CYNGOR GWYNEDD

Please email completed application forms and required supporting

documents to: trwyddedu@gwynedd.llyw.cymru

or by post to: Gwarchod Y Cyhoedd, Ffordd Y Cob, Pwllheli, LL53 5AA.



Application for a Practitioners Licence (special procedures) under Part 4 of the Public Health (Wales) Act 2017

PLEASE READ THE FOLLOWING INSTRUCTIONS AND ACCOMPANYING GUIDANCE NOTES FIRST

If you are completing this form by hand, please write legibly in block capitals using ink. Use additional sheets if necessary

(marked with the heading "Continuation sheet – application for special procedure licence" and include the number of the elevant question and the applicant's name and address). You may wish to keep a copy of the completed form for your records.

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Name of relevant issuing local authority (see Guidance Note 1):
Part 1 – Application details
Please tick where appropriate
1.1 What type of special procedure licence does your application relate to?
Temporary (no more than 7 days) ☐ 3 years ☐
If you are applying for a temporary licence, please indicate why a special procedure licence is required (for example give details about an exhibition, entertainment or event):
1.2 When do you want the special procedure licence to start?
As soon as possible \square
Or
Specific dates \Box [For example, state the dates you wish the special procedure licence to cover; in the case of an application for a temporary licence, you must specify the dates when the licence will be required.]
to
Part 2 - Applicant details (fill in as applicable) Please tick where appropriate
2.1 Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Dr ☐ Other ☐ (please specify)
2.2 Surname:
2.3 First name(s):
2.4 Other known names:
[For example, a trading name, alias or pseudonym.]

2.5 Applicant's proposed trading name:
2.6 Contact telephone number:
2.7 Alternative contact telephone number (optional):
2.8 E-mail address (if applicable):
2.9 Date of Birth:
2.10 Applicant's usual residential address:
Postcode:
2.11 Applicant's business address (if different):
Postcode:
2.12 Please tick the following statement that applies (see Guidance Note 2):
I am eligible for a basic disclosure certificate issued by the Disclosure and Barring Service \Box
I am not eligible for a basic disclosure certificate and therefore have obtained an overseas criminal record certificate \Box
I am eligible for both a basic disclosure certificate issued by the Disclosure and Barring Service and an overseas criminal record certificate \Box
Part 3 – Nature of special procedure(s) to be performed
Please tick where appropriate
3.1 Please state the special procedures that you will be performing:
Acupuncture
Body Piercing
Electrolysis
Tattooing
3.2 If applicable, please provide further details of the methods/equipment used to perform the special procedure [For example, dry needling, microblading, nanoblading, semi-permanent make up etc.]:
3.3 Do you perform special procedures on intimate body parts? If yes, please provide further details (see Guidance Note 3):
Yes No No
3.4 Do you perform any other activities in the course of a business (for example activities that are not a special procedure)? (See Guidance Note 4)
Yes No No

If yes, please list those other activities:
3.5 Please indicate your work status in respect of performing special procedures (tick all that apply) (see Guidance Note 5):
I work on a fixed site basis \Box
I work on a mobile basis \square
I work on a peripatetic basis \square
I work on a temporary basis \square
I own a business and work within that business \Box
I am an employee of a business \Box
I am self-employed \square
I am a manager of a business \Box
I rent a room/chair from an approved premises or vehicle, but I am not an employee of that business \Box
Other (please specify)
3.6 Website address and/or details of any public facing social media platforms for business (if applicable):
3.7 Please provide the details of all approved premises and/or vehicles at which a special procedure is to be performed and will be identified on your special procedure licence (see Guidance Note 6):
3.8 Where possible please provide the approval certificate number(s) for all approved premises or vehicles (see Guidance Note 7):
3.9 Of the approved premises and/or vehicles you have identified above and will be listed on your special procedure licence, which approved premises and/or vehicle will you use when performing the majority of your work?
Part 4 – Convictions for relevant offences
Please tick where appropriate
4.1 Do you have an unspent conviction for a relevant offence? (See Guidance Note 8)
Yes No No
4.2 If yes, please provide the following information:
Offence:
Date of conviction:
Court:
Penalty/sentence:

