



# **Manual of Naval Preventive Medicine**

## **Chapter 2**

### **SANITATION OF LIVING SPACES AND RELATED SERVICE FACILITIES**

**DISTRIBUTION STATEMENT "A"**

This publication supersedes NAVMED P-5010-2 of 1995

THIS PAGE INTENTIONALLY LEFT BLANK

# NAVMED P-5010-2

## Chapter 2 Manual of Naval Preventive Medicine Sanitation of Living Spaces and Related Service Facilities

17 Jun 2019

To: Holders of the Manual of Naval Preventive Medicine

1. Purpose. This revision provides guidance intended to be used in the accomplishment of sanitation ashore and afloat. The information in this chapter describes standardized sanitary measures used onboard installations and ships of the United States Navy to safeguard the health of Sailors and Marines, prevent the spread of infection, and ensure mission readiness.
2. Background. The Navy and Marine Corps Public Health Center is committed to the important role in eliminating potentially adverse health conditions in existing facilities. Cleanliness contributes to morale and is esthetically desirable.
3. Action. Replace entire chapter 2 with this version.



TERRY J. MOULTON  
Chief, Bureau of Medicine and Surgery  
Acting

Releasability and distribution:

This publication is cleared for public release and is available electronically only via the Navy Medicine Web site, <http://www.med.navy.mil/directives/Pages/BUMEDInstructions.aspx>

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

THIS PAGE INTENTIONALLY LEFT BLANK

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

TABLE OF CONTENTS

|  | <u>Page</u> |
|--|-------------|
| <b>Section I. Introduction .....</b>   | <b>2-1</b>  |
| 2-1. Introduction.....   | 2-1         |
| 2-2. Objectives .....  | 2-1         |
| 2-3. Responsibilities.....   | 2-2         |
| 2-4. Defense Occupational and Environmental Health Readiness System.....                               | 2-3         |
| <br>   |             |
| <b>Section II. Housing and Lodging Facilities .....</b>  | <b>2-4</b>  |
| 2-5. Introduction.....   | 2-4         |
| 2-6. Responsibilities.....   | 2-4         |
| 2-7. Definitions .....   | 2-5         |
| 2-8. Sanitation Standards for Housing and Lodging .....  | 2-9         |
| 2-9. Sanitation Standards for Navy and Marine Corps Owned and Operated<br>Family Housing .....         | 2-13        |
| 2-10. Sanitation Standards for Navy and Marine Corps Owned and Operated<br>Unaccompanied Housing ..... | 2-15        |
| 2-11. Sanitation Standards for MTF, PCS, and Temporary Lodging .....                                   | 2-17        |
| 2-12. Sanitation Standards for Recreational Lodging .....  | 2-18        |
| <br>   |             |
| <b>Section III. Naval Confinement Facilities Ashore.....</b>   | <b>2-23</b> |
| 2-13. Introduction.....  | 2-23        |
| 2-14. Objectives .....   | 2-23        |
| 2-15. Responsibilities.....  | 2-23        |
| 2-16. Definitions.....   | 2-23        |
| 2-17. Standards.....   | 2-24        |
| <br>   |             |
| <b>Section IV. Personal Beauty Services Facilities.....</b>  | <b>2-28</b> |
| 2-18. Introduction.....  | 2-28        |
| 2-19. Objectives .....   | 2-28        |
| 2-20. Responsibilities.....  | 2-28        |
| 2-21. Definitions.....   | 2-29        |
| 2-22. Inspection and Plan Review.....  | 2-31        |
| 2-23. Employees.....   | 2-33        |
| 2-24. Facilities .....   | 2-33        |
| 2-25. Product and Disinfectant.....  | 2-34        |
| 2-26. Sanitation. ....   | 2-36        |
| 2-27. Waxing, Tweezing, or Threading for Hair Removal .....  | 2-42        |
| 2-28. Paraffin Wax Treatment for Hands and Feet.....   | 2-44        |

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

**TABLE OF CONTENTS**

|  | <u>Page</u> |
|--|-------------|
| 2-29. Hair Weaving and Braiding.....                               | 2-45        |
| 2-30. Artificial Nails, Nail Decorations, and Nail Treatments..... | 2-45        |
| 2-31. Spray Tanning.....   | 2-45        |
| 2-32. Mud Treatments and Baths.....                                | 2-46        |
| 2-33. Prohibited Practices and Instruments.....                    | 2-47        |
| 2-34. Massage Therapy.....   | 2-47        |
| 2-35. Industrial Hygiene Support.....                              | 2-50        |
| <b>Section V. Child and Youth Programs Facilities.....</b>         | <b>2-51</b> |
| 2-36. Introduction.....  | 2-51        |
| 2-37. Objectives.....  | 2-51        |
| 2-38. Responsibilities.....  | 2-51        |
| 2-39. Sanitation Standards Pertaining to Inspection.....           | 2-52        |
| <b>Section VI. Fitness and Sports Facilities.....</b>              | <b>2-54</b> |
| 2-40. Introduction.....  | 2-54        |
| 2-41. Objectives.....  | 2-54        |
| 2-42. Responsibilities.....  | 2-54        |
| 2-43. Definitions.....   | 2-55        |
| 2-44. Standards.....   | 2-56        |
| 2-45. Saunas and Steam Rooms.....                                  | 2-57        |
| <b>Section VII. Habitability and Sanitation Afloat.....</b>        | <b>2-60</b> |
| 2-46. Introduction.....  | 2-60        |
| 2-47. Construction Standards.....                                  | 2-60        |
| 2-48. Berthing Aboard Ships and Barges.....                        | 2-61        |
| 2-49. Preventive Medicine Inspections.....                         | 2-61        |
| 2-50. Confinement Afloat.....                                      | 2-61        |
| 2-51. Barber and Beauty Shop Sanitation.....                       | 2-62        |
| 2-52. Laundry.....   | 2-62        |
| <b>APPENDIX A</b> References.....                                  | <b>A-1</b>  |
| <b>APPENDIX B</b> Acronyms.....                                    | <b>B-1</b>  |

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

**LIST OF TABLES**

|                  |   |      |
|------------------|---|------|
| <b>Table 2-1</b> | Personal Beauty Services.....                       | 2-32 |
| <b>Table 2-2</b> | Criteria for Calculating Inspection Frequency ..... | 2-32 |
| <b>Table 2-3</b> | Disinfecting Solutions .....                        | 2-37 |

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

SECTION I. INTRODUCTION

2-1. Introduction

1. The primary purpose of this chapter is to standardize the sanitary measures used onboard installations to safeguard the health of Sailors and Marines, prevent the spread of infection, and ensure mission readiness. If adequate sanitary measures are not in place, installations may become vulnerable to disease outbreaks. Disease outbreaks have the potential to seriously impact mission readiness and capabilities, as well as morale.
2. This chapter has been changed in its entirety and only includes sanitation standards for shore installation spaces. The following areas are covered in this chapter:
  - a. Housing and lodging facilities.
  - b. Navy confinement facilities.
  - c. Personal beauty service facilities.
  - d. Child and youth program facilities.
  - e. Fitness and sport facilities.

2-2. Objectives

1. Ensure all facilities aboard Navy and Marine Corps installations are following Service instructions and applicable Federal, state, and local regulations.
2. Ensure all public health standards are consistent with best available practices and knowledge.
3. Provide guidance on sanitation standards for facilities within the Department of the Navy (DON).
4. Maintain a system of inspections, as outlined in Department of Defense (DoD) and Service instructions, which ensures facilities are operated and maintained at or above the minimum public health standards.
5. Establish and maintain a system that assists in operating in a manner which promotes the health of patrons and staff.
6. Develop proactive communication of inspection findings with the directors.



**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

2-3. Responsibilities

1. Commander, Navy Installations Command (CNIC), as the housing and lodging program manager, must provide management, control, and performance oversight of housing and lodging facilities and services for military members, their families, and eligible civilians.
2. Commander, Naval Supply Systems Command is responsible for planning, operations, overall coordination, and execution of Navy permanent change of station (PCS) lodging programs.
3. Commander, Marine Corps Installations Command is responsible for planning, operations, overall coordination, and execution of Marine Corps housing, transitional billeting and lodging programs.
4. Director, Marine Corps Non-appropriated Fund Business and Support Services Division is responsible for operations, overall coordination, and execution of the Marine Corps PCS and recreational lodging programs.
5. Naval Facilities Engineering Command (NAVFAC) is responsible for design, planning and specifications, and maintenance standards of housing and lodging and their associated structures within the DON.
6. Public Works is responsible for facilities maintenance, major repairs, and support services for recreational rental spaces and their associated structures.
7. Installation Recreational Lodging program manager is responsible for the effective management and proper operation of the designated recreational rental spaces and their associated structures, to include the training of personnel.
8. Installation commanding officers (CO) and Marine Corps installation commanding generals (CG) are responsible for providing management, control, and performance of housing programs within their installation.
9. Preventive medicine authority is responsible for conducting applicable sanitation inspections and preventive medicine related surveillance of all aspects of the operation and maintenance of housing and lodging facilities, confinement facilities, personal beauty facilities, child and youth program facilities, and fitness and sport facilities that are associated with health protection as required or at a minimum on an annual basis. It is also responsible for informing the CO via the chain of command concerning the sanitation status of all facilities. The preventive medicine department (PMD) is encouraged to work with the program managers to ensure standard operating procedures (SOP) support an effective sanitary environment. Immediately following a

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

complaint or regular inspection, the PMD should consult with appropriate personnel (e.g., safety personnel, industrial or occupational health (OH) personnel, emergency services, etc.) concerning any issues not related to sanitation or hygiene.

2-4. Defense Occupational Environmental Health Readiness System-Industrial Hygiene (DOEHRS-IH). Inspections of all facilities (except child and youth programs) should be documented using the environmental health (EH) module: General Sanitation Surveys. These surveys can be found at the Navy and Marine Corps Public Health Center (NAVMCPUBHLHCEN) Web site, <http://www.med.navy.mil/sites/nmcphc/occupational-and-environmental-medicine/Pages/DOEHRS-Toolbox.aspx>. These surveys must be entered and attached at: <https://doehrs-ih.csd.disa.mil>.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

SECTION II. HOUSING AND LODGING FACILITIES

2-5. Introduction. Quality of life concerns for all occupants of Navy and Marine Corps housing and lodging facilities are a key priority for morale and readiness. When personnel live and work in close quarters to one another, the potential for introduction, transmission, and spread of disease-causing organisms greatly increases. The goal is to provide the highest level of sanitation to our military members, military families, civilians, and contractors while mitigating potential communicable disease outbreaks within DON housing and lodging.

2-6. Responsibilities

1. PMD

a. Conduct sanitation and habitability inspections, to include reviewing weekly and monthly inspections performed by staff and safety personnel. Inspections include:

- (1) Navy family housing (government owned and leased).
- (2) Barracks (owned) student dormitories.
- (3) Navy Housing Leasing Program Navy Gateway Inns and Suites.
- (4) Recreational lodging.
- (5) Navy Lodge program.
- (6) Navy Fisher Houses.

b. This chapter does not apply to:

- (1) Medical in-patient facilities.
- (2) Structures used as field housing of units deployed for combat training.
- (3) Temporary lodging facilities that are not listed as on the installation's plant property account.
- (4) Afloat housing on Navy vessels and berthing barges.

c. Responsible for using the DOEHRS-IH, EH module Habitability Survey for documenting inspections of housing and lodging facilities.

d. Responsible for informing the CO via the chain of command concerning health and sanitation findings and recommended corrective actions.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

e. Responsible for conducting re-inspections as necessary to ensure compliance with corrective action recommendations.

2. Public Works. Responsible for facility maintenance, major repairs, and support services for housing and lodging under their jurisdiction.

3. Public Private Venture Private Partners. Responsible for the maintenance, major repairs, operations and support services for all housing and lodging governed by their business agreement with a DoD partner.

4. Facility Management (persons in charge (PIC)). Responsible for the overall sanitation of the facility.

2-7. Definitions

1. Adequate DoD Housing. Family housing and unaccompanied housing that meets DoD, Services, and program manager minimum standards for design, privacy, condition, and life safety-health.

2. Adequate DoD Lodging. PCS, and temporary additional duty (TAD) lodging that meets DoD, Services, and program manager minimum standards for design, privacy, condition, and life safety-health.

3. Barracks. A building or group of buildings used to house unaccompanied permanent party military or civilian personnel.

4. Cabin, Cottage, or Mobile Home. A habitable structure (cabin, cottage, or mobile home) set aside in either a single building or a set of buildings for the exclusive use of its guests and available for use with a fee.

5. Campsite. A plot of ground which provides housing for transient, overnight occupancy; occupants are housed in tents or other facilities which provide protection from the elements.

6. Comfort Station. Toilet, sink, or shower facilities serving a group of rooms or units. Residents and guests must exit their living space to access the comfort facilities.

7. Disinfectant. Per reference (a), chapter 23, an Environmental Protection Agency (EPA) registered product or an international equivalent with demonstrated bacterial, virucidal, and fungicidal activity used as directed by the manufacturer's instruction.

