

VRQ

UV40519

Learner name:

Learner number:

D/601/5344





**VTCT**

More than 1000 approved centres now work with VTCT, and the ever-expanding list extends across the UK, Ireland, and internationally. We acquired the internationally recognised awarding organisation and examination board iTEC in 2016, adding to our footprint. We also acquired education technology specialists Digital Assess in the same year, adding value for training providers with technology that can digitally capture and assess learners online, amongst other innovations.

VTCT is a registered charity investing in education and skills but also giving to good causes in the area of facial disfigurement.

By signing this statement of unit achievement you are confirming that all learning outcomes, assessment criteria and range statements have been achieved under specified conditions and that the evidence gathered is authentic.

Unit code	Date achieved	Learner signature	Assessor initials	IQA signature (if sampled)

All assessors using this Record of Assessment book must complete this table. This is required for verification purposes.

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# Hair and scalp specialist services

## UV40519

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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.

This unit is suitable for both hairdressers and barbers.

Level

4

Credit value

9

GLH

72

Observation(s)

3

External Paper(s)

0



### Learning outcomes

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**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

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1. **Environment**  
Evidence for this unit must be gathered in a real or realistic working environment.
2. **Simulation**  
Simulation is not allowed in this unit. All 'Observation' outcomes must be on real clients.
3. **Observation outcomes**  
Competent performance of 'Observation' outcomes must be demonstrated to your assessor 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. All outcomes must be achieved.
6. **External paper**  
There is no external paper requirement for this unit.



# Achieving observations and range

## Achieving observation outcomes

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

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

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

## Achieving range

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There are no range statements that apply to this unit.

## Maximum service times

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There are no maximum service times that apply 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.

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

## 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.

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



## 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.

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

## Achieving knowledge outcomes

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

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

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

## Learning outcome 1

Be able to provide specialist consultation services

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

\*Assessor initials to be inserted if orally questioned.

## Learning outcome 2

### Be able to recognise hair and scalp conditions

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

\*Assessor initials to be inserted if orally questioned.

## Learning outcome 3

Be able to treat hair and scalp conditions

You can:	Portfolio reference/ Assessor initials*
h. State how to communicate and behave within a salon environment	
i. Describe the salon's requirements for preparation of yourself, the client and the work area	
j. Explain how treatment methods and products may benefit the hair and scalp	
k. Describe how to remedy problems identified during the treatment process	

\*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

You can:	Portfolio reference/ Assessor initials*
a. Investigate current developments in the diagnosis and treatment of different hair and scalp conditions, diseases and disorders	
b. Evaluate the use of new treatments and products against salon requirements and potential client benefits	
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	
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	

\*Assessor initials to be inserted if orally questioned.

# 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:

Present a professional image/expertise, in stills confidence, consulting area away from the main salon, cubical/screen with natural daylight, client at ease, 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:

Separate consulting cubical, movable screens for added privacy, consulting area away from main salon, safe, relaxing atmosphere, un-intimidating.

### Consultation techniques:

Use a variety of methods to ensure suitability of service, product and technique.

**Questioning** – open, closed, probing.

**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** – shade charts, style book, portfolio, collection of pictures.

### Salon health and safety legislation and regulations:

Health and safety at work, control of substances hazardous to health, reporting of injuries diseases and dangerous occurrences, personal protective equipment, electricity at work, manual handling, supply of goods and services, trade description, data protection, employers liability (compulsory insurance), occupiers liability, local bye-laws (set by council), salon rules, code of conduct, observance by all staff.

### Complete client records:

Data protection, data protection registrar, confidentiality, code of practice, security (locked cabinet, security protected electronic), time controlled (appropriate to salon), disposal (sensitive waste), record card up-to-date and accurate, essential information, future reference, professional image, legal implications, private personal client information (name, address, phone number, medication), influencing factors, contra-indications, results of hair tests, communications – what was said/implied/ discussed and agreed in relation to diagnosis, treatment, prognosis, length of treatment time, cost of planned course, additional support, future appointments, frequency of service, service information, products, timings, quantities of product used, application of heat (climazone, infra red lamp, hood drier), result of service, advice (maintenance, care, products, frequency of visits), current, accurate, relevant.



