

Accreditation Guidelines

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Part One: Introduction

1.1 Introduction

This document is designed for all Craniosacral Therapy training organisations as a means for setting the highest standards of education on this subject. It is written for all newly applying as well as already accredited colleges. It is meant to offer lines of guidance for all such organisations.

The intention here is to promote the practice of this therapy in the best interests of the public and of practitioners and to provide a framework for cooperative working and dialogue between all interested organisations and individuals.

1.2 What is Accreditation?

Accreditation involves a process whereby an educational institution or training organisation voluntarily undertakes a comprehensive assessment of its intentions and purposes, the structure and methods which support these, the course content and its standards of training and supervision which implement them.

The main objective of accreditation is to ensure that colleges are training students to the level of competencies outlined in the Craniosacral Therapy Association's Standards of Practice document.

1.3 Objectives

The objectives of accreditation are:

1. To encourage high standards of professional education through the development of criteria, guidelines and standards of education.
2. To encourage institutional self-improvement through continuous self-study and self and peer assessment.
3. To assure the general public and other organisations that colleges which are accredited meet high standards of education, and that their graduates practise at a high level of safety and competency in their field.
4. To provide assistance and guidance in developing training and courses.
5. To encourage diversity and innovation within the boundaries of accepted standards and competencies.
6. To protect colleges against encroachment from outside bodies which might jeopardise educational effectiveness, professional standards or academic freedom.

1.4 The Council of the Craniosacral Therapy Association and the Accreditation Board

The Craniosacral Therapy Association of the United Kingdom is the independent body which maintains standards of training and practice in Craniosacral Therapy. The Council of the Craniosacral Therapy Association (henceforth referred to as the 'Council') is the elected body of qualified practitioners which carries out the aims and objectives of the Association. The Council has nominated an Accreditation Board (henceforth referred to as the "Board"). The Board is composed of qualified practitioners and trainers whose make-up is representative of the members of the Association and its training organisations. Importantly, it also has lay representation, someone with specialist educational and/or therapeutic expertise.

It is the role of the Board to monitor the accreditation process and to give guidance to accredited and applicant organisations. Its role is also to evaluate accredited and applicant training organisations and the courses they offer and to decide on the granting or denial of accredited status.

1.5 The Accreditation Process

The accreditation process includes a number of phases through which an applicant organisation must move. These include the Eligibility Review, Provisional Accreditation and Accreditation. The general process is as follows:

A. Eligibility Review for Provisional Accreditation

Eligibility Report Submitted by the Training Organisation

Eligibility Site Visit Conducted by the Board

Board decision on Eligibility for Provisional Accreditation

Provisional Accreditation

B. Provisional Accreditation

End of 1st Year Annual Report Submitted

End of 2nd Year Annual Report Submitted

Site visit conducted, after first or second year

Board decision on Accreditation

C. Maintenance of Accreditation

Accreditation Granted

Annual Report Submitted Each Year

Site Visit Every Three Years

Full Review - every 6 years

Trainings are accredited for the duration of one year. Annual reports must be submitted for maintenance of accreditation. At the Board's discretion, a mature training organisation can move through the provisional accreditation process in a shorter period of time.

1.6 College consent

Provisionally accredited and accredited colleges, as part of the conditions of their accreditation, agree to abide by the provisions of these guidelines. It is recognized that

changes will be made in the guidelines from time to time. Any proposed changes will be the subject of a consultation and negotiation process between the Board, the Council and the accredited Colleges. Any final decision shall be for the Council.

1.7 General Process of Accreditation

The process of accreditation has two distinct phases. The first is the eligibility review which leads to provisional status and the second is the production of annual reports which leads to accreditation.

When a college applies for accreditation, the first step is to submit an eligibility report to the Board. To be eligible for provisional accreditation, the applicant training programme must comply with the essential criteria outlined in Appendix 1. These define minimum guidelines for the assessment of the eligibility of the training for provisional status and could lead to Provisional Accreditation status within one year.

The next step is a site visit which supports the eligibility review. The 'site' is defined as 'the college or training organisation in operation'. The intention of this process is to establish the training organisation's educational, academic and practical ground in relationship to Board requirements and standards of education. If the training organisation is successful in its application, it is then granted 'provisional' status. This is the first step to full accreditation.

During provisional accreditation, the training organisation has a minimum of one year and a maximum of three years to further assess their training standards and to bring them in line with the Standards of Practice document of the Association. At the end of that time, the training organisation must submit its annual report and, if the Board deems necessary, undergo a second site visit, the objective of which is full accreditation.

Part Two: Eligibility Review and Site Visit

2.1 The Eligibility Review

The eligibility review is designed to provide the Board with information sufficient to determine whether an applicant training organisation meets the basic requirements for provisional accreditation status. The applicant organisation should make a report on how it meets the basic requirements of the criteria for accreditation (see Appendix 1). These define the minimum standards expected of a training organisation in the field. Upon the granting of provisional accreditation status, the training organisation then has a minimum of one year and a maximum of three years to review its curriculum in relationship to the Standards of Practice document of the Association. During this time it must make any necessary adjustments to its curriculum to ensure that its students have the required competencies upon graduation.

The eligibility review has two essential components:

1. The eligibility report - submitted by the applicant organisation to document the evidence of meeting the criteria for provisional status.
2. The eligibility site visit - conducted in order to confirm the evidence presented in the eligibility report.

The Board's interest in training is comprehensive and is concerned with the college as a whole, including all activities deemed relevant by the Board. The ethos, integrity and professionalism of the college and its ability to meet the criteria and educational standards of the Association provide the basis for the Board's judgement. Above all, the Board seeks to ensure that students are well served by the college and are trained to a high level of competency.

Training organisations pay an ongoing yearly fee to the Association to offset the costs of the ongoing process of evaluation and support. Fees are set by the Council. See Appendix 2 for the current fee schedules. Upon the granting of provisional accreditation training organisations pay an ongoing yearly fee to the Association to offset the costs of the ongoing process of evaluation and support.

2.2 Basic Criteria for Eligibility

The basic requirements for eligibility are outlined as follows:

1. Adherence to the CSTA Code of Ethics and the Standards of Practice document
2. Educational Policy
3. Legal requirements
4. Management
5. Administration
6. Admission Policies
7. Student Assessment
8. Syllabus
9. Staff
10. Students' Rights and Responsibilities
11. Learning Resources
12. Physical Facilities
13. Financial Resources
14. Publications
15. Advertising
16. Supervision
17. Disciplinary procedures for staff
18. Insurance

(Please see Appendix 1 for a more detailed consideration of these criteria.)

2.3 The Eligibility Report

The applicant training organisation submits its application for eligibility to the Board as the first step in its application for provisional status with a report demonstrating how it complies with each of the 18 criteria, as described in Appendix 1. This is to be sent to the Chair of the Accreditation Board.

The College must address each of the points in the 18 criteria describing its situation as regards each.

The following information may also be required:

1. The rules and regulations of its governing or advisory board.
2. A letter from its Principal, Dean or designated course co-ordinator authorising the application for provisional accreditation and the review and evaluation of the Accreditation Board.
3. A list of current students, numbers of past students and numbers of successful graduates. A chart showing the number of students enrolled in the course in each of the past five academic years (or since the inception of the course) and numbers who successfully graduated if available.
4. A detailed curriculum outlining approximate tuition hours in the various subjects covered in the course.
5. An indication of how its courses do or do not meet the Standards of Practice document of the Association.
6. Current prospectus, course handouts, course notes, and any other document setting forth the curriculum, staff policies, services and activities of the college.
7. Clear description of its student evaluation methods and examples of student work and/or samples of staff assessments of student progress.
8. Information about current equipment (treatment tables, anatomy models etc.) and library facilities.
9. Details of the nature of the premises used (ownership, rental arrangements, size, and ease of access in accordance with the Disability Discrimination Act).

