



Qualification Specification

ProQual Level 4 Certificate in Cryolipolysis

ProQual Level 4 Certificate in Cryolipolysis



This qualification is part of ProQual's broad offer of qualifications in the Hair and Beauty Sector.

To find out more about other qualifications in this, or any other sector, or for our latest fees; check our Fees Schedule via the QR code below





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Introduction

The ProQual Level 4 Certificate in Cryolipolysis (often known as fat freezing) provides a nationally recognised qualification for those working in the aesthetics industry, who wish to develop and demonstrate their competence at non-surgical fat reduction treatments.

The aims of these qualifications are:

- To develop the core knowledge underpinning cryolipolysis (fat freezing) treatments
- To develop and demonstrate competence in cryolipolysis (fat freezing) treatments.
- To provide a progression route within the beauty and aesthetics industry, for those interested in advanced fat reduction treatments.

The awarding body for this qualification is ProQual AB. This qualification has been approved for delivery in England and Northern Ireland. The regulatory body for this qualification is Ofqual, and this qualification has been accredited onto the Regulated Qualification Framework (RQF) and has been published in Ofqual's Register of Qualifications.



Qualification Profile

Qualification Title:	ProQual Level 4 Certificate in Cryolipolysis
Qualification Number:	610/5365/X
Level:	Level 4
Total Qualification Time	310 Hours
(TQT):	31 Credits
Guided Learning Hours (GLH):	230 Hours
	Pass / Fail
Assessment:	Internally assessed and verified by centre staff
	External quality assured by ProQual Verifiers
Qualification Start Date:	01/03/2025
Qualification Review Date:	01/03/2028



Learner Profile

Candidates who wish to complete this qualification **must** have previously completed **ProQual Level 3 Certificate in Anatomy, Physiology & Pathology**. Centres should carry out their own initial assessment of a candidate's initial knowledge and skills.

Candidates for this qualification should either:

 Be employed in a role where they will have the opportunity to carry out a number of fat freezing (cryolipolysis) treatments on a range of clients.

OR

 Be enrolled with a training provider, which will enable them to carry out a number of fat freezing (cryolipolysis) treatments on a range of simulated or real clients.

Candidates who complete this qualification, and who wish to further develop their knowledge and skills in the beauty sector, could progress to study additional qualifications from ProQual's hair and beauty suite.

These include additional Level 4/5 Certificates in various beauty treatments, such as:

- Level 4 Certificate in Non-Surgical Body Contouring.
- Level 4 Certificate in Laser and Intense Pulsed Light (IPL) Treatments.
- Level 4 Certificate in Micropigmentation.
- Level 5 Certificate in Laser Tattoo Removal.
- Level 5 or 6 Diploma in Aesthetic Practice.
- Level 7 Diploma in Aesthetic Practice.



Qualification Structures

This qualification consists of **four** mandatory units. Candidates must complete all mandatory units to be awarded the qualification.

Unit Number	Unit Title	Level	TQT	GLH			
Manda	Mandatory Units – Candidates must complete all units i						
J/651/2395	Health and Safety in a Salon Environment	2	10	10			
L/651/2397	Infection Control and Prevention for Cosmetic, Aesthetic and Needle Related Treatments	2	25	20			
H/651/2401	Providing Initial Consultation with Client	4	125	100			
T/651/4983	Principles and Practice of Cryolipolysis (Fat Freezing) Treatments	4	150	100			



Centre Requirements

Centres must be approved to deliver this qualification. If your centre is not approved to deliver this qualification, please complete and submit the ProQual Additional Qualification Approval Form.

Materials produced by centres to support candidates should:

- Enable them to track their achievements as they progress through the learning outcomes and assessment criteria.
- Provide information on where ProQual's policies and procedures can be viewed.
- Provide a means of enabling Internal and External Quality Assurance staff to authenticate evidence.

Centres must have appropriate resources to allow candidates to complete the practical activities described in this specification.



Certification

Candidates who achieve the requirements for this qualification will be awarded:

- A certificate listing all units achieved, and
- A certificate giving the full qualification title:

ProQual Level 4 Certificate in Cryolipolysis

Claiming certificates

Centres may claim certificates for candidates who have been registered with ProQual and who have successfully achieved the qualification. All certificates will be issued to the centre for successful candidates.

