational requirements must register with the Department and pay the applicable registration fee.

C. What are the educational requirements for persons limiting their practice to hair wrapping?

They must take a one-day 6-hour course that has been approved by the Board. The course must include 2 hours of instruction on HIV/AIDS and other communicable diseases, 2 hours of instruction on sanitation and sterilization, 1 hour of instruction on disorders and diseases of the scalp, and 1 hour of instruction on laws and rules affecting the practice of hair wrapping.

D. What are the educational requirements for persons limiting their practice to body wrapping?

They must take a two-day 12-hour course that has been approved by the Board. The course must include 3 hours of instruction on HIV/AIDS and other communicable diseases, 4 hours of instruction on sanitation and sterilization, 4 hours of instruction on disorders and diseases of the skin, and 1 hour of instruction on laws and rules affecting the practice of hair wrapping.

E. Must hair braiding, hair wrapping and body wrapping be performed within a licensed salon?

No. However, when hair wrapping or hair braiding are practiced outside of a licensed salon, disposable implements must be used or all implements must be sanitized in disinfectant approved for hospital use or by the EPA.

F. May a person perform hair braiding or hair wrapping pending the issuance of the registration?

Yes, provided he or she has submitted the registration application that includes proof of successful

completion of the education requirements and payment of the applicable registration fees.

- G.** Must persons who limit their practice to hair braiding, hair wrapping or body wrapping comply with the continuing education requirements imposed upon licensed cosmetologists?

Not entirely. Hair braiders and wrappers are only mandated to comply with the two-hour HIV/AIDS continuing education requirement discussed earlier. *F.A.C. §61G5-31.005 (2)*

- H.** What is the registration fee for hair braiders, hair wrappers and body wrappers?

The initial fee for registration is \$25.00. The registration must be renewed biennially in either an active or inactive status. The cost for renewing the registration is \$25.00.

X. Disciplinary Guidelines.

- A.** What are the prohibited actions that will subject a licensee or registrant to discipline? *F.A.C. §61G5-30.001.*

1. Holding oneself out as a cosmetologist or specialist without being duly licensed and registered as such. The usual penalty for this violation is a fine of \$500.00 if committed by one who has never been licensed in Florida. For one who failed to properly renew the license or registration, \$50.00 per month during which the licensee or registrant remained unlicensed up to a maximum of \$500.00.

2. Operating a cosmetology salon unless it is duly licensed. The penalty for this violation is a fine of \$500.00 for a salon that has never been licensed. For a salon that failed to properly renew its license, \$50.00 per month during which the salon was not licensed up to a maximum of \$200.00.

3. Permitting an unlicensed employee to practice cosmetology unless properly exempted. The recommended penalty is a fine of \$500.00 where the individual has never been licensed. The penalty is \$50.00 per month for every month the employee went unlicensed because of his or her failure to renew up to a maximum of \$500.00.

4. Presenting as your own the license or registration of another. The recommended penalty is a fine of \$500.00 and a reprimand.

5. Providing false or forged evidence to the Department or the Board to obtain a license or registration. The recommended penalty is a fine of \$500.00 and refusal to approve the application or revocation of a previously approved application.

6. Impersonating any other license holder or registrant of a like or different name. The recommended penalty is a fine of \$500.00 and a six-month suspension of license or registration.

7. Using or attempting to use a license or registration that has been revoked. The penalty is a

fine of \$500.00 and one year suspension of license or registration.

- 8.** Violating any provision of § 477.0265, *FLA. STAT.*, which defines the following as prohibited acts as second-degree misdemeanors.

a. engaging in the practice of cosmetology or a specialty without an active license or registration;

b. owning, operating, maintaining, opening, establishing, or conducting a cosmetology salon or specialty salon which:

(i) is not duly licensed;

(ii) permits unlicensed persons to perform cosmetology or specialty services;

c. engage in willful or repeated violations of F.S. 477 or any rule adopted by the Board;

d. permit an unlicensed or unregistered employee to engage in the practice cosmetology or specialty;

e. to obtain or attempt to obtain a license or registration for money, other than the required fee, or by false misrepresentation;

f. use or attempt to use a suspended or revoked license or registration.

All of these violations may result in administrative penalties being imposed in addition to criminal sanctions.

- 9.** Violating any rule of the Board.

10. Violating any final order of the Board. The recommended penalty is a fine of \$500.00 and a six-month suspension.

11. Violating the safety and sanitary rules of the Board. The penalty escalates depending on the number of violations.

- B.** If a licensee or registrant is both fined a sum of money and suspended from the practice of cosmetology or specialty, how can the licensee or registrant pay the fine?

In every case in which the Board imposes a monetary fine, it must also suspend the license or registration. However, the suspension is stayed (not made effective) for a specified period of time to enable the licensee or registrant to pay the fine. If the fine is paid within the specified time period, then the suspension shall not take effect. If the fine is not paid, then the suspension shall take effect. Once the fine is paid, the suspension is then lifted.

- C.** Who is authorized to discipline licensees and registrants?

Both the Board of Cosmetology and the Department of Business and Professional Regulation may discipline licensees and registrants.

D. Is the procedure the same for disciplinary actions by the Board and by the Department?

No. The procedures differ somewhat. If the Board receives a complaint and finds that the person committed one of the above offenses, it shall issue a final order imposing the appropriate penalties. In lieu of those procedures, the Department is authorized to dispose of violations by issuing a citation within six months of the date the complaint is filed which is the basis for the violation. The "citation violations" are typically the less serious offenses.

E. What are the "Citation Violations"? *F.A.C. §61G5-30.004.*

1. The following are citation violations incurring a penalty of \$50.00:

- a.** any violation of sanitary, safety or other salon requirements. However, for this violation, a "Notice of Noncompliance" (previously called a warning) may be issued for a first offense.
- b.** practicing cosmetology or specialty with an inactive or expired license for one month or part of one month;
- c.** operating a salon with a delinquent license for one month or part of one month;
- d.** employing a person to practice cosmetology or specialty with an inactive or expired license for one month or part of one month;
- e.** unless otherwise permitted by Chapter 477, performing cosmetology services in an unlicensed salon.

2. The following are citation violations incurring a penalty of \$100.00:

- a.** Transferring ownership or location of a salon without Board approval, provided the transfer has not been in effect for 90 days and the application has been completed and submitted to the Board;
- b.** Practicing cosmetology or a specialty with an expired or inactive license for more than one month but less than two months;
- c.** Operating a salon with a delinquent license for more than one month but less than two months;
- d.** Employing a person to practice cosmetology or a specialty with an inactive or expired license for more than one month but less than two months;
- e.** Two violations of safety, sanitary, or other salon requirements.
- f.** Violation of the graduate exemption requirements, which deal with hiring graduates pending licensure.

3. The following are citation violations incurring a penalty of \$250.00:

- a.** Operating a salon without a wet sanitizer;

- b.** Three or more violations of safety, sanitary, or other salon requirements;
- c.** Failure to complete a Board approved course on HIV/AIDS;

4. The following are citation violations incurring a penalty of \$500.00:

- a.** Practicing cosmetology or specialty without a license;
- b.** Operating a salon without a license;
- c.** Employing a person to practice cosmetology or a specialty without a license;
- d.** Five or more violations of safety, sanitary, or other salon requirements.

SELF-ASSESSMENT

Choose True or False for each question and mark your answers on the Self-Assessment answer sheet on page 67.

11. Foot Massage is one of the services that is defined as "cosmetology" by the Florida Cosmetology Act?

- TRUE FALSE

12. Registered Nurses are exempt from the Florida Cosmetology Act when practicing cosmetology pursuant to their professional or occupational duties?

- TRUE FALSE

13. An applicant for a Cosmetology license in the state of Florida must receive a minimum of 1500 hours of training according to standards established by the Board.

- TRUE FALSE

14. Specialists are exempt from the continuing education requirements for license renewal in the State of Florida.

- TRUE FALSE

15. To comply with safety and sanitation requirements, a salon must contain a minimum of 200 square feet of floor space.

- TRUE FALSE

16. Mobile salons operated in the State of Florida are required to file a written monthly itinerary with the Board.

- TRUE FALSE

17. In order to re-activate an inactive license, a licensee must submit a statement to the Board that they have read the Florida Cosmetology laws and rules within the preceding 30 days if the license has been inactive for more than 4 years.

TRUE FALSE

18. Persons who limit their practice to hair braiding, hair wrapping and body wrapping are subject to the same educational requirements as full cosmetologists.

TRUE FALSE

19. Practicing cosmetology without ever having been licensed or registered as a cosmetologist is subject to a maximum fine of \$200?

TRUE FALSE

20. Operating a salon with a delinquent license for more than one month but less than two months is a "Citation Violation" that would incur a penalty of \$100?

TRUE FALSE

SECTION III: HIV/AIDS AND INFECTION CONTROL

1. DEFINITIONS AND OVERVIEW

What Is AIDS?

AIDS stands for **A**cquired **I**mmuno**D**eficiency **S**yndrome. It is caused by a virus called the **H**uman **I**mmunodeficiency **V**irus or HIV for short. People get AIDS by picking up HIV from others in certain ways. This is why it is called **acquired**. After a person gets HIV, they are no longer able to fight off certain infections and cancers. HIV makes someone sick by destroying the **immune system**. This part of the body, made up of special cells, tissues, and glands, normally keeps other viruses and germs from making us sick. It does this by making **antibodies**, small disease-fighting substances. People with HIV make antibodies but they do not fight off HIV in the body. As time goes on, HIV destroys the immune system, opening up the body to all kinds of infections. If not treated, a person with AIDS will die from these infections and diseases. These infections, diseases and their symptoms make up the **syndrome** known as AIDS.

What is the Difference Between HIV and AIDS?

HIV is the virus that causes AIDS. HIV is transmitted from one person to another through sexual contact, sharing of needles, or other means which will be discussed later in this book. The time at which this transmission takes place is known as the time of "infection." A person can carry HIV in their body for many years before they start to look and feel sick. These individuals may be called **HIV-infected** or **HIV-positive (HIV+)**. AIDS is only used to describe an HIV-infected person who has become sick with one or more illnesses or diseases (called **opportunistic infections**) or who has only a few special immune cells left (called **CD4+ cells**).

Many people with HIV infection look and feel healthy. These individuals are usually described as being **asymptomatic** (without symptoms). This is important, as there is no way of knowing if a person is HIV+ by looking at them.

When Do People with HIV Get Sick?

As time goes on, an individual carrying HIV in their immune cells starts to get sick. They can develop many different health problems, such as severe weight loss, pneumonia, cancer and problems with their nervous system. Some people with HIV start developing these problems a year or two after they are infected. Other individuals may stay healthy for a long time, sometimes 10 years or more before they start to get sick. Today, doctors try to treat people with HIV as early as possible after they know about their infection before these problems start. This is why everyone should have an HIV antibody test to make sure they are not carrying the virus.

2. NUMBERS OF AIDS CASES AND TRENDS

Total Cases.

As of June 30, 2000, there were 753,907 total AIDS cases reported to the Centers for Disease Control and Prevention (CDC), the U.S. governmental agency responsible for keeping track of AIDS cases in the U.S. Adults, adolescents, and children can all get AIDS.

Adults/adolescents		745,103
Males		620,189
Females		124,911
Children (Under age 13 at time of diagnosis)		8,804

The total deaths of persons reported with AIDS are 436,795, including 431,709 adults and adolescents, and 5,086 children.

Ages of Persons with AIDS

Individuals aged 30 to 39 are the largest population group with AIDS. Here is an age breakdown of AIDS cases:

Under 5:	6,812	Ages 35 to 39:	168,778
Ages 5 to 12:	1,992	Ages 40 to 44:	124,398
Ages 13 to 19:	3,865	Ages 45 to 49:	72,128
Ages 20 to 24:	26,518	Ages 50 to 54:	38,118
Ages 25 to 29:	99,587	Ages 55 to 59:	20,911
Ages 30 to 34:	168,723	Ages 60 to 64:	11,636
		Over 65	10,378

Race and Ethnic Distribution

White (not Hispanic) individuals represent the highest number of total AIDS cases. AIDS continues to hit hard among black (not Hispanic) and Hispanic individuals. The specific race or ethnic background of persons reported with AIDS is as follows:

White, not Hispanic		324,822
Black, not Hispanic		282,720
Hispanic		137,575
Asian/Pacific Islander		5,546
American Indian/ Alaska Native		2,234
Race/ethnicity unknown		826

How People Get AIDS

Below is a list of AIDS cases shown by how the person got their infection (called **exposure category**). Men who have sex with men represent the largest number of total AIDS cases. The next biggest groups are individuals with a history of injecting drugs, and men who have sex with men and also inject drugs. In the early years of AIDS, persons with hemophilia (where the blood fails to clot right) or individuals receiving blood transfusions were also at risk for getting HIV. Today, it is *very* safe to receive a blood transfusion. New ways to make blood products needed by hemophiliacs have also removed the risk of getting HIV for these individuals.

Category	Male	Female	Total
Men who have sex with men	348,657		348,657
Injecting drug use	137,650	51,592	189,242
Men who have sex with men and inject drugs	47,820		47,820
Hemophilia/ coagulation disorder	4,847	274	5,121
Heterosexual cases	27,952	50,257	78,210
Receipt of blood transfusion, blood components, or tissue	4,920	3,746	8,666
Other, including risk not reported or identified	48,343	19,042	67,387

Exposure Categories-Children

Most reported cases of AIDS among children are born to mothers who have, or who are at risk for, HIV infection.

Category	Total
Mother with, or at risk for, HIV infection	8,027
Receipt of blood transfusion, blood components, or tissue	381
Hemophilia. Coagulation disorder	236
Other, including risk not reported or identified	160

Cities and States with AIDS Cases

The largest number of AIDS cases has been reported from the East and West coasts, particularly from New York, California, and **Florida**. The 10 leading states or territories reporting the highest number of AIDS cases among residents are as follows:

State or Territory	Total
New York	139,248
California	117,521
Florida	78,043
Texas	52,667
New Jersey	41,246
Illinois	24,425
Puerto Rico	24,061
Maryland	23,833
Pennsylvania	23,678
Georgia	22,197

Within these East and West Coast states, New York City, Los Angeles, and San Francisco continue to be hit hard by AIDS. The 10 leading cities reporting the highest number of AIDS cases among residents are as follows:

City	Total
New York City	117,792
Los Angeles	41,394
San Francisco	27,567
Miami	23,521
Washington, D.C.	22,321
Chicago	21,173
Houston	18,735
Philadelphia	18,348
Newark	16,739
Atlanta	15,524

Current Trends

Currently, the CDC estimates that **one in every 250** persons in the United States is infected with HIV. HIV (and the resulting complications from AIDS) is now the leading cause of death among African-American adults aged 25 to 44. The total number of persons with HIV infection in the United States is about 1 million.

The largest number of individuals with AIDS remains men who have sex with men. Recent trends, however, now indicate that AIDS is increasing among injecting drug users and persons infected through heterosexual contact. This increase in heterosexual transmission is resulting in more cases being reported among women.

While the East and West coasts remain affected by AIDS, the greatest increases are being seen in the South and Midwest. Blacks and Hispanics continue to be affected by AIDS at an increasing rate.

AIDS Around the World

HIV has been seen in every country in the world. The World Health Organization (WHO) estimates that 33 million adults and about 1.3 million children are currently living with HIV. **There are now 5 million new infections each year.** As of 1999, 18.8 million

individuals have died from AIDS. At the end of this century, WHO estimates that 30 to 40 million men, women, and children will be infected with HIV. Developing countries will account for more than 90% of all people with HIV infection. As of the year 2000, the total number of women living with HIV has reached 15.7 million. It is estimated that 13.2 million children have lost their mother or both parents to AIDS. Although Sub-Saharan Africa has the largest number of people living with HIV (24.5 million), there is explosive spread of HIV in South and South-East Asia. In this part of the world, there are 5.6 million HIV-infected adults, triple the estimated number in 1993. AIDS is having a bad impact on the economies of these countries. For example, the AIDS epidemic will have cost Thailand's economy 11 billion U.S. dollars through the year 2000 as a result of people not being able to work because of their disease.

3. HOW PEOPLE GET HIV INFECTION

People become infected with HIV by doing certain things that allow the virus to enter their bodies. Getting HIV has nothing to do with who an individual is as a person or whether or not they are gay or straight. It is what one does that puts them at risk for getting HIV.

Infection occurs in two main ways:

- Having sex with a person who is infected with HIV.
- Sharing needles or syringes with a person who is infected with HIV.

Individuals who work in hospitals or other health care settings are also at risk for getting HIV from taking care of patients who may have HIV infection. This risk comes from exposure to blood or other body fluids during surgery or procedures such as drawing blood. Today, all health care settings have certain work practices in place, called **universal precautions**, that help workers avoid getting infected. Universal precautions use latex gloves, protective clothing, and safer needles to reduce this risk.

How Does a Person Get HIV from Having Sex?

HIV can be spread through unprotected sexual intercourse. Unprotected sex means having sex without using a latex condom. Transmission may occur from male-to-female, female-to-male, or male-to-male. Female-to-female sex *can* spread HIV to the other partner, but this is rare.

HIV may be found in the infected partner's blood, semen, or vaginal fluids. The virus can enter the body through cuts or sores found in the vagina, on the penis, in the rectum, and in the mouth. Some may be so small that the person doesn't even know they have them.

All sexual intercourse can put people at risk for HIV infection if they do not use a latex condom. This means they can get HIV from vaginal intercourse, anal intercourse, or oral sex. The more frequent a person's sexual activity, the more likely they will end up having sex with someone who has HIV infection.

What About Kissing?

You will not get HIV from a kiss. Some people are concerned about deep, long kissing (also called "French" kissing) with someone who might be infected with HIV. Although HIV has been found sometimes in saliva, it is in such low amounts that scientists believe it is impossible to

get HIV from this form of kissing. **Not one case of AIDS has ever been linked to kissing alone.**

While there is almost no chance of getting HIV from deep, long kissing, one cannot completely rule out any risk. Cuts or sores in the mouth might allow any trace of HIV to enter the bloodstream. Scientists still believe kissing is very, very safe.

How Does a Person Get HIV from Using Needles?

Injecting drugs can spread HIV if needles are shared with another person. Blood from an infected person can stay in or on a needle or syringe and then be spread when someone uses the same needle or syringe. Sharing needles carries with it a very high risk for spreading HIV.

Using needles for injecting drugs is not the only way a person can get HIV from needles. A person can be infected by HIV and other germs such as hepatitis by sharing needles for tattooing or ear-piercing. People who share needles to inject steroids to get bigger muscles may also spread HIV in this way. If you decide to get a tattoo or your ears pierced, make sure you go to someone who uses sterile needles and who follows good infection control in their shop. Ask the shop owner how they do this to protect their customers.

How Do Babies Get HIV?

A woman who is pregnant and infected with HIV can pass along the infection to her baby. She can pass HIV to her baby in one of three ways:

- During pregnancy when she carries the baby,
- During the time when she gives birth to the baby, and
- During breast-feeding after the baby is born.

If a woman becomes infected with HIV before or during pregnancy, her baby has about one chance in four of being born infected with HIV. Today, women who are pregnant with HIV can take certain drugs called **antiretrovirals** to help stop them from infecting their babies.

