SUNRISE REVIEW

OF

ELECTROLOGISTS

Submitted by The Colorado Department of Regulatory Agencies Office of Policy & Research June 1994 August 31, 1994

The Honorable Vickie Agler, Chair Joint Legislative Sunrise/Sunset Review Committee State Capitol Building Denver, Colorado 80203

Dear Representative Agler:

We have completed our evaluation of the sunrise application for licensure of electrologists and are pleased to submit this written report which will be the basis for my office's oral testimony before the Sunrise and Sunset Review Committee. The report is submitted pursuant to section 24-34-104.1, Colorado Revised Statutes, 1988 Repl. Vol., (the "Sunrise Act") which provides that the Department of Regulatory Agencies shall conduct an analysis and evaluation of proposed regulation to determine whether the public needs, and would benefit from, the regulation.

The report discusses the question of whether there is a need for the regulation in order to protect the public from potential harm, whether regulation would serve to mitigate the potential harm, and whether the public can be adequately protected by other means in a more cost effective manner.

Sincerely,

Joseph A. Garcia Executive Director

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INTRODUCTION

The Department of Regulatory Agencies has completed its evaluation of the application for regulation of Electrologists submitted by the Colorado Association of Electrologists. The applicant seeks state regulation through licensure of Electrologists. Pursuant to the Colorado Sunrise Act, C.R.S. 24-34-104.1, the applicant must prove the benefit to the public of the proposal for regulation according to the following criteria:

- 1. Whether the unregulated practice of the occupation or profession clearly harms or endangers the health, safety or welfare of the public, and whether the potential for harm is easily recognizable and not remote or dependent on tenuous argument;
- 2. Whether the public needs and can reasonably be expected to benefit from an assurance of initial and continuing professional or occupational competence; and
- 3. Whether the public can be adequately protected by other means in a more cost-effective manner.

The scope of this review was comprehensive in nature. As part of this sunrise review process, the Department of Regulatory Agencies performed a literature search, interviewed electrologist associations and electrologists, federal and public health officials, and reviewed other state's statutes regarding electrologist legislation. Results of this process are reflected in the recommendations section of this report.

BACKGROUND

PROPOSAL FOR REGULATION

Electrolysis is a method of permanent hair removal. The majority of those who seek electrology are people who suffer from hirsutism, the growth of superfluous hair. This condition of excessive hair growth can be associated with many factors including: heredity, puberty, pregnancy, menopause, obesity, psychological stress or trauma, reconstructive surgery, adverse reactions to certain prescription medication and other various conditions.

The nature of this parenteral or invasive procedure involves a fine filament (needle) that is inserted into the hair follicle, alongside the hair to the dermal papilla (the lower 1/3 of the follicle). Once inside the hair bulb, the electrologist then transmits specific amounts of electrical current to stun the follicle and eventually eliminate hair growth. There are traditionally three forms of current used by electrologists: electrolysis (galvanic or direct current), thermolysis (alternating, high frequency current), or a combination of the two (superimposed or sequential blend). All three of these currents are effective in this hair removal process. Because of the close proximity of the electrologists tools to the skin, their needle and tweezers often penetrate the skin and break the blood barrier. Needles and tweezers may become contaminated with blood serum and other material that was on the skin or follicle.

Once the electrologist removes all of the regenerative cells, the hair is then permanently eliminated. The length and frequency of visits needed for complete hair removal is determined on an individual, case-by-case basis. There are many factors that can affect the success or failure of this procedure such as the amount and structure of the hair to be removed, cause of growth, previous methods of temporary hair removal, and other related problems.

STANDARDS FOR PRACTICE

In 1994, The American Electrology Association developed a guide titled the <u>Standards of Practice for Electrologists.</u> Under Standard IV, practitioners are to provide the patient client with information relevant to the electrology process including the process of hair growth cycles, causes of hair growth, and adverse effects of temporary hair removal methods. Also under this standard, electrologists are to explain infection control procedures and precautions consistent with the AEA Infection Control Standards for the Practice of Electrology. Although membership in professional electrology associations is not mandatory, it is encouraged.

ELECTROLOGISTS IN COLORADO

Currently there are approximately 200-300 electrologists practicing in the state of Colorado. They typically work in beauty salons, medical offices, or out of their private homes. Electrologists not only perform cosmetic procedures of hair removal, but many also seek affiliations with medical doctors in order to provide electrolysis services to patients who require permanent hair removal after reconstructive surgery.

EDUCATIONAL CURRICULA AND PRIVATE CERTIFICATION

There are no minimum requirements to become an electrologist in Colorado. There are three training schools in Colorado. The approximate cost of attending these institutions and completing the 300 hour course is \$3,000.

In Colorado, the Colorado Association of Electrologists (CEA) encourages practitioners to take an exam that offers a certification title. The International Board of Electrologist Certification is a voluntary comprehensive exam that is sponsored by the American Electrology Association in conjunction with the Educational Testing Service.

The American Electrology Association formulated a national accreditation program for interested states. **The Council on Accreditation of Electrology Educational Institutions/Program** has developed an accreditation program of entry level educational standards. In order to be eligible for accreditation, the school or program must offer a certain number of hours of post secondary education instruction with a curriculum that includes theoretical and clinical learning experiences.

This seven member council has determined the objectives of accreditation to:

- 1. Assure the quality of the institution or program;
- 2. Assist in the improvement of the institution or programs;
- 3. Develop a recognizable standard of excellence for those seeking to enter the field; and
- 4. Improve the quality of professional services available to the public.

At the present time there are no schools in Colorado that are accredited by the American Electrology Association.