Unit certificates

If a candidate does not achieve all of the units required for a qualification, the centre may claim a unit certificate for the candidate which will list all of the units achieved.

Replacement certificates

If a replacement certificate is required a request must be made to ProQual in writing. Replacement certificates are labelled as such and are only provided when the claim has been authenticated. Refer to the Fee Schedule for details of charges for replacement.



Assessment Requirements

Each candidate is required to produce a portfolio of evidence which demonstrates their achievement of all of the learning outcomes and assessment criteria for each unit.

Evidence can include:

- Observation report by assessor.
- Assignments/projects/reports.
- Professional discussion.
- Witness testimony.
- Candidate product.
- Worksheets.
- Record of oral and written questioning.
- Recognition of Prior Learning.

Candidates must demonstrate the level of competence described in the units. Assessment is the process of measuring a candidate's skill, knowledge and understanding against the standards set in the qualification.

Centre staff assessing this qualification must be occupationally competent and qualified to make assessment decisions. Assessors who are suitably qualified may hold a qualification such as, but not limited to:

- ProQual Level 3 Certificate in Teaching, Training and Assessment.
- ProQual Level 3 Award in Education and Training.
- ProQual Level 3 Award in Assessing Competence in the Work Environment. (Suitable for assessment taking place in a working salon only.)
- ProQual Level 3 Award in Assessing Vocational Achievement.

 (Suitable for assessment taking place in a simulated training environment only.)

Candidate portfolios must be internally verified by centre staff who are occupationally knowledgeable and qualified to make quality assurance decisions. Internal verifiers who are suitably qualified may hold a qualification such as:

- ProQual Level 4 Award in the Internal QA of Assessment Processes and Practice.
- ProQual Level 4 Certificate in Leading the Internal QA of Assessment Processes and Practice.

Occupationally competent means capable of carrying out the full requirements contained within a unit. **Occupationally knowledgeable** means possessing relevant knowledge and understanding.



Enquiries, Appeals and Adjustments

Adjustments to standard assessment arrangements are made on the individual needs of candidates. ProQual's Reasonable Adjustments Policy and Special Consideration Policy sets out the steps to follow when implementing reasonable adjustments and special considerations and the service that ProQual provides for some of these arrangements.

Centres should contact ProQual for further information or queries about the contents of the policy.

All enquiries relating to assessment or other decisions should be dealt with by centres, with reference to ProQual's Enquiries and Appeals Procedures.



Units – Learning Aims and Assessment Criteria

Title:				d Safety onment		Level:	2	
Unit N	umber:	J/651/239 <i>5</i>	5	ι Q τ:	10	GLH:	10	
				sment Criter arner can:	ia			
1	Prepare salon areas for treatment.		1.1	Identify c environm		nazards and ri	isks in a salon	
			1.2		ers carryi	-	uirements for ty treatments,	
			The Do (RI)Mo ReCo	e Reportir Ingerous DDOR). Inual Har gulations Introl of Si	Occurrences	Diseases and Regulations tions azardous to		
				1.3			ean, disinfectools and equi	
			1.4	Explain th and disinf		nce between	sterilisation	
			1.5	procedur	es and are tools and	portant to foll ny given instru d equipment	uctions when	
			1.6	condition Lig He Ve		red environm ven treatmen mfort.		



1	I Continued	1.7	Explain why it is important that the above environmental conditions are provided.
		1.8	Explain why it is important to maintain personal hygiene, protection and appearance according to accepted industry and organisational standards.
		1.9	Explain the reasons and importance of keeping records of treatments.
2	Maintain salon treatment areas.	2.1	Explain how to safely dispose of waste materials and products from beauty treatments.
		2.2	Explain the requirements for re-stocking products and other items.
		2.3	Describe own responsibilities in relation to the storage of: • Equipment. • Products. • Client records.
		2.4	Describe how the work area should be left after a treatment.
		2.5	Explain why it is important to leave the work area in the condition described above.



