

CORE CURRICULUM FOR CRANIOSACRAL THERAPY

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Introduction

1.	The content of this core curriculum provides a minimum standard for safe and competent practice to carry out Craniosacral Therapy. It incorporates the National Occupational Standards (NOS) for Craniosacral Therapy – CNH1, CNH2 and CNH6. Copies of CNH1 and CNH2 are attached as Appendix A to this document, with the wording of the overviews only included in section 2A and 2B below. The full details of CNH6 are set out in section 2C below.			
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.		It will be the responsibility of those Professional Associations who verify applications for CNHC registration to:		
	a) b)	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 minimum basis for the design and delivery of courses accept that accountability for accrediting courses and verifying applications for CNHC registration lies with the Professional Associations.		

1 OVERALL AIMS OF THE COURSE

To ensure that those who complete the course are safe and competent to practice Craniosacral Therapy 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 included 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 included in Appendix A)

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 CNH6 Provide Cranial Therapies to clients Overview

This standard is about providing cranial therapies to clients. Cranial Therapies are a closely related group of light-touch therapies which have their origin in osteopathy. They share an appreciation of the central importance of the dura, their contents and closely associated organs, known as the craniosacral system.

Cranial Therapies are hands-on therapeutic approaches for normalising the functioning of the craniosacral mechanism and reflected imbalances in the body tissues. They are processes of evaluation and treatment that encourage the expression of health in the whole system. The processes respect and reflect the ultimate power and authority of clients and their innate self-healing mechanisms.

In a typical session the individual will usually lie (or sometimes sit) clothed on a treatment couch. The therapist will make contact carefully by placing their hands lightly on the individual's body and tuning in to what is happening by 'listening' with their hands.

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

Knowledge and understanding				
Students	Students will need to know and understand:			
1.	the history, principles and development of cranial therapies and their relationships to			
	other healthcare (the theoretical foundations and historical perspectives of cranial			
	therapies)			
2.	the concept of health, effective functioning and well-being that is consistent with the practice, principles and theory underlying cranial therapies			
3.	the wa	e way in which cranial therapies share the following essential elements:		
	a the creation of a safe healing environment			
	b	palpation of cranial rhythms		
	С	gentleness		
	d	intuitive listening		
e applying intention by the practitioner				

	f	client led approach		
	g	specific techniques for engaging the craniosacral system		
4.				
	а	palpatory skills		
	b observation c listening			
	d intuitive perceptual skills			
	e combination of the above			
5.	how to recognise those occasions when cranial therapies may complement or be			
	complemented by other healthcare			
6.	the ci	rcumstances in which you may choose not to accept or continue treating a client:		
	а	when Cranial Therapy is unlikely to be effective		
	b	the client does not want Cranial Therapy		
	С	you do not wish to provide Cranial Therapy		
	d	the client is under the influence of recreational drugs and/or alcohol		
	е	the client is suffering from severe mental illness		
	f the client is suffering from a contagious disease			
	g	you do not have the requisite experience or expertise e.g. appropriate training is required before a practitioner treats babies and young children		
7.	how t	how to determine the most appropriate approach for each client		
8.	how t	how to judge whether self-care procedure(s) is/are appropriate for the client		
9.	indica	rcumstances when specific techniques used within cranial therapy may be contra- ited or in which the practitioner should ask him/her self if their training and ience adequately fit him/her to treat the patient, such as:		
	а	any situation where it is undesirable to change intracranial pressure		
		any situation where there is constant, unremitting, unexplained pain		
	С	treating pregnant women		
	d	treating babies and young children		
	е	treating clients who have had recent surgery,		
	f	treating clients who have serious illness		
10.		ocedures for referral on to other practitioners and/or services		
11.	the treatment options available to a cranial therapy practitioner and how they should be			
	implemented			
12.	how to locate and recognise areas of functional imbalance and/or resistance, and			
	facilitating the client's innate self-healing ability			
13.		o palpate the different rhythms of the cranial system		
14.	the client's potential to achieve health within their cranial system			
15.	how to facilitate therapeutic stillness			

16.	how to facilitate the integration of therapeutic changes which may have occurred during				
17	how to identify and work with the following responses to the treatment:				
17.					
	a	physical			
	b	emotional			
	С	psychological			
40	d	spiritual			
18.	how to respond to the physiological presentation of shock, emotional and/or physical				
40	trauma during the treatment				
19.	how to recognise the completion of an individual's therapeutic process and leave them				
00	_	ded and balanced			
20.		otential outcomes of cranial therapies:			
	a	resolution of the problem			
	b	increase in well-being			
	C	supporting the client in their process			
	d	healing reactions			
	е	abreactions			
	f	no change			
21.	how to evaluate the outcomes and effectiveness of cranial therapies				
22.	cranial sutures and cranial bony structures, including facial structures				
23.	physiological and dysfunctional patterns in the qualities of the tissue and fluid systems				
24.	the central nervous system, cranial nerves and autonomic nervous system				
25.	whole body dynamics, including fascia, membranes, joints and movements				
26.	_	crum in terms of how it functions in the craniosacral system			
27.	the viscera in terms of how they function in the craniosacral system				
28.					
	cerebrospinal fluid				
29.	the ps	sycho-neuro-immuno-endocrine mechanisms and relationships			
30.	embryology and the birth process				
31.	the de	evelopmental processes of infants			
32.	the human energetic fields				
33.	the structure and function of the following:				
	а	skeletal system			
	b	muscular system			
	С	the skin			
	d	circulatory system			
	е	lymphatic system			
	f neurological system				

