

CORE CURRICULUM

FOR REIKI

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Introduction

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|----|--|----|--|----|---|
| 1. | The content of this core curriculum provides a minimum standard for safe and competent practice. It incorporates the National Occupational Standards (NOS) for Reiki – CNH1, CNH2 and CNH12. Copies of CNH1 and CNH2 are attached as Appendix 1 to this document, with the wording of the overviews only included in section 2A and 2B below. The full details of CNH12 are set out in section 2C below. In order to broaden the potential for working in a variety of settings and to accommodate a broad model of Reiki, we have added/expanded some criteria in CNH12, as indicated in red text for ease of reference. | | | | |
| 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. | Although the outcomes have to be achieved, our intention is not to be too prescriptive about their interpretation, as long as it lies within the boundaries set out in paragraph 1. Although a minimum standard only 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 Reiki modalities. | | | | |
| 4. | It will be the responsibility of those Professional Associations who verify applications for CNHC registration to: | | | | |
| | <table border="0"> <tr> <td>a)</td><td>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 basis for the design and delivery of their courses</td></tr> <tr> <td>b)</td><td>accept that accountability for accrediting courses and verifying applications for CNHC registration lies with the Professional Association.</td></tr> </table> | a) | 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 basis for the design and delivery of their courses | b) | accept that accountability for accrediting courses and verifying applications for CNHC registration lies with the Professional Association. |
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1 OVERALL AIMS OF THE COURSE

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| (i) | To ensure that those who complete the course are safe and competent to practise Reiki as autonomous healthcare practitioners. |
| (ii) | Establish levels of practice, learning and professionalism which will educate Reiki students to work as professional practitioners in all settings i.e. private practice, in organisations and care homes including NHS establishments. |
| (iii) | Empower Reiki students to develop through personal growth, self development and reflection. |
| (iv) | Be used to determine eligibility to apply for CNHC registration. |

2 LEARNING OUTCOMES AND COMPETENCIES TO BE ACHIEVED

2A 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.

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 CNH12 Provide Reiki to clients

Overview

The practice of Reiki is an original method of healing developed by Mikao Usui in Japan early in the 20th century. Reiki is a natural healing energy that works on every level, not just the physical, and is understood to promote the body's regenerative self-healing ability.

This standard is about providing Reiki **treatment** to clients. Reiki **treatment** is non-invasive and is used holistically to restore balance in mind, body and spirit.

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:

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| 1 | the concept of physical, emotional, mental and spiritual health and wellbeing that is consistent with the practice, principles and theory underlying Reiki |
| 2 | the history and development of the Reiki styles practised |
| 3 | the reasons for having received person to person attunement/initiation/reiju for Reiki prior to practising in a professional context |
| 4 | the principles behind Reiki systems (the context) and Reiki energy (the flow) |
| 5 | the importance of the practitioner using self-treatment |
| 6 | how to carry out the Reiki treatment according to style, systems and teachings |
| 7 | how to choose the most appropriate 'way' to meet the needs of the client |
| 8 | the teacher's lineage to Mikao Usui |
| 9 | the range of possible recipients for the Reiki style (eg animals/humans/plants) and any restrictions to practise (eg veterinary/legal) |
| 10 | the relationship of Reiki treatment to other healthcare practices |
| 11 | that there are no known contra-indications to Reiki treatment when used on its own |
| 12 | the types of Reiki practice: |
| | a hands on the body |
| | b hands near the body |
| | c from a distance |
| 13 | the importance of explaining Reiki treatment to the client |
| 14 | The factors to explore with the client including: |

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| | a) | history of the client's health, effective functioning and physical, emotional, mental and spiritual wellbeing including any particular conditions and treatments |
| | b) | how the client perceives Reiki to fit in with his/her personal goals |
| 15 | | the role which the client (and others) may take, and may need to take, if the Reiki treatment is to be beneficial and how to explain and agree them with the client (and any companion) |
| 16 | | how to support the client to make informed choices |
| 17 | | the importance of agreeing the location and timing of Reiki treatment with the client, and the factors which may intervene and alter plans |
| 18 | | how to acknowledge conditions for which Reiki treatment may be incomplete in itself and for which the client should seek advice from other sources |
| 19 | | the circumstances when the Practitioner may choose not to accept a client: |
| | a) | the client does not want Reiki |
| | b) | practitioner determines that providing Reiki treatment would not be appropriate |
| | c) | the client has an urgent medical need |
| 20 | | the circumstances when discernment is required in accepting a client: |
| | a) | the Practitioner does not have the requisite experience or expertise |
| | b) | where medical referral is essential |
| 21 | | how to tailor Reiki treatment appropriately for the needs of each individual |
| 22 | | how to monitor and evaluate changes in the client and use this information to inform future practice |
| 23 | | the importance of active listening in providing and evaluating Reiki treatment with the client |
| 24 | | how to evaluate the efficacy and suitability of Reiki treatment with the client and whether to continue treatment |
| 25 | | the potential outcomes of Reiki treatment : |
| | a) | healing responses |
| | b) | changes in the client's physical, emotional, mental and spiritual wellbeing |
| | c) | maintenance and stability |
| | d) | possible need for reassessment of medication by prescriber |
| 26 | | The advice which may be given with regard to: |
| | a) | rest and relaxation |
| | b) | rehydration |
| | c) | possible use of self-help techniques |
| | d) | onward referral as relevant |
| | e) | possible ongoing /intensifying/reduction of symptoms in the short term |
| 27 | | the importance of not becoming attached to specific outcomes |
| 28 | | the skeletal structure and the functions/location of the major organs |
| 29 | | physical conditions to identify how to carry out Reiki treatment appropriately |
| 30 | | physical conditions in sufficient detail to communicate effectively with the client and/or other stakeholder |
| 31 | | red flag symptoms (i.e. conditions requiring immediate medical aid and/or notifiable diseases) |
| 32 | | the importance of appropriate and professional behaviour towards the client, including confidentiality, boundaries, codes of conduct and ethics |
| Performance criteria | | |
| Students must be able to do the following: | | |
| 1 | | check that the environment meets the client's needs |

