



Complementary & Natural
Healthcare Council

CORE CURRICULUM

FOR SHIATSU

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Introduction

1.	<p>Shiatsu is a touch based therapy that applies pressure to areas of the surface of the body through loose comfortable clothing for the purpose of promoting and maintaining wellbeing. A Shiatsu practitioner will initially consult with the client and plan the Shiatsu treatment. The client will then be positioned comfortably, with appropriate adjustments being made throughout the session. Clear and accurate aftercare advice will be given.</p> <p>Shiatsu is a Japanese word that literally means finger pressure and derives its theoretical and practical roots from the ancient traditions of East Asian medicine. Today it is an autonomous treatment method influenced by Chinese, Japanese and Western knowledge. In addition to being regularly used by thousands of people all over the world, a variety of charities, health foundations, NHS trusts and hospitals in the United Kingdom provide Shiatsu to support patients whilst receiving treatment for a range of health issues and to help them maintain their general wellbeing.</p>
2.	<p>The content of this core curriculum provides a minimum standard for safe and competent practice. It incorporates the National Occupational Standards (NOS) for Shiatsu – CNH1, CNH2 and CNH13. There are some overlaps. 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 CNH13 are set out in section 2C below. The wording in red text has been added to provide greater clarity for members of the public.</p>
3.	<p>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). The agreed version of this Core Curriculum will replace the version published in 2012.</p>
4.	<p>It will be the responsibility of those Professional Associations who verify applications for CNHC registration to:</p>
	<p>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</p> <p>b) accept that accountability for accrediting courses and verifying applications for CNHC registration lies with the Professional Association.</p>

<p>1 OVERALL AIMS OF THE COURSE</p> <p>To ensure that at the point of successful course completion, individuals are safe and competent to practise Shiatsu as autonomous healthcare practitioners.</p>
<p>2 LEARNING OUTCOMES AND COMPETENCIES TO BE ACHIEVED</p> <p>2A CNH1 Explore and establish the client’s needs for complementary and natural healthcare</p> <p><u>Overview</u></p> <p>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.</p> <p>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.</p> <p>Users of this standard will need to ensure that practice reflects up to date information and policies.</p>
<p>2B CNH2 Develop and agree plans for complementary and natural healthcare with clients</p> <p><u>Overview</u></p> <p>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).</p> <p>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.</p> <p>Users of this standard will need to ensure that practice reflects up to date information and policies.</p>
<p>2C CNH13 Provide Shiatsu to clients</p> <p><u>Overview</u></p> <p>This standard is about providing Shiatsu treatment to clients. Shiatsu is a touch based therapy that applies pressure to areas of the surface of the body for the purpose of correcting imbalances, and maintaining and promoting health. Shiatsu is a Japanese word that literally means finger pressure. Shiatsu derives its theoretical and practical roots from the ancient traditions of East Asian medicine. Today it is an autonomous treatment method influenced by Chinese, Japanese and Western knowledge. An aim of Shiatsu is to promote the flow of “Ki”. In many forms of Shiatsu “Ki” is considered to be the body’s ability to holistically adapt and adjust to maintain health . ‘Tsubos’ refers to points on the body which can have a significant effect when touched as part of a Shiatsu session. “Meridians” can be interpreted as lines or zones on the body that connect tsubos or which embody a functional connection between part of the body. Tsubos and meridans may vary according to different styles of Shiatsu.</p> <p>Users of this standard will need to ensure that practice reflects up to date information and policies</p>

Knowledge and understanding	
Students will need to know and understand:	
1	relevant principles (e.g. relating to pressure) and concepts such as Ki, meridians and tsubos
2	theoretical frameworks relevant to the safe and appropriate delivery of Shiatsu
3	the relevant client evaluation techniques according to style practised (e.g. looking, asking, listening, touch)
4	conditions (e.g. contagious, infectious, red flag, notifiable conditions) and circumstances (e.g. working under 16s) requiring special consideration
5	how to recognise conditions for which Shiatsu is appropriate/inappropriate and when Shiatsu should be used with caution or is contra-indicated locally or totally
6	how the results of the client evaluation inform treatment planning
7	the application of Shiatsu to meet clients' needs
8	the Shiatsu treatment options and methods, including:
	a) client positioning (i.e. prone, supine, side, sitting/seated)
	b) 'hands on' the body, perform and adapt the Shiatsu treatment
	c) appropriate pressure using for example, palms, thumbs, fingers, elbows, forearms, knees or feet
	d) relevant principles of working such as: maintaining contact, stretching, and sensitivity of application, working with the weight of one's body and/or hara, tsubo and/or meridian contact
9	how to recognise the limits of one's own knowledge, skills and experience and the importance of not exceeding them
10	the clients' potential responses during the treatment, including:
	a) physical
	b) mental/emotional
	c) no response
	d) intensifying/reduction of symptoms
11	the potential outcomes of Shiatsu treatment:
	a) possible ongoing/intensifying of symptoms in the short term
	b) improvements of the client's health and effective functioning (eg. Back pain, stress, and sports injuries)
	c) emotional expression or release
	d) general well being
	e) maintenance and stability
	f) palliative
	g) client satisfaction
12	possible after effects of Shiatsu
13	the aftercare information and advice to provide to the client, including:
	a) possible ongoing/intensifying of symptoms in the short term
	b) rest and relaxation
	c) use of self-care procedures such as self-shiatsu, breathing exercises, appropriate activities
14	anatomy, physiology and pathology of the following systems when relevant to safe and appropriate delivery of Shiatsu:
	a) musculo-skeletal system
	b) nervous system and sensory organs
	c) the skin
	d) endocrine system

