



Healing Beyond Borders

Educating and Certifying the Healing Touch®

HEALING TOUCH PRACTITIONER CERTIFICATION APPLICATION FORMS AND CRITERIA

Dear Applicant,

Welcome to the Healing Touch International (HTI, dba Healing Beyond Borders) Healing Touch Practitioner Certification process. We are pleased that you have made the commitment to pursue your certification as an HTI Certified Healing Touch Practitioner.

The practitioner certification criteria outlined in this application are meant to highlight specific knowledge, skills, and judgment related to the development of professional and ethical practice. Please use the specific instructions for each criterion, as well as attention to the general instructions regarding the application format and process. The Healing Beyond Borders Certification Board uses your submitted portfolio as evidence of how you have met these competency criteria.

In light,

Healing Beyond Borders – Board of Directors
Healing Beyond Borders – Certification Board

*“Imagine your dream.
Hold it expectantly in your consciousness.
Watch it unfold.” ~ Charlotte McGuire*

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HTI Healing Touch Certificate Program and Certification Information

Healing Touch International, Inc. (HTI), doing business as Healing Beyond Borders (HBB), is a non-profit certification, education, and membership organization serving Healing Touch students, practitioners, instructors, and the general public. Established in March 1996, Healing Beyond Borders is responsible for the International Standards of Practice and Code of Ethics for Healing Touch practitioners and students. Our mission is to serve the public by providing education, certification, professional development, research consultation, integrative health care consultation, member support, and networking opportunities. Membership is open to all who are interested in healing.

HTI Healing Touch Certificate Program

The HTI Healing Touch Certificate Program is a continuing education program in energy therapy that is taught throughout the world. Well-grounded in nursing and the scientific process, this transcultural program of study inspires an in-depth exploration of the human energy system and ancient healing traditions, as well as the qualities of therapeutic relationship, healing presence, and compassionate care within an energetic framework. Participants learn about the scientific basis and evidenced-based practice that supports this energy therapy and apply the unique theories and principles of holistic health from an energetic foundation and perspective. The HTI Healing Touch Certificate Program incorporates the Healing Beyond Borders Core Values, International Code of Ethics, and Standards and Scope of Practice.

Sequential courses within the HTI Healing Touch Certificate Program are as follows:

- (1) Foundations of Healing Touch
- (2) Energetic Patterning and Clinical Applications
- (3) Advanced Healer Preparation
- (4) Case Management and Professional Practice
- (5) Self-Evaluation and Professional Development

Endorsement

The HTI Healing Touch Certificate Program is endorsed by the American Holistic Nurses' Association.

The Scope of Practice Statement for the HTI Healing Touch Certificate Program defines the following levels of practice: "Student of Healing Touch International"; "Healing Touch International Practitioner" (HTI-P), who has completed Course 5 and has received a certificate of HTI Healing Touch Certificate Program completion; and the "HTI Certified Healing Touch Practitioner" (CHTP), who has met the criteria for certification and has been approved for certification by the Healing Beyond Borders Certification Board.

Certification

Credentialing as a Certified Healing Touch Practitioner is available to those who meet eligibility requirements and have successfully completed the entire HTI Healing Touch Certificate Program. It is expected that prior preparation and work experience will have contributed to the practitioner's awareness and application of confidentiality, legal responsibility for hands-on practice, biomedical ethics, standards and scope of practice, therapeutic relationship, and civic involvement. Healing Beyond Borders administers certification through a separate review by a Certification Board using standardized criteria. Intended for the professional practitioner, certification acknowledges learning experiences and demonstration of competence and safety as a Healing Touch Practitioner. The Certification Board does not license the practice of an individual or assume any legal responsibility for her/his practice.

Certification Eligibility

Credentialing as a Certified Healing Touch Practitioner is an appropriate goal for persons who have completed the HTI Healing Touch Certificate Program. Certification is intended for experienced, safe, and competent Healing Touch practitioners, and requires a professional level of development. It is anticipated that individuals will approach certification with preparation and work experiences that have contributed to their awareness of the concepts of confidentiality, professional health care ethics, appropriate interpersonal relationships, and awareness of his/her scope of practice and expertise.

Student and Practitioner Solutions

For those who have completed a portion of their Healing Touch study, or who hold certification through a certifying body other than Healing Beyond Borders and wish to pursue certification through Healing Beyond Borders, proceed to the website (www.healingbeyondborders.org), go to Education, Certification, and download the Practitioner Solutions Packet.

Healing Beyond Borders Certification Board

The Healing Beyond Borders Certification Board is the body that evaluates certification applications. The Certification Board consists of Certified Healing Touch Practitioners who are appointed by the Healing Beyond Borders Board of Directors through an application process. Healing Beyond Borders Certification Board members must meet the following requirements: member of Healing Beyond Borders; current certification as a Healing Touch Practitioner, preferably Certification as a Healing Touch Instructor; and experience in educational program development and/or implementation, evaluation, and/or professional practice or service. Current licensure as a registered nurse and an advanced degree are desired.