8. DoD Housing. Family housing and unaccompanied housing that the DoD owns, leases, obtains by permit, or otherwise acquires. This is also referred to as “government-controlled housing.” It does not include privatized housing.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

9. DoD Lodging. Lodging that is DoD-operated, which may be contractor-managed, in government-owned or government-leased facilities. DoD lodging must comply with Military Services policy and references (b) and (c). DoD lodging is authorized appropriated and non-appropriated fund support.
10. DOEHRS-IH. The EH module of DOEHRs-IH is a key enabling technology within the presidentially mandated force health protection plan and is further supported by reference (d). DOEHRs-IH is used for “Protecting personnel in support of military operations through the identification, evaluation, and control of occupational and EH stressors.” It is a comprehensive, automated information system for assembling, comparing, using, evaluating, and storing EH surveillance data, occupational personnel exposure information, workplace environmental monitoring data, and observation of work practices data. DOEHRs-IH provides information needed by OH and EH staff and command surgeons for reporting options to commanders regarding the reduction of health threats.
11. Dormitory. Housing for enlisted or officer students.
12. Family Housing. A building or structure that is designed to house several different families in separate housing units.
13. Fisher Houses. Medical treatment facility (MTF) lodging operated by CNIC in support of Navy and Marine Corps.
14. Grounds. A parcel of land, by whatever name called, on which campsites or designated spaces are intended for transient occupancy for overnight or longer periods either gratuitously or by a fee.
15. Hotel-like Recreational Lodging. Recreational lodging facilities with multiple units in a single building.
16. Inadequate DoD Housing. Family housing and unaccompanied housing that does not meet DoD, Services, and program manager minimum standards for design, privacy, condition, health, and life-safety. Inadequate housing is not necessarily uninhabitable unless it has a serious life safety-health deficiency.
17. Inadequate DoD Lodging. PCS and TAD lodging that does not meet DoD, Services, and program manager minimum standards for design, privacy, condition, health, and life-safety. Inadequate lodging is not necessarily uninhabitable unless it has a serious life safety-health deficiency.
18. Inns of the Corps. Marine Corps affiliated lodging usually located on an installation operated to serve as PCS or recreational lodging. These facilities are run by Director, Marine Corps Non-Appropriated Fund Business and Support Services Division.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

19. MTF Lodging. Lodging facilities and services used only by patients and their families while undergoing critical medical procedures or other serious long-term medical treatment at an MTF. Initially, MTF lodging facilities are provided as donated, fully usable (turnkey) facilities.
20. Mobile Home Park. A designated parcel of land designed for the accommodation of mobile homes, accessory buildings or structures, and accessory equipment.
21. Mobile Home Space. A parcel of land within a mobile home park designated for the placement of one mobile home for the exclusive use of its inhabitants.
22. Navy Gateway Inns and Suites. Navy affiliated TAD lodging. The primary source of lodging facilities and services for TAD travelers located on a Navy installation. These facilities are managed by CNIC. This lodging must meet the minimum DoD, Services, and program manager standards.
23. Navy Getaways. Navy affiliated recreational lodging. The primary source of lodging facilities and services for recreational leisure travelers, usually located on or near a Navy installation. These facilities are managed by CNIC.
24. Navy Lodge. Navy affiliated PCS lodging. The primary source of lodging facilities and services for PCS travelers. Usually located on or near military installations, these facilities are managed by Navy Exchange Service Command (NEXCOM).
25. Net Square Footage Unaccompanied Health. The floor space in square feet within the interior face of the full height walls of a room(s) with no deductions for furnishings, door swings, sinks, installed cabinets and countertops, heating and cooling system components, or exposed vertical pipes. Net square footage of a bedroom does not include the area of a closet.
26. Outdoor Bathing Facilities. Lakes, ponds, rivers, tidal waters, impoundments, beaches, streams, or other places, whether natural or man-made, in which an area is designated for swimming or bathing purposes.
27. PCS Lodging. Lodging facilities and services to meet the needs of active duty members and their families who are in a PCS status. PCS lodging normally includes kitchen facilities.
28. Public-Private Venture (PPV) Housing. Military family housing or unaccompanied housing acquired or constructed through a business agreement between the Navy or Marine Corps and a private partner. This housing is not DoD-owned, but is one of the housing choices available to Service members. PPV housing can be located on or near military installations through a ground lease to the private partner, typically for 50 years, or off the installation on property owned by the private partner. PPV is only available within the United States and its territories and possessions.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

29. PPV Lodging. Lodging that is commercially-operated (per agreement with the military Service) in government-owned, commercially-owned, or leased facilities to provide lodging rooms to official travelers at rates that do not exceed the lodging portion of the local area per diem rate. PPV lodging is not required to comply with DoD and military Services policy and is not authorized direct appropriated fund or non-appropriated fund support.

30. Recreational Lodging. Lodging facilities and services providing authorized guests with recreational opportunities where most of occupancy is by unofficial travelers on leave or liberty. Recreational lodging spaces can include several types of recreational areas, such as campgrounds, cabins and cottages, hotels, recreational vehicle parks, and mobile home parks.

31. Recreational Vehicle

a. Self-Contained. A unit, which contains a water-flushed toilet, lavatory, shower, and kitchen sink, all of which are connected, as an integral part of the structure, to water storage and waste, and sewage holding tanks located within the unit.

b. Non-Self Contained. A unit which may contain a water-flushed toilet, lavatory, and shower as an integral part of the structure, but requires an on-site sewer connection due to the absence of a waste and sewage holding tank on the unit.

32. Recreational Vehicle Park. A designated parcel of land designed for the accommodation recreational vehicles, accessory buildings or structures, and accessory equipment.

33. Recreational Vehicle Space. A parcel of land in a recreational vehicle park designated for the placement of one recreational vehicle for the exclusive use of its inhabitants.

34. Sanitary Conditions. Safe and clean conditions that prevent the spread of communicable diseases and protect public health and welfare.

35. Sanitary Station – Dump Station. A properly designed facility provided for receiving and disposing of liquid wastes from waste or sewage storage tanks.

36. Service Dogs. As defined by the Americans with Disabilities Act (ADA), service dogs are defined as dogs that are individually trained to do work or perform tasks for people with disabilities. Examples of such work or tasks include guiding people who are blind, alerting people who are deaf, pulling a wheelchair, alerting and protecting a person who is having a seizure, reminding a person with mental illness to take prescribed medications, calming a person with post-traumatic stress disorder during an anxiety attack, or performing other duties. Service dogs are working animals, not pets. The work or task a dog has been trained to provide must be directly related to the person's disability. Dogs whose sole function is to provide comfort or emotional support do not qualify as service animals under the ADA. Under the ADA, state, and

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

local governments; businesses, and nonprofit organizations that serve the public generally must allow service dogs to accompany people with disabilities in all areas of the facility where the public is normally allowed to go. Additional guidance in the proper usage of service dogs is outlined in reference (e).

37. Service Building. A structure that houses toilets, showers, lavatories, laundry, or any combination of these; also includes structures for recreational activities.
38. Sewage. Liquid and water-borne wastes derived from the ordinary living processes, including, but not limited to, human wastes and gray water.
39. Barracks. Unaccompanied housing consisting of a large open space with bunk beds and head facilities for a group of personnel. This type of living space can usually be found at training commands and in deployed environments.
40. Temporary Lodging. The primary source of quality lodging facilities and services for TAD personnel and is used if the lodging meets minimum DoD lodging standards and is available for occupancy.
41. Tent. A collapsible shelter made of canvas or other fabric supported by ropes or poles.
42. Temporary Additional Duty Travel. Duty at one or more locations, away from the PCS, under an order providing for further assignment or, pending further assignment, to return to the old PCS or to proceed to a new PCS.
43. Transient Billeting Quarters. Marine Corps accommodations for military and civilian population while on TAD travel.
44. Unaccompanied Housing. Military housing for unaccompanied personnel and is for enlisted, officers, and civilians at overseas locations. It includes permanent party, trainees, and students.
45. Water Supply Station. A facility used to fill the water storage tanks of recreational vehicles with potable water from an approved water system.

2-8. Sanitation Standards for Housing and Lodging

1. Inspection

a. Inspections must be performed during the normal operating hours of the facility without advance notice as necessary to ensure sanitation standards are being met. The inspector will contact the manager or the PIC upon arrival and state the purpose of the inspection.



**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

b. For unaccompanied housing, the PIC or their appointed representative will accompany the inspector during the inspection. A representative from the preventative medicine department will document inspection findings using the Habitability Survey, then enter and attach to the DOEHRS-IH, EH module.

(1) Inspection reports must be maintained as directed by reference (f).

(2) A copy of the completed inspection report must be provided to responsible personnel at the facility and results forwarded to the installation CO via the official chain of command.

2. The following standards apply to all government owned and operated housing and lodging facilities (does not include PPVs).

a. Construction. All design, materials, construction, electrical, and plumbing must conform to the requirements of reference (g). These specifications include both unified facilities criteria (UFC) requirements. All questions concerning these areas must be addressed in consultation with NAVFAC. All operable windows must have screens as prescribed by reference (h).

b. Cleaning

(1) Regardless of the type of facility, all housing and lodging spaces must be thoroughly cleaned between housing residents and lodging guests. Prior to resident or guest check in, the following will occur:

(a) As outlined in reference (a), all surfaces, including all vent diffusers and associated visible ducting, must be cleaned with an appropriate EPA approved sanitizing or disinfecting agent. All cleaning agents will be used per the manufacturer's label.

(b) All trash must be removed.

(c) All items provided, including, but not limited to, soap, disposable towels, and linens, must be restocked as needed.

(d) All bed and bath linens must be clean and freshly laundered between guests. When not in use linens, mattress covers, and blankets must be protected from potential soiling or contamination.

(e) Kitchens and kitchenettes food contact surfaces must be cleaned and sanitized with only appropriate EPA approved products. All cleaning agents will be used per the manufacturer's label.

(f) All refrigerators and freezers must be in good working order and able to maintain contents at proper food safety temperatures as prescribed by reference (i).

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

(g) All appliances must be in good repair and properly functioning in accordance with the manufacturer's manual. Appliances with missing knobs or handles will be deemed unsafe and required to be removed from service and replaced.

(h) Floors must be vacuumed or swept and mopped, as appropriate. Floors must be kept free of any accumulation of dirt or debris. Carpeted floors will be free of trip hazards or extensive fraying. Cables are not allowed under carpets or throw rugs.

(i) Managers or their representatives must conduct regular self-inspections to ensure that cleaning is being performed properly and with sufficient frequency.

(2) Common Areas

(a) Cleaning must be conducted daily utilizing an appropriate EPA approved product for the surface material and function. Cleaning products will be used per the manufacturer's label.

(b) Floors must be vacuumed or swept and mopped daily, as appropriate. Floors must be kept free of any accumulation of dirt or debris.

(c) Restrooms must have a sufficient supply of hand soap, hand towels, toilet paper, etc. Sinks and toilets must be disinfected daily using an EPA approved product. Disinfectants will be used per the manufacturer's label. Supplies must be maintained and restocked as often as needed.

(d) Sinks, toilets, laundry, or other plumbing systems, connections, and fixtures must be maintained and in good repair and ensure they are properly functioning on a daily basis.

(e) Appliances such as items in kitchen spaces must be in proper working order. They must be maintained free of food debris, spills, odors, and insects on a daily basis. Kitchen spaces may require more frequent cleaning based on the level of preparation and cooking that is performed, as well as the frequency of resident and guest usage.

(f) If gear lockers are present, they must be clean daily and free of debris.

c. Water

(1) Housing and lodging facilities must have an adequate supply of water that meets the requirements of reference (a) and reference (i), chapter 5. The drinking water supply must adhere to public water system regulations as required by federal, state, and DON policies. All plumbing systems and connections must comply with reference (j) and (k).

(2) There must be a supply of hot and cold water under pressure and discharged to an approved wastewater system.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

(a) The available water supply must be sufficient to meet demand during peak patron usage.

(b) Water temperatures must be maintained at proper temperature for patron use. Hot water temperature at the tap should be no higher than 120 degrees Fahrenheit to prevent scalding.

d. Wastewater

(1) Wastewater and sewage disposal systems must be constructed as directed by reference (j) and conform to the provisions outlined in reference (a) and reference (i), chapter 7.

(2) A connection to a municipal or public sewer for service buildings and all permanent structures is the preferred practice whenever possible. However, a properly designed and maintained onsite system is a viable option.

e. Refuse

(1) The collection of refuse must occur with sufficient frequency to inhibit the growth or attraction of disease vectors and pests and the creation of nuisances. Per reference (l), solid wastes which contain food wastes must be collected at a minimum of once each week. Bulk wastes must be collected at a minimum of once every 3 months. The frequency of resident and guest usage may necessitate more frequent collection of solid waste.

(2) All refuse must be stored in durable, fly-tight, and rodent-proof containers that are clean, sanitary, and in good repair. Containers must be of sufficient capacity to prevent overflow between collections.

f. Pest Control

(1) Per reference (m), pest control must be included as part of the installation's Integrated Pest Management Plan (IPMP). This plan may have pest management through NAVFAC Public Works or a contracted pest management company.

(2) During an inspection, the PMD will inspect for evidence of pest infestation and conditions that promote pest harborage or infestation. The PMD will also verify that the responsible pest management party is following the pest management plan.

(3) Adhere to all guidance directed by reference (i), chapter 8 and reference (m).

3. The following standards are specific to squad bays and those facilities where personnel live in extremely close proximity. This would include facilities used during emergency situations and evacuations where housing large numbers of people for a short period of time becomes necessary i.e. natural disasters related to extreme weather, earthquakes, etc.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

- a. Construction and space planning must comply with all applicable UFC requirements.
- b. To help minimize the spread of disease, the following disease control measures are recommended for squad bays and similar living spaces:
  - (1) A minimum of 72 square feet of floor space per person, including a minimum of 3 feet between sleeping arrangements (racks, bunks, beds).
  - (2) Consideration of a “head to toe” sleeping arrangement to minimize the potential for exposure to respiratory diseases.
- c. Ensure that cleaning and disinfection is completed using an EPA approved product per the manufacturer’s label instructions. Cleaning and disinfection should include, but is not limited to, the following:
  - (1) Daily disinfection of bathroom facilities to include floors, sinks, toilets, doorknobs, and other frequent human contact surfaces.
  - (2) Linens and mattress covers should be laundered at least weekly. Blankets should be changed or laundered at least monthly. When not in use linens, mattress covers, and blankets must be protected from potential soiling or contamination.
  - (3) Floors must be swept and mopped whenever visibly soiled. Sweeping must occur at a minimum of daily and mopping must occur no less than once per week.

2-9. Sanitation Standards for Navy and Marine Corps Owned and Operated Family Housing (FH)

1. These standards do not apply to PPV.
2. Resident Responsibilities
  - a. It is the responsibility of the assigned resident to maintain the living space in accordance with the standards established by the CO. During occupancy, the resident must clean their assigned space on a regular basis.
  - b. The housing office must inform residents to immediately report to the office any maintenance or sanitation issues beyond the resident’s control.
3. Inspection
  - a. Inspection standards apply only to Navy and Marine Corps owned, managed, and operated FH. These standards do not apply to PPV FH. However, PPV FH can be inspected on a consultation basis at the request of the CO.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

(1) Inspections must be performed only during the normal operating hours of the housing office. FH residents will be given a minimum of 3 business day notice prior to the inspection. A representative of the housing office will accompany the inspector(s).

