

Assessment Strategy for Beauty Therapy NVQs and SVQs

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FOREWORD

We have the best standards in hair, beauty and body art in the world. It is our vision that anyone achieving an NVQ/SVQ in hair or beauty can take up employment in any country without having to take that country's national qualification.

Yet standards are only part of the equation of global acceptance of UK hair and beauty qualifications. Assessment is the key. Without some valid measure of achievement, the world's best standards are no more than words on paper.

This Assessment Strategy is based on solid research with the beauty therapy industries, trainees, students, assessment centres and the inspectors of government funded programmes. It has high levels of support from all these stakeholders and has been agreed with all Awarding Bodies. It will continue to strengthen assessment and verification of NVQs and SVQs in beauty therapy. The aim is to standardise the assessment approach without losing the independence of each Awarding Body. This will lead to greater consistency within and between Awarding Bodies.

Continuing professional development is an important part of the Assessment Strategy because in industries where fashions, products, techniques and equipment change so rapidly, it is essential that everyone keeps their skills and knowledge up to date to meet client needs. This is even truer for assessors and verifiers because they are the gatekeepers of standards for the next generation of beauty therapists.

We sincerely hope that the good practice set in the Assessment Strategy will be applied not just to NVQs and SVQs but to all qualifications within beauty therapy.



Alan Goldsbro
Chief Executive
Habia

ACKNOWLEDGEMENTS

Habia wishes to acknowledge the many people who have contributed to the development of this Assessment Strategy.

The level of dedication to the hair, beauty and body art industries is highly commendable.

Our particular thanks go to the expert working groups, dozens of training providers, employers and candidates and the staff of our Awarding Bodies who gave freely of their time to review and comment upon the various drafts of this document during the course of its development. Your feedback has been extremely important not only in shaping the final version of this document but also in providing Habia with information to assist our future work.

Our thanks also go out to all those who so willingly gave either their own time and effort or that of their staff to serve on our Projects and Standards Committee concerned with steering this project.

The endeavours of Habia staff and our external consultant deserve a special mention and our sincere thanks.

STATEMENT OF SUPPORT

This strategy has been developed as part of Habia's commitment to ensuring continuous improvement in training provision, expertise and the general quality of beauty therapy services throughout the United Kingdom.

With effective implementation by our Awarding Bodies, it will support the continued availability of high quality National Vocational Qualifications (NVQs) and Scottish Vocational Qualifications (SVQs) that are fit for purpose and command wide public and employer confidence.

This strategy puts in place requirements which ensure the rigour and consistency of assessment procedures in addition to ensuring that all those involved in assessment processes remain highly qualified, experienced and technically up-to-date.

We have, therefore, no hesitation in recommending this strategy and the contribution it makes towards achieving our wider organisation goals for the beauty therapy sector and our responsibilities as a Standards Setting Body.



Alan Goldsbro
Chief Executive Officer
Habia

PART 2

MANDATORY REQUIREMENTS

Key Mandatory Components of Our Assessment Strategy

Part 2 sets out the Key Mandatory components of our Assessment Strategy for NVQs and SVQs, which are:

- Performance in the workplace, the use of realistic working environments, requirements for a realistic working environment and the use of specific simulated activities
- Habia's approach to External Quality Control of Assessment
- The requirements for the occupational expertise of External Verifiers, Internal Verifiers and Assessors

Each of the above is expanded in more detail below.

Performance in the Workplace and Use of Simulations

The Beauty Therapy NVQs/SVQs may be assessed in the workplace and/or an approved 'realistic working environment' meeting the criteria set out in Appendix 1A .

Habia wishes to make clear its stance on the use of simulated activities and a realistic working environment. The key criterion for allowing the use of simulated activities in the assessment of performance is the rarity of the opportunity to undertake the activities required by the standard of competence. Examples of these activities include:

- dealing with fire and other emergencies
- dealing with health & safety activities outside or peripheral to normal practices
- client/customer relationships
- contra-indications/contra-actions

Therefore, a simulated activity is viewed as 'any structured assessment exercise involving a specific task which reproduces real life situations'. In this it is distinct and separate from the use of an approved realistic working environment as the latter allows the candidate to perform an entire occupational role over an extended period of time, in an environment which as closely as possible replicates the working environment, and involves real work on real clients drawn from members of the public.

Habia considers evidence generated in a realistic working environment meeting the criteria set out in Appendix 1A, as acceptable for the purposes of Beauty Therapy NVQ/SVQ assessment. The use of realistic working environments will be necessary to promote access to assessment for some Beauty Therapy candidates at present.

Simulated activities may only be used for Habia developed units where indicated in Appendix 1B. An additional, specific dispensation has been given to schemes operating in HM Prison Service whereby use of replica money is allowed within Unit G4 (Fulfil salon reception duties) to prevent barriers to access caused by prison rules on cash usage.

In addition to this, internal telephone systems can be used to cover Range 2 in particular by telephone. However, this cannot be done as a simulated activity and cannot be used within a role play situation. The internal telephone system must be a permanent fixture and not set up for role play activities.

The Institute of Customer Service has given a special dispensation for the 'imported' Customer Service unit listed below to be assessed in a Realistic Working Environment (RWE) conforming to Habia's criteria specified in Appendix 1A:

Unit 7, Level 2: Promote additional products or services to customers (unit G6)

This dispensation in no way implies that the Customer Service NVQ/SVQ itself can be achieved in an RWE. The dispensation only applies to the imported unit above.

As a matter of policy, Habia will work with industry experts and its Awarding Bodies to develop basic Evidence Requirements for use where Beauty Therapy National Occupational Standards are used for NVQ/SVQ purposes.

Approach to Achieving Greater External Quality Control of Assessment

Our strategy to address the above is as follows:

An overall 100% achievement rate for the entire underpinning knowledge and understanding specification in the National Occupational Standards should be required of each candidate.

Habia requires all Awarding Bodies to develop externally set mandatory question papers to cover critical areas of essential knowledge and understanding within specified units for the Beauty Therapy NVQs/SVQs. These units and the critical areas of knowledge have been detailed in Appendix 1C for Beauty Therapy units.

For the Beauty Therapy Level 1 NVQ/SVQ, Habia requires all Awarding Bodies to set mandatory question papers to cover the critical areas of essential knowledge and understanding as specified in Appendix 1C. These papers should be designed so they may be administered by written or oral means at the discretion of the assessor.

All mandatory question papers should be internally marked by assessors using answer and/or marking guides supplied by the Awarding Body. A minimum of two differently designed sets of questions and associated answer guides should be provided for all mandatory, designated areas of questioning to ensure candidates are not disadvantaged by only having one design format and alternative papers are available for use across the life of the award.

For externally set mandatory question papers, a 70% achievement rate must be attained under formal, 'closed book' assessment conditions to avoid the necessity of a resit of the complete paper. There must be a two week gap between resits. For those achieving 70% or more, questions answered incorrectly may be reassessed by a variety of means (e.g. oral questioning, a repeat of the written questions, assignments) to ensure 100% achievement on the mandatory areas of questioning for the units being undertaken.

All question and answer sheets must be collected from candidates and securely retained by the centre for internal and external verification purposes. It is expected suitable systems will be in place to prevent copying or plagiarism.

It is anticipated that Awarding Bodies will make suitable alternative arrangements for those with identified special needs which may preclude them from undertaking written assessments (e.g. candidates who are identified as dyslexic).

It is expected Awarding Bodies will ensure:

- the design of testing does not discriminate between those taking full qualifications and individual units
- that assessment instruments do not directly or indirectly discriminate against any particular group and ensure equality of opportunity appropriate to employment in the beauty therapy industry
- that candidates are not expected to repeat questions on knowledge 'common' to several units
- arrangements are in place for testing to be carried out at a time to meet individual needs and rate of progress

- where necessary, suitable arrangements are in place for reassessment of those areas where candidates have been shown to be 'not yet competent'.
- suitable arrangements are put in place for those with disabilities affecting their reading and writing capabilities.

Assessment of Essential Knowledge and Understanding Items Outside the Specification for Externally Set Mandatory Question Papers

As a 100% achievement rate is required for the entire Knowledge and Understanding specification for each unit for each candidate, other means such as oral questioning and additional portfolio evidence must be used to demonstrate that all remaining items of underpinning knowledge and understanding have been assessed and achieved satisfactorily.

Habia also requires that the Nationally Agreed Maximum Service Times quoted in Appendix 1F are used for assessment purposes for the particular, critical services listed for each level of Beauty Therapy NVQ/SVQ.

Requirements for the Occupational Expertise of External Verifiers, Internal Verifiers and Assessors

Habia requires that:

All assessors, internal verifiers and external verifiers hold assessment and verification qualifications as specified in current guidance produced by the Regulatory Bodies.

In addition, Habia is required by the Regulatory Bodies to specify the appropriate occupational expertise requirements. These requirements have been detailed in Appendix 1D for Beauty Therapy. All Habia Awarding Bodies must comply with these requirements when recruiting and selecting external verifiers and implement the requirements within their current external verifier teams. All Habia Awarding Bodies must ensure their Approved Centres comply with these requirements when recruiting and selecting internal verifiers and assessors and implement the requirements with their current internal verifiers and assessors.

It is expected that as part of Awarding Body internal quality assurance processes, the qualifications and occupational expertise requirements of all involved in the assessment and verification process will be regularly monitored and recorded.

Because of the everchanging nature of the industries Habia represents, it is essential that assessors and verifiers keep their technical skills up-to-date and at an occupational level appropriate to the NVQs/SVQs they are assessing or verifying. All assessors and verifiers must be able to demonstrate to their Awarding Body that they engage in appropriate continuing professional development (CPD) activities.

To ensure consistency of approach on this matter across all Awarding Bodies delivering Habia NVQs/SVQs, it is a requirement that all Awarding Bodies implement Habia's minimum requirements for CPD activities and put systems in place to monitor, record and ensure assessor and verifier achievement against these requirements. These appear in Appendix 1E for Beauty Therapy.

APPENDICES

Requirements Relating to the Beauty Therapy NVQs/SVQs

Appendix 1A	Beauty Therapy Realistic Working Environment Requirements
Appendix 1B	Summary of Where Simulated Activities May be Used for Habia Developed Units
Appendix 1C	Areas within the Beauty Therapy National Occupational Standards for which Mandatory Question Papers must be Developed
Appendix 1D	Occupational Expertise Requirements for Beauty Therapy Assessors and Verifiers
Appendix 1E	Requirements for Continuing Professional Development for Assessor and Verifiers of Beauty Therapy Technical Units
Appendix 1F	Nationally Agreed Maximum Service Times for Beauty Therapy NVQ/SVQ Assessment Purposes

APPENDIX 1A

BEAUTY THERAPY REALISTIC WORKING ENVIRONMENT REQUIREMENTS

As the Standards Setting Body for the hair and beauty sectors, Habia is responsible for defining what constitutes a 'Realistic Working Environment' (RWE). Habia has set down the following criteria for the assessment location. This will ensure that all candidates are being assessed against the National Occupational Standards in a realistic working environment when not in an actual, commercial workplace.

