Accreditation Guide

The 2019 Accreditation Guide includes current standards, competencies, definitions, policies and procedures. It supersedes and replaces all other versions of any and all of these documents in full or in part previously published by IAYT or others. This guide is the official document for accreditation applicants and others seeking the correct and current information regarding IAYT accreditation.
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Part 1

IAYT 2019 Accreditation Standards
For Yoga Therapy Educational Programs
1. IAYT 2019 Accreditation Standards for Yoga Therapy Educational Programs

Section 1. Minimum Admission Requirements

1.1 The minimum admission requirement for a yoga therapy educational program is a 200-hour yoga teacher training, such as a Yoga Alliance 200-hour registered school program (RYS 200) or equivalent. An equivalent training integrates the following categories:

1.1.1 yoga techniques,
1.1.2 anatomy and physiology (western and eastern),
1.1.3 yoga philosophy foundations,
1.1.4 teaching methodology, and
1.1.5 practicum (practice teaching).

1.2 In addition to the minimum yoga teacher training prerequisite, students must have completed the following, which can be accomplished concurrently:

1.2.1 one year of teaching experience, with specifics to be determined by the program; and
1.2.2 one year of personal practice, with specifics to be determined by the program.

Section 2. Program Length

2.1 An entry-level yoga therapy educational program must be at least 800 hours total and taught over a minimum of two years. Programs may allow more time for completion of the requirements at their discretion.

2.1.1 The 800 hours minimum does not include the prerequisite admission requirements.

Section 3. Curriculum and Hours

3.1 The program documents that all required competencies are met through the curriculum by the submission of a completed Competencies chart.

3.1.1 The curriculum may draw upon a range of lineages and/or traditions; however, these various perspectives must be integrated into a unified, cohesive philosophy that supports the practical application of the yoga therapy approach taught in the program.

3.1.2 The curriculum is delivered in a way that allows students to acquire knowledge and develop the skills outlined in the competencies chart in a progressive and systematic manner.

3.1.3 The curriculum is designed to enable students to develop and deliver individualized yoga therapy.

3.1.4 The curriculum addresses various learning styles of students and includes didactic learning, experiential learning, practicum-based skill building, personal development through mentorship, and sangha within the educational program.

3.1.5 The program demonstrates a process by which student learning is sufficiently assessed throughout the program to determine that learning objectives and competencies have been met.
3.2 All program hours must be part of an integrated educational curriculum.

3.2.1 All program hours must be documented in the syllabus and competency chart.

3.2.2 The minimum 800 program hours **must** include:

3.2.2.1 A minimum of 500 residential hours.

3.2.2.2 A minimum of 150 mentored practicum delivery hours:

3.2.2.2.1 in which a student provides one-to-one or group yoga therapy sessions as a lead therapist in an appropriate setting as determined by the program director; and

3.2.2.2.2 which are documented by the student and reviewed by a practicum mentor.

3.2.2.3 A minimum of 30 practicum mentorship hours provided to the student by an assigned practicum mentor.

3.2.3 The minimum 800 program hours **may** include:

3.2.3.1 A maximum of 200 hours synchronous (real-time) distance learning which may be counted toward the residential hours minimum.

3.2.3.2 A maximum of 300 hours asynchronous distance learning.

3.2.3.3 A maximum of 175 hours of integrated, competency-based elective coursework.

3.3 Homework and personal practice cannot be counted toward program hours.

**Section 4. Distance Learning**

4.1 A program may utilize distance learning as follows:

4.1.1 The format(s) utilized for distance learning must be identified and described.

4.1.2 Distance learning must address competencies and be included in the syllabus.

4.1.3 Documentation of distance learning must demonstrate how it is integrated into the curriculum and aligns with the philosophy, mission, and vision of the program.

4.1.4 Distance-learning hours must be predetermined like any other course.

4.1.5 Documentation of distance learning must demonstrate a logical sequence of content delivery in an academic format.

4.1.6 The mechanism(s) by which students obtain feedback and/or interact with program faculty during distance learning must be documented.

4.1.7 Programs must describe how distance learning is assessed.
Section 5. Transfer Credit Hours and Policy

5.1 A program may accept transfer credit hours, at the discretion of the program director, as follows:

5.1.1 A maximum of 300 transfer hours from sources outside of the program or its affiliated school.

5.1.2 A maximum of 600 hours from inside the program’s affiliated school.

5.1.3 The total maximum transfer hours from all sources must not exceed 600 hours.

5.1.4 Prerequisite hours are ineligible as transfer hours.

5.2 If transfer hours are accepted, the program must submit a transfer policy that documents the following:

5.2.1 How the program director evaluates the curriculum, faculty, number of hours, options around partial or full credit, and content the program chooses to accept;

5.2.2 How the school integrates transfer hours into the program curriculum;

5.2.3 How the program director determines that the transfer hours match competencies; and

5.2.4 All sources of transfer credit accepted by the program.

5.3 Students must complete a minimum of 200 hours in the program awarding the certificate of completion.

Section 6. Directors, Faculty Members, and Mentors

6.1. Director(s): The school director oversees the essential student records and data for which he or she is responsible, according to state law or school policy, and exercises technical and functional supervision over instructional staff, aides, and/or volunteers.

6.1.1 If there is no school director, the responsibilities of the school director may be met by the program director(s).

6.2 The program director oversees the entire yoga therapy educational program. The program director may or may not be the school director. The program director must

6.2.1 submit a curriculum vitae (CV) reflecting their qualifications to direct the program.

6.2.2 ensure that the educational program focuses on yoga therapy and that all educational objectives are met.

6.2.3 ensure curriculum integration throughout the entire program.

6.2.4 evaluate that student attendance, achievement, and completion of lessons, courses, and/or educational program requirements are met.

6.2.5 supervise and advise faculty members and assigned mentors.

6.2.6 have a thorough understanding of the range and depth of the subject matter taught in the curriculum.

6.2.7 have the expertise with which to assess faculty qualifications for each course within the curriculum, including both residential and distance learning.

6.2.8 be a C-IAYT or equivalent. Approval of equivalence is at the discretion of the Accreditation Committee.

6.2.9 have a minimum of five years of practical experience in yoga therapy.
6.3 Faculty members have well-established expertise and experience in the course(s) they teach, including training, certification, or a diploma in the field in which they teach, along with a minimum of three years of practical experience in that field.

6.3.1 Faculty members are supervised by the school director and/or a program director.

6.3.2 Faculty members who teach for more than 15 hours of a program must submit a CV documenting their education, experience, and expertise in the subject(s) they are teaching.

6.4. All mentors are appointed and supervised by the program director.

6.4.1 All mentors must have skills related to the program area they support.

6.4.2 Mentors may be used throughout a program but are required for practicum supervision.

6.4.3 Practicum mentors supervise, support development, and evaluate skills and abilities as identified in the competency chart.

6.4.3.1 Practicum mentors must submit a CV that demonstrates their knowledge of the breadth of tools presented in the program and experience related to delivery of yoga therapy.

END OF PART 1/STANDARDS
Part 2

IAYT 2019 Competencies
2. Educational Competencies

Section 1. Yoga Foundations
Suggested Guidelines: 120 hours minimum for Section 1 in entirety

Category 1.1. Yoga Teachings and Philosophy
Suggested Guidelines: 35 hours minimum for this category 1.1

1.1.1 Familiarity with the evolution of the teachings and philosophy of the yoga tradition and its relevance and application to yoga therapy, including teachings from Vedic and post-Vedic periods, Samkhya, Yoga, Tantra, and Ayurveda.

Examples of concepts and models from the above teachings and philosophy relevant to yoga therapy include but are not limited to

a. tanmatra/bhuta/indriya (subtle elements/gross elements/senses);
b. purusha/prakrti (consciousness/material world);
c. pancamaya kosha (dimensions of the human system);
d. guna (fundamental forces of nature); and

e. duhkha (suffering/discomfort).

