

9. SCENAR Practitioners Society of Ireland Code of Ethics and Standards

9.1. INTRODUCTION

9.1.i. The SCENAR Practitioners Society of Ireland was founded on the 7th July 2000 as a professional body to establish and maintain standards of professional practice in which members and practitioners can take pride and in which their clients can have confidence.

9.1.ii. The Constitution with the Code of Ethics and Standards has been adopted at the 1st AGM. Any changes or amendments to either the Constitution or Code of Ethics and Standards, shall be made by a 2/3 majority of the total membership who are eligible to vote.

9.1.iii. Any proposal to alter the Constitution with Code of Ethics and Standards must be in accordance with the relevant articles of the constitution..

9.1.iv. Registered Practitioners of the SCENAR Practitioners Society of Ireland (designated R.S.P.S.I.) have been assessed and accredited by the Standards and Assessments Sub-Committee panel (called "Standards") established for that purpose, as being adequately trained, professionally competent and personally suitable to practice SCENAR as a therapy.

9.1.v. As well as Registered Practitioners, the Society includes other categories of membership who shall be those interested in SCENAR but not qualified for Registered Practitioner membership.

9.1.vi. The Committee and the "Standards" Sub-Committee together shall be called the Full Committee. A person on both Committee and "Standards" shall have only one vote.

9.2. INTRODUCTION

9.2.i. This code of Ethics and Standards (henceforth referred to as "The Code") serves both as information for the public and a reminder to the practitioner of the high standards of practice expected and vigilance required to maintain them. As a condition of membership of the Society, all members agree to abide by the Society's Constitution with Code of Ethics and Standards.

9.2.ii. The society will endeavour to deal with any concern or complaint about any Registered Practitioner brought to its attention swiftly, sympathetically and fairly. Concerns/complaints about student members who have not yet been assessed by the Society as to their competence to practice cannot be dealt with formally, but the SPSI will endeavour to do so informally. It is the duty of students/graduates of schools who are members of the Society but not yet assessed, to inform clients of their status at the outset.

9.3. PRACTITIONERS AND STUDENTS

9.3.i. The code provides a guide to professional standards for all Registered Practitioners of the SCENAR Practitioners Society of Ireland (R.S.P.S.I.) and to members who are students or graduates of SCENAR schools who are accepting remuneration in exchange for SCENAR with a view to professional registration. Public trust and confidence in the profession is dependent on its practitioners being seen to act responsibly and accountably.

9.3.ii. The intention is to provide guidelines by which individual practitioners may judge particular situations, rather than a catalogue of behaviour, where non-observance is inevitably regarded as professional misconduct.

9.3.iii. Professional misconduct is conduct, which is considered by experienced and competent practitioners of good repute to be disgraceful or dishonourable.

9.4. PROFESSIONAL INDEMNITY INSURANCE

9.4.i. Membership of the Register of Practitioners of the SPSI is conditional on evidence of adequate professional insurance which includes personal indemnity and public liability; The Standards Sub-committee shall decide on the definition "adequate".

9.5. GUIDELINES FOR PRACTICE

9.5.i. These guidelines are based on our understanding of SCENAR as a means of stimulating and supporting the receiver's own in-built ability to heal, so that the relationship between giver and receiver is a mutual and equal partnership built on mutual respect and trust.

9.5.ii. A RSPSI shall not treat any condition which he/she is proscribed from doing by law. It is the responsibility of each RSPSI to be informed about which conditions they may or may not treat and their medical/legal position.

9.5.iii. Noticeable diseases should be reported in accordance with the Department of Health regulations.

9.5.iv. Practitioners must exercise discretion in accepting clients for treatment.

9.5.v. Practitioners shall recognise and respect the uniqueness and dignity of each client

