

# Competency Framework for Cosmetic Practice Copyright ©JCCP 2018

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This competency framework has been produced in good faith to provide benchmark standards of competence across the cosmetic sector deemed necessary to practice safely and ethically, in line with the cosmetic practice standards authority (CPSA) guidance. The JCCP cannot be responsible for an individual's practice.

# 1. Introduction & background to the Competency Framework

The JCCP was established to support public protection for those accessing non- surgical cosmetic procedures and hair restoration surgery. Following the Keogh review (DH 2013), the recommendation to regulate the cosmetic sector was not supported by government. Health Education England was given a mandate to work with stakeholders to develop education guidance relating to 5 modalities of cosmetic practice (HEE 2016). The JCCP <a href="https://www.jccp.org.uk/">https://www.jccp.org.uk/</a> has since been set up as a formally constituted charitable body, alongside its sister organisation, the Cosmetic Standards Practice Authority (CPSA) <a href="https://www.cosmeticstandards.org.uk/">http://www.cosmeticstandards.org.uk/</a>.

The aim of the JCCP/CPSA is to further develop standards and guidance to ensure practitioners providing cosmetic treatments, whatever their professional or practice background can evidence their competence, commitment to public safety and agreed standards of practice through registration with the JCCP.

The JCCP voluntary register, which is Public Service Authority (PSA) registered, will be accessible to the public and enable them to check the competence and adherence to a code of practice and standards set out by the cosmetic practice standards authority (CPSA) for practitioners providing cosmetic treatments and provide a mechanism for managing complaints against JCCP registered practitioners. In order to assist practitioners to evidence the required level of competence, underpinned by relevant knowledge, values and skills, education standards and required levels of competence have been developed with stakeholders across the sector to inform the development of appropriate courses, programmes and qualifications. This document should be read in conjunction with the *JCCP* (2018) Education Standards to enter the JCCP register of Approved Education & Training providers, which now replaces the HEE guidance.

## 2. Purpose of the Competency Framework

The purpose of the competency framework is to define the required competencies of practitioners providing cosmetic treatments. The emphasis on required level of competency rather than role is intended to make clear to practitioners and the public what they are expected to be able to do to provide safe, accountable care to those requesting cosmetic interventions. Defining the competencies has several purposes;

- **Practitioners** can evaluate their practice against the competency framework, identify any gaps in competence, and ensure they are addressed through personal development planning and continuing professional development to register with the JCCP
- **The public** can see what practitioners are required to do to ensure their safety and effective treatment outcomes when having cosmetic procedures

- Education and training providers can use the competencies to ensure programmes, course, modules of learning and qualifications enable practitioners to develop competence underpinned by relevant knowledge & understanding at the required academic level as outlined within the JCCP Education Standards (2018).
- **Accreditation providers** can use the competencies to evaluate the suitability of educational programmes of study to enable the student to achieve competence through relevant qualifications
- The JCCP can use the competencies to ensure practitioners applying for registration with the JCCP have achieved the required competencies and education & training providers can evidence that their provision leads to achievement of the appropriate competencies.

## 3. Development and Structure of the Competency Framework

The development of the framework was initially commenced by the education, training and accreditation group of the JCCP, and has been further developed by the Education & Training Committee of the JCCP to reflect the Clinical Practice Standards developed by the CPSA. The framework includes;

- Core Competencies
- Modality Specific Competencies for 5 modalities

The JCCP register includes two different categories of practitioner, those with existing and current Professional Statutory & Regulatory Body (PSRB) registration, and those not currently regulated elsewhere. To reflect this, the Core Competency Framework is divided accordingly for those with PSRB registration and those without PSRB registration and regulation who will work under oversight of an accountable practitioner. It is further divided where necessary to identify the competencies of those who may prescribe prescription only medicines (POMs), and those who may administer POMs.

Note: Depending on the context, people who request cosmetic treatments are known as clients, customers or patients. Throughout this document, the term patient has been used for consistency.

# **Core Competencies for any modality**

Demonstrate holistic assessment to elicit	suitability for a cosmetic procedure	
PSRB regulated practitioner who is a prescriber	Non- prescriber regulated by PSRB	Practitioner - working under supervision /oversight Non- prescriber and/or not regulated by PSRB
Determine the patient's competence to understand the intervention assessment process and their capacity to give valid consent using recognised guidelines, ensuring they are not under the influence of alcohol, drugs or other illicit substances	Determine the patient's competence to understand the intervention assessment process and their capacity to give valid consent using recognised guidelines ensuring they are not under the influence of alcohol, drugs or other illicit substances	Determine that the person requesting treatment understands you and does not appear to be under the influence of alcohol, drugs or other illicit substances
<ul> <li>Undertake a concise and comprehensive cosmetic consultation and assessment to include:         <ul> <li>Client concerns, expectations and desired outcomes</li> <li>Age, general and specific medical &amp; family history of relevance</li> <li>Psycho-social history and reasons for seeking cosmetic intervention</li> <li>Current medication- prescribed, over the counter and supplements</li> <li>Current pregnancy, breast feeding or trying to conceive</li> <li>Allergies and any previous reactions to products or interventions</li> <li>Historical and planned surgical treatments</li> </ul> </li> </ul>	<ul> <li>Undertake a concise and comprehensive cosmetic consultation and assessment to include:         <ul> <li>Client concerns, expectations and desired outcomes</li> <li>Age, general and specific medical &amp; family history of relevance</li> <li>Psycho-social history and reasons for seeking cosmetic intervention</li> <li>Current medication- prescribed, over the counter and supplements</li> <li>Current pregnancy, breast feeding or trying to conceive</li> <li>Allergies and any previous reactions to products or interventions</li> <li>Historical and planned surgical treatments</li> <li>Previous adverse outcomes to cosmetic /aesthetic treatments</li> </ul> </li> </ul>	Working within your sphere of competence establish the requirements of the person requesting treatment to include:  • Their concerns, expectations and desired outcomes  • Lifestyle assessmentintrinsic/ extrinsic factors affecting skin health  • Current pregnancy, breast feeding or trying to conceive  • Allergies and any previous reactions to products or interventions  • Lifestyle assessmentintrinsic/ extrinsic factors affecting skin health

- Previous adverse outcomes to cosmetic /aesthetic treatments
- Lifestyle assessment- intrinsic/ extrinsic factors affecting skin or hair health
- Social and work activities which may impact treatment /outcomes

#### Assessment of the skin using;

 aesthetic scales or tools as appropriate, including but not limited to; Merz scales, wrinkle assessment scale, visual analog scale, Fitzpatrick skin typing, ethnic skin typing)

#### **GMC** registered practitioner only

Assessment of the scalp/hair /hair line using;

- Blood tests to establish hormonal profile and other contributory factors
- Hair loss tools as appropriate

- Lifestyle assessment- intrinsic/ extrinsic factors affecting skin or hair health
- Social and work activities which may impact treatment /outcomes
- Assessment of the skin using aesthetic scales or tools as appropriate, including but not limited to; Merz scales, wrinkle assessment scale, visual analogue scale, Fitzpatrick skin typing, ethnic skin typing)
- Social and work activities which may impact treatment /outcomes
- Assessment of the skin using aesthetic scales or tools as appropriate, including but not limited to; Merz scales, wrinkle assessment scale, visual analogue scale, Fitzpatrick skin typing, ethnic skin typing)

Ensure where relevant the accountable practitioner providing supervision and oversight has undertaken and documented an assessment of the patients' capacity and needs and gained informed consent for treatment agreed.

Demonstrate appropriate consultation process, using appropriate verbal and non- verbal communication and interpersonal skills considering social, spiritual cultural and language issues.

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Identify the need for additional information from other clinicians involved with the patient and understand how this can be obtained in compliance with confidentiality and consent Identify the need for additional information from other clinicians involved with the patient) and understand how this can be obtained in compliance with confidentiality and consent

Identify the need for additional information and refer to accountable practitioner

guidance and the General Data Protection Regulation (GDPR).	guidance and the General Data Protection Regulation (GDPR).	
Recognise, respond and refer appropriately in relation to any concerns disclosed or identified, including but not limited to:  • Psychological conditions e.g. body dysmorphic disorder  • Safeguarding issues  • Skin lesions or dermal abnormalities  • Other	Recognise, respond and refer appropriately in relation to any concerns disclosed or identified, including but not limited to:  • Psychological conditions e.g. body dysmorphic disorder  • Safeguarding issues  • Skin lesions or dermal abnormalities  • Other	Recognise and refer appropriately if any concerns are identified or disclosed
Document the assessment in line with relevant professional guidelines, including baseline photographs where appropriate using CPSA advised approach	Document the assessment in line with relevant professional guidelines, including baseline photographs where appropriate using CPSA advised approach	Document the assessment as agreed with accountable practitioner