Can Giving or Receiving Blood Give Someone HIV?

During the early years of AIDS before 1985, some people became infected with HIV from blood transfusions needed for surgery or illness. Other people who had hemophilia (where their blood fails to clot right) also became infected with HIV by using various blood products to treat their disease. Today, all donated blood is screened and for the presence of HIV virus. Better ways to make clotting factor products have also stopped people with hemophilia from getting HIV in this way. There is almost no chance of a person getting HIV through a blood transfusion. Giving blood at a blood bank or at a Red Cross blood drive has always been safe. The needles used for blood donation are sterile, used once, and then thrown away.

Ways That You Can't Get HIV

Some people still think you can get HIV in other ways. They confuse the way HIV is spread with the way, say, a common cold is spread. You can't catch HIV like a cold or the flu. HIV is not spread by coughs or sneezes.

You will not get HIV from the following:

- Everyday contact with infected people at school, work, home, or anywhere else

- Clothes
- Phones
- Toilet seats
- Spoons, cups, glasses, or other utensils used by an infected person
- Insects such as mosquito bites, bed bugs, lice, or flies
- Sweat or tears
- Food made by an infected person

What is My Personal Risk for HIV Infection?

Scientists believe that HIV has been in the United States since 1978. You may be at risk for HIV infection. Ask yourself the following questions. If you answer yes to any one or more of them, you should get an HIV antibody test to make sure you are not infected.

- Have you shared needles or syringes to inject drugs or steroids?
- If you are male, have you had unprotected sex with other males?
- Have you had unprotected sex with someone who you believe may have been infected with HIV?
- Have you had a sexually transmitted disease (STD)?
- Have you received blood transfusions or blood clotting factor between 1978 and 1985?
- Have you had unprotected sex with someone who would answer yes to any of these questions?

4. HOW TO PREVENT HIV INFECTION

Cosmetologists and nail technicians have a very low risk of HIV infection on the job. Unlike health care workers who have daily contact with blood, personal service workers rarely come in contact with blood or other body fluids. The next section will cover things you can do to keep your workplace safe and free of any possible spread of HIV.

Your greatest risk for HIV infection comes from your personal activities off the job. The only sure way not to get HIV is to abstain from having sex and from injecting illegal drugs. If you choose to have sex, you should practice **safer sex** with your partner.

What is Safer Sex?

Sex means different things to different people. Some sexual activities have been rated based on their ability to spread HIV between partners. Below are some of these activities and their risk ratings.

Sex Practices and Their Risk for Spreading HIV

Unsafe Practices with High Risk of HIV Transmission:

- Numerous sex partners
- Unprotected anal receptive sex with an infected partner
- Unprotected anal penetration with the hand (“fisting”)
- Anal douching in combination with anal sex
- Oral-anal contact (“rimming”)
- Vaginal intercourse without a condom with an infected partner

Possibly Unsafe Practices with Unclear Risk of Transmission

- Fellatio (oral contact with male genitals and with semen)
- Cunnilingus (oral contact with female genitals)
- Sharing sex toys and implements

Low Risk Practices with Some Risk of HIV Transmission

- Anal or vaginal sex with proper use of intact latex condom
- Wet kissing (“French” kissing)
- Fellatio interruptus (contact with male genitals without ejaculation)

Practices with Probably No Risk of HIV Transmission

- Abstaining from sexual contact
- Monogamous relationship, both partners uninfected
- Self masturbation
- Masturbation of partner (if no broken skin on hands and genitals of either partner)
- Touching, massage, hugging, stroking
- Dry kissing (“social” kissing)

How Do I Use A Condom Correctly?

Latex condoms are an important part of preventing the spread of HIV during sex. When used all the time and correctly, they are very effective. Condoms not only help stop the spread of HIV; they also help prevent the spread of other sexually transmitted diseases (STDs) and unwanted pregnancies.

Using a condom alone will not reduce the spread of HIV. The condom must be used in the right way and used every time you have sex with someone. Here are some guidelines to help you use condoms correctly.

- Do not store condoms in wallets, car glove compartments, or other hot places. Keep them in cool, dark places.
- Do not use a condom that has gone past its expiration date stamped on the wrapper.
- Do not use a condom that feels gritty or gummy.
- Use a new condom for each act of vaginal, anal, or oral intercourse.
- Be careful when opening up the condom package so that you do not tear the condom with your fingernails.
- Put on the condom as soon as erection takes place and before any vaginal, anal, or oral contact with the penis.
- Hold the tip of the condom and unroll it onto the erect penis, leaving space at the tip of the condom, and making sure that no air is trapped in the condom's tip.
- Use only a water-based lubricant (glycerine or lubricating jellies such as K-Y) to prevent the breaking of the condom. Do not use oil-based lubricants (petroleum jelly [such as Vaseline], cold cream, hand lotion, baby oil, etc.).
- Withdraw from your partner right after ejaculation, holding the condom firmly at the base of the penis to keep it from slipping off.

What About Condoms for Women?

Women can now use a female condom (also called the vaginal pouch). More studies are needed, however, to make sure it is effective in stopping the spread of HIV. If available, a male condom should be used during sexual activity to prevent HIV. If one is not available or it cannot be used properly, a female condom can be used.

What About Condoms Other Than Latex?

Condoms made out of natural materials, such as lamb intestine, should not be used to prevent the spread of HIV. Only latex and the newer plastic condoms made out of polyurethane have been shown to stop HIV. Plastic condoms are good choices for people who are allergic to latex. These plastic condoms are thinner than latex, have

no odor, and are safe for use with oil-based lubricants which cannot be used with latex condoms.

Should I Use A Spermicide with a Condom?

Some individuals like to use a spermicide, such as nonoxynol-9, along with a condom when having sexual intercourse as added protection against the spread of HIV. Laboratory studies show that it kills HIV. It is not known whether it protects against HIV during sexual intercourse. Some women may find they are sensitive to nonoxynol-9, resulting in genital irritation and ulceration. Using a spermicide is up to the individual condom user and their partner. It may provide added protection, particularly if prevention of pregnancy is also desired.

5. INFECTION CONTROL IN THE SALON AND BARBER SHOP

A clean salon or barber shop is simply good for business. Customers notice and appreciate a place that is spotless, well-lit, tidy, and friendly. Making sure combs, razors, and other instruments used in the barber shop or salon are clean and free from germs is also a good way to stop any possible infection of HIV that may exist.

Personal Service Workers (PSWs)

People who work in a salon or barber shop are called **personal service workers** (PSWs). Individuals considered to be PSWs are the following:

- Barbers
- Cosmetologists
- Ear piercers
- Electrologists
- Estheticians
- Hairdressers
- Manicurists
- Pedicurists

Tattoo artists, massage therapists, and acupuncturists are also considered to be PSWs. The risk of passing along HIV to a client receiving services from these workers is very, very low. Still, everyone who works in one of these areas must practice good infection control to stop whatever small risk there may be.

What Procedures Could Put Someone at Risk for HIV?

Any procedure that could result in bleeding can put you or your customer at risk for HIV. Since many work practices in the salon or barber shop use sharp instruments, such as scissors, the risk of bleeding is always present. Here are some procedures done on a daily basis in salons, beauty shops, and barber shops that could cause someone to bleed:

- Hair cutting
- Shaving
- Waxing
- Manicuring
- Pedicuring
- Other procedures using scissors, razors, cuticle pushers, or other sharp instruments

What About Cuts on the Scalp or Fingers?

Cuts are the biggest cause for concern for both the hairdresser and the customer. Most workers who cut hair have cuts on their fingers from time-to-time. In addition, a customer could have a cut on their scalp or get a nick or cut from a service they received in the salon. Here are a

few ways that HIV could be transmitted from these two situations:

- While doing a manicure on a customer, the cuticle bleeds on a cut you have on your finger.
- While cutting hair, you cut your finger with scissors and then reach for a comb. A small amount of your blood on the comb touches a cut or sore on your customer's head.
- While giving a facial, you remove a blackhead, drawing blood that touches a cut on your finger.

Remember, the key word here is *could*. The risk of transmitting HIV in the salon setting is very low. Workers doing nails are more at risk than workers who cut hair. However, since any cut on you or your customer can provide a direct opening on the skin for HIV to go into the body, you must be careful to protect yourself and your customer.

What Do I Do If I Get a Cut on My Finger?

If you get a cut on your finger, make sure you do the following:

- Wash the cut with soap and water.
- Use dispenser soap rather than bar soap. You may want to consider using a dispenser soap that contains germ-killing ingredients.
- Dry the cut and then cover it with a bandage.
- Change the bandage often, particularly if it becomes bloody or wet.
- Keep your cut covered with a bandage until all broken skin has healed.

What Do I Do If the Customer Starts Bleeding from a Nick?

Do not use a styptic pencil to stop the bleeding. Instead, use a powder astringent. Apply the powder to the customer's neck with a damp cotton swab or Q-tip. When done, throw away the swab and wash your hands before continuing your work with the client.

How Do I Handle Dip Sticks and Wax When Waxing?

You should only melt the amount of wax that will be needed for each client. A fresh dip stick should also be used with each new client. You can create problems if you use a big pot of wax and put in it dipsticks from several clients. Always wear gloves, particularly during wax removal.

When Should I Wear Gloves?

Wear gloves whenever you give any of the following services to your customer:

- Give a facial
- Do any tweezing
- Give a manicure or pedicure
- Waxing, especially during removal
- Do any other procedure that might draw blood

In addition, you should always wear gloves if you have a cut, sore, or skin condition on your hands or if your customer has cuts or sores on the scalp. In these cases, it is a good idea to wear gloves, for example, when giving a shampoo.

What Kind of Gloves Should I Use?

The gloves should be made out of latex rubber and feel like a second skin on you. You should not buy or use cheap gloves. Ask a good surgical glove company to help

you choose the best glove for your needs. You should not be afraid to pass along this cost to your customers if the price of gloves hurts your profit. If customers are told that the level of protection has been raised in your salon, they will thank you for being concerned about their safety and well-being.

How Do I Disinfect in the Salon?

In today's salon, it is important to use hospital-level disinfectants for all utensils and instruments. Alcohol and single-phase quats, popular years ago, no longer provide the right level of germ-free and HIV-free protection. By using hospital-grade disinfectants, you remove the risk of HIV and other infections that may be present.

When choosing a hospital-level disinfectant, look for one with the following qualities:

- The product kills a broad range of germs, viruses, and other organisms.
- It is fast-acting and easy-to-use.
- The product should be non-corrosive (does not destroy metals or surfaces)
- It is economical and fairly priced.
- The product is registered with the Environmental Protection Agency (EPA) and shows this on its label.

If possible (and your state allows it), get into the habit of disinfecting in full view of your clients. By seeing this, the salon's customers will know how carefully the staff is paying attention to cleanliness, safety, and infection control.

What is a Good Way to Disinfect Instruments?

After selecting a hospital-grade disinfectant, a few steps should be followed:

1. Wash all instruments to be disinfected with soap and water to remove any surface dirt, blood, or other matter.
2. Put the instruments in a wet sanitizer containing the hospital-grade disinfectant solution.
3. Leave instruments to disinfect for the proper time before removing them from the solution.
4. Remove the instruments and rinse them in clean water.
5. Dry instruments completely
6. Store disinfected, clean instruments in a dry, clean cabinet or drawer.

What is a Good Way to Handle Sharps?

A sharp is anything that can cut the skin. Examples of sharps are scissors, razors, blades, and other sharp instruments. These should always be handled with extreme care to prevent cutting yourself or your client. Any sharps that are made to be thrown away should be placed in a separate container designed specifically for this purpose. One way to do this is to use a special container, known as a "sharps container," used by hospitals to throw away needles and syringes.

General Salon Guidelines for Cleanliness

Keeping your shop or salon clean and orderly is good not only for you but also for business. If a client sees a clean salon, they are more likely to feel confident and good about the services they receive there. Here are some suggestions for keeping your salon or barber shop safe and clean for all workers and customers.

1. Keep walls, ceilings, floors, and equipment clean, washed, and free from dust.

2. Make sure the shop is well lighted and ventilated with fresh air.
3. Provide an adequate supply of hot and cold running water.
4. Install all plumbing fixtures under the supervision of a licensed plumber.
5. Check to make sure all electrical connections and equipment are installed properly under the supervision of a licensed electrician and grounded.
6. Provide disposable paper cups at all drinking facilities.
7. Keep the rest rooms always supplied with hot and cold water, liquid soap, and paper towels.
8. Do not use the salon as a place for eating or sleeping. A separate room, outside of public view, can be used as a lunch or break room.
9. Keep the salon free of any insects, rodents, or vermin. Use a professional exterminator if necessary for any problems.
10. Do not allow dogs, cats, birds, or other animals inside a salon.
11. Provide in a handy location an S-tube or hand-operated resuscitator bag for use in case mouth-to-mouth resuscitation is needed.

Source: Adapted from *Bacteriology & Sanitization for the Personal Care Worker*, DiAna, D editor. Columbia SC: South Carolina AIDS Education Network, Inc.

General Guidelines for Maintaining Supplies and Equipment

Throughout the day, activities in a busy salon require attention to cleanliness and good infection (including HIV) control. For example, someone is always sweeping the floor to remove cut hair. There are a number of other daily procedures that should become part of the routine in a busy salon. Once these are done on a regular basis, they will become second-nature to you.

1. Change head rest covering for every new customer.
2. Clean shampoo boards and bowls.
3. Clean the shampoo sink area with a spray bleach solution (containing 1 part bleach to 9 parts water) after each client has used the area.
4. Use clean linens, towels, client gowns, etc. only once. Deposit them in containers used only for this purpose.
5. Do not use any instrument or item again if it is dropped on the floor. Pick up the item and place it in disinfectant solution before using again.
6. Sweep the salon floor frequently to prevent build-up of hair and other waste materials. Throw away sweepings into a covered container.
7. Remove individual amounts of creams and all other semi-solid substances from their original containers using a sterile spatula or spoon and place in an individual dish to be used only for one client. Use a clean dish or container with every new client.
8. Use single, fresh cotton swabs, balls, or other applicators to apply lotions or fluids to an individual client.
9. Do not pass around lipstick, rouge, powder puffs, sponges, or other make-up to be used by more than one person.
10. Use dispenser soap instead of bar soap in all places where the washing of hands is required.
11. Give each individual manicure client his or her own paper cup with finger bowl.
12. Use neck strips to stop shampoo capes from touching a client's skin at the neck.

13. Remove all soiled combs, brushes, and other instruments or materials from the work station after each use.
14. Disinfect all instruments after each use on a client.
15. Do not place any clips, pins, or other instruments in the mouth.
16. Wash all hairnets after each individual use.
17. Do not carry instruments of any kind in uniform or personal pockets.

Source: Adapted from *Bacteriology & Sanitization for the Personal Care Worker*, DiAna, D editor. Columbia SC: South Carolina AIDS Education Network, Inc.

General Guidelines for Cosmetologists

The cosmetologist is an important member of the salon team when it comes to providing services to clients. They often have the most contact with customers, most of which is of a personal nature. A special bond is often created between the client and the cosmetologist, one that can create, and keep, a long-term business relationship.

In order for all customers to feel safe, secure, protected, and comfortable during their salon experience, the cosmetologist must keep certain guidelines in mind. What follows is a set of these guidelines designed to keep this important relationship a happy and healthy one.

1. Follow all rules of personal hygiene.
2. Do not work with customers if you are sick with a cold, the flu, or other illness that can be caught by your client.
3. Do not give services to any customer who has a visible infection that may be caught by you or your coworkers.
4. Ask clients with open sores or cuts on their scalp to return for services after they have healed.
5. Wear a washable uniform with sleeves that are no more than 3/4 length.
6. Wash your hands before and after working with a client and after every visit to the restroom.
7. Do not attempt to treat any disease or condition of the skin, scalp, face, or hands. Instead, recommend that the customer see their doctor.
8. Wear disposable latex gloves during manicuring, pedicuring, waxing, facials, shampoos, tweezing, and any other service where you may come in contact with blood or body fluids, no matter how small the amount.
9. Wear gloves whenever handling any combs, brushes, or other salon instruments that may be contaminated or when cleaning the salon.
10. Do not work on a client if you have chapped or dry skin on your hands.
11. Clean up any blood stains on counters or surfaces with a solution of 1 part bleach to 9 parts water.
12. Disinfect all instruments after each individual use according to proper instructions.
13. Disinfect electrodes by cleaning their surfaces with 70% alcohol on a cotton pad.
14. Use a hospital-grade product to clean and disinfect floors, sinks, and toilets.
15. Spray sinks and toilet seats with a bleach spray containing 1 part bleach to 9 parts water.
16. Sanitize all body wraps by washing them in soap and water containing bleach.
17. Wipe down all slenderizing, massage, and toning tables with a bleach solution after each client.

Source: Adapted from *Bacteriology & Sanitization for the Personal Care Worker*, DiAna, D editor. Columbia SC: South Carolina AIDS Education Network, Inc.

6. CARE AND TREATMENT FOR PERSONS WITH HIV/AIDS

During the early years of AIDS, there were few treatments available. Today, doctors have a number of drugs and other treatments that are helping persons with HIV and AIDS to lead normal, productive lives. No longer necessarily a death sentence, AIDS is now viewed by many doctors and individuals as just another chronic disease that can be treated and kept in check for a long time.

How Can the Doctor Delay Someone with HIV from Progressing to AIDS?

As mentioned earlier, someone with HIV infection can live symptom-free for many years before showing signs of disease or sickness. Someone is said to have AIDS only when their immune system becomes destroyed to a certain level. It is then that they are more at risk for getting other infections and cancers that their bodies can no longer fight off.

People with HIV infection can stop progression to AIDS by taking certain drugs called **antiretrovirals**. These drugs act by slowing the reproduction of HIV in immune cells. With less virus present in the blood and tissues, the person's immune system can get strong again and protect against the other infections and cancers linked with AIDS. Today, doctors can use a variety of different drugs that kill HIV in the body. Persons with HIV usually take more than one of these different drugs during various times of the day. This is called **combination** therapy. Taking these drugs can be difficult; some require food while others require an empty stomach. These drugs often have serious side effects that can make the person sick. None of these drugs, no matter how they are used, can be considered a cure. Nevertheless, individuals with HIV infection and AIDS are seeing dramatic results after using these drugs.

After trying to reduce the amount of HIV in the body, doctors can also give other drugs that prevent certain AIDS-related infections from starting in the first place. This is called **prophylaxis**. For example, PCP (*Pneumocystis carinii* pneumonia), a type of pneumonia that can cause serious illness or even death in someone with HIV, can now be prevented by taking a pill on a daily basis.

Depending on how bad a person's immune system is, different drugs can be given to prevent these opportunistic infections.

What Can Doctors Do for Someone with AIDS?

When a person has AIDS, doctors treat the various infections and cancers that have developed. They do this with drugs, radiation, surgery, and other medical procedures. In addition, most people with AIDS continue to take antiretrovirals in an attempt to slow the reproduction of HIV in their bodies. Doctors are not always successful in treating someone with AIDS. As AIDS patients become weaker and weaker, the opportunistic infections or cancers take over their body, resulting in death in most cases.

