

Higher National Unit specification

General information

Unit title: Complementary Therapies: Stress Management for Clients

(SCQF level 8)

Unit code: HF7R 35

Superclass: HB

Publication date: July 2016

Source: Scottish Qualifications Authority

Version: 02

Unit purpose

This Unit has been designed to enable learners to understand the nature of stress, the causes and effects of stress on individuals and strategies that may positively or negatively affect managing stress levels. In addition the learner will build on previous consultation treatment planning and therapy skills to develop an appropriate strategy for clients presenting with stress. The learners studying this Unit would apply and evaluate therapeutic treatments.

Outcomes

On successful completion of the Unit the learner will be able to:

- 1 Describe common models of stress, causal factors and the effects of stress on individuals and others.
- 2 Examine strategies for coping and managing stress.
- 3 Plan and develop a stress management strategy for clients.
- 4 Perform and evaluate treatments for stress relief purposes.

Credit points and level

1 Higher National Unit credit at SCQF level 8: (8 SCQF credit points at SCQF level 8)

Higher National Unit specification: General information (cont)

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Recommended entry to the Unit

Learners should have good communication skills, both written and oral. These can be evidenced either by the achievement of nationally recognised qualifications for example Higher English or a qualification equivalent to SCQF level 6 or by the completion of a pre-course interview part of which could take the form of a written assignment. The skills to undertake this Unit could also be demonstrated through an employer's reference or the process of application and interview.

Core Skills

Achievement of this Unit gives automatic certification of the following:

Complete Core Skill Problem Solving at SCQF level 6

Core Skill component None

Opportunities to develop aspects of Core Skills are highlighted in the Support Notes for this Unit specification.

Context for delivery

If this Unit is delivered as part of a Group Award, it is recommended that it should be taught and assessed within the subject area of the Group Award to which it contributes.

Equality and inclusion

This Unit specification has been designed to ensure that there are no unnecessary barriers to learning or assessment. The individual needs of learners should be taken into account when planning learning experiences, selecting assessment methods or considering alternative evidence.

Further advice can be found on our website www.sqa.org.uk/assessmentarrangements.

Higher National Unit specification: Statement of standards

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Acceptable performance in this Unit will be the satisfactory achievement of the standards set out in this part of the Unit specification. All sections of the statement of standards are mandatory and cannot be altered without reference to SQA.

Where evidence for Outcomes is assessed on a sample basis, the whole of the content listed in the Knowledge and/or Skills section must be taught and available for assessment. Learners should not know in advance the items on which they will be assessed and different items should be sampled on each assessment occasion.

Outcome 1

Describe common models of stress, causal factors and the effects of stress on individuals.

Knowledge and/or Skills

- Definitions of stress
- Different models of stress and coping
- ♦ Physiology of stress response
- Physical, cognitive (mental), emotional and behavioural symptoms of stress
- ♦ Long term stress and chronic disease
- Potential stressors and external and internal factors
- Individual differences

Outcome 2

Examine strategies for coping and managing stress.

Knowledge and/or Skills

- Positive strategies for managing stress
- Negative strategies for managing stress
- Effects of positive strategies on individuals
- ♦ Effects of negative strategies on individuals
- Role of therapeutic treatment in stress management

Higher National Unit specification: Statement of standards (cont)

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Outcome 3

Plan and develop a stress management strategy for clients.

Knowledge and/or Skills

- Treatment Planning
- Preparation of treatment area and resources
- ♦ Communication skills
- Consultation techniques
- ♦ Client body language
- Symptoms of stress
- Stress Management Techniques
- Physiological responses to stress

Outcome 4

Perform and evaluate treatments for stress relief purposes.

Knowledge and/or Skills

- Stress management techniques used
- ♦ The application of the treatments
- ♦ Aftercare advice
- ♦ Homecare advice
- ♦ Lifestyle advice
- Evaluation of treatment for effectiveness in aiding stress management

Evidence Requirements for this Unit

Learners will need to provide evidence to demonstrate their Knowledge and/or Skills across all Outcomes by showing that they can:

Outcomes 1 and 2

Outcomes 1 and 2 should be assessed in the form of an open-book assignment.

The evidence generated must demonstrate that learners can:

- define stress in relation to current theories.
- describe two different models of stress and coping.
- describe the links between personality type and stress.
- describe how external and/or internal factors may cause stress
- describe the physiological, response to stress.

