

Betonica Medical Herbalist Training Programme

Course Prospectus

The Betonica medical herbalist training programme is a four year course combining traditional knowledge and modern science.

The programme syllabus covers a wide range of topics, from materia medica, botany and pharmacology, to anatomy and physiology and clinical skills (to name just a few). We are passionate about community clinics and education, organic growing and field-to-dispensary medicine.

This four year Diploma programme (on completion of the final clinical exam), will allow you to practice as a medical herbalist with full insurance and the ability to join a professional association* (if you so wish).

Main aim

To create an alternative learning experience in herbal medicine, combining community, sustainability and organic principles.

Who can take the course?

The course is open to anyone. While there are no specific prerequisites, there may be additional learning tasks for individuals who need further skills to enable them to complete the course. **Please note that a reasonable level of fitness is required for this course;** if you have reduced mobility but would still like to take the course, please get in touch.

Moderate knowledge of basic IT, including word processing, internet searching etc, will be required. You will also need access to a good internet connection.

When does the course begin?

The course runs on an academic year from September until June with assessments in May.

Where does the course take place?

The course takes place at a variety of locations but generally within 20 miles of Wellington, Somerset.

Some of the programme will be taught outside, with an emphasis on plant ID and hands-on growing, harvesting and medicine making. There will also be a chance to visit herb gardens and herbal suppliers to find out more about how herbal medicines are made.

Elder Farm, Greenham, Wellington, Devon, TA21 0JY

Elder Farm is a five-and-a-half acre organic farm in Devon which is part of the Ecological Land Co-operative's first site in the UK. Elder Farm is run by Helen and Stuart Kearney, who have a background in permaculture, cooperatives, organic growing and outdoor education. Helen is a medical herbalist with practices in two nearby towns. They use their plot to grow herbs to make into medicines, soap and other herbal products, and edible and cut flowers. They also offer a range of learning opportunities for visitors from the UK and abroad.

“Our goal is to reconnect people to sustainable growing methods, and to the amazing healing power of plants.” – Helen Kearney



Tracebridge Sourdough, Rose Cottage, Tracebridge, Wellington, Somerset, TA21 0HG

Tracebridge Sourdough has a beautiful workshop space called the paradise room which is self-contained with its own kitchen and wood burner, nestled in native woodland.

This is where our home herbalist course takes place.

The WHERE Active Living Centre, Wellington, Somerset is used for most of our classes.





Blackdown Healthy Living centre, Hemyock, Devon is used for many of our classes and clinics.

Accommodation

We will also provide everyone with a list of local B&Bs and hotels.

Refreshments

Tea/coffee and herbal tea will be provided at all seminars (please note there may not be facilities for this in some clinic locations).

All food brought with you must be completely nut free (and products such as hand creams etc), due to a severe nut allergy.

Transport

Free pickups will be available at the start and end of seminar weekends at **Elder Farm only** (to Tiverton Parkway train station). The WHERE Centre in Wellington is accessible by public transport and a list of transport options will be provided when joining the course. Lift sharing is encouraged.

Outline of study

The programme runs on an academic year from **September to June**, with assessments in May. In the first year there are fewer face-to-face study days. In the second, third and fourth years the seminar days are **one weekend per month**. Clinical hours will be completed separately, but equate to one day per month in year two, and two days per month in years three and four.

Self-directed study

The course consists of 75 days of seminars, and approximately 269 days of self-directed study. That equates to approximately 12 - 20 hours per week **minimum** study. Self-directed study is an important part of the learning journey as it prepares herbalists for solitary practice.

	Year 1	Year 2	Year 3	Year 4
Seminar days	15	21	21	18
Clinic days	0	14	29	29
Self-study days	67	67	67	67

Assessment process

Assessment will be in various forms – coursework, essays, short answer tests and practical examinations will form the majority of the assessments. There will also be a final project and final clinical examination (FCE) at the end of the four year Diploma course.

Successful completed of the FCE will allow the herbalist to qualify, gain insurance and join a professional association* if they so wish.

Assessments and self-development are monitored through a portfolio which will be assessed on a monthly basis by a personal course tutor. Some assignments and projects will be externally assessed to ensure consistency in marking and that learning goals have been met. The external assessor can change a mark and their final decision stands.

Professional associations

Please note, not all herbal medicine professional associations will accept herbalists trained to a Diploma level.

The following professional herbal medicine associations accept applications from non accredited course graduates:

- Unified Register of Herbal Practitioners (URHP) – UK
- Irish Register of Herbalists (IRH) – International
- American Herbalist Guild (AHG) – International
- Association of Master Herbalists (AMH) – UK

Grading

Some assessments will be graded pass/fail, for example clinical examinations, but most assignments, essays and exams are graded on a percentage. The pass mark for each year increases from 40% in year 1, to 50% in year 2, and 60% in year's 3 and 4.

Fees

2019 - 2020	Full Fee	Monthly fee (£100 deposit and then 10 monthly payments)
Year one (no clinical hours)	£2100	£200 (a month)
Year two (100 clinical hours)	£2700	£260 (a month)
Year three** (200 clinical hours)	£3120	£302 (a month)
Year four** (200 clinical hours)	£3120	£302 (a month)

*Please note fees will increase each year to ensure we cover our costs.

** In years three and four the number of clinic days double – this means an increase in fees.

This course is non-profit and the fees are kept to an absolute minimum. They are for room hire, and the cost of teaching (clinical training) and materials only. Any additional money will go towards a bursary fund and the Betonica Community Clinics.

A sliding scale of fees, payment plan and bursary are available on a case-by-case basis.

Deposit

A non refundable deposit of £100 is required to confirm your place as places are limited. Also, a deposit is required each year to secure your place in the next academic year; this is usually paid in July.

Clinical observation and practice

The minimum requirement to qualify as a medical herbalist is 500 clinical hours (72 days). You can begin accruing clinical hours from your second year.

This is an example of how clinical hours can be completed:

- 100 hours can be completed with a local herbalist
- 100 hours can be completed at a participating herbal clinic
- 215 hours can be completed at the Betonica community clinics
- 15 hours can be completed observing a primary care setting
- 70 hours can be completed in a first aid environment

Cost of clinical training

The cost of attending herbal clinics is £30 - £40* per day, and is **included** in the fees. This includes attending private herbal clinics with local herbalists, as well as the Betonica community clinics and training clinics across the UK and Ireland.

Additional insurance is required to undertake clinical training. This must be arranged between yourself and Balens' – the cost is approximately £26 per year.

In addition, a DBS (Disclosing and Barring Service – previously CRB) check within the last three years will also be required.

Please note: Some clinical equipment will be required – a white lab coat, stethoscope and sphygmomanometer will be the minimum requirement from year two.

Betonica community clinics



The Betonica community clinics provide affordable natural healthcare to the community. The clinics also provide education on healthy eating, exercise, mental health and much more.

- Tiverton clinic – Wednesdays and Fridays
- Hemyock clinic – Thursday before seminar weekends

About the lecturers

All lecturers are experts in their field; the majority are practising medical herbalists but some guest lecturers will be brought in to teach specific topics.

Helen Kearney MNIMH



Helen has a BSc (Hons) in Herbal Medicine and has a background in permaculture, first aid and teaching gardening and growing.

Helen trained for five years in Herbal Medicine in London gaining experience in the dermatology department of Whipps Cross Hospital, Middlesex University Archway Clinic, Westminster University Herbal Medicine Clinic and the University of East London Clinic. She continues to keep up to date with the latest findings on herbal medicine, attending seminars and lectures as well as keeping a connection with the plants she uses as medicine by making many of her own tinctures, creams and ointments, and offering herb walks and teaching workshops.

Helen has gained a lot of experience in acute medicine (both herbal and orthodox) through her work as a festival first aider and community first responder. Helen has also worked in the Calais 'jungle' as part of a team of medics.

Helen is an excellent teacher and will be introducing the world of growing and harvesting medicinal plants and trees, as well as telling a tale or two!

Laura Carpenter MNIMH



Laura Carpenter gained a BSc (Hons) in Herbal Medicine from the University of East London and is a member of the National Institute of Medical Herbalists (NIMH), the regulating body for medical herbalists, established in 1864.

Laura undertook the degree part time over five years, and completed her clinical training at the Stratford Herbal Medicine clinic and the Dermatology department of Whipps Cross Hospital in London, completing over 600 hours of clinical training. In 2013 NIMH awarded her the Dorothy Carroll Award for top final clinical examination.

Laura went on to become a member of the Post Graduate Training board for NIMH, ensuring continuing professional standards were met for all NIMH registered medical herbalists, and she became Editor of Herbal Thymes magazine in May 2014.

Laura became the Director for Communication for NIMH in January 2015, taking a temporary seat on the NIMH council until September 2015. She then set up Tilia Magazine, a professional magazine for herbalists in the UK and Ireland, in December 2015, and is the Chief Editor.

Prior to becoming a herbalist Laura worked in the learning and development field in the public sector, and developed an award-winning national training programme.

Laura practices from her home clinic in Wellington, Somerset. She runs herbal medicine workshops, herb walks, and talks to local community groups on different aspects of health and herbal medicine.

Laura will be teaching various subjects throughout the course and is the course tutor and leader.

Dawn Ireland CPP URHP



Dawn Ireland is a practicing medical herbalist in Torbay, Devon, and a member of the URHP and CPP. She has written articles for a number of magazines on herb related subjects.

Apart from running her practice in Torquay, Devon, she teaches at the local adult education college, and runs a business creating natural vegan and herbal skincare products established in 2003 called Green Wyse.

Dawn promotes herbalism by offering talks, herb walks and workshops to various groups in the local area.

Dawn will be teaching the practical pharmacy sections of the course.

Pamela Spence MNIMH



Pamela is a medical herbalist, writer and educator based in Scotland. Following a successful career in film and television production, she took her BSc in Herbal Medicine at the prestigious Scottish School of Herbal Medicine and has run a busy practice ever since. She owns The Carrick Clinic, a multi-disciplinary health clinic, with her husband and together with a team of therapists they have built a reputation for supportive, empathic, integrated healthcare.

Pamela has been a regular contributor to LandLove Magazine and often appears in women's and health magazines as a herbal expert – most recently in an extended interview in OK! Magazine. She has written and presented her own BBC online series on traditional herbal medicine and has made a documentary on life in rural Uganda. She has run workshops in her native Scotland, Italy, Russia, Germany and East Africa on topics ranging from local herbs to women's health. She has also facilitated Seventh Moon ceremonies for expectant mothers, celebrations for girls reaching menarche and Moon Lodges for women of all ages. In formal

education she taught materia medica as a guest lecturer at the Scottish School of Herbal Medicine and is an Associate Academy Educator for the Herbal Academy (New England USA) where she wrote and filmed core material for their professional herbalist training course.

Pamela's knowledge and insight has been used by Napier's, Heath & Heather and Potter's – three of the most respected traditional medicine manufacturers in the UK – to promote their products and ensure compliance with advertising standards. She was recently been invited to join the Henry Potter Advisory Board.



Dr Gemma Wild MNIMH

Gemma Wild is qualified as a medical herbalist and doctor, graduating from Middlesex University with a BSc Hons in Herbal medicine in 2002 and from Bart's and The London School of Medicine and Dentistry with an MBBS in 2008.

She has worked in London and Bristol as a herbalist and in London and Essex as a doctor.

Currently she co-runs a busy chiropractic clinic in Romsey Hampshire where she practises as a herbalist. She has been an external examiner for the final clinical skills examinations at Westminster and Middlesex universities for their BSc and MSc courses for nearly ten years.

Gemma is a member of the National Institute of Medical Herbalists and her role with Betonica will be focussed on teaching clinical skills.

Nadia Corp PhD, MNIMH



Nadia is a practicing medical herbalist and a member of the National Institute of Medical Herbalists. After qualifying from the University of East London in 2012, she set up a small practice in Staffordshire Moorlands on the edge of the Peak District and enjoys making her own herbal medicines from home grown organic and wildcrafted plants to contribute to her dispensary.

She has been involved in research for 25 years. Originally qualifying as a zoologist and conducting field-based research, it was during her time working in Africa, where she was shown Traditional African Medicine and the use of forest-based medicinal plants, that her interest in health grew and culminated in her training to become a medical herbalist. Alongside this, for the past decade Nadia has continued to work as a university based research associate, although swapping to the field of primary health care, mainly focussed on mental health and musculoskeletal conditions. She has previously run a pragmatic GP practice-based trial, but now works as an information specialist within a systematic review team. She is also a member of the Cochrane Information Retrieval Methods Group. Nadia has presented at national and international conferences and published 34 papers in scientific journals including a paper based on her BSc Herbal Medicine dissertation on gout:

Corp N and Pendry B. 2013. The role of Western herbal Medicine in the treatment of gout. *Journal of Herbal Medicine*. (<http://dx.doi.org/10.1016/j.hermed.2013.08.002>)

Angela Seal MNIMH



Angela graduated from the University of London with a joint honours degree in Botany and Zoology. She taught Biology to A-Level for 9 years during which time she developed an interest in health and the healing capacity of the body.