Demonstrate defensible shared decision making and competence in planning the management of care with the client/patient		
PSRB regulated practitioner who is a prescriber	Non-prescriber regulated by PSRB	Practitioner - working under supervision /oversight Non-prescriber and/or not regulated by PSRB
Demonstrate application of legal, ethical, clinical and professional guidelines including CPSA/JCCP standards and code of practice to shared decision making.  Demonstrate ability to explain clearly to patients, with evidence-based rationale  • when treatment is not appropriate or in the best interest of the patient  • possible treatment options and alternatives available  • effectiveness of treatment based upon current evidence including limitations of the evidence base  • realistic outcomes that can be achieved & limitations of cosmetic interventions  • potential risks and adverse incident associated with the intervention(s)  • pain and pain management relevant to intervention  • pre- treatment procedures as may be required  • aftercare required  • possible/likely further interventions and recommended treatment	Demonstrate application of legal, ethical, clinical and professional guidelines including CPSA/JCCP standards and code of practice to shared decision making  Demonstrate ability to explain clearly to patients, with evidence-based rationale  • when treatment is not appropriate or in the best interest of the patient  • possible treatment options and alternatives available  • effectiveness of treatment based upon current evidence including limitations of the evidence base  • realistic outcomes that can be achieved & limitations of cosmetic interventions  • potential risks and adverse incident associated with the intervention(s)  • supervision arrangements in place for managing adverse incidents  • pain and pain management relevant to intervention  • pre- treatment procedures as may be required  • aftercare required	Demonstrate application of JCCP/CPSA standards, code of practice and relevant guidance to shared decision making  Working within your sphere of competence, demonstrate ability to explain clearly  • when treatment is not appropriate or in the best interest of the patient  • Possible treatment options and alternatives available  • realistic outcomes that can be achieved & limitations of cosmetic interventions  • potential risks and adverse incidents associated with the intervention(s)  • supervision arrangements in place for managing adverse incidents  • pain and pain management relevant to intervention  • pre- treatment procedures as may be required  • aftercare required

initial and actual or potential future costs	<ul> <li>possible/likely further interventions and recommended treatment intervals to maintain outcome</li> <li>initial and actual or potential future costs</li> </ul>	<ul> <li>possible/likely further interventions and recommended treatment intervals to maintain outcome</li> <li>initial and actual or potential future costs</li> </ul>
Elicit and clarify patient's knowledge and understanding in order to enable informed consent in line with professional guidance about the proposed treatment(s)	Elicit and clarify patient's knowledge and understanding in order to enable informed consent in line with professional guidance about the proposed treatment(s)	Review patient's knowledge and understanding of the treatment to be provided and aftercare required, to ensure they are able to give informed consent to proposed treatment(s)
Provide supplementary verbal and/or written information as required.	Provide supplementary verbal and/or written information as required	Provide supplementary written and/or verbal information within your sphere of competence or refer to the accountable practitioner providing oversight
Seek informed consent in writing for treatment and consent for pre and post images and document appropriately following relevant professional guidance	Seek informed consent in writing for treatment and consent for pre and post images and document appropriately following professional guidance	Ensure informed consent for agreed interventions /procedures consent for pre and post images has been obtained by an accountable practitioner providing oversight
Demonstrate effective communication skills in negotiating and agreeing a suitable treatment plan and appropriate care for the individual patient using an evidence based /best practice approach which includes;  • Preventative interventions related to patient specific risk factors  • Gaining written consent & explaining /providing cooling off period  • Prescription and supply of products where required  • Time scale for treatments, recovery and required follow up	Demonstrate effective communication skills in negotiating and agreeing a suitable treatment plan and appropriate care for the individual patient using an evidence based /best practice approach which includes;  • Preventative interventions related to patient specific risk factors  • Gaining written consent & explaining /providing cooling off period  • Where relevant, administration of products prescribed by accountable practitioner providing supervision or oversight	Demonstrate effective communication skills in negotiating and agreeing a suitable treatment plan and appropriate care for the individual patient using an evidence based /best practice approach which includes;  • Preventative interventions related to patient specific risk factors • Gaining written consent & explaining /providing cooling off period • Where relevant, administration of products prescribed by

<ul> <li>Possibility of adverse events &amp; actions to be taken</li> <li>Cost &amp; payment arrangements</li> </ul>	<ul> <li>Time scale for treatments, recovery and required follow up</li> <li>Possibility of adverse events &amp; actions to be taken</li> <li>Cost &amp; payment arrangements</li> </ul>	<ul> <li>accountable practitioner providing supervision/oversight</li> <li>Time scale for treatments, recovery and required follow up</li> <li>Possibility of adverse events &amp; actions to be taken</li> <li>Cost &amp; payment arrangements</li> </ul>
Document the agreed plan of care in line with professional /CPSA guidance	Document the agreed plan of care in line with professional /CPSA guidance	Document the agreed plan of care in line with CPSA and local guidelines

PSRB regulated practitioner who is a prescriber	Non- prescriber regulated by PSRB	Practitioner- working under supervision /oversight Non-prescriber and/or not regulated by PSRB
Identify lifestyle factors amenable to change to improve skin or hair health in specific patients, e.g. extrinsic ageing due to factors including but not limited to: smoking, sun exposure, diet, sleep, product use	Identify lifestyle factors amenable to change to improve skin or hair health in specific patients, e.g. extrinsic ageing due to factors including but not limited to: smoking, sun exposure, diet, sleep, product use	Identify lifestyle factors amenable to change to improve skin health in specific patients, e.g. extrinsic ageing due to factors including but not limited to: smoking, sun exposure, diet, sleep, product use
Explore with patient(s) evidence-based information on an appropriate skin/ hair treatment plan.	Explore with patient(s) evidence-based information on an appropriate skin/hair treatment plan.	Explore with patient(s) evidence-based information on an appropriate skin/ hair treatment plan.
Assesses patient's readiness for change using an evidence based brief intervention scale, e.g. motivation/ confidence	Assesses patient's readiness for change using an evidence based brief intervention scale, e.g. motivation/ confidence	Assesses patient's readiness for change using an evidence based brief intervention scale, e.g. motivation/ confidence
Employ evidence based, motivational risk reduction/ brief intervention approaches to facilitate behaviour change for lifestyle factors	Employ evidence based, motivational risk reduction/ brief intervention approaches to facilitate behaviour change for lifestyle factors	Employ evidence based, motivational risk reduction/ brief intervention approaches to facilitate behaviour change for lifestyle factors
Evaluate patient motivation/ confidence to change post intervention	Evaluate patient motivation/ confidence to change post intervention	Evaluate patient motivation/ confidence to change post intervention or  Review and document as agreed with

PSRB regulated practitioner who is a prescriber	Non- prescriber regulated by PSRB	Practitioner- working under supervision /oversight Non- prescriber and/or not regulated by PSRB
Review informed consent post cooling off period and ensure it is documented and signed in accordance with professional guidance	Review informed consent post cooling off period and ensure it is documented and signed in accordance with professional guidance	Review informed consent post cooling off period and ensure it is documented and has been signed by patient and accountable practitioner
Ensure patient is adequately prepared for the procedure, with opportunity to have a chaperone where requested.	Ensure patient is adequately prepared for the procedure, with opportunity to have a chaperone where requested.	Ensure patient is adequately prepared for the procedure, with opportunity to have a chaperone where requested.
Prepare appropriate equipment and environment for agreed treatment as per CPSA standards for each modality	Prepare appropriate equipment and environment for agreed treatment as per CPSA standards for each modality	Prepare appropriate equipment for agreed treatment as per CPSA standards for each modality
Demonstrate ability to identify relevant anatomical landmarks related to agreed procedure	Demonstrate ability to identify relevant anatomical landmarks related to agreed procedure	Demonstrate ability to identify relevant anatomical landmarks related to agreed procedure
Use universal infection control precautions including but not limited to; aseptic no touch technique (ANTT), handwashing and appropriate skin preparation to minimise risk of infection  Demonstrate aseptic technique during administration of	Use universal infection control precautions including but not limited to; aseptic no touch technique (ANTT), handwashing and appropriate skin preparation to minimise risk of infection  Demonstrate aseptic technique during administration of	Use universal infection control precautions including but not limited to aseptic no touch technique (ANTT), handwashing and appropriate skin preparation to minimise risk of infection Demonstrate aseptic technique during administration of
<ul> <li>Agreed treatment (see specific criteria following)</li> </ul>	<ul> <li>Agreed treatment (see specific criteria following)</li> </ul>	<ul> <li>Agreed treatment (see specific criteria following)</li> </ul>

Apply knowledge of topical local anaesthetic techniques	Apply knowledge of topical local anaesthetic techniques	Apply knowledge of topical local anaesthetic techniques
Administer appropriate treatment (see modality specific criteria) in line with prescription and medicines management policy & CPSA standards for that modality maintaining patient privacy and dignity.  Dispose of all used equipment safely and appropriately following relevant guidance	Administer appropriate treatment (as per prescription where appropriate), to defined areas as outlined within CPSA standards and supervision matrix, acting within your sphere of competence and maintaining patient privacy and dignity  Dispose of all used equipment safely and appropriately following relevant guidance	Administer appropriate treatment (as per prescription where appropriate), to defined areas as outlined in CPSA standards and supervision matrix acting within your sphere of competence and maintaining patient privacy and dignity.  Dispose of all used equipment safely and appropriately following relevant guidance
Record clearly and contemporaneously treatment provided as per professional guidance  • Pre- treatment/baseline image recording  • At treatment episode; product name, batch code, expiry date, dosage, site, technique, depth, volume  • Device specification and treatment settings as applicable; e.g wavelength(s),	Record clearly and contemporaneously treatment provided as per professional guidance  • Pre-treatment/baseline image recording  • At treatment episode; product name, batch code, expiry date, dosage, site, technique, depth, volume	Record clearly and contemporaneously treatment provided as per CPSA guidance  • Pre-treatment/baseline image recording  • At treatment episode; product name, batch code, expiry date, dosage, site, technique, depth, volume

