



# G22

Monitor procedures and safely control work operations

# TRAINING MANUAL

# Body analysis

Assessing the client & preparing service plans – Pg 193

Consultation and plan for services

Through the consultation process you assess the needs of the client and ascertain the service. As a Level 3 beauty therapist you will be performing many different services. The objectives of these services will be generally:

- To improve skin condition and texture
- To improve contour and muscle condition
- To aid relaxation and reduce symptoms of stress.

Assessment techniques:

Often there may be an underlying cause not immediately obvious that will only become apparent through:

- Questioning (covered in lifestyle factors)
- Observation and diagnostic assessment
- Skin analysis
- Body figure analysis

Skin Analysis:

- Following facial cleansing, inspect the skin's surface using a magnifying lamp.
- For the body, body brush to do full body analysis.

Skin Tone:

- Healthy young skin will have good skin tone and be supple & elastic.
- Collagen and elastin fibres in the skin are strong.
- Skin loses strength with age.
- Collagen productions slows and elasticity is lost.
- Poor skin tone is recognised by the appearance of facial lines and wrinkles.

- To test skin tone?
- Pick cheeks up between two fingers and then let go.
- If tone is good, skin will spring back to its original shape.
- Longer it takes poorer skin tone.

#### Stretch Marks (striations):

- Stretch marks appear as long faint scars.
- Result of skin breaking beneath the surface in the dermal layer.
- They are permanent
- Caused by fluctuations in body weight as the skin stretches with weight gain. E.g. pregnancy.
- Commonly seen on the breasts, abdomen, inner upper arm and inner thigh.
- Services that improve skin tone through firming (micro-current) supported by the application of strengthening creams or oils.
- Pregnant or clients' with fine skin should be encouraged to keep skin supple with regular application of skincare emollients.

#### Remember!!

- If a client has stretch marks, services that stretch the skin further will be contra-indicated, e.g. vacuum suction and massage movements that stretch the skin.

#### Varicose Veins:

- An occupation requiring you to sit or stand for long periods may lead to varicose veins.
- This is where veins' valves have become weak and lost their elasticity.
- The area appears knotted, swollen and bluish/purplish in colour.
- Services that put pressure on weakened vein must be avoided.
- E.g. vacuum suction will be unsuitable.

#### Muscle Tone:

- Observe facial contours when the client is semi-reclined on the couch.
- Poor muscle tone will be recognised by slack facial contours.
- Service aim is to strengthen muscles by shortening them, which will tighten and firm the muscles and contours.
- Suitable services include facial electrical muscle stimulation (EMS) and Micro-current.
- Supported by facial exercises at home.

- Healthy diet, effective skincare and service plan will help to delay the effects of ageing.

## Consultation & Body Analysis

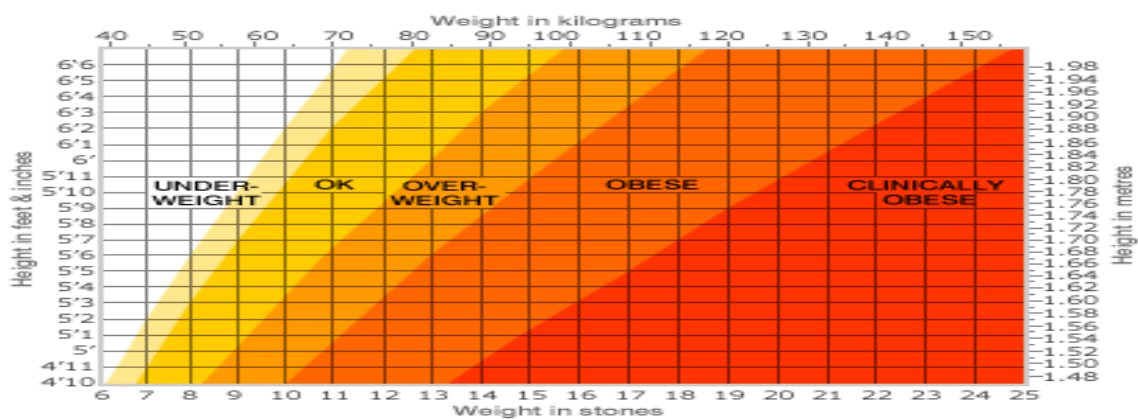


### BODY MASS INDEX

The body mass index (BMI) is a height- weight measure often used to determine if a client is overweight.

