7. Hand & Foot Care

Hand Care

7.1 What are work-related skin diseases?

Work-related skin problems are very common. They can happen in most workplaces although they happen more in certain **high-risk jobs**. They can be very costly, not just through the suffering individuals experience (which can lead to ending their careers), but also because they can be a burden for employers who are left with sickness absence, recruitment, training and compensation expenses.

7.2 What are work-related skin problems?

Work-related skin problems are caused or made worse by exposure to/coming into contact with substances such as chemicals, and also through having wet hands for long periods, while at work. **Dermatitis** (also known as eczema) is by far the most common, but **urticaria** and **skin cancer** are also problems.

7.3 What should I do about it?

The good news is that although these problems are common they are preventable. There are simple, cost-effective steps employers and workers can take to avoid skin problems at work, and to manage them if they do happen, using the Avoid, Protect and Check approach.

7.4 How does skin come into contact with chemicals?

- Immersing hands (sometimes legs) into chemicals
- Direct handling of contaminated work pieces
- Contact with contaminated surfaces (e.g. workbench, tools, clothing and containers)
- Splashing (e.g. when liquid or powdery chemicals are mixed or handled
- In deposits in the air
- Wet work (e.g. frequent hand washing)

Note on wet work

Prolonged or frequent contact with water, particularly in combination with soaps and detergents, can cause dermatitis (e.g. a long time spent washing up or frequent hand washing). 'Wet work' is the term used to describe such tasks in the workplace.

7.5 What are the high-risk jobs and workplaces?

- Catering
- Hairdressing
- Health services
- Dentistry
- Printing
- Metal machining
- Motor vehicle repair
- Construction

7.6 How do I prevent skin problems in my business?

- Some products contain substances that can harm the skin or enter the body through skin contact. The product label or material safety data sheet should tell you if this is the case. Look for hazard warning signs, risk and safety phrases.

- Not all harmful substances come in labelled containers. Substances can be generated during work activities (e.g. fumes). Remember that handling some 'natural' substances like foods and flowers can cause skin problems too. If you are unsure if a substance emitted from a work process or natural substance you are handling is harmful.

- Prolonged or frequent contact with water, particularly in combination with soaps and detergents, can cause dermatitis. 'Wet work' is the term used to describe tasks in the workplace that can cause this.
- If their work does involve skin contact like this you can take simple steps to reduce the risk and prevent skin problems.

7.7 What should I do?

Use the APC approach.

Avoid direct contact between unprotected hands and substances, products and wet work where this is sensible and practical, for instance:

- Get rid of the substance/product/wet work altogether.
- Substitute the product/substance for something less harmful.
- Introduce controls (such as tools or equipment) to keep a safe working distance between skin and substances/products/wet work.
- **See poster 1. Skin Contact** (the term safe working distance).

Protect the skin. Avoiding contact will not always be possible so:

- Provide suitable personal protective equipment such as gloves. This can be complex so there is advice on glove selection.
- Provide mild skin cleaning cream that will do the job and washing facilities with hot and cold water.
- Tell workers to wash their hands before eating and drinking, and before wearing gloves. Suitable cleaning systems exist for mobile workers.
- Remind workers to wash any contamination from their skin promptly.
- Provide soft cotton or disposable paper towels for drying the skin. Tell workers about the importance of thorough drying after washing.
- Protect the skin by moisturising as often as possible and particularly at the end of the day – this replaces the natural oils that help keep the skin's protective barrier working properly.
- Use suitable pre-work creams.

Check hands regularly for the first signs of itchy, dry or red skin:

- Regular skin checks will help spot the early signs of dermatitis or other skin problems caused by skin exposure
- The earlier that health effects are recognised and treated, the more likely it is that the sufferer will make a full recovery
- Checks can show whether an adequate standard of control is being maintained. They may give an early indication of lapses in control and a need to reassess the controls used

Finally, check regularly that all these actions are carried out in practice.

