



Guidance Notes for ICNM Course Registration

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Guidance Notes

General information

The ICNM only registers practical courses that result in a trained and qualified therapist and/or practitioner, who is eligible to join the British Register of Complementary Practitioner (BRCP). Purely theoretical courses cannot be registered with the ICNM in this way. However, theoretical courses may be *approved* by the ICNM as a Continuous Professional Development (CPD) Course and offered to its members.

There are a number of things that the ICNM will look for in your course in order to approve registration and these notes will guide you through those requirements. There are three levels;

(i) Associated (ii) Affiliated (iii) Accredited

All courses registering with the ICNM initially become an *Associated Course* (with some acceptations – see note below). Once accepted, an Associated course has up to one year (two are allowed at the discretion of the ICNM) to become Affiliated, where the course can remain thereafter or, if the standard merits it, then the course can be fully Accredited.

Note: Certain courses will be accepted by the ICNM for registration at Affiliation and Accreditation level immediately after application.

At Affiliation level, these include:

- NVQs at level 4
- UK Further Education and University Foundation Degrees at level 5

At Accreditation level, these include:

- UK University First Degrees and above (MAs, PhDs)
- Other post graduate courses at level 6 (depending on course)

Why 'Associated' as a first step? The ICNM is a professional body of some standing and has 'best practice' at its heart. Any courses that are registered with the ICNM must be of a certain level of excellence, because they will be given the full backing of the ICNM and promoted as having an educational and training standard that is exemplary. For the ICNM to guarantee such is the case, it must be satisfied that this is so.

Associated courses will be expected to have certain basic criteria in place, as are set out in these notes. The ICNM will work with any school, college or organisation course provider(s) to add to, change and/or improve areas of their programmes, in order for them to reach the standards required to become Affiliated or fully Accredited.

There are strict regulations applied to Associated courses (set out in the Terms and Conditions), as some course providers will be working towards certain criteria (not having achieved them as yet.) Registering such courses with the ICNM will give these schools, colleges or organisations an opportunity to develop their course to a very high standard.

Once the course has been accepted, the ICNM will undertake administration for registration. At this point, course providers will be informed as to the level of registration. Associated courses will then receive the information pack for Affiliation and Accreditation, which sets out the course requirements and criteria for moving to these levels of registration. Registered courses will then be placed on the ICNM electronic system.

The basic standards for course registration at Associated level:

Associated courses are required to be working at a **minimum of level 3**. It is expected, by the ICNM, that courses at this level (3) will be working towards level 4/5 (Affiliation – NVQ-4 and foundation degree - 5) or towards level 6 (Accreditation - first degree level).

The number of hours at Association level should be a **minimum of 100 hours** over the whole programme (theory and practice).

All courses, even at Associated level must show **structure**. In assessing the structure of a course, the ICNM will look at two main components:

- (i) the model on which it is based – i.e. its theoretical and practical components
- (ii) its design features – the curriculum model and the process

There are **9 major design elements** that must be in evidence to enable the course to be **coherent**. These are:

1. Aims
2. Objectives – Competences and Learning Outcomes
3. Content and Subject Matter
4. Assessment
5. Teaching and Learning Strategies
6. Resources
7. Implementing and Evaluating the Curriculum
8. Quality
9. Examining and Validation
10. *Flexible Learning (optional)*

1. Aims

Aims express the main purpose of the course. They are general statements of intent. These should reflect the philosophical and/or educational beliefs and values.

Aims arise out of the rationale for the course and are put into practice through the objectives, content, teaching and learning, and assessment strategies of the course.

2. Objectives – Competences and Learning Outcomes

The objectives of a course are derived from its aims, and express the intended learning outcomes, which will be assessed (largely) at the end of the course. They state what the students should know or be able to do once they have completed the study programme. This should be clearly in the form of identified knowledge and competences (i.e. the underpinning knowledge to do something to a certain standard.)

Objectives can be expressed, broadly, fairly specifically, or be precise statements of abilities, knowledge, skills and attitudes expected of students.

The learning to be acquired should be demonstrable and observable and the assessment scheme require students to produce evidence that such intended learning has or will be taking place. These will be different for each discipline, but should still reflect the learning outcomes, which should be:

S	Specific
M	Measurable
A	Achievable
R	Relevant
T	Time-Restricted

Certain assessment, teaching and learning strategies will be used and it is important to ensure that these procedures provide opportunities for the students to be able to attain the objectives as stated above.

