
Unit Specification

UBT465 – Provide radio frequency treatments

Unit reference number: J/651/0170

Level: 4

Credits: 7

Guided Learning Hours (GLH): 52

Overview

The aim of this unit is to develop learners' knowledge, understanding and practical skills when completing radio frequency for skin rejuvenation, or to improve the appearance of cellulite. Learners will acquire skills in providing a thorough consultation to establish client suitability for treatment; and also the knowledge on how to formulate a specific treatment plan tailored to suit individual client's needs. Learners will also be able to provide the client with relevant post-care to maximise treatment results and look after their skin post-treatment.

Learning outcomes

On completion of this unit, learners will:

LO1 Interpret safety considerations when providing radio frequency treatments

LO2 Comprehend how to provide radio frequency treatments

LO3 Comprehend the relevant anatomy, physiology and pathologies for radio frequency treatments

LO4 Demonstrate how to consult, plan and prepare for radio frequency treatment

LO5 Demonstrate how to provide radio frequency treatments

Unit content

LO1 Interpret safety considerations when providing radio frequency treatments

Safety of product and equipment sourcing

Taught content

- Ensure radio frequency equipment accessories and associated products meet the regulatory requirements of the country they're being provided in and are purchased from a reliable and authentic supplier
- Ensure radio frequency equipment used conforms to the Electromagnetic Compatibility Regulations 2016 (UK EMC Regulations) and the Electrical Equipment (Safety) Regulations 2016 or current British standards as applicable
- Understand how to gain verification of legality of products and equipment sourcing
- The safety and legal reasons for using equipment, accessories and products that are licensed and meet British standards and the outcome of using equipment, accessories and products which are not properly tested or contain banned substances
- Know the ethical methods of sourcing, purchasing and storing regulated treatment products including expiration dates
- The use of Material Safety Data Sheet (SDS) in relation to radio frequency procedures

Insurance guidelines

Taught content

- Insurance policy requirements to be met to ensure professional indemnity/insurance cover is appropriate to this discipline and valid for working at this level
- Requirements for sensitivity testing prior to treatment
- Legislative and indemnity requirements for gaining informed client consent, agreement and signature before every treatment
- Legislative and insurance requirements for obtaining medical or informed consent where required
- Acquiring client consent to visual media records before and after every treatment
- Providing verbal and written post-care recommendations and information
- The legal significance of producing photographic evidence of the treatment area
- Ensuring the practitioner is working within their scope of practice and competence
- Responsibilities under local authority licencing regulations for both practitioners and premises

Hygiene considerations

Taught content

- Set up and work within a hygienic field. Use of suitable sterilisation and sanitisation for equipment and surfaces. Single use items as appropriate such as disposable gloves (latex free), disposable hair protectors, applicators, cotton wool, couch roll
- Hygienic preparation and storage of multi-use items, for example, clean laundered towels
- General hygiene – for example, washing of hands before and after treatment, sanitising hand gel
- Disinfectant or sterilisation – use of heat or chemical methods, bactericides, fungicides and UV cabinet for storage
- Equipment – only used for intended purpose, safe usage, safe handling, storage, visual checks and correct disposal of waste products
- Waste disposal – general waste including local authority requirements
- Products – use pump dispenser or spatula to remove product from container, replace lids after use
- Knowledge of infection control, bacteria, virus, fungi, parasites, prevention of cross-contamination and disease transmission procedures, levels of infection control, personal immunisation (Hepatitis B), single use barrier consumables for protection against blood borne viruses (BBV) and Methicillin-resistant Staphylococcus aureus (MRSA)

Hazards and risks

Taught content

- The principles of risk assessment and management
- Putting procedures in place to ensure they are minimised
- Proper training for all staff
- Protocols to follow during consultation
- Written and verbal post-care for client
- Adherence to manufacturers' guidelines
- Avoidance of injuries,
- Contra-actions and adverse reactions – oversensitivity of treated area, erythema, hyperaemia, excessive pain, blisters, burns, bruising, permanent scarring, skin pigmentation, open sores, fat atrophy leading to sunken treated areas, infections, numbness excessive oedema and swelling, dizziness and fainting
- Risks associated with compromised tactile response in the treatment area post-surgery/trauma, for example: C-section

Suppliers' and manufacturers' instructions for safe use

Taught content

- Understand and know reasons for supplier and manufacturer products and protocols for radio frequency including test patch recommendations
- Follow manufacturers protocols for skin sensitivity and test patch recommendations
- Types of products appropriate for use during radio frequency treatment preparation and application, performance and post care and aftercare application according to manufacturer's instructions, for example cleanser, toner, oil, serum, cream, cooling products and SPF. Check expiry date for products
- Follow guidelines to select appropriate hand piece and applicator heads considering treatment area, condition(s) to be treated and desired outcome
- Follow guidelines on the storage, handling, preparation, loading, use, sanitising and disposal of the hand piece and applicator heads (as appropriate)
- Methods of hygiene and treatment application – working methodically and systematically over the small zones of the face/body in specified order, using the correct angle, pressure, techniques and settings and adapting treatment to all areas maintaining a continuous flow. Checking optimum temperature is achieved and maintained appropriately throughout treatment using temperature monitoring equipment. Observation of desirable and undesirable clinical end points, cooling and skin recovery products used in the salon. Frequency of treatment, course of treatments and conditions/areas suitable and unsuitable for treatment

Working in line with organisational procedures

Taught content

- Adhere to all supplier/manufacturer protocols
- Adhere to responsible marketing guidelines
- The individual responsibilities of working within a multidiscipline team
- Responsibility of working within the remit of qualification boundaries and competence
- The role of clinical governance within the aesthetic industry
- The importance of Continuing Professional Development (CPD), training, education and career opportunities

Treatment of minors

Taught content

- The age at which an individual is classed as a minor and how this may differ nationally and internationally
- Why treatment should only be provided for clients over the age of 18

Timing of treatments

Taught content

- Identify and understand commercial timings for treatments
- Recognise variations in timings depending on skin reaction time and recognised influencing factors. Skin temperature needs to reach and be maintained at 40 degrees for a minimum of 2 minutes up to a maximum of 4 minutes depending on manufacturer guidelines
- Face and neck 45-60 minutes
- Body 30-90 minutes depending on the area and treatment objectives
- How timings vary when other electrical modalities may be added – LED, microcurrent, iontophoresis, electroporation etc.
- Results are accumulative, generally a course of 8 treatments is recommended with maintenance treatments every 4-6 weeks referring to manufacturer guidelines

