

CORE CURRICULUM

FOR HEALING

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Changes December 2024

Section 6.4 the minimum duration of training has been added

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Introduction

(ii)

1. Healing is a natural phenomenon that has been documented from ancient times and as such has collected various discourses around its nature and purpose. There is minimal research around it at present, mostly indicating the facilitation of a relaxation response. There is also much anecdotal evidence suggesting that Healing can bring about a change towards well-being in the individuals involved and at times give rise to a sense of peace and stillness. For some people this is experienced as a connection to the spiritual or trans-personal. 2. This Core Curriculum applies to Healing work which falls into this category and is not applicable to any modalities of Healing that make claims as to a specific outcome and purpose which cannot be substantiated by a reliable, identifiable and authentic source or 3. The content of this curriculum provides a minimum standard for safe and competent practice. It reflects and incorporates the National Occupational Standards (NOS) for Healing – CNH1, CNH2 and CNH25. Copies of CNH1 and CNH2 are attached as an Appendix to this document, with the wording of the overviews only included in sections 2A and 2B below. The full details of CNH25 are set out in section 2C below. In order to broaden the potential for working in a variety of settings, for clarity and to accommodate a broad model of Healing, we have added some wording to CNH25, as indicated in red text for ease of reference. 4. 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). Although the outcomes have to be achieved, our intention is not to be too prescriptive 5. about their interpretation, as long as it lies within the boundaries set out in paragraph1. We hope the Curriculum will form a template which is sufficient in itself but which leaves room for expansion by individual organisations if so desired and is inclusive of various Healing modalities. It should act as a bench mark for good practice. It will be the responsibility of CNHC Verifying Organisations to: 6. ensure that the Core Curriculum is circulated to all training providers with a) whom they have a working relationship, so that it can be used as the basis for the design and delivery of their courses accept that accountability for accrediting courses and verifying applications for CNHC registration lies with the relevant CNHC Verifying Organisation b) 1 OVERALL AIMS OF THE COURSE This core curriculum aims to set out an educational framework which will ensure that at the point of successful course completion, individuals are safe and (i) competent to practise Healing 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 Overview

empower the student Healer to develop reflective skills and personal insight.

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 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 CNH25 Provide Healing to clients

Overview

This standard is about providing Healing as a complementary therapy. The practice of Healing is non-invasive and is used holistically for the body, mind and spirit.

Healing involves the transmission/facilitation of a natural healing energy that works on every level, not just the physical, and is believed to promote the body's regenerative self- healing ability.

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

Knowledge and understanding

Students will need to know and understand:

The historical context of healing; definitions of healing; an awareness of healing in relation to research; an awareness of different models of healing.

	,	· diranence en anneren medele en medinig.	
1	the nature of healing – the part played by healers in the healing process:		
	1.1	healing energy and its source	
	1.2	holistic healing – body, mind and spirit	
	1.3	levels of existence and spirituality	
	1.4	healing the whole person	
	1.5	the healer as a channel/facilitator/conduit for healing energy flow	
	1.6	the healer's individual contribution	
	1.7	the energetic systems and their involvement in the healing process	
2	the le	gal framework in which healers must operate:	
	2.1	legislation affecting healing and healers	
	2.2	legislation and responsibilities relating to vulnerable groups and animals	
	2.3	position of trust/duty of care	
	2.4	legislation and government policies relating to consent	
	2.5	legislation relating to commercial practice (eg health and safety)	
3	the healer/client relationship:		
	3.1	respect for the client's dignity, privacy, autonomy, cultural differences, rights and	
		beliefs	
		Treating all clients equally and without discrimination. The importance of not	
		imposing the Healer's beliefs on the client. Avoiding development of dependency	
		and maintaining professional boundaries.	
	3.2	the need to maintain confidentiality (subject to legislation)	
	3.3	healing as a complementary therapy	