(2) If the resident is present during the inspection, the inspector will again inform the resident of the purpose of the inspection. If the resident is not present, the inspector will leave a written statement of the date, time, and purpose of the inspection.

(3) Routine inspections of FH must be conducted at least annually, but may be conducted more frequently if needed. At least 10 percent of the total number of housing units must be inspected annually. Conditions that may necessitate more frequent inspections include, but are not limited to, a high resident turnover, a history of violations, or failure to remediate violations.

(a) For FH, the condition of the housing unit shall be validated at both assignment and pre-termination or final inspection.

(b) For FH, units should be inspected if requested by the resident or if there is a reason to question the suitability in response to resident's complaints.

b. A representative from the PMD will document inspection findings using the Habitability Survey, then enter and attach to DOEHRS-IH, EH module.

(1) Inspection reports will be maintained as directed by reference (f).

(2) A copy of the completed inspection report must be provided to responsible personnel at the facility and results forwarded via the chain of command.

4. Pest Control

a. Pest control must be a joint effort between housing office and the resident. The resident is responsible for day to day cleanliness to prevent normal household pests. Housing office must conduct pest management quarterly or more frequently if local conditions demand and offer pest control services. Housing office may purchase pest control services from NAVFAC/Public Works or a contracted pest management company.

b. During an inspection, the PMD must inspect for evidence of pest infestation and conditions that promote pest harborage or infestation. The PMD will also verify that the responsible pest management party is following the pest management plan.

c. Adhere to all guidance directed by reference (i), chapter 8 and reference (m).

5. Pet Policy. Dogs, cats, and other small domesticated animals are allowed in FH.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

- a. The installation CO must have a written pet policy that complies with all applicable Federal, Office of the Secretary of Defense (OSD), and Navy regulations as well as any local regulations. This policy must be available for potential residents, provided to residents upon assignment to FH and available upon request.
- b. Pet owners are responsible to repair or pay for damages to FH property caused by their pets and must maintain liability insurance to cover injury to others caused by their pets.
- c. The housing office may designate in writing and with signage designated pet relief areas. It is the resident's responsibility for the disposal of feces in designated receptacles.
- d. The installation CO may designate specific housing units pet restricted.

**2-10. Sanitation Standards for Navy and Marine Corps Owned and Operated Unaccompanied Housing (UH)**

1. These standards do not apply to PPV.

2. Resident Responsibilities

a. Per reference (n), it is the responsibility of the assigned resident to maintain the living space in accordance with the standards established by the installation CO. During occupancy, the resident must clean their assigned space on a regular basis.

b. The housing office will inform residents to immediately report to the office any maintenance or sanitation issues beyond the resident's control.

3. UH Assignment Standards.

a. Construction and space planning must comply with all applicable UFC and facilities criteria requirements. All design, materials, construction, electrical, and plumbing must conform to the requirements of reference (g). These specifications include both UFC requirements. All questions concerning these areas must be addressed in consultation with NAVFAC.

b. Residents must be provided space in UH per the design standard unless a waiver is provided by the program manager or echelon 1, as appropriate. Requests for waivers to UH assignment criteria must be accompanied by a PMD review conducted within a month of the date of the request.

c. Where use of the design standard as the assignment standard has been waived, consider a "head to toe" sleeping arrangement to minimize the potential for exposure to respiratory diseases.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

4. Housing Office Minimum Sanitation Requirements

- a. Ensure that cleaning and disinfection is completed using an EPA approved product per the manufacturer's label instructions.
- b. Disinfect bathroom facilities to include floors, sinks, toilets, doorknobs, and other frequent human contact surfaces, daily.
- c. Launder linens and mattress covers at least weekly. Change or launder blankets at least monthly. When not in use, protect linens, mattress covers, and blankets from potential soiling or contamination.
- d. Sweep floors daily, mop floors no less than weekly, and sweep and mop floors whenever visibly soiled.

5. Pet Policy. Due to confined space limitations, UH residents are not authorized to have any kind of live pet.

6. Inspection

a. A representative from the PMD will document inspection findings using the Habitability Survey, enter and attach to DOEHRS-IH, EH module.

(1) The completed Habitability Survey will be entered and attached to DOEHRS-IH, EH module.

(2) Inspection reports will be maintained as directed by reference (f). A copy of the completed inspection report must be provided to responsible personnel at the facility and results forwarded via the chain of command.

b. Inspections must be performed during the normal operating hours of the facility without advance notice as necessary to ensure sanitation conditions are being met.

(1) The inspector will contact the manager or the PIC upon arrival, state the purpose of the inspection.

(2) The PIC or their appointed representative should accompany the inspector during the inspection.

(3) Routine inspections must be conducted at least quarterly, but may be conducted more frequently as needed. At least 5 percent of the total number of rooms must be inspected as part of a routine inspection. Conditions that may necessitate more frequent inspections include, but are not limited, to a high patron demand or turnover, a history of violations, or a failure to remediate violations.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

(4) Inspectors will not inspect those occupied quarters that are designated for “day sleepers” (quarters for individuals that work nights) during the day.

2-11. Sanitation Standards for MTF, PCS, and Temporary Lodging

1. Inspection

a. A representative from the PMD will document inspection findings using the Habitability Survey, then enter and attach to the DOEHRS-IH, EH module.

(1) The completed Habitability Survey will be entered and attached to the DOEHRS-IH, EH module.

(2) Inspection reports will be maintained as directed by reference (f).

(3) All official correspondence related to the installation must be forwarded to the installation CO via the official chain of command.

b. Inspections must be performed during the normal operating hours of the facility without advance notice as necessary to ensure sanitation conditions are being met.

(1) The inspector will contact the manager or the PIC upon arrival, state the purpose of the inspection.

(2) The PIC or their appointed representative will accompany the inspector during the inspection.

c. Routine inspections must be conducted at least annually, but may be conducted more frequently as needed. At least 5 percent of the total number of rooms must be inspected as part of a routine inspection. Conditions that may necessitate more frequent inspections include, but are not limited to, a high patron demand or turnover, a history of violations, or a failure to remediate violations.

d. The number of sink and toilet fixtures in lodging must comply with reference (k).

2. MTF, PCS, and Temporary Lodging Pet Policy

a. Lodging must have a written pet policy that complies with all applicable Federal, OSD, and Navy regulations as well as any local regulations. This policy must be provided to guests upon check-in and as requested.

b. Pets are allowed in individual and private guest units at identified locations. Pets are not allowed in shared guest rooms and units.



**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

c. Lodging program managers must designate in writing and with signage a designated relief area and the guest responsibility for the disposal of feces in the designated receptacle.

d. Service dogs, as defined by the ADA, and military working dogs are permitted in temporary lodging facilities. For other animals, the installation commander may set forth a pet policy on whether a facility will accommodate pets. The safety and health of lodging facility staff and guests, as well as the avoidance of nuisance and unsanitary conditions in rooms and outdoor adjacent areas should be considered.

2-12. Sanitation Standards for Recreational Lodging

1. Inspection

a. A representative from the PMD will document inspection findings using the Mobile Home and RV Park Survey, or the Public Facility Survey, where applicable, then enter and attach to DOEHS-IH, EH module.

(1) Inspection reports will be maintained as directed by reference (f).

(2) A copy of the completed inspection report must be provided to responsible personnel at the facility and results forwarded via the chain of command.

b. Inspections must be performed during the normal operating hours of the facility without advance notice as necessary to ensure sanitation conditions are being met.

(1) The inspector will contact the manager or the PIC upon arrival, state the purpose of the inspection.

(2) The PIC or their appointed representative should accompany the inspector during the inspection.

c. Routine inspections must be conducted at least annually, but may be conducted more frequently as needed. At least 5 percent of the total number of units must be inspected as part of a routine inspection. Conditions that may necessitate more frequent inspections include, but are not limited to, a high patron demand or turnover, a history of violations, or a failure to remediate violations.

d. For recreational accommodations that are operated seasonally, an opening and closing inspection must be conducted in addition to periodic inspections.

2. Site Selection and Design of Recreational Lodging

a. Site selection and design of recreational lodging will vary depending on the type of facilities, intended activities, and expected patronage. These facilities must be designed to take

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

advantage of the natural features of the site, while also remaining environmentally appropriate to preserve the natural heritage and scenic resources. All applicable UFCs must be followed in the design and construction of recreational facilities.

b. The number and type of structures will vary based on geography, topography, and patron demand. All design, materials, construction, electrical, and plumbing must conform to the requirements of reference (g). These specifications will include both UFC requirements. All questions concerning these areas must be addressed in consultation with NAVFAC.

c. Accommodations which include sinks, showers, toilets, laundry, or other plumbing systems, connections, and fixtures must comply with references (j), (k), and (o).

d. All trash must be removed weekly, and receptacles lined with clean plastic liners.

e. If kitchens or kitchenettes are included, all food contact surfaces must be cleaned and sanitized with an appropriate EPA approved product. All agents will be per the manufacturer's label.

(1) All refrigerators or freezers must be in good working order and able to maintain the proper temperature as prescribed in reference (i), chapter 1.

(2) All appliances must be in good repair and properly functioning.

3. Service Buildings. Service buildings include laundry rooms, bathhouses, recreational, and activity buildings. The number and type of service buildings will vary with the type and number of rental structures served and services provided. All design, materials, construction, electrical, and plumbing must conform to the requirements of reference (g). These specifications will include both UFC requirements. All questions concerning these areas must be addressed in consultation with NAVFAC.

a. All buildings and structures must be maintained in a clean, sanitary manner, free from conditions that promote pest or vector proliferation or harborage.

b. Service buildings housing sinks, showers, toilets, laundry, or other plumbing systems and connections must comply with references (j), (k), and (o).

c. Service buildings must be cleaned and resupplied daily. Cleaning must be conducted utilizing an appropriate EPA approved product for the surface material and function. All cleaning chemicals will be used per the manufacturer's label. Floors must be vacuumed or swept and mopped daily as appropriate. Cleaning must also be conducted whenever floors become visibly soiled.

d. Toilet rooms and hygiene areas must have a sufficient supply of hot and cold water, hand soap, disposal hand towels, and covered waste basket.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

4. Water

a. Recreational lodging facilities must have an adequate supply of water that meets the requirements of reference (a) and adhere to reference (i), chapter 5. The drinking water supply must adhere to public water system regulations as required by federal, state, and Navy policies. All plumbing systems and connections must comply with references (j) and (k).

b. There must be a supply of hot and cold water under pressure and discharged to an approved wastewater system.

(1) The available water supply must be sufficient to meet demand during peak patron usage.

(2) Water temperatures must be maintained at proper temperature for patron use. Hot water temperature at the tap should be no higher than 120 degrees Fahrenheit to prevent scalding.

c. If recreational waters (pool) or outdoor bathing facilities are available, refer to reference (i), chapter 4, for guidance. Per reference (i), chapter 4, pets and other domestic animals are not permitted in the water, on the property, or in the buildings serving recreational water facilities. An exception is provided for service animals (as defined by the ADA) that are controlled by the disabled person. According to the 2010 revised ADA, the service animal must be allowed to accompany the disabled individual to all areas of the facility where customers are permitted, except into the pool or spa water (where animals may present sanitation concerns).

5. Wastewater and Sewage Disposal

a. Wastewater and sewage disposal systems must be constructed as outlined in reference (j) and conform to the provisions of reference (a) and chapter 7 of reference (i). A connection to a municipal or public sewer for service buildings and all permanent structures is the best practice whenever possible.

b. RV. Parks are required to have sanitary stations for the drainage of RV waste holding tanks.

(1) Sanitary stations must be consistent with all applicable UFCs, as well as any state or local regulations. At a minimum, a sanitary station must consist of the following:

(a) At least a trapped, 4-inch sewer riser pipe connected to an approved sanitary sewer system, surrounded at the inlet by a concrete apron sloped toward the drain and equipped with a suitable hinged cover.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

(b) A water outlet to facilitate periodic wash-down and sanitary maintenance that is designed and equipped to prevent cross-connection or back siphonage. Wash-down outlets must be distinct and separated from water supply stations; consult state and local regulations for requirements and additional guidance.

(c) Signage stating, the water is unsafe for human consumption and is intended for flushing and washdown purposes only.

(2) The number of sanitary stations required is based on the number of recreational vehicles spaces within the park. State and local regulations must be consulted to determine the exact number of required stations and any additional requirements.

6. Refuse Disposal

a. The collection of refuse must occur with sufficient frequency to inhibit the growth or attraction of vectors and the creation of nuisances. Per references (a) and (l), solid wastes which contain food wastes must be collected at a minimum of once each week. Bulk wastes must be collected at a minimum of once every 3 months. The frequency of patron usage, however, may necessitate more frequent collection of solid waste.

b. All refuse must be stored in durable, fly-tight, and rodent-proof containers that are clean, sanitary, and in good repair. They must be of sufficient capacity to prevent overflow between collections and refuse containers must be placed atop of a hard and impervious surface to facilitate periodic cleaning and prevent seepage of liquid into surrounding soil.

c. Individual trash receptacles for patron use must be lined with plastic liner and emptied daily.

7. Pest Control

a. Pest control at recreational rental spaces must be included as part of the installation's IPMP. This plan may have pest management conducted through NAVFAC Public Works or a contracted pest management company.

b. During an inspection, the PMD must inspect for evidence of pest infestation and conditions that promote vector and pest harborage or infestation and will verify that the responsible pest management party is following the pest management plan.

c. Comply with reference (i), chapter 8.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

8. Pet Policy

a. Recreational lodging must have a written pet policy that complies with all applicable Federal, OSD, and Navy regulations as well as any local regulations. This policy must be provided to guests upon check-in and as requested.

b. Pets are allowed in individual or private guest units at identified locations.

c. Lodging program managers must designate in writing and with signage a designated relief area and the guest responsibility for the disposal of feces in the designated receptacle.

d. Service animals, as defined by the ADA and military working dogs are permitted in temporary lodging facilities. For other animals, the military commander may set forth a pet policy on whether a facility will accommodate pets. The safety and health of lodging facility staff and guests, as well as the avoidance of nuisance and/or unsanitary conditions in rooms and outdoor adjacent areas should be considered.