The following criteria must be included as part of centre approval and must be confirmed as being met during the first external verification visit. The criteria must then continue to be met on every subsequent visit. This will ensure that candidates are able to meet commercial needs in the workplace.

1. Assessment centres must develop realistic management procedures that incorporate a 'salon image*' and sales and marketing policy to attract the type and number of clients needed to ensure that the requirements of the National Occupational Standards can be achieved.
2. All assessments must be carried out under realistic commercial pressures and on paying clients and not other candidates within the same group. Wherever possible, clients should vary in age and ethnicity so that the requirements of the National Occupational Standards can be achieved.
3. All services that are carried out should be completed in a commercially acceptable timescale. Maximum service times for particular, critical services have been developed by Habia for each Beauty Therapy NVQ/SVQ and are detailed in Appendix 1F. These times should be used for assessment purposes.
4. Candidates must be able to achieve a realistic volume of work.
5. The space per working area conforms to health & safety legislation and commercial practice.
6. The range of services, professional products, tools, materials and equipment must be up-to-date and available for use. They must enable candidates to meet the requirements of the National Occupational Standards.
7. A reception area where clients are greeted and general enquiries and appointments can be made by telephone or in person must be available. The reception area must also include a payment facility.
8. A retail facility must be provided with products that relate to the clients' needs and the services offered.
9. The RWE must take full account of any bye-laws, legislation or local authority requirements that have been set down in relation to the type of work that is being carried out there.
10. Candidates must work in a professional manner taking into account establishment requirements such as:
 - i. appearance and dress code
 - ii. personal conduct
 - iii. hygiene
 - iv. reliability
 - v. punctuality.
11. Candidates are given workplace responsibilities to enable them to meet the requirements of the National Occupational Standards.

* The use of the word 'salon' is not intended to deny access to the beauty therapy qualification if you deliver services in other locations (e.g. hospitals, care centres etc.). It refers to any place where professional services are carried out. However, the location must meet health & safety requirements for beauty therapy.

APPENDIX 1B

SUMMARY OF WHERE SIMULATED ACTIVITIES MAY BE USED FOR ASSESSMENT OF HABIA DEVELOPED UNITS

Simulated activities may be used for the following, if naturally occurring performance evidence is not available:

Level 2	Unit G4, Fulfil salon reception duties, Outcome 4	<p>'Methods of Payment' Range Variables: 'cash equivalent', 'cheque' and 'payment card' methods of payment.</p> <p>'Payment Discrepancies' Range Variables</p> <p>A special dispensation will continue to exist which allows the use of artificial money in HM Prisons.</p>
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APPENDIX 1C

AREAS WITHIN THE BEAUTY THERAPY NATIONAL OCCUPATIONAL STANDARDS FOR WHICH MANDATORY WRITTEN QUESTION PAPERS MUST BE DEVELOPED

As a minimum requirement, Awarding Bodies are required to develop appropriate question papers to cover the areas of Knowledge and Understanding listed below. A written paper must be produced for each technical unit. It is also recommended that a separate written paper be produced to cover the anatomy and physiology across all of the units in each qualification to prevent repetition. For Beauty Therapy Level 1, these papers should be deliverable in either written or oral formats at the discretion of the assessor. Appropriate written question papers must be available for the Beauty Therapy NVQs/SVQs at Levels 2 and 3.

Beauty Therapy Level 1: Areas of Knowledge Within Beauty Therapy Units Requiring Mandatory Written Questions

Unit Title	Knowledge Areas
Unit BT1: Prepare and maintain the beauty therapy work area	<ul style="list-style-type: none"> ▪ your responsibilities under relevant health & safety legislation ▪ the importance of the correct storage of client records in relation to the Data Protection Act ▪ why it is important to maintain standards of hygiene and the principles for avoiding cross-infection ▪ the different types of sterilising equipment and products available ▪ how to sterilise tools and equipment for the different beauty therapy treatments ▪ the differences between sterilising and sanitising ▪ the different types of chemicals used for sanitising ▪ how to dispose of waste materials and products from treatments ▪ how, and where, to store materials and equipment
Unit BT2: Assist with facial treatments	<ul style="list-style-type: none"> ▪ why it is important to maintain standards of hygiene and the principles for avoiding cross-infection ▪ the importance of following a senior therapist's instructions and the consequences of not doing so ▪ the basic structure of the skin (epidermis, dermis) ▪ the basic function of the skin (protection, temperature control and sensitivity) ▪ how to recognise the different skin types within the range ▪ why it is important to complete treatments in a given time ▪ why it is important to provide basic home care advice ▪ the types of conditions and disorders that may restrict the treatment (e.g. cold sores, conjunctivitis, eczma, cuts, abrasions, redness, swelling, rashes, blood shot)

	<p>and watery eyes)</p> <ul style="list-style-type: none"> ▪ the different types of cleansing, toning, moisturising and mask products ▪ the reasons for cleansing, toning, mask application and moisturising ▪ the benefits of cleansing, toning, mask application and moisturising ▪ the condition in which the work area should be left.
<p>Unit BT3: Assist with nail treatments on the hands</p>	<ul style="list-style-type: none"> ▪ why it is important to maintain standards of hygiene and the principles for avoiding cross-infection ▪ the importance of following a senior therapist's instructions and the consequences of not doing so ▪ the types of conditions and disorders that may restrict the treatments (e.g. overgrown cuticles, warts, scabies, ring worm, cuts, abrasions, swelling, redness, discoloured nails, damaged nails) ▪ the structure of the nail unit (including matrix, nail plate, nail bed, cuticle, free edge) ▪ the different types of nail shapes you are likely to come across during nail treatments ▪ the different types of nail products ▪ the action of treatment products on nails and skin ▪ the effects on the nails of incorrect use of nail treatment tools ▪ why it is important to provide basic home care advice ▪ why it is important to complete treatments in a given time ▪ the condition in which the work area should be left.

Beauty Therapy Level 2: Areas of Knowledge Within Beauty Therapy Units Requiring Mandatory Written Questions

Unit Title	Area of Knowledge
Unit BT4: Improve and maintain facial skin condition	<ul style="list-style-type: none"> ▪ the structure of the skin (i.e. the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels, and sensory nerve ending) and differences in the structure of the skin of the clients listed in the range ▪ the function of the skin (i.e. sensitivity, heat regulation, absorption, protection, excretion, secretion and vitamin D production) ▪ the actions of the facial, neck and shoulder muscles (i.e. frontalis, corrugator, temporalis, orbicularis oculi, labialis of the upper lip, orbicularis oris, buccinator, risorius, mentalis, zygomaticus, masseter, depressors of the lower lip, sternocleidomastoid, platysma, trapezius, pectoralis and deltoid) ▪ bones of the head, neck and shoulder girdle, including: <ul style="list-style-type: none"> ▪ for the skull: occipital, frontal, parietal, temporal, sphenoid, ethmoid ▪ for the face: zygomatic, mandible, maxillae, nasal, vomer, turbinate, lacrimal, palatine ▪ for the neck: cervical vertebrae ▪ for the shoulder girdle: clavicle, scapula, humerus ▪ for the chest: sternum ▪ the position of the head, face, neck, chest and shoulder girdle bones ▪ the position of the face, neck and shoulder muscles ▪ how to recognise the skin types and conditions listed in the range ▪ how the natural ageing process affects facial skin and muscle tone ▪ how environmental and lifestyle factors affect the condition of the skin ▪ the composition and function of blood and lymph and their roles in improving skin and muscle condition. ▪ how to recognise those contra-indications requiring medical referral (e.g. bacterial - impetigo; viral - herpes simplex; fungal - tinea; systemic medical conditions; conjunctivitis, severe skin conditions and eye infections; acne, boils, herpes zoster and warts, parasitic infection such as pediculosis and scabies) ▪ how to recognise those contra-indications which restrict treatment (e.g. recent scar tissue, eczema, hyper-keratosis, skin allergies, cuts, abrasions, bruising, vitiligo, styes, watery eyes) ▪ suitable courses of treatment for various skin types and conditions

	<ul style="list-style-type: none"> ▪ the recommended frequency of treatments ▪ the range and uses of products available for facial treatments ▪ the different types of specialist skin products and how to apply them (e.g. eye creams, gels, lip balms, neck creams, acne products) ▪ the reasons for and benefits of: cleansing the skin, exfoliating the skin, toning the skin, warming the skin, applying massage, applying masks and skin care products ▪ the effects of steam on skin ▪ the different types and effects of skin warming devices ▪ how to adapt massage techniques to suit the skin conditions and types in the range ▪ the types of massage techniques listed in the range and the differences between them ▪ the effects of massage techniques on the skin, muscle and underlying structures ▪ the effects of masks on the skin ▪ the links between mask treatment timing and skin condition ▪ how to identify erythema and its causes ▪ possible contra-actions which may occur during the facial treatment and how to deal with them (e.g. excessive erythema, irritations) ▪ the products that should or should not be used immediately after facials
<p>Unit BT5: Provide eyelash and eyebrow treatments</p>	<ul style="list-style-type: none"> ▪ how to measure the eyebrow and eye for eyebrow shaping treatments ▪ the shape and proportions of the eyebrow in relation to facial features and shape ▪ how to remove eyebrow hairs carefully and effectively ▪ the recommended time intervals between eyebrow shaping treatments ▪ the reasons why soothing the eyebrow area may be necessary during treatment and how this is achieved ▪ the effects of soothing agents on the eye and the precautions necessary to avoid harm ▪ how to maintain and care for tweezed eyebrows. ▪ how to apply tint to eyebrows and eyelashes (e.g. orange wood stick, sterilised brush) ▪ how the colour characteristics of the client affect the timing for tint development and removal ▪ how to select, mix and remove tints, and minimise wastage ▪ manufacturer's instructions for mixing and using tint ▪ how oxidation affects the shelf life of tint and at what point in the tinting process the tint should be mixed ▪ the effects of grease on the success of the tinting process

