The aim of this unit is to develop your consultation skills to enable you to provide a specialist hair and scalp consultancy service for your client’s. Through this unit you will be able to recognise the conditions, diseases and disorders that may affect the hair, skin and scalp as well as the procedures for diagnosing, treating or referring on these conditions. This unit will also provide you with the opportunity to research the latest developments in diagnosing and treating hair, skin and scalp conditions.

For the purposes of this unit the generic term of practitioner has been used to incorporate the following roles: Barber, Beauty therapist, Complementary therapist, Hairdresser.
<table>
<thead>
<tr>
<th>Level</th>
<th>Credit value</th>
<th>GLH</th>
<th>Observation(s)</th>
<th>External paper(s)</th>
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<tr>
<td>Level 4</td>
<td>9</td>
<td>72</td>
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Hair and scalp specialist services

**Learning outcomes**

On completion of this unit you will:

1. Be able to provide specialist consultation services
2. Be able to recognise hair and scalp conditions
3. Be able to treat hair and scalp conditions
4. Understand developments in the diagnosis and treatment of hair and scalp conditions, diseases and disorders

**Evidence requirements**

1. **Environment**
   Evidence for this unit may be gathered within the workplace or realistic working environment (RWE).

2. **Simulation**
   Simulation is not allowed in this unit.

3. **Observation outcomes**
   Competent performance of Observation outcomes must be demonstrated on at least three occasions.

4. **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.

5. **Tutor/Assessor guidance**
   You will be guided by your tutor/assessor on how to achieve learning outcomes in this unit.

6. **External paper**
   There is no external paper requirement for this unit.
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.

The client requirements for practical observations within this unit are not gender specific.

Achieving range

There is no range section that applies to this unit.
Learning outcome 1

Be able to provide specialist consultation services

You can:

a. Create the right setting in which the client feels comfortable enough to express their needs, expectations and concerns

b. Use suitable consultation techniques that enable the client to express their concerns and expectations without embarrassment

c. Comply with all relevant legislation, guidelines and ethical requirements

d. Complete client records

*May be assessed through oral questioning.

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<thead>
<tr>
<th>Observation</th>
<th>1</th>
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<th>Optional</th>
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<tbody>
<tr>
<td>Date achieved</td>
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<td>Learner signature</td>
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Learning outcome 2

Be able to recognise hair and scalp conditions

You can:

a. Use visual and questioning techniques to identify:
   - the client’s hair and scalp condition
   - the nature and extent of the problem
   - the client’s medical and family history
   - any contra-indications to treatment
   - the most suitable course of action

b. Conduct relevant tests on the client’s hair following recognised industry procedures and salon policy

c. Follow safe and hygienic working practices

d. Recommend and agree the proposed course of treatment with clients

e. Provide the client with clear recommendation for referral to a medical practitioner or registered trichologist*

*May be assessed through oral questioning.

<table>
<thead>
<tr>
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Learning outcome 3

Be able to treat hair and scalp conditions

You can:

a. Communicate and behave in a professional manner
b. Prepare yourself, the client and work area for hair and scalp specialist services
c. Select and use suitable products, tools and equipment in accordance with manufacturers’ instructions
d. Use treatment methods that support improvements in hair and scalp conditions
e. Remedy problems that occur during the treatment process*
f. Monitor and maintain client comfort throughout the treatment process
g. Provide suitable aftercare advice, including any restrictions to future hairdressing services

*May be assessed through oral questioning.

<table>
<thead>
<tr>
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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*:

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

Where applicable your assessor will integrate knowledge outcomes into practical observations through professional discussion and/or oral questioning.

When a criterion has been orally questioned and achieved, your assessor will record this evidence in written form or by other appropriate means. There is no need for you to produce additional evidence as this criterion has already been achieved.

Some knowledge and understanding outcomes may require you to show that you know and understand how to do something. If you have practical evidence from your own work that meets knowledge criteria, then there is no requirement for you to be questioned again on the same topic.

