

iUCT22 – Aromatherapy

URN – K/617/4335

Guided Learning Hours: 80

Learning outcome	Assessment criteria	Taught content to include
LO1 Know the history and concept of aromatherapy and theories of other complementary therapies	1.1. Explain the history, development and definition of aromatherapy	• Definition of aromatherapy • The history should include: - The history and development of aromatherapy - The Egyptians - The Greeks - The Romans - The Arabs - China and India - The Great Plague - Herbal and other influences e.g.: ▪ Culpeper ▪ Gerard ▪ Naturopathy - The influence of allopathic medicine - First World War and Professor Gattefosse - Jean Valnet - Marguerite Maury - Ongoing research and developments
	1.2. Define research and its relevance to the aromatherapist	• Function • Types of research • Factors impeding research • Need for ongoing research within aromatherapy
	1.3. Explain the holistic approach	• The Greek term 'holos' and the concept of holism • Concept of balance and harmony in the body (homeostasis) • Definition of homeostasis and homeodynamics

		• The importance of the treatment of the whole person in relation to holistic health and the power of touch • Definition of CAM – Complementary and Alternative Medicine
	1.4. Explain the term integral biology	• The way in which the physical environment and social, economic and environmental factors affect health and social wellbeing, to include: - Computers - Mobile phones - Processed food - Lack of fresh air - Lack of sleep - Jet lag - Lack of natural light - Financial problems - Poor ventilation - Lack of exercise - Chemicals - Pollution - Stress – signs and symptoms - Short and long term effects - The role of complementary therapies in stress management - The placebo effect
	1.5. Explain other complementary therapies and the ways in which they are performed	• Acupressure • Acupuncture • Alexander technique • Ayurvedic medicine • Bach flower remedies/flower remedies • Body work (massage therapies) • Bowen technique • Chiropractic • Colour therapy • Crystal therapy • Ear candling • Emotional Freedom Technique (EFT) • Herbalism • Holistic massage • Homeopathy

		• Hypnotherapy • Indian head massage • Iridology • Kinesiology • Lymphatic drainage massage • Meditation • Naturopathy • Neurolinguistic Programing (NLP) • Osteopathy • Reflexology • Reiki/spiritual healing • Shiatsu • Stone therapy massage • Subtle energy/vibrational medicine • Swedish massage • Therapeutic touch • Traditional Chinese Medicine (TCM) • Yoga • Vertical reflexology
LO2 Know the structure, function and classification of plants in relation to the production and uses of essential and carrier oils	2.1. Describe the structure and function of plants in relation to the production of essential and carrier oils	• Angiosperm • Gymnosperm • Monocotyledon • Dicotyledon • Root • Rhizome • Stem • Leaf • Flower • Fruit • Seeds • Origins of essences and fixed oils: - Leaves - Flowers - Stems - Twigs - Bark

		- Heartwood - Resin - Roots - Rhizomes - Fruit pulp - Fruit peel - Seeds
	2.2. Define taxonomy, nomenclature and plant families and their relevance to the aromatherapist	• Carl Linnaeus • Binomial system • Environmental factors affecting growth and production of essences • Plant family • Genus • Species • Chemotypes • Variety • Plant families to include: - Annonaceae - Apiaceae (Umbelliferae) - Arecaceae - Asteraceae (Compositae) - Burseraceae - Corylaceae - Cupressaceae - Euphorbiaceae - Fabaceae (Leguminosae) - Geraniaceae - Juglandaceae - Lamiaceae (Labiatae) - Lauraceae - Linaceae - Malvaceae (Steruliaceae) - Myrtaceae - Oleaceae - Onagraceae - Pedaliaceae - Piperaceae