- 9.5.vi. Practitioners may offer treatment to potential clients but it is not permissible to solicit a client by any form of inducement or pressure.
- 9.5.vii. Practitioners must act with consideration concerning fees and justification for treatment.
- 9.5.viii. Practitioners are expected to be exemplary of their profession in their personal hygiene, simplicity and suitability of attire and avoidance of excess in preparation for meeting clients. Practitioners should also aim to be adequately rested and centred before treating clients. If personal circumstances beyond one's control interfere with this, Practitioners need to be mindful of this and make a decision as to whether it is appropriate to go ahead with treatment or not and to inform the client accordingly.
- 9.5.ix. The Practitioner's premises or clinic should be maintained in such a condition as to reflect credit on the profession of SCENAR-Therapy and should be as clean, private and comfortable an environment as possible. The Practitioner's RSPSI Certificate or copy should be on display in the waiting area.
- 9.5.x. When using public premises, the Practitioner (or Teacher or Consultant) must be aware of health and safety regulations including the requirement for public liability insurance.
- 9.5.xi. Before commencing treatment, the practitioner must ascertain that s/he has the informed consent of the client (or parent or guardian in the case of minors), ensuring that the client is aware of and understands the nature of the treatment to be given. The Practitioner shall also be attentive to non-verbal signals from the client, be they adult or child, which may indicate a lack of real consent or withdrawal of consent. In such cases, s/he should desist and/or consult with the client before continuing treatment. The client may withdraw consent at any time. A registration form (disclaimer) must be filled in and signed by each client (or guardian if under 16). Parents/Guardians should be encouraged to be present when minors or vulnerable people are being treated.
- 9.5.xii. The Practitioner's primary obligation is towards the client and at all times must practice his/her skills to the best of his/her ability for the benefit of the client. S/he should insure that no action or omission on his/her part or within his/her sphere of responsibility is detrimental to the interest, conditions or safety of the client. Care should be taken in distinguishing to the client between professional recommendations and expressions of personal opinion.
- 9.5.xiii. Criteria for recommendation are: that they are adequately explained and can be proceeded with safely, with a view to furthering the client's process of healing and informing the client of ways of helping him/herself to better health.
- 9.5.xiv. The client has the right to refuse any aspect of treatment or disregard advice and this right should be brought to his/her attention.
- 9.5.xv. The client is entitled to trust the Practitioner's integrity and it is the duty of the Practitioner not to abuse this trust in any way. The focus of the Practitioner's behaviour should at all times be on the client's healing process. Any form of sexual advance to a client with whom there exists a professional relationship is professional misconduct. In difficult situations, it shall be advisable to seek the help, support and guidance of a senior colleague, in confidence. The client should be so informed that you are so doing. If a situation develops in which one feels unable to remain within the bounds of an appropriate relationship between Practitioner and client as understood in this code, treatment must be terminated forthwith and the client referred for professional treatment elsewhere.
- 9.5.xvi. The Practitioner shall respect the confidentiality of the therapeutic relationship and shall not divulge any information about a client to anyone other than another therapist when transferring a client and this must be with the client's express consent except when required by law.
- Exceptions to this are:
- a) The use of case histories in teaching.
 - b) The use of case histories in publication.
- (In both cases pseudonyms or other form of code must be used to protect the clients' anonymity, unless the client freely chooses otherwise.)
- 9.5.xvii. No Practitioner may disclose publicly the names of a present or past client, or use any medium, for example, photographs, which could enable any client to be identified, without the written permission of the client.
- 9.5.xviii. The Practitioner shall keep accurate records of all clients and treatments given. These records shall be kept for twelve years. In the event of a Practitioner moving away or ceasing practice altogether, records must be

handed over to his/her successor. In the event of their being no registered Practitioner of the Society to which such records can be transferred, the records should be forwarded to the Society Secretary where they will be held for twelve years and then destroyed.

9.5.xix. A proper register shall be set up to record each client's name, address and other relevant information including dates of attendance. Such records shall be kept secure and private and retained for twelve years.

9.5.xx. Adequate records shall be maintained so that continuity of client care is possible and case history information can be made available to another Practitioner in case of referral. Records should include updated progress reports and records of referral. Notes shall be kept of other treatments received, results of medical tests and everything else which may effect the course of treatment and the client's well-being of which s/he makes you aware, whether spontaneously or through questioning. The Registration form/disclaimer form shall be attached to each client's records.

9.5.xxi. Practitioners should work in a co-operative manner with colleagues and, where appropriate, with other healthcare professionals, and recognise and respect their particular contribution to the client's wellbeing.

9.5.xxii. Practitioners shall not countermand instructions or prescriptions given by a medical doctor or other healthcare professional. While maintaining all due respect for other treatment modalities and the client's choices of same, the client's concern, if voluntary expressed, should be addressed and the client encouraged to discuss any doubts or questions about treatment with the Practitioner concerned, so that s/he can make an informed decision as to continuing treatment.

9.5.xxiii. The Practitioner shall not recommend any course of action outside his/her particular Scenar competence or competence in other healthcare disciplines for which the RSPSI is qualified and adequately insured, such as whether or not to undergo an operation or take specific drugs. It must be left to the clients to make their own decisions.

9.5.xxiv. If the Practitioner believes s/he has identified a condition which may require medical attention and which has not already been medically diagnosed, s/he shall bring this to the attention of the client and recommend s/he seek medical opinion. Full records must be kept.

9.5.xxv. Clients may be treated with SCENAR in hospital only in consultation with and by agreement with those responsible for the client's medical care in hospital. Practitioners shall make every effort to inform the medical team responsible for their client of the client's response to SCENAR treatment, both positive and negative. Clear and informative records shall be kept and made available in writing to the hospital medical team, but only on the written authority of the patient.

9.5.xxvi. The consent of a parent or legal guardian must be obtained in respect of any person under sixteen years of age and they should be invited to attend during treatments. Where it comes to a practitioner's attention that a child requires conventional treatment, the parents or legal guardians shall be so advised and a written acknowledgement of such advice be obtained and kept.

9.5.xxvii. Modesty: It is essential that clients retain their dignity and are not embarrassed or made vulnerable. Clothing adequate to preserve modesty and yet loose enough for SCENAR techniques to be performed on all relevant areas of the body must be available and offered as required. The client must be informed in advance of any intention to examine or treat any sexually sensitive or otherwise embarrassing area and the client shall have the right to refuse such examination or treatment. Accurate records must be kept. Clients have the right to have a chaperone present.

9.6. SPSI Jurisdiction: This shall usually refer to the Republic of Ireland and Northern Ireland but shall, if specified in writing by the Full Committee, refer otherwise. The SPSI accredited award shall automatically cease to have validity or recognition if the holder uses Scenar Therapy outside the SPSI Jurisdiction.

This is for the protection and safety of the public, client and members as the SPSI may not be in a position to supervise or regulate or monitor or receive complaints within certain areas.

10. Register of qualified Practitioners, assistant Teachers, Teachers and Consultants.

The Society shall keep and publish a Register of its professionally accredited practitioners (RSPSI), assistant Teachers (RSPSI-at), Teachers (RSPSI-T) and Consultants (RSPSI-C). The Committee shall be responsible for ensuring that the register is current at all times.