		q	endocrine and immune systems		
		h	respiratory system		
		i	digestive system		
		i	urinary system		
		k	reproductive system		
		K I	,		
		<u> </u>	fascial system		
Doref		m ance c i	inter-relationships of and interactions between all of the above		
	ents		be able to do the following:		
1.			ct an assessment and plan the cranial therapy		
2.			that the environment meets the client's needs		
3.			e that any equipment and materials are suitable for use		
4.			on the client for effective cranial therapy and to give as much comfort as possible		
5.			ment the cranial therapy safely and correctly in accordance with professional		
		codes of practice, legal and organisational requirements			
6.		make appropriate adjustments to the cranial therapy to meet any changing needs			
7.		deal effectively with the client's response to the cranial therapy			
8.		check the client's well-being throughout and give reassurance where needed			
9.	provide clear and accurate advice with regard to any relevant aftercare and self-care				
10.			evaluate the outcomes and effectiveness of the cranial therapy to inform future plans and actions		
11.		complete and maintain records in accordance with professional and legal			
		-	requirements		
3 OV	/FR	ΔII RΔ	TIO OF THEORY AND PRACTICE		
3.1	50:		THE OF THE ORT AND TRACTICE		
5.1	30.	30			
4 AS	SES	SSOR A	AND INTERNAL QUALITY ASSURANCE REQUIREMENTS		
4.1			to be qualified in CST to diploma level and have a minimum of 3 years teaching		
	experience at a recognized CST college or equivalent. At least one assessor should be a				
	individual who has not directly taught the material the student is being tested on.				
		····auai	The flat flot and the agricultural flat and the character to being tested of the		
5 THE EQUIVALENT MINIMUM LEVEL AT WHICH QUALIFICATIONS LEADING TO CNHC					
REGISTRATION MUST BE ACHIEVED AGAINST THE REGULATED QUALIFICATION					
FRAMEWORK					
5.1		/el 4			
5.1	L LE	/CI 4			

6 HOURS OF STUDY

- 6.1 Total Qualification Time A minimum of 700 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 Guided Learning. **450 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 Supervision</u>. The guidance or supervision provided by lecturer, supervisor, tutor or other appropriate provider of education or training
 - a) with the simultaneous physical presence of the Learner and the lecturer, tutor or
 - b) remotely by means of simultaneous electronic communication

300 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 hours of Guided Learning.

7 CREDIT VALUE

7.1 One credit must be equal to one tenth of the Total Qualification Time, rounded to the nearest whole number,)

8 CASE STUDY REQUIREMENTS

8.1 A minimum of 3 home study case studies to be conducted and submitted for assessment.

Additional minimum of 6 days attendance, or equivalent, at teaching clinics, under the direct supervision of a registered tutor.

9 DETAILS OF THE ASSESSMENT PROCESS

9.1 | Case studies as above **plus**

Prior or concurrent training in human anatomy, physiology and pathology. Submission and marking, with feedback, of one homework per core topic Written and oral feedback following each practical teaching session. Submission of written case study notes that include: intake form/interview, proposed treatment outline/plan, session notes with reflections on approach and response Written examination

Practical examination

9.2 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.			
9.3	In addition – Practical Assessment of skills			
	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.		
9.4	Optio	onal		
	a)	Reflective diary of practical sessions completed with other students during training		
	b)			
9.5.	Summative Assessment			
	The summative assessment must include the written work, in addition to practical work.			
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 IT				
	The APEL process would be the responsibility of professional associations who verify applications for CNHC registration from Craniosacral Therapy 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: Suitable grounding in Human Anatomy, Physiology and Pathology

Suitable grounding in Anatomy of the Craniosacral System

Knowledge of the history of craniosacral therapy

Knowledge of the theoretical foundations of the practice

Competence in the application of structural and functional approaches to working with the craniosacral system (presence, inertia, holds, etc.)

Competence in therapeutic skills applicable to work with babies, children and adults Practice management skills

Appendix A

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
- 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

CNH1 Explore and establish the client's needs for complementary and natural healthcare Final version approved June 2010 © copyright Skills For Health





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

CNH2 Develop and agree plans for complementary and natural healthcare with clients Final version approved June 2010 © copyright Skills For Health

Activities that count towards Guided Learning Hours (GLH) and Directed Learning Hours within the Total Qualification Time (TQT)

The following table provides examples of what activities count towards hours of Guided Learning and Directed Learning:

Type of Activity	Guided Learning	Directed Learning
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	×	√
Classroom based induction to a qualification	✓	×
Skills practice carried out in simulated conditions where the learner is observed and assessed at the same time as the simulation is taking place	✓	×
Simultaneous electronic meetings with the lecturer, supervisor or tutor, eg. Skype or live webinars	✓	×
Watching a pre-recorded podcast or webinar, or listening to a recorded tutorial	×	√
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 eg Case Studies	×	√
E-assessment where the learner has their knowledge and understanding assessed unsupervised where they can access online e-assessment at any time	×	✓
E-assessment where the learner is supervised by the lecturer, supervisor or tutor in real time	✓	×