

CORE CURRICULUM

FOR AROMATHERAPY

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Introduction

1.	The content of this core curriculum provides a minimum standard for safe and competent practice. It incorporates the National Occupational Standards (NOS) for Aromatherapy– CNH1, CNH2 and CNH4. Copies of CNH1 and CNH2 are attached as the Appendix A to this document, with the wording of the overviews only included in section 2A and 2B below. The full details of CNH4 are set out in section 2C below. In the interests of public protection, some additions have been made to CNH4, as indicated in red text .
2.	Achievement of the educational and professional outcomes in this Core Curriculum act as the measure for eligibility to apply for registration with the Complementary and Natural Healthcare Council (CNHC).
3.	Although the outcomes have to be achieved, our intention is not to be too prescriptive about their interpretation, as long as it lies within the boundaries set out in paragraph 1. Although a minimum standard only we hope the Curriculum will form a template which is sufficient in itself but which leaves room for expansion by individual organisations if so desired.
4.	It will be the responsibility of those Professional Associations who verify applications for CNHC registration to
	<p>a) ensure that the Core Curriculum is circulated to all training providers with whom they have a working relationship, so that it can be used as the basis for the design and delivery of their courses</p> <p>b) accept that accountability for accrediting courses and verifying applications for CNHC registration lies with the Professional Association.</p>

1 OVERALL AIMS OF THE COURSE

To ensure that those who complete the course are safe and competent to practise Aromatherapy as autonomous healthcare practitioners.

2 LEARNING OUTCOMES AND COMPETENCIES TO BE ACHIEVED

2A CNH1 Explore and establish the client's needs for complementary and natural healthcare (full details attached in Appendix A)

Overview

All forms of complementary and natural healthcare rely on exploring and establishing the client's needs and expectations. This may take place at the outset, but also during the on-going delivery of complementary and natural healthcare.

This allows the practitioner to consider whether it is appropriate to offer the service to the client, the type of service that should be offered and any required modifications to that service.

Users of this standard will need to ensure that practice reflects up to date information and policies.

2B CNH2 Develop and agree plans for complementary and natural healthcare with clients (full details attached in Appendix)

Overview

It is important that the planning of complementary and natural healthcare takes place through discussion and agreement with the client and relevant others (e.g. carers).

This standard is about developing and agreeing plans that meet the client's needs. Such plans may be subject to change as the service proceeds.

Users of this standard will need to ensure that practice reflects up to date information and policies.

2C CNH4 Provide Aromatherapy to clients

Overview

This standard is about providing aromatherapy to clients. Aromatherapy is the systematic use of essential oils and absolutes in holistic treatments to improve physical and emotional well-being. Aromatherapy treatments may include, for example; massage, inhalation, waterborne methods, topical applications and compress.

Users of this standard will need to ensure that practice reflects up to date information and policies.

Version No 1

Knowledge and understanding

Students will need to know and understand:

1. the history, principles and development of aromatherapy and its relationship to orthodox healthcare
2. the range, purpose and limitations of different aromatherapy treatments
3. the types of equipment used for aromatherapy including; steamers, vaporisers, diffusers, baths, compresses
4. the effects and benefits of aromatherapy e.g. calming, uplifting or relaxing depending on which essential oils are used
5. the consultation methods that are used for aromatherapy including: observation, smell, listening and touch
6. how to recognise cautions and contraindications to aromatherapy and the appropriate actions to take
7. how to recognise when aromatherapy may complement other healthcare which the client is receiving
8. how to recognise conditions for which aromatherapy is inappropriate and for which the client should seek advice from other sources
9. the circumstances when you may choose not to accept a client
10. how the results of the consultation inform treatment planning
11. how to construct a suitable treatment plan for your clients specific needs
12. how to evaluate progress and identify whether any adjustments to the programme are required
13. how to assess the quality and safety of plant oils
14. the essential oils, **hydrosols** and absolutes, to include those shown in Additional Information (below)
15. how and why essential oils/absolutes can become adulterated and ways of detecting adulteration
16. the hazards associated with essential oils/absolutes - toxicity, irritation, sensitisation, carcinogenesis, phytoestrogens
17. methods of extraction - steam distillation, expression, solvent extraction, enfleurage/maceration, carbon dioxide, hydrodistillation and the bi-products of distillation; hydrosols
18. **choosing and using appropriate beneficial and safe hydrosols for aromatherapy use**