Contra-indications that would prevent or restrict treatment

Taught content

- Prevent (absolute contra-indications)
 - Acne, active inflammation and/or infection in the treated area, anticoagulant medication, auto-immune conditions (for example, scleroderma), cancer-related treatments, contagious skin diseases, current or history of cancer and premalignant condition, diabetes, diseases stimulated by heat, (such as recurrent herpes simplex in the treatment area), dysfunctions of the nervous system, degenerative neurological disorders, current herpetic infection, heart disease/disorder, history of keloid scarring, impaired kidney function, impaired liver function, inflammation or infection in the treatment area, IVF procedure, metal implants in the treated area excluding dental implants, pacemaker/internal defibrillator, photosensitive medication, pregnancy, recent pregnancy or breast feeding, recent scar tissue in treatment area, recent skin peeling treatments, skin thinning medication (such as steroids, Roaccutane), highly vascular conditions, rosacea, silicone implants in the treatment area, swelling in the treatment area, thrombosis, thrombophlebitis, uncontrolled disorder of the thyroid, undiagnosed swelling, lumps and varicose veins
- Restrict (relative contra-indications)
 - Within treatment area:
 - Abrasions, neuromodulation injections or dermal filler in the treatment area, bruising, cosmetic skin needling, crystal microdermabrasion, cuts, dental implants, epilation, excessively oily skin, fresh scars/wounds, history of herpes simplex, Intense Pulsed Light (IPL) or laser, large moles, metal prosthesis or implants, prior to cosmetic surgery, scarification in the treatment area, sensitive or excessively reactive skin types, telangiectasia, recent UV exposure
 - General:
 - Active inflammatory dermatoses (for example psoriasis), anxiety, current medications, epilepsy, history of circulatory disorders, implants or IUDS (specific to device used), poor mental and emotional state, ongoing use of isotretinoin, overactive thyroid gland, irremovable piercings, recent surgical procedures, rosacea (if face is affected, other body areas may be treated), scars, some supplements and herbal remedies

Contra-indications requiring medical referral and referral process

Taught content

- Contra-indications to radio frequency treatments requiring medical referral such as active acne, raised moles or lesions
- Skin cancer is an ever-prevalent issue. Areas of skin or moles that have uneven asymmetry, irregular, ragged or blurred borders, uneven patchy colour or an altered diameter than previously noted, need to be identified and the client encouraged to go to their General Medical Practitioner as a precaution. Knowledge of organisation protocol for not naming or diagnosing specific suspected contra-indications when encouraging client to seek medical advice due to professional status, acknowledging the need for medical training to be able to diagnose without causing undue alarm. Refer in a discrete and empathetic manner

When to consult with other aesthetic professionals

Taught content

- Recognise when additional information is needed from other clinicians involved with the client and how this can be obtained in compliance with confidentiality and consent guidance in line with current data protection legislation
- Demonstrate an understanding of when and how to request additional advice from other clinicians treating the client when applicable, in line with current data protection legislation
- Recognise when and what other aesthetic treatments may be of benefit to be used in preparation or in conjunction with radiofrequency, for example, enzyme/chemical peel, diamond microdermabrasion, LED, microcurrent, micro-needling, iontophoresis, electroporation, IPL, laser
- Alternative treatment options when radio frequency is not appropriate or contra-indicated

LO2 Comprehend how to provide radio frequency treatments

Factors to consider when treatment planning

Taught content

- Identify client's wants, needs, concerns, expectations, anticipated costs, and treatment objectives. Agree realistic outcomes against client expectations, discuss any potential risks relevant to radio frequency treatments and the importance of considering the physical and psychological wellbeing of the client to receive treatment
- Results from skin analysis classification and characteristics, identification and discussion of skin type including Fitzpatrick skin type, Glogau photo damage, skin conditions and/or lesions present, specific areas of concern to assist in choice of the appropriate procedure and to identify realistic treatment outcomes
- Previous skin/body treatments – details of type of treatment, frequency, dates treatments were received to ensure enough time has passed for radio frequency procedures to be appropriate and to gain an insight into client's approach to aesthetic treatments
- Satisfaction and results – dissatisfaction could indicate body dysmorphia or client with unrealistic expectations. Protocols for how this should be managed Legal aspects of responsibility of the practitioner in providing radio frequency treatments and the importance of working within the remit of qualification boundaries and competence
- Pre and post treatment advice including possible contra-actions, healing process including likely or expected contra-actions, recommended skin care/post care, diet and lifestyle advice/choices or restrictions that could positively or negatively impact on the effects of treatment including current skin/body care regime and any revisions required and to ensure client is suitable for treatment
- Medical history and any absolute or relative contra-indications that prevent or restrict treatment to ensure client is safe for treatment or if medical/other professional referral is required
- Potential cost of procedure including fee structures and treatment options, frequency, duration and potential number of treatments recommended to achieve desired treatment outcomes including likely associated timeframes
- Treatment plan should be clearly agreed between the client and practitioner and recorded on the consultation documentation with client signing to indicate informed client consent

Assessing skin characteristics and body conditions

Taught content

- Assessed through questioning at consultation and observation of skin, importance of using skin diagnostic equipment, for example, light magnifier, Woods Lamp, skin scanner/diagnosis technology
- How to assess and recognise skin characteristics – Fitzpatrick scale 1-6, Glogau photo-damage, phenotype, level of sensitivity, thickness of skin, epidermal thickness and healing capacity
- Recognition and understanding of skin analysis – surface hydration levels, pigmentation, photo/sun damage, vascular lesions, primary and secondary lesions, irregularities, skin texture (pore size), skin laxity, static and dynamic wrinkles, congestion/excessive oil and sensitivity, variances and location of skin thickness and adipose tissue
- Recognition and understanding of the aging process of the skin including the effects of genetics, intrinsic and extrinsic aging and the process of collagen and elastin synthesis including fibroblastic stimulation
- Recognition and understanding of the variances and the location of skin thickness and adipose tissues within different regions of the face and neck and body, the structure and function of adipose tissue and the physiology and grading of cellulite, the physiological effects of radio frequency treatments on soft tissues and underlying skeletal structures
- How to match the treatment to suit all skin characteristics, body condition, the Fitzpatrick classification scale, individual's treatment area(s), treatment aims and objectives
- Reasons for choosing radio frequency procedures and protocols to suit the variations in skin density, sensitivity, all skin classifications, and treatment objectives

Pre and post treatment advice to provide to the client

Taught content

- Provide consultation to discuss outcomes and pre-treatment preparation.
- Pre-treatment advice should include skin care preparation then the benefits of implementing a skincare routine to prepare the skin for treatment and to maximise results. A 2-4 week skin preparation programme to be used at home to improve hydration, skin cell health, increase desquamation and general texture/condition of the skin. To improve healing capacity and tolerance to radio frequency procedures. The positive effects of performing radio frequency procedures on a healthy skin in comparison to compromised skin conditions
- Topical skin care products, such as vitamins, anti-oxidants, UV protection, AHA and BHA skin care programmes prior to treatment for all skin conditions, all skin types and classifications to improve skin health and condition and minimise adverse side effects after radio frequency procedures, all products must be relevant to skin health/type/condition, Fitzpatrick skin type and all skin classifications
- Active skin care of a high/professional strength concentration needs to be avoided – such as Retinoids and high levels of AHA/BHA for 3-5 days pre and post radio frequency treatments. Low strength actives should be avoided for 48 hours post treatment, the use of calming, soothing and hydrating products should be prescribed
- Pre-treatment – clients should also be advised to avoid UV exposure and heat immediately prior to treatment, wear SPF minimum 30 and UVA broad spectrum protection daily
- Physical sensation – during treatment skin will feel gradually warmer until the skin temperature reaches 40°C which will be maintained by the practitioner for 2-4 minutes in accordance with manufacturer protocols. The area will be treated in smaller sections to facilitate treatment and maintain optimum working temperature