	3.4	effective communication skills and an understanding of empathy and empathic				
		responses, while establishing professional boundaries				
	3.5	the importance of not diagnosing or offering to cure				
	3.6	the nature of the service(s) provided				
	3.7	the contractual relationships between healer, client and others				
	3.8	informed and implied consent Consent issues with regard to: mental capacity;				
4	the re	children; young adults under the age of legal consent				
4		elationship with all other healthcare professionals:				
	4.1	appearance and behavior when visiting clients in hospital and other medical and care establishments				
	4.2	awareness of the appropriate approach required with other healthcare				
		professionals				
5		ower of thought and the importance of intent and their relationship to healing				
		ation, meditation and self-awareness in the development of the healer's own				
6		itial: Spiritual exploration of methods to develop self-awareness and the Healer's own				
	poten 6.1					
	6.2	breathing techniques meditation				
	6.3	maintaining the healer's own wellbeing				
	6.4	personal development				
	6.5	personal standards to reflect the professional approach to Healing work				
7	centri	nature and importance of attunement: methods of attunement, focusing, intention and				
	7.1	the possible sources of the healing energy				
	7.2	the route the healing energy takes				
	7.3	how to develop and improve the healer's own methods and ability				
	7.4	how to recognise any consequences of attunement				
8	healir	aling preparation:				
	8.1	how to recognise the presence of healing energy				
	8.2	any effect the process may have on the healer The purpose, functions and methods				
		of grounding, centring and protection				
	8.3	how to sense the subtle energies				
	8.4	ways of recognizing that healing energies are flowing				
9		ng with the client present:				
	9.1	the healing environment				
	9.2	how to prepare the client to receive healing – what to say and what not to say				
	9.3	the healing act – what to do and what not to do				
	9.4	healing styles – good practice				
	9.5	healing options – hands on or off the body, seated or lying				
	9.6	how to conclude the healing act				
40	9.7	how to elicit and respond to feedback from the client				
10		nt (or absent) healing:				
	10.1	the healing environment				
		how to prepare the client to receive distant healing				
	10.3	the healing act – what to do and what not to do				
		how to conclude the healing act				
11	10.5	how to elicit and respond to feedback from the client				
11	now t	o deal with situations that might arise prior to, during and after a healing session:				

	11.1	when the healer is insufficiently experienced or a medical referral is essential	
	11.2	when a healer or client should seek advice from other sources, including healthcare	
		professionals or other therapists. How to recognise those occasions when Healing	
		may complement other health care which the client is receiving and when it may	
		not be appropriate or helpful. Contra-indications to Healing or areas of concern	
		include: pace makers; diabetes; epilepsy; mental health issues; effects of	
		medication or medical treatments.	
	11.3	•	
	11.4	-	
	11.5	how to deal with special requests from clients	
12			
		ons relating to the physical body (including circulatory/digestive	
		ous/muscular/skeletal/main organs) and how they work in unison.	
		sic understanding of the stress response and the connection between its	
D (no/spiritual/emotional and physical impact.	
		ce Criteria e able to do the following:	
1		e that the healing environment and any equipment and materials meet professional	
•		s of practice and legal requirements including health and safety. Apply the principles	
		od hygiene and infection control.	
2		ent a professional appearance and be prepared and fit to carry out the healing	
		aration of self, both practically and professionally (eg appearance, personal hygiene)	
		n terms of focus and Healing Techniques	
3		in to the client what may happen during and after healing Ensure they are aware	
		can interrupt and stop the Healing session at any time.	
4		n the appropriate consent and record and evidence this consent, whether written or	
	oral.		
5		on the client for effective healing and to minimise risk of injury to, and give as much	
		ort as possible to, the client and self	
6		ure the client and encourage them to relax and interact as appropriate	
7		out the healing safely and with compassion and in the agreed manner	
8		appropriate adjustments to the healing to meet the client's changing needs	
9		effectively with responses to the healing	
10		the client's wellbeing throughout the healing and give reassurance where needed	
11		ude the healing session appropriately and ensure the client is fit to travel	
12		n feedback on the outcome of the healing in a manner, level and pace suited to the	
13	offer	clear, accurate and appropriate aftercare advice and support to the client	
14	1	d the outcomes of the healing accurately and in sufficient detail to evaluate efficacy	
17		o meet professional and legal requirements	
	and t	o meet professional and legal requirements	
3 OV	ERALL	RATIO OF THEORY AND PRACTICE	
3.1	50%	theory; 50% practice (practice in this sense incorporates all aspects of Healing,	
	includ	ling relaxation, self awareness, personal development, professional issues and	
	reflec	tion, communication skills etc alongside actual practice of the Healing act)	
		OR AND INTERNAL QUALITY ASSURANCE REQUIREMENTS FOR THE	
		D QUALIFICATIONS FRAMEWORK (RQF) COMPETENCE QUALIFICATIONS	
4.1	Not a	pplicable for the healing sector because there are no regulated qualifications	

