



Guidelines for IFPA Members Treating Vulnerable Adults and Children

What is a Vulnerable Adult?

The IFPA has adopted the UK department of health's definition of a vulnerable adult as follows - "A vulnerable adult is a person who is aged 18 or over that is or may need community care services because of a disability (mental or other), age or illness and is someone who could be unable to look after themselves or protect themselves from harm or exploitation". IFPA also includes within this category, people with challenging behaviour - <https://www.uhs.nhs.uk/HealthProfessionals/Clinical-law-updates/Whatismeantbyavulnerableadult>

Who is a Vulnerable Adult?

- Someone who is diagnosed to be mentally and/or physically ill.
- Someone who has mental health needs such as dementia or Downs Syndrome.
- Someone who is unable to report abuse and decide for him/herself.
- Someone who is old and frail due to physical disability.

Who is a Vulnerable Child?

A vulnerable child may include some of the above, but one who may also have been affected by socio-economic factors such as poverty, abuse, or neglect.

Safeguarding Adults

The UK Care Act 2014 places a general duty on local authorities to promote the wellbeing of individuals when carrying out care and support functions.

The definition of wellbeing includes:

- Personal dignity including treating individuals with respect.
- Physical and mental health and emotional wellbeing.
- Protection from abuse and neglect.
- Control by the individual over day-to-day life.
- Participation in work, education, training, or recreation.
- Social and economic wellbeing.
- Domestic, family, and personal relationships.
- Suitability of living accommodation.
- The individual's contribution to society.

(Department of Health, 2014)

<https://www.scie.org.uk/key-social-care-legislation/safeguarding-adults>

A 'relationship of care' exists where one person has a mental disorder (or is vulnerable) and another person provides care. It applies to people working both on a paid and an unpaid basis and includes:

- doctors
- nurses

- care workers in homes
- workers providing services in clinics or hospitals
- volunteers
- aromatherapists may be part of the volunteer group (whether paid or unpaid).

The Safeguarding Vulnerable Groups Act (SVGA) 2006 was passed to help avoid harm, or risk of harm, by preventing people who are deemed unsuitable to work with children and vulnerable adults from gaining access to them through their work. The Independent Safeguarding Authority was established as a result of this Act. On 1st December 2012 the Criminal Records Bureau and Independent Safeguarding Authority merged to become the Disclosure and Barring Service (DBS). <https://www.gov.uk/government/organisations/disclosure-and-barring-service/about> A disclosure team carries out DBS checks (previously known as CRB checks) that result in certificates being issued to an individual. Employers can then ask to see this certificate to ensure that they are recruiting suitable people into their organisation. There are four levels of check:

1. Basic check.
2. Standard check.
3. Enhanced check.
4. Enhanced check with barred list(s).

Aromatherapists can apply for the basic check. If working for an organisation, then an enhanced check may be required.

Offering treatments from a legal perspective – the following must be observed -

- Signed informed consent and agreement from a guardian or care worker is required if the person is unable to make the decision themselves. (If the informed consent is questionable, it is reasonable to contact the parent or guardian to check).
- Insurance must be in place to cover the treatment, your own or provided by your place of work.
- Records must be kept securely for 7 years, according to UK and EU recommendations. Please check in your region.
- If, in the course of treatment, the practitioner has any concerns regarding the person's safety, welfare or well-being, the practitioner must report their concerns to their local authority's Adult Safeguarding Board. Members can find contact details of their local safeguarding board from their local council. If the practitioner has concerns about a vulnerable adult whilst working for another organisation, they must report their concerns to the designated Safeguarding Officer or senior manager at that organisation.
- Under no circumstances is it appropriate for the therapist to question the client/subject regarding abuse - it must be referred on.
- Your consultation form and treatment approach/records will need to be modified to suit the client, but will include:
 - The client's age.
 - A full medical history, including all medication.
 - Required outcome from the treatment.
 - Cognitive function, understanding and context in relation to the treatment they are receiving, e.g. Is this an adult with a physical disability or a person with a mental health condition or are they autistic?
 - Ask the parent, guardian, or care worker for further information about the client to give you a thorough background and understanding of the client and their health.
 - Any other relevant factors.
 - Signature of consent/understanding, from client and/or guardian.

The Aromatic Treatment Approach

- Essential oils should not be used without the express knowledge and approval of the medical/administrative team.
- Essential oils will be adjusted to suit the client.
- Contra-indications to certain essential oils will need to be considered in relation to the clients' physical and mental health and any medication they are taking.
- Minimum and maximum dilution is age and skin integrity appropriate.
- Always patch test any blend you make for a client before application or preparing a home treatment product.
- General diffusion in open areas may not always be appropriate. Smell crosses boundaries so the therapist must check that diffusion is appropriate for this group.
- When offering massage, appreciate that the client may have had very little supportive contact. They may be nervous of undressing or even being touched. Reassure them and explain what you are doing and what you need them to do. Always remember that sometimes a simple hand massage or effleurage through the clothes whilst diffusing essential oils may be enough.
- A parent or guardian must be present for the full treatment of a child, and they must give permission for the treatment.
- Everything must be documented - recipes, client response, outcomes, etc.
- If the vulnerable adult is being cared for by a team, your records may form part of their overall care package. Before you begin, make sure you are using the type of records required by that institute.

Recommendations for personal safety

If you are working with vulnerable adults and children who have physical disabilities, please ensure you have the correct manual handling training.

If you are working with vulnerable adults or children who have mental health issues where there is the possibility of violence towards the therapist, please ensure you have the proper training.

Further information regarding working with vulnerable adults is available on the featured links.

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Created August 2021.

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