



INQUIRY INTO SUNBED REGULATION IN ENGLAND:

CONSULTATION SUMMARY AND FINAL RECOMMENDATIONS TO THE DEPARTMENT OF HEALTH

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This report was drafted by the secretariat of the All Party Parliamentary Group on Skin (APPGS) and approved by the Parliamentary Chair. The Group's advisory board also contributed to the scope of the inquiry (membership listed at the back of the report). The APPGS is supported by grants from the British Association of Dermatologists, the Primary Care Dermatology Society and by subscriptions from external members of the Group (this includes industry members). These funding sources support the APPGS' Secretariat, which provided administrative assistance in the preparation and publication of this report. Donations over £1500 are declared on the parliamentary register. Membership details are available via the Group's website.

As is the case with all other All Party Parliamentary Groups, the Group's activities and publications do not constitute official business of either Houses of Parliament. Group membership is voluntary and open to all parliamentarians with an interest in dermatology.

All activity is subject to the approval of the parliamentary officers of the Group (also listed at the back of this report).

EXECUTIVE SUMMARY

The passage of the 2010 Sunbed (Regulations) Act heralded an important first step towards regulation of an activity that has the potential to cause serious harm if conducted in an inappropriate manner. Through conducting this inquiry, the APPGS has responded to concerns that the current regulations in England may not be sufficient to protect people from harm.

This issue can affect people very deeply, and the APPGS urges those who reach the end of this report, to make a small extra effort and read the personal account that was presented to the Group at its 14th January oral evidence session in the Commons (available via the APPGS website).

The decision to use a sunbed is a personal choice - but a choice that should nevertheless be informed and guided according to the established relative risk of the activity. The association with skin cancer and role of sunbeds in vitamin D production are hotly contested issues and questions that this inquiry cannot hope to resolve in a single sitting.

We acknowledge that the vast majority of respondents to our inquiry believe there to be a proven link with skin cancer and we do not believe this view should be suppressed, therefore we have represented this view in this report. However, equally, the aim of the inquiry was to find a concrete set of recommendations upon which all could agree. I believe that we have now found that consensus and can confidently present our recommendations to the Department of Health.

It is my sincere hope that the Ministers will carefully consider the recommendations and the arguments put forward in this report, in the Group's oral evidence session and in the written responses to the consultation.

Regardless of one's position on sunbeds and skin cancer, I believe our proposed changes to the framework governing sunbed use would, if adopted by policy makers, improve the regulatory system for all involved.

Sir Paul Beresford MP

Chair of the All Party Parliamentary Group on Skin



BACKGROUND AND METHOD

In November 2013, the All Party Parliamentary Group on Skin (APPGS) decided to carry out a short inquiry into the effectiveness of sunbed regulations in England. This decision was largely based on requests by Group members whose concerns filtered up to the Advisory Group and consequently on to the Parliamentary Officers.

In order to refine the scope for the inquiry and to understand better the concerns raised, the APPGS secretariat, together with members of the Advisory Group, met with a number of interested organisations to discuss their impression of the current regulations in England and how they compared to regulations in the devolved nations of the UK. These organisations included:

- The Sunbed Association (TSA)
- Cancer Research UK (CRUK)
- Liverpool City Council
- The Local Government Association

An oral evidence session was then planned for the 14th January 2014 to give witnesses the chance to make their case in front of parliamentary and non-parliamentary members. Full minutes of the discussion can be found on the APPGS [website](#). Witnesses included representatives from the above organisations in addition to:

- The British Association of Dermatologists (BAD)
- The Committee on Medical Aspects of Radiation in the Environment (COMARE)
- A past user of sunbeds and cancer patient

Following the oral evidence session, a written consultation was then issued via the Group's website and member distribution list. The consultation asked interested parties a series of questions but gave them the chance to raise additional issues of concern within a 1500 word limit. The consultation closed on 7th March 2014.

FAIRLY REPRESENTING THE BREVITY OF VIEWS

Given the niche nature of the inquiry (compared to past APPGS inquiries), a lower rate of return was expected from the consultation. This was confirmed by the eight, albeit lengthy, submissions, all of which, in the interests of transparency and fairness, have been made available via the Group's website.

In some cases, participants sent additional documents to supplement their responses. Again, in the interests of fairness, it was agreed that it would be appropriate to publish only the formal 1500 word responses asked for by the Group; any additional documents can be requested by interested parties via the respective websites of those that submitted evidence – links to these organisations have been provided in Appendix D and are available on the APPGS's website. A full list of the questions asked in the consultation can be found in Appendix E.