Individuals who suspect they may have a skin problem should visit their General Practitioner for advice and treatment if needed. The NHS also has useful information and advice on dermatitis, urticaria and skin cancer

7.8 Choosing the right gloves to protect skin: a guide for employers

Protecting against substances in the workplace

The most effective and reliable way to prevent skin problems is to design and operate processes to avoid contact with harmful substances. So take all the steps you can to achieve this before resorting to the use of protective gloves.

Protective gloves tend to be less effective than other control measures but if avoiding contact is impractical or is not enough to protect employees then gloves may be needed. When you

select protective gloves, base your choice on the work, the wearer and the environment they work in. You need to consider the following five factors:

- Identify the substances handled.
- Identify all other hazards.
- Consider the type and duration of contact.
- Consider the user - size and comfort.
- Consider the task.

Identify the substances handled

- Gloves differ in design, material and thickness. No glove material will protect against all substances and no gloves will protect against a specific substance forever.

Water/'wet work'

- Prolonged or frequent contact with water, particularly in combination with soaps and detergents, can cause dermatitis. 'Wet work' is the term used to describe tasks in the workplace that can cause this.
- To protect the hands from 'wet work' choose a glove that meets the European Standard EN374-2. This shows that the gloves are waterproof.

Substances in products, created by work processes and 'natural' substances

- **Substances in products.** Some products contain substances that can harm the skin or enter the body through skin contact. The product label or material safety data sheet should tell you if this is the case. These may also give information on what protective gloves to use. If this is missing then try contacting the product supplier or manufacturer for help.

- **Substances created by work processes and 'natural' substances.** Not all harmful substances come in labelled containers. Substances can be generated during work activities (e.g. wood dust from sanding, solder fumes). Remember that handling some 'natural' substances like foods and flowers can cause skin problems too. If you are unsure if a substance produced by a work process or a natural substance you are handling is harmful, you can get help from a variety of sources, e.g. your trade association or this website.

- To protect hands from substances/chemicals choose a glove that meets the European Standard EN374-3. But make sure the glove material you choose protects against the substances being handled.

- Glove manufacturers usually produce charts to show how well their gloves perform against different substances. Manufacturers use three key terms, breakthrough time, permeation rate and degradation:

- **Breakthrough time** is the time a chemical takes to permeate through the glove material and reach the inside. Permeation is a process by which a chemical can pass through a material without going through pinholes or pores or other visible openings. This tells you how long you can use a glove for.

- The **permeation rate** is the amount that then permeates through. The higher the rate the more of the chemical will move through the glove. Choose a low rate.

- Some chemicals can destroy the glove material. It may get harder, softer or may swell. **Degradation** indicates the deterioration of the glove material on contact with a specific chemical. Choose gloves with an excellent or good degradation rating.

- You can use manufacturers' charts to identify the best gloves for the chemicals being handled or glove manufacturers can help with this step.

- The performance of glove materials can vary slightly from manufacturer to manufacturer, so base your selection on the correct manufacturers' data.

- Keep in mind that the manufacturers' data is for pure chemicals, not mixtures. When you mix chemicals, their properties can change. As a rule of thumb, base your glove selection on the component in the mixture with the shortest breakthrough time. However, the only way to be absolutely sure that a glove performs well against the mixture is to have it tested.

- Some people develop an allergy to gloves made of natural rubber latex. Choose non-latex gloves unless there are no alternatives that give the protection needed. If you must use latex, choose low-protein, powder-free gloves.

Identify all other hazards for hands

- Identify any other hazards present. For example, is there a risk of, abrasion, cuts, puncture or high temperature? There are chemical protective gloves that also give protection against mechanical hazards (those marked EN388) and thermal hazards (those marked EN407).

Consider the type and duration of contact

- Will gloves be worn for a short time intermittently or for long periods? Comfort is more important for longer wear. Generally, thicker, robust gloves offer greater protection than thinner gloves but thinner gloves offer better dexterity.

- Will contact be from occasional splashes or by total immersion? Short gloves are fine to protect against splashes. If hands are immersed (and you can justify that this is unavoidable), choose a length greater than the depth of immersion.