Discovering herbal medicine as a profession in the late eighties was immensely exciting, combining, as it does, all the most fascinating aspects of her subjects. She went on to train with the School of Phytotherapy, winning prizes in both Part 1 and Part 2 exams and then to set up in practice as a member of the NIMH in 1991.

Since then she has continued to practice and to play a part in education, both in schools and colleges and by running herbal workshops and adult education classes.

Gina Webley MNIMH



Gina qualified as a Medical Herbalist in 2013 with BSc (Hons) in Herbal Medicine from the University of East London. She is a member of NIMH and has a practice at West Wickham Chiropractic near Bromley in South London.

Gina has worked as a research scientist and college lecturer for over thirty years. She started her career in research but after 15 years moved into college lecturing. She has taught Physiology and Pathology to students studying for a degree in Biomedical Science. She combines her passion for using herbs in health care with her long experience in teaching.

Lucy Blunden



Lucy graduated from Middlesex University in 2008. She worked as a dispensing herbalist in a shop in North London, giving acute drop-in health advice and dispensing medicines.

Since 2013, she has been working at the training clinic for Middlesex University's Integrative Medicine students. Her role is as dispenser and involves the teaching of dispensing to students in Ayurveda, TCM and WHM. Since 2015, Lucy has also been lecturing on the MSc course at Middlesex teaching Materia Medica, Functional Medicine, herbal history and regulation.

Lucy has been discovering more about local herbs and their medicinal uses and how to create a useful and attractive garden. Lucy loves the experimental side of making medicines and

products.

Lucy moved to a small town in Hertfordshire in 2013 and has been enjoying the less hectic pace away from London.

You can find out more about the tutors on our [website](#).

General course outline

The Betonica Medical Herbalist Training Programme focuses on self-development towards becoming the best medical herbalist you can be, building skills and knowledge in order to become a safe and confident practitioner.

The course is based on core subjects rather than modules. Each year new skills for each core subject are added.

All seminar days are compulsory unless otherwise stated. If you cannot attend a seminar day you may be able to complete work at a separate time, but if that is not possible you would need to attend that seminar day the following year.

External accreditation

The Betonica Medical Herbalist Training Programme is not currently accredited by an external body. The reason for this is that the current cost of such accreditation would push up student fees to such an extent that many students could not afford to attend. You do not need to attend an accredited course in order to join a selection of professional associations or gain insurance and then practice as a medical herbalist.

We work closely with many of the Herbal Medicine Professional bodies and review the possibility of accreditation regularly.

Within Betonica, course assessments are carried out by a team of external assessors (who are also medical herbalists) and the course specification and content is assessed by an independent course assessor.

2018 – 2019 Academic diary example

Year 1	Year 2	Year 3	Year 4
Sat – Sun Sept Introduction to the course Introduction to anatomy and physiology	Fri – Sun Sept Study skills Clinical skills and pharmacy Coastal herb walk	Sat and Sun Sept Anatomy and Physiology Nutrition	Sat and Sun Sept Advanced pharmacology Nutrition
	Sat– Sun Oct Anatomy and physiology Biochemistry	Sat and Sun Oct Clinical skills Differential diagnosis	Sat and Sun Oct Infertility Analysing blood test results
Sat – Sun Nov Herbal first aid Anatomy and physiology	Sat – Sun Nov Materia medica Energetics	Fri, Sat & Sun Nov Herbal therapeutics Business skills Counselling skills	Sat & Sun Nov Dissertation workshop
	Sat – Sun Dec Anatomy and physiology Pathology	Sat & Sun Dec Pathology Phytochemistry	Sat & Sun Dec Clinical skills day Pregnancy, birth and breastfeeding

<p>Sat – Sun Jan</p> <p>Home pharmacy skills</p> <p>Anatomy and physiology</p>	<p>Sat – Sun Jan</p> <p>Research skills</p> <p>Herbal History</p>	<p>Fri, Sat & Sun Jan</p> <p>Anatomy and Physiology assessment</p> <p>Nutrition</p> <p>Ethics</p>	<p>Sat & Sun Jan</p> <p>Pharmacology assessment</p> <p>Business skills</p>
	<p>Sat – Sun Feb</p> <p>Anatomy and physiology</p> <p>Clinical skills</p>	<p>Sat & Sun Feb</p> <p>Clinical skills</p> <p>Pharmacology</p>	<p>Sat & Sun Feb</p> <p>Counselling skills</p> <p>Clinical skills practice day</p>
<p>Sat – Sun Mar</p> <p>Herbal medicine – treating friends and family</p> <p>Anatomy and physiology</p>	<p>Sat – Sun Mar</p> <p>Materia medica</p> <p>Pathology</p>	<p>Sat & Sun Mar</p> <p>Herbal therapeutics</p> <p>Pathology</p>	<p>Sat & Sun Mar</p> <p>Dissertation workshop</p>
<p>Sat & Sun April</p> <p>Materia medica</p> <p>Herbal constituents</p>	<p>Fri - Sun Apr</p> <p>Visit to the Organic Herb Trading Company</p> <p>Phytochemistry</p> <p>Botany</p>	<p>Sat & Sun April</p> <p>Clinical skills</p> <p>Differential diagnosis</p>	<p>Sat - Mon Apr</p> <p>FCE preparation</p> <p>Oncology</p>
<p>Sat and Sun May</p> <p>Anatomy and physiology exam</p> <p>Materia medica exam</p> <p>Botany</p>	<p>Sat 4th – Sun 5th May Assessments</p> <p>Sat 11th – Sun 12th May Assessments</p>	<p>Sat 4th – Sun 5th May Assessments</p> <p>Sat 11th – Sun 12th May Assessments</p>	<p>Sat – Sun May</p> <p>Final assessments (including FCEs)</p>
<p>Fri – Sun June</p> <p>Growing and harvesting</p> <p>Preparing for year 2</p> <p>Beginning clinical training</p>	<p>Fri – Sun June</p> <p>Pathology</p> <p>Research skills</p> <p>Plant ID and botany</p>	<p>Sat and Sun June</p> <p>Pathology</p> <p>Research project</p>	

How to apply

Applying for Year 1

If you'd like to apply to join our first year class in starting in September 2019 please complete the application form at appendix 4 and return it to us via email (info@betonica.co.uk) by **28th June 2019**.

You will find additional guidance on how to complete the form on our [website](#).

Applying for Year 2

If you already have some experience of herbs and feel you would like to start in the second year class, take a look at the prerequisites (see appendix 5).

If you only meet some of the year 2 prerequisites you may be eligible to apply for our fast track programme that runs from June – August. You can find more details [here](#).

If you'd like to apply to join our second year class starting in September 2019 please complete the application form at appendix 4 and return it to us via email (info@betonica.co.uk) by **12/04/19**.

You can find additional guidance on how to complete the application form on our [website](#).

Applying for Year 2 – Via fast track route

The fast track programme is an intensive programme of study which allows people who have not completed all of the standard year 2 prerequisites to enter second year of the course.

Who is eligible?

Anyone can complete this programme as long as they can commit to the following:

- 6 hours of home study per week from 3rd June until 31st August 19.
- Commit to the following dates – 24th June – 28th June 19 and 14th July 19.
- Commit financially – this programme costs £1050 (we have a payment plan available to help spread the cost).

What does the fast track programme consist of?

- Attending the Elder Farm Summer school from 24th June – 28th June 19. This will cover the basics of the first year of the course and you will be set additional tasks during that week.
- Attending the year 2 cross over day on 14th July 19 at Elder Farm.

- Completing the Anatomy and Physiology module with Betonica (or an equivalent level 3 course) by 31st August 19.
- Completing the Materia medica (study of 50 herbs) module with Betonica by 31st August 19.

How to apply

To apply for the fast track programme you must complete the application form (at appendix 4) and return it to us via email (info@betonica.co.uk) by **12/04/19**.

For guidance on how to complete the application form please see our [website](#).

Please note: if you have not had an email from us as a receipt to your application then we have not received it.

Appendix 1 - Course specification 2018

Please note these are reviewed and updated each year. Do not use these to buy course books as they are subject to change.

Year 1 course specification 2018

Core subject: Botany, growing and harvesting
Pre-requisite: None
Main aim: To provide grounding in botany, growing and harvesting, moving from home to professional use.
Main topics of study: <ul style="list-style-type: none"> • Taxonomy, classification, naming, families and species. • Plant morphology and anatomy, roots and stems, leaves, flowers, fruits and seeds • Botanical terms used to describe herbs • Conservation and ethnobotanical issues as they relate to herbal medicine • Quality assurance, source and growing environment, harvesting, processing, storage and packaging of herbs
Learning outcomes for the year: <ul style="list-style-type: none"> • Be able to demonstrate knowledge and understand the classification of the plant kingdom and nomenclature of species • be able to use a key to identify medicinal plant species • Show understanding of how medicinal plant families are classified and describe some of their unique characteristics. • Show an understanding of issues surrounding the plant conservation, sustainability of medicinal plants and native substitutions • Be able to state the correct botanical names as well as common names of the thirty main medicinal plants covered in Materia medica in year one
Teaching/learning methods/strategies used to enable the achievement of learning outcomes: <ul style="list-style-type: none"> • Practical lectures looking at plant ID, both of growing plants and harvested samples. • Background reading and research on the subject, including online videos. • Field trip to working organic herb farm and dispensary.
Assessment methods: <ul style="list-style-type: none"> • Observational assessment through herb walks and botany sessions • Short answer questions • Herb garden plan and presentation • 4 and 12 week observations from herb growing • Practical assessment of herb growing
Indicative reading: Botany in a day by Thomas Elpel Herbs by Jekka McVicar The Wild Flower Key by Francis Rose Jekka's Complete Herb Book (2009) by Jekka McVicar
Additional reading Collins Complete Guide – British Wild Flowers by Paul Sterry Wild Food by Roger Phillips Trees of Britain and Ireland by Edward Milner Poisonous Plants in Great Britain by Fred Gillam Poisonous plants: A guide for parents & childcare providers by Elizabeth Dauncey Poisonous plants and fungi by Marion Cooper and Anthony Johnson

<p>Core subject: Anatomy and physiology</p>
<p>Pre-requisite: None</p>
<p>Main aim: To provide a basic understanding of human anatomy and physiology.</p>
<p>Main topics of study:</p> <ul style="list-style-type: none"> • Anatomical planes, movement and surface anatomy • Basic cell structure and function • Introduction to the structure and function of respiratory system • Introduction to the structure and function of the lymphatic system • Introduction to the immune system • Introduction to the structure and function of the nervous system • Introduction to the structure and function of the digestive system • Introduction to the structure and function of the urinary system • Introduction to the structure and function of the endocrine system • Introduction to the structure and function of the circulatory system • Introduction to the structure and function of muscles and bones • Introduction to the structure and function of the skin • Introduction to the structure and function of the ears, eyes, nose, throat and teeth
<p>Learning outcomes for the year:</p> <ul style="list-style-type: none"> • Understand anatomical structures and planes, and movement • Describe respiration and circulation • Identify anatomical structure of the heart • Identify the basic structures in the skin • Identify the main bones of the body • Identify the location of the main endocrine glands
<p>Teaching/learning methods/strategies used to enable the achievement of learning outcomes:</p> <ul style="list-style-type: none"> • Reading and online videos with short answer questions and diagrams • Online multiple choice quizzes
<p>Assessment methods:</p> <ul style="list-style-type: none"> • Short answer questions • Labelled diagrams • Online multiple choice quizzes
<p>Indicative reading: An introductory guide to Anatomy and Physiology (2015) by Louise Tucker</p>
<p>Additional reading The anatomy colouring book by Kapit and Elson Ross and Wilson Anatomy and Physiology in Health and Illness By Waugh and Grant Holistic Anatomy by Pip Waller</p>

Core subject: Phytochemistry and pharmacology
Pre-requisite: None
Main aim: To introduce the subject of phytochemistry.
Main topics of study: <ul style="list-style-type: none"> • Basic terms in phytochemistry • Molecules and bonding
Learning outcomes for the year: <ul style="list-style-type: none"> • To understand the basic terms in phytochemistry • To understand molecules and chemical bonding
Teaching/learning methods/strategies used to enable the achievement of learning outcomes: <ul style="list-style-type: none"> • Reading and an online quiz.
Assessment methods: <ul style="list-style-type: none"> • Online quiz
Indicative reading: An introductory guide to Anatomy and Physiology (2015) by Louise Tucker
Additional reading: The constituents of Medicinal plants by Andrew Pengelly (2004)

