

Therapy

Unit code: T/601/9559

QCF Level 4: BTEC National

Credit value: 15
Guided learning hours: 90

Aim and purpose

Complementary therapies are now an integral part of the beauty therapist's skills base. This unit develops the practical and theoretical skills required to carry out reflexology treatments for clients within the beauty therapy industry.

Unit introduction

Reflexology is a very effective treatment both in terms of cost and the physiological and psychological benefits for clients. It can be carried out almost anywhere, making it an ideal treatment to offer as a mobile service. Time and time again clients and therapists are amazed at the results of reflexology treatments, but are often at a loss as to how to explain why the treatment works.

Learning outcome I will develop learners' knowledge of the location of the zones, dividing lines and reflex areas of the feet, and of how to link reflex areas to homeostatic imbalances within the body.

Learning outcome 2 will give learners opportunities to research the theories and history behind reflexology treatment. This will help learners to understand the role of professional reflexology bodies today and consider how they could develop a beauty business by working with the National Health Service (NHS) as a registered reflexologist. Complementary therapies are gradually becoming more available on the NHS, with many hospitals, hospices, care homes and clinics offering some form of complementary therapy.

Learning outcome 3 of the unit will enable them to learn a reflexology routine. Learners will carry out treatments on clients' and can receive treatments themselves, enabling them to experience first hand what a valuable tool reflexology is to have knowledge of and expertise in.

This unit will develop learners' awareness of this area of the beauty therapy industry. However, it will not fully develop competence or confer a licence to practice, rather it contributes to the underpinning knowledge and understanding of the appropriate National Occupational Standards (NOS). If learners wish to purse this area of study, they should contact the relevant professional bodies and seek guidance on further professional study and development.

Learning outcomes

On completion of this unit a learner should:

- I Know the location of the zones, dividing lines and reflex areas of the feet
- 2 Understand the history, theories and principles behind reflexology treatments
- 3 Be able to carry out reflexology treatments.

Unit content

1 Know the location of the zones, dividing lines and reflex areas of the feet

Zones: position from medial side to lateral side of body (1-5 feet, hand and body)

Dividing lines: diaphragm line; waist line; pelvic line; tendon line

Positions of reflex areas: plantar surface; dorsal surface; medial side; lateral side (appendix, ascending, transverse and descending colon, bladder, liver, hepatic flexure, ileocecal valve, pancreas, sigmoid colon, sigmoid flexure, small intestine, thyroid, adrenal glands, kidneys, heart, shoulder, eyes/ears, head/brain/sinuses, throat/neck, spleen, splenic flexure, pituitary, spine, stomach, diaphragm, sciatic, gall bladder, arm, lungs/breasts, ovaries/testes, lymphatics, uterus/prostate, bronchials, fallopian tubes/vas deferens)

Reflex areas linked to common homeostatic disorders: hypotension; hypertension; oedema; stress; ME; asthma; headaches; sinusitis; insomnia; digestive; musco-skeletal

2 Understand the history, theories and principles behind reflexology treatments

History: earliest records; timeline; zone therapy; Egyptian links; key people (Dr. William H Fitzgerald, Dr Shelby Riley MD, Eunice Ingham, Dr Edwin Bowers MD, Dwight Byers)

Theories: reflexology principles; what reflexology does and does not do; how it might work (relaxation, endorphin release, improvement of circulation, direct nerve stimulation, psychological, benefit of touch, chemical deposit/nerve pathway blockage release, bio-electric potential, chi energy)

Terminology: reflex area; zone; zone therapy; nerve endings; congestion; Qi energy; helper area; referral area; pin point reflex; leverage; support; homeostasis; healing crisis

Role of professional reflexology bodies: statutory legislation; standardisation of training (course content, assessment); national register; membership fees; insurance; codes of ethics; professional reflexology bodies eg Association of Reflexologists, International Institute of Reflexologists, British Reflexology Association, Reflexologists Society; links between professional reflexology and the National Health Service (identifying opportunities for work, care homes, GP practices, health clinics, support, synergy)