- Post-treatment physical sensation
- Day 1 erythema and slight redness, skin may feel warm to the touch
- Day 3 skin may feel dry and tight, recommend for face: gentle cleansers, hydrating products, antioxidants and SPF. For body: gentle cleansers/body wash, moisturisers and SPF products for the client to use at home twice daily
- The importance of increased fluid intake and dietary advice to assist with the effectiveness of treatment and promote healing
- Possible contra-actions/adverse reactions – what they are, why they appear and how long they may last – oversensitivity of treated area, erythema, hyperaemia, mild oedema, swelling, mild bruising, excessive pain, blistering, burns, bruising, scabbing, scarring, temporary or permanent scarring, temporary or permanent skin pigmentation changes, open sores, infections, numbness, excessive oedema fat atrophy leading to sunken treated areas
- Activities to avoid that might cause contra-actions or adverse reactions, extremes of temperature and heat, contact with water, activities which cause sweating, exposure to UV
- Advice offered on alternative treatments if radio frequency is found unsuitable; for example, skin peels, microdermabrasion, laser skin rejuvenation, ultrasound, cavitation, skin needling, mesotherapy, lipolysis

Pain threshold and sensitivity variations

Taught content

- Understanding inflammatory response of the skin and the effects and associated risks of using over the counter (OTC) pain relief and topical anaesthetic/numbing agents and the possible affect they may have on the procedure and the healing process Recognising skin types and areas of the face that are more sensitive, fragile and reactive to topical applications. Those that have more prominent and dilated dermal blood vessels which may contribute to an exaggerated inflammatory response or hyperpigmentation (Fitzpatrick 4-6) plus a more intense physical sensation when the treatment is applied, caution must be taken when treating these
- Understand that procedures for female clients may be more uncomfortable during menstruation or ovulation
- Evaluation of tactile and thermal tests to the treatment area are made following supplier/manufacturer instructions. Recording of results to include whether the client can tell the difference in sensations. Record date, location of test, and products used, description of results, if the client is unable to identify the correct sensations a full description of response
- When working over scar tissue understanding why fine tactile response may be compromised and how this may affect the ability to perform radio frequency procedures and how to adapt the treatment
- Radio frequency procedure to be performed when the client is able to correctly identify different thermal and tactile sensations
- Any change of radio frequency settings or intensity to be tested prior to full application. Follow supplier/manufacturer instructions for radio frequency application for each skin type and classification and condition as they may vary

Radio frequency current

Taught content

- The electromagnetic spectrum is made up of two main forms of radiation: ultraviolet which is used mainly for its skin tanning effects and infrared which is used as a method of warming the tissues for therapeutic purposes
- Radio frequency is the term given to any alternating electrical current that, if applied to an antenna, creates an electromagnetic field that propagates through space in the surrounding area. Radio waves are electromagnetic waves that have wavelengths between 1 millimetre and 100 kilometres
- Radio waves are transmitted as a series of cycles. The hertz (Hz) is equal to one cycle per second. Radio waves go through more cycles in a second than electric current. Sitting at the far end of the electromagnetic spectrum which also includes visible light and x-rays, radio waves are created by a hand-held electrode and conducted into the skin
- When radio waves enter the skin, they interact with certain electrically charged particles that create an electrical current which generate heat when they encounter resistance – in the case of skin rejuvenation, the skin provides the resistance and heats up as a result. As a non-ablative, non-invasive rejuvenation technique, radio frequency requires no downtime

Types and purpose of radio frequency equipment and products

Taught content

- Skin cleansing products to remove all make-up/skin preparations, surface oils and debris in the area
- Products to facilitate radio frequency conductivity and glide; serums, gels, oils
- Function of radio frequency equipment, hand pieces and applicator heads to include how radio frequency energy is described and measured in relation to the electromagnetic spectrum and transmits energy to the varied depths of the underlying skin and tissues and the physiological effects and benefits of radio frequency energy output created
- The physical effects created by the radio frequency treatment and the interaction of radio frequency with the skin and underlying tissues and the different depths and effect of radio frequency options to include:
 - Mono/Uni Polar radio frequency – deeper and uncontrolled penetration, passes through skin to a depth of approximately 2cm. Current flows through the body and meets maximum resistance at the tip of the hand-piece which is often iced to prevent damage to the surface of the skin and uses a grounding pad to provide a low resistance path for the current to complete the electrical circuit. This **MUST** be placed on the **RIGHT** side of the body to protect the heart from the current flowing through it
 - Bi-Polar radio frequency – penetration depth is described to be half the distance between the two poles/electrodes. Current flows from one electrode to the other, the area in between is iced to prevent damage to the skin surface where the current meets resistance. A grounding pad is not required as the current flows between the positive and negative electrodes
 - Tri-polar radio frequency – consists of both positive and negative electrodes. The RF wave generates "friction heat" when it has been delivered in the skin tissue. Penetration depth of the energy is the distance between the poles/electrodes (compared to half the distance in Bi-Polar)
- Handpieces that deliver radio frequency should always be appropriate for the target area for example the body contouring head should never be used on the face

- The purpose of radio frequency in skin tightening targets a process of thermal collagen contraction within the dermal tissue for denaturation of the existing collagen encouraging fibroblast stimulation for the reorganisation of new collagen
- The purpose of targeting subcutaneous fat, the radio frequency current heats and elongates fat cells in the specific treated areas of the body, giving a smoothing appearance to cellulite/areas
- Limitations of equipment and products
- Products to include: cooling mask/agent, hydrating products/serum, soothing after care moisturisers, topical anti-inflammatories, anti-oxidants, broad spectrum sunscreen

Preparation and selection of equipment and products for treatment

Taught content

- How to prepare equipment on clean trolley in an ergonomic manner to prevent strain to the practitioner and to assist in the smooth application of treatment, such as safety, time management, hygiene, organisation and professionalism. Necessity of selecting and checking appropriate products and equipment before start of each treatment and ensuring they are all in good working order
- Appropriate PPE is prepared and used
- How to select, handle, prepare, attach and sanitise appropriate hand-piece or applicator head
- Differentiate between various radio frequency hand pieces and application heads in accordance with the skin classifications, characteristics, individual objectives and treatment area
- Selection and use of device hand-piece, intensity and technique of application according to treatment objectives: skin tightening – reduction of fine lines, improvement of skin tone and texture, skin laxity, stimulation of collagen production, body contouring – reduction of adipose tissue, fat metabolism, improvement of cellulite and skin tone
- Additional equipment as agreed with the client and treatment aims and objectives, additional products to calm, soothe and protect the skin post procedure and minimise contra-actions