The Accreditation Board reviews the eligibility report for provisional accreditation. It may, at this time, seek additional information from the applicant organisation.

2.4 The Eligibility Site Visit

A site visit shall be made by members of the Accreditation Board. The members will serve in their personal and individual capacities and carry no implication of participation by any institution or other organisation of which that person may be a graduate, tutor, employee, member or associate. Site visit team members shall be compensated for their travel and accommodation expenses and, as with meetings of the Board, receive a per diem amount from the budget they have been given by the Council of the CSTA.

Provisional Accreditation status can normally only be granted following confirmation of the accuracy of the Report by the on site visit. The college shall be notified of the composition of the site visit team before the visit. Members shall be replaced if the applicant organisation has objections to any individual based on reasonable cause. No member of the site visit team shall have a vested interest in the College being visited.

Following the visit, the site visit team will draw up a report. This will first be sent to the applicant college for an opportunity to give feedback and correct any error of fact.

The Accreditation Board as a whole will then consider this report in conjunction with the eligibility report and make the decision as regards granting provisional accreditation.

2.5 Board Action

The following actions may be taken by the Board:

1. Provisional accreditation granted - if the Board deems that the applicant organisation has met the essential criteria for provisional accreditation, the organisation is formally notified. The Board may grant provisional accreditation and require progress reports focusing on deficiencies in specific criteria which are considered to be readily correctable. These reports are to be submitted within the time set by the Board. Any determination that the requirements were not met within the time limit set by the Board, and without cause satisfactory to it, shall constitute grounds for revocation of provisional accreditation by the Board after reasonable notice and opportunity for appeal.
2. Provisional accreditation denied - if the Board finds that the college does not meet the criteria for provisional accreditation, and that there is little or no evidence that these deficiencies will be easily corrected, provisional accreditation will be denied, and the Principal of the applicant organisation will be notified to that effect, with full reasons given. This response may include a notice advising the college that it has a right to seek reconsideration of and/or appeal against, the decision. If on denial of the application the college should request reconsideration of its application, the Board may reconsider, providing the appropriate corrections have been made to the identified deficiencies of the college. The training organisation is encouraged to consult with the Board before seeking a reconsideration of provisional accreditation status.
3. Deferred action - if after consideration of the eligibility report and site visit, the Board is unable to grant provisional accreditation status due to a lack of information, conflicting information or a temporarily unstable situation in the applicant organisation, yet feels that the situation may improve, the Board may defer action until its next meeting. In such cases, additional information and/or another site visit may be requested by the Board.

2.6 Acceptance of Provisional Accreditation

Once provisional accreditation is granted, a minimum of one year and a maximum of a three year period of provisional accreditation is granted in which the College must assure the Board that its educational process trains students to the level of competencies outlined in the Standards of Practice document of the Association.

2.7 Terms of Provisional Accreditation

A. Provisional accreditation status is normally limited to a maximum of three years. If, in the opinion of the Accreditation Board, a college demonstrates progress in its development and in its self-study, the Board may, at its discretion and upon request of the college, extend provisional accreditation beyond the three-year period. Such extensions shall be for a maximum of one year and no more than two such extensions can be granted.

B. A college granted provisional accreditation status may use the following or other approved wording in its publications and advertising, including advertising on any website:

"The (name of college) has been granted Provisional Accreditation Status by the Craniosacral Therapy Association (UK) and is in the process of seeking full Accreditation."

If an organisation has its provisional accreditation status withdrawn for any reason, it must remove from its prospectus, literature, advertising and elsewhere, any reference to claims of either provisional accreditation or accreditation with the Association, within thirty days of notification by the Board.

C. If an organisation releases information which misrepresents any action of the Board with respect to the accreditation process, or its status of affiliation with the Association, the Principal or Dean of the organisation will be notified and remedial action must be taken. If action is not promptly taken, then the Board reserves the right to release a public statement in such a form and with such content as it deems necessary to provide the correct information.

D. Provisionally accredited organisations are required to pay a non-refundable fee to the Association, due 28 days prior to the site visit made in the first year and annually thereafter. The amount of this fee will be fixed by the Council in consultation with the Board. (See Appendix 2.)

E. Colleges which have attained provisional accreditation status shall notify the Board, within 30 days, of changes in ownership, management, contractual affiliations with other institutions, additions to or major changes to its course, and of any other major items which could substantially affect its policies, staff, curricula, reputation, legal or financial status. The Board may then request the college to submit full and complete information. Provisional accreditation and accreditation does not transfer automatically with changes of ownership, management or changes to the curriculum.

F. Annual reports are required from all provisionally accredited colleges on the anniversary of the date on which provisional accreditation was granted. These reports must include any changes in the course and its structure, any additions of courses offered at the college, any major staff changes and any changes to its student evaluation methods. Current enrolment, financial stability, graduation information (numbers and names) and staff information must also be included.

2.8 Withdrawal of Provisional Accreditation Status

A. The Board reserves the right during the provisional accreditation period to remove a college from the list of candidates for accreditation, after due notice, if:

1. Evidence of progress is lacking.

2. The conditions on which the college was granted provisional accreditation have substantially changed.

3. The college appears to be in non-compliance with the essential criteria of the Board's accreditation process.

If the college exhibits evidence of any of the above three conditions, it shall be notified and given 6 months in which to correct the condition. If the condition is not corrected during this period, the college may have its provisional accreditation status withdrawn.

B. The Board will normally withdraw provisional accreditation status from a college or course after giving due notice, if:

1. The college fails to achieve accredited status within three years of its provisional accreditation, or within any extension granted by the Board.
2. The college has not corrected the specific deficiencies noted by the Board at the time of acceptance as a provisionally accredited organisation without good reason acceptable to the Board.
3. The Board concludes that the college has engaged in illegal conduct, or is deliberately misrepresenting itself or presenting false information to its staff, students, the public or the Board.
4. The college fails to provide, fully and truthfully, all pertinent information and materials requested by the Board.
5. The college fails to submit its Annual Report, progress report, or interim report as requested by the Board.
6. Institutional changes create a situation where the organisation does not comply with the criteria outlined in the Board's essential criteria for accreditation.
7. The college fails to pay its annual fee or any other fees due to the Association.

A college may voluntarily withdraw a course from provisional accreditation status at any time and must then delete all references and claims of provisional accreditation from its publications, advertising material and website. The same applies if the provisional accreditation status is withdrawn for any reason.

Part Three: Procedures for Accreditation

During the Provisional Accreditation period, the organisation has a maximum of three years to carry out its self-study. During this time it must make any necessary adjustments to its curriculum to ensure that its students have the required competencies upon graduation. The Accreditation Board will maintain liaison with the organisation to support and aid this process.

3.1 First Annual Report

At the first anniversary of accepting provisional accreditation status for its course, the training organisation must submit to the Board its annual report.

The annual report is meant to be wide ranging and comprehensive and should examine every facet of the operations which affect the college under review. The self-study should examine and evaluate the present position as regards resources, staff, students and courses, and all of these elements should be studied in close relationship to the policies and objectives of the college. The primary focus should be upon the long term goals necessary for full realisation of the college's defined role as an educational institution with the objective of training students to a high level of competency in Craniosacral Therapy.

