



Implementation Infrastructure for the Responsible Integration of Biofield Therapies into Healthcare

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Objectives: Although Reiki is increasingly incorporated into hospitals (VA-inclusive), oncology programs, and integrative medicine settings, community-based biofield practice remains disconnected from traditional healthcare systems. The field lacks an implementation infrastructure to support practitioner credentialing, ethical governance, structured outcomes collection, and practice-based evidence generation. This presentation introduces a framework addressing these barriers while supporting the responsible integration of biofield therapies into healthcare and research.

Methods: Raphi's model was developed using principles from implementation science, clinical quality improvement, and real-world evidence generation. The framework aligns practitioner credentialing, ethics and scope-of-practice standards, structured documentation, patient-reported outcomes, referral pathways, and data governance within a coordinated implementation model. By emphasizing low-burden workflows and standardized data collection, it enables collaboration among a wide array of healthcare stakeholders while supporting practice-based evaluation.

Results: The framework establishes standardized pathways for practitioner verification, referral transparency, longitudinal outcome assessment, and collaboration across community biofield practice and traditional healthcare settings. By transforming routine clinical encounters into structured, ethically governed data collection opportunities, it provides a foundation for practice-based evidence generation while strengthening accountability, clinician confidence, and interoperability across community practice and allopathic healthcare operation.

Conclusions: Advancing research on Reiki and other biofield therapies requires not only efficacy studies but also implementation infrastructure supporting ethical practice, care coordination, standardized outcome measurement, and standardization of real-world practice settings. Frameworks like this one offer an example to address longstanding barriers to practitioner credibility, referral confidence, and real-world evidence generation, supporting the development and clinical adoption of an emerging integrative modality.