
Unit Specification

USBT51 – Enhance appearance using scalp micropigmentation techniques

Unit accreditation code: UV85 04

SCQF Level: 7
SCQF Credits: 7
Guided Learning Hours (GLH): 21

Overview

The aim of this unit is to develop the learners' knowledge, understanding and practical skills when using scalp micropigmentation techniques, a form of cosmetic tattooing implemented to replicate the appearance of natural hair follicles and shaven hair or applied to camouflage scars on the scalp or areas of thinning hair or hair loss. It covers the skills involved 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 needs and requirements. Learners will also develop the knowledge required to provide pre and post-treatment advice and post care including maintenance treatments needed to ensure that the client receives the full benefit of the treatment and results are maintained.

Learning outcomes

On completion of this unit, learners will:

LO1 Interpret the environmental and safety considerations when providing scalp micropigmentation treatments

LO2 Comprehend protocols and guidelines when providing scalp micropigmentation treatments

LO3 Demonstrate how to consult, plan, design and prepare for scalp micropigmentation treatment

LO4 Demonstrate how to provide scalp micropigmentation treatments

Unit content

LO1 Interpret the environmental and safety considerations when providing scalp micropigmentation treatments

Promoting environmental and sustainable working practices

Taught content

- Environmental working practices, to be effective and energy efficient heating and ventilation to meet for example, the Workplace (Health, Safety and Welfare) Regulations 1992 (or local regulation requirements to the country being delivered in) for client and employees
- Sustainable working practices – products with ingredients from sustainable sources and using sustainable packaging, efficient storage and waste disposal, record product usage

Licensing regulations for the aesthetic practitioner and premises

Taught content

- Local government licensing
- Professional association licensing
- Responsibilities of employers and employees
- Responsibilities of the self-employed
- Responsibilities of suppliers, manufacturers and installers

Insurance guidelines

Taught content

- Current professional insurance policy requirements for working at this level
- Insurance policy requirements to be met to ensure insurance is valid
- Requirements for scalp or skin patch testing prior to treatment
- Acquiring informed client consent and signature before every treatment
- Acquiring client consent to photographs (visual media images) before and after every treatment
- Providing verbal and written post-care information
- Ensuring the practitioner is working within scope of practice with regard to selection of needles/cartridges, sizes, configurations, pigments/dilutants/boosters and application techniques used

Safety of product and equipment sourcing

Taught content

- Ensure cosmetic scalp micropigmentation equipment, pigments and products used are approved by EU Cosmetics Regulations for cosmetic use by practitioners and conforms to guidelines of the Cosmetic Practice Standards Authority (CPSA) or the relevant legislation for the country therein
- The safety and legal reasons for using products that are licensed and meet EU standards and the outcome of using products which are not properly tested or contain banned substances
- Understand how to gain verification of legality of products and equipment sourcing
- Know the options for pain management and the legal requirements and restrictions for sourcing, storing and using topical anaesthetic/numbing agents licenced in the UK/EU
- The use of Safety Data Sheet (SDS) in relation to scalp micropigmentation treatments check supplier/manufacturer for guidelines

Suppliers' and manufacturers' instructions for safe use

Taught content

- Understand the features, benefits and know reasons for supplier and manufacturer product and equipment protocols for scalp micropigmentation treatments including scalp/skin sensitivity and patch/scratch test recommendations. Products appropriate for use during scalp micropigmentation treatment preparation, performance, post care and aftercare application according to supplier/manufacturer instructions, for example cleansing, topical anaesthetic/numbing agent, pigments/dilutants, boosters, healing balm/cream, SPF. Follow guidelines to check expiry dates and that packaging is intact. Select new unused disposable, single use needles/cartridges considering needle diameter, size and configuration (as appropriate)
- Select appropriate colour pigments as per client specific requirements and mix in line with supplier/manufacturer's instructions and guidelines
- Understand colour theory for scalp micropigmentation treatments and know how to select, mix and test appropriate colour pigments/dilutants to create the desired effect and treatment objectives, taking into account skin and hair colour, classification and characteristics and the types, formulations, uses and limitations of pigments when mixed
- Prepare, open, load and dispose of equipment following supplier and manufacturer protocols and adhering with compliance
- Follow supplier/manufacturer protocols for hygiene, sterilisation and treatment application working over the small zones of the scalp/face in specified order, working in a systematic manner, stabilising the treatment area and manipulating the scalp and skin to ensure effective implantation and distribution of pigment as required using the correct settings, speed, angle, pressure depth and techniques, adapting treatment application to all areas worked to achieve the desired outcome in line with agreed treatment plan
- Feedback regarding treatment sensation, client comfort, tolerance and wellbeing to be checked with client throughout treatment. Observation and correction of desirable and undesirable implantation of pigment and skin reaction, topical anaesthetic/numbing agent and scalp/skin recovery products used in the salon. Frequency of treatment and associated timeframes, process of healing and the expected outcome with associated timeframes, maintenance treatments required and associated time frames and conditions suitable for treatment

Working in line with organisational procedures

Taught content

- Adhere to all suppliers'/manufacturers' recommendations and protocols
- Adhere to responsible marketing guidelines
- The individual responsibilities of working within a multidiscipline team
- Lines of communication within a multidiscipline team
- Conflict resolution
- Responsibility of working within remit of qualification boundaries
- The role of clinical governance within the aesthetic industry
- The importance of Continuing Professional Development (CPD), training, education and career opportunities

Hygiene considerations

Taught content

- Set up and work within a clinically clean field. Use of suitable sterilisation and sanitisation for equipment and surfaces. Use of single use items as appropriate such as disposable gloves (latex free), disposable hair protectors, apron/gown, applicators, cotton wool, couch roll, clean laundered towels and practitioner's protective face mask, template drawing equipment as required – pencils, sharpener, measuring devices/callipers, hairline stencils, mirror
- General hygiene – washing of hands before, during and after treatment, hand gel, clean towels, use of disposables where possible
- Disposable single use covers/barrier film for handpiece, for example needles/cartridges, pigment cups renewed for each client, wires on automated devices covered with protective covers/sleeves/film renewed for each client
- Disinfectant or sterilisation – use of heat or chemical methods, bactericides, fungicides, UV cabinet for storage, medical grade sanitising wipes
- Equipment – only used for intended purpose, safe usage/safe handling/storage/visual checks, correct disposal of contaminated equipment and waste products
- Waste disposal – general and hazardous or contaminated treatment waste including current legislation and local authority requirements
- 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) Herpes Simplex

