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Diploma for Beauty Specialists

Learning Outcomes

Learning Outcomes of the Qualification's Units:

- Unit 1: iUBT434 Professional Conduct & Business Awareness
- Unit 2: iUBT429 Manicure & Pedicure
- Unit 3: iUBT430 Waxing
- Unit 4: iUBT427 Skincare & Eye Treatments
- Unit 5: iUBT428 Make-up

Purpose of this document:

This document outlines the learning outcomes for each unit within the Diploma for Beauty Specialists. It provides learners, tutor, and assessors with a clear understanding of the knowledge, skills, and competencies to be achieved upon successful completion of the qualification.

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Unit 1 - iUBT434: Professional Conduct & Business Awareness

LO1 Know the principles of ethical practice:

Contra-indications related to the treatment; Impact of advertising whilst accepting the legal implications of the relevant laws; Professional indemnity insurance; Ensuring strict client confidentiality and compliance with current data protection regulations; The need of consent; The concept of 'Code of Ethics'; CPD, Continual Professional Development; Professionalism; The importance of maintaining professional working relationship with other learners/therapists; The necessity of building up a rapport with medical profession; The necessity of building up a rapport with other therapists.

LO2 Know the requirements for health, safety and hygiene:

The contents of a first aid box; The necessity of having an accident book and how to complete it; When and how to call for medical assistance in case of accidents; The supervision of evacuation of the salon/clinic in the case of a fire alarm; The types of fire-fighting equipment required in a salon; How to carry out basic safety checks for electrical equipment; The importance of professionally checking electrical equipment on an annual basis; Hygienic terms; The types of infections; The methods of sterilisation/sanitisation available and their uses relevant to the treatment including their advantages and disadvantages; Personal hygiene; Aspects of waste disposal for the salon/clinic; The importance of being aware of blood transmitted disease.

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LO3 Know the importance of communication:

The importance of a consultation card relevant to the treatment; Ethical and client-led conversations; Contra-indications relevant to each treatment; Client care; The importance of keeping accurate client records; The vitality of effective client communication; How to deal with negative feedback; Effective questioning techniques; The different types of body language; Completing each treatment in a commercially acceptable time; The importance of maintaining good working relationships.

LO4 Know the principles of finance and costing:

The basic business principles; The importance of stock control systems; How to cost a treatment; The benefits of offering a course of treatment.

LO5 Know the principles of retail:

How to plan the interior of a salon/clinic; The importance of providing a retail service; The role of the receptionist; Basic salon/clinic security implications.

LO6 Know effective sales and marketing techniques:

The basic principles of selling; The main forms of advertising; The development and planning of a talk/demonstration.

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Unit 2 – iUBT429: Manicure & Pedicure

LO1 Be able to carry out a consultation and understand and recognise contra-indications, diseases and disorders:

Being able to explain and demonstrate the importance of consultation and communicating with the client tactfully and accurately: Checking for contra-indications; Noting the condition of the nails; Noting the shape of the nail; Planning a treatment programme; Discussing any homecare and aftercare.

Being able to explain and demonstrate how to check for contraindications and recognise any nail diseases and disorders: Transverse ridges; Vertical ridges; Beau's lines; Blue nail; Psoriasis; Eczema; Tinea pedis; Paronychia (Whitlow); Sepsis; Leuconychia; Flaking; Onychorrhexis; Pitting; Pterygium; Onychia; Hang nail; Lamella dystrophy; Onychomycosis (Tinea Ungium); Onychoptosis; Onychatrophia; Onychogryphosis; Onychauxis; Onychocryptosis; Onychophagy; Koilonychia; Warts; Verucca; Loss of skin sensation; Diabetes; Allergies; Chilblains; Corns; Cuts; Abrasions; Broken bones.

Being able to understand and recognise those general contra-indications to manicure and pedicure requiring medical permission or the client to sign an informed consent form prior to the treatment and those contra-indications that restrict treatment:

Contra-indications requiring medical permission – in circumstances where medical permission cannot be obtained, clients must sign an informed consent form stating that the treatment and its effects have been fully explained to them and confirm that they are willing to proceed without permission from their GP: Haemophilia; Any condition already being treated by a GP, dermatologist or another practitioner; Medical oedema; Arthritis; Nervous/Psychotic conditions; Recent operations on hands or feet; Diabetes; Inflamed nerve; Undiagnosed pain; Acute Rheumatism.

Contra-indications that restrict treatment: Fever; Infectious or contagious diseases; Under the influence of recreational drugs or alcohol; Diarrhoea or vomiting; Any known allergies; Undiagnosed lumps and bumps; Inflammation; Cuts; Severe Bruising; Abrasions; Scar tissues (2 years for major operation and 6 months for a small scar); Recent fracture (minimum 3 months); Sunburn; Repetitive strain injury; Carpal Tunnel Syndrome; Severely bitten or damaged nails; Nail separation; Eczema; Psoriasis.

LO2 Be able to perform manicure and pedicure treatments:

Being able to explain and demonstrate how to sanitise client's hands: Wiping hands with sanitiser, checking out for contra-indications.

Being able to explain and demonstrate use of the following products and tools: Nail enamel remover; Nail scissors; Clippers; Emery boards; Cuticle massage cream/oil; Cuticle remover; Hoof stick/tipped orange wood stick; Cuticle knife; Cuticle nipper; Buffers; Pedicure rasp (hard skin removal); Hard skin remover (for pedicure); Massage oil/cream; Buffing paste; Nail strengtheners; Base coat; Nail enamels (Frosted, Cream, Light, Dark, French manicure); Top coat; Quick driers.

Being able to explain and demonstrate use of specialised nail treatments: Hot oil; Paraffin wax; Hand masks; Foot masks; Exfoliation; Thermal mittens/boots.

Being able to explain and demonstrate how to file the nails correctly according to the nail shape: Hold the file at a 45-degree angle to the nail; Use the file in one direction only, i.e. side centre; Follow the shape of the cuticle as a guide; Toenails to be filed straight across; Bevel nails where appropriate.

Being able to explain and demonstrate how to decide upon the correct nail shape: Follow the shape of the cuticle; Abide by the client's wishes (Oval, Square, Pointed, Almond, Round).