	<ul style="list-style-type: none"> ▪ how to prevent the spread of tint beyond the area being treated ▪ the limitations of the tinting process ▪ the maintenance and care requirements for tinting treatments ▪ the action to take if the tint enters the client's eye ▪ how to identify erythema and its causes ▪ the possible contra-actions resulting from the tinting procedures (e.g. eye irritations) ▪ the possible contra-indications and the precautions to be taken during treatment ▪ the effect of perm lotion on the eyelashes ▪ the purpose and use of clear wrap in the development process ▪ the purpose and use of the fixing solution ▪ the effects of grease on the success of the perming process ▪ the limitations of the perming process ▪ the maintenance and aftercare requirements for permed eyelashes ▪ how to carry out skin sensitivity tests and their importance ▪ the benefits of perming eyelashes ▪ the importance of gel formulation in a chemical product ▪ the reasons for poor eyelash perming results ▪ the complementary treatments that may be performed during and after an eyelash perm ▪ how to remove the eyelash treatment in an emergency ▪ the importance of giving retail advice prior to treatment ▪ how to recognise the contra-indications requiring medical referral, including; severe skin conditions and eye infections ▪ the contra-indications which prevent treatment (e.g. conjunctivitis, bacterial infections, inflammation of the skin, eye diseases and disorders, bruising, allergy to tint) and how to recognise them
<p>Unit BT6: Remove hair using waxing techniques</p>	<ul style="list-style-type: none"> ▪ the structure of the skin (i.e. the five layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels, and sensory nerve ending) and differences in the structure of the skin for the different client groups ▪ the function of the skin (i.e. sensitivity, heat regulation, absorption, protection, excretion, secretion and vitamin D production) ▪ the structure of the hair ▪ the basic principles of hair growth (e.g. anagen, catagen, telogen) ▪ the types of hair growth (e.g. terminal, vellus) ▪ how to recognise those contra-indications requiring

	<p>medical referral (e.g. severe skin conditions, diabetes, severe varicose veins)</p> <ul style="list-style-type: none"> ▪ how to recognise those conditions which restrict treatment (e.g. cuts, abrasions, self tan, heat rash, bruises, sunburn, warts, hairy moles, abnormal hair growth) ▪ how to identify histamine (allergic) reaction in the skin ▪ how to identify erythema and its causes ▪ the correct working temperatures for warm wax, sugar paste and hot wax ▪ the suitability of specific products for certain hair types ▪ the precautions which need to be taken when removing hair around contra-indications which restrict the treatment ▪ possible skin reactions to waxing ▪ the possible contra-actions resulting from the hair removal treatments ▪ other methods of temporary hair removal (e.g. tweezing, shaving, depilatory creams, threading, abrasive mitts) and their effect on the waxing process ▪ why it is important to give treatment advice and what may happen if treatment advice was not given.
<p>Unit BT7: Provide manicure treatment</p>	<ul style="list-style-type: none"> ▪ how to recognise contra-indications requiring medical referral ▪ how to recognise contra-indications which prevent the treatment of nails and skin (e.g. fungal infections, bacterial infections, viral infections, parasitic infections, severe nail separation, severe eczema and psoriasis, severe bruising) ▪ how to recognise contra-indications which restrict the treatment of nails and skin (e.g. minor nail separation, minor eczema and psoriasis, severely bitten or damaged nails, broken bones) ▪ the reasons why it is important to encourage clients with contra-indications to seek medical advice ▪ the importance of, and reasons for, not naming specific contra-indications when referring clients to a General Practitioner ▪ how to identify treatable non-medical nail and skin conditions (e.g. weak, dry, brittle and ridged nails; dry, split and overgrown cuticles) ▪ the anatomy of the lower arm ▪ the bones of the hand and forearm ▪ the effects of massage on skin, nails and muscles ▪ the muscles of the lower arm and hand ▪ the blood circulation to the lower arm and hand ▪ the structure of the nail unit (i.e. the nail plate, nail bed, matrix, cuticle, lunula, hyponychium, eponychium, nail wall, free edge, the lateral nail fold) ▪ the process of nail growth (i.e. nail formation, growth rate, factors affecting growth, the effects of damage)

	<p>on growth, nail thickness)</p> <ul style="list-style-type: none"> ▪ the structure and function of the skin (i.e. dermis, epidermis, subcutaneous layer, appendages) ▪ the different types of nail shapes you are likely to come across during manicure work ▪ the action of treatment products on nails, cuticle and skin ▪ the effects on the nail and skin of incorrect use of manicure tools ▪ possible contra-actions which may occur during or after the manicure treatment ▪ how to identify erythema and its causes ▪ the different types of nail, skin and cuticle products and corrective treatments available ▪ the different types of massage used as part of a manicure treatment ▪ the effects of heat during a treatment for skin and cuticles.
<p>Unit BT8: Provide pedicure treatment</p>	<ul style="list-style-type: none"> ▪ how to recognise contra-indications requiring medical referral ▪ how to recognise contra-indications which prevent the treatment of nails and skin (e.g. fungal infections, bacterial infections, viral infections, parasitic infections, severe nail separation, severe eczema and psoriasis, severe bruising) ▪ how to recognise contra-indications which restrict the treatment of nails and skin (e.g. minor nail separation, minor eczema and psoriasis, damaged nails, broken bones, bunions) ▪ the reasons why it is important to encourage clients with contra-indications to seek medical advice ▪ the importance of, and reasons for, not naming specific contra-indications when referring clients to a general practitioner ▪ how to identify treatable non-medical nail and skin conditions ▪ the anatomy of the lower leg ▪ the bones of the foot and lower leg ▪ the effects of massage on skin, nails and muscles ▪ the muscles of the foot and lower leg ▪ the blood circulation to the foot and lower leg ▪ the structure of the nail unit (i.e. the nail plate, nail bed, matrix, cuticle, lunula, hyponychium, eponychium nail wall, free edge, the lateral nail fold) ▪ the process of nail growth (i.e. nail formation, growth rate, factors affecting growth, the effects of damage on growth, nail thickness) ▪ the structure and function of the skin (i.e. dermis, epidermis, subcutaneous layer, appendages) ▪ the different types of nail shapes you are likely to come across during pedicure work

	<ul style="list-style-type: none"> ▪ the action of treatment products on nail, cuticle and skin ▪ the effects on the nail and skin of incorrect use of pedicure tools ▪ possible contra-actions which may occur during or after the pedicure treatment ▪ how to identify erythema and its causes ▪ the different types of nail, skin and cuticle products and corrective treatments available ▪ the different types of massage used as part of pedicure treatment ▪ the effects of heat during a treatment for skin and cuticles
<p>Unit BT9: Provide make-up treatment</p>	<ul style="list-style-type: none"> ▪ the structure of the skin (i.e. the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels, and sensory nerve ending) and differences in the structure of the skin of the clients listed in the range ▪ the function of the skin (i.e. sensitivity, heat regulation, absorption, protection, excretion, secretion and vitamin D production) ▪ how to recognise the skin types listed in the range ▪ how to recognise the following skin conditions; sensitivity, comedone, milia, dehydrated, broken capillaries, pustules, papules, open pores, dark circles, hyper pigmentation, hypo pigmentation, dermatosis papulosa nigra, keloids ▪ how the natural ageing process affects skin ▪ how environmental and lifestyle factors affect the condition of the skin. ▪ how to recognise those contra-indications requiring medical referral (e.g. bacterial - impetigo; viral - herpes simplex; fungal - tinea; systemic medical conditions; conjunctivitis, severe skin conditions and eye infections; acne, boils, herpes zoster and warts, parasitic infection such as pediculosis and scabies) ▪ how to recognise those contra-indications which restrict treatment (e.g. recent scar tissue, eczema, hyper-keratosis, skin allergies, cuts, abrasions, bruising, styes, watery eyes) ▪ the different types of cleansing, toning and moisturising products suitable for the skin types listed in the range ▪ the different types of powders, foundation, eye products, cheek products and lip products available and how to use and apply them ▪ the different types of concealers that can be used and how to use them, i.e. stick, liquid, powder and compact ▪ how to achieve changes in face shape by shading and highlighting ▪ principles of contouring the face by use of shading and

	<p>lighting</p> <ul style="list-style-type: none"> ▪ the possible consequences of applying unsuitable make-up products to certain skin types and conditions ▪ the reasons for matching lighting with the occasion for which the make-up will be worn ▪ how lighting affects the perception of colour and its influence on the effect of make-up ▪ the use and effects of skin colour correction products using complementary colour theory ▪ possible contra-actions which may occur during the make-up treatment and how to deal with them (e.g. excessive perspiration, adverse skin reactions, watery eyes, excessive erythema) ▪ how to identify erythema and its causes.
<p>Unit BT12: Extend and maintain nails Note: This unit to be superseded by Unit BT44 (below) in 2007.</p>	<ul style="list-style-type: none"> ▪ the contra-actions which may occur during the course of treatment and how to deal with them; allergic reactions and overexposure; bacterial infections; fungal infections; onycholysis (nail separation); lifting of product; premature loss of extension; breaking or splitting of natural nail or nail extension; yellowing of natural nail or nail extension ▪ possible contra-actions which may occur during or after the nail repair or temporary nail treatment ▪ how to recognise contra-indications which restrict the treatment of nails and skin (e.g. minor nail separation, minor eczema and psoriasis, severely bitten or damaged nails, broken bones) ▪ the reasons why it is important to refer clients with contra-indications to their general practitioner ▪ the importance of, and reasons for, not naming specific contra-indications when referring clients to a general practitioner ▪ how to identify treatable non-medical nail and skin conditions (e.g. weak, dry, brittle and ridged nails; dry, split and overgrown cuticles) ▪ the structure of the nail unit (i.e. the nail plate, nail bed, matrix, cuticle, lunula, hyponychium, eponychium, nail wall, free edge, the lateral nail fold) ▪ the process of nail growth (i.e. nail formation, growth rate, factors affecting growth, the effects of damage on growth, nail thickness) ▪ the structure and function of the skin (i.e. dermis, epidermis, subcutaneous layer, appendages) ▪ the different types of nail shapes you are likely to come across during nail extension work ▪ common skin and nail conditions ▪ why it is important to leave a free margin around the cuticle and side wall area ▪ the importance of choosing the correct size of tip ▪ the importance of correct blending ▪ the importance of regular ongoing maintenance of the artificial nail structure. ▪ how to protect artificial nail structures ▪ how to deal with accidental damage.