SUMMARY OF RECOMMENDATIONS

The scope of sunbed regulations in England should be extended to include:

- Compliance testing for radiant exposure(dose) and irradiance limits
- A ban on unstaffed tanning facilities
- Appropriate screening of all customers skin type
- Provision of balanced health information
- Provision of safety goggles

The Government should also:

- Consider revising the framework governing local authority licensing activity to allow individual councils to licence tanning facility operators if there is sufficient local demand to do so. At the very least local authorities should be able to register sunbed operators in the same way that tattoo and piercing parlours are currently registered.

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EXPLANATION OF RECOMMENDATIONS

Compliance testing for radiant exposure (dose) and irradiance limits

'Tighter regulation and checks for radiant exposure(dose) and irradiance limits are now urgently required.' [Public Health England, written response]

The question as to whether there is a need for compliance testing in England was included in the consultation issued by the APPGS. The topic was also extensively discussed in the oral evidence session.

The British and European standard was introduced in 2009 and sets out a maximum level of UV radiation to be emitted by sunbeds used for cosmetic purposes. In 2009, the Government's own COMARE report called for full implementation of EU requirements that all sunbeds be subjected to a maximum UV output (no more than 0.3 Watts per metre squared (W/m²).

In 2012, Newcastle Council tested the UV radiation levels of 61 appliances in 25 businesses across Newcastle. Only 16% were found to be compliant with British and EU minimum standards.¹ North East Lincolnshire Council² and Lancashire Council³ also carried out recent inspections – the result was the same – the vast majority of sunbeds failed to comply with accepted safety standards.

In January 2013, the University of Dundee published the results of a study (funded by CRUK) that looked at 400 sunbeds and the strength of the UV lamps being used in the UK. The study found that 9 out of 10 sunbeds did not comply with British or EU standards. The average strength of radiation was almost twice that of the recommended limit.⁴ A Press Release issued in January 2014 by Derbyshire County Council also stated that recent spot checks had found 6 out of 10 sunbeds to be over the 0.3 W/m² limit.⁵

At the 14th January oral evidence session, the TSA said that there had been an inconsistent approach by local authorities since the introduction of the European and British irradiance standards. Essex and Hertfordshire County Councils had successfully implemented a system of compliance testing and the TSA had run courses to help train environmental health officers but the approach across local authorities remained inconsistent. Local Authorities had the tools to implement compliance testing and it was the responsibility of Government to encourage them to do so. "Any further procrastination" could only be interpreted in the TSA's eyes as "deliberate indifference".

However, Public Health England stated in its written response that measurement of radiant exposure, or the total 'dose' received, was of greater import than that of irradiance (the 0.3 Watts per metre squared (W/m²). The reasoning was based on its own research, which found that the radiant exposure received by sunbed users could be higher for so-called compliant sunbeds than for those that emit higher irradiances due to the time of exposure. CRUK also concluded in their written response that sunbeds that met the British and European standards could still cause harm.

The APPGS therefore recommends that the Department of Health undertake a study into the appropriate method of measuring total dosage and irradiance. The agreed method of measurement should then be incorporated into the current list of investigative duties listed in the 2010 Sunbed (Regulations) Act.

Whilst we would expect the responsibility of compliance testing to fall under the remit of environmental health officers, we would concur with the view of Public Health England that appropriate equipment should be used to assess the emissions: the use of handheld instruments that require a person to be in the sunbed/vertical cabin to undertake the measurements are not considered acceptable.

A ban on unstaffed tanning facilities

'Government should introduce the regulations as soon as possible. Currently England has the weakest regulatory regime for protecting children and adult sunbed users. England is the only UK nation not to require supervision of sunbed use and the provision and display of health information.' [Cancer Research UK, written response]

'We would also like to see a total ban on unmanned sunbed establishments to minimise mis-use by under 18's/those over dosing/binging on sunbeds' [Karen Clifford Skin Cancer Charity written response]

The consensus opinion amongst the respondents to the consultation was that there should be an outright ban on unstaffed sunbed tanning facilities. Interestingly, this was not included as a consultation question, yet several respondents argued passionately for it.

We note that TSA requires its members to have trained staff present at all times. However a common concern expressed at the oral evidence session was that the trade body only represents around 20% of the industry and therefore it was difficult to ascertain staffing levels in the remaining 80% of operators.

The APPGS is concerned that whilst both Wales and Scotland operate bans on unstaffed sunbed tanning facilities, the English regulations do not provide for this. We recommend that the Department of Health urgently looks into introducing similar measures in England.