Being able to explain and apply cuticle cream or oil: Ensure that product is taken from any containers with use of either a spatula, orange wood stick or similar; Tops should be replaced on bottles; Apply cuticle cream/oil to the cuticle area and massage in; Minimise wastage; Soak the hand/foot.

Being able to explain and apply cuticle remover and demonstrate use of the hoof stick, tipped orange wood stick, cuticle knife and nippers: Ensure that product is taken from any containers with use of either a spatula, orange wood stick or similar; Tops should be replaced on bottles; Apply the cuticle remover to the cuticle area; Use the hoof stick in small circular movements; Use the wet cuticle knife in small circular movements flat against the nail; Use the cuticle nippers on any 'dead' cuticle left adhering to the nail plate.

Being able to explain and demonstrate how to massage the hand and lower arm/foot and lower leg demonstrating the classical massage movements where appropriate: Massage medium (Hand cream or Oil) performing Effleurage, Petrissage, Tapotement (pedicure only), Passive movements.

Being able to explain and demonstrate removal of any excess product: Hot compress or damp cotton wool; Toner; 'Squeak' the nail clean with enamel remover.

Being able to explain and demonstrate buffing: Ensure that paste is taken from any containers with the use of either a spatula, orange wood stick or similar; Apply a small amount of paste in the centre of the nail (size of a pin head); Buff in one direction only from the matrix to the tip of the nail.

Being able to explain and apply base coat and top coat: Apply base/topcoat to the nail in 3-5 strokes.

Being able to explain and apply two coats of enamel, smoothly, evenly and ensuring a hairline gap around the nail wall: Apply 2 coats of coloured enamel in 3-5 strokes per nail; Ensure a hairline gap is left around the nail; Ensure the enamel is not on the skin or cuticle.

Being able to explain and demonstrate use of minimal correction to ensure a good finished result: Remove any enamel which may be on the skin or cuticle with enamel remover and use either an orange wood stick or cotton bud.

Being able to explain and demonstrate correct hygiene throughout the treatments: Tools must be sterilised/sanitised before use in either – Autoclave, Glass bead, UV cabinet , Chemicals; Tools should be wiped with sanitiser or equivalent before going from hand to hand; Products must only be taken from containers with a spatula, orange wood stick or cotton bud; Tops must be replaced on products; Tools must be replaced in the steriliser after use.

Being able to understand how to work within time limits acceptable to industry: 30 minutes for a full manicure, and 40 minutes for a full pedicure.

Being able to explain and demonstrate how to update client records accurately: Check details from the previous visit to note any changes, particularly any contra-indications; Note the condition of the nails, treatment and colour of enamel.

Being able to briefly explain nail technology systems: Gel, Acrylic, Fibre glass, Silk wraps.

LO3 Knowing the skeletal system in relation to manicure and pedicure treatments:

Being able to explain the position (with the aid of diagrams) of the following bones:

Lower arm and hand: Ulna, Radius, Carpals, Metacarpals, Phalanges

Lower leg and foot: Tibia, Fibula, Tarsals, Metatarsals, Phalanges

LO4 Knowing the circulatory and lymphatic systems in relation to manicure and pedicure treatments:

Being able to explain (with the aid of diagrams) the position of the following:

Arteries of the lower arm and hand: Radial, Ulnar

Veins of the lower arm and hand: Basilic, Cephalic

Arteries of the lower leg and hand: Anterior tibial, Posterior Tibial Veins of the lower leg and foot: Anterior tibial, Posterior Tibial.

Being able to explain the position and function of the following lymph nodes:

Lower arm: Supratrochlear

Lower leg: Popliteal

LO5 Knowing the structure of the nail:

Being able to explain the position and function of the following structures: Free edge; Hyponychium; Eponychium; Peronychium; Lunula; Mantle; Cuticle; Nail plate; Nail bed; Nail fold; Matrix; Nail wall.

Being able to explain the process by which the nail grows: Formed in the matrix; Consists of 3 layers /or 3 main parts (Nail Root/Matrix, Nail plate , Free edge); Grows forward and dovetails into the nail bed – the nail plate lies on the nail bed (the dermis) which contains nerves and blood vessels. It is made up of cells which are pushed forwards from the matrix – stratum germinativum, new cells are produced from the matrix into stratum spinosum. Partly keratinised cells, which are losing fluid and contain a nucleus, that is beginning to disintegrate from the nail in the area of the lunula – stratum granulosum. Dead horny keratinised cells make up the nail plate – stratum lucidum and stratum corneum.

Being able to explain the factors which affect nail growth: Health; Age; Diet; Medication; Climate; Damage; Lifestyle.

Being able to explain the following nail diseases and disorders: Transverse ridges; Vertical ridges; Beau's lines; Blue nail; Psoriasis; Eczema; Tinea Ungium; Tinea Pedis; Paronychia (Whitlow); Sepsis; Leuconychia; Flaking; Dry/Brittle nails; Pitting; Pterygium; Onychia; Hang nail; Lamella dystrophy; Onychomycosis; Onychatrophia; Onychogryphosis; Onychauxis; Onychocryptosis; Onychophagy; Koilonychia; Warts; Verucca; Loss of skin sensation; Diabetes; Allergies; Chilblains; Corns; Cuts; Abrasions; Broken bones.

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LO6 Knowing the muscular system in relation to manicure and pedicure treatments:

Being able to explain (with the aid of diagrams) the position and action of the following muscles:

Lower Arm: Supinator Radii Brevis, Flexor Carpi Radialis, Extensor Carpi Radialis, Extensor Carpi Ulnaris, Flexor Carpi Ulnaris, Flexor Carpi Digitorum, Extensor Carpi Digitorum, Muscles of Thenar eminence, Muscles of Hypothenar eminence.

Lower Leg: Gastrocnemius, Soleus, Tibialis Anterior, Peroneus Longus, Flexor Digitorum Longus, Extensor Digitorum Longus, Tendon of Achilles.

LO7 Know the circulatory and lymphatic systems in relation to manicure and pedicure treatments:

Being able to explain (with the aid of a diagram) the position and function of the following:

Epidermis: Stratum Corneum, Stratum Lucidum, Stratum Granulosum, Stratum Spinosum (Malpighian Layer), Stratum Germinativum (Basal Layer).