3 Be able to carry out reflexology treatments

Preparation: of therapist (personal hygiene/presentation, protective attire); of client (protective attire, secure hair, skin preparation eg sanitisation)

Preparation of work area: environmental conditions eg heating, lighting, ventilation, atmosphere; salon and client requirements

Consultation: consultation techniques (questioning, visual, manual, reference to client records); treatment objectives; foot assessment; completion of consultation form; establish client requirements (relaxation, revitalisation, homeostatic balance); localised contraindications eg skin diseases/disorders/infections, bone breaks or fractures, recent scarring; systemic contraindications (anything for which the client is having medical treatment, GP referral, pregnancy in the first trimester); importance of not diagnosing medical conditions; agreeing treatment objectives; explain treatment to client; clear recommendations; client confidentiality

Reflexology treatment: techniques (hook in and back up, thumb and finger walking, shake and bake, ankle rotation, spine twist, spine wringing, feathering, thumb slides/troughing, cross thumb slides, diaphragm relaxer, shoulder roll, cross hatch, pelvic kneading, Achilles tendon stretch, ankle freeing, toe mobilisation, metatarsal kneading, pin point reflexes, solar plexus press, tapotment, effleurage, frictions); reflexology routine (warm-up with soothing foot massage and deep breathing exercise; treatment consisting of a systematic routine which treats all reflex areas of the feet; revitalising foot massage to finish the treatment)

Aftercare advice: drink plenty of water or herbal tea; avoid alcohol for 24 hours; eat light meals for 24 hours; try to achieve eight hours' sleep; homecare; retail opportunities

Assessment and grading criteria

In order to pass this unit, the evidence that the learner presents for assessment needs to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria for a pass grade describe the level of achievement required to pass this unit.

Asse	Assessment and grading criteria				
To achieve a pass grade the evidence must show that the learner is able to:		To achieve a merit grade the evidence must show that, in addition to the pass criteria, the learner is able to:		grad shov pass	chieve a distinction e the evidence must v that, in addition to the and merit criteria, the ner is able to:
P1	outline the zones, dividing lines and the reflex areas of the feet				
P2	identify reflex areas that relate to common homeostatic disorders				
Р3	explain how reflexology has developed over the centuries to become the treatment that is provided in the west today	M1	justify how reflexology has developed over the centuries to become the treatment that is provided in the west today		
P4	explain the principles and theories behind reflexology using key reflexology terms	M2	compare the principles and theories behind reflexology using key reflexology terms	D1	evaluate the principles and theories behind reflexology using key reflexology terms
P5	explain the role of professional reflexology bodies today	M3	assess the role of professional reflexology bodies today	D2	evaluate the role of professional bodies today
P6	implement preparations for reflexology treatments	M4	explain the choice of preparations, consultation techniques, treatment application and aftercare advice to clients.	D3	evaluate the choice of preparations, consultation techniques, treatment application and aftercare advice to clients.
P7	perform client consultations for reflexology treatments				
P8	perform reflexology treatments to a safe, professional standard [TW3, TW4, CT6, SM3, SM7]				
Р9	provide aftercare advice.				

PLTS: This summary references where applicable, in the square brackets, the elements of the personal, learning and thinking skills applicable in the pass criteria. It identifies opportunities for learners to demonstrate effective application of the referenced elements of the skills.

Key	IE – independent enquirers	RL – reflective learners	SM – self-managers
	CT – creative thinkers	TW – team workers	EP – effective participators

Essential guidance for tutors

Delivery

The word 'client' relates to and peers and does not mean that treatments need to be carried out on paying clients or within commercial timescales.

Learners should have access to foot maps, suitable books and to the internet. They will also require access to a realistic learning environment which must include hand washing facilities.

Delivery of this unit should combine theory and practice. Some aspects of the theory will need to be presented before practical activities before practical activities in order to comply with health and safety regulations and industry codes of conduct.

Learning outcome I focuses on identifying the location of the zones, dividing lines and reflex areas of the feet. It may be useful to provide blank foot shapes on which learners can draw the various areas.