<p>Core subject: Materia medica and therapeutics</p>
<p>Pre-requisite: None</p>
<p>Main aim: To introduce the subject of materia medica and begin the materia medica project.</p>
<p>Main topics of study:</p> <ul style="list-style-type: none"> • The structure of the materia medica framework • The following medicinal plants: <p>(Taught) Calendula, chamomile, cleavers, dandelion, elder, garlic, hawthorn, yarrow, horse chestnut, lime flower, marshmallow, meadowsweet, plantain, wormwood, silver birch, chilli, centaury, myrrh, ginkgo, elecampane, lemon balm, rosemary, milk thistle, wood betony, clove, cramp bark, ginger, skullcap, echinacea, nettle.</p> <p>(MM project) Mugwort, sweet flag, yellow dock, juniper, oats, valerian, peppermint, fennel, thyme, sage, chickweed, willow, motherwort, hyssop, artichoke, ground ivy, mullein, feverfew, borage, eyebright.</p>
<p>Learning outcomes for the year:</p> <ul style="list-style-type: none"> • Demonstrate knowledge and understanding of the subject • Demonstrate knowledge of a wide range of medicinal plants
<p>Teaching/learning methods/strategies used to enable the achievement of learning outcomes:</p> <ul style="list-style-type: none"> • Reading and research around the subject and individual study. • Practical ID and tasting sessions.
<p>Assessment methods:</p> <ul style="list-style-type: none"> • Materia medica project - In depth study of 20 herbs
<p>Indicative reading:</p> <p>The Complete Herbal Tutor (2015) by Anne McIntyre The Wild Flower Key by Francis Rose The Collins Complete Guide to British Wild Flowers Jekka's Complete Herb Book (2009) by Jekka McVicar Botany in a day: The patterns method of plant ID by Thomas Elpel</p>
<p>Additional reading</p> <p>Women's Herbal by Anne McIntyre Hedgerow medicine by Julie and Matthew Seal The complete illustrated holistic herbal by David Hoffmann Herbal antivirals by Stephen Buhner The History of Echinacea by Andrew Chevallier Herbal antibiotics by Stephen Buhner Potter's Herbal Cyclopaedia (2003) by Elizabeth Williamson A woman's book of herbs by Elizabeth Brooke</p>

<p>Core subject: History, ethics, law and research</p>
<p>Pre-requisite: None</p>
<p>Main aim: To introduce the subject, and focus on the introduction of herbal medicine law and the history of herbal medicine.</p>
<p>Main topics of study:</p> <ul style="list-style-type: none"> • Overview of the history of herbal medicine • Beliefs and practice of herbal medicine from around the world • Introduction to herbal medicine law
<p>Learning outcomes for the year:</p> <ul style="list-style-type: none"> • Understand the roots of Western Herbal medicine • Show an understanding of different belief systems around herbal medicine • Show an understanding of the laws surrounding herbal medicine
<p>Teaching/learning methods/strategies used to enable the achievement of learning outcomes: Reading and online research.</p>
<p>Assessment methods:</p> <ul style="list-style-type: none"> • Short answer questions • Herbal medicine and the law essay
<p>Indicative reading: Green Pharmacy by Barbara Griggs (1st Edition)</p>
<p>Additional reading Culpeper's complete herbal Culpeper's Medicine: A Practice of Western Holistic Medicine by Graeme Tobyn The Herbalist's Bible: John Parkinson's Lost Classic Rediscovered by Julie Bruton-Seal</p> <p>Hatfield's Herbal by Gabrielle Hatfield</p> <p>The Physicians of Myddfai: Or, the Medical Practice of the Celebrated Rhiwallon and His Sons, of Myddfai, in Carmarthenshire by John Williams</p> <p>Welsh herbal medicine by David Hoffmann</p> <p>History, Philosophy and Medicine by Julian Barker</p> <p>Herbal Exchanges by Hananja Brice-Ytsma and Frances Watkins</p>

Core subject: Pathology
Pre-requisite: None
Main aim: To introduce the subject of pathology.
Main topics of study: <ul style="list-style-type: none"> • Introduction to functional pathological processes
Learning outcomes for the year: <ul style="list-style-type: none"> • To understand simple functional pathological processes
Teaching/learning methods/strategies used to enable the achievement of learning outcomes: Reading and online research.
Assessment methods: <ul style="list-style-type: none"> • Short answer questions
Indicative reading: <ul style="list-style-type: none"> • The Complete Herbal Tutor (2015) by Anne McIntyre • An introductory guide to Anatomy and Physiology (2015) by Louise Tucker
Additional reading <ul style="list-style-type: none"> • Why Zebras don't get ulcers by by Sapolsky

Core subject: Clinical skills and pharmacy
Pre-requisite: None
Main aim: To introduce the subject of clinical skills and kitchen pharmacy.
Main topics of study: <ul style="list-style-type: none"> • The importance of awareness and observation • Reflective practice • Case history taking and questioning • Taking blood pressure and pulses • Creating herbal remedies at home – tinctures, glycerites, oils, ointments and creams
Learning outcomes for the year: <ul style="list-style-type: none"> • Understand the importance of awareness and observation • Undertake regular reflective practice • Be familiar with case history taking • Develop introductory skills in blood pressure and pulse taking • Be able to confidently create herbal remedies at home
Teaching/learning methods/strategies used to enable the achievement of learning outcomes: Reading and additional research, case history examples and practice, blood pressure and pulse theory and practical.
Assessment methods: <ul style="list-style-type: none"> • Observation of practicals • Two case studies of family members
Indicative reading: The Complete Herbal Tutor (2015) by Anne McIntyre An introductory guide to Anatomy and Physiology (2015) by Louise Tucker
Additional reading St John Ambulance first aid manual Clinical examination by Epstein (2008)

Core subject: Business skills
Pre-requisite: None
Main aim: To introduce the subject and create plans for a new community clinic.
Main topics of study: <ul style="list-style-type: none"> • Community clinics • Setting up a clinic – things to consider
Learning outcomes for the year: <ul style="list-style-type: none"> • To understand the pros and cons of setting up a clinic • To understand the different community clinic projects operating in the UK
Teaching/learning methods/strategies used to enable the achievement of learning outcomes: Reading and online research, group discussion and activities.
Assessment methods: <ul style="list-style-type: none"> • Research of existing projects • Oral presentation in small groups
Indicative reading: The right brain business plan by Jennifer Lee

Year 2 course specification 2018

<p>Core subject: Botany, growing and harvesting</p>
<p>Pre-requisite: Y1 Betonica MH Training programme or equivalent.</p>
<p>Main aim: To build on the first year's knowledge of botany and plant identification and broaden the subject to include plant physiology and pharmacognosy.</p>
<p>Main topics of study:</p> <ul style="list-style-type: none"> • Taxonomy, classification, naming, families and species. • Plant morphology and anatomy, roots and stems, leaves, flowers, fruits and seeds • Plant physiology and processes • Botanical terms used to describe herbs • Conservation and ethnobotanical issues as they relate to herbal medicine • Quality assurance, source and growing environment, harvesting, processing, storage and packaging of herbs • Quality control, HPLC, chromatography TLC, GC and ash values and other methods used in quality control
<p>Learning outcomes for the year:</p> <ol style="list-style-type: none"> 1. Be able to demonstrate knowledge and understand of the classification of the plant kingdom and nomenclature of species. 2. Be able to use a key to identify plant species. 3. Show understanding of how medicinal plant families are classified and describe some of their unique characteristics. 4. Be able to describe the methods used in plant sample ID and quality control assessments. 5. Be able to identify a range of medicinal plants from both fresh and dried samples. 6. Be able to demonstrate understanding conservation and ethnobotanical issues as they relate to herbal medicine. 7. Be able to demonstrate understanding of plant physiology.
<p>Teaching/learning methods/strategies used to enable the achievement of learning outcomes:</p> <ul style="list-style-type: none"> • Practical lectures looking at plant ID, both of growing plants and harvested samples. • One day lecture on botany and plant ID. • Background reading and research on the subject, including online videos. • Field trip to working organic herb farms, organic herb trading company and the opportunity to visit botanical gardens throughout the course. • One taught seminar day.
<p>Assessment methods:</p> <ul style="list-style-type: none"> • Observational assessment through herb walks and botany sessions (assessing outcomes 1, 2, 4, 5, 6) • 1500 word essay on plant reproduction (20%) (assessing outcome 7) • Practical exam – Identifying plant samples and using a plant Key (30%) (assessing outcomes 1, 2, 3, 5) • Written exam – short and long answer questions (50%) (assessing outcomes 1, 3, 4, 6, 7) • Self-assessed learning throughout workbook.
<p>Indicative reading:</p> <p>Botany in a day by Thomas Elpel</p> <p>The Wild Flower Key by Francis Rose</p>

Fundamentals of Pharmacognosy and Phytotherapy (2003 onwards)

Additional reading

Collins Complete Guide – British Wild Flowers by Paul Sterry

Trees of Britain and Ireland by Edward Milner

Poisonous Plants in Great Britain by Fred Gillam

Poisonous plants and fungi by Marion Cooper and Anthony Johnson

Botany Colouring book by Paul Young

Botany by James Mauseth

Practical Plant Identification by James Cullen

EHTPA syllabus

Module 5 – LO1, LO2, LO3

Module 8 – WHM – MM – LO1, LO4, LO6

Core subject: Anatomy and physiology

Pre-requisite: Level 3 Anatomy and Physiology – Y1 Betonica MH Training programme or equivalent.

Main aim: To build on the level 3 anatomy and physiology understanding and deepen understanding of the subject and how it relates to clinical practice.

Main topics of study:

- Anatomical planes, movement and surface anatomy
- Cell structure and function
- Tissue types, structure and function
- Muscles, bones, and joints
- Nerves, the spinal cord and the brain
- Heart and blood vessels
- Lungs and respiration
- Lymphatic system
- Digestive system
- Metabolism and ATP
- Skin, the eye, and the ear
- Urinary system

Learning outcomes for the year:

1. Demonstrate understanding of anatomical structures and planes, and movement
2. Understand the relationship between structure and function
3. Understand the processes surrounding homeostasis
4. Explain the structure and functions of physiological systems (listed above)

Teaching/learning methods/strategies used to enable the achievement of learning outcomes:

- Reading and online videos
- Anatomy models for in class work
- Self-assessment tasks through a workbook
- Three taught seminar days.

Assessment methods:

- Online multiple choice quiz style assessments (20%) (assessing outcomes 2 and 4)
- Two 1000 word written assignments (15% each) (assessing outcomes 2, 3 and 4)
- A written exam (1 hour – long and short answers) (50%) (assessing outcomes 2, 3 and 4)

Indicative reading:

Ross and Wilson Anatomy and Physiology in Health and Illness By Waugh and Grant

Ross and Wilson Colouring and workbook by Waugh and Grant

Additional reading

Grays Anatomy for students by Drake and Vogl

Dermatology by David Gawkrödger (2007)

Holistic anatomy by Pip Waller

EHTPA syllabus

Module 1 – LO1 – LO6

Module 3 – LO3, LO4, LO5, LO6

<p>Core subject: Biochemistry and Phytochemistry</p>
<p>Pre-requisite: Year 1 Betonica MH training programme or equivalent</p>
<p>Main aim: To build on the information from year 1 and go further into biochemistry, providing an understanding of the underlying properties of biological molecules, in order to aid in the study of other subjects.</p> <p>To provide a structured approach to learning plant chemistry, in order to better understand materia medica and herbal therapeutic choices.</p>
<p>Main topics of study:</p> <ul style="list-style-type: none"> • Atom structure, isotopes, ions • Different types of chemical bonding • Chemical diagrams and formulae • Properties of water and pH • Chemical reactions • Functional groups • Biological molecules • Enzymes and DNA • Solvents in plant chemistry • Synergy in plant chemistry • Constituent classes and their actions (with plant examples)
<p>Learning outcomes for the year:</p> <ol style="list-style-type: none"> 1. To demonstrate and understanding of atomic structure and bonding in relation to the structure and function of biological molecules. 2. To show understanding chemical diagrams and formulae in order to complete appropriate research and learning. 3. To demonstrate understanding of chemical reactions in relation to biological molecules. 4. To demonstrate understanding of plant constituents, their classes and actions. 5. To demonstrate understanding of synergy in plant chemistry.
<p>Teaching/learning methods/strategies used to enable the achievement of learning outcomes:</p> <ul style="list-style-type: none"> • Reading and self-assessment tasks in workbooks. • Videos and video presentations. • Using biochemical models in class to illustrate molecules and bonding. • Experiments to complete at home. • Two taught seminar days.
<p>Assessment methods:</p> <ul style="list-style-type: none"> • Multiple choice quiz style assessments (20%) (assessing outcomes 1 and 3) • Biochemistry written exam (40%) (short answer questions and diagrams) (assessing outcomes 1, 2, 3) • Phytochemistry written exam (40%) (short answer questions and diagrams) (assessing outcomes 2, 3, 4 and 5) • Phytochemistry assignment 1 (20%) 1500 written assignment (assessing outcomes 2, 3, and 4)
<p>Indicative reading:</p> <p>Ross and Wilson Anatomy and Physiology in Health and Illness By Waugh and Grant</p> <p>Fundamentals of Pharmacognosy and Phytotherapy (2003 onwards)</p> <p>The Constituents of Medicinal Plants by Andrew Pengelly (2004) 2nd edition</p>

Herbal constituents by Lisa Ganora (2009)

Additional reading:

Medicinal Natural Products by Paul Dewick

Herb, Nutrient and Drug Interactions (2008) by Stargrove et al*

The chemistry of life by Steven Rose

A level chemistry OCR revision guide

GCSE biology OCR revision guide

EHTPA syllabus

Module 4 – LO1, LO3, LO4, LO5

Module 8 – MM – LO2, LO4

Core subject: Materia medica and therapeutics

Pre-requisite: Year 1 Materia medica or equivalent

Main aim: To build on knowledge from the first year's study of Materia medica, broadening the topics covered within the subject, to now cover energetics, pharmacological activity, and further understanding of contraindications and posology.

