



Results of Ottawa Public Health's Public Consultation on Enhanced Regulation of Personal Services Settings (PSS) in Ottawa

October 2016 – Final Report



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Executive Summary

In June 2015, the Ottawa Board of Health directed staff to consult with relevant stakeholders regarding the potential for regulating Personal Service Settings (PSS). The main objective of Ottawa Public Health's (OPH) consultations was to ensure that Ottawa residents, businesses and other interested parties had the opportunity to provide meaningful input on PSS regulation. The results of these consultations are presented in this report and will be used to inform OPH's recommendations regarding the licensing of PSS in Ottawa.

The public consultation process was conducted from July 15, 2015 to September 15, 2015. OPH staff developed a consultation plan for residents, business owners and interested parties to provide input during the consultation period. Public consultations were promoted through a communication plan that included earned media, social media and OPH's website. Emails and/or letters were sent to business owners inviting them to express their views through email, an online survey, in- person and through focus groups. OPH staff also attended a regular meeting of the Ottawa Council of Business Improvement Areas in order to highlight the opportunity to provide input on regulation of PSS.

The consultation was successful in reaching over 251 people via on-line and many others through in-person discussions. Responses were received from the general public, business owners and City of Ottawa partners.

- Most respondents supported either a registration model or a business licence model with less than 4% of respondents disagreeing or strongly disagreeing with both approaches.
- Respondents were more likely to support the no-cost registration option (86%) over the business licence approach (41%).
- Eighty nine percent (89%) of respondents supported OPH's ability to fine PSS owners/operators who repeatedly fail to meet proper health practices.
- Agreement with registration requirements exceeded 80% except for the requirement to register annually (79%) and for owners/operators to register all locations of a PSS (72%).
- Agreement with record keeping requirements was less strong at 70% agreement for records of sterilizer maintenance and records of pre-packaged sterilized instruments, 72% for records of all service provided, and 73% for the 5 year record keeping



period. Endorsement was higher at 84% for records of accidental exposure to blood or body fluids.

- Agreement was lowest for the 2 million dollar insurance requirement, at 61%.
- City of Ottawa stakeholders identified the benefit of a business licensing system to promote compliance, levy graduated enforcement action and ensure regulatory consistency for all businesses in a given licensing category while using existing infrastructure.

Background

In June 2015, the Ottawa Board of Health approved a public consultation plan with respect to enhancing the regulation of Personal Services Settings (PSS). OPH used the City of Ottawa's *Public Engagement Strategy* as a framework in the preparation and design of the PSS public consultations. OPH's consultation included a mixed method design of both qualitative and quantitative components, including an on-line survey, internal and external stakeholder focus groups, phone interviews and an environmental scan of other Ontario public health units.

Ottawa Public Health's (OPH) objectives were:

- To consult PSS establishments on proposed changes to regulation and enforcement practices
- To identify the challenges, mitigation strategies and/or necessary supports PSS business will require from OPH should enhanced regulation be introduced

Though consultations were targeted to PSS owners and operators, they were also open to the public.

Results of the On-line Consultations

OPH made efforts to contact all known PSS locations to inform them of the opportunity to provide feedback through the online survey and to identify those interested in participating in focus groups. The survey was promoted by email to all known PSS premises; through OPH social media, print resources, community newspaper ads, at events such as Ottawa Pride, and at the launch of OPH's on-line learning modules for PSS operators and clients at the Canadian Institute of Public Health Inspectors' National Education Conference that was hosted in Ottawa. The online consultation was available in 5 languages – English, French, Vietnamese, Spanish and Chinese and was active from July 15 to September 15, 2015.



Ninety two percent of known PSS were contacted (788 of 853). While efforts were made to reach the remaining 8%, impediments such as invalid phone numbers, no voicemail set up at the phone number provided and/or a lack of online information prevented OPH from reaching these clients. Of those that were reached:

- 324 provided their email address so the survey link could be sent directly to them
- 29 asked that a hard copy of the survey be mailed to them
- 44 indicated that they would prefer to access the survey from ottawapublichealth.ca
- 84 were not interested in participating in the survey, and
- 304 voicemail messages were left

The survey evaluated respondents' level of support for a registration or a business licence model; enforcement actions for repeated failures in proper health practices; elements of the bylaw including registration, infection prevention and control measures, record maintenance and insurance requirements.

