		Unit title	Unit Number
	Consultation Skills & Consent in Botulinum Toxin A 1B (Y/617/5321)		
Le	arning Outcome - The learner will:	Indicative Content	
1	Establish rapport with patients	Respectful of social, cultural linguistic considerations; explo (patient & clinician perspectives); puts the patient at ease: of appropriate language; verbal and non-verbal communic	body language; physical comfort; use
2	Present a professional approach to managing patients and their expectations	Adheres to legislation, guidelines, organisational policies a conduct; works within own area of competence and demo scope of practice; demonstrates positive professional appeatitude, presentation and organisation; refer on appropria depression, skin lesions; documentation & storage of healt protection regulations; uses personal protective clothing a	nstrates honesty and transparency re earance; demonstrates professional stely, concerns e.g. body dysmorphia, th records & GDPR/privacy/data
3	Assess patient capacity to provide valid consent for treatment	Determine patient's competency to understand the process; their capacity to provide valid consent; no external influences (coercion, drugs, alcohol etc.) using recognised guidelines.	
4	Undertake consultation including full medical, family & social histories	Patient concerns, expectations and desired outcomes; curred the counter medications, supplements etc; allergies; lifesty and extrinsic factors and social/occupational activities which pregnancy/breastfeeding status; age, general and specific relevance; planned surgeries/other treatments; psycho-social procedure; previous aesthetic experiences/reactions; use a Glogau, Fitzpatrick) to undertake assessment of the skin to need for additional information from other clinicians and here.	le choices (including relevant intrinsic ch may impact outcomes); medical and family history of cial history and reasons for seeking ppropriate skin assessment tools (e.g. b be treated and its ageing status; the

5	Discuss with patients the rationale for Botulinum Toxin A treatment and other options	Rationale for and cost of treatment and other options / available alternatives; recognising when treatment is inappropriate or not a 'best-interest' option; advises on the effectiveness of treatment options in relation to the evidence base; risks, limitations and benefits of the treatment; management of risks; likely follow-up interventions and intervals to maintain outcome; pain management and pre, during and aftercare requirements; required pretreatment procedures; treatment duration and required frequency for maintenance (including costs); confirming patient's knowledge and understanding of the procedure; provide additional information (verbal and written) where required; provide general skin and health advice; legislation of the acquisition of medication/medical treatment device; how to decline treatment.
6	Gain informed and valid consent from the patient for Botulinum Toxin A treatment	Obtain and document written consent; ensure the provision of a cool-off period prior to administration of treatment; documenting permission for pre- and post-photograph storage; permission or refusal for use of photographs/videos for promotional activities/educational purposes.

		Unit Number	
	Anatomy, Physiology & Assessment of the Ageing Face in Botulinum Toxin A 2B (R/617/5320)		
Le	arning Outcome - The learner will:	Indicative content:	
1	Understand facial anatomy and physiology	e facial* muscles and facial muscle vectors, i.e. zygomatic major, zygomatic minor, orbicularis culi, frontalis, procerus, depressor supercilli; the facial* vasculature; facial* artery & its anches; facial* nerves & branches; facial* fat compartments; blood supply. ncluding the neck, where applicable)	
2	Understand anatomy and physiology of the skin	Structure of the skin: epidermis, dermis and hypodermis; furthermos-regulation, UV protection, physical barrier, tensile	•

		and compressive quality; how facial muscles attach to the skin (SMAS); impact of facial expression on appearance; impact on appearance of dermatological condition, e.g. pigmentary lesions, acne, autoimmune conditions, dermatitis, psoriasis, rosacea, drug eruptions and scarring.
3	Understand the ageing process of the skin and the resultant changes in appearance	Intrinsic & extrinsic factors contributing to skin ageing; lifestyle factors impacting upon skin health & aesthetic appearance; consideration of facial ageing status and severity, including bone density and muscle changes, folds & lines, volume loss; causation of rhytides; impact of slower cell production and loss of elasticity; adipose changes; skincare and its importance in facial health/aesthetic.
4	Understand contra-indications and contra-actions that affect treatment	Ability to undertake a skin analysis and identify abnormal findings; contraindications of Botox; knowledge of referral pathways for abnormal findings and/or issues beyond the practitioners existing scope of practice; common skin reactions and rarer complications associated with treatment.
5	Research and review information on aesthetic solutions that inform best practice in Botulinum Toxin A treatment	Best practice in the administration of Botulinum Toxin A treatment; ways of addressing common challenges faced by practitioners; use a range of research methodologies; consult a range of sources of information and evidence within own field and scope of practice, including guidance as published by relevant Professional Statutory Regulatory Bodies, e.g. JCCP, CPSA etc.

