

iUHB250 – Provide a trichology service

URN – K/617/6733

Guided Learning Hours: 30

Learning outcome	Assessment criteria	Taught content to include
LO1 Be able to prepare for a trichology-based consultation and examination	1.1. Prepare self, client and work area in accordance with current legislation and working practice requirements	<ul style="list-style-type: none"> • Physical environment <ul style="list-style-type: none"> - Privacy - Modesty maintained - Discretion displayed - Confidentiality maintained - Client comfort - Seating and physical support appropriate for examination and consultation - Good ventilation - Conducive room temperature • Equipment <ul style="list-style-type: none"> - Appropriate - Hygienic • Records <ul style="list-style-type: none"> - Accurate - Confidential • Comply with regulations <ul style="list-style-type: none"> - First aid kit - Toilets - Smoke alarms - Electrical installations - Lighting and ventilation - Fire extinguishers • Professional conduct <ul style="list-style-type: none"> - Appearance – professional - Hygienic - Follow codes of practice - Comply with health and safety working practices

		<ul style="list-style-type: none"> - Maintain ethical conduct - Treat client with empathy and respect - Apply suitable consultation techniques <ul style="list-style-type: none"> ▪ Verbal and non-verbal - Perform suitable and appropriate examination techniques • Legislation and working practices <ul style="list-style-type: none"> - Any particular rights, restrictions, acts and charters applicable to trichology service of the country therein, e.g.: <ul style="list-style-type: none"> ▪ Health and Safety at Work Act ▪ General Product Safety Regulations ▪ Cosmetic Products (Safety) Regulations ▪ Data Protection Act/GDPR - Advertising standards - Legal framework related to people and settings with which the practitioner is involved <ul style="list-style-type: none"> ▪ Mental Health Act ▪ Children Act - Moral rights which are not recognised by law - Organisational policies and how they may differ from other organisations (when working in care) - Any relevant complaints systems and methods of access (when working in care) - Records which the practitioner is responsible for completing in relation to rights and responsibilities - Code of good practice/ethics - Insurance and professional association membership - Legislation which relates to the work being carried out, the environment and the client with whom the practitioner is working - Awareness of national occupational standards and voluntary regulatory groups where they exist
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LO2 Be able to demonstrate recognition of common conditions affecting the skin and scalp	2.1. Demonstrate recognition of common skin conditions of pathogenic, hormonal or auto-immune origin	<ul style="list-style-type: none"> • Allergic contact dermatitis (ACD) • Psoriasis • Malassezia • Folliculitis • Tinea • Urticaria
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		<ul style="list-style-type: none"> • Seborrhoeic dermatitis • Atopic dermatitis • Neurodermatitis • Alopecia areata • Acne vulgaris • Vitiligo
	2.2. Demonstrate recognition of common skin conditions caused by physical damage	<ul style="list-style-type: none"> • Folliculitis • Keloid scarring • Trichotillomania • Traction alopecia • Friction burns • Electrical burns
	2.3. Demonstrate recognition of common skin conditions caused by reactive chemicals	<ul style="list-style-type: none"> • Irritant contact dermatitis (ICD) • Chemical burns
	2.4. Demonstrate recognition of common skin conditions caused by extremes of temperature	<ul style="list-style-type: none"> • Thermal burns • Radiation burn • Scalding • Ice burn
	2.5. Demonstrate recognition of male pattern hair loss (MPHL)	<ul style="list-style-type: none"> • Cause <ul style="list-style-type: none"> - Genetic - Testosterone and dihydrotestosterone and the gene for hair loss • Onset <ul style="list-style-type: none"> - Post-puberty - 'Rule of thumb' incidence • Pattern of hair loss <ul style="list-style-type: none"> - Typical pattern - Anterior pattern - Vertex pattern - Stages of progression (1-7) - Predicting the next stages of hair loss • Treatment <ul style="list-style-type: none"> - Finasteride - Dutasteride
	2.6. Demonstrate recognition of female and diffuse hair loss	<ul style="list-style-type: none"> • Acute and chronic hair loss • Characteristics

