

VTCT Level 3 Diploma in Complementary Therapies

Operational start date:	1 September 2012
Credit value:	103
Total Qualification Time (TQT):	1030
Guided learning hours (GLH):	520 - 550
Qualification number:	600/4846/3

Statement of unit achievement

By signing this statement of unit achievement you are confirming that all learning outcomes, assessment criteria and range statements (if/where applicable) have been achieved under specified conditions, and that the evidence gathered is authentic.

This statement of unit achievement table must be completed prior to claiming certification.

Unit code	Date achieved	Learner signature	Assessor initials	IQA signature (if sampled)
Mandatory units				
UV31268				
UV31267				
UV31299				
UV31300				
UV31301				
UV31302				
Additional unit				
UV31303				

The qualification

Introduction

The VTCT Level 3 Diploma in Complementary Therapies is a preparation for work qualification that has been designed to prepare you for a career as a complementary therapist, whether it be as an aromatherapist, reflexologist or massage therapist/practitioner.

This qualification will develop your knowledge and understanding of the principles and practice and business practice for complementary therapies. Furthermore, you will learn about anatomy, physiology and pathology for complementary therapies.

You will also develop your understanding and practical skills to provide body massage, aromatherapy and reflexology. You may also choose to complete an additional unit which will develop your knowledge and understanding of healthy eating and wellbeing for the complementary therapy client.

This is a practitioner level qualification.

National Occupational Standards (NOS)

Units in this qualification have been mapped to the relevant NOS (where applicable). This qualification is regulated on the Regulated Qualifications Framework.

This qualification is approved and supported by Skills for Health, the sector skills council for health.

Prerequisites

Your centre will have ensured that you have the required knowledge, understanding and skills to enrol and successfully achieve this qualification.



Progression

The VTCT Level 3 Diploma in Complementary Therapies provides progression opportunities to specialist complementary therapy qualifications at Level 4.

Alternatively, you may wish to seek employment or self-employment as a:

- Complementary therapist
- Aromatherapist
- Reflexologist
- Massage therapist/practitioner

Qualification structure

Total credits required - 103

All mandatory units must be completed.

Mandatory units - 103 credits

VTCT unit code	Ofqual unit reference	Unit title	Credit value	GLH
UV31268	A/503/7776	Principles and practice of complementary therapies	13	30
UV31267	L/503/7779	Business practice for complementary therapies	12	60
UV31299	R/503/7640	Knowledge of anatomy, physiology and pathology for complementary therapies	13	94
UV31300	D/503/7740	Provide body massage for complementary therapies	19	112
UV31301	T/503/7744	Provide aromatherapy for complementary therapies	21	112
UV31302	K/503/7725	Provide reflexology for complementary therapies	25	112

Additional unit*

VTCT unit code	Ofqual unit reference	Unit title	Credit value	GLH
UV31303	J/503/7747	Healthy eating and wellbeing for the complementary therapy client	6	30

*Does not contribute to the overall credit of this qualification.

Guidance on assessment

This book contains the mandatory units that make up this qualification. Optional units will be provided in additional booklets (if applicable). Where indicated, VTCT will provide assessment materials. Assessments may be internal or external. The method of assessment is indicated in each unit.

Internal assessment

(any requirements will be shown in the unit)

Assessment is set, marked and internally quality assured by the centre to clearly demonstrate achievement of the learning outcomes. Assessment is sampled by VTCT external quality assurers.

External assessment

(any requirements will be shown in the unit)

Externally assessed question papers completed electronically will be set and marked by VTCT.

Externally assessed hard-copy question papers will be set by VTCT, marked by centre staff and sampled by VTCT external quality assurers.

Assessment explained

VTCT qualifications are assessed and quality assured by centre staff. Work will be set to improve your practical skills, knowledge and understanding. For practical elements, you will be observed by your assessor. All your work must be collected in a portfolio of evidence and cross-referenced to requirements listed in this record of assessment book.

Your centre will have an internal quality assurer whose role is to check that your assessment and evidence is valid and reliable and meets VTCT and regulatory requirements.

An external quality assurer, appointed by VTCT, will visit your centre to sample and quality-check assessments, the internal quality assurance process and the evidence gathered. You may be asked to attend on a different day from usual if requested by the external quality assurer.

This record of assessment book is your property and must be in your possession when you are being assessed or quality assured. It must be kept safe. In some cases your centre will be required to keep it in a secure place. You and your course assessor will together complete this book to show achievement of all learning outcomes, assessment criteria and ranges.



Creating a portfolio of evidence

As part of this qualification you are required to produce a portfolio of evidence. A portfolio will confirm the knowledge, understanding and skills that you have learnt. It may be in electronic or paper format.

Your assessor will provide guidance on how to prepare the portfolio of evidence and how to show practical achievement and understanding of the knowledge required to successfully complete this qualification. It is this booklet along with the portfolio of evidence that will serve as the prime source of evidence for this qualification.

Evidence in the portfolio may take the following forms:

- Observed work
- Witness statements
- Audio-visual media
- Evidence of prior learning or attainment
- Written questions
- Oral questions
- Assignments
- Case studies

All evidence should be documented in the portfolio and cross-referenced to unit outcomes. Constructing the portfolio of evidence should not be left to the end of the course.

Case studies

To achieve this qualification you must carry out and document evidence of the following case studies:

UV31300 - Provide body massage for complementary therapies: You must carry out and document evidence for at least 30 treatments.

UV31301 - Provide aromatherapy for complementary therapies: You must carry out and document evidence for at least 60 treatments.

UV31302 - Provide reflexology for complementary therapies: You must carry out and document evidence for at least 100 treatments.

Unit assessment methods

This section provides an overview of the assessment methods that make up each unit in this qualification. Detailed information on assessment is provided in each unit.

Mandatory units				
		External	Internal	
VTCT unit code	Unit title	Question paper(s)	Observation(s)	Portfolio of Evidence
UV31268	Principles and practice of complementary therapies	0	✗	✓
UV31267	Business practice for complementary therapies	0	✗	✓
UV31299	Knowledge of anatomy, physiology and pathology for complementary therapies	2	✗	✓
UV31300	Provide body massage for complementary therapies	0	✓	✓
UV31301	Provide aromatherapy for complementary therapies	0	✓	✓
UV31302	Provide reflexology for complementary therapies	0	✓	✓

Additional unit				
		External	Internal	
VTCT unit code	Unit title	Question paper(s)	Observation(s)	Portfolio of Evidence
UV31303	Healthy eating and wellbeing for the complementary therapy client	0	✗	✓

Unit glossary

	Description
VTCT product code	All units are allocated a unique VTCT product code for identification purposes. This code should be quoted in all queries and correspondence to VTCT.
Unit title	The title clearly indicates the focus of the unit.
National Occupational Standards (NOS)	NOS describe the skills, knowledge and understanding needed to undertake a particular task or job to a nationally recognised level of competence.
Level	Level is an indication of the demand of the learning experience; the depth and/or complexity of achievement and independence in achieving the learning outcomes.
Credit value	This is the number of credits awarded upon successful achievement of all unit outcomes. Credit is a numerical value that represents a means of recognising, measuring, valuing and comparing achievement.
Guiding Learning hours (GLH)	The activity of a learner in being taught or instructed by - or otherwise participating in education or training under the immediate guidance or supervision of - a lecturer, supervisor, tutor or other appropriate provider of education or training.
Total qualification time (TQT)	The number of hours an awarding organisation has assigned to a qualification for Guided Learning and an estimate of the number of hours a learner will reasonably be likely to spend in preparation, study, or any other form of participation in education or training. This includes assessment, which takes place as directed - but, unlike Guided Learning, not under the immediate guidance or supervision of - a lecturer, supervisor, tutor or other appropriate provider of education or training.
Observations	This indicates the minimum number of competent observations, per outcome, required to achieve the unit.
Learning outcomes	The learning outcomes are the most important component of the unit; they set out what is expected in terms of knowing, understanding and practical ability as a result of the learning process. Learning outcomes are the results of learning.
Evidence requirements	This section provides guidelines on how evidence must be gathered.
Observation outcome	An observation outcome details the tasks that must be practically demonstrated to achieve the unit.
Knowledge outcome	A knowledge outcome details the theoretical requirements of a unit that must be evidenced through oral questioning, a mandatory written question paper, a portfolio of evidence or other forms of evidence.
Assessment criteria	Assessment criteria set out what is required, in terms of achievement, to meet a learning outcome. The assessment criteria and learning outcomes are the components that inform the learning and assessment that should take place. Assessment criteria define the standard expected to meet learning outcomes.
Range	The range indicates what must be covered. Ranges must be practically demonstrated in parallel with the unit's observation outcomes.

UV31268

Principles and practice of complementary therapies

The aim of this unit is to develop your knowledge and understanding of the history and influences on the complementary therapy sector.

Level

3

Credit value

13

GLH

30

Observation(s)

0

External paper(s)

0



Principles and practice of complementary therapies

Learning outcomes

On completion of this unit you will:

1. Understand the key historical factors and theoretical background for complementary therapies
2. Understand the main influences on working within the complementary therapy industry
3. Understand the key aspects of good clinical practice

Evidence requirements

1. *Knowledge outcomes*
There must be evidence that you possess all the knowledge and understanding listed in the Knowledge section of this unit. In most cases this can be done by professional discussion and/or oral questioning. Other methods, such as projects, assignments and/or reflective accounts may also be used.
2. *Tutor/Assessor guidance*
You will be guided by your tutor/assessor on how to achieve learning outcomes in this unit. All outcomes must be achieved.
3. *External paper*
There is no external paper requirement for this unit.

Developing knowledge

Achieving knowledge outcomes

You will be guided by your tutor and assessor on the evidence that needs to be produced. Your knowledge and understanding will be assessed using the assessment methods listed below*:

- Projects
- Observed work
- Witness statements
- Audio-visual media
- Evidence of prior learning or attainment
- Written questions
- Oral questions
- Assignments
- Case studies
- Professional discussion

When a criterion has been orally questioned and achieved, your assessor will record this evidence in written form or by other appropriate means.

**This is not an exhaustive list.*

Knowledge



Learning outcome 1

Understand the key historical factors and theoretical background for complementary therapies

You can:	Portfolio reference / Assessor initials*
a. Examine the history and origins of complementary therapies	
b. Identify commonly available complementary therapies	
c. Evaluate the theory of techniques used in commonly available complementary therapies	

* Assessor initials to be inserted if orally questioned.



Learning outcome 2

Understand the main influences on working within the complementary therapy industry

You can:	Portfolio reference / Assessor initials*
a. Summarise the legal obligations of working with clients and the general public	
b. Explain the codes of practice and ethics relating to complementary therapies	
c. Analyse the roles of professional organisations relating to complementary therapies	
d. Evaluate the process of registration and regulation of complementary therapies	

* Assessor initials to be inserted if orally questioned.



Learning outcome 3

Understand the key aspects of good clinical practice

You can:	Portfolio reference / Assessor initials*
a. Identify the information required for assessment and treatment planning	
b. Explain how to accurately record information, store records and ensure confidentiality	
c. Evaluate appropriate referral procedures and protocols to use with clients and others involved in integrated healthcare	
d. Identify effective communication skills when dealing with clients and colleagues in maintaining good practice	

* Assessor initials to be inserted if orally questioned.

Unit content



This section provides guidance on the recommended knowledge and skills required to enable you to achieve each of the learning outcomes in this unit. Your tutor/assessor will ensure you have the opportunity to cover all of the unit content.

Learning outcome 1: Understand the key historical factors and theoretical background for complementary therapies

History and origins: Body massage, aromatherapy, reflexology, history and development from ancient times to modern day (e.g. Ancient Egypt, China, India, Ancient Greece, Rome, Persia, Europe and the Americas), the history and development of other therapies (e.g. acupuncture, Alexander technique, aromatherapy, Bach flower, Bowen technique, shiatsu, Reiki, remedial massage, kinesiology, herbalism, hypnotherapy).

Definitions and theories: Massage (Swedish massage movements, physical effects and benefits, psychological effects), definitions and theories of aromatherapy (the uses of essential oils, physical effects and benefits, psychological effects), definitions and theories of reflexology (reflex points, zones and their relationship to body systems, physical effects and benefits, psychological effects), concept of holism, holistic health, concept of balance and harmony, effects of physical environment on health and wellbeing, effects of social, economic and environmental factors on health and wellbeing.

Theory of techniques: Body massage, aromatherapy, reflexology, other therapies (e.g. acupuncture, Alexander technique, aromatherapy, flower essences, Bowen technique, shiatsu, Reiki, remedial massage, kinesiology, herbalism, hypnotherapy), the value of different theories.



Learning outcome 2: Understand the main influences on working within the complementary therapy industry

Legislative requirements and working practice:

Applicable national/local legislation relating to the workplace (e.g. health and safety, equality and diversity, data protection, employment, consumer protection, workplace regulations, manual handling, use of work equipment, liability insurance, employees, professional indemnity, control of substances hazardous to health, handling/storage/disposal/cautions of use of products, fire precautions, hygiene practice, disposal of waste, environmental protection), further information should be sought from the relevant authorities.

Legal obligations: Working with clients and the general public, duty of care, disclosure, insurance (e.g. employers' liability, personal accident), confidentiality, importance of meeting legal obligations to clients.

Codes of practice and ethics: Definition of codes of practice, definition of ethics, importance of codes of practice and ethics, codes of practice and ethics developed by the industry and professional associations (e.g. FHT - www.fht.org.uk).

Roles of professional associations and organisations: For example, Federation of Holistic Therapists (FHT), aims/objectives/roles/activities/functions of professional associations. For more details see National Occupational Standards (Skills for Health).

Process of registration and regulation: Statutory regulation of the profession (e.g. Criminal Records Bureau (CRB)), voluntary regulation (Complementary and Natural Healthcare Council (CNHC)).



Learning outcome 3: Understand the key aspects of good clinical practice

Information for assessment and treatment planning:

Consultation (client positioning to minimise barriers, privacy and comfort, verbal and non-verbal communication, medical history, lifestyle questionnaire, client expectations and preparation), review of assessment to plan treatment programme, agree treatment with client, obtain written consent, prepare a treatment record sheet, refer the client if necessary whilst ensuring confidentiality, adhering to data protection.

Record keeping and confidentiality:

Methods of recording and storing information (e.g. written, computer database), importance of accurate record keeping whilst ensuring confidentiality, adherence to legislation (e.g. data protection), following professional codes of conduct, disclosure of information to others (e.g. non-disclosure, referral).

Referral procedures and protocols:

Working within the limits of own responsibility and qualifications, importance of recommending appropriate treatments for client's condition, methods of referral, when to refer, to whom to refer (e.g. GP, counsellor, other complementary therapist, member of the social care or nursing team, Social Services, Citizens Advice Bureau).

Communication skills: Verbal (language, tone of voice, clarity, use of open and closed questioning), non-verbal (active listening techniques, body language, gestures, eye contact, facial expressions), use of visual aids, barriers to effective communication, importance of communication and rapport with others (clients, working team, other therapists, suppliers).

UV31267

Business practice for complementary therapies

The aim of this unit is to develop your knowledge, understanding and practical skills in researching, planning, maintaining and marketing a business in the complementary therapy industry. You will also learn to communicate effectively with clients and colleagues.

Level

3

Credit value

12

GLH

60

Observation(s)

0

External paper(s)

0



Business practice for complementary therapies

Learning outcomes

On completion of this unit you will:

1. Understand the key business criteria required for complementary therapies
2. Be able to research a business concept
3. Be able to prepare a business plan

Evidence requirements

1. *Knowledge outcomes*
There must be evidence that you possess all the knowledge and understanding listed in the Knowledge section of this unit. In most cases this can be done by professional discussion and/or oral questioning. Other methods, such as projects, assignments and/or reflective accounts may also be used.
2. *Tutor/Assessor guidance*
You will be guided by your tutor/assessor on how to achieve learning outcomes in this unit. All outcomes must be achieved.
3. *External paper*
There is no external paper requirement for this unit.

Developing knowledge

Achieving knowledge outcomes

You will be guided by your tutor and assessor on the evidence that needs to be produced. Your knowledge and understanding will be assessed using the assessment methods listed below*:

- Projects
- Observed work
- Witness statements
- Audio-visual media
- Evidence of prior learning or attainment
- Written questions
- Oral questions
- Assignments
- Case studies
- Professional discussion

When a criterion has been orally questioned and achieved, your assessor will record this evidence in written form or by other appropriate means.