Characteristics of Responders

The 251 respondents to the online consultation included PSS owners, employees, Business Improvement Area (BIA) representative, health professionals and PSS clients. Clients made up the largest proportion of respondents at 59%.

What are the respondent's views?

- Most respondents supported either a registration model or a business licence model bylaw with less than 4% of respondents disagreeing or strongly disagreeing with both approaches.
- Respondents were more likely to support the no-cost registration option (86%) over the business licence approach (41%).
- Eighty nine percent (89%) of respondents supported OPH's ability to fine PSS owners/operators that repeatedly fail to meet proper health practices, although support was slightly lower among owners and employees - 78% and 72%, respectively.
- Agreement with registration requirements exceeded 80% except for the requirement to register annually (79%) and for owners/operators to register all locations of a PSS (72%).



- Agreement with the infection prevention and control requirements exceeded 85% for all requirements and 90% for most.
- Agreement with record keeping requirements was less strong at 70% agreement for records of sterilizer maintenance and records of pre-packaged sterilized instruments, 72% for records of all service provided, and 73% for the 5 year record keeping period. Endorsement was higher at 84% for records of accidental exposure to blood or body fluids
- Agreement was lowest for the 2 million dollar insurance requirement at 61%.

Comments provided included support for PSS registration and inspection.

- “I believe all spas including all employees should be licensed and checked regularly from the City of Ottawa.”
- “This is long overdue.”
- “It is extremely important to have regulation in our industry as many businesses do not operate under safe conditions.”

Concerns were expressed about the burden on small business such as:

- “Safe practice is my top priority for my staff and clients so I take all sterilization practices seriously. But I don't want more paper work and more expenses as running a small business”
- “I think businesses already pay enough fees. This is more about health concerns than licensing.”
- “Why are you trying to enforce bureaucratic and expensive practices on small businesses that are just trying to survive?”

Comments included the perception that some PSS providers were different than others or some requirements may not apply in different settings:

- “You shouldn't lump aestheticians and tattoo artists in with barbers and hairstylists.”
- “There is a significant difference between receiving a haircut and having a tattoo or electrolysis. The criteria for all PSS should not be the same. “
- “Proper light is there when cleaning but clients in the spa world like lower lighting for their services so they may relax”



- “The smooth or impervious service should not apply when one is getting a massage, facial or other treatment that requires the customer’s need for comfort”

A detailed report of the on-line consultation is provided in Appendix A.

Results of the in-person, focus group and telephone consultations

This consultation process included:

- One focus group with nine PSS operators/owners/staff who indicated they wanted to participate in the review of a proposed legislative framework for PSS.
- One focus group with City of Ottawa stakeholders to discuss the merits and drawbacks of various regulatory options. Representatives from Information Technology, Planning, Bylaw, Legal and Business Support were present.
- One focus group was offered to BIA representatives to discuss regulation of PSS, which was attended by 2 BIAs.
- OPH attempted to contact home-based PSS businesses (5 total) by telephone and was successful in reaching one.
- Additionally, Ottawa PSS owners/operators and residents were invited to call or email OPH’s Public Health Information Line and Public Health Inspectors were available to answer questions and collate comments.

What were the consultation participants’ views?

Recommendations included:

- Suggestions for how OPH should implement a new regulatory approach. For example, a phased implementation of a PSS regulatory framework focusing initially on unknown, uninspected and high-risk PSS.
- To increase OPH involvement including:
 - a comprehensive and standardized approach to inspection;
 - a public awareness strategy to recommend public vigilance and sufficient information to make informed decisions regarding PSS patronage;
 - education/training (both owners/operators/staff and PHIs); and
 - consistency.



Concerns were expressed about:

- The financial implications of regulation. A preference was expressed for regulation with no fee and minimal administrative workload (e.g. online tools) to support all PSS businesses including, small and home-based businesses.
- The obligations and logistics with respect to renewals. For example, there was a request for a 30-day buffer or grace period for application timelines.
- The requirement for the maintenance of records re: personal information (i.e. client's address).
- The \$2 million insurance requirement. Tattoo operators indicated that they had attempted to secure this level of coverage, but it was not available to them at the time.