Duration of sentence (if applicable):
[Where there is more than one conviction, please use an additional sheet clearly marked "Convictions for relevant offences". The sheet should include all the information requested in 4.2.]
Part 5 – Miscellaneous (fill in as applicable) Please tick where appropriate
5.1 Have you been served with a notice under section 61(1) of the Public Health (Wales) Act 2017 (designation of person to obtain a special procedure licence)?
Yes No No
If yes, please provide details [For example, the name of the local authority issuing the designation, the date of issue and the local authority's reasons for the designation.]:
5.2 Have you previously applied for a special procedure licence? (Tick all that apply)
No \square Yes – application for licence granted \square Yes – application to vary licence granted \square
Yes – application to renew licence granted \Box
Yes – application (for a licence, to vary and/or to renew) granted and licence revoked \Box
Yes – application (for a licence, to vary and/or to renew) refused \Box
If yes to any of the above, please provide further details [For example, the name of the relevant local authority and any licence number, the reasons why an application was refused, the reasons why the licence was revoked.] (see Guidance Note 9):
5.3 Do you hold a certificate for an approved premises and/or vehicle for the performance of a special procedure?
Yes ☐ No ☐ Application pending ☐
If yes, please provide the approval certificate number (see Guidance Note 7):
If an application is pending, please provide the date on which the application was made:
5.4 Please confirm which language you wish to use in your dealings with the local authority about your application:
Welsh ☐ English ☐
5.5 Please set out any other information you consider to be relevant to your application (see Guidance Note 10):
Part 6 - Declaration and Checklist (please complete/tick)
Applicable for all applicants

I confirm that, to the best of my knowledge, the information contained in this application is true. I understand that it is an offence under section 82(7) of the Public Health (Wales) Act 2017 to give information which I know is false or misleading in, or in relation to, this application or I am reckless as to whether it is false or misleading.
I understand that giving false or misleading information (whether knowingly or recklessly) may result in my special procedure licence being revoked.
I understand that if I fail to disclose a relevant offence, or a material particular in relation to it, this may result in my special procedure licence being revoked.
I also confirm that:
☐ I am aware of my obligations to obtain valid insurance cover in respect of the performance of special procedures (which will form part of the mandatory licensing conditions that will be attached to my licence) (see Guidance Note 11),
\square I have read and understood the mandatory licensing conditions that will be attached to my licence, and
☐ I understand the implications of non-compliance with those mandatory licensing conditions. (See Guidance Note 12)
Checklist:
 Payment of the application fee has been made/is enclosed (see Guidance Note 13) □ Application form fully completed and signed (see Guidance Note 14) □ Evidence of regulated Level 2 Award is enclosed (see Guidance Note 15) □ Evidence of basic disclosure certificate/overseas criminal record certificate is enclosed (see Guidance Note 2) □ Copy of identity documents are enclosed (see Guidance Note 16) □ Recent colour photograph of applicant is enclosed (see Guidance Note 17) □ I understand if the above requirements are not complied with the application may be rejected □
Part 7 – Signature
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Signature of applicant (proposed special procedure licence holder) Signature: Print name: Date: Where the application is to be submitted in an electronic form, the signature should be generated electronically and should be a copy of the person's written signature. Guidance Notes
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(b) if applicable, an overseas criminal record certificate.

Any certificate must not be older than three months (from date of issue).

Where possible please provide an electronic copy of your basic disclosure certificate. In doing so you are providing permission to share the result electronically with the local authority you are applying to.

An applicant who is not eligible for a basic disclosure certificate must obtain an overseas criminal record certificate. The application process for criminal record checks for an applicant from overseas varies from country to country. An applicant may need to apply in the country or to the relevant embassy in the UK. Please see https://www.gov.uk/government/publications/criminal-records-checks-for-overseas-applicants for further guidance.

A basic disclosure certificate will not cover the time an applicant has lived outside of the UK. If an applicant is eligible for a basic disclosure certificate but has spent more than 6 months living outside of the UK, the applicant must submit an overseas criminal record certificate from the country / countries covering the period that the applicant spent living overseas.

Note 3: Performance of special procedures on an intimate body part

See section 96(2) of the Public Health (Wales) Act 2017 which sets out what an intimate body part is.

Note 4: Performance of other activities in the course of a business

An applicant may include details of other activities which the applicant performs in the course of a business but are not classed as special procedures. For example, activities such as beauty treatments, hairdressing, retail etc.

