THE HEE REPORT:

THE IMPLICATIONS OF NEW GOVERNMENT QUALIFICATION STANDARDS FOR BEAUTY THERAPISTS AND NON-MEDICAL AESTHETIC PRACTITIONERS

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Introduction

On January 8th 2016 the Department of Health published the Health Education England Report outlining a new framework of qualifications from Levels 4 – 7 relevant to all beauty therapists working, or looking to work, in the clinical skin care sector. While the recommendations of this publication represent an element of change which is always disconcerting, it is important to emphasise its importance. Not only does it seek to assure client safety but equally it should be regarded as being vital to the future status and reputation of advanced beauty therapists offering clinical grade skin rejuvenation treatments and light therapies within the medispa sector.

In this document we will try to answer some of your most pressing questions.

Who or What is Health Education England?

- Established in 2012, HEE is a Non-Departmental Public Body working under the provisions of the Care Act 2014
- The HEE Focus is to provide leadership for education and training to support improvements in the care, safety and protection of clients or patients receiving non-surgical cosmetic interventions and advanced skin treatments
- HEE was appointed by the government in 2013 following the Keogh Report triggered by the PIP breast implant scandal with the brief to recommend new qualification requirements for the UK’s aesthetic industry: surgical, non-surgical, medical and non-medical
- The reports were published on January 8th, 2016 by the Department of Health and represent a programme of work carried out by HEE between October 2013 and April 2015
**Who compiled the report and its recommendations?**

The new qualification framework is not a notional document written by a government minister. It is an industry driven report based on consultations with an Expert Reference Group and Advisory Groups drawn from all levels of aesthetic industry professionals, regulatory bodies and related health professions. Among others, the specialist areas of the sector represented in the consultation processes include:

- Health Education England (HEE)
- The Keogh Review Committee
- The Royal College of Surgeons (RCS)
- The British Association of Aesthetic Plastic Surgeons (BAAPS)
- The British Association of Dermatologists
- The British College of Aesthetic Medicine (BCAM)
- The British Association of Cosmetic Nurses (BACM)
- The Private Independent Aesthetic Practices Association (PIAPA)
- The British Medical Laser Association (BMLA)
- The Faculty of General Dental Practice (FGDP)
- The British Association of Beauty Therapy and Cosmetology (BABTAC)
- The Hair and Beauty Industry Authority (HABIA)
- The Federation of Holistic Therapists (FHT)
- The Chartered Institute of Environmental Health (CIEH)
- Independent industry professionals / treatment providers
- Training providers
- Qualification awarding bodies
- Insurance companies

The full list of all contributors can be found within the full publication.

**Which treatments are covered in the HEE Report?**

The principle treatment genres covered in the HEE report are grouped as follows:

- LIPLED – Laser, IPL and LED
- CPSR - Chemical Peeling and other modalities of Skin Rejuvenation treatment including microneedling and mesotherapy
- BT - Botulinum Toxin
- DF - Dermal Fillers
- HRS - Hair Restoration Surgery
There are a lot of advanced treatments not mentioned above. Are these exempt from the qualification guidelines?

HEE have flagged up a number of treatments which were considered outside of its immediate scope but which are scheduled for review under the qualification framework. These are referred to in the report as ‘Orphan Treatments’ and include:

- Blemish Removal / Advanced Electrolysis
- Cryotherapy for Blemish Removal
- Tattooing / Micro-pigmentation
- Radio Frequency
- Ear and Body Piercing
- Carboxytherapy
- Ultrasound
- Cryolipolysis

The report has sectioned different elements of the treatment groups into Levels 4 – 7. What determines the level of the qualifications?

The different levels of learning were originally defined by the Qualification Curriculum framework or QCF, which was an affiliated body to OFQUAL. The levels reflect an upward sliding scale in the advancement of the complexity and depth of the knowledge or skill being learned, the teaching and learning styles employed and modalities of assessment. In respect of the HEE qualification framework, the procedures covered have been aligned to Levels 4 – 7 in accordance with:

- The complexity and risk level of different treatments
- The depth and complexity of the corresponding knowledge and skill requirements which have been identified to ensure patient/client safety and high standards of care
- The learning style and modes of assessment within the training programme

Is there something I can compare these levels to?

Yes see the examples below:

**Level 2** - GCSEs level / NVQ Level 2  
**Level 3** - A’ Levels / NVQ Level 3 / BTEC National Diploma  
**Level 4** - First year foundation degree  
**Level 5** - Second year foundation degree  
**Level 6** - Graduate level / third year degree  
**Level 7** - Post graduate level e.g. Medical degree / nursing degree
Do I have to go to university to get these qualifications?