<p>Unit BT13: Provide nail art service</p>	<ul style="list-style-type: none"> ▪ how to recognise contra-indications requiring medical referral ▪ how to recognise contra-indications which prevent the service from taking place (e.g. fungal infections, bacterial infections, viral infections, severe nail separation, severe eczema and psoriasis, severe bruising) ▪ how to recognise contra-indications which restrict the service (e.g. minor nail separation, minor eczema and psoriasis, severely bitten or damaged nails, broken bones) ▪ the reasons why it is important to encourage clients with contra-indications to seek medical advice ▪ the importance of, and reasons for, not naming specific contra-indications when referring clients to a general practitioner ▪ how to identify treatable non-medical nail and skin conditions (e.g. weak, dry, brittle and ridged nails; dry, split and overgrown cuticles; dry and hard skin) ▪ the structure of the nail unit (i.e. the nail plate, nail bed, matrix, cuticle, lunula, hyponychium, eponychium, nail wall, free edge) ▪ the process of nail growth (i.e. nail formation, growth rate, factors affecting growth, the effects of damage on growth, nail thickness) ▪ the structure and function of the skin (i.e. dermis, epidermis, subcutaneous layer, appendages) ▪ the different types of nail shapes you are likely to come across for this work ▪ how to blend and mix colours ▪ the limitations on the application of nail art designs due to the condition of clients' nails ▪ possible contra-actions which may occur during or after the service.
<p>Unit BT14: Pierce ears</p>	<ul style="list-style-type: none"> ▪ types of contra-indications that occur and how to recognise them, including: systemic medical conditions, serious localised skin infections and ear infections ▪ the types of contra-indications that require referral to a general practitioner ▪ the importance of, and reasons for, not naming specific contra-indications when referring clients to a general practitioner ▪ the types of contra-indications that prevent treatment but do not require referral to a general practitioner. ▪ how to maintain equipment and materials in a clean and hygienic condition ▪ the action to take in the event of ear piercing gun malfunction ▪ the range and uses of aftercare products ▪ the risks associated with ear lobe piercing if treatment advice is ignored

	<ul style="list-style-type: none"> ▪ the reasons why one pair of studs should be fitted at a time ▪ why ear studs have to be left in place for the recommended time and the effects of premature removal ▪ the dangers associated with piercing cartilage and other body areas
<p>Unit BT15: Assist with spa treatments</p>	<ul style="list-style-type: none"> ▪ why it is important to maintain standards of hygiene and the principles of avoiding cross-infection ▪ your responsibilities under any local bye-laws relating to water, temperature and spa treatments ▪ the importance of correct use and storage of chemicals required for spa maintenance ▪ the different types of equipment available for water, temperature and spa treatments ▪ the recommended operating temperatures and humidity levels for equipment ▪ the possible dangers of chemical and equipment misuse ▪ the maintenance and monitoring requirements for equipment ▪ the types and uses of treatments in the range ▪ the recommended treatment times ▪ the effect of different types of water, temperature and spa treatments on the skin and body ▪ the effect of different types of heat on the skin and body ▪ the possible contra-actions which can occur during water, temperature and spa treatment sessions (e.g. feeling faint or nauseous, skin irritation) ▪ the course of action to be taken in the event of contra-actions ▪ the importance of ventilation ▪ how to test water and chemical concentrations ▪ the recommended cleaning intervals for the treatment area and equipment including recommendations to avoid water borne infections.
<p>Unit BT44: Extend, maintain and repair nails</p>	<ul style="list-style-type: none"> ▪ how to recognise contra-indications which restrict the treatment of nails and skin (e.g. minor nail separation, minor eczema and psoriasis, severely bitten or damaged nails, broken bones) ▪ the reasons why it is important to encourage clients with contra-indications to seek medical advice ▪ the importance of, and reasons for, not naming specific contra-indications when referring clients to a general practitioner ▪ the contra-actions which may occur during the course of treatment and how to deal with them; allergic reactions and overexposure; bacterial infections; fungal infections; onycholysis (nail separation); lifting of product; premature loss of extension; breaking or splitting of natural nail or nail extension; yellowing of

	<p>natural nail or nail extension</p> <ul style="list-style-type: none"> ▪ possible contra-actions which may occur during or after the nail repair or temporary nail service ▪ how to identify treatable non-medical nail and skin conditions (e.g. weak, dry, brittle and ridged nails; dry, split and overgrown cuticles) ▪ the structure of the nail unit (i.e. the nail plate, nail bed, matrix, cuticle, lunula, hyponychium, eponychium, nail wall, free edge, the lateral nail fold) ▪ the process of nail growth (i.e. nail formation, growth rate, factors affecting growth, the effects of damage on growth, nail thickness) ▪ the structure and function of the skin (i.e. dermis, epidermis, subcutaneous layer, appendages) ▪ the different types of nail shapes you are likely to come across during nail extension work ▪ common skin and nail conditions ▪ the importance of preparing the nail plate ▪ the key differences between gel, liquid and powder and wrap artificial nail systems and the benefits of each ▪ why it is important to leave a free margin around the cuticle and side wall area ▪ the importance of choosing the correct size of tip ▪ the importance of correct blending ▪ the importance of regular ongoing maintenance of the artificial nail structure. ▪ the advantages and disadvantages of the system you have chosen ▪ how to protect artificial nail structures ▪ how to deal with accidental damage.
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Beauty Therapy Level 3: Areas of Knowledge Within Beauty Therapy Units Requiring Mandatory Written Questions

Unit Title	Knowledge Areas
Unit BT16: Epilate the hair follicle using diathermy, galvanic and blend techniques	<ul style="list-style-type: none"> ▪ why it is important to maintain standards of hygiene and the principles for avoiding cross-infection ▪ the possible risks to yourself and the client of poor positioning ▪ how to dispose of clinical waste and sharps ▪ why damaged or contaminated needles should not be used ▪ the procedures for dealing with needle stick injuries ▪ the importance of giving relevant and accurate information to assist the client's understanding of hair growth cycle, causes, hair management techniques and their implications on treatment ▪ the constraints surrounding epilation treatments (e.g. cost, time, number of treatments, healing rate) ▪ the potential consequences of carrying out electrical epilation on a contra-indicated client ▪ suitable methods of dealing with re-growth between treatments ▪ how skin sensitivity is affected by other skincare treatments which may inhibit epilation, i.e. glycolic peel, micro-dermabrasion, laser ▪ how to choose the type/size of needle ▪ the structure and function of the skin (i.e. epidermis, dermis, appendages, subcutaneous layer and nerve endings) ▪ the structure of the hair and its follicle (the pilo/sebaceous unit) ▪ the growth pattern of the hair and how this influences present and future treatments ▪ the hair growth cycle i.e. anagen, catagen, telogen ▪ the causes of hair growth i.e. topical, congenital, systemic ▪ the definition of hair growth i.e. superfluous, hirsutism, hypertrichosis ▪ the effects of malfunctions of the endocrine system on hair growth ▪ the principles of the blood and lymphatic system ▪ how the hormones are circulated via the blood stream ▪ the principles of the blood and lymphatic system ▪ the skin characteristics, skin types and cultural awareness of the different client groups, e.g. white, black, Asian, mixed, Chinese ▪ possible contra-actions which may occur during the treatment and how to deal with them e.g. palpitations, profuse sweating, erythema and oedema ▪ how to correctly insert the needle into the hair follicle

	<p>with regard to depth and angle</p> <ul style="list-style-type: none"> ▪ the importance of recognising and treating compound hair growth ▪ the importance of recognising and treating ingrowing hair ▪ the importance of knowing how to treat the follicles of red and non-pigmented hair ▪ why moisture can affect the epilation treatment ▪ the reasons for adverse reactions to treatment and how to prevent these from occurring ▪ the effects of different currents used for electrical epilation equipment ▪ the effects of incorrect needle insertion ▪ the effects of incorrect needle size ▪ the reasons for avoiding the following activities post epilation: heat treatments, touching the treated area, use of perfumed and chemical based products, wearing of restrictive clothing ▪ why it is important to give treatment advice and what may happen if treatment advice was not given
<p>Unit BT17: Provide head and body massage treatments</p>	<ul style="list-style-type: none"> ▪ the structure and function of cells and tissues ▪ the structure and function of muscles, including the types of muscles (i.e. voluntary and involuntary) ▪ the positions and actions of the main muscle groups in the part of the body specified in the range and the facial muscles (i.e. Sterno CleidoMastoid, Splenius Capitis, Splenius Cervicus, Rotator cuff muscles, Deltoid, Biceps, Triceps, Wrist flexors, Wrist extensors, Brachioradialis, Trapezius, Rhomboids, Latissimus Dorsi, Erector Spinae, Pectorals, Intercostals, Diaphragm, Rectus Abdominus, Obliques, Gluteals, Piriformis, Hamstrings, Quadriceps, Adductors of upper leg Gastrocnemius, Soleus, Tibialis Anterior, Corrugator, Frontalis, Platysma, Orbicularis Oris, Mentalis, Masseter, Orbicularis Oculi, Buccinator, Zygomatic) ▪ the position of the primary bones of the skeleton and the functions of the skeleton ▪ the structure, function and location of blood vessels and the principles of circulation, blood pressure and pulse ▪ the interaction of lymph and blood within the circulatory system ▪ the structure and function of lymphatic system, including lymphatic vessels, nodes and lymph in the face and body ▪ the principles of lymph circulation ▪ the basic principles of the central nervous system and autonomic system ▪ the basic principles of the olfactory, endocrine, respiratory, digestive and excretory systems ▪ the basic structure and function of skin (i.e. the layers

	<p>of the epidermis, the dermis, subcutaneous layer, including connective tissues, nerve endings, sweat glands, sebaceous glands, capillaries and hairs)</p> <ul style="list-style-type: none"> ▪ the structure and location of the adipose tissue ▪ how to recognise those contra-indications that prevent treatment (e.g. deep vein thrombosis, during chemotherapy and radiotherapy, contagious skin diseases, etc.) ▪ how to recognise those contra-indications which may restrict treatment or where caution should be taken, in specific areas (e.g. varicose veins, epilepsy, diabetes, heart disease, high and low blood pressure, skin disorders, recent scar tissue, recent fractures and sprains, undiagnosed lumps and swellings, product allergies, certain medication, etc.) ▪ what constitutes a contra-action ▪ the effects of massage on the individual systems of the body ▪ the physical and psychological effects of body massage
<p>Unit BT18: Improve body condition using electro-therapy</p>	<ul style="list-style-type: none"> ▪ structure and function of the skeleton ▪ the structure and function of muscles, including the types of muscles (i.e. voluntary and involuntary) ▪ muscle tone and how it can vary ▪ the positions and actions of the main muscle groups in the part of the body specified in the range (i.e. Deltoid, Biceps, Triceps, Brachialis, Radialis Trapezius, Latissimus Dorsi, Erector Spinae, Pectorals, Intercostals, Diaphragm, Rectus Abdominis, Obliques, Gluteals, Hamstrings, Quadriceps Extensor, Abductors, Adductors of upper leg Gastrocemi- us, Soleus, Tibialis Anterior) ▪ the definition of 'origin' and 'insertion' of a muscle ▪ the causes of muscle fatigue and how to recognise it ▪ the basic structure and function of skin (i.e. the layers of the epidermis, subcutaneous layer, the dermis, including connective tissues, nerve endings, sweat glands, sebaceous glands, capillaries and hairs) ▪ the structure and location of the adipose tissue ▪ how ageing affects the body and skin ▪ how age limits the effectiveness of the treatment ▪ the function of blood and the principles of circulation, blood pressure and pulse ▪ the structure and function of the heart and arteries, veins and capillaries ▪ how to identify erythema and its causes ▪ the structure and function of the lymphatic system, including lymphatic vessels, nodes and lymph of the body ▪ the principles of lymph circulation and the interaction of lymph and blood within the circulatory system ▪ the basic principles of the central nervous system,