What Else Do People with HIV/AIDS Need?

Living with HIV/AIDS can be very difficult for each individual, their families, and friends. There are good days and bad days. Days when the person can't get out of bed and days when they are able to do everything they set

out to do. Thanks to today's drug treatments, most people with HIV/AIDS are living longer, happier, and productive lives.

In addition to drugs, people with HIV/AIDS can often benefit from other non-medical services. These include psychological counseling, legal help, financial services, and housing advice. Local and national **AIDS service organizations (ASOs)** have been created all across the country to give these services to people living with HIV/AIDS in their local communities.

7. THE HIV-POSITIVE PERSONAL SERVICE WORKER

By now, the chances are that you already know someone who has been living with HIV. Perhaps it is a family member, a friend, or a fellow coworker at the salon. You may yourself be infected with HIV.

A lot of people in the hair business have been affected by AIDS in one form or another. It is a rare personal service worker today who does not know someone in the business with the disease. In some cities, such as San Francisco, Miami, and New York, the salon industry has been hit hard.

Many salon owners and stylists have sponsored cut-a-thons and other fund-raisers to raise money for AIDS service organizations or for individual stylists with AIDS.

Should Someone with HIV Be Allowed to Work in a Salon?

Federal law prohibits employers to discriminate against individuals with HIV in the workplace. Salons, barber shops, and other related businesses are no exception. As long as proper disinfection procedures are followed, there is no reason why any individual who is HIV-positive should not be able to work in a salon or shop.

Who Should Someone with HIV Tell About Their Condition?

A personal service worker who has HIV has to decide who should be told about their infection. It is a good idea to tell the salon owner or manager first. This way, the owner can help with work schedules in order for the individual to make doctor's appointments or to help in other ways. The decision to tell other coworkers is often a difficult one and is best left up to the individual. Coworkers could be told in a group and educated about AIDS at the same time.

Should Someone with HIV Tell Their Clients?

Again, this is a very personal decision that only the individual can make on their own. The personal service worker faces a loss of business if clients are concerned about getting infected. Some stylists have been very open about their HIV infection with no negative consequences. A lot depends on the relationship the stylist has with their clients, the geographic location of the salon, and whether or not the stylist is becoming ill and cannot keep up their usual schedule. No personal service worker should ever feel required to tell their clients about having HIV.

One of My Coworkers Has HIV. What Can I Do to Help?

The best thing to do is simply to support the individual with a positive, caring, emotional response that shows compassion and concern. Allow the person to talk to you about the ups and downs of living with HIV. If they

become ill, offer to help them with daily chores or their pets. Just being there for them is sometimes the most important thing you can do for the person.

Whether or not you know someone at your shop or salon with HIV, get involved in AIDS activities that show your understanding and commitment. Volunteer your time at an AIDS service organization in your area. For example, you may want to offer free haircuts to persons with AIDS who are homebound and can't get out to see their regular stylist. You may also want to participate in cut-a-thons or other hair industry benefits for AIDS-related causes.

8. FLORIDA LAW

What Is The Current Legislation Regarding Confidentiality And HIV Discrimination?

One of the main tenets of the 1988 Omnibus AIDS Act (Chapter 88-380, Florida Statutes) is to promote voluntary HIV testing by ensuring that those who want to be tested may do so without fear of reprisal or discrimination. It also protects the rights of those individuals who test positive for HIV by ensuring that they remain in the workforce as long as they are able and that no measures be taken against them by employers, insurers, etc. The statute specifically reads as follows:

The Legislature finds that the use of tests designed to reveal a condition indicative of human immunodeficiency virus infection can be a valuable tool in protecting the public health. The Legislature finds that despite existing laws, regulations, and professional standards which require or promote the informed, voluntary, and confidential use of tests designed to reveal human immunodeficiency virus infection, many members of the public are deterred from seeking such testing, because they misunderstand the nature of the test or fear that the test results will be disclosed without their consent. The Legislature finds that the public health will be served by facilitating informed, voluntary, and confidential use of tests designed to detect human immunodeficiency virus infection. [Florida Statute #381.004, (1)]

A major element in the language of the Act concerns confidentiality. The results may not be given to anyone else without the tested person's permission, except in cases where the person's physician may need medical information for treatment purposes or there is a court order requesting such information. In some cases the doctor may decide to inform the person's sex or needle-sharing partners to protect their health. The Florida State Department of Health and Rehabilitative Services (HRS) can provide partner notification upon request from the person who was tested.

There are also certain procedures required by the Act concerning counseling, both before and after the test is performed. The pre-test counseling session is intended to give the person sufficient information about the virus, testing procedures, and the meaning of all possible results so that he or she is able to make an informed decision about being tested. After this information is given, the person can give "informed consent" to be tested. The law also specifies that consent must be completely voluntary and not forced. A 1991 amendment to the original Act states that it is up to the person providing the counseling and testing procedures to establish a "sound and reasonable standard" of HIV information, with the exception that **confidentiality** must be explained in all

cases. Other items recommended in the pre-test information include the following:

- (1) Voluntary nature of the test: the person may change his or her mind about being tested any time before the test is actually carried out.
- (2) Purpose of the test: to detect the presence of antibodies to HIV, *not* to establish the diagnosis of AIDS.
- (3) Procedures for testing: what tests are performed, how they differ, and the function of each in establishing HIV status; also, test limitations.
- (4) Meaning of test results: results may be negative, positive, or inconclusive; also, an explanation of what these results would mean to each individual.
- (5) Partner elicitation: the responsibility to identify sex and/or needle-sharing partners of one's positive HIV status.

Other protections for persons who wish to be tested for HIV or who are HIV-positive include employment and health care provisions. The law specifically states that employers may not discriminate against an employee who has been tested (regardless of the results) or whose status is HIV-positive. This provision also covers so-called "perceived status," which protects those who may be HIV-positive but asymptomatic. The anti-discrimination language covers such employment areas as hiring, compensation, duties and assignments, promotions, and bonuses. Also, employers may not require HIV testing as a basis for employment unless that employer can prove that being HIV-negative is a direct requirement of the specific job.

Health care facilities and their workers may not discriminate against patients based on their real or imagined HIV status. The 1991 amendment required health care workers to take HIV education sessions in order to get relicensed.

What Is The Current Legislation Protecting Public Health?

The 1988 Omnibus AIDS Act also protects the general public from deliberate infection by HIV-positive individuals. Persons who are HIV-infected and knowingly expose others to the virus may be criminally prosecuted. A puncture or any wound that involves exposure to blood may be grounds for legal action. The provision also applies to anyone who is HIV-positive and has sex without informing the partner of their status--such persons are guilty of a first-degree misdemeanor.

Persons who donate blood or tissue and do not report their HIV-positive status may be charged with a third-degree misdemeanor.

In cases where there has been exposure on the job to potentially infectious blood or body fluids, the person who is the source of the blood or fluid may be required to be tested for HIV. This "significant exposure" must be determined when employees (such as health care workers, law enforcement personnel, or emergency medical technicians) come into contact with potentially infectious substances.

What Are The Legal Requirements Of HIV Testing?

Informed consent must be obtained before anyone can be tested. The law also requires that two confirmatory tests must be performed on any blood sample that initially tests

positive before the results can be given to the subject. While blood donors who know they are HIV-positive can be criminally prosecuted for donating without revealing their status, the law does not require informed consent before donation.

The law requires that both pre- and post-test counseling must be *offered* before testing occurs and before results are given. The sessions are not required in order to obtain either the test or its results, but it must be **offered**. While the pre-test session provides the necessary information for informed consent, the post-test counseling session provides information about the results of the test (whether negative or positive), how behavior should be modified, the possible need for additional testing, and ways to protect one's health.

The law prohibits test results being given over the phone. Face-to-face disclosure is one of the requirements of the post-test counseling session, where confidentiality may be ensured. Test results may be given to a person's designated representatives if they have a signed release form, but the information cannot be given over the phone.

9. HIV TESTING AND COUNSELING

How Is Blood Tested To Confirm HIV Infection?

Testing for HIV is usually performed on a sample of blood from the subject. The blood is tested for the presence of **antibodies** to the virus, not the virus itself. Antigen testing or polymerase chain reaction (PCR), which tests for the presence of the actual infectious agent, is too expensive and time-consuming to be used for mass screening of the general public. However, there are several tests which identify the presence of antibodies that are commonly performed and relatively inexpensive. These tests are the ELISA, IFA, and Western blot. There are also home test kits on the market, where a dipstick can be used on saliva, urine, or other body fluids. These tests give a reaction in about ten minutes. However, the FDA has approved *only one* of these tests because of concern over their unreliability and possible transmission danger posed by fingerstick equipment. The approved test is called "Home Access Express HIV-1 Test System" and is manufactured by Home Access Health Corporation.

The first test to be performed on the blood sample is the enzyme-linked immunosorbent assay (ELISA). This is a highly sensitive test that reveals if antibodies are present. Because of its sensitivity, it can occasionally give a false positive reading--a small percentage of people may be told they are HIV-positive when they are not. For that reason, if the test result is positive, the test is repeated. If the reading is still positive, a supplemental or confirmatory test is performed.

A reliable supplemental test is the immunofluorescent assay (IFA). The person's blood is added to a slide prepared with HIV. It is observed through an immunofluorescent microscope to see how it reacts. The slide is then compared to control slides containing cells that have not been infected with HIV.

Another reliable confirmatory test is the Western blot. This test is more costly and time-consuming than the IFA, but still yields accurate readings. It tests for the individual proteins that make up the virus, and as such is labor intensive, not lending itself easily to mass public testing.

It is important to remember that an initial seronegative test result only means that the person's blood did not contain detectable antibodies *at the time of testing*.

It is possible that infection has taken place, but antibodies have not had time to develop in detectable amounts in response to the presence of the antigen. This is called the "window period." To be sure that infection is not present, the person should be tested again in six months, assuming he or she has not engaged in any risk behaviors during that time.

If the first ELISA test is positive, the test is then repeated. If the second ELISA test is also positive, a supplementary test is required under Florida law before the person can be given the official reading of seropositive. If the initial ELISA screening test is negative, no further testing is necessary. However, the person should be told about the window period and the need to be retested if there has been risk exposure. Sometimes the confirmatory tests are indeterminate (neither clearly negative nor positive). In that case, another blood sample should be drawn in three or four weeks, and the complete test series performed again.

What Are The Requirements For Pre- and Post-Test Counseling In The State Of Florida?

According to current Florida legislation, anyone desiring the HIV antibody test must be offered the opportunity for counseling, both before the test and after the results are received. Participating in the counseling sessions is not required in order to have the test done, but the opportunity for counseling must be offered. If a person chooses to be tested, he or she must sign a consent form allowing blood to be drawn. If the person chooses to be tested anonymously, he or she does not sign a consent form - their request is considered acceptable consent because they are not known by name or any other means of identification. Persons wanting to be tested should be strongly encouraged to accept the counseling session, because much valuable information is given in these sessions, and in the case where the test results are positive, a trained counselor can help the person accept the information and decide on a plan of action.

The primary goals of HIV counseling are to provide education that will help people avoid behaviors which put them and others at risk of infection. The counseling should be given in language and terms that people can understand.

Good counseling skills are essential to gather personal and sensitive information. One of the most important aspects of counseling is the establishment of a good relationship between the counselor and the person to be tested. Being nonjudgmental and creating a private, comfortable environment for the counseling session are important.

Risk assessment is an important function of the pre-test counseling session. First the counselor must find out why the subject wants to be tested, that is, if he or she has some basis for suspecting HIV infection. Asking straightforward, personal questions is a necessary part of the risk determination procedure. The counselor will want to find out if the person has been tested before, if he or she was sent by a doctor, what risky behaviors the person may have engaged in recently, what expectations the person may have about the test results, and if he or she knows how the test is performed.

The counselor also explains confidentiality, which means personal information and test results cannot be released without the person's written permission. In confidential testing, only those people with a clear "need to know," such as the counselor or the person's doctor, will have access to this information. In anonymous testing, these forms and permissions are not required, because test results are given on the basis of a numbered lab slip only, and no personal files are established for the person being tested.

The following list gives the standard information recommended by HRS to be explained to the person before testing:

- The purpose of the test
- The testing procedures to be followed
- What the results mean
- The limitations of the test
- How the results are used
- The voluntary nature of the test
- The right to withdraw consent before the test takes place
- Confidentiality concerning the test and its results

(Note: Only an explanation of confidentiality is required by the most current Florida Statutes)

Once the person consents to testing, the following is offered as part of the pre-test counseling:

- Infection prevention information (handouts, etc.)
- Explanation of partner notification, in the event of a positive test result
- Establishment of a plan of action, whether the results are positive or negative

At the close of the pre-test counseling session, the counselor will give the person an appointment time to return for the test results. The person may also receive a list of community resource people or groups to help with the anxiety that is natural during this waiting period.

When the person returns for the test results, the first thing the counselor should do is (1) confirm this is the person who was tested, (2) give the results immediately, and (3) stress the confidentiality of the information they are going to discuss.

Seropositive results. If the test results are positive, the counselor should be prepared to deal with a wide range of reactions such as guilt, anger, fear, relief, disbelief, and apathy. Occasionally a person may request a retest, although the reliability of the test series does not justify retesting.

A positive test means that antibodies to HIV were found in the blood sample. This means the person is infectious and can transmit the virus to others. It does NOT mean that the person has or will have AIDS. A complete medical examination is recommended for those who are HIV-positive, for only a doctor can tell the state of a person's health. The T4-cell count will help show the amount of damage to the immune system.

The HIV-positive person will be counseled to take the following steps:

- Protect his or her health: avoid infections (especially other STDs), alcohol, drugs, cigarettes, stress, poor nutrition, overwork, or other things that may further lower the immune system and keep them from making healthy lifestyle decisions.

- Obtain a complete medical evaluation, including tests for other STDs and TB.
- Avoid reinfection, especially the passing and receiving of body fluids. Also, use appropriate protection (condoms, etc.).
- Avoid travel to areas where communicable diseases and intestinal parasites are common. Also, try to avoid food contamination (salmonella, etc.).
- Keep all sores or open wounds clean and covered.
- Avoid sources of pet infection: wear gloves when cleaning fish tanks or kitty litter.
- If a drug user, avoid using illicit drugs and enroll in a treatment program.
- Contact community support groups.
- Understand that all sex and needle-sharing partners are at increased risk of HIV infection and should be informed about the possibility of exposure.

It is important to remember that the test counselor is not a therapist or mental health practitioner. The counselor will **refer** the person to the proper support services (medical, community support, mental health). These professionals can help the HIV-positive person with anxiety therapy, medical information on their health status, coping techniques, and emotional support.

Seronegative results. The counselor will stress the confidentiality of the information. The person will be encouraged to change any high-risk behaviors he or she may be engaging in. It is important to stress that they may not be virus-free if they have taken part in any high-risk activities within the last six months or window period prior to the test. Retesting within six months of the last possible exposure is recommended.

The person will be given a list of risk reduction behaviors such as the following:

- If possible, abstain from sex and drugs.
- Seek a mutually monogamous relationship, where both partners are known to be virus-free.
- Discuss HIV infection with your partner to correct any misinformation.
- Always use condoms during sexual intercourse unless you are in a mutually monogamous relationship where both of you are virus-free.
- If using drugs, enroll in a treatment program.
- Do not share needles.
- If needles are reused, disinfect thoroughly with a bleach and water solution, then rinse thoroughly in clean water.
- If female, seek family planning assistance. A woman with high-risk behavior who becomes pregnant also puts her unborn child at risk.
- Seek the help of referral support services, especially if there is difficulty in changing high-risk behaviors.

As with the seropositive post-test counseling session, the person will be asked to establish a plan of action, in this case to remain virus-free. Handouts with information on condom use, resources and hotlines, and basic facts are usually given to the person at the end of the session.

SELF-ASSESSMENT

Choose True or False for each question and mark your answers on the Self-Assessment answer sheet on page 67.

- All individuals who test positive for HIV have AIDS.**
 TRUE FALSE
- Wet (“French”) kissing is considered an unsafe sexual practice with a high-risk of spreading HIV.**
 TRUE FALSE
- Gloves should be worn by professionals when providing facials to customers.**
 TRUE FALSE
- Combs dropped on the floor should not be used again until they are disinfected.**
 TRUE FALSE
- When making a bleach spray for use in decontaminating surfaces, one should combine equal parts of bleach and water.**
 TRUE FALSE
- When providing waxing services, dipsticks may be used on several clients before throwing them away.**
 TRUE FALSE
- Condoms made from natural materials (such as Lamb intestine) have not been proven effective in preventing HIV transmission.**
 TRUE FALSE
- Blood that is tested for HIV is tested for the presence of antibodies to the virus, not the virus itself.**
 TRUE FALSE
- Florida law prohibits giving HIV test results over the telephone.**
 TRUE FALSE
- HIV-positive personal service workers are required by law to inform their clients of their HIV status.**
 TRUE FALSE

**SECTION IV: CHEMICAL MAKEUP OF
HAIR, SKIN AND NAILS
and
THE SIGNIFICANCE OF pH FACTORS IN
COSMETOLOGY**

The cosmetologist is ultimately responsible for the professional care, treatment and safety of clients. Cosmetologists routinely use products that contain harsh chemicals in curling, relaxing, tinting and lightening the hair. However, as professionals, we must be aware of the effects of using these products both correctly and incorrectly on the hair, skin and nails. When used and applied incorrectly, we must also be able to reverse the negative results. Having a working knowledge of the pH scale, we can protect the consumer from incompetent practices.

The Hair

Before pH is fully explained, a quick review of the anatomy of the hair shaft is in order. The hair is composed of cells arranged in three layers:

- **Cuticle.** The outside horny layer is composed of transparent, over-lapping, protective, scale like cells that point away from the scalp toward the hair ends. Chemicals raise these scales so that solutions such as chemical relaxers, hair color, or permanent wave solution can enter the hair cortex. The cuticle protects the inner structure of the hair.
- **Cortex.** The middle or inner layers that give strength and elasticity to the hair. It is made up of a fibrous substance formed by elongated cells. The cortex is composed of numerous parallel fibers of hard keratin, referred to as polypeptide chains. These parallel fibers are twisted around one another in a manner resembling the twisting of the fiber strands in a rope. This layer contains the pigment that gives the hair its color.

- **Medulla.** The innermost layer is referred to as the pith, or marrow, of the hair shaft and is composed of round cells. The medulla may be absent in fine and very fine hair. It is present in all wavy and curly hair. The tighter the curl, the stronger the medulla.

(Source: The Milady Standard Textbook of Cosmetology)

Changing the shape of the hair permanently or temporarily will affect the structure of the hair.

An area of concern for cosmetologist involves the pH scale. pH is an abbreviation for potential for hydrogen, which is a measure of the acidity or alkalinity of a solution, numerically equal to 7 for neutral solutions, increasing with increasing alkalinity and decreasing with increased acidity. The common pH scale in use ranges from 0 to 14, 0 being a strong acid and 14 a strong alkaline (lye). A pH of 7 is neutral, indicating an equal concentration of acid and alkali. In cosmetology, pH is used to predict a solution's or a liquid's ability to affect the hair's cortex and/or cuticle.