Category 1.2. Yoga and the Mind
Suggested Guidelines: 35 hours minimum for this category 1.2

1.2.1 Knowledge of yoga perspectives on the structure, states, functioning, and conditions of the mind, including but not limited to

1.2.1.1 drashtr (seer), drshya (seen);

1.2.1.2 antahkarana citta (consciousness), buddhi (intellect), abamkara (ego), manas (mind);

1.2.1.3 citta vrtti (activities of the mind), citta pariaama (structural changes in the mind),
vyutthana/nirodha (mind’s potential for distraction and focus);

1.2.1.4 artha (cognition), bhava (mood), svabhava (inborn nature), vasana (residue of experience),
samskara (conditioned pattern of thinking and behavior); and

1.2.1.5 states of mind: mudba (stupefied/dull), kshipta (disturbed), vikshipta (alternating between distraction and focus), ekagrata (one-pointed), nirodha (focus enveloped/held/restrained), vaishvanara (waking), tajasa (dream), prajña (deep sleep), turiya (beyond).

1.2.2 Knowledge of yoga perspectives on distracted/disturbed conditions of mind and their expressions as expressed in such texts as the Yoga Sutras, the Bhagavad Gita, and other texts, including but not limited to

1.2.2.1 klesba (affliction);

1.2.2.2 lobba, krodha, and moha (greed, anger, attachment);

1.2.2.3 duhkha and daurnakanya (suffering/discomfort and negative attitude/thinking), sampyam (identification with the contents of the mind or seer taking the same form as the mind); and

1.2.2.4 antaraya (obstacles to progress in yoga).
Category 1.3. Framework for Health and Disease
Suggested Guidelines: 50 hours minimum for this category 1.3

1.3.1 Knowledge of the basic perspectives on health and disease from yoga and Ayurveda relevant to the practice of yoga therapy, including the concepts of

1.3.1.1 *pancamaya kosha* (fundamental structure of the human system);

1.3.1.2 subtle anatomy;

1.3.1.3 *tri-dosha* (effect of the elements on the physical body);

1.3.1.4 *tri-guna* (effect of *sattva* [equilibrium], *rajas* [activity], *tamas* [inertia]);

1.3.1.5 *prakrti/vikrti* (*dosha* constitution at birth/imbalance of the *dosha* currently expressed in the body);

1.3.1.6 *ama* (undigested food, emotions, etc., accumulated in the body);

1.3.1.7 *agni* (internal fire(s) and their contribution to health);

1.3.1.8 *prana vayu* (*prana, apana, vyana, udana, samana*);

1.3.1.9 *prana prakopa* (disturbance of the vayu);

1.3.1.10 *surya/chandra* (sun/moon);

1.3.1.11 *brmhana/langhana* (expansion/contraction); and

1.3.1.12 *vyuha* model: *beya* (the symptoms), *betu* (the causes), *hana* (the goal), *upaya* (the tools).

1.3.2 Knowledge of categorizing illness, including

1.3.2.1 Development/evolution of disease (*samprapti* [pathogenesis]), including but not limited to direction, intensity, onset, and duration and their influence on the ease or difficulty of healing and disease management.

1.3.2.2 Setting priorities: symptoms/pacification (*shamana* [short term]) and purification/strengthening (*shodhana* [long term]).
Section 2. Biomedical and Psychological Foundations
Suggested Guidelines: 155 hours minimum for Section 2 in entirety

Category 2.1. Anatomy and Physiology
Suggested Guidelines: 90 hours minimum for this category 2.1

2.1.1 Knowledge of human anatomy and physiology, including all major systems of the body and their interrelationships, as relevant to the work of a yoga therapist.

2.1.2 Knowledge of biomechanics and movement as they relate to the practice of yoga and the work of a yoga therapist.

2.1.3 Knowledge of common pathologies and disorders of all the major systems, including symptoms, management, illness trajectories, and contraindications, as relevant to the work of a yoga therapist.

Category 2.2. Additional Biomedical Knowledge
Suggested Guidelines: 15 hours minimum for this category 2.2

2.2.1 Familiarity with commonly used drugs and surgical procedures, as relevant to the work of a yoga therapist.

2.2.2 Familiarity with common medical terminology, as relevant to the work of a yoga therapist.

2.2.3 Knowledge of how to reference current healthcare information, including pathologies, disorders, drugs, and surgical procedures, as relevant to the work of a yoga therapist.

2.2.4 Knowledge of how to access and utilize research relevant to the work of a yoga therapist.

Category 2.3. Psychology and Mental Health
Suggested Guidelines: 30 hours minimum for this category 2.3

2.3.1 Basic knowledge of psychological concepts and terminology, including mood, cognition, behavior, and personality, as relevant to the work of a yoga therapist.

Category 2.4. Additional Knowledge
Suggested Guidelines: 10 hours minimum for this category 2.4

2.4.1 Familiarity with models of human development, including developmental stages, lifecycles, and personality, and their importance to medical and psychological health and well-being.

2.4.2 Familiarity with the influence of familial, social, cultural, and religious conditioning on mental and medical perspectives of health and healing.

Category 2.5. Body and Mind Integration
Suggested Guidelines: 10 hours minimum for this category 2.5

2.5.1 Knowledge of the interaction of the body, breath, mind, intellect, and emotions in health and well-being.
Section 3. Yoga Therapy Tools and Therapeutic Skills
Suggested Guidelines: 140 hours minimum for this Section 3 in entirety

Category 3.1. Yoga Therapy Tools
Suggested Guidelines: 60 hours minimum for this category 3.1

3.1.1 In-depth knowledge of the application of yama and niyama in the context of yoga therapy.

3.1.2 In-depth knowledge of the range of yoga practices and their potential therapeutic effects for common conditions. Practices may include but are not limited to

3.1.2.1 asana (postures);

3.1.2.2 pranayama (regulated breathing);

3.1.2.3 meditation and relaxation techniques such as bhavana (visualization), mantra (recitation), and ritualized activities such as nyasa and mudra; and

3.1.2.4 vibaha (lifestyle modifications), including basic yogic dietary concepts.

3.1.3 In-depth knowledge of contraindications of yoga practices for specific conditions and circumstances.

Category 3.2 Basic Principles of the Therapeutic Relationship
Suggested Guidelines: 35 hours minimum for this category 3.2

3.2.1 In-depth knowledge of, and observed capacity for, well-developed communication skills: listening, presence, directive and non-directive dialogue.

3.2.2 Demonstrated ability to recognize, adjust, and adapt to specific client/student needs in the evolving therapeutic/professional relationship.

3.2.3 Demonstrated ability to recognize and manage the subtle dynamics inherent in the therapist/client relationship.

3.2.4 In-depth knowledge of the scope of practice of yoga therapy and how to assess the need for referral to other professional services.

Category 3.3 Principles and Skills for Educating Clients/Students
Suggested Guidelines: 35 hours minimum for this category 3.3

3.3.1 In-depth knowledge of and demonstrated ability to implement effective teaching methods, adapt to unique styles of learning, provide supportive and effective feedback, acknowledge the client's/student's progress, and cope with unique difficulties/successes.

3.3.2 In-depth knowledge of and demonstrated ability to transmit the value of self-awareness and self-responsibility throughout the therapeutic process.

3.3.3 In-depth knowledge of and demonstrated ability to develop and adjust appropriate practice strategies to the client/student.
**Category 3.4 Principles and Skills for Working with Groups**

Suggested Guidelines: 10 hours minimum for this category 3.4

3.4.1 Basic knowledge of and demonstrated ability to design, implement, and evaluate group programs.

3.4.2 Familiarity with group dynamics and techniques, including communication skills, time management, and the establishment of priorities and boundaries, as well as techniques to address the specific needs of individual participants to the degree possible in a group setting.

**Section 4. (Mentored) Practicum**

Suggested Guidelines: 180 hours minimum for Section 4 in entirety; 150 hours minimum of practicum delivery and 30 hours minimum of practicum mentorship.

**Category 4.1 Providing Yoga Therapy**

4.1.1 Demonstrated ability to conduct intake and assess the client/student, including

4.1.1.1 taking a history of the client and his/her condition(s); and 

4.1.1.2 assessing the current condition using the tools relevant to the yoga therapist, including an evaluation of the physical, energetic, mental, emotional, and spiritual dimensions of well-being.

4.1.2 Demonstrated ability to elicit the goals, expectations, and aspirations of the client/student.

4.1.3 Demonstrated ability to integrate information from the intake, evaluation, and observation to develop a working assessment of the client's condition, limitations, and possibilities.

4.1.4 Demonstrated ability to apply knowledge of how to determine which aspects of the client/student's conditions, goals, and aspirations might be addressed through yoga therapy.