The pharmacological actions of individual herbs are discussed in terms of their actions, as well as the energetic qualities of the herb and the physiological/psychological implications of this within the human body.

Main topics of study:

- Broadening the Materia medica monograph framework
- Introducing energetic qualities of plants as well as pharmacological actions, through observation and tasting sessions
- Medicinal plants taught per body system
- Continuing personal study and research of medicinal plants through the Materia medica project
- The following medicinal plants/fungi:

(Taught): Liquorice, frankincense, black cohosh, chaste tree, turmeric, St John's wort, Siberian ginseng, ginseng, schisandra, astragalus, comfrey, ashwaganda, gotu kola, saw palmetto, hops, tulsi, lady's mantle, Dong quai, Norwegian angelica, raspberry leaf, rose, wild lettuce, celery seed, bearberry, bladder wrack, devil's claw, goldenrod, baical skullcap, bilberry, reishi, fly agaric, cordyceps, turkey tail, birch polypore.

Restricted and schedule 20: Pokeroot, arnica, aconite, pheasant's eye, quebracho, deadly nightshade, greater celandine, quinine tree, autumn flowering cactus, lily of the valley, thorn apple, Ma Huang, yellow jasmine, henbane, puke weed.

(MM project): Burdock, prickly ash, cinnamon, slippery elm, oregano, agrimony, witchazel, red clover, vervain, English oak, barberry, fumitory, wild yam, Californian poppy, cornsilk, sarsaparilla, passionflower, coltsfoot, North American cherry, white horehound.

Learning outcomes for the year:

1. Demonstrate knowledge and understanding of the subject
2. Demonstrate knowledge of a wide range of medicinal plants
3. Understand the importance of posology and legislation regarding schedule 20 and restricted herbs
4. Be able to compare and contrast herbs with similar actions and indications in order to build a prescription
5. Demonstrate competency in carrying out independent literature searches using a variety of methods, including from primary sources
6. Demonstrate the various considerations when choosing herbs or actions required for specific pathologies, including contraindications, cautions, drug interactions, availability and sourcing, and available evidence

Teaching/learning methods/strategies used to enable the achievement of learning outcomes:

- Reading and research around the subject and individual study.
- Study guide and self-assessed learning through an online learning portal (Moodle).
- Three taught sessions throughout the academic year (including practical ID and tasting sessions, as well discussions and small group work).
- Three taught seminar days.

Assessment methods:

- Materia medica project - In depth study of 20 herbs (assessing outcomes, 1, 2, 5) - 50% total mark
- Materia medica 1 hour written exam – (assessing outcomes, 1, 3, 4, 6) - 50% total mark

Indicative reading:

Medical Herbalism (2003) by David Hoffmann

Fundamentals of Pharmacognosy and Phytotherapy by Heinrich

The constituents of Medicinal plants by Andrew Pengelly (2004)

Herbal constituents by Lisa Ganora (2009)

Additional reading

Potter's Herbal Cyclopaedia (2003) by Elizabeth Williamson

The Wild Flower Key by Francis Rose

Bartrum's Encyclopedia of Herbal Medicine

Medicinal mushrooms by Martin Powell

Principles and Practice of Phytotherapy (2013) by Mills and Bone

The Essential Guide to Herbal Safety (2005) by Mills and Bone

Adaptagens by Winston and Maimes (2007)

The book of herbal wisdom by Matthew Wood (1997)

Phytotherapy Essentials: Healthy Children by Rob Santich and Kerry Bone

The Western Herbal Tradition by Toby, Whitelegg and Denham

EHTPA syllabus:

Module 8 – WHM – MM – LO1 – LO7

HT – LO1, LO2, LO4

Core subject: History, ethics, law and research

Pre-requisite: Year 1 Betonica MH Training programme or equivalent.

Main aim: To build on the herbal history introduction in year one, and provide the ability to complete in depth study of a figure who has influenced herbal/medicine in history.

To introduce the skills of literature searching, analysing and appraising studies and data, in both medicine and herbal medicine.

Main topics of study:

- Herbal history from 130 AD to present day
- Completing literature searches and sources of information
- Reading and analysing data and research
- Critical appraisal tools
- Study design
- Evidence based medicine

Learning outcomes for the year:

1. Demonstrate understanding of herbal history and how it influences current herbal medicine practice.
2. Demonstrate the ability to complete literature searches and analyse the information found.
3. Demonstrate the ability to read and analyse data, including critical appraisal.
4. Demonstrate understanding of study design and evidence based medicine.

Teaching/learning methods/strategies used to enable the achievement of learning outcomes:

- Reading and online research.
- Videos.
- Self-assessment tasks in workbook.
- In class research skills tasks.
- Peer learning from presentations.
- Two taught seminar days.

Assessment methods:

- Herbal history 20 min presentation (60%) and handout (30%) (assessing outcomes 1 and 2)
- Research assignment 1 (10%) (assessing outcome 2 – outcomes 3 and 4 assessed in Y3)

Indicative reading:

Green Pharmacy by Barbara Griggs (1st Edition)

Testing treatments (2nd edition) by Evans et al (2011)

How to read a paper by Trisha Greenhalgh (2005 editions onwards)

Additional reading

- The Western Herbal Tradition by Toby, Whitelegg and Denham (2008)
- History, Philosophy and Medicine by Julian Barker
- Herbal Exchanges by Hananja Brice-Ytsma and Frances Watkins
- Ayurvedic Medicine: The Principles of Traditional Practice by Sebastian Pole
- Ayurveda, the science of self healing: a Practical guide by Vasant Lad (1987)
- The Practice of Traditional Western Herbalism by Matthew Wood
- Basic Theories of Traditional Chinese Medicine by Bing and Hongcai
- The pocket guide to critical appraisal by Crombie (1996)
- Placebo by Dylan Evans

EHTPA syllabus:

Module 8 – WHT – HT – LO1

MM – LO7

Module 7 – LO1, LO2, LO3

Module 4 – LO5

<p>Core subject: Pathology</p>
<p>Pre-requisite: Year 1 Betonica MH training programme or equivalent.</p>
<p>Main aim: To build on the level 3 pathology taught in year one and deepen understanding of the subject and how it relates to clinical practice (bringing together A&P, biochemistry and clinical skills).</p>
<p>Main topics of study</p> <ul style="list-style-type: none"> • Introduction to pathology and the immune system • Immunological factors in disease • Biochemistry and metabolic balance in disease • Musculoskeletal disease • Neurological disease • Endocrine disease • Skin disease • Diabetes • Red flags and reference ranges
<p>Learning outcomes for the year:</p> <ol style="list-style-type: none"> 1. Demonstrate understanding of aetiology, pathology and pathogenesis. 2. Understand the effects of the immune system on disease. 3. Demonstrate understanding of specific diseases studied. 4. Demonstrate understanding of the clinical significance of specific disease processes such as inflammation.
<p>Teaching/learning methods/strategies used to enable the achievement of learning outcomes:</p> <p>Reading and online research.</p> <p>Videos.</p> <p>Self-assessment through workbook tasks.</p> <p>Three taught seminar days.</p>
<p>Assessment methods:</p> <ul style="list-style-type: none"> • Pathology assignment 1 – 1500 word essay (20%) • Pathology assignment 2 - 1500 word essay (20%) • Pathology exam – short and long answer questions (60%)
<p>Indicative reading:</p> <p>Davidson's Principles and practice of Medicine (2014 onwards)</p>
<p>Additional reading</p> <p>Immunology by Edgar</p> <p>Robins Pathologic basis of disease by Kumar et al</p>

Underwood's Pathology: A clinical approach (2013)

Flesh and Bones Pathology by Bateman et al

EHTPA syllabus

Module 1 – LO2, LO5

Module 3 – LO2, LO3, LO4, LO5, LO6

Core subject: Clinical skills and pharmacy

Pre-requisite: Year 1 Betonica MH training programme or equivalent.

Main aim: To begin clinical study of herbal medicine with the study of the therapeutic relationship, communications, ethics and boundaries and the importance of reflective practice. Introduce the subjects of complementary health and placebo and challenges faced in this area, particularly in the media.

Clinical pharmacy procedures introduced including schedule 20 herbs, dosages, medicine making, THR and GMP and health and safety.

Main topics of study:

- Reflective practice
- Case history taking and questioning
- Clinical skills – blood pressure, pulses, observation, gait, hand and face examination
- The therapeutic relationship and communication skills
- Complementary, alternative and integrative medicine
- Consent, confidentiality and ethics
- Placebo and holism
- Clinical pharmacy practices – hygiene, safety, audit trail, labelling, and dispensing guidelines
- Traditional herbal registration and Good manufacturing practice
- Herbal medicine making in a clinical setting – including tincture making
- Dosages
- Schedule 20 herbs
- Clinical observation – 100 hours

Learning outcomes for the year:

1. Undertake regular reflective practice.
2. To demonstrate understanding of the importance of the therapeutic relationship in complementary healthcare.
3. To demonstrate understanding of the placebo effect and CAM.
4. To demonstrate understanding of the correct procedures for clinical dispensing.
5. To demonstrate understanding of the correct procedures and calculations involved in medicine making.
6. To demonstrate understanding of dosages and schedule 20 herb restrictions.
7. To demonstrate the ability to complete clinical examinations – blood pressure, pulse, observation, hand and face examinations.
8. To demonstrate understanding of the patient assessment and case history taking.
9. To complete 100 hours of clinical observation.

Teaching/learning methods/strategies used to enable the achievement of learning outcomes:

Reading and additional research.

Self-assessment tasks throughout workbooks.

Clinical equipment practice in class.

Online videos.

Two taught seminar days.

100 hours of clinical observation.