**This is not an exhaustive list.*

Knowledge



Learning outcome 1

Understand the key business criteria required for complementary therapies

You can:	Portfolio reference / Assessor initials*
a. Explain the legal requirements for running a business	
b. Explain how marketing and public relations are used in businesses	
c. Describe the employment opportunities within the complementary therapy industry	
d. Explain how to promote complementary therapy practices	

* Assessor initials to be inserted if orally questioned.



Learning outcome 2

Be able to research a business concept

You can:	Portfolio reference / Assessor initials*
a. Compare and contrast different business types	
b. Research a potential business opportunity using a range of resources	
c. Research potential premises, staff, products and resource requirements	

* Assessor initials to be inserted if orally questioned.



Learning outcome 3

Be able to prepare a business plan

You can:	Portfolio reference / Assessor initials*
a. Prepare a business plan for self-employment	
b. Describe the professional services, staff and resources that may be required for a business plan	

* Assessor initials to be inserted if orally questioned.

Unit content



This section provides guidance on the recommended knowledge and skills required to enable you to achieve each of the learning outcomes in this unit. Your tutor/assessor will ensure you have the opportunity to cover all of the unit content.

Learning outcome 1: Understand the key business criteria required for complementary therapies

Legal requirements: Applicable national/local legislation relating to the workplace (e.g. health and safety, equality and diversity, data protection, employment, consumer protection, workplace regulations, manual handling, use of work equipment, liability insurance, employees, professional indemnity, control of substances hazardous to health, handling/storage/disposal/cautions of use of products, fire precautions, hygiene practice, disposal of waste, environmental protection), further information should be sought from the relevant authorities.

Marketing and public relations: Importance of marketing and public relations, market research and segmentation, customer needs and wants, promotion of products and services.

Employment opportunities: Self-employed (renting a room, room in own home, mobile therapist, owning a clinic), employed (spa, salon, clinic, healthcare, hotels, fitness centres, cruises, education, agency), full-time and part-time, career progressions (e.g. junior therapist, therapist, senior therapist, manager), roles and responsibilities, advantages and disadvantages of different employment opportunities (e.g. location, pay, conditions, progression routes, development).

Communication techniques: Verbal (language, tone of voice, clarity, use of open and closed questioning), non-verbal (active listening techniques, body language, gestures, eye contact, facial

expressions), use of visual aids, barriers to effective communication, importance of communication and rapport with others (clients, working team, other therapists, suppliers), advantages and disadvantages of communication techniques.

Promotion of practices: Promotional methods (posters, leaflets, mailshots, business cards, website, newspaper advertisements, TV or radio press release, gift vouchers, referrals, word of mouth, presentations and demonstrations, open events, promotional materials, loyalty cards, special price offers, packages, point of sale displays, merchandising, endorsement, networking, client feedback and questionnaires), advantages and disadvantages of different promotional methods, the importance of corporate image in production of promotional material (business cards, price lists, stationery, posters, forms).



Learning outcome 2: Be able to research a business concept

Different business types: Type of business (partnership, limited company, franchise, sole trader, mobile), examples of specific complementary establishments, advantages and disadvantages of different business types (e.g. products and services, costs, operation, success).

Potential business opportunities: Use research methods (qualitative, quantitative, market research, data analysis, questionnaires and survey), use research sources (e.g. websites, newspapers, magazines, business reports), strengths, weaknesses, opportunities and threats (SWOT) analysis.

Potential business requirements: Premises (e.g. location, size, costs), staff (e.g. job roles, qualifications, pay and conditions), products, resources (e.g. consumables, equipment, furniture).

Learning outcome 3: Be able to prepare a business plan

Business plan: Mission statement, market research and segmentation, competitor analysis, premises and location, products, services and prices, fixed and variable costs, staffing requirements, SWOT analysis, risk analysis, insurance, marketing and publicity, finance and accounting systems, cash flow forecast, security and data protection.

Self-employment: Registration as a sole trader, registration of business name, self-assessment tax return, insurance.

Business requirements for plan: Review premises, staff and resources to maintain a business plan, professional services that may be required (e.g. accountant, solicitor, product suppliers, public relations, administration).

Service costs: Selling prices for

treatments, services and products, staffing costs, commercially acceptable treatment times, profits.

Start-up and running costs: Fixed costs, variable costs, premises, rent, equipment and stock, staff, advertising and promotional materials, insurance, tax, licensing, travel expenses, professional association fees, methods of estimation (spreadsheets, calculations, profit and loss).

Notes

Use this area for making notes and drawing diagrams



UV31299

Knowledge of anatomy,
physiology and pathology for
complementary therapies

The aim of this unit is to develop your knowledge and understanding of anatomy, physiology and pathology.

Level

3

Credit value

13

GLH

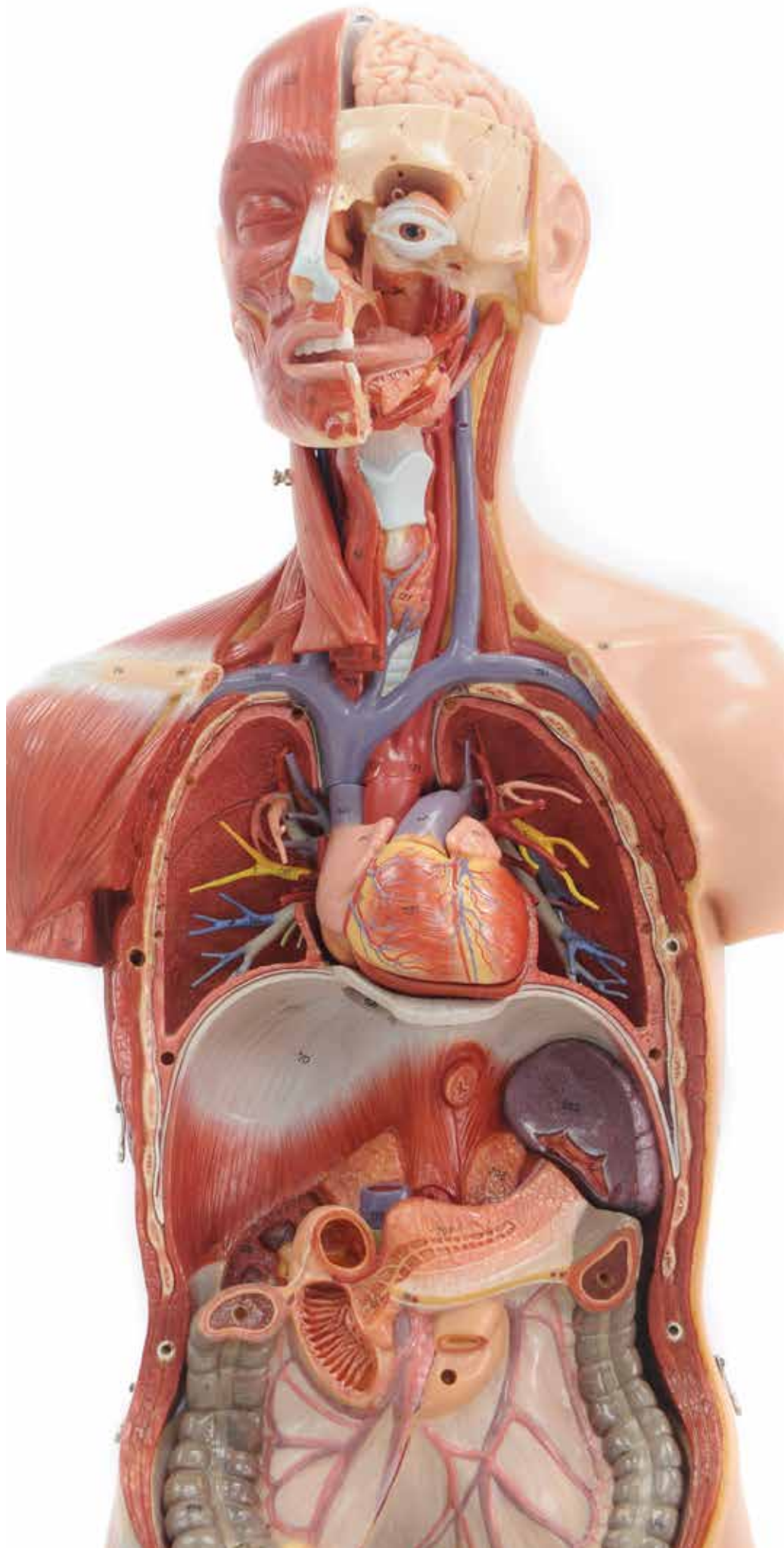
94

Observation(s)

0

External paper(s)

2



Knowledge of anatomy, physiology and pathology for complementary therapies

Learning outcomes

On completion of this unit you will:

1. Understand the organisation of the body
2. Understand the anatomy, physiology and pathologies of the skin, hair and nails
3. Understand the anatomy, physiology and pathologies of the skeletal system
4. Understand the anatomy, physiology and pathologies of the muscular system
5. Understand the anatomy, physiology and pathologies of the nervous system
6. Understand the anatomy, physiology and pathologies of the endocrine system
7. Understand the anatomy, physiology and pathologies of the respiratory system
8. Understand the anatomy, physiology and pathologies of the cardiovascular system
9. Understand the anatomy, physiology and pathologies of the lymphatic system
10. Understand the anatomy, physiology and pathologies of the digestive system
11. Understand the anatomy, physiology and pathologies of the urinary system
12. Understand the anatomy, physiology and pathologies of the reproductive system

Evidence requirements

1. *Knowledge outcomes*

There must be evidence that you possess all the knowledge and understanding listed in the Knowledge section of this unit. In most cases this can be done by professional discussion and/or oral questioning. Other methods, such as projects, assignments and/or reflective accounts may also be used.

A minimum of three pathologies (conditions) for each body system must be evidenced in your portfolio.

2. *Tutor/Assessor guidance*

You will be guided by your tutor/assessor on how to achieve learning outcomes in this unit. All outcomes must be achieved.

3. *External papers*

Knowledge and understanding in this unit will be assessed by external papers. The criteria that make up these papers are highlighted in white throughout this unit. **There are two external papers that must be achieved.**

The external papers assess anatomy and physiology only, pathology is not assessed by this method.

Developing knowledge

Achieving knowledge outcomes

You will be guided by your tutor and assessor on the evidence that needs to be produced. Your knowledge and understanding will be assessed using the assessment methods listed below*:

- Projects
- Observed work
- Witness statements
- Audio-visual media
- Evidence of prior learning or attainment
- Written questions
- Oral questions
- Assignments
- Case studies
- Professional discussion

**This is not an exhaustive list.*

Achieving the external paper

The external papers will test your knowledge of the criteria highlighted in white. **A pass mark of 70% must be achieved for each paper.** Criteria not achieved will be identified to your tutor/ assessor. You will then be orally questioned or asked to produce other forms of evidence as **all unit criteria must be achieved.**

Your assessor will complete the following table when the 70% pass marks have been achieved.

Paper	Date achieved	Assessor initials
1 of 2		
2 of 2		

Knowledge



Learning outcome 1

Understand the organisation of the body

You can:	Portfolio reference / Assessor initials*
a. Describe the anatomical regions of the body	
b. Describe the planes of the body	
c. Describe the directional terms of the body	
d. Describe the quadrants of the body	
e. Describe the chemical organisation of the body	
f. Describe the structure, function and types of cell	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.



Learning outcome 2

Understand the anatomy, physiology and pathologies of the skin, hair and nails

You can:	Portfolio reference / Assessor initials*
a. Explain the structure, function, growth and repair of the skin	
b. Explain the structure, function and growth cycle of the hair	
c. Explain the structure, function and growth cycle of the nails	
d. Analyse the pathologies of the skin	
e. Analyse the pathologies of the hair	
f. Analyse the pathologies of the nails	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.

A minimum of three pathologies for each body system must be evidenced in your portfolio.



Learning outcome 3

Understand the anatomy, physiology and pathologies of the skeletal system

You can:	Portfolio reference / Assessor initials*
a. Explain the structure and classification of bones	
b. Explain the structure, function and growth of the skeletal system	
c. Explain the types of joints and their range of movements	
d. Explain the functions of the arches of the feet	
e. Analyse the pathologies of the skeletal system	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.

A minimum of three pathologies for each body system must be evidenced in your portfolio.



Learning outcome 4

Understand the anatomy, physiology and pathologies of the muscular system

You can:	Portfolio reference / Assessor initials*
a. Explain the structure, function, growth and repair of the muscular system	
b. Explain the location and action of muscle groups within the muscular system	
c. Explain the principles of muscle contraction	
d. Analyse the pathologies of the muscular system	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.

A minimum of three pathologies for each body system must be evidenced in your portfolio.



Learning outcome 5

Understand the anatomy, physiology and pathologies of the nervous system

You can:	Portfolio reference / Assessor initials*
a. Describe the structure and function of each component of the nervous system	
b. Analyse the pathologies of the nervous system	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.

A minimum of three pathologies for each body system must be evidenced in your portfolio.



Learning outcome 6

Understand the anatomy, physiology and pathologies of the endocrine system

You can:	Portfolio reference / Assessor initials*
a. Explain the structure and function of the endocrine system	
b. Explain the location of endocrine glands	
c. Explain the function of the endocrine glands	
d. Describe the hormones secreted from the endocrine glands and their target sites	
e. Analyse the pathologies of the endocrine systems	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.

A minimum of three pathologies for each body system must be evidenced in your portfolio.



Learning outcome 7

Understand the anatomy, physiology and pathologies of the respiratory system

You can:	Portfolio reference / Assessor initials*
a. Explain the structure and function of the respiratory system	
b. Describe the stages of respiration	
c. Explain the process of gaseous exchange	
d. Analyse the pathologies of the respiratory system	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.

A minimum of three pathologies for each body system must be evidenced in your portfolio.



Learning outcome 8

Understand the anatomy, physiology and pathologies of the cardiovascular system

You can:	Portfolio reference / Assessor initials*
a. Explain the structure and function of the cardiovascular system	
b. Explain the composition and functions of the blood	
c. Explain the location, structure and function of the heart	
d. Explain the types of blood vessel	
e. Identify the major blood vessels of the body	
f. Define blood pressure	
g. Explain the factors that affect blood pressure	
h. Analyse the pathologies of the cardiovascular system	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.

A minimum of three pathologies for each body system must be evidenced in your portfolio.



Learning outcome 9

Understand the anatomy, physiology and pathologies of the lymphatic system

You can:	Portfolio reference / Assessor initials*
a. Explain the structure and function of the lymphatic system	
b. Describe the composition of lymph	
c. Explain the location and function of the major lymphatic nodes and ducts	
d. Explain the location and function of lymphatic organs	
e. Explain the principles of immunity	
f. Analyse the pathologies of the lymphatic system	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.

A minimum of three pathologies for each body system must be evidenced in your portfolio.



Learning outcome 10

Understand the anatomy, physiology and pathologies of the digestive system

You can:	Portfolio reference / Assessor initials*
a. Explain the structure and function of the digestive system	
b. Explain the processes of digestion	
c. Identify the location of the organs involved in digestion	
d. Analyse the pathologies of the digestive system	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.

A minimum of three pathologies for each body system must be evidenced in your portfolio.



Learning outcome 11

Understand the anatomy, physiology and pathologies of the urinary system

You can:	Portfolio reference / Assessor initials*
a. Explain the structure and function of the urinary system	
b. Explain the production and content of urine	
c. Analyse the pathologies of the urinary system	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.

A minimum of three pathologies for each body system must be evidenced in your portfolio.



Learning outcome 12

Understand the anatomy, physiology and pathologies of the reproductive system

You can:	Portfolio reference / Assessor initials*
a. Explain the structure and function of the reproductive system	
b. Explain the key stages of the human reproductive cycle	
c. Analyse the pathologies of the reproductive system	

* Assessor initials to be inserted if orally questioned.

Requirements highlighted in white are assessed in the external paper.

A minimum of three pathologies for each body system must be evidenced in your portfolio.

Unit content



This section provides guidance on the recommended knowledge and skills required to enable you to achieve each of the learning outcomes in this unit. Your tutor/assessor will ensure you have the opportunity to cover all of the unit content.

Learning outcome 1: Understand the organisation of the body

Organisation of the body: Simple chemicals (e.g. oxygen, carbon dioxide), nutrient chemicals (e.g. carbohydrates, lipids, proteins, vitamins, minerals, fibre, water), complex chemicals (e.g. ATP, DNA), cells, tissues, organs, systems, organisms.