- Work out your height in metres and multiply the figure by itself
- Measure your weight in kilograms
- Divide your weight by your height square (which is the answer you get in the first step)

This is your BMI



Consultation- Pg 193

### VERBAL

The verbal consultation that you carry out for an electrical treatment should be more detailed than for a general treatment.

You must be able to match the correct treatments to the client's needs for the most effective results. All consultations will require the client's general details. There is other important information that you will need:



#### Personal details:

- Age / occupation / any children
- Weight / height
- Lifestyle / emotional state
- Frame size
- Body type                   \* This information would be noted
- Muscle tone                   after a visual assessment also.
- Skin condition
- Figure problems

#### Treatment Details:

- Areas to be treated
- Frequency and duration of treatments / course of treatments.
- Cost / time
- Clients needs and expectations; *weight loss, improved skin conditions, improved muscle tone, relaxation, general maintenance of health, stimulate circulation, lymphatic drainage.*

#### Treatment details:

- Past experiences with treatments
- Past experiences with dieting
- Homecare routine
- Realistic goals
- Measurements (faradic)
- Measurements:
  - Before embarking on a muscle toning treatment it is usual to take the measurements of the client to show progress during a course of treatments. Measurements should be taken from the fullest part of an area and recorded on the record card or treatment plan. To take accurate measurements each time, a measurement can be taken from a specific reference point such as a protrusion of a bone. Alternatively, advise your client to pick a particular item of clothing that they know to be tight and use this as a guide.
- Courses of treatments:
  - Most electrical treatments are more effective when part of a course of treatments over a specific time. Usually either once or twice a week, for six weeks. Remember there will be differences between face and body treatments. When a

client is following a course of treatments it is essential to record accurately, the result of each, feedback from the clients can be included.

- Skin sensitivity testing:
- The client's skin is tested to check that sensory nerve endings can sense sharp and blunt and hot and cold – some electrical treatments could damage a client's skin if they were not sensitive to these.
- Sharp and Blunt test
- Using the sharp end of an orange stick and the other end covered with cotton wool, ask the client to distinguish between the sharp end and the blunt end when placed on the skin. Do not let the client see you doing this!!
- Hot and Cold Test
- Two test tubes, one filled with cold water and the other with hot water. Again, randomly place each test tube on the client's skin and ask them to distinguish between the two. If test tubes are not available, wet cotton wool can be used.

### **BODY TYPES- Pg 199**

There are three main body types, but most people are a combination of these.

#### **ECTOMORPH**

Ectomorph:

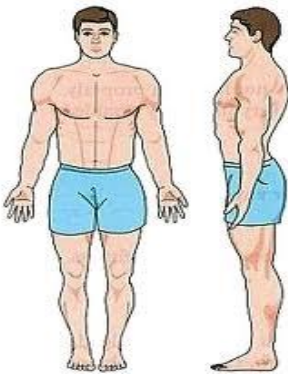
- Long, thin shape – often bones visible
- Narrow shoulders and hips
- Does not put on weight easily
- Low percentage of fat
- Minimal muscle bulk
- Lack of curves
- May be underweight



#### **Mesomorph:**

- Athletic, muscular build

- Well developed shoulders
- Slim hips
- Well defined muscles
- Low percentage of body fat
- Usually has no weight problems if active



**Endomorph:**

- Rounded, 'plump' shape
- Heavy build
- Higher percentage of fat to muscle bulk
- Adipose tissue evident on hips, abdomen, arms
- May be prone to weight accumulation.



- PLEASE NOTE:
- Specific target areas for service and figure correction will be common to each figure type.

