Qualification Specification

ProQual Level 4 Certificate in Micropigmentation

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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 Micropigmentation provides a nationally recognised qualification for those working in the beauty industry, and who wish to develop and demonstrate their competence at providing micropigmentation treatments. There are a range of optional units, enabling candidates to explore the area of micropigmentation they are most interested in.

The aims of this qualification are:

- To develop an understanding of micropigmentation treatments.
- To demonstrate competence at carrying out micropigmentation treatments, in accordance with health and safety requirements.
- To provide a progression route within the beauty industry, for those interested in providing advanced aesthetic 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 Micropigmentation
Qualification Number:	610/4467/2
Level:	Level 4
Total Qualification Time (TQT):	240 Hours
Guided Learning Hours (GLH):	180 Hours
Assessment:	Pass / Fail
	Internally assessed and verified by centre staff
	External quality assured by ProQual Verifiers
Qualification Start Date:	02/09/2024
Qualification Review Date:	01/08/2025
Next Review Due:	01/08/2028

Learner Profile

Candidates who wish to complete this qualification **must** have previously completed ***ProQual Level 3 Access to Aesthetic Practice***. 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 micropigmentation treatments on a range of clients.

  OR

- Be enrolled with a training provider, which will enable them to carry out a number of skin tightening 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 Skin Tightening Treatments.
  - Level 4 Certificate in Dermaplaning Treatments.
  - Level 5 Certificate in Microneedling Treatments.
  - Level 5 Certificate in Chemical Peel Treatments.
- Level 4 Diploma in Aesthetic Treatments and Skin Science.
- Level 7 Diploma in Aesthetic Practice.

Candidates must be **at least 18 years old** on the day that they are registered for this qualification, centres are reminded that no assessment activity may take place before a candidate has been registered.

Qualification Structure

This qualification consists of **three** mandatory units. Candidates must complete all mandatory units to complete this qualification. This qualification also consists of four optional units, candidates must complete **at least one** of the optional units to complete the qualification, but may complete more if they wish.

Unit Number	Unit Title	Level	TQT	GLH
Mandatory Units – Candidates must complete **all** units in this group.				
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
Optional Units – Candidates must complete **at least one** unit in this group.				
R/651/4332	Principles and Practice of Cosmetic Micropigmentation (Brows)	4	80	50
T/651/4333	Principles and Practice of Cosmetic Micropigmentation (Lash and Liner)	4	80	50
Y/651/4334	Principles and Practice of Cosmetic Micropigmentation (Lips)	4	80	50
L/651/2404	Eyebrow Micropigmentation Microblading - Manual Method	4	100	75
M/651/2405	Principles and Practice of Scalp Micropigmentation	4	80	50

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.

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 Micropigmentation

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 client 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 Outcomes and Assessment Criteria

Title:	Health and Safety in a Salon Environment			**Level:**	2
Unit Number:	J/651/2395	**TQT:**	10	**GLH:**	10

Learning Outcomes *The learner will be able to:*		**Assessment Criteria** *The learner can:*	
1	Prepare salon areas for treatment.	1.1	Identify common hazards and risks in a salon environment.
		1.2	State the health and safety requirements for practitioners carrying out beauty treatments, including but not limited to: • Health and Safety at Work Act. • The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). • Manual Handling Operations Regulations. • Control of Substances Hazardous to Health Regulations (COSHH).
		1.3	Describe how to clean, disinfect and sterilise different types of tools and equipment.
		1.4	Explain the difference between sterilisation and disinfection.
		1.5	Explain why it is important to follow salon procedures and any given instructions when setting up tools and equipment for a given treatment.
		1.6	Describe the required environmental conditions for a given treatment, including: • Lighting. • Heating. • Ventilation. • General comfort.
		1.7	Explain why it is important that the above environmental conditions are provided.

1	*Continued*	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.