<ul> <li>fluence/energy/power, pulse duration, pulse delay, cooling, etc.</li> <li>Post treatment image recording using CPSA advised approach</li> <li>Post treatment aftercare advice and follow up information or advice given verbally, in writing, e-mail or text.</li> </ul>	<ul> <li>Device specification and treatment settings as applicable; e.g wavelength(s) fluence/energy/power, pulse duration, pulse delay, cooling, etc.</li> <li>Post treatment image recording using CPSA advised approach</li> <li>Post treatment aftercare advice and follow up information or advice given verbally, in writing, e-mail or text.</li> </ul>	<ul> <li>Post treatment image recording using CPSA advised approach</li> <li>Post treatment aftercare advice and follow up information or advice given verbally, in writing, email or text.</li> </ul>
Provide relevant advice to patients undergoing interventions to encompass;  • Aftercare required  • Recognition of complications / adverse reaction and actions to take including who to contact if you are not available  • Importance of seeking urgent care  • Required follow up and monitoring process	Provide relevant advice to patients undergoing interventions to encompass;  • Aftercare required • Recognition of complications / adverse reaction and actions to take including who to contact • Importance of seeking urgent care • Required follow up and monitoring process	Provide relevant advice to patients undergoing interventions to encompass;  • Aftercare required • Recognition of complications / adverse reaction and actions to take including who to contact • Importance of seeking urgent care • Required follow up and monitoring process
Recognise and differentiate between common side effects and adverse events	Recognise and differentiate between common side effects and adverse events	Recognise and report side effects and adverse events to accountable practitioner/ supervisor
Recognise emergency events  Demonstrate ability to provide basic life support	Recognise emergency events  Demonstrate ability to provide basic life support	Recognise emergency events  Demonstrate ability to provide basic life support

Manage emergency /adverse events using evidence based protocols for;  • Vascular occlusion  • Necrosis  • Allergy  • Anaphylaxis  • Arterial puncture	Contact accountable practitioner providing supervision, within the agreed timescale Manage emergency adverse events using evidence based protocols for;  • Vascular occlusion  • Necrosis  • Allergy  • Anaphylaxis  • Arterial puncture	Contact accountable practitioner providing supervision, within the agreed timescale  Follow agreed emergency protocol process until supervisor is present
Recognise when to seek expert /professional guidance for complications/ adverse events	Recognise when to seek expert /professional guidance for complications/ adverse events	Recognise when to seek expert /professional guidance for complications/ adverse events
Demonstrate knowledge/use of care pathways available in local area for management and/ or referral for complications or cosmetic emergency	Demonstrate knowledge/use of care pathways available in local area for management and/ or referral for complications or cosmetic emergency	Demonstrate knowledge/use of care pathways available in local area for management and/ or referral for complications or cosmetic emergency
Record and report adverse events and product safety concerns to the CPSA using agreed reporting mechanism  • Yellow card system  • Pharma company  • Peer networks	Record and report adverse events and product safety concerns to the accountable practitioner providing supervision and the CPSA using agreed reporting mechanism  • Yellow card system  • Pharma company  • Peer networks	Record and report adverse events and product safety concerns to the accountable practitioner providing supervision and the CPSA using agreed reporting mechanism
Record any queries or correspondence including	Record any queries or correspondence including  • photographs received from patient  • advice given in response to queries with timeline for action	Record any queries or correspondence including  • photographs received from patient  • advice given in response to queries with timeline for action
Manage needle-stick injuries in line with national and CPSA guidance	Manage needle-stick injuries in line with national and CPSA guidance	Manage needle-stick injuries in line with national and CPSA guidance

# Apply principles of clinical governance, audit and quality to evaluate the outcomes of clinical and non-clinical interventions

PSRB regulated practitioner who is a	Non- prescriber regulated by PSRB	Practitioner- working under supervision
prescriber		/oversight
		Non- prescriber and/or not regulated by PSRB
Demonstrate ability to critically review	Demonstrate ability to critically review patient	Demonstrate ability to review patient
patient needs and effectiveness of	needs and effectiveness of planned treatment(s)	needs and effectiveness of treatment
planned treatment(s) against current	against current evidence base and guidelines for	provided using current standards and
evidence base and guidelines for practice	practice	guidelines for practice
Collect patient reported outcome	Collect patient reported outcome measures	Collect patient reported outcome
measures (PROM) for treatments provided	(PROM) for treatments provided and use in	measures (PROM) for treatments provided
and use in discussion with	discussion with accountable practitioner	and use in discussion with accountable
peers/professional body to improve	providing oversight to improve practice	practitioner providing oversight to improve
practice.		practice
Amend the treatment plan appropriately	Amend the treatment plan appropriately in	Amend the treatment plan appropriately in
in partnership with patient to improve	partnership with patient and accountable	partnership with patient and accountable
outcomes	practitioner where appropriate to improve	practitioner
	outcomes	
Evaluate effectiveness of treatment(s)	Evaluate effectiveness of treatment(s) provided	Evaluate effectiveness of treatment(s)
provided		provided
<ul> <li>Audit of overall treatment quality</li> </ul>	<ul> <li>Audit of overall treatment quality and</li> </ul>	<ul> <li>Audit of overall treatment quality</li> </ul>
and aftercare provided for a	aftercare provided for a defined number	and aftercare provided for a
defined number of patients/clients	of patients/clients following CPSA	defined number of patients/clients
following CPSA guidance per	guidance per modality	following CPSA guidance per
modality		modality
<ul> <li>Identify issues for continuous</li> </ul>	Identify issues for continuous quality	<ul> <li>Identify issues for continuous</li> </ul>
quality improvement including	improvement including review of	quality improvement including
review of accepted protocols	accepted protocols	review of accepted protocols in line
· · ·		with oversight requirements

Engage in reflective practice with supervisor /appraiser to develop personal	Engage in reflective practice with supervisor /appraiser to develop personal learning	Engage in reflective practice with supervisor /appraiser to develop personal
Identify and address future personal and professional development and learning needs and validation requirements in line with regulatory body and CPSA requirements	Identify and address future personal and professional development and learning needs and validation requirements in line with regulatory body and CPSA requirements	Identify and address future personal and professional development and learning needs and validation requirements in line with CPSA requirements
Identify issues of concern and exercise accountability and whistleblowing requirements of PSRB and CPSA	Identify issues of concern and exercise accountability and whistleblowing requirements of PSRB and CPSA	Identify issues of concern and follow CPSA code of practice to raise concerns with relevant authority

# **Specific Competencies for Each Treatment Modality**

# Modality specific competencies: Temporary/semi- permanent dermal fillers

Level 7: Administer temporary/semi- permanent dermal fillers within the agreed treatment plan		
PSRB regulated practitioner who is a prescriber	Non prescriber regulated by PSRB	Practitioner- working under supervision /oversight Non- prescriber and/or not regulated by PSRB At present, JCCP are not supporting entry to the register of practitioners not registered with a PSRB, such as beauty therapists, for a period of 3 years, when this will be reviewed. This is to allow relevant qualifications to be developed and delivered at level 4,5,6 to enable those currently at level 3 /4 to demonstrate academic progression. The competencies identified are to inform the development of future educational programmes.
Evidence achievement of required	academic entry level (minimum level 6/degree le	vel) on relevant national framework
Demonstrate applied knowledge of anatomy of the face including musculature, tissue planes, nerves and blood supply  Demonstrate understanding of product biochemistry/rheology for each dermal filler through explanation to assessor of the  • Mechanism of action (e.g. volumisation, collagenesis)  • Suitability for treatment area  • Anticipated longevity  • Precautions and contraindications	Demonstrate applied knowledge of anatomy of the face including musculature, tissue planes, nerves and blood supply  Demonstrate understanding of product biochemistry/rheology for each dermal filler through explanation to assessor of the  • Mechanism of action (e.g. volumisation, collagenesis)  • Suitability for treatment area  • Anticipated longevity  • Precautions and contraindications	Demonstrate applied knowledge of anatomy of the face including musculature, tissue planes, nerves and blood supply  Demonstrate understanding of product biochemistry/rheology for each dermal filler through explanation to supervisor of the  • Mechanism of action (e.g. volumisation, collagenesis)  • Suitability for treatment area  • Anticipated longevity  • Precautions and contraindications

Use the appropriate Summary of Product	Use the appropriate Summary of Product	Use the appropriate Summary of Product
Characteristics for the chosen device, to	Characteristics for the chosen device, to	Characteristics for the chosen device, to
ensure familiarity with the appropriate dose	ensure familiarity with the appropriate dose	ensure familiarity with the appropriate dose
range, reconstitution, needle placement,	range, reconstitution, needle placement, and	range, reconstitution, needle placement,
and injection depth	injection depth	and injection depth
Assess appropriateness of the patient for	Assess appropriateness of the patient for	Assess appropriateness of the patient for
specific treatment (see core competencies)	specific treatment (see core competencies)	specific treatment (see core competencies)
Explain, as part of informed and valid	Explain, as part of informed and valid consent,	Explain, as part of informed and valid
consent, the risks and benefits associated	the risks and benefits associated with dermal	consent, the risks and benefits associated
with dermal fillers:	fillers:	with dermal fillers:
Pain		
Bleeding	• Pain	Pain
<ul> <li>Inflammation</li> </ul>	<ul> <li>Inflammation</li> </ul>	Bleeding
Infection	Bleeding	<ul> <li>Inflammation</li> </ul>
<ul> <li>Blindness</li> </ul>	<ul> <li>Infection</li> </ul>	<ul> <li>Infection</li> </ul>
<ul> <li>Vascular occlusion</li> </ul>	<ul> <li>Blindness</li> </ul>	<ul> <li>Blindness</li> </ul>
<ul> <li>Anaphylaxis</li> </ul>	<ul> <li>Vascular occlusion</li> </ul>	Vascular occlusion
<ul> <li>Hypersensitivity</li> </ul>	<ul> <li>Anaphylaxis</li> </ul>	<ul> <li>Anaphylaxis</li> </ul>
Granuloma	<ul> <li>Hypersensitivity</li> </ul>	Hypersensitivity
Biofilm	Granuloma	Granuloma
<ul> <li>Bruising</li> </ul>	Biofilm	Biofilm
	<ul><li>Bruising</li></ul>	Bruising
Assess facial characteristics and plan and	Assess facial characteristics and administer	Assess facial characteristics and administer
administer treatment appropriate to	planned treatment appropriate to	planned treatment appropriate to
<ul> <li>Patient medical history</li> </ul>	Patient medical history	Patient medical history
<ul><li>patient's anatomy</li></ul>	<ul> <li>patient's anatomy</li> </ul>	<ul><li>patient's anatomy</li></ul>
<ul><li>ethnicity</li></ul>	• ethnicity	• ethnicity
• gender	• gender	• gender
intrinsic and extrinsic ageing factors	intrinsic and extrinsic ageing factors	<ul> <li>intrinsic and extrinsic ageing factors</li> </ul>
• skin type	skin type	skin type