19. the range of carrier media including; plant carrier oil, cream, lotion, gel, water, air and clay
20. methods of extraction of fixed/carrier oils and production of carrier media
21. how essential oils/absolutes and fixed carrier oils can degrade and how to recognise this
22. the effect of essential oils/absolutes on the olfactory and limbic system with respect to psychological functioning and overall well-being
23. possible pharmacological and metabolic effects of using essential oils/absolutes
24. the current legislative controls and guidelines for use of essential oils/absolutes and the implications of these for client safety
25. the importance of hygienic practice in the selection and blending activities
26. how to use a botanical classification system for identifying the main plant families of the essential oils/absolutes needed for treatment purposes and how this relates to blending
27. how to access current valid information on therapeutic capability of essential oils/absolutes
28. how to decide the suitability of carriers for the treatment methods agreed with clients
29. the appropriate dilution ratios for specific treatments and why this would be adjusted for different clients
30. where and how to obtain good quality essential oils/absolutes and carriers and how to assess their quality
31. how to determine the suitability of particular essential oils/absolutes for clients
32. contra-indications to the use of specific essential oils/absolutes
33. contra-indications to the different uses of essential oils such as in a diffuser, inhalation, in products etc
34. contra-indications to the use of essential oils on pets and other animals
35. factors affecting the quality of all the essential oils/absolutes such as shelf-life
36. The internal use of oils and use of oils neat on skin.
37. protocols for the blending of essential oils/absolutes
38. the possible interactions between essential oils/absolutes
39. the possible interactions of essential oils/absolutes with prescribed or self-medicated drugs or other substances
40. methods for prevention of contamination of essential oils/absolutes and carriers and prevention of cross-infection
41. the effects on essential oils/absolutes to exposure to air, heat and light and the effect of ageing on essential oils/absolutes and carriers
42. the correct ways to store essential oils/absolutes to minimise spoilage or loss and prevent degradation
43. the correct ways to dispose of essential oils/absolutes to prevent/minimize risk to people, pets and the environment, of contamination and toxicity
44. the purpose and benefit of testing clients' reaction to essential oils/absolutes
45. how to access current data on the safe use of essential oils/absolutes in relation to their toxicity
46. types of essential oils/absolutes and carrier media most likely to cause reactions and their possible effects
47. the importance of obtaining a signature of endorsement of verified essential oils/absolutes in blends to be used in client treatments and the possible implications if this is not done
48. how the blend best suited to the client's health needs was identified and how the blend was verified as appropriate and acceptable for use with clients
49. different uses of the blend, such as inhalation, creams and lotions, bath salts, balms and ointments

50. how the blend is used in treatment and how it could be protected against spoilage or loss
51. the type of aromatherapy massage methods including: effleurage, petrissage, vibrations, tapotement, stretches, pressure point stimulus
52. physiological absorption via the soft body tissue, and how the oil absorption routes and processes may be enhanced or impeded
53. how the body's systems and physiological processes are affected by deep relaxation, with particular reference to the nervous system
54. common client reactions to aromatherapy massage of soft body tissue areas and adjustments to treatment which would be implemented in respect of each reaction
55. how to recognise when inappropriate degrees of pressure are being applied
56. why it is important to maintain physical contact with clients throughout the aromatherapy massage during each sequence of the session
57. what steps should be taken at the end of the treatment session to minimise risks
58. steps to be taken at the end of the treatment sessions for clients who are in a state of deep relaxation
59. information which will enable clients to obtain optimum benefit from the use of essential oils/absolutes in blends and to minimise risks
60. the potential risks to clients from self treatment and how these should be managed
61. the nature of risks associated with client self-treatment, and the practitioner's responsibility in this respect
62. anatomy and physiology including the interaction between the following systems:
 1. skeletal system
 2. muscular system
 3. nervous system
 4. sensory system
 5. endocrine system
 6. respiratory system
 7. digestive system
 8. urinary system
 9. reproductive system
 10. circulatory system
 11. lymphatic and immune system
 12. integumentary system
63. psychological and emotional state

Performance criteria

Students must be able to do the following:

1. conduct an assessment and plan the aromatherapy programme
2. confirm consent to aromatherapy treatments
3. ensure that the environment meets the client's needs
4. ensure that essential oils, carriers and equipment are suitable for use
5. measure and blend oils safely and correctly to meet the client's needs
6. position the client for effective aromatherapy treatment and to give as much comfort as possible
7. administer oils and blends safely and correctly in accordance with professional codes of practice and legal requirements
8. massage and manipulate soft body tissue to enhance oil absorption and stimulate the natural healing process

9. make appropriate adjustments to the aromatherapy treatment to meet any changing needs
10. deal effectively with the client's response to the aromatherapy treatment
11. check the client's well-being throughout and give reassurance where needed
12. maintain the health and safety of the client, yourself and relevant others throughout the treatment
13. provide clear and accurate advice with regard to any required aftercare and self-care
14. evaluate the outcomes and effectiveness of the aromatherapy treatment to inform future plans and actions
15. complete and maintain records in accordance with professional and legal requirements

3 OVERALL RATIO OF THEORY AND PRACTICE

3.1 40% Practical to 60% theory.