Application Review

Healing Touch Certification is administered through the Healing Beyond Borders office and applications are reviewed by the Healing Beyond Borders Certification Board. Applications are assigned to a team of at least two Certification Board members, taking into account any perceived or potential conflicts of interest. Reviewers remain anonymous to the applicant.

Submission Dates

Applications can be submitted for review during January, April, July, and October of each year. Applications must be postmarked to the Healing Beyond Borders office by the 15th of each of the submission months to be reviewed during that quarter. At any time, an applicant may withdraw his or her application from review.

Feedback to Applicants

Applicants receive a letter indicating the status and outcome of the evaluation of their application.

Approved: The applicant will receive a letter of approval from the Healing Beyond Borders Certification Board and a Certificate of Certification as an HTI Healing Touch Practitioner (CHTP).

Approval Pending: This status indicates action required by the applicant to meet the certification requirements and is accompanied by a "feedback report." This report provides direction for submission of additional material(s) as requested by the reviewers. Applicants have 30 days to submit updated materials. If the resubmitted materials meet the criteria, the application will be designated as "Approved." If the materials do not meet the criteria, the application may be designated "Not Approved."

Not Approved: This status results from a consensus of the Certification Board. The letter will clearly indicate the reasons and rationale for a "Not Approved" status. An appeal process is available for those receiving a "Not Approved" status and is outlined in Appendix 1 of this document.

Non-disclosure

Applicants' names, commentaries, and scoring information developed during the review are kept strictly confidential. Such information is available only to those individuals directly involved in the review process. The statistical results of the application reviews are shared with the HBB Board of Directors on a quarterly basis. These statistical results may be shared with HBB Certified Instructors and HBB members.

References used by the Certification Board to guide judgment of accuracy of Healing Touch work include the following:

1. Anderson, J.G., Anselme, L.C., & Hart, L.K. (2017). *Foundations and Practice of Healing Touch*. Lakewood, CO: Healing Beyond Borders.
2. HBB Class Workbooks for Classes Level 1 through Level 5 (2010), Lakewood, CO: Healing Beyond Borders.
3. Hover-Kramer, D. (2002). *Healing Touch: A Guidebook for Practitioners* (2nd Ed.). Albany, NY: Delmar.
4. Brennan, B. (1987). *Hands of Light: A guide to healing through the human energy field*. New York, NY: Bantam Books.
5. Brennan, B. (1993). *Light Emerging: The journey of personal healing*. New York, NY: Bantam Books.
6. Joy, W.B. (1979). *Joy's Way: A map for the transformational journey*. New York, NY: G.P. Putman's Sons.

General Information and Directions

Application Format

- Applicant's name is to be on the top right of each page and may be handwritten.
- Standard 8 ½ x 11 inch paper in the U.S., or A4 outside of the U.S.
- Use a 1-inch border. Font size: 11–12 point. Type: Times New Roman or Arial.
 - Do not use Italic or Script type except for emphasis.
- Use **bold** or underlined headings for each required item for each criterion as described.
- Double-space the two (2) Case Studies (Criterion 6).
 - All other sections are to be single-spaced.
- Criterion 3 and 5: Place more than one entry per page for continuous flow.
- Page limits are indicated for each criterion.
 - Number the pages for multiple page responses (i.e., Case Study: 6-1, 6-2, 6-3, 6-4, etc.).
 - Numbering of pages may be handwritten.

Submission of Application

- Application materials **must be** submitted in the order listed on the Application for Certification, with each application packet (see pp. 13-14). These pages are to be the first pages on each application packet being sent.
- Submit your original portfolio, including the original signed application forms and all required materials, and two complete copies of the entire portfolio. Total of three (3) application packets.
 - Submit only a photocopy of the HTI Certificate of Course Completion.
- The portfolio is to be double-sided, if possible, and secured by binder clips **only** in the upper left-hand corner.
- No staples, plastic page protectors, dividers, three-ring binders, spirals, colored pages, or photographs are to be used.
- ***Be sure to save a complete copy of your application materials for your records. Your submitted application material will not be returned to you.***
- **Non-refundable Application Fees**
 - \$250 U.S. – Healing Beyond Borders Members
 - \$325 U.S. – Non-Members
- Include your check or money order payable to Healing Beyond Borders or
- Credit card - pay online (VISA, MC, DISCOVER, AMERICAN EXPRESS)
 - Go to www.HealingBeyondBorders.org
 - Click on OUR STORE, then on CERTIFICATION FEES
 - Click on CHTP Certification Member or Non-Member
 - Print receipt and attach one copy to your application packet.
- **Mail To:**
Healing Beyond Borders – Certification
7112 W. Jefferson Ave., Suite 301
Lakewood, CO 80235

Given international postal rates, applicants from outside of the U.S. may submit their application materials by email as a single PDF file to Certification@HealingBeyondBorders.org

If you have any questions, please contact the HBB Office at:
Certification@HealingBeyondBorders.org or call 303-989-7982. We will be happy to assist you.