Major tissue types and locations: Epithelial tissue (protective, secretory), simple epithelial tissue (squamous, cuboidal, columnar, ciliated), stratified epithelial tissue (keratinised, non-keratinised, transitional), connective tissue (fibrous, areolar, adipose, lymphoid, cartilage, bone), blood (red blood cells, white blood cells, platelets, plasma), muscular tissue (skeletal, smooth, cardiac), nervous tissue (neurones, neurological cells), membranes (serous, mucous, synovial).

Anatomical regions of the body: Definitions and locations (abdominal, axillary, brachial, buccal, calcaneal, carpal, celiac, cephalic, cervical, costal, cranial, crural, cubital, cutaneous, femoral, forearm, frontal, gluteal, groin, inguinal, lumbar, mammary, ophthalmic, orbital, palmar, patellar, pectoral, pedal, pelvic, perineal, pericardial, plantar, popliteal, sacral, tarsal, thoracic, umbilica).

Directional terms: Definitions and examples (superior, inferior, medial, lateral, superficial, deep, anterior, posterior, proximal, distal, parietal, visceral).

Planes: Frontal, sagittal, transverse, longitudinal, oblique.

Structure and function of cells:

Components (cell membrane, nucleus, nucleolus, cytoplasm, vacuoles, vesicles, centrioles, centrosome, organelles, golgi, lysosome, ribosome, mitochondria, endoplasmic reticulum), process of transport across cell membrane (diffusion, osmosis, facilitated diffusion, active transport, dissolution, filtration, phagocytosis, pinocytosis).

Cell growth and repair: Process of mitosis (prophase, metaphase, anaphase, telophase, interphase).

Growth and repair: Cells, tissues, bone formation, homeostasis, influencing factors, hormones, nutrition, environmental, pathologies.

Pathologies: Viral, bacterial, fungal, congenital, hormonal, allergic.



Learning outcome 2: Understand the anatomy, physiology and pathologies of the skin, hair and nails

Structure of the skin: Epidermis layer (stratum corneum/horny, stratum lucidum/clear, stratum granulosum/granular, stratum spinosum/prickle, stratum germinativum/basal), dermis layer (papillary, reticular, subcutaneous, blood capillary, lymphatic capillary network, hair, sebaceous gland, sweat glands, sensory and motor nerve endings, collagen), subcutaneous layer (adipose), glands (sebaceous, sebum, eccrine, apocrine).

Structure of the hair: Components of hair (hair follicle, hair shaft, inner root sheath, outer root sheath, arrector pili muscle, keratin, cuticle, cortex, medulla, dermal papilla), hair types (lanugo, vellus, terminal).

Structure of the nail: Nail bed, hyponychium, eponychium, paronychia, mantle, lateral nail fold, nail grooves, matrix, lunula, cuticle, nail plate, free edge.

Functions of the skin, hair and nails:

Skin – secretion, heat regulation, absorption, protection, excretion, sensation, vitamin production, melanin formation.

Hair – heat regulation, protection.

Nails – protection, manual dexterity.

Growth and repair:

Skin – growth cycle (cell formation, keratinisation, desquamation, healing), definition and appearance of skin types (mature, young, dry, oily, combination, sensitive, balanced), factors affecting skin condition (age, diet, nutrition, smoking, alcohol, ultraviolet, stress, climate).

Hair – growth cycle (anagen, catagen, telogen), factors affecting hair growth

(congenital, hormonal, topical, systemic, non-systemic, medication).

Nail – growth cycle (nail formation in matrix, layers, keratin), factors affecting nail growth (e.g. health, age, diet, medication).

Pathologies of the skin: Causes, signs and symptoms, infestations (e.g. scabies, mites, pediculosis pubis, pediculosis corporis), bacterial infections (e.g. impetigo, conjunctivitis, acne vulgaris, acne rosacea, boils, folliculitis), viral infections (e.g. herpes simplex, herpes zoster, verrucae or warts), fungal diseases (e.g. tinea corporis, tinea capitis, tinea pedis), allergies (e.g. dermatitis, eczema, urticaria), pigmentation disorders (e.g. vitiligo, albinism, chloasma, ephelides, lentigo, naevae, leucoderma, erythema), general disorders (e.g. sensitive skin, ultraviolet damage, pustules, papules), skin cancers (melanoma, carcinoma).

Pathologies of the hair: Trichorrhexis nodosa, loose anagen syndrome, trichotillomania, alopecia, tinea capitis, seborrheic dermatitis, hypotrichosis, folliculitis on scalp.

Pathologies of the nails: Causes, signs and symptoms (e.g. leukonychia, hang nail, paronychia, onychorrhexis, onycholysis, transverse ridges, vertical ridges, tinea unguium, pitting).

Less common pathologies: Definitions, signs and symptoms of less common pathologies (bromidrosis/osmidrosis, anhidrosis, hyperhidrosis, scleroderma, systemic lupus erythematosus, malignant tumours, burns, pressure sores/bed sores).



Learning outcome 3: Understand the anatomy, physiology and pathologies of the skeletal system

Functions of the skeleton: Shape and support, muscle attachment and leverage, joints for movement, production of red blood cells, storage of calcium, protection.

Location, structure and function of bones:

Skeletal system (axial, appendicular), bones of the head (frontal, parietal, temporal, occipital, sphenoid, ethmoid, nasal, zygomatic, maxillae, mandible), bones of the neck (cervical vertebrae, atlas, axis), bones of the spine (thoracic vertebrae, lumbar vertebrae, sacral vertebrae, coccygeal vertebrae, intervertebral discs), bones of the torso (ribs, sternum, clavicle, scapula, pelvic girdle), bones of the pelvic girdle (ilium, ischium, pubis), bones of the upper limbs (humerus, radius, ulna), bones of the hands (carpals, metacarpals, phalanges), bones of the lower limbs (femur, patella, tibia, fibula), bones of the feet (tarsals, metatarsals, phalanges), arches of the foot (medial longitudinal, lateral longitudinal, anterior transverse, posterior transverse), types of bones (compact, cancellous, long, short, flat, irregular, sesamoid), components of long bone (diaphysis, epiphysis, cartilage, articular cartilage, medullary cavity, periosteum).

Location, structure and function of joints: Classifications (fibrous/immovable, cartilaginous/slightly moveable, synovial/freely moveable), synovial joint (joint capsule, ligaments, synovial fluid, articular cartilage, bone), types of synovial joint (gliding, ellipsoid, hinge, saddle, pivot, ball and socket), range of movement associated with joint types (flexion, extension, circumduction, rotation, adduction, abduction, pronation, supination, dorsiflexion, plantar flexion, eversion, inversion).

Growth and repair: Definition and function (osteoblasts, osteocytes, osteoclasts), process of ossification.

Pathologies (common and less common):

Causes, signs and symptoms, fractures, breaks, osteoarthritis, rheumatoid arthritis, gout, osteoporosis, repetitive strain injuries (e.g. tendonitis, bursitis, carpal tunnel syndrome), spinal injuries (e.g. whiplash, slipped disc), postural defects (e.g. lordosis, kyphosis, scoliosis), foot problems (e.g. bunions, hammer toe, plantar fasciitis), artificial joints, systemic lupus erythematosus, synovitis, rickets, ankylosing spondylitis, spondylosis, Paget's disease, osteomalacia, osteogenesis imperfecta, cervical stenosis.



Learning outcome 4: Understand the anatomy, physiology and pathologies of the muscular system

Functions of the muscular system:

Movement of skeleton, maintenance of posture, generation of heat.

Structure and function: Muscle types (voluntary/skeletal, involuntary/smooth, cardiac), characteristics of muscle (contractibility, elasticity, excitability, extensibility), structure of skeletal muscle (origin, insertion, tendon, aponeurosis, epimysium, endomysium, perimysium, fascicles, muscle fibres, myofibrils, actin and myosin, sarcoplasmic reticulum), types of muscle contraction during movement (isotonic concentric, isotonic eccentric, isometric), muscle roles during movement (agonist, antagonist, synergist, fixator).

Location and action of skeletal muscles:

Muscles of the scalp and face (frontalis, occipitalis, orbicularis oculi, corrugator supercilii), nasalis, orbicularis oris, zygomaticus, risorius, mentalis), facial muscles of mastication (buccinators, masseter, temporalis), neck muscles (platysma, sternocleidomastoid), muscles of anterior thorax (pectoralis major and minor, external and internal intercostals, diaphragm, serratus anterior), muscles of posterior thorax (erector spinae, trapezius, latissimus dorsi, levator scapulae, rhomboids major and minor, rotator cuff, supraspinatus, infraspinatus, teres minor, subscapularis, teres major), muscles of upper arm (deltoid, biceps brachii, coracobrachialis, brachialis, triceps brachii), muscles of lower arm and hand (pronator teres, brachioradialis, flexor carpi radialis, flexor carpi ulnaris, flexor carpi digitorum, longus, brevis, extensor, carpi ulnaris, extensor carpi digitorum, abductor pollicis brevis, flexor pollicis brevis, thenar and hypothenar eminence), muscles of the

abdominal region (external and internal obliques, rectus abdominis, transversus abdominis, quadratus lumborum), muscles of the hip (iliopsoas, piriformis, gluteus maximus, gluteus medius, gluteus minimus, tensor fasciae latae), muscles of the thigh (sartorius, rectus femoris, vastus lateralis, vastus intermedius, vastus medialis, biceps femoris, semitendinosus, semimembranosus, gracilis, adductors longus, brevis, magnus), muscles of the lower leg and foot (gastrocnemius, soleus, tibialis anterior, peroneus longus, extensor digitorum longus, flexor digitorum longus, extensor hallucis longus).

Growth and repair: Process of muscular hypertrophy (e.g. increased muscle fibre diameter, myofibril production, increased mitochondria).

Pathologies (common and less common): Causes, signs and symptoms, cramp and spasm, fatigue, inflammatory conditions, sprains, muscle strains, rheumatism, atrophy, tetanus, torticollis, fibrositis, fibromyalgia, muscular dystrophy, myasthenia gravis, spasticity, myositis, myopathy, shin splints.



Learning outcome 5: Understand the anatomy, physiology and pathologies of the nervous system

Function of the nervous system:

Detection of stimuli, process and interpretation of stimuli, response to stimuli.

Location, structure and function:

Central nervous system (brain, spinal cord), peripheral nervous system (cranial nerves, spinal nerves, brachial plexus, lumbar plexus, sacral plexus), autonomic nervous system (sympathetic, parasympathetic), types of neurone (motor, efferent, afferent), structure of a motor neurone (axon, dendrites, cell body, myelin sheath, neurilemma, axon terminals, synapse, nodes of Ranvier, grey matter, white matter), brain (meninges, ventricles, cerebrospinal fluid, cerebrum, cerebellum, pons Varolii, medulla oblongata, hypothalamus, thalamus, brain stem), spinal cord (white matter, grey matter, dura, arachnoid, pia mater, cerebrospinal fluid), generation of nerve impulses, growth and repair of nerves.

Pathologies (common and less

common): Causes, signs and symptoms, stress, sciatica, neuralgia, myalgic encephalomyelitis/chronic fatigue syndrome, referred pain, epilepsy, cerebral palsy, Alzheimer's disease and dementia, strokes including transient ischaemic attacks, Bell's palsy, Parkinson's disease, motor neurone disease, multiple sclerosis, myasthenia gravis, meningitis, paralysis, poliomyelitis, deafness, earache, glue ear, tinnitus, vertigo, cataract, conjunctivitis, glaucoma, peripheral neuropathy, spina bifida.



Learning outcome 6: Understand the anatomy, physiology and pathologies of the endocrine system

Functions of the endocrine system:

Hormone secretion into the blood stream, maintenance of homeostasis, control of body's functions (stimulation/inhibition of growth, induction/suppression of cell death, inhibition of immune system, regulation of metabolism, preparation for new activity, preparation for new phase in life, controlling reproductive cycle).

Location, structure and function:

Endocrine glands (hypothalamus, pituitary, pineal, thyroid, parathyroid, thymus, pancreas, adrenal, ovaries, testes), associated hormones and hormone actions (thyroid stimulating hormone, adrenocorticotrophic hormone, human growth hormone, follicle stimulating hormone, luteinising hormone, lactogenic hormone, antidiuretic hormone, oxytocin, melatonin, thyroxine T3, calcitonin, parathormone, insulin, glucagon, aldosterone, cortisone, testosterone, oestrogen, progesterone, adrenalin, noradrenaline), relationship of endocrine system with other body systems (nervous, circulatory, digestive, reproductive, integumentary), growth and repair.

Pathologies (common and less

common): Causes, signs and symptoms, thyrotoxicosis, myxoedema, goitre, Addison's syndrome, Cushing's syndrome, diabetes mellitus, diabetes insipidus.



Learning outcome 7: Understand the anatomy, physiology and pathologies of the respiratory system

Functions of the respiratory system:

Oxygen supply to body tissues, carbon dioxide removal from body tissues.

Location, structure and function:

Respiratory system (mouth, nose, nasal cavity, larynx, pharynx, epiglottis, trachea, primary bronchi, bronchioles, alveoli, lungs, pulmonary capillary network, pleural membranes, diaphragm, intercostal muscles), mechanism of inhalation and exhalation, gaseous exchange, composition of inspired and expired air, process of internal and external respiration, control of respiration (chemical, nervous), process of pulmonary circulation, relationship of respiratory system with other body systems (circulatory, nervous, muscular), growth and repair.

Pathologies (common and less common):

Causes, signs and symptoms, emphysema, bronchitis, asthma, pneumonia, tuberculosis, hay fever, rhinitis, whooping cough, sinusitis, laryngitis, pharyngitis, fibrosis, sarcoidosis, pleurisy, chronic obstructive airways disease, chronic obstructive pulmonary disorder, cystic fibrosis, lung cancer, bronchiolitis, pertussis, pneumothorax.



Learning outcome 8: Understand the anatomy, physiology and pathologies of the cardiovascular system

Functions of the cardiovascular system:

Transportation (nutrients, gases, hormones, antibodies, waste products), heat regulation, protection and immunity, blood flow distribution, clotting.

Location of blood vessels: Arteries of the head and neck (innominate, common carotid, internal carotid, external carotid, facial, occipital, superficial, temporal), veins of the head and neck (posterior external jugular, occipital, superficial, temporal, maxillary, anterior facial, common facial, internal jugular, external jugular), arteries of the body (coronary artery, ascending and descending aorta, left and right common carotid, left and right subclavian, intercostal, pulmonary, right hepatic, splenic, renal, superior mesenteric, right iliac, inferior mesenteric, left iliac, vertebral, axillary, brachial, left and right ulnar, left and right radial, left and right deep palmar arch, left and right superficial palmar arch, external iliac, left and right femoral, left and right popliteal, left and right anterior tibial, left and right posterior tibial, plantar arch, digital arteries), veins of the body (inferior vena cava, pulmonary, right hepatic, hepatic portal, splenic, right renal, left and right iliac, left and right axillary, left and right brachial, left and right basilica, left and right cephalic, left and right subclavian, long saphenous, left and right short saphenous, dorsal venous arch, left and right femoral, left and right popliteal, left and right posterior tibial, left and right anterior tibial).

Location, structure and function:

Blood (plasma, erythrocytes, leucocytes, thrombocytes), blood vessels (arteries, arterioles, veins, venules, capillaries), heart (superior vena cava, inferior vena

cava, right atrium, tricuspid valve, right ventricle, pulmonary valve, pulmonary artery, septum, pulmonary veins, left atrium, bicuspid valve, left ventricle, aorta, aortic arch, endocardium, myocardium, pericardium), cardiac cycle (diastole, atrial systole, ventricular systole), electrical conduction in the heart (sino-atrial node, atrioventricular node), type of circulation (pulmonary, systemic, portal, coronary), definition of heart rate, heart rate values (males, females), heart rate control (nervous system, hormonal), definition of blood pressure (systolic, diastolic), blood pressure measurements and classifications, blood pressure regulation, factors affecting blood pressure (e.g. force of the heart beat, volume of blood, blood flow resistance in the arteries, viscosity of the blood, elasticity of vessel walls), causes of blood pressure change (e.g. diet, exercise, stress, medication).

Growth and repair: Process of blood clotting (thrombocytes, thromboplastin, prothrombin, calcium, thrombin, fibrinogen, fibrin).

