

CORE CURRICULUM

FOR BOWEN 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 Bowen Therapy. It incorporates the National Occupational Standards (NOS) for Bowen Therapy – CNH1, CNH2 and CNH5. 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 CNH5 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)	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.
	b)	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 practise Bowen 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. a carer).

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 CNH5 Provide Bowen Therapy to clients

Overview

This standard is about providing Bowen Therapy to clients. Bowen Therapy is a holistic approach based on the work of the late Thomas Bowen that encourages the body to reset and heal itself. The treatment consists of a series of moves applied to specific areas of the body including muscles, tendons, ligaments, fascia, joints and nerves. Bowen therapy is considered suitable for everyone from pregnant women to new-born babies, the frail and the elderly.

Bowen therapy involves no forceful manipulation, uses mostly light pressure and is relaxing and pleasant to receive. By combining sets of moves both in placement and sequence, the practitioner is able to address the body as a whole and/or target a specific problem. It can assist recovery from many conditions, from traumatic injury to chronic illness, depending on the individual's capacity to recover health and vitality.

The calm measured process of a treatment session fosters an opportunity for the release of pain and stress and enables the person to remember what it feels like to be relaxed and comfortable. The sense of more physical ease can be associated with regaining more emotional and mental wellbeing.

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:

1.	the history, principles and development of Bowen Therapy and its relationship to other healthcare
2.	the basic principle of minimum intervention
3.	the energy flows, pathways and trains within the inter-connectedness of the body and patterns of compensation
4.	the importance of viewing the person as more than their symptoms i.e. holistically
5.	how to assess the client's needs and expectations in the context of Bowen Therapy
6.	the physiological and emotional states of the client that may present as conditions for treatment or act as contraindications.
7.	how pain and symptoms can be a key guide to how and where the body is protecting the health of the person
8.	how to assess the relationship between emotional and mental states and their influence on physical symptoms
9.	how to identify the common conditions that Bowen Therapy can address and the different methods for addressing these
10.	the circumstances in which Bowen Therapy may complement or be complemented by other healthcare
11.	the principles and procedures in handling referral data from, or to, medical sources or other professionals including confidentiality
12.	the actions to take in the event of a client refusing to consult a doctor
13.	the circumstances in which you may choose not to accept or continue treating a client
14.	the importance of explaining treatment options to the client
15.	how to plan and assess the Bowen Therapy with the client

16.	the way in which some other therapies may interfere with the way the body responds to Bowen Therapy	
17.	the key elements of Bowen Therapy including:	
	a	gentle moves at key points in the body consisting of taking skin slack, applying a challenge, and making a “rolling” type move
	b	the required frequent breaks between some sets of moves to allow the body to respond and integrate the work
	c	a highly sensitive and responsive touch by the practitioner
	d	that the work may be performed through light clothing without the need for the client to undress
18.	how to position the client for optimal treatment outcome whilst maintaining comfort and dignity	
19.	how to communicate effectively seeking consent and comfort levels without disturbing the relaxation of the client	
20.	how to vary pressure and touch and respond to feedback from client	
21.	how to allow the client’s body and responses to determine the speed and length of treatment	
22.	how to assess evidence gained through observation, palpation and tactile listening, and use this information within the treatment plan	
23.	how to select specific points on the body required for each move	
24.	how to perform and combine specific sequences of moves with the intention of locating the link to body structures and systems involved to achieve therapeutic response	
25.	how to recognise clients’ responses and make any necessary adjustments	
26.	how to motivate people to observe and note their symptoms and to make positive changes that will assist their well being	
27.	how to recognise completion of an individual’s therapeutic process	
28.	how to advise on self-care measures to support effects of treatment	
29.	how to support a client experiencing a ‘healing response’	
30.	how to encourage maintenance and stability after treatment through appropriate advice, exercise and self-care procedures related to specific conditions	
31.	how to review the effectiveness of the Bowen Therapy with the client and evaluate the extent to which their needs have been met	
32.	the reasons for explaining to the client any other form of therapy to be included in the treatment and gaining consent for it to be included	
33.	the reasons for not making any claims that Bowen Therapy will cure specific conditions	
34.	the reasons for not making misleading statements such as claiming to practise ‘advanced’ Bowen therapy or be an ‘advanced’ Bowen therapist	
35.	the ways in which complementary practitioners work with medical practitioners, do not make medical diagnosis, and accept that the doctor remains in clinical charge of the patient	
36.	A relevant level of anatomy and physiology for the purpose of understanding the Bowen Technique in relation to the following systems: 1. skeletal system 2. muscular system 3. nervous system 4. sensory system	