4.1.5 Demonstrated ability to identify priorities and set both long- and short-term goals with the client/student.

4.1.6 Demonstrated ability to apply knowledge of pacification, purification, and strengthening strategies.

4.1.7 Demonstrated ability to apply knowledge of strategies that address common disorders and pathologies of the major human systems and common mental health conditions, as well as other goals and aspirations of the student as relevant to the work of a yoga therapist.

4.1.8 Demonstrated ability to apply knowledge of how to combine intake, evaluation, observations, and working assessment to develop an appropriate practice or session strategy for individual clients/students as well as group classes, taking into consideration the holistic nature of the individual.

4.1.9 Demonstrated ability to apply knowledge of how to choose and prioritize the use of yoga tools and techniques, including selecting, sequencing, adapting, and modifying yoga practices appropriate to the needs of clients.

4.1.10 Demonstrated ability to teach or deliver the appropriate practices for individuals as well as groups, taking into consideration the assessment of their conditions, limitations, possibilities, and the overall practice strategy.
4.1.11 Demonstrated ability to facilitate the client/student's experience of the practice, including

4.1.11.1 providing instruction, demonstration, and education of the client/student using multimodal strategies of education such as auditory, visual, and kinesthetic learning tools; and

4.1.11.2 providing supportive strategies for the client/student to actively participate in his/her practice, such as a means to remember his/her practice (e.g., auditory and visual tools).

4.1.12 Demonstrated ability to develop and maintain therapeutic relationships, including

4.1.12.1 fostering trust by establishing an appropriate therapeutic environment through privacy, confidentiality, and safety; and

4.1.12.2 practicing effective, client-/student-centered communication based upon a respect for, and sensitivity to, individual, familial, cultural, social, ethnic, and religious factors.

4.1.13 Demonstrated ability to provide follow up and re-planning, including

4.1.13.1 gathering feedback, re-assessing, and refining the practice and determining short-term and long-term goals and priorities;

4.1.13.2 addressing new and changing conditions, goals, aspirations, and priorities of the student/client and providing appropriate support; and

4.1.13.3 providing appropriate closure for the therapy sessions.

Section 5. Professional Practice
Suggested Guidelines: 30 hours minimum for this Section 5 in entirety.

Category 5.1. Ethical Principles
Suggested Guidelines: 15 hours minimum for this category 5.1

5.1.1 In-depth knowledge of yoga practices and methods for self-inquiry related to establishing, practicing, and maintaining ethical principles.

5.1.2 In-depth knowledge of generally accepted ethical principles of health care codes of conduct and yoga’s ethical principles.

5.1.3 Demonstrated ability to apply knowledge of generally accepted ethical principles and related concepts from the yoga tradition to professional interactions and relationships.

5.1.4 In-depth knowledge of the scope of practice of yoga therapy, resulting in the demonstrated ability to discern the need for referral to other modalities.

5.1.5 Knowledge of the extent of one’s own individual training, skills, and evolving experience in yoga therapy, and knowledge of the importance of practicing within such parameters.
Category 5.2. Legal, Regulatory, and Business Issues Pertaining to Yoga Therapy
Suggested Guidelines: 5 hours minimum for this category 5.2

5.2.1 Knowledge of current relevant local, state, and national laws and regulations impacting the work of a yoga therapist.

5.2.2 Basic knowledge of business practices relevant to the work of a yoga therapist, including record keeping, planning, and financial management.

Category 5.3. Relationships with Peers, Mentors, Clinicians, and Organizations
Suggested Guidelines: 5 hours minimum for this category 5.3

5.3.1 Basic knowledge of other healthcare fields and their potential role in and relevance to the work of a yoga therapist.

5.3.2 Basic knowledge of how to establish, maintain, and utilize a referral network of peers and related healthcare practitioners and organizations.

5.3.3 Basic knowledge of how to develop and maintain ongoing collaborative relationships.

Category 5.4. Personal and Professional Development and Continuing Education
Suggested Guidelines: 5 hours minimum for this category 5.4

5.4.1 Knowledge of the fundamental value of ongoing personal practice, long-term mentorship, and skills maintenance/development through continuing education.

5.4.2 Knowledge of when and how to seek advice and support for case consultation, educational advancement, and personal practice.

End of Part 2/Competencies
Part 3

IAYT 2019 Definitions and Terms
3. IAYT 2019 Definitions and Terms

**Admission Requirements:** specific criteria a school uses when accepting a student into a yoga therapy program. A school may have requirements in addition to IAYT’s minimum admission requirements.

**Asynchronous Distance Learning:** an approach to learning that takes place when a faculty member is in one location and a student or students are in another location or in dispersed locations. Distance learning is moderated by a faculty member. The learning objectives and competencies must be evaluated. Courses must be monitored by a learning management system. Asynchronous distance learning is not homework.

**Blended (or hybrid) learning:** the integration of online digital teaching and learning with traditional classroom teaching and learning methods.

**Code of Conduct:** a directional document that is an application of the Code of Ethics. It identifies required and prohibited behavior, norms, and responsibilities for all parties (students, faculty, staff, etc.) participating in the program.

**Code of Ethics:** an aspirational document stating values and ideals that provides general principles that guide behavior and decision making.

**Competency:** expected (required) and measurable knowledge, skill, and ability attained by the completion of a training course or program.

**Course:** specific content in an area of study, such as anatomy and physiology, over a stated period of time.

**Course Description:** articulates the depth and breadth of the topic(s) covered in a course.

**Electives:** integrated competency-based content within a yoga therapy training program that the program may include as part of its course work.

**Faculty Member:** a teacher of the program, course, or workshop.

**Group Yoga Therapy:** a session(s) in which a yoga therapist works with a small group of clients who have a similar condition or symptom(s), or with clients who have a variety of health or health-related conditions. A hallmark that differentiates group yoga therapy from group yoga teaching is the presence of an individual intake and assessment for each client in the group prior to commencing the class, personalization of the practice(s) based on the individual assessment, and reassessment at regular intervals throughout a series of classes.

**Homework:** an assignment given to the student to be completed outside the regular class period. Preparation for or assignments in a course that supplement student learning, such as journaling, personal practice, reading assignments, and papers, none of which are counted as program hours.

**Learning Objective:** the measurable knowledge, skill, and ability to be attained by the student at the completion of a course or program.

**Mentor:** a person who supervises and/or advises a student during a program to aid his or her personal and professional growth.

**Practicum:** a course of study designed to provide practical application of learning as it relates to competencies, knowledge, skills and ability.

- **Mentored Practicum** is the time a student spends, either in person or at a distance, with a faculty member or assigned mentor who supervises, supports and/or tutors a student’s practicum and assesses and guides his or her professional growth in relation to his or her proficiency as a practicing yoga therapist during the practicum.

- **Practicum Delivery** is the time a student spends as the lead therapist in delivery of yoga therapy sessions.
• **Practicum Preparation** is the time a student spends practicing skills needed to deliver yoga therapy, such as case-taking skills, assessment, and protocol development. Teaching tools may include clinical observation of yoga therapy sessions, role playing, case study, and didactic learning.

**Prerequisite:** a course or topic of study that must be completed before another course or topic of study can be started.

**Program:** an integrated curriculum that typically includes a group or series of organized courses, lessons, or units of instruction to achieve competency in an academic or vocational setting.

**Program Director:** the person who determines educational objectives and activities of a yoga therapy educational program and who may also be a School Director.

**Residential Hour:** the time a student is in real-time learning interactions with faculty.

**School Director:** the person who oversees all aspects of the administration of the yoga therapy program and who may also be a program director.

**Student Evaluation:** the measurement of the student’s demonstrated progress through the learning objectives and his or her level of proficiency obtained throughout the curriculum, including practicum.

**Student Handbook:** the informational material for the student regarding the program content, faculty, business, code of conduct, and ethics of the program.

**Subject Matter:** the topic being addressed in a class or a segment of a class.

**Supervised Independent Study Course:** a competency-based course that a student completes on his or her own with supervision from a faculty member.

**Synchronous Distance Learning:** Synchronous distance learning takes place when the teacher and the student interact with each other in “real time” through the use of technology.

**Transfer Hour:** the time a student completed in another yoga therapy training or other educational program that is eligible to be applied towards the total hours for completion of the program.