		- Pinaceae - Poaceae (Gramineae) - Proteaceae - Rosaceae - Rutaceae - Sapotaceae - Santalaceae - Simmondsiaceae - Styracaceae - Vitaceae - Zingiberaceae
	2.3. Explain the process of biosynthesis	• The formation of essential oils in plants
	2.4. Explain: - Botanical name (Latin) - Plant family - Country of origin (state where the oil was grown originally) - Specific method of extraction - The main therapeutic effects - Recommended uses - Safety precautions, including contra-indications and potential toxicology for essences - Correct terms should be used when describing therapeutic effects for the 42 oils listed e.g. Sudorific, Emmenagogue, etc.	• The outcomes listed should be given for the following 42 essential oils: - Lamiaceae (Labiatae) ▪ Lavandin (Lavandula x intermedia Emeric ex Loisel) ▪ Lavender (Lavandula angustifolia Mill.) ▪ Lavender, spike (Lavandula latifolia Medik.) ▪ Clary Sage (Salvia sclarea L.) ▪ Marjoram (Origanum majorana L.) ▪ Rosemary (Rosmarinus officinalis L.) ▪ Thyme (Thymus vulgaris L.) ▪ Peppermint (Mentha x piperita L.) ▪ Basil (Ocimum basilicum L.) ▪ Patchouli (Pogestemon cablin Benth.) - Rutaceae ▪ Neroli (Citrus aurantium L.) ▪ Petitgrain (Citrus aurantium L.) ▪ Orange, bitter (Citrus aurantium L.) ▪ Orange, sweet (Citrus sinensis (L.) Osbeck) ▪ Bergamot (Citrus bergamia Risso.) ▪ Lemon (Citrus limon (L.) Burm.) ▪ Mandarin (Citrus nobilis Lour.) ▪ Grapefruit (Citrus paradisi Macfad.) - Asteraceae (Compositae) ▪ Chamomile Roman (Chamaemelum nobile (L.) All.) ▪ Chamomile German (Matricaria recutita L.)

		- Myrtaceae ▪ Eucalyptus (<i>Eucalyptus citriodora</i> Hook) ▪ Eucalyptus (<i>Eucalyptus dives</i> Schauert) ▪ Eucalyptus (<i>Eucalyptus globulus</i> Labill) ▪ Eucalyptus (<i>Eucalyptus smithii</i> RT Baker) ▪ Tea tree (<i>Melaleuca alternifolia</i> Cheel.) - Geraniaceae ▪ Geranium (<i>Pelargonium graveolens</i> L'Her.) - Piperaceae ▪ Pepper, black (<i>Piper nigrum</i> L.) - Apiaceae (Umbelliferae) ▪ Fennel (<i>Foeniculum vulgare</i>. Mill) - Rosaceae ▪ Rose damask (<i>Rosa damascena</i> Mill.) ▪ Rose cabbage (<i>Rosa x centifolia</i> L.) - Oleaceae ▪ Jasmine (<i>Jasminum grandiflorum</i> L.) - Annonaceae ▪ Ylang Ylang (<i>Cananga odorata</i> (Lam.) Hook.f. & Thomson) - Santalaceae ▪ Sandalwood (<i>Santalum album</i> L. <i>Santalum spicatum</i> (R. Br.) A.DC.) - Burseraceae ▪ Frankincense (<i>Boswellia sacra</i> Flueck.) ▪ Myrrh (<i>Commiphora myrrha</i> Engl.) - Styracaceae ▪ Benzoin (<i>Styrax benzoin</i> Dryand.) - Zingiberaceae ▪ Ginger (<i>Zingiber officinale</i> Rosc.) - Poaceae (Gramineae) - Lemongrass (<i>Cymbopogon citratus</i> Stapf.) - Vetivert (<i>Vetiveria zizanoides</i> Nash ex Small) • Pinaceae - Cedarwood, Atlas (<i>Cedrus atlantica</i> Manetti) • Cupressaceae - Cypress (<i>Cupressus sempervirens</i> L.) - Juniper (<i>Juniperus communis</i> L.)
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	2.5. State the: Botanical name (Latin) Plant family The sources Methods of extraction of carrier oils	• Rosaceae - Almond (<i>Prunus communis</i> L.) - Apricot Kernel (<i>Prunus armeniaca</i> L.) - Peach Kernel (<i>Prunus vulgaris</i> Mill.) • Fabaceae (Leguminosae) - Soya (<i>Glycine max</i> Merr.) - Peanut (<i>Arachis hypogaea</i> L.) • Asteraceae (Compositae): - Sunflower (<i>Helianthus annuus</i> L.) • Vitaceae - Grapeseed (<i>Vitis vinifera</i> L.) • Oleaceae - Olive (<i>Olea europaea</i> L.) • Lauraceae - Avocado (<i>Persea americana</i> Mill.) • Pedaliaceae - Sesame (<i>Sesamum indicum</i> L.) • Linaceae - Linseed (<i>Linum usitatissimum</i> L.) • Corylaceae - Hazel (<i>Corylus avellana</i> L.) • Juglandaceae - Walnut (<i>Juglans regia</i> L.) • Proteaceae - Macadamia (<i>Macadamia ternifolia</i> F. Muell.) • Arecaceae - Coconut (<i>Cocos nucifera</i> L.) • Onagraceae - Evening Primrose (<i>Oenothera biennis</i> L.) • Poaceae (gramineae) - Wheatgerm (<i>Triticum vulgare</i> Vill.) • Euphorbiaceae - Castor (<i>Ricinus communis</i> L.) • Simmondsiaceae (Liquid wax) - Jojoba (<i>Simmondsia chinensis</i> Schneid.)
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	2.6. Describe the sources of other media and state botanical names and plant families (where applicable)	• Creams • Lotions • Gels • Water • Air • Clays • Shea butter (<i>Butyrospermum parkii</i>) • Sapotaceae • Cocoa butter (<i>Theobroma cacao</i>) • Malvaceae (<i>Steruliaceae</i>)
	2.7. Explain the therapeutic effects, recommended uses and safety precautions of fixed oils and other media, and the advantages and disadvantages for different skin types	• Almond • Apricot kernel • Avocado • Castor • Coconut • Evening primrose • Grapeseed • Hazel • Jojoba • Linseed • Macadamia • Olive • Peach kernel • Peanut • Sesame • Sunflower • Soya • Walnut • Wheatgerm • Other media to include: - Creams - Lotions - Gels - Water - Air - Clays