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| 2 | ensure that any equipment and materials are ready for use and meet professional codes of practice, legal and organizational requirements |
| 3 | prepare yourself appropriately to provide Reiki treatment |
| 4 | position the client for effective Reiki treatment and to give as much comfort as possible |
| 5 | provide Reiki treatment to clients safely and correctly |
| 6 | make appropriate adjustments to meet any changing needs |
| 7 | deal effectively with the client's response to Reiki treatment |
| 8 | check the client's wellbeing 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 the effectiveness of the Reiki treatment to inform future plans and actions |
| 11 | complete and maintain records in accordance with professional and legal requirements |
| 3 OVERALL RATIO OF THEORY AND PRACTICE | |
| 3.1 | 25% theory/75% practice |
| 4 ASSESSOR AND INTERNAL QUALITY ASSURANCE REQUIREMENTS FOR THE REGULATED QUALIFICATIONS FRAMEWORK (RQF) COMPETENCE QUALIFICATIONS | |
| Not applicable – there are no regulated qualifications for Reiki. | |
| 5 THE EQUIVALENT MINIMUM LEVEL AT WHICH QUALIFICATIONS LEADING TO CNHC REGISTRATION MUST BE ACHIEVED AGAINST THE REGULATED QUALIFICATION FRAMEWORK | |
| 5.1 | <p>The equivalent minimum level for Reiki qualifications is as follows</p> <ul style="list-style-type: none"> • 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 240 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. |
| | <p>(i) the number of hours of Guided Learning</p> <p>(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.</p> |
| 6.2 | <u>Guided Learning.</u> 65 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 or Supervision</u> of – a lecturer, supervisor, or tutor suitably qualified as a Reiki Master/Teacher. |

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| 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 suitably qualified lecturer, supervisor or tutor, or |
| | (ii) | Remotely by means of simultaneous electronic communication. |
| | 5 hours of development and supervision of practical skills and at least 40 hours of teaching with the simultaneous physical presence of the Learner and the suitably qualified tutor/supervisor must be included in the 65 hours of Guided Learning. | |
| 6.4 | The overall period of training should take place over a minimum of 9 months | |
| 6.5 | Learning hours must include 75 documented treatments of others and 100 hours of received treatments (through self-treatment/received treatment) | |
| 7 CREDIT VALUE | | |
| 7.1 | 24 | |
| 8 CASE STUDY REQUIREMENTS | | |
| 8.1 | A minimum of 10 case studies of at least 4 sessions each must be completed. These 10 case studies can form part of the 75 treatments required overall. The written up case studies must provide evidence of | |
| | a) | Confidence in the practical aspects of giving Reiki treatment |
| | b) | Ability to behave in a professional manner, including keeping adequate records |
| | c) | Understanding of any safety issues including conditions which require particular care in treating |
| | d) | An understanding of treatments as a process rather than one off event |
| | e) | An understanding of the holistic nature of Reiki treatment |
| | f) | Self reflection to develop learning |
| 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. | | |
| 9.1 | Case studies as above plus | |
| | a) | Written paper set by Reiki Council |
| | b) | Observed treatment procedure as agreed by Reiki Council |
| 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 (two are recommended) |
| 9.4 | Summative Assessment | |
| | The summative assessment must include the written work, in addition to practical work. | |

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| 9.5 | Assessments must be as follows | | |
| | a) | <u>For written work</u> The Course Tutor assesses all written work. In addition, a sample of completed written 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 |
| | | (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 competent and can evidence that this is the case. |
| | b) | <u>For Practical Skills</u> Skills assessment must be by at least one independent assessor who is occupationally competent and can evidence that this is the case. | |
| 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 USE OF THE PROCESS. | | | |
| 10.1 | A practitioner will be required to supply the following information to a Professional Association that is a CNHC Verifying Organisation for Reiki. | | |
| 10.2 | <u>Part One:</u> 10 Case studies as above | | |
| 10.3 | <u>Part Two:</u> Practical Assessment of skills - applicant to give a Reiki treatment to, or in the presence of, an occupationally competent 'Observer' who is not known to the practitioner. Observer will provide structured feedback which will form part of the assessment evidence. | | |
| 10.4 | <u>Part Three:</u> Hand written responses to a series of questions to test the applicant's compliance with the National Occupational Standards (NOS) and Core Curriculum for Reiki, plus evidence of a minimum of three years' practice as a Reiki practitioner. | | |

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

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 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

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

Appendix B

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 | x | ✓ |
| 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 | x | ✓ |
| 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 | x | ✓ |
| E-assessment where the learner has their knowledge and understanding assessed unsupervised where they can access online e-assessment at any time | x | ✓ |
| E-assessment where the learner is supervised by the lecturer, supervisor or tutor in real time | ✓ | ✓ |
| Watching a pre-recorded podcast or webinar | x | ✓ |