Method of application

Taught content

- Cleanse the skin prior to the procedure – remove all make-up, creams/lotions, surface oils and debris
- Apply appropriate product to facilitate treatment and conductivity
- Practitioner tests equipment on themselves prior to treatment application, various methods of testing
- Work systematically and methodically ensuring even and full coverage, avoiding excess treatment overlap across the area to be treated – usually 5 zones on the face and zones the size of a hand on the body to cover the targeted area
- Work within the agreed treatment area avoiding areas of caution
 - Plan procedure start and end point
 - Follow supplier/manufacture protocols, use the correct product/serum and apply the correct hand piece/applicator head at the correct angle, pressure, direction and speed with the correct settings, maintaining continuous flow and contact at all times for the correct duration and when completed move on to the next area until the treatment area is completed
 - Maintain adequate skin support in all treatment areas, adapting as appropriate to ensure handpiece remains in full contact and glides smoothly avoiding discomfort or causing injury
 - Ensure skin temperature reaches optimal working temperature (usually 40°C) checking regularly with an appropriate thermometer to ensure the temperature is maintained sufficiently for the duration of application to each area in line with manufacturer protocols
 - Follow manufacturers guidance in the removal and application of products, cooling the area post treatment and applying SPF protection
 - Problems associated with uneven procedures, working over contra-indicated areas or areas of caution, overlapping and possible adverse reaction or injury

Adaptations to treatment

Taught content

- Adapt the treatment to take into account pre-existing conditions
- Omit treatment to pre-existing conditions such as skin tags, irregular moles or highly vascular areas
- Why it may be necessary to adapt pressure, direction, duration and timings for different areas of the face and body
- Different skin thickness, density, sensitivity, different treatment objectives, treating different skin characteristics of varying structure and different treatment objectives
- Give instruction and guide the client to change expression/position to ensure all treatment areas are fully accessible
- Treatment progression and additional/complementary treatments – enzyme/chemical peel, microdermabrasion, LED, micro current, micro needling, iontophoresis, electroporation, IPL, laser including associated time frames
- Areas to avoid or needing special consideration such as eyelids, inside the orbital bone area, Thyroid cartilage area, around the heart band

Uses, limitations, benefits and effects of radio frequency treatment

Taught content

- Uses:
 - Improve the appearance of skin surface and texture
 - Skin renewal and rejuvenation
 - Improvement of static and dynamic wrinkles
 - Definition/lifting of jawline
 - Firming/tightening and contouring
 - Fat reduction
 - Stimulation of collagen
 - Reduction in skin laxity
- Limitations:
 - Cannot be used on areas where there is a loss of tactile sensation
 - Limited use on specific areas of caution
 - Possible contra-actions
 - Timing between treatment, recovery and results
 - Not to be used in conjunction with other heat treatments for 24-48 hours
- Benefits/effects:
 - Reduces the appearance of static and dynamic wrinkles
 - Defines and lifts facial features
 - Redefines, contours and lifts areas of the body
 - Reduces the appearance of cellulite
 - Assists inch loss
 - No downtime
 - Most significant changes in collagen stimulation are found 2 months after the last application. Regular reviews of the client's progress are recommended

Contra-actions and adverse reactions, complications management

Taught content

- Effects and risks of using excess pressure, incorrect angle or direction, uneven application or non-compliance to safety and hygiene practices
- Contra-actions and adverse reactions – oversensitivity of treated area, erythema, hyperaemia, mild oedema, swelling, mild bruising, excessive pain, blistering, burns, bruising, scabbing, scarring, temporary or permanent scarring, temporary or permanent skin pigmentation changes, open sores, infections, numbness, excessive oedema fat atrophy leading to sunken treated areas
- How to avoid and manage contra-actions/adverse reactions/complications at home, if concerned contact therapist in the first instance. When to refer to a medical practitioner
- Importance of knowing how to deal with and manage incidents of client dissatisfaction with results, unexpected results, adverse reactions including; hyperaemia, histamine reaction, anaphylaxis, bruising, blistering, burns, irritation, infections, papules, pustules, pain, inflammation, swelling, excessive oedema, prophylaxis herpetic infection, wounds, atrophic scarring, keloid scarring, pigmentary changes, trans-dermal water loss, compromised healing process, nausea, dizziness, fainting
- Every client must be given the opportunity to feedback outcomes at the end of every treatment

SPF and UVA specific sun protector

Taught content

- Why it is necessary to use a minimum of a UVB SPF30 and UVA specific sun protector post treatment
- Knowledge of SPF rating system and why high % of block is required to protect the skin after radio frequency treatment
 - SPF 15 = 93% UVB block
 - SPF 30 = 97% UVB block
 - SPF 50 = 98% UVB block
- Knowledge of UVA specific sun protector rating – star rating and the difference between a chemical and physical sunscreen

Preventing infection and promote healing

Taught content

- Understand the products necessary to prevent infection and promote healing, how they should be used before and after radio frequency treatments, soothing products to be applied post procedure to cool, calm and encourage skin recovery
- To prevent infection – ensure skin is clinically clean, use of antiviral suppressant to reduce the incident of post procedural herpes simplex outbreak. Knowledge of all appropriate products and use in line with supplier/manufacturer protocols
- To promote healing – calming products/post treatment serums/masks, lifestyle factors and changes that may be required to enhance the effectiveness of treatment and promote healing and activities which might inhibit or compromise healing, correct aftercare, skin hygiene and behaviour of client, post procedure – anti-inflammatory effects – LED, serum, mask, cool compress

Treatment progression and additional/complementary treatment recommendations

Taught content

- Advice regarding post treatment expectation and associated time frames with regard to healing process affects products used
- Recommendations for appropriate intervals between treatments depending on the area treated and treatment objectives, homecare to be followed
- Complementary products and treatments to be used/avoided in conjunction – topical trans-epidermal products, skin care, body products
- Knowledge of progressive remedial treatment timings and use of skincare programmes at home to reinforce treatment effects
- Knowledge of how the skin and underlying structures are affected, benefit and respond to radio frequency treatments and how they vary for different Fitzpatrick skin classifications
- Lifestyle factors and changes that may be required to improve effectiveness of procedures – skin care routine, increased fluid intake, healthy eating, exercise and sun protection

LO3 Comprehend the relevant anatomy, physiology and pathologies for radio frequency treatments

Structure and functions of the skin in relation to radio frequency treatments

Taught content

- Epidermis – stratified epithelial tissue, stratum germinativum, stratum spinosum, stratum granulosum, stratum lucidum, stratum corneum
- Cell structure and types in the skin, mitosis, epidermal lipids and hydration, epidermal tissue differentiation, keratinisation, natural desquamation and melanogenesis
- Functions of the skin
- The defensive role of the epidermis and the importance of the natural barrier function (NBF) and implications of compromised NBF
- The role of melanocytes, keratinocytes and fibroblasts in promoting and rejuvenating healthy skin
- Melanogenesis to include post-inflammatory hyperpigmentation (PIH) plus causes and recognition of hypo and hyperpigmentation pigmented lesions, recognition and causes, such as vitiligo, solar/seborrheic keratosis, actinic keratoses, lentigines, ephelides, chloasma, melasma, poikiloderma of civatte and skin cancers
- Dermis – blood/lymph supply, papillary layer, reticular layer, extra cellular matrix-collagen, elastin, hyaluronic acid, dermal cells mast cells, fibroblasts, macrophages and neutrophils, proteoglycans and glycosaminoglycans (GAGS)
- Extra-cellular matrix development, function, degeneration and regeneration including importance of collagenase and elastase in the wound healing process
- Nerve endings (Meissner's corpuscles, Pacinian corpuscles, Merkel's discs and Ruffini corpuscles)
- The process of and the requirements for collagen synthesis including vitamins A, B, C and E, anti-oxidants, growth factors, copper peptides, bioflavonoids, iron, zinc and amino acids