Appropriate screening of all customers' skin type

Appropriate screening of customers skin type is an essential determinant of risk. If staff are not trained to recognise skin types or advise customers on how, for example, very fair sensitive skin or the presence of an existing skin condition, might disqualify them from using a sunbed, the potential for harm is serious.

Liverpool City Council stated at the oral evidence session that it had tabled a resolution motioning support for an extension of current legislation on sunbeds. This included a provision that users were offered safety goggles that they were presented with information on the safe use of sunbeds, and that staff should be fully trained to recognise and advise on different skin types. The only way to do this was to legislate (these provisions were not within its power as a Council to introduce).

The TSA also said that the sign of a good tanning salon was one where the staff were trained to recognise the appropriate time and intensity required, according to skin type.

Whilst there are undoubtedly cases of good practice in existence, there was a concern amongst some of the participants in the inquiry that screening of customer skin types did not occur routinely. **Recognising the potential for harm under the current system, the APPGS recommends that the English sunbed regulations be extended to include the requirement that salon staff are fully trained in the different skin types and their associated risk levels when exposed to UV light.** Thought should be given to a system of certification to ensure compliance.

Provision of balanced health information

A survey by Cancer Research found that four out of ten sunbed users were never given information on skin type or on potential harm. **We would concur with Cancer Research UK that this suggests a need to mandate the provision of health information in commercial sunbed premises.** Indeed, the 2010 Sunbed (Regulations) Act already contains a provision allowing for future secondary legislation on health information:

Power to require information to be provided to sunbed users

(1) Regulations may make provision requiring any person who carries on a sunbed business—

- (a) to provide, in prescribed circumstances and in a prescribed manner, prescribed health information to persons who are using or may seek to use a sunbed;
- (b) to display prescribed health information in a prescribed manner and in a prescribed form.

(2) In subsection (1) "health information" means information about the health risks associated with the use of sunbeds.

Source: Sunbed (Regulation) Act 2010

'We consider the steps taken by the devolved nations to be appropriate... BASC suggest such health information also be mandatory for all commercial and private equipment use.' [British Association of Skin Camouflage written response]

'Sunbed premises in all home nations should be required to display an agreed health warning.' [Skin Conditions Campaign Scotland]

Respondents to the consultation and participants at the oral evidence session unanimously agreed that the provision of health information should be a mandatory requirement. Concern was expressed however by TSA who asked that such information be balanced and take into account the fact that sunbeds stimulate vitamin D production. As with the issue of skin cancer, opinions on vitamin D and sunbeds are sharply divided. In the interests of delivering a consensual set of recommendations to the Department of Health, **the APPGS is advocating the provision of health information as a mandatory requirement.** Precise detail as to the content of this information would be for the Department to decide. However it should be noted that precedents exist in the devolved nations, providing policy makers in England with useful reference points. An example of the mandated health information used in Wales has been included in Appendix F.

'There is established wording for the health information to be provided and displayed in sunbed businesses in Scotland, Wales and Northern Ireland. We would recommend using this wording as it is already been in place in three similar jurisdictions and provides evidence based information' [CRUK written response]

Provision of safety goggles

'Protective eyewear does not appear to be compulsory; this must be compulsory for customers wanting to use sunbeds.' [Karen Clifford Skin Cancer Charity written response]

In its 13th report, COMARE recommended that staff training, the use of suitable eye protection and the provision of appropriate information should be mandatory. This emerged as a major theme in the Group's preliminary discussions prior to and during the inquiry.

The Welsh regulations require users of sunbeds to use protective eyewear. The 2010 Sunbed (Regulations) Act already contains a provision allowing for future secondary legislation on protective eyewear:

Regulations may make provision requiring any person who carries on a sunbed business—

(a) to secure that protective eyewear meeting prescribed requirements is made available in connection with any use of a sunbed to which the business relates, and

(b) to secure as far as reasonably practicable that persons who use a sunbed to which the business relates wear protective eyewear meeting those requirements.

Source: Sunbed (Regulation) Act 2010

The APPGS urges the Government to initiate secondary legislation on protective eyewear in accordance with the provisions already set out for future use in the 2010 Sunbed (Regulations) Act.

It is of the utmost importance, however, that any additional regulations in this respect are practical and enforceable.

'We feel it is important that users of sunbeds should wear appropriate protective eyewear. However, verification of the effectiveness of such eyewear is challenging – especially if this is required of the sunbed service providers. PHE has proposed that a marking scheme for eyewear is introduced in the next edition of the sunbed product standard.' [Public Health England written response]

We agree with Public Health England and urge the Government to consider the challenge of verification when examining the case for an extension of the regulations pertaining to eyewear. Thought should be given to the possibility of mandating the type of eyewear used – i.e. those verified by a marking scheme.