11. Standards and Assessments sub-committee (called "Standards" for short.)
 - 11.1. "Standards" sets the technical standards for the Society with regard to Accreditation, Education, Teaching, Ethics and Safety, so its members should be chosen accordingly.
 - 11.2. "Standards" is elected at AGM for a 3-year term. Usually 3-6 members will be elected depending on circumstances. The AGM shall elect a "Standards" Co-Ordinator , who must be RSPSI-T or RSPSI-C.
 - 11.3. The Standards sub-Committee shall have two separate functions:
 - 11.3.i. Collegiate Function: to formulate proposals and recommendations regarding the practice and teaching of SCENAR, in all its aspects, for recommendation at AGM, at Committee meeting and other times as it sees fit. These proposals and recommendations shall be deserving of the most serious attention and study.
 - 11.3.ii. ASSESSMENT Function
 - 11.4. "Standards" shall determine and update from time to time the (minimum) standard requirements and procedures for professional training, practice and teaching in SCENAR that are acceptable to the Society both pre-graduation and post-graduation and report these to the committee.
 - 11.5. "Standards" shall raise and debate relevant issues and record any agreements reached or proposals made, bearing in mind the expectations of the Department of Health and relevant authorities.
 - 11.6. A majority of "Standards" members shall be RSPSI registered assistant Teachers or higher of the Society and there may be some who shall be Practitioners of other professional organisations, recognised by the SPSI. All "Standards" members concerned must have at least two (2) years post-Accreditation experience. At least one of the "Standards" members must be RSPSI-T or higher.
 - 11.7. Procedures and Guidelines for Standards sub-committee
 - 11.7.i. These must remain within the definition as defined by the constitution of the SPSI.
 - 11.7.ii. The composition and functions of "Standards" is defined by the SPSI Constitution, and the day to day organisation is managed by the Co-Ordinator, who shall be an SPSI Teacher (RSPSI-T) or Consultant (RSPSI-C) and be an Officer of the Committee..
 - 11.7.iii. The Full "Standards" must communicate at least twice annually, but preferably more regularly by meeting or by other means and records kept of such communications.
 - 11.7.iv. Any "Standards" member may be removed by a 2/3 vote of the Full Committee and likewise to co-opt, if appropriate, a new Standards member. This shall be an interim arrangement until the first available AGM or EGM and only undertaken in serious circumstances for the protection of the Society, its membership and/or the general public.
 - 11.7.v. The "Standards" Co-Ordinator has the authority to undertake such functions, which arise from time to time. These functions include but are not confined to:
 - a) Arrange meetings between SPSI assistant Teachers, Teachers, Practitioners and various "Standards" members.
 - b) Arranging which "Standards" members will comprise any specific Assessment Panel based on their experience, availability, other practicalities, financial constraints and lack of bias towards the applicants for assessment.
 - c) Arranging to co-opt to "Standards" as is appropriate and constitutional, in co-operation with the Full Committee.
Co-option should only take place if there are not enough "Standards" members available, at reasonable notice, for an assessment or to ensure the assessment takes place in the event of a "Standards" member not being available or having to withdraw due to conflict of interest. The SPSI Committee Secretary must be kept informed in advance and records kept.
 - d) Have a procedure in place to ensure the successful implementations of its duties.
 - e) Ensure that comprehensive lists of tests questions, appropriate to an applicant for RSPSI, RSPSI-at, RSPSI-T and RSPSI-C, be kept and updated. These lists must have sections with questions on: SCENAR Theory, SCENAR Techniques, First Aid, Understanding of Constitution with Code of Ethics and Standards, anatomy, physiology, pathology, safety and responsibility to the public, in addition to other subjects.
 - f) Compile a file of data from available sources with regard to safety issues and contraindications.
 - g) Communicating regularly with the Committee.

11.8.i. The 1st SPSI Registered Teacher to carry the designation RSPSI-T, (Registered SCENAR Practitioners Society of Ireland-Teacher) is John Garvey. He has been unanimously chosen at the inauguration of the Society, and he is the only one so far to hold the necessary qualifications. He is a Registered Teacher in two other National Healthcare Organisations and has Life-Energies Level 2 "Scenar Therapist" certification and SCENAR Training Centre's Level 3 "SCENAR Expert" certificate. He has, at the inauguration, adequate insurance cover and the required knowledge of anatomy, physiology and pathology, as well as the required certificate from an Instructor Training Course.

11.8.ii. The first Registered Practitioners (RSPSI), having been unanimously deemed accredited at the inaugurating AGM, are John Garvey, Alan Stoney, Ester Burke, Irena Bean, Anna Garvey and Helen O'Brien, all being adequately insured and having the required knowledge of anatomy, physiology and pathology and having shown evidence of adequate numbers of successful SCENAR treatments. All are SCENAR level 2 ("Scenar Therapist") standard at the inaugural meeting.

11.8.iii. Accreditation Standards: At the inaugural meeting dated 7/7/00 this Constitution with Code of Standards and Ethics was unanimously accepted. The unanimously agreed standard for RSPSI accreditation was set at SCENAR level 2 "Scenar Therapist", as defined in the dated referenced and filed documents of 7/7/2000: This RSPSI standard will, in training courses from time to time, be upgraded by the Standards sub-committee in expectation of Department of Health regulations from the following inaugural standard:

11.8.iii.a. Level 2 training notes used during 2000 and the Kosmed equivalent.