Internal discussions with OPH's City of Ottawa partners identified the benefits of a licensing model compared to registration. These benefits include the licensing model having the capacity to promote compliance, levy graduated enforcement action and ensure regulatory consistency for all businesses in a given licensing category. Licensing also makes use of existing City infrastructure, allows for administrative cost recovery and is compatible with other City of Ottawa by-laws that regulate business activities.

Environmental Scan

Since being directed to explore regulatory enhancement options at PSS, OPH has continued to consult Ontario health units on the regulatory mechanisms that have been implemented in their respective jurisdictions. 15 health units indicated that they have some form of licensing within their jurisdiction, including Toronto Public Health and many of OPH's other comparator health units.¹ Despite this trend, OPH's scan revealed that regional organizational structures have created inconsistency – even within a given health unit – with respect to licensing regimes. For example, certain municipalities within

¹ Since being directed to explore regulatory options, OPH has consulted with the following health units whom have indicated that they have some form of licensing within their jurisdictions: Eastern Ontario Health Unit, Grey Bruce Health Unit, Haldimand-Norfolk Health Unit, Halton Region Health Department, City of Hamilton Public Health Services, Middlesex-London Health Unit, Niagara Region Public Health Department, North Bay Parry Sound District Health Unit, Northwestern Health Unit, Regional Municipality of Peel Health Department, Perth District Health Unit, Toronto Public Health, Region of Waterloo Public Health, Wellington-Dufferin-Guelph Public Health & York Region Health Services Department. Moreover, OPH has also consulted with the following health units that, at the time of consultation, did not indicate that there was a licensing option within their jurisdiction: Algoma Health Unit, Durham Region Health Unit, Porcupine Health Unit.



a regional health unit may require PSS to obtain a business license, while others within that health unit do not face those same requirements. Home-based businesses are also required to meet varying zoning requirements in certain jurisdictions.

OPH's environmental scan also indicated that enforcement of licensing requirements is typically/often completed by Bylaw Services, though enforcement of infection prevention and control practices is conducted by PHIs. Bylaw Services is responsible for the administration of the licenses, including setting/collecting all associated fees. OPH's scan also shows that PSS licensing fees across the province vary from ~\$55 to ~\$350.

Conclusion

A majority of respondents including PSS owners/operators, employees, Business Improvement Area executives and the public support a bylaw to regulate PSS and provide the means to enforce PSS standards. The preference among respondents is a low cost registration model. Concerns were identified by respondents about financial burden, administrative burden including record keeping, the requirement for meeting registration timelines and the challenges with obtaining adequate insurance for some operators. Respondents also recommended OPH take an active role in educating the public about PSS, provide education to owners/operators and staff as well as ensure consistency in the inspection process.

OPH will use the results of this consultation in proposing regulation to address two enduring limitations in carrying out its responsibilities related to PSS: difficulty in confirming their location; and a lack of compliance tools beyond the use of Section 13 orders under the *Health Protection and Promotion Act*.



Appendix A: Detailed analysis of the on-line consultation results

Methodology

The survey was available in five languages – English, French, Vietnamese, Spanish and Chinese and was administered from July 15 to September 15, 2015. There were options to provide comments and to submit contact information separately if interested in participating in a focus group.

Responses

A total of 349 respondents accessed the survey. Of these, 97 provided no responses to any questions and 1 did not provide a response to the question about registration (question 1) and the question about licensing (question 8). These 98 responses were dropped resulting in 251 responses retained for analysis. Respondents may not have responded to all questions so not all totals shown equal 251.

Question 1. I support OPH requiring businesses that offer "Personal Services" (e.g. hairdressers, barbershops, tattoo studios, and aesthetic service businesses) to register with Ottawa Public Health at no cost.

Approximately 86% of respondents either strongly agreed or agreed with a requirement to register with Ottawa Public Health (Table 1).