Pathologies (common and less common): Causes, signs and symptoms, anaemia, aneurysm, arteriosclerosis, atherosclerosis, coronary thrombosis, deep vein thrombosis, hypertension, hypotension, varicose veins, palpitations, high cholesterol, myocardial infarction, atherosclerosis, arteriosclerosis, heart disease, palpitations, tachycardia, bradycardia, cardiac arrhythmia, intermittent claudication, pulmonary embolism.



Learning outcome 9: Understand the anatomy, physiology and pathologies of the lymphatic system

Functions of the lymphatic system:

Transportation (excess fluid, foreign particles, fats), purification (waste and toxins), protection (antibodies for defence).

Location, structure and function:

Lymph (leucocytes, lymphocytes, waste products), lymphatic capillaries, lymphatic vessels, lymphatic nodes (superficial and deep cervical, submandibular, axillary, supraclavicular, iliac, inguinal, popliteal), lymphatic ducts (general, thoracic duct, right lymphatic duct, cisterna chyli), lymphoid tissue (spleen, thymus, tonsils,

appendix, Peyer's patches), immunity (antigens, antibodies, acquired immunity, natural immunity, allergy triggers and the body's response), relationship with other body systems (muscular, digestive, immune), growth and repair.

Pathologies (common and less common):

Causes, signs and symptoms, cancer, fever, cellulitis, rheumatoid arthritis, oedema, Hodgkin's disease, lymphoedema, myalgic encephalomyelitis, non-Hodgkin's lymphoma, leukaemia.

Learning outcome 10: Understand the anatomy, physiology and pathologies of the digestive system

Functions of the digestive system:

Ingestion, mechanical and chemical breakdown of food, digestion, absorption of nutrients, defaecation.

Location, structure and function:

Mouth, buccal cavity, lips, teeth, tongue, pharynx, epiglottis, oesophagus, salivary glands, stomach, cardiac sphincter, pyloric sphincter, oblique muscle layer, small intestine (duodenum, jejunum, ileum, villi), large intestine (ileocaecal valve, caecum, ascending colon, transverse colon, descending colon, rectum, anus, anal sphincter), accessory digestive organs (gastric glands, pancreas, intestinal glands, liver, gall bladder), process of physical digestion (mastication, peristalsis, churning), process of chemical digestion (proteases, lipases, amylases), process of absorption of nutrients (proteins, peptones, polypeptides, amino acids, carbohydrates,

monosaccharides, disaccharides, polysaccharides, fats, fatty acids, glycerol), relationship with other body systems (circulatory, endocrine, lymphatic, muscular, nervous), growth and repair.

Pathologies (common and less common):

Causes, signs and symptoms, heartburn, indigestion, irritable bowel syndrome, constipation, diarrhoea, gall stones, coeliac's disease, ulcer, inflamed gall bladder, pernicious anaemia, colitis, ulcerative colitis, Crohn's disease, diverticulosis, diverticulitis, colon cancer, enteritis, gastritis.



Learning outcome 11: Understand the anatomy, physiology and pathologies of the urinary system

Functions of the urinary system:

Distribution of intracellular and extracellular fluid, balance fluid intake with fluid output, general electrolyte composition and balance, maintain pH values of the body's fluid systems, regulation of blood pressure.

Location, structure and function:

Kidneys (capsule, cortex, medulla, pyramids, calyces), nephron (afferent and efferent arterioles, glomerulus, Bowman's, glomerular capsule, proximal coiled tubule, loop of Henle, distal coiled tubule, collecting duct), ureters, bladder, urethra, urine production (filtration, reabsorption,

active secretion), factors affecting urine production (cold and hot weather, activity and inactivity, stress, water consumption), urine composition (urea, uric acid/ ammonia, salts, water), relationship with other body systems (circulatory, endocrine, skeletal, integumentary), growth and repair.

Pathologies (common and less

common): Causes, signs and symptoms, cystitis, incontinence, renal failure, kidney stones, bladder stones, nephritis, renal failure, renal colic, uraemia, dysuria, enuresis, incontinence, nephroblastoma.

Learning outcome 12: Understand the anatomy, physiology and pathologies of the reproductive system

Functions of the reproductive system:

Production of sperm and ova, meiosis, mitosis, cytokinesis.

Location, structure and function:

The female reproductive tract (ovum, ovary, fallopian tubes, uterus, cervix, vulva, vagina, labia, clitoris, vestibule and greater vestibular glands, mammary glands), function of female sex hormones (e.g. oestrogen, progesterone), male reproductive tract (testes, scrotum, vas deferens, epididymis, seminal vesicles, prostate, urethra, penis), function of male sex hormones (e.g. testosterone).

Growth and repair: Define female reproductive stages (puberty, pregnancy, menopause), effects of female puberty, menstrual cycle (menstruation, follicular phase, ovulation, luteal phase), stages of pregnancy (fertilisation, post-fertilisation,

cell division, embryo formation, foetal development, parturition, lactation), effects of female menopause (e.g. cessation of menses, mood swings, hot flushes, bone loss, atrophy of reproductive organs), male reproductive stages (puberty, menopause), effects of male puberty, effects of male menopause (e.g. fatigue, weakness, depression, sexual dysfunction).

Pathologies (common and less

common): Causes, signs and symptoms, infertility, mastitis, amenorrhoea, dysmenorrhoea, pre-menstrual syndrome, sexually transmitted diseases, polycystic ovarian syndrome, endometriosis, pelvic inflammatory disease, testicular cancer, prostate cancer, breast cancer, cervical cancer, pelvic inflammatory disease, impotence, ovarian cysts.

UV31300

Provide body massage for complementary therapies

The aim of this unit is to provide you with the knowledge, understanding and practical skills required to carry out a full body massage for complementary therapies.

Level

3

Credit value

19

GLH

112

Observation(s)

3

External paper(s)

0



Provide body massage for complementary therapies

Learning outcomes

On completion of this unit you will:

1. Be able to prepare for body massage treatment
2. Be able to provide body massage treatment
3. Be able to reflect upon body massage treatment

Evidence requirements

1. *Environment*
Evidence for this unit may be gathered within the workplace or realistic working environment (RWE).
2. *Simulation*
Simulation is not allowed in this unit.
3. *Observation outcomes*
Competent performance of Observation outcomes must be demonstrated on **at least three occasions**. Assessor observations, witness testimonies and products of work are likely to be the most appropriate sources of performance evidence. Professional discussion may be used as supplementary evidence for those criteria that do not naturally occur.

Assessed observations should not be carried out on the same day for the same learning outcome. There should be sufficient time between assessments for reflection and personal development.

You need to meet the same standard on a regular and consistent basis. Separating the assessments by a period of at least two weeks is recommended as competence must be demonstrated on a consistent and regular basis.

4. *Range*
All ranges must be practically demonstrated or other forms of evidence produced to show they have been covered.
5. *Knowledge outcomes*
There must be evidence that you possess all the knowledge and understanding listed in the Knowledge section of this unit. In most cases this can be done by professional discussion and/or oral questioning. Other methods, such as projects, assignments and/or reflective accounts may also be used.
6. *Tutor/Assessor guidance*
You will be guided by your tutor/assessor on how to achieve learning outcomes and cover ranges in this unit. All outcomes and ranges must be achieved.
7. *External paper*
There is no external paper requirement for this unit.
8. *Case studies*
You must carry out and document evidence for at least **30** treatments. There must be a minimum of two treatments for each of six clients.

Achieving observations and range

Achieving observation outcomes

Your assessor will observe your performance of practical tasks. The minimum number of competent observations required is indicated in the Evidence requirements section of this unit.

Criteria may not always naturally occur during a practical observation. In such instances you will be asked questions to demonstrate your competence in this area. Your assessor will document the criteria that have been achieved through professional discussion and/or oral questioning. This evidence will be recorded by your assessor in written form or by other appropriate means.

Your assessor will sign off a learning outcome when all criteria have been competently achieved.

Achieving range

The range section indicates what must be covered. Ranges should be practically demonstrated as part of an observation. Where this is not possible other forms of evidence may be produced. All ranges must be covered.

Your assessor will document the portfolio reference once a range has been competently achieved.

Case studies sign off

To achieve this unit you must carry out and document evidence for at least **30** treatments. There must be a minimum of two treatments for each of six clients.

Your assessor will complete the table below when **30** treatments have been completed and are documented in your portfolio of evidence.

Date achieved	Assessor initials



Observations

Learning outcome 1

Be able to prepare for body massage treatment

You can:

- a. Prepare self, client and work area in accordance with current legislation and working practice requirements
- b. Consult with clients to identify factors that may influence treatment objectives
- c. Provide clear recommendations to the client based on the outcome of the consultation
- d. Select materials and equipment to suit client treatment needs

** May be assessed through supplementary evidence.*

Observation	1	2	3
Date achieved			
Criteria questioned orally			
Portfolio reference			
Assessor initials			
Learner signature			



Learning outcome 2

Be able to provide body massage treatment

You can:

- a. Communicate and behave in a professional manner
- b. Position self and client throughout treatment to ensure privacy, comfort and wellbeing
- c. Use working methods that meet professional, legal and organisational requirements
- d. Identify skin types, characteristics, general body types and common postural faults
- e. Perform and adapt body massage treatment using materials, equipment and techniques correctly and safely to meet the needs of the client
- f. Locate underlying body structures during treatment
- g. Complete treatment to the satisfaction of the client in a commercially acceptable time
- h. Provide suitable aftercare and home care advice
- i. Record treatment accurately and store information securely in line with current legislation

*May be assessed through supplementary evidence.

Observation	1	2	3
Date achieved			
Criteria questioned orally			
Portfolio reference			
Assessor initials			
Learner signature			



Range

*You must practically demonstrate that you have:

Met all the objectives	Portfolio reference
Relaxation	
Reduction of muscle tension	
Uplift/stimulation	
Increased circulation	
Stress relief	
Improved skin condition	
Used all the massage techniques	Portfolio reference
Effleurage	
Petrissage	
Tapotement	
Friction	
Vibration	
Neuromuscular	
Passive joint movements	

*It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.



***You must practically demonstrate that you have:**

Treated all areas		Portfolio reference
Back		
Abdomen		
Legs and feet		
Neck and shoulders (seated)		
Neck and shoulders (prone)		
Face		
Full body		
Given all the aftercare advice		Portfolio reference
Self-massage		
Relaxation		
Posture		
Breathing		
Products		
Further treatments		

*It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.

Developing knowledge

Achieving knowledge outcomes

You will be guided by your tutor and assessor on the evidence that needs to be produced. Your knowledge and understanding will be assessed using the assessment methods listed below*:

- Projects
- Observed work
- Witness statements
- Audio-visual media
- Evidence of prior learning or attainment
- Written questions
- Oral questions
- Assignments
- Case studies
- Professional discussion

**This is not an exhaustive list.*

Where applicable your assessor will integrate knowledge outcomes into practical observations through professional discussion and/or oral questioning.

When a criterion has been orally questioned and achieved, your assessor will record this evidence in written form or by other appropriate means. There is no need for you to produce additional evidence as this criterion has already been achieved.

Some knowledge and understanding outcomes may require you to show that you know and understand how to do something. If you have practical evidence from your own work that meets knowledge criteria, then there is no requirement for you to be questioned again on the same topic.

Knowledge



Learning outcome 1

Be able to prepare for body massage treatment

You can:	Portfolio reference / Assessor initials*
e. Describe the requirements for preparing self, client and work area for body massage treatment	
f. Describe the environmental conditions suitable for body massage treatment	
g. Describe the objectives and possible benefits of body massage treatment	
h. Explain the contra-indications that may prevent or restrict body massage treatment	
i. Describe the influencing factors that need to be considered when carrying out a client consultation	
j. Explain the reasons why the client may be referred to a healthcare practitioner	
k. Describe the employer's and employee's health, safety and security responsibilities	

* Assessor initials to be inserted if orally questioned.



Learning outcome 2

Be able to provide body massage treatment

You can:	Portfolio reference / Assessor initials*
j. Evaluate the results of treatment	
k. Describe the history, philosophy and role of Swedish massage and other massage traditions	
l. Explain the uses of the classical massage movements and the possible psychological and physiological effects on the body systems	
m. Explain how body massage techniques can be adapted to suit the individual characteristics of a client	
n. Explain the uses of different media	
o. Describe safe handling and use of products, materials, tools and equipment	
p. Describe the importance of the correct maintenance and storage of products, materials, tools and equipment	
q. Describe the contra-actions that may occur during and following treatment and how to respond	
r. Explain the aftercare and home care advice that should be provided	
s. Describe the methods of evaluating effectiveness of treatment	

* Assessor initials to be inserted if orally questioned.



Learning outcome 3

Be able to reflect upon body massage treatment

You can:	Portfolio reference / Assessor initials*
a. Reflect on own attitudes, beliefs, interests, priorities and values in relation to personal growth as a massage therapist	
b. Evaluate own knowledge and practice of massage in relation to professional codes of conduct and current working practices	
c. Identify own strengths and weaknesses in order to best serve self and client	
d. Describe the basic elements of reflective practice	
e. Describe how own self-awareness impacts on personal and professional life	
f. Identify lifelong learning opportunities to plan for self-development	
g. Describe how to record evidence of own knowledge and practical experience	
h. Explain the importance of acting on own evaluation to improve body massage treatment	

* Assessor initials to be inserted if orally questioned.

Unit content



This section provides guidance on the recommended knowledge and skills required to enable you to achieve each of the learning outcomes in this unit. Your tutor/assessor will ensure you have the opportunity to cover all of the unit content.

Learning outcome 1: Be able to prepare for body massage treatment

Preparation of a treatment environment:

Suitable sanitised work area, atmosphere, temperature, noise levels, ventilation, lighting, soft music, treatment couch, trolley, clean linen, couch roll, hygiene techniques, sanitising products, treatment medium, waste disposal.

Preparation of self: Personal hygiene (fresh breath, clean hair, washed and sanitised hands, nails, no body odour), professional (no perfume or chewing), full/clean pressed uniform, no jewellery (except a smooth wedding band), neat hair (tied back/fringe secured), flat/closed footwear, nails (short, smooth, no varnish/extensions), correct posture, protection/grounding.

Preparation of client: Greeting, consultation, establish treatment expectations, jewellery/clothing removal, assist client into correct position, ensure client comfort modesty/privacy, use of supports, sanitisation procedures.

Workplace legislation: Applicable national/local legislation relating to the workplace (for example health and safety, equality and diversity, data protection, employment, consumer protection, workplace regulations, manual handling, use of work equipment, liability insurance (employees, professional indemnity), control of substances hazardous to health, handling/storage/disposal/cautions of use of products, fire precautions, occurrences, hygiene practice, disposal of waste, environmental protection. Further information should be sought from the relevant authorities.

Consultation techniques: Professional, active listening, body language, discussion, eye contact, positive/cheerful expression, feedback, non-verbal communication, visual aids, professional rapport, questioning (open/closed), silence, verbal (tone, pitch, speed), consultation form, signatures, record keeping, treatment planning/recommendations, establish expectations, treatment evaluation and review, visual observations (client), aftercare advice.

Consultation records: Data protection, confidential, accurate, up to date, written, appointment book, consultation form, name, address, contact numbers, age range, treatment objectives, client expectations, occupation, lifestyle, emotional state, medical history, illness/disease/disorders, contra-indications, contra-actions, sensitivity test, observations, postural analysis, recommendations, referrals, treatment plan (adaptations, modifications, timing, products, expectations, agreement), results, feedback, update records, client/guardian signature, therapist signature, date.

Influencing factors: Age, health, body shape (endomorph, ectomorph, mesomorph), muscle tone (good, poor, overweight, underweight), cellulite, oedema, postural analysis, excessive hair, medication, lifestyle, expectations, contra-indications, cost, time, frequency, skin (sensitivity, type, conditions), medical history, presenting symptoms, stress levels, previous treatments (type, results, benefits, contra-actions).



Learning outcome 1: Be able to prepare for body massage treatment (continued)

Recommendations: Listen to your body, contact therapist with any concerns, drink water, avoid alcohol, avoid caffeine, healthy eating, light diet, rest, relaxation techniques, light exercise, fresh air, postural exercises, deep-breathing exercises, mobility exercises, suitable products to enhance effects of treatment.

Objectives of massage: Relaxation, stress relief, improved sense of wellbeing, pain relief, reduced muscle tension increased energy levels, postural improvement, lymphatic drainage, maintaining health, improvement of physical condition.