Contra-indications that would prevent or restrict treatment

Taught content

- Prevent – allergy to surgical grade stainless steel, anti-coagulant medications, blood borne diseases, contagious scalp and skin diseases, extremely sensitive scalp/skin, haemophilia, history of drugs with photosensitising potential, inflammations and swellings, isotretinoin, Roaccutane within 6 months, open wounds, recent scar tissue, rosacea, severe active acne, skin cancer and undiagnosed lumps, internal auditory devices (cochlear implant), keloid scarring, any conditions not covered by insurance policy
- Restrict – abrasions, active inflammatory dermatoses (i.e. psoriasis), anxiety, bruises, current medications, cuts, diabetes, epilation, epilepsy, herpes simplex, history of scarring, Intense Pulsed Light (IPL) or laser in the treatment area, large moles, long term anti-inflammatory use, piercings, poor mental and emotional state, recent botulinum toxin injections or dermal fillers, recent dermabrasion or cosmetic skin peels, sensitive or excessively reactive skin types, supplements and herbal remedies, recent UV exposure MRI, active suntan, artificial tan, blood donation

Contra-indications requiring medical referral and referral processes

Taught content

- Contra-indications requiring medical referral and why, such as radiation treatment, certain medications, chemotherapy, immune conditions
- 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 to that previously noted, need to be identified and the client encouraged to go to their General Practitioner for diagnosis
- Protocols to follow in respect of the prevent and restrict guidelines
- Actions to take in relation to specific contra-indications when referring clients
- Knowledge of organisation protocols for not naming specific suspected contra-indications when encouraging client to seek medical advice
- Encourage clients to seek medical advice without alarm or concern
- Reasons for not diagnosing suspected contra-indications due to professional status, acknowledging the need for medical training to be able to diagnose

When to consult with other aesthetic/medical professionals

Taught content

- Recognise when additional information is needed from other clinicians/medical professionals involved with the client and how this can be obtained in compliance with confidentiality and consent guidance and in line with current data protection legislation
- Demonstrate an understanding of when to and how to request additional advice from other clinicians/medical professionals treating the client when applicable in line with current data protection legislation
- Recognise when and what other aesthetic treatments may be of benefit as a pre-treatment to prepare treatment site for scalp micropigmentation; for example microdermabrasion, scalp/skin needling, PRP

Treatment of minors

Taught content

- The age at which an individual is classed as a minor and how this may differ internationally
- Why treatment should only be provided for clients over the age of 18 unless referred by a medical practitioner and with parental consent

Hazards and risks

Taught content

- Identification of hazards and risks through risk assessment
 - 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 supplier/manufacture guidelines
- Sharps injuries, implications of blood-borne diseases, redness, swelling, weeping skin, milia, hyperpigmentation, cold sores, acne outbreak, viral infection, bacterial infection and scarring
- Contra-actions and adverse reactions – blistering, stinging, excessive discomfort, pain, oedema, reactions leading to bruising, hives, anaphylaxis, nausea, dizziness, fainting, hypertrophic or keloid scarring, scabbing, lack of retention, colour fade, migration of pigment
- Potential associated risks with the options for pain management using topical anaesthetic/numbing agents
- Risks associated with performing scalp micropigmentation over vitiligo and the precautions to performing micropigmentation over atrophy, hypertrophic and keloid scarring
- Understand how colour pigments can change throughout the healing process and post healing and the colour theory to change undesirable colour results after healing
- Procedures for removal – saline, chemical, IPL, Laser and their limitations and effects on micropigmentation

LO2 Comprehend protocols and guidelines when providing scalp micropigmentation treatments

Factors to consider and treatment planning

Taught content

- Client needs and expectations, anticipated costs, and treatment objectives to agree realistic outcomes against client expectations, discuss pain and pain management and potential risks relevant to the scalp micropigmentation treatment to be performed
- Results from skin, scalp, hair and hair loss analysis, classifications and characteristics taking into consideration the natural progressive ageing of the client and any future expected continued hair loss and the psychological impact of hair loss on the quality of life
- Previous scalp/hair restorative treatment in salon/clinic/home remedy – details of type of treatment, for example, Scalp Needling/PRP/Low-Level Light Therapy, Topical Solutions, Hair Growth Tablets, frequency and dates the treatments were received, to ensure enough time has passed for external/internal trauma to have healed
- Satisfaction and results. Dissatisfaction could indicate body dysmorphia or client with unrealistic expectations
- Legal aspects of responsibility of the practitioner
- Previous natural and desired hairline; position of original hairline, shape of hairline, style of hairline
- Diet and lifestyle factors that could positively or negatively impact the effects of treatment
- Medical history including contra-indications that prevent or restrict treatment to ensure client is safe for treatment or if medical referral is required
- The aims of treatment – defining hairline, creating hairline, correcting hairline, improving and balancing hairline, introducing skin colour, scalp camouflage, simulated shaved hair appearance, scar camouflage/relaxation
- Frequency, duration and potential cost of treatments and potential number of treatments with appropriate time frames recommended to achieve planned treatment outcomes including appropriate intervals of required maintenance treatments to maintain the result. Pre and post treatment advice including any benefits of specific scalp preparation treatments and optimal intervals prior to commencing scalp micropigmentation treatments, possible contra-actions, healing process – such as avoid aloe vera throughout the healing process as this can cause migration, recommended scalp/skin/hair care/post care and lifestyle advice or restrictions, and to ensure client is suitable for treatment
- Draw and agree a template (where applicable) of the desired hairline and all factors that need to be considered when creating a hairline template design in terms of a realistic and achievable outcome
- Recording of photographic evidence of the agreed template (if applicable) prior to treatment, discuss and agree with client
- Treatment plan and schedule should be clearly agreed between the client and practitioner and recorded on the consultation documentation with signed consent

