



Qualification Specification



This qualification is part of ProQual's broad offer of qualifications in the Hair, Beauty and Aesthetics 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 5 Certificate in Non-Laser Tattoo Removal provides a nationally recognised qualification for aesthetic practitioners seeking to develop their expertise in safe and effective non-laser tattoo removal techniques. This qualification equips learners with the knowledge and practical skills required to assess client suitability, perform removal procedures, and manage aftercare

The aims of this qualification are:

- To allow candidates to develop and demonstrate their understanding of the principles, techniques, and safety considerations of non-laser tattoo removal.
- To develop the candidate's skills to assess skin and tattoo characteristics, select appropriate removal methods, and perform treatments effectively.
- To support professionals in expanding their services within the beauty and aesthetics sector.

The awarding body for this qualification is ProQual AB. This qualification has been approved for delivery in England. 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 5 Certificate in Non-Laser Tattoo Removal		
Qualification Number:	610/5479/3		
Level:	5		
Total Qualification Time (TQT):	280 Hours 27 Credits		
Guided Learning Hours (GLH):	210 Hours		
	Pass/Fail		
Assessment:	Internally assessed and assured by centre staff		
	Externally verified by ProQual verifiers		
Qualification Start Date:	31/03/2025		
Qualification Review Date:	31/03/2028		



#### **Learner Profile**

Candidates for this qualification must:

 Hold the ProQual Level 3 Diploma in Pathway to Aesthetic Practice, or an equivalent qualification.

OR

Have at least three years verifiable experience providing aesthetic services.

Centres should carry out their own assessment of candidate's knowledge and skills to identify gaps and determine the assessment plan.

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.

Candidates who complete this qualification may progress onto other qualifications within the ProQual Hair, Beauty and Aesthetics suite.



#### **Qualification Structure**

This qualification consists of **four** mandatory units. Candidates must complete both mandatory units to complete this qualification. There are no optional units.

Unit Number	Unit Title	Level	TQT	GLH			
Mandatory Units – Candidates must complete <b>all</b> 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			
J/651/5383	Principles and Practice of Non-Laser Tattoo Removal	5	120	80			



#### **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 the appropriate equipment to enable candidates to carry out the practical requirements of this qualification.



#### 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 5 Certificate in Non-Laser Tattoo Removal

#### 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 <u>only.</u>)
- 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 Outcomes and Assessment Criteria

Title:			th and Safety in a Level: 2 n Environment				2
Unit N	iit Number: J/651/2395 TQT: 10 GLH: 10				10		
	<b>Learning Outcomes</b> The learner will be able to:			sment Crite arner can:	ria		
1	Prepare salor for treatment		1.1	Identify co environme		azards and risk	ks in a salon
			1.2		ers carryin	d safety requi g out beauty nited to:	
				<ul><li>The Dar (RID</li><li>Mai</li><li>Cor</li></ul>	Reporting agerous Condon Condo	afety at Work g of Injuries, D Occurrences R dling Operation bstances Haz ations (COSHI	iseases and legulations ons Regulations. ardous to
			1.3			ean, disinfect of ols and equip	
			1.4	Explain the disinfection		ce between s	terilisation and
			1.5	procedure	s and any tools and	ortant to follo y given instruc equipment fo	ctions when
			1.6	for a giver  Ligh Hec  Ver		nt, including:	ntal conditions
			1.7			ortant that the ditions are pro	



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:	Preve Aesth	evention Control and Evention for Cosmetic, Esthetic and Needle Elated Treatments				
Unit Number:	L/651/23	97	IQT:	25	GLH:	20
<b>Learning Outco</b> The learner will be			sment Crite arner can:	eria		
1 Understand non- infectious and infectious hazards that are associated with cosmetic, aesthetic and needle treatments.		1.1	• Bc	the cell str acteria. ngi. ruses.	ucture and k	ey features of:
		1.2		Describe the ideal conditions for the growth of micro-organisms.		
		1.3	Define th	Define the term "pathogen".		
		1.4	• Bc	ommon illn acteria. Ingi. ruses.	iess caused l	оу:
		1.5	Define th	e term "pc	arasite".	
		1.6			ce between an ectoparas	
		1.7	Identify <b>t</b> colonise		non ectopar	asites that
		1.8	Explain the colonisat		ce between	infection and
		1.9	• Lc	what is me calised infe stemic infe	ection.	
		1.10	• Di	what is me rect transm direct trans ector transr	nission. mission.	