An expensive and sensitive machine called a pH meter can measure the exact pH of a solution. However, the approximate pH of a solution can be measured using chemically treated litmus papers. When the litmus paper is dampened by a solution, the paper turns a specific color and is measured by matching that color value to an accompanying color-coded scale. Litmus paper and other measuring products can be obtained from many beauty supply houses or chemical companies.

The strength of an acid or alkaline solution is mathematically determined. That is, each increasing or decreasing number is ten times stronger than the one next to it. A pH of 6 is ten times stronger than 7, with 7 being neutral. A pH of 5 is ten times stronger than 6, and 100 times stronger than 7, and so on. Ultimately, a pH of 0 and a pH of 14 are BOTH 10,000,000 times stronger than pure water (see **Table 1**).

pH	Product	Times stronger than 7.0 (pure water)
0		10,000,000
1		1,000,000
2		100,000
3		10,000
4		1,000
5		100
6		10
7		0
8		10
9		100
10		1,000
11		10,000
12		100,000
13		1,000,000
14		10,000,000

One can see how a strand of hair will be little affected by submersing it in water overnight. However, the same strand left in a solution of 14 would be totally dissolved in a short period of time.

To more fully understand the effects of pH on the hair, we must first examine the structure of the hair. It is made up of several elements, including oxygen, hydrogen, carbon, nitrogen, sulfur and phosphorus in a protein material called hard keratin, which is a waterproof substance. Hard keratin resists the chemical action of many agents that would be harmful to soft keratin, which is the skin. Hair structure is composed of three types of bonds:

- **Chemical sulfur bonds or “S” bonds.**
- **Physical hydrogen bonds or “H” bonds.**
- **Disulfide bonds are two sulfur bonds joined together.**

The H bonds can be rearranged temporarily by wetting, setting and drying the hair on rollers or using a blow dryer. When the hair is wet again the H bonds revert to the hair’s previous form. When the S or disulfide bonds are changed, a highly alkaline solution must enter through the cuticle and into the cortex of the hair, changing the bonds so they can either be straightened (relaxed) or curled (permanently waved). The highly alkaline product must then be rinsed thoroughly out of the hair and an acidic solution is applied to bring the hair back to an acceptable pH range.

When the cuticle is the portion of the hair to be affected, an acid solution is used. Acid solutions harden and shrink the cuticle, giving the hair a smooth, shiny look. Products that are “conditioners” for the hair may contain acidic ingredients, such as lemon juice or vinegar, which measure below 7 on the pH scale. When the cortex needs to be changed to a straight or curly form, an alkaline solution is used. This softens and swells the hair so the product can permanently straighten the hair by breaking all the chemical bonds or curl the hair by softening the chemical bonds so the hair can conform to the shape of the permanent wave rod or any other tools used. Once the hair is softened and the permanent waving solution is removed by thorough rinsing, an acidic neutralizing solution containing either hydrogen peroxide or sodium bromate (pH=3.5-4.5) is applied to harden and shrink the hair to the desired shape.

In the early years of permanent waving, the alkaline cold wave solutions had to be formulated to a pH of between 9.2 and 9.5. No curl would take place below 9.2 and if the solution reached 9.6 or above, the product was too strong and chemical burns on the scalp would result. As with all chemicals, professional analysis is paramount to the success of the application. Recent improvements in permanent wave solutions include the acid balanced permanent wave. The acid balanced solution used to change the S bonds is glyceryl monothioglycolate rather than the traditionally used ammonium thioglycolate. This product

necessitates the use of heat for the product to penetrate the cuticle and be absorbed into the cortex. Recent research has improved the perm wave solution quality and has produced a number of useful products like neutral and acid waves that greatly reduce the many problems encountered using the primitive chemicals in the early stages of development. Since permanent waving is an essential salon service, it is especially important that the professional cosmetologist become knowledgeable of pH factors in alkaline or acid permanent waving and selects the best method for the client's particular hair quality.

Chemical hair relaxing products have become popular to permanently relax overly curly hair and to texturize straight hair, whether it is from fine to coarse in texture. It is best to first understand what happens to the cortex when the relaxer, in its cream form, is applied to the hair. Cream relaxers usually contain sodium hydroxide in the form of lye. Lye is produced by immersing a negative electrode into animal protein and applying negative Galvanic current through the substance. Negative Galvanic current produces an alkaline affect on protein. The resulting product is lye or sodium hydroxide. The pH of sodium hydroxide based cream relaxers is between 10 and 14. While the cream passes through the cuticle, it comes in contact with the cortex. The chemical relaxer softens and swells the hair, causing the S bonds to be broken and stay permanently broken, never to be permanently reformed in a curly state. When the cream relaxer is rinsed from the hair, lanthionine bonds are permanently formed. The hair can never be chemically curled while the lanthionine bond is present. The hair must grow out; the re-growth will be the only area able to accept chemical reactions (for instance, during a retouch).

After the chemical relaxer is removed from the hair by thorough rinsing, the hair must be shampooed with a neutralizing shampoo to bring the hair back to an acceptable range (pH=4.5-5.5). Never use a neutralizer as in permanent waving because these products are

incompatible and are not designed by the manufacturer to be used in this manner.

A word of caution, in that professional judgement will protect the consumer. Mild does not mean weak when it comes to chemical hair relaxers. Although mild relaxers contain less sodium hydroxide than regular or super, the percentage of the product can vary as little as ½% to 1%. This is only 5 one-thousandths to 1 one-hundredth of the total product. Read the labels and always follow the manufacturer's instructions. In general, the higher percentage of sodium hydroxide in the relaxer, the higher the pH factor and the higher possibility of damage to the hair if the product is left on too long. Extreme care must be taken to avoid getting chemicals in the eyes and ears. Even though many relaxers are referred to as "no-base," it is recommended to first base the scalp with products specifically manufactured as scalp protectors. Products such as "grease" and "hair food" should be avoided as they contain chemicals that may speed up the relaxer process. Also, oil sheen should be not be sprayed on an area that is burning because it contains alcohol and other chemicals that will initially cool the area but in the long run cause a worse burn than if the area was rinsed with cool water. A chemical relaxer, if left on the hair too long, becomes a depilatory, dissolving the hair completely.

Another precaution is to be aware of what "no-lye" means when it's on a relaxer label. Like "mild," no-lye doesn't mean weak, either. The products contain lithium hydroxide, potassium hydroxide or, most commonly, calcium hydroxide in cream form and guanidine carbonate in liquid form. Manufactures usually package the cream and guanidine carbonate separately, not pre-blended, at the factory. The liquid guanidine carbonate is mixed with the cream calcium hydroxide. The resulting product is guanidine hydroxide, with the calcium hydroxide converting to calcium carbonate, which is rinsed away with water. The products are unstable once they are mixed together and should be used immediately. If it were safe and

proper to mix these products together for long periods of time, the manufacturer would do so, saving money by packaging the two ingredients together. The strength of the mixed relaxer increases over 12 hours, becoming ammonia and urea that will cause damage to the hair. It is imperative to avoid scalp and hair damage when using these products. Read and follow manufacturer's instructions completely.

(Source: ShopTalk Magazine)

Hair coloring products have traditionally been very popular. Today's products include temporary, semi-permanent, demi-permanent, non-oxidative permanent and permanent.

Temporary rinses are acidic and generally leave the hair in good condition, lasting from shampoo to shampoo. This type of hair color has the largest pigment molecules. The molecules are too large to pass through the cuticle into the cortex. The molecules lay on the hair shaft. They tend to rub off on clothing and any thing else the treated hair comes in contact with.

A word of caution to salon professionals: although a patch or pre-disposition test is required before the application of most types of hair color (see **Figure 1**), Clients are unlikely to trek to the salon for the patch test 2 days before the service. How you handle this Federal requirement is up to you.

Semi-permanent colors last longer on the hair, gradually fading back to the natural color, depending on the product. This category of products is used to deposit color, since no lightening action is possible. These are mildly alkaline with a pH of 8.0 to 9.0. The alkali, usually containing weakened ammonium thioglycolate with the color, swells the imbrications of the cuticle and allows limited penetration of the color molecules into the cortex. Newer semi-permanent colors are manufactured with polymers. These products may require heat for the colors to semi penetrate into the cuticle so that the color will be absorbed

Figure 1. Predisposition Test

Allergy to aniline derivative tints is unpredictable. Some clients may be sensitive, while others may suddenly develop sensitivity after years of use. To identify an allergic client, the United States Federal Food, Drug, and Cosmetic Act prescribes that a patch or predisposition test be given 48 hours prior to each application of an aniline derivative tint or toner. The tint used for the patch test must be the same type as will be used for hair color service.

Procedure:

1. Select a test area: behind one ear extending to the hairline or at the inside of the elbow.
2. Using mild soap, cleanse an area about the size of a quarter.
3. Dry the area.
4. Prepare the test solution according to the manufacturer's directions.
5. Apply to the test area with a sterile cotton swab.
6. Leave the area undisturbed for 48 hours.
7. Examine the test area.
8. Note the results on the client's record card.

Source: Milady's Standard Textbook of Cosmetology

partially into the cortex. The polymer based semi-permanent colors last longer than the traditional semi-permanent colors.

Demi-permanent products mix the color liquid with a weakened form of hydrogen peroxide or sodium bromate in either a powder or liquid. These products also semi penetrate into the cortex, but last longer than the semi-permanent that isn't mixed. Damage can occur if the product is applied incorrectly or if heat is used

when not recommended by the manufacturer. An acid-balanced conditioner must be used after the product is removed in order to bring the pH of the hair to an acceptable level.

Non-oxidative permanent color consists of three types:

- **Vegetable tints**
- **Metallic tints**
- **Compound dyes**

Vegetable tints consist mainly of henna, from a plant originally grown in Egypt. The plant is ground to form a powder that is mixed with water to form a paste that has an acidic pH. Unfortunately, the resulting coating on the hair shaft is uneven, rendering uneven penetration of chemical solutions. Henna fades with frequent shampooing.

Metallic tints have a reaction with the sulfur in the hair, forming metallic salts. Available mainly in grocery and drug stores, the products are used by lay persons and are popular because the hair's reaction to the product is progressive; darkening the hair when used repeatedly over a period of time. The salts produced have adverse reactions with the oxidation processes used by professional cosmetologists.

The metal reacts in a way to cause swelling of the hair, burning and possible scalp damage. The use of these products is limited and not recommended for professional use.

The combination of metallic tints with vegetable tints results in a product called compound dyes. Along with the combination comes all the adverse effects of the separate products, but the result is a color that lasts longer.

Permanent hair color usually comes in two containers, one with the color product and the other hydrogen peroxide (developer), which has a pH of 3.5-4.5. When the acidic hydrogen peroxide is mixed with the color product (which contains ammonia), the resulting application has

a pH of 9.0-10. As oxygen is released from the developer into the cortex, the color molecules that were small enough to pass through the cuticle expand and become too large to pass back through the cuticle during rinsing. The result is permanent and lasts until the color treated hair is cut off.

In most tinting products, ammonia is part of the dye base because it is alkaline and starts the process in the following way:

- **As an alkali, it swells the cuticle, allowing molecules in the tint base to pass into the cortex.**
- **It creates the alkaline conditions needed to develop the color.**
- **It causes the hydrogen peroxide to release oxygen for the oxidation of the paradyes.**

Manufacturers have made great improvements in hair color; however, great care must be taken to normalize the hair after the color treatment, just as in semi permanent color.

Changing the melanin to oxymelanin means decolorizing, usually called bleaching, or lightening, the hair. These strongly alkaline products are either crème or powdered lightener mixed with hydrogen peroxide. The resulting mixtures form a crème or paste that is applied to the hair to diffuse the melanin. The oxidizers required to lighten the hair need to be highly alkaline to achieve this effect in that it defeats the practicality of lessening its severity. Although at the time of the lightening service, the client's hair is in relatively good condition, it deteriorates over time. Never apply lightening products to the hair and scalp if abrasions are present or if the scalp is irritated. Professional advice is needed to prescribe quality conditioning, whether in the home or the salon.

The Skin

The skin is the largest organ of the body. Its waterproof membrane is the first line of defense against invading bacteria and chemicals. The outer layer, or epidermis, is of concern to the cosmetologist in that keeping it soft and pliable is essential to good health. When harsh chemicals, whether acidic or alkaline, come in contact with the skin, the cosmetologist must be able to counteract these effects and return the skin to its healthiest state.

A light film of moisture, referred to as the acid mantle, covers the skin. By taking a pH reading from the acid mantle, the resulting pH factor is determined to be approximately 4.5 to 5.5. Hair products having the same pH as skin are said to be acid-balanced and many of these products now reveal the pH right on the label. However, there are many alkaline products on the market that, when applied to the skin, will destroy the acid mantle. When this occurs, the skin becomes dry or itching, flaky, or cracking. On the other hand, the use of acid products can lower the pH of the skin and create problems similar to those caused by alkaline products. Any product that is used on the skin's surface should perform its function without causing the pH to exceed 5.5 or fall below 4.5. Any time the pH exceeds these limits, the acid mantle is destroyed and problems will occur. The skin's sulfur content is lower than the hair's and is, therefore, softer and more prone to chemical damage. Continued use of harmful products intensifies the damage.

The most common form of damage to the skin for cosmetologists is the repeated exposure to harsh chemicals on the hands. The resulting condition, contact dermatitis, can be avoided by using gloves to erect a barrier between skin and chemical. Cosmetologists who apply relaxer or perm solution without gloves risk skin damage. Many cosmetologists are allergic to the powder in latex gloves, so care should be used to avoid these gloves, utilizing the hypoallergenic kind instead.

Products used on the skin should definitely be acid-balanced. These include facial soap or cleanser, facial creams for moisturizing and products used in make-up. Caution must be exercised during the use of chemical depilatories, with a pH of 10.0 or higher, on the skin. Apply an alcohol free moisturizer after removing the depilatory. Wrinkle remover products, not regular face creams, are highly alkaline, swelling the surrounding tissue so the wrinkle seems to disappear. Continued, repeated usage could prove damaging. Protection of the skin's acid mantle will provide the reward of healthy skin. When in doubt, measure a product's pH before using it on a client's skin.

The Nail

Made of the same protein material as skin and hair, the nail is hard keratin. However, even though it is harder than the skin and hair, it, too, can suffer damage from the effects of coming into contact with harsh chemicals. The skin that overlaps the nail is the cuticle. Chemicals can seep into these folds and cause residual damage.

The number of nail products and artificial nail companies has sky-rocketed in the last few years alone. Each company has its own special product or procedure, however the products fall into several basic categories which include:

- **Acrylic powders**
- **Primer**
- **Liquid monomer**
- **Antiseptic**
- **Brush cleaner**
- **Cuticle softener or remover**
- **Nail polish remover, both acetone and non-acetone**

Many of these products can be damaging since they can have a pH of 11.0 or more. Nail polish remover is a strong solvent. Improper and repeated use can cause skin irritation. The skin around the cuticle can be extremely tender.

Nail extension products must be used with great care. Artificial nail products, such as primer, can be highly acidic, burning the skin around the

nails upon contact. Nail liquid or monomer when mixed with the powder forms a strong acrylic product formed into the shape of the nail. When used incorrectly, the chemical process that these chemicals go through to form the hard nail, can cause heat to form, burning the nails. Plastic gloves and safety glasses should be used when applying artificial nail extensions.

The cosmetologist must take great care in safeguarding clients from the harmful effects of chemical products used in the salon. The first line of defense in protecting the client from harm is a careful hair, skin and nail analysis along with a client consultation. By observing the scalp for irritations, burns or abrasions, the cosmetologist can avoid further damage. Nail services must be withheld if infection and/or fungus are present. Further damage will occur when artificial nail products are applied over skin anomalies. Careful questioning of the client about prior services and former situations can prevent simple acts of malpractice that can lead to claims and law suits. Don't be afraid of losing a client by refusing to perform a service. Your reputation will be intact for being professional and protecting the client. By being aware of the pH of a product, the cosmetologist can use this education to properly select and apply products in a manner to preserve and protect the health of consumers.

SELF-ASSESSMENT

Choose True or False for each question and mark your answers on the Self-Assessment answer sheet on page 67.

31. A chemical solution that measures a pH value of 14 is considered "weak."
 TRUE FALSE
32. If left on the hair too long, a chemical relaxer turns into a neutralizer.
 TRUE FALSE
33. A chemical service, such as relaxing or lightening the hair, should be avoided when scalp abrasions are present.
 TRUE FALSE
34. An alkaline product is used to affect the root portion of the hair shaft.
 TRUE FALSE
35. Solutions with pH values of 0 OR 14 are said to be "neutral."
 TRUE FALSE
36. During a chemical service, the bonds that are broken and permanently rearranged are the sulfur bonds.
 TRUE FALSE
37. The main ingredient in modern permanent cold wave solutions is ammonium carbonate.
 TRUE FALSE
38. Acid solutions harden and shrink the cuticle, giving the hair a smooth, shiny look.
 TRUE FALSE
39. During a retouch, relaxer should be applied to the root area, then overlapping the shaft.
 TRUE FALSE
40. The test area for a predisposition patch test should be damp when the patch is applied.
 TRUE FALSE

SECTION V: ENVIRONMENTAL ISSUES CONCERNING PERSONAL PROTECTION AND THE DISPOSAL OF HAZARDOUS CHEMICALS

Cosmetologists are licensed to protect the consumer from incompetent and, therefore, dangerous individuals. It is also the cosmetologist's responsibility to protect themselves from over-exposure to the chemicals that they come in contact with on a daily basis. Most chemicals used in the salon by cosmetologists are not harmful in the small, individual dosages used when treating a client. However, many salons buy products in bulk to take advantage of lower prices. Exposure to large dosages during an accidental spill or contamination by other chemicals can lead to injury, sickness or death.

Products containing chemicals that are hazardous are listed on the Material Safety Data Sheets (MSDSs) mandated by the Department of Labor's Occupational Safety and Health Administration (OSHA). Each product on the market for use in a salon must have an MSDS to provide the cosmetologist, nail tech and esthetician with the information about the product which could ultimately be hazardous and/or cause harm to the client AND cosmetologist should an accident occur. The format of an MSDS for a product includes the following information pertaining to its ingredient's:

- **Identity**

The name of the product as sold and as labeled.

- **Chemical product identification and company information**

Manufacturer's name, address, telephone number for emergency or general information

- **Hazardous ingredients information**

A hazardous ingredient is one which meets one or more of the following criteria:

1. Listed in the annual registry of toxic effects of chemical substances, or is known to be toxic within the parameters of that registry.

and/or

2. Has an OSHA established, 8-hour time weighted average permissible exposure limit (PEL), or acceptable ceiling, or an American Conference of Governmental Industrial Hygienists (ACGIH) threshold

limit value (TLV), and by nature of the product or its known use, is likely to become airborne.

and/or

3. It contributes to one or more of the following hazards of the product:
 - A. Flash point (temperature at which it will catch fire) below 93° C. (CC), or subject to spontaneous heating or decomposition.
 - B. Causes skin burns. (DOT)
 - C. Strong oxidizing agent. (DOT)
 - D. Subject to hazardous polymerization.

