



Music and Imagery Association of Australia Inc.
Reg. No. A0032180H ABN 33 796 122 546

Code of Ethics, Standards of Practice, and By-laws

Preamble

The Music and Imagery Association of Australia (MIAA) is the premier organisation representing the practice of music and imagery, the Bonny Method of Guided Imagery and Music (GIM) and related methods in Australia.

MIAA is an Affiliate Member of the Psychotherapy and Counselling Federation of Australia (PACFA). As an Affiliate Member it is a requirement that MIAA embraces the principles and procedures of PACFA as laid out in the current version of their Code of Ethics and Professional Conduct Procedures.

All members of MIAA abide by relevant State and Federal legislation of Australia.
All members of MIAA are governed by this Code of Ethics and have an obligation to know, and abide, by this Code.

All members of MIAA are governed by this Code of Ethics and Standards of Practice.

This document sets out the ethical framework for the governance of MIAA and professional practice of its members.

1. Definitions

Throughout this document:

- MIAA means the Music and Imagery Association of Australia Inc.
- PACFA means the Psychotherapy and Counselling Federation of Australia.
- President means the President of MIAA.
- Council means the governing body of MIAA.
- Professional Practices Committee (PPC) means the Committee of that name.
- A Registered Guided Imagery and Music Therapist (RGIMT) means a person who has completed all levels of training in the Bonny Method of Guided Imagery and Music, and has been accredited by the Association.
- An Affiliate member is a person who has completed a component of training but is not yet eligible to be Registered, or a trainee currently enrolled in a training program.

- A member is a fully paid up member of the Association for the current year
- By-Law for Grievance Procedures means the By-Laws adopted and published by MIAA.
- By-Law for Application for Registration and Lapsed Registration means the By-Law adopted and published by MIAA.
- A client means an individual, couple, family, group, or organisation who is in a therapeutic relationship with a Registered Guided Imagery and Music Therapist, a trainee, or an Affiliate Member.

2. Values and Principles of MIAA

Through its structures, processes, and procedures, members of MIAA demonstrate a culture in which the following values and principles can thrive:

- i) Respect for the essential humanity, worth and dignity of all people;
- ii) Recognition of and respect for the cultural, religious and sexual diversity among people and opposing discrimination, oppressive and other unjust behaviour;
- iii) Ensuring its members familiarise themselves with the restrictions and demands of a particular client's cultural, sexual or religious background;
- iv) Abiding by the laws of the society in which they are constituted;
- v) Distinguish personal from professional views when acting on behalf of the Association and representing the Association only with appropriate authorisation.

Through its structures, processes, and procedures, MIAA Council members demonstrate a culture in which the following values and principles can thrive:

- vi) An honouring of the trust placed in them by their members and protecting the integrity of that relationship;
- vii) Respecting the privacy of its members and preserving the confidentiality of information acquired in the course of their work for MIAA;
- viii) Protection of the rights of, and promotion of the responsibilities of, its members;
- ix) A commitment to competent and good governance according to the Constitution and By-Laws of the Association;
- x) Protecting the public against unethical practice by its members;
- xi) Refraining from the misuse of an official position within MIAA.

3. Professional Ethics

All members of MIAA will act in a professional manner, taking responsibility to:

- i) Respect the rights and dignity of their clients, serving those in need without discrimination against colour, culture, age, nationality, gender, sexual preference, religion, politics or social status.
- ii) Maintain the highest standard of professional competence, striving continually to up-date professional skills, and meeting at least the

minimum requirements for Continuing Professional Development and supervision as laid out by MIAA.