*This is not an exhaustive list.
# Knowledge

## Learning outcome 1

Be able to provide specialist consultation services

<table>
<thead>
<tr>
<th>You can:</th>
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<tbody>
<tr>
<td>e. Explain the importance of creating a setting in which clients feel comfortable and that ensures privacy</td>
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<tr>
<td>f. Describe consultation techniques used to identify service objectives</td>
<td></td>
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<tr>
<td>g. Explain why it is important to encourage and allow time for clients to ask questions</td>
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</tr>
<tr>
<td>h. Explain the types of expectations, concerns and needs that clients may have and how to deal with them</td>
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<tr>
<td>i. Explain how to check that clients understand verbal and written information that they have been given</td>
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<tr>
<td>j. State the additional/alternative sources of support for clients with hair and scalp conditions</td>
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<tr>
<td>k. Explain the importance of treating clients with sensitivity and empathy</td>
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<tr>
<td>l. Outline the main legislation and ethical considerations that affect the service</td>
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<tr>
<td>m. State the importance of recording all treatment details</td>
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</tbody>
</table>

*Assessor initials to be inserted if orally questioned.*
**Learning outcome 2**

**Be able to recognise hair and scalp conditions**

<table>
<thead>
<tr>
<th>You can:</th>
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<tbody>
<tr>
<td>f. Be able to recognise hair and scalp conditions</td>
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<tr>
<td>g. Describe the anatomical and physiological structure and function of the hair, skin and scalp</td>
<td></td>
</tr>
<tr>
<td>h. Explain how to differentiate between different hair, skin and scalp conditions, diseases and disorders that are similar in appearance</td>
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</tr>
<tr>
<td>i. Outline the hair, skin and scalp conditions and disorders that may be treated in the salon</td>
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<tr>
<td>j. Explain the factors that may adversely affect the growth and maintenance of healthy hair</td>
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<tr>
<td>k. Explain the causes of the different conditions, diseases and disorders that may affect the hair and scalp</td>
<td></td>
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<tr>
<td>l. Outline tests required during hair and scalp specialist services</td>
<td></td>
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<tr>
<td>m. Outline safe and hygienic working practices</td>
<td></td>
</tr>
<tr>
<td>n. Explain the importance of obtaining client agreement prior to the course of treatment proposed</td>
<td></td>
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<tr>
<td>o. Explain the reasons for not naming specific contra-indications when referring clients to seek medical advice</td>
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</table>

*Assessor initials to be inserted if orally questioned.
**Learning outcome 3**

**Be able to treat hair and scalp conditions**

<table>
<thead>
<tr>
<th>You can:</th>
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</thead>
<tbody>
<tr>
<td>h. State how to communicate and behave within a salon environment</td>
<td></td>
</tr>
<tr>
<td>i. Describe the salon’s requirements for preparation of yourself, the client and the work area</td>
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<tr>
<td>j. Explain how treatment methods and products may benefit the hair and scalp</td>
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<tr>
<td>k. Describe how to remedy problems identified during the treatment process</td>
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</table>

*Assessor initials to be inserted if orally questioned.*
# Learning outcome 4

**Understand developments in the diagnosis and treatment of hair and scalp conditions, diseases and disorders**

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<thead>
<tr>
<th>You can:</th>
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<tbody>
<tr>
<td>a. Investigate current developments in the diagnosis and treatment of different hair and scalp conditions, diseases and disorders</td>
<td></td>
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<tr>
<td>b. Evaluate the use of new treatments and products against salon requirements and potential client benefits</td>
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<tr>
<td>c. Describe how to maintain an up-to-date knowledge of developments in the diagnosis and treatment of hair and scalp conditions, diseases and disorders</td>
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<tr>
<td>d. Explain the roles and responsibilities of the trichologist and the hairdresser, in relation to the diagnosis and treatment of hair and scalp conditions, diseases and disorders</td>
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</table>

*Assessor initials to be inserted if orally questioned.*
Use this area for notes and diagrams.
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.

Learning outcome 1: Be able to provide specialist consultation services

Creating the right setting: Consulting area away from the main salon/barbershop, cubical/screen with natural daylight, client at ease, this can be a sensitive time if client has hair loss, allows trust, able to express their feelings and needs, sympathetic, warm, safe, relaxing atmosphere, un-intimidating, non-judgemental, caring, discreet, build a rapport, value and respect, reassurance, consideration, assessing needs and expectations, sincerity, courteous, listen intently.

Client privacy and comfort: Consultation environment (face to face or digital), private, screened away from main salon/barbershop area, client requirements, client satisfaction, client expectations and aftercare, informed consent and signatures, visual, manual, questioning, listen, client information reference.

Questioning – open, closed, probing.

Examination – look at the hair skin and scalp and palpate/touch the areas if required.

Language – appropriate level for client, use of technical/non-technical language.

Client expectations/needs – listen, clarify, advise, plan.

History of hair – hair tests, touch, feel, look of hair.

Advice – what will work, what will not?

