



Provide pedicure treatments

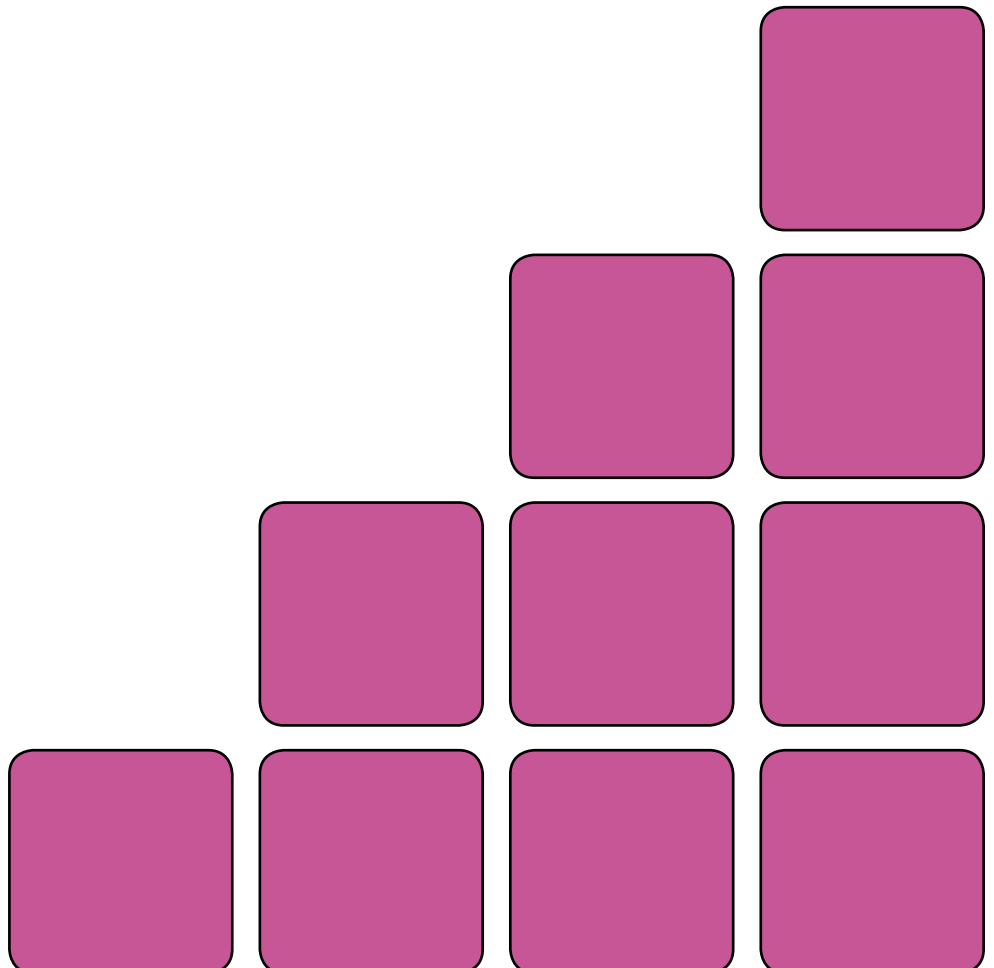
UV20471

R/601/4448

Learner name:

Learner number:

VRQ



UV20471

Provide pedicure treatments

This unit is about providing pedicure services to clients. It covers consulting with the client, recognising any contra-indications, preparing for the service and producing a service plan. It also covers filing the nails, applying skin and cuticle treatments, cleaning and drying the feet, removing excess hard skin, massaging the foot and lower leg, and providing a suitable nail finish.

You will need to maintain effective health, safety and hygiene throughout your work.