Each ingredient meeting one or more of the above criteria listed above is known to be present at a level of at least one percent (1%) or more. Ingredients which are claimed to be carcinogens (a known cause of cancer), teratogens (causes physical defects in developing embryos), mutagens (induces genetic changes or mutations in the DNA chromosomes, which are the blueprint of life, in individual cells that can affect future generations if the sperm or egg cells are affected), or causative agents of other disorders are listed if known or believed to be present, provided that the data supporting such claims are considered valid.

Each hazardous ingredient is listed by chemical, generic, or proprietary name. Its level in the product is expressed as a percentage or by other means as identified.

- **Hazards identification**

Physical/chemical characteristics such as:

- ◆ Boiling point: For liquids at 20° C and 760 mm of Hg unless other wise specified.
- ◆ Vapor pressure: If liquid at 20° C or is sublimates.
- ◆ Vapor density: For the volatile portion of the product.
- ◆ Specific gravity: If known, based on water = 1.
- ◆ Melting point: If known, expressed in degrees F or C.
- ◆ Evaporation rate: If known, indicated with reference to butyl acetate as 1, unless otherwise stated.

• Fire and Explosion Data

How a chemical reacts to outside stimuli:

- ◆ Flash point: A method and temperature are given, if applicable.
- ◆ Flammable limits: LEL = Lower explosion limit for the component with the lowest value; UEL = Upper explosion limit.
- ◆ Special fire fighting procedure: Indicates any equipment needed to protect firemen from toxic products of combustion or if water is not to be used.
- ◆ Unusual fire and explosion hazards: Hazards not covered by other sections shown here.

• Reactive data

- ◆ Stability: Indicates if stable under normal conditions and conditions to avoid.
- ◆ Incompatibility: Materials to avoid.
- ◆ Hazardous polymerization: Conditions to avoid hazardous polymerization resulting in a large release of energy.
- ◆ Hazardous decomposition products: Indicates toxic by-products of burning, or reacted material.

• Safe handling and usage

Recipients of this data sheet should consult the OSHA safety and health standards found in 29 CFR 1910, particularly sub-part G – occupational health and environmental control and sub-part I – personal protective equipment, for general guidance on control of potential occupational health hazards.

Exposure Information: Given in general terms, local and systemic effects to the eyes, skin, if material is inhaled or ingested, unless not applicable due to the physical form of the product.

• Control measures

Personal protection: Defines reasonable precautions to be taken and the methods of clean up to be used in the event of spillage of the product. Consult federal, state, and local regulations for accepted procedures and any reporting or notification requirements.

Other areas of concern that may be on an MSDS include:

- **Physical/chemical properties**
- **Stability and reactivity**
- **Toxicological information**
- **Ecological information**
- **Disposal information**
- **Transportation information**
- **Regulatory information**
- **Other pertinent information for safe handling**

The hazardous ingredients listed on the MSDS are not harmful to personal health unless they come in contact with or enter the body. The most common routes of entry are by:

- **Inhalation:** gas vapors and other airborne particles once in the lungs then enter the blood stream.
- **Eye contact:** can cause irritation or major injury if perforated by a heavy contact or burned by heat or chemicals. Wear safety goggles to protect the eyes.
- **Skin contact absorption:** can cause local irritation, rashes, and/or heat or chemical burns which could be permanent or temporary. Some chemicals are absorbed by the skin and enter the blood stream which may cause damage to nerves, organs, tissues and red blood cells. Always wash your hands before using the restroom as the residual chemicals on your hands could cause skin irritation or burns to sensitive areas of the body.
- **Ingestion:** entering the body orally by contaminants coming into contact with food or drink. A little probably doesn't cause harm, however, repeated exposure over time can cause toxic effects or death.

When an accident or medical emergency that is life threatening occurs, call 911 for help. It is better to call 911 and overreact, than to cause harm by inaction.

The sections of the MSDS that are of interest to the cosmetology industry are the ventilation, hazard information, fire and explosion data, safe handling and usage, and personal protection. While all of the preceding information is important, the MOST important to the cosmetologist is personal protection; reducing and ultimately avoiding exposure to hazardous materials. Exposure controls

provided by employers should include ventilation, training, labeling and providing warning devices, such as carbon monoxide detectors. Personal protective equipment that should be provided for the employee by the employer in the salon can include ventilators or face masks, safety glasses, goggles, gloves, aprons, and, if needed, boots. It is the employees' responsibility to use the equipment provided by the employer.

Reading and following the MSDS requirements for the disposal of large amounts of hazardous materials is useful in the event of a spill or other mishap. However, quantities used in the salon can be disposed of in an environmentally responsible way by simply rinsing all containers thoroughly with cool water.

Each salon should have a recently stocked first-aid kit. An emergency plan should be in place to happen a catastrophic event, such as fire, flood, and severe weather. If feasible, back up generators to provide power when necessary.

A blood spill is when a person is cut or injures and experiences any loss of blood. Always wear gloves before touching another person's blood. Dispose of any and all articles that have been in contact with the blood in sealed containers if they cannot be cleaned and disinfected with hospital grade products. Clean all areas that the blood touched. Never assume by a person's appearance that they are free from communicable diseases. As discussed in the AIDS portion of this booklet, viruses can lay dormant for years before manifesting symptoms. Treat all incidents with care. Don't discriminate because someone looks healthy.

All salons must be properly ventilated since many of the products used in the salon have low vapor pressures (this causes them to evaporate quickly, often using a hazardous, flammable chemical such as alcohol) or be aerosol. The exact wording is in the Florida Board of Cosmetology Laws and Rules booklet, dated February 23, 1999.

"Rule 61G5-20.002 Salon Requirements, 1. Ventilation and Cleanliness: Each salon shall be kept well ventilated. The walls, ceilings, furniture and equipment shall be kept clean and free from dust.... Each salon which provides services for the extending or sculpting of nails shall provide such services in a separate area which is adequately ventilated for the safe dispersion of all fumes resulting from the services."

Salons must comply with the above law, however, other state local building codes pertaining to ventilation where chemicals that evaporate quickly are used may be more stringent and must also be followed or risk a fine.

In the Chemical Makeup section of this continuing education, client protection from strong chemicals was described. In this section, you, the cosmetologist, must recognize hazards to your health. Take the proper measures to preserve and protect your ability to provide professional service to clients in an environmentally responsible manner. Your future in the industry can be safe and productive when established federal, state and local guidelines are followed.

SELF-ASSESSMENT

Choose True or False for each question and mark your answers on the Self-Assessment answer sheet on page 67.

41. The Occupational Safety and Health Administration is the agency that requires the use of Material Safety Data Sheets in the salon?

- TRUE FALSE

42. Inhalation, eye contact, skin contact absorption and ingestion are the four most common methods by which contaminants enter the body?

- TRUE FALSE

43. When a serious accident occurs, you should get the injured person to walk right away.

- TRUE FALSE

44. Containers used for holding small quantities of hazardous materials in the salon should be thoroughly rinsed with wet sanitizer before disposal.

- TRUE FALSE

45. Salons are required to have proper ventilation to reduce the amount of fumes in the air.

- TRUE FALSE

SECTION VI: FLORIDA WORKERS' COMPENSATION LAWS & THEIR EFFECT UPON COSMETOLOGISTS

I. Introduction

What is "workers' compensation?"

Workers' compensation is a statutory scheme to provide for the payment of compensation and medical care to employees injured on the job.

Does workers' compensation affect the employees' right to sue the employer for personal injury or death?

Before the Florida Workers' Compensation Act ("Act") was enacted, the only way that an employee could recover damages for an injury received on the job was to sue the employer. This type of suit required the employee to prove that the employer was negligent or that the employer had done something wrong. Because negligence often could not be proven, many injured employees were left with no way to obtain medical care and no way to support themselves or their families. On the other hand, a number of injured employees who were able to prove that the employer had been negligent received damage awards higher than perhaps the injury warranted.

The Act is a trade off. Generally, the Act provides that employees who are injured on the job are entitled to compensation benefits without having to prove that the employer was at fault. By the same token, an employee injured on the job who is able to recover workers' compensation benefits cannot sue the employer for the personal injury even if the employer was negligent. The workers' compensation benefits are the employees' sole remedy.

How is "workers' compensation" funded?

One of two ways. The most common way is to obtain workers' compensation insurance. The other way is to be self-insured. § 440.38, Fla. Stat.

How does an employer become a "self insurer?"

This is controlled by the Division of Workers' Compensation. An employer seeking to be approved as a self insurer must provide proof to the division of the ability to pay compensation benefits if such claims arise. As a condition of

approval, the division may require the employer to deposit an indemnity bond or securities in an amount set by the division to secure prompt payment of workers' compensation claims. § 440.38, Fla. Stat.

II. Workers' Compensation Coverage.

Are all employers required to provide workers' compensation benefits for their employees?

Yes, with a few exceptions. A sole proprietor, partner, or officer of a corporation may elect to exempt themselves from coverage. Thus, generally, a self-employed cosmetologist may elect to exempt herself or himself from workers' compensation coverage. See § 440.05, Fla. Stat. However, if that same cosmetologist employs other people, then he or she is liable to provide workers' compensation benefits for the employees.

Of course, a sole proprietor, partner, or corporate officer may elect to be included as one of its own employees. This means that if the sole proprietor, partner, or corporate officer is injured on the job, he or she may claim workers' compensation benefits.

Does the Act require that independent contractors be covered?

In the case of cosmetologists, no. The difficulty is determining whether a cosmetologist's arrangement with the salon owner establishes him or her as an employee or an independent contractor.

What factors distinguish between an employee and an independent contractor?

1. The Act defines "employee" as any person engaged in any employment under any appointment or contract of hire or apprenticeship. Such an arrangement may be expressed or implied, oral or written.
2. The Act and case law identifies a number of factors that can be considered in determining whether a worker is an independent contractor. The following factors all favor the conclusion that the worker is an independent contractor.
 - a. The worker maintains a separate business with his or her own work facility, equipment, materials, tools, etc.

- b. The worker holds or has applied for a federal identification number.
- c. The worker performs or agrees to perform specific services or work for specific amounts of money and controls the means of performing the services or work.
- d. The worker incurs the principal expenses related to performing the service or work.
- e. The worker is responsible for the satisfactory completion of the work or services performed and can be held liable for failure to complete the services.
- f. The worker receives compensation for services performed on a commission basis or on a per-job basis or competitive bid basis, and not on any other basis.
- g. The worker may realize a profit or suffer a loss in connection with performing the work.
- h. The worker has recurring or continuing business liabilities or obligations.
- i. The success or failure of the worker's business depends on the relationship of business receipts to expenditures. That is, the success of the worker's business is based upon a simple profit analysis.

See § 440.02(14)(d), Fla. Stat.

- 3. The following factors all favor the conclusion that the worker is an employee and thus, must be provided workers' compensation benefits if injured:
 - a. The worker has no control over the days or number of hours worked or the scheduling of those hours.
 - b. The worker must adhere to a dress code established by the employer. *See e.g. La Grande v. B & L Services*, 432 So.2d 1364 (Fla. 1st DCA 1983).
 - c. The worker performs his or her duties with the employers' tools.
 - d. The worker is compensated by payment of wages. *See Gidney Auto Sales v. Cutchins*, 97 So.2d 145 (Fla. 3^d DCA 1957).
 - e. The worker's taxes are deducted from his paycheck and paid by the employer.

Do any of the criteria listed above conclusively determine whether a worker is an employee or an independent contractor?

No. The lynchpin to making the determination whether a worker is an employee or an independent contractor is the degree of control that the employer has over the worker.

Is there any way to definitely establish that my particular employment relationship is that of employee or independent contractor?

Yes. A cosmetologist is conclusively presumed to be an independent contractor if he or she provides the salon owner with an affidavit stating that he or she meets the requirements of § 440.02(14)(d), set forth in II(c)(2) above AND the cosmetologist presents a valid certificate of workers' compensation covering himself or herself OR a valid certificate of exemption issued by the division.

What are the consequences of a cosmetologist conclusively establishing himself or herself as an independent contractor?

For purposes of workers' compensation, there are basically three consequences:

- 1. The salon owner is not required to provide workers' compensation benefits to an injured independent contractor.
- 2. An injured independent contractor is not entitled to claim workers' compensation benefits.
- 3. An independent contractor may sue the salon owner for personal injury and if successful, can recover substantial damages. In other words, the salon owner is not immune from suit by injured independent contractors working in the salon.

EXAMPLE: *Janie works in Bob's salon. While working at the salon, Janie slips and falls in water that had accumulated from a leaky shampoo bowl. She is injured and unable to work. What are her options? If Janie is an independent contractor, then she is not entitled to receive workers' compensation benefits. She may, however, sue Bob for negligently failing to maintain the salon in a safe condition or some other theory. If, on the other hand, Janie is an employee, then the only remedy that she has is to file a workers' compensation claim against Bob's compensation carrier.*

Other exclusions.

Are recreational or social activities associated with the salon “compensable” (“Compensable” means that an injury suffered by an employee during those activities will entitle the employee to workers’ compensation benefits.)?

No, not unless the recreational activity is mandatory and produces a substantial, direct benefit to the employer. § 440.092, Fla. Stat.

EXAMPLE: A salon owner organizes a group picnic for all of the employees and their families, which the employees may or may not attend as they choose. An employee is injured during the sack races. This injury is not compensable.

EXAMPLE: A salon owner is opening a new salon. As a means of marketing the new location, the owner organizes a black tie reception and requires all employees to attend. An employee is injured at the reception. This injury probably is compensable, because the social activity produces a substantial direct benefit to the employer beyond the increased morale of the employees.

Are injuries received coming and going from the place of employment compensable?

No, an injury suffered while traveling to and from the salon is not an injury arising out of the course and scope of employment, unless the employee was on a special mission for the employer.

III. Benefits available.

What benefits are available to injured workers under the Act?

1. Medically necessary treatment, care and attendance. Chiropractic care is limited to 18 treatments or eight weeks beyond the initial chiropractic treatment, whichever occurs first. Other than chiropractic care, medical treatment shall continue for as long as the nature of the injury or process of recovery may require. This includes medicines, medical supplies, prostheses, durable medical equipment, and other medically necessary equipment.

2. Attendant care, if the treating physician determines that the injured employee requires an attendant to care for the employee at home. Under certain circumstances the attendant may be a family member.
3. Temporary total disability compensation for a maximum of 104 weeks. This is intended to compensate the injured employee for time that he or she is totally unable to work.

a. How is this compensation calculated?

The injured worker on temporary total disability is entitled to receive 66 2/3% of his or her pre-injury average weekly wage.

b. How is the average weekly wage calculated?

Generally, an average is calculated using the thirteen weeks immediately preceding the injury.

c. Are tips included in the average weekly wage calculation?

Yes, assuming that the tips earned are verifiable. Usually, the tips reported to the employer is the figure included in the average weekly wage calculation.

4. Temporary partial disability compensation payable for a maximum of 104 weeks. This benefit is intended to compensate injured employees who are able to work but not at the level they did preinjury.

EXAMPLE: Jamie is a cosmetologist working as an employee for Sue. Jamie is injured in a slip and fall accident at the salon. She is able to work but the doctor has restricted her to working only three days per week for a maximum of 5 hours per day. Jamie is “temporarily partially disabled.”

a. How is temporary partial disability compensation calculated?

The compensation for temporary partial disability is calculated as 80% of the difference between 80% of the pre-injury average weekly wage and the amount that the worker is able to earn post-injury.

EXAMPLE: In the example above, Jamie’s pre-injury average weekly wage was \$300.00. After the injury, Jamie is able to earn

\$100.00. His temporary partial disability payment would be calculated as follows:

$$.80[(.80 \times \$300) - \$100] = \$112.00/\text{week}$$

5. The injured worker is also entitled to rehabilitation and retraining for a period not to exceed 26 weeks. However, that term may be extended for an additional 26 weeks, if the judge determines it to be necessary and proper.
6. After the injured worker reaches maximum medical improvement, a determination of permanent impairment, if any, is made. Impairment benefits are paid at the rate of 50% of the worker's average weekly temporary disability benefits. Impairment benefits are paid for three weeks for each percentage point of permanent impairment.

EXAMPLE: *In the example above, Jamie reaches maximum medical improvement. Her doctor assesses her and determines that she has suffered a permanent impairment of 5% of her body as a whole because of her work-related injury. As impairment benefits, Jamie would receive \$56.00 per week (50% of her average temporary partial disability benefit) for 15 weeks.*

7. Survivors of an employee who is killed in a work-related injury are entitled to receive death benefits. For a surviving spouse with no surviving children, this is calculated at 50% of the employee's average weekly wage with a total payout limit of \$100,000. § 440.16, Fla. Stat.

IV. Obligations of the employer and employee.

What are the obligations of an injured employee?

1. The injured worker must report the injury to the employer as soon as possible.
2. The injured worker must follow the employer's instructions regarding where to go for medical treatment.
3. The injured worker must work to the extent the worker is able and to the extent the work within the worker's ability is available.
4. The injured worker must obtain medical treatment from medical care providers approved by the workers' compensation insurance carrier. One exception to this is medical care obtained in an emergency.

What are the obligations of the employer?

1. Upon receiving notice of an injury from an injured employee, the employer must refer the employee to a medical care provider approved by the workers' compensation carrier.
2. The employer must provide the injured worker with information identifying the workers' compensation carrier.
3. The employer must also file a notice of the injury with the Division of Workers' Compensation. A copy of the notice must also be provided to the workers' compensation carrier.
4. If the injured worker is released to restricted duty, the employer must make a good faith effort to place the injured worker in a position suitable for the restrictions.
5. The employer should post in a prominent place information regarding the employees' rights under the Act.

SELF-ASSESSMENT

Choose True or False for each question and mark your answers on the Self-Assessment answer sheet on page 67.

46. Employees receiving workers' compensation benefits may still sue their employers for negligence.

TRUE

FALSE

47. If a worker is required to adhere to a dress code, they would be considered an "employee" under Florida's workers' compensation laws.

TRUE

FALSE

48. Robin is involved in a serious car accident driving to the salon. If the Salon owner had sent Robin to pick up supplies and the accident occurred on her way back to the salon, this injury would be covered under workers' compensation.

TRUE

FALSE

49. Temporary total disability compensation is available for up to 150 weeks.

TRUE

FALSE

50. An injured employee must obtain emergency medical care *only* from providers approved by the workers' compensation insurance carrier.

TRUE

FALSE

SECTION VII: OSHA'S HAZARD COMMUNICATION STANDARD

In 1986, the Occupational Health and Safety Administration established the Hazard Communication Standard (29 CFR 1910.1020). This Standard was based on the concept that employees have both a need and a right to know the identity of and the hazards associated with the chemicals that they work with. They also need to know what types of protective measures are in place to prevent workplace hazards.

The Hazard Communication Standard (HCS) was established to protect workers in all lines of work. However, for the purposes of our discussion here, we will deal specifically with the HCS as it applies to the field of cosmetology and within the salon itself.

The Hazard Communication Standard was designed to benefit both employers and employees. While it does alert salon workers to the dangers associated with the chemicals that are used, it also helps employers provide a safer work environment by taking steps to reduce exposure to hazardous chemicals, use safer materials and establish proper work practices. These efforts benefit the employer in that there will be fewer work-related illnesses and injuries caused by chemicals, thereby decreasing employee absence.