**POSTURAL DEFECTS-Pg 203-204**

Posture varies from person to person and is

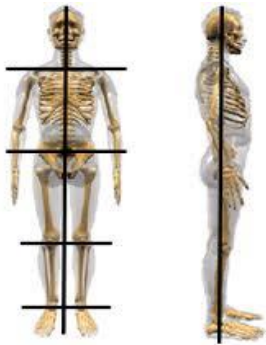
Affected by the client's: occupation, health,

Psychological state, muscular strength.

**Correct posture:**

- Head held up
- Arms loose at side of body
- Back held straight but not stiff
- Abdomen pulled in
- Hips held at the same level
- Bottom pulled in
- Feet – body weight equally distributed.

Observe client from front, side and back.



**Kyphosis:**

This is a curve to the thoracic region of the spine – often caused by having tightened pectorals from round shoulders, this also produces a forward tilt of the head (neck muscles lengthen). Also lengthening of the neck muscles may cause a double chin as the neck is allowed to relax.

**Lordosis:**

An exaggerated lumbar curve causing the bottom to stick out, which in turn, causes a shortening of the back muscles. The abdominal muscles become distended and stretched; this also forces the pelvis to tilt backwards. Quite often it is found to develop in ballet dancers and gymnasts.

**Scoliosis:**

Lateral curvature of the spine – either to the left or the right. It can be felt by following the vertebrae with the fingers, it can result in uneven height of shoulders and hips. – Causes include injury, bad postural habits (standing on one leg for too long), carrying heavy shopping permanently on one side.

**Muscle Tone:**

- Exercising a muscle causes it to become firm.



- Improves blood supply, responsiveness, and metabolism.
- Lack of exercise muscles become slack and opposite of above.
- Even when relaxed an exercised muscle will appear toned.
- Many services will require muscle to be toned.
- Client to physically exercise or passive exercise.

#### **Assessment of muscle tone:**

- **Abdominals:** Ask client to perform a sit-up, legs bent at knee from lying position. Feel strength in anterior abdominal muscles.
- Client standing, ask client to breathe in - the abdomen should become flatter, possibly concave.
- **Legs:** Client lying on back, ask client to perform leg raises, slowly lift one leg at a time feel quadriceps group.
- **Arms:** Client hold hand on shoulder, therapist move arm from position, feel upper arm strength, biceps and triceps.

#### **Body Fat:**

- Fat is stored in the subcutaneous layer of the skin and depends on weight of client.
- Will make difference to body shape as it is not always evenly distributed.
- Usually thighs and bottom in women.
- Upper back and abdominal region in men.
- Body fat can be measured by **Skin Callipers**.
- Used to pinch skin at selected points on the body
- Triceps, subscapula, biceps and suprailiac.
- Measurements obtained are then calculated to identify the percentage of body fat.
- **Hard fat:**
- Often difficult to disperse, solid to the touch and does not move. The skin appears smooth. Treatment for this condition needs to firstly break up the fat and then to make it available to the general circulation.

#### **Cellulite:**

- Term used to describe fatty tissue that causes the overlying skin to appear dimpled, like 'orange peel' in appearance.
- Common areas, thigh, buttocks, knee and triceps area.
- Causes – poor venous and lymphatic circulation, poor elimination of waste.
- Sedentary lifestyle, resulting weight gain. Low energy expenditure and sluggish circulation due to inactivity.



- Poor diet and metabolism problems due to hormonal imbalance.

**ASSESS:** Gently squeeze client's skin, small lumpy nodules will be seen. In advanced cases this will be obvious without squeezing.

**Services:** G5, micro-dermabrasion, vacuum suction, galvanic and micro-current.

**Fluid Retention:**

- Tissue fluid can accumulate, causing swelling (oedema).
- Therapist need to assess if this is medical or non-medical.
- Can occur if a person stands for too long.
- Before menstruation can affect abdomen and breasts.
- Also can be caused by allergies, diet with excessive processed foods, high salt intake, and insufficient water.

**Assess:** Press client's skin, if it remains indented and does not immediately spring back this is a sign of fluid retention.

**Weight:**

- Ideally weight at the same time and in same clothing.
- If not in underwear allow 1kg (2lbs) for outer clothing.
- Record weight on record card.
- Measure on chart.

**Height:**

- Measure height without shoes, heels together and back as straight as possible.
- Shoulders should touch wall.