THE ASSOCIATION BETWEEN SUNBEDS AND SKIN CANCER

The inquiry found that, of all the topics raised, the link between sunbeds and skin cancer was the most hotly contested subject of all. TSA's position is that there is no proven link between sunbeds and skin cancer:

'There seems to be an accepted assumption that using a sunbed will significantly increase your risk of developing skin cancer. An assumption fuelled by rhetoric and a series of statistics that seem to use the same data source. Independent scientific analysis of this data source irrefutably clarifies that any increased risk is associated with medical use UV equipment - at a staggering 96% - and to a much lesser degree home use equipment but NOT with professional sunbeds.' [TSA written response]

The majority of the other respondents believe that there is a proven link:

'Sunbeds have been shown to increase the risk of malignant melanoma (Boniol et al, 2012), basal cell carcinoma and squamous cell carcinoma (Wehner et al, 2012). Use in childhood and young adulthood particularly increases the risk of skin cancer (Boniol et al, 2012, Autier et al, 2008). In 2009 the International Agency for Research on Cancer (IARC) classified sunbeds as Class 1 carcinogenic to humans (Ghissassi et al, 2009).' [Public Health England written response]

OTHER ISSUES RAISED

LICENSING

According to Public Health England, in a 2009 survey of Local Authorities undertaken by Bowtell and colleagues (Bowtell et al, 2010), the majority of local authorities said they would welcome the introduction of the mandatory licensing of sunbed outlets. The view that licensing should be mandatory was shared by a number of respondents.

In the oral evidence session, the TSA stated that it did not object to the principle of licensing as long as it was appropriate and justifiable. Meanwhile, the view of Liverpool City Council was that councils simply could not track the number of sunbeds in use. They were powerless to institute a registry system, never mind a licensing system, and this hindered their ability to monitor compliance with the law. They said that they had contacted over 100 local authorities to ask for information on their individual areas and they reported having had the same kinds of problems as Liverpool (i.e. an inability to monitor the number of sunbeds in existence).

CRUK stated in their written response that:

'Licensing of sunbed businesses has been shown to be practical as it is currently enforced in London, and some other parts of the UK. Licensing conditions for sunbed businesses should complement the regulations provided for within the Sunbed (Regulations) Act. Government should enable the licensing of sunbed businesses.'

'Under the current rules only certain authorities have the power to license sunbeds. While no systematic assessment has been undertaken to establish whether licensing leads to greater adherence and better outcomes, licensing enables local authorities to identify and maintain records of sunbed businesses. This not only would help enforcement of the law but enable the local authority to target advice and support to sunbed businesses to ensure that they follow best practice. Licensing would also offer the local authorities with more tools to tackle those not abiding by the rules. Currently the law only allows local authorities to initiate criminal proceedings that would result in a fine after providing warnings. This is a high cost and long process. But licensing powers gives a local authority more flexibility to deal with poor practice.' [Cancer Research UK]

The APPGS is aware that the Local Government Association recently proposed that Government reviews the system for local authority licensing across all departments to streamline the process and reduce bureaucracy. Its February 2014 report, *'Open for business: rewiring licensing'* draws attention to the vast number of activities local authorities are expected to license and the equally large number of parliamentary acts setting out the regulations for each individual licence. **The APPGS supports measures designed to simplify the licencing duties of local authorities and measures that may make it easier for local authorities to license sunbeds on a voluntary, 'straight off the shelf' basis with agreed criteria.**

Unfortunately, the primary legislation that currently enables the licencing of commercial tanning salons in some local authorities is generally limited and mainly focuses on sanitation and hygiene.⁶ Even if licensing reform was achieved and individual councils were able to license sunbed operators, in order to avoid variation in criteria, consideration should be given to standardising the requirements. The British Association of Dermatologists recommends the following (suggested) standards for retaining a licence⁷:

- *The restriction of sunbeds for under-18s*
- *Full-time supervision of sunbed facilities by trained staff*
- *Compulsory display and provision of customer information regarding the health risks*
- *A limit on the number of sessions available for adults to prevent over-exposure*
- *No coin-operated machines (unstaffed facilities)*
- *Evidence that the equipment has been properly maintained and complies with British safety standards.*

CONTINUED USE OF SUNBEDS BY UNDER 18s

Under the 2010 Sunbed (Regulation) Act, local authorities are supposed to appoint an inspection officer who would in effect be responsible for enforcing the provisions of the Act at a local level. These can be newly appointed individuals or existing environmental health officers. They can enter premises on a reactive basis (i.e. following a complaint) or on a proactive basis (e.g. compliance checks, awareness checks as part of a risk-based approach). They do not need to give prior notice of their visit to business owners. They can also employ a 'mystery shopper' tactic where a designated individual under the age of 18 is sent in to the premises to test adherence to the law.