9. Fire Pits and Common-use Grills. Small, individual, personal-use fires are a common occurrence at many recreational areas. The allowance of personal fires and fire pits must be guided by local fire and policy with conditions (e.g., no burning during dry season, droughts, high winds). Contact installation safety personnel or fire marshal for guidance.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

SECTION III. NAVAL CONFINEMENT FACILITIES ASHORE

2-13. Introduction. The function of confinement facilities is to safely and humanely hold inmates remanded to custody. Confinement facilities are high-risk environments where close living conditions, when combined with poor sanitation and inadequate facilities, can lead to the proliferation of disease. In addition to detainees and prisoners, there are numerous other personnel who may be put at risk, including supervisory, maintenance, medical, food service, and legal personnel. Confinement facility standards and inspections serve to ensure that these facilities are operating in a sanitary manner without undue risk for detainees, prisoners, staff members, or visitors.

2-14. Objectives

1. Ensure compliance with applicable DoD and Service instructions.
2. Ensure that confinement facility ashore operations are consistent with best available public health practices and knowledge.
3. Maintain a system of inspections, as outlined in DoD and Service instructions, which ensures confinement facilities ashore are operated and maintained at or above the minimum public health standards.

2-15. Responsibilities

1. Facilities Engineer. Involved in all stages to establish, construct, or alter existing confinement facilities ashore in accordance with the references listed in this section.
2. Public Works. Responsible for facilities maintenance, major repairs, and support services for a confinement facility ashore.
3. Operator. Responsible for all aspects of the operation of confinement facilities ashore in accordance with Service and local instruction.
4. PMD. Conduct quarterly sanitation and habitability inspections, to include reviewing weekly and monthly inspections performed by staff and safety personnel.

2-16. Definitions

1. Brig. A Navy and Marine Corps ashore confinement facility, designated by the Secretary of the Navy, as an authorized naval place of confinement, designed to house persons after arrest, before trial, or for a period after conviction.
2. Confinement. The physical restraint of a person imposed by order of competent authority, either pending disposition of charges or as the result of a court-martial.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

3. Detainee. A person subject to the Uniform Code of Military Justice (UCMJ) chapter 47, sections 801-946, who legally has been ordered into confinement, is accused of violating the UCMJ, chapter 47, sections 877-934, and is awaiting trial or rehearing; includes those persons who are pending the vacation of a suspended sentence that includes confinement or a punitive discharge.
4. Physical Plant. Building or group of buildings utilized by brig operations.
5. Prisoner. A person sentenced by court-martial to confinement or death and ordered into confinement by competent authority, whether the sentence has been approved by the convening authority. A person placed into confinement by competent authority pending trial by court-martial is a pretrial detainee.
6. Staff. Includes brig Service members, civil service employees, volunteers, and contract or other governmental employees.

2-17. Standards

1. Inspection

- a. Per reference (p), sanitation inspections must be completed quarterly. Facility staff will complete weekly and monthly inspections.
- b. In addition to the areas addressed in this chapter, inspections must include the following:
  - (1) A review of housekeeping and pest management plans.
  - (2) A review of weekly and monthly staff completed inspection reports as required by reference (p).
- c. A representative from the PMD must document inspection findings using the Enemy Prisoner of War Detention Facility Survey, then enter and attach to DOEHRS-IH, EH module.
  - (1) Inspection reports must be maintained as directed by reference (f).
  - (2) A copy of the completed inspection report must be provided to responsible personnel at the facility and results forwarded via the chain of command.

2. Grounds. The area surrounding a facility must be maintained in a well-kept, clean, and sanitary condition, free from conditions that promote pest proliferation or harborage, such as standing water and overgrown plants or grasses.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

3. Physical Plant

a. The construction of a confinement facility must comply with BUPERSINST 1640.22 and all applicable UFCs.

b. Inspecting authority must identify immediate hazards and risks in conjunction with safety, IH, and occupational health.

c. Housekeeping plans must ensure daily cleaning and maintenance of all areas of the physical plant.

4. Living Quarters

a. Reference (p) requires the maintenance of a written housekeeping plan for the installation. This plan must be readily available for the inspecting authority.

b. Cleaning activities must include all surfaces and utilize appropriate, EPA approved cleaning materials and agents. All cleaning materials and agents must be used per the manufacturer's label.

c. The inspecting authority must review the housekeeping plan for thoroughness and proper execution. Facility staff must inspect for cleanliness daily per reference (r).

5. Water Supply

a. Confinement facilities must have an adequate supply of water that meets the requirements of reference (a) and chapter 5 of reference (i). The drinking water supply must adhere to public water system regulations as required by federal, state, and DON policies. All plumbing systems, connections, and fixtures must comply with reference (j) and (k).

b. There must be a supply of hot and cold water under pressure and discharged to an approved wastewater system.

(1) The available water supply must be sufficient to meet demand during peak usage.

(2) Water temperatures must be maintained at proper temperature for patron use. Hot water temperature at the tap should be no higher than 120 degrees Fahrenheit to prevent scalding.

6. Hygiene Areas

a. Hygiene areas must comply with reference (q). All plumbing systems and connections must conform to the requirements of references (j) and (k).



**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

- b. A sufficient supply of hot and cold water under pressure must be available for necessary hygiene activities. A sufficient supply of towels, soap, etc., must also be available.
- c. Access to toilet and hand washing facilities 24 hours a day without staff assistance when confined to quarters, must be provided per reference (p).
- d. Cleaning must include all surfaces and utilize appropriate EPA approved cleaning and disinfecting agents used as directed by the manufacturer's label.

7. Refuse Disposal

- a. The collection of refuse must occur with sufficient frequency to inhibit the growth or attraction of disease vectors and pests and the creation of nuisances. Per references (a) and (l), solid wastes which contain food wastes must be collected at a minimum of once each week. Bulk wastes must be collected at a minimum of once every 3 months. The frequency of patron usage may necessitate more frequent collection of solid waste.
- b. All refuse must be stored in durable, fly-tight, and rodent-proof containers that are clean, sanitary, and in good repair. They must be of sufficient capacity to prevent overflow between collections.
- c. Individual trash receptacles must be lined with plastic liners and emptied daily, including outside trash receptacles.

8. Pest Control

- a. Pest control must be included as part of the installation's IPMP either through NAVFAC or Public Works or a contracted pest management company.
- b. During an inspection, the PMD must inspect for evidence of pest infestation and conditions that promote pest harborage or infestation. The PMD will also verify that the responsible pest management party is following the pest management plan.
- c. Comply with reference (i), chapter 8.

9. Food Service Areas. Food service areas must conform to reference (p). Food safety practices must be consistent with reference (i), chapter 1.

10. Barbershop. Barbershop activities must be consistent with section 4 of this chapter.

11. Laundry

- a. Laundry areas must conform to the provisions of reference (p) and NAVFAC criteria.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

b. Per reference (p), bed linens, towels, and face cloths must be laundered at least once per week. Blankets must be laundered or exchanged as necessary, at a minimum, monthly.

c. All laundry activities must be consistent with industry standards and best practices.

d. All items must be laundered using the water temperature and cycle recommended by the item manufacturer.

e. PMDs must inspect for general cleanliness and sanitation, as well as any immediate hazards. Consult with appropriate personnel (e.g., safety, fire, industrial hygiene (IH), and occupational health for any identified hazards.

12. Workshops and Industry Shops

a. Shops must comply with reference (r). These areas can include a wide range of materials and activities that are outside of the PMD's expertise. Contact and consult with IH for specific guidance.

b. PMDs must inspect for general cleanliness and sanitation, as well as any immediate hazards. Consult with the fire safety officer, or IH and occupational health for any identified hazards.

13. Staff

a. All applicable civilian and contract employees must undergo initial and periodic medical evaluations outlined in reference (s).

b. All staff areas must be cleaned in accordance with the installation housekeeping plan. The frequency of cleaning must be no less than daily and ideally should occur with each shift. These areas must be maintained in a clean, sanitary manner throughout each shift.

14. Sanitation for any overnight quarters must be per section II of this chapter.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

SECTION IV. PERSONAL BEAUTY SERVICES FACILITIES

2-18. Introduction

1. This section applies to barber, beauty, nail salons, and day spas, subsequently referred to as personal beauty services facilities that are operated within the jurisdiction of the Navy and Marine Corps. This includes all continental United States (CONUS) and outside continental United States (OCONUS) permanent, temporary, or mobile facilities. Personal beauty services present a wide variety of biological, chemical, and physical hazards. Skin disease agents may be transmitted either through direct contact with an infected person or contaminated equipment and supplies such as towels, combs, clippers, foot baths, and bulk waxes and creams. Fungal infections can cause ringworm or tinea, affecting hair, skin, and nails. Bloodborne viruses may be transmitted through blood-contaminated instruments used during invasive skin or hair removal treatments.

2. Personal beauty service facilities are regulated by the NEXCOM and Marine Corps Exchange (MCX). This section provides public health guidance for these facilities. It is not intended to supersede any NEXCOM or MCX regulations or guidance. If there is any conflict regarding this guidance and NEXCOM or MCX regulations or guidance, it is recommended that the more restrictive guidance be followed.

2-19. Objectives

1. Ensure that public health standards for personal beauty services facilities are consistent with best available practices and knowledge.
2. Establish and maintain a system that assists personal beauty services facilities in operating in a manner which promotes the health of patrons and staff.
3. Create a system of inspections that ensure personal beauty services facilities are operated and maintained at or above the minimum standards provided.

2-20. Responsibilities

1. NAVFAC will be responsible for design, planning and specifications, and maintenance standards.
2. CNIC, through the designated technical manager, NEXCOM, and Director, Marine Corps Non-appropriated Fund Business and Support Services Division are responsible for planning, operations, and management of personal beauty services facilities.
3. Public Works. Responsible for facilities maintenance, major repairs, and support services.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

4. Operator. Responsible for the effective management and proper operation of the personal beauty services facilities, to include the training of personnel.

5. PMD

a. Responsible for the sanitation inspection and medical surveillance aspects of the operation and maintenance of personal beauty services facilities that are associated with health protection.

b. Responsible for informing the chain of command concerning the sanitation status of personal beauty service facilities and for making pertinent recommendations.

2-21. Definitions

1. Barber. Any person who shaves, shapes, or trims the beard; cuts, shampoos, or dyes the hair, or applies lotions thereto; applies, treats, or massages the face, neck, or scalp with oils, creams, lotions, cosmetics, antiseptics, powders, clays, or other preparations in connection with shaving, cutting, or trimming the hair or beard.

2. Board. The Board for Barbers and Cosmetology.

3. Cosmetology. Includes, but is not limited to, the following practices: administering cosmetic treatments; manicuring or pedicuring the nails of any person; arranging, dressing, curling, waving, cleansing, cutting, shaping, singeing, waxing, tweezing, shaving, bleaching, coloring, relaxing, straightening, or similar work, upon human hair, or a wig or hairpiece, by any means, including hands or mechanical or electrical apparatus or appliances, but must not include hair braiding or such acts as adjusting, combing, or brushing pre-styled wigs or hairpieces when such acts do not alter the pre-styled nature of the wig or hairpiece.

4. Disinfectant. An EPA registered product or an international equivalent with demonstrated bacterial, virucidal, and fungicidal activity used as outlined in the manufacturer's instruction.

5. Esthetician. A person who engages in the practice of esthetics for compensation.

6. Esthetics. Includes, but is not limited to, the following practices of administering cosmetic treatments to enhance or improve the appearance of the skin: cleansing, toning, performing effleurage or other related movements, stimulating, exfoliating, or performing any other similar procedure on the skin of the human body or scalp by means of cosmetic preparations, treatments, any non-laser device, electrical, mechanical, or manual, for care of the skin; applying make-up or eyelashes to any person, tinting or perming eyelashes and eyebrows, and lightening hair on the body except the scalp; and removing unwanted hair from the body of any person by the use of tweezing, chemical, or mechanical means. However, "esthetics" is not a healing art and must not include any practice, activity, or treatment that constitutes the practice of medicine, osteopathic medicine, or chiropractic.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

7. Cosmetologist. Any person who is licensed to engage in the practices encompassed in cosmetology and hairstyling.
8. Hot Stone Therapy. A massage that uses smooth, flat, and heated rocks placed at key points on the body.
9. Massage Therapy. The manipulation of superficial and deeper layers of muscle and connective tissue using various techniques, to enhance function, aid in the healing process, decrease muscle reflex activity, inhibit motor-neuron excitability, promote relaxation and well-being, and as a recreational activity.
10. Massage Cupping. A form of alternative medicine in which cups are placed on the skin to create suction.
11. Nail Care. Manicuring or pedicuring natural nails or performing artificial nail services.
12. Nail Technician. Any person who manicures or pedicures natural nails, or who performs artificial nail services or any combination thereof.
13. PIC. The individual present in the personal beauty facility who is the supervisor of the operation. If no individual claims to be a supervisor, then any employee present is deemed to be the PIC for the purposes of this section.
14. Personal Beauty Services. A facility authorized by NEXCOM or MCX and the local preventive medicine authority to operate as a barber shop, beauty salon, nail salon, and day spa, or any combination of these facilities.
15. Salon, Shop, and Parlor. A commercial establishment offering personal beauty services. May be referred to as barber, beauty, cosmetology, hairdressing, nail, or waxing, depending on the services offered.
16. Wax Technician. Any person licensed by the Board who removes hair from the hair follicle using a physical (wax) depilatory or by tweezing.
17. Waxing. The temporary removal of superfluous hair from the hair follicle on any area of the human body through the use of a physical (wax) depilatory or by tweezing.
18. Work Area. A separate room with more than one workstation, or a private room set aside to serve one customer at a time.
19. Workstation. A chair, countertop, table or floor space set aside for the purpose of serving a customer, including floor space for the operator to stand while serving the customer.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

2-22. Inspection and Plan Review

1. Inspections are performed to determine compliance with requirements of this section.

a. The responsibility for meeting the standards in this section lies with the PIC and management of the facility. It is strongly recommended that the PIC routinely self-inspects the establishment based on the standard herein.

b. Inspections must be performed during the normal operating hours of the establishments without advance notice. The inspector will contact the PIC upon arrival and state the purpose of the inspection.

c. A representative from the PMD must document inspection findings using the Beauty and Barber Shop Survey, enter and attach to DOEHRS-IH, EH module.

(1) Inspection reports must be maintained as outlined in reference (f).

