

Accredited Registers Programme

Notification of Change

Summary of proposed changes

Notification of change from: Complementary and Natural Health Council (CNHC)

Once accredited any relevant changes that a register wishes to make will need to be assessed by the Authority to ensure ongoing compliance with the <u>Standards for Accredited Registers</u>. Part of this assessment includes a review of information received from anyone sharing their experience. Below is a summary of the proposed changes for consideration.

Summary of Proposed Changes

The CNHC was initially set up by the Government to protect the public by providing an independent UK register of complementary healthcare practitioners

Complementary therapy may also be referred to as complementary and alternative medicine (CAM). These are broad terms for treatment that generally falls outside of mainstream healthcare. There are a wide range of treatments that may be considered under the broad term of CAM. CNHC describes its registrants as offering complementary therapies, rather than alternative.

CNHC currently manages the register for complementary therapies, and this register has 18 therapies, <u>Existing Roles</u> covered are

- 1. Alexander Technique teaching,
- 2. Aromatherapy,
- 3. Bowen Therapy,
- 4. Colon Hydrotherapy,
- 5. Craniosacral Therapy,
- 6. Healing
- 7. Hypnotherapy
- 8. Kinesiology
- 9. Massage Therapy,
- 10. Micro-systems acupuncture,
- 11. Naturopathy,
- 12. Nutritional Therapy,

- 13. Reflexology,
- 14. Reiki,
- 15. Shiatsu.
- 16. Sports Massage,
- 17. Sports Therapy.
- 18. Yoga Therapy

CNHC has submitted an application for a new register and is proposing to introduce the title of Neural Linguistic Programming (NLP). The proposed roles associated with this title appear on the register are as follows:

- ANLP Membership Level
- Professional
- Enhanced Professional
- Trainer
- Enhanced Trainer
- Accredited Trainer
- Enhanced Accredited Trainer

Neuro-Linguistic Programming (NLP) therapy is a psychological approach that focuses on the relationship between the mind, language, and behavioral patterns. Developed in the 1970s by Richard Bandler and John Grinder, NLP aims to enhance self-awareness, improve communication skills, and foster personal development. CNHC state that NLP is used by psychologists and psychotherapists to support their treatments and have registrants who are Reiki, Acupuncture, Yoga, Sports Therapists and Reflexology trained who use NLP as part of their practice.

When the National Occupational Standard for NLP is published by Skills for Health, a CNHC core curriculum for NLP will be developed and made available on the <u>CNHC website</u>, with reviews conducted every five years. The Association for Neural Linguistic Programming (ANLP) will be appointed as a CNHC Verifying Organization once it provides evidence that it meets the <u>CNHC quality assurance criteria</u>. Applicants for registration must complete education and training that aligns with National Occupational Standards <u>CNH1</u> and <u>CNH2</u>, in addition to the forthcoming specific National Occupational Standard for NLP.

CNHC has a <u>Profession Specific Board (PSB)</u> for each of its eighteen registered professionals. PSBs advise the CNHC Board on therapy-specific matters and are integral to CNHC's structure. A PSB for NLP will also be established.

Use of accepted Outcomes

CNHC has based its approach to handling complaints about registrants on the procedures that the statutory healthcare regulators have in place. It publishes details of its <u>complaints procedure</u>, which set out what types of complaint can be handled informally, and when complaints need to be considered under its formal procedures.

If informal resolution is not appropriate, then the complaint will usually be referred to two independent Case Examiners. The Case Examiners will consider whether there is a realistic prospect of finding impairment in relation to an allegation against a registrant. The complaint may also be referred to the Investigating Committee at this point if the Case Examiners are not able to agree a decision. The CNHC commissions independent reviews of Case Examiner decisions.

If the realistic prospect test is met, then the allegation will be referred to a Conduct and Competence Panel or (if the concern relates to the health of the registrant) a Health Panel. If either of these Panels find that the registrant's fitness to practice is impaired, then sanctions may be issued, or the registrant may be suspended or removed from the Register.

CNHC has proposed the **Use of Accepted Outcomes** by independent CNHC Case Examiners, following the guidance published by the PSA in <u>Using accepted outcomes in fitness to practice - guidance for regulators</u>. The purpose of the guidance is to assist stakeholders in creating their own procedures for utilising accepted outcomes.

The most notable impact of this change will be on complaints and concerns related to registrations (Standard 5).

As per the guidance

'An accepted outcome is a way of resolving a concern about a health or care professional with their agreement, and without the need for a panel hearing, sometimes referred to as a tribunal'.

CNHC stated that the proposed change to our procedures could, in suitable cases, shorten the time to reach a final outcome, and lessen the stress for complainants and respondent Registrants when a complaint goes to a Hearing

	Once the Change is accepted, updates will begin on the following documents: Detailed Procedures for dealing with Complaints, Complaints Leaflet, and the Training Handbook for Case Examiners
	and Panel Members.
Main	For NLP Register: Standard 1 and 7
standards	For Accepted outcomes: The most notable impact of this change
which may	will be on complaints and concerns related to registrations
be affected	(Standard 5).
Proposed	Accepted Outcomes: The implementation timeline will begin once the
Timescales	required training for Case Examiners has been completed, following approval of the proposed Change.
	NLP Register
	The timescale will follow the publication of NLP National Occupational Standards by Skills for Health, the appointment of the Association for NLP (ANLP) as a CNHC Verifying Organisation, and the formation of a CNHC Profession Specific Board for NLP. The CNHC has not provided a defined timescale.