11.8.iii.b. Anatomy, physiology pathology books:

~ As decided by the Standards Sub-Committee, but at least to I.T.E.C. standard of 2000.

11.8.iii.c. See article 17, Scenar Practitioners requirements for accreditation.

11.9. The SPSI aspires to involving the Russian School of SCENAR Representative in its accreditation procedures when possible.

11.10. Training facilities and Agreement between SPSI Full Committee and applicant Training Facility.

11.10.i. Training facilities.

The SPSI invites TRAINING FACILITIES to teach Scenar-Therapy providing that:

- a) All main teachers are registered as RSPSI-T or equivalent internationally recognised qualification.
- b) All assistant teachers are registered as RSPSI-at or equivalent internationally recognised qualification.
- c) Assistants are SPSI members or acceptable to the SPSI committee.
- d) The training Facility undertakes to ensure that students shall enrol as members of the SPSI before Module 2 begins and shall not accept students on to module 2 without proof of SPSI membership.
- e) The training Facility undertakes to teach the SPSI core curriculum in full as determined by the SPSI.
- f) The training Facility undertakes, during Module 1, to inform all students of the possible requirement for character references and to show the SPSI specimen one to students.
- g) The training Facility undertakes to inform all students that a certificate of successful completion is not enough to become an SPSI registered Practitioner, unless the continuous assessment, ongoing tests and final exam papers are assessed by the SPSI "Standards" Sub-Committee, who shall be in charge of the final exams and assessments and in a position to accredit on behalf of the SPSI.

11.10.ii. Agreement between SPSI Full Committee and applicant Training Facility.

12. Teaching

12.1. Recognised Teachers and assistant teachers of SCENAR are those whom the Standards and assessments Sub-Committee of the Society has assessed as being capable of teaching the SCENAR core Curriculum to professional level as laid down by the Constitution with Code of Ethics and Standards. They appear on the register with (RSPSI-at) and (RSPSI-T) after their names.

- 12.2. Teachers and assistant teachers shall be mindful of the power invested in them by their students, shall not abuse the trust placed in them and shall at all times act with integrity.
- 12.3. Teachers and assistant teachers shall not teach anything that might endanger the students or the people on whom they may practice.
- 12.4. The syllabus of a SCENAR course shall be consistent with the definition of SCENAR given within the Constitution with Code of Ethics and Standards and the "Standards Sub-Committee".
- 12.5. Teachers and assistant teachers and schools shall cover the material as advertised prior to the course/s.
- 12.6. Respect for confidentiality between teacher and student does not preclude the disclosure of confidential information to legitimately interested colleagues involved in the evaluation of the student, where this information is relevant.
- 12.7. Discussions of students by Teachers with their professional colleagues should be purposeful.
- 12.8. Teachers and assistant teachers should be particularly aware of the fire regulations and emergency procedures when using a public place and of the requirements for professional and public liability Insurance..
- 12.9. Teacher Assessment: (RSPSI-T)
- 8 weeks before being assessed for Teacher status, the applicant must
- 12.9.i. Show evidence of having successfully completed an adequate Teacher training course, which is acceptable to the Society, and show evidence of their practical ability to prepare material and to teach to professional standards.
- 12.9.ii. Show evidence of 3 years as a qualified and registered SCENAR Practitioner.
- 12.9.iii. Show letters of recommendation from 2 sponsors who must be recognised as being SCENAR Teachers or senior experienced SCENAR Practitioners.
- 12.9.iv. Show evidence of 80 hours assisting a teacher (T) or (C) on SCENAR Training Courses and show record of
- 40 hours of tutorials with a SCENAR Teacher (T) or SCENAR Consultant (C)
 - 50 recent case histories containing many variations of clients, of ailments, of techniques, of the number of treatments per course.
 - 3x2 hour class plans (for advanced students)
- 12.9.v. Type an in-depth essay on a relevant subject chosen by the assessment panel of between 1000 and 3000 words, to be submitted to the "Standards" for analysis not less than 8 weeks prior to the assessment date.
- 12.10. PREPARING AND PRESENTING A CLASS
- 12.10.i. The "Standards" will give the topic for selected 2 hour class plan at least 4 weeks prior to assessment. The topic shall be one that will allow for both theory and practical to be demonstrated. The assessment panel wants to observe the applicant teaching in a school set up, in a class, which is part of the advanced school curriculum. This may not always be possible in which case the demonstration may, at the discretion of "Standards", take place at the same time as the rest of the assessment or at another time or place. If a video presentation is possible it may be done during advanced class and in the presence of one panel member and kept by the SPSI as evidence of standard, after being assessed by the panel.
- 12.10.ii. The applicant must be observed teaching a class in which they can demonstrate:
- a) Teaching methodology.
 - b) Communication skills.
 - c) Confidence and familiarity in subject matter.
 - d) Ability to check that the Students have grasped what was taught.
 - e) Ability to hold a group together/hold group attention.
 - f) Appropriate response to individual student's difficulties.
- 12.10.iii. As a part of the class a practical demonstration of some techniques used in SCENAR must be given in order to demonstrate:
- 12.10.iii.a. Clarity of instruction.
 - 12.10.iii.b. Ability to observe how students are carrying out the instructions with attention to safety, awareness, posture and concentration.

12.10.iii.c. Attention should be paid to differing levels of attention in the students and their variable abilities to absorb instructions.

After the demonstration some questions shall be given in order to get clarification.