Dermis: Blood supply, Lymphatic Supply, Hair follicle, Hair, Sebaceous gland, Sweat glands (Eccrine and Apocrine), Sensory nerve endings, Dermal papilla, Erector Pili Muscle.

Subcutaneous/Adipose Layer: the structure and function of the fatty layer found underneath the Dermis.

Case Studies / Portfolio of evidence containing:

5 treatment evidence (on 5 different clients) to be treated with a manicure or pedicure: 1 of which must include a French polish and 1 a specialised treatment with a buffed finish.

They should include: Consultation; Medical history; Treatment details; Client feedback; Aftercare and home care advice including retail recommendations.

Treatments should be evidenced through the consultation form.

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Unit 3 – iUBT430: Waxing

LO1 Be able to prepare for waxing treatments:

Protecting the floor; Protecting the couch; Ensuring the wax is ready at the required temperature; Preparing strips to remove the wax; Ensuring that sanitiser is available; Surgical gloves; Powder; Pre-wax lotion; After-wax lotion; Scissors; Tweezers; Cotton wool; Tissues; Ensuring that there are no trailing wires for the wax pot; Ensuring that there are no bare wires; Ensuring that there is no water in the area; Ensure that the thermostat is working on the wax pot; Ensuring that gloves are worn at all times; A different spatula must be used for each area; Changing the spatula immediately and disposed appropriately where blood spots occur.

LO2 Be able to carry out a consultation and understand contra-indications to waxing treatments:

Taking a full consultation; Checking medical history; Discussing the treatment plan; Discussing homecare and aftercare advice.

Knowing all contra-indications requiring medical permission – in circumstances where medical permission cannot be obtained, clients must sign an informed consent form stating that the treatment and its effects have been fully explained to them and confirm that they are willing to proceed without permission from their GP: These include: Cardiovascular conditions (thrombosis, phlebitis, hypertension, hypotension, heart conditions); Haemophilia; Any condition already being treated by a GP or another practitioner; Medical oedema; Osteoporosis; Nervous/Psychotic conditions; Recent operations; Diabetes; Trapped/Pinched nerve; Inflamed nerve; Severe varicose veins.

Knowing all contra-indications that restrict treatment: Fever; Infectious or contagious diseases; Under the influence of recreational drugs or alcohol; Any known allergies; Infectious skin diseases and disorders; Undiagnosed lumps and bumps; Localised swelling; Inflammation; Cuts; Bruises; Abrasions; Scar tissues (2 years for major operation and 6 months for a small scar); Sunburn; Self-tan; Heat rash; Hairy moles; Hormonal implants; Recent fractures (minimum 3 months); Neuralgia; Hypersensitive skin; Loss of skin sensation; Vascular skin; Varicose veins; 48 hours after sun tanning; Bell's Palsy; Abnormal hair growth.

Being able to explain the cause of ingrowing hairs and treatment: Dry skin, Shaving, Hairs break off when waxing, Lack of exfoliation and moisturiser.

LO3 Be able to carry out waxing treatments:

Being able to explain and demonstrate the use of the following products: Hot wax; Cool wax; Sugaring; Pre/after-wax lotions; Disposable spatulas; Cotton wool; Waxing strip; Tweezers.

Being able to treat the following areas: Under arms; Back; Chest; Abdomen Bikini Line; Brazilian; Hollywood; Leg; Lip; Chin; Forearms; Eyebrows.

Being able to explain and demonstrate how to sanitise the area to be treated: By wiping over the area to be waxed with sanitiser or with a pre-wax treatment.

Being able to understand the composition and ingredients of the following depilatory products and explain their appropriate use: Cool wax; Hot wax.

Being able to explain and demonstrate how to test the products on self and client: The heated wax should be tested on the therapist's wrist first to check the temperature; The heated wax should then be tested on the wrist or the ankle of the client to ensure it is not too hot.

Being able to explain and apply cool wax evenly, sparingly and ensuring cost effectiveness throughout: Spatula to be held at right angles to the area to be waxed ensuring that wax drips from the top to the bottom of the spatula ensuring a thin even distribution of wax.

Being able to explain and apply hot wax evenly: Checking length of hair (minimum 1cm); Checking direction in which hairs grow; Applying wax first against the hair growth.

Being able to explain and demonstrate removal of the product: Using the correct method for the product selected; Minimising discomfort to the client.

Being able to explain and demonstrate how to clear the area effectively: Do not re-wax over an area which has already been treated with hot wax; Tweeze out any stray hairs.

Being able to explain and demonstrate safe disposal of waste: Where blood spots may have occurred, care must be taken with the waste to include: - Place in a plastic bag - Put in a separate bin (containing chemical) to be taken away and incinerated.

Being able to explain and demonstrate the ability to work quickly and efficiently to a standard acceptable by the industry. The treatment should be performed in a commercially acceptable time: Full leg 40 minutes; Half leg 20 minutes; Underarm and bikini 15 minutes each; Back 30 minutes ; Chest 20 minutes; Abdomen 15 minutes; Brazilian 30-40 minutes; Hollywood 45-50 minutes; Lip 10 minutes; Chin 10 minutes; Forearms 20 minutes; Eyebrows 15 minutes.

Being able to explain and demonstrate accurate updating of client records: Contra-indications must be checked and noted appropriately; A note should be made of the area(s) to be waxed; Any notes regarding skins reaction should be made at the end of the treatment; Home care advice.

Being able to explain the advantages and disadvantages of the use of each product: Composition; Working temperature (cool wax 43°C, hot wax 68°C); Method of application; Method of removal.

Being able to explain temporary forms of depilation: Tweezing; Shaving; Depilatory creams; Sugaring; Threading; Depilation machine.

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LO4 Knowing the structure and functions of the skin in relation to waxing treatments:

Being able to explain (with the aid of a diagram) the position and function of the following: Epidermis (Stratum Corneum, Stratum Lucidum, Stratum Granulosum, Stratum Spinosum/Malphigian, Stratum Germinitivum/Basal layer); Dermis; Blood supply; Lymphatic supply; Hair follicle; Hair; Sebaceous gland; Sweat glands (Eccrine and Apocrine); Sensory nerve endings; Dermal papilla; Erector pili muscle.

Being able to explain the Subcutaneous/Adipose layer: The structure and function of the fatty layer underneath the Dermis.