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	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:
			<ul> <li>Consultation.</li> <li>Aftercare.</li> <li>Hand hygiene.</li> <li>Environment management.</li> <li>Equipment management.</li> <li>Cleaning, disinfecting and sterilisation.</li> <li>Personal protective equipment.</li> <li>Management of body fluids.</li> <li>Needle stick injuries.</li> <li>Waste disposal and collection.</li> <li>Management of occupational exposure.</li> </ul>



#### **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:			ding Initial  Ultation With Client				4	
Unit N	umber:	H/651/24	101 <b>T</b> 0	ञ्:	125	GLH:	100	
	_			Assessment Criteria The learner can:				
1 Understand the client consultation process.		1.1	competer and safe	nt professi working p efer to oth	onals to supp ractices, incluner ner non-healt	aboration with port effective Juding how and hcare and		
			1.2	practice of	and work vents, when	est comply wi within the leg n undertaking	islative	
			1.3	documen developm • Up- • Pol • Pro	ting continent included to the control of the contr	nuous profes	aging in, and sional	
			1.4		raindicate	why medica the non-sur	l conditions gical cosmetic	
			1.5		ents for ob	ve and insura taining medi	nce cal diagnosis	
			1.6	the client	in a profe		nunicating with er and within cies.	



1	Continued	1.7	<ul> <li>Explain why you must develop and agree a non-surgical cosmetic procedure plan including:</li> <li>Declared current medical status.</li> <li>Procedure history.</li> <li>Relative and absolute contraindications.</li> <li>Skin classification, condition and sensitivity.</li> <li>Skin healing capacity.</li> <li>Client's expectations.</li> <li>The client's physical and psychological suitability for the non-surgical cosmetic procedure.</li> </ul>
		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	<ul> <li>Describe the legislative, insurance and organisational requirements for:</li> <li>Gaining signed, informed consent from the client for the non-surgical cosmetic procedure.</li> <li>Upholding the rights of the client and practitioner.</li> <li>Taking and storing of visual media of the clients treatment area.</li> <li>Completing and storing the clients non-surgical cosmetic procedure records.</li> </ul>
		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.
	Understand the skin analysis process.	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		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	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.
		2.10	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	<ul> <li>Explain how and why the skins barrier function is impaired by aesthetic procedures, including:</li> <li>The increased risk of photosensitivity and ways to protect the skin.</li> </ul>
		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	<ul> <li>Carry out a concise and comprehensive nonsurgical cosmetic consultation, taking account of:</li> <li>The individual's declared medical history and current medical status.</li> <li>The individual's procedure history.</li> <li>The individual's skin classification, condition, sensitivity and healing capacity of the treatment area.</li> <li>The individual's concerns, expectations and desired outcomes.</li> <li>The individual's physical and psychological suitability for the nonsurgical cosmetic procedure.</li> <li>Declared relative and absolute contraindications and restrictions.</li> </ul>
		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 nonsurgical cosmetic procedures.		
		3.5	Discuss and agree the skin priming programm or recommendations required prior to the nor 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 postprocedure.		
4	Perform a skin analysis.		Follow legal requirements and other relevant standards, insurance guidelines, and organisational protocols when carrying out a skin analysis, including:		
			<ul> <li>Maintaining your responsibilities for the health, safety, hygiene and welfare of the individual and yourself before, during and after the skin analysis.</li> </ul>		



4 Continued	Continued	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
			<ul> <li>your scope of practice.</li> <li>Adapting communication styles to meet the individual's needs.</li> <li>Contraindications and potential comorbidities.</li> </ul>
		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:		•		ractice o o Remov	EC VCI.	5		
Jnit Number: J/651/538		383	TQT:	120	GLH:	80		
<b>Learning Outcomes</b> The learner will be able to:			Assessment Criteria The learner can:					
l Understan provide no	on-laser	1.1		Explain why it is important for the treatment area to be sufficiently illuminated.				
services.	too removal vices.	1.2	Describ tools.	Describe how to use and maintain marking out tools.				
	1.3	remove	al, including: Dermabrasion Salabrasion Acid Tattoo Saline Tattoo	on Tattoo Rem Tattoo Remov Removal.				
		1.4	Explain why it is important to hold the device the correct angle.					
		1.5		e how to wo	ork systematic nt overlap.	ally, avoiding		
		1.6			ces between umatic tattoo			
		1.7		why some to sful than oth	reatments mo ers.	y be more		
		1.8			ermine the suit gments for rer	tability of noval or fading		