Table 1: Support for registration bylaw for regulation of PSS, by respondent type (n=250)

Respondent type	Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree	Total
Owner	34 (66.7%)	10 (19.6%)	6 (11.8%)	0	1 (2 %)	51
Employee	10 (55.6%)	4 (22.2%)	2 (11.1%)	1 (5.6%)	1 (5.6%)	18
BIA	1 (50.0%)	0	1 (50.0%)	0	0	2
Health professional	25 (78.1%)	5 (15.6%)	1 (3.1%)	0	1 (3.1%)	32
Client	103 (70.1%)	24 (16.3%)	5 (3.4%)	8 (5.4%)	7 (4.8%)	147

Question 2. Ottawa Public Health should be able to issue fines to PSS owners/operators that repeatedly fail to meet proper health practices. (n=250)

Overall, 89% of respondents either agreed or strongly agreed with the ability to issue fines for repeated failures in health practices.

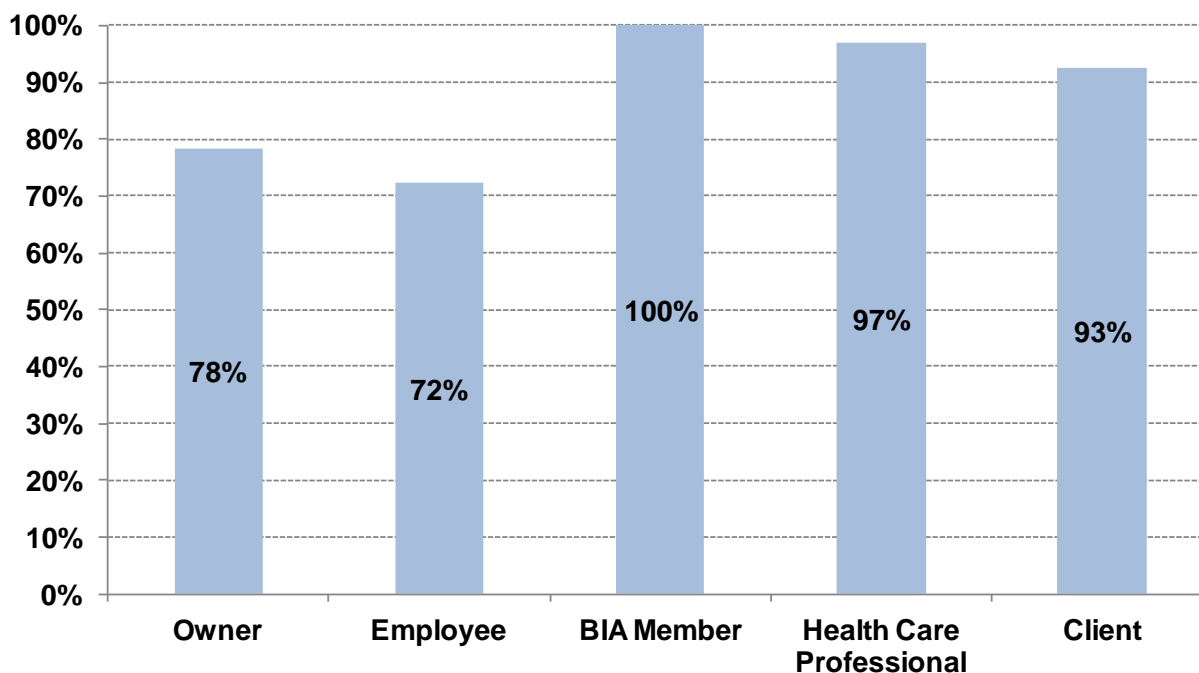
Table 2 and Figure 1 show these opinions by respondent type.

Table 2: Support for the ability to issue fines for repeated failures of proper health practices (n=250)

Respondent type	Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree	Total
Owner	29 (56.9%)	11 (21.6%)	9 (17.6%)	2 (3.9%)	0	51
Employee	9 (50.0%)	4 (22.2%)	1 (5.6%)	3 (16.7%)	1 (5.6%)	18
BIA	1 (50.0%)	1 (50.0%)	0	0	0	2
Health professional	29 (90.6%)	2 (6.3%)	0	1 (3.1%)	0	32
Client	113 (76.9%)	23 (15.6%)	1 (<1%)	4 (2.7%)	6 (4.1%)	147



Figure 1: Percent of respondents who strongly agree or agree to supporting the ability to issue fines for repeated failures of proper health practices (n=250)



Question 3. Self identification with options including owner/operator of a business that offers Personal Services; employee of a business that offers Personal Services; member of a Business Improvement Area of Chamber of Commerce; client or customer of a business that offers Personal Services or a health care professional. Because more than one option could be selected, for analysis purposes responses were attributed to responses in descending order as owner/operator, employee, BIA member, health professional or PSS client. So if a respondent identified as an owner and client, they were coded as an owner.