**Measurements:**

- Measurement records provide evidence of inch loss.
- Performed before and after.
- For accuracy, take measurements from same place.
- Ideally fixed points. E.g. Any vertebrae, fixed bony points.
- Record on record card.

## G22 – Controlling Salon Operations

Human Resources – pg 161/2

HR are the people you have employed in the business and they should be working together to maximise the performance and income of the business. It is the employee's responsibility to complete their allocated duties and responsibilities to the best of their ability.

- All new staff should have an induction
- Each member of staff should have a job description
- All staff should know what is expected of them and where their responsibilities begin and end
- All staff should be familiar with the business grievance and disciplinary procedure
- They should also have personal productivity and development targets.

### **Stock – pg 166**

Stock is the amount of consumables for use on clients within salon services, plus retail products for client purchase.

One staff member should be responsible for:

- Ordering stock
- Maintaining stock records and levels
- Receiving incoming stock, checking deliveries for quality and discrepancy
- Unpacking stock and locating it in the correct storage / display area.

### **Ordering Stock**

- Stock can be ordered through wholesalers, sales representatives or direct to manufacturing company.
- An effective stock keeping checklist will stop you from over or under ordering
- Anticipate needs – stock must be ordered regularly so that it never runs out. Set minimum stock levels and regularly monitor these. Regularly i.e. sun creams will sell more in summer.
- Check incoming stock – always check against a delivery note when it arrives.
- Rotate stock – must be stored and used in rotation of first in and first out.
- Keep accurate records and up to date records – stock levels may be recorded manually or electronically.
- Point of sale systems – collect information concerning sales at the time the sale is made.
- Stock check systems – refer to the quantity of stock available.

### **Stock records need to show:**

- A description of product and size.
- How much is in stock
- What has been sold and used

- What has come in
- The minimum and maximum holding levels
- The point at which the product is to be recorded.

### **Unit G22 Monitor safe work operations**

**Pg. 101** When working in a service industry, you are legally obliged, in a supervisory capacity, to ensure a safe working practice is implemented to ensure the safety of yourself, clients and colleagues in the workplace.

#### **Keywords**

It is very important that you understand the following terms, as they will keep being used in this section.

**Antiseptic** – prevents the multiplication of micro-organisms.

**Bacteria** – minute single-celled organisms of various shapes.

**Contraindication** – a problematic symptom that indicates that treatment may not proceed.

**Cross-infection** – the transfer of contagious micro-organisms.

**Disinfectant** – a chemical agent that kills most micro-organisms.

**Hazard** – something with potential to cause harm.

**Risk** – the likelihood of a hazard's potential being recognised.

#### **Learn how to check that health and safety instructions are being followed by:**

- Keeping up to date with health and safety regulations
- Conducting your monitoring at agreed intervals
- Checking that worker health and safety competence is up to date
- Checking that all peoples health and safety training needs have been met
- Effectively communicating workplace instructions and obtain feedback
- Responding promptly to any breaches of health and safety instructions
- Maintaining records relating to health and safety matters that comply with legal and workplace requirements, and that they are accessible to those authorised to use them

#### **Learn how to control risks to health and safety by:**

- Keeping accurate and legible records of workplace risks identified and those reported
- Reporting the existence of hazards according to workplace instructions
- Agreeing appropriate precautions to control the risks in accordance with workplace instructions

- Checking other people are aware of the risks and the action to be taken to minimise them
- Reviewing the operational controls to make sure that workplace hazards are eliminated or controlled
- Reporting any conflicts which exist between workplace and legal requirements to the health and safety people
- If you put your client at risk or cause them harm then you will be held legally responsible and would be liable to prosecution.
- There are many legislations relating to health and safety that you will need to know.
- Codes of practice are available from the hair and beauty industry authority (habia) providing the guidelines and requirements approved for this industry. ([www.habia.org](http://www.habia.org))
- **Health and Safety at Work Act (1974) Pg 103**

This is the main piece of legislation to ensure that the minimum standards of health and safety are carried out in the workplace and is continually reviewed.