Assessment methods:

Pharmacy assignment (5%) (assessing outcomes 4, 5 and 6)

Pharmacy practical exam (15%) (assessing outcomes 4, 5, and 6)

Clinical examination practical exam (40%) (assessing outcomes 7 and 8)

Clinical skills assignment 2 – 1000 word essay (20%) (assessing outcome 2 and 3)

Clinical skills assignment 3 – 1000 word essay (20%) (assessing outcome 2 and 3)

Clinical skills assignment 4 – case histories (non assessed) (assessing outcomes 1, 8 and 9)

Indicative reading:

Making sense of clinical examination by Douglas Model (2006)

The Therapeutic Relationship in Complementary Healthcare by Mitchell and Cormack (1998)

One of the following Clinical examination books (**2008 versions onwards**):

- Clinical examination by Epstein et al
- McLeod's Clinical examination by Douglas et al
- Bates Guide to Physical examination and history taking by Bickley

Additional reading

The herbal medicine makers handbook by James Green

The Herbal dispensary: A Medicine-Making Guide by Thomas Easley and Steven Horne (2016)

Gilian Painter, 1998, A Herbalists' medicine making workbook

A Herbal Book of Making and Taking by Non Shaw and Christopher Hedley, 2016

A clinical guide to blending liquid herbs (2003) by Mills and Bone

The consultation in phytotherapy by Peter Conway

Oxford medical dictionary

British National Formula

Clinical examination DVD series by by Andreas Syrimis

Oxford Handbook of Clinical Medicine

The Therapeutic Relationship Handbook by Divine Charura and Stephen Paul

Counselling Skills for Health Professionals by Philip Burnard

Differential diagnosis for primary care by Jamison (2007)

EHTPA syllabus:

Module 5 – LO1 – LO7

Module 6 - LO1, LO3, LO4, LO7, LO8

Module 8 – MM – LO5

Module 9 – RP – LO1, LO2

Module 9 – DTS1 – LO1

Module 9 – DTS3 – LO3

Module 9 – SCI1 – LO1, LO2

Module 9 - SS1 – LO3, LO4, LO5, LO6

Module 9 - PLS1 – LO1, LO2

Module 9 - PLS2 – LO1, LO2

Year 3 course specification 2018

<p>Core subject: Nutrition</p>
<p>Pre-requisite: Y2 Betonica MH Training programme or equivalent appropriate level 4 study of health.</p>
<p>Main aim: To introduce the subject of nutrition in the context of the herbal medicine consultation and treatment strategies.</p>
<p>Main topics of study:</p> <ul style="list-style-type: none"> • What is nutrition and diet • The microbiome • Restoring gut health and function • Reducing inflammation with food • Can food alone affect hormone balance? • Balancing blood sugar
<p>Learning outcomes for the year:</p> <ol style="list-style-type: none"> 1. Be able to demonstrate knowledge and understanding of the microbiome and how it can be influenced 2. To demonstrate understanding of inflammation and inflammatory foods. 3. To demonstrate understanding of the importance of diet in a clinical setting and the effect on the herbal medicine treatment strategy
<p>Teaching/learning methods/strategies used to enable the achievement of learning outcomes:</p> <ul style="list-style-type: none"> • Background reading and research on the subject, including online videos. • One taught seminar day. • Self-assessed learning throughout workbook.
<p>Assessment methods:</p> <ul style="list-style-type: none"> • 2000-word essay on plant reproduction (50%) (assessing outcome 3)
<p>Indicative reading:</p> <p>Healthy gut, healthy you by Dr Michael Ruscio (2018)</p>
<p>Additional reading</p> <p>The Doctor's Kitchen by Dr Rupy Aujila (2017)</p> <p>Nutrition in Clinical Practice by David Katz (2014)</p> <p>The China study by Campbell et al (2016)</p> <p>The diet myth by Tim Spector (2016)</p> <p>The Encyclopaedia of Healing Foods by Murray and Pizzorno</p>

The Functional Nutrition Cookbook by Nicolle and Bailey

EHTPA syllabus

Module 2 – LO4 – LO6

Core subject: Anatomy and physiology

Pre-requisite: Y2 of the Betonica Medical Herbalist Training programme or equivalent level 4 study of anatomy and physiology.

Main aim: To build on the anatomy and physiology knowledge gained in year 2, and to demonstrate the relationship between structure and function and how it relates to clinical practice.

Main topics of study:

- Endocrine system
- Reproductive system
- Embryology

Learning outcomes for the year:

5. Understand the clinical application of anatomy and physiology
6. Understand the processes of human embryological development
7. Explain the structure and functions of physiological systems (listed above)

Teaching/learning methods/strategies used to enable the achievement of learning outcomes:

- Reading and online videos
- Anatomy models for in class work
- Self-assessment tasks through a workbook
- One taught seminar day.

Assessment methods:

- One 1500 word written assignment (50%) (assessing outcomes 1 - 6)
- A written exam (1 hour – long and short answers) (50%) (assessing outcomes 1, 2 and 3 (topics to be covered: urinary system, skin, eyes and ears, endocrinology, reproduction)

Indicative reading:

Anatomy and Physiology by Tortora

Additional reading

Embryology at a glance by Wreede and Webster

EHTPA syllabus

Module 1 – LO1 – LO6

Module 3 – LO3, LO4, LO5, LO6

Core subject: Phytochemistry

Pre-requisite: Y2 of the Betonica Medical Herbalist training programme (or equivalent level 4 or above study of bio and phyto chemistry).

Main aim: To build on the knowledge gained from year 2 and go further into phytochemistry, providing an understanding of the biosynthetic pathways and how constituents are formed.

To provide a structured approach to learning plant chemistry, in order to better understand materia medica and herbal therapeutic choices.

Main topics of study:

- Biosynthetic pathways
- Critical appraisal of herbal constituents in research studies

Learning outcomes for the year:

6. To demonstrate understanding of biosynthetic pathways and the main phytochemicals produced by them.
7. To demonstrate understanding of critical appraisal of herbal constituent research and how it can be applied to clinical practice.

Teaching/learning methods/strategies used to enable the achievement of learning outcomes:

- Reading and self-assessment tasks in workbooks.
- Videos and video presentations.
- Using biochemical models in class to illustrate molecules and bonding.
- One taught seminar day.

Assessment methods:

- Phytochemistry assignment 1 (30%) 1500 written assignment (assessing outcomes 2, 3, and 4)
- Phytochemistry assignment 2 (not assessed) 1500 written assignment (assessing outcomes 2, 3, and 4)

Indicative reading:

Fundamentals of Pharmacognosy and Phytotherapy (2003 onwards)

Additional reading:

The Constituents of Medicinal Plants by Andrew Pengelly (2004) 2nd edition

Herbal constituents by Lisa Ganora (2009)

Medicinal Natural Products by Paul Dewick

Herb, Nutrient and Drug Interactions (2008) by Stargrove et al*

The chemistry of life by Steven Rose

EHTPA syllabus

Module 4 – LO1, LO3, LO4, LO5

Module 8 – MM – LO2, LO4

Core subject: Herbal therapeutics

Pre-requisite: Year 2 Materia medica or equivalent level 4 study of medicinal plants

Main aim: To build on knowledge from the second year's study of Materia medica, broadening the topics covered within the subject, to now further understand contraindications and posology, and how knowledge of materia medica can be applied to prescribing herbal medicines.

Main topics of study:

- Introducing energetic qualities of plants as well as pharmacological actions, through observation and tasting sessions
- Continuing personal study and research of medicinal plants through the Materia medica project
- Posology and dosage
- Prescription building and reasoning
- Treatment strategies and case management
- The following medicinal plants:

(Taught): *Barosma betulina*, *Chamaelirium luteum*, *Baptisia tinctorial*, *Hippophae rhamnoides*, *Geranium robertianum*, *Caulophyllum thalictroides*, *Epimedium grandiflorum*, *Equisetum arvense*, *Eucalyptus globulus*, *Hydrastis canadensis*, *Lycopus virginicus*, *Paeonia lactiflora* (white and red), *Parietaria officinalis*, Propolis, *Theobroma cacao* and *Rhodiola rosea*

(MM project 3): *Barosma betulina*, *Mitchella repens*, *Andrographis peniculata*, *Tanacetum vulgare*, *Gymnema sylvestre*, *Ballota nigra*, *Berberis aquifolium*, *Capsella bursa-pastoris*, *Commiphora mukul*, *Eupatorium perfoliatum*, *Galega officinalis*, *Levisticum officinalis*, *Pimpinella anisum*, *Piscidia erythrina*, *Primula veris*, *Pulmonaria officinalis*, *Salvia miltiorrhiza*, *Trigonella foenum-graecum*, *Viola tricolor*, *Gentiana lutea*, *Uncaria tomentosa*

Learning outcomes for the year:

7. Demonstrate knowledge of a wide range of medicinal plants
8. Understand the importance of posology and how it relates to herbal therapeutics
9. Be able to compare and contrast herbs with similar actions and indications in order to build a prescription
10. Demonstrate competency in building a safe and effective prescription and treatment plan for patients.
11. Demonstrate the various considerations when choosing herbs or actions required for specific pathologies, including contraindications, cautions, drug interactions, availability and sourcing, and available evidence

Teaching/learning methods/strategies used to enable the achievement of learning outcomes:

- Reading and research around the subject and individual study.
- Study guide and self-assessed learning through an online learning portal (Moodle).
- Three taught sessions throughout the academic year (including tasting sessions, as well as discussions and small group work).

Assessment methods:

- Materia medica project 3 - In depth study of 20 herbs (assessing outcomes, 1- 5) - 5% total mark
- Essay 1 - Compare and contrast Theobroma cacao and Rhodiola rosea – 1000 words (10%)
- Essay 2 – Compare and contrast two herbs of your choice – 1000 words (10%)
- Essay 3 – Case based review and management plan – 2000 words – (25%)
- Herbal therapeutics 1 hour written exam – (assessing outcomes, 1-5) - 50% total mark

Indicative reading:

Medical Herbalism (2003) by David Hoffmann

Principles and Practice of Phytotherapy (2013) by Mills and Bone

Additional reading

Winston and Kuhn's Herbal Therapy and Supplements: A Scientific and Traditional Approach (2007)

The Essential Guide to Herbal Safety (2005) by Mills and Bone

The Western Herbal Tradition by Todyn, Whitelegg and Denham

British Herbal Compendium

Women, Hormones and the menstrual cycle by Ruth Trickey (2004)

Materia medica by Carole Fisher (2018)

EHTPA syllabus:

Module 8 – WHM – MM – LO1 – LO7

HT – LO1 – LO5

DTS3 – LO1, LO2, LO4, LO5, LO6

<p>Core subject: Research</p>
<p>Pre-requisite: Year 2 Betonica MH Training programme or equivalent level 4 study of research skills.</p>
<p>Main aim: To build on the introduction to research skills in year two and put into practice the research skills used in clinical practice.</p>
<p>Main topics of study:</p> <ul style="list-style-type: none"> • Reading and analysing data and research • Critical appraisal tools • Patient wellbeing tools - MYMOP • Research skills for dissertation
<p>Learning outcomes for the year:</p> <ol style="list-style-type: none"> 5. Demonstrate the ability to read and analyse data, including critical appraisal. 6. Understand the value of patient wellbeing tools and how they can be used for clinical research. 7. Understand the research skills available and needed for research projects.
<p>Teaching/learning methods/strategies used to enable the achievement of learning outcomes:</p> <ul style="list-style-type: none"> • Reading and online research. • Videos. • Self-assessment tasks in workbook. • In class research skills tasks. • One taught seminar day.
<p>Assessment methods:</p> <ul style="list-style-type: none"> • Research assignment 1 (10%) (assessing outcome 1)
<p>Indicative reading:</p> <p>How to read a paper by Trisha Greenhalgh (2005 editions onwards)</p>
<p>Additional reading</p> <ul style="list-style-type: none"> • The undergraduate dissertation handbook (Palgrave) • Dissertations and project reports by Stella Cottrell
<p>EHTPA syllabus:</p> <p>Module 7 – LO1-LO6</p>

<p>Core subject: Pathology</p>
<p>Pre-requisite: Year 2 Betonica MH training programme or equivalent level 4 study of pathology.</p>
<p>Main aim: To build on the pathology taught in year two and deepen understanding of the subject and how it relates to clinical practice (bringing together A&P, biochemistry and clinical skills).</p>
<p>Main topics of study</p> <ul style="list-style-type: none"> • Infectious disease • HIV and AIDs • Cardiovascular disease • Blood disease • Respiratory disease • Pancreatic disease • Liver disease • Kidney disease
<p>Learning outcomes for the year:</p> <ol style="list-style-type: none"> 1. Demonstrate understanding of prevalence and spread of infectious disease. 2. Understand the effects of the vaccination on disease. 3. Demonstrate understanding of specific diseases studied.
<p>Teaching/learning methods/strategies used to enable the achievement of learning outcomes:</p> <p>Reading and online research.</p> <p>Videos.</p> <p>Self-assessment through workbook tasks.</p> <p>Three taught seminar days.</p>
<p>Assessment methods:</p> <ul style="list-style-type: none"> • Pathology assignment 1 – 1500 word essay (25%) • Pathology assignment 2 - 1500 word essay (25%) • Pathology exam – short and long answer questions (50%)
<p>Indicative reading:</p> <p>Davidson’s Principles and practice of Medicine (2014 onwards)</p>
<p>Additional reading</p> <p>Immunology by Edgar</p>

Robins Pathologic basis of disease by Kumar et al

Underwood's Pathology: A clinical approach (2013)

Flesh and Bones Pathology by Bateman et al

Oxford handbook of clinical medicine

Pathology illustrated (2011)

EHTPA syllabus

Module 1 – LO2, LO5

Module 3 – LO2, LO3, LO4, LO5, LO6

Core subject: Clinical skills, Differential diagnosis and Ethics

Pre-requisite: Year 2 Betonica MH training programme or equivalent level 4 study of clinical skills.