Being able to explain the functions of the skin: Secretion, Heat regulation, Absorption, Protection/Acid Mantle, Elimination, Sensation, Vitamin D formation (7-dehydrocholesterol).

Being able to explain the functions and formation of the acid mantle: Composition and formation.

Being able to explain the main skin cancers: Basal Cell Carcinoma; Squamous Cell Carcinoma; Malignant Melanoma.

Being able to explain and recognise skin diseases/disorders and show knowledge of whether they are contraindicated or not:

Infestations: Scabies, Lice

Congenital: Atopic eczema, Atopic dermatitis, Psoriasis

Bacterial: Acne vulgaris, Impetigo, Acne rosacea, Boils, Folliculitis

Viral: Warts, Verruca, Herpes simplex, Herpes zoster

Fungal: Tinea corporis, Tinea pedis

Pigmentation disorders: Vitiligo, Albinism, Chloasma, Ephilides, Lentigo, Moles (papilloma), Naevae, Port wine stain, Leucoderma

General disorders: Urticaria, Allergic reaction

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LO5 Knowing the structure of the hair:

Being able to explain (with the aid of diagrams) the position and function of the following and their relevance to waxing: Cuticle; Cortex; Medulla; Inner Root Sheath; Huxley's layer; Henle's layer; Outer Root Sheath; Vitreous Membrane; Connective Tissue; Dermal Papilla.

Being able to explain types of hair: Lanugo; Vellus; Terminal.

Being able to explain the factors which may affect hair growth: Congenital; Hormonal; Topical; Systemic; Non-systemic; Medication.

Being able to explain the hair growth cycle: Anagen; Catagen; Telogen

LO6 Knowing the endocrine system in relation to waxing treatments:

Being able to explain (with the aid of diagrams) the position of the main endocrine glands and hormones secreted:

Pituitary: Oxytocin, Antidiuretic hormone (ADH) (vasopressin), Prolactin, Human Growth Hormone (HGH), Thyroid Stimulating Hormone (TSH), Adrenocorticotrophic Hormone (ACTH), Luteinising Hormone (LH), Follicle Stimulating Hormone (FSH), Melanin Stimulating Hormone (MSH)

Thyroid gland: Thyroxin

Parathyroid glands: Parathormone

Thymus: T lymphocytes

Pineal: Serotonin (Also regulates the pituitary gland)

Islets of Langerhans: Insulin

Adrenal glands: Adrenal medulla – Adrenalin, Noradrenalin; Adrenal cortex - Corticosteroids

Ovaries: Oestrogen, Progesterone

Testes – Testosterone

Being able to explain the effects of hormones on hair growth: Puberty; Pregnancy; Menopause

Being able to explain the effect of hormones on the hair growth cycle: Testosterone and hormones secreted from the adrenal cortex.

Being able to explain the menstrual cycle: First menstrual phase; Second proliferate phase; Third secretory phase.

Being able to explain the effect of stress on the endocrine system and effects on hair growth: Effects of the parasympathetic and sympathetic nervous systems.

Being able to explain the causes and effects of the following diseases and disorders: Addison's syndrome; Amenorrhoea; Cushing's Syndrome; Menopause; Pre-menstrual Syndrome; Polycystic Ovarian Syndrome; Stress.

Case Studies / Portfolio of evidence containing:

Evidence of 5 treatments using warm/cool and hot wax as appropriate; including one treatment per client on each of the following areas:

Full leg, Bikini line, Underarm, Forearm, Lip, Chin

They should include: Consultation; Medical history; Treatment details; Client feedback; Home care advice including recommendations for ongoing treatment plan.

Treatments should be evidenced through the consultation form.

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Unit 4 – iUBT427: Skincare & Eye Treatments

LO1 - Be able to carry out a consultation and recognise contraindications to skincare and eye treatments:

Taking into account the following: private comfortable area, positive body language, positioning of the client (no barriers between therapist and client), good communication skills, use of open and/or closed questions where appropriate, trust, professionalism, confidence, enthusiasm, confidentiality, Informed consent, signed consent of parent/guardian for a minor, any contra-indications to treatment, client lifestyle, client profile, importance of planning a treatment programme taking into account any diverse needs - cultural, religious, moral and social beliefs, age, gender, disability, Compliance with current data protection regulations;

Recognising the contra-indications to facial/eye treatment requiring medical permission or the client to sign an informed consent form prior to treatment, and those contra-indications that restrict treatment; Contra-indication requiring GP consent include: Medical oedema, Nervous/psychotic conditions, Epilepsy, Recent facial operations affecting the area, Diabetes, Skin cancer, Slipped disc, Undiagnosed pain, When taking prescribed medication, Whiplash, Chemotherapy.

Recognising contra-indications that restrict treatment including: Fever, Contagious or infectious diseases, Under the influence of recreational drugs or alcohol, Diarrhoea and vomiting, Any known allergies, Eczema, Undiagnosed lumps and bumps, Localised swelling, Inflammation, Cuts, Bruises, Abrasions, Scar tissues (2 years for major operation and 6 months for a small scar), Sunburn, Hormonal implants, Recent fractures (minimum 3 months), Sinusitis, Neuralgia, Migraine/headache, Hypersensitive skin, Botox/dermal fillers (1 week following treatment), Hyperkeratosis, Skin allergies, Styes, Watery eyes, Dry eye syndrome, Trapped/pinched nerve affecting the treatment area, Inflamed nerve, Eye infection, Conjunctivitis, Glaucoma, Trichotillomania, Contact lenses;

Recognising other conditions which may affect facial/eye treatment including: Cardiovascular conditions, Thrombosis, Phlebitis, Hypertension, Hypotension, Heart conditions, Any condition already being treated by a GP, Osteoporosis, Arthritis, Any dysfunction of the nervous system, Bell's palsy, Postural deformities, Acute rheumatism, Cervical spondylitis, Thyroid disturbance.

LO2 Be able to carry out superficial cleansing and toning:

Selecting the appropriate product for the client's skin type/characteristics: Lotions, Milks, Cream cleansers, Gel cleansers, Eye make-up remover - For the following skin types: White, Black, Asian, Mixed, Dry, Oily, Combination, Mature skin, Young skin – For the following conditions: Sensitive, Dehydrated, Loss of elasticity, Loss of muscle tone, Blemishes, Congested, Ageing, Crow's feet, Broken capillaries, Open pores, Comedones, Milia, Pustules, Papules, Hyperpigmentation, Hypopigmentation, Dermatosis papulosa nigra, Pseudofolliculitis, Keloids, Ingrowing hairs, Scarring, Thin skin, Small moles.