The HCS requires that employers put into effect a hazard communication program. This program should be designed to allow employees to answer the following questions:

- What types of chemicals am I working with?
- Can these chemicals harm me?
- How can I protect myself from the harmful effects of these chemicals?
- What do I do in the event that something goes wrong?

OSHA requires that certain steps must be taken by employers to make sure that each and every employee in the salon clearly understands the hazards associated with chemicals that are used. Specifically, the HCS requires employers to:

- Inventory all hazardous materials.
- Obtain the Material Safety Data Sheet (MSDS) for all hazardous materials.

- Label all containers with appropriate hazard warnings.
- Properly use, store and dispose of all hazardous materials.
- Pre-plan for emergencies.
- Document what is to be done in the event of an emergency and who will do it.
- Train all employees in the proper use and care of hazardous materials.

In the section to follow, we will discuss the requirements for developing a Hazard Communication Program. If you are an employer, it is important to remember that compliance with this standard is a legal requirement. If you are an employee in a salon or any other business that provides cosmetology services, you should know that your employer is legally obligated to comply with this Standard. If they are not, then you are working in an environment that may be unsafe and unprepared for a chemical emergency. Also, you are working in an environment that is not fully compliant with the law. If your employer is not following the rules outlined in this booklet, you may wish to provide a copy of this material to them to inform them of this responsibility. Adherence to this standard is crucial to the safety and well being of both employees and clients.

1. Inventory All Hazardous Materials

To identify hazardous materials used in the salon, employers should complete a "Chemical Inventory" which lists all of the chemicals that are used. Probably the easiest way to do this is to make a list of all materials that come with a Material Safety Data Sheet (MSDS). Using the template shown in **Figure 1**, employers can easily transfer the information from the MSDS in an easy to read format which will alert employees to the hazards associated with these chemicals as well as precautionary measures or protective equipment appropriate for each toxin.

Once the Chemical Inventory has been compiled, it should be distributed to all workstations as a means of providing information to all employees. If the employer, however, chooses to have only one copy of the Chemical Inventory, it should be made available

to all employees and kept in an easily accessible location. It is important that the employer train all employees on the uses of the chemical inventory sheet and the terminology used on it.

Chemical Hazard Categories

When creating a Chemical Inventory, materials should be organized into four main categories:

- Flammables. These are substances that catch fire or burn easily and may include alcohol and acetone.
- Corrosives. These are substances that can cause injury to the skin, eyes and respiratory system. Phenols and certain other types of disinfectants may be corrosive.
- Toxics. These are materials that can be poisonous. Any chemical may have toxic effects. The level of toxicity depends on the amount, length and frequency of exposure. Acrylics and epoxies may fall into this category.
- Reactives. These substances react violently when mixed with other materials and may include peroxide.

Using these chemical hazard categories can make it easier for employers and employees alike to remember the hazards and precautions for each type of hazardous material.

Types of Hazards

As shown in the template in **Figure 1**, salon professionals need to know how to protect themselves from two types of hazards. These are *health hazards* and *physical hazards*.

Health hazards are those that cause immediate or long-term damage to the body from exposure to hazardous materials. Health hazards may be short-term and cause only skin irritation, headaches or dizziness, or they may be long-term and cause cancer or other fatal illnesses. Cosmetologists should remember that exposure to any chemical material could cause health difficulties if overexposure to the chemical occurs.

Route of Entry	Methods of Prevention
Inhaled through the nose	<ul style="list-style-type: none"> • Properly ventilate the work area. • Use proper respiratory protection
Ingested through the mouth	<ul style="list-style-type: none"> • Wash hands often. • Eat only in areas away from chemical usage or storage. • Label containers properly.
Absorbed through the skin	<ul style="list-style-type: none"> • Use barrier creams or protective clothing (gloves, aprons, goggles). • Wash regularly to prevent skin irritation

Physical hazards are those that affect the employee's physical surrounding as well as their health. Flammable materials such as alcohol and corrosive materials such as phenols would fall into this category.

Chemical Inventory					Chemical Hazard Classifications													
Salon Name _____ Location _____ Date Completed _____ Completed By _____					Physical Hazards						Health Hazards							
					Flammable	Corrosive	Explosive	Reactive	Oxidizer	Toxic	Irritant	Sensitizer	Carcinogen	Mutagen	Teratogen			
Chemical Name	Trade Name	TLV/PEL	Flash Point	Protective Equipment/Precautions														

2. Obtain Material Safety Data Sheets

All manufacturers of hazardous materials are required by law to include a Material Safety Data Sheet (MSDS) with each shipment of their product. This MSDS is an invaluable tool in communicating hazards to employees.

If no MSDS comes with a shipment of chemicals, employers should have a procedure in place for obtaining one and should keep a record of all attempts made to obtain them.

Table 2. Required MSDS Contents

Each MSDS must be written in English and contain at least the following information:

- The identity of the material used on the label.
- The chemical and common name if the hazardous chemical is a single substance.
- The chemical and common name(s) of the ingredients which contribute to the known hazards and common name(s) of the mixture if the hazardous chemical is a mixture and has been tested as a whole to determine its hazards.
- The chemical and common name(s) of all ingredients which have been determined to be health hazards and which comprise 1% or greater of the composition, identified carcinogens in concentrations of 0.1% or greater and the chemical or common name(s) of all ingredients determined to present a physical hazard if the mixture has not been tested as a whole.
- Physical and chemical characteristics of the hazardous chemical (vapor pressure, flash point, etc.).
- The physical hazards of the hazardous chemical, including the potential for fire and reactivity.
- The health hazards of the hazardous chemical, including signs and symptoms of exposure, and any medical conditions which are generally recognized as being aggravated by exposure to the chemical.
- The primary routes of entry.
- The OSHA-permissible exposure limit (PEL), Threshold Limit Value (TLV), and any other exposure limit used or recommended by the manufacturer.
- Any generally acceptable precautions for safe handling and use which are known to the manufacturer, including hygienic practices.
- Emergency and first aid procedures.
- Name, address and telephone number of the manufacturer or other responsible party who can provide additional information regarding the hazardous chemical and appropriate emergency procedures.

3. Label All Containers with Appropriate Hazard Warnings

Proper labeling of all chemicals used in the salon is not only a practical measure to ensure the safety of employees and clients alike; it is also a requirement of the OSHA Standard.

Proper labeling should include the name of the chemical, the name of the manufacturer or distributor, appropriate hazard warnings and body parts or organs that may be affected by using the chemical. Labels should be displayed in English and clearly legible. Labels are often available from chemical manufacturers and may accompany shipment of these materials.

If some employees have difficulty reading English, symbols may be used in addition to the labeling language to alert them to hazards.

All labels should be periodically cross-checked with the MSDS to make sure that any changes or updates made by the manufacturer are included. If you transfer a hazardous material to a smaller container, make sure that the new container is also labeled properly.

4. Develop a Written Hazard Communication Program

To ensure that the salon is operated at a maximum level of safety, it is crucial that employers or managers develop a written hazard communication program. This written program helps to make sure that all employees know the different types of hazardous materials used in the salon, how to avoid health and physical hazards and the procedures that are followed by employees for collecting and distributing information on hazard materials.

An effective hazard communication program will include:

- A list of all hazardous materials used in the salon.
- The procedure used to collect MSDS's and to make sure that they are current.
- The procedure used to make sure that all containers are properly labeled and that the labels are current.

- Information concerning the types of training to be given to employees regarding the handling of hazardous materials.
- Procedures used for safely conducting non-standard work practices.
- Information concerning the ways in which contractors and other “non-employees” are trained to recognize and properly use hazardous materials.

Very often, trade associations or professional groups put together sample hazard communication programs and other assistance materials for affected employers. If you are an employer looking to create a hazard communication program of your own, you may want to explore this option.

5. Provide Hazardous Materials Training to Employees

The OSHA Standard requires that employers provide employees and independent contractors in the salon with information and training on hazardous materials at the time of their initial assignment (when they are hired). Employees should be informed about the requirements of the OSHA Standard, the types and location of hazardous materials in the salon, health and physical hazards associated with these materials and safety and emergency procedures.

In addition to the requirements listed above, training should include:

- Information concerning the use of labels and MSDS’s.
- The employee’s access to the MSDS files.
- Training on the salon’s written hazard communication program.

Employers should track all hazard communication training to be able to document that training has been completed.

6. Maintain the Program

Once a hazard communication program has been put into effect in your salon, it is critical that the program be maintained and kept up to date. This ensures that all managers and employees are current on their information and

training concerning the safe and proper use of hazardous materials in the workplace.

Employers should periodically maintain and update the following parts of the hazard communication program:

- Files containing current MSDS’s.
- Labeling requirements and procedures.
- The written hazard communication program.
- All training procedures and records of employees who have completed training.

7. Checklist for Compliance

Employers may use the checklist below to ensure that they are in compliance with the OSHA Standard. Employees may wish to provide a copy of this list to their employers to make sure that the salon is in compliance with the Standard.

Requirement	Done	Not Done
Obtain a copy of the rule.		
Read & understand the requirements.		
Assigned responsibility for tasks.		
Prepared an inventory of chemicals		
Ensured containers are labeled.		
Obtained MSDS for each chemical.		
Prepared written program.		
Made MSDS’s available to workers.		
Conducted training of workers.		
Established procedures to maintain current program.		
Established procedures to evaluate effectiveness.		

8. Further Assistance

For further information regarding this Standard and compliance, contact your local OSHA Area Office. Also, each OSHA Regional Office has a Hazard Communication Coordinator who can answer questions specific to this Standard. These telephone numbers should be listed in your local telephone directory. If they are not, or if these individuals are unable to answer your questions, contact OSHA’s Office of information and Consumer Affairs at (202) 219-8151 for further assistance and/or contacts.

SELF-ASSESSMENT

Choose True or False for each question and mark your answers on the Self-Assessment answer sheet on page 67.

51. “Corrosives” is the chemical hazard category in which peroxide is most likely to fall

- TRUE FALSE

52. By law, the Material Safety Data Sheet (MSDS) may be written in either English, French or Spanish.

- TRUE FALSE

53. To ensure proper labeling of hazardous chemicals in the salon, labels should be printed in English with symbols added for employees who have difficulty reading English.

- TRUE FALSE

54. An effective hazard communication program includes a list of all hazardous materials used in the salon.

- TRUE FALSE

55. OSHA requires that employers provide hazardous materials training to employees but does *not* require them to give employees access to MSDS files.

- TRUE FALSE

**SECTION VIII. TAX RESPONSIBILITIES FOR
THE PERSONAL SERVICE WORKER
A Guide for Employers, Employees and Booth Renters**

FOREWARD

As a Personal Service Worker (PSW) licensed by the Florida Board of Cosmetology, you are required to follow a number of laws, rules, and regulations designed to ensure the continued health, safety, and well-being of your clients. As a *business* professional you are also required to follow specific tax guidelines that affect your business arrangement and its profitability.

This continuing education activity has been produced by INFORMED through direct interaction and assistance from the Internal Revenue Service (IRS) Taxpayer Education Division to educate and inform all members of the personal service industry. This activity offers an overview of the basic tax issues that you need to be aware of as you go about your day-to-day business. It is not intended to be the only guide you should use as tax laws change over time. This activity is designed to offer a general overview of your federal tax obligations and the benefits of complying with federal tax laws.

For questions regarding federal tax matters, course participants are urged to seek the assistance of tax professionals or to contact the IRS directly. A listing of resources in these matters is given at the end of this section. All Personal Service Workers completing this education are encouraged to review these publications available FREE from the IRS.

INTRODUCTION

Whether you are operating as a salon owner, an employee, or booth renter (*independent contractor*), you need to be aware of federal income tax requirements regarding your income, especially with regard to tip income. This activity is designed to give you a basic working knowledge of income tax requirements that apply to your individual business arrangement. Believe it or not, you will have *definite* advantages by complying with IRS tax laws.

“All income you receive must be reported on your income tax return, including tips.”

In general, you need to know that all income you receive from your work, whether in the form of wages, commissions, tips, sales, or rent whether by cash, check, or charge, is taxable. You also need to know the requirements concerning reporting your income on your tax return and to your employer (if you are an employee).

If operating as a booth renter, all income received (including tips) must be reported on the appropriate

income tax return such as Individual Income Tax Return Form 1040, Schedule C. Both income and employment taxes must be paid.

Whether you prepare your own tax return or pay a tax preparer, you need to know enough about the tax law so you can minimize potential problems that could be costly in terms of time and money.

1. TAX LAWS AND FORMS

There are three main sources of revenue or income in the Personal Service Industry: fees for services, sale of retail products and the rental of space. Your income may come from one or all of these sources. However, you must remember:

“All Income Is Taxable”

Internal Revenue Code Section 61 provides that all income from whatever source is taxable, unless it is specifically excluded by statute. In the case of Personal Service Professionals, taxable income includes payments such as wages, commissions, client fees and tips.

Examples of Taxable Income:

Wages – Wages consist of “per hour,” “per day,” or “per week” monies paid by an *employer* to an *employee*. Example: A cosmetologist is paid \$300.00 per week regardless of the number of services completed or products sold.

Commissions – Commissions consist of percentages paid by an employer to an employee based on the total amount paid by clients for services of retail products. Example: A nail technician is paid 40% of the total fee paid by each client plus 20% of the total price paid by a client for all products sold.

Tips – Tips consist of cash, goods, or services paid by a client directly to the Personal Service Worker in addition to the price of the service. Note that tips do not necessarily apply only to cash and they also do not apply only to tips paid in cash. Goods and services as well as tips paid by credit card or check or tips left at the salon station are considered as taxable income. Example: A facial specialist is given a concert ticket worth \$20.00 as a tip for services performed. The value of the ticket is taxable, for income tax. If the specialist is an employee, the value of the ticket is not reported to the employer as a part of tips received, but it must be reported in her tax return.

Employees will generally report the types of income listed above on forms 1040EZ, 1040A, or 1040. NOTE: If the Personal Service Worker is Self-Employed, they must use form 1040 to report these types of income.

Client Fees – Client fees consist of the entire fee a client pays for services performed. The full fee is a gross receipt to the salon if the worker is an employee. If the worker is a booth renter or independent contractor, the full fee is gross receipts to the worker. Example: A cosmetologist is paid a fee of \$25.00 for a shampoo/condition and cut plus a \$5.00 tip. If the cosmetologist is a booth renter, the full \$30.00 is gross receipts to him/her and must be reported on Schedule C of Form 1040.

Two terms that are used in the Internal Revenue Code are “income” and “wages.” Amounts that are included in “income” are subject to federal income tax, and a person computes what is owed for federal income tax on Form 1040. Amounts that are included in “wages” are subject to federal income tax as well, but are also subject to withholding taxes such as federal income tax withholding, Social Security Taxes, and Medicare Taxes.

Other Forms of Taxable Income (examples):

- A shop owner/landlord that receives \$700.00 rent from a booth renter must report such income on Schedule E, Form 1040.
- A booth renter that shows net profit after expenses of \$7,000.00 must report such income on Schedule C, Form 1040.

MORE INFORMATION REGARDING TIPS

As mentioned before, *all tips are income* subject to federal income tax. Generally, Internal Revenue Code Section 3121(q) and 340(f) provides that all tips received by an employee are also wages for purposes of the applicable withholding taxes, provided the employee receives \$20.00 or more in tips in a calendar month. An employee who receives tips of less than \$20.00 in a calendar month does not have to report the tips to his or her employer; however, the tips *must be reported* as income on the employee’s income tax return.

Form 4070 (Rev. June 1999)		Employee’s Report of Tips to Employer			OMB No. 1545-0065	
		▶ For Paperwork Reduction Act Notice, see back of form.				
Employee’s name and address				Social security number		
Employer’s name and address (include establishment name, if different)				1 Cash tips received		
				2 Credit card tips received		
				3 Tips paid out		
Month or shorter period in which tips were received				4 Net tips (lines 1 + 2 - 3)		
from _____, _____, to _____						
Signature _____				Date _____		
Form 4070A (Rev. June 1999) Department of the Treasury Internal Revenue Service		Employee’s Daily Record of Tips			OMB No. 1545-0065	
		This is a voluntary form provided for your convenience. See instructions for records you must keep.				
Employee’s name and address			Employer’s name		Month and year	
			Establishment name (if different)			
Date Tips Rec’d	Date Of entry	a. Tips received directly from customers and other employees	b. Credit card tips received	c. Tips paid out to other employees	d. Names of employees to whom you paid tips	
1						
2						
3						
4						
5						
Subtotals						
For Paperwork Reduction Act Notice, see Instructions on the back of Form 4070. Page 1						

**Figure 1: Forms 4070 and 4070A (Excerpted)
Tip Reporting Forms**

These forms have been recreated for use in this publication.

Internal Revenue Code Section 6053(a) requires that an employee who receives tips of \$20.00 or more in any one month must report all such tips on a written statement which must be given to the employer. This report must be done at least once a month and no later than on the 10th calendar day of the following month after the tips are received. The employer may ask that these tips be reported more often than once a month; daily, weekly or before each pay period, for example.

This reporting ensures accurate determination of withholding for Income, Social Security, and Medicare taxes. As an employee, full disclosure of your tip income will maximize your Social Security benefits as well as provide you with a number of other, possibly unexpected, benefits that we will discuss later in this section.

Reporting your tips correctly is not difficult. You must do three things:

1. *Keep a daily record;*
2. *Report tips to your employer; and*
3. *Include all tips as income on your tax return.*

KEEPING RECORDS

Every person liable for any tax is required to keep records, statements, receipts, and returns. Under Internal Revenue Code Section 6001, these documents must be made available to a representative of the Internal Revenue Service upon request, to determine whether or not a person is liable for tax. The Internal Revenue Code Section 7602 gives authority to the IRS examiners to request these records.

2. DEFINITIONS AND RESPONSIBILITIES

Business owners in the Personal Service Industry structure their businesses in various ways. Personal Service Workers will choose salons with the business arrangement that suits them best. This chapter describes the most common business arrangements and the federal tax responsibilities for each.

Your federal income tax responsibilities are based upon your employment status. In the previous chapter, there was considerable discussion regarding the terms “employee” and “employer.” This chapter will further define the differences between these terms and examine the two basic types of employment status; “employee” and “self-employed.”

EMPLOYEE

A person who works for another in exchange for compensation may be an employee. Many newly licensed Personal Service Workers go to work as employees of existing salons or shops. The salon generally sets work hours, provides supplies, tracks appointments and collects

all receipts. The employee is paid either a salary, a commission, or a combination of the two. Factors that may indicate you are an employee include:

- Required uniforms
- Required hours
- Worker does not handle own sales receipts
- Worker does not make own appointments
- Business owner provides training
- Business owner provides towels, smocks, etc.