Main aim: To continue the study of clinical skills, deepening understanding of the topics and building confidence to take patients and manage cases within the training clinic environment.

Introducing the new topics of differential diagnosis and medical ethics.

Main topics of study:

- Reflective practice
- Case history taking and questioning
- Differential diagnosis
- Clinical skills – general, thyroid, respiratory, cardiovascular, lymphatic, abdominal, neurological, musculoskeletal, and skin.
- The therapeutic relationship and case management
- Medical ethics
- Clinical training – 200 hours

Learning outcomes for the year:

10. Undertake regular reflective practice.
11. To demonstrate understanding of differential diagnosis and how it relates to clinical examination
12. To demonstrate the ability to differentially diagnose from a case history and clinical findings.
13. To demonstrate understanding of the patient assessment and case history taking and how it relates to clinical examination and differential diagnosis.
14. To demonstrate understanding of differential diagnosis and how it relates to clinical examination
15. To demonstrate the ability to complete clinical examinations – general, thyroid, respiratory, cardiovascular, lymphatic, abdominal, neurological, musculoskeletal, and skin.
16. To demonstrate understanding of the patient assessment and case history taking and how it relates to clinical examination and differential diagnosis.
17. To demonstrate an understanding of medical ethics and the four principles.
18. To demonstrate an understanding of how medical ethics and law affects herbal medicine practitioners.
19. To demonstrate an understanding of the responsibilities held by the herbal medicine practitioner in regards to medical law.
20. To complete 200 hours of clinical training.

Teaching/learning methods/strategies used to enable the achievement of learning outcomes:

Reading and additional research.

Self-assessment tasks throughout workbooks.

Clinical equipment practice in class.

Online videos.

Seven taught seminar days.

200 hours of clinical training.

Assessment methods:

Pharmacy assignment (5%) (assessing outcomes 4, 5 and 6)

Differential diagnosis written exam (40%) (assessing outcomes 2-4)

Clinical examination practical exam (40%) (assessing outcome 5-7)

Clinical skills assignment 1 – 2000-word report and presentation (20%) (assessing outcome 1-7)

Indicative reading:

Making sense of clinical examination by Douglas Model (2006)

- Churchill's Pocketbooks – Differential diagnosis (2006 onwards)

Or

- Oxford Handbook of Clinical diagnosis (2009 onwards)

One of the following Clinical examination books (2008 versions onwards), please ensure to get the full books, not the pocket versions.

- Clinical examination by Epstein et al
- McLeod's Clinical examination by Douglas et al
- Bates Guide to Physical examination and history taking by Bickley

Additional reading

A clinical guide to blending liquid herbs (2003) by Mills and Bone

The consultation in phytotherapy by Peter Conway

Oxford medical dictionary

British National Formula

Clinical examination DVD series by by Andreas Syrimis

Oxford Handbook of Clinical Medicine

Differential diagnosis for primary care by Jamison (2007)

Herb, Nutrient and Drug Interactions (2008) by Stargrove et al

Stockley's Herbal Medicines Interactions (2nd edition) by Elizabeth Williamson (2013)

100 cases in clinical medicine by Rees and Pattison (2013)

EHTPA syllabus:

Module 6 - LO1 - LO8

Module 8 – HT – LO2 – LO5

Module 9 – All outcomes

Year 4 course specification 2018

Core subject: Nutrition
Pre-requisite: Y3 Betonica MH Training programme or equivalent appropriate level 5 study of health.
Main aim: To further explore the subject of nutrition in the context of the herbal medicine consultation and treatment strategies.
Main topics of study: <ul style="list-style-type: none"> • Longevity in health • Food intolerance and allergies • The psychology of changing dietary habits • Supplementation
Learning outcomes for the year: <ol style="list-style-type: none"> 1. Be able to demonstrate knowledge and understanding of allergies and intolerances in regard to diet. 2. To demonstrate understanding of supplementation. 3. To demonstrate understanding of the importance of diet in a clinical setting and the effect on the herbal medicine treatment strategy
Teaching/learning methods/strategies used to enable the achievement of learning outcomes: <ul style="list-style-type: none"> • Background reading and research on the subject, including online videos. • One taught seminar day. • Self-assessed learning throughout workbook.
Assessment methods: <ul style="list-style-type: none"> • 2000-word essay case based therapeutics and nutrition (50%) (assessing outcome 3)
Indicative reading: Nutrition in Clinical Practice by David Katz (2014)
Additional reading Staying Healthy with Nutrition: The Complete Guide to Diet and Nutritional Medicine by Elson Haas Prescriptions for Nutritional Healing by Phyllis Balch (5th edition) Biochemical imbalances in disease by Nicolle and Woodriff Beirne (2010) The Functional Nutrition Cookbook by Nicolle and Bailey Healthy Gut, Healthy You by Dr Michael Ruscio (2018)
EHTPA syllabus Module 2 – LO4 – LO6

Core subject: Pharmacology
Pre-requisite: Y3 Betonica MH Training programme or equivalent appropriate level 5 study of health.
Main aim: To further study the subject of pharmacology in the context of the herbal medicine.
Main topics of study: <ul style="list-style-type: none"> • Pharmacodynamics • Receptors • Enzymes • Pharmacodynamics of toxicology
Learning outcomes for the year: <ul style="list-style-type: none"> • Be able to demonstrate knowledge and understanding of the concept of pharmacodynamics • To demonstrate understanding of the role of receptors and enzymes. • To demonstrate understanding of the importance of pharmacodynamics of toxicology
Teaching/learning methods/strategies used to enable the achievement of learning outcomes: <ul style="list-style-type: none"> • Background reading and research on the subject, including online videos. • One taught seminar day. • Self-assessed learning throughout workbook.
Assessment methods: <ul style="list-style-type: none"> • 2000-word essay on plant reproduction (50%) • 1 hour exam - short and longer answer question
Indicative reading: Pharmacology at a glance by M.J. Neal (2009 onwards)
Additional reading Pharmacology condensed by Rang and Dale Pharmacology by Rang and Dale Medical Pharmacology (Master of Medicine series) Principles and Practice of Medicine by Davidson (Herbal pharmacodynamics) British National Formulary (BNF) The Top 100 drugs
EHTPA syllabus Module 4 – LO3

Core subject: Research
Pre-requisite: Year 3 Betonica MH Training programme or equivalent level 4 study of research skills.
Main aim: To build on the introduction to research skills in year two and put into practice the research skills used in clinical practice.
Main topics of study: <ul style="list-style-type: none"> • Reading and analysing data and research • Critical appraisal tools • Research skills for dissertation
Learning outcomes for the year: <ul style="list-style-type: none"> • Demonstrate the ability to read and analyse data, including critical appraisal. • Understand the research skills available and needed for research projects. • Demonstrate the ability to complete an independent piece of in-depth research as a dissertation.
Teaching/learning methods/strategies used to enable the achievement of learning outcomes: <ul style="list-style-type: none"> • Reading and online research. • Videos. • Self-assessment tasks in workbook. • Four taught seminar days.
Assessment methods: <ul style="list-style-type: none"> • Research assignment 1 – finding a topic (5%) (assessing outcome 4) • Research assignment 2 – writing a proposal (15%) (assessing outcome 4) • Dissertation (80%) (assessing all outcomes)
Indicative reading: The undergraduate dissertation handbook (Palgrave) Palgrave study skills - How to write an undergraduate dissertation by Bryan Greetham Dissertations and project reports by Stella Cottrell
Additional reading How to read a paper by Trisha Greenhalgh (2005 editions onwards)
EHTPA syllabus: Module 7 – LO1-LO6

Core subject: Clinical skills – Final Clinical exam
Pre-requisite: Year 3 Betonica MH training programme or equivalent level 5 study of clinical skills.
Main aim: To continue the study of clinical skills, deepening understanding of the topics and building confidence as a practitioner in order to pass the final clinical exam.
Main topics of study: <ul style="list-style-type: none"> • Clinical skills – physical examination of all systems • The therapeutic relationship and case management • Analysing blood test results • Oncology • Mental health • Infertility, pregnancy, childbirth and breastfeeding • Clinical training – 200 hours
Learning outcomes for the year: <ul style="list-style-type: none"> • Undertake regular reflective practice. • To demonstrate understanding of the patient assessment and case history taking and how it relates to clinical examination and differential diagnosis. • To demonstrate the ability to complete clinical examinations – general, thyroid, respiratory, cardiovascular, lymphatic, abdominal, neurological, musculoskeletal, and skin. • To demonstrate understanding of the patient assessment and case history taking and how it relates to clinical examination and differential diagnosis. • To demonstrate an understanding of the responsibilities held by the herbal medicine practitioner in regards to medical law. • To complete 200 hours of clinical training.
Teaching/learning methods/strategies used to enable the achievement of learning outcomes: <p>Reading and additional research.</p> <p>Self-assessment tasks throughout workbooks.</p> <p>Clinical equipment practice in class.</p> <p>Online videos.</p> <p>Seven taught seminar days.</p> <p>200 hours of clinical training.</p>
Assessment methods: <p>Final clinical exam – 1 hour and 15 min with panel of 3 FCE examiners including a GP/consultant</p> <p>Viva Voce exam – 30 min with panel of 3 FCE examiners including a GP/consultant</p>
Indicative reading: <p>Making sense of clinical examination by Douglas Model (2006)</p> <ul style="list-style-type: none"> • Churchill's Pocketbooks – Differential diagnosis (2006 onwards) <p>Or</p> <ul style="list-style-type: none"> • Oxford Handbook of Clinical diagnosis (2009 onwards) <p>One of the following Clinical examination books (2008 versions onwards), please ensure to get the full</p>

books, not the pocket versions.

- Clinical examination by Epstein et al
- McLeod's Clinical examination by Douglas et al
- Bates Guide to Physical examination and history taking by Bickley

Additional reading

A clinical guide to blending liquid herbs (2003) by Mills and Bone

The consultation in phytotherapy by Peter Conway

Oxford medical dictionary

British National Formula

Clinical examination DVD series by by Andreas Syrimis

Oxford Handbook of Clinical Medicine

Differential diagnosis for primary care by Jamison (2007)

Herb, Nutrient and Drug Interactions (2008) by Stargrove et al

Stockley's Herbal Medicines Interactions (2nd edition) by Elizabeth Williamson (2013)

100 cases in clinical medicine by Rees and Pattison (2013)

EHTPA syllabus:

Module 6 - LO1 - LO8

Module 8 – HT – LO1 – LO5

Module 9 – All outcomes

Core subject: Business skills
Pre-requisite: Y3 Betonica MH Training programme or equivalent appropriate level 5 study of health.
Main aim: To provide an overview of business skills and how they relate to a herbal medicine business.
Main topics of study: <ul style="list-style-type: none"> • Business planning • Self employment • Marketing • How to run your business • What is success? • How will you make money?
Learning outcomes for the year: <ul style="list-style-type: none"> • To understand the legal and ethical requirements of running a business as a herbalist • To create a business plan for your business as a medical herbalist
Teaching/learning methods/strategies used to enable the achievement of learning outcomes: <ul style="list-style-type: none"> • Background reading and research on the subject, including online videos. • One taught seminar day. • Self-assessed learning throughout workbook.
Assessment methods: <ul style="list-style-type: none"> • 2000-word business plan (50%)
Indicative reading: The right brain business plan: A Creative, Visual Map for Success by Jennifer Lee Wellpreneur: The ultimate guide for wellness entrepreneurs to nail your niche by Amanda Cook
Additional reading TBC
EHTPA syllabus Module 9 – SS1 Module 9 - PLS 1 and 2

Appendix 2 – NIMH code of ethics - 2011

Your Obligations to Your Patients

Your duty of care

1. You have a duty to your patients to maintain high standards of care, competence and conduct.
2. The relationship between you and your patient is that between a professional and a client who is entitled to put complete trust in you as a professional. It is your duty not to abuse this trust in any way.
3. Any patient consulting you has the right to expect that you will:
 - 3.1 make their care your overriding priority
 - 3.2 listen to them carefully and respect their confidentiality
 - 3.4 explain your findings to them and ensure that they understand what you tell them
 - 3.5 inform them clearly of the nature and purpose of any proposed treatment
 - 3.6 respect their autonomy and encourage their freedom of choice
 - 3.7 ensure that they know how, where and when you may be contacted
4. In providing care you must:
 - 4.1 assess any condition thoroughly, with appropriate examination and investigation
 - 4.2 recognise the limits of your professional competence and work within them
 - 4.3 provide, where appropriate and with the patient's consent, relevant information to other health professionals who are caring for them
 - 4.4 consult others and refer for investigation and treatment elsewhere, when necessary
 - 4.5 keep accurate and comprehensive case notes and records
 - 4.6 review the patient's treatment and progress at agreed intervals and assess the suitability of further herbal medicine treatment
 - 4.7 encourage patients promptly to seek other forms of medical treatment if you feel that herbal medicine is no longer the most appropriate means of treating their problems
 - 4.8 act promptly and appropriately if you become aware of an error on your part, ensuring that the NIMH's insurers are informed prior to any further action or comment
 - 4.9 act promptly if a patient complains about any aspect of your professional practice and keep a record of the complaint and any actions taken
5. It is fundamental that you and those that you employ treat your patients with respect. This includes their gender, ethnicity, disability, culture, beliefs, sexuality, lifestyle, age, social status, language difficulties or any other characteristic. Your own views, values, beliefs and attitudes must never be allowed to prejudice the care and well-being of your patients.