<ul> <li>Minimise risk through</li> <li>Identifying and avoiding danger zones appropriate to procedure</li> <li>Using prick testing or patch testing</li> <li>Apply all medicines legislation, particularly those unlicensed for cosmetic use or whose use is "off label", including manufacturer's instructions on storage, administration and disposal of medicines</li> </ul>	Minimise risk through	<ul> <li>Minimise risk through</li> <li>Identifying and avoiding danger zones appropriate to procedure</li> <li>Using prick testing or patch testing</li> <li>Apply all medicines legislation working under the direction and supervision of an accountable practitioner</li> </ul>
Select and demonstrate safe and appropriate injection techniques using both needle and cannula methods for the treatment of lines, contouring and facial volume loss, using temporary dermal fillers These may include; Midface  • Nasolabial lines • Zygomatic Lower face • Marionette lines • Peri-oral lines • Lip line • Lip volumisation  Undertake and log as per CPSA guidance • a minimum of 10 observed cases • a minimum of 10 supervised cases  Specific programmes should state explicitly which areas are taught and assessed.  Practitioners who achieve these	Select and demonstrate safe and appropriate injection techniques using both needle and cannula methods for the treatment of lines, contouring and facial volume loss, using temporary dermal fillers.  These may include; Midface  Nasolabial lines  Zygomatic Lower face  Marionette lines  Peri oral lines  Lip line  Lip volumisation  Undertake and log as per CPSA guidance  a minimum of 10 observed cases  a minimum of 10 supervised cases  Specific programmes should state explicitly which areas are taught and assessed  Practitioners who have achieved these	Select and demonstrate safe and appropriate injection techniques using both needle and cannula methods for the treatment of superficial and fine lines, using temporary dermal fillers.

advance their scope of practice with temporary or semi-permanent dermal fillers, should do so through access to appropriate education and supervised practice.	advance their practice with the use of temporary and/or semi-permanent dermal fillers, should successfully complete an accredited non- medical prescribing programme.	
Record details of treatment provided including brand, lot/batch number, expiry date, product, diluent, filler type, volume injected, needle or cannula administration, additional products /medicines injected Recognise emergency/adverse events associated with dermal fillers injections	Record details of treatment provided including brand, lot/batch number, expiry date, product, diluent, filler type, volume injected, needle or cannula administration, additional products /medicines injected  Recognise emergency/adverse events associated with dermal filler injections	Record details of treatment provided including brand, lot/batch number, expiry date, product, diluent, filler type, volume injected, needle or cannula administration, additional products /medicines injected Recognise emergency/adverse events associated with dermal filler injections
Demonstrate ability to provide basic life support  Manage emergency /adverse events using evidence based protocols  Vascular occlusion Necrosis Allergy Anaphylaxis Arterial puncture	Demonstrate ability to provide basic life support  Manage emergency /adverse events with support of accountable practitioner using evidence based protocols  Vascular occlusion Necrosis Allergy Anaphylaxis Arterial puncture	Demonstrate ability to provide basic life support  Manage emergency /adverse events with support of accountable practitioner using evidence based- protocols  Vascular occlusion Necrosis Allergy Anaphylaxis Arterial puncture
Demonstrate appropriate and effective use of hyaluronidase in the management of complications	Demonstrate understanding of the appropriate and effective use of hyaluronidase in the management of complications and the importance of rapid access to an accountable prescribing practitioner	Demonstrate understanding of the appropriate and effective use of hyaluronidase in the management of complications and the importance of rapid access to an accountable prescribing practitioner

Agree an appropriate follow up plan with	Agree an appropriate follow up plan with	Agree an appropriate follow up plan with
patient	patient and accountable practitioner	patient and accountable practitioner

# **Modality specific competencies: Botulinum Toxin**

Level 7: Administer botulinum toxin within the agreed treatment plan		
PSRB regulated practitioner who is a prescriber	Non prescriber regulated by PSRB	Practitioner- working under supervision /oversight Non prescriber and/or not regulated by PSRB At present, JCCP are not supporting entry to the register of practitioners not registered with a PSRB, such as beauty therapists, for a period of 3 years, when this will be reviewed. This is to allow relevant qualifications to be developed and delivered at level 4,5,6 to enable academic progression . As such, these competencies are provided only to inform education providers developing awards for the future
Evidence achievement of required academic	Evidence achievement of required academic	Evidence achievement of required
entry level (minimum degree level) on relevant national framework	entry level (minimum degree level) on relevant national framework	academic entry level (minimum degree level) on relevant national framework
Demonstrate applied knowledge of anatomy & physiology of the face including  • the muscles of facial expression  • tissue planes,  • nerves  • blood supply	Demonstrate applied knowledge of anatomy & physiology of the face including  • the muscles of facial expression  • tissue planes,  • nerves  • blood supply	Demonstrate applied knowledge of anatomy & physiology of the face including  the muscles of facial expression tissue planes, nerves blood supply
Demonstrate understanding of the	Demonstrate understanding of the	Demonstrate understanding of the
pharmacology of different Botulinum Toxin	pharmacology of different Botulinum Toxin	pharmacology of different Botulinum
products through explanation to supervisor of	products through explanation to supervisor of	

<ul> <li>Mechanism of action</li> <li>Suitability for treatment area</li> <li>Anticipated longevity</li> <li>Precautions and contraindications</li> <li>Storage</li> <li>Reconstitution</li> <li>Unit equivalence</li> <li>Dosage</li> <li>Management of spillages/excess product</li> <li>Safe disposal</li> </ul>	<ul> <li>Mechanism of action</li> <li>Suitability for treatment area</li> <li>Anticipated longevity</li> <li>Precautions and contraindications</li> <li>Storage</li> <li>Reconstitution</li> <li>Unit equivalence</li> <li>Dosage</li> <li>Management of spillages/excess product</li> <li>Safe disposal</li> </ul>	Toxin products through explanation to supervisor of  Mechanism of action Suitability for treatment area Anticipated longevity Precautions and contraindications Storage Reconstitution Unit equivalence Dosage Management of spillages/excess product Safe disposal
Identify the appropriate Summary of Product Characteristics (SPC) for the chosen drug, to ensure familiarity with the appropriate dose range, reconstitution, needle placement, and injection depth	Identify the appropriate Summary of Product Characteristics for the chosen drug, to ensure familiarity with the appropriate dose range, reconstitution, needle placement, and injection depth	Identify the appropriate Summary of Product Characteristics for the chosen drug, to ensure familiarity with the appropriate dose range, reconstitution, needle placement, and injection depth
Assess appropriateness of the patient for specific treatment (see core competencies)	Ensure the accountable practitioner providing supervision has assessed the patient's suitability for treatment	Ensure the accountable practitioner providing supervision has assessed the patient's suitability for treatment
Record pre-procedure images as per CPSA guidelines with consent	Record pre-procedure images as per CPSA guidelines with consent	Record pre- procedure images as per CPSA guidelines with consent
Explain as part of informed and valid consent the risks and benefits associated with botulinum toxin injections as per the SPC, including but not limited to;  • Mild transient symptoms to upper face, neck	Ensure the accountable prescribing practitioner has explained as part of informed and valid consent the risks and benefits associated with botulinum toxin injections as per the SPC, including but not limited to;  • Mild transient symptoms to upper face, neck	Ensure the accountable prescribing practitioner has explained as part of informed and valid consent the risks and benefits associated with botulinum toxin injections as per the SPC, including but not limited to;  • Mild transient symptoms to upper face, neck

<ul> <li>Moderate transient symptoms or impairment to periocular or perioral area</li> <li>Systemic toxic effect which may be life threatening</li> </ul>	<ul> <li>Moderate transient symptoms or impairment to periocular or perioral area</li> <li>Systemic toxic effect which may be life threatening</li> </ul>	<ul> <li>Moderate transient symptoms or impairment to periocular or perioral area</li> <li>Systemic toxic effect which may be life threatening</li> </ul>
Apply all medicines legislation to the prescription of botulinum toxins (particularly those unlicensed for cosmetic use or whose use is "off label"), including defensible decision-making drawing upon best evidence and manufacturer's instructions on storage, administration and disposal of medicines.	Administer botulinum toxin as prescribed working within your sphere of competence	Administer botulinum toxin as prescribed working within your sphere of competence
Demonstrate safe and appropriate injection technique in line with; product characteristics, licenced and off license indications of available botulinum toxins for the treatment of, or intervention in:  • Dynamic rhytides of the face caused by the action of glabellar complex, the frontalis, and the orbicularis occuli • Compensatory mechanisms for lifting or lowering eyebrow	Demonstrate safe and appropriate injection technique in line with; product characteristics, licenced and off license indications of available botulinum toxins for the treatment of, or intervention in:  Dynamic rhytides of the face caused by the action of glabellar complex, the frontalis, and the orbicularis occuli Compensatory mechanisms for lifting or lowering eyebrows	Demonstrate safe and appropriate injection technique in line with; product characteristics, for licenced indications of available botulinum toxins for the treatment of, or intervention in:  Dynamic rhytides of the face caused by the action of glabellar complex, the frontalis, and the orbicularis occuli  Compensatory mechanisms for
<ul> <li>Undertake and log as per CPSA guidance</li> <li>a minimum of 10 observed cases</li> <li>a minimum of 10 supervised cases</li> </ul> Specific programmes should state explicitly which areas are taught and assessed.	<ul> <li>Undertake and log as per CPSA guidance</li> <li>a minimum of 10 observed cases</li> <li>a minimum of 10 supervised cases</li> <li>Specific programmes should state explicitly which areas are taught and assessed.</li> </ul>	<ul> <li>lifting or lowering eyebrows</li> <li>Undertake and log as per CPSA guidance</li> <li>a minimum of 10 observed cases</li> <li>a minimum of 10 supervised cases</li> </ul>