Higher National Unit specification: Statement of standards (cont)

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- describe the physical, cognitive, emotional and behavioural symptoms of stress.
- describe links between long-term stress and chronic disease.
- explain a variety of positive strategies for managing stress.
- explain a variety of negative strategies used in managing stress.
- explain the role of selected therapeutic treatment to help manage stress.

Outcomes 3 and 4

Outcomes 3 and 4 should be holistically assessed.

The learner should consult with and carry out therapy treatment on two different clients, each presenting with 'stress'.

A stress management strategy must be developed for each client, which must include three therapy treatments to be carried out on different occasions. The therapy treatments applied must benefit the client and appropriately aid stress management.

All consultation and assessment documents, client records and evaluations should form part of the submitted evidence.

Learners must be observed on a minimum of one occasion.

An Assessor observation checklist must be completed.

The evidence generated must demonstrate that learners can:

- Conduct a client consultation in a sensitive, empathic and respectful manner.
- Analyse and respond appropriately to observations made relating to client body language.
- Gather clear and accurate client information relating to the client's lifestyle, medical history, physiological and psychological well-being.
- Identify tactfully discuss and record symptoms of stress presented in the client
- Provide client advice on techniques to manage stress: healthier life-style options, physical activity, self-massage, breathing, relaxation.
- Discuss and agree a therapy treatment plan with the client
- Prepare the work area and resources for the therapy treatment according to professional standards.
- Maintain safe and hygienic practice.
- Prepare, screen and position the client appropriately to ensure comfort, privacy and safety.
- Position self to ensure the treatment is effective and applied without causing postural imbalance.
- Perform the therapy treatment appropriate to the aims of the treatment plan.
- ♦ Adapt the positioning of the client, when and where necessary, to take into account the client's physical condition (eg pregnancy, clients with lack of mobility).

Higher National Unit specification: Statement of standards (cont)

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- Ensure client care, comfort and relaxation is maintained throughout the treatment and adapt the treatment if necessary.
- working within an acceptable timeframe.
- Elicit client satisfaction and evaluate the effectiveness of the treatment in aiding stress management.
- Provide after-care and specific relevant home-care advice to help maximise the benefits of the treatment applied.
- Reinforce stress management advice and check the client's understanding of techniques recommended.
- Plan for future treatments ensuring client records are complete, up-to-date, accurate and legible.

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Unit Support Notes are offered as guidance and are not mandatory.

While the exact time allocated to this Unit is at the discretion of the centre, the notional design length is 40 hours.

Guidance on the content and context for this Unit

This Unit has been designed to enable learners to understand the nature of stress, the causes and effects of stress on individuals and strategies that may positively or negatively affect managing stress levels. The learner will build on previous consultation, treatment planning and therapy skills to develop an appropriate strategy for clients presenting with stress. The learner will then apply and evaluate the therapeutic treatments suggested in the strategy.

To undertake the Unit, the learner should have written and oral communication skills at SCQF level 6. They should have achieved or be significantly close to achieving Units that would allow Body or Head massage, reflexology or aromatherapy treatments to be competently applied as part of the developed stress management strategy.

Outcomes 1 and 2

These two Outcomes focus on common models of stress, causes and effects on the individual and strategies that may help or hinder the management of stress.

Definitions of stress: most models will outline a definition of stress applicable to their model — these definitions may vary slightly. General definitions of stress can be obtained from World Health Organisation (WHO), UK Health & Safety Executive (HSE), International Stress Management Association (ISMA), International Labour Organisation (ILO) for comparison and discussion purposes

Models of stress: this is a dynamic area of research and new models are continually being developed, particularly in relation to occupational stress. For the purposes of this Unit, it is useful for learners to understand the Seyle (1956) 'General Adaptation Syndrome (GAS)' Model based in physiology and psychobiology and Lazaraus & Folkman (1980) 'psychological stress' Transactional Model.

Physiology of stress response: may include under/over arousal (Yerkes-Dodson) in terms of performance, physiology of the flight & flight response including the release of hormones (adrenaline, noradrenaline, cortisol) and the physiological effects on the various systems of the body.