Contra-actions and responses: Erythema, aching/tenderness (pressure, technique adaptation), reaction to massage medium (remove product), headache (drink water, rest, fresh air), dizziness (rest, deep breathing), nausea (rest, deep breathing), flu-like symptoms (rest), changed sleep patterns/fatigue (rest, fresh air), thirst (drink water), heightened emotions (rest, relaxation, referral), increased urination (toxin release, drink water), increased defaecation (waste elimination).

Action – treatment adaptation, discussion/advice, first aid responses.

Appropriate action for contra-indications: No treatment given, treatment adaptation, written consent, referral to another practitioner.

Examples of contra-indications that may prevent or restrict treatment: Contagious skin disorders (bacterial (impetigo), viral (herpes simplex, herpes zoster), fungal (tinea corporis)), allergies (skin), asthma, cancer (unless qualified with suitable continuous professional development training (CPD)), cardiovascular conditions

(hypotension, hypertension, thrombosis), diarrhoea, vomiting, haemophilia, medical oedema, osteoporosis, fever, recent operations, thrombosis, psychosis, pregnancy, diabetes, severe varicose veins, recent head or neck injury, haemorrhage, meningitis, nervous system disorders, undiagnosed lumps, pain on medication, alcohol, cuts/abrasions, bruising, swelling, post-operative scar tissue, sunburn, hormonal implants, menstruation, hernia, recent fractures, neck problems, heavy meal, migraine.

Informed consent: Required for clients on prescribed medication under the care of a medical practitioner, clients advised to consult with their doctor prior to treatment being given, client's signature to confirm that there is no medical objection to the treatment being given, if in any doubt avoid providing treatment, insurance requirements adhered to, full records kept, procedures for referral to health practitioners understood.

Refer the client: Follow referral procedures, when to refer (contra-indications, cautions, contra-actions, when outside limits of knowledge or responsibility), referral to healthcare practitioners, selecting alternative or adapted treatments, obtaining client's signature as informed consent that there is no medical objection to the treatment being provided.

Employee and employer's health, safety and security responsibilities:

Management of health and safety at work – cleaning up spillages, report slippery surfaces, remove/report obstacles, good all-round access to trolleys and equipment, sterilise or disinfect (tools, equipment, work surfaces), personal protective equipment.



Learning outcome 1: Be able to prepare for body massage treatment (continued)

Manual handling – moving stock, lifting, working heights, unpacking, posture, deportment, balance weight, preserve back, prevent slouching.

Towels – clean for every client, dirty towels in covered bin.

Liability insurance – employers', public, professional indemnity.

Reporting of injuries, diseases and dangerous occurrences regulations (RIDDOR) – accident book, reporting diseases, local by-laws, code of conduct, risk assessment.

Health and safety legislation: Data protection, employers' liability (compulsory insurance), fire precautions, first aid at work, health and safety at work, local government miscellaneous provisions, occupiers' liability, local by-laws.

Employer responsibility: Current and valid liability insurance, display health and safety rules (covering staff, employees, clients), fire evacuation (provide regular training), accurate record keeping, monitoring.

Hazards: Something with potential to cause harm, requiring immediate attention, level of responsibility (report, nominated personnel, duty to recognise/deal with hazards).

Security (cash): Staff training, point of sale, regular banking, in transit.

Security (people): Staff, clients, visitors, children, personal belongings, systems (security, emergency evacuation), storage, client records, business information.

Risk: Likelihood of a hazard happening, risk assessment (determine the level of risk, preventative measures, reduce a potentially harmful situation), judgement of salon

hazards (who, what, level of risk), interpret results, conclusions, record findings, regular reviews.

Reasons for risk assessment: Staff/visitor/client health and safety, safe environment, minimising hazards and risks, requirement of legislation.



Learning outcome 2: Be able to provide body massage treatment

Communicate and behave in a professional manner: Professional communication techniques, professional appearance (clean/pressed uniform), manner (respectful, reliable, honest, ethical, supportive), client care (modest, positioning, comfort, environment, wellbeing, treatment adaptation), no chewing, no perfume, confidentiality, education/CPD, health and safety, hygiene, organised, prepared, punctual, qualifications, recommendations, professional referrals, professional membership, insurance.

Position self: Correct posture when in lunge/stride stance, working methods to avoid repetitive strain injury, standing posture (even weight distribution), couch at correct working height.

Position of client for comfort/modesty: Suitable supports (head, legs, arms), comfortable face cradle, correctly positioned to get maximum benefit from treatment, prevent injury, visual/verbal checks to maintain client comfort and relaxation, modesty maintained.

Perform body massage: Safe and hygienic working methods, ethical practice, professional codes of conduct, client care, consultation, benefits, contra-actions, contra-indications, treatment plan, approval signature, modification, adaptation, instruct/assisting client, removal of clothing/jewellery, client modesty, towel draping, suitable supports/covers, privacy, hygiene, sanitise client's feet, apply selected medium, perform body massage in commercially acceptable time, maintaining contact, client satisfaction, client comfort, response to client feedback/requests, identifying imbalance/muscle tension, removal of massage medium, providing water, giving/receiving client feedback, treatment outcomes, review/

update treatment plan, aftercare advice (treatment progression/options), complete/accurate records, treatment evaluation (treatment outcomes, emotional responses, physical responses), feedback (visual, verbal, written), client involvement in own health and wellbeing, repeat business, reflective practice, legislation.

Commercially acceptable time: Consultation 15 minutes, 60 minutes full body massage, 30 minutes back massage, 75 minutes (to include face and scalp), 5 minutes home care advice.

Adaptation of treatment: Duration, cost, frequency, client positioning, pressure, techniques, areas of concern.

Massage techniques: Effleurage, petrissage, tapotement, frictions, vibrations, neuromuscular, passive joint movements, muscle stretching.

Physical characteristics: Age, body type (endomorph, ectomorph, mesomorph), muscle tone, body fat (adipose tissue), bone health, medical conditions, skin type, sensitivity, deformities, scar tissue, major life changes (puberty, pregnancy, menopause), overweight/normal weight, height, cellulite, oedema, postural analysis (scoliosis, kyphosis, lordosis), excess hair.

Working methods: According to local/national legislation, safety, hygiene, ethical practice, professional codes of conduct, posture, stance, self/client preparation.

Satisfaction of the client: Agreed treatment plan, focus on areas of concern, commercially acceptable time, depth of pressure, comfort and dignity, towel draping, appropriate communication, physical comfort (warmth, lighting, music), effectiveness of treatment, evaluation of treatment, reflection, aftercare.



Learning outcome 2: Be able to provide body massage treatment (continued)

Materials and equipment: Massage mediums, massage table, couch covers, towels, bolsters, trolley, pedal bin, disposable products, correct selection process, product use, hygiene/sanitation procedures, storage procedures.

Treatment records and storage:

Confidential (consultation form, signed treatment plans, completed foot notes, client notes, referral letters, records of treatment detail), aftercare advice, recommendations, evaluation, reflection, current legislation, code of ethics, insurance requirements, professional codes of practice.

Aftercare and home care advice:

Recommendations for further treatment, use of products, lifestyle changes, relaxation techniques, postural awareness, deep-breathing exercises, healthy eating, suitable exercises, self massage, relaxation, drink water, avoid stimulants, avoid heavy meal, rest, stress management, hobbies, explain healing process, referral to medical or other complementary health practitioner, advice limits within therapy.

History, philosophy and role of Swedish massage: Ancient civilisations, China, Egypt, India (Ayurvedic medicine), Greece and Romans, Per Henrik Ling, physiotherapy, massage therapy present day (to include national occupational standards and regulation), knowledge of other massage traditions (to include acupressure, aromatherapy, physiotherapy, Indian head massage, infant and child massage, lymphatic drainage massage, Thai massage, Japanese shiatsu, stone therapy, neuromuscular techniques).

Classical massage movements: Effleurage (superficial to deep, stroking, feathering, draining), petrissage (kneading, wringing, pulling, circling, knuckling, pressures),

tapotement (hacking, cupping, beating, pummelling, tapping), frictions, vibrations (shaking, fine vibrations), passive joint movements, muscle stretching.

Possible benefits of massage:

Physiological effects – increased circulation, warm tissues, stimulation of skin-increasing cellular function, desquamation, increased sebaceous secretions, increased lymphatic flow, stimulate nerve endings, breakdown of fatty (adipose) tissue, relax tense muscles, loosen scar tissue, effects of massage on the body systems, (integumentary, skeletal, muscular, nervous, endocrine, respiratory, cardiovascular, lymphatic, immune, digestive, urinary, reproductive).

Psychological effects – relaxation, relief from tension, stress relief, sense of wellbeing, invigorating, uplifting.

Massage mediums: Use, application, origin of oil, cream, powder, essential oil pre-blend, natural wax.

Skin types and characteristics: Normal, dry, oily, sensitive, mature.

General body types: Endomorph, ectomorph, mesomorph.

Common postural faults: Kyphosis, lordosis, scoliosis.

Location of underlying body structures: Muscles, bones, nerves, organs, blood vessels, lymph nodes.

Treatment records: Confidential, consultation form, signed treatment plans, completed foot charts, referral letters, records of treatment detail, aftercare advice, recommendations, evaluation, reflection, current legislation, code of ethics, insurance requirements, professional codes of practice.



Learning outcome 2: Be able to provide body massage treatment (continued)

Treatment evaluation: Feedback (visual, verbal, written), discussion of treatment outcomes, emotional responses, physical responses, client involvement in own health and wellbeing, client progression, repeat business, reflective practice.



Learning outcome 3: Be able to reflect upon body massage treatment

Reflect: Own attitudes/beliefs/interests/priorities/values, reflection as a process, reflection in action, reflection on action, methods of reflection (reflective journals, peer review, mentoring feedback, case study work, reading logs, portfolio development).

Reflection for personal growth: Reflect upon training/professional incidents/experiences, analyse what has occurred/why it occurred/how it can be prevented or repeated, think about the strengths and weakness of your training/professional experiences, learn something from thinking/analysing/writing, occurrences can be described and reflected upon followed by a solution or series of solutions emerging, learn from your reflection upon these incidents and experiences, develop your personal growth for the future.

Elements of reflective practice: Open mind, awareness, questioning, asking about others, choices, options and possibilities, comparing and contrasting results, in-depth understanding, viewing practice from different perspectives, seeking/gaining feedback from others, resolving problems, identifying limitations.

Impact of self-awareness: Self-awareness (e.g. attitude and beliefs, knowledge and understanding, practical skills, compare and contrast choices, understanding, rationale, adaptability, interpersonal skills, communication), impact on personal life (e.g. relationships, satisfaction), impact on professional life (e.g. clients, colleagues, professionalism).

Recording evidence: Own knowledge and practical experience, written (e.g. journals, experience logs, mentor feedback, portfolio, case studies), video, audio records (own

comments, mentor feedback, clients' comments), comply with data protection.

Own knowledge and practice: In relation to current codes of conduct and working practices, evaluate (compare to codes of conduct, compare with recommended working practices, make informed judgements).

Evaluation of self: Self-evaluation forms, journals, tests, reviewing, assessing, revising, comparing own standards to industry standards, discussions, asking questions (what did I learn? how well did I learn it? what should I do next?), set new goals based on new knowledge.

Strengths and limitations (for example): Knowledge and understanding, working practices, practical skills, maintain strengths, remove limitations.

Lifelong learning opportunities: CPD, training courses, independent study, periodical reviewing, using knowledge to inform practice, development of personal skills, development of personal values, professional association membership, identifying progression pathways.

Self development plan: Personal development plan (PDP), documentation, reflection, identify learning gap (where am I now? where do I want to be?), establish goals (short, medium, long term), ongoing review and updates of plans and documentation, areas for improvement in practice, aims and objectives for practice, targets and associated timescales, CPD requirements, training and courses (title, dates), further work-based experience, opportunities for mentoring.

Notes

Use this area for making notes and drawing diagrams



UV31301

Provide aromatherapy for complementary therapies

The aim of this unit is to develop your knowledge, understanding and practical skills in carrying out aromatherapy treatments, using the techniques of blending essences and fixed carrier oils.

Level

3

Credit value

21

GLH

112

Observation(s)

3

External paper(s)

0



Provide aromatherapy for complementary therapies

Learning outcomes

On completion of this unit you will:

1. Be able to prepare for aromatherapy treatment
2. Be able to provide aromatherapy treatment
3. Be able to reflect upon aromatherapy practice

Evidence requirements

1. *Environment*
Evidence for this unit may be gathered within the workplace or realistic working environment (RWE).
2. *Simulation*
Simulation is not allowed in this unit.
3. *Observation outcomes*
Competent performance of Observation outcomes must be demonstrated on **at least three occasions**. Assessor observations, witness testimonies and products of work are likely to be the most appropriate sources of performance evidence. Professional discussion may be used as supplementary evidence for those criteria that do not naturally occur.

Assessed observations should not be carried out on the same day for the same learning outcome. There should be sufficient time between assessments for reflection and personal development.

You need to meet the same standard on a regular and consistent basis. Separating the assessments by a period of at least two weeks is recommended as competence must be demonstrated on a consistent and regular basis.

4. *Range*
All ranges must be practically demonstrated or other forms of evidence produced to show they have been covered.

There are 42 essential oils and 19 carriers that must be covered in this unit. Those highlighted in bold in the range must be used in treatments. The remaining oils (not in bold font) can be evidenced through knowledge and understanding based tasks.

'Other media' in this unit relates to creams, lotions, hydrolats, gels, sprays, clay and topical application.
5. *Knowledge outcomes*
There must be evidence that you possess all the knowledge and understanding listed in the Knowledge section of this unit. In most cases this can be done by professional discussion and/or oral questioning. Other methods, such as projects, assignments and/or reflective accounts may also be used.
6. *Tutor/Assessor guidance*
You will be guided by your tutor/assessor on how to achieve learning outcomes and cover ranges in this unit. All outcomes and ranges must be achieved.
7. *External paper*
There is no external paper requirement for this unit.
8. *Case studies*
You must carry out and document evidence for at least 60 treatments consisting of the following:
 - a) Aromatherapy massage (minimum of 36 treatments) - six clients must receive a minimum of six treatments
 - b) Other methods of application (minimum of nine treatments) - compresses, inhalations, blending of creams/lotions etc.

Achieving observations and range

Achieving observation outcomes

Your assessor will observe your performance of practical tasks. The minimum number of competent observations required is indicated in the Evidence requirements section of this unit.

Criteria may not always naturally occur during a practical observation. In such instances you will be asked questions to demonstrate your competence in this area. Your assessor will document the criteria that have been achieved through professional discussion and/or oral questioning. This evidence will be recorded by your assessor in written form or by other appropriate means.

Your assessor will sign off a learning outcome when all criteria have been competently achieved.

Achieving range

The range section indicates what must be covered. Ranges should be practically demonstrated as part of an observation. Where this is not possible other forms of evidence may be produced. All ranges must be covered.

Your assessor will document the portfolio reference once a range has been competently achieved.

Case studies sign off

To achieve this unit you must carry out and document evidence for at least **60** treatments consisting of the following:

- a) Aromatherapy massage (minimum of 36 treatments) - six clients must receive a minimum of six treatments
- b) Other methods of application (minimum of nine treatments) - compresses, inhalations, blending of creams/lotions etc.

Your assessor will complete the table below when **60** treatments have been completed and are documented in your portfolio of evidence.

Date achieved	Assessor initials



Observations

Learning outcome 1

Be able to prepare for aromatherapy treatment

You can:

- a. Prepare self, client and work area in accordance with current legislation and working practice requirements
- b. Consult with clients to identify factors that may influence treatment objectives
- c. Provide clear recommendations to the client based on the outcome of the consultation
- d. Select materials and equipment to suit client treatment needs

**May be assessed through supplementary evidence.*

Observation	1	2	3
Date achieved			
Criteria questioned orally			
Portfolio reference			
Assessor initials			
Learner signature			



Learning outcome 2

Be able to provide aromatherapy treatment

You can:

- a. Communicate and behave in a professional manner
- b. Position self and client throughout treatment to ensure privacy, comfort and wellbeing
- c. Use working methods that meet professional, legal and organisational requirements
- d. Carry out visual analysis
- e. Perform and adapt aromatherapy treatment using materials, equipment and techniques correctly and safely to meet the needs of the client
- f. Complete treatment to the satisfaction of the client in a commercially acceptable time
- g. Apply correct legislative labelling requirements on blends created for clients*
- h. Provide suitable aftercare and home care advice in line with current legislation
- i. Record treatment accurately and store information securely in line with current legislation

*May be assessed through supplementary evidence.