5 THE MINIMUM (OR EQUIVALENT) LEVEL AT WHICH QUALIFICATIONS LEADING TO CNHC REGISTRATION MUST BE ACHIEVED AGAINST THE REGULATED QUALIFICATIONS FRAMEWORK, THE SCOTTISH CREDIT AND QUALIFICATIONS FRAMEWORK OR THE FURTHER AND HIGHER EDUCATION FRAMEWORK (AS APPROPRIATE)

- 5.1 The equivalent minimum level for Healing qualifications is as follows
 - Level 3 in the Regulated Qualifications Framework for England, Wales and Northern Ireland
 - Level 5 in the National Framework of Qualifications for Ireland
 - Level 6 in the Scottish Credit and Qualifications Framework

6 HOURS OF STUDY AND MINIMUM DURATION OF TRAINING PERIOD

- 6.1 <u>Total Qualification Time</u>. A minimum of 200 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.
 - (i) the number of hours of Guided Learning
 - (ii) an estimate of the number of hours a Learner will reasonably be likely to spend in preparation, study or any other form of participation in education or training, including assessment, which takes place as directed by but unlike Guided Learning, not under the Immediate Guidance or Supervision of a lecturer, supervisor, tutor or other appropriate provider of education or training.
- 6.2 <u>Guided Learning</u>. **100 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</u> <u>Guidance or 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
 - (i) with the simultaneous physical presence of the Learner and the lecturer,
 - (ii) supervisor or tutor, or

remotely by means of simultaneous electronic communication

A minimum of 16 hours of supervised practice with the simultaneous physical presence of the Learner and the tutor or supervisor must be included in the 100 hours of Guided Learning. Practice is again defined as encompassing all aspects of healing and associated reflection, self awareness, professional issues etc in addition to the act itself.

It does not imply 16 hours of hands on Healing.

6.4 The minimum duration of the training period is 2 years

7 CREDIT VALUE

7.1 20 credits at the equivalent of Certificate level in the Regulated Qualifications Framework.

8 CASE STUDY REQUIREMENTS

- 8.1 A minimum of three case studies must be completed. Each should consist of a minimum of three sessions and must be supported by a client testimonial. The written up case studies must provide evidence of
 - a) reflective practice
 - b) the healing process i.e. the act of Healing, how it is experienced by the healer (reflection) and how this fits with the theoretical basis of Healing
 - c) care of the client and self, inclusive of professional issues such as consent, environment etc

9 DETAILS OF THE ASSESSMENT PROCESS.

This must include independent assessment ie the person undertaking the summative assessment should not have taught or assessed the learner, but must be occupationally competent. The learning outcomes can be assessed in a wide variety of ways and sometimes in different ways for the same cohort e.g. One person may favour a viva voce, another may give a Power Point presentation and another may complete an online test which self-marks for example, which all assess the same learning outcomes.

test w	/hich s	<u>elf-m</u> a	irks for example, which all assess the same learning outcomes.			
9.1	Case studies as above plus one of the following					
	a)	prov	itten assignment or project on a topic related to healing. The title can be ided by the training establishment or negotiated between student and tutor. gested word count: minimum 1,000 maximum 2,500. or			
	b)		An expanded case study. Can be an expanded version of one already submitted.			
	c)		ord count as above. or ultiple Choice worksheet assignments, which also include the opportunity for			
	d)		lective responses. or			
		Spec	cific assignments completed throughout the course.			
9.2	docur havin comp	above should all evidence clear understanding of learning outcomes outlined in this ument. Assessment should be by the tutor with a sample of the overall submissions ng been additionally assessed by an independent assessor who is occupationally petent. Organisations must be able to provide evidence of this if required.				
9.3	In ad	dition	- Practical Assessment of skills			
	(a)		ngoing (i.e. during teaching sessions) observation as to practice, application			
	(b)		suitability. I Practical Assessment should be by a minimum of one independent assessor			
	` '	who	who is occupationally competent (two are recommended).			
9.4	Optio					
		omission of a portfolio or a log book of Healing given and including reading and litional study days etc.				
9.5.		mative Assessment				
			summative assessment must include the written work, in addition to practical work.			
9.6		essors				
			nts must be as follows			
	a)		written work			
			Course Tutor assesses all written work. In addition, a sample of completed			
			en work must be assessed and agreed as adequate by			
		(i)	another Tutor who has not been involved in the training and who is occupationally competent and can evidence that this is the case or			
			occupationally competent and can evidence that this is the case of			
		(ii)	an experienced, qualified Healer, who has not been involved with the training or mentoring of the student Healer being assessed and who is occupationally			
		` '	an experienced, qualified Healer, who has not been involved with the training or mentoring of the student Healer being assessed and who is occupationally competent and can evidence that this is the case.			
	b)	For F	an experienced, qualified Healer, who has not been involved with the training or mentoring of the student Healer being assessed and who is occupationally competent and can evidence that this is the case. Practical Skills			
	b)	For F	an experienced, qualified Healer, who has not been involved with the training or mentoring of the student Healer being assessed and who is occupationally competent and can evidence that this is the case. Practical Skills s assessment must be by at least one independent assessor who is			
	b)	For F	an experienced, qualified Healer, who has not been involved with the training or mentoring of the student Healer being assessed and who is occupationally competent and can evidence that this is the case. Practical Skills			