(2) A copy of the completed inspection report must be provided to responsible personnel at the facility and results forwarded via the chain of command.

d. Use table 2-1 of this section when developing a frequency for personal beauty service. Determine each service offered and award the corresponding point(s). After calculating the points, refer to table 2-2 to determine the minimum recommended inspection frequency (e.g., a facility performing haircuts and hair treatments only would be awarded three points). The corresponding tier under table 2-2 would result in tier 2 classification, requiring a minimum of three inspections per calendar year).

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

|                    | DESCRIPTION  | POINTS |
|--------------------|--|--------|
| Hair cutting       | Cutting, shampooing, drying.   | 1      |
| Hair treatment     | Hair styling; use of hair chemicals to perform straightening, braiding, weaving, coloring, permanents or relaxers.   | 2      |
| Hair removal       | Tweezing, plucking, waxing, threading.   | 3      |
| Nail treatments    | Nail treatments associated with manicure or pedicure; polish, trimming, color, nail extensions, nail jewelry applications.   | 2      |
| Skin treatments    | Facials; skin wraps; makeup application; paraffin wax; head, neck, shoulder, and hand or foot massage; mud bath; skin treatments associated with manicure or pedicure. | 2      |
| Spray tanning      | Use of an air gun to apply a skin-coloring formulation containing dihydroxyacetone (DHA).  | 1      |
| Whole-body massage | Massage treatments involving the whole body or select regions such as the arms, legs, shoulders, or back.  | 2      |

Table 2-1. Personal Beauty Services

e. The following are minimum required inspection frequencies and are not inclusive of opening, remodeling, additional services, or complaint inspections.

| TIER | POINTS | FREQUENCY                 |
|------|--------|---------------------------|
| 1    | 1 to 2 | 2 times per calendar year |
| 2    | 3 to 6 | 3 times per calendar year |
| 3    | 7      | 4 times per calendar year |

Table 2-2. Criteria for Calculating Inspection Frequency

2. Any changes in services offered at a beauty services facility must be approved by the cognizant exchange service. Notification must be submitted to the local PMD a minimum of 2 weeks prior to adding or deleting and services listed in table 2.1. Plans must be approved by the PMD before the facility may operate. Additionally, any changes in services offered must be approved by NEXCOM or MCX and the local PMD.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

2-23. Employees

1. Employees performing personal beauty services must adhere to the following requirements:

a. Per reference (s), a baseline medical exam is required. Periodic examinations are not required; however, consideration should be given to the risk of communicable diseases in that location and to whether additional medical screenings are warranted. Depending upon the prevalence of communicable diseases in the geographical location, local medical officers may order specific testing they consider necessary. Depending on state or local requirements, employees may be required to be medically screened in order to maintain their licenses and certificates. NEXCOM and MCX will develop policy for civilian and contract personnel to ensure compliance with this requirement.

b. Employees may not work when ill with any communicable disease, diarrhea, vomiting, and sore throat with fever, skin sores, burns, or other health condition that might be transferred to a patron.

c. Employees must keep their person and clothing clean when attending patrons. A clean smock or uniform must be worn and changed at least daily.

d. Employees must not eat, drink, or smoke in work areas (such as laundry areas, styling stations, and shampoo and drying areas). Confine eating and drinking to designated employee break areas only. Customers and employees must be prohibited from smoking in personal beauty services facilities.

2. Licensing

a. All CONUS NEX or MCX associates must have a current and valid license complying with local and state regulations requirements to work in a NEX or MCX facility. For OCONUS facilities, follow NEXCOM regulations concerning licensing.

b. Per the Privacy Act of 1974 regulations, the actual licenses must not be displayed at work stations. License information that includes the associate's full name, type of license, license number, and date of license renewal will be kept framed on a sheet of paper clearly posted within the facility. A copy of the license must be kept within the location's Human Resources office.

2-24. Facilities

1. Reference (g) outlines the space allowance and construction standards for beauty service facilities ashore. The site and physical facilities for personal beauty services must comply with NEXCOM and MCX policy. These facilities must not be located in food services or berthing areas. When located in the same building as a food operation or berthing area, separate entrances are required.



**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

2. The minimum number of sinks required is listed in reference (k). However, additional sinks may be advisable based on location or patron load. Sinks may include a combination of shampoo sinks and general purpose (hand wash) sinks located outside of the toilet room. All personal beauty services facilities hand sinks and shampoo basins must be equipped with an adequate supply and continuous flow of hot and cold water under pressure and must be properly connected as prescribed in references (k) and (o). Hot water must not exceed 120 degrees Fahrenheit at the tap to prevent scalding. They must be maintained in a state of good repair and cleanliness.
3. Toilet rooms that are located inside the personal beauty services facility must conform to the standards required in UFC. Toilet rooms must be equipped with a hand wash sink that is supplied with hot and cold water, soap, disposable paper towels, and a waste receptacle.
4. Adequate ventilation, as required by NEXCOM and MCX policy and an IH survey, must be provided to keep work areas free of odors and to eliminate or minimize exposures to potentially harmful mists and vapors generally associated with hair treatments, nail treatments, and spray tanning.
5. Light intensity must be at least 50-foot candles (540 lux) at hair cutting and styling stations and nail treatment stations. Massage therapy areas must maintain light intensity of not less than 20-foot candles where massage services are being performed and in all areas where clients are present.
6. Closed sanitary receptacles for waste materials and soiled linens must be provided. Containers for soiled linens should be clearly labeled.

2-25. Product and Disinfectant

1. Per reference (t) defines cosmetics by their intended use.
  - a. This includes products intended to be rubbed, poured, sprinkled or sprayed on, introduced into, or otherwise applied to the human body for cleaning, beautifying, promoting attractiveness, or altering appearance. Examples of products as defined in reference (t) include shampoos, perfumes, fingernail polishes, eye and facial makeup, hair colors, permanent waves, lotions, and creams.
  - b. The Food, Drug, and Cosmetic (Act of 1938) defines drugs by their intended use, as articles intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease, and articles (other than food) intended to affect the structure of any function of the human body or other animals per reference (t), subparagraph (g)(1). Examples of barber and beauty shop products which would fall under these regulations are some moisturizers and dandruff shampoos.
2. When a product is regulated as a cosmetic and a drug then the drug ingredient of the product must be approved by the U.S. Food and Drug Administration (FDA) in order to be used in Navy and Marine Corps facilities.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

3. Personal beauty services facilities' cosmetic products must not include any ingredient that is banned or deemed to be poisonous or unsafe by the FDA or other Federal governmental agencies responsible for making such determinations. FDA regulations specifically prohibit or restrict the use of certain ingredients in cosmetics.
4. All instruments, metallic and non-metallic, in contact with patrons must be cleaned and disinfected between each patron. Use of electric shavers is discouraged because they are difficult to clean and disinfect between patrons. If used, electric shavers should be designed with a removable blade guard to allow proper cleaning and disinfection between patrons.
5. Antiseptics must be FDA approved for use on patrons' skin.
6. Sufficient disinfecting agents registered and approved by the EPA must be available at the facility for use on equipment, instruments, and physical facilities. Only EPA registered hospital-grade disinfectants or products specifically formulated (and EPA approved) for barbering tools (for example, Barbicide™) are approved for use in Navy and Marine Corps personal beauty services facilities.
7. All disinfection products must be used in accordance with a manufacturer's instructions. Use table 2-3 as a guide for selecting an appropriate disinfecting solution when specially formulated disinfectants for barbering operations are not available. Disinfecting solutions are prepared fresh daily and changed periodically throughout the day if they become visibly cloudy, dirty, or diluted.
8. The product label and safety data sheet must be available to facility employees and consulted for directions and information concerning handling and use precautions.
9. Request for approval to use other mechanisms for disinfecting instruments and equipment must be approved by NEXCOM and MCX prior to use.
10. Formaldehyde cabinets are a prohibited method of disinfection in Navy and Marine Corps personal beauty services facilities. The use of ultraviolet lamps as the only means of disinfecting instruments and equipment is prohibited.
11. When overseas, foreign brands that meet European standards for beauty products and disinfection, but do not bear a United States Department of Agriculture (USDA), FDA, EPA, or equivalent national standard marking recognized by the PMD may not be used until approved by NEXCOM and MCX.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

| ITEM   | DISINFECTANT   | ADDITIONAL GUIDANCE*  |
|--|--|---|
| Combing and setting instruments  | Quaternary ammonium (quats)  | To be effective, a quats solution must be as strong as 1-part quats to 1,000 parts water. For safety, it should not be mixed any stronger. A solution of 2/3 ounce of quats in 1 gallon of water (20 milliliters quats in 3.8 liters of water) yields a 1:1000-sanitizing solution. Recommended contact time is 10 minutes.                                 |
| Metal instruments: blow-comb attachments, curling irons, manicure instruments, electric clippers and shapers, scissors | 99 percent isopropyl alcohol   | All non-electrical instruments or devices are cleaned and then completely immersed in the disinfecting solution for 10 minutes or as specified on the manufacturer's label. Electrical devices are wiped or brushed clean and then swabbed or sprayed with the disinfectant and allowed to air dry before use.  |
| Physical facilities, equipment, and fixtures: shampoo bowls, sinks   | Lysol™ or diluted forms of ammonium.   | Use per disinfectant manufacturer's recommendation and as specified in equipment manufacturer's User Manual for disinfecting procedures.  |
| Physical facilities: floors, sinks, tables, chairs, toilet   | Chlorine bleach: 50 parts per million (ppm). Concentration verified by test. | Remove all visible soil and debris from surfaces. A spray bottle may be used for application; apply a sufficient amount of chlorine solution to allow the surface to remain wet for at least 1 minute. For immediate use of tables and chairs, wipe the surface dry using a clean cloth or paper towel after allowing a 1-minute disinfectant contact time. |
| Non-electrical instruments, and foot baths   | Chlorine bleach: 200 ppm. Concentration verified by test.                    | <i>Note: Chlorine solution may corrode metal instruments.</i> Wash with soapy water to remove debris and oil residues; dry instruments before placing in the chlorine solution. Allow items to soak for 10 minutes. Rinse instruments under running water and then dry with a clean towel before storing or use.  |

Table 2-3. Disinfecting Solutions

2-26. Sanitation. The following requirements are applicable to all personal beauty services facilities:

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

1. A copy of this section must be available in the facility and made available to patrons if requested. The safety data sheet and container labels must be available and accessible for employees.
2. NEX and MCX SOPs must be available at all personal beauty service facilities to specify procedures for the following:
  - a. Assembly and disassembly of tools, as required, for conducting cleaning and disinfection.
  - b. Cleaning, disinfecting, and storing electrical and non-electrical tools, devices, and instruments.
  - c. Storing and handling bulk supplies of disposable items, waxes, lotions, tonics, emulsions, linens, and other supplies used with patrons.
  - d. Preparing disinfecting solutions and verifying solution concentration (e.g., chlorine solution).
  - e. Evaluating patrons for skin infections, hair infestation, and medical conditions that require a restriction of services and specific guidelines and procedures regarding refusal of service.
3. Employees must examine patrons prior to conducting treatments or performing services to ensure there is no evidence of disease, infection, or sores in the area of the treatment or service. Without the written consent of a medical officer, employees must not serve patrons when their face, feet, neck, skin, or scalp is inflamed, contains sores, or has erupted boils. Lice-infested personnel must not be served.
4. The personal beauty services facility must be maintained and clean. Remove cut hair frequently from floors. Clean floors using a push broom or vacuum, and then wet mop with commercial floor cleaning products. Floors must be mopped at least once daily. Toilet rooms, sinks, shower facilities, and treatment chairs must be cleaned and disinfected daily or as needed.
5. Employees must wash their hands thoroughly with soap and water for at least 15 to 20 seconds before and after each patron, as well as after handling trash, performing custodial duties (handling soiled linens, sweeping floors, and cleaning equipment), eating, drinking, smoking, or using the restroom.
6. The headrest of chairs used for personal beauty services facilities must be covered with a clean towel or disposable tissue for each patron. Dispose of single-use headrest covers as general solid waste. Cloth covers can be reused provided they are laundered after each use.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

Disposable sanitary neck strips or freshly laundered towels must be used between reusable haircloths and capes and the patron's skin (neck). Launder reusable haircloths and capes whenever they become soiled or at least daily.

7. Due to the theoretical possibility for the transmission of blood borne pathogens (e.g., Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV)), the practice of shaving using a razor having a fixed non-disposable blade is not permitted in Navy and Marine Corps barber and beauty shops. However, shaving using a single-use (disposable) razor is authorized. Disposable razors must be discarded immediately after their use on a single patron by placing them in a rigid container with a large enough opening at the top to allow razors to drop in easily without having to be bent or broken.

8. First aid materials must be used to treat small cuts. These materials must be applied only with freshly laundered towels or sterile cotton. Only powdered or liquid astringents (antiseptics), applied with a clean disposable applicator, paper neckband, or paper towel, may be used to stop bleeding resulting from hair removal procedure. Disposable items contaminated with blood must be immediately discarded. When dealing with blood, the use of personal protective equipment and universal precautions is recommended.

9. Animals, except working or service animals, are prohibited in personal beauty services facilities.

10. Instruments and Equipment

a. The quantity of instruments and supplies available must be sufficient to accomplish disinfection while meeting patron demand.

b. Natural-fiber and common-use brushes (e.g., neck dusters and shaving brushes) multi-use sponges, powder puffs, and shaving mugs must not be used. Automatic dispensers and clean towels must be used in place of common brushes or dusters. Synthetic hairbrushes that are specifically designed to allow adequate cleaning and disinfection between patrons are allowable.

c. Clean and sanitize all multi-use instruments after use on each patron and at the close of each day's operation. Multi-use instruments include, but are not limited to, combs, brushes, scissors, tweezers, clippers, curling irons, and cosmetic applicators. Local procedures for cleaning and disinfecting equipment, devices, and instruments should be provided in an SOP, as specified in article 2-28 of this chapter and must meet the following requirements:

(1) Non-electrical instruments, such as scissors, combs, applicators, and other plastic or metal instruments must be thoroughly washed with soap and hot water to remove all film, oil, and debris, and then dried with a clean towel or clean disposable tissue before being placed in a disinfecting solution. Note: Failure to dry instruments before placing in the disinfecting solution

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

will cause dilution of the solution and reduce its disinfecting properties. Cleaned items must be completely immersed in an approved disinfecting solution for the minimum period recommended in the manufacturer's instructions, or ten minutes if using a chlorine solution.