- a) SCENAR theory and principles.
- b) Core Curriculum content.
- c) Diagnosis, reactions, contradictions
- d) Anatomy and physiology and pathology in theory and by touch.
- e) The Essay
- f) Case studies
- g) First aid and safety
- h) Giving recommendations
- i) Group management
- j) Training and management of students
- k) General commitment to SCENAR (To check that the applicant has an interest in staying in the SPSI and understand fully the Code of Ethics and the Constitution.)

12.11. Assistant Teacher assessment: (RSPSI-at)

Before being assessed for assistant teacher status the applicant must:

12.11.i. Show evidence of having started an adequate Teachers Training Course which is acceptable to the SPSI.

12.11.ii. Show evidence of being an RSPSI for 2 years.

12.11.iii. Have commenced spending a minimum of 80 hours assisting a teacher (or higher) on Scenar Training Courses, (keeping records of content and hours) and have commenced 40 hours of tutorials with a Scenar Teacher (or higher) (keeping records of content and hours).

12.11.iv. Agree to obey the constitution and code of Ethics of the SPSI with special regards to article 12.

12.11.v. Have begun to collect 50 case histories post RSPSI (Scenar Expert Level 3), which contain many variations of clients, of ailment, of techniques and of the numbers of treatments per course.

12.11.vi. An assistant teacher (RSPSI-at) shall only teach while under the active control of an RSPSI-T even on non-accreditation courses.

12.11.vii. Write an essay of about 1000 words which describes "Why I wish to become an RSPSI-at, Scenar assistant teacher."

12.11.viii. These requirements may be added to by the "Standards" Sub-Committee from time to time.

13. Advertising/Promotion

13.1. Advertising should not make claim for SCENAR beyond what is stated in the Constitution.

13.2. Registered practitioners may advertise their practice provided that the wording does not make specific claims for cures, does not bring SCENAR into disrepute and is in keeping with the integrity of the SPSI.

13.3. All advertisements and notices should contain the Society's registered qualifications of the member (RSPSI) and members are required to ensure that their advertisements appear only under headings appropriate to the ethical practice of SCENAR.

13.4. Only registered Practitioners (RSPSI) may advertise their membership of the society.

13.5. No registered Practitioner shall imply or state that the practice or service s/he is offering is better than that offered by any other registered Practitioner or make detrimental comparisons between Practitioners, teachers or schools.

13.6. Only professional certificates and diplomas originating from bone fide organisations and schools or colleges may be displayed where the practitioner practices after they have been found acceptable by the SPSI.

13.7. Contributions to newspaper, journals, professional papers and other published works may appear under a member's name and qualifications, subject to compliance with the above.

13.8. SCENAR Practitioners shall not use their professional qualifications in the commercialisation of any product or remedy.

14. The SCENAR Practitioner and colleagues

14.1. No member may attempt by any means to entice a client to leave another SCENAR Practitioner in order to become his/her client.

14.2. Practitioners should be aware when they represent SCENAR to others that they are not representing only themselves and should not imply criticism of the work or practice of another school or member, whether in writing or verbally.

14.3. The SPSI recommends that RSPSI do not work alone but co-operate with other RSPSI, preferably in a centre so that workloads may be shared and the proper number of treatments given to clients at the proper times.

15. Continuous personal development (C.P.D.)

15.1. Practitioners need to maintain and increase their level of skill and knowledge of best current practice. This can be achieved through recorded study, attending advanced courses and specific meetings with colleagues for the exchange of both ideas and hands-on practice. This also applies to Teachers and Consultants. The Standards Sub-Committee shall keep appropriate records of RSPSI's CPD regarding clinical competence and insist on continuous progress as is appropriate.

15.2. In the event of returning to professional practice after a period of absence, the Practitioner shall be conscientious in ensuring that his/her skill are up to professional standards before accepting clients. The Society has established guidelines in relation to this, and may query the Practitioner if in any doubt as to the adequacy of his/her preparation for return to practice. If not satisfied, the Society may withdraw or refuse Registered Practitioners status or request an assessment.

16. Assessment Panel ("Panel" for short)

16.1. The Standards and assessments Sub-Committee through its Co-Ordinator shall nominate a 2 or 3 person Assessment Panel as required and as proper to assess applicants for accreditation. The "panel" shall be subject to the Standards Sub-Committee's rules and responsibilities.

16.2. A minimum of two (2) members of the "Panel" shall be present at the assessment of each applicant. The "Panel" must reach a unanimous decision to accredit in each case, independent of one another. "Standards" shall retain the right to overrule the "Panel's" decision, but only in exceptional circumstances and the Committee must be immediately informed.

The "Standards" Co-Ordinator or other nominated member in his/her absence, shall notify the Society Chairperson, or in his/her absence, the Society Secretary, of the Standards Sub-Committee's decision(s). This shall normally be done within one (1) week of the assessment day. The Society Officer who receives the decision shall normally inform applicants of the decision within a further week.

16.3. In cases where the "Panel" decides not to accredit the applicant, the "Panel" shall so advise the "Standards" Co-Ordinator who shall prepare a sympathetic confidential report of the aspects of the applicant's practice that in their view need improvement. This report shall be forwarded unopened to the applicant by the Committee Secretary or other officer in their absence.

16.4. The Committee shall arrange for the assessment record of each of those accredited, to be kept confidentially for future evidence/reference.