Observation	1	2	3
Date achieved			
Criteria questioned orally			
Portfolio reference			
Assessor initials			
Learner signature			



Range

*You must practically demonstrate that you have:

Met all the objectives	Portfolio reference
Relaxation	
Uplift/stimulation	
Balancing	
Stress relief	
Carried out all applications	Portfolio reference
Compresses	
Other media	
Inhalation/vaporisation	
Massage	
Immersion	

*It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.



*You must practically demonstrate that you have:

Used the carrier oils:

Plant family	Common name	Botanical name	Portfolio reference
Rosaceae	Almond**	Prunus communis L	
	Apricot Kernel	Prunus armeniaca L	
	Peach Kernel**	Prunus vulgaris Mill	
Fabaceae (Leguminosae)	Soya	Glycine max Merr	
	Peanut	Arachis hypogaea L	
Asteraceae (compositae)	Sunflower	Helianthus annuus L	
Vitaceae	Grapeseed**	Vitis vinifera L	
Oleaceae	Olive	Olea europaea L	
Lauraceae	Avocado**	Persea americana Mill	
Pedaliaceae	Sesame	Sesamum indicum L	
Linaceae	Linseed	Linum usitatissimum L	
Corylaceae	Hazel	Corals avellana L	
Juglandaceae	Walnut	Juglans regia L	
Proteaceae	Macadamia**	Macadamia ternifolia F. Muell	
Arecaceae	Coconut	Cocos nucifera L	
Onagraceae	Evening Primrose**	Oenothera biennis L	
Euphorbiaceae	Castor	Ricinus communis L	
Poaceae (Graminae)	Wheatgerm**	Triticum vulgare Vill	
Simmondsiaceae	Jojoba**	Simmondsia chinensis Schneid	

*It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.

**Items must be practically demonstrated without exception.



*You must practically demonstrate that you have:

Used the essential oils:

Plant family	Common name	Botanical name	Part of plant used	Portfolio reference
Lamiaceae (labiatae)	Lavender**	Lavandula angustifolia Mill	flowers	
	Lavandin	Lavandula x intermedia Emeric ex Loisel	flowers	
	Lavender, spike	Lavandula latifolia Medik	flowers	
	Clary sage**	Salvia sclarea L	herb	
	Marjoram**	Origanum majorana L	herb	
	Rosemary**	Rosmarinus officinalis L	herb	
	Thyme**	Thymus vulgaris L	herb	
	Peppermint	Mentha x piperita L	herb	
	Basil**	Ocimum basilicum L	herb	
	Patchouli**	Pogostemon cablin Benth	leaves	
Rutaceae	Neroli**	Citrus aurantium L	flowers	
	Petitgrain**	Citrus aurantium L	leaves	
	Orange, bitter	Citrus aurantium L	fruit	
	Orange, sweet	Citrus sinensis (L.) Osbeck	fruit	
	Bergamot**	Citrus bergamia Risso	fruit	
	Lemon	Citrus limon (L.) Burm	fruit	

*It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.

**Items must be practically demonstrated without exception.



*You must practically demonstrate that you have:

Used the essential oils:

Plant family	Common name	Botanical name	Part of plant used	Portfolio reference
Rutaceae	Mandarin	Citrus nobilis Lour	fruit	
	Grapefruit	Citrus paradisi Macfad	fruit	
Asteraceae (compositae)	Chamomile, Roman**	Chamaemelum nobile (L.) All	flowers	
	Chamomile, German**	Matricaria recutita L	flowers	
Myrtaceae	Eucalyptus**	Eucalyptus globulus labil	leaves	
	Eucalyptus	Eucalyptus citriodora Hook	leaves	
	Eucalyptus	Eucalyptus dives Schauer	leaves	
	Eucalyptus	Eucalyptus smithii R.T. Baker	leaves	
	Tea tree**	Melaleuca alternifolia Cheel	leaves	
Geraniaceae	Geranium**	Pelargonium graveolens L'Her	leaves	
Piperaceae	Pepper, black**	Piper nigrum L	fruit	
Apiaceae (umbellifera)	Fennel**	Foeniculum vulgare Mill	fruit	
Rosaceae	Rose, damask**	Rosa damascena Mill	flowers	

*It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.

**Items must be practically demonstrated without exception.



*You must practically demonstrate that you have:

Used the essential oils:

Plant family	Common name	Botanical name	Part of plant used	Portfolio reference
Rosaceae	Rose, cabbage	Rosa x centifolia L	flowers	
Oleaceae	Jasmine**	Jasminum grandiflorum L	flowers	
Annonaceae	Ylang-ylang**	Cananga odorata (Lam.) Hook.f. and Thoms	flowers	
Santalaceae	Sandalwood**	Santalum album L. Santalum spicatum (R.Br.) A.DC.)	wood	
Burseraceae	Frankincense**	Boswellia sacra Flueck	resin	
	Myrrh	Commiphora myrrha Engl	resin	
Styracaceae	Benzoin**	Styrax benzoin Dryand	balsam	
Zingiberaceae	Ginger**	Zingiber officinale Rosc	rhizome	
Poaceae (graminae)	Lemongrass**	Cymbopogon citratus Stapf	grass	
	Vetivert**	Vetiveria zizanioides Nash ex Small	roots	
Pinaceae	Cedarwood, Atlas**	Cedrus atlantica Manetti	wood	

*It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.

**Items must be practically demonstrated without exception.



*You must practically demonstrate that you have:

Used the essential oils:

Plant family	Common name	Botanical name	Part of plant used	Portfolio reference
Cupressaceae	Cypress**	Cupressus sempervirens L	twigs	
	Juniper**	Juniperus communis L	berry	

*It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.

**Items must be practically demonstrated without exception.

Developing knowledge

Achieving knowledge outcomes

You will be guided by your tutor and assessor on the evidence that needs to be produced. Your knowledge and understanding will be assessed using the assessment methods listed below*:

- Projects
- Observed work
- Witness statements
- Audio-visual media
- Evidence of prior learning or attainment
- Written questions
- Oral questions
- Assignments
- Case studies
- Professional discussion

**This is not an exhaustive list.*

Where applicable your assessor will integrate knowledge outcomes into practical observations through professional discussion and/or oral questioning.

When a criterion has been orally questioned and achieved, your assessor will record this evidence in written form or by other appropriate means. There is no need for you to produce additional evidence as this criterion has already been achieved.

Some knowledge and understanding outcomes may require you to show that you know and understand how to do something. If you have practical evidence from your own work that meets knowledge criteria, then there is no requirement for you to be questioned again on the same topic.

Knowledge



Learning outcome 1

Be able to prepare for aromatherapy treatment

You can:	Portfolio reference / Assessor initials*
e. Describe the requirements for preparing self, client and work area for aromatherapy treatment	
f. Describe the environmental conditions suitable for aromatherapy treatment	
g. Describe the objectives and possible benefits of aromatherapy treatment	
h. Explain the contra-indications that may prevent or restrict aromatherapy treatment	
i. Describe the influencing factors that need to be considered when carrying out a client consultation	
j. Explain the reasons why the client may be referred to a healthcare practitioner	
k. Describe the employer's and employee's health, safety and security responsibilities	

* Assessor initials to be inserted if orally questioned.



Learning outcome 2

Be able to provide aromatherapy treatment

You can:	Portfolio reference / Assessor initials*
j. Evaluate the results of treatment	
k. Describe the history, philosophy and role of aromatherapy and other massage traditions	
l. Explain how aromatherapy techniques can be adapted to suit the individual characteristics of a client	
m. Explain the taxonomy, nomenclature, structure and function of plants in relation to the production of essences, fixed carrier oils and other media	
n. Identify methods of extraction and sourcing of essences and fixed carrier oils	
o. Identify significant chemical constituents of essences	
p. Describe percentage dilutions and blending techniques	
q. Describe the causes of degradation and spoilage of essential oils and methods of prevention	
r. Explain the uses, application and origin of essences, fixed oils and other media	
s. Describe the possible physiological and psychological effects of aromatherapy on the body systems	
t. Describe safe handling and use of products, materials, tools and equipment	
u. Describe the importance of the correct maintenance and storage of products, materials, tools and equipment	

* Assessor initials to be inserted if orally questioned.



Learning outcome 2 (continued)

Be able to provide aromatherapy treatment

You can:	Portfolio reference / Assessor initials*
V. Describe the contra-actions that may occur during and following treatment and how to respond	
W. Explain the aftercare and home care advice that should be provided in line with current legislation	
X. Describe the methods of evaluating effectiveness of treatment	

* Assessor initials to be inserted if orally questioned.



Learning outcome 3

Be able to reflect upon aromatherapy practice

You can:	Portfolio reference / Assessor initials*
a. Reflect on own attitudes, beliefs, interests, priorities and values in relation to personal growth as an aromatherapist	
b. Evaluate own knowledge and practice of aromatherapy in relation to professional codes of conduct and current working practices	
c. Identify own strengths and weaknesses in order to best serve self and client	
d. Describe the basic elements of reflective practice	
e. Describe how own self-awareness impacts on personal and professional life	
f. Identify lifelong learning opportunities to plan for self-development	
g. Describe how to record evidence of own knowledge and practical experience	
h. Explain the importance of acting on own evaluation to improve aromatherapy treatment	

* Assessor initials to be inserted if orally questioned.

Unit content



This section provides guidance on the recommended knowledge and skills required to enable you to achieve each of the learning outcomes in this unit. Your tutor/assessor will ensure you have the opportunity to cover all of the unit content.

Learning outcome 1: Be able to prepare for aromatherapy treatment

Preparation of a treatment environment:

Suitable sanitised work area, atmosphere, temperature, noise levels, ventilation, lighting, soft music, treatment couch, trolley, clean linen, couch roll, hygiene techniques, sanitising products, treatment medium, waste disposal.

Preparation of self: Personal hygiene (fresh breath, clean hair, washed and sanitised hands, nails, no body odour), professional (no perfume or chewing), full/clean/pressed uniform, no jewellery (except a smooth wedding band), neat hair (tied back/fringe secured), flat/closed footwear, nails (short, smooth, no varnish/extensions), correct posture, protection/grounding.

Preparation of client: Greeting, consultation, establish treatment expectations, jewellery/clothing removal, assist client into correct position, ensure client comfort modesty/privacy, use of supports, sanitisation procedures.

Workplace legislation: Applicable national/local legislation relating to the workplace (e.g. health and safety, equality and diversity, data protection, employment, consumer protection, workplace regulations, manual handling, use of work equipment, liability insurance (employees, professional indemnity), control of substances hazardous to health, handling, storage, disposal and cautions of use of products, fire precautions, hygiene practice, disposal of waste, environmental protection. Further information should be sought from the relevant authorities.

Consultation techniques: Professional, active listening, body language, discussion, eye contact, positive/cheerful expression, feedback, non-verbal communication, visual aids, professional rapport, questioning (open/closed), silence, verbal (tone, pitch, speed), consultation form, signatures, record keeping, treatment planning/recommendations, establish expectations, treatment evaluation and review, visual observations, aftercare advice.

Consultation records: Data protection, confidential, accurate, up to date, written, appointment book, consultation form, name, address, contact numbers, age range, treatment objectives, client expectations, lifestyle, emotional state, medical history, illness/disease/disorders, contra-indications, contra-actions, sensitivity test/results, observations, postural analysis, recommendations, referrals, treatment plan (adaptations, modifications, timing, products, expectations, agreement), results, feedback, update records, client/guardian signature, therapist's signature, date.

Influencing factors: Age, health, body shape (endomorph, ectomorph, mesomorph), muscle tone (good, poor, overweight, underweight, cellulite, oedema, postural analysis, client preference, dilution ratios, time of day, medication, lifestyle, expectations, contra-indications, cost, time, frequency, skin (sensitivity, type, conditions) medical history, presenting symptoms, stress levels, previous treatments (type, results, benefits, contra-actions).



Learning outcome 1: Be able to prepare for aromatherapy treatment (continued)

Recommendations: Treatment type, length of treatment, treatment adaptations, oil choice, avoid bath/shower/steam rooms/swimming/sunbathing for up to 24 hours, wait 10 minutes post-treatment before driving, listen to your body, contact therapist with any concerns, drink water, avoid stimulants, avoid heavy meal, rest, relaxation techniques, light exercise, healthy eating, light diet, fresh air, suitable products to enhance effects of treatment.

Objectives of aromatherapy: Promote homeostasis, deep relaxation, stress relief, pain relief, reduced muscle tension, increased energy levels, improved sense of wellbeing, stimulation, lymphatic drainage, maintain health, improves physical condition.

Contra-actions and responses: Erythema, aching/tenderness (pressure, technique adaptation), allergic reactions to essential oil/carrier oil and blend used (remove product), headache (drink water, rest, fresh air), dizziness (rest, deep breathing), nausea (rest, deep breathing), flu like symptoms (rest), changed sleep patterns/fatigue (rest, fresh air), thirst (drink water), heightened emotions (rest, relaxation, referral), increased urination (toxin release, drink water), increased defaecation (waste elimination), insomnia, hallucination, hyperactivity, change in appetite, respiratory reactions, change in mucous, oil (medication/substance reactivity), action (treatment adaptation, discussion/advice), first aid responses.

Appropriate action for contra-indications: No treatment given, treatment adaptation, written consent, referral to another practitioner.

Examples of contra-indications that may prevent or restrict treatment: Contagious skin disorders (bacterial (impetigo), viral (herpes simplex, herpes zoster), fungal (tinea corporis)), allergies (skin), asthma, cancer (unless qualified with suitable continuous professional development training (CPD), cardiovascular conditions (hypotension, hypertension, thrombosis), diarrhoea, vomiting, haemophilia, medical oedema, osteoporosis, fever, recent operations, thrombosis, psychosis, pregnancy unless qualified with suitable CPD, diabetes, severe varicose veins, recent head or neck injury, haemorrhage, meningitis, nervous system disorders, undiagnosed lumps, pain on medication, bacterial (boils, folliculitis), viral (warts, verrucae), fungal (tinea pedis), drugs/ alcohol, cuts/abrasions, bruising, swelling, post-operative scar tissue, sunburn, hormonal implants, menstruation, hernia, recent fractures, neck problems, heavy meal, migraine (this list is not exhaustive), informed consent is required if your client is under the care of a medical practitioner.

Informed consent: Required for clients on prescribed medication under the care of a medical practitioner, clients advised to consult with their doctor prior to treatment being given, client's signature to confirm that there is no medical objection to the treatment being given, if in any doubt avoid providing treatment, insurance requirements adhered to, full records kept, procedures for referral to health practitioners understood.

Refer the client: Follow referral procedures, when to refer (contra-indications, contra-actions, when outside limits of knowledge or responsibility), referral to healthcare practitioners selecting alternative or adapted treatments.



Learning outcome 1: Be able to prepare for aromatherapy treatment (continued)

Employee and employer's health, safety and security responsibilities:

Management of health and safety at work – cleaning up spillages, report slippery surfaces, remove/report obstacles, good all-round access to trolleys and equipment, sterilise or disinfect (tools, equipment, work surfaces), personal protective equipment.

Manual handling – moving stock, lifting, working heights, unpacking, posture, department, balance weight, preserve back, prevent slouching.

Towels – clean for every client, dirty towels in covered bin.

Liability insurance – employers', public, professional indemnity.

Reporting of injuries, diseases and dangerous occurrences regulations (RIDDOR) – accident book, reporting diseases, local by-laws, code of conduct, risk assessment.

Health and safety legislation: Data protection, employers' liability (compulsory insurance), fire precautions, first aid at work, health and safety at work, local government miscellaneous provisions, occupiers liability, local by-laws.

Employer's responsibility: Current and valid liability insurance, display health and safety rules (covering staff, employees, clients), fire evacuation (provide regular training), accurate record keeping, monitoring.

Hazards: Something with potential to cause harm requiring immediate attention, level of responsibility (report, nominated personnel, duty to recognise/deal with hazards).

Security (cash): Staff training, point of sale, regular banking, in transit.

Security (people): Staff, clients, visitors, children, personal belongings, systems (security, emergency evacuation), storage, client records, business information.

Risk: Likelihood of a hazard happening, risk assessment (determine the level of risk, preventative measures, reduce a potentially harmful situation), judgement of salon hazards (who, what, level of risk), interpret results, conclusions, record findings, regular reviews.

Reasons for risk assessment: Staff/visitor/client health and safety, safe environment, minimising hazards and risks, requirement of legislation.



