### 1. Introduction

This SCENAR Constitution, with its Code of Ethics and Standards, came into being as a result of SCENAR devices being introduced into Ireland without their owners or operators having access to adequate standards or procedures other than the basic as provided by SCENAR/SKENAR/Kosmed schools who provide a certificate of proficiency to be a professional Practitioner after only a short period of formal training.

This standard cannot be in the interest of the general public or be up to the expectations of the Department of Health and Children Statutory Registration of Complementary and alternative organisations, so we have formed the SCENAR Practitioners Society of Ireland to create a proper adequate level of training for SCENAR Practitioners and Teachers, which will be upgraded as required, to ensure that SCENAR Practitioners be well trained and better able to successfully treat clients.

The address of SPSI shall where possible be c/o an officer of SPSI. Otherwise it shall be as agreed from time to time by the SPSI Committee. At the inception of the Society the address is:

SCENAR Practitioners Society of Ireland C/O The Holistic Health Care Centre Killinga, Leap, Co. Cork, Ireland

# **Constitution.**

### 2. The Society, name, definition and benefits of membership.

2.1. The name of the Society shall be the 'SCENAR Practitioners Society of Ireland', referred to as the Society, or SPSI. It was established on 7/7/2000.

2.2. The Society shall be a non-profit making professional and educational "umbrella" body set up to establish adequate personal standards of practice and to enforce these standards among its membership and capable of incorporating members, Practitioners and Teachers from various schools and styles of SCENAR, including those from medical and complimentary healthcare backgrounds.

2.3. SCENAR: sometimes spelled 'Skenar', also called Kosmed. S.C.E.N.A.R. stands for: Self-controlled Energo Neuro Adaptive Regulation.

SCENAR is a medical device created, among other experts, by various medical scientists. It is defined under the following headings: "SCENAR devices-a summary", "effect of SCENAR therapy", "the SCENAR" and "SCENAR Therapy, what is it?" overleaf, and also by training courses in 1999 and 2000 and which are filed for reference by the S.P.S.I.

### 2.1.i. SCENAR DEVICES- A SUMMARY

The basic mode of operation of a typical SCENAR device is to deliver a 'dosage' of electric stimulation impulses to the body via in-built and/or remote electrodes in direct contact with the skin surface. These impulses have been 'tailored' to mimic the electrical discharges of the nervous system, in order to elicit the organism's response with optimum efficiency and minimum disruption to cell function, depending upon the unique requirements of the presenting pain dis-ease dynamics (or lack of same). The action is aimed at both the 'fast' pain-blocking A fibres and the 'slow' pain-producing and peptide-generating C fibres.

The signal stream, comprising waveform, signal strength (voltage and current) and frequency, can be varied in a number of ways, either by pre-selection by the operator, or automatically by the control circuitry of the device. The 'dosage' can be delivered automatically, or overridden at the discretion of the operator, with guidance from visual indicators - which may be either numeric or colour-coded LED display, or both.

The basic signal component is a bipolar pulse, consisting of a negative square-wave followed by a positive saw-tooth, starting and finishing at zero, and lasting for a few microseconds. A number of these pulses may be packaged into a discrete burst (Intensity) which itself may be repeated at a fixed default frequency (DF). The individual pulses in these bursts (Intensity more than 1) can themselves be spaced out (Z=10 - close, to 80 - wide) to give a concentrated (deep) or diffuse (shallow) penetration, depending on local body density or depth of pain location.

Alternatively, a single pulse (Intensity=1) may be pre-selected to a pulse repeat rate (PRP) over a set frequency range (say F=15-351 Hz). The signal may also be modulated (Mod=1,2,3,4,5:1) either by altering the ratio of 'time-on' to 'time-off', or by changing the pulse waveform by selecting one of a series of set damping factors (Dmpf=Sk 1,2,3,4,5). These 'modulations' can either be applied individually or together.

There is also the possibility of automatically cycling both the pulse repeat rate (PRP) over a set frequency range (FM - say from 30 - 180 Hz over 8 seconds), and the waveform damping factor (DMPF-Var). These cyclical modes can again be invoked either individually or together.

The purpose of all these variants is to make available to the operator a comprehensive arsenal with which to simulate both acute and chronic conditions and prevent the body from adapting to the signal before there has been time to generate sufficient neuropeptides (endophins etc) to relieve pain and create an enhanced environment for the organism to bring into play its own healing pharmacy to move towards homeostasis.