Assessing scalp, hair, hair loss and skin characteristics

Taught content

- How to assess through questioning at consultation and observation of scalp, hair and skin, importance of using diagnostic tests and equipment, for example dermascope, densitometer, Woods lamp, light magnifier/glasses, scalp/skin scanner/diagnosis technology results of blood tests/hormone levels, pull test, biopsy of scalp, photographs of client before hair loss, colour swatches/wheel for skin tone/undertone clarification
- How to assess and recognise skin health characteristics – Fitzpatrick scale 1-6, Glogau photo-damage, hyper/hypo pigmentation, scalp/skin colour, tones and undertones, level of sensitivity, thickness of scalp/skin, epidermal thickness, healing capacity, surface hydration levels, scalp/skin texture (pore/follicle size) skin laxity, static and dynamic wrinkles, congestion/excessive oil, sensitivity, tenderness, pruritis
 - Treatment area and adjacent/surrounding scalp and skin tissue, skin type, skin condition, specific scalp and/or skin conditions present, individual/localised lesions vascular lesions, primary and secondary lesions, irregularities
 - Scars and scar tissue, for example age and reasons for scarring, type of scar, mature scar, immature scar
 - Type of scar, for example superficial macular scars – burns, surgery, accidents, insect bites, acne, chicken pox
- How to assess deep dermal scarring – linear scar, linear hypertrophic scar, widespread hypertrophic scar, minor keloid, major keloid, rolling scar, boxcar scar, ice pick scar, depth, suitability for treatment, realistic proposed camouflage or improvement of scar tissue, scarring associated with previous hair transplant procedures
- How to assess and recognise hair loss characteristics – hair type, colour and thickness, timescale and pattern of hair loss, area(s) affected, personal and family history of hair loss – shedding, thinning, dietary habits (excessive dieting or fasting), normal hair care routine including changes in hairstyle to compensate for hair loss, products and hair care procedures, past medical disorders, endocrine, autoimmune, or inflammatory disorders, medication that can cause or worsen hair loss (antidepressants/carbimazole)
 - Pattern and distribution of hair thinning; Male pattern baldness; the Hamilton-Norwood scale, Female pattern baldness; the Ludwig scale, the Savin scale, the Sinclair scale, hereditary factors, growth pattern in terms of what is both achievable and realistic,
- Lichen Planopilaris, Alopecia: Alopecia Areata, Diffuse Alopecia Areata/Telogen Effluvium, Alopecia Totalis, Alopecia Universalis, Ophiasis alopecia, Androgenic Alopecia, Traction Alopecia, Postpartum alopecia, Alopecia Barbae, how to evaluate previous natural and desired hairline; position of original hairline, shape of hairline, style of hairline – broken/jagged, lightweight, edge-up hairline, defined hairline, uneven hairline, low hairline, middle hair line, high hairline, widow's peak, triangular hairline, bell shaped, straight-lined, receding or M-shaped hairline, cowlick
- How to match the treatments to suit scalp and skin health characteristics, hair health characteristics, the hair loss classification scales and treatment objectives and desired outcome. Reasons for choosing different micropigmentation needle diameters and configurations and pigment implantation techniques to suit the variations in sensitivity, thickness of epidermis and dermis, hair loss classification, thickness of hair being replicated, area being treated and treatment objectives

Pre and post treatment advice to provide to the client

Taught content

- Provide consultation and allergy/product sensitivity tests at least 48 hours prior to actual treatment to discuss outcomes and pre-treatment preparation. Active skin/scalp/hair care of a high/professional strength concentration needs to be avoided for 14 days to one month such as retinoids and AHA's pre and post scalp micropigmentation. Low strength should be avoided post treatment. Post treatment skincare products must be used for 7-10 days post treatment, 6 months for Roaccutane
- Pre-treatment, clients should also be advised to avoid UV exposure one month to six weeks prior to treatment and heat immediately prior to treatment, wear SPF minimum 30 and UVA broad spectrum protection daily
- Cease using minoxidil 3 days prior to starting treatment
- Avoid caffeine and alcohol 48 hours before and after treatment
- Physical sensation
 - The client may feel sensitivity such as mild to moderate discomfort, may feel like skin/scalp is being pricked or scratched, sense of vibration, some may feel pressure or pain
- Post-treatment physical sensation and reaction
 - All clients should be advised that physical sensations and effects post-treatment vary for each individual client and depend on size of area treated, the techniques performed and individual skin/scalp characteristics, generally the treated area may feel tight or sore and implanted colour usually appears darker initially and then lighter as it heals, clients can experience 30-70% loss of colour
- Likely and possible contra-actions – what they are, why they appear and how long they may last; for example, erythema, blistering, stinging, excessive discomfort, pain, oedema, weeping, crusting, scabbing, flaking, reactions leading to bruising, hives, anaphylaxis, nausea, dizziness, fainting, hypertrophic or keloid scarring, lack of retention, colour fade, migration of pigment, how to manage complications of adverse reactions at home and when to refer to a medical practitioner
- Which activities to avoid that might cause contra-actions, extremes of temperature and heat, contact with water, activities which cause sweating, avoid exposure to UV
- Post-treatment care advice – wash hands before touching the area, keep area clean and protected with a clean, soft head covering, when necessary, apply healing balm/cream regularly (avoid aloe vera throughout the healing process as this can cause migration), and use a broad-spectrum SPF, do not scratch or pick the area

Timing of treatments

Taught content

- Identify and understand commercial timings for treatments. Recognise variations in timings depending on type of and size of area to be treated, client sensitivity/pain tolerance or threshold including scalp and skin health/type and condition to be treated plus other contributory factors
- Identify and understand post treatment expectations and associated time frames including number of treatments required to achieve planned and desired final outcome and appropriate intervals between treatments
- Identify and understand the need for on-going maintenance treatments and associated expected timeframes to ensure the results are maintained

Pain threshold, sensitivity variations and testing

Taught content

- Understanding inflammatory response of the skin/scalp 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 treatment and the healing process
- Understanding how to recognise skin/scalp health/types and areas of the face/scalp 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+) plus a more intense physical sensation when the treatment is applied
- Understand that treatments for female clients may be more uncomfortable during menstruation or ovulation
- Understand why fine tactile sensation may be compromised after hair transplant procedures or over scarring and how this affects the ability to perform scalp micropigmentation treatments
- Skin test performed during initial consultation at least 48 hours before treatment after client has agreed and signed informed consent before the cooling off period. Client must sign patch/scratch test form if separate from main consultation form
- Testing for potential allergic reaction or adverse response (inflammatory response) to scalp micropigmentation products. Clients with history of allergies or sensitivities have an increased risk of allergic reaction. Skin test site is located discreetly near the treatment area – behind the ear or inner side of forearm. Skin is prepared as usual for scalp micropigmentation treatment. Desired product(s) (pigment/dilutant/topical anaesthetic/numbing agent) to be applied as appropriate, with results evaluated and checked following supplier/manufacturer instructions. Recording of results to include date, location of test, products used and batch numbers, description of results including any visible or sensory response
- Any change of scalp micropigmentation product or strength to be tested prior to use
- Follow supplier/manufacturer instructions for recommended time between skin patch/scratch test and scalp micropigmentation application for each skin type and condition as they may vary
- Tactile and thermal tests to record if the client is able to correctly identify different sensations in the treatment area, a full description of responses should be recorded. Scalp micropigmentation to be performed when the client is able to identify correctly different tactile/thermal sensations