**Workshop:** a learning format that focuses on a topic of study within a related course.

**Other Terminology**

**Basic Knowledge:** has acquired an overview of the broad principles of a subject, including a general awareness of its relevance to and/or potential use in the practice of yoga therapy.

**In-Depth Knowledge:** through study and practicum, has acquired a confident, in-depth knowledge of a subject and its multiple applications as well as its potential limitations in the practice of yoga therapy.

**Knowledge:** an understanding of all aspects of a subject and its specific applications to the practice of yoga therapy.

**Demonstrated Ability:** shows the ability to undertake particular tasks associated with the work of a yoga therapist.

**Demonstrated Ability to Apply Knowledge:** exhibits the application of knowledge to specific cases.

**Familiarity:** introductory knowledge of a subject sufficient to bring awareness to the existence and central essence of that subject and for the student to know when further knowledge is required for the practice of yoga therapy.

**END OF PART 3/DEFINITIONS AND TERMS**
Part 4

IAYT Accreditation Policies and Procedures
Revised
August 1, 2015 and June 1, 2016

IAYT Accreditation Policies and Procedures
Introduction

Accreditation is a widely used approval process for higher education programs in the U.S., including a variety of training programs in healthcare fields. Accreditation can be defined as the granting of public recognition to a program of study that meets or exceeds an established set of standards. Accreditation is primarily a quality control mechanism whereby a credible, objective third party gives a public stamp of approval to an educational program; additionally, accreditation is a peer-review process that supports the ongoing improvement of a program.

As is the case in other fields, the IAYT uses a peer-review process—conducted by the IAYT Accreditation Committee (AC)—to determine whether a program meets or exceeds the IAYT accreditation standards. The AC makes the determination based on a careful review of the application form and supporting materials submitted by a school for its yoga therapy training program. The AC evaluates whether the information and materials submitted by the school.
IAYT ACCREDITATION POLICIES AND PROCEDURES

1. Policy on Submission and Review of Applications

To apply for accreditation of a yoga therapy program, the school must be registered with IAYT as a Member School. If a Member School has questions about its readiness to seek accreditation or the review process, reach out to IAYT at contactus@iayt.org.

Before submitting an application for accreditation, a Member School must formally communicate its intention to apply for accreditation of its yoga therapy training program to accreditation@iayt.org. A pre-application is submitted to ensure the application requirements and process, the application review and decision process, and all policies and procedures that govern these processes are clear to the applicant. This provides an opportunity for a Member School to ask clarifying questions and for IAYT to provide information to help ensure a smooth application and decision process.

Accreditation applications are processed as follows:

1. The Member School submits the accreditation application during an open window including the required application fee and all required materials.

If the application is incomplete, the Accreditation Staff informs the program of the deficiencies, including any missing information and/or documentation. The program has up to three (3) months in which to remedy deficiencies by submitting additional materials. Upon receipt of the additional materials, the Accreditation Staff conducts a second round of verification to determine whether the application submission is complete. If there are still deficiencies, the program will be given one (1) more opportunity to remedy the deficiencies within three (3) months; if the program fails to remedy the remaining deficiencies, its application automatically lapses, in which case the program must submit a new application along with a new application fee if it wishes to seek accreditation at a later time.

2. If the application submission is deemed complete, the Accreditation Staff reviews and forwards the application to the Accreditation Committee (AC) for review; the committee’s review process generally takes place within three (3) months of receipt of the complete submission. Based on its review, the committee may either (i) request additional information or documentation to be provided, or (ii) make a recommendation regarding accreditation of the program. At its discretion, exceptions on reasonable grounds to the three (3) month period an applicant has to submit requested additional information may be made.

When additional information or documentation is needed from an applicant during the review process, the applicant has two (2) opportunities to provide requested information or documentation before the AC will defer action on the application for a period not to exceed one (1) year due to the program's lack of compliance with the IAYT's standards and policies (see Section 6 below).

Upon receipt of the requested additional information or documentation, the committee evaluates the additional information or documentation in the context of the entire application; the committee’s review process generally takes place within three (3) months of receipt of the complete submission. Based on its review, the committee
may either (i) make a second request for additional information or documentation to be provided in a specified time frame, or (ii) make a recommendation regarding accreditation of the program.

Upon receipt of the requested additional information or documentation, the committee evaluates the additional information or documentation in the context of the entire application; the committee’s review process generally takes place within three (3) months of receipt of the complete submission. Based on its review, the committee may either (i) make a recommendation to defer action on the application for a period not to exceed one year due to the program’s lack of compliance with the IAYT’s standards and policies (see Section 6 below); or (ii) make a recommendation to grant or to deny accreditation of the program.

In the event that a program fails to provide requested information or materials within the requested time frame, the application automatically lapses, in which case the program must submit a new application along with a new application fee if it wishes to seek accreditation at a later time.

3. In the event that the staff forwards the application to the AC, the AC will evaluate the application at its next regularly scheduled meeting. To be on the review agenda, the application must be received by the AC at least one (1) month prior to its meeting.

4. At the meeting at which it evaluates a program's application, the AC holds a hearing in closed session on the accreditation application. The AC may request or require representatives of the program to be in attendance via conference call to provide information and answer questions. Following discussion with program representatives, the representatives leave and the AC makes a decision on the application.

5. Based on its review, the AC may:
   a) Approve the application and grant accreditation status;
   b) Request additional information or documentation to be provided to the AC within a specified timeframe;
   c) Defer action on the application for a period not to exceed one year due to the program’s lack of compliance with the IAYT’s standards and policies (see Section 6 below); or
   d) Deny accreditation due to substantial lack of compliance with the IAYT’s standards and policies.

6. The AC’s decision is conveyed to the program in writing within 14 days.

7. In the event that a program fails to provide requested information or materials within the timeframe specified by the AC in accordance with Section 4b above, the application automatically lapses. In the event of a lapsed application, the program must submit a new application along with a new fee if it wishes to seek accreditation at a later time.

8. The AC defers action in accordance with Section 4c above if it believes that the program is capable of coming into compliance with the IAYT standards and policies within a specified time period. If the AC defers action on the accreditation application, the AC will inform the program of its deficiencies and request the program to provide information and documentation demonstrating that it has satisfactorily addressed the deficiencies identified by the AC within the time period specified. An action to defer a decision on accreditation cannot be appealed. If the program fails to address the deficiencies within the time period specified by the AC to the AC’s satisfaction, the AC may deny accreditation.

9. If the AC denies accreditation, it will inform the program of the deficiencies upon which the decision to deny was based. A decision to deny accreditation may be appealed in accordance with the Policy on Appeals. If the
AC denies accreditation to a program, the program must wait at least one year from the date of denial before it may submit a new application for accreditation.

10. A program may decide to withdraw its accreditation application at any time prior to a final decision of the AC to approve or deny the application. If the program does so, the IAYT refunds half of the application fee. A program that withdraws its application must wait at least one year before resubmitting a new application, and it must pay another full application fee.

2. Policy on Multiple Locations and/or Program Offerings

If, at the time of initial accreditation, a school offers its yoga therapy training program at multiple locations, it must indicate this on the application form and provide the following:

- A list of the locations at which the program, or part of the program, is offered;
- The curriculum and course syllabi for each location (if the curriculum and course syllabi vary by location);
- A list of the faculty teaching at each location and applicable faculty qualification documents (if faculty vary depending on location);
- The School Director and Program Director for each location; and

All other relevant application documents for each location, such as program application, enrollment form, and any other training program-related policies (if any of these materials vary depending on location).

If the Accreditation Committee determines that the school is offering a substantially different program at a different location, or two or more substantially different programs at the same location, then the AC may, at its discretion, require the school to submit separate applications for the different programs.

An application fee will be charged for each application submitted.

If a program is accredited, its IAYT accreditation status extends to all of the locations at which the program is offered that were disclosed in the application. Any program changes planned or made at any location, or if a location is added or dropped, are governed by the Policy on Program Changes. Changes to the curriculum must apply to all locations.

3. Policy on Public Comment

The AC will accept written comments on programs that may apply, or have applied, for initial accreditation or re-accreditation. Written comments must be signed and include the writer’s contact information. Anonymous comments will not be accepted. The AC will not comment on whether a program may or has applied for accreditation or reaccreditation. All comments will be kept confidential.