Learning outcome 2: Be able to provide aromatherapy treatment

Communicate and behave in a professional manner: Professional communication techniques, appearance (clean/pressed uniform), manner (respectful, reliable, honest, ethical, supportive), client care (modest, positioning, comfort, environment, wellbeing, treatment adaptation), no chewing, no perfume, confidentiality, education/CPD, health and safety, hygiene, organised, prepared, punctual, professional membership, insurance.

Position self: Correct posture when in lunge/stride stance, working methods to avoid repetitive strain injury, standing posture (even weight distribution), couch at correct working height.

Position of client for comfort/modesty: Suitable supports (head, legs, arms), comfortable face cradle, correctly positioned to get maximum benefit from treatment, prevent injury, visual/verbal checks to maintain client comfort and relaxation, modesty maintained.

Perform aromatherapy treatment: Safe, hygienic, working methods, ethical practice, professional codes of conduct, therapist grounding, client care, consultation, benefits, contra-actions, contra-indications, treatment plan, approval signature, modification, adaption, removal of clothing/jewellery, client modesty, towel draping, suitable supports/covers, privacy, hygiene, sanitise client's feet, essential oil/carrier oil selection, blending, treatment method, perform aromatherapy in commercially acceptable time, maintaining contact, client satisfaction, client comfort, response to client feedback/requests, identifying imbalance/muscle tension, providing water, giving/receiving client feedback, treatment outcomes, review/update treatment plan

(including essential/carrier oil selection/dilution), aftercare advice, treatment progression/options, complete/accurate records, treatment evaluation (treatment outcomes, emotional responses, physical responses), feedback (visual, verbal, written), client involvement in own health and wellbeing, repeat business, reflective practice, legislation.

Commercially acceptable time:

Consultation 15 minutes, 60 minutes full body aromatherapy massage, 30 minutes back massage, 75 minutes (to include face and scalp), 5 minutes aftercare and home care advice.

Aromatherapy massage techniques:

Effleurage, petrissage, vibrations, passive movements, pressure point stimulus, posture, continuity of treatment, correct pressure.

Adaptation of treatment: Duration, frequency, client positioning, pressure, techniques, areas of concern, treatment method (massage, inhalation, compress, immersion), carrier and essential oil suitability, cost.

Physical characteristics: Age, body type (endomorph, ectomorph, mesomorph), muscle tone, body fat (adipose tissue), bone health, medical conditions, skin type, sensitivity, scar tissue, major life changes (pregnancy, menopause), overweight/normal weight, height, cellulite, oedema, postural analysis (scoliosis, kyphosis, lordosis), excess hair.

Skin types and characteristics:

Sensitive – often pale skins, dry, colour easily, redness, react to products.

Dehydrated – normal sebaceous secretions but still flaky, tight.



Learning outcome 2: Be able to provide aromatherapy treatment (continued)

Mature – loss of elasticity, loose muscle tone, wrinkles.

Normal – fine texture, no visible pores, smooth, supple, flexible.

Oily – shiny, slight thickening, sallow, coarse texture, enlarged pores.

Dry – lacks moisture, dry to touch, flakiness.

Working methods: According to local/national legislation, safety, hygiene, ethical practice, professional codes of conduct, posture, stance, self/client preparation.

Satisfaction of the client: Agreed treatment plan, agreed oil selection, focus on areas of concern, commercially acceptable time, depth of pressure, comfort and dignity, towel draping, appropriate communication, physical comfort (warmth, lighting, music), effectiveness of treatment, evaluation of treatment, reflection, aftercare.

Labelling requirements: Client's name, blended date, use-by date, ingredients (botanical names), dilutions, therapist contact details, directions for use, storage, precautions, applicable national legislation.

Materials and equipment: Carrier oils, essential oils, essential oil boxes/carrying cases, bowls, dark glass bottles/jars, diffusers, couch, couch covers, towels, bolsters, trolley, bin, stool, step up, disposable products, correct selection process, product use, hygiene procedures, storage procedures, regular checking of equipment.

Storage of treatment records: Confidential (consultation form, signed treatment plans, essential/carrier oil selection, dilution, client notes, referral

letters, records of treatment detail), aftercare advice, recommendations, evaluation, reflection, current legislation, insurance requirements, professional codes of practice.

Aftercare advice: Wait 10mins post-treatment before driving, listen to your body, contact therapist with any concerns, avoid bath/shower/steam room/swimming/sunbathing for up to 24 hours, leave oils on for up to 8 hours, further treatment, lifestyle changes, relaxation techniques, healthy eating, suitable exercises, relaxation, drink water, avoid alcohol, avoid caffeine, avoid heavy meals, rest, stress management, hobbies, explain healing process, referral to medical/non-medical practitioner, suitable guidelines for essence/blended oils home use, specific oil information on potential toxicity, reactions.

Taxonomy, nomenclature, structure and function of plants: Plant kingdom, binomial system, plant family, genus, species, chemotypes, variety, evolution, plant biology (formation, reproduction, biosynthesis), structure (angiosperm, gymnosperm, monocotyledon, dicotyledon, root, rhizome, stem, leaf, flower, fruit, seeds).

Characteristics of essential oils (essences): Aromatic, volatile, powerful, oil soluble, alcohol soluble, lipophilic, hydrophilic, liquid, non-greasy, flammable.

Methods of extraction (essences): Water/steam distillation, expression, solvent extraction, enfleurage, carbon dioxide extraction, hydro-diffusion/percolation.



Learning outcome 2: Be able to provide aromatherapy treatment (continued)

Methods of extraction (fixed carrier oils):

Pre-heating, passing through an expeller, virgin cold-pressed, solvent extraction, filtration, refinery.

Professional sources: Growers, botanists, manufacturers, wholesale suppliers, therapists, retail suppliers.

Chemical constituents: Atom, molecule, organic, inorganic, isoprenes, terpenes, monoterpenes, diterpenes, sesquiterpenes, alcohols, aldehydes, esters, ketones, lactones, oxides, acids, ethers, furanocoumarins, oxides, phenols, absorption (via skin, air).

Blending and dilutions: Synergy, adaptogen, top note, middle note, base note, dilution ratios/percentages, maximum number of essential oils to be blended, safe dosage use for babies, elderly, face, current legislation.

Degradation: Dilution, isolation, substitution, incorrect light exposure, heat exposure, air exposure, extended storage periods, degradation processes (hydrolysis, oxidation), synthetic oils.

Avoidance: Dark amber bottles, away from direct sunlight, correct temperature, away from children, tightly closed lids, correct storage period, correct use and dilution, quality testing, constituent testing.

History, philosophy and role of aromatherapy: Origins of plant medicine and distillation, ancient, China, India, Greece, Egypt, the Romans, Middle East, Middle Ages, 19th century medicine, Industrial Revolution, Gattefosse, Valnet, Maury, the modern role of aromatherapy, regulation of the profession.

Knowledge of other massage traditions: Acupressure, physiotherapy, holistic

massage, Ayurvedic massage, Indian head massage, lymphatic drainage massage, Thai massage, Japanese shiatsu, stone therapy, neuromuscular techniques.

Possible benefits of aromatherapy massage:

Physiological effects – may increase circulation, warm tissues, may stimulate skin, may increase cellular function, may aid desquamation, may increase sebaceous secretions, may increase lymphatic flow, may stimulate nerve endings, relax tense muscles.

Psychological effects – relaxation, relief from tension, stress relief, sense of wellbeing, invigorating, effects on the body systems.

Possible therapeutic properties: Analgesic, adrenal cortex stimulant, anti-allergic, antibacterial/bactericidal, antidepressant, antifungal, anti-inflammatory, antimicrobial, antioxidant, antiseborrhoeic, antiseptic, antispasmodic, antitoxic, antiviral, aperitif, aphrodisiac, astringent, balsamic, carminative, cytophthalactic, cephalic, circulatory stimulant, deodorant, detoxifying, digestive, diuretic, emmenagogue, expectorant, febrifuge, haemostatic, hormone balancer, hypertensive, hypotensive, immune-stimulant, insecticide, insect repellent, neuro-relaxant, neuro-toxic, oestrogen stimulant, rehydrating, relaxant, rubefacient, sedative, stimulant, tonic, uplifting, vulnerary.

Olfactory system: Nose, cilia, olfactory tract, olfactory membranes (contain smell-sense cells), olfactory receptor cells, olfactory bulb, olfactory plexus, brain, limbic system, smell and taste, anosmia (impaired sense of smell).



Learning outcome 2: Be able to provide aromatherapy treatment (continued)

Methods of use and application: Baths/showers, compresses, creams, lotions, hydrolats, inhalations, masks, massage, shampoos, sprays, diffusers, home care usage guidelines.

Origins of essences and fixed oils: Country of origin, leaves, flowers, stems, twigs, bark, heartwood, resin, roots, rhizomes, fruit pulp, fruit peel, seeds.

Other aromatherapy mediums and sources: Advantages/disadvantages of wax/creams/lotions/gels/water/air/clay/hydrolats/shear butter/cocoa butter.

Treatment evaluation: Feedback (visual, verbal, written), carrier oil, essential oils, dilution, treatment method, treatment outcomes (benefits/effects/contraindications), emotional responses, physical responses, client involvement in own health and wellbeing, client progression, repeat business, reflective practice.



Learning outcome 3: Be able to reflect upon aromatherapy practice

Reflect: Own attitudes, beliefs, interests, priorities and values, reflection as a process, reflection in action, reflection on action, methods of reflection (reflective journals, peer review, mentoring feedback, case study work, reading logs, portfolio development).

Reflection for personal growth: Reflect upon training/professional incidents/experiences, analyse what has occurred/why it occurred/how it can be prevented or repeated, think about the strengths and weakness of your training/professional experiences, learn something from thinking/analysing/writing, occurrences can be described and reflected upon followed by a solution or series of solutions emerging, learn from your reflection upon these incidents and experiences, develop your personal growth for the future.

Elements of reflective practice: Open mind, awareness, questioning, asking about others, choices/options/possibilities, comparing and contrasting results, in-depth understanding, viewing practice from different perspectives, seeking/gaining feedback from others, resolving problems, identifying limitations.

Impact of self-awareness: Self-awareness (e.g. attitude and beliefs, knowledge and understanding, practical skills, compare and contrast choices, understanding, rationale, adaptability, interpersonal skills, communication), impact on personal life (e.g. relationships, satisfaction), impact on professional life (e.g. clients, colleagues, professionalism).

Recording evidence: Own knowledge and practical experience, written (e.g. journals, experience logs, mentor feedback, portfolio, case studies), video, audio

records (own comments, mentor feedback, clients' comments), comply with data protection.

Own knowledge and practice: In relation to current codes of conduct and working practices, evaluate (compare to codes of conduct, compare with recommended working practices, make informed judgements).

Evaluation of self: Self-evaluation forms, journals, tests, reviewing, assessing, revising, comparing own standards to industry standards, discussions, asking questions (what did I learn? how well did I learn it? what should I do next?), set new goals based on new knowledge.

Strengths and limitations (for example): Knowledge and understanding, working practices, practical skills, maintain strengths, remove limitations.

Lifelong learning opportunities: Continuous professional development (CPD), training courses, independent study, periodical reviewing, using knowledge to inform practice, development of personal skills, development of personal values, professional association membership, identifying progression pathways.

Self development plan: Personal development plan (PDP), documentation, reflection, identify learning gap (where am I now? where do I want to be?), establish goals (short, medium, long term), ongoing review and updates of plans and documentation, areas for improvement in practice, aims and objectives for practice, targets and associated timescales, CPD requirements, training and courses (title, dates), further work-based experience, opportunities for mentoring.

Notes

Use this area for making notes and drawing diagrams



UV31302

Provide reflexology for
complementary therapies

The aim of this unit is to provide you with the knowledge,
understanding and skills required to carry out reflexology.

Level

3

Credit value

25

GLH

112

Observation(s)

3

External paper(s)

0



Provide reflexology for complementary therapies

Learning outcomes

On completion of this unit you will:

1. Be able to prepare for reflexology treatment
2. Be able to provide a reflexology treatment
3. Be able to reflect upon reflexology treatment

Evidence requirements

1. *Environment*
Evidence for this unit may be gathered within the workplace or realistic working environment (RWE).
2. *Simulation*
Simulation is not allowed in this unit.
3. *Observation outcomes*
Competent performance of Observation outcomes must be demonstrated on **at least three occasions**. Assessor observations, witness testimonies and products of work are likely to be the most appropriate sources of performance evidence. Professional discussion may be used as supplementary evidence for those criteria that do not naturally occur.

Assessed observations should not be carried out on the same day for the same learning outcome. There should be sufficient time between assessments for reflection and personal development.

You need to meet the same standard on a regular and consistent basis. Separating the assessments by a period of at least two weeks is recommended as competence must be demonstrated on a consistent and regular basis.

4. *Range*
All ranges must be practically demonstrated or other forms of evidence produced to show they have been covered.
5. *Knowledge outcomes*
There must be evidence that you possess all the knowledge and understanding listed in the Knowledge section of this unit. In most cases this can be done by professional discussion and/or oral questioning. Other methods, such as projects, assignments and/or reflective accounts may also be used.
6. *Tutor/Assessor guidance*
You will be guided by your tutor/assessor on how to achieve learning outcomes and cover ranges in this unit. All outcomes and ranges must be achieved.
7. *External paper*
There is no external paper requirement for this unit.
8. *Case studies*
You must carry out and document evidence for at least **100** treatments, which must be carried out on a minimum of four clients. There must be a minimum of six treatments for at least two clients.

Achieving observations and range

Achieving observation outcomes

Your assessor will observe your performance of practical tasks. The minimum number of competent observations required is indicated in the Evidence requirements section of this unit.

Criteria may not always naturally occur during a practical observation. In such instances you will be asked questions to demonstrate your competence in this area. Your assessor will document the criteria that have been achieved through professional discussion and/or oral questioning. This evidence will be recorded by your assessor in written form or by other appropriate means.

Your assessor will sign off a learning outcome when all criteria have been competently achieved.

Achieving range

The range section indicates what must be covered. Ranges should be practically demonstrated as part of an observation. Where this is not possible other forms of evidence may be produced. All ranges must be covered.

Your assessor will document the portfolio reference once a range has been competently achieved.

Case studies sign off

To achieve this unit you must carry out and document evidence for at least **100** treatments, which must be carried out on a minimum of four clients. There must be a minimum of six treatments for at least two clients.

Your assessor will complete the table below when **100** treatments have been completed and are documented in your portfolio of evidence.

Date achieved	Assessor initials



Observations

Learning outcome 1

Be able to prepare for reflexology treatment

You can:

- a. Prepare self, client and work area in accordance with current legislation and working practice requirements
- b. Consult with clients to identify factors which may influence treatment objectives
- c. Provide clear recommendations to the client based on the outcome of the consultation
- d. Select materials and equipment to suit client treatment needs

** May be assessed through supplementary evidence.*

Observation	1	2	3
Date achieved			
Criteria questioned orally			
Portfolio reference			
Assessor initials			
Learner signature			



Learning outcome 2

Be able to provide a reflexology treatment

You can:

- a. Communicate and behave in a professional manner
- b. Position self and client throughout treatment to ensure privacy, comfort and wellbeing
- c. Use working methods that meet professional, legal and organisational requirements
- d. Carry out visual analysis of the feet
- e. Perform and adapt reflexology treatment using materials, equipment and techniques correctly and safely to meet the needs of the client
- f. Locate underlying body structures during treatment
- g. Locate reflex points on the hands and feet during treatment
- h. Locate zones, transfer lines and cross reflexes on hands and feet during treatment
- i. Complete treatment to the satisfaction of the client in a commercially acceptable time
- j. Provide suitable aftercare and home care advice
- k. Record treatment accurately and store information securely in line with current legislation

*May be assessed through supplementary evidence.

Observation	1	2	3
Date achieved			
Criteria questioned orally			
Portfolio reference			
Assessor initials			
Learner signature			



Range

*You must practically demonstrate that you have:

Met all the treatment objectives	Portfolio reference
Relaxation	
Uplift/stimulation	
Balancing	
Stress relief	
Carried out all types of assessment	Portfolio reference
Temperature	
Colour	
Skin texture	
Corns and calluses	
Nail conditions	
Foot characteristics	
Used all types of media	Portfolio reference
Oil	
Cream/lotion	
Powder	

*It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.



*You must practically demonstrate that you have:

Dealt with all types of systems	Portfolio reference
Lymphatic	
Endocrine	
Digestive	
Urinary	
Respiratory	
Muscular and skeletal	
Nervous system	
Cardiovascular	
Reproductive	
Treated all areas	Portfolio reference
Hands	
Feet	

*It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.