Title:	Preve Aesth	tion Control and ention for Cosmetic, netic and Needle ed Treatments							
Unit Number:	L/651/23	97 T	QT:	25	GLH:	20			
Learning Outcom The learner will be a			ment Criter Irner can:	ria					
1 Understand non- infectious and infectious hazards that are associated with cosmetic, aesthetic and needle treatments.		1.1	BaFur	cteria.	ture and key	features of:			
		1.2	Describe the ideal conditions for the growth of micro-organisms.						
			Define the term "pathogen".						
			• Ba • Fur	cteria.	s caused by:				
		1.5	Define the	e term "parc	nce between an an ectoparasite. mon ectoparasites that				
		1.7	Identify th colonise h						
		1.8	Explain th colonisati		between inf	ection and			
		1.9	• Loc	what is mea calised infec temic infect	tion.				



1	Continued	1.10	Describe what is meant by:		
ľ	Commoed	1.10	 Direct transmission. Indirect transmission. Vector transmission. 		
		1.11	Describe how, within the salon environment, an infective agent could:		
			Enter the body.Be transmitted from person to person.		
		1.12	Identify common non-infectious hazards that might arise as part of cosmetic, aesthetic or needle treatments.		
		1.13	Explain how an injury to the skin can be a risk to an individual.		
		1.14	Identify treatments within the salon that would require the use of infection control procedures.		
2	Understand how to control non-infectious and infectious risk.	2.1	Explain the roles and responsibilities of the employer and employee in the prevention and control of infection.		
		2.2	Explain how the skin acts as a defence against infection.		
		2.3	Describe the procedures that would be followed, in relation to infection prevention and control, for:		
			 Consultation. Aftercare. Hand hygiene. Environment management. Equipment management. Cleaning, disinfecting and sterilisation. Personal protective equipment. 		
			 Management of body fluids. Needle stick injuries. Waste disposal and collection. Management of occupational exposure. 		



Additional Assessment Information

This unit is **knowledge based**. This means that evidence is expected to take the form of candidate's written work and/or records of appropriate professional discussions.

Centres may use the appropriate ProQual Candidate Workbook, or their own, centre devised, assignments.

This unit is a **common unit**. Centres should be aware that candidates may have completed this unit as part of another ProQual Hair and Beauty qualification and may be eligible for recognition of prior learning.



Title:			viding Initial nsultation with Client			Level:	4	
Unit N	umber:	H/651/24	401 T	QT:	125	GLH:	100	
Learning Outcomes The learner will be able to:			Assessment Criteria The learner can:					
1 Understand the client consultation process.		1.1	competer and safe	nt profess working p efer to otl	ionals to supp practices, inclu her non-healt	uding how and		
			1.2	practice of	and work ents, wher	ust comply wi within the leg n undertaking	islative	
				1.3	documen developm • Up- • Pol • Pro	ting cont nent inclu -to-date i icies. cedures.	inuous profess	aging in, and sional
			1.4	· ·	raindicat	why medica e the non-surç	l conditions gical cosmetic	
			1.5		ents for ob	ve and insura otaining medi		
			1.6	the client	in a profe		nunicating with er and within cies.	



1 Con	tinued	1.7	 Explain why you must develop and agree a non-surgical cosmetic procedure plan including: Declared current medical status. Procedure history. Relative and absolute contraindications. Skin classification, condition and sensitivity. Skin healing capacity. Client's expectations. The client's physical and psychological suitability for the non-surgical cosmetic procedure.
		1.8	Discuss the relationship and impact between the following needs: Social. Physical. Psychological. Physiological. Social influences. The media. Trends.
		1.9	Explain how your own continuous professional development can support the client to make an informed choice, including alternative treatment options.
	1.10	Explain how to manage the client's expectations, including the importance of explaining: • Procedure process. • Expected outcomes. • Associated risks.	
		1.11	Describe the benefits of using visual aids during consultation.



1	Continued	1.12	Describe the legislative, insurance and organisational requirements for:
			 Gaining signed, informed consent from the client for the non-surgical cosmetic procedure. Upholding the rights of the client and practitioner. Taking and storing of visual media of the clients treatment area. Completing and storing the clients non-surgical cosmetic procedure records.
		1.13	Explain why non-surgical cosmetic procedures are prohibited for minors, including the age at which a client is classed as a minor and how this differs nationally.
		1.14	Explain the importance of explaining the physical sensation created by the procedure to the client, including how pain threshold and sensitivity varies from client to client, including the types of pain management and associated risks.
		1.15	State the reasons for providing and obtaining confirmation of receipt from the client for the verbal and written instructions and advice pre and post the non-surgical cosmetic procedure.
2	Understand the skin analysis process.	2.1	Explain the legal requirements and other relevant standards, insurance guidelines and organisational protocols when carrying out a skin analysis, including the importance of working within the scope of your practice.
		2.3	Explain the rationale for carrying out skin analysis, expected findings in different skin types and the role of evidence-based practice.