3. Content – Subject Matter

The content of a course is derived from its aims and objectives. The particular subject matter or body of knowledge is selected in order to realise the aims and objectives. Therefore, there is a close relationship between these three, which are clearly seen in vocational, practical courses (which complementary medical practices fundamentally are). There are different approaches to content:

- negotiated models (choice of modules/units)
- lists of topics
- concepts and principles
- skills
- experiences and knowledge

The professional training and qualification of complementary medical practitioners demands certain components to be included in course curriculum structures, as does any vocationally, practical based course. There is a requirement for all ICNM Associated, Affiliated and Accredited courses to have a set of generic modules or units within their curriculum. This follows the soon-to-be adopted generic National Occupational Standards (NOS).

These include the following:

- Complementary medicine and the law – current regulations governing patient care and treatment and complementary medical practice

- Ethical issues (patient confidentiality and treatment etc)
- Basic Anatomy and Physiology
- Health and safety – in complementary medical practice
- First Aid – basic emergency treatment
- Counselling skills (basic understanding of treating patients)
- Setting up a business

The other modules or units will be:

- Specialist knowledge and practice of discipline
- Discipline related anatomy and physiology (and possibly others – psychology etc)

Note: With regard to subject content, it is important to consider whether too much is being attempted in the time available. It is not good practice to set unrealistic time scales and this will be evident after the first full year of running a course. It should then be addressed.

4. Assessment

Course assessment is concerned with determining to what extent students have achieved the objectives of the course, so clearly what is assessed must relate to the objectives and contents of the course. How the course is assessed should also reflect its objectives and content. Providers need to state what decisions have been made;

- (i) about the overall assessment strategy - is there end-of-course assessment only, continuous assessment, work-based assessment or some combination of all of these?
- (ii) about the methods to be used - will there be course work, assignments, projects, exams, tests, records of achievement, observation or some combination of all of these.

The methods of assessment chosen should be valid and produce similar decisions on similar quality of work when used by different tutors at different times, in different contexts. This implies the need for a system of assessment. How does your institute implement this?

There is a further question of utility, and this should be taken into account in the method of assessment. Does your school, college or organisation have the time, number of staff, and resources to be able to conduct proper and valid assessments?

Self assessment (those carried out by the school, college or organisation on its own students) is acceptable to the ICNM, *if* the procedure and outcomes have secondary, external, independent, qualified moderators present during the assessments/examinations of the practical demonstrations. If the provider does not have these, the ICNM can take on this role.

Important note: whilst students do not generally qualify for BRCP membership from Associated courses, if the school, college or organisation elects to have a registered ICNM moderator present to moderate the practical assessment/examination procedures, and the required standards are met by the students, they *may be accepted* onto the BRCP as a therapist or practitioner.

5. Teaching and Learning Strategies

There should be consistency between the teaching and learning strategies and other elements of the course. For example; if the course intends to enable students to acquire the skills necessary for complementary practice, then some learning (certain elements of the course) should be in place to reflect real or simulated clinical facilities (with appropriate modules in place, such as managing a practice and health and safety etc.)

The ultimate choice of teaching and learning strategies will depend upon four key factors:

- (i) The natures of the content and learning objectives, which may necessitate particular strategies and rule out others;
- (ii) The circumstances and backgrounds of the students to be taught;
- (iii) Differences in student learning styles;
- (iv) Group size and the resources available, including the expertise of the course team.

Teaching and learning strategies highlight the importance of staff development and training. Therefore, teacher and trainer qualifications must be taken into consideration - subject expertise is not a replacement for good teaching and assessment practice. There must be staff with these skills and formal qualifications involved in the *directing* of teaching and learning of any given course. It is acceptable for 'experienced' teachers of some years, who do not hold a teaching qualification, to be included in the teaching team.

6. Resources

The school, college or organisations' resources must meet certain basic standards. There should be:

- sufficient resources available to enable a complete delivery of the course, without restriction, change or alteration of the programme;
- the required facilities and resources for study available to all students;
- guaranteed health and safety of students whilst on the teaching premises – adequate and appropriate insurance of premises and tutors, sufficient on-site hygiene facilities e.g. toilets, hand washing and drinking water etc;
- facilities for maintaining the confidentiality of student records;
- adequate numbers of staff to ensure valid assessment and examination procedures – including access to external examiners.