Certification Instructions & Guidelines

Criterion 1: Completion of Course Work

Completion of all course work required for certification as a Healing Beyond Borders HTI Healing Touch Practitioner:

- Course 1: Foundations of Healing Touch
- Course 2: Energetic Patterning and Clinical Applications
- Course 3: Advanced Healer Preparation
- Course 4: Case Management and Professional Practice
- Course 5: Self-Evaluation and Professional Development

Purpose:

To provide a foundation for the practice and understanding of the concepts of Healing Touch.

Action/Evidence Required:

- Include the signed and dated Course 5 Instructor Recommendation form (see pg. 15).
- Include a copy of the Healing Beyond Borders Certificate of Course Completion which includes the gold seal, and is issued upon verification of homework completion by the Course 5 Instructor.
- Required forms and certificates not signed and dated will not be accepted.

Criterion 2: Professional Résumé

A one- to two-page résumé is to be prepared consistent with a conventional outline format used for professional résumés. Explain abbreviations and terms that are not related to nursing.

Purpose:

To provide background information regarding education, experience, and interests of the practitioner.

Action/Evidence Required:

Preparation of a professional résumé to include:

- Education (include locations and dates): secondary/high school, college/university, and/or post-graduate
- Work experience (include locations and dates)
- Professional recognition(s), licensure(s), and/or certification(s) (as applicable)
- Healing Touch classes completed (**must include dates, locations, instructors**, and student solutions, if applicable)
- Additional related education or training to practice other healing techniques or modalities
- Professional memberships and affiliations (as applicable)
- Special accomplishments, awards, and/or other interests
 - Do not include copies of these certificates.
- List of published works (as applicable)
- Other related interests, community projects, and/or volunteer work

Criterion 3: Healing Modalities

Personally experience ten different healing modalities with complementary health care professionals following completion of Course 4. One of these can be a Healing Touch treatment. Have no more than two treatments per professional and no more than one treatment per day.

Purpose:

To achieve awareness of complementary healing modalities, identify availability, establish networking contacts, and make appropriate holistic referrals in your community that could benefit your patients. To become aware of and identify sources for your own self-care.

Action/Evidence Required:

Provide a reflective statement/summary of approximately 150 words (single-spaced) for each individual experience.

Please put the headings of the following required items in **bold** type.

- **Index.** Include an index with a list of modalities, date received, and professional's name. The reflective statement/summary for each individual experience is to include:
 - **Name of Modality.**
 - **Professional's name, full credentials** (or skill experiences in the modality offered), **and address**
 - Explain initials used in their credentials
 - Explain how they developed their skills, if they have no credentials
 - **Date** treatment was received
 - **Definition** of the modality and how it works
 - **Personal experience:** a general statement about the procedure, your experience, interaction with the practitioner, and reflections on the overall value to you
 - **Referral:** Indicate whether you would refer a patient to (1) this provider and (2) this modality

Routine allopathic care, dental, dental hygienist, physical therapy, or optometrist checkups are not considered complementary care. The majority of these experiences should be from the applicant's community and include a variety of modalities and practitioners.

Each modality must have a provider involved in the treatment and the ability to be able to debrief the outcome with the provider; modalities using machines without provider interaction are not acceptable.

Education classes and workshops do not meet this criterion.

Criterion 4: Mentorship

Complete mentorship with a HTI Certified Healing Touch Practitioner (CHTP) for a minimum of one year following completion of Course 4.

Purpose:

To provide support and guidance to the practitioner development process, Healing Touch practice, and clinical health care. To foster growth and self-awareness as a healing practitioner.

Mentorship:

- Applicants may select more than one mentor to serve as primary and secondary mentors.
- Applicants who are not nurses must select an HTI CHTP mentor who is a nurse. It is recommended that the primary mentor be a nurse for non-nurses to provide guidance in clinical health care issues.
 - A CHTI who is not a nurse may serve as a primary mentor without the need for a secondary nurse mentor.

- Mentorship must have been in effect for a minimum of one year following the completion of Course 4 and must continue through the certification application process.
 - Secondary mentors (nurses or non-nurses) must provide consistent mentorship throughout the process.

Mentor Resources

- HBB Healing Touch Mentorship Guidelines are available at www.HealingBeyondBorders.org or from the HBB office

Action/Evidence Required:

Submit the following completed forms (pg. 16-17) and written evaluations (**include date, signature, and credentials**) with your application. The written evaluations should be one page and single-spaced. Please put the headings of the required items for written evaluations in **bold** type:

Mentee Required Documents

1. **Evaluation of Mentorship Letter:** A written description and evaluation of **your** interactions with your mentor. If there is more than one mentor, a separate evaluation letter is to be submitted for each mentor. The evaluation of mentorship letter(s) must be signed, dated, and include your credentials. Include a description under each bolded heading as follows:
 - **Contact:** Description of regular contacts with the mentor(s) (at least monthly is recommended; a list of dates is not required.)
 - **Summary:** Identify the most valued learning gained during mentorship regarding each of the following:
 - Professionalism
 - Ethical issues/Standards and Scope of Practice
 - Self-development
 - Case consultation
 - **Healing Touch Practice and Clinical Skills:** How the mentorship helped personal development of skills
 - **Demonstration of Healing Touch for mentor:** Brief description of self-assessment about applicant's current level of Healing Touch practice and clinical skills, as well as discussion with mentor(s) regarding energetic patterns, clinical applications, advanced healer preparation, and healing presence.
 - **Self-learning:** Description of what you have learned in general about yourself
 - **Benefits:** How mentorship benefited you or, if any difficulties arose, how you managed these
2. **Applicant's Statement of Professional Responsibility (see pg. 16).** This should be signed and dated immediately prior to application submission.