	5. endocrine system 6. respiratory system 7. digestive system 8. urinary system 9. reproductive system 10. circulatory system 11. lymphatic and immune system 12. integumentary system
37.	embryology
Performance criteria	
Students must be able to do the following:	
1.	consult with the client and plan the Bowen Therapy
2.	check that the environment meets the clients needs
3.	ensure that any equipment and materials are suitable, clean and safe for use
4.	prepare yourself appropriately to provide Bowen Therapy
5.	position the client for effective Bowen Therapy and give as much comfort as possible
6.	carry out the Bowen Therapy safely and correctly
7.	make appropriate adjustments to the Bowen Therapy to meet any changing needs
8.	deal effectively with the client's response to Bowen Therapy
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 and self-care
11.	evaluate the outcomes and effectiveness of the Bowen Therapy to support 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	The overall ratio of Theory to Practice is 40% theory and 60% practical. (this is inclusive of Bowen Technique and AP&P Training)
4 ASSESSOR AND INTERNAL QUALITY ASSURANCE REQUIREMENTS	
4.1	Trainers must be professionally insured whilst teaching and hold a current First Aid certificate. Trainers across disciplines will have evidence of: <ul style="list-style-type: none"> a) Their teacher training qualification(s); having gained at least a Level 3 Award in Education and Training or equivalent qualification for non-UK tutors, and b) Bowen Therapy practitioner certification (or evidence that satisfies a verifying officer of relevant and assured capability e.g. evidenced training and practitioner history).
5 THE EQUIVALENT MINIMUM LEVEL AT WHICH QUALIFICATIONS LEADING TO CNHC REGISTRATION MUST BE ACHIEVED AGAINST THE REGULATED QUALIFICATION FRAMEWORK	
5.1	The equivalent minimum level for Bowen Therapy qualifications is as follows: <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	
6.1	<p><u>Total Qualification Time</u> A minimum of 390 hours comprised of 260 hours of study in Bowen Technique and 130 in AP&P Diploma Level.</p> <p>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>
6.2	<p><u>Guided Learning</u> 226 hours through 132 hours of Bowen Technique and 94 hours of AP&P.</p> <p>This is the activity of a Learner in being taught or instructed by a lecturer, supervisor, or tutor or otherwise participating in education or training under the Immediate Guidance or Supervision of such educators.</p>
6.3	<p>Immediate Guidance or Learning can be:</p> <p>a) with the simultaneous physical presence of the Learner and the lecturer, tutor or</p> <p>b) remotely by means of simultaneous electronic communication</p> <p>Bowen Technique requires a minimum of 64 hours of development and supervision of Bowen Technique practical skills with the simultaneous physical presence of the Learner and the tutor/supervisor within the delivered hours of Guided Learning.</p>
7 CREDIT VALUE	
7.1	<p>One credit must be equal to one tenth of the Total Qualification Time, rounded to the nearest whole number</p> <p>The number of credits is 39.</p>
8 CASE STUDY REQUIREMENTS	
8.1	<p>A minimum of 10 case studies (that is 10 different clients) each receiving a minimum of 3 treatments/sessions (i.e. 30 treatment sessions minimum).</p> <p>The case studies must be separate from, and not including, any treatments given in the study workshops. The case studies will be written up for examination and will provide evidence of the student's ability to meet the Learning Outcomes and Competencies listed above.</p> <p>The written case studies must provide evidence of</p> <ol style="list-style-type: none"> 1. A client profile. A summary of case study including: general impression of the client; general health and wellbeing, lifestyle, family circumstances and work. Any observed or indicated emotional or psychological state. 2. The client's medical history based on a proforma consultation form. Medical history in sufficient detail to enable safe and effective treatment; including any medication, treatment being received by a medical professional or complementary therapist, and any conditions that could be contra-indicated wholly or partially for a Bowen treatment. 3. Treatment plan. To include short term plan for presenting condition(s), and longer-term plan for each client to cover wider health and wellbeing; plan to include rationale for adopted strategy. 4. For each individual treatment. Justification for protocols adopted and any variations determined as appropriate (e.g. client position, protocol variation made

	<p>during a session); notes of changes in the client's health between sessions, including improvements and reactions; observations during and after the treatment; after care and home care advice</p> <p>5. Conclusions. Conclusion on how the client reacted to the treatments; consideration of ongoing and follow-up care, including continuation of treatments; lifestyle factors that the client could look to change</p> <p>6. Reflective practice log. Identifying what went well, what could have been improved, and what learning outcomes were identified.</p>
9 DETAILS OF THE ASSESSMENT PROCESS	
9.1	<p>Bowen Technique assessment should be by a tutor with a sample of the overall submissions, having been additionally assessed by an independent assessor.</p> <p>a) The production of written and approved case studies (see 8.1 above)</p> <p>b) Completion of all Bowen written examinations (including A&P certificate level achieved prior to Bowen A&P certification if not a holder of an ITEC or equivalent Diploma)</p> <p>c) Practical Examination of correct use of techniques</p> <p>d) Written exam (evidence of pass) for Anatomy, Physiology and Pathology to Level 3 Diploma level.</p>
9.2	<p>The above should all evidence clear understanding of learning outcomes outlined in this document.</p> <p>A therapist must be able to provide evidence of all the above if this required.</p>
9.3	In addition – Practical Assessment of skills
	<p>a) An ongoing (i.e. during teaching sessions) observation as to practice, application and suitability.</p> <p>b) Final Practical Assessment should be by a minimum of one independent assessor who is occupationally competent.</p>
9.4.	Summative Assessment
	<p>The summative assessment must include the written work, in addition to practical work.</p>
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	
	<p>The APEL process would be the responsibility of professional associations who verify applications for CNHC registration from Bowen Therapy practitioners who have not completed a training course that of itself meets the requirements of the National Occupational Standards and this core curriculum.</p> <p>These applicants must provide the following information and evidence:</p> <ul style="list-style-type: none"> • evidence of at least three years' practice as a Bowen Therapy practitioner • all Bowen Therapy qualifications, in chronological order, with details of course content, including any clinical practice • details of all CPD undertaken since qualifying as a Bowen Therapist • career summary and statement of practice, describing current practice and services provided and how their practice has developed over the years they have been in practice. <p>It may also be necessary for applicants to complete</p> <ul style="list-style-type: none"> • A practical assessment based on the core curriculum

	<ul style="list-style-type: none">• A written assessment based on the core curriculum <p>Where the assessment identifies gaps in the learning/knowledge, these would need to be addressed by additional training and re-assessment.</p>
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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
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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What Activities that Count Towards Guided Learning Hours (GLH) and Total Qualification Time (TQT)?

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

Type of Activity	GLH (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	✓	✓
Skills practice at place of learning or workplace where the learner is responsible for generating their own evidence of practice, e.g. 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, self-study using textbooks or relevant educational resources.	x	✓