In the latter half of 2011, West Yorkshire Trading Standards, together with the Health Protection Agency, employed a mystery shopper tactic to test adherence to the law amongst sunbed tanning salons. The overall successful sales rate was 44%, which compares unfavourably with other age restricted items such as tobacco and alcohol where traditionally 15% of retailers will sell cigarettes, or tobacco to children.⁸

The TSA disputes the suggestion that this is a nationwide problem but the APPGS has been made aware that since the 2010 Act came into force, similar instances of under-18s accessing sunbeds have been uncovered, at least in Halton⁹, Bexley¹⁰, Birmingham¹¹, Bristol¹², Preston¹³, Fylde¹⁴, Wigan¹⁵ and four locations in Surrey.¹⁶

Public Health England also reported to us that it had been commissioned by CRUK to carry out the first major investigation into underage sunbed since the introduction of the 2010 regulations. PHE found that, whilst there had been an overall reduction in the use of sunbeds by under-18s, a worrying number of children were still using sunbeds, and moreover, being burnt.

'In fact, half of all children who had ever used a sunbed (52.8%) reported signs or symptoms of burning. 100% of those who most frequently used coin/token operated salons reported burning, and 36% of those who used sunbeds in the home reported burning. Finally, the provision of supervision and advice in many commercial outlets remains inadequate. Over half (53.7%) of children who used a sunbed were never asked to show ID to prove their age and four out of ten were never given information on skin type (40.0%) or on potential harm.' [Public Health England written response].

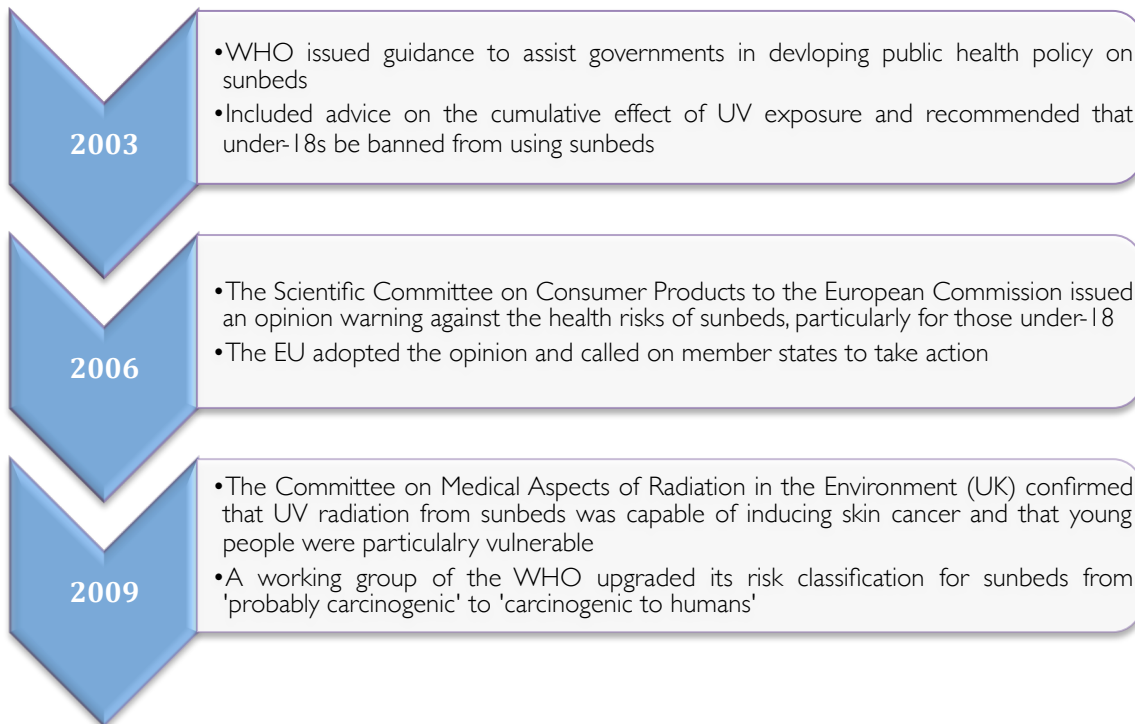
END

APPENDIX A: THE SUNBED (REGULATION) ACT 2010

BACKGROUND

The Sunbed (Regulation) Act 2010 was introduced by then Labour MP, Julie Morgan, in December 2009. Sian James, another Labour MP, worked closely with Mrs Morgan to deliver the Bill through the various parliamentary stages. The latter MP had campaigned for many years on the issue.