Level

2

Credit value

5

GLH

48

Observation(s)

3

External paper(s)

2



Provide pedicure treatments

Learning outcomes

On completion of this unit you will:

1. Be able to prepare for pedicure treatments
2. Be able to provide pedicure treatments

Evidence requirements

1. *Environment*
Evidence for this unit must be gathered in a real or realistic working environment.
2. *Simulation*
Simulation is not allowed in this unit.
3. *Observation outcomes*
Competent performance of 'Observation' outcomes must be demonstrated to your assessor on **at least three occasions**.
4. *Range*
All ranges must be practically demonstrated or other forms of evidence produced to show they have been covered.
5. *Knowledge outcomes*
There must be evidence that you possess all the knowledge and understanding listed in the 'Knowledge' section of this unit. This evidence may include projects, assignments, case studies, reflective accounts, oral/written questioning and/or other forms of evidence.
6. *Tutor/Assessor guidance*
You will be guided by your tutor/assessor on how to achieve learning outcomes and ranges in this unit. All outcomes and ranges must be achieved.
7. *External paper*
Knowledge and understanding in this unit will be assessed by an external paper. The criteria that make up this paper are highlighted in white throughout this unit. **There are two external papers that must be achieved.**

Achieving observations and range

Achieving observation outcomes

Your assessor will observe your performance of practical tasks. The minimum number of observations required is indicated in the evidence requirements section of this unit.

Criteria may not always naturally occur during a practical observation. In such instances you will be asked questions to demonstrate your competence in this area. Your assessor will document the criteria that have been achieved through oral questioning.

Your assessor will sign off an outcome when all criteria have been competently achieved in a single client service.

Achieving range

The range section indicates what must be covered. Ranges should be practically demonstrated as part of an observation. Where this is not possible other forms of evidence may be produced. All ranges must be covered.

Your assessor will document the portfolio reference once a range has been competently achieved.

Maximum service times

The following maximum service times apply to this unit:

Pedicure	50 minutes
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Observations

Outcome 1

Be able to prepare for pedicure treatments

You can:

- a. Prepare yourself, the client and work area for pedicure treatment
- b. Use suitable consultation techniques to identify treatment objectives
- c. Carry out a nail and skin analysis
- d. Provide clear recommendations to the client
- e. Select products, tools and equipment to suit client treatment needs, skin types and nail conditions

** May be assessed through oral questioning.*

Observation	1	2	3
Date achieved			
Criteria questioned orally			
Portfolio reference			
Assessor initials			
Learner signature			



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Outcome 2

Be able to provide pedicure treatments

You can:

- a. Communicate and behave in a professional manner
- b. Follow health and safety working practices
- c. Position yourself and client correctly throughout the treatment
- d. Use products, tools, equipment and techniques to suit client treatment needs, nail and skin conditions
- e. Complete the treatment to the satisfaction of the client
- f. Record the results of the treatment
- g. Provide suitable aftercare advice

*May be assessed through oral questioning.

Observation	1	2	3
Date achieved			
Criteria questioned orally			
Portfolio reference			
Assessor initials			
Learner signature			



Range

*You must practically demonstrate that you have:

Used all consultation techniques	Portfolio reference
Questioning	
Visual	
Manual	
Reference to client records	
Dealt with a minimum of 1 necessary action	Portfolio reference
Encouraging the client to seek medical advice	
Explaining why the service cannot be carried out	
Modifying the service	
Applied all types of foot and nail treatments	Portfolio reference
Paraffin wax	
Foot masks	
Thermal boots	
Exfoliating products	
Applied all types of nail finish	Portfolio reference
Dark colour	
French	
Provided all types of advice	Portfolio reference
Suitable aftercare tools and products and their use	
Avoidance of activities which may cause contra-actions	
Recommended time intervals in between nail services	

*It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.

Developing knowledge

Achieving knowledge outcomes

You will be guided by your tutor and assessor on the evidence that needs to be produced. Your knowledge and understanding will be assessed using the assessment methods listed below:

- Observed work
- Witness statements
- Audio-visual media
- Evidence of prior learning or attainment
- Written questions
- Oral questions
- Assignments
- Case studies

Where possible your assessor will integrate knowledge outcomes into practical observations through oral questioning.

Achieving the external paper

The external papers will test your knowledge of the criteria highlighted in white. **A pass mark of 70% must be achieved.** Criteria not achieved will be identified to your tutor/assessor. You will then be orally questioned or asked to produce other forms of evidence as **all unit criteria must be achieved.**

Your assessor will complete the following table when the 70% pass mark has been achieved.