Consider the user - size and comfort

- Gloves should fit the wearer. Tight gloves can make hands feel tired and lose their grip. Too large gloves can create folds; these can impair work and be uncomfortable. It can help to use sizing charts.

- Comfortable gloves are more likely to be worn. Involve employees in the selection process and give them a reasonable choice to pick from. This can sometimes promote buy-in to wearing them.

- Hands can sweat inside gloves making them uncomfortable to wear. Getting staff to take glove breaks, removing gloves for a minute or so before hands get too hot and sweaty, can help air the hands. You could also consider supplying separate cotton gloves to wear under protective gloves. These can increase comfort by absorbing sweat. They can be laundered and reused.

Consider the task

- Gloves should not hamper the task. If wet/oily objects are handled, choose gloves with a roughened/textured surface for good grip. Select gloves that balance protection with dexterity. Ensure the gloves selected meet any standards required for the task, e.g. sterile gloves, food grade gloves. Consider whether colour is important, e.g. to show up contamination.

- Once you have selected your gloves tell your employees how to use them properly to protect themselves. Tell them when they should be replaced, and if they are reusable gloves ask them to rinse them before removal (if practical) and tell them how they should be stored. Review their use periodically and get employee feedback, this can help check that the gloves are performing properly

7.9 Contact dermatitis

Identifying 'abnormal' skin can be straightforward but identifying the cause is more complex. It is helpful for health and safety and medical professionals to work together to establish whether the condition is work related.

The majority of work-related skin diseases are dermatitis. So, the first step is to establish whether the skin problem is dermatitis. This can be quite challenging for medical professionals since the appearance of both acute and chronic dermatitis can vary and it can be presented to the doctor at different stages. Also, there are some common skin conditions, which are confused with dermatitis: psoriasis, pustulosis of the palms and soles, tinea, scabies, lichen planus.

If the condition is dermatitis, the next question is whether it is constitutional or if it arises from contact with an external agent, i.e. contact dermatitis. An important clue is the site of the area affected. If it is the hands, contact dermatitis should always be suspected.

The final question is whether the 'contact' arises from work or from home. Medical practitioners will take a range of factors into consideration when making a diagnosis, including the site and spread of rash, history of onset, work done by the patient, hobbies and medications.

Some helpful clues to recognise a work-related cause are:

- if it is primarily on the hands and face;
- if the condition improves away from work and relapses on return;
- if more than one person affected in same work area or handling same materials.

There are two main types of work-related contact dermatitis, irritant contact dermatitis and allergic contact dermatitis.

Irritant contact dermatitis

An **irritant** directly damages cells if in contact with the skin in sufficient concentration and for sufficient time. Most irritants cause dermatitis by gradually overwhelming the skin's barrier and repair mechanisms. Mild irritants such as detergents will wash out the stratum corneum lipids and if exposure exceeds the capacity of the skin to regenerate those lipids, dermatitis will result. Powerful irritants - such as caustic soda - produce an immediate effect. These cause direct damage to keratinocytes. Dermatitis induced by mild irritants is called chronic or cumulative irritant contact dermatitis.
People vary in their susceptibility to irritants. For reasons not yet understood, certain groups of people are more susceptible to irritants:

- those with constitutional dermatitis/eczema (known as 'atopics');
- those with very dry skins;

In general, irritant contact dermatitis is more common occupationally than allergic contact dermatitis. There are a number of occupations and materials associated with irritant contact dermatitis. It is important to realise that contamination of the skin from a 'dirty job' rarely causes irritant dermatitis; it is more commonly the cleansers used to remove the contamination. The effect is exacerbated in winter by environmental factors (wind, cold) which cause drying of the skin. It is not unusual to see more cases of hand dermatitis in the winter and it is particularly important for employees at risk to know how to protect themselves during the winter months.