There had already been significant movement both internationally and domestically on the issue of sunbeds. A rough timeline of key events is included below.



The Act introduced by Julie Morgan essentially placed a duty on sunbed businesses to prevent the use of sunbeds by under-18s. Local authorities are responsible for the enforcement of this duty. The Bill also **gave Ministers powers to make regulations imposing further conditions on commercial sunbed use.**

Prior to the Sunbed (Regulation) Act, there was no legislation in England or Wales that provided for the regulation of sunbeds.

DOMESTIC COMPARISONS

In Scotland the Public Health (Scotland) Act 2008 regulates the provision of sunbeds (Part 8) through:

- Prohibition on allowing use of sunbeds by persons under 18.
- Prohibition on the sale or hire of sunbeds to persons under 18.
- Prohibition on allowing unsupervised use of sunbeds.
- A duty on operators to provide information to sunbed users.
- A duty on operators to display an information notice.¹⁷

In Wales further regulations were introduced that went beyond the 2010 Sunbed (Regulations) Act. As a result, unsupervised sunbeds have been banned and staff must also display posters featuring prescribed health information and hand out fact sheets. They are not allowed to promote sunbeds as "beneficial to health". In addition the regulations stipulate that protective eyewear must be provided and worn.¹⁸ The first successful prosecution under the regulations was made in April 2013.¹⁹

INTERNATIONAL COMPARISONS

Several European countries have legislation or guidance in place to regulate the sale and use of sunbeds. Belgium, Finland, France, Norway, Portugal, Spain and Sweden all operate rules that essentially revolve around the following aspects:

- Technical requirements for appliances
- Limits on spectral distribution and irradiance
- Limits on dose and frequency of exposure
- Operational requirements
- Information and advice for consumers
- Staff training.
- Equipment maintenance
- Supervision, inspections and sanctions

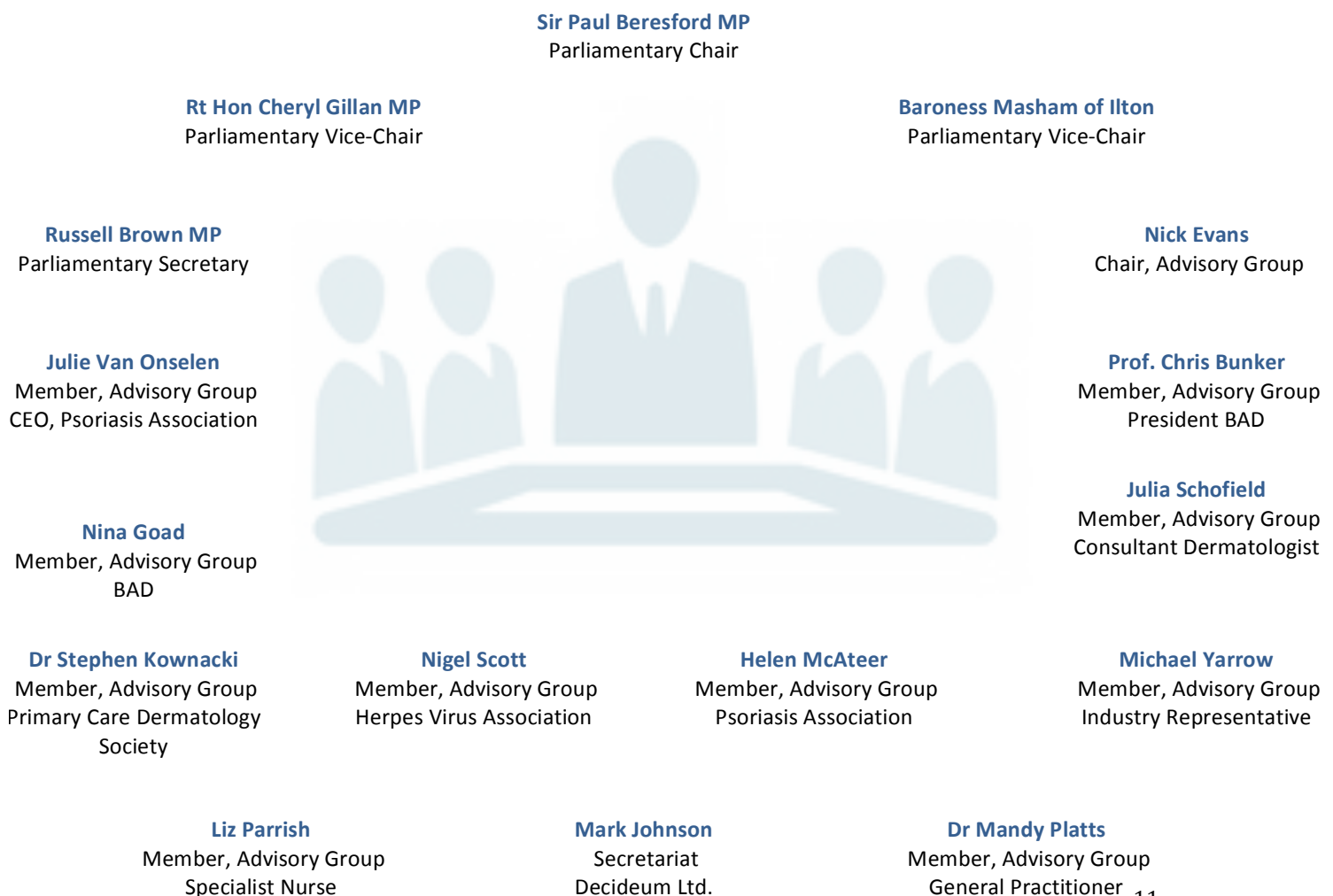
The UK Government's, Committee on Medical Aspects of Radiation in the Environment (COMARE) reported in 2009 that poor compliance is typically found against a variety of control measures where strict legislative controls do not exist.²⁰