		<ul style="list-style-type: none"> - Diffuse hair loss • Incidence <ul style="list-style-type: none"> - Affecting up to two thirds of women • Causes <ul style="list-style-type: none"> - Anti-cancer drugs - Post-partum hair loss - Iron deficiency - High fever - Blood loss - Starvation and drastic dieting - Dental treatment and surgical operation - Certain medicines - Thyroid disorders - Severe or prolonged emotional stress • Treatment <ul style="list-style-type: none"> - Minoxidil
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<p>LO3 Conduct a trichology-based clinical consultation, examination and treatment response, that observes legal and ethical requirements</p>	<p>3.1. Perform a trichology-based clinical consultation and examination on clients using working methods that meet professional, legal and organisational requirements</p>	<ul style="list-style-type: none"> • Operate within agreed standards of practice <ul style="list-style-type: none"> - Personal standards of hygiene, attire and personal appearance • Equipment checks <ul style="list-style-type: none"> - Ensure cleanliness - Hygiene - Meet health and safety requirements • Prepare for trichology assessment <ul style="list-style-type: none"> - Prepare work area to ensure comfort and dignity of client - Prepare materials appropriate for trichology assessment - Demonstrate correct procedures for obtaining informed consent • Perform a clinical consultation and examination <ul style="list-style-type: none"> - Consultation (obtaining personal information) <ul style="list-style-type: none"> ▪ Contact details ▪ Doctor's details ▪ Occupation ▪ Date of birth - Questioning (subjective assessment) <ul style="list-style-type: none"> ▪ Medical history ▪ Presenting complaint - Examination (objective assessment)
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3.2.	Demonstrate a differential hypothesis based on questioning and examination	<ul style="list-style-type: none"> • Perform a differential hypothesis <ul style="list-style-type: none"> - Extrapolate information from subjective and objective assessment • Make an informed decision as to whether the case is within or beyond the scope of the trichologist
3.3.	Perform and adapt service and treatments using materials, equipment and techniques correctly and safely to meet the needs of the client	<ul style="list-style-type: none"> • In cases where trichological intervention is safe and appropriate <ul style="list-style-type: none"> - Recommend appropriate hair/scalp products - Recommend nutritional strategies - Perform ultraviolet and infrared techniques - Apply scalp massage
3.4.	Demonstrate how to write a letter of referral to another health care professional	<ul style="list-style-type: none"> • In cases where referral is necessary • Preference for referral <ul style="list-style-type: none"> - GP - Practice nurse - Counsellor - Wig maker - Hair/scalp surgeon
3.5.	Evaluate the results of treatment	<ul style="list-style-type: none"> • At the end of each treatment the client's psychological and physical reactions should be recorded and any reactions noted on the foot chart(s) and consultation form • Outcomes achieved • Effectiveness of the treatment • Re-assessing choice of treatment media used • Treatment techniques • Whether the treatment met the needs of the client <ul style="list-style-type: none"> - Client expectations • Longer term needs of the client • Therapist self-reflection in relation to client and treatment performed • Client treatment progression • Review of ongoing treatment plan • Recommendations for further treatment sessions/re-booking

	3.6. Provide suitable aftercare and home care advice	<ul style="list-style-type: none"> • Immediate aftercare • Client feedback • At the end of each treatment the client should be advised of home and aftercare to prolong treatment benefits • Healthy eating • Self-treatment • General care and lifestyle advice and the resulting beneficial effects thereof • Generally helping clients and families to identify options to improve their health and social wellbeing • Reviewing their progress
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LO4 Demonstrate the ability to continuously learn and develop clinical skill through reflective practice	4.1. Evidence a reflective journal	<ul style="list-style-type: none"> • Significant incidence analysis • Peer review, clinical and mentor supervision • Use of established models to improve practice-based professional learning • Reference to published academic texts and journals
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Assessment	
Portfolio of evidence	Containing: <ul style="list-style-type: none"> • 8 performance evidence • Oral questions

Guide to taught content
The content contained within the unit specification is not prescriptive or exhaustive but is intended to provide helpful guidance to teachers and learners with the key areas that will be covered within the unit, and, relating to the kinds of evidence that should be provided for each assessment objective specific to the unit learning outcomes.

Document History

Version	Issue Date	Changes	Role
v1	08/08/2019	First published	Qualifications and Regulation Co-ordinator