No. HEE is very specific in saying that you can complete all levels of qualification with any accredited training provider – university, college of higher education or private provider. However, the courses must be accredited by an OFQUAL recognised awarding body or university and taught and assessed by appropriately qualified educators, assessors and clinicians.

Which treatments will I need to become qualified in and to what level?

The following charts outline which treatment procedures you will be able to provide at each level:

**LEVEL 4**
Foundation Degree Year 1 Level

<table>
<thead>
<tr>
<th>LIPLED</th>
<th>Use lasers and IPL for hair removal/reduction (excluding treatments within periorbital rim)</th>
</tr>
</thead>
<tbody>
<tr>
<td>LIPLED</td>
<td>Use non ablative lasers, IPL and LED for photorejuvenation including sun induced benign dyschromia (excluding treatments within periorbital rim)</td>
</tr>
<tr>
<td>LIPLED</td>
<td>Use LED for clinically diagnosed acne vulgaris</td>
</tr>
<tr>
<td>CPSR</td>
<td>Deliver ≤0.5mm microneedling with manual device</td>
</tr>
<tr>
<td>CPSR</td>
<td>Deliver very superficial chemical peels to the level of the stratum corneum</td>
</tr>
</tbody>
</table>

Common Themes / Shared Modules

**LEVEL 5**
Foundation Degree Year 1 Level

<table>
<thead>
<tr>
<th>LIPLED</th>
<th>Use laser treatments for tattoo removal (excluding treatments within periorbital rim)</th>
</tr>
</thead>
<tbody>
<tr>
<td>LIPLED</td>
<td>Use laser and IPL treatments for benign vascular lesions (excluding treatments within periorbital rim)</td>
</tr>
<tr>
<td>CPSR</td>
<td>Deliver 0.5-1.0 mm microneedling with manual device</td>
</tr>
</tbody>
</table>

Common Themes / Shared Modules
### LEVEL 6
Graduate or Degree Level

<table>
<thead>
<tr>
<th>LIPLED</th>
<th>Use laser and IPL treatments for generalised and discrete pigmented lesions (excluding treatments within periorbital rim)</th>
</tr>
</thead>
<tbody>
<tr>
<td>LIPLED</td>
<td>Deliver ablative fractional laser treatments (excluding treatments within periorbital rim)</td>
</tr>
<tr>
<td>CPSR</td>
<td>Deliver mesotherapy with/without homeopathic topical treatment</td>
</tr>
<tr>
<td>CPSR</td>
<td>Deliver superficial chemical peels to Grenz zone</td>
</tr>
<tr>
<td>CPSR</td>
<td>Deliver ≤1.5mm microneedling with manual device, ≤1.0mm power assisted microneedling and ≥1.5mm microneedling for non facial areas</td>
</tr>
</tbody>
</table>

Subject to oversight of clinical professional

Common Themes / Shared Modules

### LEVEL 7
Post Graduate Level - MEDICAL

| LIPLED | Deliver fully ablative skin treatments (ie nonfractional resurfacing)  
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Deliver laser treatments of any sort within the periorbital rim</td>
</tr>
<tr>
<td></td>
<td>(excluding treatments on or within the eyeball)</td>
</tr>
<tr>
<td>CPSR</td>
<td>Deliver mesotherapy with pharmaceutical strength topical agents</td>
</tr>
<tr>
<td>CPSR</td>
<td>Administer full face phenol peels and injection lipolysis into superficial fat</td>
</tr>
<tr>
<td>CPSR</td>
<td>Deliver medium depth chemical peels and localised phenol peels</td>
</tr>
</tbody>
</table>

Common Themes / Shared Modules

**What is meant by ‘Subject to clinical oversight at Level 6’?**

The requirement of clinical oversight for treatments falling within Level 6 provision represents the recommendations of the Keogh Review which supports INCLUSION NOT EXCLUSION. In other words this represents a means by which non-medical practitioners, such as beauty therapists, can provide paramedical treatments within a supported clinical environment.
This needs to be seen as a positive move to provide therapists with the support of a medical professional for issues of questionable suitability for treatment, deeper wound healing, infection, adverse skin reactions, the provision of prescriptive medication if indicated and emergency situations.