## Learning outcome 1: Be able to provide specialist consultation services (continued)

### Encourage clients to ask questions:

Successful service, stop 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:

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

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

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.

### 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 approach** – avoids further distress, provides necessary support, positive advice, builds a rapport, solution to their problem.

### Ethical guidelines:

Awareness of particular groups of gender/ethnicity in relation to touch/chaperone, some religions prohibit physical examination of head, scalp & skin, client lead, salon 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.

## 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.

**Nature of problem/condition** – client history, clients 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 (job, family, financial, time).

### 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, greasy, normal, virgin, chemically treated, elasticity (strength of hair), porosity (damage to cuticle layer, the ability to absorb moisture).

**Hair cut/style** – uniform layer, one length, short graduation, long graduation.

**Temperature** – body heat, salon temperature, added heat.

**Texture** – fine, medium, coarse.

**Length** – short, medium, long.

**Density** – fine, medium, thick.

**Growth patterns** – cowlick, widow's peak, nape whorl, double crown, male pattern baldness.

**Skin tone** – fair, medium, olive, dark.

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

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

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

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

**Test results** – good, bad, caution, positive, negative.

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

### Factors that affect the growth and maintenance of healthy hair:

**Poor health** – dull lank effect.

**Medications** – affect loss, growth, maintenance.

**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).

**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.

## Learning outcome 2: Be able to recognise hair and scalp conditions (continued)

**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).

**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.

**Cicatricial 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/non-contagious, cross infection (stylist to client, client to stylist).

**Contagious conditions:** From stylist to client, client to stylist.

**Male pattern baldness** – 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** – spilt, dry, ends.

**Monilethrix** – beaded hair.

**Trichorrhexis nodosa** – rough, swollen, broken shaft.

**Sebaceous cyst** – sebum filled lump.

**Damaged cuticle** – dull hair.

### Hair tests:

Use manufacturer's instructions, salon guidelines, before during and after service.

What each test checks for;

**Elasticity test** – tensile strength, internal strength of hair.

**Porosity test** – ability to absorb product, moisture loss from hair.

## Learning outcome 2: Be able to recognise hair and scalp conditions (continued)

**Skin test** – allergic reaction to chemicals.

**Incompatibility test** – check for presence of metallic salts, suitability of further chemical services.

**Test cutting** – check suitability of colour choice.

### Safe and hygienic working knowledge/practice:

**Maintaining a safe salon** – clean, tidy, safe standards of working, remove spillages, report slippery surfaces, remove/report obstacles, clear access to trolleys and equipment, clean/sterilise/disinfect – tools, equipment, work surfaces, no smoking, eating, drinking, drugs in salon, professional personal hygiene.

**Personal protective equipment** – wear PPE, avoid latex, powdered gloves, apron.

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

**Manual handling** – moving stock safely, lifting, working heights, unpacking.

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

**Reporting of injuries diseases and dangerous occurrences** – accident book, reporting diseases, log accidents.

**Control of substances hazardous to health** – store, handle, use, disposal, replace lids, ventilation for vapour and dust, avoid over exposure to chemicals, use manufactures instructions for use.

**Disposal of waste** – sharps box, closed top bin, dilute chemicals with running water, environmental protection, salon policies for hazardous waste, single use items, empties – recycle.

**Product storage** – check end date/package, 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 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.

## Learning outcome 2: Be able to recognise hair and scalp conditions (continued)

### 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 e.g. 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 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 hair cuts, 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, greasy/musty smell, hair shiny/lank/greasy look.

**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 i.e. 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 (e.g. tongs, straighteners, hair dryers, heated rollers), prolonged exposure to back combing, plaiting, twisting, hair up. Result – loss of colour, loss of moisture, broken cuticles, damage to internal structure, split ends.

## Learning outcome 2: Be able to recognise hair and scalp conditions (continued)

### 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 hair stylist/operative 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

### Professional communication in a salon environment:

Try to avoid technical language, always respond, consider clients confidentiality.