	e)	cardiovascular system
	f)	lymphatic and immune system
	g)	respiratory system
	h)	digestive system
	i)	urinary system
	j)	reproductive system
PERFORMANCE		
Performance criteria		
Students must be able to do the following:		
1	consult with the client and plan the Shiatsu treatment	
2	check that the environment meets the client's needs	
3	ensure that any equipment and materials are ready for use and meet professional codes of practice, legal and organisational requirements	
4	prepare yourself appropriately to provide Shiatsu	
5	position the client for effective Shiatsu treatment and to give as much comfort as possible	
6	carry out the Shiatsu treatment safely and correctly	
7	make appropriate adjustments to the Shiatsu treatment to meet any changing needs	
8	deal effectively with the client's response to the Shiatsu treatment	
9	check the client's well-being throughout and give reassurance where needed	
10	provide clear and accurate advice with regard to any relevant aftercare	
11	evaluate the outcomes and effectiveness of the Shiatsu treatment to inform future plans and actions	
12	complete and maintain records in accordance with professional and legal requirements	
3 OVERALL RATIO OF THEORY AND PRACTICE		
3.1	Theory and practice are integrated and it is difficult to separate completely/ be prescriptive but as a guide the overall ratio of theory and practice is 25% Anatomy, Physiology and Pathology (combined theory and practice), and of the remainder, 25% Shiatsu theory, 50% practice	
4 ASSESSOR AND INTERNAL QUALITY ASSURANCE REQUIREMENTS FOR THE REGULATED QUALIFICATIONS FRAMEWORK (RQF) COMPETENCE QUALIFICATIONS		
4.1	Not applicable because there are no regulated qualifications for Shiatsu that meet the requirements of this core curriculum	
5 THE MINIMUM (EQUIVALENT) LEVEL AT WHICH QUALIFICATIONS LEADING TO CNHC REGISTRATION MUST BE ACHIEVED AGAINST THE REGULATED QUALIFICATIONS FRAMEWORKS ACROSS THE UK		
5.1	The minimum level of qualification required is equivalent to 3 (England and Wales); 5 (Northern Ireland); 6 (Scotland) on the UK Qualification Comparison Chart.	

6 HOURS OF STUDY	
6.1	<u>Total Qualification Time</u> 1,000 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. Total qualification time is comprised of the following two elements:
	(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> . 500 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, tutor or other appropriate provider of education or training.
6.3	<u>Immediate Guidance or Learning</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, supervisor or tutor, or (ii) remotely by means of simultaneous electronic communication
	For these purposes, the activity of invigilation is to be regarded as a form of guidance or supervision.
	18 hours (3 x 6 hours) of supervision and development of clinical skills with the simultaneous physical presence of the Learner and the lecturer, supervisor or tutor must be included in the total of 500 hours of Guided Learning (see 6.2 above).
7 CREDIT VALUE	
The number of credits that will be achieved on successful completion of the learning outcomes is 100. One credit must be equal to one tenth of the Total Qualification Time, rounded to the nearest whole number.	
8 CASE STUDY REQUIREMENTS	
To include the minimum requirements for practice observed by an ‘occupationally competent’ assessor ie a Shiatsu practitioner. NB Case study requirements are included in the Total Qualification Time and should reflect hours and credits (which may be spread across units).	
8.1	A minimum of 3 case studies must be completed. The written up case studies must provide evidence of the student’s ability to meet the Learning Outcomes and Competencies listed above. NB. Case studies consist of at least six sessions with the same client with written analysis of associated case notes.
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 as a Shiatsu practitioner	
9.1	Case studies as above plus

	a)	200 case notes
	b)	Clinic days x 3 (see 6.3)
	c)	Outside assessor who should not have taught or assessed the learner to sample case notes, a case study, and receive a short treatment, Theory, practical, self-assessment
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) -see 8.1(a).
9.4	Optional	
	a)	Students to be taught by a min of 3 teachers from different styles for 24 hours during training in order to help students develop an awareness of different approaches to Shiatsu.
9.5.	Summative Assessment Summative assessment must include written work, in addition to practical work.	
9.6	Assessors	
	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 as a Shiatsu practitioner and can evidence that this is the case or
	(ii)	an experienced, qualified Shiatsu practitioner, who has not been involved with the training or mentoring of the student 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 as a Shiatsu practitioners and can evidence that this is the case.
10 DETAILS OF AN ACCREDITATION OF PRIOR LEARNING AND EXPERIENCE (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		
10.1	The APEL process would be the responsibility of organisations who verify applications for CNHC registration. Such applicants would be required to submit full details of their initial Shiatsu training and all relevant CPD, for mapping against the requirements of CNH1, CNH2 and CNH13, plus evidence of a minimum of three years' practice.	

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

*CNH2 Develop and agree plans for complementary and natural healthcare with clients
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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	✓