The power output can be set by the operator to be detectable but comfortable for the patient. It can also be adjusted during application should this be required. The maximum current output is 70 mA and the peak voltage is 180v, derived from an internal battery (rechargeable externally, or 'of-the-shelf'. A further level of chaos is introduced by random variation of the pulse amplitude from zero to the chosen comfort limit such that no two consecutive pulses are the same. This discourages adaptation in the organism. A feedback mechanism is provided by the constant monitoring of skin impedance, which will change with time and 'dosage' delivered. Integration of these values permits calculation and display of rate-of-change (of current flow) and coefficient of waveform in relation to the starting point.

SCENAR devices adhere to the concept that the minimum dosage required to effect change is the most appropriate. This is furthered by emphasis on increase of information rather than energy content, thus minimising the triggering of the body retaliation and adaptation mechanisms.

2.1.ii. EFFECTS OF SCENAR THERAPY Pain-killing effect Lasts for four hours.

### Mechanisms:

- The effect of parabiosis in the nervous endings of the peripheral nervous fibres that block the transmission of pain impulses.

- New dominant focus in the cortex of the brain, which suppresses the pain focus.
- Electrical current considerably reduces the oedema around the nerve fibres.

### Anti-inflammatory effect.

With inflammation there is an inflammatory focus, which is surrounded by a leukocyte cuff in order to prevent the inflammation from spreading to the surrounding tissues. Eventually this cuff will be in the way of reorganisation and recovery, as new leukocyte cells cannot reach the focus of inflammation. The action of the SCENAR reduces the cuff and allows recovery to be completed.

Anti-oedema. Reduces swelling.

Styptic effect as a result of collateral blood supply and reduction of pressure from main vessel.

Anti-shock effect, Anti-allergic effect local or general reaction can be observed with food allergy, rash, bites, rhinitis, and broncho-spasm.

Hyperaemia effect Reinforced blood flow (hyperaemia) 30-60 minutes after the end of the procedure. Vaso-dilators increase the lumen of micro-circulation blood vessels and blood flow to the place of treatment will be increased. Especially observed with coronary spasm.

Antipyrexic effect (fever reduction) Obtained by the treatment of main vessels.

Metabolic processes normalisation:

Increased solute levels in blood. Stimulated active consumption of oxygen and nutrients increases the level of metabolism, increases venous flow and removal of the products of metabolism. Lymphatic flow will increase as well. Normalisation of cell, tissue and system function.

Normalisation of the immune system. Due to SCENAR input, neuropeptides are produces, which degenerate down a cascade to create new bio-active compounds. These will correct and balance the relation between biochemical and functional systems in secondary tissues and cells.

Normalisation of the hormone balance. In connection with production of neuropeptides.

## 2.3.iii The SCENAR

#Background When the Soviet Union sent cosmonauts into space, they developed a way of maintaining the good health of their space travellers! This was achieved without the use of pharmaceuticals. They could not allow pharmaceuticals to enter the water supply in an environment where recycling of water supplies is essential. There were space and weight restrictions so they developed Self-Controlled Energo Neuro Adaptive Regulation: S.C.E.N.A.R.

The 'Startrek' device. The 'SCENAR' is hand held - the size of a T.V remote control. Developed by a team of top Russian scientist and doctors based at Sochi University, they were tasked to find a way of coping with any illness in the lightest, smallest and most energy efficient way. Two of this team received the order of Lenin (equivalent to a Nobel Prize). Head scientist Professor Revenko claimed that there were very few illnesses SCENAR could not treat and often cure!

How it works. There is data for well over 50,000 successful treatments and there are more than 3,200 SCENAR Practitioners worldwide. Safety certification has been granted in Russia and in Europe. Using a 9 volt battery, the SCENAR stimulates the body's pharmacy with harmless electrical impulses via skin nerves. The brain mediates a bio-energy feedback by altering output every few milliseconds. No two successive impulses are the same! A natural and dynamic dialogue occurs between brain and body! The process activates releases of biological activators such as neuropeptides, 5HT and other mind body stimulators. Biofeedback elements introduce the scope for remarkably rapid healing, as body integration (homeostasis) is restored by changing fixed resonances and repetitive central nervous system patterns.

Results. A wide variety of trained Practitioners have accumulated considerable experience and this shows the ability of SCENAR to generate healing in hitherto incurable illnesses, as well as common maladies of the mind, body and spirit. Training in the technology and methods are readily available, together with user friendly manuals and support systems.