- iii) Take responsibility for personal limitations and problems that might interfere with their professional work and take whatever action necessary (i.e. seeking professional help, supervision, limiting or discontinuing work with clients etc.) to ensure that services to clients are not affected by these limitations and problems.
- iv) Maintain a commitment to personal growth and development.
- v) Identify areas outside of their level of competence and make appropriate referral to other professionals, where appropriate.
- vi) Maintain a high standard of personal conduct and professional practice, recognising that the primary consideration is to safeguard the client's physical, mental and emotional health.
- vii) Not be under the influence of alcohol, drugs or any substance that adversely affects professional competence.
- viii) Maintain integrity when entering into multiple relationships with clients, trainees, or research subjects, avoiding those situations which interfere with professional judgement or objectivity in these relationships, and negotiating a written contract where required.
- ix) Not engage in romantic or sexual relationships with clients or with close members of their clients' families both during therapy and for a period of at least five years post-therapy. This is considered serious professional misconduct and is explicitly prohibited.
- x) Be aware of, and not exploit the vulnerability and suggestibility of persons in an altered state of consciousness.
- xi) Not exploit clients, trainees or research subjects sexually, physically, financially or emotionally, or by social media.
- xii) Keep all forms of professional records (notes, transcripts, mandalas, e-mail correspondence, short message service (SMS) texts, and social media communications) confidential and secure, abiding by the relevant state and federal Privacy Act/s, noting that a client's right to confidentiality continues after the client's death unless there are overriding legal considerations.
- xiii) Maintain all financial, business and client records (notes, transcripts, mandalas, e-mail correspondence, short message service (SMS) texts, social media communications) according to legally defined requirements (at least 7 years) in a locked cabinet and/or password-protected computer files, accessible only by the therapist.

- xiv) Dispose of written records responsibly and erase all audio and video recordings.
- xv) Maintain in strict confidence all client information, advising clients of the limits of confidentiality, and only waiving confidentiality when:
 - a) There is imminent danger to the client or others, or
 - b) The member is subpoenaed by the judicial system.
- xvi) Maintain in strict confidence all client information, and when presenting case study material in supervision/consultation, at conferences, in teaching, and in publication:
 - a) Disguising a person's identity,
 - b) Insuring that the client has signed a waiver form to allow oral, written or recorded publication or presentation of session material.

4. Personal moral qualities of the therapist

All members of MIAA are strongly encouraged to adopt the following behaviours/skills:

- i) Empathy: the ability to communicate understanding of another person's experience from that person's perspective.
- ii) Sincerity: a personal commitment to consistency between what is professed and what is done.
- iii) Integrity: commitment to being moral in dealings with others, personal straightforwardness, honesty and coherence.
- iv) Authenticity: the capacity to be true to self and relating truthfully to others.
- v) Resilience: the capacity to work with the client's concerns without being personally diminished.
- vi) Respect: showing appropriate esteem to others and their understanding of themselves.
- vii) Humility: the ability to assess accurately and acknowledge one's own strengths and weaknesses.
- viii) Competence: the effective deployment of the skills and knowledge needed to do what is required.
- ix) Fairness: the consistent application of appropriate criteria to inform decisions and actions.
- x) Wisdom: possession of sound judgement that informs practice.
- xi) Courage: the willingness to be present to the unknown.
- xii) Care: attending to and serving the needs of others and ensuring they are protected from harm.
- xiii) Curiosity: taking an active and genuine interest in, and desire to understand, the lives and experiences of others.
- xiv) Diligence: using skills and knowledge in music & imagery effectively to achieve desired outcomes.
- xv) Honesty: a personal commitment to being truthful, consistent, straightforward and trustworthy in dealing with others.

5. Relationships with colleagues

Registered Guided Imagery and Music Therapists and trainees shall not:

- i) Offer professional services to a person receiving therapy from another Registered Guided Imagery and Music Therapist except by agreement with that therapist, or after termination of the client's relationship with that therapist;
- ii) Actively solicit nor initiate work with a client who is already in therapy, without the expressed consent of the client's present therapist;
- iii) Damage the professional reputation or practice of others;
- iv) Exert undue influence upon a client or their family to bring about a change in medical or paramedical practitioners.

6. Standards of Practice

6.1 MIAA members shall not represent themselves as a qualified or Registered Guided Imagery and Music Therapist, or any other term which implies accreditation to practice, nor describe or advertise their work as if professionally accredited, unless they have been accredited as a Registered Guided Imagery and Music Therapist by the Association.