THE PROPOSAL FOR REGULATION

The applicant proposes licensure of electrologists. Licensure would restrict the practice of electrolysis to those who demonstrate competency and meet all of the requirements of the proposed act. Although the applicant does not state how the licensing of electrologists would be administered, regulation of this type usually falls under the Department of Regulatory Agencies (DORA) and requires that applicants for licensure have a specific amount of training and pass an exam. In addition, a professional board would need to be established to administer the program.

The applicant argues that state licensure of electrologists would reduce risks to the public from being harmed physically, psychologically, and financially. Since the process of electrolysis often penetrates the skin, there is the potential that improper sterilization may lead to dangers of infection (such as Hepatitis B or HIV) or the transmission of contagious skin diseases (such as flat warts).

Inadequate procedures performed by an electrologist may also cause a variety of problems including, swelling, scabs, permanent scars, pitting, and brown or white spots on the patients. These may result from over treatment or an improper amount of electric current. Improper procedures which result in physical harm may also have psychological implications to the client. Electrolysis is a therapeutic agent for the client. Many have the procedure done to enhance their self-esteem.

Although there are various electrology trade associations that have taken steps to educate electrologists about proper procedures, not all electrologists belong to these associations. The applicant argues that licensure will ensure that the procedure of electrology is performed correctly and will reduce the potential physical, emotional and financial cost that could be borne by the consumer. The applicant states that consumer protection is missing under any other regulatory format. Licensure would assist in "weeding out" the unknowledgeable electrologist who is improperly treating patients as well as developing a greater consumer awareness of the different methods of hair removal, expectations of these procedures, and the assurance of ethical practices of electrologists.

REGULATION IN OTHER STATES

According to the Council on Licensure, Enforcement, and Regulation, there are 25 states that license electrologists. The Office of Policy and Research (OPR) conducted an informal survey of surrounding states that license electrologists. These were Kansas, New Mexico, North Dakota, and Utah. Under these statutes, minimum educational requirements must be met. Many of these states do not have electrology education facilities within their own state thereby requiring a licensed electrologist to travel out of state to receive their education. All of these states reported little or no complaints against electrologists.

In North Dakota, the Department of Health has been regulating the licensing of electrologist for the past five years. Since 1980 they have not received any complaints against electrologists. An applicant must have 600 hours of training; but North Dakota does not have an accredited school in their state.

New Mexico has similar requirements for electrologists. They also require 600 hours of education and also do not have a school to provide that course work. Licensure is regulated by the Board of Barbers and Cosmetologist who inspect electrolysis facilities once or twice a year. New Mexico reports that they have not received a complaint against an electrologist.

In order to receive a license as an electrologist in Kansas, the applicant must first be licensed as a cosmetologist (requiring 1,500 hours of education) or as a cosmologist technician (requiring 1,000 hours of education). In addition, there is a 500 hour requirement of electrology education. As Kansas does not have a school to provide this electrology education, applicants must travel out of state or do an apprenticeship for 500 hours. Licenses are regulated through the Board of Cosmetology and they issue both personal and facility licenses. Inspections occur approximately once to twice per year. There have been no complaints about electrologists in the past eighteen months.

In Utah, licensees are regulated by the Board of Barbers and Cosmetologists. Applicants are required to have 500 hours of education and pass a laws and rules exam as well as a practical exam. Utah does have its own electrology school. It is a separate division within the cosmetology school. Utah combines complaints against cosmetologists and electrologist and have received very few complaints against this group.

CONCLUSION

Although the Department of Health does not regularly inspect electrologist's facilities (they also do not inspect tattoo artist or acupuncturists although in Denver local officials do provide inspections), they do have the authority to investigate and control the causes of epidemic and communicable diseases under Regulation 9 of the State of Colorado Rules and Regulations Pertaining to the Epidemic and Communicable Disease Control. This regulation relates to the proper cleaning and sterilization of needles, instruments, probes, and devises used by acupuncturists, tattoo artists, and persons performing ear or other percutaneous (breaking of the skin) piercing. In theory, electrolysis does not break the skin, however in practice the needles or tweezers often break the skin and the blood barrier. Consequently the DOH would have authority under Regulation 9.

At the present time, the Department of Health has not received any complaints about electrologists or their procedures. This suggests that the danger of consumer harm is small. Furthermore, although there is the potential that infectious diseases could be transmitted by electrolysis, there have been no cases reported where Hepatitis B or HIV have been transmitted via improper procedures.

In the case with infectious diseases, there have been federal and state efforts to educate the public about the dangers of non sterile needles. This awareness has been used by electrologists and is reflective in their advertising. Many electrologists advertise that they use disposable sterile needles as an incentive for the consumer to use their services instead of another electrologist who sterilizes and reuses their own needles. The disposable needle has a greater certainty of being sterile since it is only used once.

Licensure would also require that additional resources be granted to the DOH. These resources would be needed to manage the program including administering the examination as well as providing inspections. The cost for such a program would be approximately \$30,000. In light of the relative low risk of danger from electrologists and the cost to implement such a program, it is reasonable to conclude that resources could be better spent elsewhere. As an example of potential harm, the applicant cites a Florida dentist who passed HIV onto his patients due to improper procedures and uses this case to draw parallels to the same harm that could occur with improper electrology procedures. However, dentists are highly regulated requiring licensure as well as passing a comprehensive exam. Even with these strict regulatory requirements and oversight, this example suggests that preemptive measures could not prevent an individual from practicing improperly if they so choose. The question is whether regulation of electrologists will prevent or reduce public harm. Given the lack of data showing a real risk, the greater public and professional awareness of disposable needles, and alternative enforcement mechanisms by the state, licensure does not appear to be the most effective use of the states resources. It would be more appropriate that electrologist associations require safe practices as part of their condition of membership.

RECOMMENDATION 1: The General Assembly should not regulate the practice of electrology.