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:	Infection Control and Prevention for Cosmetic, Aesthetic and Needle Related Treatments			Level:	2
Unit Number:	L/651/2397	**TQT:**	25	**GLH:**	20

Learning Outcomes *The learner will be able to:*		**Assessment Criteria** *The learner can:*	
1	Understand non-infectious and infectious hazards that are associated with cosmetic, aesthetic and needle treatments.	1.1	Describe the cell structure and key features of: • Bacteria. • Fungi. • Viruses.
		1.2	Describe the ideal conditions for the growth of micro-organisms.
		1.3	Define the term "pathogen".
		1.4	List **five** common illness caused by: • Bacteria. • Fungi. • Viruses.
		1.5	Define the term "parasite".
		1.6	Explain the difference between an endoparasite and an ectoparasite.
		1.7	Identify **three** common ectoparasites that colonise humans.
		1.8	Explain the difference between infection and colonisation.
		1.9	Describe what is meant by: • Localised infection. • Systemic infection.
		1.10	Describe what is meant by: • Direct transmission. • Indirect transmission. • Vector transmission.

1	*Continued*	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 ProQual Level 2 Award in Infection Control and Prevention in Aesthetic Practice 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:	Providing Initial Consultation With Client			Level:	4
Unit Number:	H/651/2401	**TQT:**	125	**GLH:**	100

Learning Outcomes *The learner will be able to:*		**Assessment Criteria** *The learner can:*	
1	Understand the client consultation process.	1.1	Describe the importance of collaboration with competent professionals to support effective and safe working practices, including how and when to refer to other non-healthcare and healthcare professionals.
		1.2	Explain why you must comply with ethical practice and work within the legislative requirements, when undertaking a client consultation.
		1.3	Describe the importance of engaging in, and documenting continuous professional development including: • Up-to-date information. • Policies. • Procedures. • Best practice guidance.
		1.4	Explain the reasons why medical conditions may contraindicate the non-surgical cosmetic procedure.
		1.5	Explain the legislative and insurance requirements for obtaining medical diagnosis and referral.
		1.6	Explain the importance of communicating with the client in a professional manner and within the limits of your own competencies.

1	*Continued*	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.
		2.2	Describe how to maintain your role and responsibilities for the health, safety and welfare of the individual and yourself before, during and after the skin analysis.
		2.3	Explain the rationale for carrying out skin analysis, expected findings in different skin types and the role of evidence-based practice.
		2.4	State the protocols for the correct and safe use of skin analysis technologies.

2	*Continued*	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.
		2.10	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	*Continued*	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 non-surgical 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 non-surgical 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	*Continued*	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.
		3.8	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.
		3.12	Provide and obtain confirmation of receipt of the verbal and written instruction and advice given to the individual pre and post-procedure.

4	Perform a skin analysis.	4.1	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.
		4.2	Ensure the individual's undertaking and obtain informed consent for the proposed investigative procedure.
		4.3	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.
		4.4	Record and securely store visual media for future reference and monitoring purposes in accordance with legislative, regulatory and indemnity requirements.
		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 twice** 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:	Principles and Practice of Cosmetic Micropigmentation (Brows)			Level:	4
Unit Number:	R/651/4332	**TQT:**	80	**GLH:**	50

Learning Outcomes *The learner will be able to:*		**Assessment Criteria** *The learner can:*	
1	Understand how to prepare for and carry out cosmetic micropigmentation on the face.	1.1	Describe how to set up the workspace, trolley, couch and PPE for a micropigmentation procedure.
		1.2	Describe the following needle cartridge types: • Flat. • Magnum. • Round. • Single point. • Sloped. • Micro. • Shaders and liners. • Nano.
		1.3	Identify the size and type of needle cartridge to use for each of: • Eyebrows – Stroke effect. • Eyebrows – Powder effect.
		1.4	Describe how to mix pigments for eyebrow micropigmentation, for the following shades: • Fitzpatrick 1. • Fitzpatrick 2. • Fitzpatrick 3cool. • Fitzpatrick 3warm. • Fitzpatrick 4cool. • Fitzpatrick 4warm. • Fitzpatrick 5. • Fitzpatrick 6.
		1.5	State in which layer of the skin the pigment is implanted.
		1.6	Describe the possible adverse effects if the pigment is implanted: • Too deep. • Too shallow.