Following on from this, learners will need to examine the theories and history behind reflexology. Tutors will need to provide an overview but could then point learners in the direction of relevant research materials to enable them to conduct independent research. This might be achieved through collaborative working. Learners will gain an understanding of how the treatment has evolved over time and an appreciation of how reflexology can make a valuable contribution towards the maintenance of good health.

Having established this, learners will need to know the various finger and thumb techniques that are used to perform the reflexology routine. The routine itself is often best taught in a series of movements that follow sensibly on from one another. The whole routine needs to include consultation; preparation; relaxation; main body (divided by either body system or region by region); revitaliser; feedback/aftercare.

It might be useful for learners to draw out up to six movements at a time from the routine and learn these before the next session. These six movements could then be repeated before adding new ones so that, eventually, a whole routine has been covered and the movements that were taught first are still fresh in learners' minds.

Once learners are more familiar with the routine these diagram prompt sheets could be replaced with a series of postcards that list the order of the movements. Learners should not use these when they are being assessed but can use them for practice sessions and case studies.

Tutors will decide on the routine that they want to teach but it should be concise, systematic, learner friendly and cover all reflex areas of both feet. Some tutors may decide not to use a massage medium; this is a matter of choice. It is generally felt that it may not be advisable to use talcum powder as a massage medium due to the potential risk of irritating the respiratory system, which is particularly relevant for asthmatic learners or clients.

Outline learning plan

The outline learning plan has been included in this unit as guidance and can be used in conjunction with the programme of suggested assignments.

The outline learning plan demonstrates one way in planning the delivery and assessment of this unit.

Topic and suggested assignments/activities and/assessment

Introduction to the unit.

What learners can expect to learn, carry out, achieve and bring to each session. Learners to receive an assessment plan that details the assessment titles and submission dates. Learners to receive a unit session plan which shows them what subjects will be covered during each session. Assessment of learners' existing knowledge of reflexology. Short demonstration to contextualise the information.

Introduction to reflexology, what it does, the 'dos and don'ts'. History, theories, principles of reflexology, key reflexology terms, role of professional reflexology bodies today.

Reflexology foot maps – tutor to help learners identify the dividing lines, zones and positions of the reflex areas of the feet. Use of blank foot diagrams that learners can draw on and colour in. Tutor to help learners identify key reflex areas that relate to common homeostatic imbalances.

Assignment 1: The History, Theories and Principles Behind Reflexology (P1, P2, P3, M1, P4, M2, D1, P5, M3, D2).

Tutor introduction to assignment brief and assignment workshops. Learners conduct independent research creating an information booklet/article advertising reflexology treatments to prospective clients, by detailing the development of and principles behind reflexology treatments and reflex areas.

Tutor to teach learners a full reflexology routine, in stages, including: correct techniques for finger and thumb walking; hook in and back up; support of foot; setting up the work area; contra indications; contra actions; relaxation massage to begin the treatment; aftercare; record keeping.

Learners to draw a series of diagrams to help them remember the movements they are taught and then produce a set of prompt cards for themselves. Tutor to link homeostatic imbalances to organ/system malfunction and reflexology treatment.

Learners to practise and carry out treatments on clients (friends, family, peers, paying clients). Initially they will need to use their prompt cards and diagrams but they should not use them during their practical assessment.

Assignment 2: Reflexology Practical (P6, P7, P8, P9, M4, D3).

Tutor introduction to assignment brief and assignment workshops. Consultation process and techniques (including preparations and aftercare advice). Learners complete four full reflexology treatments on clients and create a written report recording the relevant information about the treatments provided.

Unit review.

Assessment

The unit is assessed by the centre and will be subject to external verification by Edexcel.

Achievement of the assessment and grading criteria should be evidenced through contextualised, vocationally-related experiences, with tasks specifically designed with the assessment and grading criteria in mind.

The theoretical aspects of assessment for this unit can be achieved through the learners completing centredevised assignments, a portfolio of evidence or through adaptation of Edexcel assignments where available. Practical assessment criteria will require observation and completion of relevant documentary evidence by the assessor.