It requires:

- The employer to display the legislation clearly for all employees to see
- A written health and safety policy if there are more than five employees in the business
- Risk assessment records and guidance to be kept
- All employees to know the fire evacuation procedures and be displayed
- Clearly displayed Public Liability insurance certificate
- **Health and Safety (Information for employees) Regulations (1989)**

These regulations require the employer to provide employees with health and safety information in the form of posters, notices and leaflets. These tell employees what action to take if a health and safety problem arises and employment rights.

Each employer of more than five employees must formulate a written health and safety policy for their business. It should include items such as:

- Each employees health and safety responsibilities
- Details of the storage of chemical substances
- Details of the stock cupboard or dispensary
- Records of the checks made on electrical equipment by a qualified electrician
- Escape routes and evacuation procedures
- **Risk assessment**

It is the employer's responsibility to carry out regular risk assessments under The Management of Health and Safety at Work Regulations (1999).

Employers need to:

- Identify potential hazards
- Assess the potential risks associated with the hazard
- Identify how risk is to be minimised or eliminated
- Set up emergency procedures
- Train staff to identify and control risks
- Regularly review the risk assessment process
- **Legislations**
- **1992** – which requires special protective clothing or equipment to **Other applicable legislations**
- **The Personal Protective Equipment (PPE) at work regulations** is worn.
- **Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995** – this requires those with a position of control in the workplace to report cases where employees or trainees suffer personal injury at work resulting in three or more consecutive day's absence.
- **Manual Handling Operations Regulations 1992** – the employer must carry out a risk assessment of all activities undertaken which involved manual lifting and provide clear guidelines for employees.
- **Electricity at Work Regulations 1989** – every piece of electrical equipment in the workplace should be tested every 12 months by a qualified electrician and a written record retained.
- **Control of Substances Hazardous to Health (COSHH) Regulations 2003** – employers are responsible for assessing the risks from hazardous substances and controlling exposure to them to prevent ill health. All substances identified as hazardous must be clearly labelled and stored and handled correctly.
- **Reach 2007** – is a European Union Regulation concerning the Registration, Evaluation, Authorisation and Restriction of Chemicals and operates alongside COSHH.
- **Cosmetic Products Safety Regulations 2004** – it requires all cosmetics and toiletries to be safe for their intended purpose and comply with labelling requirements.

Health & Safety Acts	Key Points of regulations
<b>Health &amp; Safety at Work Act 1974</b>	<p><b>* It lays down the minimum standards of health &amp; safety required in the workplace</b></p> <ul style="list-style-type: none"> <li>• <b>That equipment be safe and in good repair.</b></li> <li>• <b>It is the employer's responsibility to make sure the act is implemented.</b></li> </ul>

	<ul style="list-style-type: none"> <li>The policy must be issued to each employee and outline their safety responsibilities.</li> </ul>
Personal Protective Equipment at Work Regulations 1992	* Managers to identify through risk assessment, activities which require protective clothing or equipment to be worn.
Workplace (Health & Safety and Welfare) Regulations 1992	* Maintaining a safe, healthy and secure working environment – maintenance of workplace and equipment, working temperature, lighting, cleanliness, safe salon layout, washing facilities, drinking water, facilities for staff to rest etc.
Health & Safety (Display Screen Equipment) 1992	<ul style="list-style-type: none"> <li>* Regulations cover the use of visual display units and computer screens.</li> <li>* Identify correct posture, seating positions and rest periods.</li> </ul>
Health and Safety (information for Employees) Regulations 1989	<ul style="list-style-type: none"> <li>* Employer has to provide employees with health &amp; safety information in the form of posters, notices, leaflets</li> <li>* The Health &amp; Safety Executive provides relevant publications</li> </ul>
Control of Substances Hazardous to Health Regulations (COSHH)	<ul style="list-style-type: none"> <li>Assessing the risks from hazardous substances.</li> <li>All hazardous substances must be clearly identified</li> </ul>

Re-cap questions

How do you ensure staff are kept informed and follow health safety procedures?

- A:
- \* Health & safety is put on the agenda at staff meetings
  - \* Current health & safety posters are displayed
  - \* Ongoing training and updating is provided for all staff in health & safety

Q: List three health & safety regulations that can be displayed.