Whenever the AC plans to take action on a program’s re-accreditation status, the AC provides for a public-comment period of at least 21 days’ duration before the meeting at which the hearing is scheduled. The AC places its website and, at its discretion, circulates an official public-comment notice to relevant organizations and agencies, and requires the program to publicize the comment period on its website. The official notice contains the name of the program, the accreditation action before the AC, the date of the AC meeting, and the date for the ending of the public-comment period (which is at least 15 days before the AC’s meeting). Commenters must identify themselves and their organizational affiliation to the AC; however, the AC keeps confidential the names and affiliations of commenters.

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4. Policy on Appeals

The following are AC adverse decisions and may be appealed:

Denial of initial accreditation or reaccreditation;

Placement of the program on probationary status; and

Withdrawal of accredited status.

If a program receives an adverse decision, the AC provides two appeals procedures: (i) reconsideration, and (ii) panel review. Reconsideration must be completed before moving to panel review.

Reconsideration

Programs may challenge an adverse decision if, in the opinion of the program, the AC’s decision is arbitrary, capricious, or violates procedures. The program’s written request must be made within 30 days following its receipt of notice of the adverse decision (all adverse decision letters are certified). A request for reconsideration must relate to the conditions that existed in the program at the time of the AC’s adverse decision and state specific reasons why the reconsideration should be granted.

When reconsideration is requested, a date and time is set for the hearing (which may be conducted electronically or in person), by a reconsideration committee of three members of the AC who were not part of the original review committee. The program may request an opportunity for board members, staff, and/or faculty to address the reconsideration committee during the hearing; however, legal counsel, students, and other interested parties are not permitted to attend the hearing. The program shall bear any expenses incurred in attending the hearing.

Following the hearing, the reconsideration committee reviews the documentation on which the AC based its decision and any written or verbal clarifying information the program provided. The reconsideration committee makes one of the following decisions:

Uphold the original AC decision. If the reconsideration committee believes that the original AC decision was correct, it decides to uphold the original decision. The program will then respond as originally required in the original AC decision letter.

Revise the decision. If the reconsideration committee believes that the AC decision was in error based either on a review of the original application or on clarifying information subsequently provided by the program—the committee may revise the AC decision and issue a letter with the revised decision and instructions to the program regarding the next step it should take.

The reconsideration committee’s decision is reported in writing to the school's leadership. If the school accepts the decision of the reconsideration committee, it is expected to follow the instructions contained in the letter informing the program of the decision. If the program does not accept the decision of the reconsideration committee, it may request a panel review. An accredited program retains its accredited status until all appeals have been exhausted.

Panel Review

The final appeal for the program is a panel review, which is an independent consideration of the AC’s decision. The school's written request for a panel review must be made within 30 days of receipt of the AC’s certified letter upholding
an adverse decision. If the school fails to respond within 30 days, it waives the right to further review.

The school requests a panel review if, despite the reconsideration process, it still believes the AC's action was arbitrary, capricious, or otherwise not in accordance with the AC accreditation standards or procedures; or, the AC action was not supported by substantial evidence in the record.

The panel will review evidence in the record, including documentation and witness statements directly related to the AC's adverse action and the reconsideration hearing. The record includes:

- The school’s application for accreditation (including appendices);
- Any additional material submitted to the review committee;
- The AC decision letter detailing the adverse decision; and Materials from the reconsideration hearing.

Within 30 calendar days of receipt of the panel review request, the chair of the IAYT Board of Directors appoints a chair and two (2) or more review panel members from a list of yoga therapy educators and practitioners who are members of the IAYT. Members of the review panel may not include current members of the AC or the IAYT Board serving at the time of the AC’s adverse action, or any individuals deemed to have conflict of interest. The chair of the review panel specifies the time and place of the review.

The review panel may conduct its review in person or electronically. All costs related to the panel review are paid by the school; the school is invoiced in advance of the review for the estimated amount, which must be paid prior to the panel review. These costs may include travel and accommodations for the review panel and participants in the proceedings, reproduction of materials presented at the hearing, and other related expenses. If the panel remands the matter to the AC with the instruction that the adverse action be reversed, the AC and the appellant each bear its own expenses.

The AC submits the record to the review panel and the program’s written request, including additional evidence challenging the AC’s procedures or its facts. The chair of the review panel presides at the review hearing and rules on procedure, conducting the hearing in a manner that allows the program due process and a fair opportunity to present its case and explain its position (the formal rules of evidence, however, do not apply). The program may be represented by counsel during the hearing, and counsel may question any witnesses who speak at the hearing. Review panel members may question any witnesses or parties to the appeal.

After considering the record, the review panel may make any of the following determinations:

- Uphold the AC action;
- Revise the AC action; or
- Reverse the AC action.

The chair of the review panel reports the panel's determination in writing to the school's leadership, the AC chair, the Executive Director of the IAYT, and the AC Manager. Upon notification of the panel's determination, the AC takes the necessary steps to carry it out.

If, at any time during the appeals process, an appellant initiates legal action against the AC or the IAYT, the above procedures are no longer in effect and the AC's original action is final.
5. Policy of Formal Complaints against IAYT-Accredited Programs

The following are the procedures the IAYT follows in addressing a complaint against an IAYT-accredited program:

1. Formal complaints to the Accreditation Department must pertain to matters related to program compliance with the IAYT accreditation standards, educational competencies, and policies. Persons, groups, or organizations related to the program are considered recognized complainants and may file a complaint.

2. The AC is not authorized to adjudicate, arbitrate, or mediate individual faculty or student grievances against a program. Complainants must use all appropriate institutional and professional channels of appeal before filing a formal complaint with the IAYT Accreditation. The schools in which programs are housed assume responsibility for implementing and enforcing their own policies in these areas. When alleged violations cannot be resolved within the school, appellate procedures within state systems of vocational and higher education—or state judicial courts—should be used to assess and enforce institutional compliance with policies.

3. The Accreditation Department will not take action on anonymous complaints and does not make public formal complaints it receives.

4. When an oral complaint against an accredited program is received, the complainant is referred to this policy statement and advised to read the Complaint FAQs. After you have reviewed the information on the FAQs, if your concern falls into an area that IAYT can address, you may submit a complaint, following the process outlined here.

5. When a written complaint against an accredited program is received, it is acknowledged receipt of the complaint in writing.

6. The Accreditation Manager analyzes the complaint to determine whether the complaint: (i) is adequately documented, (ii) indicates non-compliance with any of the IAYT accreditation standards or policies, and (iii) if applicable to the specific complaint, has been previously submitted to the program (or school) and has been reviewed by the program (or school) in accordance with its grievance and/or appeals process.

7. The AC Manager notifies the complainant in writing within 30 days if documentation is inadequate or the complaint does not indicate non-compliance with the IAYT’s standards or policies. Depending on the nature of the complaint, or if the program's grievance and appeals procedures have not been utilized, the AC Manager advises the complainant to seek resolution through this process first.
8. When a complaint indicating non-compliance with the IAYT’s standards or policies is adequately documented—or a pattern or practice of non-compliance appears to be present when considering past complaints received against the program—the Accreditation Department sends written notification that a complaint has been filed to the school director of the program; the written notification either provides a report on the substance of the complaint or a copy of the actual complaint, and requests a written response to the complaint within 30 days.

9. When the response from the school director is received, the Accreditation Manager and the Accreditation Complaint Review Panel compare the documentation provided by the complainant and by the program and, when appropriate, suggests a resolution to the complainant and the program.

10. When a resolution suggested by the Accreditation Manager and/or Accreditation Complaint Review Panel is not accepted by one or both parties, or if the AC Manager considers the response by the program to be inadequate, the Accreditation Complaint Review Panel may take one or more of the following actions:
   a. Dismiss the complaint for lack of grounds;
   b. Hold a hearing with the complainant and program representatives participating by conference call to try to resolve the complaint in a way satisfactory to both parties;
   c. Make recommendations binding on the program, based on the written record and/or information received during the hearing, to ensure compliance with the IAYT accreditation standards and policies; and/or
   d. Require a visit to the program by an ad hoc committee of the AC to review the matter cited in the complaint and adopt recommendations, if warranted, based on the findings of the committee, for correcting the situation (in this case, the program covers the cost of the visit).

11. The Accreditation Department sends a written report of the AC’s action on the complaint to the complainant and the program within 14 days of the committee meeting at which the action was taken. This report constitutes the AC’s final action about the complaint and may not be appealed.