	Unit title Unit Number		
	Pharmacology in Botulinum Toxin A Administration 3B (D/617/5319)		
Le	arning Outcome - The learner will:	Indicative content:	
1	Understand the mode of action of Botulinum Toxin A	The Botulinum toxin mode of action and neuromuscular sy internalization, blocking, sprouting and re-establishment of depolarisation, neuro-transmitters, synaptic machinery/pro	f sprouts; enzyme activation,
2	Understand different Botulinum Toxin A medications and devices	The structure of Botulinum Toxins; indications; Summary of documentation; safe storage, preparation and reconstitution appropriate dose range, syringe preparation; needle placed products and equipment; management of spillages/excess devices and interactions with the skin; excipients in relation	on, dilution and concentration, ment and depth; safe disposal of administration; biochemistry of
3	Understand legislation and operational policies in the administration of Botulinum Toxin A	Legislation pertaining to the acquisition and use of the me scope of practice; role and responsibilities of a prescriber; prescribed; unlicensed use of medicines/devices (including making,); guidance as published by relevant Professional S CPSA etc.	administering Botulinum Toxin A as the appropriate defensible decision-
4	Understand the contraindications, risks and adverse effects associated with botulinum toxin A administration and how to address them	Contraindications of treatment; risks associated with the contraindications of treatment; risks associated with the contraint of the contraint	na, facial paresis or asymmetry, aking, allergic reactions and

		Unit title	Unit Number
	The Safe Admini	istration of Botulinum Toxin A	4B (Y/617/5318)
Le	arning Outcome - The learner will:	Indicative content:	
1	Assess a patient and construct a treatment plan for the administration of Botulinum Toxin A	Conduct full consultation (refer to Unit 1 Consultation Skill Assessment of patient; use of suitable assessment tools for expertise, knowledge and understanding of the facial muscles application of the knowledge of the facial muscles of expresupercilli, depressor angularis oris, zygomatic major, zygomarrowing / atrophy; nasal scrunch and flare; platysmal bar indications in the glabellar, eye area (crow's feet) and forek upper lid, ability to make appropriate clinical decisions and enable onward referral where required; determine costs and	r facial rhytides; use of clinical cles of expression and facial rhytides; ession: frontalis, procerus, depressor natic minor and orbicularis occuli, nds, nasalis / upper lip; treatment nead muscles and lines, lower lid, d establish a clear treatment plan;
2	Agree a treatment plan for the administration of Botulinum Toxin A	Share treatment plan; gain valid and informed consent; sig disclaimer documentation; share and agree costs, treatmer achievable results and timeframes; indications and contrain complications and risks; requirements for after-care and copre-treatment photos with the patient (profile, oblique, late expressions); record care plan discussions.	nt expectations / limitations; ndications for topical anaesthesia; ontinuity of care. Obtain and share
3	Safely administer Botulinum Toxin A	Demonstrate a professional approach in the role; adhere to organisational policies and protocols and relevant codes of competence; seek advice where appropriate; demonstrate presentation and organisation; use personal protective close prepare necessary products and equipment for the proced	f conduct; work within own area of positive appearance, attitude, thing and equipment, gather and

		preparation); use of clean and sterile techniques; prepare the environment and patient for the procedure; apply standard precautions for infection prevention and control when preparing for and administering the procedure; apply knowledge to mark-up injection points; maintain safe margins; reconstitution of toxin in adherence with guidelines; administer the reconstituted toxin – depth, angle, dose; individualised adjustment as required; appropriate injection techniques in relation to skin breaches / tethering or anchoring / skin to needle time; check for adverse effects during and immediately post-procedure; take appropriate action to minimise discomfort; manage the reconstituted toxin safely – storage and dealing with toxin spillages and clinical waste safely; respond appropriately to emergency situations (allergy, anaphylaxis, arterial puncture etc).
4	Safely carry out post-administration procedures	Provide post-treatment advice and after care; risk mitigation and communicating expected outcomes; provide necessary post-treatment medicines / equipment; provide follow up instructions and interim strategies (including prompt reporting of adverse effects; when, why and how to contact the practitioner or other appropriate sources of advice and treatment); follow-up appointments; obtain and share post-treatment photos with the patient (profile, oblique, lateral; patient's range of facial expressions); apply standard precautions for infection prevention and control post-procedure; respond to any adverse reactions safely and professionally; onward referral where necessary; dispose of toxin and clinical waste items safely; document all relevant information (expiry, lot, diluent, date reconstituted, timed, dated, signed, printed, PIN) in accordance with professional standards and legislation; reporting of adverse incidents; contact patient's GP if appropriate, recognise undesirable outcomes and their causes – asymmetry, lid ptosis, ectropion, dry eye, malar oedema, diplopia, brow heaviness / drop, mouth drop, other complications; respond to any adverse reactions safely and professionally.
5	Maintain professional role and professional accountability in aesthetic practice	Practitioners' responsibilities and accountability in relation to current legislation, national guidelines and local policies and protocols; working within own areas of competence and

accountability to the patient, organisation and the public; when and how to seek advice when faced with situations outside your area of competence; extent of the action you can take, justification of actions taken, information you can give in relation to clinical issues; appearance and presentation, attitude and organisation; relevant codes of conduct; legislation regarding data protection, sharp instruments; patient rights; maintaining CPD in own areas of practice; application of research to inform best practice.