Examples of skin irritants and sensitizers, together with occupations where they occur

Example occupations	Examples of irritants
General manufacturing, Beauty, Healthcare	Alcohols
Food, Cleaning, Beauty, Healthcare	Disinfectants
Food, Cleaning, Beauty, Healthcare	Soaps & cleaning products
Food, Cleaning, Beauty, Healthcare	Wet work
Example occupations	**Examples of sensitizers**
Beauty, Product manufacture	Cosmetics & fragrances
Plating, Beauty, Engineering	Nickel
Construction, Beauty, Healthcare	Resins & Acrylates

Allergic contact dermatitis

Allergic contact dermatitis is caused by contact with a 'sensitizer' (allergen) that causes a type IV or 'delayed hypersensitivity' reaction. A sensitizer is a substance that can induce an 'over-reaction' of the body's immune system.
A sensitizer must first penetrate the skin (most contact sensitizers are small molecules with molecular weights below 1000). Next the sensitizer is combined with skin immune cells (Langerhans cells) which then leave the skin and travel to lymph glands nearby (known as induction). Here, they react with another type of immune cell (T-lymphocytes or T-cells), which reproduce and produce 'memory' cells that can remember that particular sensitizer.

Once sensitisation has occurred, subsequent contact causes T-cells to recognise the sensitizer and multiply. This induces the release of substances such as histamine that bring about the features of inflammation (known as elicitation). This second phase can happen hours or days following contact hence its name ‘delayed hypersensitivity’. Very small quantities of the sensitizer can trigger a response once sensitised.

There is a range in potency for sensitizers. The initiation of sensitisation may occur at the very first contact or it may not happen until there has been repeated contact for months or even years. The process of sensitisation produces no visible change in the skin.

Generally, only a small proportion of an exposed occupational group becomes sensitised. It depends on the concentration of sensitizer and the degree and duration of skin contact - as well as the sensitising potential of the sensitizer.

Sensitisation is specific to one substance or to a group of substances that are chemically similar. Once sensitised a person is likely to remain so for life.

Both irritant and allergic contact dermatitis can occur together (particularly on the hands) and either may co-exist with constitutional dermatitis. It is common for exposure to occur to more than one irritant and more than one allergen at any one time. Such exposures may give rise to a cumulative irritant and cumulative allergic response. An irritant contact dermatitis may also develop first, rendering the skin more susceptible to penetration by sensitizers. It is also possible that an original allergic contact dermatitis might be later sustained by an irritant.

There are a number of occupations and materials associated with allergic contact dermatitis. Some substances can act both as irritants and sensitizers, for example cement; its wetness, alkalinity, grittiness and hygroscopicity make it an irritant. It contains the sensitizer’s chromate and cobalt..

7.10 How to prevent dermatitis

What you should do

Look after hands by following the 5 simple steps

Here's how to wave goodbye to bad hand days. Five small steps to prevent dermatitis becoming a big problem:

Step 1

Wear disposable non-latex gloves when rinsing, shampooing, colouring, bleaching, etc.

Step 2

Dry your hands thoroughly with a soft cotton or paper towel.

Step 3

Moisturise after washing your hands, as well as at the start and end of each day. It's easy to miss fingertips, finger webs and wrists. **See 2. Skin Care Poster** for more information.

Step 4

Change gloves between clients. Make sure you don't contaminate your hands when you take them off. **See 3. Correct Removal of Gloves** for more information.

Step 5

Check skin regularly for early signs of dermatitis. **See 4. Skin Checks** for more information.

7.11 What to do if you have it

If you think you are suffering from dermatitis, then you should visit your doctor for advice and treatment. If you believe it has been caused or made worse by your work as a Beautician, then you should mention this to your doctor and you must also tell your employer. They are required by law to report a case of work-related dermatitis amongst their staff.

Report an incident

Whether or not your GP advises that it is okay to carry on doing wet work, you will need to take action to prevent your skin damage getting worse.