		- Shea butter - Cocoa butter
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LO3 Know aromatherapy products, methods of production and factors affecting quality	3.1. Define the terms applicable to essential oils, essences, carrier oils, fixed oils and other media	• Aromatic • Volatile • Powerful • Soluble in oil and alcohol • Lipophilic • Hydrophilic • Liquid • Non-greasy (essences) • Flammable
	3.2. Explain the methods of extraction	• Water/steam distillation • Expression • Solvent extraction • Enfleurage/maceration • Carbon dioxide • Hydro diffusion/percolation/hydrodistillation
	3.3. Explain how essential oils can become adulterated or degraded during processing and storage, the ways in which suppliers adulterate oils and the methods used to assess oil quality	• Methods of adulteration • Degradation • Hydrolysis • Oxidation • Synthetic oils • Methods of testing quality and chemical constituents of essences, e.g. : - pH testing - Infrared Spectrophotometry (IR) - Gas Liquid Chromatography (GLC)
	3.4. Explain how to detect the degradation of fixed oils	• Rancidity • Oxidation • Hydrolysis • Colour • Odour
	3.5. Explain the professional sources of supply of essential oils, carrier oils and other media	• Growers • Manufacturers/processors

		• Wholesale suppliers • Therapists/practitioners • Retail sources
	3.6. Explain the terms hydrosol/floral water/hydrolat and describe their use in an aromatherapy treatment programme	• Definition of the terms • Their production as by-products of hydrodistillation • Their use within an aromatherapy treatment programme

LO4 Know the chemistry of essential oils	4.1. Explain the chemical terms applicable to aromatherapy	• Atom • Molecule • Organic and inorganic compounds
	4.2. Explain the therapeutic effects of the main chemical compounds found in essential oils	• Terpenes • Isoprenes • Monoterpenes • Diterpenes • Sesquiterpenes • Esters • Aldehydes • Ketones • Lactones • Alcohols • Phenols • Oxides • Acids • Ethers • Furanocoumarins
	4.3. Explain the significant chemical constituents for each of the essential oils listed	• Basil (Alcohols) • Benzoin (Esters) • Bergamot (Esters) • Cedarwood atlas (Ketones) • Chamomile German (Sesquiterpenes) • Chamomile Roman (Esters) • Clary Sage (Esters) • Cypress (Monoterpenes) • Eucalyptus citriodora (Aldehydes)