Paper	Date achieved	Assessor initials
1 of 2		
2 of 2		

Knowledge



Outcome 1

Be able to prepare for pedicure treatments

You can:	Portfolio reference / Assessor initials*
f. Describe salon requirements for preparing yourself, the client and the work area	
g. Describe the environmental conditions suitable for pedicure treatments	
h. Describe different consultation techniques used to identify treatment objectives	
i. Explain the importance of carrying out a nail and skin analysis	
j. Describe how to select products, tools and equipment to suit client treatment needs, skin and nail conditions	
k. Identify nail and skin conditions	
l. Describe the contra-indications which prevent or restrict pedicure treatments	

**Assessor initials to be inserted if orally questioned.*

Requirements highlighted in white are assessed in the external paper.



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Outcome 2

Be able to provide pedicure treatments

You can:	Portfolio reference / Assessor initials*
h. State how to communicate and behave in a professional manner	
i. Describe health and safety working practices	
j. Explain the importance of positioning yourself and the client correctly throughout the treatment	
k. Explain the importance of using products, tools, equipment and techniques to suit clients treatment needs, nail and skin conditions	
l. Describe how treatments can be adapted to suit client treatment needs, nail and skin conditions	
m. Describe the different massage techniques and their benefits	
n. State the contra-actions that may occur during and following treatments and how to respond	
o. State the importance of completing the treatment to the satisfaction of the client	
p. State the importance of completing treatment records	
q. State the aftercare advice that should be provided	
r. Describe diseases and disorders of the nail and skin	
s. Describe the structure and functions of the nail and skin	

*Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.



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Outcome 2 (continued)

Be able to provide pedicure treatments

You can:	Portfolio reference / Assessor initials*
t. Describe the structure and function of the muscles of the lower leg and foot	
U. Describe the structure and function of the bones of the lower leg and foot	
V. Describe the structure and function of the arteries and veins of the lower leg and foot	
W. Describe the structure and function of the lymphatic vessels of the lower leg and foot	

**Assessor initials to be inserted if orally questioned.*

Requirements highlighted in white are assessed in the external paper.

Unit content



This section provides guidance on the recommended knowledge and skills required to enable you to achieve each of the learning outcomes in this unit. Your tutor/assessor will ensure you have the opportunity to cover all of the unit content.

Outcome 1: Be able to prepare for pedicure treatments

Management of health and safety at work:

Clean up spillages, report slippery surfaces, remove/report obstacles, ensure good all round access to trolleys and equipment, sterilise/disinfect tools, equipment and work surfaces, wear personal protective equipment.

Electricity at work – checking/visual check of equipment, no trailing wires, portable appliance testing.

Manual handling – moving stock, lifting, working heights, unpacking, posture, deportment, balance weight, preserve back, prevent slouching.

Towels – clean for every client, place dirty towels in covered bin.

Liability insurance – employer's, public, professional indemnity.

Reporting of injuries, diseases and dangerous occurrences – accident book, reporting diseases, local byelaws, code of conduct, risk assessment.

Control of substances hazardous to health – replace lids, ensure ventilation for vapour and dust, avoid overexposure to chemicals, use chemicals correctly, follow storage, handling, use and disposal, correctly dispose of contaminated waste/products (in a closed top bin), check end date on packaging, store away from heat, damp and direct sunlight, follow relevant manufacturer's instructions, no smoking, eating or drinking.

Health and safety legislation: Data protection, electricity at work, employer's

liability (compulsory insurance), fire precautions, first aid at work, health and safety at work, local government miscellaneous provisions, occupier's liability, local byelaws.

Regulations: Control of substances hazardous to health, management of health and safety at work, manual handling, personal protective equipment, reporting of injuries, diseases and dangerous occurrences, workplace (health and welfare).

Hazards and risks: A hazard is something that has the potential to cause harm, a risk is the likelihood of a hazard happening.

Employer responsibility: Current and valid liability insurance, display health and safety rules (covering staff, employees, clients and fire evacuation), provide regular training, accurate record keeping, monitoring.

Hazards: Something with potential to cause harm, requiring immediate attention, level of responsibility, report, nominated personnel, duty to recognise/deal with hazards.

Equipment – only used for intended purpose, safe usage, handling, storage, cleaning, lifting, visual checks, worn, faulty, repairs, maintenance, portable appliance testing, correct disposal of contaminated waste, records.