The implementation of clinical oversight is to be reviewed but it does not mean that a medic needs to be present in your clinic full time, but rather that they will act as your mentor / medical director to whom you can refer. Not only will this assure client safety but, equally, it provides both your present and potential clientele with a very positive professional message.

Why are training courses provided by product or equipment suppliers no longer enough?

The HEE is very clear that supplier driven training is no longer adequate as the principle training vehicle. Much product or equipment training is excellent but standards are not consistent, courses are not properly structured or assessed and trainers are not always qualified teachers, assessors or clinicians.

The curriculum development and training delivery for an accredited qualification is an entirely more rigorous and robust programme of learning.

Can my previous training be offset against an accredited course so that I can avoid repeating elements of training and experience I already have?

The answer to this is yes, as long as we are comparing like for like. The Accreditation of Prior Learning (APL) and the Recognition of Prior Learning (RPL) are standards practices in education. However because supplier driven training, against which we are normally trying to make the comparison, does not evidence the learning outcomes as a formally structured qualification does, it is very difficult, time consuming and expensive to do this.

Individual consultation would be needed to ascertain the possibility of APL against the HEE framework.

When do I need to gain higher level qualifications by?

The government has set the target for the attainment of the higher level qualifications by 2018. This means that over the next two years (at time of writing) therapists can continue to offer all treatments but should be working towards the appropriate level of qualification for the treatments they wish to continue to provide. This will mean that when 2018 arrives they will be fully compliant.
If these are recommendations, and not yet law, why should I take any notice?

Indeed the HEE report is based on recommended government standards. No legislation has yet been passed. The Department of Health has however recognised and endorsed the call for such legislation:

“Throughout our meetings, discussions and correspondence with stakeholders from all groups, professions and experts, the call has been for a new legislative framework. Taken together, our recommendations provide that framework for both surgical and non-surgical interventions.”

We can only, at present, speculate as to when or if the HEE qualification framework will become law. However, the pressure on individuals to become formally qualified to provide clinical skin treatments will come from other directions:

- The media
- Industry bodies
- Your business competitors who advertise they will only employ higher level qualified therapists – a potent message to the public.
- Employers who have the choice of higher qualified therapists against those qualified at only Level 3.
- Insurance companies – will you be able to get insurance and if so will your premiums go up because as a lesser-qualified practitioner you present a higher risk?

I do not have a Level 3 Beauty therapy qualification, can I still look to enter the aesthetic skin care profession?

The answer is, potentially, yes. HEE have set clear access pathways to enable individuals from various backgrounds to enter the aesthetic profession. These are the principle entry qualifications for entry at Level 4:

- 5 GCSEs at grade A – C including Maths, English and a Science

PLUS one of the following

- One A’ Level or equivalent + an Access / Foundation course
- Level 3 Beauty Therapy or equivalent
- Level 2 Beauty Therapy + Access / Foundation Course
- Level 3 in a Health Specialism + Access / Foundation Course
- Proof of Ability to study at Level 4 + Access / Foundation Course
- Accreditation of prior learning and experience + Access / Foundation Course
So how will all of this affect you?

Whether you are an individual beauty therapist, a clinic owner, an educator/trainer or have any related clinical role in the sector, these new standards are, sooner or later, going to affect your career prospects or the future of your business. In terms of job opportunities, the demand for higher level qualifications is inevitably going to be a pre-requisite moving forwards. Equally, once employers, particularly the larger clinic groups, begin to shout about the fact that they only employ Level 4+ beauty therapists, smaller businesses will be under pressure to give their clients the same assurance. The message here is not to allow your competitors to get ahead of you. Be seen to be at the top of your game and representing the best practices of our industry.

In Summary

The publication of the HEE report represents a positive way forward for our industry and for therapists around the UK who work ethically, knowledgably and skillfully and who wish to be fully valued and respected for the high quality services they provide. While we will no doubt never get rid of the ‘cowboys’ and ‘bargain basement’ mentality of some individuals, we can at least separate ourselves from their poor reputation and establish a higher echelon of professionalism that the public, and our peers in the aesthetics sector, will recognise.

INFORMATION SOURCES

To view the full HEE Reports Part One and Two


Free Webinar Recording

In January Sally Durant held a series of webinars explaining the HEE report and its implications. To get your free copy of this presentation go to the following link:

https://attendee.gotowebinar.com/recording/8185701713224409090

For Individual Advice

Make an appointment to speak to Sally Durant directly for advice on your specific situation by calling Caroline Walton on 01527 919880 or emailing her at enquiries@sallydurant.com