

## Aromatherapy Intervention Protocol



**Mindful Leisure:** Aromatherapy

**General Purpose:** To help clients stay mindful and present by focusing on sensations and feelings that arise and/or change through the use of aromatherapy.

**Program Description:** Utilizing essential oils in a variety of ways to help produce positive changes; used alone or complementary with other interventions like meditation, yoga, and massage. Clients can use aromatherapy alone or in a group setting by using a diffuser, putting it directly onto their skin, smelling directly from the bottle, putting oils in a bath, or utilizing oils in a massage.

**Client Problems that may be Addressed:** Aromatherapy has been known to help decrease symptoms of insomnia, arthritis, anxiety, (Price, 1998), decrease depression (Lee, 2003), decrease headaches, reduce agitation in patients with dementia, reduce pain, and decrease symptoms of nausea (Robins, 1999).

**Contraindicated Criteria:** Some clients may have allergies to certain oils, and may not be able to engage in this intervention. Moreover, diffusers should not be used in a hospital setting due to aromas being released in indiscriminate ways.

**Intervention Activity:** Explain what aromatherapy is and what research backs of its use as a complementary therapy. Provide clients with a handout explaining how to use aromatherapy in their lives and the benefits of a variety of different essential oils. Allow clients to smell different essential oils while the TRS explains the benefits, then provide each client with a cotton ball and put 1-2 drops of the oil of the client's choice on it. Next engage in a relaxation exercise including Progressive Muscle Relaxation, guided imagery, or/and meditation. Following the activity, have each client go around the group and discuss their experience with aromatherapy and how they feel they can implement this practice in their lives.

**Staff Training and Certification Requirements:** Each staff member should be certified and licensed (if applicable) as a certified therapeutic recreation specialist (CTRS) and be required to maintain his or her licensure and certification. Moreover, each staff member should be trained and educated in implementing an aromatherapy intervention; understanding the benefits and/or risks that are involved in using aromatherapy as an intervention.

**Risk Management Considerations:** Choose aromas with known low risk and/or allergy potential. Choose an oil manufacturer with high quality of oils. Obtain consent for using aromatherapy as an intervention. Be aware of any client allergies. Do not apply oils directly on skin to avoid any irritating reactions. Remain in your scope of practice when implementing aromatherapy (i.e. avoid doing massage therapy on clients unless licensed as a massage

therapist). Utilize MSDS (Material Safety Data Sheets) to understand and implement safety precautions and proper storage.

**Anticipated Outcomes:** Clients will understand the benefits and uses of aromatherapy to assist in promoting positive changes complementary to and/or in addition to other interventions.

**Program Evaluation:** Staff will ask clients about their experience with aromatherapy and how they felt before and after the interventions indentifying validity of the use of aromatherapy as an appropriate intervention.

### **Research Support:**

Lee, C. (2003). Clinical aromatherapy part II: Safe guidelines for integration into clinical practice. *Clinical Journal of Oncology Nursing*, 7(5), 597-598.

Price, S. (1998). Using essential oils in professional practice. *Complementary Therapies in Nursing & Midwifery*, 4, 144-147.

Wheeler Robins, J.L. (1999). The science and art of aromatherapy. *Journal of Holistic Nursing*, 17(5), 5-17.