6.2 Therapeutic principles:
Therapists and trainees shall adopt the following principles in their practice:

- 1) Strive for all aspects of best practice;
- 2) Honour trust as a fundamental core in ethical practice;
- 3) Provide respect for the client's right to be self-governing;
- 4) Make a commitment to promote the clients' wellbeing, and avoid harm;
- 5) Provide adequate services;
- 6) Be fair and impartial in treatment of all clients;
- 7) Foster self-knowledge and care for self;
- 8) Keep abreast of research developments;
- 9) Maintain professional development and supervision, and
- 10) Fulfil adequate insurance requirements.

Therapists and trainees provide information about the practice's privacy and confidentiality policy before commencing therapy, and obtain signatures from clients indicating their understanding.

6.3 Therapeutic procedures
Therapists and trainees shall:

- i) Conduct an appropriate assessment of new clients to determine their suitability for Guided Imagery and Music therapy, consulting with referral source where appropriate;
- ii) Determine appropriate therapeutic goals with the client;
- iii) Make periodic evaluations of the client's progress and maintain progress notes, and determine the need for:
 - a) continued treatment, or

- b) referral to adjunctive or alternative therapy, or
- c) termination of the therapeutic series.
- iv) Terminate therapy in cases where it is clear that the patient/client will not benefit from further intervention and provide adequate time for closure to occur.
- v) Be permitted to advertise their practice provided that such advertising:
 - a) is not false, misleading or deceptive,
 - b) is not vulgar or sensational,
- c) does not consist of self-laudatory statements, or imply superiority over other practitioners,
- d) does not denigrate others,
- e) does not contain testimonials or endorsements concerning the practitioner of the practice, and
- e) complies with all other sections of the Code of Ethics of the Association.

7. Standards of Training, Teaching and Supervision

- i) All practitioners are encouraged to share their professional knowledge and practice in order to benefit their clients and the public.
- ii) Practitioners who provide education and training should acquire the skills, attitudes and knowledge required to be competent teachers and facilitators of learning, and to undertake activities to maintain training competence.
- iii) Trainers shall ensure that the training programs and the learning experiences offered are in accordance with the currently valid educational guidelines and those of other acknowledged associations.
- iv) Trainers, supervisors and mentors shall only offer courses and provide supervision in areas in which they have the requisite competence and experience.
- v) Trainers present information that is current, accurate and objective. Where they present their personal opinion or professional judgement, these statements must be prefaced appropriately.
- vi) It is acknowledged that dual relationships may be inevitable to some degree. However, the roles of trainer and therapist are seen as completely distinct and should be separated in absolute terms. Trainers who have other dual relationships with trainees shall, as far as possible, reduce conflicting role interests. In principle, these roles shall be distributed among different professionals. Different roles shall be separated in space and time. If, for any reason, the objectivity and capacity of the trainer to professionally evaluate is restricted, this must be declared and a resolution sought that protects the trainee's interests.
- vii) Trainers, supervisors and mentors must not exploit trainees in financial, sexual, emotional, academic or any other ways.
- viii) Trainers, supervisors and mentors are required to be fair, accurate and honest in their assessments of their trainees.
- ix) Trainers, supervisors and mentors recognise the power they hold over trainees or supervisees and avoid engaging in conduct that is personally demeaning to trainees or supervisees.
- x) Trainers, supervisors and mentors in supervising the work of trainees have a responsibility to model and promote awareness of, and adherence

- to, the provisions of this Code, particularly regarding confidentiality.
- xi) In providing supervision to trainees, trainers/supervisors/mentors do not enter into a therapeutic role with the trainee. If the trainer/supervisor/mentor considers that a trainee needs therapy, the supervisor should consult with the education institution, and the trainee may then be referred to a professional therapist, other than the assigned supervisor.
 - xii) While due weight is given to a supervisor's assessment of a trainee and his/her acquisition of adequate skills, no individual supervisor has the right to determine the success or failure of a trainee in the course of his/her training.
 - xiii) Trainers/supervisors/mentors maintain confidentiality regarding the standard of work and personality of each trainee, and their opinions are not expressed to others without proper consent.
 - xiv) Trainees similarly respect the standard of work and personality of the trainer/supervisor/mentor, maintaining confidentiality of information discussed with a supervisor.
 - xv) Prior consent is required from clients if they are to be observed, recorded or if their personally identifiable disclosures are to be used for training purposes.