- A:
- \* Fire evacuation procedures
  - \* Health & safety regulations 1989
  - \* Public Liability Insurance certificate
  - \* Risk Assessment Records & Guidance

Q: Give four induction activities to be covered with each staff member.

- A:
- \* Know the fire evacuation procedure in the event of a fire.
  - \* COSHH guidance
  - \* Manual Handling best practice techniques
  - \* Understand the work place health & safety policy
  - \* Know who to inform if there is a health & safety hazard

Q: Name four environmentally friendly working practices that could become salon policy.

- A:
- \* Use biodegradable packaging
  - \* Use recycled consumables materials
  - \* Switch off lights in rooms not being used
  - \* Recycle all waste and packaging
  - \* Turn down the heating thermostat

### **Hazard checklist**

Answer the following questions:

- Does any product that you use have a hazard symbol?
- Does any procedure you provide produce a hazardous substance? i.e. dust or fumes?
- Can the substance enter the body in any way?
- Currently is there a risk of injury or harm in how you use a product?
- What action would you need to take to make the usage safe and reduce the risk?





### Activity – Hazards

List all the potential hazards / health & safety risks that could occur from the following equipment and treatments in the salon

- Wax machine
- Applying artificial nails
- Coffee percolator
- Eyelash tinting
- Facial micro current machine.
- Applying make-up
- Wastepaper bin

#### Wax Machine

- Burns to the client
- Cross infection
- Damaged equipment may harbour germs
- Trailing wires may result in trips/falls

#### Applying Artificial nails

- Fumes may become toxic to therapist and client if there is inadequate ventilation
- Client / therapist may become dizzy / feeling nauseous if over exposed to nail products

#### Coffee Percolator

- Fire hazard if not monitored regularly – if water dries up
- Burns to therapist / client – if not stored properly.
- Trailing wires may result in trips / falls

#### Eyelash Tinting

- Over use of products may enter client's eyes

- Client may be allergic to tint if no patch test is carried out before.

#### Facial Micro current machine

- Electric shock to client / therapist
- Cross infection
- Faulty machine may be a fire hazard

#### Applying make-up

- Cross-infection through make-up and brushes if not sterilised.
- Cross-infection and secondary infection between the client & therapist if a skin disease is not diagnosed or poor hygiene practice of the therapist.

#### Wastepaper bin

- Fire hazard if rubbish is allowed to build up.
- Fire hazard if burning candles nearby.
- Cross-infection if rubbish is allowed to build up.

#### Re-cap test

What are your responsibilities under the following legislations?

**\* The Health & Safety at Work Act**

A: It lays down the minimum standards of health & safety and welfare required in each area of the workplace. It is the employer's responsibility to implement the act and to ensure the workplace is safe for both employees and for clients.

**\* The Workplace (Health & Safety and Welfare) Regulations 1992**

A: It requires all at work to maintain safe, healthy and secure working environment, i.e. maintenance of the workplace and equipment, ventilation, working temperature, lighting, etc.

Q: **What does the abbreviation COSHH stand for?**

A: Control of Substances Hazardous to Health

Q: **List five potentially hazardous substances that can be found in a salon.**

A: Aerosols, disinfectants, chemicals used in spa pools, artificial nail glues / adhesives, dust created from treatments such as nail extensions.

Q: **What is the procedure for dealing with an accident in the workplace?**

A: It must be recorded on a report form and entered in accident book. The report form must contain the date and time of accident, name of the person or people involved, accident details, injuries sustained, action taken, what happened to the person immediately afterwards, name and signature of person providing treatment.

**Q: How should a large box be lifted from floor level when being placed onto the work surface?**

A: Lifting from the knees, not from the back. Balance weights evenly in both hands and carry heaviest part nearest to your body.

**Q: What first aid procedures should all employees be informed of?**

A: Where to locate first aid box. Who is responsible for the maintenance of the first aid box. Which staff member inform in the event of an accident or illness occurring. To know who is the staff member to inform in the event of an accident or emergency.