Use visual aids – reference books, tricho-scope images, web sites, collection of pictures.

Working in accordance with current health and safety legislation: Health and Safety at Work Act, Management of Health and Safety at Work Regulations, Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR), Health and Safety (First Aid) Regulations, Manual Handling Operations Regulations, Control of Substances Hazardous to Health Regulations (COSHH), Personal Protective Equipment at Work Regulations (PPE), Electricity at Work Regulations, Workplace (Health, Safety and Welfare) Regulations, Provision and Use of Work Equipment Regulations, Equality Act, Data Protection Act (UK General Data Protection Regulations (GDPR)), Environmental Protection Act.
Learning outcome 1: Be able to provide specialist consultation services (continued)

**Record keeping:** Accurate appointment systems, stationery, loyalty rewards, acknowledgement of occasions, consultation record keeping, refer to existing records, ensure information is concise, accurate and in logical order (name, address, contact details, age range, medical history, contra indications, sport/hobbies, recent activities, service history, allergies/hypersensitivity, test results, service requirements, recommendations, service plan including products, expected outcomes, alternative service options, client informed consent and signature), update record at the end of the service, update at each visit, maintained electronically/digitally/paper-based, documented and stored in compliance with current data protection legislation, for example General Data Protection Regulations (GDPR).

**Encourage clients to ask questions:** Successful service/treatment/consultation, avoid misunderstandings, achieve client expectations, gain trust, express their needs and wishes, so they fully understand the service available, have reasonable expectations.

**Client expectations, concerns and needs:** Client feelings/behaviour – apprehension, fear, upset, concern, anger, shock, lack of self-esteem, concerns – lack of understanding, repetitive questioning, need for return visits, client needs immediate action, see results, knowledge. Operative to remain professional, sympathetic, un-intimidating, non-judgemental, caring, discreet, build a rapport, value and respect, reassurance, consideration, assessing needs and expectations, sincerity, courteous, listen intently.

**How to check for client understanding:** Re-enforce and evaluate the consultation process, encourage client to interpret consultation, read and comment on any documentation appertaining to themselves, make notes for future reference.

**Look for signs of confirmation** – smiling, nodding, confirming through speech.

**Signs of confusion** – frowning, shake of head, lack of speech.

**Additional/alternative sources of support for clients with hair & scalp conditions:** General practitioner, trichologist, dermatologist, pharmacist.

**The importance of treating clients with sensitivity and empathy:** Client may suffer with – lack of confidence, depression, feel unattractive/isolated/distressed, undergoing treatment, coping with a change in their appearance. A sensitive and professional approach – avoids further distress, provides necessary support, positive advice, builds a rapport, solution to their problem.
Learning outcome 1: Be able to provide specialist consultation services (continued)

**Ethical guidelines:** Awareness of particular groups of gender/ethnicity/culture in relation to touch/chaperone, some religions prohibit physical examination of head, scalp and skin, client lead, salon/barbershop to adapt where possible.

**The importance of recording all treatment details:** Accurate record of consultation – discussions, agreements, treatment, prognosis, cost, support needs, future reference, referral information, legal action.

**Infection Prevention:** Infection prevention and control measures, universal and standard precautions, for example, hand hygiene – handwashing, hand sanitising, respiratory hygiene, cough etiquette, use of PPE, safe management of the working environment and treatment/service/consultation resources, for example, cleaning, disinfection, sanitisation, sterilisation of working areas/surfaces, equipment and tools, safe management of linen, safe disposal of waste.

**Environmental working practices:** Effective and energy efficient working practices, for example, lighting, heating and ventilation to meet the Workplace (Health, Safety and Welfare) Regulations (or local regulation requirements to the country being delivered in) for clients and employees, water conservation, environmental waste management.

**Sustainable working practices:** For example, use products with ingredients from sustainable sources, minimal and sustainable packaging, recyclable, bio-degradable or compostable options for products, disposables and single-use items, record product usage, paper-free appointment systems and pricelists.

**Liability insurance:** Employers, public, professional indemnity.
Learning outcome 2: Be able to recognise hair and scalp conditions

Using visual and questioning techniques to identify influencing factors:

**Questioning techniques** – open/closed/probing questioning.

**Visual** – look/touch/feel (palpate).

**Nature of problem/condition** – client history, client’s analysis of condition, obvious eruptions, medical/general history/genetic/family history of condition, previous remedies, treatments or specialist advice, dates/times of the condition, changes in diet/medication/products, lifestyle.