Supervision

- xvi) Supervision is considered a discrete professional activity within clinical practice and thus it is required that supervisors and consultants complete specialist training in the development of supervision competencies.
- xvii) Supervisors, consultants and mentors, have a responsibility to maintain and enhance best practice and to protect supervisees from poor practice. The evaluative aspects of supervision shall be contracted and transparent in any supervision arrangement.
- xviii) Supervisors, consultants and mentors must not exploit supervisees in financial, sexual, emotional, academic or any other ways. They also avoid intimate social contact with their supervisees.

8 Research Ethics

- i) RGIMTs in private practice who wish to engage in research activities, should consult with the Professional Practices Committee of MIAA regarding the ethical requirements of the research project.
- ii) Participation of clients in research shall be voluntary. Signed consent forms must be obtained from participating clients before the commencement of the research project. Clients must be allowed to withdraw from a research project at any time.
- iii) All clients shall be informed of the nature of the research before being asked to sign a consent form, which includes information on:
 - a) the nature of the research,
 - b) the name, address and phone number of the researcher for further information,

- c) length of time the project will take,
 - d) length of time of individual sessions,
 - e) any possible risks,
 - f) confidentiality,
 - g) publication of results,
 - h) whether there are any risks in being deprived of treatment in order to constitute a control group.
- iv) When publishing written or recorded materials, RGIMTs and trainees shall give credit to all who have contributed in proportion to their contribution, acknowledging unpublished as well as published material that has directly influenced the current research and subsequent publication.

9. Infringements of the Code of Ethics and/or Standards of Practice

- i) Lack of awareness or mis-understanding of any provision in the Code of Ethics or the Standards of Practice is not considered a defence to any charge brought in relation to an alleged infringement of such provisions.
- ii) Any member of the Association who becomes aware of any alleged infringement of the Association's Code of Ethics or of the Association's Standards of Practice may, in the first instance, bring the alleged infringement to the notice of the person involved for resolution. This needs to be documented in writing.
- iii) Where there is no resolution within four weeks from the date of the alleged infringement being brought to the notice of the person involved, that member shall notify the President of the Association in writing, giving a full explanation of the alleged infringement, including the name of any individuals alleged to have been adversely affected by the person's conduct, and documenting any procedures already taken to attempt to resolve the matter.
- iv) The President may dismiss the complaint about the alleged infringement where in the President's judgement, the matter:
 - a) does not constitute a breach of the Code of Ethics, or Standards of Practice
 - b) is not sufficiently substantiated
 - c) is not of sufficient consequence to warrant a Formal Grievance Procedure (as described in the Association's By-Laws for Grievance Procedures), or
 - d) has been resolved by facilitation with the parties.
- v) Where the President has not dismissed the complaint, he/she shall arrange a meeting by notice in writing, of the parties concerned. The purpose of the meeting will be to negotiate a satisfactory resolution of the matter. If the matter is not resolved, the President shall initiate the Formal Grievance Procedure (p. 11).

- vi) Any person (e.g., client, client's attorney, agency official, member of the public) who becomes aware of an alleged infringement by a member of the Association of its Code of Ethics and/or its Standards of Practice, shall bring the alleged infringement to the notice of the member involved for the resolution in the first instance, and/or the person may notify the President of the matter. The President shall seek information in writing from the person notifying the alleged infringement, including a full explanation of the alleged infringement, the names of any individuals alleged to have been adversely affected by the member's conduct, and any procedures already taken to resolve the matter. The President shall deal with any such allegations by the procedures as set out in iv) and v) above.
- vii) Complaints about alleged infringements which are notified more than 12 months after the date of the alleged infringement of the Code of Ethics and/or the Standards of Practice will not normally be considered unless there are extenuating circumstances.