16.5. Outgoing members of "Standards" may be re-elected at AGM.

16.6. In the event of vacancies arises on the "Standards", the "Standards" may co-opt as required until the next AGM. Co-optees must be RSPSI registered assistant teachers or higher or be recognised by "Standards" and the committee as an equivalent status in another professional SCENAR organisation. The Committee must be notified of the decision to co-opt and be given the name of the co-optee at the first available opportunity before an assessment takes place.

16.7. "Panel" members Shall "declare an interest" and decline, if asked to attend a specific assessment where they have a close involvement or bias e.g. relationship, Teacher, Family connections, dispute etc. "Standards" members have the right to query or challenge a panel member or proposed panel member in this regard.

16.8. Each assessment session shall be of about one hour duration, with the possibility of longer, where necessary, in order for panel assessors to be certain that the applicant has given all the information/answers they can, on all sections of the syllabus. Full records must be kept and filed for 12 years by the Committee Secretary on receipt of same from the assessment panel.

16.9. A "Panel" member is not allowed to lobby or attempt to persuade another panel member to change his/her awarded points subsequent to an assessment. This is to ensure that standards are kept high and decisions are made fairly and honestly.

16.10. The "panel" has the responsibility to ensure that the SPSI accreditation is awarded only to those of a very high standard in SCENAR. The ability to use SCENAR as traditionally taught takes precedence over other methods.

16.11. Complaints/grievances shall be dealt with in a manner fitting to experienced SPSI and by reference to the SPSI Constitution.

16.12. Safety issues shall be addressed, as is reasonable, to ensure the safety of the convened "Panel" and applicants.

16.13. Applicants shall submit case histories, with code names, dates of client visits, and numbered, in a sealed envelope addressed to the Secretary, c/o SPSI address, to be sent forward for distribution to "Panel" members due to be present on the Assessment day. Results of the Assessment will be sent in sealed envelopes to each candidate via the Secretary, SPSI.

16.14. "Standards" shall ensure that for each assessment at least one assessor shall be from the SPSI.

16.15. At least one of the assessments Panel member(s) must be at least of the status to which the applicant is aspiring.

17. Assessment Panel, Procedures and Guidelines.

Scenar Practitioner requirements for accreditation

17.1. For a candidate to be awarded Practitioners status at least 75% must be awarded independently by each assessor, in each sub-section for accreditation.

17.2.i. Personal interview

This is to see how the candidate is managing their own SCENAR practice and how they understand their own health in terms of SCENAR. There will be questions asked about their commitment to SCENAR and membership of the SPSI and about their understanding of the Constitution with Code of Ethics and Standards.

17.2.ii. Practical body work

The candidate will give a SCENAR treatment to a panel member or volunteer client to treat a specific area/ailment. Evidence of familiarity with many techniques is required as is evidence of proper record keeping, planning, diagnosis, sensitivity and effectiveness etc.

17.2.iii. Theory; written test and oral interview

The written test and oral interview should show ones level of competence, confidence, willingness to abide by SPSI Constitution with Code of Ethics and Standards, safety awareness and suitability to work with clients appropriately. The candidate will be expected to show evidence of their ability to do selected techniques properly. This may require the use of prepared partly- completed technique sheets. The candidate must also be able to explain how SCENAR operates, in answer to specific questions. The written test will be kept on SPSI file for 12 years along with the records of the other tests.

17.2.iv. Anatomy, Physiology, Pathology

An adequate number of questions both verbal and written, may be put to the applicant to ensure whether the required standard is achieved.

17.2.v. First Aid

Questions may be put to ensure an adequate proficiency in basic first aid.

17.2.vi. Contraindications questions

17.2.vii. Responsibilities to clients.

When to refer clients, when to stop treatment sessions/courses. Ability to listen, hear, understand subtle signals etc.

17.2.viii. Level of sensitivity, intuition and ability to diagnose and treat accurately, safely and responsibly.

17.2.ix. Self-development

Understanding the value of nutrition, mental and physical exercises, proper lifestyle etc. for the candidate and clients benefit.

17.3 When applying for accreditation an applicant must show evidence of:

- Being a paid up member of the SPSI for at least one year except in unusual circumstances as defined by the Standards sub-committee..

- Completion of Scenar modules 1 to 8 and also extra time for advanced Anatomy and Physiology understanding and for psychological evaluations of each student or what is accepted by the SPSI "Standards" Sub-Committee as an equivalent with not less than 120 hours class study and not less than 80 hours pre-arranged and recorded home study, dated and signed, in addition to the required case studies treatments, unless otherwise agreed in writing by the Standards sub-Committee.
- Adequate professional indemnity and public liability Insurance to the satisfaction of the SPSI.
- Certificate in anatomy, physiology, pathology satisfactory to the SPSI. Present to the Standards Co-Ordinator the required case studies treated since successful completion of Module 7, and preferably before Module 8 has commenced, all typed or written legibly with the required details. Use codes for confidentiality.
- Write an essay about 1000 words which describes "My introduction to Scenar and what Scenar means to me personally".
- Note: A Scenar Diploma is from a school of Scenar only (Training facility) and not a national qualification or a national standard.
- Prior to assessment by the SPSI accreditation panel:
- At least 110 treatments on 25 prior to module 8 clients as follows: one detailed treatment on 5 individual clients, at least 5 detailed treatments on 10 more clients and at least 10 detailed treatments on 5 other clients. Full records must be presented, include dates, dynamic changes, how and why each technique and treatment was chosen. Attach all technique records whether diag.0 or diag. 1. Ensure client confidentiality by use of code.
- Evidence of adequate and acceptable insurance, both public liability and professional Indemnity, as well as the appropriate Character Reference requirements.
- Evidence of acceptance of the SPSI Constitution and Code of Ethics and agreement to meet all its requirements as well as meeting the requirements of the Standards Sub-Committee.
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- Applicants shall not be eligible for assessment unless their Scenar training meets the requirements of the SPSI Core-Curriculum.