6. Policy on Formal Complaints against the IAYT Accreditation committee

The following are the procedures the IAYT follows in addressing a formal complaint against the IAYT AC:

A formal complaint made against the AC must be submitted in writing with supporting documentation to the IAYT’s Executive Director. The complaint must be related to the IAYT’s/AC’s failure to comply with its own accreditation standards, policies, and/or procedures. Within 14 days of submission, the Executive Director acknowledges receipt of the complaint and refers it to the Executive Committee of the IAYT Board of Directors. Within 30 days from receipt of the complaint by the Executive Director, the IAYT Executive Committee (EC) reviews the complaint. If the EC needs additional information to review the complaint, it requests the complainant and/or the AC provide the information within 30 days; if it does not need additional information, it issues within the original 30-day period a written decision on the complaint to the complainant and AC. The decision of the EC is final.

If, at any time, a complainant initiates legal action against the IAYT/AC, the above procedures are no longer in effect and the IAYT takes no action to review the complaint, pending legal resolution.

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7. Policy on Program Changes

The accreditation status of a yoga therapy training program pertains to the locations and educational components that were reviewed at the time of the IAYT initial accreditation review and subsequent reaccreditation reviews.

Ongoing changes in the yoga therapy program are to be expected. Many changes do not affect the program compliance with the IAYT accreditation standards, educational competencies and policies; these changes may be reported in the program’s biennial/interim report or included as part of the next reaccreditation review. Some changes, however, may affect the compliance of a program and need to be reported to and approved before they are implemented.

Changes that Require Reporting and Approval prior to Implementation

Generally speaking, planned changes that require reporting to and prior approval are changes that may result in the program becoming non-compliant with the IAYT standards and accreditation policies, such as:

Any planned change in the school director, program director, or faculty that may affect the program’s compliance with IAYT accreditation standards, educational competencies and/or IAYT accreditation policies;

Any planned change in curriculum that would affect the program’s compliance with IAYT accreditation standards, educational competencies and/or IAYT accreditation policies;

Any planned change in how the program is delivered that would affect the program’s compliance with IAYT accreditation standards, educational competencies and/or IAYT accreditation policies;

Changes in the location(s) where the program is taught (see separate policy);

Changes in program ownership or management/oversight (see separate policies); and

Any other change that may result in non-compliance with the IAYT educational standards and accreditation policies.

Program staff should use contactus@iayt.org to submit an inquiry if there is a question about whether a change needs to be approved.

Unplanned Program Changes

When a program change takes place that was not planned and may cause the program to be out of compliance with IAYT educational standards and accreditation policies, the school must report the change immediately or it may risk losing its accreditation status. Notification of an unplanned program change is to be made using contactus@iayt.org.

When a school makes notification of an unplanned program change, the notification should state the nature of the change, provide pertinent documentation, and present information that demonstrates that the program has remained in compliance with the IAYT’s standards and policies.
Planned Program Changes

A school with an accredited program has the responsibility of submitting a change application letter using contactus@iayt.org at least two (2) months prior to the planned implementation of a proposed change. The application should state the nature of the proposed change, provide pertinent documentation, and present information that demonstrates that the program will remain in compliance with the IAYT’s standards and policies if the change is adopted.

Review and Approval Process

After the application letter for a planned change or notification of an unplanned program changes is received, the Accreditation Manager, in consultation with the AC Chair, may appoint a change committee within one (1) month of receipt of the change application to review the application, if needed. The Accreditation Manager or the committee may act to:

Approve implementation of the change without any conditions;

Approve implementation of the change with conditions;

Defer action pending receipt of additional information;

Refer the matter to the AC for consideration;

Deny approval of the proposed change; or

Require an onsite visit prior to the committee making a decision or following implementation of the change. In this situation, all fees related to an onsite visit are to be borne by the Member School.

A program should receive written approval before implementing the change. A program that makes a change that adversely affects compliance with IAYT accreditation standards, educational competencies and IAYT accreditation policies without approval does so at its own risk of placing its accreditation in jeopardy.

8. Policy on Program Closure and Withdrawal of Accredited Status

If a program wishes to either close or withdraw its accredited status, the school director sends a formal letter to the AC notifying the AC of its intention to close the program or withdraw its accredited status using CONTACT US. The program is expected to make arrangements for the graduation or transfer of its students and should work closely with the AC during this planning process, at the conclusion of which the date of the program's formal withdrawal of accreditation will be decided. A program is expected to remain in full compliance with all standards during the closure or withdrawal process.

9. Policy on the Sale of a School or Program

IAYT accreditation status is not automatically transferable. If the owner of a school with an accredited yoga therapy training program enters into an arrangement to sell or merge the school or program with another organization, the current school owner must apply for permission to transfer the program’s IAYT accreditation status to the new owner/entity using CONTACT US. The request must be submitted at least 60 days in advance of the sale.
The Accreditation Department contacts the program to acknowledge receipt of the application within 14 days of receipt, and then assigns and forwards the application to the AC for review and decision. The AC will review and discuss the application at its next regularly scheduled monthly meeting. Based on its review and discussion, the AC may either

Approve the transfer of accreditation status without conditions;

Approve the transfer with conditions;

Request additional information or documentation to be provided to the Accreditation Manager within three (3) months, or

Deny the request for transfer for cause.

When the school submits requested additional information, the Accreditation Department contacts the program to acknowledge receipt within 14 days of receipt, and then assigns and forwards the application to the AC for review and decision. The AC will review and discuss the application at its next regularly scheduled monthly meeting. Based on its review and discussion, the AC may either

Approve the transfer without conditions;

Approve the transfer with conditions;

Request additional information or documentation to be provided to the Accreditation Manager within three (3) months; or

Deny the request for transfer for cause.

If the school does not submit an application to request transfer of its accreditation status or does not submit requested additional information, its accreditation status will automatically lapse upon transfer of ownership.

10. Policy on Franchising a Program or Subcontracting a Program

The accreditation status of an IAYT-accredited yoga therapy program does not transfer in situations in which a school with an IAYT-accredited yoga therapy program allows an individual or entity to offer the program as its agent, franchisee, subcontractor, or through some other business arrangement by which the responsibility for running the yoga therapy training program is delegated to another entity or individual. In these situations, the agent, franchisee, subcontractor, or other entity must become a Member School and apply for accreditation of the yoga therapy training program.

Notification

When a school with an IAYT accredited yoga therapy program enters into such an arrangement, the school must notify the Accreditation Manager of the arrangement 45 days prior to the effective date of the arrangement; without this notification the school places the accreditation status of its yoga therapy training program in jeopardy.

The school owner must notify the Accreditation Department, using CONTACT US, of the school’s arrangement to allow an individual or entity to offer its program as its agent, franchisee, subcontractor, or through some other business arrangement by which the responsibility for running the yoga therapy training program is delegated. Notification is to include

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The name of the agent, franchisee, subcontractor, or person responsible for some other business arrangement.

The mailing address, email address, and telephone numbers of the agent, franchisee, subcontractor, or person responsible for some other business arrangement;

The location(s) at which the program will be run; and

The effective date of the arrangement.

Within approximately 30 days of receipt of the notification, the Accreditation Department informs the agent, franchisee, subcontractor (or other entity or person) who will assume the responsibility for running the program that the accreditation status will not automatically transfer and that the new entity/person must become a Member School and apply for accreditation of the program if the entity/person wishes to maintain the accreditation status.

11. Policy on Failure to Submit Materials by the Due Date

If a program that has submitted an accreditation application fails to submit any required or requested materials pertaining to its application by a date specified, the application is automatically deemed lapsed. In this case, the program must submit a new application and pay the required application fee if it wishes to apply for accreditation.

If an accredited program fails to submit any required or requested materials pertaining to reaccreditation, the interim/biennial report submission, a hearing regarding a possible sanction, or any other administrative process involving the program, the AC may take any action it deems appropriate, up to and including initiating withdrawal of accreditation.

12. Policy on Potential Conflicts of Interest

The decisions of the AC are made solely on the basis of promoting the best interests of the public, the yoga therapy profession, and the yoga therapy community. It is therefore the policy of the AC to have effective controls against conflicts of interest and the appearance of conflicts of interest by AC members, reviewers, consultants, staff, and other AC representatives. To this end, each AC member shall sign the IAYT's conflict of interest policy annually.