Pre-treatment preparatory scalp, hair and skin care programmes

Taught content

- Any pre-treatment advice and preparatory topical skin/scalp/hair care programmes that could be given to clients to improve scalp/skin health and condition, minimise side effects and optimize results of scalp micropigmentation treatment and why they must be relevant to skin type Glogau photo damage and Fitzpatrick skin type and skin/scalp/hair condition
- Benefits – improved cell health and function, increased desquamation, skin of scalp will heal at a faster rate, skin will be more tolerant of injury
- Topical scalp/hair/skin care products, for example, vitamins, anti-oxidants, UV protection, AHA and BHA skin/hair care programmes prior to treatment, depending on strength to cease 2-4 weeks prior, 6 months for Roaccutane
- Positive effects of scalp micropigmentation on a healthy scalp and skin in comparison to a compromised scalp or skin condition

Types and purpose of scalp micropigmentation equipment, products and techniques

Taught content

- Differentiate between a hand tool and micropigmentation machine, advantages and disadvantages
- Typical pre-treatment products used, for example cleansers, toners and preparatory skin products topical anaesthetic/numbing agent, to remove all make-up, oils and debris ensuring a clean surface in the treatment area, to reduce the risk of infection and numb the area
- Needles/cartridges and configurations, for example flat, magnum, round, single point, sloped, micro, nano, shaders and liners, their effects and various techniques for effective implantation and distribution of pigment
- Pigments, for example organic, inorganic advantages and disadvantages, pigment dilutant/boosters effects and uses
- Implantation techniques including pointillism, pendulum, shading, blending, feathering, hair stroke, obovoid, cross-hatching, sweep, stroke and their effects and appropriateness in scalp micropigmentation
- Treatment techniques, for example three-way stretch, settings, needle depth, speed, angle, pressure, depth, pigment dipping, wrist support, posture and positioning, treatment passes
- Effects including scalp camouflage, simulated hair, simulated shaved hair, scar relaxation

Selection and preparation of equipment and products for treatment

Taught content

- Reasons for, and appropriate selection, preparation and use of PPE – disposable non-latex gloves, apron/gown, hair covering
- Understanding how to set up and work within a clinically clean field, 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
- Why and how it is necessary to select and prepare all appropriate products and equipment before the start of each treatment checking appropriate products and equipment are being used for treatment, for example automated device, disposable barrier film/sleeve, needles/cartridges (single use) of various configurations, pigments, pigment pots/cups, template drawing equipment – pencils, sharpener, measuring devices/callipers, hairline stencils, mirror, swabs and disposables and appropriate waste bag, biohazard waste sharps box for disposal
- Understand why it is necessary to identify the client's hair colour, skin tone and undertones to select the correct pigments for the client's hair and skin and why and how it is necessary to mix or dilute pigments depending on the desired outcome or effects being created
- Understand why it is necessary to draw and agree a hairline template and the selection of colour(s)/pigment(s) and record this with photographic evidence and with both the client's and therapist's signatures

Benefits and use of inhibitors

Taught content

- Post inflammatory pigmentation common in Fitzpatrick 4 (and above) types – use tyrosinase inhibitors
- Understand melanogenesis and the enzyme tyrosinase, where it is located and its function
- Understand how tyrosinase inhibitors can reduce the production of melanin and how this can protect against post inflammatory hyperpigmentation
- Knowledge of tyrosinase inhibitors and melanin suppressors, for example, azelaic acid, bearberry, liquorice root extract, ascorbic acid, kojic acid, niacinamide, L-arbutin, hydroquinone

Method of application

Taught content

- Reasons for and how to work systematically and methodically, avoiding excess treatment overlap across the areas to be treated
- Reasons for working with the agreed template where appropriate
- Plan treatment start and end point
- Reason for magnifying and illuminating the treatment area
- Reasons for adequate scalp/skin support and manipulation of the treatment area to avoid skin distension, tearing, bruising, and ensure effective pigment implantation and even distribution
- Reasons for adapting the treatment to suit the client's physical and psychological needs
- Reasons for employing different techniques to create desired effects and the correct treatment techniques to achieve the required depth of colour and pigment distribution
- Problems associated with uneven treatments, overlapping and post procedural marking to the skin (tracking)

Adaptations to treatment

Taught content

- How to adapt the treatment to take into account pre-existing conditions/lesions, for example pustular lesions, skin tags, moles and other areas to avoid
- Why it is necessary to adapt the settings, speed, angle, pressure, depth, duration and the number of passes or techniques for different areas of the scalp/skin and client sensitivity or comfort and desired outcome
- Different skin (epidermal and dermal) depths and sensitivity, different treatment objectives and effects, treating different skin characteristics of varying structure and depth, different healing capacity, different skin types and classifications, different hair textures, diameters and growth patterns
- Treatment progression and adaptations to future treatments to achieve the desired outcome with associated timeframes and any beneficial additional/complementary treatments

Uses, limitations, benefits and effects of scalp micropigmentation

Taught content

- Enhances the appearance of the scalp/skin/hair density by depositing pigment into the upper dermal layers to camouflage areas of hair or pigmentation loss or to rectify or simulate hair/hair follicles/shaved hair on the scalp or face, create, define or balance the hairline, and can also be used to improve skin/scalp texture or appearance of scars and remodel scar tissue after surgery or trauma due to the stimulated release of growth factors as part of the wound healing mechanism due to scalp micropigmentation
- Understand stages of wound healing
 - Wound, haemostasis
 - Inflammation
 - Proliferation
 - Remodelling – maturation

- Treatment effects will fade and need regular maintenance to ensure results are maintained
- Visible effects are not limited to and can include;
 - Enhancement of natural follicles which can be used on partially or fully bald scalps
 - Balance/correction of existing hairline
 - Receding hairline becomes less obvious and more defined
 - Diminish the appearance of sparse or thinning hair
 - Enhance the visual appearance of hair transplant surgery, improvement in appearance of scars from previous hair transplant surgery
 - Creation/simulation of natural shaved hair at side/front/rear hairline/beard/facial hair
 - Camouflage and even out the appearance of hair loss/alopecia
 - Reduction in the appearance of hair loss
 - Camouflage loss of hair/pigmentation of the scalp from scars/burns/birthmarks