These requirements may, from time to time, be amended by the SPSI Standards Sub-committee at its discretion.

18. Complaints sub-committee and complaints procedures

18.1. The officers of the Committee and the Co-Ordinator of the Standards Sub-committee shall maintain a procedure to assist and protect the good name and character of any member. This limitation to Officers shall be due to the sensitivity of the issue and to the need for confidentiality and speed in investigating. A monetary fund shall be kept available to pay the Society's cost of this procedure.

18.2. In the event of a complaint being made against an RSPSI the Committee Officers and "Standards" sub-committee shall, as a matter of urgency, hold a meeting, whether in person, by phone or by other means, at which the procedure for dealing with the issue will be started.

18.3. A special sub-committee from the above named shall be formed as a matter of urgency, to investigate and interview those involved. This shall be then called the "Complaints sub-committee". It shall be dissolved immediately its task has been completed to the best of its ability.

18.4. Legal advice shall be immediately sought. A presumption of innocence shall be maintained. Minutes and records shall be kept.

18.5. If an RSPSI is shown to be innocent a report, signed by the Complaints Sub-Committee members, shall be issued to all concerned to support whatever action the wrongly accused RSPSI chooses to take (if any). In this

event the Committee Officers and the "Standards" Sub-Committee Co-Ordinator shall issue their own report to support the original report and legal advice may be sought.

18.6. If the Complaints sub-committee cannot come to a conclusion it will report, with all the information available to it, to "Standards" sub-committee and Officers of The Committee for them to try to proceed and/or to refer the complaint to civil authority, such as Gardai or Health Board. The Complaints sub-committee shall then be dissolved.

19. SPSI Discipline, Penalties and rights of appeal

19.1.i. The officers of the Committee and the Co-Ordinator of the Standards Sub-committee shall maintain a procedure to protect the public from any society member who is suspected or alleged to be in breach of this Code of Ethics and Standards. This limitation to Officers shall be due to the sensitivity of the issue and to the need for confidentiality and speed in investigating.

19.1.ii. This group shall be called the Complaints Sub-Committee as described in Article 18.

19.1.iii. This procedure shall include whatever immediate legal advice and other expert advice as may be required.

19.1.iv. A monetary fund shall be kept available to pay the Society's costs of this procedure.

19.2. A plea of ignorance in respect of any of the elements of this Constitution with Code of Ethics and Standards shall not be deemed a justifiable excuse for a SPSI member accused of having contravened them.

19.3. A SPSI member found to be acting in breach of the Constitution with Code of Ethics and Standards shall, in accordance with the decision of the Complaints Sub-Committee:

19.3.i. Be served with written notice that his/her behaviour is contravention to this Constitution with Code of Ethics and Standards and he/she is required to cease any such behaviour immediately, all to be in writing, dated and signed.

19.3.ii. or be required to present himself/herself before the Complaints Sub-Committee to explain his/her behaviour, offer apologies to the Complaints Sub-Committee and every other involved person and undertake to cease such behaviour immediately and accept whatever censure is imposed on his/her practice. All to be written, dated, signed and witnessed.

19.3.iii. or be struck off from the Society register at the discretion of the Complaints Sub-Committee

19.3.iv. or be suspended from the Society for a designated period of time at the discretion of the SPSI Complaints Sub-Committee

19.3.v. and/or legal action by the SPSI Full Committee shall immediately be undertaken.

19.3.vi. And/or referral of complaint to civil authorities such as Gardai, Health Board etc. by the Committee officers and "Standards" shall immediately be undertaken.

19.3.vii. An RSPSI shall be automatically struck off from the Society Register if found guilty by any EU member country's court of law of assault, whether sexual, physical or otherwise upon a patient under his/her treatment or any other criminal activity which conflict with his/her professional status as an RSPSI.

19.3.viii. An SPSI member shall be immediately suspended pending investigations if a complaint is received regarding usage of any form of mind-altering "addiction".

19.4. The member complained against shall have the right to be heard and be represented, professionally and/or legally, and to appeal the decision to the Committee officers and "Standards" or to the Full Committee.

19.5. Only after the right of appeal has been exercised or declined shall the Full Committee make a final decision. Full records and minutes shall be kept by the Committee Secretary. The Full Committee shall determine the fair time limit for the exercise or decline of this right.

19.6. Where the Complaints Sub-Committee cannot come to a conclusion about whether a breach of the Constitution with Code of Ethics and Standards has taken place, it must immediately report, with all the information available to it, to the "Standards" Sub-committee and officers of the Committee, who in turn must speedily decide whether the risk to the public or to SPSI members warrants the involvement of Gardai, Health Board or other legitimately interested agencies.

If it does so warrant then the relevant agencies must be immediately notified, in writing and full records kept. The Complaints Sub-Committee shall immediately be dissolved after its handing over.

19.7. Every RPSI member is legally and duty bound to report to the Committee or "Standards" Sub-Committee any breach or perceived breach of this Constitution with Code of Ethics and Standards. The penalty for non-action shall be in accordance with articles 18 and 19.
End of Constitution with Code of Ethics and Standards

The following are synopsis of the individual Standards sub-committee decision documents.