Structure, functions and variances of subcutaneous and adipose tissue

Taught content

- Functions of subcutaneous and variations in adipose tissue deposits in the face and body
- Hypodermis – subcutaneous layer, adipose tissue, adipocytes, lipocytes, tissue hypoxia, lipolysis (speeding up breakdown of fat) and lipogenesis (the synthesis of lipids from sugars, slowing down the storage of fat)
- Calorie consumption rate vs energy output (Triglycerides, cholesterol and essential fatty acids)
- Differentiate between visceral fat and subcutaneous fat
- Release of hormones to control metabolism
- Functions of adipocytes – store triglycerides, mechanical shock absorbers, thermal insulation
- Body shape and architecture
- Types of adipose tissue
 - White adipose tissue (white fat – unilocular) large lipid droplet surrounded by a layer of cytoplasm with a flattened nucleus, stored in a semi-liquid state composed of triglycerides and cholesterol ester
 - Brown adipose tissue (brown fat – multilocular) polygonal shape, have considerable cytoplasm with lipid droplets scattered throughout and a round nucleus. Colour due to large quantities of mitochondria, used to generate heat

Types and grading of cellulite

Taught content

- Adipose cellulite – firm cellulite with an orange peel effect
- Oedematous cellulite – cellulite caused by water retention resulting in soft cellulite
- Fibrotic cellulite – hard, compact cellulite with an orange peel effect
- Hard Cellulite – commonly younger clients, rigid area with stronger attachment to muscles, may need more treatments
- Soft Cellulite – commonly older clients with loss of connective tissue support systems and loss of tissue tone/reduced muscle tone
- Edematous Cellulite – common side effect of the contraceptive pill, associated with fluid retention/venous insufficiency
- Grading of Cellulite
 - Grade One
 - Deterioration of the skin's dermis
 - Upper region of the dermis begins to lose capillary network
 - Fat cells within freestanding fat cell chambers engorge with lipids, can swell 2-3 times their original size
 - Fat cell clumping may also commence at this stage
 - Fluid accumulates in the tissues due to breakdown in the capillary system
 - Projections of fat begin to occur in the dermis
 - Increase in GAG's (Glycosaminoglycans) which enhances ability for tissues to retain excess water
 - Grade Two
 - Dermal deterioration continues
 - Microcirculatory system continues to decline
 - Fat cells further engorge lipids
 - Fat clumping more pronounced pushing blood vessels further away
 - Dimples appear in the dermis
 - Fluids continue to accumulate
 - "Orange Peel" is now evident
 - Grade Three and Four
 - Microcirculatory system continues to deteriorate slowing metabolism in the cells of the dermis
 - Protein synthesis and repair process are considerably reduced
 - Protein deposits begin to form around fat cell clusters
 - Pinching the skin demonstrates a definite "orange peel" effect
 - By Stage 4, hard nodules are evident in the dermal region

Principles of controlled wound healing in relation to radio frequency treatments

Taught content

- The uses and implications of controlled wound healing to the practitioner
- Principles of inflammation and healing devices of the skin, basic principles of controlled wounding for aesthetic rejuvenation. Wound healing is a complex and dynamic process of restoration of skin cell structures and tissue layers
- Influential factors in the efficiency of wound healing responses
- The principle and processes of wound healing – Haemostasis, inflammation, proliferation, remodelling; actions of arachidonic acid cascade, Merkel and Langerhans cells, red and white blood cells, the clotting process, platelets, fibrin clots, types and roles of growth factors in the healing response, re-epithelialisation, reformation and building of the basement membrane, mitosis leading to epidermal regeneration, rebuilding of the extra cellular matrix and early collagen; formation characteristics of type 3 collagen, collagen remodelling and the conversion of collagen from type 3 to type 1. Characteristics of collagen type 1 Phases of skin healing – Haemostasis instant phase, inflammatory phase (occurs immediately following the injury and lasts approximately 6 days), fibroblastic phase (occurs at the termination of the inflammatory phase and can last up to 4 weeks), scar maturation phase (begins at the 4th week and can last for years)
- Factors which interfere with wound healing/trauma – initial or repetitive, scalds and burns (both physical and chemical), animal bites or insect stings, pressure, vascular compromise, arterial, venous or mixed, immunodeficiency, malignancy, connective tissue disorders, nutritional deficiencies, psychosocial disorders, adverse effects of medications, poor hygiene, sun exposure, poor home care

The principles and functions of digestive and excretory systems in relation to radio frequency treatments

Taught content

- The digestive system and excretory systems and their effects on the skin/body conditions which may affect the client receiving Radio Frequency treatment
- Accessory organs – liver, gall bladder and pancreas
- The processes of digestion and absorption
- The processes of excretion and excretory systems
- The relevance of the digestive and excretory systems to radio frequency treatments

Common diseases and disorders and relevant terminology of the skin

Taught content

- Allergic reaction bruise, benign, bulla, chilblains, crust, erythema, excoriation, fissures, haemangioma, hyperaemia, inflammation, keloid, macule, malignant, nodule or cyst, oedema, papule, pustule, scales, scar, telangiectasia, tumour, ulcer, vesicle, weal, weeping, , couperose, comedones, crow's feet, hyper-keratosis, milia, pseudo folliculitis, urticaria, hyperpigmentation, hypopigmentation, atopic eczema, atopic dermatitis, psoriasis, acne vulgaris, acne rosacea, boils, carbuncles, folliculitis, impetigo, herpes simplex, herpes zoster, warts, verrucae, candida, tinea corporis, albinism, chloasma, dermatosis papulosa nigra, ephelides, lentigo, leucoderma, naevae, papilloma, port wine stain (capillary naevus), vitiligo, sebaceous cysts (steatoma), skin tags (fibroma, verrucae filiformis), spider naevi, styes and xanthomas, prickly heat (miliaria rubra)

Common diseases and disorders of the digestive and excretory systems

Taught content

- Digestive system
 - Anorexia nervosa, appendicitis, bulimia nervosa, cancer-stomach, cancer-bowel, cirrhosis of the liver, constipation, coeliac disease, diarrhoea, diverticulitis, flatulence, gall stones, heartburn, hernia (abdominal), dyspepsia (indigestion), irritable bowel syndrome, jaundice, nausea, obesity, ulcer (duodenal, gastric, peptic), candida, colitis, ulcerative colitis, Crohn's disease, diverticulosis, enteritis, gastritis, inflamed gall bladder, pernicious anaemia and oesophageal ulcer
- Excretory system
 - Cystitis, dysuria, enuresis, glomerulonephritis, incontinence, kidney stones, nephritis (Bright's disease), pyelonephritis, urinary tract infections, urethritis, nephroblastoma, renal failure, renal colic and uraemia