The annual report should include details of any changes within the college, and measures taken to remedy any weaknesses or deficiencies identified during the eligibility process. It should include a list of current students, numbers of past students and numbers of successful graduates, together with a chart showing the number of students enrolled in the course in each of the past five academic years (or since the inception of the course) and numbers who successfully graduated if available. The annual report should address all areas covered in the eligibility report.

3.2 Second Annual Report

If not by this time already fully accredited, the college submits a further annual report at the second anniversary of accepting provisional accreditation. It should be made with reference to the items listed in Part Five.

3.3 Site Visit

If considered necessary, a second site visit will be made during the second year or third year.

The site visit team shall verify data in the annual report, seek additional information as necessary, develop an understanding of how well the college meets its stated objectives and the criteria for accreditation. Team members confer with the administrators, instructors, students and graduates in making their assessment of conditions, courses of study, observation of teaching in progress, curriculum and training standards and effectiveness of the college.

The site visit team shall then meet with the Principal or Dean, during which time it again may ask for additional information and give feedback.

After its visit to the college, the site visit team prepares a site visit report. A copy of this is sent to the Principal of the college. The Principal may then file with the Accreditation Board a response, submitting supplementary materials pertinent to the site visit team's conclusions if required.

3.4 Board Action

The Board may:

1. Grant full accreditation - if the Board deems that the College is in substantive compliance with its criteria and with the Standards of Practice document, then the college is granted accreditation and officially notified of that fact.

2. Grant continued provisional accreditation conditional on satisfactory completion/implementation of specific requirements within a specified period of time - the Board may grant conditional accreditation and require progress reports focusing on deficiencies in e.g. the criteria, or in the standards of training students to the level of competencies in the Association's Standards document. These are to be addressed within a period of time set by the Board in consultation with the College. If the Board determines that the conditions have not been met within the set time period, then this shall constitute grounds for the revocation of provisional accreditation after reasonable notice and opportunity to be heard are given.

3 .Defer action on accreditation pending correction of certain deficiencies - if after due consideration of the annual report and site visit report, the Board is unable to recommend accreditation due to a lack of information, conflicting information, or a

temporarily unstable situation in the organisation, yet feels that clarity or resolution may be achieved, the Board may defer action until a future meeting. In such cases, additional information and/or another site visit may be requested.

1. **Deny Accreditation**

If the Board finds that the college does not meet the essential criteria and/ or its curriculum does not train its students to the level of competency outlined in the Standards document, and there is no evidence that these requirements will be met, accreditation will be denied and the Principal or Dean of the College will be notified in a written report by the Board, specifying the reason for denial. This report shall include a notice that the organisation has the right to seek reconsideration of the decision.

3.5 Reconsideration Procedure

Within three months of the Board's action, a College may file a written request for reconsideration of the decision (denial of accreditation, withdrawal of accreditation).

The request for reconsideration may ask the Board to conduct its own review of the action, for the purpose of determining whether it committed any error, made any oversight or omission in its decision making process, or whether matters have arisen since the site visit, or the Board's decision, which make an alteration to the Board's original decision appropriate.

The College's request for reconsideration shall state its reasons for seeking reconsideration of the Board's action and may describe any error, omission or oversight that it believes the Board has made. If new information previously unavailable to the Board forms the basis of the request, the College shall explain precisely why it believes such information should cause the Board to reconsider its decision. All new information must be clearly documented.

The Accreditation Board shall then be asked to review the request for reconsideration. The process may include an oral interview with Board members where the College has a chance to state its argument and give any further documentation to substantiate its request for reconsideration. As soon as practicable after this procedure, the Board shall act to affirm, modify or reverse its original decision. The Board's decision will be sent to the Principal of the College and shall respond to the points made in the College's request.

3.6 Appeals against Denial of Accreditation

If the applicant organisation is not satisfied with the Board's decision, it may choose to appeal to an outside arbitrator, in accordance with the procedure set out in Appendix 3.

3.7 Terms of Accreditation

Accreditation is valid for one year. Accreditation must be renewed yearly on the anniversary of the Board's initial approval.
For details of this process, please see Part Four.

3.8 Loss of Accreditation

The Board will normally withdraw accreditation from a College, after giving due notice if:

1. The college has not corrected the specific deficiencies notified by the Board at the time of its granting of accreditation, within the time limit set by the Board, or without good reason acceptable to the Board;
2. The Board concludes that the college has engaged in illegal conduct, or is deliberately misrepresenting itself or presenting false information to its staff, students, the public or the Board;
3. The College fails to provide, fully and truthfully, all pertinent information and materials requested by the Board;
4. The College does not submit its annual report, progress report, or interim report to the Board as requested, or if required;
5. The College fails to agree to a site visit arranged by the Board;
6. The College fails to submit its annual fee;
7. The College ceases to offer the course under review, or makes major changes without consultation with the Board.

A College may withdraw from accredited status at any time.

If termination or withdrawal from accredited status occurs, the College must delete all references and claims of accreditation from its prospectus, advertising, and all other printed materials.

It is the duty of the College to inform its students about any change in its accreditation status.

3.9 Certificate of Accreditation

Upon granting accredited status, the Board shall present a certificate of accreditation in acknowledgment of the organisation's status. The certificate is the property of the Council and must be surrendered upon termination of, or withdrawal from accredited status.

3.10 Accreditation Fee

Upon granting of accredited status, the organisation is required to pay its first full annual fee to the Craniosacral Therapy Association. The amount will be fixed by the Council in consultation with the Accreditation Board. (See Appendix 2.)

3.11 Advertising

Colleges receiving Accreditation may advertise Accreditation in the following manner, or using other wording specifically approved by the Council:

"The (name of course) of the (name of training organisation) is accredited by the Craniosacral Therapy Association (UK)."

Part Four: Maintenance of Accreditation and Annual Report

4.1 Annual Reports

It is the responsibility of the training organisation, once fully accredited, to keep the Board informed of any changes to its organisational or curriculum structure, its teaching staff, facilities, as well as its legal, administrative and financial structure.

These changes plus details of its previous year's activities will go to form the annual accreditation report which must be submitted by the anniversary of its full accreditation or such other date as is determined by the Board (normally that specified in paragraph 4.6). Site visits will normally take place every three years, but the Board reserves the right to arrange site visits more frequently if there have been significant changes at the training organisation or for other good cause. Failure to submit the report, agree to site visits or to pay the annual maintenance fee will lead to an initial temporary suspension of accreditation. Organisations have 30 days to appeal - see Appendix 3.

The training organisation will also submit the following documentation with its annual accreditation report:

- Numbers of students on each accredited course.
- Details of current staff members teaching or assisting on each accredited course - to include the number of years of clinical as well as teaching experience and their role within the course. CVs of members of staff who have joined the team since the previous annual accreditation report.
- Any documents pertaining to the accreditation of the college which are new or which have materially altered during the year under review. Please refer to the list of documents in Appendix 7.

4.2 Reports at other times

There may be occasions when there are events and developments of a serious nature at the college which should not wait for the next annual accreditation report. These are of such a nature that there will be significant repercussions on the training of the students. Examples would be the course director or other key member of staff being incapacitated by accident or serious illness for a long period, loss of premises through fire or flood or other cause, serious ethical breaches by a member of the teaching staff, change of ownership or management, new contractual affiliations with other institutions, major changes to the course. Colleges are obliged to report such changes to the Accreditation Board within 60 days. The Board may then request further information of the college and make such recommendations as it sees fit regarding the accreditation of the college.