Practitioners who have achieved these	Practitioners who have achieved these	
competencies, and wish to extend and advance their practice with the use of	competencies, and wish to extend and advance their practice with the use of	
Botulinum Toxin, should undertake	Botulinum Toxin, should undertake a non-	
•	medical prescribing programme.	
appropriate education and supervised practice.	medical prescribing programme.	
•	Decord details of treatment provided for each	Decord details of treatment provided for
Record details of treatment provided for each	Record details of treatment provided for each	Record details of treatment provided for
patient including skin preparation, anatomical	patient including skin preparation, anatomical	each patient including skin preparation,
site, product, brand, lot/batch number, expiry	site, product, brand, lot/batch number, expiry	anatomical site, product, brand, lot/batch
date, dose, diluent used, date and time of	date, dose, diluent used, date and time of	number, expiry date, dose, diluent used,
treatment, prescribing and administering	treatment, prescribing and administering	date and time of treatment, prescribing
practitioner, adverse effects and after care and	practitioner, adverse effects and after care and	and administering practitioner, adverse
follow up instructions given.	follow up instructions given.	effects and after care and follow up
		instructions given.
Record post procedure images as per CPSA	Record post procedure images as per CPSA	Record post procedure images as per
guidelines with consent	guidelines with consent	CPSA guidelines with consent
Provide clear aftercare instructions detailing	Provide clear aftercare instructions detailing	Provide clear aftercare instructions
specific complications of injections and	specific complications of injections and	detailing specific complications of
botulinum toxin treatment and what to do if	botulinum toxin treatment and what to do if	injections and botulinum toxin treatment
they occur	they occur	and what to do if they occur
Recognise emergency/adverse events	Recognise emergency/adverse events	Recognise emergency/adverse events
associated with botulinum toxin	associated with botulinum toxin	associated with botulinum toxin
Demonstrate ability to provide basic life	Demonstrate ability to provide basic life	Demonstrate ability to provide basic life
support	support	support
Manage emergency /adverse events using	Manage emergency /adverse events under	Manage emergency /adverse events
evidence- based protocols	guidance of accountable practitioner	under guidance of accountable
,	/supervisor using evidence-based protocols	practitioner /supervisor using evidence-
	, and a second second second	based protocols
Review efficacy and outcome of treatment at	Review efficacy and outcome of treatment at	Review efficacy and outcome of
follow up appointment and correct asymmetry	follow up appointment and correct	treatment at follow up appointment and
where required, taking further images with	asymmetry, where required, taking further	correct asymmetry, where required,

patient consent ensuring that 'review'	images with patient consent ensuring that	taking further images with patient
treatment where required is administered	'review' treatment where required is	consent ensuring that 'review' treatment
within 4 weeks of original treatment	administered within 4 weeks of original	where required is administered within 4
	treatment	weeks of original treatment

#### Modality specific competencies: Laser, Light & Energy Based Therapies

#### Provide Level 4 Laser, Light & Energy Based Therapies (LLEBT) within the agreed treatment plan

- 1. Laser and light based hair reduction (HR) (excluding treatments within the periorbital region)

PSRB regulated practitioner who is a prescriber	Non- prescriber regulated by PSRB	Practitioner- working under supervision /oversight Non- prescriber and/or not regulated by PSRB
•	entry level (minimum level 3) on relevant national anufacturer/industry training (where applicable)	·
Demonstrate applied knowledge of the skin anatomy and physiology in relation to assessing suitability for laser, light and energy-based interventions, in particular  • selective photothermolyisis,  • light-tissue interactions,  • identification of generalised	Demonstrate applied knowledge of the skin anatomy and physiology in relation to assessing suitability for laser, light and energy-based interventions, in particular  • selective photothermolyisis,  • light-tissue interactions,  • identification of generalised	Demonstrate applied knowledge of the skin anatomy and physiology in relation to assessing suitability for laser, light and energy-based interventions, in particular  • selective photothermolyisis,  • light-tissue interactions,  • identification of generalised

Assess the patient and presenting condition/skin lesions to deliver appropriate treatment according to:

dermatology (ABCDE),

- patient medical history, risk factors and psychological factors, (e.g. BDD, OCD)
- presenting indications and contraindications
- skin phenotype accounting for ethnic factors that may influence clinical outcomes

dermatology (ABCDE),

dermatology (ABCDE),5 Assess the patient and presenting condition/skin

Assess the patient and presenting condition/skin lesions to deliver appropriate treatment according to:

- patient medical history, risk factors and psychological factors, (e.g. BDD, OCD)
- presenting indications and contraindications
- skin phenotype accounting for ethnic factors that may influence clinical outcomes

lesions to deliver appropriate treatment according to:

- patient medical history, risk factors and psychological factors, (e.g. BDD, OCD)
- presenting indications and contraindications
- skin phenotype accounting for ethnic factors that may influence clinical outcomes

<ul> <li>intrinsic and extrinsic aging factors</li> <li>presenting lesion or skin conditions</li> <li>anatomical site of treatment</li> </ul>	<ul> <li>intrinsic and extrinsic aging factors</li> <li>presenting lesion or skin conditions</li> <li>anatomical site of treatment</li> </ul>	<ul><li>intrinsic and extrinsic aging factors</li><li>anatomical site of treatment</li></ul>
Identify those lesions	Identify those lesions	Identify those lesions
suitable for treatment,	suitable for treatment,	suitable for treatment,
<ul> <li>within the planned treatment area</li> </ul>	<ul> <li>within the planned treatment area</li> </ul>	<ul> <li>within the planned treatment area</li> </ul>
requiring avoidance,	requiring avoidance,	requiring avoidance,
<ul> <li>requiring avoidance;</li> <li>requiring referral as per CPSA</li> </ul>	<ul> <li>requiring referral as per CPSA</li> </ul>	requiring referral as per CPSA
guidance.	guidance.	guidance.
Explain as part of informed and valid	Explain as part of informed and valid consent,	Explain as part of informed and valid
consent, the risks and benefits of laser, light	the risks and benefits of laser, light and	consent, the risks and benefits of laser, light
and energy-based treatments, including but	energy-based treatments, including but not	and energy-based treatments, including but
not limited to:	limited to:	not limited to:
lack of efficacy of treatment	lack of efficacy of treatment	lack of efficacy of treatment
• burns	• burns	• burns
blisters	• blisters	• blisters
• bruising	• bruising	• bruising
	1	1
pigmentary changes     prosting	pigmentary changes     crusting	pigmentary changes     prosting
• crusting	• crusting	• crusting
• scarring	• scarring	• scarring
oozing/weeping	oozing/weeping	oozing/weeping
alternative treatment options,	alternative treatment options,	alternative treatment options,
including option to do nothing	including option to do nothing	including option to do nothing
Inform the patient of:	Inform the patient of:	Inform the patient of:
<ul> <li>cooling off policy as per CPSA</li> </ul>	<ul> <li>cooling off policy as per CPSA</li> </ul>	<ul> <li>cooling off policy as per CPSA</li> </ul>
overarching principles	overarching principles	overarching principles
<ul> <li>treatment on day of consultation</li> </ul>	<ul> <li>treatment on day of consultation</li> </ul>	<ul> <li>treatment on day of consultation</li> </ul>
being subject to informed consent,	being subject to informed consent,	being subject to informed consent,
photography and patch test revealing	photography and patch test revealing	photography and patch test revealing
no adverse skin reaction/events	no adverse skin reaction/events	no adverse skin reaction/events
Record pre-procedure images as per CPSA	Record pre-procedure images as per CPSA	Record pre-procedure images as per CPSA
guidelines with explicit patient consent and	guidelines with explicit patient consent and	guidelines with explicit patient consent and