Note: Scissors must be opened during disinfection to allow maximum surface contact.

(2) Electric instruments, such as hair clippers, curling irons, and blow-combs, must have hair debris and residues removed from the exterior surfaces using a stiff bristle brush designated only for this purpose. After removal of all foreign matter, electrical instruments must be sanitized with an EPA registered disinfectant. Non-removable clipper heads must be wiped or dusted and sprayed with an EPA registered disinfecting spray between each patron. Appropriate precautions should be taken, including the minimum use of material (consistent with proper disinfection), directing the spray away from the breathing zone of the user and any patrons in the vicinity, minimizing skin contact, and adequate hand washing after use. Removable clipper heads may be disinfected either by using disinfectant spray or placing removed heads in a disinfecting solution as prescribed for other instruments. Use of electric shavers is discouraged because they are difficult to clean and disinfect between patrons. If used, electric shavers should be designed with a removable blade guard to allow proper cleaning and disinfection between patrons.

(3) Immediately clean and sanitize instruments such as tweezers that are not intended to penetrate the skin, but become contaminated with blood during a patron service. The utilization of universal precautions is recommended.

d. To maintain correct wet disinfection and dry storage standards:

(1) Disinfectants must be used according to label instructions. Disinfecting solutions are prepared fresh daily and changed periodically throughout the day if they become visibly cloudy, dirty, or diluted. If chlorine bleach is used, a fresh solution must be prepared daily, and the concentration verified using a test strip or kit.

(2) Containers used to hold instruments during disinfection (e.g., Barbicide™ jars) must be covered and of sufficient size to accommodate all instruments. A sufficient volume of disinfecting solution must be provided for complete immersion of instruments being disinfected.

(3) Instruments that are disinfected by immersion in a chemical solution must be rinsed with running water to remove chemical residues. Disinfected instruments must be dried with a clean cloth or paper towel and stored dry in a clean and covered container or drawer. Use of an ultraviolet light cabinet to dry instruments is prohibited.

(4) Electrical equipment that is disinfected using a spray or swab application must be air dried before being used with another patron.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

e. Other electrical equipment and devices, such as electric massage chairs, manicure or pedicure equipment, and facial vaporizers, must be cleaned and disinfected per the manufacturer's written instructions. A copy of the equipment user guide must be retained in the facility and must be available for inspection.

f. All instruments and supplies that come into direct contact with a patron and cannot be properly cleaned and disinfected must be disposed of in a covered waste receptacle immediately after use on a single patron. Disposable items must not be retained for use with another patron. Items constructed of porous or absorbent materials, such as paper, cardboard, open-celled foam pads, and threading fibers, cannot be adequately cleaned and disinfected must be used only once. Examples of porous items that may not be retained for multiple use include, but are not limited to, sanding blocks, pumice stones, cardboard emery boards, and toe separators. Multi-use chamois and felt buffing and polishing burrs must be washed, sanitized, and fully dried before being used on another patron.

11. Foot Baths and Spas

a. A pedicure-cleaning log must be maintained for each foot spa or basin present in the facility. The facility may keep a separate pedicure-cleaning log for each individual spa or basin or a consolidated log documenting activity for all the basins. In either case, each spa or basin must contain a unique identification code or number which is provided in the log. Pedicure-cleaning logs must be available for inspection and are retained on file at the premises for a period of one year.

b. Foot spas and foot baths with circulating water, such as whirlpool foot-spas, air-jet basins, and pipe-less foot spas to include hand bowls and basins, must be cleaned and disinfected after each patron, as well as at the end of the day. Cleaning and disinfection should be carried out per the manufacturer's instructions. The general steps for this process are as follows:

(1) Drain all water from the basin; remove footplate or other removable components from "pipe-less" foot spas.

(2) Scrub and clean the inside walls of the basin (and footplate components) using a clean brush and liquid soap to remove all visible residue.

(3) Rinse the basin (and components), reassemble the foot spa, and then refill with clean water.

(4) Utilizing an approved product, disinfect the bath or spa following the manufacturer's instructions and product label.

(5) Drain and rinse the basin with clean water and wipe dry with a clean paper towel or cloth.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

(6) Record all cleaning and disinfecting procedures in a pedicure-cleaning log. The pedicure-cleaning log must contain the date and time of each cleaning, initials of the person who completed the procedure, and must indicate that the cleaning was done “after a client” or “end of day.”

(7) At least once each week, after completing the procedures in section 2-28. 11b(1) and (2) of this section:

(a) Do not drain the disinfectant solution. Leave the disinfectant solution in the basin for a period of six to ten hours (e.g., overnight) and then drain and rinse the basin with clean water.

(b) For whirlpool foot spas and air-jet basins, refill the basin with clean water and flush the system. For pipe-less foot spas (with footplates and impeller or propeller assemblies), following the six to ten-hour disinfection period, drain and rinse the basin with clean water, then wipe dry with a clean paper towel.

(c) Record the date and time the cleaning was performed, initials of the person who completed the procedure, and indicate that the cleaning was done “weekly.”

**12. Other Supplies**

a. Liquids, creams, cosmetics, emulsions, waxes, and other skin application products:

(1) Must be kept in clean and closed containers when not in use.

(2) When only a portion of a cosmetic preparation is to be used on a patron, it must be removed from the original container in such a way as not to contaminate the remaining portion. Unused portions of a preparation must be disposed and not returned to the bulk container or used with another patron.

(3) Pencil cosmetics must be sharpened and disinfected before each use.

(4) Single-use applicators and dispensers are recommended. When multi-use applicators are used for cosmetics and other treatments, the applicator must be washed using soap or detergent, and disinfected, as specified in section III, article 2-27, subparagraph 10(c), between each patron. Multi-use pump and spray dispensers must be wiped with an approved disinfectant (e.g., 99 percent of isopropyl alcohol) between each patron.

b. Single-use items, such as cotton pads, emery boards, applicators, threading fibers, paper neckbands, etc., must be stored in clean and covered containers or drawers.



**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

2-27. Waxing, Tweezing, or Threading for Hair Removal

1. Waxing and tweezing hair are permitted in personal beauty operations. Threading is permitted to remove eyebrow hair. These services require adequate facilities and equipment, and employees who are licensed and specially trained. The following sanitary requirements should be followed:

a. The cosmetologist must inform each patron requesting threading, waxing, or tweezing of the potential health risk for individuals with the following medical conditions: diabetes, circulatory problems, high susceptibility to infections, or unusual sensitivity to threading, waxing or tweezing. Patrons who use topical or oral retinoid and other similar products should be advised not to have hair waxing performed on the face, as these products tend to weaken the skin, and tearing of the skin may occur when the wax is removed. Inform patrons to seek medical attention if there is any excessive reddening of the skin or other signs of skin sensitivity or infection.

b. Patrons should be advised they are more susceptible to irritation or infection for up to 48 hours after a procedure and should not engage in the following practices or activities during this timeframe:

- (1) Swim or have a spa or whirlpool bath.
- (2) Wear tight clothing that could cause excessive sweating.
- (3) Sunbathe, either naturally or artificially (to include spray tanning).
- (4) Use a deodorant on the waxed areas.

c. All areas of the body being treated must be cleaned using an FDA approved broad-spectrum antibacterial agent before and after the procedure. Apply the antibacterial agent using a clean dry towel, a disposable cotton, or paper cloth to avoid getting the antibacterial agent into the patron's eyes.

d. A clean single-use paper towel will be used to blot any blood resulting from threading, waxing, or tweezing. Dispose of these towels as general solid waste. A patron with bleeding which cannot be stopped by direct pressure will be referred to an appropriate supporting medical facility. When dealing with blood, the use of personal protective equipment and universal precautions is recommended.

e. Inform patrons to seek medical attention if there is any excessive reddening of the skin or other signs of skin sensitivity or infection.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

f. Waxes should not be used over varicose veins, moles, or warts. Waxes must not be applied on eyelashes, inside the nose or ears, on the nipples or genital areas, or on irritated, chapped, sunburned, or cut skin.

2. Latex-free disposable gloves are required when performing waxing, tweezing, or threading procedures. Gloves are disposed as general solid waste after serving each patron. Handwashing must be performed prior to donning and after removing gloves.

3. When selecting and using waxes, employees must comply with the following sanitary requirements:

a. Use of glucose (water-soluble) wax, including water-based strip wax, is prohibited. This type of wax is more liable to permit the growth of harmful microorganisms.

b. The use of hot (hard) wax is permitted with the following sanitary requirements:

(1) Apply wax according to the manufacturer's or label instructions. These procedures should be consistent with those specified in the facility SOP. Cosmetologists should check for sensitivity to waxing prior to beginning a waxing procedure. Apply a small amount of wax to the skin (cover one-half inch or less). If there is any excessive redness or irritation, discontinue treatment.

(2) Clean application sticks will be used. Single-use applicators will be used. Multiple-use applicators are acceptable only if the wax can be completely removed and the applicator cleaned and chemically sanitized between patrons. Extract wax from the pot with each applicator only once.

(3) All wax that has been in contact with a patron's skin or removed from the bulk container in preparation for use with a patron must be disposed. Once hot wax is removed from the pot, it is considered to be used and may not be returned to the pot under any circumstances.

c. Use of oil-based strip (soft) wax is permitted for hair removal. Oil-based strip waxes will not be reused.

(1) Roll-on applicators may be used if the applicator can be dismantled and thoroughly cleaned and disinfected between patrons.

(2) When wax is removed from the patron's skin, plucking a few remaining hairs is permitted.

(3) Dispose of the single-use gloves, single-use wax application sticks, and any products used to remove the wax as solid waste.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

(4) All wax pots must be cleaned and disinfected with a hospital-grade, EPA-registered disinfectant solution. Application sticks may not be left standing in the wax pot at any time.

(a) Hot (bulk) wax pots do not have to be cleaned and disinfected until they are empty or become visibly soiled or contaminated. Partially full hot wax pots may not be "topped off" with fresh wax.

(b) Oil-based strip wax pots must be emptied, cleaned, and disinfected weekly or before refilling, whichever comes first.

4. Tweezers and multi-use (spring) threading tools must be cleaned and sanitized between patrons using an approved chemical disinfectant as specified in section 4.9 subparagraph j(3).

5. Threading fibers used during a threading procedure are for single use only and must be discarded.

2-28. Paraffin Wax Treatment for Hands and Feet

1. Paraffin wax treatments performed on hands and feet during manicure and pedicure must conform to the following requirements:

- a. A paraffin wax treatment must be provided before, and not after a manicure or pedicure.
- b. The client must be free of broken skin, burns, or any skin disorder.
- c. The client's hands and feet must be washed and sanitized before beginning paraffin wax treatment. Ensure all jewelry is removed from hands and feet before a wax treatment.

2. Paraffin wax must be maintained and stored in a sanitary manner, free of any debris. Paraffin wax pots must be emptied, cleaned, and disinfected whenever they become visibly contaminated with dust or other debris, but no less than once per week.

a. Paraffin wax must be covered when not in use and maintained at a temperature specified by the manufacturer's instructions to prevent skin burns on patrons. Paraffin wax must be heated using a paraffin wax heater and must not be heated using a microwave oven or other type of heater element.

b. It is prohibited to dip a client's hands and feet directly into a paraffin wax container. Technicians must use individual disposal gloves or bags for each client. Wax is removed from bulk storage and poured into gloves or bags and placed on client's hands or feet. After treatment, gloves or bags and wax within is properly disposed.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

c. A designated basin must be used for the hands and a separate designated basin be used for the feet. Wax used for hand and foot treatments must not be used for other applications.

d. Paraffin wax removed from the client's hands and feet must not be returned to the wax pot for reuse and must be immediately discarded.

2-29. Hair Weaving and Braiding. Hair weaving (extensions) and braiding operations must conform to the sanitary requirements and controls specified in this chapter. Hair extensions, tracks, needles, and thread must be stored in a bag or covered container until ready for use. No unrelated items must be stored in the same bag or container.

2-30. Artificial Nails, Nail Decorations, and Nail Treatments

1. Artificial nails and application of nail decorations or jewelry can be a source of bloodborne pathogens. Additionally, employees and patrons may be exposed to harmful vapors from glues and other chemicals. The local PMD, in concert with IH and OH professionals, approves the procedures and location of these operations.

2. Nail technicians may not work on nails that are abnormal in appearance or have any evidence of infection (redness, pus, tenderness, or swelling).

3. Premises must be well ventilated to minimize exposure to harmful vapors. Specific ventilation issues should be referred to IH. Use of drop-on or brush-on products rather than aerosol products is recommended. Cotton pads and similar articles soaked in chemicals (e.g., alcohol) will disperse vapors into the room. Keep lids on containers to reduce vapors from escaping into the air.

4. Single-use chamois buffers, emery boards, pumice stones, sanding blocks, cuticle sticks, and toe separators are recommended. Reusable items, to include buffing burrs and nail brushes, require cleaning and disinfection after each patron per section IV, article 28.

2-31. Spray Tanning

1. Application of chemical tanning products must be performed by a spray tan professional using an air gun. Technicians who administer spray tanning must have a valid license or proof of training certification per NEX or MCX guidance to conduct spray tanning. Use of automated spray tanner booths is prohibited because they are enclosed, provide poor ventilation, and do not control the streams of spray tanner during the application.

2. Sunless tanning products containing DHA as the active ingredient are FDA-approved for cosmetic use and are considered non-toxic and non-carcinogenic. DHA is not, however, approved for inhalation. Caution should be taken to minimize patrons inhaling high levels of the product during application. The following controls must be implemented to minimize health risks:

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

a. The treatment area of the facility is properly ventilated to remove excessive vapors from the room. Ventilation may include a combination of local exhaust fans. Specific ventilation issues should be referred to IH.

b. Patrons must wear eye protection and may be issued nose plugs. Single-use protective equipment is recommended. Reusable items must be cleaned and disinfected between each patron.

c. Sunless tanning products should only be applied externally to the body, avoiding areas around the eyes, lips, and any other mucous membrane area. Barrier cream or petroleum jelly should be applied to areas that should not receive the DHA chemical.