Mentor Required Documents

Each mentor must complete the required written documentation (**each letter must include mentors signature, credentials and date signed**). A joint evaluation letter signed by primary and secondary mentors may be submitted, to include each mentors signature, credentials and date signed.

1. **Mentor's Evaluation of Mentorship Experience:** An evaluation letter that includes a description under each bolded heading:
 - **Contact:** Description of regular contacts with mentee (at least monthly is recommended)
 - **Summary** of discussion(s) or observation(s) regarding case consultation, Healing Touch practice, professionalism, Code of Ethics and Standards and Scope of Practice, and self-care practice
 - **Development of mentee as a Healing Touch Practitioner:** Development noted in applicant during mentorship

- **Healing Touch Practice and Clinical Skills**
 - Observations about applicant's current level of Healing Touch practice and clinical skills
 - Activities the mentee used to improve their practice or clinical skills during mentorship
 - Summary of discussions regarding energetic patterns, clinical applications, advanced healer preparation, and healing presence.

2. **Mentor's Statement of Recommendation:** This should be signed and dated immediately prior to application submission (see pg. 17). A separate mentor statement of recommendation is to be submitted by each mentor.

Criterion 5: Educational Experiences

Describe educational experiences that have assisted you in your development as a Healing Touch Practitioner. A combination of 15 books, tapes, and/or conferences attended is required. The majority must be books.

Purpose:

To provide continued understanding and development of concepts related to holistic health care and your development as a healer.

Action/Evidence Required:

Educational experience reports with reflective statements are required for each category below. A paragraph report of approximately 200 words, single-spaced, is required for each educational experience. Include 2 or more reports per page.

Index: Include an index of the educational experiences using the categories listed below. At least one report must be submitted for each of the categories below. The report may be based on a book, audio recording, video recording, workshop, or conference. Place your report under the related **Bold** type category heading.

- **Healing Touch**
- **Energy Medicine/Holism**
- **Ethics**
- **Quantum Physics**
- **Spiritual Development**
- **Personal/Professional Development**
- **Journaling**

Please put the **headings** of the following required items in **bold** type:

- **Report/Reflective Statements** are to include:
 - **Full title**, author, publisher, and date of publication.
 - For conferences, include number of hours, dates, conference title, location, and instructor. Multiple presentations may be needed to accumulate 6 hours of presentation.
 - The time/experience needed for non-book experiences is a combine total of at least 6 hours.
 - Audio and video recordings, webinars, workshops, and conference sessions may be combined to achieve the 6 hours required for each experience.
 - **Concepts:** A description of one or more concepts presented.
 - **Reflection:** Describe the following:
 - Whether a theory or idea presented is sound, or in what situation it is applicable
 - How the material might be incorporated into your Healing Touch practice or personal life
 - How the material stimulates the development of new ideas or promotes your creativity
 - **Recommendations** you would make to others about this educational experience.

Criterion 6: Case Study

Provide two (2) descriptive case studies of in-depth Healing Touch work.

Each case study must be with one unique patient.

At least one case study must include a session(s) that involve Advanced Healer Preparation and techniques taught in Course 3.

Purpose:

To reflect the quality of your current Healing Touch practice and your ability to manage a case. To provide evidence of your competency and caring as a Healing Touch Practitioner.

Action/Evidence Required:

Submit a descriptive case study (narrative form) of in-depth work with one patient with whom you worked **after completion of Course 4**. The case study should represent your competency and ability to manage a patient's care.

Format (for each case study):

Guided by the Framework for a Healing Touch session- include a detailed description of a minimum of 3 and no more than 5 individual sessions with a patient. Additional sessions beyond the 5 described should be summarized. Each case study must not exceed 10 pages, typed, double-spaced. Do not identify the patient by name. Each of the 3-5 sessions reviewed for the case studies must include the following information, using the headings in **bold** type:

- **Date and length of session.**
- **Practitioner Preparation:** Describe how you prepared as a practitioner prior to the treatment.
- **Assessment:**
 - **Initial Intake** (for first session only): Description of the patient's background and relevant information about the current situation from a holistic perspective.
 - **Update:** Subsequent sessions are to include updated information.
 - **Energetic Assessment:** Provide information related to the patient's energy system such as a description of pendulum assessment, hand scan, and/or other sensory assessment.
- **Problem Identification:** Brief descriptive statement of patient's presenting issues.
- **Mutual Goals:** Description of goals that are clearly mutually agreed upon by you and your patient. Describe the plan for achieving and evaluating the desired goals. The plan may include the anticipated number and frequency of treatments.
- **Planning:** For each goal identified, describe the Healing Touch technique or set of techniques used and provide a rational basis for implementation in the present circumstance and reasons for selection of the technique(s).
- **Intervention:** Describe the Healing Touch technique(s) used. Please **bold** type the **name of each technique**. Describe why a technique was selected based on overall goals, patient's symptoms, and energetic evaluation. Techniques are to be implemented in accordance with the HTI Healing Touch Certificate Program. A description of the steps for each technique is not required. Describe energetic findings experienced during the session and for each intervention.
 - The focus of the case studies must be on Healing Touch. Non-Healing Touch modalities are not to be used.
 - **Energetic Re-Assessment:** Provide information related to the patient's energy system such as pendulum assessment, hand scan, and/or other sensory assessment. Refer to pre-treatment energetic assessment findings and note any changes that have occurred.
 - **Ground and Release:** Describe what is done to bring the patient's awareness back to the present moment and to release from the patient's energy field.
- **Evaluation:** Description of the patient's response/progress related to the mutual goals. Identify self-care instructions/referrals and homework given to the patient.

The **Final Summary** of each case study is to include:

- **Final Evaluation:** Description of the patient's progress for each initial goal and/or any additional mutual goals.
- **Discharge Planning:** Description of mutual plans for discharge. Identify ways you have prepared the patient for discharge and suggestions made to the patient for continuity of holistic care beyond your work with them. The plan may involve continuing to work toward attainment of goals set during the case study, previous teaching or other areas for healing, or maintenance of wellness and self-care.
- **Referrals:** Description of referrals, when appropriate, made for the safety and enhancement of the patient's health and well-being. If a referral was not made, address the reason(s).

Criterion 7: Self-Study and Established Practice of Healing Touch

Provide a statement of purpose or intent relating to your development, growth, and practice as a Healing Touch Practitioner following completion of the HTI Healing Touch Certificate Program. A practice that involves regular Healing Touch activities and treatments is important.

Purpose:

To demonstrate the scope of your Healing Touch practice and personal growth and development as a healer.

Action/Evidence Required:

Submit one to two pages, single-spaced, relating to your development, growth, and practice of Healing Touch. Each of the items below must be addressed.

Please put the **headings** of the following required items in **bold** type:

- **Personal Assessment:** Reflect on your current level of development as a healer.
- **Current Practice:** Describe your current Healing Touch work and/or practice including the following:
 - Setting and location in which you practice
 - Average number of patients for which you have provided Healing Touch (average per week or month)
 - Average number of sessions per patient
 - Types of patients (age range and conditions presented)
- **Plans:** Plans for further development of your Healing Touch practice.
- **Impact:** Describe the relationship and direct or indirect impact your Healing Touch work has on the surrounding local community, broader society, and/or the world.
- **Personal Development:** Plans for continuing personal and professional development.
- **Self-Care:** Current self-care activities and plans for further self-care practice.

Application for Certification as a Healing Touch Practitioner

Date of Submission _____ Language (if other than English) _____

Name _____
Last First MI

Credentials _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Home Phone _____ Cell Phone _____

Home E-mail _____ Work E-mail _____

HBB Member Yes No

My application includes, in order, the following materials.
(Use this as a final checklist and submit with your application packet.)

Criterion 1: Completion of Course Work

- _____ Copy of HBB Certificate of Course Completion obtained after completion of all course work.
- _____ Signed HTI Certified Healing Touch Course 5 Instructor's Recommendation and Student Solutions Form, as needed.

Criterion 2: Professional Résumé, including a listing of all Healing Touch course work.

- _____ Professional Résumé

Criterion 3: Healing Modalities

- _____ Reflective statements for 10 modalities, and include an Index

Criterion 4: Mentorship

- _____ Applicant's Evaluation of Mentorship Experience Letter – signed with credentials and dated (primary and secondary mentors, if applicable)
- _____ Applicant's signed Statement of Professional Responsibility form (pg. 16)
- _____ Mentor's Evaluation of Mentorship Experience Letter – signed with credentials and dated (primary and secondary mentors, if applicable)
- _____ Mentor's signed Statement of Recommendation form (pg. 17) (primary and secondary mentors, if applicable)

Criterion 5: Educational Experiences

_____ Reflective statement of 15 books, audio/video recordings, workshops, and/or conferences, and include an Index

Criterion 6: Case Studies

_____ Two (2) descriptive case studies in narrative form reflecting in-depth work with two patients

Criterion 7: Self-Study and Established Practice of Healing Touch

_____ Statement describing development, growth, and practice as a Healing Touch Practitioner

HTI Healing Touch Certificate Program

Self-Evaluation and Professional Development

Course 5 Instructor's Recommendation

Applicant's Name _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____ E-mail _____

Preferred Phone _____ Work Phone _____

Recommendation for Certification

I recommend _____ apply for certification as a Healing Touch Practitioner, having completed all course work and demonstrating an active Healing Touch practice.