1	*Continued*	1.7	Describe the structure and function of the endocrine system.
		1.8	Describe the structure and function of the circulatory system.
		1.9	Explain the changes that occur to the endocrine and circulatory systems after the body has received a cosmetic tattoo.
		1.10	Describe how to treat a client to stem any bleeding that occurs during the procedure.
		1.11	Explain how the micropigmentation procedure is different for under 35s and under 50s. The explanation should include consideration of: • Skin laxity. • Colouring. • Speed of the tattoo machine. • Needle choice.
		1.12	Explain how to perform a retouch for a client who: • Has faded, but hair strokes visible. • Has lost all pigment on the brow. • Is still in the healing phase.
		1.13	State the required length of time between first and retouch procedures.
		1.14	Describe the stages of skin healing.
		1.15	Describe the effect on freshly micro-pigmented skin of: • The sun. • Water • Cosmetics.
		1.16	Describe how to handle a client who is unhappy with the result, including if this may result in legal action.
2	Carry out a micropigmentation treatment on the eyebrows – stroke effect.	2.1	Prepare the workspace for treatment, including: • Trolley. • Products. • Couch.

2	*Continued*	2.2	Complete a consultation with the client, including: • Agreeing treatment objectives. • Agreeing design template. • Agreeing pain management strategy.
		2.3	Magnify and illuminate the treatment area.
		2.4	Safely apply topical anaesthetic.
		2.5	Select the appropriate type of size of needle for the treatment.
		2.6	Select and use colour pigments in accordance with the treatment objectives.
		2.7	Measure the client's eyebrows using the calliper and cotton method.
		2.8	Complete the treatment, using the correct techniques, to the client's satisfaction. Treatment techniques include: • Pointillism. • Pendulum. • Shading. • Obovoid. • Cross-hatching. • Sweep. • Stroke. • Three-way stretch. • Needle depth. • Speed. • Pressure. • Angle. • Pigment dipping. • Wrist support. • Posture and positioning. • Treatment passes.
		2.9	Take photographic evidence of the treatment area following organisational procedures.
		2.10	Complete the client's records and store in accordance with data legislation.
		2.11	Tidy the workspace, including the correct disposal of needles and dressings.
		2.12	Complete an evaluation of the treatment with the client.

2	*Continued*	2.13	Collate and record information from client feedback, client records and own observations.
		2.14	Provide verbal and written advice and recommendations to the client regarding: • Post treatment aftercare. • Future treatment.
3	Carry out a micropigmentation treatment on the eyebrows – powder effect.	3.1	Prepare the workspace for treatment, including: • Trolley. • Products. • Couch.
		3.2	Complete a consultation with the client, including: • Agreeing treatment objectives. • Agreeing design template. • Agreeing pain management strategy.
		3.3	Magnify and illuminate the treatment area.
		3.4	Safely apply topical anaesthetic.
		3.5	Select the appropriate type of size of needle for the treatment.
		3.6	Select and use colour pigments in accordance with the treatment objectives.
		3.7	Measure the client's eyebrows using the calliper and cotton method.

3	*Continued*	3.8	Complete the treatment, using the correct techniques, to the client's satisfaction. Treatment techniques include: • Pointillism. • Pendulum. • Shading. • Obovoid. • Cross-hatching. • Sweep. • Stroke. • Three-way stretch. • Needle depth. • Speed. • Pressure. • Angle. • Pigment dipping. • Wrist support. • Posture and positioning. • Treatment passes.
		3.9	Take photographic evidence of the treatment area following organisational procedures.
		3.10	Complete the client's records and store in accordance with data legislation.
		3.11	Tidy the workspace, including the correct disposal of needles and dressings.
		3.12	Complete an evaluation of the treatment with the client.
		3.13	Collate and record information from client feedback, client records and own observations.
		3.14	Provide verbal and written advice and recommendations to the client regarding: • Post treatment aftercare. • Future treatment.