2-32. Mud Treatments and Baths

1. Mud treatments are either applied to the body then removed (e.g., mud wraps), or individuals are immersed in a mud bath. Hazards generally associated with mud treatments include exposure to toxic substances associated with inappropriate products and skin disease (e.g., folliculitis).

2. Products used for mud treatments must be approved as specified in section IV, article 2-27. The term “mud” is used to reference a wide variety of products that are coated onto the skin. Therapeutic mud is typically soil composed of seaweed and algae, volcanic ash, clay, and other rich minerals, which are mixed with drinking water or natural spring water. For example, Dead Sea mud has a high concentration of salt and minerals. Use of ordinary garden soil is prohibited as it may contain high levels of toxins and pathogens such as lead and bacteria.

3. Sanitary control of treatment tables, linens, applicators, and use of products from bulk stocks must conform to the criteria specified in section IV, article 2-28.

4. Mud baths must be limited to single-use tubs that are completely sanitized and replenished between patrons. Use of group-shared thermal baths, other than naturally-occurring mud baths associated with hot springs, is prohibited.

a. Single-use tubs must be connected according to the manufacturer’s instructions and local plumbing requirements to a potable water system with hot water supply and must be drained through an approved sewage system.

b. To sanitize the mud, hot water at 212 degrees Fahrenheit (100 degrees Celsius) is pumped into the mud for a period of at least 15 minutes. The mud is raked (sifted) to remove hair and other physical debris and the water is then extracted.

5. Mud baths must be equipped with a temperature monitoring device. Mud temperature must not exceed 120 degrees Fahrenheit (49 degrees Celsius) during client use.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

2-33. Prohibited Practices and Instruments

1. Invasive procedures are not authorized in a non-medical facility. Invasive procedures are those acts which affect the structure or function of living tissue of the face or body. Examples include, but are not limited to, the following:

- a. Applying electricity to the body for any purpose, including, but not limited to, muscle contraction and electrolysis.
- b. Applying topical lotions, creams, emulsions, or other substances using a method that may penetrate below the epidermis and affect living tissue (e.g., dermis).
- c. Penetration of the skin by metal objects (needles, razor blades, lancet), including therapeutic practices such as treating infected hairs, sores, or lesions; removing ingrown hairs; and squeezing pimples.
- d. Abrasion of the skin below the non-living, epidermal layers. Abrasion may occur when using a sanding block or an automated or electronic microdermabrasion device. Note: callus treatment is limited to smoothing calluses; removal of calluses is prohibited.
- e. Removal of skin by means of razor-edged instruments or clippers. Whenever a patron is under a hooded hair dryer, an employee must be present in the room.
- f. Use of sugaring technique for hair removal. The sugar-based paste provides a perfect medium for the growth of potentially harmful microorganisms.

2. The following instruments are prohibited and must not be maintained in any facility providing barbering, cosmetology, skin care, nail treatment, or related services:

- a. Razor-edged tools or metal rasps to remove or treat calluses.
- b. Needle-like instruments and lancets used for extracting skin blemishes, injecting inks or dyes, and other procedures involving penetration of the skin.
- c. Styptic pencils, which are used to stop bleeding.
- d. Lasers used for skin treatments or performance of body art.

2-34. Massage Therapy

1. Non-medical therapeutic massage services are offered through a wide range of styles such as Swedish, sports, whole or partial body, Thai, and Shiatsu massage, each with its own defining characteristics.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

2. A massage practitioner must operate only under the name specified in his or her license acceptable to the NEX or MCX headquarters and this section. A massage establishment must operate only under the name specified in its city, state, or government business registration.
3. Employees administering therapeutic or whole-body massages must be limited to the scalp, face, neck, shoulder area, back, legs, hands, and feet. Massage personnel must not serve patrons with inflamed, broken (i.e., contains sores, cuts, abrasions) skin, or where a skin infection is present (e.g., erupted boils).
4. Massage establishments must always be equipped with an adequate supply of clean sanitary towels, coverings, linens, and footwear. Clean towels, coverings, linens, and footwear must be stored in enclosed cabinets when not in use.
  - a. Cloth coverings used on tables, face rests, and mattresses (or floor), towels, bath robes, foam rolls and pillows, and any clothing provided are for use by a single patron only and must be laundered and disinfected between patrons. Linens used to cover tables, face rest, mattresses, or floor must be free of tears and holes. Paper covers must be discarded as waste after use by a single patron. Soiled linens and paper towels must be deposited in separate, approved, and adequately labeled receptacles.
  - b. Clean, disinfected footwear (e.g., shower shoes, sandals, and slippers) must be provided and worn by each patron when a massage treatment offers the use of a shower before or after the treatment.
  - c. Linens must be laundered through a commercial (or field) laundry service or on the premises. Laundering conducted on the premises must be done using a sanitize cycle or equivalent as directed by the machine manufacturer's directions.
  - d. Single-use footwear and robes must be disposed of immediately after use by a single patron. Multi-use shower shoes, sandals, and slippers must be washed with a detergent and disinfected between each patron. Disinfectant must be an EPA registered (or European equivalent if OCONUS) hospital-grade product labeled as a bactericide, fungicide, and virucide. Footwear must be completely immersed in the disinfecting solution for the minimum time period specified by the manufacturer. When chlorine bleach is used for disinfection, a 100-ppm solution is prepared fresh daily; contact time must be at least 30 seconds. Shower shoes and slippers must be air dried after disinfection.
5. Patrons will remain appropriately covered always using a sheet or towels.
6. A minimum of one wash basin must be located within or as close as practical to the area devoted to performing of massage services. Hand soap and sanitary towels must also be provided at each basin.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

7. All liquids, creams, or other preparations used on or made available to patrons must be kept in clean and closed containers. Powders may be kept in clean shakers. All bottles and containers must be distinctly and correctly labeled to disclose their contents. When only a portion of a liquid, cream, or other preparation is to be used on or made available to a patron, it must be removed from the container in such a way as not to contaminate the remaining portion.

8. A massage table must be used for all massage therapy, except for Thai, shiatsu, and similar forms of massage therapy, which may be provided on a padded mat on the floor, provided the patron is fully attired in loose clothing, pajamas, scrubs, or similar style of garment. Beds, floor mattresses, and waterbeds are not permitted on the premises of the business or establishment.

9. Massage cupping and warming stone treatment can be performed if the massage therapist is fully licensed or certified per NEX or MCX guidance to perform these specific treatments.

a. All massage cupping equipment must be either disposable or washed and sanitized between each patron.

b. Clients should be fully informed of any risks of any after effects of use of this type of therapy (e.g., cups may leave a mark on skin from the suction).

c. When providing warm stone treatments, the stones must be accepted by the NEX or MCX and must meet all applicable industry standards.

(1) Use manufactured equipment specifically designed to properly heat stones. Heating stones in any device other than a unit specifically designed for this task is not authorized. This includes slow cookers (Crockpots™), microwave ovens, ovens, heating pads, and hot plates.

(a) Heating units must have a temperature control to adjust the temperature of the water as needed. Generally, water between 110 to 130 degrees Fahrenheit (43 to 54 degrees Celsius) will heat stones to the proper temperature.

(b) A calibrated thermometer must be used to test the temperature of the water prior to patron application. Do not rely solely on the thermostat of the heating unit.

(2) When using hot stones, massage therapists need to continually monitor the temperature of stones and ensure there is some type of material between the stone and the client's skin. Burns can result from stones that are too hot.

(3) Massage therapists must review all contraindications and considerations prior to engaging in this type of therapy. The following are some conditions where hot stone therapy would be potentially contraindicated: diabetes, cancer, autoimmune dysfunctions, heart disease, epilepsy, neuropathy, pregnancy, skin conditions, and recent surgeries.



**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

2-35. IH Support

1. Installation IH programs should include barber and beauty shops, day spas, and nail care facilities as part of their annual assessment.
2. IH evaluates the efficacy of local exhaust or ventilation systems and potential exposures to toxic chemicals including nail glues and hair treatment chemicals. Assessment results are provided to the OH program to determine medical surveillance requirements.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

SECTION V. CHILD AND YOUTH PROGRAM FACILITIES

2-36. Introduction. Navy policy provides for children and youth programs, which serve to assist military and authorized civilian employees in balancing the competing demands of family life while contributing to mission accomplishment. Navy and Marine Corps children and youth programs include child development centers, child development homes, school-age care, youth programs, and supplemental programs. These programs serve a high-risk and sensitive population, making quality sanitation practices and compliance with health and sanitation requirements a priority for operators and the PMD.

2-37. Objectives

1. Ensure compliance with applicable DoD, Navy, and Marine Corps instructions.
2. Create a system of inspections to ensure children and youth program facilities are operated and maintained at or above the minimum standards provided.
3. Develop proactive communication of inspection findings with the children and youth program staff and directors.

2-38. Responsibilities

1. CNIC and Director, Marine and Family Programs Division are the child and youth program managers for their respective services.
  - a. Responsible for the effective management and proper operation of children and youth programs.
  - b. Responsible for ensuring all children and youth program professionals meet qualifications required outlined in references (u) and (v).
  - c. Responsible for ensuring the local MTF has assigned a medical officer as a point of contact for medical problems.
2. NAVFAC. Responsible for the design and specifications, and maintenance standards for child and youth program facilities.
3. PMD
  - a. Responsible for conducting applicable sanitation inspections and preventive medicine related surveillance of all aspects of the operation and maintenance of children and youth programs associated with health protection as required or at a minimum on an annual basis.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

b. Responsible for informing the CO via the chain of command concerning health and sanitation findings and recommended corrective actions.

c. Responsible for conducting re-inspections as necessary to ensure compliance with corrective action recommendations.

4. Public Works. Responsible for facility maintenance, major repairs, and support services for child and youth facilities under their jurisdiction.

5. Installation Child and Youth Program Managers. Responsible for the overall sanitation of the facility.

6. As directed by references (u) and (v), responsibilities extend to the MTF CO or officer in charge through their PMD.

7. Additionally, a medical officer, pediatrician, or pediatric nurse practitioner must be identified as a point of contact for the children and youth program.

2-39. Sanitation Standards Pertaining to Inspection

1. Health and sanitation standards for children and youth programs are prescribed in reference (w). These instructions must be thoroughly reviewed prior to conducting an inspection. Per references (u) and (v), compliance must be with all standards and regulations set forth by Navy and Marine Corps. The type and frequency of inspection must be completed as required by reference (w). The inspection must be documented using the prescribed CNIC and Marine Corps forms. Inspection reports must be maintained per reference (f). A copy of the report must be provided to responsible personnel at the facility and forwarded via the chain of command.

2. In addition, Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs (third edition), is considered a comprehensive source for standards among national child and youth programs. It has been reviewed and validated by more than 180 organizations and individuals. The publication is a joint collaborative project between the American Academy of Pediatrics, the American Public Health Association, and the National Resource Center for Health and Safety in Child Care and Early Education, with support from the Maternal and Child Health Bureau.

3. PMDs are strongly encouraged to review the Caring for Our Children publication when asked to make recommendations relating to health and sanitation standards at children and youth programs under their jurisdiction. This publication may be accessed through the following Web sites:

a. National Resource Center for Health and Safety in Child Care and Early Education Web site, <http://nrckids.org>.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

b. Navy and Marine Corps Public Health Center Web site,  
<http://www.med.navy.mil/sites/nmcphc/program-and-policy-support/Pages/Child-Youth-Program-Facilities.aspx>.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

SECTION VI. FITNESS AND SPORTS FACILITIES

2-40. Introduction

1. Fitness and sports facilities offer activity based health and fitness programs and services that promote recreational physical activity. Environmental considerations for fitness and sport facilities include prevention of infections due to contamination of equipment, towels, clothing, and other common use items, and provision of adequate facilities and housekeeping.
2. Saunas and steam rooms are used for relaxation and as part of individual physical fitness programs. These areas carry the potential for the passing of diseases, therefore, must be structurally sound, clean, and free from any potentially dangerous conditions.

2-41. Objectives

1. Establish and maintain a system to assist fitness and sports facilities in operating in a manner which promotes the health of patrons and staff.
2. Maintain a system of inspections to ensure facilities are operated and maintained at or above the minimum standards provided.
3. Ensure facilities are following applicable Federal, state, and local ordinances and standards.
4. Ensure public health standards are consistent with best practices.

2-42. Responsibilities

1. CNIC and Commandant, Marine Corps are the fitness and sports program managers for their respective Services.
  - a. Responsible for the effective management and proper operation of fitness and sports programs.
  - b. Responsible for ensuring all fitness and sports professionals meet qualifications required in references (u) and (v).
2. NAVFAC. Responsible for design, planning and specifications, and maintenance standards for fitness and sports facilities.
3. Public Works. Responsible for facilities maintenance, major repairs, and support services for fitness centers and sports facilities.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

4. Installation Fitness and Sports Program Managers. Responsible for the effective management and proper operation of fitness and sports facilities, to include the training of personnel.

5. PMD

a. Responsible for the inspection and surveillance as aspects of the operation and maintenance of fitness and sports facilities that are associated with health protection.

b. Responsible for informing the COs concerning the sanitation status of fitness and sports facilities.

2-43. Definitions

1. Canadian Standards Association (CSA). A marking representing Canadian safety standards, which is a nationally recognized testing laboratory certification issued in North America.

2. European Conformity Marking. A marking representing European and Australian safety standards.

3. Duckboard. A board or boards laid as a track or floor over wet or muddy ground.

4. Electrical Testing Laboratories (ETL) Listed Mark. A marking representing the highest standard of approval for North America, indicating conformance with all United States and Canada safety standards. Saunas bearing the ETL listed mark meet national standards such as American National Standards Institute, CSA, Compressed Gas Association, International Electrotechnical Commission, National Fire Protection Association, National Science Foundation, and Underwriters Laboratories (UL) for electrical, medical devices, and other products.

5. Sauna. A dry heat or steam bath in which the steam is provided by water thrown on hot stones.

6. Steam Room. A steam-filled and heated room to induce sweating; uses a lower temperature than a sauna, but higher humidity.