4.3 Change of premises

When any accredited training institution moves its training to new premises at any time, it should report this to the Accreditation Board before the move or at the latest 30 days after starting courses at the new premises. This report should include such details as the approximate dimensions of the main teaching area, facilities such as side rooms, kitchen, toilets etc, whether these facilities are shared with others, whether owned,

leased or hired, access, and any other relevant particulars. Moving to new premises will not normally give rise to an additional site visit unless the Board, when receiving the report, has serious concerns about the suitability of the premises.

4.4 Updating syllabus

Training organisations need to demonstrate that their syllabus is evolving and keeping pace with new developments and research material in the Craniosacral field, taking into account any recommendations made in previous site visit reports.

The training organisation shall, either in its annual report or in the associated site visit (if there is one that year), confirm that the current course is still taught in accordance with the core curriculum and report on any curriculum developments.

4.5 Staff awareness of developments

Every staff member shall demonstrate successful experience and provide continuing evidence of awareness of developments in the field including continuing professional development, First Aid and supervision. In particular, they must be actively encouraged to be in supervision.

4.6 Consideration of reports

When a College's annual accreditation report has been submitted according to the timetable set out below, the report will be considered by the Accreditation Board, together with the Site Visit report, if there has been a site visit that year.

The Board will then consider its decision, whether or not to re-accredit for the coming year. Re-accreditation will run from 1st October each year.

The Board may do any of the following:

1. Accredit the college for a further year.

If the Board deems that the college is in substantive compliance with its criteria and with the Standards of Practice document, then the college is granted re-accreditation.

2. Re-accredit the college subject to conditions.

The Board may grant conditional reaccreditation and require progress reports focusing on deficiencies in e.g. the criteria, or in the standards of training students to the level of competencies in the Association's Standards document. These are to be addressed within a period of time set by the Board.

3. Defer a decision or suspend accreditation pending clarification.

If after consideration of the annual report and site visit report, the Board is unable to recommend re-accreditation due to a lack of information, conflicting information, or a temporarily unstable situation in the organisation, yet feels that clarity or resolution may be achieved, it may defer a decision on re-accreditation until the situation is clarified. In such cases, additional information and/or another site visit may be requested. If it is impossible to reach a decision by the time the College's current accreditation expires, then the Board may either decide to suspend accreditation or accredit the college subject to conditions.

4. Deny accreditation.

If the Board finds that the college does not meet the criteria and/or its curriculum does not train its students to the level of competency outlined in the Standards document, and there is no evidence that these requirements will be easily met, re-accreditation will be denied and the Principal or Dean of the college will be notified in a written report by the Board, specifying the reason for denial. This report shall include a notice that the organisation has the right to seek reconsideration of and/or appeal against the decision.

4.7 Site visits

The members will serve in their personal and individual capacities and carry no implication of participation by any institution or other organisation of which that person may be a graduate, tutor, employee, member or associate. An appropriate lay person will also normally be included in the site visit team.

The Accreditation Board will notify the college of the composition of the site visit team. The college shall notify the board of any objection to the proposed team. If a college makes an objection to a member of a site visit team, that member may be replaced following consultation between the Accreditation Board and the college. If the Board cannot reach agreement with the college, it will be for the council to decide whether the objection is well founded.

The site visit will take such time as is required to ensure completeness of the review of the college.

The site visit team shall verify data in the annual accreditation report, seek additional information as necessary, and develop an understanding of how well the college meets its stated objectives and the criteria for accreditation. Site visit team members may confer with the administrators, instructors, students and graduates in making their assessment of conditions, courses of study, observation of teaching in progress, curriculum and training standards and effectiveness of the college.

The site visit team will also have regard to the previous site visit report and inquire what action has been taken in regard to any previous recommendations.

The team shall then meet with the Principal or other senior member of the teaching team, during which time it again may ask for additional information and give feedback.After its visit to the college, the team will prepare a site visit report. A copy of the report will be sent to the Principal and staff where applicable of the college, who may then file a response with the Accreditation Board.

The site visit report will be considered by the Accreditation Board and the procedure thereafter will follow that in paragraph 4.6.

4.8 Annual timetable

The following timetable will be adopted for the annual reaccreditation of colleges.

Colleges should submit their annual accreditation reports by 1st August. Any queries should be raised by the Accreditation Board during August and colleges should then respond in time for the Board to make a decision by the 1st October**.**

4.9 Conflict of interest

Board members may not vote on any matter concerning the accreditation of any college where there is a conflict of interest. They must disclose such conflicts of interest to the Chair. Similarly, employment of a Council member by a college is to be taken as a

conflict of interest where that regards a decision over an appeal against a denial in regard to the accreditation of that College. A conflict of interest may include any current or past relationship that could reasonably be perceived by any of the involved parties to affect impartiality. The Chair of the Accreditation Board in consultation with the lay membership of the Board and the Chair of the Council may rule on whether there is a conflict of interest but if this is disputed the matter will be put to the vote in the Council. Members of the Council or Board whose supposed conflict of interest is the subject of this vote may speak when the matter is discussed but not participate in the vote.

4.10 Reconsideration Procedure

Within three months of the Board's action, a college may file a written request for reconsideration of a decision to withdraw, suspend or make conditions for its accreditation.

The request for reconsideration shall ask the Board to conduct its own review of the action. This review shall be for the purpose of determining whether the Board committed any error, made any oversight or omission in its decision making process, or whether matters have arisen since the site visit, or the Board's decision, which make an alteration to its original decision appropriate.

The college's request for reconsideration shall state its reasons for seeking reconsideration of the Board's action and may describe the error, omission or oversight that it believes it has made. If new information previously unavailable to the Board forms the basis of the request, the college shall explain precisely why it believes such information should cause the Board to reconsider its decision. All new information must be clearly documented.

The Accreditation Board shall then review the request for reconsideration. The process may include an oral interview with Board members where the college has a chance to state its argument and give any further documentation to substantiate its request for reconsideration. As soon as practicable after this procedure, the Board shall act to affirm, modify or reverse its original decision.

4.11 Appeals against Denial of Accreditation

If the applicant organisation is not satisfied with the Board's decision, it may choose to appeal to an outside arbitrator, in accordance with the procedure set out in Appendix 3.

4.12 Terms of Accreditation

Accreditation is valid for one year. Accreditation must be renewed yearly on 1st October with payment of the annual fee made by that date. 4.13 Loss of Accreditation

The Board will normally move to withdraw accreditation from a college, after giving due notice if:

1 The college has not corrected the specific deficiencies notified by the Board at the time of its granting of accreditation, within the time limit set, or without good reason acceptable to the Board;

2 The Board concludes that the college has engaged in illegal conduct, or is deliberately misrepresenting itself or presenting false information to its staff, students, the public or the Board;

3 The college fails to provide, fully and truthfully, all pertinent information and materials requested by the Board;

4 The college does not submit its annual accreditation report to the Board as requested, or if required;

5 The college does not agree to undergo a site visit in the years when that is due or at another time determined by the Board (see paragraph 4.1).

6 The college fails to submit its accreditation fee.

7 The college ceases to offer the course under review, or makes major changes without consultation with the Board.

A college may withdraw from accredited status at any time.

If termination or withdrawal from accredited status occurs, the College must delete all references and claims of accreditation from its prospectus, advertising, website and all other promotional materials. In such an instance, the Board will consider at the earliest opportunity the position of the students at the College. The Board may, at its discretion, invite any students who have started their courses, or made a written commitment to begin their courses, when accreditation was terminated or withdrawn to apply for full membership or associate membership on successful completion of the course. In deciding how to exercise this discretion the Board will have regard to the quality of the training that it considers those students have or will have received. Those who graduated before accreditation was terminated or withdrawn will be unaffected by such loss of accreditation. It is not intended that any student should be disadvantaged by any temporary loss or suspension of accreditation.