7.12 Safety First – reminder of the regulations

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)

- The RIDDOR regulations require that **ALL** injuries, diseases and dangerous events that happen in the workplace are recorded using the appropriate recording document and reported to the Health and Safety Executive (HSE).
- *Work-related illnesses may include dermatitis or occupational asthma from the use of specific beauty products.*
- The HSE are responsible for enforcing safety regulations and investigate reported incidents and provide advice to organisations. Enforcement of regulations may include prosecution, if appropriate steps have not been taken.
- *Employees must ensure that they have notified the employer of any potential work-related illness, injury or dangerous occurrence that occurs within the salon in order that the employer can fulfil their reporting obligations*

Control of Substances Hazardous to Health Regulations 2002 (COSHH)

- The COSHH regulations require that appropriate assessment and precaution is taken to protect against harm from hazardous substances.
- In a salon environment this may include:
- Chemicals, such as those used for cleaning and products used for nail varnish, acetone etc.
- Biological agents, such as bacteria in spa areas (Jacuzzis) or in laundry facilities (when sterilising equipment)
- Naturally occurring substances, such as dust or mould in damper, humid areas e.g. Jacuzzi, steam rooms or even the salon itself

It would also include substances produced during work activities, such as, fumes from mixing of chemicals or electrical filing of nails

Personal Protective Equipment 2002 (PPE)

PPE regulations require the provision of appropriate protective clothing and equipment.
In a salon environment, this may include the provision of:

- Trolleys to move products and minimise spillage
- Bowls for mixing products
- Gloves and masks when handling colorants and chemicals, e.g. hydrogen peroxide
- Plastic gowns and capes to protect the client
- Training for staff on how to use of equipment
- Any equipment used should be of an appropriate fit, be well maintained and stored correctly

Foot Care

7.13 Lower limb disorders

Lower limb disorders (LLDs) affect the legs from hips to toes. The most common risk factors at work are:

- repetitive kneeling and/or squatting
- fixed postures such as standing for more than two hours without a break
- frequent jumping from a height

What are lower limb disorders?

Lower Limb Disorders (LLDs) at work affect the hips, knees and legs and usually happen because of overuse - workers may report lower limb pain, aching and numbness without a specific disease being identified.

Acute injury caused by a violent impact or extreme force is less common. However, athletes and military personnel are more prone to these injuries so workers who take part in these activities may report them at work.

Scientific evidence suggests that there are several recognised diseases of the lower limb which can be work related such as: hip and knee osteoarthritis; knee bursitis, meniscal lesions/tears; stress fracture/reaction injury and varicose veins of the lower legs.

Osteoarthritis (OA)

Osteoarthritis (OA) is a degenerative condition that affects the joints of the body (e.g. knees, hips and spine), and happens when the cartilage coating at these joints becomes damaged or worn away. Hip OA is more common among male than female workers and farmers have a significantly higher risk of suffering from it. There is a significantly increased risk of knee OA among miners, floor layers and cleaners.

Knee bursitis

Knee bursitis - also called coal miners, carpet layer's or housemaid's knee - is caused by repetitive kneeling or knee-straining activities. Workers who develop bursitis generally report tenderness and swelling, and a reduction in knee movement due to pain and tightening of the skin over the kneecap.

Beat knee or hyperkeratosis is the thickening of the skin over the knee due to pressure. It is an acute and extreme form of bursitis and is common among those regularly involved in knee-straining activities, such as kneeling and squatting.

Meniscal lesions/ tear damage

If the knee is bent or twisted while bearing a load, the force may cause meniscal lesions or damage to occur. Overuse trauma, for example repetitive squatting or kneeling, can also cause meniscus injury or damage. Such damage leans toward the injured knee being inclined to degenerative changes typical of OA.

Stress fracture/stress reaction injuries

Stress fracture and reaction injuries are the result of repeated micro-injuries to bone, typically found in those who regularly undertake marching or stamping of the feet. They are more common in people undergoing military training and in athletes, particularly long-distance runners.

Varicose veins

Varicose veins are any dilated subcutaneous veins of the leg. Employees may complain of feelings of heaviness and pain, a sensation of swelling of the legs, night time calf cramps and restless

7.14 Lower limbs: Information for employers

LLDs are a major cause of sickness absence. By managing the risks, you can reduce the number of people taking sickness absence and also the average length of each absence.