Fees

6. When a patient consults you this involves entering into a contractual relationship. The patient will normally pay a fee. Even if the patient does not pay a fee, or where there is no explicit contractual relationship (e.g. in an emergency) you still have a duty to apply the standard of care expected of a professional herbalist.
7. A notice of your fee structure must be made readily available in your clinic or treatment room. This notice, and any advertisement quoting fees, must quote charges for both initial and subsequent sessions and must make clear what each fee covers.

Case notes

8. You must keep accurate, comprehensive, easily understood, contemporaneous and dated case notes recording:
 - the patient's personal details (name, address, telephone number and date of birth)

- the presenting complaint and symptoms reported by the patient
- relevant medical and family history (including the GP's name and address)
- your clinical findings
- any treatment given and details of progress of the case, including reviews of treatment planning
- any information and advice that you give, especially when referring the patient to any other health professional
- any decisions made in conjunction with the patient concerning their treatment
- records of the patient's consent to treatment, or the consent of their next-of-kin

9. You are required to keep patient records for a minimum of seven years. In the case of minors these records must be kept until the patient reaches at least the age of 25 (seven years after reaching 18). This applies even when you have referred a patient on, or you have left the practice where you administered the treatment.

10. Your patient's case notes and records are your property, and you must retain them even if you move to another practice. If, as a clinical supervisor, you oversee a student's work under your professional practitioner insurance, the patient's records are yours. Although a patient can by written application seek access to notes they have no legal rights of ownership. However, if a patient requests a copy of their notes, you must follow the procedure laid out in the Data Protection Act 1998 and keep a record of this on the file. Your professional insurance policy may require you to keep records for seven years, so it is important that you know where they are at any time in order to fulfil the requirements of your insurance to defend an allegation against you.

11. On selling or otherwise transferring your practice, you may pass on the original records if (a) the new owner will be subject to the same or similar rules to those headed 'Case Notes' above and (b) the patient is informed in writing in advance of the transfer and given the opportunity to object, in which event you must retain the original records. You must also ensure that patients are kept fully informed and offered appropriate choices about their continuing care and the safe keeping and location of their original records. As it will be your professional insurance policy that will defend you for previous work performed, you must ensure that the notes can be easily accessed in order to fulfil the terms of the policy and in any event to allow yourself to be defended whether by the insurers or anyone else.

12. If you practise out of a clinic or are part of a group practice you should be aware of your responsibilities in relation to your patient's case notes. It is your individual responsibility to retain access to the case notes of all the patients that you see/treat both in private practice and in a clinic. When joining a practice or clinic you should ensure as part of your agreement that you are able to access and preferably keep copies of all notes in the event that you leave. Not being able to produce copies of notes may invalidate your insurance cover and may prejudice your position if a claim is brought against you.

Where members are operating a clinic or running a practice they should appoint someone to be responsible for the safety and security of notes/records and to deal with all requests.

Access to case notes and records should be maintained for all herbalists currently or previously members of the clinic/practice. Clinics/practices who store case notes and records on a "computerised" system must notify the Information Commissioner

13. You must not use knowledge gained from patients or from their records in any other context for personal or professional gain.

14. Patient records must be kept secure and confidential at all times. Where you hold patient's details in a computerised system, you must notify the Information Commissioner. Where records are held in a manual system, the Data Protection Act 1998 still applies.

15. You may destroy old records in accordance with paragraph 9 in a secure manner. The method of disposal is not regulated but burning and shredding are most appropriate methods. You must also make appropriate arrangements for the safe keeping and transfer of patient notes in the event of your death or serious injury.

16. If you write your case notes in any language other than English it will be your responsibility to provide a full translation, if called upon to do so by the NIMH, in the event of a complaint being made, or the records being required for official purposes, or a request being made by the patient under the terms of the Data Protection Act 1998.

Delegation of professional duties

17. When delegating your professional duties you must delegate to a person who is competent to do so, carries professional indemnity insurance and, if they are not members of NIMH, is made aware of and agrees by contract with you to be bound by the NIMH Code of Ethics and Practice.

18. The practitioner is responsible for dispensing. If this responsibility is delegated to a dispenser they should be competent, trained, and, if they are not members of NIMH, made aware of and agree by contract with you to be bound by the NIMH Code of Ethics and Practice.

Absence from practice

19. Should you be away from your practice for any length of time it is your duty to ensure patients are informed about where they may seek appropriate treatment in your absence, or to provide trained, qualified, and insured practitioner cover.

Retiring from practice

20. Should you retire from practice you must inform your patients that you are retiring and ensure that they are aware of other practitioners in your area and of the location of their original case notes and records.

Professional Standards

21. The NIMH Code of Ethics and Practice has been produced to ensure that you meet and maintain the high standards within the profession. You must familiarise yourself with the Code of Ethics and Practice and related guidance and you must ensure that your practice of herbal medicine and your premises meet the required standards.

22. You must comply with any rulings made by the NIMH committees on conduct, fitness to practise, complaints and disciplinary committees in enforcing the Code of Ethics and Practice, the Memorandum and Articles of Association, and related codes and standards.

Failure to comply may itself be subject to disciplinary measures on the grounds of professional misconduct.

Continuing Professional Development

23. You must maintain and improve your professional knowledge and skills, and keep up to date with developments and changes affecting the practice of herbal medicine, throughout your working life, through active engagement and compliance with the Continuing Professional Development requirements of the NIMH.

Your Ethical Boundaries in Relationships with Patients Inappropriate Relationships

24. You must not enter into a sexual relationship with a patient. You must also be aware of the dangers of allowing any sort of emotional relationship to develop with a patient. If you are becoming emotionally or sexually involved with a patient you should end the professional relationship, and recommend to the patient an alternative source of appropriate care.

25. If a patient shows signs of becoming inappropriately involved with you, you should discourage them and, if necessary, end the professional relationship. You may wish to report such matters to the NIMH, in your own interest, or seek advice from a colleague whilst maintaining the anonymity of the patient.

26. You must ensure that your behaviour in dealing with patients is professional at all

times and not open to misunderstanding or misinterpretation. You must be aware that nonphysical behaviour, gesture, unnecessary physical contact, verbal suggestion or innuendo can be construed as abusive or harassing.

27. You must allow the patient privacy if they are required to undress for physical examinations and you must also ensure that you provide adequate clean gowns, sheets or blankets for their use.

28. You may find yourself called upon to treat a relative or someone whom you consider to be a friend. There is no harm in this provided that clear boundaries are kept between the social and professional relationships.

29. You must ensure that past, present or anticipated relationships of any kind do not interfere with your professional duties, and you must avoid any behaviour which can be construed as compromising those duties.

Your Legal Obligations and Good Practice Patient Consent

30. You must explain carefully the physical examinations, tests, procedures and treatment that you intend to administer, and must recognise that the patient is entitled to choose whether or not to accept advice or treatment. It can be construed as an assault to examine or in some cases even to prepare to treat someone without their consent, and to continue to treat someone if they withdraw their consent in the middle of a treatment.

31. Consent must be given by a legally competent person, must be given voluntarily and must be informed. Consent is not implied by a patient's presenting for consultation or treatment. You must seek explicit consent, in writing if necessary, and ensure that the patient understands what you propose to do. You are recommended to record all relevant information in the case notes.

32. You must record any subsequent explanation and consent obtained if the course of treatment extends beyond the original projection, if treatment continues beyond an agreed review date, or if the treatment itself involves significant changes in the prescriptions used or time taken.

33. You must not delegate the obtaining of consent to a receptionist or unqualified assistant. Informed consent requires that you (or an appropriately qualified colleague) must explain the procedure, be available to answer questions and be able to satisfy yourself that the patient understands what you have told them.

Consent of Minors

34. You must seek the consent of a parent or guardian if the patient is under the age of 16. In the absence of such consent you must not offer treatment.

35. You must also be aware that the refusal of treatment by a child under the age of 16 may carry legal force and override the consent, even though properly given, of a legally authorised adult. Extreme care should be exercised, and if necessary, refer back to the parent or guardian and take advice.

36. If you do treat a child under the age of 16, a parent or legally authorised guardian should be present in the treatment room throughout the whole of the consultation including examination and treatments. However if the child and parent/legally authorised guardian agree, the consultation could be carried out without an adult being present. An alternative chaperone for examination or treatment may carry out this role but not without the explicit written consent of the parent or legally authorised guardian.

Confidentiality

37. You have a duty to keep all information, medical or otherwise, concerning your patients entirely confidential, and such information may only be released with the explicit consent of the patient. This also applies to any views that you may form about the patient. This duty, which survives the death of a patient, also extends to anyone you may employ in your practice.

38. The fact of a patient's attendance at your practice must be considered confidential. You must not discuss details of a patient's case with their partner or their relatives unless you have their explicit permission.

Disclosures without consent

39. You must obtain a patient's consent before repeating information given to you in confidence. Only in very extreme cases, such as when you consider that your duty to society at large takes precedence would the lack of such consent be considered acceptable.

40. Disclosures without consent may be necessary. This may be because the patient is putting themselves or others at serious risk by, for example, the possibility of a violent or criminal act or failing to report a notifiable illness. In all circumstances you are advised to consult the NIMH or take legal advice before making a decision to release information without a patient's permission.

41. A Court may order you to disclose information about a patient. If called upon to do this, you should seek advice from the NIMH as to how best to proceed.

Notifiable Diseases

42. You must refer the patient to their doctor if you have concerns in relation to notifiable diseases.

Abortion

43. It is illegal for anyone who is not a registered medical practitioner to attempt to procure an abortion; you must not knowingly administer an abortifacient nor known uterine muscle stimulant remedies to a pregnant patient, nor instruments for the purpose of procuring an abortion, nor assist in any illegal operation.

44. Before providing to any woman of child-bearing age any remedies that have an abortifacient or uterine stimulating action you are advised to obtain written confirmation from the patient that she is not likely to be pregnant.

Sexually Transmitted Infections

45. You must not treat nor prescribe any remedy for sexually transmitted infections or sexually transmitted diseases. The patient should be referred to a sexual health clinic.

Compliance with legislation

46. You must comply with the terms of all relevant legislation relating to the practice of herbal medicine, herbal medicines, and health, safety and environmental protection.

47. Local Authorities are empowered by various Acts of Parliament to enact bylaws that may impose requirements on medical herbalists and their premises, and have the power to prosecute practitioners who fail to comply with these bylaws.

Your Commercial Obligations

Advertising standards

48. All advertising must be legal, decent, honest and truthful and must conform to relevant guidelines in the British Code of Advertising Practice, as well as the current advertising guidelines of the NIMH. Your advertisements may include information about any qualifications and special interests other than those in herbal medicine that you may have, but must not make claims of superiority or disparage professional colleagues or other professionals.

49. All members may use the current NIMH logo on practice literature. The crest of the NIMH may only be used by members formally appointed and / or elected in connection with the business of the NIMH.

50. Advertising must not mislead or deceive. It must not be sensational and make unrealistic, self-laudatory, or extravagant claims. Neither its content nor the manner in which it is distributed should be such as to put prospective patients under pressure.

Advertising must not create unjustified expectations about the length or type of treatment or its prospects for relieving the condition concerned. Claims to cure conditions, as distinct from relieving symptoms, are strictly prohibited.

Placing and distribution of advertisements

51. You must ensure that the design and contents of advertisements are legal and professional. Advertisements must appear in surroundings appropriate to professional advertisements, and must be distributed by similarly professional and legal means. When advertising in conjunction with practitioners of other therapies you must take reasonable steps to ensure that those other therapists are also registered with bona fide professional bodies.