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 THE PROCESS

10.1	All applicants must have completed three years in practise as a Healer and will be required to supply the following information to a Professional Association that is a CNHC Verifying Organisation for Healing. If the Healer is not a member of a relevant Professional Association, the CNHC Profession Specific Board for Healing will consider					
	the information.					
10.2	Part One					
	(i) How would you define Healing?					
	(ii) How would you define Healing to a client?					
	(iii)	How do you look after your own health and well-being?				
	(iv) List the legislation that is relevant to Healers?					
	(v) Describe what you understand by professional behaviour?					
	(vi)	Please list events, courses and workshops you have attended in the last three years in order to show your Continuous Professional Development.				
	(vii)	Describe how you develop and nurture your self-awareness and connection to				
	(vii) Describe how you develop and nurture your self-awareness and connection to Healing?					
10.3	Part					
	(i) Please list qualifications, including where received no. of hours study per course					
	(.)	and dates taken. Please include photocopies; (not the original) of certificates of				
		attendance or certificates demonstrating courses and qualifications undertaken.				
	(ii)	Please list events, courses and workshops you have attended in the last three				
	(")	years in order to show your Continuous Professional Development and /or				
		describe how you have nurtured and developed your knowledge of Healing.				
10.4						
10.4	Please provide a recent client case study. You may describe one or more session					
	your evaluation must demonstrate your understanding of the professional standards ar					
	educational outcomes associated with Healing and in accordance to the CNHC					
	description of Healing. It should comprise no more than 2000 words and reflect the					
10.5	outcomes outlined in the Healing Core curriculum.					
10.5	Part Four What would you do in the following situations?					
	(i)	If a client expected you to cure a particular condition.				
	(ii)	If someone asked for Healing but was under the influence of mind altering				
	(11)	substances including alcohol and prescription drugs.				
	(iii)	If you were made to feel vulnerable or uncomfortable.				
	` '					
	(iv)	If an issue relating to vulnerable adults or children arose e.g. emotional, physical,				
	(,,)	sexual abuse or other criminal activity.				
40.0	(v)	If you were not certain of a client's mental capacity.				
10.6	Part I					
40.7		ain and illustrate what you understand by the phrase 'vulnerable persons'.				
10.7	Part S					
	Please add here any further information you would like to submit in support of your					
	statement.					





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 ongoing 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

- 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
- 9. 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 condition 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 procedures 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
- 17. The claims for your discipline that can be made in your advertising including on social media.

18. The current legislative requirements, regulations, codes of practice and guidance applicable to your practice.

PERFORMANCE CRITERIA

- 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
- 11. comply with current legislative requirements, regulations, codes of practice and guidance applicable to your practice

ADDITIONAL INFORMATION

CNHC Advertising Guidance: https://www.cnhc.org.uk/uploads/asset/file/34/Advertising-guidance.pdf

CNHC Guidance on the Cancer Act 1939:

https://www.cnhc.org.uk/uploads/asset/file/277/CNHC_Guidance_on_The_Cancer_Act_1 939.pdf



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

What Activities Count Towards Guided Learning Hours (GLH) and Total Qualification Time (TQT)?

The following table provides examples of what activities count towards both GL (hours) and TQT:

Type of Activity	GL (hours)	TQT
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 as required in the specification	✓	✓
Skills practice at place of learning or workplace where the learner is responsible for generating their own evidence of practice, eg. a statement confirming attendance from a suitable attendant adult, generally not the lecturer or tutor	×	✓
Skills practice carried out in simulated conditions where the learner is observed and assessed at the same time as the simulation is taking place	✓	✓
Face to face meetings with the lecturer, supervisor or tutor or other prearranged teaching session, eg. telephone/webcam contact, internet messaging, ie. conversation in real time	*	✓
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	×	✓
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	✓	✓
Watching a pre-recorded podcast or webinar	×	✓