Security (cash): Staff training, point of sale, regular banking, in transit.

Security (people): Staff, clients, visitors,



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Outcome 1: Be able to prepare for pedicure treatments (continued)

children, personal belongings, systems (security, emergency evacuation, storage, client records, business information).

Risk: Likelihood of a hazard happening, risk assessment, determine the level of risk, preventative measures, reduce a potentially harmful situation, judgement of salon hazards, who/what is at risk, level of risk, interpret results, conclusions, record findings, regular reviews.

Reasons for risk assessment: Staff, visitors, client health and safety, safe environment, minimise hazards and risks, requirement of legislation.

Hygiene:

General – sterilise and sanitise tools, disinfect work surfaces, cover cuts and abrasions, sanitise therapist's hands before and after treatments, sanitise with sprays and gels, clean towels between clients, place dirty towels in covered bin, use disposable towels, dispense products with a spatula, pump or spray, use disposables wherever possible, no smoking, personal hygiene, replace loose lids (uncapped bottles and pots).

Sterilisation – (metal implements) autoclave, glass bead, chemical, UV cabinet for storage only.

Disinfection – heat or chemical methods, bactericides, fungicides, viricides, UV cabinet for storage only.

Disposal of waste – single use items, pedal bin with a liner, spillages and unused chemicals, contaminated waste, hazardous waste, environmental protection.

Therapist posture and deportment:

Correct posture when sitting, lifting and carrying, working methods to avoid

Repetitive Strain Injury (RSI), hand exercises, standing posture (even weight distribution), client comfort, maintain modesty, client correctly positioned to get maximum benefit from treatment, ensure therapist's positioning delivers appropriate techniques, appropriate space between client and technician, prevent injury, optimum results, allow for visual checks.

Work area: Clean and hygienic, height adjustable chair, correct posture, correct couch height, lighting, ventilation, noise, music, temperature, ambience, no trailing wires, no obstructions, tools and equipment in a safe working position for therapist.

Client preparation: Protect client clothing, ensure client positioned correctly and comfortably, respect privacy and modesty.

Communication:

Verbal – speaking manner and tone, professional, supportive, respectful, sensitive to client, open questioning related to treatment.

Non-verbal – eye contact, body language, listening.

Record keeping: Accurate appointment systems, stationery, loyalty, rewards, acknowledgement of occasions, consultation record keeping, contra-indications, signatures, refer to existing records, information clear, accurate and in logical order (name, address, contact numbers, age range, reason for treatment, occupation, sport/hobbies, medical history, allergies/hypersensitivity, contact lenses, contra-actions, contra-indications, skin sensitivity tests, adaptations and modifications, recommendations, requirements, treatment plan), update record at the end of the



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Outcome 1: Be able to prepare for pedicure treatments (continued)

treatment, update at each visit, maintained electronically, paper records.

Professional appearance: Clean professional uniform, closed-in footwear, no jewellery, no piercings, hair (neatly tied back, fringe secured), light day make-up, personal hygiene and cleanliness (shower/bath, cover cuts and abrasions, deodorant or antiperspirant), oral hygiene (clean teeth, fresh breath), nails (good condition and maintained).

Professional ethical conduct: Polite, cheerful and friendly manner, friendly facial expressions, positive attitude, eye contact, open body language, client relations, confidentiality, respect for colleagues and competitors, avoid gossip, pride in work, punctuality, employer and client loyalty.

Consultation techniques: Client requirements and technician/therapist recommendations (for longevity of nails), client satisfaction, client expectations and aftercare (longevity of nails), protection of investment, cleanse treatment area to identify condition of skin and nails, remove nail enamel, visual, question, listen, client card reference.

Recommendations to client: Explain treatment (the process, outcomes), advise client of suitable treatment, further treatments to enhance nail and skin appearance, agree colour selection for nails.

Nail and skin analysis: Visual and manual examination of the condition of the feet, skin and toe nails, wipe over foot and nails with cotton wool and surgical spirit, check for contra-indications, identify areas of dryness, cuticles, and general skin condition, hard skin, condition of nails

(split/brittle, ingrowing toe nails, ridged nails), importance of providing accurate treatment, ensure clients benefit from treatment, ongoing treatment plan, identify contra-indications that restrict or prevent treatment.