It is for the college to inform its students if its accreditation status changes.

4.14 Certificate of Accreditation

Each year the Board shall present a certificate of Accreditation in acknowledgment of the organisation's status. The certificate is the property of the Board and must be surrendered upon termination of, or withdrawal from accredited status. Colleges will be informed by letter as soon as reasonably possible when a decision has been taken by the Board to reaccredit them for the following year.

4.15 Accreditation Fee

Accredited colleges are required to pay an annual fee to be determined from time to time by the Council after consultation with the accredited colleges. This is payable on receipt of the Treasurer's invoice.

4.16 Advertising

Colleges receiving accreditation may advertise accreditation in the following manner, or using other wording specifically approved by the Board:

"The (name of course) of the (name of training organisation) is accredited by the Craniosacral Therapy Association (UK)."

4.17 Review

Every six years the organisation must submit a review, and the guidelines to this are shown in Part Five. This will be followed by a site visit.

Part Five: Six-yearly Review

5.1 Report

A. Introduction to the Organisation

This should include a brief section on the background and history of the college and its training course in Craniosacral Therapy. It should also include a section on how the training course has grown and changed over the years in intentions, size, staffing etc. This should include a statement of educational philosophy, objectives and any changes in these over the years.

B. Review of the Basic Criteria

According to its age the college will review in depth its original eligibility report in relationship to the criteria. It will enquire into its organisation and functioning in depth. Each item of each of the criteria will again be addressed, comprehensively revised and brought up to date. This review should be written from two perspectives: (1) description and appraisal of current status and (2) recommendations for future development.

C. Curriculum Review

This should be based on the current Standards of Practice document of the Association. The college must make a comprehensive review of its curriculum, syllabus and teaching methods and make a point by point appraisal of its training standards. This should also be tied into the review of the criteria, especially in reference to student evaluation procedures and how the organisation supports the student's learning process.

5.2 Review of Curriculum and Educational Models and Procedures

The college, upon the granting of full accreditation status, agrees to adopt the Standards of Practice document of the Association. The college must make a comprehensive review of its academic and practical teaching methods, both theoretical and clinical. This review is meant to be far-reaching. Its intention is to give the organisation a structure for honestly and thoroughly evaluating its training course in relationship to the Standards of Practice document. The main focus is on the teaching of practitioner competencies to students and whether or not the minimum competencies outlined in the document are honestly and thoroughly covered in the training programme.

Section One - Course Competencies:

1. The training organisation may be asked to submit, as part of its review, a sample, sufficient to demonstrate that the core curriculum is being covered, of its course notes, handouts and materials given to students for their learning process.
2. Examples of course homework, projects and written exams if these are part of the assessment process (both questions and sample scripts) should be available for inspection. Actual student work should only be included with the students' permission.

3. The specifics of students' evaluation processes should be explained. What is the philosophy of the evaluation process? Are the students given hands on assessments? Is there a written exam or exams? Are there student projects or papers required? What is the ratio of students to tutors during practical session work? What is the tutor's role during these practical exchange sessions? How are practice management skills taught and assessed? How are students' practice sessions both at the college and elsewhere monitored and assessed? How is the taking of case histories and record keeping taught and assessed? How are students assessed on their knowledge of ethical issues relating to Craniosacral practice?
4. The college should be prepared to make available to the site visit team on the day of the site visit (or, if mutually agreed, send to the team beforehand) the documents listed in Appendix 8 upon request.

Section Two - Practitioner Competencies:

In this section, the training organisation comprehensively examines its curriculum, teaching standards and approaches to teaching students to the level of competencies outlined in the Standards Document.

For each section in the Standards Document, the following should be assessed in the review report:

1. The theoretical content taught in relationship to the section and competencies outlined.
2. For each section in the Standards document, the organisation's curriculum and teaching methods should be described (i.e. description and appraisal of current situation). This should include:
    a. The current situation, whether or not the competency is taught, how it is taught, teaching tools, required reading, equipment used (anatomical models, slide projections, overhead projections, videos etc.) and course handouts etc.
    b. If not taught, how the organisation plans to do so in the immediate future. This should include its recommendations for future development in teaching the competency outlined and the plan to bring it into the curriculum. This might entail bringing in suitable tutors or specialists to teach the specific competencies not covered in current course material.

5.3 Submission of the Review Report

The report should be submitted by the training organisation, as outlined above, to the Accreditation Board. The organisation should submit:

1. The Introduction to the Organisation, as outlined above (5.1.A)
2. The Review of Criteria (5.1.B)
3. The Curriculum and Educational Models and Procedure Study (5.1.C)

Summary of Accreditation Process

1. Application by a School for eligibility to the accreditation process.

2. Eligibility report submitted - see Part Two

4. Eligibility site visit - see Part Two

5. Action by Board - see Part Three

6. A maximum of three years is allowed for the college to reach full accreditation

7. Yearly fee to offset the costs of the ongoing process of evaluation and support

8. At the first anniversary of accepting provisional accreditation status, the training school must submit an annual report, thereafter annually

9. A school with provisional accreditation can apply for full accreditation provided it has qualified one group of students

10. Further site visit to be agreed on if necessary

11. Recommendation for full accreditation

12. Reconsideration Procedure within three months if full accreditation denied

13. Appeals (see Appendix 3)

14. Acceptance of accreditation report - see Part Four.

15. Annual report for maintenance of accreditation plus payment of annual fee.

16. Three yearly site visit

17. Six yearly review - see Part Five

Part Six: Complaints Procedure

6.1 Allowable complaints

The Council of the CSTA may, in the course of events, receive a complaint about an applicant, provisionally accredited, or accredited College. This might come from a student, a member of the public, another institution or staff of the college involved.

The Council shall not entertain a complaint against an organisation, unless the said complaint is made formally and in writing by a student, a member of the public, another institution or staff of the college involved. The Council shall not intercede on behalf of individuals, nor act as a 'Court of Appeal' for faculty, staff members, or students in matters of admissions, refunds, appointments, promotion, suspension or dismissal**.** The Council shall entertain a complaint only when the College may be in breach of the criteria, Council policies or procedures in which it has an interest.

6.2 Lodging a complaint

The Council requires that a complainant exhaust whatever institutional grievance and review procedures are available, prior to forwarding a written complaint to the Council.

Evidence of this must be documented and accompany the complaint. Complaints shall be submitted in writing, addressed to the chair of the Council, describe clearly the nature of the complaint and have the relevant documentation included.

6.3 Consideration of a complaint

The Council shall review the complaint in consultation with the Accreditation Board. If it is found to be outside the terms of reference stated above, it shall inform the complainant of this decision and no further action shall be taken. If it is found to be within the terms of reference, the Principal or Dean of the organisation shall be advised and asked to provide a written response to the allegations within thirty days. The Council may:

1. Attempt to resolve the allegation if the matter between the complainant and the college is deemed to be readily reconcilable. This may include mediation if that is agreed by all parties and agreed in advance to be binding. Mediation is the preferred method of settling such complaints.
2. The council in its discretion may appoint a suitable person to advise the complainant in a similar manner and with the limitations set out in section 2.1 of the CSTA Complaints Investigation and Disciplinary Procedures.
3. Recommend that a committee be set up to hear the complaint against the college. This will be known as the College Complaints Committee. The composition of the committee shall be decided by the Council and shall normally include a lay person or persons outside the Association. No person shall sit on the committee where there is a conflict of interest. The committee may take evidence at a hearing or in writing as it may determine. Any party is entitled to be legally represented. It will be for the chair of the Council, in consultation with the CSTA council officers and chair of the Accreditation Board to decide what legal advice should be sought and whether a legal assessor should be present at any hearing. Where any question arises in regard to the Board's procedure this will be decided by the Council, having regard to the procedural rules of the CSTA Professional Services Committee where these are relevant.