1	Continued	1.9	Describe the signs and symptoms of the
			following adverse reactions:
			- Eva assiva akin aravina aravihitanina
			Excessive skin greying or whitening.
			Lesion colour changes.  Live a reconstitutions  The second s
			Hyperaemia and irritation.  Figure arising latintaries as
			Excessive blistering.
			Pigmentary changes.  Figure and the appropriate that the second control of the seco
			Excessive discomfort.  Fig. 2 and 2 and 3 a
			Excessive oedema.
			Scarring.  Be also the second to second to the second
			Reduction of hair growth.  Dimin and
			Dizziness.      Dizziness.      Dizziness.
			• Fainting.
		1.10	Explain how tattoo removal can cause the
			following adverse reactions:
			<ul> <li>Excessive skin greying or whitening.</li> </ul>
			<ul> <li>Lesion colour changes.</li> </ul>
			<ul> <li>Hyperaemia and irritation.</li> </ul>
			<ul> <li>Excessive blistering.</li> </ul>
			<ul> <li>Pigmentary changes.</li> </ul>
			<ul> <li>Excessive discomfort.</li> </ul>
			<ul> <li>Excessive oedema.</li> </ul>
			<ul> <li>Scarring.</li> </ul>
			<ul> <li>Reduction of hair growth.</li> </ul>
			<ul> <li>Dizziness.</li> </ul>
			Fainting.



1	Continued	1.11	Describe how to respond to the following adverse reactions:  Excessive skin greying or whitening. Lesion colour changes. Hyperaemia and irritation. Excessive blistering. Pigmentary changes. Excessive discomfort. Excessive oedema. Scarring. Reduction of hair growth. Dizziness.
2	Provide non-laser tattoo removal services.	2.1	<ul> <li>Carry out a consultation with the client, including:</li> <li>Discussing treatment history.</li> <li>Identifying potential contraindications and responding appropriately.</li> <li>Discussing and agreeing the treatment objectives.</li> <li>Discussing the treatment timescales and fees.</li> <li>Discussing potential adverse reactions.</li> <li>Obtaining the client's informed consent for the treatment.</li> </ul>
		2.2	Prepare the treatment area for the treatment, including:  Illuminating the treatment area.  Marking out.  Cooling.  Shave and dry the treatment area.
		2.3	Enable and set the equipment as appropriate for the treatment.



2	Continued	2.4	<ul> <li>Carry out the tattoo removal treatment, including:</li> <li>Working systematically to avoid overlap.</li> <li>Adapting the treatment as appropriate.</li> <li>Monitoring the client's health and wellbeing throughout.</li> <li>Responding appropriately to any adverse reactions.</li> </ul>
		2.5	<ul> <li>Returning the equipment into safe or stand-by mode.</li> <li>Taking photographic evidence of the treatment area in line with legislative and organisational requirements.</li> <li>Confirming with the client that they are satisfied with the outcome of the treatment.</li> </ul>
		2.6	<ul> <li>Evaluate own performance, including:</li> <li>Areas of strength.</li> <li>Areas for improvement.</li> <li>How these areas will be improved.</li> </ul>



#### **Endorsement Requirements**

Candidates should be **taught** all of the following methods of non-laser tattoo removal.

Candidates should be **assessed** and **endorsed** for at **least one** of the following methods of non-laser tattoo removal.

All endorsements will appear on the unit certificate.

#### Non-Laser Tattoo Removal Methods – At Least One of the Following:

- Dermabrasion Tattoo Removal.
- Salabrasion Tattoo Removal.
- Acid Tattoo Removal.
- Saline Tattoo Removal.
- Alkaline Tattoo Removal.



#### **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 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, across four treatments 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

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.





#### **ProQual Awarding Body**

ProQual House Unit 1, Innovation Drive Newport, Brough HU15 2GX

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