**Factors that influence services**: Previous chemical services, percentage of grey, client requirements, tools and equipment, presence of added hair, maintenance of style suitability.

**Hair condition** – dry, oily, normal (balanced), elasticity (strength of hair), porosity (damage to cuticle layer, the ability to absorb moisture).

**State of hair** – non-chemically treated hair, partially chemically treated hair, chemically treated hair.

**Hair curl classification** – can be referred to as Type 1-4.
1. Straight
2. Wavy
3. Curly
4. Tight curls
5. Combination (more than one individual hair classification is identified). Temperature – body heat, salon temperature, added heat.

**Hair characteristics** – hair density (sparse, medium, abundant), hair texture (fine, medium, coarse), hair elasticity (weak, normal, strong), hair porosity (porous, non-porous), hair growth patterns (cowlick, widow’s peak, nape whorl, double crown).

**Length** – short, medium, long.

**Skin classification** – Fitzpatrick scale, Lancer scale

**Face shape** – oval, round, square, oblong, heart, pear.

**Head shape** – large, medium, small.

**Existing curl** – tight, soft, wave.

**Lifestyle** – job, family, financial, hobbies, time.

**Test results** – expected outcomes, positive, caution, negative.

**Skin** – dry, oily, taut, red, inflamed, weeping, infection, infestation, abnormalities, scars.

**Contra-indications:**

**Absolute contra-indication** – an absolute contra-indication is a condition that prevents the service from being carried out and may require referral.

**Examples of contra-indications that may prevent treatment (absolute contra-indications)** – contagious hair and skin disorders – bacterial (impetigo, folliculitis, sycosis barbae), viral (herpes simplex, herpes zoster), fungal (tinea capitis), animal parasites (pediculosis capitis, scabies).
Relative contra-indication – a relative contra-indication is a condition that requires an assessment of suitability for the service and/or if adaptions are required.

Examples of contra-indications that may restrict treatment (relative contra-indications) – cancer, product allergies, pregnancy. Skin and scalp conditions – psoriasis, eczema, dandruff, seborrhoea, sebaceous cyst, acne, uneven skin surface, broken skin, androgenic alopecia (male and female pattern baldness), cicatricial alopecia, alopecia totalis, traction alopecia, alopecia areata. Hair conditions – fragilitas crinium, trichorrhexis nodosa, monilethrix.

Contra-actions: Establish if it is an expected reaction or an unexpected/adverse reaction.

In the case of expected reactions – provide immediate post-treatment/service after care and advice for homecare, for example increase water intake, avoid perfumed products, wait 48 hours before washing hair, reduce heat on styling equipment.

In the case of unexpected/adverse reactions – discontinue treatment/service, take remedial action, record unexpected/adverse reaction, advise on homecare and how to access remedial medical care (GP/pharmacy/emergency services/NHS direct) if required.

Possible expected reactions – redness of the skin, scalp sensitivity.

Possible unexpected/adverse reactions – skin reaction, allergy, allergic reaction to products.

Factors that affect the growth and maintenance of healthy hair:

Poor health – dull lank effect.

Medications – affect loss, growth, maintenance of hair.

Poor erratic diet – look, feel, manageability of hair.

Environmental — affect maintenance of hair.

Heat sources – dry out hair, porous/brittle.

Mechanical/physical damage – plaits, braids, elastic bands, fine tooth combs, firm bristle brushes (affect look/feel/manageability of hair), friction.

Chemical services – potential to harm internal/external structure of hair, affect all further services.

Hair and scalp contra-indications: Can prevent/alter service, product, technique.

Type of conditions – skin disorders (disease, infestation, infection, defect, bacteria, virus, fungi, parasites).

Skin sensitivities – reaction.

Allergies – latex, nut, plasters, perfume, oil

History of allergic reaction – positive reaction to skin test, colour service.

Incompatible products – metallic salts, previous chemical treatments.

Bacterial – impetigo (blisters, weep, yellow crust), folliculitis (yellow pustules), sycosis (yellow, spot, follicle), furunculosis (pus filled spot), sebaceous cyst (lump on top or under skin).
Learning outcome 2: Be able to recognise hair and scalp conditions (continued)

Viral – warts (raised, rough skin, brown), herpes (blisters).

Fungal – tinea capitis/ringworm (patches, pink/grey, scaly, broken hair).

Non-contagious:

Psoriasis – over production skin cells, dry, silvery, scales

Cicatrical alopecia – scar

Alopecia totalis – complete hair loss

Animal parasites – pediculosis capitis (head lice, parasite, 6 legs, suck blood), scabies (parasites, mites).