Examples of contra-indications that may prevent treatment: Skin and nail disorders (fungal, bacterial, viral and parasitic infections), severe nail separation, severe eczema, psoriasis and dermatitis, severe bruising.

Examples of contra-indications that may restrict treatment: Minor eczema, psoriasis, dermatitis, minor separation, bitten or damaged nails, cuts and abrasions.

Examples of possible contra-actions that may occur during or after treatment:

Erythema – due to allergy or infection.

Allergic reaction to nail enamel or other products used in the manicure – redness, itching, inflammation, swelling, excessive perspiration.

Action: Remove product, apply cold compress, seek medical advice if condition persists.

Nail and skin conditions: Overgrown cuticles, dry skin conditions, muscular aches and pains, increased curvature (spoon nails), corrugations, black streaks, beau's lines or transverse ridges, hang nails, bruised nails, blue nails, egg shell nails, onycholysis, furrows, leuchonychia, onychauxis (hypertrophy), onychatrophia (atrophy), onychorrhhexis (split or brittle nails), onychocryptosis (ingrown nails), psoriasis, eczema, onychomycosis (tinea unguium or ringworm of the nails),



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Outcome 1: Be able to prepare for pedicure treatments (continued)

onychoptosis, paronychia (felon or whitlow), pterygium.

Aftercare advice: Immediate restrictions following treatment (allow nails time to dry), general foot/nail care maintenance, explanation of products used during treatment and their benefits, further treatment recommendations (deluxe pedicure, artificial nail treatments if appropriate), contra-actions and how to treat, recommended intervals between treatment, retail products recommended for home care, their application and benefits, foot/nail care, advice should reflect the condition of the feet and nails presented and the lifestyle of the client, application of foot lotion, picking of toenails/skin tissue/nail enamel, correct technique for filing nails, the benefits of using a base coat with coloured nail enamel, having regular pedicures, correct footwear and use of foot rasp for hard skin removal.



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Outcome 2: Be able to provide pedicure treatments

Products: Buffing paste, cuticle cream, cuticle remover, exfoliant, foot lotion, foot soak, enamel, top coat, base coat, ridge fillers, nail hardeners, enamel thinner, hygiene spray, paraffin wax, enamel remover, quick dry products, footmask.

Tools: Orangewood sticks, emery boards, nail buffer, cuticle knife, cuticle nippers, pedicure clippers, foot rasp, rubber hoof stick, spatula, nail scissors, paraffin wax application brush.

Equipment: Paraffin wax heater, trolley, bin with liner, cotton wool, jar or vessel for tools, couch or chairs (ensure client's chair is static), pedicure soaking bowl, heated booties, bowls (for cotton wool), cling film/foil (paraffin wax), warm towels.

Treatment techniques:

Preparation – wipe over client's feet with surgical spirit, allow to soak for 5 minutes, remove nail enamel, soak nails and wipe away to free edge, use cuticle stick to remove remaining enamel from cuticle area.

Filing – using emery board working straight across the nail in one direction without filing into the corner of the nail, use of the fine side of emery board for minor filing, rough side for reducing length shape straight across. Nail clippers can also be used if toe nails are long or thick.

Buffing – buffing paste removed from jar with spatula, applied with cuticle stick, buffed from cuticle to free edge, do not overbuff (if buffed finish, complete at end of treatment).

Application of cuticle cream – removed from jar with spatula, applied with cuticle stick, small amount to each nail, massage in circular movements, soak in warm water

with soaking solution.

Application of cuticle remover – decant into bowl, applied with orangewood stick or brush to cuticle area, avoid contact with skin on other areas.

Cuticle work – work around cuticle with tipped orangewood stick in circular movements, use hoof stick to push back cuticles gently, use cuticle knife on each nail to lift away any excess dead cuticle, nail plate should be wet when using cuticle knife, cuticle knife held flat to nail plate avoid scratching nail plate, use cuticle nippers to remove excess cuticle, ensure spring is positioned correctly on cuticle nippers, ensure only dead cuticle removed, wipe away on to tissue, wipe over nails with damp cotton wool to remove excess cuticle remover.