2.3.iv. SCENAR Therapy

### What is it?

The SCENAR (Self-Controlled Energo Neuro Adaptive Regulator) pioneering device was invented by Russian scientists for using in the Space Programme by cosmonauts. Scenar therapy is a holistic form of treatment, which stimulates the nervous system and teaches it to heal itself. Electrical impulses, the parameters of which are similar to endogenous nerve impulses, are transmitted through the skin to the nervous system. Fast-reacting informational biofeedback means that each impulse is different from the previous one.

Scenar action influences the adaptive processes of the organism and helps to harmonize them. In response to Scenar impulses the Nervous System releases neuropeptides, which are released into the blood stream and are broken down into many compounds, which are themselves, bioactive. As a result, homeostasis is gradually and gently restored.

### What does it feel like?

As the device is moved over the surface of the skin a comfortable tingling sensation is felt. In cases of severe pain or acute conditions the sensation may be stronger.

### How Scenar works on a disease?

Patients having Scenar treatment need to take responsibility for their health and are advised to participate actively in the treatment and recovery process. The chemical compounds, released by the nerves, affect not only the problem areas, but also circulate in the blood treating other areas of the body. This goes some way to explaining how old and often forgotten problems are brought to the surface for treatment.

### What conditions can Scenar treat?

In the UK, the devices are licensed by British standards Institute for pain relief only. However, because of the nature of the device, viz., stimulating the nervous system, the Russian experience is that Scenar affects all the body systems.

The Russian experience suggest that it can be effective for a very broad range of diseases, including diseases of the digestive, cardio-vascular, respiratory, musculo-skeletal, urinary, reproductive and nervous systems.

It is also useful for the managing ENT diseases, eye diseases, skin conditions and dental problems. It has also been found beneficial in burns, fractures, insect bites, allergic reactions, diseases of the blood and disorders involving immune mechanisms; endocrine, nutritional and metabolic disorders; stress and mental depression, etc.

It is known to give real relief from many types of pain.

In order to create a continuous flow of circulating regulative peptides Scenar action must be given quite often. For any fresh injury or any acute inflammatory process treatment needs to be intensive, ideally once or even twice daily. For chronic conditions, treatments are ideally given three or four times a week initially. As things improve the frequency can be reduced.

A course of treatments will vary from individual to individual, and takes into account such factors as the stage of the pathological process, the persons age, state of health, and so on.

### Is it safe?

As the Scenar impulse is similar to endogenous nerve impulses, it is non-damaging and safe. Only people with cardiac pacemakers are not allowed to have Scenar treatment.

Children and pregnant women can be treated, and even animals enjoy it!

### What about my conventional treatment?

If you are receiving treatment from your doctor it makes sense to inform him about Scenar therapy. Treatment with Scenar may enable you to reduce or even stop taking some medication, and this can be done under the supervision of your doctor.

### What else do I need to know?

During the treatment of chronic conditions, occasionally a healing crisis may occur (experienced as a complete lack of energy and malaise). This arises if the body is getting rid of toxic energy too rapidly. There are techniques that can be used with the Scenar to manage this.

For the best result it is advisable not to bath or shower for two hours before and after treatment. It may be advisable to shave an area of skin to ensure good communication between the device and the nervous system. Patients generally experience an increase in energy, more refreshing sleep and an improved sense of wellbeing.[1][1]

### 2.3.v. Case studies

The case of Scenar therapy, as a Technology in modern medicine by Dr. A. Revenko (Chairperson, SCENAR Therapy Medical Centre, Leninstreet 89.4, Ekaterinburg 620075, RUSSIA, who is a neurologist and one of the creators and developers of Scenar and head of the Russian School of Scenar which has about 200 schools affiliated to it.)

## What is it - SCENAR Therapy?

SCENAR-THERAPY IS A MEDICAL TECHNOLOGY - combinations of the modes and methods for gaining united final result (product) of the interaction between human organism (patient) and a device which creates the system: organism - device. This interaction is directed on the activation of human resources of the organism, which are capable of adaptation and formation of the system at the various functional and organic manifestations of diseases.

SCENAR is an abbreviation of the mode of action on the human organism. The name of the device is self-controlled energo-neuro-adaptive regulation (self-controlling energo-neuro-adaptive regulator)/

### What Scenar treats effectively?

SCENAR - GP and emergency service in your pocket. Scenar practitioners and medical doctors are able to give qualified and specialized help to patients in practically any situations: to bring out from shock, to restore cardiac activity, to take away swellings, intoxication, to get quick anaesthesia etc.