Contra-actions associated with the treatment

Taught content

- Effects and risks of using excess pressure, speed, depth uneven implantation techniques and pigmentation distribution or non-compliance to safety and hygiene practices on the final result
- Specific risks for scalp micro-pigmentation, for example lack of retention, migration of pigment, colour fade/change
- How to deal with contra-actions, what advice to give clients and when to refer to a medical practitioner
 - Bruising, irritation, localised allergic reaction, histamine reaction, urticaria, signs of infection, nausea, dizziness, fainting, hyperaemia, stinging, blistering, pain, excessive discomfort, migration of pigment, hypertrophic or keloid scarring

SPF and UVA specific sun protector

Taught content

- Why it is necessary to use a minimum of a UVB SPF 30 and UVA specific sun protector post treatment
- Knowledge of SPF rating system and why high % of block is required to protect the skin after scalp micropigmentation
 - 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 physical and chemical sun cream

Preventing infection and promoting healing

Taught content

- Understand the products necessary to prevent infection and promote healing, how they should be used before and after scalp micropigmentation treatments. Saline solution applied on clean cotton pad or gauze and the use of sterile dressing packs to provide a clinically clean field as necessary
- To promote healing including calming products/healing balm/cream post treatment, anti-inflammatory effects, lifestyle factors and changes that may be required to promote healing, and activities which might inhibit or compromise healing

Treatment progression and additional/complementary treatments recommendations

Taught content

- Advice regarding post treatment expectations and associated time frames with regard to healing and how the healing process affects pigment
- Recommendations for appropriate intervals between treatment depending on condition and area treated and treatment objectives, changes to needle depth, needle/cartridge size/configuration and techniques as treatments progress toward the final desired outcome, home care
- Complementary products to be used in conjunction, for example topical healing products and SPF
- Knowledge of progressive remedial treatments and products as appropriate for the scalp and skin health/condition/type to promote healing and give protection
- Fitzpatrick skin classification and Glogau photo damage and knowledge of how the scalp and skin benefits and responds to scalp micropigmentation. Knowledge of maintenance treatment timings and use of skin/hair care programmes at home to prolong treatment effects
- Lifestyle factors and changes that may be required to improve effectiveness of treatment – hair or skin care routine, healthy eating, exercise and sun protection, head covering /headwear, hair styling

LO3 Demonstrate how to consult, plan and prepare for scalp micropigmentation treatment

Use consultation techniques to determine the client's treatment plan

Taught content

- Consult with client, implementing a range of appropriate communications skills to ensure a realistic and achievable treatment plan is agreed
- All information from the consultation to be written on consultation forms in front of the client at the beginning of every treatment to inform the final treatment plan
- Obtain the client's agreement and signed informed consent prior to all treatments
- The practitioner and client must understand the implications of informed client consent and 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 any recent herpes simplex, certain medications including anti-coagulants and others that may impact on the treatment
 - Lifestyle information – smoking, diet, hobbies, current skin/hair care routine that may need to be considered
- Scalp and skin sensitivity and healing history – keloid formation, scars, birthmarks, trauma
- Indications for the aims of treatment – defining natural hairline, creating hairline, correcting natural hairline, improving and balancing hairline, introducing skin colour, scalp camouflage, simulated follicle, scalp scar relaxation/camouflage
- Explain the treatment process in line with supplier/manufacturer recommendations, the physical sensation of the treatment and the appearance of the scalp/skin post-treatment. Discuss associated time frames and changes associated with healing including the effect of healing on the pigment and the likely changes the client will see or experience. Explain any downtime requirements and activities to avoid post treatment
- Explain potential risks/side effects/adverse effects, reactions and contra-action – erythema, oedema, weeping, scabbing, scarring, localised allergic reaction, histamine reaction, urticaria, signs of infection, hypertrophic and atrophic scarring, increased photosensitivity
- 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 scalp, hair and skin assessment, any hairline template drawn, pigment/dilutant selection and agreement to aftercare adherence decline treatment where applicable

Establish the condition of the skin, scalp, hair and hair loss

Taught content

- Where physical examination of the treatment site is required gain permission to look/touch respecting modesty at all times
- Use Woods lamp, magnifying lamp/glasses or skin diagnostic equipment, scalp scanner/ diagnostic equipment, dermascope, densitometer, and perform a visual assessment of the condition and health of the scalp and skin, results of blood tests/hormone levels, pull test, biopsy of scalp, photographs of client before hair loss, colour swatches/wheel for skin tone and undertone clarification, documenting all findings
- Skin characteristics – Fitzpatrick scale 1-6, Glogau photo damage, level of sensitivity, thickness of skin, epidermal thickness, healing capacity
- 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
- Scalp condition – Itching, pruritus, tenderness, tinea capitis, pediculosis capitis, seborrheic eczema/cradle cap, psoriasis, scleroderma, graft-versus-host disease, leishmaniasis, temporal arteritis, trauma, alopecia
- Hair loss characteristics – position of original hairline, shape of hairline, uneven hairline, high hairline, widow's peak, triangular hairline, bell shaped, receding or M-shaped hairline, classification scales – Hamilton-Norwood scale, Ludwig scale, Savin scale, Sinclair scale
- Existing or remaining hair, hair colour(s), hair thickness, follicle size
- Identify localised 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

Treatment procedure to include:

- How to position client and self in a comfortable manner with head supported, to access fully the treatment area
- The use of topical anaesthetic/numbing agents, how they will be applied and covered in barrier film to take effect for the required time (20-45 minutes depending on the product used) whilst all consultation details are confirmed and checked with the client, and final selection and preparations are made
- How scalp micropigmentation needle/cartridge sizes and configurations are selected to match treatment objectives
- How pigments are selected, mixed and diluted where appropriate, tested and agreed with the client to create the desired effects with batch numbers and ratios noted on the consultation form
- The various techniques to be used to create the desired effects
- The use of sterile dressing packs, saline and chlorhexidine solution to prepare a clinically clean field and why a sterile field is not possible nor required
- Why the practitioner will wear PPE – clean, disposable, non-latex gloves, apron/gown, hair covering
- How the area will be cleansed thoroughly with appropriate cleanser until all make-up, debris, oils and residue topical anaesthetic/numbing agent is removed and cotton pads appear clean
- When and why pre-treatment and post template photograph will be taken