If the college is found to be in error, the Council shall request the college to make appropriate changes, within a reasonable time limit determined by the Council. After the expiry of the time limit, the Council shall review the college's response, and may exercise its judgment with regard to requesting that the Accreditation Board be provided with interim reports, making a special site visit or advising on the modifying or withdrawal of the college's provisional accreditation or accredited status. A college which has its provisional accreditation or accreditation modified or withdrawn may request reconsideration and appeal against the decision as outlined above.

Appendix 1: Criteria for Eligibility

Criterion 1 – Ethical Standards

All Principals and staff members at accredited and provisionally accredited Colleges shall abide by the CSTA's Code of Ethics and Conduct, and uphold the Association's Standards of Practice. Students will be expected to be instructed on, and abide by the Code of Ethics insofar as it is relevant to them.

Criterion 2 - Educational Policy

A. The College shall have, as a formally adopted policy, the education of students in Craniosacral Therapy to a professional standard. The College should have a written statement of this policy which provides direction for its programme. The statement should incorporate the purpose for which the college was founded, the point of view it represents and the College's resources - human, physical and financial.

B. The College must be able to link its statement of policy with its educational objectives, its resources, its current and projected courses and activities and the qualification it awards.

Criterion 3 – Legal Requirements

The College shall comply with all laws and statutory regulations of the country where it is situated.

Criterion 4 - Management

A. The College shall have a governing board, advisory board, or management committee, whose duties and responsibilities are clearly defined. In a College which is a sole proprietorship, partnership, or limited company, an advisory board or management committee should be formed to fulfil this criterion.

B. The board should be representative of the founders and benefactors, and be aware of the public interest.

C. Board meetings must be held at regular intervals. It is the role of the board to be responsible for establishing policy, long-range planning, resources and assurance of educational standards.

Criterion 5 - Administration

A. Colleges should have a designated person or persons, such as a Director, Principal or Dean, whose ultimate responsibility is to the College.

B. The designated person should be responsible to the governing board, advisory board or management committee and shall be directly responsible for the administration of its policies and procedures.

C. The organization should have an administrative staff of a size and organisational structure which is appropriate to the size and purpose of the College.

D. The College shall have appropriate record keeping systems and must comply with all legal requirements on the keeping of records and data.

E. The College must provide for appropriate insurance of its premises, students and staff.

Criterion 6 - Admissions Policies

A. The College shall have a statement explaining the prerequisites for entry and the methods for assessing prior learning (see Appendix 5: The Core Curriculum).

B. Admissions policies should be clearly stated in College publications. These policies must make clear that all applicants for places will receive equal consideration regardless of race, sex, religion, disability etc. The College should make clear how it can cater to the needs of disabled students.

C. The admissions policy should make clear its criteria for accepting, or not accepting, various entry requirements, and the minimum requirements which are acceptable.

D. Colleges should make clear to prospective students what additional costs they may incur in addition to the course fees, advising them to make provision for books, travel, personal sessions, personal supervision if needed, possible additional tuition and so on.

Criterion 7 - Student Assessment

A. The College must demonstrate and provide evidence of an evaluation system which can keep each student and the College informed about the student's educational progress, including indicators or measures of competencies being learned.

B. The College must have evaluation procedures for the effectiveness of its training procedures. This should combine staff and student feedback and a documentation of student achievement and student capabilities relative to standards of competency. This should include retention rates, drop-out rates, completion rates, and average time it takes students to reach a required standard.

C. Policy and procedures regarding academic progress and grading must be fair, consistent and made clear to students. Colleges should document their assessment procedures.

D. The evaluation of student achievement must be applied systematically throughout the training. A variety of measures should be employed to ensure the acquisition of knowledge, core skills, competencies, behaviour and attitudes commensurate with each stage of training, leading ultimately to the performance expected of a fully trained professional Craniosacral Therapist. These should be fully documented.

E. Evaluation processes should include a mixture of written exams, projects, homework, hands-on practical assessment sessions, small-group tutorials and ongoing tracking of student progress.

F. The training organisation should have an effective and efficient system to monitor students as they progress through the training. Students who have difficulties should be identified early, and such weaknesses should be documented and communicated verbally and in writing to the student and other relevant persons, such as the Director or Dean. Suspension, dismissal, the assignment of remedial work or tutorials, if necessary, should be determined in a just and timely manner.

G. There should be a final examination, consisting of a written and a practical part.

Criterion 8 - Syllabus

A. The training shall satisfy minimum requirements in respect of length, professional competencies, and other standards of education established by the Association, and should be designed to provide the students with the skills necessary to practise as a professional Craniosacral Therapist. The course should be sufficiently rigorous in breadth and depth and appropriate to the education of professional Craniosacral Therapists.

B. The course must meet the core curriculum.

C. The training should contain a minimum of 300 hours of tuition. The training organisation should outline the number of tuition hours in the course and the ratio of hours spent in theoretical and practical tuition.

D. The training organisation's syllabus should lead to the minimum professional competencies outlined in the Standards of Practice document of the Association. As part of the eligibility report, the applicant organisation must agree to the standards outlined in the Standards of Practice document. Upon the granting of provisional accreditation status, a training organisation has a maximum of three years to bring its curriculum and training standards up to the level of competency outlined in the Standards of Practice document of the Association.

E. The instruction of students should be the main priority of the College. The syllabus should be both stimulating and of a high academic and clinical standard.

F. Students, upon successful completion of the training course, should be awarded a certificate, diploma or degree following the general practice in higher education and relevant legislation.

G. It is recommended that Colleges should plan and cater for the continuing education of their graduates by offering advanced courses and review courses.

Criterion 9 - Staff

A. The College should have staff adequate for the educational courses and tuition offered. The training organisation should maintain teaching staff who are academically and clinically qualified and numerically sufficient to perform the

responsibilities assigned to them. Tutor and Assistant Tutor Guidelines are laid down in Appendix 4.

B. Training organisations must submit details of all staff, their date(s) of qualification, their CST expertise and experience of teaching.

C. The general education, the professional education, the teaching experience and the practical professional experience shall be appropriate to the subject area taught. Teachers should comply with the requirements for continuing professional development and supervision. Sufficient members of the teaching team should be qualified in first aid to ensure that at least one first aider is present throughout every teaching day.

D. Conditions of service shall be adequate and equitable, and administered ethically, to provide staff members with academic freedom, opportunities for professional growth and development and adequate preparation time. Contracts of terms of service should be drawn up and a protocol developed for what happens should the course co-ordinator or Principal become incapacitated.

E. The staff-student ratio on each accredited course shall be a minimum of 1:5.

F. Staff evaluation should be carried out periodically.

G. Provision shall be made for regular and open communication among members of the staff, and between the staff and administrative officers/staff of the College. The staff should hold regular meetings to consider educational policies and issues.

H. Tutors should be aware of the conflict of interests which may arise in the situation where the tutor is treating one of their students. A tutor should not, under any circumstances, put pressure on a student, or recommend that a student receive treatment from the tutor him/herself.

I. There should be a written policy concerning a complaints procedure against staff and complaints by the staff against the College (see 10F).