		• Eucalyptus dives (Ketones) • Eucalyptus globulus (Oxides) • Eucalyptus smithii (Oxides) • Fennel (Phenols) • Frankincense (Monoterpenes) • Geranium (Alcohols) • Ginger (Sesquiterpenes) • Grapefruit (Monoterpenes) • Jasmine (Esters) • Juniper (Monoterpenes) • Lavandin (Alcohols) • Lavender (Esters) • Lavender spike (Oxides) • Lemon (Monoterpenes) • Lemongrass (Aldehydes) • Mandarin (Monoterpenes) • Marjoram (Alcohols) • Myrrh (Sesquiterpenes) • Neroli (Alcohols) • Orange, bitter (Monoterpenes) • Orange, sweet (Monoterpenes) • Patchouli (Sesquiterpenes) • Pepper, black (Monoterpenes) • Peppermint (Alcohols) • Petitgrain (Esters) • Rose cabbage (steam distilled) (Alcohols) • Rose damask (Alcohols) • Rosemary (Monoterpenes) • Sandalwood (Alcohols) • Tea tree (Alcohols) • Thyme (Alcohols) • Vetivert (Alcohols) • Ylang Ylang (Sesquiterpenes)
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LO5 Know the structure and function of the olfactory tract and the effects of aromatherapy on the body systems	5.1. Explain the structure and function of the olfactory tract and the ways in which essential oils are absorbed in this area, and the disorders affecting the sense of smell	• Nose • Olfactory tract • Olfactory membranes/epithelium • Olfactory receptor cells • Olfactory bulb • Olfactory plexus • Brain • Limbic system • Anosmia
	5.2. Explain the different skin types and their relevance to the aromatherapy treatment, and describe the way in which essences are absorbed by the skin, including factors impeding or enhancing absorption	• Combination • Dry • Oily • Mature • Young • Epidermis • Dermis • Hair follicle • Sweat glands • Blood capillaries • Circulatory system
	5.3. Explain the physiological and psychological effects of aromatherapy on the body systems	• Skin (Integumentary) • Skeletal • Muscular • Nervous • Respiratory • Cardiovascular • Lymphatic • Immune • Endocrine • Digestive • Reproductive • Urinary
	5.4. Explain the effects of stress on the systems of the body and state which oils can help to relieve the symptoms	• Skin (Integumentary) • Skeletal • Muscular

		• Nervous • Respiratory • Cardiovascular • Lymphatic • Immune • Endocrine • Digestive • Reproductive • Urinary • Analgesics • Sedatives • Stimulants • Nervines • Antispasmodics
LO6 Know the legislation applicable to aromatherapy treatment	6.1. Explain the appropriate legislation applicable to aromatherapy treatment	• Any particular rights, restrictions, acts and charters applicable to aromatherapy treatment e.g. health and safety regulations • Legal framework related to people and settings with which the practitioner is involved, e.g. Mental Health Act, Children Act • Moral rights which are not recognised by law • Organisational policies and how they may differ from other organisations (when working in care) • Records which the practitioner is responsible for completing in relation to rights and responsibilities • Any relevant complaints systems and methods of access (when working in care) • Code of good practice/ethics • Insurance and professional association membership • Legislation relating to the essential oil trade/profession • Legislation which relates to the work being carried out, the environment and the client with whom the practitioner is working • Legislation applicable to the treatment and the country therein • Awareness of national occupational standards and voluntary regulatory groups where they exist