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Physical symptoms of stress: may include:

- ♦ Aches/pains & muscle tension/grinding teeth
- Frequent colds/infections
- Allergies/rashes/skin irritations
- Constipation/diarrhoea/IBS
- ♦ Weight loss or gain
- ♦ Indigestion/heartburn/ulcers
- Hyperventilating/lump in the throat/pins & needles
- Dizziness/palpitations
- Panic attacks/nausea
- Physical tiredness
- Menstrual changes/loss of libido/sexual problems
- Heart problems/high blood pressure

Cognitive symptoms of stress: may include:

- Inability to concentrate or make simple decisions
- Memory lapses
- ♦ Becoming rather vague
- Easily distracted
- Less intuitive & creative
- ♦ Worrying
- Negative thinking
- Depression & anxiety

Emotional symptoms of stress: may include:

- ♦ Tearful
- ♦ Irritable
- Mood swings
- ♦ Extra sensitive to criticism
- Defensive
- ♦ Feeling out of control
- Lack of motivation
- ♦ Angry
- ♦ Frustrated
- Lack of confidence
- Lack of self-esteem

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Behavioural symptoms of stress: may include:

- ♦ No time for relaxation or pleasurable activities
- Prone to accidents, forgetfulness
- Increased reliance on alcohol, smoking, caffeine, recreational or illegal drugs
- ♦ Becoming a workaholic
- ♦ Poor time management and/or poor standards of work
- Absenteeism
- Self-neglect/change in appearance
- ♦ Social withdrawal
- Relationship problems
- Insomnia or waking tired
- ♦ Reckless
- Aggressive/anger outbursts
- Nervous
- Uncharacteristically lying

Long-term stress: The learner should describe the detrimental effects of cortisol which leads to chronic diseases, and link secondary effects of long-term symptoms of stress leading to cardio-respiratory disease, cancers and mental-health disorders.

Potential stressors: External — learners should be able to explain a number of external stressors which may include:

- Relationship difficulties or a divorce
- Serious illness in the family
- Caring for dependants such as children or elderly relatives
- ♦ Bereavement
- Moving house
- Debt problems

Potential stressors: Internal — learners should be able to explain a number of internal stressors, identifying that they are derived from an individual's personal goals, expectations, standards, perceptions and desires and may be associated with, eg:

- Nutritional status
- ♦ Attitudes
- Thoughts feelings of anger, fear and worry
- ♦ Anticipation of what might happen
- ♦ Imagination of what might happen
- Memory poor previous experiences
- Overall health and fitness levels balanced activity with rest and recovery
- Presence of illness and infection
- Emotional well-being
- Life/work balance, rest and relaxation

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Individual differences: learners should be able to describe the principles relating to: 'Type A/Type B personalities' (Friedman & Rosenman) 'hardiness' (Kobasa) and 'self-efficacy' (Bandura) in terms of susceptibility to, and coping with, stress.

Positive strategies to coping with stress: the learner should explain (ie what they are and how they positively contribute to managing stress) a variety of strategies that would help to reduce stress. This should address physical, cognitive, emotional and behavioural symptoms, although some strategies will affect more than one symptom 'group'. Strategies may include: changes to physical fitness regimes, sleep patterns, nutritional intake, use of alternative therapies (massage, reflexology, aromatherapy, visualization, imagery, breathing techniques, yoga, pilates), use of cognitive techniques (eg cognitive rehearsal, affirmations), training in psychological techniques (eg anger or anxiety management (CBT), action planning, acceptance, restraint), developing/maintaining social support networks.

Negative strategies used in coping with stress: the learner should be able to explain (ie what they are and why they might relieve stress only in the short term) a number of Negative strategies may include: alcohol/drug abuse, disengagement, avoidance, denial, self-blame/harm, anger, seeking sympathy from others.

Selected therapeutic treatment: Body massage, head massage, reflexology, aromatherapy

Outcomes 3 and 4

These two Outcomes are related to the development of a stress management strategy and applying therapeutic treatments to help manage stress.

Consultation and Assessment process: information gathered should include all that would normally be asked for any therapeutic treatment (medical history, accidents, illnesses, operations, medications, contra-indications/specific conditions, general lifestyle, general emotional well-being). Additional further questioning, probing and recording of information on the occurrence, frequency, duration and onset of symptoms of the physical, cognitive (mental), emotional and behavioural symptoms of stress should be conducted. Learners must use a variety of communication skills (different forms of questioning, listening, gestures, utterances, non-verbal communication methods) to illicit information. Appropriate documentation should be used to evidence the process and sufficient time must be made available for the process to be conducted.