J. Arrangements should be in place within Colleges to support their staff. It is recognised that conflicts and other difficulties may arise within a staff group. Colleges are encouraged to make arrangements for suitable supervision for the teaching team by an external supervisor if any member of staff requests it.

Criterion 10 – Students' Rights and Responsibilities

A. The college shall develop a statement of the rights, privileges and responsibilities of students and of disciplinary proceedings for violations of those responsibilities. This statement should be made available to the students through the prospectus, student handbook, or through other means. All student services and activities provided by the College should reflect the training organisation's objectives.

B. Course fees quoted by the College should include all costs levied from the student for that course. Where the College or its staff make additional charges to students for treatments, supervision or other services as a requirement of the course, these should be detailed in the course literature. Students will not be

eligible to become members of the CSTA when they qualify until all due fees have been paid.

C. Provision should be made for obtaining the views of students and taking these into consideration in decision making.

D. The College must have fair and efficient procedures for reviewing and responding to feedback and grievances expressed by the students (see 10F).

E. The benefits of Craniosacral Therapy during practitioner training are highly recognized. Students are therefore recommended to receive Craniosacral Therapy from a member of the Register of Craniosacral Therapists. Students should in no way feel obliged or coerced into receiving treatment from the college or its staff, nor feel that non-compliance could jeopardize their course marks.

F. The training organisation shall have an appropriate procedure for student complaints. There should be an informal stage or stages within the college, but if this does not resolve the complaint, then there should be a formal procedure including mediation. If this still does not resolve the complaint, an impartial hearing should be offered by a panel set up by the college of at least two people both independent of the college, the CSTA administration and of the person making the complaint. The panel will hear both sides of the matter. Conclusions and recommendations from the panel will be given to both the training organisation and the student. Students can appeal to the CSTA but only in the circumstances outlined in paragraph 6.1 of these Guidelines. Otherwise the decision of the panel should be binding on all parties.

Criterion 11 - Learning Resources

A. The College must have learning resources and equipment adequate for the educational courses offered, or must have made specific long term arrangements for reasonable student access to such resources. These might include examples of cranial bones, skulls, anatomical models, teaching aids such as overhead projection images, slides, drawings, handouts, etc. An inventory of these items and books in the library should be kept.

B. If the training organisation has permanent premises, a library should be created for student access and use. Other teaching aids, such as anatomical images, should be made available to students.

Criterion 12 - Physical Facilities

A. The training organisation must provide, or use, facilities which are safe, functional, appropriately maintained and sufficient to house and provide for the proper functioning of the course.

B. The College shall provide classroom and clinical spaces appropriate to its curriculum and class size. Treatment tables should be of a suitable quality and quantity.

Criterion 13 - Financial Resources

A. The College shall have an adequate and stable financial base for existing course commitments, must demonstrate adequate financial planning and must have an appropriate financial management system. In case of a training programme which is a sole-proprietorship, separate books and bank accounts for the course should be maintained.

B. The College should have control of its financial resources and budgetary process and be free from undue influence or pressure from external funding sources or agencies.

C. The income of the College shall be expended to provide adequately for instruction, administration, learning resources, student services and activities, maintenance, equipment, supplies and other specific functions which are consistent with the goals of the course.

Criterion 14 - Publications

The College must publish, and make available to students and to the general public, a prospectus or publications as appropriate, which honestly and accurately set forth its:

1. Current purposes and educational objectives.

2. Entrance requirements and procedures.

3. Rules and regulations for attendance and conduct.

4. Evaluation procedures for student progress and remedial steps or measures that might be taken if students are not performing adequately.

5. Course completion requirements.

6. Procedures for discipline and dismissal.

7. Grievance procedures for disciplined or dismissed students.

8. Course curriculum/syllabus.

9. Details of qualification to be awarded upon successful completion of the course.

10. Dates, times, fees and other costs of the training.

11. Details of the course venue or venues.

12. List of publications and books required for study and their approximate costs.

Criterion 15 - Advertising

A. The training organisation shall be honest and accurate in all advertising. No false claims or comparisons with other training organizations should be made.

B. All advertising should be appropriate to the educational objectives of the college and should accurately state duration and total course fees, if these are part of the advertisement.

C. Colleges shall keep all advertising, other promotional material available to the public and the content of its website up to date.

Criterion 16 - Supervision

In order to encourage the ethos of supervision within the profession and for its own sake, individual members of teaching teams, including principals, need to have individual supervision arrangements in place.

Criterion 17 - Disciplinary Procedures for Staff

Non-compliance with the disciplinary procedures agreed during the accreditation process could lead to the loss of accreditation.

Criterion 18 - Insurance

The School, the staff and the students should have appropriate insurance.

Appendix 2: Fees

Fees will be fixed by the Council and may be varied from time to time in respect of:

- Application for Eligibility
- Evaluation and support prior to granting of provisional accreditation
- Acceptance and continuance of Provisional Accreditation
- Acceptance and continuance of Full Accreditation.

The current charges for provisionally accepted trainings are £400 per year, this amount to be paid prior to the site visit in the first year, thereafter annually until full accreditation is granted. The amount for fully accredited colleges is £800 per year. Further information about fees may be obtained from the Treasurer of the CSTA. Invoices will be sent to colleges a month in advance and payment is requested within 28 days.

Appendix 3: Appeals against Denial of Accreditation

In the appeal, the applicant organisation has the burden of establishing that the Accreditation Board, in reaching its decision:

a. Did not follow the accreditation procedure as set forth in this document, and/or

b. Was not supported by substantive evidence and/or was arbitrary and/or was capricious, and/or

c. That the Board and/or Council abused its discretion in some way materially prejudicial to the college

The applicant organisation has 60 days after the denial of accreditation to formally request an appeal. The request must set forth the grounds for the appeal based on the above criteria, including a full explanation of how, in its view, one or more of the above criteria applies to the Board's decision. The Council, in conjunction with the Board, and as soon as it is practicable after a timely request for appeal, shall propose three names

of persons, with no conflict of interest, who would be eligible to be an arbitrator. These persons shall have had no part in the decisions being appealed and will have no affiliation to the college requesting the appeal. The college will have 21 days upon the receipt of the names to choose one person from the list. If all are rejected, then the Council will appoint another person, with no further appeal by the organisation.

The Board shall provide the arbitrator with the complete record of its proceedings in reaching its original decision and the record of the college's request for reconsideration.

The arbitrator shall carry out his or her consideration of the appeal, which may include an oral hearing with representatives of the college and/or of the Council and the Accreditation Board. The arbitrator shall produce a report within thirty days of beginning his or her deliberations, or as soon after as is practicable. The arbitrator's report shall be sent to the Principal of the organization in question, to the Chair of the Accreditation Board and to the Chair of the Council.

The arbitrator may either affirm the Board's decision, or may determine that the decision should be altered, in accordance with the criteria outlined above. If the arbitrator does not affirm the Board's decision, he or she shall refer the matter back to the Council for its further action in accordance with the decision of the arbitrator. Such action will commence as soon as practicable, but not more than thirty days thereafter. The Council's decision will be promptly notified to the Principal of the organisation involved. The arbitrator has no power to grant, deny or revoke provisional accreditation status or accreditation. All costs of the process will be borne by the College appealing, including the reasonable fees of the arbitrator. If, however, the Council is found to be at fault in its decision, then it will bear its own costs.

Appendix 4: Tutor and Assistant Guidelines

The following has been adopted for the guidance of training organizations and staff. These will serve as benchmarks against which the College itself and the Accreditation Board can assess the performance of a teaching team. (Please see also Criterion 9.)