10. Powers to Rescind Registration

A Grievance Committee (as defined in the Association's By-Laws for Grievance Procedures) and instituted by the PPC (and in conjunction with the President), may recommend to the Council that Registration/Membership of an individual be rescinded if an infringement of the Code of Ethics or Standards of Practice of the Association has occurred, or is occurring. The recommendation to rescind Registration/Membership must be considered by the Council, which may approve such a recommendation in terms of Section 17 of the Constitution.

In the case of Registration being rescinded, the person may not practise the Bonny Method Guided Imagery and Music or related methods, nor represent themselves as a qualified Guided Imagery and Music therapist, or any other term, which implies qualification. They may not re-apply for Registration before a period of 12 months has transpired from the date of the Council's decision. An application for re-Registration can be made to the Professional Practices Committee, which will determine recommendations to complete further courses of study, supervised work or personal therapy work. Completion of this work does not in itself guarantee or imply that the person will be re-registered.

11. Re-registration

A person who has had their Registration rescinded under clause 10 above, may apply for instructions from the Professional Practices Committee regarding further courses of study, supervised work or personal therapy work to be completed prior to any re-application for Registration. At the time of that application, the Professional Practices Committee may require examination of the candidate and documentation to ascertain that the above study/supervision/personal work has been completed satisfactorily. Completion of this work does not in itself guarantee or imply that the person will be re-Registered.

The Professional Practices Committee is to assess the application for re-Registration and recommend approval or otherwise to Council.

This document has been revised in accordance with the PACFA Code of Ethics 2017, and Professional Conduct Procedures 2020

This version of the Code of Ethics of MIAA replaces all previous iterations and comes into effect from October 12, 2020.

BY-LAWS FOR GRIEVANCE PROCEDURES

1. Definitions:

Throughout this document:

- Complainant refers to the person bringing forth the complaint of an alleged infringement.
- Respondent refers to the person against whom the complaint of an alleged infringement is made.
- MIAA means the Music and Imagery Association of Australia Inc.
- President means the President of the Association.
- Council means the governing body of the Association.
- Professional Practices Committee means the Committee of that name as provided for in Section 10 of the Constitution of the Association.
- A Registered Guided Imagery and Music Therapist means a person who has completed all levels of training in the Bonny Method of Guided Imagery and Music, and has been accredited by the Association.
- A trainee is a person who is currently engaged in training
- A member is a fully paid up member of the Association for the current year
- Code of Ethics means the Code approved and issued by the Association
- Standards of Practice means the Standards approved and issued by the Association.
- A client means a person who is served professionally by
 - A Registered Guided Imagery and Music Therapist,
 - A trainee in training, whilst under the supervision of a Registered Guided Imagery and Music Therapist.

2. Preamble:

- i) All members who are involved in the process of resolving a complaint about an infringement must make sincere efforts to resolve differing viewpoints before the Formal Grievance Procedure (see Section 3 below) is set in motion, by communicating with each other either in writing and/or in person. Written document can be a hard copy or email correspondence. Documentation of these communications is to be kept.
- ii) Natural justice provisions. The Respondent shall have access to all written reports made by the President or by the Grievance Committee, as well as all documents relating to the complaint. The Respondent shall have the right to reply to the content of allegations and written reports.
- iii) The Respondent may request a person with legal qualifications and/or a family member/friend who may act as an advocate during the Formal Grievance Procedure.
- iv) Confidentiality. All members involved in the complaint resolution procedures and their representatives, are obliged to maintain strict confidentiality with respect to information concerning a complaint of an alleged infringement. All documents (and computer files) produced during the complaints resolution

procedure are to be marked private and confidential and must remain confidential until destroyed. It is a condition of allowing a respondent to be assisted by a person that such person is required to meet these confidentiality requirements.