Preventing LLDs

Because most injuries happen as a result of overuse, the most effective way to reduce risk is to design work to avoid overuse. This can be done by, for example:

- providing mechanical aids;
- using staff rotation to lessen the time spent carrying out 'risky' tasks;
- using regular breaks;
- providing seating, where possible.
- Speak to the people carrying out these tasks – they understand what causes them problems. More effective results are usually achieved if employees are consulted first.

Personal protective equipment

Knee pads: These are useful for protection while kneeling on hard floor surfaces, but they do not mitigate the risks of extreme flexion of the knee. Their benefit is largely in respect of preventing lacerations and penetrating injuries, and improving comfort. It is not known whether they reduce the risk of osteoarthritis (OA).

Anti-fatigue matting: There is some evidence that anti-fatigue matting may be effective in reducing the risks from prolonged standing. However, the use of mats in the workplace requires careful consideration because of the increased risk from slips and trips.

7.15 Lower limbs: Information for employees

If you think you may be suffering from a lower limb disorder (LLD) that may be caused or aggravated by your work, there are things you can do to help yourself and assist your employer in helping you.

What to look for

The symptoms you should be particularly aware of are:

- pain and/or
- restricted joint movement

If you experience either of these symptoms, you should seek medical advice because some lower limb injuries, if recognised early, can be treated with minimal medical intervention, while others may require surgery (i.e. meniscal tears). Conditions like osteoarthritis may require regular clinical intervention.

Report symptoms to your employer early

It is important that you report any symptoms as soon as possible because help could be available and early intervention often prevents further damage. By reporting symptoms early,

your employer can assess whether there is a problem and may want to observe your job. Other workers may be experiencing similar problems and, unless you tell someone, the problem may not be realised.

What your employer can do

Once your employer knows about problems in the workplace they should be able to do something to reduce the risk of it getting worse.

Adaptations may need to be made, for example to the tools/equipment you use or the way your work is organised. These changes may be permanent and apply to a group of workers, or temporary and specific to you as an individual when dealing with a current problem or recovering from your symptoms.

Occupational health advice

Your employer may be able to refer you to an occupational health service provider for some medical help. An occupational health service provider will:

- assess your symptoms and may diagnose a specific condition, if you have one
- ask about your work tasks to try and identify the things contributing to the problem

If your workplace does not have access to this type of support, you should see your GP to explain your symptoms and the type of work that you do. Although they may or may not be able to diagnose your condition, they can provide some help and advice or may refer you to a specialist health professional – especially if some form of clinical intervention is required.

7.16 FAQs - Lower limb disorders

What causes LLDs?

Answer: The most common risk factors at work are:

- repetitive kneeling and/or squatting;
- fixed postures such as standing for more than two hours without a break;
- frequent jumping from a height.

What are the symptoms of LLDs?

Answer: Pain, tenderness or stiffness of the **joint**, unable to straighten or bend those joints. Tenderness aches and pains, stiffness, weakness, tingling, numbness, cramp and swelling to the **muscles** of the lower limbs. These symptoms may suggest overuse or some underlying condition and, if you are concerned, seek advice from your Doctor/GP.
Scientific evidence suggests that there are several recognised diseases of the lower limb which can be work related such as: hip and knee osteoarthritis; knee bursitis, meniscal lesions/tears; stress fracture/reaction injury and varicose veins of the lower legs.

How can I prevent LLDs?

Answer: Because most injury happens as a result of overuse, the most effective way to reduce the risk is to provide/use mechanical aids or rotate duties to reduce the time spent carrying out a 'risky' task and give time for recovery. Where possible, provide seating rather than requiring people to squat or kneel and have regular breaks. Provide personal protective equipment such as:

- Anti-fatigue matting may be effective in reducing the risks from prolonged standing, but be aware that using the mats in the workplace may increase the risk from slips and trips.
- Shock absorbing insoles and modified shoes, although there is limited evidence that using these aids reduces the risk. The positive effects are mainly in respect of injuries from vertical impact loads.

What law applies to LLDs?

Answer: Employers have legal duties under:

- the Health and Safety at Work etc Act 1974; and
- the Management of Health and Safety at Work Regulations 1999.