explanation as to use, storage and retrieval	explanation as to use, storage and retrieval of	explanation as to use, storage and retrieval
of images in accordance with GDPR.	images in accordance with GDPR.	of images in accordance with GDPR.
Select and demonstrate safe and appropriate	Select and demonstrate safe and appropriate	Select and demonstrate safe and
treatment delivery for treatment of different	treatment delivery for treatment of different	appropriate treatment delivery for
anatomical sites in accordance with BMLA	anatomical sites in accordance with BMLA	treatment of different anatomical sites in
Essential Standards (Std 1) and CPSA	Essential Standards (Std 1) and CPSA	accordance with BMLA Essential Standards
guidance	guidance	(Std 1) and CPSA guidance
Minimise risk of adverse treatment effects through:	Minimise risk of adverse treatment effects through:	Minimise risk of adverse treatment effects through:
<ul> <li>identifying contraindications to</li> </ul>	<ul> <li>identifying contraindications to</li> </ul>	<ul> <li>identifying contraindications to</li> </ul>
treatment	treatment	treatment
<ul> <li>cleansing and preparing the</li> </ul>	<ul> <li>cleansing and preparing the treatment</li> </ul>	<ul> <li>cleansing and preparing the</li> </ul>
treatment area prior to treatment	area prior to treatment	treatment area prior to treatment
<ul> <li>using patch testing where</li> </ul>	<ul> <li>using patch testing where appropriate</li> </ul>	<ul> <li>using patch testing where</li> </ul>
appropriate	<ul> <li>delivering treatments in accordance</li> </ul>	appropriate
<ul> <li>delivering treatments in accordance</li> </ul>	with the approved treatment protocol	<ul> <li>delivering treatments in accordance</li> </ul>
with the approved treatment	<ul> <li>cooling and applying post care</li> </ul>	with the approved treatment
protocol	procedures as per medical treatment	protocol
<ul> <li>cooling and applying post care</li> </ul>	protocol	<ul> <li>cooling and applying post care</li> </ul>
procedures as per medical treatment		procedures as per medical treatment
protocol		protocol
Minimise risk to patient and practitioner	Minimise risk to patient and practitioner	Minimise risk to patient and practitioner
arising from device/equipment incidents	arising from device/equipment incidents	arising from device/equipment incidents
through:	through:	through:
<ul> <li>Working in an approved Laser/Light</li> </ul>	<ul> <li>Working in an approved Laser/Light</li> </ul>	<ul> <li>Working in an approved Laser/Light</li> </ul>
Controlled Area	Controlled Area	Controlled Area
<ul> <li>Working in accordance with Local</li> </ul>	<ul> <li>Working in accordance with Local</li> </ul>	<ul> <li>Working in accordance with Local</li> </ul>
Rules	Rules	Rules
<ul> <li>Adhering to laser/light safety</li> </ul>	<ul> <li>Adhering to laser/light safety</li> </ul>	<ul> <li>Adhering to laser/light safety</li> </ul>
measures in according with MHRA,	measures in according with MHRA,	measures in according with MHRA,
BMLA and CPSA guidelines	BMLA and CPSA guidelines	BMLA and CPSA guidelines

Record post-procedure images as per CPSA	Record post-procedure images as per CPSA	Record post-procedure images as per CPSA
guidelines with consent	guidelines with consent	guidelines with consent
Provide clear aftercare instructions detailing specific complications of laser, light and energy-based devices, how to recognise them and what to do if they occur	Provide clear aftercare instructions detailing specific complications of laser, light and energy-based devices, how to recognise them and what to do if they occur	Provide clear aftercare instructions detailing specific complications of laser, light and energy-based devices, how to recognise them and what to do if they occur
Manage emergency /adverse events using evidence-based protocols for treatment of:	Manage emergency /adverse events under guidance of suitably experienced/qualified practitioner /supervisor using evidence-based protocols	Manage emergency /adverse events under guidance of suitably experienced/qualified practitioner /supervisor using evidence-based protocols

#### Provide Level 5 Laser, Light and Energy Based Therapies (LLEBT) within the Agreed Treatment Plan

- 1. Laser tattoo removal (LTR) excluding treatments within the periorbital region)
- 2. Laser, light, energy based treatment of benign vascular lesions (excluding treatments within the periorbital region and those where purpura is desired endpoint, or doubt over diagnosis)

PSRB regulated practitioner who is a prescriber	Non- prescriber regulated by PSRB	Practitioner- working under supervision /oversight
		Non- prescriber and/or not regulated by PSRB

Evidence achievement of required academic entry level (minimum level 4) on relevant national framework AND Laser/Light Core of Knowledge Certificate, device specific manufacturer/industry training (where applicable).

Demonstrate applied knowledge of the skin anatomy and physiology in relation to laser, light and energy-based interventions, in particular:

- basic dermatology (ABCDE),
- identification of lesions within the planned treatment area requiring avoidance,
- those suitable for treatment and those requiring referral as per CPSA guidance,
- identification of tattoo types (professional, amateur, medical, traumatic)
- benign vascular lesions,
- selective photothermolysis, depth of penetration and light tissue interactions

Explain as part of informed and valid consent, the risks and benefits of laser, light and energy-based treatments, including but not limited to:

- lack of efficacy of treatment
- burns
- blisters
- bruising
- pigmentary changes
- crusting
- scarring
- oozing/weeping

alternative treatment options, including option to do nothing

Inform the patient of:

- cooling off policy as per CPSA overarching principles
- treatment on day of consultation being subject to informed consent, photography and patch test revealing no adverse skin reaction/events

Record pre-procedure images as per CPSA guidelines with explicit consent and explanation as to use, storage and retrieval of images in accordance with GDPR.

Assess the patient and presenting condition/skin lesions in order to deliver appropriate treatment according to:

- patient medical history, risk factors and psychological factors, (e.g. BDD, OCD)
- presenting indications and contraindications (e.g. age/colour(s)/depth/site of tattoo)
- skin phenotype accounting for ethnic factors that may influence clinical outcomes
- intrinsic and extrinsic aging factors
- presenting lesion or skin conditions identifying where applicable pigmented lesions requiring referral to suitably trained clinician
- anatomical site of treatment
- Minimise risk of adverse treatment effects through:
- identifying contraindications to treatment
- cleansing and preparing the treatment area prior to treatment
- using patch testing where appropriate
- delivering treatments in accordance with the approved treatment protocol
- cooling and applying post care procedures as per medical treatment protocol
- Select and demonstrate safe and appropriate treatment delivery for treatment of different anatomical sites in accordance with BMLA Essential Standards (Std 1) and CPSA guidance.
- Select and demonstrate safe and appropriate treatment delivery for treatment of different anatomical sites in accordance with BMLA Essential Standards (Std 1) and CPSA guidance subject to administration of topical anaesthetic by prescribing clinician
- Select and demonstrate safe and appropriate treatment delivery for treatment of different anatomical sites in accordance with BMLA Essential Standards (Std 1) and CPSA guidance subject to administration of topical anaesthetic by prescribing clinician

Minimise risk to patient and practitioner arising from device/equipment incidents through:

- Working in an approved Laser/Light Controlled Area
- Working in accordance with Local Rules
- Adhering to laser/light safety measures in according with MHRA, BMLA and CPSA guidelines

Record post-procedure images as per CPSA guidelines with consent

Provide clear aftercare instructions detailing specific complications of laser, light and energy- based devices, how to recognise them and what to do if they occur Provide clear aftercare instructions detailing follow up treatment intervals and frequency, including practitioner/clinic emergency contact details. Manage emergency /adverse events using Manage emergency /adverse events Manage emergency /adverse events under under guidance of suitably guidance of suitably experienced/qualified evidence- based protocols for treatment of: experienced/qualified practitioner/supervisor using evidence-based burns practitioner/supervisor using evidenceprotocols. blisters based protocols. bruising pigmentary changes crusting scarring

oozing/weeping

#### Provide Level 6 Laser, Light and Energy Based Therapies (LLEBT) within the Agreed Treatment Plan

- 1. Fractional ablative therapies (defined as deep/fully ablative beyond epidermal/dermal barrier)
- 2. Treatment of generalised and discrete pigmented lesions

PSRB regulated practitioner who is a prescriber	Non- prescriber regulated by PSRB	Practitioner- working under supervision /oversight
		Non- prescriber and/or not regulated by PSRB

Evidence achievement of required academic entry level (minimum level 5) on relevant national framework AND Laser/Light Core of Knowledge Certificate AND device specific manufacturer/industry training

Demonstrate applied knowledge of the skin anatomy and physiology in relation to laser, light and energy-based interventions, in particular:

- basic dermatology (ABCDE),
- identification of lesions within the planned treatment area requiring avoidance, those suitable for treatment and those requiring referral as per CPSA guidance,
- selective photothermolysis, depth of penetration and light tissue interactions

Explain as part of informed and valid consent, the risks and benefits of laser, light and energy- based treatments, including but not limited to:

- lack of efficacy of treatment
- burns
- blisters
- bruising
- pigmentary changes
- crusting
- scarring
- oozing/weeping

alternative treatment options, including option to do nothing

#### Inform the patient of:

- cooling off policy as per CPSA overarching principles
- treatment on day of consultation being subject to informed consent, photography and patch test revealing no adverse skin reaction/events

Record pre-procedure images as per CPSA guidelines with explicit consent and explanation as to use, storage and retrieval of images in accordance with GDPR.

Assess the patient and presenting condition/skin lesions in order to deliver appropriate treatment according to:

- patient medical history, risk factors and psychological factors, (e.g. BDD, OCD)
- presenting indications and contraindications
- skin phenotype accounting for ethnic factors that may influence clinical outcomes
- intrinsic and extrinsic aging factors
- presenting lesion or skin conditions identifying where applicable, lesions that require referral to suitably trained clinician
- anatomical site of treatment

Select and demonstrate safe and appropriate treatment delivery for treatment of different anatomical sites in accordance with BMLA Essential Standards (Std 1) and CPSA guidance. Fractional ablative treatment near the neck subject to CPSA guidance

Select and demonstrate safe and appropriate treatment delivery for treatment of different anatomical sites in accordance with BMLA Essential Standards (Std 1) and CPSA subject to administration of topical anaesthetic by prescribing clinician guidance and/or clinical oversight.

Select and demonstrate safe and appropriate treatment delivery for treatment of different anatomical sites in accordance with BMLA Essential Standards (Std 1) and CPSA subject to administration of topical anaesthetic by prescribing clinician guidance and/or clinical oversight.