**Q: What type of fire fighting equipment should be used on a liquid fire?**

A: Foam extinguisher.

**List four ways in which infection can be transferred in the salon.**

- A: \* Implements not sterile
- \* Not washing hands between treatment
- \* Unclean towels and bedding
- \* Unclean equipment / work surfaces / floors
- \* Not wearing protective clothing when required.

**Q: List four infectious skin diseases and their appearance that would prevent you treating a client in the salon.**

- A: \* Scabies – animal parasites, burrows beneath the skin and invades hair follicles.
- \* Head Lice – small parasites infest scalp hair. Eggs are laid, attached to hair close to the skin.
- \* Athlete’s foot – fungal foot infection. Small blisters form which burst, then skin becomes dry and gives scaly appearance.
- \* Body ringworm – fungal infection of the skin. Small scaly red patches, which spread outwards and then heal from the centre, leaving a ring.
- \* Impetigo – inflammatory disease on the surface of the skin. Skin appears red & itchy. Blister appear then burst and form into crusts.
- \* Other answers could be conjunctivitis, boils, carbuncles.

**Describe two skin disorders that can benefit from treatments in the salon.**

- A: \* Acne Vulgaris – regular salon treatments may be given to cleanse the skin deeply and also stimulate the blood circulation.
- \* Comedones or blackheads – a regular cleansing treatment should be recommended to the limit the production of comedones.

\* Milia – may be removed by the therapist using a micro-lance (sterile needle) to pierce the skin of the overlying cuticle and free the milia.

**Q: List five allergens known to cause allergic skin reactions in some people.**

**A:** \* Metal objects, rubber, lipstick containing eosin dye, nail enamel containing formaldehyde resin, hair and eyelash dyes, lanolin, detergents, foods such as nuts, strawberries, milk and shellfish, plants

**Q: What do you understand by the term sterilisation?**

**A:** Sterilisation is the total destruction of all living micro-organisms

## Industry Standards

### Personal health and hygiene Pg 120

Beauty therapists should always reflect the desired image of the profession they work in.

- Clean pressed uniform.
- Attractive subtle make-up .
- Hair tied up off the face.
- Short un-polished nails.
- Minimal jewellery such as a wedding ring.
- Flat comfortable shoes.



Women's tunics

Good health and personal hygiene gives a good impression to clients and allows you to do your job properly.

- A health balanced diet, regular exercise and adequate sleep.
- Correct posture enables you to work longer and prevents muscle fatigue.
- Body cleanliness from daily showers and using deodorant.
- Fresh breath – regularly freshen breath when working with clients
- **Good hygiene in the salon**
- **Washing hands** – regularly throughout the day and also before and after treating each client to prevent the spread of germs and cross-infection in the salon.

- **Working surfaces** – disinfect all working surfaces daily.
- **Gowns and towels** – freshly laundered gowns and towels should be provided for each client.
- **Dirty laundry** – should be placed in a covered container.
- **Floors** – cleaned daily .
- **Waste** – disposed of in accordance with COSHH regulations.

### Sterilisation and disinfection

**Sterilisation** – the total destruction of all living micro-organisms in metal tools and equipment.

**Disinfection** – the destruction of most living micro-organisms in non-metal tools, equipment and work areas.



Automatic medical autoclave

The autoclave is the most effective method for sterilising objects in the salon. It is similar to a pressure cooker; water is boiled and because of the increased pressure it reaches a temperature of 121 – 134°C.

The beauty therapist must be able to distinguish a healthy skin from one suffering from any skin disease or disorder. Certain skin disorders and diseases **contra-indicate** a beauty treatment which could risk cross-infection.