These duties include ensuring the health, safety and wellbeing of employees at work, and assessing and reducing potential risks to their health, safety and wellbeing. Employers have a duty to do something if there is a problem which is causing or aggravating existing symptoms - this may include providing protective clothing or referral to an occupational health provider for some medical help.

7.17 Wearing the correct footwear

Beauticians are some of the most bubbly and fun people to be around. But under all the pep and lively personality, there are hidden pains. Majority of their day are spent standing or sitting. In a regular basis, this can really take a toll on one's feet.
The most common complaints among Beauticians are sore feet, swelling legs, varicose veins, and tired feet. And those regular working shoes just won't cut it. Finding the right shoes can make a difference. You will need footwear that provides you the stamina to stand the entire day with an equal measure of style to look sharp while you're at it. And that's what this article is all about.
Here we will make an in-depth guide on what to look for in the best shoes for Beauticians as well as the rated and reviewed products that go with it. Because we believe that you can only work at your best if your feet are comfortable which you can only achieve if your footwear permits.

First Things First: What is the shape of your feet?

It is a common sense that one should know the width and length or so-called the size of the feet before buying shoes. But what about the shape of the feet? It's often a consideration that many buyers ignore but also matters, unless you want to force your feet to conform to a particular shape of shoes and deal with painful blisters and calluses.
Known as the foot arch type, feet also come in different shapes and yours may fall in the following category. Also, some arch type have a special shoe that needs to be accommodated so we also included some helpful features you should look for in the best shoes for Beauticians.

- **Low-arched or Flat Feet**: If the arch of your foot or the ligament that runs along the bottom of your foot sits low to the ground and is very flexible, it is in low-arched definition. Potential Problem: Since flat-feet are more flexible, they tend to roll inwards, contributing to muscle stress and joint problems: Look For: Shoes with a medial rear foot or a straight last and motion can help maintain the proper alignment of your feet, prevent injuries and related muscular pains.
- **Medium or Neutral-arched Feet:** Your feet fall into this category if it isn't flat nor overly-arched but just moderately flexible. Potential Problem: This type of feet is commonly susceptible to heel pain and tensions since it's hard to find shoes that properly fit with this type. Look for: You can benefit from sturdy midsoles or cushioning, one that is straight to semi-curved lasts for comfort and rear-foot stability.
- **High-arched Feet:** This type is characterized by a well-defined arch that sits higher from the ground. Potential Problem: Your feet can have a lesser surface to disperse

shock with high arches. This can lead to excessive pressure on both rear foot and forefoot. Look for: A comfortable cushioning or pads can help compensate for the lack of surface area for shock absorption. You may also find shoes with a curved last helpful in giving your high arch the support it needed.

- **Bonus tip:** Still unsure about your arch type? A simple wet-test can help you examine how high or low your arches are. First, wet your foot and step on a piece of cardboard. If you can see a noticeable footprint, you likely have low arches. If you can only see the heel and toes of your foot without much in between, chances are, you fall under a high-arched type. On the other hand, you have medium arches if the arch of your footprint is just about half-way filled.

Finding the Right Shoes

Choosing the right shoes to wear in the salon can really be overwhelming. From crocs, jelly shoes, slip-on sneakers down to work boots — where do you start? Well, scratch that. The most important thing to consider, whatever type of shoes you are after , are the functional features and constructions to eliminate that foot pain and keep you gearing.

Good Heel and Arch Support

Do you know what your shoes are made of? When talking about the ergonomic design, it all comes down to a comfortable arch and shoe support. A good shoe support can work wonders to lift your arches, provide stability and pain-relief. If your shoes lack of the following features, then you are bound to have those episodes of foot pains.