	6.2. Explain the issues surrounding 'consent' to treatment	• The importance of obtaining consent from the client • The importance of gaining consent from a person who is acting in the best interests of the client (when the client is unable or not of an age to make the decision for themselves) • Current debate surrounding the issue of consent and the ways in which it may differ between various practitioners • The meaning of informed client consent and the guidance given by the practitioner's professional body particularly where there is a need for written consent • Methods of obtaining consent and how to confirm that clients have been given sufficient information on which to base their own judgment • Ensure that agreements are in the client's best interests • Ensure that the client or appointed companion signs the consultation form to consent to treatment
	6.3. Explain the importance of aromatherapy for clients and families receiving palliative or social care (when working in care)	• The issue of consent • Any appropriate legislation • Confidentiality • Appropriate support • Using an appropriate manner of communication • Only giving information agreed within the care team • Know when to refer clients to people outside of the care team • Maintenance of accurate records • Managing one's own feelings • The importance of ongoing care • Personal beliefs and preferences • Grief and grieving process • Awareness of other support services
LO7 Know how to prepare and blend for aromatherapy treatment	7.1. Explain the elements required to prepare for a professional aromatherapy treatment	• Treatment environment and working area: - Identify quiet, clean and hygienic working surroundings and changing facilities for client - Describe the most efficient form of sterilisation and sanitisation in the clinic - Describe the best form of waste removal in the clinic (particularly when contaminated)

		- Provide sufficient professional equipment and products required to perform the treatment fully - Essences, fixed oils, other media, blending apparatus, diffusers, etc. - Establish suitable couch and trolley layout - Recognise the importance of room layout and ambience - Therapist appearance/behaviour - Demonstrate appropriate attire: ▪ Professional work wear ▪ Full flat shoes ▪ Socks with trousers ▪ Natural tights with skirts ▪ No jewellery - except a wedding band and stud earrings ▪ Short, clean finger nails with no enamel ▪ Demonstrate good personal hygiene ▪ No body odour ▪ No bad breath ▪ No perfume ▪ No chewing of gum or sucking of sweets ▪ Hair neat, clean and tied back – not on the collar or face - Wash own hands before, during and after treatment (as necessary) - Punctuality - Only working within own scope of practice - Do not make false claims - Do not discuss or put down other salons/clinics - Do not diagnose
	7.2. Explain the importance of client assessment and referral procedures	• Only working within the realms of their own scope of practice and expertise as an aromatherapist • Only recommend treatments which are relevant and appropriate to the client • Client suitability e.g. young, elderly, pregnant, healthy, infirm, etc. • Conditions for which aromatherapy is appropriate • Where aromatherapy massage may be used with cautions/modifications to treatment techniques

		• Where aromatherapy is contra-indicated • Where aromatherapy massage is inappropriate, other methods of use may be indicated • Demonstration of understanding when a client should be referred to either: - GP - Counsellor - Other complementary therapist - Member of the social care or nursing team (when working in care) - Other voluntary or statutory services e.g.: ▪ Social services ▪ Citizens Advice Bureau
	7.3. Explain the purpose of testing essential oils on the client's skin	• Appropriate explanation to the client • Judging the time interval for a client's reactions to the tests (24-48 hours) • Hazards associated with essences: - Toxicity - Irritation - Sensitisation - Carcinogenesis - Phytoestrogens - Interaction with prescription and self-medicated drugs and other substances • Types of essential oils and carrier oils most likely to cause a reaction and their possible effects • The importance of obtaining a signature of endorsement for use of the blend (a requirement of many insurance companies when they are dealing with claims)
	7.4. Explain 'synergy' and the way in which the therapeutic effects of essences are strengthened when working together	• Synergy • Adaptogen
	7.5. Explain top, middle and base notes and their uses within a blend	• Definition of terms • Their use within a blend

	7.6. Explain the methods of selection, storage and use of essential oils, carrier oils, other media and equipment	• Use and storage of treatment equipment required, e.g.: - Massage couch, bottles, jars, etc. • Stock control/rotation • Sourcing, selection, use and storage of treatment media: - Away from extremes of temperature - Dark glass bottles - Tightly sealed bottles - Out of reach of children • Methods of dealing with breakages/spillages in the treatment environment • Product data sheets • Shelf life of essences, fixed oils, other media and blended products • Current legislative controls and guidelines for the use of aromatherapy products and the implications for client safety
LO8 Know how to consult and recognise contra-indications and contra-actions to aromatherapy treatment	8.1. Explain methods of consultation	• Learners should demonstrate knowledge of the importance of the following: - Consulting in a private, comfortable area - Positive body language - Positioning of the client (no barriers between themselves and client) - Good communication skills (asking open and/or closed questions where appropriate) - Verbal and non-verbal communication - Trust - Professionalism, confidence and enthusiasm - Ascertaining client lifestyle - Client profile - Client disclosure - Professionally informing the client of restrictions of treatment e.g. contra-indications and contra-actions - Ensuring the client is not alarmed in any way, explain potential reactions/contra-actions to treatment - Interaction of essences with prescribed or self-medicated drugs and other substances • Outline benefits of the treatment: - Deep relaxation