	<p>motor points and autonomic system</p> <ul style="list-style-type: none"> ▪ the effect of electrical treatment on the muscles, skin, circulatory, skeletal, lymphatic and nervous systems ▪ how to recognise those contra-indications which prevent treatment (e.g. epilepsy, contagious skin diseases, dysfunction of the nervous system, heart disease/disorder, undergoing medical treatment, pacemaker, malignant melanoma, HIV, recent scar tissue, undiagnosed lumps and swellings) ▪ how to recognise those conditions restricting treatment (e.g. diabetes, high/low blood pressure, history of thrombosis or embolism, metal pins or plates, medication, pregnancy, piercings, anxiety, menstruation, varicose veins, cuts, abrasions, bruises). ▪ possible contra-actions which may occur during the treatment and how to deal with them (e.g. galvanic burn, bruising, irritation, allergic reaction, excessive erythema, muscle fatigue, fainting) ▪ the benefits and use of materials and equipment available for electrical treatments ▪ the type of currents produced by direct high frequency units, galvanic units, faradic units and microcurrent units ▪ the physical and physiological effects on the body of each of the equipment in the range ▪ why body treatment should be conducted in a certain direction ▪ the lifestyle factors and changes that may be required to improve the effectiveness of the treatment ▪ why it is important to give aftercare advice ▪ post treatment restrictions and future treatment needs ▪ how current dietary habits can affect the effectiveness of treatment ▪ how changes in diet can improve the effectiveness of the treatment.
<p>Unit BT19: Improve face and skin condition using electro-therapy</p>	<ul style="list-style-type: none"> ▪ the position of the primary bones of the skull and shoulder girdle and the functions of the skull ▪ the positions and actions of the facial muscles (e.g. Frontalis, Sterno Mastoid, Platysma, Orbicularis Oris, Masseter, Orbicularis Occuli, Buccinator, Zygomatic, Digastric, Corrugator, Risorius) ▪ the basic structure and function of skin (i.e. the layers of the epidermis, subcutaneous layer, the dermis, including connective tissues, nerve endings, sweat glands, sebaceous glands, capillaries and hairs) ▪ how ageing affects the skin and limits the effectiveness of treatment ▪ how the endocrine system effects the skin ▪ the function of blood and the principles of circulation, blood pressure and pulse

	<ul style="list-style-type: none"> ▪ the structure and function of the arteries, veins and capillaries in the face ▪ the structure and function of the lymphatic system, including lymphatic vessels, nodes and lymph in the face and neck ▪ how to identify erythema and its causes ▪ the principles of lymph circulation and the interaction of lymph and blood within the circulatory system ▪ the basic principles of the central nervous system, motor points and autonomic system ▪ the effect of electrical treatment on the muscles, skin, circulatory, skeletal, lymphatic and nervous systems. ▪ how to recognise those contra-indications which prevent treatment (e.g. epilepsy, contagious skin diseases, dysfunction of the nervous system, heart disease/disorder, undergoing medical treatment, pacemaker, malignant melanoma, botox, HIV, recent scar tissue, hepatitis, undiagnosed lumps and swellings) ▪ how to recognise conditions restricting treatment (e.g. diabetes, high/low blood pressure, history of thrombosis or embolism, metal pins or plates, medication, pregnancy, piercings, anxiety, cuts, abrasions, bruises) ▪ why the skin has to be prepared in a manner suitable for the equipment to be used ▪ possible contra-actions which may occur during the treatment and how to deal with them (e.g. galvanic burn, bruising, irritation, allergic reaction, excessive erythema, muscle fatigue, fainting) ▪ how to carry out and interpret skin sensitivity tests ▪ the benefits and use of materials and equipment available for electrical treatments ▪ the type of currents produced by high frequency units, galvanic units, faradic units and microcurrent units ▪ the physical and physiological effects on the face of each of the equipment in the range ▪ why facial treatment should be conducted in a certain direction ▪ how to apply and adjust the equipment to suit the client's needs ▪ the lifestyle factors and changes that may be required to improve the effectiveness of the treatment ▪ why it is important to give aftercare advice ▪ post treatment restrictions and future treatment needs
<p>Unit BT21: Provide massage using pre-blended aromatherapy oils</p>	<ul style="list-style-type: none"> ▪ the structure and function of cells and tissues ▪ the structure and function of muscles, including the types of muscles (i.e. voluntary and involuntary) ▪ the positions and actions of the main muscle groups in the part of the body specified in the range and the facial muscles (i.e. Sterno CleidoMastoid, Splenius Capitis, Splenius Cervicus, Rotator cuff muscles,

	<p>Deltoid, Biceps, Triceps, Wrist flexors, Wrist extensors, Brachioradialis, Trapezius, Rhomboids, Latissimus Dorsi, Erector Spinae, Pectorals, Intercostals, Diaphragm, Rectus Abdominis, Obliques, Gluteals, Piriformis, Hamstrings, Quadriceps, Adductors of upper leg. Gastrocnemius, Soleus, Tibialis Anterior, Corrugator, Frontalis, Platysma, Orbicularis Oris, Mentalis, Masseter, Orbicularis Oculi, Buccinator, Zygomatic)</p> <ul style="list-style-type: none"> ▪ the position of the primary bones of the skeleton and the functions of the skeleton ▪ the structure, function and location of blood vessels and the principles of circulation, blood pressure and pulse ▪ the interaction of lymph and blood within the circulatory system ▪ the structure and function of lymphatic system, including lymphatic vessels, nodes and lymph in the face and body ▪ the principles of lymph circulation ▪ the basic principles of the central nervous system and autonomic system ▪ the basic principles of the olfactory, endocrine, respiratory, digestive, excretory and reproductive systems ▪ the basic structure and function of skin (i.e. the layers of the epidermis, the dermis, subcutaneous layer, including connective tissues, nerve endings, sweat glands, sebaceous glands, capillaries and hairs) ▪ how to recognise those contra-indications that prevent treatment (e.g. deep vein thrombosis, during chemotherapy and radiotherapy, contagious skin diseases, etc.) ▪ how to recognise those contra-indications which may restrict treatment or where caution should be taken, in specific areas (e.g. varicose veins, epilepsy, diabetes, heart disease, high and low blood pressure, skin disorders, recent scar tissue, undiagnosed lumps and swellings, product allergies, pregnancy, certain medication, etc.) ▪ where essential oils are derived from (e.g. flowers, seeds, wood, leaves, roots, fruits, herbs and resins) ▪ the processes used for obtaining essential oils ▪ where carrier oils are derived from (e.g. vegetable oils, nut oils, seed oils) ▪ possible sensitivities and reactions to pre-blended oils ▪ the effects of aroma massage on the individual systems of the body ▪ the physical and psychological effects of aroma massage ▪ why it is important to know the common and latin names for the essential oils used in pre-blended aromatherapy, in line with product labelling needs and
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	<p>current legislation</p> <ul style="list-style-type: none"> ▪ the types of pre-blended oils suitable for relaxation, sense of well-being, uplifting, e.g. <ul style="list-style-type: none"> - Chamomile Roman – Anthemis nobilis - Clary sage – Salvia sclarea - Eucalyptus – Eucalyptus globulus/radiata - Geranium – Pelargonium graveolens - Grapefruit – Citrus paradisi - Lavender – Lavendula angustefolia - Lemon – Citrus limonum - Lemongrass – Cymbopogon citratus - Marjoram – Origanum marjorana - Neroli – Citrus aurantium - Rose bulgar – Rosa damascena - Rosemary – Rosmarinus officinalis - Sandalwood – Santalum album - Tea tree – Melaleuca alternifolia - Ylang Ylang – Cananga odorata ▪ why it is important to understand the use and application of carrier oils, e.g. almond oil, grapeseed oil, apricot kernel, hazelnut, macademia, jojoba oil, avocado oil.
<p>Unit BT22: Enhance the appearance of natural nails using artificial nail systems</p>	<ul style="list-style-type: none"> ▪ the anatomy of the lower arms/leg ▪ the bones of the hand, forearm, foot, lower leg ▪ the effects of massage on skin, nails and muscles ▪ the muscles of the lower arm and hand and lower leg and foot ▪ the blood circulation of the lower arm, hand, lower leg and foot ▪ how to recognise contra-indications which prevent the service from taking place (e.g. fungal infections, bacterial infections, viral infections, severe nail separation, severe eczema and psoriasis, severe bruising) ▪ how to recognise conditions which restrict the service (e.g. minor nail separation, minor eczema and psoriasis, severely bitten or damaged nails, broken bones) ▪ the reasons why it is important to encourage clients with contra-indications to seek medical advice ▪ the importance of, and reasons for, not naming specific contra-indications when encouraging the client to seek medical advice ▪ the structure of the nail unit (i.e. the nail plate, nail bed, matrix, cuticle, lunula, hyponychium, eponychium, nail wall, free edge, the lateral nail fold) ▪ the process of nail growth (i.e. nail formation, growth rate, factors affecting growth, the effects of damage on growth, nail thickness) ▪ the structure and function of the skin (i.e. dermis, epidermis, subcutaneous layer, appendages) ▪ the different types of nail shapes you are likely to come across during manicure work