Instructor _____
(Signature & Credentials)

Printed Name: _____

Date: _____

NOTE: This recommendation form is to be completed by the Self-Evaluation and Professional Development (Course 5) Instructor and must be submitted with your Healing Touch certification application to meet Criterion 1.

Applicant's Statement of Professional Responsibility

Recognizing there are many areas of subtlety that cannot be established by written materials alone, you are asked to attest to the truth of the following statements.

- Yes No I can demonstrate and use each of the techniques taught in the HTI Healing Touch Certificate Program courses.
- Yes No The case study is representative of my level of understanding and competency, and is an example of my current Healing Touch practice.
- Yes No I take personal responsibility for clarifying and interpreting the content and scope of Healing Touch, and I maintain confidentiality of my healing activities and the documentation of all care provided.
- Yes No I have read and attest that my practice adheres to the HTI Code of Ethics and Standards and Scope of Practice Statement as published by Healing Beyond Borders.
- Yes No I take responsibility to obtain and maintain appropriate legal credentials or qualifications necessary to touch the human body as required in my state or geographical area.
- Yes No I attest the above statements are true.

_____ Date _____
Signature of Applicant

Clearly Printed Name of Applicant

Mentor's Statement of Recommendation

I have worked with _____ from _____ to _____

Mentor's Name and Credentials _____

Dates of Certification and Renewal _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

E-mail _____ Home Phone _____

The Certification Board of Healing Beyond Borders requests your assistance in determining the readiness of the applicant for Certification as a Healing Touch Practitioner. **In addition to a letter describing the overall mentorship process with this applicant**, please consider the following statements and indicate if you have seen evidence that the applicant meets the following criteria:

1. Has the mentorship process continued for a minimum of one year following the applicant's completion of Course 4 in the approved Healing Touch Certificate Program? Yes No
2. Has the applicant demonstrated that she/he is an experienced, competent practitioner of Healing Touch? Yes No
3. Does the applicant adhere to the HTI Code of Ethics and Standards and Scope of Practice? Yes No
4. I would refer patients to this practitioner. Yes No
5. I recommend this applicant for certification as a Healing Touch Practitioner. Yes No

Supporting Remarks ("No" responses require a brief explanation; "Yes" responses may be supported if desired): _____

_____ Date _____

Signature of Mentor (Include Credentials)

Appendix 1

Application Review Information

Feedback to Applicants

Applicants receive a letter indicating the status/outcome of the evaluation.

Approved: The applicant will receive a letter of approval from the Healing Beyond Borders Certification Board and a Certificate of Certification as an HTI Healing Touch Practitioner (CHTP).

Approval Pending: This status indicates action required by the applicant to meet the certification requirements and is accompanied by a “feedback report.” This report provides direction for submission of additional material(s) as requested by the reviewers. Applicants have 30 days to submit updated materials. If the resubmitted materials meet the criteria, the application will be designated as “Approved.” If the materials do not meet the criteria, the application may be designated “Not Approved.”

Not Approved: This status results from a consensus of the Certification Board. The letter will clearly indicate the reasons and rationale for a “Not Approved” status. An appeal process is available for those receiving a “Not Approved” status and is outlined in Appendix 1 of this document.

Grievance Procedure

If an applicant receives a “Not Approved” status/outcome and disagrees with this decision, they may appeal in writing to the Healing Beyond Borders Certification Board within 60 days of notification.

The Healing Beyond Borders Certification Board will consider the appeal and respond to the applicant within six (6) weeks of receiving the appeal request. The response of the Certification Board to the appeal will either confirm the “Not Approved” status/outcome or will modify the status as warranted.

The applicant must send 4 copies of the original packet and letter of appeal to:

Healing Beyond Borders – Certification Board
7112 W. Jefferson Ave., Suite 301
Lakewood, CO 80235

Appeal – Practitioner Certification

Appendix 2

Competencies of a Certified Healing Touch Practitioner

These competencies reflect the expected level of achievement of a Certified Healing Touch Practitioner (CHTP). The CHTP uses the Healing Touch process to influence the human energy system and, thereby, affect physical, emotional, mental, social, environmental, and/or spiritual health and healing. The competencies are performed from a heart-centered perspective and for the highest good of the patient.

The Certified Healing Touch Practitioner is able to:

1. Perform any Healing Touch technique from the standard HTI Healing Touch Certificate Program in a safe and competent manner.
2. Effectively manage a patient case from admission through discharge.
3. Articulate the rationale for treatment and engage patients in the decision-making process.
4. Facilitate healing processes by using energy assessments, recognition of the patient's needs, and knowledge of factors affecting health and energy healing.
5. Communicate effectively with patients and other health care providers and make appropriate consultations and referrals when indicated.
6. Maintain confidentiality in documented records and other modes of communication.
7. Conduct themselves in an ethical and professional manner with accountability and responsibility within the Standards of Practice for Healing Touch, personal credentials, and the practitioner role.
8. Integrate a holistic understanding of human beings in a Healing Touch practice, recognizing the role of other integrative healing modalities and respecting patients' beliefs and practices.
9. Engage in ongoing study and development of the self as a healer.
10. Enact a leadership role with accurate and appropriate representation of Healing Touch and serve as a resource for the community.