EMPLOYEE TAX RESPONSIBILITIES

If you are an *employee* of a salon you should receive a Form W-2, *Wage and Tax Statement*, from your employer at the end of each year. You must report your tips to your employer so that they may be included on your Form W-2. You must report your wages on Form 1040, 1040A (see page 55) or 1040EZ, *U.S. Individual Tax Return*. You must report all income received from all employers, whether the payment was made by check or cash and whether or not the income is included on Form W-2 or Form 1099. As mentioned in the previous chapter, taxable income includes:

- Wages
- Tips
- Payments for services
- Commissions for product sales

As an employee, you must keep a running daily log of all your tip income. You can use Publication 1244, *Employee's Daily Record of Tips and Report to Employer*, to record your tip income. Publication 1244 includes Form 4070, *Employee's Report of Tips to Employer*, and Form 4070A, *Employee's Daily Record of Tips*. This publication is available by calling the IRS at 1-800-829-FORM (3676) or online at <http://www.irs.gov/pub/irs-pdf/p1244.pdf> and includes places for you to record:

- Your name, address and Social Security Number
- Employer's name and address
- The name of the establishment in which you worked
- Period during which the tips were received
- The amount of tips received
- The amount of tips paid out to other employees
- Name of the employee to whom you paid tips

If you fail to report all tips to your employer, you will include these unreported tips on Form 4137, *Social Security and Medicare Tax on Unreported Tip Income*, and report them on Form 1040, *U.S. Individual Income Tax Return*. You will pay your share of Social Security and Medicare Tax, and you may be subject to a penalty of 50% of the Social Security and Medicare Tax due for not reporting your tips to your employer.

INDEPENDENT CONTRACTOR

If you work for yourself rather than for another, you are not an employee. You are considered self-employed, or and **independent contractor**, in business for yourself.

If you have an arrangement or contract with a business owner to provide certain services, you may be either an employee or an independent contractor. Whether you are an employee or an independent contractor depends on the facts and circumstances, including some of the factors listed in the “EMPLOYEE” section. *A contract that states that you are an independent contractor does not automatically mean you are an independent contractor for tax purposes!* If you are receiving payments from the business and you are an independent contractor (self-employed), you should receive a Form 1099-MISC showing payments to you by the business owner.

Factors that may indicate that you are an independent contractor and *not* an employee include:

- Having a key to the salon
- Setting your own schedule
- Purchasing your own products, and/or
- Having your own telephone number

INDEPENDENT CONTRACTOR TAX RESPONSIBILITIES

- You should receive Form 1099-MISC from the salon owner.
- You must report all of your income (including tips) on the appropriate Income Tax form, such as Schedule C or Schedule C-EZ, Form 1040, *U.S. Individual Income Tax Return*.
- The income is subject to self-employment tax (Social Security and Medicare) and reported on Schedule SE.
- You will probably be required to pay estimated taxes on Form 1040-ES. Estimated tax payments are made quarterly.

You may deduct allowable expenses on your Schedule C or Schedule C-EZ on Form 1040, *U.S. Individual Income Tax Return*.

BOOTH RENTER

If you are an operator leasing space in someone else’s shop or salon, you are a **booth renter**. Just because someone has a lease agreement to “lease” space in someone else’s shop or salon does not mean he/she is an independent contractor. In one situation a cosmetologist agrees to “lease” a space in a salon for the purpose of operating individually and catering to his or her own customers. The cosmetologist was paid a specified percentage of all money taken in with the salon retaining

the remaining percentage. Based on the facts, it was concluded that the cosmetologist was an employee of the salon.¹

In another situation booth renters were found *not* to be employees.² Similarly a beautician who enters into a “lease agreement” for space in a salon could be an employee,³ or could be an independent contractor.⁴ The fact that someone is “leasing” space is not conclusive that the individual is an independent contractor or an employee. As with any situation, all the facts and circumstances relating to independence and control are relevant in determining employment status.

Tax Responsibilities of a Booth Renter Who is an Independent Contractor

- You must report all income (*including tips*) on Schedule C or Schedule C-EZ Form 1040, *U.S. Individual Income Tax Return*, if appropriate. Social Security and Medicare Taxes must be reported on Schedule SE (Form 1040).
- You must issue Form 1099-MISC for business rent paid of \$600.00 or more to non-corporate landlords each year.
- You must issue a Form 1099-MISC or Form W-2, *Wage and Tax Statement*, to any workers you may have.
- Estimated taxes must be paid each quarter on Form 1040ES, *Estimated Tax for Individuals*.
- You may deduct allowable expenses including rent, supplies and utilities on the appropriate income tax return.

Example: *Jane Smith is a cosmetologist who owns Jane’s Salon. Her friend, James Doe, recently received his cosmetology license. Jane has agreed to let James rent a workstation for a fixed monthly fee. Jane will furnish air conditioning, lights, and water. James will order all of his other supplies and will set up his own appointments. James is just starting out and he hasn’t built up a steady clientele. His work hours will vary, but this won’t be a problem because he will have a key to the shop. Jane Smith is the shop owner and landlord. Jane receives no other payments from James other than a fixed monthly fee. Subject to the fixed monthly fee he pays Jane, James is entitled to keep all fees and tips that he earns from his customers and does not account to Jane for the fees that he receives. He determines his own work routine. James is a booth renter who is an independent contractor.*

Generally, the common law rules apply in determining whether a worker is an employee for tax purposes. Under

¹ Rev. Rul. 70-488, 1970 – 2 C.B. 219

² Rev. Rul. 57-110, 1957 – 1 C.B. 329

³ Rev. Rul. 73-591, 1973 – 2 C.B. 377

⁴ Rev. Rul. 73-592, 1973 – 2 C.B. 338

the common law rules, a worker is an employee if the person or company for whom the employee performs services can control what will be done and how it will be done. This is so even if the worker is given freedom of action. What matters is that the person or company for whom the services are performed has the right to control the details of how the services are performed.

In deciding whether a worker is an employee or an independent contractor under the common law, it is necessary to consider the facts and circumstances of the relationship of the worker and the business. All information that provides evidence of the degree of control and the degree of independence must be considered. Facts that provide evidence of the degree of control and independence fall into three categories: behavioral control, financial control, and the type of relationship of the parties.

Behavioral Control

These factors show whether there is a right to direct or control how the worker does the work. The presence of these factors showing direction and control tends to indicate that the worker is an employee. The business does not have to actually direct or control the way the work is done, as long as the employer has the right to direct and control the work.

If the worker receives instructions from the owner on how work is to be done, this suggests direction and control by the owner. Instructions can cover a wide range of topics, for example:

- What tools or equipment to use
- How, when, or where to do the work
- What assistants to hire to help with the work
- Where to purchase supplies and services

Additionally, if the worker receives training on required procedures and methods, this suggests the business owner wants the work done in a certain way, and the worker may be an employee.

Financial Control

These factors show whether there is a right to direct or control financial aspects of the business. For example, if the worker has a significant financial investment in the facilities he or she uses in working that is an indication that the worker is an independent contractor.

If the worker is not reimbursed for some or all of the operating expenses, then the worker may be an independent contractor, especially if the un-reimbursed business expenses are high.

If the worker has the opportunity to realize a profit or incur a loss, this also suggests the worker is an independent contractor.

Relationship of the Parties

A written contract may show what both the business owner and the worker **intend** and indicate how the business owner and the worker **perceive** their relationship. Additionally, if the worker receives benefits, such as health insurance, the worker may be an employee.

Shop Owner/Employer

If you own or operate a salon and have workers who are not independent contractor or booth renters, you are the employer of those workers. As the employer, wages paid to your employees are generally subject to withholding. **Tips your employees receive from customers are considered wages under the law.**

You must collect Social Security, Medicare (FICA) Withholding and Income Tax Withholding on employee wages and tips. Your employee must report his or her tips to you by the 10th of the month following the month that tips are received. The report should include tips that may have been added to a credit card ticket or check and paid to the employee (*service provider*), as well as tips the employee (*service provider*) received in cash directly from customers. Your employee may report the tips on Form 4070, *Employee's Report of Tips to Employer*, or on a similar statement. The statement must be signed by the employee and must show the following:

- The employee's name, address, and Social Security number
- Your name and address
- The month or period the report covers
- The total tips

Example: *The stylists at Brenda's Hair Barn were given Publication 1244, Employee's Daily Record of Tips and Report to Employer, when they were hired. Every Friday, Brenda requires the stylists to give her a completed and signed Form 4070, Employee's Report of Tips to Employer.*

Shop Owner/Employer Tax Responsibilities

The responsibilities of the employer include:

- Notifying employees of their responsibility to report their tips to you and establishing a tip reporting system.
- Including the total of tips reported to you in total wages when you complete Social Security and Medicare (FICA) Withholding

and Income Tax Withholding for each employee.

- Paying the matching employer portion of Social Security and Medicare as well as Federal Unemployment Tax (FUTA) on the total wages.
- Issuing Form W-2, *Wage and Tax Statement* to each employee at the end of the year, reflecting total wages.

Shop Owner/Landlord

If you own and/or operate a shop or salon, you may have other workers in your shop that pay you rent for space to operate their own business. These individuals are booth renters. The rent they pay to you, the landlord, is rental income. As a shop owner/landlord, this rental revenue (income) is taxable and reported on Schedule E of your Form 1040, *U.S. Individual Income Tax Return*, or the appropriate tax return.

You may have workers in your shop who are neither booth renters nor employees, but who perform services at your establishment and meet the standards of an independent contractor with respect to your establishment. You should review the factors regarding employer-employee relationships to assure proper tax treatment.

Example 1: *Karen Jones is a manicurist who works at Joe's Place, owned and operated by Joe Smith. Karen and Joe have agreed that Karen will furnish manicuring services to patrons of the shop five afternoons per week. Karen schedules all of her appointments, owns all of her nail equipment and buys her own supplies. Karen expects to make a profit. Joe Smith is the shop owner and Karen is an independent contractor.*

Example 2: *Julie Brown owns Headtoppers. Besides Julie, the salon has four hair stylists. Julie pays each stylist a percentage of the income he or she generates. All income from their services is paid to the shop. All appointments are made through one receptionist. The shop equipment and supplies are purchased by the business. The stylists are employees, and Julie Brown is their employer.*

Example 3: *Joanna Williams has been a booth renter at Traci's Beauty Shop for a number of years. In 1999, Joanna's net income, or profit, was \$32,500.00. Based on Joanna's marital status and the standard deduction for 1999:*

- *Joanna's total self-employment tax is \$4,592.00.*
- *Joanna's income tax is \$3,473.00.*
- *Joanna's Total Tax due is \$8,065.00 (\$4,592.00 plus \$3,473.00).*

Joanna should make estimated tax payments of \$2,016.25 each quarter.

Additional references which are available free of charge by calling the IRS or by visiting their website at <http://www.irs.gov> are listed below.

References:

- *Publication 334, Tax Guide for Small Business*
- *Publication 505, Tax Withholding and Estimated Tax*
- *Publication 1244 and 1244-PR, Employee's Daily Record of Tips and Report to Employer*
- *Publication 1779, Independent Contractor or Employee*
- *Publication 3207, Small Business Resource Guide (CD-ROM)*
- *Form 4070-a, Employee's Daily Record of Tips*
- *Form 4070, Employee Report of Tips to Employer*
- *Form 4137, Social Security and Medicare Tax on Unreported Tip Income*

Employee vs. Independent Contractor

This section discusses the common law factors and relief under Section 530, State Regulatory Authority, revenue rulings, and court cases.

Common Law Factors

The question of whether an individual is an independent contractor or an employee is one fact to be determined upon consideration of the facts and application of the law and regulations in a particular case. See *Professional & Executive Leasing V. Commissioner*, 89, T.C. 225, 232 (1987), aff'd 862 F.2d 751 (9th Cir. 1988); *Simpson v. Commissioner*, 64 T.C. 974m 984 (1975). Guides for determining the existence of that status are found in three substantially similar sections of the Employment Tax Regulations; namely, section 31.3121(d)-1, 31.3306(i)-1, and 31.304(c)-1, relating to the Federal Insurance Contributions Act (FICA), the Federal Unemployment Tax Act (FUTA), and Federal Income Tax Withholding, respectively.

In general, it should be noted that section 3121(d)(2) of the Internal Revenue Code requires the application of the common law rules in determining the employer-employee relationship. In determining whether an individual is an employee under the common law rules, 20 factors have been identified as indicating whether sufficient control is present to establish an employer-employee relationship. The 20 factors have been developed based on an examination of cases and rulings considering whether an individual is an employee. The degree of importance of each factor varies depending on the occupation and the factual context in which services are performed. See Rev. Rule. 87-41, 1987-1 C.B.; IRM Exhibit 4640-1, Employer-Employee Relationship. The 20 factors are not to be applied blindly. Rather, they are to be used as an aid in applying the common law.

Although a variety of factors may be used to analyze employment status for tax purposes, the regulations provide that employer control over the manner in which the work is performed is probably the most important. The test is not the actual control by the employer but the employer's right to control.

For further assistance regarding employment tax issues, contact the employment tax coordinator.

After it has been determined that an examination of the employee/independent contractor issue will be undertaken, section 530 should be addressed as early as practicable. Section 5309A(1) of the Revenue Act of 1978 terminates an employer's liability for employment taxes under subtitle C which includes FICA, FUTA, and income tax withholding, and any interest or penalties attributable to the liability for employment taxes. Section 530 provides that, for employment tax purposes, an individual will be deemed not to be an employee unless the employer had no reasonable basis for treating the individual as other than an employee. The purpose of section 530 is to shield employers who had a reasonable basis for treating workers as independent contractors from employment tax consequences arising from employment status reclassification by the Service.

For an employer to be eligible for relief under section 530: (1) all required information returns must have been filed on a timely basis (for example, Forms 1099); (2) the employer must not have treated any other workers holding a substantially similar position as employees after 1978; and (3) the employer must have had a reasonable basis for not treating the workers as employees. IRM Exhibit 4640-3, Section 530 Flowchart, may be used to assess the examiner in determining if relief under section 530 is available to the employer.

The employer may establish a reasonable basis for not treating the workers as employees by relying on any one of the three safe havens under section 530(a)(2):

1. Judicial precedent, published rulings, or a technical advise memorandum or a private letter ruling with respect to the taxpayer; or
2. Prior Service audit of the taxpayer; or
3. Long-standing recognized practice of a significant segment of the industry ("industry practice") in which the worker is engaged.

As early as possible during the examination, it is important to discuss with the taxpayer the reasons the workers are treated as independent contractors. During the discussion, the examiner should keep notes of the taxpayer's responses. A taxpayer cannot have relied upon recently decided cases as the basis for treating workers as independent contractors for years prior to those decisions. An opinion letter from an attorney written after the examination began is less persuasive than one that was written when the employer first began using workers and treated them as independent contractors. The taxpayer has the burden of establishing industry practice based upon objective criteria substantiated by the taxpayer.

For example, in *General Investment Corporation v. United States*, 823 F. 2d 337 (9th Cir. 1987), the court held that a mining company had a reasonable basis for treating miners as independent contractors because the taxpayer had substantiated that the practice of treating miners as independent contractors was both long standing and well recognized within a significant segment of the local mining industry.

For further assistance regarding section 530 issues, contact Branch 2 of the Office of Associate Chief Counsel (Employee Benefits and Exempt Organizations) at (202) 622-6040.

Table 1: Common Law Factors Determining the Difference Between "Employees" and "Independent Contractors"
Reprinted from "Market Segment Specialization Program (MSSP): Beauty and Barber Shops"
Full Document Available from IRS and online at : <http://www.irs.gov/faqs/display/0,,1%3D54%26genericId%3D7005,00.html>

3. Business Expenses

In the first two chapters we discussed that income generated from services you provide to clients, income from the sale of products, and income from rent of space are business income. All are reportable and taxable.

If you are self-employed, your business income is reported on Schedule C or a Schedule C-EZ. This business income is referred to as Gross Receipts. If you are an employee, your wages, commissions, and tips are reported directly on your Form 1040, 1040A, or 1040EZ. Rents received from renting or leasing space to operators within your salon/shop are reported on Schedule E.

As a self-employed business operator, you may deduct expenses incurred as a cost of doing business that are *ordinary* and *necessary*. This chapter briefly discusses the general type of expenses you may incur.

If you sell products to customers, your income is reduced by the amount paid for the products sold.

You can further reduce your income by the amount you pay for business expenses to earn that income. Common business expenses include supplies, rent paid, advertising, employee salaries, telephone services, and utilities that, again, are ordinary and necessary. A more extensive list of business expenses is identified on Schedule C. Some general expense definitions follow.

Supplies: Items purchased for use on your clients as part of providing a service. These may include hair color, styling gel, hair spray, shampoo, etc. Supplies can also include tools such as nail clippers, buffers, smocks, and scissors. Supply purchases need to be kept separate from inventory as they are not sold to customers.

Equipment: A portion of the cost of equipment, tools, and furniture purchases for your business may also be deducted as depreciation; special rules apply.

Education & Training

Once you have started working in your field, any expense you incur to maintain or improve your skills on the job is a deductible business expense. Common examples include hair shows and workshops. However, the education and training you receive in order to enter the personal service industry is not a deductible expense.

Uniforms and Upkeep

The cost and upkeep of work clothes are deductible if the following two requirements are met:

- 1) The clothing must be worn as a condition of employment.
- 2) The item(s) of clothing are not suitable for everyday wear.

An employee who personally incurs any business expenses that are required by his or her employer, but is not reimbursed, has employee business expenses.

Employee business expenses are deductible for individuals only as itemized deductions on Schedule A, Form 1040. They are called miscellaneous itemized deductions and are subject to a limitation based on your adjusted gross income.

Note: The appendix identifies publications and other resources that can assist you in meeting your tax obligations.

References:

- Publication 17, *Your Federal Income Tax*
- Publication 334, *Tax Guide for Small Business*
- Publication 463, *Travel, Entertainment, Gift, and Care Expenses*
- Publication 529, *Miscellaneous Deductions*
- Publication 946, *How to Depreciate Property*

4. What's In It For Me?

Reporting all of your income and paying the appropriate amount of tax can be taxing on anyone. You may wonder whether it's worth your time and effort to follow the guidelines set forth. This chapter helps to put into perspective the positive side of tax compliance in the "big scheme of things."

Believe it or not, what may be initially saved in taxes by not reporting all taxable income will never outweigh the long-term benefits of honest and proper reporting.

Greater Social Security Benefits

The benefits you'll receive from Social Security will be calculated on the earnings and other information recorded under your Social Security Number (SSN). If you work for someone else, your employer withholds Social Security and Medicare Tax from your paycheck, matches that amount, and sends those taxes to the Internal Revenue Service. If you are self-employed, you pay your own Social Security Taxes when you file your

To be deductible, a business expense must be:

- **ORDINARY** – "Common and Accepted in your trade or business."
- And
- **NECESSARY** – "Helpful and Appropriate for your trade or business."

tax return. The Internal Revenue Service (*IRS*) reports your earnings (*from your tax return*) to the Social Security Administration.

According to the Social Security Administration, the amount of earnings reported directly correlates to the amount of Social Security benefits one might receive.

Based on a July 13, 1999 survey of chain salons commissioned by the NACCAS (*National Accrediting Commission of Cosmetology Arts and Science*), the average income of a worker in the cosmetology industry was approximately \$18.00 per hour.⁵ Using the average of \$18.00 per hour and working full time, and employee who began working at age 22 and had current earnings of \$37,400.00 (*based on 40 hours per week for 52 weeks*), social security benefits at age 62 will be approximately \$914.00 per month. If the employee did not report all income and only reported \$32,500.00, the benefits would be reduced to \$822.00 per month.