4 ASSESSOR AND INTERNAL QUALITY ASSURANCE (IQA) REQUIREMENTS FOR THE REGULATED QUALIFICATIONS FRAMEWORK (RQF) COMPETENCE QUALIFICATIONS

4.1 Assessor/tutor and IQA should possess: a recognised level 3 (or above) Aromatherapy qualification (TQT 590, GLH 296); a teaching qualification at the level they are teaching (or above); a minimum two years' experience and be able to demonstrate industry specific continued professional development over that time period.

Assessors should have one of the following:
 D32 Assess candidate performance & D33 Assess candidate using differing sources of evidence;
 A1 Assess candidate performance using a range of methods;
 Level 3 Award in Assessing Competence in the Work Environment;
 Level 3 Award in Assessing Vocationally Related Achievement;
 Level 3 Certificate in Assessing Vocational Achievement.
 Internal Quality Assurer should have one of the following:
 D34 Internally verify the assessment process;
 V1 Conduct internal quality assurance of the assessment process;
 Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice;
 Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice.
 For non-regulated qualifications the assessor should meet the above assessor requirements.

5 THE MINIMUM (OR EQUIVALENT) LEVEL AT WHICH QUALIFICATIONS LEADING TO CNHC REGISTRATION MUST BE ACHIEVED AGAINST THE REGULATED QUALIFICATIONS FRAMEWORKS ACROSS THE UK

- 5.1 The equivalent minimum level for Aromatherapy qualifications is as follows
- Level 3 in the Regulated Qualifications Framework for England, Wales and Northern Ireland
 - Level 5 in the National Framework of Qualifications for Ireland
 - Level 6 in the Scottish Credit and Qualifications Framework

6 HOURS OF STUDY	
6.1	<u>Total Qualification Time</u> . 590 hours of study is required. This is the number of notional hours that represents an estimate of the total amount of time that could reasonably be expected to be required in order for a Learner to achieve and demonstrate the achievement of the level of attainment necessary for the award of a qualification. This total includes the number of hours of Guided Learning as set out below.
6.2	<u>Guided Learning</u> . 296 hours. This is the activity of a Learner in being taught or instructed by – or otherwise participating in education or training under the <u>Immediate Guidance of Supervision</u> of – a lecturer, supervisor, or tutor.
6.3	<u>Immediate Guidance or Learning</u> can be
	a) with the simultaneous physical presence of the Learner and the lecturer, supervisor or tutor, or
	b) remotely by means of simultaneous electronic communication
	90 hours of development and supervision of practical skills with the simultaneous physical presence of the Learner and the tutor/supervisor must be included in the 296 hours of Guided Learning.
7 CREDIT VALUE	
7.1	59 credits. (One credit must be equal to one tenth of the Total Qualification Time, rounded to the nearest whole number).
8 CASE STUDY REQUIREMENTS	
To include the minimum requirements for practice observed by an 'occupationally competent' assessor. NB Case study requirements are included in the Total Qualification Time and should reflect hours and credits (which may be spread across units).	
8.1	A minimum of 60 case studies must be completed, of which 3 must be observed by an occupationally competent assessor.
	6 x 6 treatments minimum one week and max one month apart – aromatherapy massage / and with other products if appropriate 15 treatments made up of at least two treatments aromatherapy massage / and with other products if appropriate 9 treatments which are not massage based – eg compresses, inhalations, creams, lotions, etc
	The written-up case studies must provide evidence of 1. <u>A client profile</u> . A summary of case study including: general impression of the client; general health and wellbeing, lifestyle, family circumstances and work. Any observed or indicated emotional or psychological state. 2. <u>The client's medical history based on a proforma consultation form</u> . Medical history in sufficient detail to enable safe and effective treatment; including any medication, treatment being received by a medical professional or complementary therapist, and any conditions that could be contra-indicated wholly or partially for an aromatherapy treatment; specifically any allergies or intolerances that may affect choice of essential oils or carrier oils