Financial and commercial activities

52. You must make a clear distinction between your herbal practice and any commercial activity in which you may be involved. There must be no suspicion of any business affairs having an influence over your attitude towards patients and their care.

52. To promote a product to patients for no good reason other than profit is highly unethical. If you sell or recommend any product or service to a patient, you must be satisfied this will be of benefit to the patient and that you are appropriately qualified to offer such products or advice.

53. You must not encourage your patients to give, lend or bequeath money or gifts which will directly or indirectly benefit you. You must also not put pressure on patients or their families to make donations to other people or organisations.

Your Obligations in Practice Membership of other professional organisations

54. If you belong to other professional bodies whose ethical standards differ from those of the NIMH, you must be aware that this cannot put you beyond the NIMH jurisdiction where matters of professional conduct are concerned.

Practising other therapies

55. If you practise other therapies you are advised to ensure that you are appropriately trained and qualified in those therapies, and that you are insured with professional indemnity insurance to practise that therapy.

Using other techniques, supplements or equipment as an adjunct to treatment withherbal medicine

56. If you use techniques or equipment which are not within the normal scope of herbal medicine practice, you must ensure that you are appropriately trained in and qualified and hold valid insurance for the use of the techniques, or equipment, and record your patient's consent to the treatment and techniques proposed.

Use of the title 'doctor'

57. You must not use the title "doctor", either as a prefix in advertising your practices or in referring to yourself, nor allow yourself to be referred to as "doctor" in the context of being addressed as a herbalist, in such a way as to imply that you are registered with the General Medical Council, unless you are.

58. Courtesy titles, doctorates in any other field, and post-graduate qualifications in herbal medicine are not acceptable as a basis for the use of the title 'doctor' as a prefix when being addressed as a herbalist.

Treatment of animals

59. You must not administer any type of treatment to an animal unless you are a qualified vet. Under the Veterinary Surgeons Act 1966 treatment may only be carried out by registered veterinarians. The Royal College of Veterinary Surgeons will not allow animals to be treated with herbal medicines without a vet being present and taking responsibility for the diagnosis and treatment of the animal.

Your Relationship with Professional Colleagues Relationships with other practitioners

60. If you treat the patient of another practitioner because of holiday, illness or any other reason, you must not attempt to solicit the patient, either directly or by default, to continue treatment with you. You must inform the original practitioner as to which patients had been treated and the treatment that had been given.

61. In all cases the wishes of the patient are paramount. If a patient decides to transfer from you to another practitioner, it is courteous, and in the patient's interest, for you and the other practitioner involved to communicate with each other about this transfer, and for relevant information about the patient to be forwarded, with the patient's consent.

Relationships with medical doctors

62. It is good practice to maintain contact and communication with other healthcare professionals in the provision of integrated care of the patient. You should acknowledge referrals from a GP or RMP, and should also consider it good practice to inform and communicate with a patient's GP, with the patient's consent, when the patient has self-referred.

Criticism of other practitioners

63. You may sometimes encounter criticism of the competence or professionalism of other practitioners voiced by patients or colleagues. If you hear such criticisms of other practitioners, whether they are members of the NIMH or not, you must at all times act with the utmost discretion and professionalism, and must be extremely cautious about voicing any opinion. This applies equally if you yourself hold critical views of others, either in your own field or in another health care discipline.

64. You are expected to act with integrity, discretion, and respect for the views of others. You are entitled to put forward your views on good clinical practice in publications, seminars, etc. However, you must not criticise other healthcare disciplines or practitioners, either directly or by implication, over and above the standards which apply in the debates to which you contribute.

Dealing with concerns about other practitioners' behaviour

65. If you have concerns about another practitioner's conduct, health or professional competence you must contact the NIMH Head Office.

Your Obligations as a Teacher Teaching and Training in herbal medicine

66. Members may teach and give training in herbal medicine.

67. You must ensure that you have obtained appropriate and, if necessary, additional insurance to teach and give training in herbal medicine.

68. You must ensure that anyone that you teach or train in herbal medicine is aware that this does not qualify them to join the NIMH unless the teaching or training is formally accredited by the NIMH.

Assistants and Observers

69. You are allowed to have students of herbal medicine, potential students of herbal

medicine, or other individuals present as observers in your practice. An observer may only be present at a consultation with the explicit permission of the patient. You must take care to avoid 'coercive consent' where a patient feels that they are under pressure to allow an observer to be present.

Research

70. If you are involved in research involving patients you must seek the approval of an appropriate research ethics committee. You must also obtain a patient's consent if they are involved in your research and must ensure above all that their care is not compromised in order to meet the needs of your research aims.

71. You must also ensure that the patient's confidentiality is respected in the sharing or publication of research findings. If the results of research cannot be aggregated in such a way as to conceal the identity of individual patients, any consent obtained from the patient for the use of such results must be based on full details of the distribution, publication, an ownership of these results. If a patient refuses consent for the disclosure of research results this choice must be respected.

Appendix 3 – Student Agreement

This agreement sets out the expectations and requirements from students undertaking the Betonica Medical Herbalist Training programme.

1. To adhere to the guidelines and requirements when attending clinics (as set out in the clinic folder and preparing for clinical training documents).
2. To arrive promptly to seminars and workshops and conduct yourself in a professional manner.
3. To notify the course leader if you cannot attend a seminar/workshop/meeting/clinic so that alternative arrangements can be made. In the case of clinic attendance, if your place is not cancelled you may incur a fine.
4. To attend the required seminar/workshop days. If you do not attend the recommended seminars you will not be able to progress further in the course (see handbook for more details).
5. To submit work at the agreed deadline, (unless in exceptional circumstances which should be addressed with your tutor), missed deadlines will incur a reduction in the marks given. (See student handbook)
6. To adhere to the NIMH code of ethics (see student handbook appendix).
7. To attend a monthly one on one session with your personal tutor to assess your portfolio and progression.
8. To comply with guidance set out in the student handbook.
9. To respect the views of others, colleagues, students, and patients, and follow the current equal opportunities legislation and work harmoniously with people of all cultures and backgrounds.

Signed.....

Printed name:

Date:

Please note: the course leader has the right to disqualify a student and remove them from the course if they breach the code of ethics, or do not commit themselves to the course.

**Appendix 4 – Betonica Medical Herbalist Training Programme Application form
– 2019**

Name:	
DOB:	
Address:	
Telephone number(s):	
Email address:	

Education	(Please include name of institution, date attended and grades achieved)
Secondary education	
College/Sixth form	
University	

1. Previous Work experience	
Current employer and job role	
Start date	
Employer and job role	
Start date	
End Date	
Employer and job role	

Start date	
End Date	
Employer and job role	
Start date	
End Date	

2. Additional skills or experience	Please list any additional skills or experience that you feel may be relevant

3. Why would you like to study herbal medicine?

4. Please describe, in under 150 words, why you would like to take part in the Betonica Medical Herbalist training programme?

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5. Please explain, in under 150 words, what you would do once qualified as a medical herbalist?

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6. Is English your first language? Y / N

7. If not, do you have an IELTS level 7 or equivalent qualification in English? Y / N

8. References	Please give the names and addresses of two referees. Referees can be previous employers, colleagues in projects you volunteer at, previous course tutors etc. They must have known you for at least 2 years.
Referee 1	
Name	
Address	
Email address	
Telephone no.	
Referee 2	
Name	
Address	
Email address	
Telephone no.	

9. Do you have any health conditions that may affect your ability to complete the course?

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10. Name and telephone number of person to contact in an emergency

11. Do you require any adapted materials?

E.g. Dyslexia – print needed in Arial font size 14 on green paper.
Or those who are visually impaired may need large print and no OHP.

12. Which year of the course are you applying to join?

a) Year 1

b) Year 2 (via Betonica fast track route)

c) Year 2 (all Y2 prerequisites met)

13. If you're applying for **A)** Year 1 - please go to **section 16**.

If you're applying for **B)** Year 2 via the Betonica fast track route – please complete **section 15**.

If you're applying for **C)** Year 2 - please complete **section 14**.

14. Please complete the following table regarding the prerequisites for Year 2.

Prerequisites		
1	<p>Anatomy and physiology (at A level or equivalent level 3 or higher) (within the last five years)</p> <p>Please provide a certificate and a link to the course content so that we can assess if additional study is required.</p>	
2	<p>6 days contact time with a medical herbalist</p> <p>This can be workshops or longer</p>	<p>Day 1 – (date) (courses/subject) (herbalist)</p> <p>Day 2 – (date) (courses/subject) (herbalist)</p>

	courses but must be within the last 5 years (and must be 'in person' days).	Day 3 – (date) (courses/subject) (herbalist) Day 4 – (date) (courses/subject) (herbalist) Day 5 – (date) (courses/subject) (herbalist) Day 6 – (date) (courses/subject) (herbalist)
3	Study of herbs In the first year of the course 50 herbs are studied.	<i>Please provide details of any herbs that you have studied in depth, either self-study, online courses or in person courses within the last five years.</i>

15. If you are able to meet some of the prerequisites in **section 14** but not all of them, you may be eligible for our [fast track programme](#). Please complete section 14 with as much information as you can.

16. Please send your completed application form to info@betonica.co.uk.

Deadlines

If you are applying for a place in our year 1 class the deadline for applications is **28/06/19**.

If you are applying for a place in our year 2 class or our fast track programme the deadline for applications is **12/04/19**.

Interviews

If your application is shortlisted we will be in touch regarding the next stage of the process. We may want to have a pre interview chat to ask additional questions, and following that you may be asked to attend an in person interview.

- Year 2 and fast track Skype chats – **26th April 2019**
- Year 2 and fast track programme interview day – **Sunday 19th May 2019** (held at the WHERE centre in Wellington, Somerset)
- Year 1 interview day – **Saturday 13th July 2019** (held at the WHERE centre in Wellington, Somerset)

Please note: all of your information will be kept in accordance with the Data Protection Act.

Appendix 5 – Routes to Year 2

We understand that there are many one-year courses available but students can get stuck and are unable to progress with their training. Therefore, we ensure we have places available for students to start in year two of our course if they are able to meet our prerequisites.

Please note, due to the small class sizes we are heavily oversubscribed, ensure you apply before the **12/04/19**.

Routes	<i>You need to complete the following to move on to year 2 of the course:</i>
1. Complete year 1 of the Betonica Medical Herbalist Training Programme	No further study required to move to year 2
2. If you have previously studied: <ul style="list-style-type: none"> • Anatomy and Physiology (level 3 and above) - within the last 5 years. • An in person course with a medical herbalist (at least 6 days) within the last 5 years. 	<ul style="list-style-type: none"> • A one day crossover workshop with Betonica (14th July 2019) • A reading assignment to match your previous knowledge to the level required. • Complete the Materia medica module (or show accredited prior learning of 50 herbs (see below))
3. If you have previously studied: <ul style="list-style-type: none"> • Anatomy and physiology (level 3 and above) - within the last 5 years. • Some herbal courses but less than 6 days contact time (within the last 5 years) 	<ul style="list-style-type: none"> • Take in person courses with medical herbalists to make it to 6 days contact time • A one day crossover workshop with Betonica (14th July 2019) • Complete the Materia medica module (or show accredited prior learning of 50 herbs (see below))
4. If you have previously studied: <ul style="list-style-type: none"> • A distance learning herbal medicine course 	<ul style="list-style-type: none"> • Anatomy and physiology introductory module (or level 3 equivalent) • A one day crossover workshop with

	<p>Betonica (14th July 2019)</p> <ul style="list-style-type: none"> • Attend a course listed here. • Attend a herbal conference or festival e.g. • Elder Farm Summer School (June) • Radical Herb Gathering Scotland (May) • Herbfest (April - May) • Herbfeast (May) • Springfield herb festival (September) • Complete the Materia medica module (or show accredited prior learning of 50 herbs (see below))
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Please note, the following courses are accepted as accredited prior learning of 50 herbs (which must have been completed within the last 5 years).

- Year long course with Anne McIntyre
- Drimlabarra (Scottish school) HM correspondence course (or apprenticeship)
- New vitality course with Pam Bull
- Sensory solutions year 1 with Karen Lawton and Fiona Heckels
- Year long class with Nathan Hughes
- Springfield sanctuary year 1 with Sarah Head
- Herbal apprenticeship year 1 with Nikki Darrell

If you get a place in the second year of the Betonica Medical Herbalist Training Programme you will be required to read the first year materials in order to ensure there are no gaps in your knowledge.

Costs

- Anatomy and physiology introductory module with Betonica **£300**
- Materia medica module **£300**
- Cost of attending in person training with a herbalist (cost varies and is paid directly to the herbalist/event).

Please note: A payment plan is available but all work, assignments and payments must be complete by 20th August 2019.