Developing a stress-management strategy: the primary aim of the strategy is to offer three therapeutic treatments (eg Body Massage, Head Massage, Reflexology, Aromatherapy) to each client, to help manage stress. The strategy should be negotiated and agreed with the client. It is possible that other stress-management techniques could be incorporated into the therapy sessions (eg breathing techniques, visualisation/imagery) if time allowed, and if so, details should be recorded on the client record. It is expected that the first treatment would occur immediately following the consultation and assessment process and agreement of the strategy, although if time does not allow, this can be deferred. Treatments should take place regularly, ideally with one week between sessions. Lifestyle advice, outlining specific appropriate stress-management techniques for the client, should be given and monitored during the case study.

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Application of therapeutic treatment: the same therapy modality should be applied for each of the three sessions (ie all body massage, or all reflexology, etc), although a different modality maybe chosen for each client. The therapy treatments should achieve all ER in this Unit and be of the same standard as if being applied in the individual therapy Units in the Complementary Therapies Group Award (ie *Body Massage Treatment, Traditional Head Massage, Reflexology, Aromatherapy*).

Evaluations: learners should evaluate each treatment session in terms of the immediate effects on the client. At the end of the course of treatments, the learner should evaluate the overall effects of the stress management strategy on the client's stress levels.

Guidance on approaches to delivery of this Unit

It is recommended that this Unit is delivered as part of a Group Award, and is taught and assessed within the subject area of the Group Award it contributes.

The Unit is divided into four Outcomes. Outcomes 1 and 2 provide the underpinning theoretical knowledge to be applied in two practical case studies carried out to achieve Outcomes 3 and 4.

Outcome 1 and 2 provide opportunities for learners to develop oral communication, IT and problem-solving skills using a variety of research, small group discussions, case-study analysis and group presentation tasks. For example:

- Class discussion could focus on what 'stress' means with learners working in small groups to define stress, researching general definitions of stress, and identify different situations which might cause stress. Discussion could take place around characters experiencing stress from popular television.
- ♦ Different models of stress should introduced, eg Systemic Model Seyle (1956) General Adaptation Syndrome and Lazarus & Falkman (1980) Transactional Model.
- The physiology of the stress response should be introduced and linked to Anatomy & Physiology of the Nervous System with reference to the sympathetic and parasympathetic responses of the autonomic nervous system.
- Discussion could take place around the link between personality type and stress (type A
 and type B personalities), concepts of 'hardiness' and 'self-efficacy' as well as the '3 Cs'
 present within stress resistant personalities (control, commitment and challenge).
 Learners can carry out on-line assessments to ascertain their personality type (google).
- ◆ Discussion could focus on the different causal factors, or stressors, and these could include external stressors (such as social and environmental factors, eg poverty, discrimination) and internal ones (such as individual perception or life experience). The possible link between external and internal stressors could be highlighted. Life events causing stress (Holmes and Rahe, 1967, Social Readjustment Rating Scale) could be examined. 'Meeting the Stress Challenge' by Thomson, Murphy, Stradling, O'Neill (Dec 1998) could be useful reference.
- Learners could be encouraged to collect newspaper and magazine articles relating to stress and stress management and discuss these in group situations.

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- Brainstorming physical, cognitive, emotional and behavioural symptoms of stress and discussing those that could be most overtly recognised in others might be useful. Asking learners to self-reflect on the symptoms they might have experienced in given situations may help assimilation.
- Providing case studies to promote discussion on ways of coping with the situation could lead to investigations of positive and Negative coping strategies.
- Discussion could begin with learners reflecting on personal strategies for dealing with stress. These could be divided into two broad headings — helpful or healthy techniques or unhelpful or unhealthy ones.
- ♦ Helpful strategies could include increasing self-awareness in relation to stressors and stress reactions, analysing situations, developing appropriate problem solving skills.
- A holistic approach to managing stress could be encouraged and the importance of making lifestyle changes to manage stress more effectively should be examined (smoking cessation, alcohol reduction, diet and exercise).
- Strategies for managing stress in the workplace should also be explored, eg assertiveness training, time-management, delegation and supervision.
- Exercises to decrease the impact of stress could be carried out in class, eg deep breathing, relaxation, visualisation.
- The range of support systems for managing stress both within and outwith the workplace could be investigated. These could include formal support (work based support systems) and informal support (partners, friends, family, colleagues).
- Unhelpful ways of coping with stress should be explored. Examples of these may include alcohol and solvent misuse, avoidance. The importance of maintaining a non-judgemental attitude towards individuals who use unhelpful strategies to cope with stress should also be emphasised.
- Both helpful and unhelpful strategies should be evaluated in terms of their effectiveness and such effects could be considered in the short and long term, eg tranquillisers may be beneficial in the short term but do not actually tackle the causes of stress in the long term.
- Learners could individual or in small groups investigate the stress-relieving benefits of a range of therapeutic modalities and present them to the group.
- ♦ The growing popularity of other alternative therapies could also be explored. These could include yoga, mind, body and spirit publications, meditation. Cultural or global comparisons could be made in relation to stressors and stress management, eg eastern philosophies versus western values.