Assessment should be as holistic as possible, with assignments designed to cover multiple assessment criteria, even across units, where appropriate. Reference to grading criteria should be made in the assessment documentation, to ensure the criteria have been met.

P1 and P2 can be achieved through the use of reflexology foot maps, outlining the zones, diving lines and reflex areas of the feet, and identifying of the reflex areas that relate to common homeostatic disorders. This can form part of an information booklet for prospective clients.

P3, P4, and P5 can also be achieved by the production of an information booklet that explains the history, principles and theories behind reflexology, and the role of professional reflexology bodies today. Learners will need to carry out in-depth research and draw together information from a variety of sources (for example primary and secondary), not just from the internet. For M1 and M2 it is expected that learners will justify how reflexology has evolved and compare the principles and theories behind the treatment. It is anticipated that the booklet will be produced using appropriate ICT to ensure that its presentation is fit for purpose.

Alternatively, research could be presented as an informative article. Use of images could improve the presentation of the article but the presentation style should ensure that the article is fit for purpose.

Learners are expected to demonstrate evaluative skills commensurate with the level of the unit for D1, D2 and D3. This should include manipulation of in-depth research, where appropriate, and suitable referencing of source material.

To achieve P6, P7, P8, P9, learners must perform four different reflexology treatments, considering the preparation, client consultation, treatment itself and aftercare advice. Learners could perform the four treatments on one client, as a case study, monitoring their progress over time. Alternatively, to gain suitable experience of working on different clients, the treatments could be performed on four different clients with varying requirements.

It is essential that learners are given opportunities to achieve all the assessment and grading criteria through the assignments. Theoretical aspects of this unit, such as anatomy and physiology, lend themselves to crossunit assessment.

It is recommended good practice for tutors to hold regular assignment workshops where learners bring in their assignment work and work on it, consulting with the tutor when necessary.

Signed witness testimonies and observation records must be retained for verification purposes.

Supplementary evidence in the form of photographs and consultation record cards could also be provided.

Programme of suggested assignments

The table below shows a programme of suggested assignments that cover the pass, merit and distinction criteria in the assessment and grading grid. This is for guidance and it is recommended that centres either write their own assignments or adapt any Edexcel assignments to meet local needs and resources.

Criteria covered	Assignment title	Scenario	Assessment method
PI, P2, P3, MI, P4, M2, DI, P5, M3, D2	The History, Theories and Principles Behind Reflexology	Produce an information booklet advertising reflexology treatments to prospective clients by detailing the development of and principles behind reflexology treatments.	Written information booklet with diagrams and pictures, eg reflexology foot maps, marked and authenticated by the assessor.
P6, P7, P8, P9, M4, D3	Reflexology Treatments	Complete four reflexology treatments on client(s), with a written report detailing the treatments.	Practical observation, with signed witness testimony. Written report marked and authenticated by the assessor.

Links to National Occupational Standards, other BTEC units, other BTEC qualifications and other relevant units and qualifications

This unit links to the following NOS: CNHII Provide reflexology to clients. This unit forms part of the BTEC hair and beauty sector suite. This unit has particular links with the following unit titles in the hair and beauty suite:

Level 2	Level 3	Level 4
The Living Body	Provide Body Massage	Aromatherapy Massage for Beauty Therapy
		Research in Complementary Therapies for the Beauty Industry

Essential resources

Learners will need access to a clinic/salon area for the practical elements of this unit and to foot maps/charts. Clinics will need to be furnished with either massage couches with lifting head rests or reflexology reclining chairs and stools for the therapist, ergonomically designed stools or those with a back are ideal. Learners will also need clean towels, foot wipes, hand washing and waste disposal facilities.

Employer engagement and vocational contexts

This unit focuses on the development of a practical routine, consequently the more access learners have to a variety of clients the better. Once learners have learned the basic routine they could offer treatments in hospices, care homes etc to gain experience of the benefits of reflexology for health.