Demonstrating the appropriate cleansing routine ensuring all make-up and products are removed: Eye make-up, Lipstick, Full face and neck sequence to cleanse the whole area, A double cleanse should be performed, Cleanser should be removed after each cleanse with damp cotton wool or sponges, Appropriate toner applied after second cleanse and blotted with tissues.

Selecting the appropriate product (astringent/toners) for the skin type/condition/colour: Rosewater, Witch hazel, Orange flower, Distilled water, Commercial toner/tonics - the following methods of application can be used: Cotton wool, Gauze, Spray.

LO3 Be able to carry out deep cleansing:

Selecting the appropriate product for the client's skin type: Enzymatic peel, AHAs, Exfoliation products, Brush cleansing.

Demonstrating appropriate application and removal of the product: Enzymatic peel, AHAs, Exfoliation products.

Demonstrating how to extract any comedones or milia with the following methods: Use of sterilised cotton wool or sterilised tissues, Comedone extractor (in countries where it is acceptable), Lance (in countries where it is acceptable), Gloves must be worn.

LO4 Be able to carry out pre-heat treatments:

Selecting the appropriate pre-heat treatment for the client's skin type and administer it safely and effectively using: Steam, Hot towels/compress, Infrared, their benefits, effects and safety precautions.

LO5 Be able to carry out skin analysis:

Demonstrating the use of a magnifying lamp: Checking the lamp is in good working order, Ensuring the lamp is cleaned, Ensuring the client's eyes are sufficiently protected.

Recognise skin diseases/disorders and show knowledge of whether they are contraindicated: Infestations (Scabies, Lice), Congenital (Atopic eczema, Atopic dermatitis, Psoriasis), Bacterial (Acne vulgaris, Impetigo, Acne rosacea, Boils, Folliculitis), Viral (Warts, Herpes simplex, Herpes zoster), Fungal (Tinea corporis), Pigmentation disorders (Vitiligo, Albinism, Chloasma, Ephilides, Lentigo, Moles/Papilloma, Naevae, Port wine stain, Leucoderma), General disorders (Urticaria, Allergic reaction).

Explaining the environmental and lifestyle factors that can affect the condition of the skin: UV damage, Diet, Smoking, Alcohol Central heating, Air conditioning, Pollution, Stress, Current regime.

Updating the client record card accurately: Recheck contra-indications and any contra-actions from previous treatment or products on each visit, Re-analyse the skin type and change the treatment plan accordingly, Note the benefits of the treatment on each visit, Products recommended, purchased and used, Record and store in line with current data protection legislation and professional code of conduct.

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LO6 Be able to enhance the appearance of eyebrows and lashes:

Demonstrating how to produce written evidence of a patch test: Patch test should be performed 48 hours before treatment, Details should be recorded on the client record card and signed by the client, The darkest colour tint should be mixed and placed either behind the ear or in the crease of the elbow, Any reaction should be noted over the next 48 hours, If there is any skin reaction the eyelash/brow tint should not take place.

Demonstrating how to assess the client's hair colour and skin tone: Hair – Fair, Red/auburn, Dark, Grey; Skin tone – Olive, Medium, Fair, Dark.

Demonstrating how to protect the surrounding skin: Petroleum jelly, Damp cotton wool pads/preformed eye shields.

Demonstrating how to ensure the mixture of tint and hydrogen peroxide follows the manufacturer's instructions, minimising wastage of product: Check manufacturer's instructions, however on average 1 centimetre of tint and 2 drops of 10 volume peroxide is sufficient for the lashes and brows.

Demonstrating the application of tint to lashes and eyebrows using orange wood stick, tint brush or cotton bud: Ensure the tint covers the roots as well as the ends of the lashes and does not cover the skin, Dry eye pads should be used to cover the eye lash tint, The tint should be left for a maximum of 10 minutes on the lashes (following manufacturer's instructions), For the eyebrows the tint should be removed immediately after tint application to the second eyebrow is complete and the technique repeated as required to meet the client's needs and desired effect.

Demonstrating thorough removal of tint after the required development time with minimum discomfort to the client using: Damp cotton wool, Tipped orange wood stick or damp cotton buds, An eye wash may be used only if the client has tint in the eye.

Outline aftercare and home care advice: Do not rub eyes, Recommendations for future treatments and intervals.

Recognising contra-indications with reasons - All the general contra-indications plus any form of eye infection to include: If there has been any reaction to the patch test, eye lash tint will be contra-indicated; Any eye surgery (approximately 6 months); Conjunctivitis; Stye; Hay fever; Watery eye; Dry eye syndrome; Very nervous clients; Blepharitis; Trichotillomania; Glaucoma; Thyroid disturbance; Infectious and non-infectious skin conditions specific to the eye and surrounding area to include: Atopic eczema, Atopic dermatitis, Psoriasis; Contact lenses must be removed.

LO7 Be able to bleach facial hair:

Explaining the benefits of bleaching facial hair: Lightening superfluous dark facial hair particularly on the upper lip, chin and sides of the face.

Demonstrating the method of applying the bleach: Patch test 48hrs before treatment (inner arm or behind the ear), Ensuring that product is used sparingly and wastage is minimised, Ensure area is cleansed and dry prior to application, Ensuring that bleach is only applied to the hair and not the skin, Ensuring that the bleach is removed efficiently after the required treatment time, Ensuring any reactions are recorded, Follow manufacturer's instructions and mix accordingly.

LO8 Be able to tweeze and shape the eyebrows:

Assess client requirements and demonstrate appropriate measuring: Measure from the corner of the nose to the inside corner of the eye and any brow hairs extending beyond this point should be removed, Measure from the corner of the nose to the outside corner of the eye and any hairs extending from the outside corner of the eye to the hairline should be removed, The arch should be at the highest point when the pupil of the eye is looking straight ahead.

Explain different eyebrow shapes: Arched, Angular, Straight, Round, Thin, Medium, Thick.

Demonstrating how to communicate with the client regarding the desired outcome: Keep a mirror to hand and keep checking with the client throughout, Check the client is happy with the finished result.