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Guest speakers from agencies focussing on stress management or practitioners of alternative therapies could be utilised.

Some suggested references:

- ♦ Cox, T (1978) Stress, London, Macmillan
- ♦ Davidson, J (1997) The Complete Idiot's Guide to Managing Stress, New York, Alpha
- ♦ Donnellan, G (ed) (1997) Stress, Cambridge, Independence
- ♦ Looker, T and Gregson, O (1997) Managing Stress, London, Hodder
- ♦ Powell, T (1997) Free Yourself from Harmful Stress, UK, DK Publishing
- ♦ Thompson, N, Murphy, M and Stradling, S (1998) *Meeting the Stress Challenge, London, Russell House*
- Rice, P.L. (1998). Stress and Health. Wadsworth Publishing
- ♦ Cooper, C.L & Dewe, P.J. (2004). Stress: a brief history. Wiley-Blackwell
- International Stress Management Association: http://isma.org.uk/about-stress/factsabout-stress

Outcome 3 and 4 should be conducted within a clinic setting, with learners demonstrating knowledge, confidence and understanding of stress management. Learners should display confident interaction with clients when consulting and providing recommendations and advice.

Prior to assessment, learners should be given opportunities to develop practical skills in consultation, assessment, treatment planning, application of therapy treatments, aftercare and lifestyle advice including the reinforcement of stress management techniques. This may occur through analysis of case studies, simulations and formative assessments with constructive feedback.

Guidance on approaches to assessment of this Unit

Evidence can be generated using different types of assessment. The following are suggestions only. There may be other methods that would be more suitable to learners.

Centres are reminded that prior verification of centre-devised assessments would help to ensure that the national standard is being met. Where learners experience a range of assessment methods, this helps them to develop different skills that should be transferable to work or further and higher education.

Outcomes 1 and 2

Outcomes 1 and 2 should be assessed in the form of an assignment.

Outcomes 3 and 4

Outcomes 3 and 4 should be holistically assessed.

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The learner should consult with and carry out therapy treatment on carry two different clients, each presenting with 'stress'.

A stress management strategy must be developed for each client, which must include three therapy treatments to be carried out on different occasions. The therapy treatments applied must benefit the client and appropriately aid stress management.

It may be possible to integrate the practical assessments of this Unit with another therapy Unit in the Group Award, where that Unit requires therapy to be applied for the purposes of stress relief. If this occurs, it is essential that all Evidence Requirements from both Units are fully achieved and it is evidenced by clear mapping documentation.

Opportunities for e-assessment

E-assessment may be appropriate for some assessments in this Unit. By e-assessment we mean assessment which is supported by Information and Communication Technology (ICT), such as e-testing or the use of e-portfolios or social software. Centres which wish to use e-assessment must ensure that the national standard is applied to all learner evidence and that conditions of assessment as specified in the Evidence Requirements are met, regardless of the mode of gathering evidence. The most up-to-date guidance on the use of e-assessment to support SQA's qualifications is available at www.sqa.org.uk/e-assessment.

Opportunities for developing Core and other essential skills

Aspects of the Core Skill of *Problem Solving*, that is Planning and Organising, Critical Thinking, and Reviewing and Evaluating, can be developed as the Unit is undertaken, particularly when there is integration with assessment for practical treatment activities in related Units. Learners must undertake a detailed analysis of factors relating to stress in different types of client. Identifying and assessing the relevance of all areas impacting on client's behaviour and responses will involve a high level of critical thinking. Justifying and implementing effective management strategies which are derived for each client and allow on-going opportunities for review and evaluation is critical to achievement. Learners may benefit from personal interviews with the tutor to reinforce analytical evaluative approaches to work.