- Why a hairline template might be used, how it is drawn, if applicable, and agreed with the client
- How the appropriate needle/cartridge is then taken from its sealed packet/cartridge in front of the client and the needle/cartridge condition checked
- How the needle/cartridge is loaded at this point and the needle depth is checked, test movement to ensure needle moves freely and how the speed may also be selected depending on the device being used and client/treatment needs
- How the treatment will be performed following supplier/manufacturer protocols
- Once set up inform the client where the treatment begins (depending on the size of the area being treated)
- Why the area to be treated is sectioned into small zones
- Why there may be a need for the area to be treated a number of times (depends on pigment retention and effects to be created/replicated), product/pigment/booster/further numbing agent may be applied at certain stages in the treatment. Clients will be required to give verbal feedback throughout the treatment using the 1-10 pain threshold scale, there are areas it may feel a little more sensitive
- How visual monitoring of the scalp, skin and treatment area is carried out at all times by the practitioner
- That after treatment, excess pigment will be removed, calming and nourishing products/healing balm/cream will be applied to the skin
- Why a broad-spectrum sun protection UVB and UVA may be applied to protect the skin, explain the use of physical sun protection
- How the skin might feel sore, similar to mild sunburn or tight. It will appear slightly red (variations depend on each individual and the size and location of area treated, techniques and needle depth used)
- What post-treatment physical sensation and expectations to expect and how they may differ to each individual. Why it is important to follow aftercare advice to avoid certain activities to minimise the risk of adverse or contra-actions and how to treat the area post treatment, how to manage reactions at home, if concerned contact practitioner in the first instance
- Inform client of waste disposal methods for contaminated equipment and treatment waste

Select a preparatory skin/hair care programme

Taught content

- Identify products to use 2-4 weeks prior to scalp micropigmentation treatments as part of a scalp/skin priming programme at home, appropriate to skin health to improve healing capacity and tolerance of scalp micropigmentation treatment
- Additional benefits could include:
 - Improve hydration, skin cell health and general texture/condition of the skin, retention of pigment
- As part of this skin programme the client should also be asked to wear SPF minimum 30 and UVA broad spectrum protection daily

Take pre-treatment photographs (visual media images)

Taught content

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

Carry out skin sensitivity tests

Taught content

- Carry out all sensitivity tests in accordance with suppliers/manufacturers recommendations, allergy/product tests at least 48 hours before treatment, thermal and tactile immediately prior to treatment in the treatment area

Select suitable equipment and products

Taught content

- Select suitable equipment and products according to treatment objectives. Choose the correct equipment and products suitable to treat the scalp condition and skin type identified to achieve the effects and desired outcome in the agreed treatment plan

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 verbal and written information regarding the healing process, aftereffects, homecare/additional routines required, post treatment expectations with associated time frames and agreed treatment plans with appropriate intervals for further maintenance required

LO4 Demonstrate how to provide scalp micropigmentation 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
- Clinically clean field to be prepared and appropriate PPE to be worn and given to the client as required
- Working in an environmentally sustainable manner
- Ensure ventilation, temperature, ambience, lighting, wall and floor coverings are fit for purpose
- Ensure all tools, products and equipment are available, in date and in safe working order
- Ensure risks and hazards have been checked
- Ensure treatment area is magnified and well lit

Prepare, position and protect the client and self

Taught content

- Ensure preparation complies with legal and organisational requirements. Prepare and protect client to avoid cross-infection. Protect client's eyes, face when appropriate, clothing and surrounding areas depending on the location and size of area of treatment
- Position and support the client comfortably throughout to ensure the position meet the needs of the treatment without causing them discomfort
- Clearly instruct the client and if needed use covered supports or pillows to ensure the treatment application is not compromised and does not cause the client any discomfort
- Ensure effective, ergonomic positioning of treatment chair/couch, trolley, stool, equipment 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

Maintain client's modesty and privacy at all times

Taught content

- Ensure the working environment is private and secure. Depending on area to be treated provide modesty towels/disposable tissue to protect clothing or areas not being treated and provide modesty so the client does not feel exposed and vulnerable

Ensure the use of clean equipment, products and materials

Taught content

- Ensure all surfaces are clean and hygienic, trolley is tidy with equipment and products set out ergonomically, all expiry dates checked and in date and sealed packaging for needles/cartridges is intact
- Ensure that sufficient PPE is available and fit for purpose
- Ensure the use of sterilisation, sterile dressing packs to prepare a clinically clean field and disinfectants for surfaces and equipment as required for treatment

Safe use of equipment, materials and products

Taught content

- Follow protocols for safe use including correct use of scalp micropigmentation systems, selection of needle/cartridge configuration, settings, speed, angle, pressure, depth and implantation techniques for different treatment effects and objectives. Keep tops on bottles, make sure all products are labelled clearly in line with COSHH, decant products into clean single use pots/pigment cups to ensure correct amount is used prior to treatment where indicated
- Ensure a clinical biohazard waste receptacle is ergonomically placed for use throughout the treatment as needed
- Use of PPE (disposable gloves non-latex) that fit the individual correctly so not to interfere with work, worn correctly each time, used and changed as appropriate throughout treatment and disposed in contaminated waste when changing and after use, a facial mask for practitioner, stored correctly, checked and maintained fit for purpose

Selection of equipment

Taught content

- Automated pen – handpiece is cleaned and protected with disposable sleeve/film. Open needles/cartridges from a new sealed, sterile package in front of the client
- Ensure selection of appropriate single use needle/cartridge of the correct size and configuration is new, sealed and prepared in line with health and safety guidelines for each client
- Check the condition, expiry date, batch numbers of needles/cartridges and that all sealed packaging is intact and record in the treatment details, discard any that are past their expiry date or have damaged packaging
- Load the needle/cartridge in accordance with suppliers'/manufacturers' instructions and check that once loaded the needle moves freely, adjust to the correct level and speed

Needle size and configuration selection

Taught content

- Select the needle/cartridge size and configuration for the scalp and skin condition and treatment objectives:
 - Creating hairline
 - Correcting hairline
 - Improving/balancing hairline
 - Introducing skin colour
 - Flat
 - Magnum
 - Round
 - Single point
 - Sloped
 - Micro
 - Nano Shaders/liners

- Match to treatment objectives scalp and skin health characteristics and hair type, thickness and follicle size:
 - Pointillism
 - Follicle/shaved hair simulation
 - Hair stroke (if required)
 - Scalp camouflage, shading/blending/feathering

Pigment selection

Taught content

- Select the pigments/dilutant suitable for the client's skin tone, undertones, condition and treatment objectives:
 - Organic
 - Inorganic
 - Dilutant
- Match to treatment objectives, hair and skin health characteristics, skin tone and undertones and hair colour(s), previous scalp micropigmentation, brow or facial hair
 - Skin colour
 - Warm/cool
 - Skin tone
 - Skin undertone
 - Hair colour(s)
 - Primary colours
 - Secondary colours
 - Tertiary colours
 - Colour correction
 - Opacity/translucence
- Mix, check and agree selection with client and note pigments, dilutants/boosters, ratios, batch numbers on the treatment plan