Demonstrating how to pre-heat the area where appropriate: Facial steam, A cotton wool pad soaked in warm water can be held over the area to dilate the hair follicle.

Demonstrating how to support the area keeping the skin taut: The skin should be held taut between the index and middle finger to ensure the skin does not move when the hairs are tweezed.

Demonstrating removal of hairs in the direction of growth minimising client discomfort: Skin should be held taut, Hairs must be tweezed out in the direction of the hair growth, Gloves must be worn.

Apply aftercare where appropriate: A soothing lotion should be wiped over the area to prevent any possible infection, Avoidance of activities which may cause contra-actions, Products for home use, Future treatment needs and intervals between treatments.

Demonstrating how all equipment should be sterilised/sanitised accordingly: Hands must be washed in antiseptic soap; Tweezers can be sterilised in a variety of ways - Glass bead, Autoclave, UV cabinet, Chemical immersion and should be wiped with antiseptic during the treatment.

LO9 Be able to perform a facial massage:

Select a suitable massage medium and explain the benefits: Oil, Cream, Gel.

Demonstrating all classical massage movements including when and how to adapt the movements to meet the needs of the client's skin and muscle tone: Effleurage, Petrissage, Frictions, Tapotement, Vibrations.

Demonstrating massage techniques, varying pressure and maintaining fluidity: Vary the pressure and technique according to the area being massaged and maintain fluidity and continuity throughout the sequence.

Demonstrating an effective removal of the massage medium using: Damp cotton wool, Hot towels, Toner, Sponges.

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LO10 Be able to apply facial masks:

Clay masks - Select and mix ingredients minimising wastage and stating their effects and benefits: Calamine, Kaolin, Magnesium carbonate, Fuller's earth, Rosewater, Orange flower water, Distilled water, Witch hazel, Glycerine, Almond oil.

Natural masks - Select appropriate ingredients for the client's skin type and condition and state their effects and benefits: Avocado, Egg white, Honey, Banana, Cucumber, Strawberry, Natural yoghurt, Wheatgerm, Lemon juice, Oatmeal, Milk, Tea bags, Egg yolk, Kiwi, Carrot, Aloe.

Commercial masks – Demonstrate underpinning knowledge of ingredients for the client's skin type and condition and state their effects and benefits: In accordance with manufacturer's instructions, the main active ingredients of any mask applied to the skin should be known.

Specialised masks – Demonstrate underpinning knowledge of ingredients for the client's skin type and condition and state their effects and benefits: Thermal/mineral masks, Peel off masks, Setting masks, Non-setting masks, Geloid, Clay, Paraffin wax, Hot oil as per manufacturer's instructions, Collagen masks.

For all masks listed - Demonstrate application of masks evenly and neatly ensuring full coverage of the area to be treated: The whole area should be covered including the neck and décolleté, Lips should be moisturised, Damp eye pads over the eyes.

Demonstrating the removal of masks thoroughly after treatment time has elapsed (according to manufacturer's instructions where appropriate): Remove with warm water and sponges or hot towels, Tone, Blot with tissue, Apply appropriate moisturiser.

Advise on aftercare and home care: Avoid activities that may cause contra-actions, Advise on suitable products and their uses, Time intervals between treatments.

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LO11 The Structure, functions and pathologies of the skin:

Being able to explain (with the aid of a diagram) the position and function of the following: Epidermis (Stratum Corneum, Stratum Lucidum, Stratum Granulosum, Stratum Spinosum/Malphigian, Stratum Germinitivum/Basal layer); Dermis (Blood supply, Lymphatic supply, Hair follicle, Hair, Sebaceous gland, Sweat glands [Eccrine and Apocrine], Sensory nerve endings, Dermal papilla, Collagen, Elastin, Histeocytes, Mast cells, Fibroblasts, Erector pili muscle**.**

Being able to explain the Subcutaneous/Adipose layer: The structure and function of the fatty layer underneath the Dermis.

Being able to explain the functions of the skin: Secretion, Heat regulation, Absorption, Protection/Acid Mantle, Elimination, Sensation, Vitamin D formation (7-dehydrocholesterol).

Being able to explain the functions and formation of the acid mantle: Composition and formation.

Being able to explain and recognise the different skin types/conditions and devise treatment programmes for them: White, Black, Asian, Mixed, Dry, Oily, Combination, Mature skin, Young skin, Sensitive, Dehydrated, Broken capillaries, Open pores, Comedones, Milia, Pustules, Papules, Hyperpigmentation, Hypopigmentation.

Being able to explain and recognise skin diseases/disorders:

Infestations: Scabies, Lice

Congenital: Atopic eczema, Atopic dermatitis, Psoriasis

Bacterial: Acne vulgaris, Impetigo, Acne rosacea, Boils, Folliculitis

Viral: Warts, Herpes simplex, Herpes zoster

Fungal: Tinea corporis

Pigmentation disorders: Vitiligo, Albinism, Chloasma, Ephilides, Lentigo, Moles (papilloma), Naevae, Port wine stain, Leucoderma

General disorders: UV damage, Urticaria, Allergic reaction, Hyperkeratosis.

Being able to explain the main skin cancers and all possible causes of: Basal Cell Carcinoma; Squamous Cell Carcinoma; Malignant Melanoma.

LO12 The Structure of the cell and tissue types:

Understand the structure of the cell and explain their functions: Cell membrane, Nuclear membrane, Nucleus, Nucleolus, Protoplasm, Cytoplasm, Centrosome, Centromere, Chromosome, Golgi apparatus, Mitochondria, Lysosome, Centrioles, Ribosomes, Vacuoles, Endoplasmic reticulum.

Define histology and mitosis: Histology – the study of cells, Mitosis - Cell division.

Describe the structure and explain the function of tissue types: Epithelial, Nervous, Muscular, Connective tissue (Areolar, Adipose, White fibrous, Yellow elastic, Bone).

LO13 The Skeletal system in relation to the cranium, face, shoulder, chest and neck:

Describe the structure of bone: Cancellous, Compact.

Describe the types of bone with examples: Long, Short, Flat, Irregular, Sesamoid.