- v) Written documentation of the complaint's resolution and procedures are to be held in confidence for a period of 12 months from the completion of the process. After this time the case record comprising name, nature of the complaint, action and outcome, are to be retained in a permanent file, but all other material is to be destroyed. Computer files and any copies thereof are to be destroyed at the completion of the complaints resolution procedure.
- vi) Where the Complainant and/or Respondent choose to have legal representation, the fees for such legal representation will be borne by the Complainant and/or Respondent. Where the Association seeks legal advice, it is to meet its own legal costs.

3. Formal Grievance Procedure.

The President in conjunction with the Professional Practices Committee is to instigate the Formal Grievance Procedure as follows:

- i) An ad hoc Grievance Committee will be constituted for the purpose of investigating the alleged infringement of the Code of Ethics or Standards of Practice under question.
- ii) Its term of office is limited to the length of time required to report to the Council of the Association.
- iii) The Grievance Committee shall comprise:
 - a) the Chairperson of the Professional Practices Committee (or appointee in the case of conflict of interest),
 - b) one other member of the Professional Practices Committee with at least 2 years clinical experience
 - c) a third member who may be a Registered Guided Imagery and Music Therapist, or a professional person outside of the Association from a professional organisation of similar mission with experience in handling such situations e.g., a member of PACFA, and
 - d) any further member/s that the President agrees to appoint in response to a request from the Committee; and
 - e) at the discretion of the President, an independent legal practitioner
- iv) One of the above persons will be appointed Chairperson of the Committee by the President.
- v) All members of the committee must be free of conflict of interest and disclose any such conflict or potential conflict.

4. The Role of the Grievance Committee.

The role of the Grievance Committee is to establish the facts of the case, seek to obtain all available evidence, both favourable and unfavourable to both parties involved, and prepare a report including recommendations as set out below.

The Committee is empowered to:

- i) Call meetings via in person, or via online platforms
- ii) Require the Complainant and/or Respondent and/or any other relevant party to make available documents for examination and/or copying.
- iii) Interview all persons who are likely to have information relevant to the complaint of the alleged infringement
- iv) Call witnesses to provide evidence in relation to the complaint of the alleged infringement
- v) Access necessary legal or other professional services with the agreement of the President in regard to the related costs which are to be met by the Association.

The Committee is required to:

- vi) Prepare a written and signed hard copy report which must contain the following:
 - a) a summary of the facts as established
 - b) details of the investigation undertaken and procedures followed, including particulars of individuals interviewed, documents examined and other relevant matters.
 - c) the sections of the Code of Ethics and Standards of Practice which have been considered.
 - d) the Committee's findings in regard to the alleged infringement
 - e) recommendations to the Council on action or sanctions to be imposed
- vii) The report is to be completed within 6 weeks from the date the Grievance Committee is established, unless there are extenuating circumstances, in which case the President may consider and approve an extension of time to complete the report.

5. The Hearing of the Complaint.

- i) The Complainant and the Respondent are to be notified in writing or via email that the Formal Grievance Procedure has commenced or is about to commence.

- ii) In the event the issue involves only the Complainant and the Respondent, the Grievance Committee shall immediately convene a hearing in terms of Section 6 below.
- iii) In the event the issue involves a third or more persons, the Complainant and Respondent should make available to the Grievance Committee a list of persons they would like the Committee to contact in order to gain information relevant to the complaint.
- iv) The Grievance Committee contacts the other person/s either by written correspondence, email or telephone.

In the case of personal and telephone interviews of the third party the Grievance Committee member/s involved are to prepare a written summary report

- v) The Grievance Committee is to convene a meeting to review the above data and activate the hearing procedure.

6. The Hearing Procedure

The hearing is to take the following form or a similar form as agreed between the Committee, the Complainant and the Respondent:

- i. A brief summary from the President and thereafter a final opportunity for resolution
- ii. An opening statement by the Complainant
- iii. Questions by the Committee to the Complainant
- iv. Opening statement by the Respondent
- v. Questions by the Committee to the Respondent
- vi. Complainant's rebuttal of the Respondent's statement
- vii. Respondent's rebuttal of the Complainant's statement
- viii. Complainant's witness/es,
- ix. Questions by the Committee and Respondent
- x. Respondent's witness/es,
- xi. Questions by the Committee and Complainant
- xii. Brief recess for the Committee to review progress
- xiii. Final questions to the Complainant by the Committee
- xiv. Final questions to the Respondent by the Committee
- xv. Final statement by the Complainant
- xvi. Final statement by the Respondent.