	<p>3. <u>Treatment plan</u>. To include short term plan for presenting condition(s), and longer-term plan for each client to cover wider health and wellbeing; plan to include rationale for adopted strategy.</p> <p>4. <u>For each individual treatment</u>. Treatment performed including oil blend (carrier oils, essential oils and % dilution) and the exact formula used with a client. i.e number of drops for each Essential Oil used and the order in which they are put into the blend); changes in the client's health between sessions, including improvements and reactions; observations during and after the treatment; after care and home care advice</p> <p>5. <u>Conclusions</u>. Conclusion on how the client reacted to the treatments; consideration of ongoing and follow-up care, including continuation of treatments; lifestyle factors that the client could look to change</p> <p>6. <u>Reflective practice log</u>. Identifying what went well, what could have been improved, and what learning outcomes were identified.</p>				
<p>9 DETAILS OF THE ASSESSMENT PROCESS. This must include independent assessment ie the person undertaking the summative assessment should not have taught or assessed the learner, but must be occupationally competent</p>					
9.1	Case studies as above plus				
	<p>Written exam for Anatomy, Physiology and Pathology Written exam for Aromatherapy Practical Exam to include consultation, blending, massage and aftercare Practical Exam to include making up and labelling a product (choice of compress / Sniffy stick (inhaler)/ bath salt) Reflective Practice – case studies and RP journal Field trip to be recorded and tutor assessed Research Project relevant to aromatherapy Business Plan</p>				
9.2	<p>The above should all evidence clear understanding of learning outcomes outlined in this document. Assessment should be by the tutor with a sample of the overall submissions having been additionally assessed by an independent assessor. Organisations must be able to provide evidence of this if required.</p>				
9.3	In addition – Practical Assessment of skills				
	<table border="0"> <tr> <td style="padding-right: 10px;">a)</td> <td>An ongoing (i.e. during teaching sessions) observation as to practice, application and suitability.</td> </tr> <tr> <td>b)</td> <td>Final Practical Assessment should be by a minimum of one independent assessor who is occupationally competent.</td> </tr> </table>	a)	An ongoing (i.e. during teaching sessions) observation as to practice, application and suitability.	b)	Final Practical Assessment should be by a minimum of one independent assessor who is occupationally competent.
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9.4	Optional				
	<table border="0"> <tr> <td style="padding-right: 10px;">a)</td> <td>Facial Treatment</td> </tr> <tr> <td>b)</td> <td>Mixed (blended) carrier oils</td> </tr> </table>	a)	Facial Treatment	b)	Mixed (blended) carrier oils
a)	Facial Treatment				
b)	Mixed (blended) carrier oils				
9.5	Summative Assessment				
	<p>The summative assessment must include the written work, in addition to practical work.</p>				

10 DETAILS OF AN ACCREDITATION OF PRIOR AND EXPERIENTIAL LEARNING (APEL) PROCESS FOR APPLICANTS FOR CNHC REGISTRATION WHO HAVE NOT COMPLETED A COURSE THAT OF ITSELF MEETS CNHC REQUIREMENTS, AND WHO WOULD BE RESPONSIBLE FOR THE PROCESS

The APEL process would be the responsibility of professional associations who verify applications for CNHC registration from Aromatherapy practitioners who have not completed a training course that of itself meets the requirements of the National Occupational Standards and this core curriculum. These applicants must provide the following information and evidence:

A written application to evidence the level of knowledge, training and experience. To include

- Evidence of prior training and certification mapping to core curriculum
- CPD courses
- Experiential learning needs to be evidenced as follows
 - A statement of the knowledge and level of experience mapped back to the core curriculum
 - A practical assessment based on the core curriculum
 - A written assessment based on the core curriculum
- Where the assessment identifies gaps in the learning/knowledge, these would need to be addressed by additional training and re-assessment.

CNH1 Explore and establish the client's needs for complementary and natural healthcare

OVERVIEW

All forms of complementary and natural healthcare rely on exploring and establishing the client's needs and expectations. This may take place at the outset, but also during the on-going delivery of complementary and natural healthcare. This allows the practitioner to consider whether it is appropriate to offer the service to the client, the type of service that should be offered and any required modifications to that service.

Users of this standard will need to ensure that practice reflects up to date information and policies.