2	2 Continued	2.4	State the protocols for the correct and safe use of skin analysis technologies.
		2.5	Describe how to interpret outcomes from the skin analysis procedure, including how to evaluate the features and severity of presenting skin conditions in relation to known skin classifications.
		2.6	Describe how to review and monitor the following skin conditions including: Lax elasticity. Hyper and hypo pigmentation. Congested. Pustular. Fragile. Vascular. Sensitised. Sensitive. Dehydrated. Photo-sensitive. Photo-aged. Lacklustre.
		2.7	Explain the reasons for taking consensual visual media of the individuals treatment area and storing in accordance with the service, legislative, insurance and organisational requirements.
		2.8	Describe how the skin consultation, initial assessment, available evidence and the skin analysis outcomes collectively inform a bespoke treatment plan.
		2.9	Describe the importance of recognising suspicious skin irregularities and lesions, and referring to a relevant health professional where necessary.



2	Continued	2.10	Explain how to develop an agreed treatment plan with the individual based on the conclusion of the skin analysis, to include:
			The impact on the prognosis.The variety of options available for management.
		2.11	Describe how to complete accurate, secure and contemporaneous records of the information gathered and the outcomes of the skin analysis to meet legal requirements and organisational protocols, considering:
			The rights of the individual.Audit and accountability.
		2.12	Explain how and why the skins barrier function is impaired by aesthetic procedures, including:
			 The increased risk of photosensitivity and ways to protect the skin.
		2.13	Describe the adverse reactions associated with aesthetic procedures and how to respond, including:
			 Infection. Wounds. Oedema. Hypertrophic and atrophic scarring. Increased photosensitivity reaction.



3	Undertake a client consultation.	3.1	 Carry out a concise and comprehensive nonsurgical cosmetic consultation, taking account of: The individual's declared medical history and current medical status. The individual's procedure history. The individual's skin classification, condition, sensitivity and healing capacity of the treatment area. The individual's concerns, expectations and desired outcomes. The individual's physical and psychological suitability for the nonsurgical cosmetic procedure. Declared relative and absolute contraindications and restrictions.
		3.2	Recognise, respond and sign-post appropriately in response to any disclosed conditions in compliance with data legislation.
		3.3	Discuss the individual's objectives, concerns, expectations and desired outcomes to inform the non-surgical cosmetic procedure plan to include; • Alternative treatment options.
		3.4	Discuss the fee structures and explain how this can impact the individual's choice of non-surgical cosmetic procedures.
		3.5	Discuss and agree the skin priming programme or recommendations required prior to the non-surgical cosmetic procedure.
		3.6	Assess, discuss, agree and document the non- surgical cosmetic consultation and expected procedure outcomes and associated risks with the individual.
		3.7	Inform and provide information to the individual of their rights.



3	Continued		Take and store consensual visual media of the individual's treatment area in accordance with insurance requirements, organisational policies and procedures.
		3.9	Discuss the physical sensation which may occur during the non-surgical cosmetic procedure with the individual following the procedure protocol.
		3.10	Discuss the options for pain management.
		3.11	Develop the non-surgical cosmetic procedure plan.
			Provide and obtain confirmation of receipt of the verbal and written instruction and advice given to the individual pre- and postprocedure.
4			Follow legal requirements and other relevant standards, insurance guidelines, and organisational protocols when carrying out a skin analysis, including:
			 Maintaining your responsibilities for the health, safety, hygiene and welfare of the individual and yourself before, during and after the skin analysis.
			Ensure the individual's undertaking and obtain informed consent for the proposed investigative procedure.
			Identify and select the technology equipment to be used to carry out the skin analysis to determine, review and monitor the presenting skin condition, following organisational protocols.
			Record and securely store visual media for future reference and monitoring purposes in accordance with legislative, regulatory and indemnity requirements.