Note 5: Work status in respect of performing special procedures

Applicants are advised to consult the non-statutory guidance if they are unsure as to what "basis" they perform special procedures. For example, an applicant will be performing a special procedure on a "mobile basis" if the special procedure is performed in a vehicle. See also section 94 of the Public Health (Wales) Act 2017 for further information.

Note 6: Details of approved premises or vehicle

"Approved premises or vehicle" means premises or a vehicle approved under section 70(1) of the Public Health (Wales) Act 2017, in respect of a special procedure, by the local authority.

Applicants must—

- (a) in the case of a licence authorising the performance of a special procedure at premises, specify the address of each of the premises at which the performance of the special procedure is to be authorised by the special procedure licence;
- (b) in the case of a licence authorising the performance of a special procedure in a vehicle, specify the registration number of the vehicle;
- (c) in the case of a licence authorising the performance of a special procedure in a vehicle that does not have a registration number, whatever identifying details of the vehicle the local authority considers appropriate.

Note 7: Approval certificate number

The "approval certificate number" means the reference number given by the local authority to the approval certificate which is unique to that certificate and which is specified in it.

Note 8: Convictions for relevant offences

Applicants are required to disclose unspent convictions for relevant offences. What is considered as a relevant offence is set out in section 66 of the Public Health (Wales) Act 2017. A basic disclosure certificate will show an applicant's unspent convictions and conditional cautions. Applicants should take independent legal advice if they are unsure whether or not they are required to disclose a conviction for a relevant offence. Applicants should be aware that a local authority may revoke a special procedure licence if false or misleading information is provided in relation to an applicant's convictions for relevant offences (see section 68 of the Public Health (Wales) Act 2017).

Note 9: Licence number

The "licence number" means the number given by the local authority to the special procedure licence which is unique to that licence and which is specified in it.

Note 10: Providing relevant information to accompany application form

An applicant may give any information that they consider relevant to their application. For example this could be further information (including any mitigating factors) in relation to any unspent conviction for a relevant offence that the applicant has declared on this application form.

Note 11: Insurance cover

Applicants must make a declaration that they will obtain valid insurance cover in respect of the performance of special procedures and that requirement will form part of the mandatory licensing conditions that will be attached to the special procedure licence. Insurance cover means a valid policy of insurance which was issued by an authorised insurer to insure the applicant in respect of liabilities, in respect of illness, infection, injury and other non-infectious adverse health effects (including allergic reactions), arising from the performance of a special procedure.

Note 12: Non-compliance of mandatory licensing conditions

Applicants should be aware that a special procedure licence can be revoked if a local authority is satisfied that the licence holder has failed to comply with an applicable mandatory licensing condition, and that the non-compliance presents, or could present, significant risk of harm to human health. See section 68 of the Public Health (Wales) Act 2017 for further details.

Note 13: Payment of the application fee

For payments of application fees please call Galw Gwynedd on 01766 771 000.

Note 14: Submission of application

Applicants are advised to contact the relevant issuing local authority for further information about how an application for a special procedure licence is to be submitted. This information may be found on the local authority's website.

Note 15: Evidence of regulated Level 2 Award

Applicants must hold a Level 2 Award in Infection Prevention and Control for Special Procedures Practitioners (an award that is regulated by Qualifications Wales). Applicants must provide evidence of this award by enclosing either the original certificate or a copy of the certificate. If a copy of the certificate is provided, the original certificate must be made available to the issuing local authority upon request.

Note 16: Identity documents

All applicants must provide proof of their full name and date of birth. The following forms of photographic identification are permitted:

- Valid passport or driving licence,
- If the applicant has neither of the above then the following photographic ID cards are considered suitable; a Biometric residence permit; HM Forces ID card; EEA National ID card; Irish Passport Card; Visa or Work permit.

Applicants may provide a copy of their identity documents to accompany the application form but the original proof of identity must be made available to the issuing local authority upon request.

Note 17: Recent colour photograph

All applicants must submit a recent colour photograph of themselves. The photograph must:

- be a UK passport style and size photograph,
- be taken on a light background so the applicant's features are distinguishable and contrast against the background,
- clearly show the applicant's face, who must have a neutral expression and not be wearing anything which covers their head or hair (other than for religious or medical reasons),
- be a true likeness of the applicant.