**Verbal** – speaking (tone of voice, the language you use, how quickly and clearly), questioning – open, closed, probing.

**Non verbal** – body language, positive attitude (your posture, facial expressions, hand gestures, the distance you stand), listening – be patience, try to understand.

**Written** – visual aids, magazines, client records.

### Behave professionally in a salon environment:

Follow health and safety practice and procedure, salon code of conduct, respect others, value client(s), co-operate with others (be sympathetic, fair, not aggressive), use appropriate language, avoid gossip, maintain confidentiality, polite/cheerful and friendly manner, friendly facial expressions, open body language, positive attitude, eye contact, sensible behaviour, team work, pride in work, punctuality, employer and client loyalty.

### Preparation of self:

Clothes (salon requirements for uniform, clean/ironed clothes, non restrictive, closed in low heel shoes), hair (clean, healthy, manageable, off face), personal hygiene (clean body, teeth, workable length clean nails, deodorant, no overpowering perfume/aftershave), personal protective equipment (gloves, apron, prevent dermatitis), minimal jewellery, positive attitude, ready to greet.

### Preparation of client:

Remove client's outer clothing, protect against damage, client relaxed and comfortable (posture, aids service), remove excessive jewellery (avoid damage - jewellery, skin), gown, towel, plastic cape, barrier cream, ensure client comfort, record card.

### Preparation of work area:

Chair, trolley, work station, equipment cleaned, appropriate sterilisation (barbicide, autoclave, UV, sterilising spray), complete destruction of all living organisms on tools and equipment, disinfection – remove contamination from hard surfaces, large work areas, floors and work surfaces, heat or chemical methods, use of trolley, safe professional presentation tools and equipment, visual check on large and small equipment, electrical equipment checked, portable appliance test, select height of chair/bed/basin.

### Tools, equipment and products:

Ensure all products, tools and equipment are of a professional standard.

**Tools** – combs, brushes, measuring and mixing containers, sectioning clips bowl and brush, towels, gowns, plastic capes, plastic cap.

**Equipment** – scalp steamers, hand dryers, climazone, trolley.

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



## Learning outcome 3: Be able to treat hair and scalp conditions (continued)

### Treatment methods that support improvements in hair and scalp conditions:

Consultation, recording (paper based, computerised, dictaphone), examining (scalp, hair, skin, visual, microscopy), 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).

### 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 e.g. 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.

### Shampooing products for hair conditions:

**Normal/frequent** – fruit, aloe vera, mint, soya (moisture balancing).

**Dry damaged/chemically treated** – nut oil, jojoba, protein, pH balanced, soya (adds moisture).

**Oily** – lemon, camomile (counteract oil).

**Dandruff** – medicated (juniper/tea tree oil), cleans scalp.

**Sensitive scalp** – egg and lemon (calming).

**Fine/limp** – beer (adds body).

**TLS** – soapless (prior to chemical treatment).

**Product build up** – clarifying (removes build-up).

**Psoriasis** – cade oil/juniper (removes excess skin scales).

## Learning outcome 3: Be able to treat hair and scalp conditions (continued)

### Conditioning products for hair conditions:

**Surface** – rinse off/leave-in (hair more manageable).

**Scalp tonic** – dry, dandruff, oily (counteract scalp condition).

### Hair loss:

‘Unnatural’ hair loss is 60+% psychological, chronic internal disorder, treatment (limited results, topically administered Minoxidil, Regaine from pharmacy), cure (limited positive results), professional advice (general practitioner, trichologist, dermatologist, pharmacist).

### 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 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 - web pages, medical articles, papers written by eminent specialists (Institute of Trichologists), product manufacturers.

### Evaluate new treatments and products:

Research and compare established treatment plans and products against new procedures and products, ensure benefits to client match or exceed the established treatments (cost, duration of treatment, contra-indications), 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:

'Tricho-specialist' 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.

**Hair stylist** – 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.

# Notes

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# Notes

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