The principles are:

- The choice of teaching team members will be based on suitability and experience in the role they play in the team. Each team member will be ready and fit to carry out their work.
- The team will be skilled in the provision of theoretical and practical instruction.
- Tutors should be skilled teachers in respect of their breadth of knowledge, therapeutic and communication skills, ability to act as a role model etc. Assistants, chosen also for these qualities, assist students in specific tasks.
- The team members will all be suitably skilled in interpersonal relationships and be able to give appropriate support and feedback during practical and palpation sessions.
- The members of the teaching team will have sufficient experience to meet the educational needs of the students and of the teaching programme. These needs may vary from seminar to seminar and so the composition of the team may change, though this should be balanced against the need for continuity.

- The team will be capable of providing a safe learning environment which is wholesome and supportive.
    - Colleges will be responsible for the support, training and development of their staff team.
    - All Principals and teaching staff should be in some form of supervision according to their needs

Ethical standards, qualifications and staffing levels

- Colleges are responsible for the ethical behaviour of their teaching staff to students and teaching colleagues.
- All teaching staff should be familiar with and maintain the CSTA code of ethics.
- In the event of any serious breach by a member of staff, it is in the first place a matter for the college to deal with this through its internal disciplinary process. But if it is alleged that the college has failed to take appropriate action in these circumstances and that the breach of the code is of a sufficiently serious nature, this would provide good cause to the Council after proper inquiry and consultation with the Accreditation Board, in accordance with the complaints procedure in Part 6 of these Guidelines, to suspend, make conditions for, or refuse accreditation to the college.
- Sexual contact with students is strictly proscribed.
- The majority of teaching staff on any course in accredited and provisionally accredited trainings should have a number of years' significant experience as Craniosacral therapists from the time of graduation. This will be monitored by requiring colleges to submit with their annual accreditation reports *curricula vitae* of all teaching staff first employed since the last annual report.
- The ratio of staff to students in any course should be 1:5 or better.
- Tutors and assistants should understand and support a student complaints procedure.
- Tutors and assistants should not have an ongoing therapy relationship with any student. If an existing therapeutic relationship exists before the training commences, the student should be referred to another practitioner. This is to ensure clarity of student/teacher boundaries.
- Core teaching staff must be full members of the CSTA or an equivalent organisation. Principals who are teaching should also be full members of the CSTA. There will also be exceptions for guest tutors, specialist tutors and tutors from overseas who are members in good standing of a professional association in their own country.
- The schools or their tutors and assistants should hold insurance that covers professional indemnity for teaching.

Appendix 5: Site Visit Guidelines

These guidelines are in addition to any references to site visits elsewhere in this document.

The site visit team will be looking for the health of the organization they are visiting.

Members of site visit teams need to be sensitive to the feelings of staff and students. Staff and students need to be open with the site visit team and respect their role. They will have been informed about the visit beforehand.

The site visit team will aim to stay in the background, but will be helped to do their job effectively by the courtesy and openness of the welcome accorded to them by the college.

The primary aim of a site visit is to support the work of the college, as well as carrying out an assessment of the standards of training.

The members of the team will be bound by the same rules of confidentiality as apply in any CSTA administrative business. Site visit reports are confidential to the college and the Board. The only occasion where this confidentiality may be breached is if a situation arises during the site visit that brings the college's accredited status into question, or if there is a question over the suitability of that college's accredited status in general, which requires referral to a third party.

The site visit team will be aware that during the visit the students will be undergoing learning and personal processes. That will be respected.

The College should make time available for the site visit team to talk to various groups: principal or course director, the teaching staff and the students.

Appendix 6: Trainings overseas

The Board is conscious that, owing to simple geography, it is not always possible to conduct site visits. This means that the necessary information and insights into new trainings may have to be gained by other means. With this in mind the Board is in the process of creating an Assessment Team for Overseas Trainings, whose brief is to carry out all necessary evaluations that will make the determination of both provisional and full accreditation possible.

Appendix 7: Core curriculum

The Craniosacral Therapy Association UK has been set up to promote standards in Craniosacral Therapy. Below are set out the minimum standards for professional training for accredited training colleges:

Entrance Qualifications

Students on postgraduate trainings are expected to have a background in previous medical or complementary training, ideally with clinical experience. A minimum of 80 hours training in anatomy, physiology and pathology is also required.

In some instances, Colleges may be in the position to admit students where the above conditions have not been met. In these cases, it is the responsibility of the College to provide these students with extra training in anatomy, physiology and pathology and clinical skills to bring them in line with the standards of postgraduate trainings.

Theoretical Foundations

- Competencies in anatomy, physiology and pathology specifically applicable to craniosacral therapy
- Competencies in the theoretical foundations of craniosacral therapy. Theoretical competencies, historical perspective and clinical implications.

General Therapeutic Skills

- Competencies in general abilities and skills
- Clinical skills in relationship to the different unfoldments of the primary respiratory system.
- Competencies in perceiving health
- General therapeutic competencies and skills
- Specific competencies and skills in relation to inertial fulcrums of resistance
- Competencies in integrative skills
- Competencies in responding to physiological presentation of shock and trauma
- Competencies in process and communication skills
- Competencies in facilitating therapeutic stillness
- Competencies in palpating inherent potency

Specific Structural and Functional Relationships

- The fluctuation of cerebrospinal fluid
- The central nervous system
- Reciprocal tension membranes
- The mobility of cranial sutures and cranial bony relationships including facial structures
- The involuntary motion of the sacrum between the ilia
- Whole body dynamics
- Introduction to the viscera

Birth Patterns in the Infant and Adult

- Introduction to competencies in relation to infants and the birth process
- Introduction to competencies in relation to adults and the birth process

Practice Management Skills

- Membership of a professional organisation and observance of its code of ethics.
- Competencies in relation to the clinical environment
- Competencies in establishing a professional relationship

- Competencies in relation to case histories
- Competencies in relation to record keeping
- Competencies in relation to communication with other health professionals
- Competencies in relation to financial records
- Competencies in relation to time management
- Competence in managing one's own professional life
- Competencies in legal aspects of practice.
- Competencies in practice building.
- First aid requirement for practitioners.

Training Guidelines

- A minimum of 300 hours of contact time with registered tutors and assistants.
- Ongoing written home study and practice
- A staff/student ratio of 1:5
- Final examination consisting of a written and a practical part or other final assessment in accordance with each college's policy.

Appendix 8: Documents for consideration by site visit teams

Documentation, to be available on the day of the site visit (or by mutual agreement sent in advance to the site visit team), will vary from college to college. This list is comprehensive and the documents the team will need to see may be agreed beforehand.

Educational policy document in accordance with Criterion 2
Copies of advertisements, promotional material (electronic or in print) including prospectus and any leaflet on foundation course
Curriculum and syllabus
Samples of course materials
Complaints procedures
Admissions criteria
Letter of acceptance on course
Tutor guidelines
Tutor agreements
Curricula Vitae of staff
Guidelines for students' home practice
Attendance register
List of present students
Student agreement (blank)
Policy in regard to non-attendance
Insurance certificate for college
Health and Safety policy
Recommended book list
Summary of assessment procedure
Record sheet of homework submitted
Sample of homework and projects
Policy on students receiving CS sessions
Practice record sheet (for practices taking place outside college)
Student feedback form (blank)

Exam paper (sample)
Certificate of graduation (blank)
Teaching clinic details if the college is a teaching clinic provider
Business plan (in the case of colleges applying for initial accreditation)