7. UL Standards Marking. A marking on infrared saunas indicating the certification of the sauna heater.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

2-44. Standards

1. Inspection

a. Inspections during the normal operating hours of the facility without advance notice as necessary to ensure sanitation conditions are being met. Inspection frequency must be based on local policy and communicable disease transmission risks but must be completed at least annually. The inspector will contact the manager or the PIC upon arrival, state the purpose of the inspection.

b. A representative from the PMD must document inspection findings using the Gym and Fitness Center Survey, then enter and attach to DOEHRS-IH, EH module.

(1) Per reference (f), inspection reports must be maintained.

(2) A copy of the completed inspection report must be provided to responsible personnel at the facility and results forwarded via the chain of command.

2. All design, materials, construction, electrical, and plumbing must conform to the requirements outlined in reference (g). These specifications will include both UFC requirements. All questions concerning these areas must be addressed in consultation with NAVFAC. Per industry standards, all approved infrared saunas must bear a manufacturer mark which indicates conformance with appropriate safety and performance standards—markings include ETL, CSA, UL, or European Conformity label.

3. Towels and issued athletic clothing must be laundered after each use, before being reissued.

a. Common use items such as personal protective equipment must be disinfected with an EPA-approved disinfectant or fungicide spray (as appropriate), and air-dried thoroughly before being reissued.

b. All disinfectant or fungicide sprays must be used per the manufacturer's label.

4. Fitness facilities must make available an EPA approved sanitizer that is adequate for Methicillin-resistant *Staphylococcus aureus* control.

a. Fitness facilities must direct patrons and staff to properly sanitize equipment that comes in contact with skin and sweat per the manufacture's instruction. Sanitizing must occur between each patron.

b. Facility staff must perform additional sanitizing of all equipment at least daily.

5. Group and individual exercise mats and locker room surfaces, floors, and benches should be cleaned and disinfected at least daily. Cleaning and disinfecting must be completed with an

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

EPA approved agent used per the manufacturer's label. Patron demand and usage pattern may necessitate more frequent cleaning. Exercise mats and locker room surfaces, floors, and benches must be cleaned whenever they become visibly soiled.

6. Toilet facilities and hygiene areas must be cleaned, disinfected, and restocked at least daily.
  - a. Disinfectant products must be EPA approved and applied according to manufacturer's instructions.
    - b. All plumbing must comply with references (j), (k), and (o).
      - (1) The number of plumbing fixtures (e.g., sinks, toilets) must comply with reference (k).
      - (2) There must be an available hot and cold-water supply under pressure sufficient to meet the peak patron demand. Hot water must be not greater than 120 degrees Fahrenheit at the tap to avoid scalding.
      - (3) All fixtures must be maintained in good working order and repair.
      - (4) Toilet rooms and sinks will be supplied with soap, disposable hand towels and waste basket with lid. When supplied for showers, only single-use bar soap or liquid soap must be provided.
    - c. Whirlpool baths, steam cabinets, and other therapy type equipment must be disinfected between users with an EPA approved disinfectant or other approved commercial cleaner or sanitizer. Disinfectants must be used per the manufacturer's label.
      - (1) Chlorine bleach mixtures must contain a minimum of 50 ppm of free available chlorine using non-scented bleach.
      - (2) Equipment must be rinsed with potable water after disinfection.
    - d. Temporary and mobile food services, including nutrition, sports-drink, and smoothie bars within fitness facilities must be operated and inspected according to guidelines provided in reference (i), chapter 1.

2-45. Saunas and Steam Rooms

1. The manufacturer's recommended procedures for safe use and operation of the sauna must be incorporated in a local SOP.
2. Steam outlets, piping, and heaters must be shielded to prevent burns.



**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

3. Sauna and steam room doors must contain a window allowing observation of the entire room. Doors must be unobstructed and not equipped with a lock or latch mechanism and must be easily opened from inside the room.
4. Carpeting and other absorbent floor coverings are prohibited.
5. Dry saunas must be constructed using rot-resistant wood. Floors must be designed with easily removable duckboards for cleaning and sanitizing. Benches must be designed for easy cleaning and have a smooth surface with no splintering, protruding nails, or other fasteners that may cause injury.
  - a. Duckboards, floors, and benches must be scrubbed daily using a mild detergent and disinfected using an EPA registered disinfectant per the manufacturer's label or other approved commercial cleaner or sanitizer. When chlorine bleach is used for disinfection, a 50 ppm-free available chlorine solution must be prepared fresh each day.
  - b. The sauna interior must remain clean and free of debris, foul odors, or other unsanitary conditions. There must be no evidence of mold or mildew on surfaces.
6. Steam rooms and wet saunas must be completely lined with waterproof material such as ceramic tile, glass, stone, or acrylic. Walls, floors, and ceiling must remain in good repair, free of cracked, broken, or missing tiles.
7. Adequate lighting must be provided in each sauna. Lighting fixtures in wet saunas must be suitable for damp locations and be protected by a light cover or be shatterproof.
8. Saunas and steam rooms must be equipped with a thermostatic control device to prevent temperature in dry sauna from exceeding 200 degrees Fahrenheit (93 degrees Celsius) and wet saunas from exceeding 120 degrees Fahrenheit (49 degrees Celsius). Control switches and valves must be secured and accessible only to facility employees.
9. Facilities must be installed with an automatic timing system to control time spent in saunas, or a clock must be available inside saunas for patrons to monitor and comply with time-occupancy requirements.
  - a. Facility staff must routinely monitor patron activity in saunas to verify temperature settings and watch for occupants experiencing adverse health effects.
  - b. Saunas, not under constant control of a facility employee such as those in remote locations away from pedestrian traffic, must be equipped with an emergency audible alarm for patrons to signal if help is needed.
10. Signs must be posted outside each sauna and steam room to inform patrons of hazards and health restrictions, proper procedures for use, and time limitations.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

11. Consumption of food and beverages (other than water) is prohibited inside all saunas.
12. Children under the age of 16 are not authorized to use saunas unless accompanied by a parent or legal guardian.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

SECTION VII. HABITABILITY AND SANITATION AFLOAT

2-46. Introduction

1. A habitable and healthful environment must prevail in living and berthing spaces afloat to maintain the efficiency of Navy and Marine Corps personnel. To this end, construction plans for ships are under constant review to ensure that the latest developments in human factors engineering are incorporated into facility or ship design.
2. Major factors which pertain to living, recreation, and berthing afloat include: floor area, ventilation, heating, sanitary fixtures, water supply, lighting, and color.
3. Current manuals and publications must be consulted for specific data on the above requirements and allowances. However, it must be realized due to demands for combat effectiveness, minimum standards for sanitary facilities are not always attainable. In these circumstances, COs must strive to achieve, within practicable limits, the minimum standards necessary to optimize sanitation.
4. The shipboard habitability program, procedures, category standards, requirements, and responsibility are outlined in reference (x) and Naval Sea Systems Command directives.
5. Ventilation for surface ships requires minimum replenishment with outside air at the rate of five cubic feet per minute per occupant. Reference (y), concerning heat stress, is applicable. Air conditioning of administrative spaces is a design goal which must be considered on an individual basis.
6. Noise standards in administrative spaces are such that direct speech communication must be understood with minimum error and without need for repetition.
7. General specifications for U.S. Navy ships require lighting fixtures to be arranged to provide uniform illumination so that the ratio of maximum foot candles under a lighting fixture to the minimum foot candles between it and the nearest adjacent fixture is not greater than two to one.
8. Administrative spaces afloat must be kept clean with no evidence of insects and rodents. Afloat, insect and rodent control is a Medical Department responsibility.

2-47. Construction Standards. Berthing compartment construction or modification aboard ship must be consistent with the standards established in general specifications for U.S. Navy ships.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

2-48. Berthing Aboard Ships and Barges

1. The executive officer, medical officer or Medical Department representative, the officer of the deck, junior officer of the deck, chief master at arms, division officer, and division chief petty officers must make routine inspections of the sanitary condition of toilets, lavatories, and berthing spaces.
2. Berthing spaces must be clean at all times, well ventilated, and well illuminated. Head to foot sleeping arrangements for occupants of adjacent beds are recommended to reduce the potential of airborne disease transmission unless privacy curtains are installed at each bunk.
3. Except for instances of operational necessity, hot bunking is prohibited. The use of polyurethane pillows aboard ship is prohibited. Per reference (ac), the minimum requirements for pillows aboard ships are outlined in Federal Specification V-P-356D. Mattresses must conform to Military Specification MIL-M-18351. Mattress foam inserts must be ‘low smoke’ foam rubber per Military Specification MIL-R-20092.
4. A sufficient supply of clean bed linen must be maintained. Bedding must be changed frequently to prevent odor accumulation.
5. Water closets, urinals, lavatories, and showers must be clean and operable. Shower curtains, mats, bulkheads, and decks must be cleaned and sanitized at sufficient intervals to prevent mildew, odor, and soap accumulations. Sewage backflow through deck drains and overflowing water closets constitute extremely unsanitary conditions. If these conditions occur, the space or unit must be immediately secured until the situation is corrected and the spaces are cleaned and sanitized.

2-49. Preventive Medicine Inspections

1. Medical Department personnel with preventive medicine responsibilities must conduct inspections at least quarterly.
2. It is recommended that whenever possible Medical Department personnel conduct their inspections in conjunction with command inspections.
3. Inspection reports which identify discrepancies and offer recommendations for corrective action must be provided to responsible personnel.

2-50. Confinement Afloat

1. Medical Department personnel must report any unsanitary or unhealthy conditions, observed during daily sick call, to the CO per reference (z).

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

2. The ship's brig, if present, must be included with the quarterly habitability inspection of living spaces.

3. Cell dimensions and sanitary facilities must conform to standards promulgated by Naval Sea Systems Command. Ventilation, heating, and illumination standards must conform to those of the crew's living spaces. For detailed information concerning shipboard detention facilities, refer to the general specifications for U.S. Navy ships and reference (aa).

2-51. Barber and Beauty Shop Sanitation. Afloat, the determination as to number and type of barber facilities, including female requirements, is outlined in reference (x).

2-52. Laundry. Shipboard washing machines can utilize both fresh water or seawater connections. Per reference (ab), chapter 655, fresh and sea water connections must be made. Sea water may be used when the ship is outside the 50-fathom curve, or 25 miles from shore but never when the ship is in polluted water.

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

APPENDIX A  
REFERENCES

- (a) OPNAV M-5090.1
- (b) DoD Instruction 1015.11 of 6 October 2006
- (c) DoD Instruction 1015.12 of 30 October 1996
- (d) Public Law 105-85
- (e) DoD Instruction 1300.27 of 7 January 2016
- (f) SECNAV M-5210.1
- (g) MIL-STD-3007F, DoD Standard Practice for Unified Facilities Criteria and Unified Facilities Guide Specifications, 13 December 2006
- (h) UFC 4-721-10N, Unified Facilities Criteria, "Navy and Marine Corps Unaccompanied Housing," November 1, 2012
- (i) NAVMED P-5010
- (j) UFC 3-240-01, Unified Facilities Criteria, "Wastewater Collection," November 1, 2012
- (k) UFC 3-420-01, Unified Facilities Criteria, "Plumbing Systems," October 25, 2004
- (l) 40 CFR 243
- (m) OPNAVINST 6250.4C
- (n) CNICINST 11103.15
- (o) UFC 3-230-02, Unified Facilities Criteria, "Operations and Maintenance Water Supply Systems," July 10, 2001
- (p) BUPERSINST 1640.22
- (q) DoD Instruction 1325.07 of 11 March 2013
- (r) SECNAVINST 1640.9C
- (s) NMCPHC-TM OM 6260 (edition 12)
- (t) 21 USC §301
- (u) DoD Instruction 6060.02 of 5 August 2014
- (v) DoD Instruction 6060.4 of 23 August 2004
- (w) OPNAVINST 1700.9E
- (x) OPNAVINST 9640.1B
- (y) OPNAVINST 5100.19E
- (z) OPNAVINST 1640.9A
- (aa) OPNAVINST 1640.8A
- (ab) NSTM 028 of December 2015

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

APPENDIX B  
ACRONYMS

|           |  |
|-----------|--|
| ADA       | Americans with Disabilities Act of 1990                    |
| BUPERS    | Bureau of Naval Personnel                                  |
| CFR       | Code of Federal Regulations                                |
| CNIC      | Commander, Naval Installation Command                      |
| CO        | Commanding Officer   |
| CSA       | Canadian Standards Association                             |
| DHA       | Dihydroxyacetone   |
| DoD       | Department of Defense                                      |
| DoDI      | Department of Defense Instruction                          |
| DOEHRS    | Defense Occupational Environmental Health Readiness System |
| DON       | Department of the Navy                                     |
| EH        | Environmental Health                                       |
| EPA       | Environmental Protection Agency                            |
| ETL       | Electrical Testing Laboratories                            |
| FD&CA     | Food, Drug, and Cosmetic (Act of 1938)                     |
| FDA       | Food and Drug Administration                               |
| FH        | Family Housing   |
| IH        | Industrial Hygiene   |
| IPMP      | Integrated Pest Management Plan                            |
| MCX       | Marine Corps Exchange                                      |
| MTF       | Medical Treatment Facility                                 |
| NAVFAC    | Naval Facilities Engineering Command                       |
| NAVMED    | Navy Medicine  |
| NEX       | Navy Exchange  |
| NEXCOM    | Navy Exchange Service Command                              |
| OCONUS    | Outside Continental United States                          |
| OH        | Occupational Health  |
| OPNAV     | Office of the Chief of Naval Operations                    |
| OPNAVINST | Office of the Chief of Naval Operations Instruction        |
| OSD       | Office of the Secretary of Defense                         |
| PCS       | Permanent Change of Station                                |
| PIC       | Person in charge   |
| PMD       | Preventive Medicine Department                             |
| PPM       | Parts Per Million  |
| PPV       | Public Private Venture                                     |
| RV        | Recreational Vehicle                                       |
| SECNAV    | Secretary of the Navy                                      |
| SOP       | Standard Operating Procedure                               |
| TAD       | Temporary Additional Duty                                  |

**Chapter 2**  
**Manual of Naval Preventive Medicine**  
**Sanitation of Living Spaces and Related Service Facilities**

|      |                                  |
|------|----------------------------------|
| UCMJ | Uniform Code of Military Justice |
| UFC  | Unified Facilities Criteria      |
| UH   | Unaccompanied Housing            |
| UL   | Underwriters Laboratories        |