	<ul style="list-style-type: none"> ▪ common skin and nail conditions ▪ how to identify treatable nail and skin conditions (e.g. weak, dry, brittle and ridged nails; dry, split and overgrown cuticles; dry and hard skin) ▪ the importance of regular ongoing maintenance of the artificial nail structure ▪ the contra-actions which may occur during and after the course of treatment and how to deal with them; allergic reactions and overexposure; bacterial infections; fungal infections; onycholysis (nail separation); lifting of product; premature loss of extension; breaking or splitting of natural nail or nail extension; yellowing of natural nail or nail extension ▪ the importance of knowing when to use primer and what type of primer to use ▪ the maintenance requirements for artificial nails ▪ how to protect artificial nail structures ▪ how to deal with accidental damage
<p>Unit BT23: Maintain, repair and enhance artificial nail structures</p>	<ul style="list-style-type: none"> ▪ the anatomy of the lower arms/leg ▪ the bones of the hand, forearm, foot, lower leg ▪ the effects of massage on skin, nails and muscles ▪ the muscles of the lower arm and hand and lower leg and foot ▪ the blood circulation of the lower arm, hand, lower leg and foot ▪ how to recognise contra-indications which prevent the service from taking place (e.g. fungal infections, bacterial infections, viral infections, severe nail separation, severe eczema and psoriasis, severe bruising) ▪ how to recognise conditions which restrict the service (e.g. minor nail separation, minor eczema and psoriasis, severely bitten or damaged nails, broken bones) ▪ the reasons why it is important to encourage clients with contra-indications to seek medical advice ▪ the importance of, and reasons for, not naming specific contra-indications when encouraging the client to seek medical advice ▪ the structure of the nail unit (i.e. the nail plate, nail bed, matrix, cuticle, lunula, hyponychium, eponychium, nail wall, free edge, the lateral nail fold) ▪ the process of nail growth (i.e. nail formation, growth rate, factors affecting growth, the effects of damage on growth, nail thickness) ▪ the structure and function of the skin (i.e. dermis, epidermis, subcutaneous layer, appendages) ▪ the different types of nail shapes you are likely to come across during manicure work ▪ common skin and nail conditions ▪ how to identify treatable nail and skin conditions (e.g. weak, dry, brittle and ridged nails; dry, split and

	<p>overgrown cuticles; dry and hard skin)</p> <ul style="list-style-type: none"> ▪ the importance of regular ongoing maintenance of the artificial nail structure ▪ the importance of knowing when to use primer and what type of primer to use ▪ the maintenance requirements for artificial nails ▪ how to protect artificial nail structures ▪ how to deal with accidental damage ▪ the contra-actions which may occur during and after the course of treatment and how to deal with them; allergic reactions and overexposure; bacterial infections; fungal infections; onycholysis (nail separation); lifting of product; premature loss of <p>extension; breaking or splitting of natural nail or nail extension; yellowing of natural nail or nail extension</p>
<p>Unit BT24: Plan, design and provide nail art services to clients</p>	<ul style="list-style-type: none"> ▪ the importance of, and reasons for, not naming specific contra-indications when encouraging the client to seek medical advice ▪ the reasons why it is important to encourage clients with contra-indications to seek medical advice ▪ how to recognise contra-indications which restrict the service (e.g. minor nail separation, minor eczema and psoriasis, severely bitten or damaged nails) ▪ the anatomy of the lower arms/leg ▪ the bones of the hand, forearm, foot, lower leg ▪ the effects of massage on skin, nails and muscles ▪ the muscles of the lower arm and hand and lower leg and foot ▪ the blood circulation of the lower arm, hand, lower leg and foot ▪ the structure and function of the skin (i.e. dermis, epidermis, subcutaneous layer, appendages) ▪ the structure of the nail unit (i.e. the nail plate, nail bed, matrix, cuticle, lunula, hyponychium, eponychium, nail wall, free edge, the lateral nail fold) ▪ the process of nail growth (i.e. nail formation, growth rate, factors affecting growth, the effects of damage on growth, nail thickness) ▪ the structure and function of the skin (i.e. dermis, epidermis, subcutaneous layer, appendages) ▪ the different types of nail shapes you are likely to come across during manicure work ▪ common skin and nail conditions ▪ how to identify treatable nail and skin conditions (e.g. weak, dry, brittle and ridged nails; dry, split and overgrown cuticles; dry and hard skin) ▪ the importance of regular ongoing maintenance of the artificial nail structure ▪ the importance of knowing when to use primer and

	<p>what type of primer to use</p> <ul style="list-style-type: none"> ▪ the maintenance requirements for artificial nails ▪ how to protect artificial nail structures ▪ how to deal with accidental damage ▪ the contra-actions which may occur during the course of treatment and how to deal with them; allergic reactions and overexposure; bacterial infections; fungal infections; onycholysis (nail separation); lifting of product; premature loss of extension; breaking or splitting of natural nail or nail extension; yellowing of natural nail or nail extension
<p>Unit BT26: Enhance appearance using cosmetic camouflage</p>	<ul style="list-style-type: none"> ▪ the necessary environmental conditions for the camouflage application (i.e. lighting – specifically natural or simulated daylight conditions, heating, ventilation and general comfort) ▪ the structure and function of the skin (i.e. epidermis, dermis, subcutaneous layer) ▪ how to recognise those contra-indications requiring medical referral (e.g. structural changes in the area to be camouflaged, suspicious moles, skin and eye infections) ▪ how to recognise those contra-indications which restrict camouflage application (i.e. infectious conditions adjacent to or in the camouflage area, areas which are sore, tender, open or pustular) ▪ how to select and apply the products stated in the range to meet the needs of individual conditions ▪ attributes and limitations of products (e.g. appearance of applied products under different circumstances such as titanium dioxide and iron oxide in flash photography and dark skins) ▪ the causes and appearance of skin conditions likely to need camouflage (e.g. hypo-pigmentation such as vitiligo, stretch marks; hyper-pigmentation such as melasma, age spots; and erythema such as rosacea, thread veins) ▪ possible contra-actions which may occur during the camouflage application and how to deal with them (e.g. allergic reactions) ▪ how to check the client's understanding and ability to carry out the application themselves ▪ how to advise client on preservation and management of camouflage (including removal of camouflage) ▪ the importance of adapting methods of application to suit the client's needs and lifestyle.
<p>Unit BT27: Design and create images for fashion and photographic make-up</p>	<ul style="list-style-type: none"> ▪ sources of research information and how to access and evaluate them ▪ how to present design plans and images ▪ the importance of presenting your final results in a professional way ▪ how to prepare and adapt the working environment available within the venue

	<ul style="list-style-type: none"> ▪ where to obtain resources ▪ ways in which additional media can be used to complement the overall design image ▪ ways of adapting the product/make-up selection to suit changing circumstances ▪ how to select suitable products for the design requirement ▪ why it is important to evaluate your performance ▪ the areas on which you should collect feedback.
<p>Unit BT28: Set up, monitor and shut down water, temperature and spa facilities</p>	<ul style="list-style-type: none"> ▪ why it is important to maintain standards of hygiene and the principles of avoiding cross-infection ▪ your responsibilities under any local bye-laws relating to water, temperature and spa treatments ▪ the importance of correct use and storage of chemicals required for spa maintenance ▪ the different types and uses of equipment available for water, temperature and spa treatments ▪ the recommended operating temperatures and humidity levels for equipment ▪ the possible dangers of chemical and equipment misuse ▪ the maintenance and monitoring requirements for equipment and materials ▪ the types and uses of treatments in the range ▪ the physiological and psychological effects of spa treatments ▪ the physiological and psychological effects of different types of heat on the skin and body ▪ the physiological and psychological effects of different types of cold on the skin and body ▪ the possible contra-actions which can occur during water, temperature and spa treatment sessions (including; feeling faint, feeling nauseous, skin irritation and headaches) and how to deal with them ▪ the importance of ventilation ▪ how to test and interpret results of water and chemical concentrations ▪ the recommended cleaning intervals for the treatment area and equipment including recommendations for the prevention of water borne infections
<p>Unit BT29: Provide specialist spa treatments</p>	<ul style="list-style-type: none"> ▪ why it is important to maintain standards of hygiene and the principles of avoiding cross-infection ▪ your responsibilities under any local bye-laws relating to water, temperature and spa treatments ▪ the importance of correct use and storage of chemicals required for spa maintenance ▪ understanding the differing client body weight and frame impacts on spa treatment and equipment set up and use ▪ the different types and uses of equipment available for

	<p>water, temperature and spa treatments</p> <ul style="list-style-type: none"> ▪ the recommended operating temperatures and humidity levels for equipment ▪ the possible dangers of chemical and equipment misuse ▪ the maintenance and monitoring requirements for equipment ▪ the types and uses of treatments in the range ▪ the physiological and psychological effects of spa treatments ▪ the physiological and psychological effects of different types of heat on the skin and body ▪ the physiological and psychological effects of different types of cold on the skin and body ▪ the possible contra-actions which can occur during water, temperature and spa treatment sessions (including: feeling faint, feeling nauseous, skin irritation and headaches) and how to deal with them ▪ the importance of ventilation ▪ how to test and interpret results of water and chemical concentrations ▪ the recommended cleaning intervals for the treatment area and equipment including recommendations for the prevention of water borne infections ▪ the different types of wrapping mediums available (e.g. algae, mud, peat, clay, milk products, sand, wine, hay and herbs) ▪ the range and use of materials and equipment available for flotation treatments ▪ the range and use of materials and equipment available for hydrotherapy treatments.
<p>Unit BT30: Provide UV tanning treatments</p>	<ul style="list-style-type: none"> ▪ how to recognise those contra-indications requiring medical referral ▪ how to recognise those conditions which restrict treatment ▪ types of UV tanning equipment and products available ▪ the structure of the skin ▪ how melanin production affects tanning capability ▪ why it is important to protect the hair and eyes during these treatments ▪ the potential dangers and risks of overexposure to UV rays on the skin and body including damage to the eyes, premature ageing of the skin, an immunosuppressive response and increased risk of developing non melanoma skin cancers ▪ the importance of regularly cleaning equipment between each session and why specific cleansers should be used ▪ the importance of removing perfumed products and cosmetics prior to treatments (pre-sensitisation) ▪ possible contra-actions which may occur during the