Describe the position of the bones of the cranium and face:

Cranium: Parietal, Frontal, Ethmoid, Sphenoid, Occipital, Temporal

Facial: Nasal, Zygomatic, Maxilla, Lacrimal, Turbinate, Palatine, Mandible, Vomer

Shoulder: Clavicle, Scapula, Humerus

Chest: Sternum

Neck: Cervical vertebrae

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LO14 The Muscular system in relation to the cranium, face, shoulder, chest and neck:

Being able to explain the types of muscular tissue and their functions and define the terms used: Voluntary, Involuntary, Cardiac, Origin, Insertion, Action, Tone, Tension, Fatigue, Atrophy, Hypertonic.

Describe the position and explain the action of the muscles of the face and neck: Orbicularis oculi, Orbicularis oris, Masseter, Buccinator, Risorius, Levator anguli oris, Levator labii superioris, Depressor anguli oris (triangularis), Depressor labii inferioris, Mentalis, Zygomaticus, Temporalis, Nasalis, Procerus, Corrugator, Frontalis, Occipitalis, Pterygoids, Trapezius, Platysma, Sternocleidomastoid, Deltoid, Pectoralis major and minor.

LO15 The Nervous system in relation to facial skincare treatments:

Being able to explain the types nerves: Motor, Sensory, Mixed nerves, Neurone.

Describe the position and explain the function of the main cranial nerves: 5th, 7th and 11th cranial nerves.

LO16 The Circulatory system in relation to facial skincare treatments:

Describe the structure of arteries and veins and explain the function of the components of blood: Blood plasma, Erythrocytes, Leucocytes, Platelets, Thrombocytes, Arteries, Arterioles, Veins, Venules, Capillaries.

Describe the position of the main arteries and the main veins of the head and neck:

Main arteries of the head and neck: Thyroid, Facial, Temporal, Lingual, Occipital, Maxillary

Main veins of the head and neck: Middle temporal, Superficial temporal, Maxillary, Anterior facial, Common facial, Internal jugular, External jugular

Being able to explain the interrelationship between blood and lymph and their role in improving skin and muscle conditions: The way in which the 2 systems support each other i.e. blood transports nutrients to the cells and tissues, the lymphatic system transports additional waste from the cells and tissues.

LO17 The Lymphatic system in relation to facial skincare treatments:

Describe the structure and explain the functions of lymph: The content of lymph and its functions including transporting waste which the circulatory system cannot cope with; Purifies toxins; Adds antibodies, antitoxins and lymphocytes; Rejoins the circulatory system; Part of the immune system; secondary circulation.

Describe the structure and explain the function of the structures of the lymphatic system: Lymphocyte, Lymphatic capillary, Lymphatic vessel, Lymph node, Lymphatic duct.

Describe the position of the main lymph nodes of the head and neck: Superficial and deep cervical, Submandibular, Anterior and posterior auricular, Occipital, Buccal, Sub-mental.

LO18 The Cosmetic science of skincare products:

Being able to explain and give examples of the sources and uses of cosmetic ingredients: Oils, Fats and waxes, Emulsions, Emulsifying agents, Humectant, Emollient, Talc.

Being able to explain the different ingredients and differences between products, stating their effects and benefits: Cleansing milks/creams, Facial washes, Lotions, Day cream, Night cream, Eye cream, Neck cream, Toner, Astringent, Gels, Lip balms, Serums/ampoules.

Being able to explain the main mask ingredients: Clays - Fuller's earth, Calamine, Kaolin, Magnesium carbonate, Witch hazel, Rosewater, Orange flower water, Distilled water, Glycerine, Almond oil; Commercial masks; AHA's; Exfoliators.

Being able to explain the effects of natural ingredients: Banana, Avocado, Apple, Pear, Strawberry, Egg yolk, Egg white, Natural yoghurt, Honey, Oatmeal, Kiwi, Cucumber, Milk, Wheatgerm, Lemon juice, Teabags, Carrot, Aloe.

Case Studies / Portfolio of evidence containing:

5 treatment evidence (on 5 different clients)

They should include: Consultation; Medical history; Skin analysis; Treatment details (skincare and eyelash/eyebrow treatments); Client feedback; Aftercare and home care advice including retail recommendations.

Treatments should be evidenced through the consultation form.

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Unit 5 – iUBT428: Make-up

LO1 Be able to recognise skin types and characteristics:

Explain and assess the client's skin type/characteristics: White; Black; Asian; Mixed; Dry; Oily; Combination; Mature skin; Young skin.

Explain and assess the client's skin condition/texture: Sensitive; Dehydrated; Loss of elasticity; Loss of muscle tone; Blemishes; Ageing; Crow's feet; Broken capillaries; Open pores; Comedones; Milia; Pustules; Papules; Hyperpigmentation; Hypopigmentation; Dermatosis papulosa nigra; Pseudofolliculitis; Keloids; Ingrowing hairs.

LO2 Be able to consult and communicate with the client:

Explain and demonstrate the importance of consulting and communicating with the client tactfully and accurately: Contact details; Medical history; Private comfortable area; Positive body language; Positioning of the client (no barriers between themselves and client); Good communication skills; Use of open and/or closed questions where appropriate; Trust; Professionalism, confidence and enthusiasm; Confidentiality; Informed consent; Any contra-indications to treatment; Client lifestyle; Client profile; Importance of planning and agreeing a treatment programme taking into account the client's religious, moral and social beliefs; Legal requirements regarding the treatment of minors, the age of consent which may vary nationally or locally; Signed consent of parent or guardian for a minor and need for parent/guardian to remain present throughout the consultation and treatment of a minor; Skin analysis; Make-up chart; Home/skincare advice; Compliance with current data protection regulations and professional code of conduct.

Explain and demonstrate how to check for skin diseases/disorders: Infestations (Scabies, Lice); Congenital (Atopic eczema, Atopic dermatitis, Psoriasis); Bacterial (Acne vulgaris, Impetigo, Acne rosacea, Boils, Folliculitis); Viral (Warts, Herpes simplex, Herpes zoster); Fungal (Tinea corporis); Pigmentation disorders (Vitiligo, Albinism, Chloasma, Ephilides, Lentigo, Moles (papilloma), Naevae, Port wine stain, Leucoderma); General disorders (Urticaria, Allergic reaction, Hyperkeratosis, Erythema).