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 Outcomes 2 and 3 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 ProQual Level 4 Certificate in Micropigmentation Candidate Workbook to organise candidate evidence or may use their own portfolio templates.

Stroke and powder effect eyebrow treatments must be observed **at least three times, with a minimum of one stroke effect and one powder effect treatment.** All minimum observation requirements must be met before this unit is awarded. Both the candidate and live model must be **at least 18 years old**.

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:	Principles and Practice of Cosmetic Micropigmentation (Lash and Liner)			Level:	4
Unit Number:	T/651/4333	TQT:	80	GLH:	50

Learning Outcomes *The learner will be able to:*		Assessment Criteria *The learner can:*	
1	Understand how to prepare for and carry out cosmetic micropigmentation on the face.	1.1	Describe how to set up the workspace, trolley, couch and PPE for a micropigmentation procedure.
		1.2	Describe the following needle cartridge types: • Flat. • Magnum. • Round. • Single point. • Sloped. • Micro. • Shaders and liners. • Nano.
		1.3	Identify the size and type of needle cartridge used for eyeliner and lash line.
		1.4	Describe how to mix pigments for eyeliner micropigmentation, for the following shades: • Fitzpatrick 1. • Fitzpatrick 2. • Fitzpatrick 3cool. • Fitzpatrick 3warm. • Fitzpatrick 4cool. • Fitzpatrick 4warm. • Fitzpatrick 5. • Fitzpatrick 6.
		1.5	State in which layer of the skin the pigment is implanted.
		1.6	Describe the possible adverse effects if the pigment is implanted: • Too deep. • Too shallow.

1	*Continued*	1.7	Describe the structure and function of the endocrine system.
		1.8	Describe the structure and function of the circulatory system.
		1.9	Explain the changes that occur to the endocrine and circulatory systems after the body has received a cosmetic tattoo.
		1.10	Describe how to treat a client to stem any bleeding that occurs during the procedure.
		1.11	Explain how the micropigmentation procedure is different for under 35s and under 50s. The explanation should include consideration of: • Skin laxity. • Colouring. • Speed of the tattoo machine. • Needle choice.
		1.12	Explain how to perform a retouch for a client who: • Is still in the healing phase. • Has eyeliner that has healed patchy.
		1.13	State the required length of time between first and retouch procedures.
		1.14	Describe the stages of skin healing.
		1.15	Describe the effect on freshly micro-pigmented skin of: • The sun. • Water • Cosmetics.
		1.16	Describe how to handle a client who is unhappy with the result, including if this may result in legal action.
2	Carry out a micropigmentation treatment for eyelash thickener.	2.1	Prepare the workspace for treatment, including: • Trolley. • Products. • Couch.

2	*Continued*	2.2	Complete a consultation with the client, including: • Agreeing treatment objectives. • Agreeing design template. • Agreeing pain management strategy.
		2.3	Magnify and illuminate the treatment area.
		2.4	Safely apply topical anaesthetic.
		2.5	Select the appropriate type of size of needle for the treatment.
		2.6	Select and use colour pigments in accordance with the treatment objectives.
		2.7	Draw the eyelash thickener in place using a black pencil and receive acceptance before starting the procedure.
		2.8	Complete the treatment, using the correct techniques, to the client's satisfaction. Treatment techniques include: • Pointillism. • Pendulum. • Shading. • Obovoid. • Cross-hatching. • Sweep. • Stroke. • Three-way stretch. • Needle depth. • Speed. • Pressure. • Angle. • Pigment dipping. • Wrist support. • Posture and positioning. • Treatment passes.
		2.9	Take photographic evidence of the treatment area following organisational procedures.
		2.10	Complete the client's records and store in accordance with data legislation.
		2.11	Tidy the workspace, including the correct disposal of needles and dressings.