Appendix 3

HTI Healing Touch Certificate Program Course Descriptions, Content, and Learner Objectives

Healing Touch Description

Healing Touch is a relaxing, nurturing, heart-centered energy therapy that uses gentle, intentional touch that assists in balancing physical, emotional, mental, and spiritual well-being. Classified by the National Institutes of Health as a biofield therapy and nursing intervention, Healing Touch may be used to address the North American Nursing Diagnosis Association (NANDA-1) diagnosis of “Imbalanced Energy Field.” Healing Touch is a collection of standardized, noninvasive techniques that clear, energize, and balance the human and environmental energy fields. Healing Touch assists in creating a coherent and balanced energy field, supporting one’s inherent ability to heal. It is safe for all ages and works in harmony with, is complementary to, and may be integrated with standard medical care.

Participants learn about the research basis that suggests Healing Touch is beneficial in calming anxiety and reducing symptoms of depression, decreasing pain, strengthening the immune system, enhancing recovery from surgery, complementing care for neck and spine problems, deepening spiritual connection, supporting cancer care, creating a sense of well-being, easing acute and chronic conditions, and supporting resiliency in health care providers.

HTI Healing Touch Certificate Program Description

The HTI Healing Touch Certificate Program is a continuing education program in energy therapy that is taught throughout the world. Well-grounded in nursing and scientific process, this transcultural course of study inspires an in-depth exploration of the human energy system and ancient healing traditions, as well as the qualities of therapeutic relationship, healing presence, and compassionate care within an energetic framework. Participants learn about the scientific basis and evidenced-based practice that underlies this energy therapy and apply the unique theories and principles of holistic health from an energetic foundation and perspective.

Highly experiential as well as didactic, this exceptional, five-course certificate program moves from introductory to advanced practice, preparing the participant for a critical role in the unfolding field of complementary and integrative health care. The course of study focuses not only upon professional caring for and serving of others, but also upon transformational self-development and caring for oneself.

Over 100 continuing education contact hours eligible towards certification are available for this certificate program. Participants receive a continuing education certificate of attendance upon completion of each course taught by a Certified Healing Touch Instructor and receive a Certificate of Course Completion issued through Healing Beyond Borders, upon meeting all necessary practicum requirements. The graduate of this certificate program is then eligible to apply for credentialing as a Certified Healing Touch Practitioner.

Intended Audience

The HTI Healing Touch Certificate Program is intended for registered nurses, licensed health care professionals of other disciplines, body-oriented therapists, psychotherapists and counselors, or individuals and lay persons who desire an in-depth understanding of healing work that uses energy-based concepts and approaches. Becoming a Certified Healing Touch Practitioner is an appropriate goal for those who wish to establish a Healing Touch practice or incorporate Healing Touch as a major focus within an existing professional practice.

Certification as a Healing Touch Practitioner

Credentialing as a Certified Healing Touch Practitioner is available to those who meet eligibility requirements and have successfully completed the entire HTI Healing Touch Certificate Program. It is expected that prior preparation and work experience have contributed to the practitioner's awareness and application of confidentiality, legal responsibility for hands-on practice, biomedical ethics, standards and scope of practice, therapeutic relationship, and civic involvement. Healing Beyond Borders administers certification through a separate review by a Certification Board using standardized criteria. Intended for the professional practitioner, certification acknowledges learning experiences and demonstration of competence as a Healing Touch Practitioner. The Certification Board does not license the practice of an individual or assume any legal responsibility for her/his practice.

HTI Healing Touch Certificate Program

FOUNDATIONS OF HEALING TOUCH

Course Description

The theoretical concepts that underlie holistic healthcare practices are explored along with how these concepts relate to the core values which guide the practice of Healing Touch. Healing Touch techniques used in the etheric field are acquired along with an understanding of how these techniques interface with the human biofield.

Course Objectives

The learner will be able to:

1. Explore qualities and self-care needs of a Healing Touch Practitioner.
2. Discuss the facets of Healing Touch and correlate techniques that support physical, mental, emotional, and/or spiritual healing.
3. Demonstrate Healing Presence: the ability to remain grounded, present, and heart-centered.
4. Describe personal perceptions of subtle energy/heart-centeredness.
5. Apply the Healing Touch Framework to a variety of energy interventions.
6. Evaluate the seven energy centers (chakras) and related energy layers that surround the body.
7. Describe rationale with use of specific Healing Touch techniques.
8. Discuss the Healing Beyond Borders Code of Ethics, Standards of Practice and Scope of Practice required of a beginning Healing Touch student.