- **Upper Pad:** This feature serves to support the shoe on your foot. The construction is usually of mesh, synthetic material or leather.
- **Midsole pad:** This may come as a gel, foam or air midsole which basically functions as a cushion to reduce the impact as your feet lands on the ground, making your muscles to work less.
- **Insole Pad**: Your shoes may have built-in or removable sole pads that support the whole feet and arches. This also provides stability and cushioning.
- **Heel Collar**: Located on the top of the upper, just around the sides and back of the heel is the heel collar that serves as cushions to the ankles while ensuring a proper fit.
- **Toe Box:** The front of the shoe should have a sufficient room for your toes. And it should be deep and roomy. This helps prevent calluses and painful blisters.
- **Outsole Pad**: Besides the interior cushions, good shoes to stand by are those that have grooves and treads. These kinds of outsoles, when making a contact with the ground, help keep up with tractions.
- **Achilles Tendon Protector:** This feature functions to reduce stress on the notch of the heel collar where the Achilles tendon is by making sure the shoe is locked around the heel.
- **Other Helpful Features**: Shoes that have Velcro straps gives you the opportunity to adjust the shoe to fit you more while stabilizing straps helps stabilize the foot. The lacing system or the eyelets are also things to consider. You will find lace lock designs and eyelets with variable widths helpful in allowing you to adjust the shoes according to the width and height of your feet.

Breathable Panels

Do your shoes have ventilated mesh panels and air vents that allow airflow? You are already dealing with foot-fatigue here; you certainly don’t want sweaty feet adding up to your discomfort, do you? And the last thing you want is making your clients uncomfortable with funky foot odour brought about by the perspiration of the feet. This is why it is important to look for shoes constructed with breathable materials. An example of these is a synthetic material, preferably a nylon mesh as well as open foams because they allow ventilation. Open knits and looser weaves also help your feet cool down and prevents foul odour

Lightweight

Ditch those thick and heavy shoes. They are not meant in a working environment as yours where you have to move around a lot. Heavyweight shoes will only contribute to fatigue. The material and cushioning are often the factors that contribute to the weight of the shoes. We are not saying to ditch the cushions as they are an important part of ergonomic features, but at least go for materials that are airy like those that are foam-based. Other lightweight shoe materials include blown rubber, nylon, and polyester.

Flexes Right

Shoes with a hard flexing point can additionally aggravate arch pain, shin splints, and numb toes. You can check the flexibility of the shoes by slightly bending the shoes through the heel and the tip. It should create a crease along the line just enough to let you have the comfortable and sturdy support. In contrary, ıt should not bend too much as shoes with too much flexibility may not provide structure and support for longer use.

Stylish

What your clients see amid the hair and clippings on the floor is your footwear, might as well go stylish right? After all, you are in the beauty industry and most clients would expect their Beauticians to be fashionable. Also, if your work already limits you of your uniforms choice, wouldn't it be nice to have shoes that speak to your sense of style and personality? Finding shoes that have the equal measure of style and comfort can be tricky, however. But if you search enough, there are an array of shoes in the market you can choose from according to your style without compromising your level of comfort.

Courtesy: Kelli Mason

7.18 Risks with wearing the wrong footwear

Salon H&S says shoes should be non-slip soles, closed in toes and heels.
Flat pump shoes, kept for indoor wear only, seem to be very popular with therapists at the moment

For obvious reasons, high heels and sandals are usually no-nos. No matter how sweltering the weather, most stylists should stay away from sandals to avoid on-the-job hazards: puncture wounds from falling scissors or errant hair clippings' becoming lodged between toes.

Other hazards include nail varnish and acetone, which can ruin light-coloured footwear, so dark leather is usually preferred.

7.19 Best Types of Shoes To Wear in the Salon All Day

7.20 Worst Types of Shoes To Wear in the Salon All Day

7.21 Resources for Salons

Appendix 1. Skin contact
Appendix 2. Skin Care
Appendix 3. Correct removal of Gloves
Appendix 4. Single Use Gloves
Appendix 5. Skin Checks
Appendix 6. Bad hand day
Appendix 7. Bad Hand Day 2
Appendix 8. Skin Washing
Appendix 9. Myths

Regulations.

Appendix 10. Preventing contact dermatitis
Appendix 11. PPE
Appendix 12. Work-related skin disease in Great Britain
Appendix 13. Brief Guide to COSHH
Appendix 14. SR 11 Hairdressing - COSHH