### SCENAR application is indicated at any stage in treatment of the following diseases:

- Nervous system (various diseases of the vertebral column with secondary disorders of the nervous activity, static and dynamic's disorders of the vertebral column, deformation of the spinal column, radiculitis, neuritis, strokes and their consequences, diseases of the vegetative nervous system etc.);
- Skeletal-muscular system (myositis ,arthritis, arthrosis, bruising of the soft tissue, at the fractures at the different stages of the process);
- Respiratory system (tracheitis, bronchitis, viral infection, pneumonia, pleurisy, bronchial asthma);
- Cardio-vascular system (angina, hypertonia, hypotonia, various form of arrhythmia), vessels of the extremities (endarteriitis, varicose veins, disturbance of micro-circulation, trophic ulcers);
- Digestive system (gastritis, enteritis, colitis, cholecystitis, hepatitis);
- Genito-urinary system (pyeloneophritis, cystitis, disturbance of the cycle, adnexitis, infertility, toxicosis in pregnancy);
- Tooth and mouth cavity diseases (periodontosis, periodontitis, arresting of inflammation and complication after the treatment of pulpitis and periodontitis, arresting pain syndrome);
- Other pathological conditions and their combinations.

## The effects of Scenar action (Scenar-therapy)

- considerable improvement of the general state with increase in adaptive ability of the organism;
- bringing back to normal of the disturbed functions;
- speeding up and slowing down the manifestations of pathological processes;
- pain-killing;
- anti-inflammatory
- anti-allergic
- anti-swelling;
- normalisation of the vascular and blood functions;
- endocrine-immunity respond of the organism;
- normalization of the metabolic processes.

The effects are traced and confirmed by additional methods of the investigation (ECG, REG, EEG, x-ray, CT, U-Sound irido-diagnostic, bio-chemical investigations, electro-information investigation, computer acupuncture diagnostic - Nakatani, Voll, auricle-diagnostic).

## Who are the users of SCENAR Device?

Today the users of the SCENAR in Russia are medical doctors and medical personnel of more than 30 specialities, including neurology, therapeutics, surgery of different specialization, traumatology, gynaecology, obstetrics, oto-rhino-laryngology, odontology, sport medicine, physiotherapy, resuscitation and others. A special version of the device was designed to be used by housewives, engineers, office clerks, and other specialists without medical background, also on ferries, on liners, in aeroplanes, in cars, etc.

## Historical reference

SCENAR-therapy as a technology was born in Taganrog nearly 20 years ago. Originally the device was aimed to be used in the "Space research Programme", but project was stopped at "perestroika time". The employers - medical doctors and engineers of TOO OKB "Rhythm" and TOO "Bio-correction" were at the origin of this direction.

In 1986 the first SCENAR device, having passed technical and clinical trails, was permitted by USSR Medical Council for application in the clinic-policlinic institutions and at homes.

For the control of the conducted therapy, findings of the optimal skin zones and individualisation of the action regimes, for the expertise and prognosis can be used reflexogenic-diagnostic set "Rista-EPD" (acupuncture diagnostics Nakanati, Folly, auricle diagnostic), computerised polygraphy (ECG, EEG and others).

At the present time TOO OKB "Rhythm" produces series of the devices "SCENAR-035", "SCENAR 97", "SCENAR 97.4" and according to license 30-03/1007 from 27 December 1996, supplement No1, No2, TU 9444-010-05010925-97, TU9444-010-24225399-93) there are certificates of standard.

The device is protected with patent in Russia, USA and Japan for "the means for influence", for receiving biologically active impulses and for the device which realise them (the patent owner TOO OKB "Rhythm")

The SCENAR device is capable of recognising, preventing many health problems and restoring health.

"SCENAR" is a trademark (according to class - therapeutic device and apparatus, electro-stimulators), registered in the state list of trademarks in USSR from 23 October 1989.

TOO "BIOCORRECTION" and TOO OKB "RHYTHM" closely co-operates with different medical institutions (department of "Non-drug methods of treatment and clinical physiology" in the I.M. Sechenev MMA - cor. member of AMS, Doctor of the Medical Science V.G. Zilov; laboratory for "Bioenergy and Reflexotherapy" CITO-Doctor of the medical Science U.F. Kamenev; laboratory for "Biophysics of Cancer" in the Rostov Oncologic Institution - Doctor of Medical Science L.H. Garkavi, E.B. Kvakina and other departments of the institution in Moscow, Saint-Petersburg, Ekaterinburg, Odessa), also with the Committee of the New medical technology Medical Factory Russian Federation (chairman - Doctor of the Medical Science, Prof. T.I. Nosikova).