Prepare the skin

Taught content

- Apply topical anaesthetic/numbing agent to treatment area following supplier/manufacturer instructions/recommendations
- Ensure the client's scalp and skin is clean and prepared for scalp micropigmentation treatment. Cleanse professionally with an appropriate cleanser to ensure all make-up, oils, residual topical aesthetic/numbing agent and debris are removed thoroughly. Protect vulnerable areas of face as indicated
- Draw and agree hairline template, if applicable

Apply the scalp micropigmentation treatment working systematically

Taught content

- Apply anaesthetic/numbing agent prior to scalp micropigmentation as appropriate
- Follow recommended protocol using adequate skin support and manipulating the skin to assist with effective implantation techniques and even distribution of pigment and to avoid skin distension, tearing, bruising, excessive pressure or over treatment
- Divide area into small areas (zones), select starting point
- Work in a methodical and systematic manner checking client comfort and wellbeing throughout, taking breaks as necessary, to cover the area to be treated using the required treatment techniques
- Avoid uneven treatment, overlap or overworking the area
- Adjust and adapt the settings, speed, angle, pressure, duration and depth of treatment techniques to suit the client's scalp and skin characteristics, treatment objectives, including adaptation for skin type, scalp and skin condition and client comfort, demonstrate various treatment techniques to create desired effects and treatment objectives
- Continually discuss sensation and level of discomfort with client throughout treatment. Know when to stop/adapt or adjust the treatment as appropriate
- Ensure all aftercare is given verbally as well as written and encourage client to ask questions to clarify
- Ensure treatment is completed in a commercial time frame dependent on size of area and desired results and treatment objectives

Monitor the skin reaction and client response

Taught content

- Monitor the scalp and skin's reaction and client response and wellbeing (using 1-10 pain threshold scale) – degree of erythema, bleeding and pigment retention,
- Adapt the treatment to suit the client's physical and psychological needs
- Observe skin and client reaction and know when to discontinue treatment due to excessive discomfort, erythema, bleeding or lack of pigment retention

Apply post-treatment products

Taught content

- Apply a clean pad or swab to the scalp/skin after scalp micropigmentation to remove excess pigment/tissue fluids
- Follow supplier/manufacturer instructions for post-treatment products to calm and soothe the treatment area when appropriate
- Moisturisers/healing balm/cream, topical anti-inflammatories, anti-oxidants, broad spectrum sunscreen – physical SPF 30 minimum with UVA protection

Take post-treatment photographs (visual media images)

Taught content

- Follow protocols for taking clinical photographs (visual media images) to ensure clarity and consistency. Take all photographs (visual media images) after treatment in same position and where possible in the same light as before and after template (if applicable) photographs (visual media images), for all treatments performed. Position area to be treated so photographs (visual media images) are taken straight on and from both sides where applicable, zoom in on treatment area(s)
- Personal devices should not be used to take images of clients
- Confirm clients' consent for storage of clinical photographs (visual media images) and specific use of photographs (visual media images) for marketing and teaching purposes

Provide post care advice and homecare

Taught content

- Immediate skin response
 - Erythema, slight inflammation, mild to moderate discomfort, may feel tight or hot sensation. Give client advice on post-treatment and post-treatment products, method of application and frequency of use
- Post-treatment physical sensation and visual changes and expectations and associated time frames
 - All physical sensations and effects post-treatment are individual and may differ from client to client and will depend on size of area treated, techniques performed and individual scalp/skin characteristics, generally treated area may feel tight or sore and implanted colour usually appears darker initially and then lighter as it heals, clients can experience 30-70% loss of colour
 - Day 1 – erythema and redness like moderate sunburn with minor inflammation, some pin-point bleeding or some weeping may occur, cleanse gently with cool water and mild antibacterial cleanser, apply healing balm/cream at regular intervals, wear a clean, soft head covering to protect if needed, uncover at regular intervals
 - Day 2-4 – erythema and redness starts to subside, scabs start to form, continue to cleanse gently and apply healing balm/cream at regular intervals, wear a clean, soft head covering to protect if needed, uncover at regular intervals
 - Day 5-7 – scalp/skin may feel itchy, dry and tight, mild flaking can take place, leave scabs to fall off, pigment may appear altered, continue to cleanse and apply healing balm/cream at regular intervals
 - 7 days to 2 weeks follow up appointment
 - Advise client how to cope with skin changes and provide a point of contact
- Post-treatment advice
 - Avoid washing the area for at least 7 days
 - Avoid AHAs, BHAs and Retinoids in all future treatments as these can fade the pigment
 - Wash hands before touching treated area

- To clean, or if the area weeps bathe, with clean warm water and mild antibacterial cleanser
- Apply healing balm/cream 2-4 times a day with a clean cotton bud/pad to each area
- Do not scratch, rub or pick the area or pull off scabs which will fall off naturally, if concerned contact therapist in the first instance
- Avoid pets and unclean surfaces to reduce risk of infection
- Avoid immediate vigorous exercise and other spa/beauty treatments
- Avoid sun exposure, heat treatments, polluted atmospheres and topical preparations (except those recommended by the practitioner), wear a clean, soft head covering if needed to protect the area
- Provide advice on suitable post-treatment products
- Provide advice for ongoing/further scalp micropigmentation treatments and treatments which may be used in conjunction
- Advise client on future treatment and maintenance recommendations in respect of treatment frequency
- Occasional side effects and how to avoid/manage them and when to refer to a medical practitioner
 - If concerned consult the practitioner in the first instance

Dispose of waste materials to meet legal requirements

Taught content

- Dispose of hazardous waste from the treatment into biohazard clinical waste bags and general waste bags in line with local council regulations and dispose of following COSHH procedures
- Ensure compliance with protocols to avoid cross-infection when handling post-treatment equipment and dispose of needles/cartridges into sharps box handling safely and correctly
- For automated devices, turn off and unplug where applicable, remove protective film/covers and dispose of in clinical biohazard waste
- Clean handpiece of device following supplier/manufacturer instructions
- Dispose of any swabs/cotton pads or waste from treatment application with all PPE into clinical biohazard waste bag

Update client records

Taught content

- Accurate completion of treatment details, recording scalp micropigmentation equipment used, needle/cartridge sizes, configurations and batch numbers, pigment selection, dilutant and mixing ratios (where appropriate) with batch numbers, machine settings, speed, angle, pressure and depth of treatment techniques, skin preparation including cleansing and application of topical anaesthetic or numbing agent, implantation techniques used and duration of treatment, client response to sensation, pigment retention and skin response, observation of area and surrounding skin during and after treatment
- Signature from client to be obtained accepting treatment results and treatment response and agreeing to follow post care/post treatment advice
- Photographs of treated area
- Practitioner signature to take responsibility for treatment and records completed

Provide and manage post-treatment communications and outcomes

Taught content

- Communicate with the client regarding post-treatment care and concerns
- Inform the 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 legislation and organisation guidelines

Assessment requirements

Learners must complete all assessment requirements related to this unit:

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

1. Case studies

Learners must produce a treatment portfolio, which is required to be completed under the supervision of a lecturer. All case studies must be completed and marked prior to the learner completing the practical and theoretical examinations.