7. Implementing and Evaluating the Curriculum

The Staff - implementation of the course clearly requires individual teachers and trainers to have competent, verifiable subject skills. Where there are no formal qualifications available in any given subject (as sometimes this is the case with complementary medicine), sufficient practice experience is acceptable. In addition, effective teaching skills are required. Matters that providers might want to consider are:

- staff development – e.g. teacher training
- staff support – peer guidance, mentoring and monitoring

The students - there are many different approaches to implementing and evaluating the curriculum, which will differ with the learning objectives involved. However, these should include elements of those used in general adult education, such as; set tasks, problem solving, case studies, projects/assignments, essays, group work, peer work, role play, and student portfolios.

8. Quality

Evaluation of the curriculum is of central importance to achieve good practice.

These will be found in the school, college or organisations';

- policy towards quality assurance
- system of quality control

A major part of a quality assurance and control is to ensure that the appropriate standards and levels of monitoring and evaluation take place.

The major purpose of this is to:

- maintain high standards and levels
- assist in the dissemination of good practice
- ensure that any problems identified are dealt with quickly and effectively

The basic model for evaluation should be undertaken in four phases;

(i) before entry (ii) at entry (iii) on/during course (iv) at the end of the course

Evidence of the instruments of evaluation should be produced. The three most common methods of information collection are; (i) questionnaires (ii) discussions and (iii) structured interviews

9. Examining, Validation and Accrediting

Important Distinctions:

The **examining** function is where a central body defines the curriculum (to varying levels of specificity) for a particular course or subject, carries out the assessment or examination and awards a qualification. *In many cases with complementary medical courses, there are no central bodies, and the school, college or organisation will carry out the examination process itself.*

The **validating** function is where the curriculum for a course or subject is developed by lecturers and colleges, and the assessment is carried out by the lecturers and colleges in accordance with a framework of guidance set out by an external body. The detail of the structure will vary from body to body. The curriculum and the assessment have to be approved and moderated by the external body, which will then award its qualification to successful students. An example of this is where further educational colleges develop and deliver foundation degrees, but a partner university validates the course and awards the degree to its students. *For many complementary medical courses there will not be external bodies to validate and/or approve qualifications and awards. In these situations the ICNM will look for a framework (basic at level 3) by which the course provider awards their qualification. As stated earlier, external moderation will be undertaken by the ICNM.*

The **accrediting** function is to give official recognition and authority to any given course. It is neither an examining nor a validating body. To accredit is to certify that a course has met required standards. It is a recommendation without external examination. *The ICNM, as an official body, is also an accrediting body i.e.*

they set their own standards. Courses registered with the ICNM are accredited as an Associated, Affiliated or Accredited course.

10. Flexible Learning

Flexible learning is a means of making it possible for learners to gain access to education and training provision tailored to their needs and aspirations.

They may require flexible access to:

- learning (distant modules, such as with some Elearning – on-line)
- assessment (various ways and systems for doing this)

Flexible learning is acceptable for each level of ICNM course registration (Association, Affiliation and Accreditation), if the course meets with the criteria set at each level. The flexible learning models can be;

- (i) Modular, equal part-time attendance with part-time distance (paper or on-line) learning
 - (ii) Modular, largely distant learning with smaller part-time attendance for practical element of course
- All courses must show attendance for the practical element(s) of the programme.

If the course is largely distant learning, then a number of elements, in addition to the nine structure elements, need to be firmly in place to ensure quality.

These are:

- An understanding regarding intellectual property rights (copyright) and systems in place to secure against misuse of the course materials (protection against downloading/changing course etc);
- Good standard of student information - course requirements, timetabling, resources needed, instructions on course work, submissions and assessment procedures;
- High levels of student support and substantial technical systems in place, such as bulletin boards, chat rooms, easy access to materials etc;
- Systems in place to record student data and safeguard student confidentiality;
- Clear curriculum planning – to present information in an organised, coherent manner, the setting of clear milestones to be achieved (the learning objectives) that has an effective evaluation processes to maintain quality;
- Sufficient projects – which follow good patterns for learning, and are given support and feedback;
- Visual aids – of a high standard;
- Literary guidance and materials – advice on access to sufficient levels of reference materials;
- Practice and theory examinations must be carried out by attendance.