Table 3: Respondents to PSS on-line consultation, by type

Respondent type	Number of respondents	Percent of all respondents
Owner	51	20%
Employee	18	7%
BIA member	2	1%
Health Care professional	32	13%
Client	147	59%



Respondent type	Number of respondents	Percent of all respondents
Missing	1	<1%
Total	251	100%

Question 4. Please indicate your agreement with the following requirements regarding registration and renewal from OPH's proposed "PSS Registration by-law". The requirements which are summarized in Table 4: Percent agreement with requirements of registration and renewal Table 4 included:

- Each personal services location must register with OPH and renew their registration annually
- Owners/Operators must register prior to starting a personal services business, or within 60 days of the proposed regulations being introduced.
- Registration must be in writing and include:
 - the name, business address, and business telephone number of the PSS, and for each location of the PSS where there is more than one branch or location.
 - the name, address, and telephone number of the Owner or Operator of the PSS;
 - Where ownership is a partnership, the name, address, and telephone number, the mailing address, of each partner in the partnership;
 - the name, address and telephone number of a contact person for the PSS;
 - the type of business, trade, occupation, and service being provided at the PSS;
 - other information that the Registrar may require for the health, safety and well-being of persons
- Owner/Operator of multiple PSS must register each location separately



Table 4: Percent agreement with requirements of registration and renewal of the proposed by-law

Requirement	Agree	Neither agree or disagree	Disagree
Annual registration	79.3%	8.5%	12.2%
Registration required prior to starting a business or within 60 days of bylaw being introduced.	83.5%	9%	7.5%
Registration content details	83.1%	8%	8.9%
Owner/Operator of multiple PSS must register each location separately.	72.7%	17.2%	10%

Question 5. Please indicate your agreement with the following requirements regarding infection prevention and control measures from OPH's proposed "PSS Registration by-law". The requirements are summarized in Table 5.

- The premises and all its items (e.g. furniture) must be kept in good repair and in a clean and sanitary condition.
- All work areas must be well lit to ensure proper cleaning of the work areas and any equipment and instruments used.
- Every table, mat or other surface upon which persons lie or sit while being given a Personal Service shall have a smooth top surface of impervious material.
- The location must have a sink with an adequate supply of hot and cold water, which, when used for cleaning of instruments and equipment, and must be a type and size adequate for the proper cleaning of such instruments and equipment and which, when used for hand cleaning, shall have:
 - An adequate supply of liquid soap in a suitable container or dispenser;
 - Hot air dryers or individual clean towels for hand drying; and
 - A suitable receptacle for used towels and waste material.
- All personal service workers must clean their hands both before and after providing a service.



- All instruments and equipment used which are not single-use items must be properly cleaned and disinfected, or cleaned and sterilized, between each use.
- Instruments and equipment that have been cleaned and disinfected or sterilized will be stored and handled in a manner that prevents contamination.
- All sharp instruments must be disposed of in an approved sharps container and the container must be disposed of as pathological or biomedical waste.
- Single use instruments/equipment must be used on one person only and must be disposed of immediately upon use.
- Mechanical sterilizers must be monitored on a regular basis by spore testing and by the use of temperature sensitive indicators.