2	*Continued*	2.12	Complete an evaluation of the treatment with the client.
		2.13	Collate and record information from client feedback, client records and own observations.
		2.14	Provide verbal and written advice and recommendations to the client regarding: • Post treatment aftercare. • Future treatment.
3	Carry out a micropigmentation treatment on eyeliner.	3.1	Prepare the workspace for treatment, including: • Trolley. • Products. • Couch.
		3.2	Complete a consultation with the client, including: • Agreeing treatment objectives. • Agreeing design template. • Agreeing pain management strategy.
		3.3	Magnify and illuminate the treatment area.
		3.4	Safely apply topical anaesthetic.
		3.5	Select the appropriate type of size of needle for the treatment.
		3.6	Select and use colour pigments in accordance with the treatment objectives.
		3.7	Pencil the liner in correctly around the eyes and receive acceptance before starting the procedure.

3	*Continued*	3.8	Complete the treatment, using the correct techniques, to the client's satisfaction. Treatment techniques include: • Pointillism. • Pendulum. • Shading. • Obovoid. • Cross-hatching. • Sweep. • Stroke. • Three-way stretch. • Needle depth. • Speed. • Pressure. • Angle. • Pigment dipping. • Wrist support. • Posture and positioning. • Treatment passes.
		3.9	Take photographic evidence of the treatment area following organisational procedures.
		3.10	Complete the client's records and store in accordance with data legislation.
		3.11	Tidy the workspace, including the correct disposal of needles and dressings.
		3.12	Complete an evaluation of the treatment with the client.
		3.13	Collate and record information from client feedback, client records and own observations.
		3.14	Provide verbal and written advice and recommendations to the client regarding: • Post treatment aftercare. • Future treatment.

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 Outcomes 2 and 3 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 ProQual Level 4 Certificate in Micropigmentation Candidate Workbook to organise candidate evidence or may use their own portfolio templates.

Eyelash thickener and eyeliner treatments must be observed a minimum of **three times, with a minimum of one eyelash thickener and one eyeliner treatment.** All minimum observation requirements must be met before this unit is awarded. Both the candidate and live model must be **at least 18 years old**.

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:	Principles and Practice of Cosmetic Micropigmentation (Lips)			Level:	4
Unit Number:	Y/651/4334	**TQT:**	80	**GLH:**	50

Learning Outcomes *The learner will be able to:*		**Assessment Criteria** *The learner can:*	
1	Understand how to prepare for and carry out cosmetic micropigmentation on the face.	1.1	Describe how to set up the workspace, trolley, couch and PPE for a micropigmentation procedure.
		1.2	Describe the following needle cartridge types: • Flat. • Magnum. • Round. • Single point. • Sloped. • Micro. • Shaders and liners. • Nano.
		1.3	Identify the size and type of needle cartridge to use for lipliner and full lip colour.
		1.4	Describe how to mix pigments for lip micropigmentation, for the following shades: • Fitzpatrick 1. • Fitzpatrick 2. • Fitzpatrick 3cool. • Fitzpatrick 3warm. • Fitzpatrick 4cool. • Fitzpatrick 4warm. • Fitzpatrick 5. • Fitzpatrick 6.
		1.5	State in which layer of the skin the pigment is implanted.
		1.6	Describe the possible adverse effects if the pigment is implanted: • Too deep. • Too shallow.