LO4 Demonstrate how to consult, plan and prepare for radio frequency treatment

Use consultation techniques to determine the client's treatment plan

Taught content

- Consult with client face-to-face, implementing a range of appropriate communications skills to identify client's treatment objectives, expectations and desired outcomes with associated timescales to ensure a realistic and achievable treatment plan is agreed
- Use illustrative diagrams and images (where necessary) to assist client understanding of the outcomes expected from using radio frequency techniques and give clear and appropriate advice and recommendations to the client to determine and agree the final treatment plan, including associated timeframes and possible number of treatments to see best possible results
- All information from the consultation to be documented in the presence of the client – electronically/digitally/paper-based, at the beginning of every treatment
- Obtain the client's agreement and signed informed consent to treatment and all required visual media images prior to all treatments
- The practitioner and client must understand the implications of informed client consent, what is being agreed and the responsibility of each in terms of liability

Consult with the client

Taught content

- General information
- Relevant medical history – discuss all areas on consultation documentation including recent herpes simplex, certain medications including anti-coagulants and skin thinners
- Lifestyle information – such as smoking, diet, water intake, current skin care routine that may need to be considered, sun exposure, hobbies
- Skin classification, for example assess Fitzpatrick scale, Lancer Scale, phenotype genotype and Glogau photodamage, hereditary and ethnic influences
- Skin condition, characteristics, sensitivity and healing history
- Explain the radio frequency treatment process in line with supplier/manufacture recommendations, the physical sensation of the treatment and the appearance of the skin post treatment. Discuss associated time frames and changes associated with healing and explain any downtime requirements and activities to avoid post treatment
- Explain potential risks/side effects/adverse reactions and contra-actions – oversensitivity of treated area, erythema, hyperaemia, mild oedema, swelling, mild bruising, excessive pain, blistering, burns, bruising, scabbing, scarring, temporary or permanent scarring, temporary or permanent skin pigmentation changes, open sores, infections, numbness, excessive oedema fat atrophy leading to sunken treated areas
- Finalise and agree the treatment plan, addressing client needs, expectations (both realistic and unrealistic) and treatment objectives using information from the initial consultation and visual skin assessment and equipment/delivery method and confirm agreement to aftercare adherence, decline treatment where applicable

Explain the cooling off period

Taught content

- Provide information to the client regarding the 'cooling off' period of at least 48 hours between initial consultation and first treatment. Book first treatment in line with given directives on cooling off periods. Give client written information regarding the after-effects, homecare/additional routines required, proposed outcomes and agreed treatment plans

Establish the condition of the skin

Taught content

- Use Woods lamp, magnifying lamp/glasses or skin diagnostic equipment and perform a visual assessment of the condition of the skin documenting all findings
- Skin characteristics – Fitzpatrick scale 1-6, Glogau photo damage, level of sensitivity, thickness of skin, epidermal thickness and healing capacity, genetic and ethnic influences
- Skin types, skin conditions, surface hydration, pigmentation, photo/sun damage, vascular lesions, primary and secondary lesions, irregularities, skin texture (pore size), skin laxity, static and dynamic wrinkles, congestion/excessive oil, discuss pre-treatment skincare and lifestyle adaptation advice
- Identify contra-indications that may restrict, prevent or require medical referral. Make note of the contra-indications on the client's record card

Explain the treatment procedures to the client

Taught content

- Selection of radio frequency treatment and preparation to match treatment objectives and agreed treatment plan in line with findings from detailed advanced skin analysis
- Positioning required for treatment, ensuring client comfort and full access to the treatment area(s)
- Radio frequency equipment and accessories, setting of intensity to match treatment objectives and agreed treatment plan
- Treatment area will be cleansed thoroughly
- Appropriate cleanser/wipes/skin antiseptic, ensure area is dried thoroughly, medium to be applied
- Pre-treatment visual media records to be taken from all appropriate angles
- Explain about the testing of the machine on self and client
- Once set up, inform the client where the treatment will begin. The area will be treated following supplier/manufacturer protocols in a methodical and systematic manner within the agreed treatment area
- Advise on the physical sensation to be expected during treatment – use 1-10 pain threshold scale
- Describe the method of application, that the area will be split into small working zones to allow for thorough coverage and adaptations of treatment as appropriate
- After treatment a cool compress/cooling products will be applied to the area in accordance with supplier/manufacturer recommendations, such as serum/treatment mask
- Post treatment visual media records to be taken from all appropriate angles
- Broad spectrum sun protection UVB and UVA applied to protect the skin, explain the use of physical sun protection and the benefits of using a tyrosinase inhibitor to prevent post inflammatory hyperpigmentation (PIH)

- Explain potential risks/side effects/adverse effects hyperaemia, histamine reaction, anaphylaxis, bruising, burns, irritation, infections, pain, inflammation, swelling, excessive oedema, prophylaxis herpetic infection, wounds, atrophic scarring, keloid scarring, pigmentary changes, trans-dermal water loss, compromised healing process, nausea, dizziness, fainting
- Aftercare and home care advice including the need for increased fluid intake and revision of skincare regime for the area between appointments if applicable and advice regarding lifestyle changes needed to support and promote healing
- The importance of client compliance with adhering to advice given
- Access to a 24/7 emergency contact number, ideally the practitioner, if practitioner is unavailable access should be given to a deputising practitioner

Take pre-treatment visual media records

Taught content

- Following organisation procedures, industry guidelines and current data protection legislation, ensuring protocols are followed for taking visual media records to ensure clarity and consistency
- Take visual media records in same position as post-treatment visual media records and where possible in the same light
- Position area to be treated so visual media records are taken straight on and from both sides where applicable, zoom in on treatment area(s) if required
- Personal devices should not be used to take images of clients
- Gain written/signed client consent for photography and for storage of visual media records and specific use of visual media records for treatment evaluation, marketing and teaching purposes

Carry out skin sensitivity tests

Taught content

- Carry out sensitivity(thermal/tactile) tests in accordance with supplier/manufacture guidelines and organisational requirements, thermal and tactile immediately prior to treatment in the treatment area
- Client must sign skin sensitivity/thermal/tactile/test patch forms if separate to main consent form

Select suitable equipment and products

Taught content

- Select suitable clean, sanitised equipment and products according to treatment objectives prepare in accordance with supplier/manufacture instructions
- Choose the correct equipment, accessories and products suitable to treat conditions/skin type identified in the agreed treatment plan
- Select treatment head as appropriate to the treatment area, attach securely
- Test equipment on self and client prior to commencing full treatment
- Adjust equipment settings ensuring intensity and mode/power and frequency levels are appropriate to the objectives and skin classification identified in the agreed treatment plan

LO5 Demonstrate how to provide radio frequency treatments

Maintain own responsibilities for health and safety through the treatment

Taught content

- Ensure working area is set up and a safe working environment created in line with health and safety protocols and legislation
- Ensure all surfaces are clean and hygienic, trolley is tidy, equipment and accessories are sanitised and products set out ergonomically
- Ensure use of sterilisation and disinfectants for surfaces as required for treatment are in accordance with supplier/manufacture guidelines
- Working in an environmentally sustainable manner
- Ensure use of sanitisation and sterilisation for equipment and accessories are in accordance with supplier/manufacture guidelines
- Work in an environmentally sustainable manner
- Ensure appropriate ventilation, temperature, ambience, lighting, wall and floor coverings are fit for purpose
- Ensure all equipment and accessories are sanitised and in safe working order and products are available, in date and ergonomically placed
- Ensure risks and hazards have been checked, for example slip and trip hazards in the working area