Explain and recognise those contra-indications to make-up requiring medical permission or the client to sign an informed consent form prior to the treatment, and those contra-indications that restrict treatment:

Contra-indications requiring medical permission – in circumstances where medical permission cannot be obtained, clients must sign an informed consent form stating that the treatment and its effects have been fully explained to them and confirm that they are willing to proceed without permission from their GP: Medical oedema; Nervous/Psychotic conditions; Recent operations on face; Diabetes; Skin cancer; Slipped disc; Undiagnosed pain; When taking prescribed medications; Whiplash.

Contra-indications that restrict treatment: Fever; Infectious or contagious diseases; Under the influence of recreational drugs or alcohol; Diarrhoea or vomiting; Any known allergies; Eczema; Undiagnosed lumps and bumps; Localised swelling; Inflammation; Cuts; Severe Bruisies; Abrasions; Scar tissues (2 years for major operation and 6 months for a small scar); Sunburn; Hormonal implants; Recent fractures (minimum 3 months); Sinusitis; Neuralgia; Migraine/headaches; Hypersensitive skin; Botox/dermal fillers (1 week following treatment); Recent advanced aesthetic treatments (e.g. skin peeling, skin needling); Hyperkeratosis; Skin allergieis; Styes; Watery eyes; Dry eye syndrome; Trapped/pinched nerve affecting the treatment area; Inflamed nerve; Eye infection e.g. conjunctivitis.

Explain and recognise contra-indications to eye make-up with reasons: All the general contra-indications plus any form of eye infection to include: Any eye surgery (approximately 6 months); Conjunctivitis; Stye; Hay fever; Watery eye; Dry eye syndrome; Very nervous clients; Blepharitis; Infectious and non-infectious skin conditions specific to the eye and surrounding area including atopic eczema, atopic dermatitis and psoriasis.

LO3 Be able to prepare the skin for treatment and select and apply make-up to meet the desired result:

Explain and select make-up according to the occasion, client colouring, age and preferences: Corrective; Day; Evening; Special occasion; Bridal.

Explain and demonstrate how to prepare the skin accordingly: Cleanse; Tone; Blot the skin; Moisturise; Pre-base/primer (suitable for the client's skin type/condition).

Describe how lighting may affect the application and finished result of make-up: Blue/fluorescent; Yellow/filament; Daylight.

Explain and identify skin tones: Fair; Medium; Dark; Olive.

Explain and identify face shapes: Oval; Square; Heart; Round; Long; Diamond; Pear.

Explain and identify eye shapes and use appropriate correction: Hooded; Large; Small; Round; Close set; Prominent; Drooping; Deep set; Wide apart.

Explain and identify nose shapes and use appropriate correction: Long; Wide; Short; Nasolabial folds.

Explain and identify lip shapes and use appropriate correction: Large/full; Thin; Asymmetrical mouth.

Explain and demonstrate use of colour corrective creams: Lilac based; Green based; Orange based; Yellow based; Concealer.

Explain and demonstrate how to conceal any flaws on the skin: Dark circles under eyes; Spots; Blemishes; Uneven pigmentation; Broken capillaries; Puffy eyes.

Explain and demonstrate how to contour and highlight accordingly: Blusher; Shader; Highlighter.

Explain airbrushing: Techniques; Following manufacturer's instructions; Aftercare.

Explain and demonstrate appropriate use of cosmetics:

The appropriate cosmetics should be selected according to the skin type to include: Pre-base/primer; Corrective base creams; Foundation (Cream, Matte, Liquid, Mousse, Gel, Light reflecting, All-in-one, Mineral); Concealer; Powder; Blusher; Shader; Highlighter; Eye shadow; Eyeliner (Pencil, Liquid, Gel); Brow products; Mascara; Lip liner; Lipstick; Lip gloss.

All products should be decanted using disposable applicators where possible from the container onto a palette before application to the skin to reduce any incidence of cross infection. However, powders may be used straight from the container and sprayed with isopropyl alcohol after use in line with current industry standards and practice.

Explain and demonstrate how to produce a suitable/appropriate finished result for the client's needs: Pre-base/primer; Corrective base creams; Foundation; Concealer; Powder; Blusher; Shader; Highlighter; Eye shadow; Eyeliner (Pencil, Liquid, Gel); Brow products; Mascara; Lip liner; Lipstick; Lip gloss (where appropriate).

Explain and demonstrate how to work within time limits acceptable to the industry: A cleanse and day make-up should take a maximum of 30 minutes.

Explain the possible reactions to make-up (contraactions):

Adverse skin reaction/urticaria/rash/irritated skin; Watery/itchy eyes; Excessive erythema.

Explain how to update client records accordingly: Contra-indications/contra-actions; Products used, recommended and purchased; Make-up chart; Client feedback; Record and store in line with current data protection legislation and professional code of conduct.

Explain and demonstrate appropriate methods of sterilisation/sanitisation for the tools used: Sponges; Brushes; Disposable applicators; Airbrushes; UV cabinet; Sterilising fluid; Alcohol spray; Autoclave.

LO4 Know cosmetic science in relation to skin care products:

Explain and give examples of the sources and uses of cosmetic ingredients: Oils; Fats and waxes; Emulsions; Emulsifying agents; Humectant; Emollient; Talc.

Describe the difference between and uses of different types of skincare products: Cleansing milks/creams; Lotions; Exfoliators; Day cream; Night cream; Eye cream; Neck cream; Toner; Astringent; Gels; Facial wash; Lip balm; Serums/ampoules.

Explain the main ingredients in colour cosmetics: Eye shadows (Frosted, Matt, Cream, Powder, Mineral); Eyeliner (Pencil, Liquid, Gel); Blusher; Lipstick (Cream, Frosted, Gloss, Matt); Lip liner; Lip gloss; Powder; Foundations (Matt, Compact, Mousse, Silk, Liquid, All-in-one, Light reflecting, Gel, Mineral); Concealers; Camouflage creams; Pre-base/primer; Mascara.

Case Studies / Portfolio of evidence containing:

5 treatment evidence (on 5 different clients) to cover the range: Corrective, Day, Evening, Special occasion, Bridal, Practical examination.

They should include: Consultation; Medical history; Skin analysis; Treatment details (including make-up chart detailing products used); Before and after photographs; Client feedback.

Treatments should be evidenced through the consultation form.