Application of foot lotion – warmed in therapist's hands first, applied from foot to knee, effleurage and petrissage movements applied, flex and extend ankle, support client's leg throughout massage, remove excess foot lotion with enamel remover before applying enamel.

Application of finish – separate toes with tissue, base coat applied, 3-4 brush strokes down the length of the nail, from cuticle to free edge, beginning in the centre then down either side close to the nail wall, nail enamel applied using client's choice (dark, light or French), top coat applied if needed, nail dry spray (spray on to nails away from client and therapist, not too close to nail).

Paraffin wax treatment – beneficial to clients with dry skin, mobility/joint problems, poor circulation, included in treatment after foot lotion applied but before foot and leg massage, paraffin



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Outcome 2: Be able to provide pedicure treatments (continued)

wax should be heated prior to treatment, check wax temperature, prepare foil/cling film pieces/hand towels to wrap feet in, foot lotion/moisturising product applied to skin, paraffin wax decanted into bowl and applied to the feet with a brush, working quickly before wax hardens, applied to all areas of the foot up to ankle, wrapped in cling film or foil and then in towel, left for 10 minutes until heat has subsided.

Foot mask and exfoliant – beneficial to clients with dry skin, removes dead skin cells, general moisturising effect, improved circulation, relieves joint stiffness, added to treatment prior to foot and leg massage, exfoliant is applied to feet and worked in to skin using circular movements, warm towels used to remove excess exfoliant, foot mask then applied, feet wrapped in cling film, heated booties or warm towels wrapped around feet, allow 10 minutes to warm through, mask removed with warm towels, foot lotion then applied, foot and leg massage then carried out.

Evaluation and client satisfaction: Client agreement, client feedback, client objective, results of treatment, recommend future treatments, record adjustments for next treatment, accurately record details on record card.

Examples of skin and nail diseases and disorders: Overgrown cuticles, dry skin conditions, muscular aches and pains, increased curvature (spoon nails), corrugations, black streaks, beau's lines or transverse ridges, hang nails, bruised nails, blue nails, egg shell nails, onycholysis, furrows, leuchonychia, onychauxis (hypertrophy), onychatrophia (atrophy), onychorrhexis (split or brittle nails), onychogryposis (ingrown nails), psoriasis,

eczema, onychomycosis (tinea unguium or ringworm of the nails), onychoptosis, paronychia (felon or whitlow), pterygium.

Massage mediums: Massage oil, massage cream, foot lotion.

Massage movements: Effleurage, tapotement, petrissage and friction.

Benefits of massage during pedicure: Increased circulation and lymph flow, joint mobility, improved warmth and colour to the skin.

Structure of the nail: Nail plate, nail bed, matrix, cuticle, lunula, hyponychium, eponychium, nail wall, free edge, lateral fold, process of nail growth (formation, rate, factors affecting growth), nail thickness, effects of damage, functions (protection of toes).

Skin:

Epidermis – basal cell layer (stratum germinativum), prickle cell layer (stratum spinosum), granular layer (stratum granulosum), clear layer (stratum lucidum), horny layer (stratum corneum).

Dermis – blood and lymph supply, fibroblasts (collagen, elastin), hair, sebaceous glands, arrector pili muscle, dermal papilla, sweat glands (eccrine and apocrine), sensory nerve endings.

Hypodermis – subcutaneous layer, adipose tissue, adipocytes.

Functions of the skin – protection, heat regulation, absorption, secretion, elimination, sensation, formation of Vitamin D, melanin production, process of keratinisation.

Muscles of the lower leg and foot: Gastrocnemius, soleus, tibialis anterior,



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Outcome 2: Be able to provide pedicure treatments (continued)

peroneus longus, flexor digitorum longus, extensor digitorum longus, tendon of Achilles.

Bones of the lower leg and foot:

Tibia, fibula, tarsals (talus, calcaneus, navicular, cuneiform, cuboid), metatarsals, phalanges.

Arteries and veins of the lower leg and foot: Iliac arteries, popliteal artery, anterior and posterior tibial arteries.

Structure and function of the lymphatic vessels of the lower leg and foot:

Popliteal lymphatic nodes, lymphatic capillaries, lymphatic vessels.