4	Continued	4.5	Evaluate the presenting skin type and skin condition against known skin classifications.
		4.6	Collate, record, analyse and evaluate the information gathered from the skin consultation, the skin analysis and available evidence base relating to the presenting skin condition to inform the treatment plan.
		4.7	Discuss, formulate and agree with the individual the outcome based on the conclusion of the skin analysis to include:
			 The best interests of the individual. Ethical responsibilities working within your scope of practice. Adapting communication styles to meet the individual's needs. Contraindications and potential comorbidities.
		4.8	Review and reflect on your performance to inform continuous professional development.



Additional Assessment Information

Learning Outcomes 1 and 2 are **knowledge based.** This means that evidence is expected to take the form of candidate's written work and/or records of appropriate professional discussions.

Learning Outcomes 3 and 4 are **competency based**. This means that the candidate is expected to perform the tasks, and demonstrate the level of competence, outlined in the assessment criteria. It is expected that evidence will be a combination following:

- Photographic and/or video evidence of the candidate's practical work.
- Assessor's observation report.
- Expert witness testimony.
- Candidate reflection on own practical work.

An observation report and witness testimony are differentiated as follows:

- An assessor's report is completed by a qualified assessor who observes the
 candidate carrying out practical work. The assessor will make assessment
 decisions as they observe and record these in the report, alongside a
 commentary of what they observe.
- A witness statement is completed by a suitably qualified or experienced expert
 who observes the candidate carrying out practical work. The witness statement
 will contain only a commentary of what has been observed. An assessor must
 then use the witness statement, alongside any additional evidence to make
 assessment decisions.
- In all cases, an assessor's report is preferred as evidence over a witness statement; as it is always better for an assessor to observe a candidate live.

Assessors may wish use to use a checklist or evidence matrix to organise and track the assessment outcomes that have been achieved, but these **do not**, in themselves, constitute evidence of achievement.

An assessor's report or witness statement alone is unlikely to be sufficient evidence of achievement. Reports and statements should always be accompanied by photographic and/or video evidence.

Centres may use the appropriate ProQual Candidate Workbook to organise candidate evidence or may use their own portfolio templates. It is expected that competence of each assessment criteria will be observed **at least once** before it is awarded.

Evidence of practical skills **may** be simulated, provided:

- The simulated environment matches, as close as possible, the real-world working environment.
- The candidate performs any assessed treatment on a live model.



Title:			oolysi	•	ctice of reezing)	Level:	4
Unit Number: T/651/498		33 T	QT:	150	GLH:	100	
Learning Outcomes The learner will be able to:		Assessment Criteria The learner can:					
1 Understand how to prepare for and provide cryolipolysis (fat freezing) treatments.		ınd	1.1	(Cryolipol Ab inc The be The ref pro Explain th freezing (Free Psy Cli	 (Cryolipolysis) treatments, including: Absolute and relative contraindications. The treatment modifications that might be required. The contra-indications that require referral to a relevant medical professional. Explain the factors that may impact a fat freezing (Cryolipolysis) treatment, including: Treatment history. Psychological suitability for treatment. Client lifestyle. Medical history. 		that might require al
			1.3	treatment Pre An	t, including: e-treatment of ti-Freeze Me		client.
			1.4	treatment deposits,	Explain how fat freezing (Cryolipolysis) treatments can reduce and reduce fat deposits, including the benefits and effects of treatment.		e fat
			1.5	The state of the s		the approprions gs for treatme	
			1.6	during fat	,	ving areas are yolipolysis) tre ees.	



1	Continued	1.7	Describe the limitations of fat freezing (cryolipolysis) equipment used for fat freezing treatments.
		1.8	Describe the risks associated with fat freezing (Cryolipolysis) treatments and how to mitigate them.
		1.9	Explain the post treatment advice that should be provided to clients.
		1.10	Describe the signs and symptoms of the following adverse reactions:
			 Erythema. Irritation. Bruising. Increased body temperature. Skin sensitivity.
		1.11	Explain how fat freezing (cryolipolysis) treatments can cause the following adverse reactions and how to work in a way that minimise the risk of them occurring: • Erythema. • Irritation. • Bruising. • Increased body temperature.
		1.12	 Skin sensitivity. Explain the post treatment advice that should be provided to clients.
2	Provide fat freezing (cryolipolysis) treatments.	2.1	 Carry out a concise and comprehensive consultation with the client, including: Client objectives and concerns. Skin classification, characteristics and condition. Identification of contra-indications and appropriate action. Alternative treatment options. Physical sensation and sound of treatment. Associated risks. Associated fees and timescales.