The Committee shall, as soon as practicable:

- i) Decide whether the complaint should be dismissed or upheld, and if upheld, a penalty should be applied (in terms of section 7 below)
- ii) Makes recommendations accordingly in its report to the Council, and
- iii) Include supporting information in its report, which forms the basis for its recommendations.

7. Penalties

- i) If the penalty does not affect membership and /or Registration, the Grievance Committee may recommend to Council that it:
 - a) Formally reprimand the Respondent in writing,
 - b) Impose conditions of practice,
 - c) Where appropriate, offer interventions which would enable the Respondent to develop more appropriate practice,
 - d) Any other course of action which is deemed appropriate e.g. an apology.
- ii) If the penalty does affect membership and/or Registration, the Grievance Committee may recommend to Council that:
 - a) Membership of the Association be suspended for a specific period of time
 - b) Membership of the Association be terminated and the member be precluded from eligibility for membership for a fixed term
 - c) The member be removed from any office held in the Association,
 - d) Registration be rescinded; and /or
 - e) Any other course of action deemed appropriate be taken

8 Consideration of the Grievance Committee report to Council

- i) The President of the Association is to convey the written recommendation/s of the Grievance Committee and the accompanying documentation to the Complainant, the Respondent, and any other person involved within 14 working days or receipt of the Committee's report
- ii) The Council is to take prompt action to consider the report from the Grievance Committee, and decide whether to accept any or all of its recommendations.
- iii) The decision of the Council is to be conveyed promptly to the Complainant, Respondent and any other person involved, in writing. It is also to be published on the website of the Association at the end of the period within which an appeal can be lodged (see Section 9 below) and provided no such appeal is lodged.

9. Request for an Appeal

- i) An appeal for re-consideration of the Council's decision in regard to the above resolution of a complaint may be made by either the Complainant or the Respondent, in writing.
- ii) Appeals may only be made on the grounds of:
 - a) improper procedure, including boundary violation,
 - b) the penalty imposed is considered inappropriate, or
 - c) new evidence.
- iii) A request for an appeal for reconsideration of a decision is to be submitted in writing to the President of the Association, within 28 days of the date of correspondence from the Association setting out the Council's decision as in 8 iii) above.

- iv) On receipt of a request for an appeal, the President is to appoint an Appeals Committee, which shall comprise:
 - a) A delegate of the president provided such person has not participated in the original Grievance Committee,
 - b) One Registered Guided Imagery and Music therapist who was not on the original Grievance Committee, and
 - c) A third member who may be a Registered Guided Imagery and Music therapist, or a professional person outside of the Association from a professional organisation of similar mission with experience in handling such situations, who was not on the original Grievance Committee.
 - d) Any further member/s that the President agrees to appoint in response to a request from the Committee, and
 - e) A lawyer if required.

10. Appeals Procedure

- i) The Appeals Committee is to decide whether an adequate case has been presented to justify the appeal against the previous decision.
- ii) If the Appeals Committee determines that there are insufficient grounds for reconsideration of the matter, the Appeals Committee advises the Council in writing of its decision and the reasons for such a decision.
- iii) In the case that the Appeals Committee decides that there are sufficient grounds for reconsideration, a hearing date for the Appeals Procedure is to be set within 28 days of notifying the parties involved. The Appeals Procedure is to be the same as the Formal Grievance Procedure as described in Sections 5 and 6 above. If the Appeals Committee considers at a preliminary stage that a new Grievance Procedure ought to occur, it may direct a new process. No person previously involved shall participate as a member of the committee.
- iv) The President is to convey the written recommendation/s of the Appeals Committee to the Complainant, the Respondent, and any other person/s involved within 7 days of receipt of the Appeals Committee's report.
- v) The Council is to consider the report from the Appeals Committee (from Section 10 ii) or Section 10 iii) above), and decide whether to accept any or all of its recommendations.
- vi) The decision of the Council shall be conveyed promptly to the Complainant, the Respondent and any other person involved, in writing. It is also published on the website of the Association.
- vii) The decision that is taken by the Council at the end of the Appeals Procedure is final, and binding on parties who are members of the Association.
- viii) Any evidence not admitted into the original process shall not be introduced into the appeals process with prior permission of the Appeals Committee.