Prepare, position and protect the client and self

Taught content

- Ensure preparation complies with legal and organisational requirements
- Prepare and protect client to preserve modesty. Protect client's eyes, hair when appropriate, protect/cover/request removal of clothing as appropriate depending on area of treatment
- Ensure the client's skin is clean and prepared for radio frequency treatment. Cleanse professionally with an appropriate cleanser to ensure all make-up, oils, body lotions and debris are removed thoroughly following manufacturers' protocols/recommendations
- Protect vulnerable areas of face and body as indicated
- Apply sufficient amount of working product during treatment application
- Position the client to meet the needs of the treatment without causing them discomfort
- Clearly instruct the client and if needed guide on facial expression/positioning or supporting the body to assist in stretching the skin or use supports or pillows to ensure the position fits the needs of the treatment, does not compromise the treatment application and does not cause the client any discomfort
- Ensure effective, ergonomic positioning of couch, trolley, stool, equipment, accessories, and products to avoid injury to self, client and others
- Ensure own posture and working methods minimise fatigue and the risk of injury to self, the client and others
- Ensure the working environment is private and secure. Depending on area to be treated provide modesty towels/disposable tissue to protect clothing and provide modesty so the client does not feel exposed and vulnerable

Safely use equipment, accessories, materials and products

Taught content

- Follow protocols for safe use, including correct use of radio frequency equipment and accessories, selection, handling loading, unloading/changing hand pieces and application heads and applications of treatment techniques for different treatment objectives
- Products – skin cleansers, topical numbing agent if appropriate, alcohol free skin antiseptic, cooling products, aftercare products, sun protection SPF 30+
- Keep tops on bottles, make sure all products are labelled clearly in line with COSHH information
- Ensure equipment is turned off and unplugged after treatment
- Ensure a waste receptacle is ergonomically placed for use throughout the treatment

Apply the radio frequency treatment

Taught content

- Provide radio frequency treatment using the correct techniques and in accordance with suppliers/manufacturers procedures and protocols at all times
- Refer to consultation form for previous settings used at last treatment (if applicable)
- Check preparation of treatment area; clean, sanitised and dry prior to treatment
- Apply the recommended product/serum to facilitate glide and optimum conductivity in accordance with the individual targeted treatment objectives
- Perform visual check of the machine to ensure it is in full working order and ensure the treatment head is attached correctly and securely
- Select the appropriate equipment settings for treatment objectives and all characteristics
- Position the client comfortably preserving client modesty where appropriate
- Work in a methodical and systematic manner to ensure full and even coverage of the agreed treatment area ensuring duration of contact does not exceed recommended time, keeping within the agreed area to avoid uneven treatment, excessive overlap or overworking the area
- Ensure the hand piece remains in full contact and continual flow as appropriate to each area and condition treated, to ensure full and even coverage and an effective treatment
- Avoid appropriate areas as contraindicated and/or agreed in the treatment plan
- Reassure the client and communicate positioning instructions clearly throughout treatment
- Continually discuss sensation and check client level of comfort and wellbeing throughout the procedure using the 1-10 pain threshold scale
- Observe the skin reaction and check the skin temperature throughout the procedure adjusting or adapting treatment parameters as appropriate
- Know when to adjust the intensity and duration to suit the client's skin reaction times or when to stop treatment due to excessive erythema or adverse reaction
- Assess all areas worked to ensure even and effective treatment
- Conclude treatment and turn off equipment
- Follow manufacturer protocols regarding the removal of treatment product, cooling and post treatment product application
- Apply appropriate aftercare products – cooling mask/agent, hydrating products/serum, moisturiser, SPF as appropriate
- Ensure the treatment procedure is completed in a commercial time frame
- Record treatment settings – intensity and mode/power and frequency levels and all treatment details on consultation form
- Collate, analyse, summarise and record evaluation feedback in a clear and concise way

Take post-treatment visual media images

Taught content

- Follow protocols for taking of visual media images to ensure clarity and consistency
- Take visual media records in same position as pre-treatment visual media records and where possible in the same light
- Position area to be treated so visual media records are taken straight on and from both sides where applicable
- Zoom in on any areas of concern, for example, jawline. Images used to record treatment progress and as a visual record of the skin response immediately after treatment
- Personal devices should not be used to take or store images of clients
- Confirm clients' consent for storage of visual media records and specific use of visual media records for treatment evaluation marketing and teaching purposes

Provide post care advice and additional homecare

Taught content

- Communicate with the client regarding post-procedure care, normal/expected and adverse treatment reactions
- Assess and record immediate skin response. Give client advice on post procedure sensations and expectations – erythema, mild oedema, sensitivity
- Post-procedure physical sensation including adverse reactions and how to respond
- Client is advised to avoid additional heat treatments for 48 hours – including sun exposure and sun beds
- Follow with recommended homecare products
- Drink 2 litres of water daily
- Avoid excessive exercise for 24hrs
- Avoid saunas, steam rooms for 24hrs
- Do not apply any glycolic, retinol products, AHA/BHA for 24 hrs
- Provide general advice on recommendations for healthy diet and exercise to maximise treatment effects
- Provide aftercare advice on suitable post-treatment products
- Provide advice for ongoing/further radio frequency treatments and treatments which may be avoided or used in conjunction to maintain or maximise results with appropriate time frames
- Follow manufacturers' guidelines in respect of treatment intervals
- Advise on occasional adverse side effects and adverse reactions – excessive erythema, swelling, welting, tenderness, burns, blistering scarring, temporary or permanent scar formation from incorrect procedure technique
- Advise client how to manage any contra-actions or adverse reactions at home and when to refer to a medical practitioner
- Provide client with access to a 24/7 emergency contact number, ideally the practitioner, if practitioner is unavailable access should be given to a deputising practitioner
- Document post-procedure complications and adverse reactions with advice given in line with legislative, insurance and organisational guidelines
- Use reflective practice to evaluate the treatment and inform and provide advice for ongoing future radio frequency treatments and other treatments which may be used in conjunction to optimise results
- Evaluation of the radio frequency treatment to inform future treatments, collate, analyse, summarise and record information gained from client feedback, client records and own observations
- Agree any alterations for future treatment with the client and record the outcome for further evaluation

Dispose of waste materials to meet legal requirements

Taught content

- Waste – disposed of in an enclosed foot pedal-controlled waste bin fitted with disposable, durable bin liner
- Clean radio frequency equipment, hand piece and applicator head in line with supplier/manufacture instructions and store correctly
- Treatment waste – correct disposal of waste from the treatment in line with local council regulations and procedures