1	*Continued*	1.7	Describe the structure and function of the endocrine system.
		1.8	Describe the structure and function of the circulatory system.
		1.9	Explain the changes that occur to the endocrine and circulatory systems after the body has received a cosmetic tattoo.
		1.10	Describe how to treat a client to stem any bleeding that occurs during the procedure.
		1.11	Explain how the micropigmentation procedure is different for under 35s and under 50s. The explanation should include consideration of: • Skin laxity. • Colouring. • Speed of the tattoo gun. • Needle choice.
		1.12	Explain how to perform a retouch for a client who: • Is still in the healing phase. • Has lips that have lost all pigment within two weeks of treatment.
		1.13	State the required length of time between first and retouch procedures.
		1.14	Describe the stages of skin healing.
		1.15	Describe the effect on freshly micro-pigmented skin of: • The sun. • Water • Cosmetics.
		1.16	Describe how to handle a client who is unhappy with the result, including if this may result in legal action.
2	Carry out a micropigmentation treatment for lipliner.	2.1	Prepare the workspace for treatment, including: • Trolley. • Products. • Couch.

2	*Continued*	2.2	Complete a consultation with the client, including: • Agreeing treatment objectives. • Agreeing design template. • Agreeing pain management strategy.
		2.3	Magnify and illuminate the treatment area.
		2.4	Safely apply topical anaesthetic.
		2.5	Select the appropriate type of size of needle for the treatment.
		2.6	Select and use colour pigments in accordance with the treatment objectives.
		2.7	Outline the lips using a soft sharp pencil and receive acceptance before starting the procedure.
		2.8	Complete the treatment, using the correct techniques, to the client's satisfaction. Treatment techniques include: • Pointillism. • Pendulum. • Shading. • Obovoid. • Cross-hatching. • Sweep. • Stroke. • Three-way stretch. • Needle depth. • Speed. • Pressure. • Angle. • Pigment dipping. • Wrist support. • Posture and positioning. • Treatment passes.
		2.9	Take photographic evidence of the treatment area following organisational procedures.
		2.10	Complete the client's records and store in accordance with data legislation.
		2.11	Tidy the workspace, including the correct disposal of needles and dressings.

2	*Continued*	2.12	Complete an evaluation of the treatment with the client.
		2.13	Collate and record information from client feedback, client records and own observations.
		2.14	Provide verbal and written advice and recommendations to the client regarding: • Post treatment aftercare. • Future treatment.
3	Carry out a micropigmentation treatment for full lip colour.	3.1	Prepare the workspace for treatment, including: • Trolley. • Products. • Couch.
		3.2	Complete a consultation with the client, including: • Agreeing treatment objectives. • Agreeing design template. • Agreeing pain management strategy.
		3.3	Magnify and illuminate the treatment area.
		3.4	Safely apply topical anaesthetic.
		3.5	Select the appropriate type of size of needle for the treatment.
		3.6	Select and use colour pigments in accordance with the treatment objectives.
		3.7	Outline the lips using a soft sharp pencil and receive acceptance before starting the procedure.

3	*Continued*	3.8	Complete the treatment, using the correct techniques, to the client's satisfaction. Treatment techniques include: • Pointillism. • Pendulum. • Shading. • Obovoid. • Cross-hatching. • Sweep. • Stroke. • Three-way stretch. • Needle depth. • Speed. • Pressure. • Angle. • Pigment dipping. • Wrist support. • Posture and positioning. • Treatment passes.
		3.9	Take photographic evidence of the treatment area following organisational procedures.
		3.10	Complete the client's records and store in accordance with data legislation.
		3.11	Tidy the workspace, including the correct disposal of needles and dressings.
		3.12	Complete an evaluation of the treatment with the client.
		3.13	Collate and record information from client feedback, client records and own observations.
		3.14	Provide verbal and written advice and recommendations to the client regarding: • Post treatment aftercare. • Future treatment.

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 Outcomes 2 and 3 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 ProQual Level 4 Certificate in Micropigmentation Candidate Workbook to organise candidate evidence or may use their own portfolio templates.