S.P.S.I Standards Requirements no. 01 27/7/2000

A and P Standard.

The S.P.S.I accreditation and standards sub-committee has accepted the Irish College of Scenar (I.C.S.) anatomy and physiology standard dated the 27th July 2000 as its basic requirement for Scenar students.

S.P.S.I Standards Requirements no. 02 01/01/2003

CHARACTER REFERENCE PROCEDURE

The S.P.S.I accreditation and standards sub-committee has of today introduced the S.P.S.I Character reference procedure. As per the attached original character reference:

Character Reference.

This character reference will be requested by the S.P.S.I. Standards Sub-Committee prior to ones assessment for Registered Practitioner status (R.S.P.S.I.) and possibly at some future date after becoming a Registered Practitioner. The S.P.S.I is the National Society established to protect both clients/patients and membership, and the general public.

Choose from:

- Gardai or Police, if possible, AND any two of the following you expect to be acceptable to the S.P.S.I.
- Clergy person, Educator, Teacher, Coach, Elected government or Council Member,
- Medical Practitioner, Complimentary Practitioner (in a national association),
- Bank Official, Civil Servant, Others whom you think to be responsible and competent.

S.P.S.I Standards Requirements no. 03. 1/1/2004

First Aid.

The S.P.S.I has initiated as of today its First Aid Policy.

This policy is that each student, before RPSI acceptance, must have successfully completed a recognised First Aid, First Responder Course and must attend a similar course every 3 years to remain on the RPSI. Register.

S.P.S.I Standards Requirements no. 04. 01/01/2005

ADEQUATE INSURANCE.

The Standards and Accreditation Sub-committee have decided that "adequate insurance" for RPSI is defined as:
Limit of indemnity: €2,500,000 any one claim.

Category of cover: Malpractice, public liability.

Therapy: Scenar.

Scenar Teachers: Require teaching insurance.

S.P.S.I Standards Requirements no. 05.

Dated 01/01/2004

CPD POST RPSI QUALIFYING

The S.P.S.I. recognizes (at least) 4 types of Post Graduate courses and their standards after qualification as an RSPSI. :

A) Compulsory CPD (continuous professional development). Specific courses to be successfully completed within the 1st year and 2nd year after qualifying as an RSPSI.

B) CPD courses as specifically negotiated annually.

These shall include either i) Scenar training courses

or ii) Training course in other methods of professional development.

C) Specific SPSI courses leading towards master-practitioner status.

D) Specific certificate course in Training for Trainers, of a standard and duration acceptable to the SPSL This may be a university

course or a course for trainers /teachers in Education or in Industry.

Conditions for Teacher /Trainer status:

1. Applicants shall be fully qualified SPSI Registered Practitioners (RSPSI) for at least 3 continuous years.

OR

have fulfilled the extra requirements of the S.P.S.I. (available on request).

2. Applicants shall be at least 25 years old.

3. Applicants shall be subject to the S.P.S.I Constitution and Code of Ethics and Standards and may be required to present updated Character references.

Master-Practitioner Status and Teacher/Trainer Status

Master-Practitioner status may be achieved after 2 years as an RSPSI by successfully completing the S.P.S.I Course Requirements. This usually will require 3 x 3 Day S.P.S.I. training modules as well as some other post-graduation course attendances. Successful recipients may use the designation RSPSI-M

Teacher Status RSPSI-T may be acquired by achieving Master-practitioner status as well as successfully completing the acceptable Training for Trainers Course which shall include at least 24 hours of formal training in "Training for Trainers", as well as the additional and specific S.P.S.I. Scenar teacher /trainer exam course content and a minimum of 40 hours supervised quality homework which also must pass examination.

The course content shall include the S.P.S.I. constitutional requirements as well as sections on:

1. Training, what is it, various types of training including systematic training.
2. Clinical analysis
3. Socialisation in detail and its implication
4. Types of learning.
5. Communication skills.
6. Training methods.
7. Use of trainer's aids.
8. Preparing training programmes.
9. Aims and objectives.
10. Planning and giving a presentation to a class.
11. Planning and giving a demonstration to a class.
12. How to assess various methods of teaching/training and their benefits.
13. Constructive Feedback, Evaluation, positive confrontations, weaknesses, motivation, giving support, counselling, psychology and development.

S.P.S.I. - UNDERSTANDING SCENAR COURSE / SEMINAR CPD POINTS

1. It is essential that as much detail as possible is given by the course applicant at least one month prior to the course deadline for acceptance to allow the S.P.S.I. Standards Sub-Committee to determine:

A) points to be awarded for that Course

B) reduction from the points to be awarded in individual

cases in line with 2 & 3 below.

2 Where, in the opinion of the SPSI Standards Sub-Committee, there is likely to be little or no value to a particular practitioner no CPD points will be awarded to that practitioner for that course.

3 When the course/seminar on offer is, in the opinion of the S.P.S.I. and standing Sub-Committee, too advanced for a particular practitioner reduced or no points will be awarded to that practitioner for that Course.

4 After the C.P.D. Course:

If in the opinion of the S.P.S.I. Standards Sub-Committee the course did not live up to its claims, points for awarding may be reduced. On the other hand, if the course more than lives up to what it promised, extra points may be awarded at the discretion of the S.P.S.I. Standards Sub-Committee.