Version No 1

KNOWLEDGE AND UNDERSTANDING

You will need to know and understand:

1. The concept of health and well-being that is consistent with the practice, principles and theory underlying your discipline
2. The nature of the service provided and fee structures
3. How the client's previous and present care may affect their health and well-being in relation to your discipline
4. How the psychological and emotional balance, as well as diet and lifestyle of the individual, can affect their health and well being
5. How the context in which people live affects their health and well-being
6. The importance of a suitable environment and making clients feel welcome
7. How to select and use different methods for exploring clients' needs
8. How to establish valid and reliable information about the client, and determine the priority of need, in order to plan the service
9. The potential risks (relevant to your discipline) of various courses of action for the client
10. How to work with clients to determine the appropriate actions
11. The appropriate actions to take to suit identified needs
12. The conditions for which the discipline is appropriate and those where it must be used with caution
13. How to recognise conditions for which your discipline is unsuitable and for which the client should seek advice from other sources

14. How to judge whether self-care procedure(s) relevant to your discipline are appropriate for the client
15. The anatomy, physiology and pathology relevant to your discipline
16. The procedures for record keeping in accordance with legal and professional requirements

PERFORMANCE CRITERIA

You must be able to do the following:

1. evaluate requests for complementary and natural healthcare and take the appropriate action
2. explain the nature of the service and fee structures to the client
3. provide an appropriate and safe environment for the service
4. make clients feel welcome and ensure they are as comfortable as possible
5. discuss the client's needs and expectations, and ask relevant questions
6. encourage the client to ask questions, seek advice and express any concerns
7. establish the client's needs in a manner which encourages the effective participation of the client and meets their particular requirements
8. determine any contra-indications or restrictions that may be present and take the appropriate action
9. evaluate the information obtained and determine the appropriate action with the client
10. complete and maintain records in accordance with professional and legal requirements

CNH2 Develop and agree plans for complementary and natural healthcare with clients

OVERVIEW

It is important that the planning of complementary and natural healthcare takes place through discussion and agreement with the client and relevant others (e.g. carers). This standard is about developing and agreeing plans that meet the client's needs. Such plans may be subject to change as the service proceeds.

Users of this standard will need to ensure that practice reflects up to date information and policies.

Version No 1

KNOWLEDGE AND UNDERSTANDING You

will need to know and understand:

1. The range, purpose and limitations of different methods or approaches which may be used for clients' individual needs
2. How to determine the most appropriate method(s) for different clients and their particular needs
3. How to recognise those occasions when your discipline may complement other healthcare which the client is receiving
4. The alternative options available to clients for whom your discipline is inappropriate
5. The role which the client (and others) may take, and may need to take, if the approach is to be successful
6. How to support and advise the client to make informed choices
7. How to work with the client and relevant others to plan the approach
8. Why evaluation methods should be determined at the planning stage and what the client's role will be in the evaluation
9. The importance of encouraging and empowering the client to be as actively involved as possible
10. The relationship of the client's involvement to the promotion of their health and well-being
11. The procedures for record keeping in accordance with legal and professional requirements

PERFORMANCE CRITERIA

You must be able to do the following:

1. explain the available option(s) which meet the client's identified needs and circumstances
2. explain any restrictions, possible responses and advise on realistic expectations
3. advise the client when your discipline is inappropriate and help them to consider other options
4. discuss the approach to be taken, the level of commitment required and the potential outcomes and evaluation with the client
5. check the client understands and support them to make informed choices
6. obtain the client's consent and complete records in accordance with professional and legal requirements

Appendix B

What Activities Count Towards Guided Learning Hours (GLH) and Total Qualification Time (TQT)?

The following table provides examples of what activities count towards both GL (hours) and TQT:

Type of Activity	GL (hours)	TQT
Classroom based learning supervised by the lecturer, supervisor or tutor whether on a 1 to 1 or group basis	✓	✓
Invigilated or supervised examinations or final assessments	✓	✓
Research project where the learner carries out independent research and produces a report without supervision	x	✓
Classroom based induction to a qualification as required in the specification	✓	✓
Skills practice at place of learning or workplace where the learner is responsible for generating their own evidence of practice, eg. a statement confirming attendance from a suitable attendant adult, generally not the lecturer or tutor	x	✓
Skills practice carried out in simulated conditions where the learner is observed and assessed at the same time as the simulation is taking place	✓	✓
Face to face meetings with the lecturer, supervisor or tutor or other prearranged teaching session, eg. telephone/webcam contact, internet messaging, ie. conversation in real time	✓	✓
Work based practice observed by employer, tutor, or other witness more qualified than the learner	✓	✓
Portfolio assessment where the learner collates evidence of competence and understanding unsupervised by the lecturer, supervisor or tutor	x	✓
E-assessment where the learner has their knowledge and understanding assessed unsupervised where they can access online e-assessment at any time	x	✓
E-assessment where the learner is supervised by the lecturer, supervisor or tutor in real time	✓	✓
Watching a pre-recorded podcast or webinar	x	✓