Lipliner and full lip treatments must be observed a minimum of **three times, with a minimum of one lipliner and one full lip colour treatment.** All minimum observation requirements must be met before this unit is awarded. Both the candidate and live model must be **at least 18 years old**.

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:	Eyebrow Micropigmentation Microblading - Manual Method			Level:	4
Unit Number:	L/651/2404	**TQT:**	100	**GLH:**	75

Learning Outcomes *The learner will be able to:*		**Assessment Criteria** *The learner can:*	
1	Understand how to set up the workplace and prepare for a microblading procedure.	1.1	Describe how to set up the workspace, trolley, couch and PPE for a microblading procedure.
		1.2	Describe how to determine the most suitable blade for a treatment, based on: • Client age. • Type of brow. • Thickness of brow.
		1.3	Identify in which layer of skin the pigment is implanted.
		1.4	Describe the possible adverse effects if the pigment is implanted: • Too deep. • Too shallow.
		1.5	Describe the structure and function of the endocrine system.
		1.6	Explain the changes that occur to the endocrine and circulatory systems after the body has received a cosmetic tattoo.
		1.7	Describe how to treat a client to stem any bleeding during the procedure.
		1.8	Explain how the microblading procedure is different for under 35s and under 50s. The explanation should include consideration of: • Skin laxity. • Colouring.

1	*Continued*	1.9	Explain how to perform a retouch for a client who: • Has faded, but still visible, hair strokes. • Has lost all hair stokes. • Is still in the healing phase.
		1.10	State the required length of time between first and retouch procedures.
		1.11	Describe the stages of skin healing.
		1.12	Describe the effect on freshly micro-pigmented skin of: • The sun. • Water • Cosmetics.
		1.13	Describe how to handle a client who is unhappy with the result, including if this may result in legal action.
2	Carry out a microblading procedure.	2.1	Prepare the workspace for treatment, including: • Trolley. • Products. • Couch. • Appropriate PPE.
		2.2	Complete a consultation with the client, including: • Agreeing treatment objectives. • Agreeing design template. • Agreeing pain management strategy.

2	*Continued*	2.3	Magnify and illuminate the treatment area.
		2.4	Safely apply topical anaesthetic.
		2.5	Select the appropriate type of size of blade for the treatment.
		2.6	Select and use colour pigments in accordance with the treatment objectives.
		2.7	Measure the client's eyebrows and record the pre-treatment state photographically.
		2.8	Complete the treatment, using the correct techniques, to the client's satisfaction. Treatment techniques include: • Pointillism. • Pendulum. • Shading. • Obovoid. • Cross-hatching. • Sweep. • Stroke. • Three-way stretch. • Needle depth. • Speed. • Pressure. • Angle. • Pigment dipping. • Wrist support. • Posture and positioning. • Treatment passes.
		2.9	Take photographic evidence of the treatment area following organisational procedures.
		2.10	Complete the client's records and store in accordance with data legislation.
		2.11	Tidy the workspace, including the correct disposal of needles and dressings.
		2.12	Complete an evaluation of the treatment with the client.
		2.13	Collate and record information from client feedback, client records and own observations.

2	*Continued*	2.14	Provide verbal and written advice and recommendations to the client regarding: • Post treatment aftercare. • Future treatment.

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:

- 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 ProQual Level 4 Certificate in Micropigmentation 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 three times** before it is awarded. Both the candidate and live model must be **at least 18 years old**.