Medication – prescription medication.

Medical condition – high blood pressure, pregnancy, radio therapy, cancer.

Hair condition – chemical, heat damage, environmental.

Hair disorder – contagious/non-contagious.

Skin disorder – contagious/noncontagious, cross infection (stylist to client, client to stylist).

Contagious conditions: From practitioner to client, client to practitioner.

Androgenetic alopecia – hair recedes at hairline or loss crown.

Traction alopecia – excessive pulling, brushing curling and straightening.

Alopecia areata – stress, bald patches.

Seborrhea – excessive oil, Dandruff – itchy, white, skin cells.

Dry scalp – white, powdery Eczema/dermatitis – allergic reaction to detergent, red, irritation, swollen, weeping.

Acne – raised bumps and spots.

Defects of the hair:

Fragilitas crinium – split, dry ends.

Monilethrix – beaded hair.

Trichorrhxis nodosa – rough, swollen, broken shaft.

Sebaceous cyst – sebum filled lump.

Damaged cuticle – dull hair.

Recommendations to client: Pre-service instructions on service/treatment process, expected physical sensations, expected and adverse reactions/contra-actions, outcomes, further service/treatment and fees, adaptations and modifications, post-service advice/aftercare.

Hair tests: Use manufacturers’ instructions, salon guidelines, before during and after service.

Elasticity test – elasticity test is used to assess the strength of the hair’s cortex.

Porosity test – porosity test is used to assess the condition of/damage to the hair’s cuticle.

Strand test/test cutting – strand test/test cutting can also be referred to as a colour test and is carried out prior to the service to test the chemical reaction on the hair and to show the potential colour outcome.

Incompatibility test – incompatibility test is used to assess the presence of metallic salts in the hair.
Development test – development test is the removal of product during the service to check and reaffirm the development time.

Skin/allergy alert test – skin/allergy alert test is used to assess a client’s sensitivity.

Pull test – pull test is used to assess the severity of hair loss.

Pre-perm test curl – pre-perm test curl is carried out prior to the service to test the chemical reaction on the hair for the desired outcomes.

Perming development test curl – perming development test curl is the partial unwinding of a perm rod during the service to check and reaffirm an ‘S’ or ‘C’ shape/ pattern has been achieved.

Management of health and safety at work: Clean, tidy, safe standards of working, remove spillages, report slippery surfaces, remove/report obstacles, clear access to trolleys and equipment, clean/disinfect/sanitise/sterilise work areas/surfaces, equipment and tools as appropriate, no smoking/vaping, eating, drinking or drugs.

General hygiene: Clean/disinfect work area/surfaces, clean/sterilise/sanitise tools and equipment, fresh towels for each client, place dirty towels in a covered bin, dispense products with a pump or spray, use disposables as appropriate to service, no smoking/vaping, maintain personal hygiene, replace loose lids (uncapped bottles and pots) sanitise hairdresser/barber’s hands before, during and after services.

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

Hazards – require immediate attention, level of responsibility, report, nominated personnel, duty to recognise/deal with hazards.

Reasons for risk assessment – staff, visitor, client health and safety, minimise hazards and risks, maintain safe environment, legal requirements.

Personal protective equipment (PPE): Use appropriate personal protective equipment for self and client, for example, the use of gloves when using cleaning chemicals.

Electricity at work: Visual check of equipment, no trailing wires, portable appliance testing.

Manual handling: Moving stock, lifting, working heights, unpacking, posture, deportment, balance weight, protect back, prevent slouching, avoid straining or overreaching.

Manual handling: Moving stock, lifting, working heights, unpacking, posture, deportment, balance weight, protect back, prevent slouching, avoid straining or overreaching.

Towels: Wash regularly and efficiently, use fresh/single use towels for every client, place dirty towels in a covered bin.
Learning outcome 2: Be able to recognise hair and scalp conditions (continued)

Disposal of waste: Lined waste bin with a lid, byelaws/organisational policies and procedures for disposal of waste – non-hazardous, clinical, sharps, chemical, mixed municipal, general and confidential, recyclable; environmental protection, single use items, dispose of all waste in accordance with manufacturers’ instructions.

Product storage: Check end date/packaging, store away from heat/damp/direct sunlight, empties, avoid theft.

Recommendations and agreement on a proposed course of treatment with clients: Open discussion on findings, conclusion of findings, treatment plan- what is involved, number of visits, cost, prognosis, client agreement ensures – clear understanding of treatment plan.