Update client records

Taught content

- Accurate completion of treatment details including treatment area, skin preparation, equipment, all settings used and temperature achieved, application techniques and duration of treatment, client reaction, skin sensation and skin response, observation of skin during and after treatment, aftercare and home care advice given
- Reflective practice to evaluate the radio frequency treatment and to inform future treatments Every client must be given the opportunity to feedback outcomes at the end of every treatment, collate, analyse summarise and record evaluation feedback in a clear and concise way
- Signature from client to be obtained accepting treatment results and skin response and agreement to comply with aftercare and follow all after care/post treatment advice
- Logbook – Practitioners should keep individual contemporaneous records of activity in either digital or paper format, information to be included: date, time, non-identifiable client ID number, practitioner name, indication, product/technique used, anatomical location, complications/adverse events
- Practitioner signature to take responsibility for treatment and records completed Follow manufacturer protocols for treatment intervals
- Records filed and stored securely in line with current data protection legislation
- Annual review of compliments and complaints procedures

Provide and manage post-treatment communications and outcomes

Taught content

- Advise client of expected reactions: mild erythema, slight itching, discolouration of ablative points, healing process and associated time frames, scabbing
- Communicate with client regarding post-treatment care and concerns
- Clients should be given access to a 24/7 emergency contact number, ideally the practitioner, if practitioner is unavailable access should be given to a deputising practitioner
- Inform client how to manage complications/adverse reactions at home and when to refer to a medical practitioner
- Provide and inform the client of protocol for formal complaints
- Document post-treatment complications and adverse reactions in line with organisation guidelines
- Protocol for escalating a formal complaint to management prior to a medical practitioner
- Every client must be given the opportunity to feedback outcomes at the end of every treatment

Assessment requirements

Learners are required to complete all assessment requirements related to this unit:

1. Case studies
2. Theory examination
3. Practical examination

1. Case studies

Learners must produce a portfolio of evidence which is required to be completed under the supervision of a lecturer who must monitor the quality of the treatments performed throughout the learners' training, to ensure that they meet the given criteria. All case studies must be completed and marked prior to the learner completing the practical and theoretical examinations.

Learners must complete a **minimum of 6 case studies**. Each case study needs to include a full medical history of the client, advanced skin assessment, before and after pictures and a full description of the area to be treated including skin health/type and characteristics. A detailed description of the application techniques used, machine settings, current intensity and duration of treatment must also be provided. Each case study must also include pre and post treatment skincare and lifestyle advice, an evaluation of the treatment and its outcomes.

Range to be included in case studies must show learners have:

- Met the needs of a variety of clients
 - New
 - Existing
 - Male or Female
- Carried out all consultation techniques
 - Questioning – verbal
 - Listening – non-verbal
 - Visual – non-verbal
 - Manual
 - Written
 - Pre-treatment visual media images taken
- Carried out skin sensitivity test
 - Thermal
 - Tactile
- Cover the following conditions
 - Skin tightening
 - Skin tightening on the body
 - Treatment of cellulite
- Treated 6 case studies to include a minimum of 3 facial conditions and 3 body conditions
- Carried out advanced skin assessment

- Considered all factors of skin characteristics/body conditions
 - Skin types and characteristics:
 - Level of sensitivity
 - Skin condition
 - Skin density
 - Epidermal thickness
 - Hydration levels
 - Existing collagen levels
 - Sun damage
 - Healing capacity
 - Dryness of the skin
 - Body conditions:
 - Cellulite
 - Uneven fat deposits
 - Uneven skin texture
 - Poor body contour
 - Skin laxity
- Skin classification
 - Fitzpatrick scale
 - Glogau photo-damage
 - Phenotype and genotype
- Treatment objectives
 - Reduction of fine lines and wrinkles
 - Improved skin condition
 - Body contouring
 - Facial skin contouring
 - Improved appearance of cellulite
 - Circumference reduction
- Treatment areas
 - Face and neck
 - Upper torso
 - Limbs
- Taken all courses of necessary action if required
 - Explaining why treatment cannot be carried out
 - Encouraging the client to seek medical advice if applicable
 - Modification of treatment
- Use all types of equipment
 - Suitable radio frequency machine and application heads
 - Face applicator
 - Body applicator
 - Multifunctional electro therapy equipment
 - Suitable products

- Recorded all types of information
 - Intensity
 - Frequency
 - Temperature
 - Duration
 - Duration of current flow
 - Areas of modification
 - Reaction levels
- Given all advice and recommendations
 - Suitable pre and post care products and their uses
 - Avoidance of activities which may cause contra-actions
 - Modification of lifestyle patterns
 - Post-treatment contra-actions and how to deal with them
 - Future treatments recommended
 - Treatments which could be given in conjunction with/after cosmetic radio frequency treatment
 - Use of SPF products
 - Issuing of written post-care advice
 - Recording 'before' and 'after' visual media records

2. Theory examination

Learners must complete a theory examination for this unit. This will consist of a multiple-choice question paper which is mapped to the relevant assessment criteria stated below.

The theory examination will test knowledge and understanding from across learning outcomes 1, 2 and 3. Learners should use the unit content sections of this unit to aid revision since exam questions will test the full breadth of this content over time

Learning Outcome	Assessment Criteria
LO1 Interpret safety considerations when providing radio frequency treatments	1.1 Safety of product and equipment sourcing
	1.2 Insurance guidelines
	1.3 Hygiene considerations
	1.4 Hazards and risks
	1.5 Suppliers' and manufacturers' instructions for safe use
	1.6 Working in line with organisational procedures
	1.7 Treatment of minors
	1.8 Timing of treatments
	1.9 Contra-indications that would prevent or restrict treatment
	1.10 Contra-indications requiring medical referral and referral process
	1.11 When to consult with other aesthetic professionals

Learning Outcome	Assessment Criteria
LO2 Comprehend how to provide radio frequency treatments	2.1 Factors to consider when treatment planning
	2.2 Assessing skin characteristics and body conditions
	2.3 Pre and post treatment advice to provide to the client
	2.4 Pain threshold and sensitivity variations
	2.5 Radio frequency current
	2.6 Types and purpose of radio frequency equipment and products
	2.7 Preparation and selection of equipment and products for treatment
	2.8 Method of application
	2.9 Adaptations to treatment
	2.10 Uses, limitations, benefits and effects of radio frequency treatment
	2.11 Contra-actions and adverse reactions, complications management
	2.12 SPF and UVA Sun protection
	2.13 Preventing infection and promote healing
	2.14 Treatment progression and additional/complementary treatment recommendations

Learning Outcome	Assessment Criteria
LO3 Comprehend the relevant anatomy, physiology and pathologies for radio frequency treatments	3.1 Structure and functions of the skin in relation to radio frequency treatments
	3.2 Structure, functions and variances of subcutaneous and adipose tissue
	3.3 Types and grading of cellulite
	3.4 The principles of controlled wound healing in relation to radio frequency treatments
	3.5 The principles and functions of the digestive and excretory systems and relevance to radio frequency treatments
	3.6 Common diseases and disorders and relevant terminology of the skin
	3.7 Common diseases and disorders of the digestive and excretory systems

3. Practical examination

Learners must complete a practical examination for this unit which will be externally set by the awarding organisation and examined and marked by an external examiner. The practical examination will take place at the end of the period of learning. For practical examination criteria, please refer to the Qualification Specification.

Document History

Version	Issue Date	Changes	Role
v1	12/02/2024	First published	Product and Regulation Manager