Additionally, AC members shall strictly adhere to the following guidelines:

Whenever the AC enters into a hearing or any other process concerning an accreditation application or a recognition action related to a yoga therapy training program, and an AC member is affiliated with the program, then that member:

● Shall disclose prior to the AC's discussion of the program's application or recognition action the nature of his or her affiliation with the program; and

● Shall not be present during discussion of and voting on the program’s application or recognition action.

For the purposes of this policy, a person is "affiliated" with a yoga therapy program if he or she, or a member of his or her immediate family (spouse, parent, child, brother, or sister):

● Is currently, or during the last seven (7) years has been, an officer, director, trustee, employee, contractor, or consultant of the school in which the program is located;

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● Has been a student in the yoga therapy program within the last seven (7) years; or

● Has had during the last seven (7) years other dealings with the school in which the program is located from which he or she has or will receive cash or property.

If for any other reason an AC member believes he or she has a conflict of interest or the appearance of one with regard to any program's application or recognition action before the AC, or otherwise believes that he or she cannot make an impartial decision in regard to these matters, the member shall declare the conflict of interest or the appearance of one.

If a representative of a yoga therapy training program that has an application or recognition action before the AC has reason to believe an AC member who has not declared a conflict of interest may have one or the appearance of one, then he or she may request the AC consider the matter. Similarly, if any other AC member, or the AC Manager, is concerned about an AC member's possible conflict of interest, then he or she may also request the AC to consider the matter. Discussion of the possible conflict of interest or the appearance of one shall take place with all parties present; the matter shall be resolved, if necessary, by a majority vote of the AC, with all AC members entitled to vote with the exception of the member in question.

13. Policy on Codes of Conduct/Ethics

A school offering an IAYT-accredited yoga therapy training program must adopt a code(s) of conduct that defines acceptable action and behavior on the part of board members, staff, faculty, students, and anyone else who may be involved in the operations and activities of the school and the program. Failure to operate in accordance with the code of conduct may constitute grounds for sanctioning a program.

14. Policy on Code of Conduct and Safe School Environments

In order for an IAYT member school’s yoga therapy program to be eligible to apply for accreditation and for an IAYT accredited yoga therapy program to maintain its IAYT accreditation status, the school must operate with honesty and integrity; among other things, the school must ensure an emotionally and physically safe environment for the community members of the school—including staff, faculty, students, and patients/clients—and must protect individual community members against emotional, sexual, and physical harassment/abuse that can sometimes be found in situations in which there are power imbalances or a lack of understanding of professional boundaries.

It is the responsibility of the leadership of a member school with an accredited yoga therapy training program or that is applying for accreditation or re-accreditation of its yoga therapy training program—as it may be vested in a board of directors, a school owner, and/or an administrative or academic leader or leadership team—to ensure that the school operates with honesty and integrity, and to protect all school community members from emotional, sexual, and physical harassment/abuse. To that end, these schools must establish and enforce a comprehensive code of conduct policy or policies* that address situations that may arise in relation to the school’s constituencies—including school owners/board members, school leadership, staff, faculty, students, and clients/patients—including sexual and emotional harassment/abuse situations. Additionally, a member school with an accredited yoga therapy training program or that is applying for accreditation or re-accreditation of its yoga therapy training program must make the school community aware of its code of conduct policy and provide education as to the importance of observing the code.
If a school with an accredited yoga therapy training program or that is applying for accreditation or re-accreditation of its yoga therapy training program fails to develop and enforce a comprehensive code of conduct policy—and/or it appears that unethical behavior such as sexual or emotional harassment/abuse has become systemic within a school—the Accreditation Committee may take action in accordance with its policies governing accreditation, up to and including denial or revocation of accreditation.

* The key provisions of a comprehensive code of conduct policy include the following:

- Adhering to high ethical standards
- Complying with applicable laws and regulations
- Refraining from all forms of sexual, emotional, and physical harassment and threats of harassment, including verbal expressions
- Avoiding conflicts of interest
- Maintaining high standards of academic integrity
- Refraining from illegal forms of discrimination; respecting the rights and dignity of others
- Maintaining high standards of patient/client care
- Conducting business practices with honesty and integrity
- Concern for the health and safety of all community members
- Reporting suspected violations of the code; enforcement of the code
- Guaranteeing no retaliation for legitimate complaints regarding violations of the code of conduct made in good faith.

15. Policy on Non-Discrimination

A Member School applying for accreditation of its yoga therapy training programs must have, in its student and staff policies, a non-discrimination policy that states the school follows all applicable laws and regulations and does not discriminate based on race, sex, religion, ethnic origin, sexual preference, or disability.

16. Policy on Enrollment Agreements

A Member School applying for accreditation of its yoga therapy training program must have on file a signed enrollment agreement for each student enrolled in the program that clearly apprises the student of his/her financial obligations. The enrollment agreement must, at a minimum, include the following information:
● School name and contact information;

● Program name;

● Time period covered by the agreement;

● Disclosure of all tuition, fees, books and supply costs, and any other additional expenses;

● Disclosure statement of finance charges, if applicable;

● Schedule of payments;

● Refund policy;

● Legal signature of student, including date signed; and

● Legal signature of the school representative, including the date signed.

17. Policy on Student Informational Materials

The program must make available to students and the public a current catalog and/or other official publications (e.g., a student handbook), in print or electronic form, which accurately set forth:

● Admissions requirements and procedures;

● Transfer credit and advanced standing policies, including the criteria for accepting transfer credit;

● Tuition, fees and refund policies;

● Opportunities and requirements for financial aid, if applicable;

● Academic performance requirements;

● Rules for student conduct;

● Student disciplinary procedures;

● Student grievance procedures;

● Grading and attendance policies;

● Program completion requirements;
● Members of the administration, including their positions;
● Professional education and qualifications of full- and part-time faculty;
● Members of the governing board, if applicable;
● Non-discrimination policy;
● Academic calendar;
● Program sequence or outline;
● Description of each major component of the yoga therapy program;
● Description of the learning and other physical resources; and
● Leave of absence policy, if applicable.

18. Policy on Transfer Credit

Under IAYT’s standards, a yoga therapy training program must be a minimum of 800 hours in length to be eligible for accreditation. Of these 800 hours, a minimum of 500 hours of training must be provided by the yoga therapy program that is accredited or seeking accreditation. Some or all of the remaining hours needed to reach the minimum total of 800 hours may be transferred in from other schools/programs—such as a yoga teacher training program, another yoga therapy program, and/or some other type of educational program or institution (e.g., anatomy coursework completed in a community college)—provided that the transfer hours apply directly to the required competencies in the yoga therapy program.

A yoga therapy program that is accredited or seeking accreditation that allows students to satisfy some of the program’s requirements through transfer hours must have a written transfer credit policy that:

It is publicly disclosed through its website and other relevant publications;

It sets forth the process and criteria by which it determines that the transferred hours/credits apply directly to the required competencies in the yoga therapy program; and;

It states which courses/subject areas within the yoga therapy program can potentially be satisfied by transfer hours/credits.

Whenever transfer credit is awarded according to the published transfer credit policy to an applicant or to a student enrolled in a program, the school must state in writing in the applicant’s/student’s file (e.g., on the program transcript) which portions of the yoga therapy program have been satisfied through the awarding of transfer credit, and must include in the student file appropriate documentation (e.g., transcript from a previous program) upon which the awarding of transfer credit was based.
If a school with a yoga therapy training program accepts or requires a yoga teacher training program in excess of 200 hours as satisfying its admissions requirement, some portion of the teacher training in excess of the 200 hours may be allocated in accordance with this policy as transfer hours to satisfy the yoga therapy training program’s minimum length of 800 hours provided that none of the hours are double-counted for purposes of meeting the pre-requisite admissions requirements and the yoga therapy training program requirements.

A school with an accredited yoga therapy program is permitted to award transfer credit in an amount greater than 300 hours to an applicant who is transferring from an accredited yoga therapy program that closed before students in its training completed the program. In this case, the program must document that it followed its transfer credit policy and that the transferred hours/credits apply directly to required competencies in the program.

19. Policy on Advertising

All representations regarding the school and its yoga therapy training program, prior to accreditation and once accredited must be accurate. The AC may sanction an accredited program for making false, misleading, or inaccurate representations to the public.