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:	Principles and Practice of Scalp Micropigmentation			Level:	4
Unit Number:	M/651/2405	TQT:	80	GLH:	50

Learning Outcomes *The learner will be able to:*		Assessment Criteria *The learner can:*	
1	Understand how to set up and prepare the workplace for a micropigmentation treatment on the scalp.	1.1	Describe how to set up the workspace, trolley, couch and PPE for a scalp micropigmentation procedure.
		1.2	Describe the following cartridge types: • Round. • Single point. • Micro.
		1.3	Explain the different types of hair loss, and the causes of each, including: • Age. • Illness. • Stress. • Cancer treatment. • Weight loss. • Iron deficiency.
		1.4	Describe the stages of the Norwood Hamiliton Scale used to measure male pattern baldness.
		1.5	Explain how to advise a client who is a Norwood Hamilton Stage III on their suitability for treatment.
		1.6	Describe how to mix and dilute pigment for a scalp micropigmentation treatment.
		1.7	State the cartridge size that should be used for a scalp micropigmentation treatment.
		1.8	Identify in which layer of skin the pigment is implanted.
		1.9	Describe the possible adverse effects if the pigment is implanted: • Too deep. • Too shallow.

1	*Continued*	1.10	Explain how to perform a retouch for a client: • Who has faded, but still has dots visible. • Who is in the healing phase. • Who has healed patchy.
		1.11	State the required length of time between first and retouch procedures.
		1.12	Explain what telogen effluvium is.
		1.13	Explain what alopecia is.
		1.14	Describe why micropigmentation pigments that are used for cosmetic tattooing would not be suitable for scalp micropigmentation.
		1.15	Describe how to start a scalp micropigmentation treatment, including: • Preparation before the treatment begins. • Positioning the client. • Measuring the scalp and hairline.
		1.16	Describe how to complete the whole head, including how to position the client throughout for the best outcome.
		1.17	Identify how many sessions a typical scalp micropigmentation requires.
		1.18	Explain why scalp micropigmentation is completed over multiple sessions and what each session is for.
		1.19	Describe how to cover the scalp for men or women who suffer from thinning hair.
		1.20	Describe the advice you would give to a client after a treatment, including: • Post-treatment aftercare. • Future treatments.
2	Perform a scalp micropigmentation treatment.	2.1	Prepare the workspace for treatment, including: • Trolley. • Products. • Couch. • Appropriate PPE.

2	*Continued*	2.2	Complete a consultation with the client, including: • Agreeing treatment objectives. • Agreeing design template. • Agreeing pain management strategy.
		2.3	Magnify and illuminate the treatment area.
		2.4	Safely apply topical anaesthetic.
		2.5	Select the appropriate type of size of needle for the treatment.
		2.6	Select and use colour pigments in accordance with the treatment objectives.
		2.7	Mark the head with the correct hairline and record the pre-treatment state photographically.
		2.8	Complete the treatment, using the correct techniques, to the client's satisfaction. Treatment techniques include: • Pointillism. • Three-way stretch. • Needle depth. • Speed. • Pressure. • Angle. • Pigment dipping. • Wrist support. • Posture and positioning. • Treatment passes.
		2.9	Take photographic evidence of the treatment area following organisational procedures.
		2.10	Complete the client's records and store in accordance with data legislation.
		2.11	Tidy the workspace, including the correct disposal of cartridges and dressings.
		2.12	Complete an evaluation of the treatment with the client.
		2.13	Collate and record information from client feedback, client records and own observations.

2	*Continued*	2.14	Provide verbal and written advice and recommendations to the client regarding: • Post treatment aftercare. • Future treatment.

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:

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Centres may use the ProQual Level 4 Certificate in Micropigmentation 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 four times** before it is awarded. Both the candidate and live model must be **at least 18 years old**.

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

Apply	Use existing knowledge or skills in a new or different context.
Analyse	Break a larger subject into smaller parts, examine them in detail and 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.
Compare	Examine subjects in detail, giving the similarities and differences.
Critically Compare	As with compare, but extended to include pros and cons of the subject. There may or may not be a conclusion or recommendation as appropriate.
Describe	Provide detailed, factual information about a subject.
Discuss	Give a detailed account of a subject, including a range of contrasting views and opinions.
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.
Interpret	Use information or data to clarify or explain something.
Produce	Make or create something.
State	Give short, factual information about something.
Specify	State a fact or requirement clearly and in precise detail.

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