When to refer a client to a medical practitioner or registered trichologist: When findings/diagnosis are beyond hair specialist as a non-medical professional, when salon/barbershop treatment has failed, when symptoms are not relieved, to avoid incorrect diagnosis, when salon is not able to offer product/service, recommend the most appropriate consultant.

How to differentiate between disorders of similar appearance: Constant knowledge updates, refer to descriptors/picture evidence, take advice, identify basic symptoms, build a complete picture, process of elimination.

The structure of the hair, skin and scalp:
Bones of skull, blood supply of head and neck, muscle group of head and neck, knowledge of hair, scalp and skin, growth cycle, hair structure, molecular structure of cortex, cell and cell division, endocrine system, lymphatic system, nervous system, physical and psychological effects of hair and scalp treatments, cross section of the skin (epidermis, dermis, follicle, arrector pili muscle, sweat gland, sebaceous gland, germinal matrix, blood capillaries).

Treatment methods and benefits: Specific scalp treatment methods – manual scalp massage, vibro scalp massage, scalp steaming, high frequency, application of topical lotions mixed specifically for client for example salicylic acid, sulphur. Benefits include – loosening of scalp tissue, relaxation/wellbeing, stimulation of scalp, counteraction of dry hair/scalp, control of oily scalp/pityriasis capitis.

Salon/barbershop treatments for hair, skin and scalp conditions and disorders: Dry scalp, oily scalp, sensitised scalp, pityriasis capitis, diffuse hair loss, chemically damaged hair, environmentally damaged hair, physically damaged hair. All can be treated with a range of specialist shampoos and conditioning treatments, regular haircuts, good aftercare advice.

Dry scalp – flakiness, feels dry to touch, scalp could be tight, poor elasticity in skin, hair frequently dry.

Oily scalp – scalp usually shiny, oily/musty smell, hair shiny/lank/oily look.
Learning outcome 2: Be able to recognise hair and scalp conditions (continued)

**Sensitised scalp** – could look normal or red and inflamed, pressure on scalp could cause pain, gentle pulling hair causes discomfort.

**Scaling scalp** – small flakes of skin which detach from scalp, lifted off with comb or epilator without blood spotting, scalp generally dry, hair can be dry/oily.

**Pityriasis capitis** – classic dandruff, small scales from scalp, silver in colour, detaches and lodges in the hair, scales are dry, do not stick to hair, fall off onto shoulders/clothes.

**Diffuse hair loss** – can be classified as diffuse alopecia. This type of condition does not leave patches of baldness as do other types of alopecia, but the amount of hair becomes less. ‘Thinning hair’ is a classic diagnosis.

**Chemically damaged hair** – condition usually manifests from poor hairdressing techniques, over bleaching, over perming, wrong choice of products to suit hair type, prolonged contact with harsh chemicals such as chlorine from swimming pools.

**Environmentally damaged hair** – prolonged exposure to sun, wind, salt, dust will have an adverse effect on the hair (sun bleached, moisture lost, broken cuticles).

**Physically damaged hair** – prolonged exposure to hot electrical appliances (for example tongs, straighteners, hair dryers, heated rollers), prolonged exposure to backcombing/brushing, plaiting, twisting, hair up.

**Result** – loss of colour, loss of moisture, broken cuticles, damage to internal structure, split ends.

**Obtaining client agreement prior to proposed treatment**: Agreement by all parties, legal/ethical, signatures on documentation, filed/kept minimum 3 years, future reference, documented history of treatment, legal implications.

**Securing an agreement on a proposed course of treatment**: Open discussion on findings, conclusion of findings, treatment plan (what is involved, number of visits, cost, prognosis), client agreement ensures clear understanding of treatment plan, signature.

**The reasons for not naming specific contra-indications when referring clients to seek medical advice**: A practitioner is a non-medical professional, confusing/conflicting information, incorrect diagnosis, condition may be more/less complex than was intimated, avoid embarrassment, fears, anxieties of client, reputation of salon, decline in business.
Learning outcome 3: Be able to treat hair and scalp conditions

**Communication:**
- **Verbal** – speaking manner and tone, professional, supportive, respectful, sensitive to client, appropriate vocabulary and open questioning related to treatment/service/consultation.
- **Non-verbal** – eye contact, body language, listening.
- **Written** – electronic, digital or paper-based, clear and concise, attention to spelling, grammar and presentation of written information.
- **Visual aids** – photographs, digital media, magazines and images, can provide inspiration and assist the client’s understanding.