Course Content

- Holistic and energetic foundations of healing
- Fostering healing presence
- Core Values and development of the healer
- Principles and assessment of the human energy system
- Framework for a Healing Touch session
- Energetic Interventions: Chakra Connection, Chakra Spread, Field Repatterning, Laser(s), Modified Mesmeric Clearing, Noel's Mind Clearing, and Scudder Meridian Clearing
- Clinical Applications: Pain and headache management
- Professional ethics and legal considerations

ENERGETIC PATTERNING AND CLINICAL APPLICATIONS

Pre-requisite, completion of Foundations of Healing Touch

Course Description

The skill of completing an intake interview that identifies patterns of behaviors for which Healing Touch techniques may be useful in assisting a patient to re-pattern their energy field is acquired. Healing Touch techniques learned in the foundation course are integrated into applications that assist in re-patterning spinal health. The appreciation of Healing Touch progresses to a deeper level with the acquisition of a technique to assist the patient in expanding their heart energy.

Course Objectives

The learner will be able to:

1. Demonstrate the ability to remain grounded, present, and heart-centered while working in the energy field.
2. Conduct an intake interview with a plan toward intervention.
3. Recognize that previous experiences may have an impact on physical, emotional, mental and spiritual health.
4. Assess the status of the chakras and biofield.
5. Document the process of re-patterning and balancing a patient's biofield.
6. Apply techniques that support the health and comfort of the back.
7. Describe how the Healing Beyond Borders Code of Ethics, Standards of Practice and Scope of Practice relate to their developing as a Healing Touch practitioner.

Course Content

- Creating and supporting a healing environment
- Assessment skills and energetic patterning
- Clinical applications of energetic interventions
- Energetic Interventions: Chakra Connection, Glymphatic System Support, Hopi Technique, Spinal Flush, and Spiral Meditation
- Documentation of clinical findings
- Professional ethics and legal considerations of a developing healer

ADVANCED HEALER PREPARATION

Pre-requisite, completion of Energetic Patterning and Clinical Applications

Course Description

Methods of raising one's energetic vibration are acquired that facilitate the student's application of techniques that can be utilized with upper layers of the biofield.

Course Objectives

The learner will be able to:

1. Elevate the personal energy vibration to support upper level work.
2. Apply clearing, balancing, and energizing techniques to the upper energetic layers.
3. Deliver in-depth techniques to support spinal health.
4. Practice an Advanced Healing Session.
5. Identify how the Healing Beyond Borders Code of Ethics, Standards of Practice and Scope of Practice required of an advancing Healing Touch practitioner relates to their practice.

Course Content

- Deepening assessment of the human energy system
- Advanced healer preparation to elevate personal energetic vibration: Core Star Expansion, Hara Alignment, and Spinning Chakras
- Advanced healing session and its clinical application and rationale
- Energetic Interventions: Celestial and Ketheric Template Repatterning, Chelation, Deep Auric Repatterning, Etheric Template Repatterning, Fifth Layer Healing, Glymphatic System Support, Lymphatic Clearing, and Spinal Clearing
- Advanced ethical application and use of high sense perception

CASE MANAGEMENT AND PROFESSIONAL PRACTICE

Pre-requisite, completion of Advanced Healer Preparation

Course Description

To align with the responsibilities of professional practice, this course is a practicum in which case management is implemented and multiple Healing Touch sessions are delivered over a period of time.

Course Objectives

The learner will be able to:

1. Apply a meditation (Etheric Vitality) to clear and raise the personal energetic vibration.
2. Create sequential Healing Touch sessions appropriate to a patient's presentation.
3. Explore a variety of methods for practicing Healing Touch.
4. Work with other health care providers in a professional manner.
5. Describe the practicum process.
6. Identify how the Healing Beyond Borders Code of Ethics, Standards of Practice and Scope of Practice required of an advanced Healing Touch practitioner correlates to issues in their practice.

Course Content

- Professional practice issues
- Professional legal and ethical issues
- Case management using the framework for a Healing Touch session
- Case study presentation to professional peers
- In-depth study of clinical applications
- Advanced healer preparation: Etheric Vitality Meditation
- Preparation for mentorship and practicum
- Advanced healer development

SELF-EVALUATION AND PROFESSIONAL DEVELOPMENT

Pre-requisite, completion of Case Management and Professional Practice

Course Description

Completed mentorship activities are reviewed and evaluated to assist the students in identifying activities that can help them to grow in their professional practitioner role.

Course Objectives

The learner will be able to:

1. Analyze personal strengths, challenges and growth opportunities related to the practitioner role.
2. Evolve in the role from Healing Touch Student to Practitioner.
3. Share specific practicum learning to enhance personal and professional growth.
4. Collaborate in the review of clinical case studies.
5. Correlate research studies to case situations and choices of treatment.
6. Present clinical cases to groups of professional care providers.
7. Incorporate in their professional practice the Healing Beyond Borders Code of Ethics, Standards of Practice and Scope of Practice required of a Healing Touch practitioner.

Course Content

- Case study presentation
- Clinical application refinement
- Presentation and evaluation of practicum experiences, including healing modalities, reading program, mentorship, and community service
- Identification of strengths and growth opportunities for the Healing Touch practitioner

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