Minimise risk of adverse treatment effects through:

- identifying contraindications to treatment
- cleansing and preparing the treatment area prior to treatment
- using patch testing where appropriate
- delivering treatments in accordance with the approved treatment protocol
- cooling and applying post care procedures as per medical treatment protocol

Minimise risk to patient and practitioner arising from device/equipment incidents through:

- Working in an approved Laser/Light Controlled Area
- Working in accordance with Local Rules
- Adhering to laser/light safety measures in according with MHRA, BMLA and CPSA guidelines

Record post-procedure images as per CPSA guidelines with consent

Provide clear aftercare instructions detailing specific complications of laser, light and energy- based devices, how to recognise them and what to do if they occur

Provide clear aftercare instructions detailing follow up treatment intervals and frequency, including practitioner/clinic emergency contact details.

Manage emergency /adverse events, including prescription for antibiotics (where

Manage emergency /adverse events under guidance of suitably experienced/qualified practitioner or

Manage emergency /adverse events under guidance of suitably experienced/qualified practitioner or prescriber for use of antibiotics

appropriate) using evidence- based protocols for treatment of:	prescriber for use of antibiotics (where appropriate) using evidence-based	(where appropriate) using evidence- based protocols
• burns	protocols	protocols
<ul><li>blisters</li></ul>		
<ul><li>bruising</li></ul>		
<ul> <li>pigmentary changes</li> </ul>		
<ul><li>crusting</li></ul>		
<ul><li>scarring</li></ul>		
<ul><li>oozing/weeping</li></ul>		

#### Provide Level 7 Laser, Light and Energy Based Therapies (LLEBT) within the Agreed Treatment Plan

- 1. Fully ablative skin treatments
- 2. Any treatments within the periorbital rim

PSRB regulated practitioner who is a prescriber	Non- prescriber regulated by PSRB	Practitioner- working under supervision /oversight
		Non- prescriber and/or not regulated by PSRB

Evidence achievement of required academic entry level (minimum level 6) on relevant national framework AND Laser/Light Core of Knowledge Certificate AND device specific manufacturer/industry training.

Demonstrate applied knowledge of the skin anatomy and physiology in relation to laser, light and energy-based interventions, in particular: basic dermatology (ABCDE), identification of lesions within the planned treatment area requiring avoidance, those suitable for treatment and those requiring referral as per CPSA guidance, selective photothermolysis, depth of penetration and light tissue interactions, wound healing

Explain as part of informed and valid consent, the risks and benefits of laser, light and energy-based treatments, including but not limited to:

- lack of efficacy of treatment
- burns
- blisters
- bruising
- pigmentary changes
- crusting
- scarring
- oozing/weeping

alternative treatment options, including option to do nothing

Inform the patient of:

- cooling off policy as per CPSA overarching principles
- treatment on day of consultation being subject to informed consent, photography and patch test revealing no adverse skin reaction/events

Record pre-procedure images as per CPSA guidelines with explicit consent and explanation as to use, storage and retrieval of images in accordance with GDPR.

Assess the patient and presenting condition/skin lesions to inform appropriate treatment according to:

- patient medical history, risk factors and psychological factors, (e.g. BDD, OCD)
- presenting indications and contraindications
- skin phenotype accounting for ethnic factors that may influence clinical outcomes
- intrinsic and extrinsic aging factors
- presenting lesion or skin conditions identifying where applicable, lesions that require referral to suitably trained clinician
- anatomical site of treatment

Assess the patient and presenting condition/skin lesions to inform appropriate treatment according to:

- patient medical history, risk factors and psychological factors, (e.g. BDD, OCD)
- presenting indications and contraindications
- skin phenotype accounting for ethnic factors that may influence clinical outcomes
- intrinsic and extrinsic aging factors
- presenting lesion or skin conditions identifying where applicable, lesions that require referral to suitably trained clinician
- anatomical site of treatment

Confirm that the responsible practitioner has assessed patient and presenting condition/skin lesions to inform selection of appropriate treatment

Minimise risk of adverse treatment effects through:

- identifying contraindications to treatment
- cleansing and preparing the treatment area prior to treatment using patch testing where appropriate
- delivering treatments in accordance with the approved treatment protocol cooling and applying post care procedures as per medical treatment protocol

Minimise risk of adverse treatment effects through:

- identifying contraindications to treatment
- cleansing and preparing the treatment area prior to treatment using patch testing where appropriate
- delivering treatments in accordance with the approved treatment protocol

Confirm that responsible practitioner has minimised risk of adverse treatment effects prior to delivering treatment under supervision, working within your sphere of competence

	<ul> <li>cooling and applying post care procedures as per medical treatment protocol</li> </ul>	
Minimise risk to patient and practitioner arising from device/equipment incidents through:  • Working in an approved Laser/Light Controlled Area  • Working in accordance with Local Rules  • Adhering to laser/light safety measures in according with MHRA, BMLA and CPSA guidelines	Minimise risk to patient and practitioner arising from device/equipment incidents through:  • Working in an approved Laser/Light Controlled Area  • Working in accordance with Local Rules  • Adhering to laser/light safety measures in according with MHRA, BMLA and CPSA guidelines	Minimise risk to patient and practitioner arising from device/equipment incidents, whilst working under supervision, by:  • Working in an approved Laser/Light Controlled Area  • Working in accordance with Local Rules  • Adhering to laser/light safety measures in according with MHRA, BMLA and CPSA guidelines
Record post-procedure images as per CPSA guid Provide clear aftercare instructions detailing spe		gy-based devices, how to recognise them and
what to do if they occur  Provide clear aftercare instructions detailing foll		
details.		
Manage emergency /adverse events, including prescription for antibiotics (where appropriate) using evidence- based protocols for treatment of:	Manage emergency /adverse events under guidance of suitably experienced/qualified practitioner or prescriber for use of antibiotics (where	Follow guidance suitably experienced/qualified practitioner to manage emergency/adverse events, for treatment of:  • burns

burns

blisters

bruising

pigmentary changes

crusting

scarring

oozing/weeping

prescriber for use of antibiotics (where appropriate) using evidence-based protocols for treatment of:

burns

blisters

bruising

pigmentary changes

crusting

scarring

• oozing/weeping

blisters

bruising

pigmentary changes

crusting

scarring

• oozing/weeping

#### Modality specific competencies: Chemical peels & skin rejuvenation (CPSR)

#### Provide chemical peels and skin rejuvenation interventions at level 4 /5/6 within the agreed treatment plan

- L4 Deliver very superficial chemical peels to the stratum corneum
- L5 Deliver superficial chemical peels to the mid-epidermis
- L6 Deliver superficial chemical peels to the Grenz zone in all skin types.

PSRB regulated practitioner who is a prescriber	Non- prescriber regulated by PSRB	Practitioner- working under supervision /oversight Non- prescriber and/or not regulated by PSRB
Evidence achievement of required academic encourses)	try level (minimum level 3 for level 4 courses, leve	l 4 for level 5 courses, level 5 for level 6
Demonstrate understanding of the anatomy & physiology of skin including layers, appendages, cell types and actions	Demonstrate understanding of the anatomy & physiology of skin including layers, appendages, cell types and actions	Demonstrate understanding of the anatomy & physiology of skin including layers, appendages, cell types and actions
Demonstrate understanding of the ageing process and impact of intrinsic and extrinsic factors affecting skin health	Demonstrate understanding of the ageing process and impact of intrinsic and extrinsic factors affecting skin health	Demonstrate understanding of the ageing process and impact of intrinsic and extrinsic factors affecting skin health
Assess the client's skin according to Fitzpatrick skin type, client concerns and desired outcomes.	Assess the client's skin according to Fitzpatrick skin type, client concerns and desired outcomes	Assess the client's skin according to Fitzpatrick skin type, client concerns and desired outcomes
Recognise common skin conditions g eczema, rosacea, and explain their potential impact on outcomes	Recognise common skin conditions g eczema, rosacea, and explain their potential impact on outcomes	Recognise common skin conditions g eczema, rosacea, and explain their potential impact on outcomes
Recognise common lesions requiring further assessment and know when and how to refer.	Recognise common lesions requiring further assessment and know when and how to refer.	Recognise common lesions requiring further assessment and know when and how to refer, using supervisor as required
Demonstrate understanding of the common acids used in peeling and their actions, indications and contraindications:  • AHA's e.g. glycolic, citric, mandelic	Demonstrate understanding of the common acids used in peeling and their actions, indications and contraindications:  • AHA's e.g. glycolic, citric, mandelic	Demonstrate understanding of the common acids used in peeling and their actions, indications and contraindications:

Salycilic	Salycilic	AHA's e.g. glycolic, citric, mandelic
• TCA	• TCA	Salycilic
<ul><li>Phenol</li></ul>	Phenol	• TCA
<ul> <li>Pyruvic</li> </ul>	Pyruvic	<ul><li>Phenol</li></ul>
<ul> <li>Cocktails e.g. Jessners.</li> </ul>	Cocktails e.g. Jessners	Pyruvic
	-	<ul> <li>Cocktails e.g. Jessners</li> </ul>
Explain basic chemistry of alpha and beta	Explain basic chemistry of alpha and beta	Explain basic chemistry of alpha and beta
hydroxy acids and other products in relation to	hydroxy acids and other products in relation to	hydroxy acids and other products in
peel choice & effect.	peel choice & effect.	relation to peel choice & effect.
Demonstrate understanding of the function of	Demonstrate understanding of the function of	Demonstrate understanding of the
the skin as a barrier and the implications of	the skin as a barrier and the implications of	function of the skin as a barrier and the
using chemical peels on skin integrity.	using chemical peels on skin integrity.	implications of using chemical peels on
		skin integrity.
Demonstrate understanding of wound healing	Demonstrate understanding of wound healing	
including collagen formation following use of	including collagen formation following use of	
peels	peels	
Demonstrate understanding of potential risks	Demonstrate understanding of potential risks	Demonstrate understanding of potential
of:	of:	risks of:
<ul> <li>Hyperpigmentation</li> </ul>	<ul> <li>Hyperpigmentation</li> </ul>	<ul> <li>Hyperpigmentation</li> </ul>
<ul> <li>Post inflammatory hyperpigmentation</li> </ul>	<ul> <li>Post inflammatory hyperpigmentation</li> </ul>	<ul> <li>Post inflammatory</li> </ul>
(PIH)	(PIH)	hyperpigmentation (PIH)
<ul> <li>Hypopigmentation</li> </ul>	<ul> <li>Hypopigmentation</li> </ul>	<ul> <li>Hypopigmentation</li> </ul>
<ul> <li>Infection</li> </ul>	<ul> <li>Infection</li> </ul>	<ul> <li>Infection</li> </ul>
<ul> <li>Scarring</li> </ul>	<ul> <li>Scarring</li> </ul>	<ul> <li>Scarring</li> </ul>
<ul> <li>Blistering</li> </ul>	<ul> <li>Blistering</li> </ul>	<ul> <li>Blistering</li> </ul>
<ul> <li>Allergy</li> </ul>	<ul> <li>Allergy</li> </ul>	<ul> <li>Allergy</li> </ul>
<ul> <li>Excessive inflammation</li> </ul>	Excessive inflammation	<ul> <li>Excessive inflammation</li> </ul>
Demonstrate understanding of various	Demonstrate understanding of various	Demonstrate understanding of various
application techniques and peel depth	application techniques and peel depth	application techniques and peel depth

Explain to client effect and potential risks according to Fitzpatrick skin type and cell type:	Explain to client effect and potential risks according to Fitzpatrick skin type and cell type:	Explain to client effect and potential risks according to Fitzpatrick skin type and cell
Keratinocytes	Keratinocytes	type:
Langerhans cells	<ul> <li>Langerhans cells</li> </ul>	Keratinocytes
<ul> <li>Melanocytes.</li> </ul>	Melanocytes.	Langerhans cells
<ul> <li>Fibroblasts</li> </ul>	Fibroblasts	<ul> <li>Melanocytes.</li> </ul>
With reference to inflammatory response and	With reference to inflammatory response and	<ul> <li>Fibroblasts</li> </ul>
free-radical activity/oxidative stress	free-radical activity/oxidative stress	With reference to inflammatory response
		and free-radical activity/oxidative stress
Select appropriate treatment and peel depth	Select appropriate treatment and peel depth	Select appropriate treatment and peel
for different clients	for different clients	depth for different clients
Explain rationale for chosen treatment with	Explain rationale for chosen treatment with	Explain rationale for chosen treatment
reference to skin assessment, desired	reference to skin assessment, desired	with reference to skin assessment,
outcome, peel strength and actions	outcome, peel strength and actions	desired outcome, peel strength and
		actions
Demonstrate understanding and application of	Demonstrate understanding of possible	Demonstrate understanding of possible
possible endpoints of peel:	endpoints of peel:	endpoints of peel:
<ul><li>Timing</li></ul>	Timing	Timing
<ul> <li>Patient response/discomfort</li> </ul>	<ul> <li>Patient response/discomfort</li> </ul>	<ul> <li>Patient response/discomfort</li> </ul>
<ul> <li>Skin changes</li> </ul>	Skin changes	Skin changes
<ul><li>Frosting</li></ul>		
Demonstrate safe application technique of selected peel(s)	Demonstrate safe application technique of selected peel(s)	Demonstrate safe application technique of selected peel(s)
Demonstrate safe and effective neutralisation	Demonstrate safe and effective neutralisation	Demonstrate safe and effective
of peel(s) including TCA and AHA peels	of peel(s)including TCA and AHA peels	neutralisation of peel(s)including TCA and AHA peels
Select and justify use of adjunctive topicals to	Select and justify use of adjunctive topicals to	Select and justify use of adjunctive
increase efficacy and reduce risk, including:	increase efficacy and reduce risk including:	topicals to increase efficacy and reduce
<ul> <li>Retinoids</li> </ul>	<ul> <li>Retinoids</li> </ul>	risk including:
<ul> <li>Tyrosinase inhibitors</li> </ul>	Tyrosinase inhibitors	<ul> <li>Retinoids</li> </ul>
<ul> <li>Antioxidants</li> </ul>	Antioxidants	<ul> <li>Tyrosinase inhibitors</li> </ul>

	working under the supervision of a prescriber where required	<ul> <li>Antioxidants</li> <li>working under the supervision of a prescriber where required</li> </ul>
Use measures to reduce/avoid risk:  • Pre peel preparation  • Post peel: advice including sun avoidance & SPF  Identify and avoid additional risks through application of CPSA standards to specific area of treatment:  • Orbital rim  • Extremities  • Keratosis pilaris  Record procedure to include relevant detail e.g. endpoint, timing, tolerance  Recognise and manage adverse events using evidence based guidance	Use measures to reduce/avoid risk:  • Pre peel preparation  • Post peel: advice including sun avoidance & SPF  Identify and avoid additional risks through application of CPSA standards to specific area of treatment:  • Orbital rim  • Extremities  • Keratosis pilaris  Record procedure to include relevant detail e.g. endpoint, timing, tolerance  Recognise and manage adverse events using evidence based guidance working under the supervision of an accountable prescribing	Use measures to reduce/avoid risk:  • Pre peel preparation  • Post peel: advice including sun avoidance & SPF  Identify and avoid additional risks through application of CPSA standards to specific area of treatment:  • Orbital rim  • Extremities  • Keratosis pilaris  Record procedure to include relevant detail e.g. endpoint, timing, tolerance  Identify adverse events and refer promptly to accountable/supervising practitioner
Appropriately involves supervisor when recognising limitations of expertise  Identify relevant interventions to address ageing at a cellular level such as:  • Inflammation • Oxidatation • Glycation	practitioner  Appropriately involves supervisor when recognising limitations of expertise  Identify relevant interventions to address ageing at a cellular level such as:  Inflammation Oxidatation Glycation	Appropriately involves supervisor when recognising limitations of expertise  Identify relevant interventions to address ageing at a cellular level such as:  • Inflammation  • Oxidatation  • Glycation

# **Modality Specific competencies: Hair Restoration Surgery (HRS)**

Perform hair restoration surgery (GMC registered doctors only, level 7) *Informed by ISHRS Core Competencies		
GMC licensed and regulated doctor with current registration	Non-prescriber regulated by PSRB  Not permitted	Non- prescriber and/or not regulated by PSRB Not permitted
Evidence achievement of required academic ent	ry level (medical degree) plus current GMC licence	e with no restrictions against their practice.
Identify, advise, and manage patients whose hair loss is androgenetic and non-androgenetic in aetiology.		
Counsel and advise patients on the risks and benefits of hair restoration surgery – both hair transplant surgery and prosthetic hair fibre implantation.		
Design integrated medical and surgical treatment plans for patients who have male and female pattern hair loss as well as patients with other types of alopecia or requiring hair restoration for other reasons		
Record relevant patient information in the medical records, including demographics, history, examination findings, and appropriate photographs. In doing so, comply with General Data Protection Regulation (GDPR) requirements		

Set up a hair restoration surgery operating room that will provide a safe environment for patients and staff, including, but not limited to, aseptic and clean techniques, proper management of biohazardous materials, and ergonomically sound work stations  Harvest hair bearing donor scalp by the Strip Follicular Unit (Strip FUT) method using techniques that minimize follicular damage and maximize donor scar cosmesis  Prepare follicular unit grafts from Strip FUT donor tissue with minimal follicle transection. Demonstrate techniques to maximize graft survival between preparation and implantation.  Harvest Follicular Unit Excision (FUE) grafts using techniques that minimise graft transection, trauma and damage. Understand the different methods of performing FUE.  Prepare appropriate size recipient sites for hair grafts with proper attention to exit angle, hair direction, depth of incision, density and
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direction, depth of incision, density and
direction, depth of incision, density and
geometry, in order to attain a natural
appearance and optimize hair growth.
Place follicular unit grafts into appropriately
sized recipient sites with minimal physiologic
and physical trauma
Place follicular unit grafts into the recipient
site using implanters.

Calculate and administer appropriate doses of medication for sedation and local anaesthesia for hair restoration surgery, including the use of tumescent solutions with the addition of steroids, adrenaline and other medications or substances.	
Recognize and demonstrate appropriate modifications to transplant design and treatment plan for patients who have had prior scalp surgery and identify the appropriate time to integrate other surgical techniques into a patient's treatment plan	
Record all relevant information in the operation notes including FUE harvesting statistics	
Provide appropriate post-operative follow up and aftercare	
Understand bio-adjuvant therapies and non- surgical options available for hair loss treatment as well as emerging technologies such as stem cell and gene therapy	
Understand and demonstrate the principles, technique, implications, complications and aftercare of prosthetic hair fibre implantation	
Demonstrate the proper use of basic life support equipment, including automatic external defibrillators and adjunctive equipment to airway management	

Manage complications of hair restoration	
surgery	
Use the principles of adult education to teach,	
supervise and assess the competency of	
nurses, medical assistants, and surgical	
technicians to become hair transplant surgical	
assistants competent in, amongst other things,	
slivering, cutting, and placing follicular unit	
grafts as well as extracting FUE grafts that	
have been incised by a doctor or doctor-run	
robotic device	

#### References

#### The competency framework has been informed by;

British Association of Cosmetic Nurses (2014) An Integrated Career & Competency Framework for Nurses in Aesthetics Medicine.

Puig, C. et al (2009) Core competencies for hair restoration surgeons recommended by the International Society of Hair Restoration Surgery. *American Society for Dermatological Surgery. Wiley Periodicals Dermatol Surg 425-428*