**Adapting and tailoring approaches** – for different clients, for example, new and existing clients, according to age, health conditions, nervous.

**Clarification** – checking client understanding of proposed treatment/service/consultation and expected outcomes, checking client’s comfort and wellbeing throughout the treatment/service/consultation.

**Professional ethical conduct:** Follow health and safety and organisational policies and procedures and code of conduct, demonstrate integrity, respect, flexibility and adaptability, co operate with others, value client(s), use appropriate language, maintain a polite, cheerful and welcoming manner (friendly facial expressions, positive attitude, eye contact, open body language), maintain confidentiality, demonstrate respect for clients, colleagues and competitors, avoid gossip, take pride in work, maintain punctuality, uphold employer and client loyalty, work within limits of own authority and competence, engage in and document Continuous Professional Development (CPD) to maintain best practice.

**Professional appearance:** Clean professional uniform, unobtrusive jewellery or piercings, hair clean and styled, closed in footwear, personal hygiene and cleanliness (shower/bath, cover cuts and abrasions, deodorant or antiperspirant, avoid use of overpowering fragrance), oral hygiene (clean teeth, fresh breath), nails (appropriate in length, clean, in good condition and maintained).

**Client preparation and care:** Preparing for and performing a treatment/service/consultation taking into account any specific requirements and diverse needs the client may have, for example, culture, religion, health conditions, working in accordance with current equality legislation.

**Work area:** Prepare in accordance with organisational requirements and health and safety standards, clean and hygienic – clean/disinfect/sanitise/sterilise work area, tools and equipment, sufficient ventilation, appropriate room temperature, lighting, ambience, music, hygienic set up of chair and trolley, effective, ergonomic positioning of necessary products, tools and equipment to allow for ease of access, movement and safe practice.
Learning outcome 3: Be able to treat hair and scalp conditions (continued)

**Equipment:** Follow organisational/manufacturers’/suppliers’ instructions for safe use, only used for intended purpose, usage, handling, storage, cleaning, lifting, visual checks, worn, faulty, repairs, maintenance.

**Products, tools and equipment:**
Chair – adjustable, trolley, cutting chair/stool – adjustable, gown, towels, waterproof cape, processing cap, cotton wool, a waste bin with a lid and a liner. Products, tools and equipment for cleaning, disinfection, sanitisation, sterilisation as appropriate to service.

**Tools** – combs, brushes, measuring and mixing containers, sectioning clips bowl and brush, towels,

**Equipment** – scalp steamers, hand dryers, accelerators/processors, infra-red/led light trolley.

**Products** – off the shelf, bespoke or made for specific clients, products you have mixed yourself.

**Treatment methods that support improvements in hair and scalp conditions:** Consultation, recording (paper based, computerised, voice note), examining/palpation (scalp, hair, skin, visual, microscopy, trichoscope), massaging (methods, types, treatment areas, manual, vibro); products (nationally available, bespoke made, personally made), scalp steaming, shampooing, conditioning, drying, high-frequency.

**Remedy problems that occur during the treatment process:**

**Shampoo and conditioning procedure** — regularly check water temperature is not too hot or cold, personal protective equipment/client clothing wet (replace protective equipment, dry client clothing if possible), dry spills/wet floor immediately.

**Client discomfort** — ensure client comfort (adjust any seating/basin/electrical equipment to suit the client), tolerance of treatment (massage, product application) regular checking, client overheating with product (regular monitoring).

**Electrical appliances** — checked for safety, operative fully conversant with equipment (operational, safety aspects, length of time, temperature setting).

**Monitoring and maintaining client comfort:** Chair/basin/trolley height, water/product temperature, electrical equipment temperature, product effect on scalp, pressure of massage technique (watch, question, ask, comment, respond).

**Provide suitable aftercare advice:**
Compatible/incompatible products with treatment plan, hair and scalp cleanliness, product information and use, demonstration, relevant literature/leaflet, contra-indications to future hairdressing services/products, correct use of electrical equipment (straighteners, tongs, heated rollers, hairdryer).
Learning outcome 3: Be able to treat hair and scalp conditions (continued)

**Treatment methods and benefits:**

**Specific scalp treatment methods** – manual scalp massage, vibro scalp massage, scalp steaming, high frequency, application of topical lotions mixed specifically for client for example salicylic acid, sulphur, and micro needling.

**Benefits include** – loosening of scalp tissue, relaxation/wellbeing, stimulation of scalp, counteraction of dry hair/scalp, control of oily scalp/pityriasis capitis.