2 Continued	Continued	2.2	Obtain the client's informed consent of the procedure, ensuring they have adequate time to make an informed choice.
		2.3	Carry out the fat freezing (cryolipolysis) procedure according to the established protocol, including:
			 Using adequate skin support. Split the treatment area into zones. Work systematically. Adjust the treatment to suit the area being treated, density of fat and treatment objectives.
		2.4	 Adhere to health and safety requirements for the duration of the treatment, including: Monitor the client's health and wellbeing throughout the treatment. Implement the correct course of action in the event of an adverse reaction.
		2.5	 Ensure the client is satisfied with the outcome of the service. Completing and storing the client's treatment records in line with organisational and legislative requirements. Provide the client with appropriate post treatment advice and guidance.
		2.6	 Evaluate the treatment provided, including: Areas of strength. Areas for improvement. Actions to be taken to implement improvements.



Additional Assessment Information

Learning Outcome 1 is **knowledge based.** This means that evidence is expected to take the form of candidate's written work and/or records of appropriate professional discussions.

Learning Outcome 2 is **competency based**. This means that the candidate is expected to perform the tasks, and demonstrate the level of competence, outlined in the assessment criteria. It is expected that evidence will be a combination following:

- Photographic and/or video evidence of the candidate's practical work.
- Assessor's observation report.
- Expert witness testimony.
- Candidate reflection on own practical work

An observation report and witness testimony are differentiated as follows:

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 candidate carrying out practical work. The assessor will make assessment
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- A witness statement is completed by a suitably qualified or experienced expert
 who observes the candidate carrying out practical work. The witness statement
 will contain only a commentary of what has been observed. An assessor must
 then use the witness statement, alongside any additional evidence to make
 assessment decisions.
- In all cases, an assessor's report is preferred as evidence over a witness statement; as it is always better for an assessor to observe a candidate live.

Assessors may wish use to use a checklist or evidence matrix to organise and track the assessment outcomes that have been achieved, but these **do not**, in themselves, constitute evidence of achievement.

An assessor's report or witness statement alone is unlikely to be sufficient evidence of achievement. Reports and statements should always be accompanied by photographic and/or video evidence.

Centres may use the appropriate ProQual Candidate Workbook to organise candidate evidence or may use their own portfolio templates. It is expected that competence of each assessment criteria will be observed **at least once** before it is awarded.

Evidence of practical skills **may** be simulated, provided:

- The simulated environment matches, as close as possible, the real-world working environment.
- The candidate performs any assessed treatment on a live model.



Appendix One – Command Verb Definitions

The table below explains what is expected from each **command verb** used in an assessment objective. Not all verbs are used in this specification.

	Use existing knowledge or skills in a new or different context
Apply	Use existing knowledge or skills in a new or different context.
	Break a larger subject into smaller parts, examine them in detail and
Analyse	show how these parts are related to each other. This may be
,,,,	supported by reference to current research or theories.
Classify	Organise information according to specific criteria.
Clussily	
Compare	Examine subjects in detail, giving the similarities and differences.
Describe	Provide detailed, factual information about a subject.
	Give a detailed account of a subject, including a range of
Discuss	contrasting views and opinions.
	As with compare but extended to include pros and cons of the subject. There may or may not be a conclusion or recommendation
Evaluate	as appropriate.
Explain	As with describe, but extended to include causation and reasoning.
Identify	Select or ascertain appropriate information and details from a broader range of information or data.
luelilly	broader range of information of data.
Interpret	Use information or data to clarify or explain something.
Interpret	· -
Produce	Make or create something.
	Give short, factual information about something.
State	5.1.5 5.15.1., 165.1561 in official about 301161 in ing.
Specify	State a fact or requirement clearly and in precise detail.
эреспу	





ProQual Awarding Body

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