**Impetigo** – an inflammatory disease of the surface of the skin.



Impetigo

**Conjunctivitis** – inflammation of the mucous membrane that covers the eye and lines the eyelids.



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Conjunctivitis or pink eye

**Furuncles or boils** – red painful lumps, extending deeply into the skin.



DR A L WRIGHT

Boil

**Herpes simplex or 'cold sore'** – inflammation of the skin in localised area being red and itchy.



DR M H BECK

Herpes simplex

**Verrucae or warts** – small epidermal skin growths which may be raised or flat depending upon their position.



DR A L WRIGHT

Verruca



DR M H BECK

A wart

**Scabies** – a condition in which a tiny mite parasite burrows beneath the skin and invades the hair follicles



Scabies burrow

**Tinea pedis or athlete's foot** – a common fungal foot infection.



Tinea pedis or athlete's foot

**Psoriasis** – patches of itchy, red, flaky skin, the cause of which is unknown.



Psoriasis

**Eczema** – inflammation of the skin caused by contact, internally or externally with an irritant.



Eczema

- **Dermatitis** – inflammatory skin disorder in which the skin becomes, red, itchy and swollen. There are two types of dermatitis:
- **Primary** – when the skin is irritated by the action of a substance upon the skin leading to inflammation
- **Allergic contact** – caused by the intolerance of the skin to a particular substance or group of substances

Can be an occupational hazard of hairdressers due to the hazardous chemicals used and the hands being in water for long periods.



Contact dermatitis on the hands

Cellular naevi are skin conditions in which changes in the cells of the skin result in skin malformations.

## Accidents

Accidents in the workplace usually occur through negligence by employees or unsafe working conditions. They must be recorded in an accident book detailing:

- The date and time of the accident
- The date of entry into the accident book
- The name of the person or people involved
- The accident details
- The injuries sustained
- The action taken
- The signature of the person making the entry
- **Environmentally friendly working practices Pg 115**

Consider the following changes to staff working practices:

- Use biodegradable packaging for disposal of non-contaminated waste
- Dispose of chemicals safely, not down the sinks
- Use recycled consumable materials where possible, i.e. tissues, cotton wool
- Switch off lights and equipment in rooms not being used
- Turn down the heating thermostat
- Buy in bulk and buy locally
- Recycle your waste and packaging
- Use light bulbs that minimise energy use

**Small steps can make a big difference**

## First aid



## First Aid

- Should only be given by a qualified first-aider.
- A first-aid certificate is only valid for 3 years from training and must be renewed with additional training.
- Know what action you can take within your responsibility in the event of an accident occurring.
- An accident book should be available to record details of any accident that has occurred.
- **Fire**

The Fire Precautions Act 1971 states that all staff be aware of and trained in fire evacuation procedures for their workplace.

- A regular fire drill should be carried out.
- Suitable fire detection equipment should be in place, e.g. Smoke alarm.
- Fire exit doors must be clearly marked and free from obstacles.
- Fire fighting equipment should be available and maintained.

Which Extinguisher to use	Flammable Solids (A)	Flammable Liquids (B)	Flammable Gases (C)	Flammable Metals (D)	Electrical Hazards
Water	Red				
Water with Additive	Red				
Spray Foam	Yellow	Yellow			
ABC Dry Powder	Blue	Blue	Blue		Blue
Dry Powder Special Metal				Blue	
Dry Powder Special Monnex		Blue	Blue		Blue
CO <sub>2</sub> Gas		Black			Black
Hose Reels	Red				
Wet Chemical	Yellow				

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For Alcohol fires use Alcohol Resistant Foam, CO<sub>2</sub> or Dry Powder  
Causes of fire and choice of fire extinguishers

**Q: What does the Health & Safety First Aid Regulations 1981 state?**

**A:** That workplaces must have first aid provision; an adequately stocked first aid kit should be made available with the minimum level of first aid equipment.

**Q: What action should be taken if an employee suffered from a chemical burn?**

**A:** Avoid contaminating yourself with the chemical.

Remove any contaminated clothing that is not stuck to the skin.

Flush with cool water for 10-15 minutes.

Apply sterile dressing and send to hospital

**Q: What does the Fire Precautions Act 1971 state?**

**A:** That all staff must be trained and aware fire and emergency evacuation procedures for their workplace. Fire drill notices should be visible to show the emergency exit route.

**Q: What should fire blankets be used for?**



A: To smother a small localised fire, or if a person's clothing is on fire.

**Q: In Health & Safety requirements what should fire exits look like?**

A: Fire exit doors should be clearly marked and remain unlocked during working hours, and be free from obstruction.