If a program under review for accreditation is advertising its yoga therapy training program in a way that is false, misleading, or inaccurate or in violation of the AC's Policy on Representation of a Program's Relationship with the IAYT, the AC may, at its discretion, suspend the accreditation review until such time as the program discontinues the advertising in question.

20. Policy on Representation of a Program’s Relationship with the IAYT

The AC requires accredited yoga therapy programs, as well as programs seeking accreditation, to honestly and responsibly represent their association with the IAYT orally and in writing. To this end, the IAYT requires programs to adhere carefully to the following practices:

If a program has submitted a full and complete application for accreditation and has been informed that its application is accepted for review, it may publicize this fact by using the following statement in any of its publications: "(Name of program) has applied for accreditation by the IAYT and is currently being evaluated.”

Note: A school with a yoga therapy training program is not allowed to make any statement or representation about the likelihood of gaining accreditation, such as "It is expected that accreditation will be granted in the near future,” or "our program meets IAYT standards or requirements.”

The school may refer to its program as being "accredited” only after this status has been conferred by the AC. It may not describe its program as "fully accredited,” since the IAYT does not grant partial accreditation. The correct terminology is "accredited.”

In representing its association with the IAYT in publications and on its website, the school must use the following statement: "(Name of accredited program) is accredited by the International Association of Yoga Therapists. For more information, visit: www.iayt.org.”
Accreditation is granted to a yoga therapy training program as a whole and not to individual units, courses, or degrees. Therefore, statements such as "this course is accredited" or "this certificate is accredited" are incorrect and must be avoided.

A school with an accredited program may use an IAYT-supplied accreditation service mark in its publications as long as it maintains the accreditation status of its yoga therapy training program.

An accredited program may not use the IAYT logo under any circumstances, unless granted express written permission by the Executive Director of IAYT.

The ability to abide by these principles of good practice in its public representations is considered by the IAYT as an indication of the program's integrity. If a school or program, as determined by the AC, the IAYT Board, the IAYT Executive Director, the IAYT President, or the AC Manager, releases incorrect or misleading information about accreditation of its program or applicant status with the IAYT, or about any accreditation action, the IAYT notifies and requires that the program immediately provide for the public correction of the information. If the program continues to publish incorrect or misleading information, the IAYT or the AC may initiate an action in accordance with its Policy on Sanctions.

21. Policy on Student Grievances

The program must publish in the student handbook, or in a comparable publication, fair and efficient policies and procedures for reviewing and responding to formal complaints and grievances made by students, and must maintain a record of the complaints and their disposition for a minimum five (5)-year period, demonstrating that these complaints and grievances were handled in an equitable manner according to the published policies and procedures.

22. Policy on Sanctions

The AC has the option, at any time, of investigating whether an accredited program may no longer be fully in compliance with the IAYT standards and policies. To this end, the AC may contact the program for information pertinent to any compliance concerns it may have and may arrange a meeting with school representatives to discuss its concerns.

In cases where the AC determines that a program has fallen out of compliance with one (1) or more IAYT standards and policies, it may apply a sanction. By applying a sanction, the AC informs the program that it must bring itself into compliance within a certain specified timeframe. The following are the three (3) sanctions the AC may apply; they are usually, although not always, applied sequentially, starting with a letter of advisement:

Letter of Advisement. The Member School is formally advised by letter—sent to the school director and program director (or other representatives of the program)—of deficiencies or practices related to the IAYT standards and policies that could lead to a more serious sanction if not corrected expeditiously. The letter requests a focused report by a specific date, generally not to exceed six (6) months from the date of the letter (although the AC has discretion to specify a longer timeframe), that presents information on the steps the school has taken to address the deficiencies. The AC does not make public the fact that it has issued a letter of advisement.
Probation. If the Member School fails to respond satisfactorily to a letter of advisement or continues to be non-compliant with accreditation standards or policies, it may be placed on probation for its yoga therapy training program, which is a public sanction. A formal letter is sent to the school director and program director (or equivalent leadership positions), with a copy to the chair of the school’s governing board, if applicable, setting forth the deficiencies upon which the probation is based. The letter requests submission of a focused report and, optionally, an onsite visit by representatives of the AC by a specific date, generally not to exceed six (6) months from the date of the letter (although the AC has discretion to specify a longer timeframe).

Show Cause. If a Member School fails to correct the deficiencies or practices that resulted in probation, does not respond to a letter of advisement, or is found otherwise to have strongly deviated from the accreditation standards or policies, it may be requested to show why accreditation for its yoga therapy training program should not be withdrawn at the end of a stated period. The request to show cause is made by formal letter to the school director and program director (or equivalent leadership positions), with a copy to the chair of the school’s governing board, if applicable. The burden of proof is on the school to demonstrate to the AC why accreditation of its yoga therapy training program should be continued beyond the stated period. The letter sets forth the deficiencies upon which the show-cause action is based, specifies the show-cause period, and requests submission of a focused report and, optionally, an onsite visit by representatives of the AC by a specific date. The issuance of a show-cause letter is a public sanction.

The AC judges the nature and severity of the situation in determining whether to issue a letter of advisement, impose probation, or issue a show-cause letter. While the three (3) sanctions are of increasing severity, they are not necessarily applied in sequence. The AC may apply any sanction at any time, with the requirement that the program correct the cited deficiency or circumstance within a stated period, not to exceed one (1) year. If multiple sanctions are imposed on a school with an accredited program, the total time that the school has to satisfactorily address the sanctions may not exceed two (2) years from the imposition of the first sanction. Accreditation status continues during a period of a sanction. As noted above, while a letter of advisement is not made public, the actions of probation and show cause are published. The school with an accredited program is responsible for any costs associated with a sanction.

The AC also has the authority to impose a sanction in the context of a hearing on reaffirmation of accreditation. In this case, the AC may, but is not required, to provide notice of its intended action. Should the AC consider placing a school with an accredited program on probation or issuing a show cause letter outside of the context of an accreditation action, it will: (i) inform the school of the sanction it intends to impose and the deficiencies or circumstances upon which the sanction is being considered, and (ii) provide the school an opportunity to submit a written response at least 15 days prior to date of meeting. In the event that a school’s non-compliance with the IAYT’s standards and policies poses potential immediate serious harm to students or others, the AC may forgo notification to the school or provide a shorter notice period. Within ten (10) business days of imposing a sanction the AC gives the school written reasons for its action. A school may not appeal a decision by the AC to impose a sanction, as a sanction is not considered an adverse decision.

Revocation of Accreditation

At the end of the time period stated in a show-cause letter, the AC will revoke the accreditation of a program that has not corrected to the satisfaction of the AC the deficiencies or circumstances that led to the issuance of the letter. At least 30 days before the meeting date on which the AC will decide whether to revoke accreditation based on the circumstances or deficiencies identified in the show cause letter, it will: (i) inform the school of its intended action, and (ii) provide the school an opportunity to submit a written response at least 15 days prior to date of meeting.
If a school or its program is found by a judicial court, or a federal or state agency, to have engaged in fraudulent activity, or if the school loses its authority to operate, the AC will withdraw accreditation. In such cases, the AC’s procedures for sanctions do not apply, and the terms and conditions set forth in a letter of advisement, a probation decision, or a show-cause letter that the AC may have issued are nullified.

A school that has accreditation of its yoga therapy training program revoked is not entitled to a refund of any fees or dues it has paid to the IAYT. A school interested in regaining accreditation must wait at least one (1) year from the time accreditation of its yoga therapy training program is revoked to apply for accreditation.

23. Policy on Biennial Reports

A school with an accredited yoga therapy program is required to submit an interim or biennial report to the AC by a specified date. The AC reviews these reports in order to ensure each school's ongoing compliance with accreditation standards and policies, monitor programs' progress in addressing outstanding deficiencies, and to become aware of any significant changes or trends that may adversely affect the ability of an individual school’s program to remain in compliance with accreditation standards and policies. Failure to submit the required biennial report will result in suspension of accreditation status until the report is received by the Accreditation Department.

Receipt of biennial reports will be acknowledged electronically. Accreditation staff and, when necessary, a review committee within the Accreditation Committee will review the report. The Accreditation Department will notify a school within four (4) weeks of submitting its report if additional information is needed. If additional information is requested, a school has two (2) weeks to submit the requested information.

The Accreditation Department will notify a school within eight (8) weeks of submitting a completed report the outcome of the review.