In France: 'there is a mandatory requirement for operators to declare appliances to the regional health authorities, which triggers an initial inspection. Initial inspections and follow ups every second year are carried out by certified organisations, with annual reports submitted to the health authorities. There are specific requirements for approved training of operators, including refresher courses every five years. There are requirements for the display of consumer information. Automated equipment is prohibited, as is use of sunbeds by the under 18s.'

Interestingly, business compliance levels in France are reported to be at 80% (2004).²¹

Brazil has gone one step further than Europe and introduced a nationwide ban on the public use of sunbeds.²² Australia is in the process of instating a similar ban.

APPENDIX B: APPGS OFFICERS AND ADVISORY GROUP MEMBERS



APPENDIX C: WITNESSES THAT PROVIDED ORAL EVIDENCE

- CLLR. ROY GLADDEN (LIVERPOOL CITY COUNCIL)
- MEGAN WORRALL (LIVERPOOL RESIDENT AND PAST USER OF SUNBEDS)
- PROF. ALEX ELLIOTT (COMARE)
- PROF. HARRY MOSELEY (CONSULTANT MEDICAL PHYSICIST AT UNIVERSITY OF DUNDEE AND ADVISER TO BRITISH ASSOCIATION OF DERMATOLOGISTS)
- EMMA GREENWOOD (CANCER RESEARCH UK)
- GARY LIPMAN (THE SUNBED ASSOCIATION)

APPENDIX D: LINKS TO PARTICIPATING ORGANISATIONS

BRITISH ASSOCIATION OF DERMATOLOGISTS (BAD) - [HTTP://WWW.BAD.ORG.UK/SITE/1/DEFAULT.ASPX](http://www.bad.org.uk/site/1/default.aspx)

BRITISH ASSOCIATION OF SKIN CAMOUFLAGE (BASC) - [HTTP://WWW.SKIN-CAMOUFLAGE.NET/](http://www.skin-camouflage.net/)

CANCER RESEARCH UK - [HTTP://WWW.CANCERRESEARCHUK.ORG/](http://www.cancerresearchuk.org/)

COMMITTEE ON MEDICAL ASPECTS OF RADIATION IN THE ENVIRONMENT (COMARE) - [HTTP://WWW.COMARE.ORG.UK/](http://www.comare.org.uk/)

LIVERPOOL CITY COUNCIL - [HTTP://LIVERPOOL.GOV.UK/](http://liverpool.gov.uk/)

MELANOMA ACTION AND SUPPORT SCOTLAND - [HTTP://WWW.MASSCOT.ORG.UK/](http://www.masscot.org.uk/)

PUBLIC HEALTH ENGLAND (PHE) - [HTTPS://WWW.GOV.UK/GOVERNMENT/ORGANISATIONS/PUBLIC-HEALTH-ENGLAND](https://www.gov.uk/government/organisations/public-health-england)