There are five major categories of benefits paid through the social security taxes: retirement, disability, family benefits, survivors and Medicare. For more information about these benefits you may contact the Social Security Administration at 1-800-772-1213.

Increased Unemployment Benefits

Unemployment Insurance (UI) is an employer paid insurance program that helps workers who are unemployed through no fault of their own. It provides temporary financial help to qualified individuals based on their previous earnings while they are looking for work. Employer taxes and reimbursements support the unemployment trust fund.

The law governing unemployment benefits varies by state. In Florida it is the Unemployment Compensation Law which may be found in Chapter 443 of the Florida Statutes.

A key component of qualifying for unemployment benefits is past wages. If you fail to include all of your income, including tips, unemployment benefits are reduced.

Improved Financial Profile for Loans

When you apply for a loan to purchase a car, house, your own business, or anything else, the financial institution reviews your current and prior year's income. The amount of money you can borrow (in part) will be based on the earnings/income you have reported. Again, if you

⁵ <http://www.naccas.org/> NACCAS News:7/13/99 - Results of First Ever Chain Salon Survey

DO NOT report this income, it will not be considered in determining whether you qualify for a loan.

Example: *Iris could not get a car loan based on the income reported on her tax return. She had not reported all tips to her employer. She asked for a revised W-2, but her employer could not provide her one, because the original W-2 was based on the amount of tips she previously reported. Iris amended her tax return and reported tips not reported to her employer on a Form 4137 (Social Security and Medicare Tax on Unreported Tip Income), paying the appropriate increase in taxes. Based on her amended returns, Iris received the car loan.*

Increased Pensions (Traditional IRA or Roth IRA) or 401(k)

Few benefits are as important to you as your pension plan. The average American will spend more than one-quarter of his or her life in retirement, a period when the income of many people will be greatly reduced. The key to creating and experiencing a satisfying retirement is planning financially.

Today there is a wide variety of deferred income retirement plans available to you.

- 1) If your employer does not have a savings plan, you might want to consider either a traditional IRA or ROTH IRA. You must have earned income, and your contributions are limited to \$3,000 per year (in tax year 2002). Limit is \$3,500 if you are over 50 years old).
- 2) An employer may offer a savings plan, such as a 401(k) RETIREMENT plan or SIMPLE plan. These plans are legal tax shelters available to many individuals who work for wages. The funds in the plan cannot be used to finance business operations. The contribution amounts are limited to 10% of income and can be based on either a specific dollar amount or a percentage of income. Contributions reduce taxable income reported on the Form W-2. The employer usually matches a percentage of the contributions. Self-employed individuals, as well as other employers, can set up a simplified employee pension (SEP) plan.

Example: *Danny, a 22 year old employee, contributed 10% of his \$36,000.00 salary to a 401(k) plan. He contributed \$300.00 per month. The \$3,600.00 was contributed to a savings plan each year, which earned 10%. The employee will accumulate \$1,913,034.00 in 40 years.⁶ If the employer also made contributions, the amount would be substantially greater.*

⁶ www.FinAid.org

Peace of Mind

Finally, having a general idea of your Federal Tax responsibilities will lessen the amount of time and energy expended on complying with the law. No financial value can be attached to the comfort of knowing what rules apply in your particular situation.

If you are unable to afford professional accounting assistance, a variety of free help is available to you through the Internal Revenue Service. You may download forms and publications from the *IRS Web* at http://www.irs.gov/forms_pubs/index.html or order through the IRS by dialing 1-800-829-3676.

- Publications
- Free Tax Seminars and Clinics
- Free Telephonic Assistance
- Volunteer Income Tax Assistance (VITA)
- E-mail

Disadvantages of Not Reporting Income

The Internal Revenue Code provides for the assessment of a number of penalties in relation to federal income tax reporting and filing. Penalty amounts range from 0.5 percent to as much as 75 percent (depending upon the failure and intent), making noncompliance costly.

A few of the tax penalties are listed below:

Section	
6651	Failure to file tax return or pay tax.
6652(b)	Failure to report tips.
6654	Failure by individual to pay estimated income tax.
6655	Failure to make deposit of taxes.
6662(c)	Negligence
6662(d)	Substantial understatement of income tax.
6672	Failure to collect and pay over tax, or attempt to evade or defeat.
6674	Fraudulent statement or failure to furnish statement to employee.
6682	False information with respect to withholding.
7203	Willful failure to file return, supply information, or pay tax.
7206	Fraud and false statements.

You can avoid these penalties by taking these simple steps:

- Keep accurate records;
- Report all income; and
- File timely and accurate returns.

References:

- *Publication 575, Pension and Annuity*
- *Publication 590, Individual Retirement Arrangements*
- *Publication 915, Social Security and Railroad Retirement Benefits.*

5. Education Credits and Benefits

Two nonrefundable tax credits are available for persons who are paying higher education costs for themselves and/or members of their families. This chapter discusses the Hope credit and the Lifetime Learning credit.

Hope Credit

The Hope credit is available for the first two years of undergraduate education. You may be able to claim a Hope credit of up to \$1,500.00 for the qualified tuition and related expenses paid for each eligible student.

The amount of the Hope credit is 100% of the first \$1,000.00 plus 50% of the next \$1,000.00 you pay for each eligible student's qualified tuition and related expenses. The rules that apply follow:

Rules that Apply

- The credit is based on qualified tuition and related expenses paid.
- Qualified tuition and related expenses are tuition and expenses required for enrollment or attendance at an eligible educational institution such as course-related books, supplies and equipment, and student activity fees.
- An eligible educational institution is any accredited college, university, vocational school, or other accredited post-secondary educational institution eligible to participate in a student aid program administered by the Department of Education. (*The educational institution should be able to tell you if it is an eligible educational institution.*)

In addition, the eligible student must meet the following requirements:

- 1) Has not completed the first two years of post-secondary education.
- 2) Is enrolled in a program that leads to a degree, certificate, or other recognized educational credential.
- 3) Is taking at least one-half of the normal full-time workload for his or her course of study for at least one academic period beginning during the calendar year.

- 4) Has no felony conviction for possessing or distributing a controlled substance.

Lifetime Learning Credit

A lifetime learning credit of up to \$1,000.00 may be taken for the total qualified tuition and related expenses paid during the tax year. The maximum amount of the credit is 20% of the first \$5,000.00 paid for qualified tuition and related expenses for all students in the family. Unlike the Hope credit:

- The lifetime learning credit is not based on the student's workload. It is allowed for one or more courses.
- The lifetime learning credit is not limited to students in the first two years of post-secondary education.
- Both degree and non-degree courses are eligible. Expenses for undergraduates, graduates, and students acquiring and/or improving their job skills are eligible.
- There is no limit on the number of years for which the credit can be claimed for each student.
- The credit does not vary (increase based on the number of students in a family. The maximum credit is \$1,000.00 for 1999-2002 per taxpayer).

Rules that Apply

- The credit is based on qualified tuition and related expenses you pay for you, your spouse, or a dependent you claim on your tax return.
- Qualified tuition and related expenses are tuition and expenses required for enrollment or attendance at an eligible educational institution, such as course related books, supplies and equipment, and student activity fees.
- An eligible educational institution is any accredited college, university, vocational school, or other accredited post-secondary educational institution eligible to participate in a student aid program administered by the Department of Education. *The educational institution should be able to tell you it is an eligible educational institution.*

You can elect only one of the credits during any tax year. You may therefore wish to claim the Hope credit for the first two years of post-secondary

education, and claim the lifetime learning credit in later tax years.

Your education credits are phased out (*gradually reduced*) if your modified adjusted gross income is between \$40,000.00 and \$50,000.00 for a single filer (*\$80,000.00 and \$100,000.00 in the case of a joint return*).

These credits reduce your tax, but they are not refundable. This means if the credits are more than your tax, the difference is not refunded to you. Form 8863 is used to claim the credits and is attached to your income tax return.

References:

- *Publication 4, Student's Guide for Federal Income Tax*
- *Publication 970, Tax Benefits for Higher Education*

Appendix

- *Publication 4: Student's Guide for Federal Income Tax*
- *Publication 17: Your Federal Income Tax*
- *Publication 334: Tax Guide for Small Business*
- *Publication 463: Travel, Entertainment, Gift, and Car Expenses*
- *Publication 503: Child and Dependent Care Expenses*
- *Publication 505: Tax Withholding and Estimated Tax*
- *Publication 529: Miscellaneous Deductions*
- *Publication 531: Reporting Tip Income*
- *Publication 533: Self Employment Tax*
- *Publication 575: Pension and Annuity*
- *Publication 583: Starting A Business and Keeping Records*
- *Publication 587: Business Use of Your Home*
- *Publication 590: Individual Retirement Arrangements*
- *Publication 596: Earned Income Tax Credit*
- *Publication 915: Social Security and Railroad Retirement Benefits*
- *Publication 970: Tax Benefits for Higher Education*
- *Publication 1244: Employee's Daily Record of Tips*
- *Publication 1244-PR: Report to Employer*
- *Publication 1779: Independent Contractor or Employee*
- *Publication 1875: Employer/Tip Income Reporting*
- *Publication 3144: Tips on Tips/for Employees*
- *Publication 3148: Tips on Tips/for Employers*
- *Publication 3207: Small Business Guide (CD-ROM)*
- *Publication 3518: Beauty and Barber Industry Federal Guidelines*

SELF-ASSESSMENT

Choose True or False for each question and mark your answers on the Self-Assessment answer sheet on page 67.

56. For tax purposes, the term “tips” refers to cash payments only.
 True False
57. Net profits shown by booth renters must be reported on Schedule C of Form 1040.
 True False
58. Types of payment that are considered as “income” are subject to federal income tax, and a person computes what is owed for federal income tax on Form 1040.
 True False
59. An employee who receives tips of less than \$20.00 in a calendar month does not have to report the tips to his or her employer or report those tips as income on his or her income tax return
 True False
60. Tip reports must be done at least once a month and no later than on the 10th calendar day of the following month after the tips are received.
 True False
61. If you are an *employee* of a salon you should receive a Form W-2, *Wage and Tax Statement*, from your employer at the end of each year.
 True False
62. A contract that states that you are an independent contractor automatically means you are an independent contractor for tax purposes.
 True False
63. If someone has a lease agreement to “lease” space in someone else’s shop or salon, that means that he/she is an independent contractor for tax purposes.
 True False
64. If you are a booth renter who is an independent contractor, you must issue Form 1099-MISC for business rent paid of \$600.00 or more to non-corporate landlords each year.
 True False
65. Booth renters that are required to pay estimated taxes must pay them monthly on Form 1040ES, *Estimated Tax for Individuals*.
 True False
66. Under the common law rules, a worker is an employee if the person or company for whom the employee performs services can control what will be done and how it will be done.
 True False
67. If you own or operate a salon and have workers who are not independent contractor or booth renters, you are the employer of those workers.
 True False
68. The cost and upkeep of work clothes may be tax deductible if the clothing items are suitable for everyday wear.
 True False
69. Course fees and travel expenses paid for training in order to obtain a Cosmetology License are considered legitimate, deductible expenses.
 True False
70. The Internal Revenue Service reports your earnings to the Social Security Administration.
 True False
71. In tax year 2002, individuals over 50 years old may contribute up to \$3,500 to both traditional and ROTH Individual Retirement Accounts (IRAs).
 True False
72. The funds in a 401(k) plan may be used to finance business operations.
 True False
73. Penalty amounts for improper reporting or filing of income tax can be as much as 75 percent (depending upon the failure and intent) of what would have been due had you reported accurately.
 True False
74. The Hope Credit is available for an entire four years of an undergraduate’s education.
 True False
75. The Lifetime Learning Credit is limited to students in the first two years of post-secondary education.
 True False

A NOTE FROM INFORMED

Dear Personal Service Professional,

I would like to take this opportunity to thank you for your consideration of this continuing education activity for meeting your licensing requirements. I know that there are several different products available to you to meet this requirement and I'm glad you've chosen us.

In 1991, The Florida AIDS Education Program became the first organization to provide home-study continuing education to individuals licensed by the Florida Board of Cosmetology to meet educational requirements. At that time, the Board required only two hours of continuing education in the area of HIV/AIDS. When the Board expanded the requirements to 16 hours, the Florida AIDS Education Program joined forces with INFORMED (a nationally accredited sponsor of continuing medical, health and legal education) to meet the increased needs of our loyal client base.

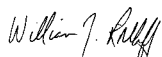
Over the years, we have learned a **LOT** about the wants and needs of our course participants. Through course evaluations and telephone contact, we have evolved our programs to be the most informative, convenient and economical activities available to you today. Here are some reasons why:

- **Information:** Our course content experts include medical writers, adult education experts, instructors and cosmetologists. These individuals work together to create the most comprehensive material available to meet your educational requirements.
- **Convenience:** Our experience has taught us that the most important feature of our activities has been the overall convenience of it. We give you a choice. You may complete this activity by phone, over the Internet, by fax or by mail. We allow payment options of cash, check, money order or credit card. We work hard to make things easy for you.
- **Value:** We stand behind our product with a low-cost guarantee. If you can find another course designed to meet your 16-hour educational requirement at a price lower than \$25.00, give us a call and let us know about it. If we cannot beat the price of that cheaper program, we will charge you **nothing** to complete this course.

In addition to all that, INFORMED also provides the Board of Cosmetology all participant information on a regular basis. What does that mean to you? When you complete this activity, the Board will be notified. This allows the Board to know right away that you have completed your continuing education requirements.

Once again, thank you for choosing INFORMED. I am confident that ours is far and away the finest program available to Personal Service Professionals licensed in the state of Florida.

Sincerely,



William J. Ratliff
Director, Program Administration

Self-Assessment Answer Sheet

If you have questions regarding the test questions in this booklet you may contact our technical assistance line at 1-800-828-9558.

Please complete pages 67 and 68 in their entirety. Once you have completed these pages, you may call, fax or mail in your answers and evaluation. If paying by check or money order, please make them payable to **INFORMED**.

RETURN CERTIFICATE TO: (Please print neatly and in ink.)

Name

First	Middle	Last
Cosmetology License Number*		
Social Security Number		
Mailing Address		
City	State	Zip Code
()		
Telephone Number		

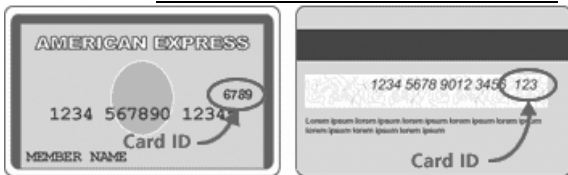
*The Florida Board of Cosmetology requires the license number of each course participant. Failure to provide this information may result in fines and penalties, including non-renewal of your license.

Signature _____
The Signature given above serves as verification that I have read and completed this program myself.

Credit Card #: _____

Expiration Date _____

Credit Card ID: _____



(Complete **ONLY** if paying for course by credit card)

COURSE FEE

The cost for completing this educational activity is:

\$25.00

(Price will vary if using coupon from inside front cover.)

- Use the table on the right to record your self-assessment answers. Answer only the questions to the sections for which you wish to receive credit.
- Please make dark marks and fill in the boxes completely.

Remember: All individuals licensed by the Board of Cosmetology are now required to complete 16 hours of continuing education which must include the HIV/AIDS education. *

*Exception: Individuals licensed solely as Hair Braiders and Hair Wrappers are **ONLY** required to complete the HIV/AIDS module.

FLCOS0204

Use the area below to indicate your Self-Assessment Answers.

I: Sterilization & Sanitation. 3 hours

	TRUE	FALSE
1.	[]	[]
2.	[]	[]
3.	[]	[]
4.	[]	[]
5.	[]	[]
6.	[]	[]
7.	[]	[]
8.	[]	[]
9.	[]	[]
10.	[]	[]

II: Board Laws and Rules. 2 hours

	TRUE	FALSE
11.	[]	[]
12.	[]	[]
13.	[]	[]
14.	[]	[]
15.	[]	[]
16.	[]	[]
17.	[]	[]
18.	[]	[]
19.	[]	[]
20.	[]	[]

III: HIV/AIDS. 2 hours

	TRUE	FALSE
21.	[]	[]
22.	[]	[]
23.	[]	[]
24.	[]	[]
25.	[]	[]
26.	[]	[]
27.	[]	[]
28.	[]	[]
29.	[]	[]
30.	[]	[]

IV: Chem. Make-up of Hair, Skin & Nails. 2 hours

	TRUE	FALSE
31.	[]	[]
32.	[]	[]
33.	[]	[]
34.	[]	[]
35.	[]	[]
36.	[]	[]
37.	[]	[]
38.	[]	[]
39.	[]	[]
40.	[]	[]

V: Environmental Issues. 1 hour

	TRUE	FALSE
41.	[]	[]
42.	[]	[]
43.	[]	[]
44.	[]	[]
45.	[]	[]

VI: Workers' Comp. 1 hour

	TRUE	FALSE
46.	[]	[]
47.	[]	[]
48.	[]	[]
49.	[]	[]
50.	[]	[]

VII: OSHA's Hazard Comm. Standard. 1 hour

	TRUE	FALSE
51.	[]	[]
52.	[]	[]
53.	[]	[]
54.	[]	[]
55.	[]	[]

VIII: Tax Responsibilities for the Personal Service Worker. (Elective) 4 hrs

	TRUE	FALSE
56.	[]	[]
57.	[]	[]
58.	[]	[]
59.	[]	[]
60.	[]	[]
61.	[]	[]
62.	[]	[]
63.	[]	[]
64.	[]	[]
65.	[]	[]
66.	[]	[]
67.	[]	[]
68.	[]	[]
69.	[]	[]
70.	[]	[]
71.	[]	[]
72.	[]	[]
73.	[]	[]
74.	[]	[]
75.	[]	[]

COURSE EVALUATION

We are committed to meeting the educational needs of our course participants. We emphasize quality, convenience, and value. Your feedback is very important. It helps shape the future development of programs.

The objectives for this program are listed on page ii in this program.

Please darken the number (●) that best describes how much you agree or disagree with the following statements using the legend indicated below.

- ⑤=Agree completely ④=Agree Somewhat
 ③=Neither agree nor disagree
 ②=Disagree somewhat ①=Disagree completely

1	The content of this program will help me in my job now or in the future.	⑤	④	③	②	①
2	The content of this program updated my knowledge.	⑤	④	③	②	①
3	This program was easy to read	⑤	④	③	②	①
4	The format of this program was effective.	⑤	④	③	②	①
5	This program met the objectives from page ii.	⑤	④	③	②	①
6	The content was clear and well organized.	⑤	④	③	②	①
7	I found the information up-to-date	⑤	④	③	②	①

Please list two behaviors or patterns you plan to change as a result of completing this program.

What type of educational format would you prefer to use for completing your mandatory continuing education requirements?

- Home Study
 Internet
 Live Seminars
 Other (Please specify) _____

Please use the space below or a separate piece of paper to include any other comments that you may have regarding this activity.

FLCOS0204

UIC CODE For Administrative Use only	
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If you have misplaced your Business Reply Envelope, mail answer sheets and payment to:
INFORMED ♦ 4828 Blanding Boulevard, Suite 2 ♦ Jacksonville, FL 32210