

The intention of the *Education Standards for S4OE Foundational Courses* is to provide an outline of the required elements of a S4OM recognized Foundational Course. A Foundational Course is meant to teach estheticians the basics of providing esthetics services in a safe, ethical, and appropriate manner for those diagnosed with cancer.

What is oncology esthetics?

Oncology esthetics stands as a specialized field within esthetics. With the objective of improving quality of life and skin health, this niche requires advanced education and training to safely meet the unique and changing needs of clients affected by cancer.

Oncology esthetics includes

- A thorough consultation to determine the client's current health status and service goals and preferences.
- Providing a skin care service that includes face, neck, shoulder, and décolleté massage and may include scalp, hand/arm, foot/leg, and back massage.
- Personalized skin care recommendations.
- Collaboration with allied healthcare professionals.

Instructor Standards

1. Current S4OE Preferred Practitioner
2. Minimum of 5 years professional esthetician practice or clear description of comparable experience
3. Minimum of 500 hours of hands-on oncology esthetics practice or clear description of comparable experience
4. Teaching experience must be demonstrated in **ONE** of the following ways:
 - a. Experience as a “teacher in training” in oncology esthetics with a current S4OE REP Organization
 - b. Educational or vocational teaching license/degree
 - c. Teaching experience including formal and/or informal instruction in the preceding three years

Foundational Course Curriculum Standards

- Course instruction must be a minimum of 24 hours
- Classes must include instructor supervision, feedback, and assessment
- Distance learning or self-paced classes that use only recorded webinars or textbooks do not meet Foundational Course Curriculum Standards

A. The Disease: Overview of Cancer

- a. Introduction to main types of cancer: carcinoma, sarcoma, and hematologic
- b. How cancer may manifest in the body
- c. Overview of metastasis

B. Introduction to Principal Cancer Treatments

Examples listed are not exhaustive

- a. Surgery: curative, preventative, diagnostic, palliative, restorative
- b. Medical oncology: chemotherapy, biologic or immunotherapy, targeted therapy, hormonal therapy
- c. Radiation: external beam, brachytherapy, proton therapy

C. Clinical Considerations: Esthetic Service Adjustments Related to Disease and Treatment Side Effects

- a. Esthetic service adjustments related to disease:
 1. Primary tumor site
 2. Metastatic sites
 3. Fatigue
 4. Pain
 5. Venous thromboembolism (VTE) risk
 6. Other common conditions: shingles, rash, cachexia, ascites, edema
 7. Skin changes: xerosis (dry skin), hair loss, hair growth, compromised

- b. Esthetic service adjustments related to treatment side effects:

Examples listed are not exhaustive

1. Surgery: incisions, infection risk, scar tissue
2. Medical oncology: peripheral neuropathy, nausea, HFS
3. Radiation: fatigue, skin reaction, fibrosis, ROM limitations

- c. Other considerations for massage therapy or esthetic service:

Examples listed are not exhaustive

1. Medications: supportive and preventative
2. Medical devices: ports, PICC lines
3. Blood counts: anemia, neutropenia, thrombocytopenia
4. Venous thromboembolism (VTE) risk
5. Lymphedema and risk of lymphedema
6. Late effects: secondary cancers, bone or organ damage

D. General Adjustments

- a. Being present to and accepting of the client's physical and emotional state
- b. Positioning for optimum safety and comfort
- c. Duration and frequency of each session
- d. Pressure and direction of strokes
- e. Quality of strokes: full hand contact, pace, rhythm
- f. Choice and use of safe and appropriate skin products
- g. Standard precautions

E. Administrative Considerations

Discussion of the importance of the following:

- a. Practice standards: detailed health history form and current intake, consent form, and session documentation
- b. Confidentiality and privacy concerns and regulations
- c. Scope of practice
- d. Building a referral and resource list

F. Clinical Learning Activities

Clinical Learning Activities (CLAs) include all instruction and practice of skills required for direct client care. These include hands-on esthetic service techniques, interviewing/intake, clinical decision-making, and verbal communication with clients. Instructors use a combination of demonstration, exercises, supervised practice, written assignments, case scenarios, and quizzes. In addition, a *comprehensive practical* is required.

The *comprehensive practical* is a full-length session based on the unique needs of each client, which allows students to apply and demonstrate the skills learned in the course. A full description can be found below in the Comprehensive Practical section.

A key element of CLAs is *instructor supervision*. Instructor supervision refers to ongoing interaction between instructors and students, with opportunities for students to ask and answer questions, receive direct instructor feedback and for the instructor to monitor student progress. The goal of supervised learning is for each student to experience individualized support in order to reach the learning outcomes. Supervised instruction may include verbal interaction, written assignments, written feedback, audio recordings, and video recordings. Live/synchronous supervision is required for CLAs, however, some may be delivered asynchronously.

All S4OE Foundational Courses, whether using virtual, in-person or a hybrid format, are required to provide CLAs, a comprehensive practical, and an evaluation of student clinical skills.

Comprehensive Practical

In the *comprehensive practical*, a student provides a full intake, full-length hands-on session with an *oncology client*. A Foundational Course must include at least one practical. The practical typically takes place near the end of the Foundational Course and requires the application of cumulative clinical skills.

For the purpose of the practical, an *oncology client* is a person age 18 or over who either has an actual history of cancer or plays the role of the client with a simulated history of cancer. If it is a simulated scenario, the client is referred to as a *simulated client*. In a simulation, the person playing the client role may be an acquaintance, colleague, or classmate.

The REP Organization Instructor may choose actual or simulated clients depending on teaching model, class settings, or circumstances.

Instructor responsibilities:

- Familiarity with each client's health history so as to (1) ensure a safe session and (2) provide individualized feedback to each student about their work with their client.
- In simulated client sessions, a realistic, comprehensive health history must be provided to the simulated client and the student. The instructor must adequately prepare the simulated client to ensure a realistic interviewing experience. This may include a script or answers to common intake questions.
- Approval of the treatment plan developed by each student. The plan must incorporate any necessary esthetic adjustments for the entire body.
- Debrief after the clinic experience with each student.
- Documentation of each student's completion of the comprehensive practical and the demonstration of skills.

Evaluation of Clinical Skills

Students should be able to demonstrate the following clinical skills:

- Thorough review of health history form
- Effective communication with clients:
 - In-depth interview and assessment of current client health status
 - Discuss adjustments to treatment plan
 - Address client questions
- Identify key information from intake to develop a client treatment plan
- Apply appropriate oncology protocols for common client presentations