	<p>treatment and how to deal with them</p> <ul style="list-style-type: none"> ▪ the importance of showering before and after the UV session ▪ how to recognise the effect of overexposure and the four degrees of erythema ▪ how the UV rays create a tanned appearance ▪ how to calculate session times and safe dosage ▪ the importance of following the guidelines of safe usage (Health & Safety Executive)
<p>Unit BT36: Improve the appearance of the skin using micro-dermabrasion</p>	<ul style="list-style-type: none"> ▪ your responsibilities under current relevant health & safety legislation, standards and guidance, e.g. the Care Standards Act, the Health and Safety at Work Act (and any other relevant legislation) ▪ the conditions and contra-indications that require medical approval including; pregnancy, inflamed and infected skin conditions and disorders, active herpes simplex, contagious skin disease, malignant melanoma, medication causing a thinning or inflammation of the skin (e.g. steroids, acutane, retin-A), keloid scars, diagnosed sclerodema, haemophilia, insulin controlled diabetes, epilepsy, circulatory disorders, dysfunction of the nervous system, HIV, undergoing medical treatment ▪ the conditions that will restrict treatment include: tattoos in the treatment area, pigmented naevi, recent micro-dermabrasion or chemical peels, recent scar tissue, varicose veins, cuts, abrasions, bruises, Collagen, Restylane and Botox ▪ the structure and function of skin (i.e. the layers of the epidermis, subcutaneous layer, the dermis, including connective tissues, nerve endings, sweat glands, sebaceous glands, capillaries and hairs) ▪ how ageing affects the skin and limits the effectiveness of treatment ▪ the structure and function of the lymphatic system, including lymphatic vessels, nodes and lymph in the face, neck, limbs and trunk ▪ the principles of lymph circulation ▪ the interaction of lymph and blood within the circulatory system ▪ the structure and location of adipose tissue ▪ the effect of micro-dermabrasion treatment on the skin, circulatory, lymphatic and nervous systems ▪ the skin characteristics and skin types of the different client groups, e.g. white, black, Asian, mixed, Chinese ▪ how to adapt machine systems and variables to suit the different client groups ▪ the importance of performing the first treatment at the lowest setting to evaluate how the client's skin responds ▪ the importance of using the correct ph levels of the products used on the skin after treatment

	<ul style="list-style-type: none"> ▪ the importance of giving correct homecare advice ▪ the importance of a dry and well ventilated working environment during treatment and when storing equipment and consumables ▪ the importance of using high factor sun cream (factor 15 to 30) post treatment ▪ how to select, use and apply different micro-dermabrasion techniques, in line with treatment objectives, including an explanation of the effects on the skin in relation to speed, pressure, vacuum and crystal flow ▪ how to recognise and treat various conditions for the treatment objectives listed in the range, and associated conditions within the range ▪ how to prepare the skin for treatment, e.g. oil free, dry and hair free ▪ the awareness of normal and adverse reactions that may occur during micro-dermabrasion treatments, e.g. erythema, swelling, pin-point bruising
<p>BT43 – Provide Female Intimate Waxing Services</p>	<ul style="list-style-type: none"> ▪ the structure of the skin (i.e. the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels, and sensory nerve ending) and differences in the structure of the skin for different client groups ▪ the function of the skin (i.e. sensitivity, heat regulation, absorption, protection, excretion, secretion and vitamin D production) ▪ the structure of the hair ▪ the basic principles of hair growth (e.g. anagen, catagen, telogen) ▪ the types of hair growth (e.g. terminal, vellus) ▪ the correct medical terminology for female genitalia ▪ the structure of the female genitalia ▪ how to recognise those contra-indications requiring medical referral (e.g. urinary infections, sexually transmitted infections, pubic lice, contagious skin disease, diabetes, oedema) ▪ how to recognise other contra-indications that will prevent treatment but will not require medical referral (e.g. thin and/or fragile skin, scar tissue under six months old, heat rash, sunburn, known allergies to products and ingredients such as rosin found in sticking plasters and wax) ▪ how to recognise those conditions which restrict treatment (e.g. moles, infected in-growing hairs, skin tags, external haemorrhoids and medication) ▪ how to recognise and deal with the contra-actions that can occur as a result of intimate waxing treatments (e.g. bruising, blood spots, abrasions, broken hair, histamine (allergic) reaction, excessive erythema, excessive and diminished re-growth)

	<ul style="list-style-type: none"> ▪ other methods of temporary hair removal (e.g. tweezing, shaving, depilatory creams, electrical depilatory, threading abrasive mitts) and the effect of these methods on the waxing process ▪ why it is important to restrict your conversation to instructions during the intimate waxing service ▪ how to deal with circumstances in which client's behaviour breaches the professional status of the treatment ▪ why it is important to give treatment advice both verbally and in writing and what may happen if treatment advice was not given or is not followed ▪ care and maintenance requirements for intimate waxing treatments and why these are important (e.g. avoidance of heat and friction, use of perfumed and chemical based products, wearing of restrictive clothing, avoidance of touching the treated area and for how long this should be avoided, the avoidance of swimming and other exercise and for how long this should be avoided, personal toilet hygiene) ▪ why it is necessary to give clients clear and specific guidance on the importance of personal toilet hygiene and the avoidance of heat and friction after intimate waxing
<p>BT45 Provide Male Intimate Waxing Services</p>	<ul style="list-style-type: none"> ▪ the structure of the skin (i.e. the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels, and sensory nerve ending) and differences in the structure of the skin for different client groups ▪ the function of the skin (i.e. sensitivity, heat regulation, absorption, protection, excretion, secretion and vitamin D production) ▪ the structure of the hair ▪ the basic principles of hair growth (e.g. anagen, catagen, telogen) ▪ the types of hair growth (e.g. terminal, vellus) ▪ the correct medical terminology for male genitalia ▪ the structure of the male genitalia ▪ how to recognise those contra-indications requiring medical referral (e.g. urinary infections, sexually transmitted infections, pubic lice, contagious skin disease, diabetes, oedema) ▪ how to recognise other contra-indications that will prevent treatment but will not require medical referral (e.g. thin and/or fragile skin, scar tissue under six months old, heat rash, sunburn, known allergies to products and ingredients such as rosin found in sticking plasters and wax) ▪ how to recognise those conditions which restrict treatment (e.g. moles, infected in-growing hairs, skin tags, external haemorrhoids and medication) ▪ how to recognise and deal with the contra-actions that can occur as a result of intimate waxing treatments

	<p>(e.g. bruising, blood spots, abrasions, broken hair, histamine (allergic) reaction, excessive erythema, excessive and diminished re-growth)</p> <ul style="list-style-type: none"> ▪ other methods of temporary hair removal (e.g. tweezing, shaving, depilatory creams, electrical depilatory, threading abrasive mitts) and the effect of these methods on the waxing process ▪ why it is important to restrict your conversation to instructions during the intimate waxing service ▪ how to deal with circumstances in which client's behaviour breaches the professional status of the treatment ▪ why it is important to give treatment advice both verbally and in writing and what may happen if treatment advice was not given or is not followed ▪ care and maintenance requirements for intimate waxing treatments and why these are important (e.g. avoidance of heat and friction, use of perfumed and chemical based products, wearing of restrictive clothing, avoidance of touching the treated area and for how long this should be avoided, the avoidance of swimming and other exercise and for how long this should be avoided, personal toilet hygiene) ▪ why it is necessary to give clients clear and specific guidance on the importance of personal toilet hygiene and the avoidance of heat and friction after intimate waxing
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APPENDIX 1D

OCCUPATIONAL EXPERTISE REQUIREMENTS FOR BEAUTY THERAPY ASSESSORS AND VERIFIERS

1 Introduction

- 1.1 As the Standards Setting Body for the hair and beauty sectors, Habia is responsible for defining the occupational expertise requirements for assessors and verifiers in consultation with employers, centres and Awarding Bodies. The assessor and verifier occupational expertise requirements for the Beauty Therapy NVQs and SVQs are shown below.
- 1.2 Please note that these requirements will take effect from 1 August 2004 and will apply to all assessors and verifiers. This version dated August 2007 supersedes all previous versions and was approved by SSDA.

2 Assessors

2.1 From 1 August 2004 all new assessors must :

- 2.1.1 hold the Level 2 and/or 3 Beauty Therapy NVQs/SVQs or equivalent* plus sufficient relevant post qualification industrial experience that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to assess.

OR

substantial operational experience** that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to assess.

In addition it is recommended that they undertake the qualification as it becomes available.

- 2.1.2 hold or be working towards Units D32 and D33*** to assess the complete Beauty Therapy NVQs/SVQs (those work based assessors only required to make and record observations may hold just D32)

OR

hold or be working towards Unit A1***if carrying out all forms of assessment

OR

hold or be working towards Unit A2 if only carrying out observations in the workplace.

- 2.2 From 1 August 2004 all existing assessors holding just the Level 2 Beauty Therapy NVQ/SVQ will only be able to assess the Level 2 Beauty Therapy NVQ/SVQ. They will not be eligible for internal verifier or external verifier roles.

3 Internal Verifiers

3.1 From 1 August 2004 all internal verifiers must:

3.1.1 hold the Level 2 and/or 3 Beauty Therapy NVQs/SVQs or equivalent* plus sufficient relevant post qualification industrial experience that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to internally verify.

OR

substantial operational experience** that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to internally verify, and

3.1.2 hold Unit A1 or Units D32 and D33 *** and

3.1.3 hold or be working towards Unit V1 or D34

3.1.4 have sufficient experience of assessing Beauty Therapy NVQs/SVQs

4 External Verifiers

4.1 From 1 August 2004 all external verifiers must:

4.1.1 hold the Level 2 and/or 3 Beauty Therapy NVQs/SVQs or equivalent* plus sufficient relevant post qualification industrial experience that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to externally verify.

OR

substantial operational experience** that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to externally verify, and

4.1.2 hold Unit A1 or Units D32 and D33*** and

4.1.3 hold or be working towards Unit V2 or D35, and are strongly advised to hold Unit V1 or D34

4.1.4 have sufficient experience assessing and/or internally verifying Beauty Therapy NVQs/SVQs

NOTE: Assessors and verifiers will only be able to assess and verify those units in which they have formally demonstrated their competence or have shown evidence of substantial operational experience.

5 Assessors and verifiers for non-technical units who are not beauty therapists

5.1 There are several units in the NVQs/SVQs that cover generic skills, assessed in a beauty therapy context. Some centres use assessors and verifiers from other occupations to assess and verify these.

5.2 Assessors of these units must meet the requirements laid down by these Standards Setting Bodies in their own Assessment Strategies.

5.3 For non-technical beauty therapy Habia units the same criteria as for assessors and internal verifiers who are beauty therapists will apply, inserting the relevant NVQ/SVQ or equivalent qualification or experience and the relevant occupational area. This

does not apply to external verifiers who will always be beauty therapists for the Habia units. For the sake of clarification, beauty therapy units cannot be internally verified by non-beauty therapists.

i) Occupational Expertise Requirements for Assessors who are not beauty therapists.