		- Relief from muscular aches and pains - Stress relief - Balancing fluid retention etc. • Any contra-indications to treatment (as listed below) • Importance of planning a treatment programme bearing in mind the client's religious, moral and social beliefs • Determining the nature and extent of the client's needs in respect of presenting conditions, e.g. physiological, psychological and emotional state of client, illness, disability etc. • Agreement to the course of action and aromatherapy treatment methods advised, e.g. massage, use of diffusers, inhalation, use of water, topical application, use of compresses • Selection and documentation of essences, fixed oils or other media (including common and botanical names), quantities blended, justification for choice of blend(s) • Ascertain the client's consent to the treatment • Where the client is not in a position themselves, ascertain the appointed companion's agreement to the treatment • Explanation of how the programme will be evaluated and the review process • Where applicable, clarify with the client information which may be available to others, e.g. relevant health care workers • Confidentiality • Agree treatment objectives and recommended treatment plan • Obtain the client's signature (or that of the appointed companion)
	8.2. Recognise those contra-indications to aromatherapy requiring medical referral or the client to sign an informed consent form prior to the treatment and those contra-indications that restrict treatment	• With medical, GP or specialist permission – in circumstances where written medical permission cannot be obtained, clients must sign an informed consent form stating that the treatment and its effects have been explained to them and confirm that they are willing to proceed without permission from their GP: - Pregnancy (use only mandarin) - Cardiovascular conditions (thrombosis, phlebitis, hypertension, hypotension, heart conditions) - Haemophilia - Any condition already being treated by a GP/medical practitioner or another complementary practitioner - Medical oedema

		- Osteoporosis - Arthritis - Nervous/psychotic conditions - Epilepsy - Recent operations - Diabetes - Asthma - Any dysfunction of the nervous system (e.g. multiple sclerosis, Parkinson's disease, motor neurone disease) - Bell's palsy - Trapped/pinched nerve (e.g. sciatica) - Inflamed nerve - Cancer - Conditions causing muscular spasticity (e.g. Cerebral palsy) - Kidney infections - Hormonal implants - Undiagnosed pain - When taking prescribed medication - Acute rheumatism - Whiplash - Slipped disc - Cervical spondylitis • Contra-indications that restrict treatment - Fever - Contagious or infectious diseases - Under the influence of alcohol or recreational drugs - Diarrhoea and vomiting - Skin diseases - Undiagnosed lumps and bumps - Localised swelling - Inflammation - Varicose veins - Pregnancy (abdomen) - Menstruation (abdomen – first few days) - Breast-feeding - Cuts
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		- Bruises - Abrasions - Scar tissue (2 years for major operation and 6 months for a small scar) - Sunburn - Haematoma - Recent fractures (minimum 3 months) - Gastric ulcers - Hernia - After a heavy meal - Hypersensitive skin N.B. All known allergies should be checked client contra-indications should be checked against the safety data for each oil prior to treatment
	8.3. Explain the possible reactions/contra-actions to aromatherapy treatment and advise client on course of action to follow should any arise	• Nausea • Headaches • Dizziness • Frequency in micturition • Increase of bowel movements • Skin redness/irritation/urticaria • Fatigue • Hyperactivity • Change of appetite • Skin changes • Healing crisis • Relief from symptoms • Improved mood • Altered sleep patterns • Increased energy
LO9 Be able to carry out aromatherapy treatment	9.1. Explain and demonstrate the safe dosage and blending of essential oils and carrier oils or other media	• Maximum number of essences in one blend should be three • Dilutions are two drops in 5ml carrier/other media • No more than eight drops in one treatment • Increase the amount of carrier/other media not essential oil for a larger frame • For babies and the elderly – one drop of essential oil to 5mls/10mls of carrier/other media