Learners will also have opportunities to develop a sophisticated level of Oral Communication skills. Sensitivity and an empathic understanding of the physical, emotional and cultural needs of clients will support the ability to adapt language and non-verbal communication in order to progress effective communication. Ensuring ways to communicate appropriate complex information to clients, explaining and reassuring during treatment sessions and advising on post treatment needs will be an essential aspect of observed competence. Learners will be required to use and adapt vocabulary, register and style to suit their purpose and clientele, and to be able to respond to in depth questioning both clients and the assessor confidently and accurately. They will be made fully aware of the range of listening techniques in order to relate and respond to others in the most appropriate and effective way.

This Unit has the Core Skill of Problem Solving embedded in it, so when learners achieve this Unit their Core Skills profile will be updated to show that they have achieved Problem Solving at SCQF level 6.			

History of changes to Unit

Version	Description of change	Date
02	Core Skill Problem Solving at SCQF level 6 embedded.	19/08/2016

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General information for learners

Unit title: Complementary Therapies: Stress Management for Clients (SCQF level 8)

This section will help you decide whether this is the Unit for you by explaining what the Unit is about, what you should know or be able to do before you start, what you will need to do during the Unit and opportunities for further learning and employment.

Outcomes 1 and 2 will give you knowledge of issues relating to stress: definitions, causes and effects on individuals and others. It will also give you knowledge of a range of different strategies for managing stress and these are broadly divided into helpful or positive strategies and negative ones.

You will have the opportunity to undertake both individual and group tasks carried out through research and discussion.

You will be assessed by means of an open book assignment whereby you will need to describe different models of stress the causes of stress, or stressors, their effect on individuals and others and explain strategies for stress management.

Outcome 3 and 4

You will use the knowledge gained in Outcomes 1 and 2 to develop a stress management strategy and apply therapeutic treatments to clients who present with stress. This part of the Unit will take place in a clinic setting. Prior to assessment, you will be given opportunities to develop your practical skills in consultation, assessment, treatment planning, application of therapy treatments, aftercare and lifestyle advice including the reinforcement of stress management techniques. This may occur through analysis of case studies, simulations and formative assessments with constructive feedback.

When you are ready to be assessed, you will carry out two case studies on two different clients. The clients should be different in terms of age, gender or lifestyle.

With each client you will carry out a consultation and assessment and then develop a stress management strategy, which should include three therapy treatments to be carried out on different occasions. The therapy treatments could be body massage, traditional head massage, aromatherapy or reflexology, they should benefit the client and appropriately aid stress management. You will evaluate each treatment, the course of treatments and carry out a self-evaluation of your own strengths and limitations in carrying out the stress management strategy. All consultation and assessment documents, client records and evaluations will be part of the assessment evidence you need to submit.

You will be observed by your assessor on a minimum of three occasions, once carrying out a consultation and assessment, and on two other occasions carrying out therapeutic treatments (one on each of your two clients). Your assessor will complete observation checklists to record and provide evidence of your achievements.

Aspects of the Core Skill of *Problem Solving*, that is Planning and Organising, Critical Thinking, and Reviewing and Evaluating, can be developed as the Unit is undertaken, particularly when there is integration with assessment for practical treatment activities in related Units. Learners must undertake a detailed analysis of factors relating to stress in different types of client. Identifying and assessing the relevance of all areas impacting on client's behaviour and responses will involve a high level of critical thinking.

General information for learners (cont)

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Justifying and implementing effective management strategies which are derived for each client and allow on-going opportunities for review and evaluation is critical to achievement. Learners may benefit from personal interviews with the tutor to reinforce analytical evaluative approaches to work.

Learners will also have opportunities to develop a sophisticated level or oral communication skills. Sensitivity and an empathic understanding of the physical, emotional and cultural needs of clients will support the ability to adapt language and non-verbal communication in order to progress effective communication. Ensuring ways to communicate appropriate complex information to clients, explaining and reassuring during treatment sessions and advising on post treatment needs will be an essential aspect of observed competence. Learners will be required to use and adapt vocabulary, register and style to suit their purpose and clientele, and to be able to respond to in depth questioning both clients and the assessor confidently and accurately. They will be made fully aware of the range of listening techniques in order to relate and respond to others in the most appropriate and effective way.

This Unit has the Core Skill of Problem Solving embedded in it, so when you achieve this Unit your Core Skills profile will be updated to show that you have achieved Problem Solving at SCQF level 6.