Non Beauty Therapy Assessors must have the relevant Level NVQs/SVQs plus sufficient relevant industrial experience or substantial operational experience that is current and appropriate to the level(s) of NVQ/SVQ units they are intending to assess. Where individuals have qualifications other than the relevant NVQs/SVQs, they or their centre should contact their Awarding Body to determine the acceptability of these qualifications. Assessors will only be able to assess those units in which they have formally demonstrated their competence or have shown evidence of operational experience.

For NVQs, QCA requires that assessors hold Unit A1 or A2 (if just recording observations) or Unit D32 and/or Unit D33. New assessors must have a clear action plan for achieving Unit A1 and/or Unit A2 within eighteen months of beginning assessment duties. Assessment decisions by assessors who are still working towards certification must be supported by an assessor or verifier who has gained certification. This can be achieved by checking a sample of assessment decisions.

For SVQs, SQA requires that assessors be occupationally competent and must hold Units A1 and/or A2***, or be working towards them or hold or be working towards D32 and/or D33.

Please note that Habia generally requires assessors hold or are working towards Unit A1 or hold D32 and D33. In addition, in this case where the assessor does not have a beauty therapy background, then she/he must have obtained a working knowledge of the beauty therapy industry as the context for assessment, through briefing or induction, or ideally through a period of experience in a salon.

ii) Occupational Expertise Requirements for Internal Verifiers who are not beauty therapists.

Non Beauty Therapy internal verifiers must have the relevant Level NVQs/SVQs plus sufficient relevant industrial experience or substantial operational experience that is current and appropriate to the level(s) of NVQ/SVQ units they are intending to internally verify. Where individuals have qualifications other than the relevant NVQs/SVQs, they or their centre should contact their Awarding Body to determine the acceptability of these qualifications. They must also have at least sufficient experience of assessing the relevant NVQs/SVQs or relevant units.

For NVQs, QCA requires that internal verifiers hold Unit V1 or D34 and, it is recommended, also hold Unit A1 or D32 and D33. New internal verifiers must have a clear action plan for achieving Unit V1 within eighteen months of beginning internal verification. Without an appropriately qualified internal verifier, the centre must understand that it cannot submit claims for certification to the Awarding Body.

For SVQs, SQA requires that internal verifiers be occupationally competent and must hold or be working towards Unit V1 or hold or be working towards D34. Unit A1 or D33 is also desirable***

Please note that Habia requires all internal verifiers hold Unit A1 or D32 and D33*** and hold or are working towards V1 or D34. In addition, in this case where the internal verifier does not have a beauty therapy background, then she/he must have obtained a working knowledge of the beauty therapy industry as the context for assessment, through briefing or induction, or ideally through a period of experience in a salon.

In this case where assessors and/or internal verifiers do not have a beauty therapy background, then a period of experience in a salon or attending beauty therapy specific event(s) relevant to the units being assessed or verified will help them become more familiar with the requirements of the beauty therapy industry.

* Where individuals have qualifications other than the Beauty Therapy NVQs/SVQs, they or their centre should contact their Awarding Body to determine the acceptability of these qualifications. Assessors will only be able to assess those units in which they have formally demonstrated their competence or have shown evidence of operational experience.

** substantial operational experience means substantial hands on work served within the beauty therapy industry. This can include time in any role in the beauty therapy industry, for example as a therapist, trainer, lecturer, assessor, verifier or salon manager/owner.

*** In Scotland, SQA also recognise the Teacher Training Qualification for Secondary Education (TQSE) and the Teacher Training Qualification for Further Education (TQFE) in place of D32 and D33, provided they have been gained from a Scottish teacher training institution.

APPENDIX 1E

REQUIREMENTS FOR CONTINUING PROFESSIONAL DEVELOPMENT FOR ASSESSORS AND VERIFIERS OF BEAUTY THERAPY TECHNICAL UNITS

From 1 September 2001 as a condition of centre approval and continuing centre approval, centres were required to establish an ongoing, fully resourced Staff Development Plan, capable of supporting the Habia CPD requirement. (Preferably, such a Staff Development Plan should link to IIP or other formally recognised quality assurance systems.)

Assessors and verifiers must be able to demonstrate to the Awarding Body how they keep their beauty therapy technical skills and knowledge up-to-date, and to the occupational level at which they are assessing and/or verifying. Continuing Professional Development (CPD) must take place throughout the careers of assessors and verifiers.

This must include the completion of a minimum number of hours CPD in each twelve month period using activities approved for CPD (see below).

The minimum, annual CPD requirement for assessors and verifiers is as follows:

A total, minimum requirement for 30 hours CPD per annum which does not have to be consecutive.

The CPD requirement must be carried out in one or a combination of the types of activities listed below. No activity will carry a 'double hours' allowance.

- 'hands on' delivery of beauty therapy services to fee paying clients in a commercial salon that can be shown to develop individual skill and knowledge levels
- undertaking technical beauty therapy training that develops new and/or updates existing skills and/or knowledge levels
- further beauty therapy qualification work

The following activities will not count towards CPD:

- reading the trade press and books
- listening to tapes and watching videos

(However, the above are recommended for background knowledge to support CPD but are not approved for inclusion in the CPD hours requirement)

Individuals must provide relevant and suitable evidence that CPD has taken place within each 12 month period to be measured from 1 September - 31 August.

EXPLANATORY NOTES:

- i. technical beauty therapy training - external and internal workshops and training sessions are eligible.
- ii. commercial salon - this is defined as a salon where the majority of beauty therapists are already qualified and the main function of the salon is not training and assessment. If a training salon in a centre is closed and reopened as a commercial salon e.g. during holiday periods, then this is an acceptable location for CPD to be undertaken. If there is any doubt as to the acceptability of the arrangement, guidance should be sought from Habia
- iii. beauty therapy qualification work - the aim of this option is to encourage assessors and verifiers to gain new skills or to update current ones. Work undertaken for this option must lead to a formally assessed and accredited qualification or unit of an NVQ/SVQ.

A nominal 30 hours has been allocated to the achievement of any beauty therapy unit qualification in any one CPD year. The same unit should not be taken twice during the lifetime of any particular NVQ/SVQ or repeated within any 5 year period.

Other activities may be acceptable for CPD for which prior approval should be gained from Habia.

CALCULATING CPD HOURS

- a) CPD for existing assessors and verifiers is measured within each 12 month period, taken from 1 September – 31 August each year.
- b) CPD hours for new assessors and verifiers shall be measured from the date their duties commence.
- c) Assessors and verifiers who take leave from assessment or verification duties during any twelve month period will be able to collect CPD pro rata.
- d) The CPD hours for part-time assessors and verifiers will be calculated pro rata based on a nominal 37 hour week. However, a minimum of 5 hours CPD in any twelve month period must be carried out by all part-time assessors and verifiers.

For example, an assessor contracted for 7 hours/week : $7 \div 37 \times 100 = \text{approx. } 20\%$ of a full time assessor. $20\% \times 30 \text{ hours} = 6 \text{ hours CPD in any 12 month period.}$
- e) A nominal time of 30 hours per NVQ/SVQ unit achieved has been set, regardless of the unit.
- f) If you are an assessor and a verifier, you only have to do the minimum of 30 hours CPD, not 60 hours.
- g) All External Verifiers must complete a minimum of 30 hours CPD per annum regardless of actual hours worked as an External Verifier.

APPENDIX 1F

NATIONALLY AGREED MAXIMUM SERVICE TIMES FOR BEAUTY THERAPY NVQ/SVQ ASSESSMENT PURPOSES

The 2003 revised National Occupational Standards (NOS) require that technical services are carried out 'in a commercially viable time'. To ensure consistent NVQ/SVQ assessment practices, Habia has developed a nationally agreed set of maximum service times for certain, critical services for each level of NVQ/SVQ. These times are shown below.

Note: Specialist treatments may require longer following manufacturers' instructions.

Range of Service Times for Level 1 Beauty Therapy

Please note that the type, depth and breadth of services listed are those described in the Level 1 Beauty Therapy Standards only.

	Service (excluding consultation and preparation)	Max Time (mins)
1.	Facial treatment	45
2.	Nail treatment	30

Range of Service Times for Level 2 Beauty Therapy

Please note that the type, depth and breadth of services listed are those described in the Level 2 Beauty Therapy Standards only.

	Service (excluding consultation and preparation)	Max Time (mins)
1.	Eyebrow shape	15
2.	Eyelash tint	20
3.	Facial	60
4.	Make-up	45
5.	Manicure	45
6.	Pedicure	45
7.	Artificial nail extensions – full set of tips	120
8.	Artificial nail maintenance	90
9.	Natural nail overlay	90
10.	Eyebrow wax	15
11.	Underarm wax	15
12.	Half leg wax	30
13.	Bikini line wax	15
14.	Arm wax	30
15.	Full leg wax	50
16.	Half leg, bikini, underarm	60
17.	Full leg, bikini, underarm	75
18.	Facial, including lash tint and eyebrow shape	80
19.	Eyebrow shape and lash tint	30
20.	Eyebrow tint	10
21.	Eyebrow tint, shape and lash tint	30
22.	Indian Head Massage	45
23.	Ear piercing	15
24.	Nail art	5 - 10 (per nail)
25.	Facial and make-up	90
26.	False lashes	20

Range of Service Times for Level 3 Beauty Therapy

Please note that the type, depth and breadth of services listed are those described in the Level 3 Beauty Therapy Standards only.

	Service (excluding consultation and preparation)	Max Time (mins)
1.	All facial treatments	60
2.	Nail extensions	120
3.	Partial body massage	30
4.	Full body massage (without head)	60
5.	Full body massage (including head)	75
6.	Aromatherapy body massage	60
7.	Aromatherapy face and body massage	75
8.	Indian Head Massage	45
9.	Hollywood wax	60
10.	Brazilian wax	45
11.	Shaping wax	45
12.	Male wax (lower back, buttocks, anal area, scrotum, penis)	60

Note: Standard service times have not been specified for the following treatments:

- Camouflage treatment
- Make-up design
- Maintain and camouflage of nail structures
- Nail art services
- Nail art design
- Epilation
- Body treatments
- Spa treatments

This is because service times will vary dramatically according to client needs, treatment requirements and service delivery.

APPENDIX 1G

SPECIAL REQUIREMENTS: INTIMATE WAXING

Owing to the nature of Units BT43 and BT45 and given the current Child Protection Legislation, it is required that both candidates and their clients **MUST** be 18 years of age and over.

It is also required candidates for these units already:

- hold a National Framework recognised waxing qualification AND/OR
- at least sufficient commercial waxing experience

It is preferred that candidates meet both the above criteria.