Developing knowledge

Achieving knowledge outcomes

You will be guided by your tutor and assessor on the evidence that needs to be produced. Your knowledge and understanding will be assessed using the assessment methods listed below*:

- Projects
- Observed work
- Witness statements
- Audio-visual media
- Evidence of prior learning or attainment
- Written questions
- Oral questions
- Assignments
- Case studies
- Professional discussion

**This is not an exhaustive list.*

Where applicable your assessor will integrate knowledge outcomes into practical observations through professional discussion and/or oral questioning.

When a criterion has been orally questioned and achieved, your assessor will record this evidence in written form or by other appropriate means. There is no need for you to produce additional evidence as this criterion has already been achieved.

Some knowledge and understanding outcomes may require you to show that you know and understand how to do something. If you have practical evidence from your own work that meets knowledge criteria, then there is no requirement for you to be questioned again on the same topic.

Knowledge



Learning outcome 1

Be able to prepare for reflexology treatment

You can:	Portfolio reference / Assessor initials*
e. Describe the requirements for preparing self, client and work area for reflexology treatment	
f. Describe the environmental conditions suitable for reflexology treatment	
g. Describe the objectives and possible benefits of reflexology treatment	
h. Explain the contra-indications that may prevent or restrict reflexology treatment	
i. Describe the influencing factors that need to be considered when carrying out a client consultation	
j. Explain the reasons why the client may be referred to a healthcare practitioner	
k. Describe the employer's and employee's health, safety and security responsibilities	

* Assessor initials to be inserted if orally questioned.



Learning outcome 2

Be able to provide a reflexology treatment

You can:	Portfolio reference / Assessor initials*
l. Evaluate the results of treatment	
m. Describe the history, philosophy and role of reflexology	
n. Explain the principles of reflexology theory	
o. Explain how reflexology techniques can be adapted to suit the individual characteristics of a client	
p. Explain the principles of all reflexology techniques	
q. Describe the importance of the supporting hand	
r. Explain the uses of different media	
s. Describe safe handling and use of products, materials, tools and equipment	
t. Describe the importance of the correct maintenance and storage of products, materials, tools and equipment	
u. Describe the contra-actions that may occur during and following treatment, and how to respond	
v. Explain the aftercare and home care advice that should be provided	
w. Describe the methods of evaluating effectiveness of treatment	

* Assessor initials to be inserted if orally questioned.



Learning outcome 3

Be able to reflect upon reflexology treatment

You can:	Portfolio reference / Assessor initials*
a. Reflect on own attitudes, beliefs, interests, priorities and values in relation to personal growth as a reflexologist	
b. Evaluate own knowledge and practice of reflexology in relation to professional codes of conduct and current working practices	
c. Identify own strengths and weaknesses in order to best serve self and client	
d. Describe the basic elements of reflective practice	
e. Describe how own self-awareness impacts on personal and professional life	
f. Identify lifelong learning opportunities to plan for self-development	
g. Describe how to record evidence of own knowledge and practical experience	
h. Explain the importance of acting on own evaluation to improve reflexology treatment	

* Assessor initials to be inserted if orally questioned.

Unit content



This section provides guidance on the recommended knowledge and skills required to enable you to achieve each of the learning outcomes in this unit. Your tutor/assessor will ensure you have the opportunity to cover all of the unit content.

Learning outcome 1: Be able to prepare for reflexology treatment

Preparation of a treatment environment:

Suitable sanitised work area, atmosphere, temperature, noise levels, ventilation, lighting, soft music, treatment couch, trolley, clean linen, couch roll, hygiene techniques, sanitising products, treatment medium, waste disposal.

Preparation of self: Personal hygiene (fresh breath, clean hair, washed and sanitised hands, nails, no body odour), professional (no perfume or chewing of gum), full/clean/pressed uniform, no jewellery (except a smooth wedding band), neat hair (tied back/fringe secured), flat/closed footwear, nails (short, smooth, no varnish/extensions), correct posture, protection/grounding.

Preparation of client: Greeting, consultation, establish treatment expectations, jewellery/clothing removal, assist client into correct position, ensure client comfort/modesty/privacy, use of supports, sanitisation procedures.

Workplace legislation: Applicable national/local legislation relating to the workplace (e.g. health and safety, equality and diversity, data protection, employment, consumer protection, workplace regulations, manual handling, use of work equipment, liability insurance (employees, professional indemnity), control of substances hazardous to health, handling/storage/disposal/cautions of use of products, fire precautions, hygiene practice, disposal of waste, environmental protection, further information should be sought from the relevant authorities.

Consultation techniques: Professional, active listening, body language, discussion, eye contact, positive/cheerful expression, feedback, non-verbal communication, visual aids, professional rapport, questioning (open/closed), silence, verbal (tone, pitch, speed), consultation form, signatures, record keeping, treatment planning/recommendations, establish expectations, treatment evaluation and review, visual observations (client), foot observations, aftercare advice.

Consultation records: Confidential, accurate, up to date, written, appointment book, consultation form, name, address, contact numbers, age range, treatment objectives, client expectations, lifestyle, emotional state, medical history, illness/disease/disorders, contra-indications, contra-actions, sensitivity test, observations, analyses, foot charts, recommendations, referrals, treatment plan (adaptations, modifications, timing, products, expectations, agreement), results, feedback, update records, client/guardian signature, reflexologist signature, date.

Objectives of reflexology: Relaxation, stress relief, improved sense of wellbeing, pain relief, reduced physical tension, increased energy levels, maintain health, improved physical condition.

Influencing factors: Age, health, lifestyle, consent, expectations, objectives, medication, presenting conditions, contra-indications, cost, time, frequency, previous treatments, reactions, contra-actions (undesirable reactions/healing crisis), stress level.



Learning outcome 1: Be able to prepare for reflexology treatment (continued)

Reactions and possible contra-actions to treatment:

During treatment – sense of wellbeing, relaxation, comfort, desire to sleep, sighing, laughing, yawning, crying, deep breathing, tingling, temperature change, thirst, nausea, tender reflex.

After treatment – increased energy, increased urination, increased defaecation, increased sweating, change in sleep patterns, headaches, dizziness, nausea, cold-like symptoms, cough, tiredness, relief of symptoms, the healing process.

Recommendations: Listen to your body, contact reflexologist with any concerns, drink water, avoid alcohol, avoid caffeine, eat healthily, light diet, avoid heavy meal, rest, relaxation techniques, light exercise, fresh air, suitable products to enhance effects of treatment.

Examples of contra-indications that may prevent or restrict treatment: Skeletal diseases/disorders/fractures, stroke, severe headaches/migraine, under the influence of alcohol or drugs, skin diseases/disorders, cardiovascular conditions (deep vein thrombosis), muscular diseases/disorders, nervous diseases/disorders, diabetes, epilepsy, cancer (unless qualified with suitable CPD training (continuous professional development)), receiving radiotherapy/chemotherapy, HIV, disorders of hands/feet/nails, fever, infectious diseases/disorders, diabetes, asthma, medicated high or low blood pressure, pregnancy (unless qualified with suitable CPD training), allergies, cuts, bruises, abrasions, inflammation, recent scar tissue, sunburn, after a heavy meal (this list is not exhaustive), if your client is under the care of a medical practitioner informed consent is required.

Examples of disorders of the hands/feet/nails: Fungal (tinea pedis, tinea corporis, tinea unguium), viral (verrucae, warts), arthritis (gout, osteoarthritis, rheumatoid arthritis), general foot disorders (bursitis, club foot, pes planus, foot drop, hammer toes, bone/heel spurs, high arch, hallux valgus, plantar fasciitis), nail disorders (Beau's lines, blue nails, curved or concave, discoloured nails, habit tic, koilonychias, leuconychia, onychocryptosis, onychogryphosis, onycholysis, onychomycosis, paronychia, pitting, ridge, white nails, yellow nails, skin disorders (callouses, corns, chilblains, heel fissures).

Informed consent: Required for clients on prescribed medication under the care of a medical practitioner, clients advised to consult with their doctor prior to treatment being given, client's signature to confirm that there is no medical objection to the treatment being given, if in any doubt avoid providing treatment, insurance requirements adhered to, full records kept, procedures for referral to health practitioners understood.

Refer the client: Follow referral procedures, when to refer (contra-indications, contra-actions, when outside limits of knowledge or responsibility), referral to healthcare practitioners, selecting alternative or adapted treatments.



Learning outcome 2: Be able to provide a reflexology treatment

Communicate and behave in a professional manner: Professional communication techniques, appearance (clean/pressed uniform), manner (respectful, reliable, honest, ethical, supportive), client care (modest, positioning, comfort, environment, wellbeing, treatment adaptation), no chewing, no perfume, confidentiality, education/CPD, health and safety, hygiene, organised, prepared, punctual, professional membership, insurance.

Perform reflexology treatment:

Preparing for treatment – safe and hygienic working methods, ethical practice, professional codes of conduct, therapist grounding, meet and greet client, consultation, explain history of reflexology, benefits, contra-actions, contra-indications, discuss treatment plan/adaptations, agree and sign treatment plan, instruct removal of socks/shoes, maintain modesty, provide suitable supports/covers.

Performing treatment – wash and sanitise hands, sanitise client's feet, read client's feet, record observations, greet the feet, apply selected medium, perform opening relaxation techniques, perform reflexology treatment on both feet using specified reflexology techniques in a commercially acceptable time, maintain contact throughout, check client satisfaction and comfort throughout, respond appropriately to client feedback/requests, note areas of imbalance/tender reflexes, focus on specific 'reflexes' or secondary 'reflexes' as required.

Finishing treatment – perform closing moves, wrap feet, wash hands, assist client off couch, assist with socks/shoes, offer client water, receive client feedback,

encourage open discussion (emotional development), discuss treatment outcomes and give client feedback, review treatment plan, offer aftercare advice, confirm follow-on treatment, show client out, complete records and foot charts.

Reflexology techniques: Foot holds/supports, greeting feet, opening/closing relaxation techniques (effleurage, palmar kneading, metatarsal kneading, foot rocking, ankle rotation, flexion/extension, toe rotations, spinal twist, solar plexus breathing), thumb/finger walking, pin point, rotation, hook in backup, rocking, correct pressure, continuity, posture.

Commercially acceptable time: First treatment 1 hour 30 minutes, following treatments 1 hour each (including 45 minutes of treatment and 15 minutes for aftercare advice and recording), extra treatment time may be required according to client requirements.

Adaptation of treatment: Duration, frequency, client position, equipment (couch/recliner chair), pressure, techniques, reflexes requiring extra attention and cost.

Physical characteristics: Age, foot disorder, medical condition, minor ailment, major life changes (pregnancy, menopause).

Working methods: According to local/national legislation, safe working methods, hygienic working methods, ethical practice, professional codes of conduct, posture, client preparation.

Satisfaction of the client: Appropriate communication, agreed treatment plan, focus on specific reflexes, commercially acceptable time, depth of pressure,



Learning outcome 2: Be able to provide a reflexology treatment (continued)

comfort, dignity, relaxation, effectiveness, evaluation, reflection, aftercare.

Principles of reflexology: Ancient healing art, holistic energy treatment, zone therapy, hands, feet, ears, reflex areas, reflex points, longitudinal zones, transverse zones, cross reflexes, mapping corresponding body parts onto hands/feet, foot charts, therapeutic relationship.

History of reflexology: Reflex zone therapy, reflexology, China (traditional Chinese medicine), India (Ayurveda), Africa (Egypt, Tomb of Ankamahor), Sir Henry Head, Sir Charles Sherrington, Dr. William Fitzgerald, Edwin Bowers, Joseph Riley, Joseph Corvo, Eunice Ingham, Doreen Bayly, Hanne Marquardt, Dwight Byers, Laura Norman, present day pioneers.

Reflexology theories: Pain gate control, placebo effect, energy blockage theories, endorphin/enkephalin release theory, autonomic and somatic integration theory, therapeutic relationship, proprioceptive theory, electromagnetic theory, meridian theory, nerve impulse theory.

Possible benefits of reflexology: May improve physical conditions, may improve emotional wellbeing, increased energy levels, may clear energy pathways, may promote homeostasis, relaxation, stress relief, reduces tension, helps the body to heal itself, promotes efficient body system function.

Charts: Location of mapped body reflex points, reflex areas, transverse zones, longitudinal zones, cross reflexes, hands, feet. Systems to include at a minimum lymphatic/endocrine/digestive/urinary/muscular/skeletal/respiratory/nervous/cardiovascular/reproductive.

Observations feet/hands: Skin types (normal, dry, oily, combination), characteristics (sensitive, dehydrated, moist, oedema, young, mature, colour, temperature, texture, tone, flexibility, arches, odour, pigmentation, shape, toes, nails, treatable skin conditions, contra-indicated skin conditions).

Functions of supporting hand: Support, protect, leverage platform, maintain contact, reassurance, stretching, maintain pressure.

Medium: Carrier oils, natural wax, cream, cornflour, powder, no medium.

Materials and equipment: Treatment medium, couch, covers, bolsters, trolley, bin, disposable products, correct selection process, product use, hygiene procedures, storage procedures.

Treatment evaluation: Feedback (visual, verbal, written), discussion of treatment outcomes, emotional responses, physical responses, client involvement in own health and wellbeing, client progression, repeat business, reflective practice.

Treatment records: Confidential, consultation form, signed treatment plans, completed foot charts, referral letters, records of treatment detail, aftercare advice, recommendations, evaluation, reflection, current legislation, code of ethics, insurance requirements, professional codes of practice.

Aftercare advice: Recommendations for further treatment, lifestyle changes, relaxation techniques, postural awareness, deep breathing, self-treatment, healthy eating, suitable exercise, avoid stimulants, rest, avoid heavy meal, increase water intake, stress management techniques,



Learning outcome 2: Be able to provide a reflexology treatment (continued)

hobbies, explain healing process, referral to medical/non-medical practitioner.

Treatment evaluation: Feedback (visual, verbal, written), discussion of treatment outcomes, emotional responses, physical responses, client involvement in own health and wellbeing, client progression, repeat business, reflective practice.



Learning outcome 3: Be able to reflect upon reflexology treatment

Reflect: Own attitudes/beliefs/interests, priorities/values, reflection as a process, reflection in action, reflection on action, methods of reflection (reflective journals, peer review, mentoring feedback, case study work, reading logs, portfolio development).

Reflection for personal growth: Reflect upon training/professional incidents/experiences, analyse what has occurred/why it occurred/how it can be prevented or repeated, think about the strengths and weakness of your training/professional experiences, learn something from thinking/analysing/writing, occurrences can be described and reflected upon followed by a solution or series of solutions emerging, learn from your reflection upon these incidents and experiences, develop your personal growth for the future.

Elements of reflective practice: Open mind, awareness, questioning, asking about others, choices/options/possibilities, comparing and contrasting results, in-depth understanding, viewing practice from different perspectives, seeking/gaining feedback from others, resolving problems, identifying limitations.

Impact of self-awareness: Self-awareness (e.g. attitude and beliefs, knowledge and understanding, practical skills, compare and contrast choices, understanding, rationale, adaptability, interpersonal skills, communication), impact on personal life (e.g. relationships, satisfaction), impact on professional life (e.g. clients, colleagues, professionalism).

Recording evidence: Own knowledge and practical experience, written (e.g. journals, experience logs, mentor feedback, portfolio, case studies), video, audio records (own

comments, mentor feedback, clients' comments), comply with data protection.

Own knowledge and practice: In relation to current codes of conduct and working practices, evaluate (compare to codes of conduct, compare with recommended working practices, make informed judgements).

Evaluation of self: Self-evaluation forms, journals, tests, reviewing, assessing, revising, comparing own standards to industry standards, to having discussions, asking questions (what did I learn? how well did I learn it? what should I do next?), set new goals based on new knowledge.

Strengths and limitations (for example): Knowledge and understanding, working practices, practical skills, maintain strengths, remove limitations.

Lifelong learning opportunities: CPD (continuous professional development), training courses, independent study, periodical reviewing, using knowledge to inform practice, development of personal skills, development of personal values, professional association membership, identifying progression pathways.

Self development plan: Personal development plan (PDP) documentation, reflection, identify learning gap (where am I now? where do I want to be?), establish goals (short, medium, long term), on-going review and updates of plans and documentation, areas for improvement in practice, aims and objectives for practice, targets and associated timescales, CPD requirements, training and courses (title, dates), further work-based experience, opportunities for mentoring.