		• For the face – one drop of essential oil in 5mls of carrier/other media • Blend into plastic measuring cup • Current legislative controls and guidelines for the use of essential oils, carriers and other media, blending and labelling of products, and the implications for client safety • Possible interactions between essential oils • Possible interaction between essential oils and prescribed/self-medicated drugs or other substances • State appropriate methods of storage to maintain recommended shelf life of blends, essences, fixed oils and other media
	9.2. Demonstrate appropriate client care	• Checking consultation and contra-indications • Explaining the treatment to the client • Remove all jewellery – except wedding band on client • Helping the client on to the couch prior to and off the couch after treatment • Positioning the client correctly – prone, supine or seated • Sanitising the client's feet/hands as appropriate • Sanitising own hands as appropriate throughout treatment • Protecting the client's modesty at all times • Ensuring that all parts of the client are covered except the area being treated • Ensuring that the client is comfortable, by use of verbal and non-verbal communication throughout the treatment • Using appropriate covered supports, i.e. under the ankles, chest and forehead, knees, head • Adapting the treatment techniques to suit the needs of the client, using other methods of application as appropriate • Ensuring the client does not walk around barefoot • Aromatherapist maintaining correct posture/stance, hygiene and professionalism throughout treatment
	9.3. Explain and demonstrate the aromatherapy massage movements	• Effleurage • Petrissage • Vibrations • Tapotement • Passive movements

		• Pressure point stimulus • Lymphatic drainage techniques
	9.4. Explain and demonstrate suitable aromatherapy massage techniques	• Ensuring the client is correctly supported • Using towels to cover all areas except those being treated • Using clean towels for each client and using couch roll in addition to towels to maintain hygiene • Confirming consent before beginning treatment • Blending oils in a time efficient, safe and hygienic manner • Using the oil blend(s) selected and agreed during the process of consultation • Using appropriate massage movements for aromatherapy treatment i.e. effleurage, petrissage, vibrations, tapotement, stretches, lymphatic drainage techniques, pressure point stimulus, on the following areas: back, abdomen, legs, feet, arms, hands, head, scalp, neck and shoulders and face as applicable • Performing and adapting the treatment relevant to client's physiological and physical requirements, abilities, disabilities, time restrictions etc. • Applying the massage at a pressure appropriate to the client's needs and to ensure maximum absorption of the oils • Maintaining contact throughout treatment • Encouraging clients to express their feelings/requirements during the treatment • Working through treatment in a commercially acceptable time – approximately 1 hour for a full treatment • Checking client's comfort and satisfaction throughout treatment with the use of verbal and non-verbal communication • Noting client's reactions and making appropriate adjustments during treatment • Noting client's reactions and any findings/feedback at end of treatment • Helping the client on and off the couch, protecting their modesty at all times, ensuring they do not walk around barefoot • Work within code of conduct laid down by professional association/society/guild to perform professional aromatherapy treatment

LO10 Be able to evaluate aromatherapy treatment and advise on appropriate after and home care	10.1. Evaluate and review the aromatherapy treatment/programme	• At the end of each treatment the client's psychological and physiological reactions should be recorded • The following areas should be monitored: - Outcomes achieved - Effectiveness of the treatment - Reassessing choice of blend used, blending ratios, treatment techniques, methods of use, etc. - Any change in demands e.g. physiological or psychological changes - Whether the treatment met the needs of the client – client expectations - Longer term needs of the client, such as when working in a care environment, with those dealing with bereavement and loss etc. - Therapist self-reflection in relation to client and treatment performed - Client treatment progression - Review of ongoing treatment plan - Recommendations for further treatment sessions - The importance of reflective practice to the aromatherapist – practical application and effects
	10.2. Interpret client feedback and record on consultation form and store information securely in line with current legislation	• At the end of each treatment the client's feedback should be recorded on the consultation form and any skin, muscular or other reactions noted together with recommendations for ongoing treatment and self-treatment – these should be documented fully • Record and store in line with current data protection legislation and professional codes of conduct
	10.3. Explain and demonstrate appropriate aftercare and home care advice after treatment	• Immediate aftercare • Allowing client time to revive • Sitting client up carefully • Water • Feedback • At the end of each treatment the client should be advised of home and aftercare to prolong treatment benefits • Avoid stimulants – alcohol, tea, coffee and non-prescription drugs for at least 12 hours • Healthy eating