Acknowledgements.

In preparing the By-Law on Grievance Procedures, the following document was consulted, and some material has been re-produced with permission:

- By Laws for Grievance Procedure, Australian Music Therapy Association (2019).

This version of the By Laws for Grievance Procedures of MIAA replaces all previous iterations, and comes into effect from October 12, 2020

BY-LAW ON APPLICATION FOR REGISTRATION AND LAPSED REGISTRATION (1999)

1. Preamble

The Music and Imagery Association of Australia Inc. (MIAA) is the professional body responsible for monitoring standards of training and practice in GIM. It is the responsibility of MIAA to ensure that those holding Registration as GIM therapists are clearly identifiable so that members of the public can distinguish between Registered and non-Registered practitioners. Graduates of advanced level training in GIM should apply promptly for Registration with MIAA. Registered GIM therapists are required to re-new membership annually and maintain Professional Indemnity and Liability insurance.

2. Guidelines

The following guidelines apply to situations where:

1. There has been a lapse of 24 months or more in a trainee applying for Registration post final training seminar, or
2. There has been a lapse of 12 months or more in a Registered GIM therapist renewing Registration.

The guidelines cover requirements for re-education to ensure that the person applying for Registration (beyond 24 months of completing study) or the person re-applying for Registration having allowed 12 months or more to lapse in renewing Registration, is currently at a standard acceptable to MIAA.

3. Requirements

- i) 24-35 months lapse for trainees applying for Registration with MIAA beyond completing study, or 12-23 months lapse in renewal of registration:
 - a) Two (2) on-site or recorded client sessions, supervised by a Registered GIM therapist
 - b) Documentation of 10 client sessions conducted since the end of advanced level training seminars.
 - c) Vive voce appraisal of 10 client sessions completed since end of advanced level training, using the transcript of the session. Skills to be appraised:
 - aims for the client's GIM work
 - choice of music for the session
 - understanding of the imagery process and symbolism, as evidenced in discussion with the appraisers
 - understanding of the therapeutic process, as evidenced in discussion with the appraisers.
 - d) Two personal sessions

- ii) 36-47 months lapse for trainees applying for Registration with MIAA beyond completion of study, or 24-35 months lapse in renewal of registration:
 - a) Four on-site client sessions supervised by a Registered GIM therapist
 - b) Documentation of 20 client sessions conducted since the end of advanced level training.
 - c) Vive voce appraisal of 20 client sessions completed since end of advanced level training, using the transcript of the session. Skills to be appraised:
 - aims for the client's GIM work
 - choice of music for the session
 - understanding of the imagery process and symbolism, as evidenced in discussion with the appraisers
 - understanding of therapeutic process, as evidenced in discussion with the appraisers
 - d) Four personal sessions
- iii) Beyond 48 months
 - a) Six on-site client sessions supervised by a Registered GIM therapist
 - b) Documentation of 30 client sessions conducted since the end of advanced level training.
 - c) Vive voce appraisal of 30 client sessions completed since end of advanced level training, using the transcript of the session. Skills to be appraised:
 - e) aims for the client's GIM work
 - f) choice of music for the session
 - g) understanding of the imagery process and symbolism, as evidenced in discussion with the appraisers
 - h) understanding of therapeutic process, as evidenced in discussion with the appraisers
 - d) A series of six GIM personal sessions with a Registered GIM therapist.

4. The Appraisers

The Chairperson of the Professional Practices Committee will appoint two appraisers to be responsible for assessing the applicant. The appraisers must be Registered GIM therapists. The appraisers will assess the applicant's work on a pass-fail basis, providing written notes regarding their observations and their recommendations.