**Shampooing products for hair conditions:**

**Common shampoo ingredients and their effects** – For example, aloe vera, jojoba, lemon, camomile, tea tree.

**Shampoo products are** – Moisturising, normal (balanced), medicated/ sensitive, protein, dry, oily, dandruff, clarifying, protein, volumising, chemically treated, sulphate-free, related to hair curl classification.

**Conditioning products for hair conditions:**

**Surface** – rinse off method (pre shampoo, apply using effleurage, petrissage, comb, rinse), leave-in method (pre-shampoo, towel dry, apply, effleurage, comb, do not rinse).

**Penetrating** – protein, moisturising, reconstructing intensive mask; restructurant method (pre-shampoo, towel dry, hot cross bun section, bowl and brush application, roots to ends, wide tooth comb, petrissage, heat, emulsify, rinse).

**Scalp tonic** – dry, dandruff, oily, method (pre-shampoo, towel dry, small section application, direct to scalp, ensure complete coverage, do not rinse).

**Following manufacturers’ instructions:**

On bottle, packaging, leaflet, colour chart, storage (temperature, location, light), handling (correct mixing), use (application, removal), disposal (dilution of products, recycle empties) – ensures successful service, prevents legal action.

**Hair loss:** ‘Unnatural’ hair loss often psychological, chronic internal disorder, treatment (limited results, topically administered Minoxidil, Regaine from pharmacy), cure (limited positive results), professional advice (general practitioner, trichologist, dermatologist, pharmacist).

**Hairdresser/Barber health and wellbeing:**

Maintain correct posture when performing services, sitting, lifting and carrying, use working methods to avoid work related injuries, for example, Repetitive Strain Injury (RSI), perform regular hand exercises, maintain correct standing posture, even weight distribution, ensure own positioning delivers appropriate techniques, prevents injury, promotes optimum results, allows for visual checks, maintain appropriate space between client and self. Regular water/rest breaks to prevent dehydration and fatigue. Prevent contact dermatitis – wear gloves when using chemicals, wash and dry hands regularly and use moisturiser/barrier cream as appropriate.
Learning outcome 3: Be able to treat hair and scalp conditions (continued)

**Client:** Position to achieve accurate service, comfort and minimise fatigue and injury, sat upright, back straight and supported, two feet flat on floor, legs uncrossed, avoid getting clothing wet, avoid excess pressure on the neck (backwash/basin, front wash basins) provide with a towel to prevent products entering eyes.

**Provide suitable aftercare advice:**
Compatible/incompatible products with treatment plan, hair and scalp cleanliness, product information and use, demonstration, relevant literature/leaflet, contra-indications to future hairdressing services/products, correct use of electrical equipment (straighteners, tongs, heated rollers, hairdryer).
Learning outcome 4: Understand developments in the diagnosis and treatment of hair and scalp conditions, diseases and disorders

Investigate current developments:
Research and compile a working list of example sources of bodies undertaking developments in hair and scalp treatments.

Sources – internet/digital media, medical articles, papers written by eminent specialists (Institute of Trichologists/Association of Registered Trichologists), product manufacturers’.

Evaluate new treatments and products:
Research and compare established treatment plans and products against new procedures products and equipment, ensure benefits to client match or exceed the established treatments (cost, duration of treatment, contra-indications/contra-actions), ensure new treatment/products have been fully endorsed as acceptable practice, meet insurance requirements.

Maintaining an up-to-date knowledge of developments:
Constant research, compilation of developments, constant up-skilling with recognised CPD courses, expand/maintain knowledge required to ensure client satisfaction, salon profile and personal recommendation, subscription to professional groups, articles on new information on diagnosis and treatment will be researched and tested to a greater depth.

The roles and responsibilities of the trichologist and the hairdresser:

Trichologist – provides knowledge/treatment for hair and scalp care, ensure client’s hair and scalp is in good condition, counter over-processed hair, eliminate split ends, ensure scalp is free from scaling, use personalised products, bespoke treatment options.

Hairdresser – is a non-medical professional and likely in first instance to make referral to trichologist (to avoid incorrect diagnosis, embarrassment, lack of goodwill, reputation, legal implications, decline in business).

Liaison between hairdressers and trichologists – effective communication between professionals, avoid escalation of the problem, incompatibility of products and salon treatments, registered trichologist will have necessary skills, diagnosis knowledge and will provide safe effective treatments, impact on client disclosure and privacy.