		• Fluid/water intake • Exercise • Posture • Smoking habits • Sleep patterns • Hobbies • Interests • Rest • Time management • Relaxation techniques • Stress levels • Self-treatment • Aromatherapy as part of a holistic lifestyle • General care and lifestyle advice and the benefits thereof • Generally helping clients and families to identify options to improve their health and social wellbeing in terms of aromatherapy treatment • Helping clients and families to put their choices into action • Reviewing their progress
	10.4. Explain the various methods of applying essential oils, carrier oils and blends safely to the client either in the clinic or at home (self-use)	• Blending ratios • Client requirements/suitability • Conditions treated • Equipment required • Preparation • Safety procedures • Frequency of use • Contra-indications • Baths (including foot and hand) • Compresses (hot and cold) • Creams, lotions and gels (commercial and homemade) • Hydrosols/hydrolats • Inhalations • Masks/clay work • Massage • Neat application • Shampoos • Showers

		• Sprays • Vaporisers/diffusers • The method of application, the amount of essential oil to be used and the frequency of use should be stated for each treatment • Nature of risks associated with self-treatment: - Excessive exposure - Non-recognition of effects - Incorrect usage of essences - Use of undiluted essences - Taking oils internally • Minimising risks by ensuring the client is correctly informed on how to administer the treatment • Informing the client on where to obtain oils and carriers of good therapeutic value and quality • Ensuring that if the therapist gives the client a blend to use it is correctly packaged and labelled with directions for use
	10.5. Explain the methods of manufacturing aromatherapy preparations for professional or home use	• Oil • Water • Emulsions - Lotions - Creams • Base materials • Commercial sources of supply • Dilutions • Labelling requirements

Assessment

10 clients to be treated 4 times each to make a total of 40 treatments

These are internally assessed by the college lecturer and verified by the external examiner

To include:

- Consultation including thorough medical history and general lifestyle
- Client profile (to include any current issues in their life)
- Treatment plan
- Rationale for the choice of carrier oil
- Rationale for the choice of each essential oil
- Indication of alternative oils that could have been used
- Exact amounts of carrier oil and essential oil blended

MCQ Practical examination	• Details of how the therapist conducted the treatment • Details of how the client felt and their feedback • Details of specific home care advice given: - Noting recommended methods for self-treatment, i.e.: ▪ Baths, vaporisers, compresses etc. ▪ Quantities of oil to be used and frequency of treatment • The following should also be documented for treatments 2 to 4: - All follow-up treatments must be dated and signed by both the therapist and the client - Consultation should be checked and any changes noted - Rationale for the choice of carrier oil - Rationale for the choice of each essential oil - Indication of alternative oils that could have been used - Exact amounts of carrier oil and essential oil blended - Details of how the therapist conducted the treatment - Details of how the client felt and their feedback - Details of specific home care advice given – noting recommended methods for self-treatment, i.e.: baths, vaporizers, compresses etc. and quantities of oil to be used and frequency of treatment - Overall conclusion - Reflective practice (must include reflective practice and an overall conclusion which must be documented separately) - Treatments should be evidenced through the consultation form
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Guide to taught content

The content contained within the unit specification is not prescriptive or exhaustive but is intended to provide helpful guidance to teachers and learners with the key areas that will be covered within the unit, and, relating to the kinds of evidence that should be provided for each assessment objective specific to the unit learning outcomes.

Document History

Version	Issue Date	Changes	Role
v1	25/09/2019	First published	Qualifications and Regulation Co-ordinator
v2	22/06/2026	Rebranding	Development Administrator