Table 5: Percent agreement with requirements of proposed infection prevention and control measures of the proposed by-law

Requirement	Agree	Neither agree or disagree	Disagree
The premises must be in good repair, clean and sanitary.	96.3%	1.9%	1.9%
Work areas must be well lit.	90.6%	6.1%	3.3%
Surfaces must have smooth top of impervious material.	85.9%	8.5%	5.6%
Adequate sink facilities.	93.4%	4.2%	2.4%
All personal service workers must clean their hands both before and after providing a service.	93.4%	4.7%	1.9%
All instruments and equipment used which are not single-use items must be properly cleaned and disinfected or sterilized, between each use.	96.7%	1.4%	1.9%
Cleaned instruments and equipment will be stored and handled to prevent contamination.	95.7%	3.3%	0.9%
Sharp instruments must be disposed of in an approved sharps container disposed of as pathological or biomedical waste.	95.7	2.9%	1.4%



Requirement	Agree	Neither agree or disagree	Disagree
Single use instruments/equipment must be used on one person only and disposed of immediately upon use.	96.7%	1.9%	1.4%
Mechanical sterilizers must be monitored on a regular basis.	88.3%	9.9%	1.9%

Question 6. Please indicate your agreement with the following requirements regarding maintaining records from OPH's proposed "PSS Registration by-law". The requirements which are summarized in Table 6 included:

- Owners/Operators must keep:
- A record of each use of a mechanical sterilizer, including the date and time of each use, the identity of the individual who performed the sterilization, and for sterilization equipment manufactured such that it is capable of producing such information, the temperature, pressure and duration of the sterilization cycle.
- A record of all spore testing conducted at the PSS, including the date and results of such testing for each sterilizer.
- A record of all purchases of pre-packaged sterilized items, including the date of purchase, the name of the supplier, and the type, quantity, lot numbers and any expiry date of the items purchased.
- A record of all body piercing, electrolysis, tattoo and micropigmentation services or procedures performed, including the date on which the service or procedure was performed, the full name of the Personal Service Worker, and the full name, telephone number and address of the customer.
- A record of all accidental exposures to blood and other body fluids, including the date on which the incident occurred, the site of the injury, the nature and circumstances of the incident, any action taken as a result of the exposure, the full name, address and telephone number of all persons involved in the exposure, and the full names of all Personal Service Workers involved in the incident.
- Owners/Operators must retain the records for five years and must keep the records at the premises for the first year.



Table 6: Percent agreement with requirements of records maintenance of the proposed by-law

Requirement	Agree	Neither agree or disagree	Disagree
Detailed records of mechanical sterilizers, testing and of pre-packaged sterilized items must be kept.	70.6%	21.0%	8.4%
A detailed record of all body piercing, electrolysis, tattoo and micropigmentation services or procedures must be kept.	72.3%	17.8%	9.9%
A detailed record of all accidental exposures to blood and other body fluids must be kept.	83.6%	10.8%	5.6%
Records must be kept for five years at the premises in the first year.	72.6%	17.9%	9.4%

Question 7. Please indicate your agreement with the following requirements regarding insurance from OPH's proposed "PSS Registration by-law". The requirements included that owners/occupier must file proof of Comprehensive/Commercial General Liability insurance subject to limits of not less than two million dollars (\$2,000,000.00).

Table 7: Percent agreement with requirements of records maintenance of the proposed by-law

Topic	Agree	Neither agree or disagree	Disagree
Comprehensive/Commercial General Liability insurance of not less than two million dollars (\$2,000,000.00) must be obtained.	61.4%	25.6%	13%

Question 8. Ottawa Public Health should pursue a by-law requiring PSS to have a City of Ottawa licence (with an associated licensing fee), rather than a by-law that requires registration with OPH (n=208).



Table 8: Support for business licensing bylaw for PSS, by respondent type (n=208)

Respondent type	Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree
Owner	9 (20.5%)	6 (13.6%)	17 (38.6%)	5 (11.4%)	7 (15.9%)
Employee	3 (25.0%)	0 (0.0%)	4 (33.3%)	3 (25.0%)	2 (16.7%)
BIA	1 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Health professional	33 (27.0%)	18 (14.8%)	35 (28.7%)	24 (19.7%)	12 (9.8%)
Client	10 (34.5%)	6 (20.7%)	7 (24.1%)	5 (17.2%)	1 (3.4%)

Figure 2 shows the extent of support of the different bylaw models: registration and licensing by respondent type based on the responses from questions 1 and 8. Nine respondents, (3.6%) disagreed with both models.

Figure 2: Support for type of bylaw (registration or licensing) as strong agreement or agreement by respondent type