Learners must complete case study practice on a minimum of **four separate clients**. Each case study needs to include a full medical history of the client, advanced scalp, skin and hair assessment, before, during and after pictures (including any template drawn) and a full description of the conditions/characteristics to be treated.

A detailed description of the equipment, settings, speed, angle, pressure, depth and implantation techniques used, needle/cartridge sizes, configurations, pigments/dilutants and relevant batch numbers, boosters, any topical anaesthetics/numbing agents used, the duration of the treatment, full aftercare advice and healing products recommended, and home care advice must also be provided.

Each case study must also include an evaluation of the treatment and its outcomes including recommendations of ongoing completion/maintenance treatments needed and associated timeframes.

Range to be included in clinical applications:

- Met the needs of a variety of clients on **four separate occasions**:
 - New
 - Existing
- Carried out **all** consultation techniques:
 - Questioning – verbal
 - Listening – non-verbal
 - Visual – non-verbal
 - Manual
 - Written
 - Pre, during and post-treatment photographs (visual media) taken
- Carried out scalp/skin sensitivity test
- Carried out advanced scalp and skin assessment

- Met **all** treatment objectives:
 - Defining natural hairline
 - Creating hairline
 - Improving appearance of natural hairline
 - Balancing natural hairline
 - Introducing skin colouring
 - Simulation of follicles/shaved hair

- Effects:
 - Hair follicle simulation
 - Scalp camouflage
 - Hair strokes

- Considered **all** factors of skin characteristics:
 - Fitzpatrick scale (1-6)
 - Glogau photo-damage
 - Level of sensitivity
 - Thickness of skin
 - Epidermal thickness
 - Healing capacity

- Considered **all** factors of hair growth characteristics, hair loss and possible causes:
 - Hereditary factors
 - Medical factors – diseases, disorders, medication, previous procedures or trauma
 - Existing hair growth pattern/hairline
 - Previous hair growth pattern/hairline
 - Existing hair density
 - Male pattern baldness
 - Female pattern baldness
 - Hair loss classifications – Hamilton-Norwood scale, Ludwig scale, Savin scale, Sinclair scale
 - Epidermal thickness
 - Existing hair health and characteristics

- Taken **all** courses of necessary action:
 - Explaining why treatment cannot be carried out
 - Encouraging the client to seek medical advice if applicable
 - Modification of treatment

- Types of equipment:
 - Hand tool
 - Machine

- Types of needles/cartridges:
 - Flat
 - Magnum
 - Round
 - Single point
 - Sloped
 - Micro
 - Nano

- Pigments:
 - Organic
 - Inorganic
 - Pigment dilutant
 - Boosters

- Given **all** advice and recommendations:
 - Suitable post care products and their uses
 - Pre-treatment haircare/skincare products and lifestyle recommendations
 - Avoidance of activities which may cause contra-actions
 - Modifications to lifestyle patterns
 - Recovery and skin healing process including the effects on pigment over time
 - Post-treatment contra-actions and how to deal with them
 - Frequency and benefits of future maintenance treatments and associated timeframes
 - Treatments which could be given in conjunction with/after scalp micropigmentation treatment
 - Present and future products and treatments recommended
 - Use of SPF products
 - Issuing of verbal and written post-care advice
 - Recording 'before' and 'after' photographs (visual media)

2. Graded practical assessment

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 LO1 and LO2. 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 the environmental and safety considerations when providing scalp pigmentation treatments | 1.1 Promoting environmental and sustainable working practices |
| | 1.2 Licensing regulations for aesthetic practitioners and premises |
| | 1.3 Insurance guidelines |
| | 1.4 Safety of product and equipment sourcing |
| | 1.5 Suppliers' and manufacturers' instructions for safe use |
| | 1.6 Working in line with organisational procedures |
| | 1.7 Hygiene procedures |
| | 1.8 Contra-indications that would prevent or restrict treatment |
| | 1.9 Contra-indications requiring medical referral and referral processes |
| | 1.10 When to consult with other aesthetic/medical professionals |
| | 1.11 Treatment of minors |
| | 1.12 Hazards and risks |

| Learning Outcome | Assessment Criteria |
|--|---|
| LO2 Comprehend protocols and guidelines when providing scalp micro-pigmentation treatments | 2.1 Factors to consider and treatment planning |
| | 2.2 Assessing scalp, hair, hair loss and skin characteristics |
| | 2.3 Pre and post treatment advice to provide to the client |
| | 2.4 Timing of treatments |
| | 2.5 Pain threshold, sensitivity variations and testing |
| | 2.6 Pre-treatment preparatory scalp, hair and skin programmes |
| | 2.7 Types and purpose of scalp micropigmentation equipment, products and techniques |
| | 2.8 Selection and preparation of equipment and products for treatment |
| | 2.9 Benefits and use of inhibitors |
| | 2.10 Method of application |
| | 2.11 Adaptations to treatment |
| | 2.12 Uses, limitations, benefits and effects of scalp micropigmentation |
| | 2.13 Contra-actions associated with treatment |
| | 2.14 SPF and UVA specific sun protector |
| | 2.15 Preventing infection and promoting healing |
| | 2.16 Treatment progression and additional/complementary treatment recommendations |

3. Practical examination

The content of LO3 and LO4 are assessed by a practical examination. The practical examination will be conducted by an external examiner

In preparation for the practical examination, centres are advised to ensure learners have carried out a series of formatively assessed case studies, comprising of complete practical treatments, in accordance with the practical assessment criteria for the qualification.

It is essential centres use the Practical Assessment Criteria document in order to prepare learners for the Practical Examination. This can be found on the VTCT Skills websites.

The Practical Examination must take place under controlled conditions, in a realistic working environment on a real client and in a commercially acceptable time frame for the practical treatment being examined.

Document History

| Version | Issue Date | Changes | Role |
|---------|------------|-----------------|---------------------------|
| P1 | 01/08/2025 | First published | Development Administrator |
| | | | |