SKCIN (KAREN CLIFFORD SKIN CANCER CHARITY) - [HTTP://WWW.SKCIN.ORG/](http://www.skcin.org/)

SKIN CONDITIONS CAMPAIGN SCOTLAND - [HTTP://SKINCONDITIONSCAMPAIGNSCOTLAND.ORG/](http://skinconditionscampaignscotland.org/)

THE SUNBED ASSOCIATION (TSA) - [HTTP://SUNBEDASSOCIATION.ORG.UK/](http://sunbedassociation.org.uk/)


APPENDIX E: QUESTIONS ASKED IN THE CONSULTATION

- THE EFFECTIVENESS OF THE 2010 SUNBED (REGULATIONS) ACT AND THE BAN ON UNDER-18s;
- THE LINK BETWEEN SUNBEDS AND SKIN CANCERS (MELANOMA OR NON-MELANOMA) – WEIGHING UP THE EVIDENCE BOTH FOR AND AGAINST;
- THE EFFECTIVENESS AND SCOPE OF THE REGULATIONS IN THE DEVOLVED NATIONS - IS THERE A NEED FOR ENGLAND TO INTRODUCE FURTHER REGULATIONS?;
- HEALTH INFORMATION – SHOULD THIS BE A MANDATORY REQUIREMENT FOR PRESENTATION TO USERS? IF SO, THEN WHAT IS THE APPROPRIATE BALANCE OF INFORMATION?
- COMPLIANCE TESTING OF SUNBED OPERATORS (TO EUROPEAN IRRADIANCE STANDARDS);
- INDUSTRY SELF-REGULATION – IS IT EFFECTIVE? COULD IT BE IMPROVED IN ANY WAY? SHOULD MEMBERSHIP OF THE SUNBED ASSOCIATION BE COMPULSORY?
- LICENCING - IS IT NECESSARY? SHOULD LOCAL AUTHORITIES BE ABLE TO LICENCE SUNBED OPERATORS? IS IT PRACTICAL TO INTRODUCE LICENCING?
- INTERNATIONAL COMPARISONS – ARE THERE ANY BEST PRACTICE EXAMPLES?

APENDIX F: EXAMPLE OF WELSH PRESCRIBED HEALTH INFORMATION

SOURCE: SUNBED (REGULATIONS ACT) 2010, WELSH REGULATIONS 2011

HEALTH INFORMATION FOR SUNBED USERS



Llywodraeth Cymru
Welsh Government

www.cymru.gov.uk

Using sunbeds can harm your health in the long term. They have been linked to:-

- a higher risk of skin cancer – people who use sunbeds for the first time before the age of 35 increase their risk of developing malignant melanoma (the most serious form of skin cancer) by 75 per cent;
- eye damage including a higher risk of cataracts – if appropriate eye protection is not worn; and
- premature skin ageing which means that your skin becomes coarse, leathery and wrinkled at a younger age.

The health risks of using a sunbed are greater than any possible benefits they might provide in helping the body create Vitamin D.


There are also short term health effects:-

- sunburnt skin, which may become red, painful and blister;
- skin dryness;
- an itchy "heat" rash; and
- itchy eyes or conjunctivitis if appropriate eye protection is not worn.

You should not use a sunbed if you:

- have had skin cancer in the past;
- have a family history of skin cancer;
- have fair or sensitive skin;
- burn easily in sunlight;
- have a large number of freckles and/or red hair;
- have a large number of moles;
- are using medication or creams that make your skin more sensitive to sunlight;
- have a medical condition that is made worse by sunlight;
- have an immune system which is weakened;
- fail to protect your eyes – never use a sunbed without wearing appropriate eye protection; or
- are under 18 (and no person under 18 may use a sunbed on these premises).

Some women find their skin is more sensitive during pregnancy. This could mean that your skin may be more likely to burn in the sun or if you use a sunbed.



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- ¹ <http://tyneandwear.sky.com/news/article/45550/trading-standards-newcastle-sunbeds-fail-uv-safety-tests>
 - ² <https://www.nelincs.gov.uk/news/2013/may/sunbed-survey-reveals-safety-limit-breaches/>
 - ³ http://www3.lancashire.gov.uk/corporate/news/press_releases/y/m/release.asp?id=201308&r=PR13/0381
 - ⁴ <http://www.dundee.ac.uk/pressreleases/2013/january13/sunbed.htm>
 - ⁵ http://www.derbyshire.gov.uk/council/news_events/news-updates/2014/january/most_sunbeds_fail_safety_test_in_survey.asp
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