Indicative reading for learners

Textbooks

Byers D – Better Health with Foot Reflexology Revised Edition (Ingham Publishing, 2001) ISBN 9781891130007

Mackereth P and Tiran D – Clinical Reflexology: A Guide for Health Professionals (Churchill Livingstone, 2002) ISBN 9780443071201

Parsons T – An Holistic Guide to Anatomy and Physiology (Thomson Learning, 2002) ISBN 9781861529763

Journals and magazines

Habia News (Seed Publishing Limited)

Health and Beauty Salon Magazine (Reed Business Information)

Massage and Bodywork (Associated Bodywork and Massage Professionals)

Websites

www.aor.org.uk	Association of Reflexologists
www.cnhc.org.uk	Complementary and Natural Healthcare Council
www.fihealth.org.uk	The Prince's Foundation for Integrated Health
www.habia.org	Habia, the Standards Setting Body for the hair and beauty sector
www.reflexology-uk.net	International Institute of Reflexology

Delivery of personal, learning and thinking skills

The table below identifies the opportunities for personal, learning and thinking skills (PLTS) that have been included within the pass assessment criteria of this unit.

Skill	When learners are
Independent enquirers	planning and carrying out research into the development of reflexology [IE2]
	exploring the development of reflexology from different perspectives [IE3]
	considering the influence of circumstances, beliefs and feelings on the development of reflexology [IE5]
	supporting conclusions about the development of reflexology, using reasoned arguments and evidence [IE6]
	planning and carrying out research into principles and theories behind reflexology [IE2]
	exploring theories behind reflexology from different perspectives [IE3]
Creative thinkers	adapting ideas when performing reflexology treatments, as circumstances change [CT6]
Team workers	adapting their behaviour to meet the client's needs when performing reflexology treatments [TW3]
	showing fairness and consideration to clients when providing reflexology treatments [TW4]
Self-managers	organising time and resources, when performing reflexology treatments [SM3]
	managing their emotions when performing reflexology treatments, building relationships with clients [SM7]
Effective participators	identifying improvements in how reflexologists can work with the National Health Service. [EP4]

Functional Skills – Level 2

Although PLTS are identified within this unit as an inherent part of the assessment criteria, there are further opportunities to develop a range of PLTS through various approaches to teaching and learning.

Skill	When learners are
ICT – using ICT	
Select, interact with and use ICT systems safely and securely for a complex task in non-routine and unfamiliar contexts	researching the development of reflexology in the West
Manage information storage to enable efficient retrieval	managing client information
ICT – finding and selecting information	
Select information from a variety of sources to meet requirements of a complex task	researching the principles and theories behind reflexology
ICT – developing, presenting and communicating information	
Enter, develop and refine information using appropriate software to meet requirements of a complex task	creating a PowerPoint presentation about the role of professional reflexology bodies
Use communications software to meet requirements of a complex task	presenting reflexology treatment plans
Combine and present information in ways that are fit for purpose and audience	creating reflexology treatment plans
Evaluate the selection, use and effectiveness of ICT tools and facilities used to present information	reflecting on work produced to improve the final version
Mathematics – representing:	
Understand routine and non-routine problems in familiar and unfamiliar contexts and situations	analysing the zones, dividing lines and reflex areas of the feet
Mathematics – analysing	
Apply a range of mathematics to find solutions	applying a range of reflexology skills to perform treatments
Use appropriate checking procedures and evaluate their effectiveness at each stage	using appropriate checking procedures when performing reflexology treatments
Mathematics – interpreting	
Interpret and communicate solutions to multistage practical problems in familiar and unfamiliar contexts and situations	interpreting and communicating solutions when problems arise during reflexology treatments
Draw conclusions and provide mathematical justifications	drawing conclusions regarding the development of reflexology

Skill	When learners are
English – Speaking, Listening and Communication	
Make a range of contributions to discussions in a range of contexts, including those that are unfamiliar, and make effective presentations	consulting with clients about reflexology treatments
English – Reading	
Select, read, understand and compare texts and use them to gather information, ideas, arguments and opinions	reading texts about the theories and principles behind reflexology
English – Writing	
Write a range of texts, including extended written documents, communicating information, ideas and opinions, effectively and persuasively	writing an explanation/evaluation of how reflexologists can work with the National Health Service.