Four international conferences and 10 inter-regional seminars were held (Odessa, Ekaterinburg, S-Petersburg, N-Novgorod, and Rostov-na-Donu) on SCENAR therapy and SCENAR-expertise.

Together with the Committee for New Medical Technology and the department for "Non-drug Methods of Treatment" were issued 4 complications of "SCENAR"-therapy, SCENAR-expertise (the editors are: T.I. Nosikova, V.G. Zilov, L.M. Kudaeva), where questions of therapy and practise of SCENAR-therapy were reflected.

From 1992 in the different regions of Russia and abroad 117 School-seminars on SCENAR were conducted.

For these years more then two thousands users were trained. Among trainees - managers of medical institutions (Head of the hospitals and Policlinics, Chiefs of the departments, etc.) medical doctors, nurses (including resuscitation doctors, surgeons, oncologists, physiotherapists, paediatricians), scientists (candidates or doctors of science). [2][2]

## 2.4. Benefits of membership.

- a) The SPSI has a policy of giving reduced rates to its membership who attend SPSI training courses and events.
- b) The SPSI shall be support network for its membership.
- c) The SPSI shall encourage access to its more experienced teachers and practitioners.
- d) The SPSI will endeavour to provide a membership newsletter and www site.
- e) The SPSI will endeavour to share its research and development findings with its membership.

f) The SPSI, as a group, shall set out to have better purchasing, faster repairs of equipment and access to information direct from the research facilities in Russia.

g) The SPSI will endeavour to protect its membership by insisting on high standards of training and adherence to its Code of Ethics and Standards and by actively intervening on behalf of any accused RSPSI to ensure that fair play and justice are achieved.

h) The SPSI will endeavour to help and encourage newly accredited Practitioners on how to set up in practice.

i) The SPSI will endeavour to build up a library of relevant SCENAR information for the benefit of the membership.

j) RSPSI is the Irish National Qualification, registered with the Department of Health and Children. This annual recognition is not a right and will only be given to properly trained applicants who have the appropriate certificates of graduation and meet all the requirements of SPSI.

### 3. The Aims

The aims of the Society are:

3.1. To promote the professional practice of SCENAR in medical and complementary healthcare.

3.2. To organise and facilitate educational courses and events in SCENAR both pre-graduation and post-graduation.

3.3. To provide and distribute information on SCENAR and to act within the National and International SCENAR community.

3.4. To establish ethical and professional standards for practice of SCENAR for the benefit of the general public, members and registered Practitioners (RSPSI) and to regularly update these standards.

3.5. To represent the interest of SCENAR Practitioners to outside bodies and the general public.

3.6. To maintain a register of qualified Practitioners, Teachers and Consultants who have passed the SPSI Accreditation for Practitioners (RSPSI), for assistant teachers(RSPSI-at), for Teachers (RSPSI-T) and for Consultants (RSPSI-C).

### 4. Membership

4.1. Individuals shall become members of the Society directly by completing the arrangements for membership approved by the Society and by paying an annual membership fee to the Society. Membership shall be of one-year duration or part thereof. Categories and/or conditions of membership may be revised from time to time. At the inception of the Society there are five categories of membership, "member", "Registered, SCENAR Practitioners Society of Ireland" (RSPSI), "Registered, SCENAR Practitioners Society of Ireland-assistant Teacher" (RSPSI-at), "Registered, SCENAR Practitioners Society of Ireland-Teacher" (RSPSI-T) and "Registered, SCENAR Practitioners Society of Ireland-Consultant" (RSPSI-C). 4.2. Registered SCENAR Practitioners (RSPSI) shall abide by the code of ethics and standards and shall have the right to vote. The "Scenar Therapist" Certificate on it's own, without SPSI accreditation, is not an acceptable standard to the SPSI, nor is "Scenar Expert" or "Scenar Consultant".

4.3. Assistant teacher (RSPSI-at), Teachers (RSPSI-T) and Consultants (RSPSI-C) are RSPSI who have additional qualifications as defined by this Constitution and the "Standards" and assessments sub-committee. Members will be those interested in SCENAR, but not qualified for registered Practitioners' membership. Members do not have voting rights and must not use any designation, which implies Practitioner or qualified status. This category includes students and graduates from SCENAR schools or training facilities who have not yet been accredited by SPSI. Also Practitioners from other Scenar organisations, who have not been accredited by the SPSI.

4.4. Membership fees shall be determined from time to time at the AGM and in accordance with the constitution.

4.5. Acceptance or rejection of an application for membership of an individual is entirely at the discretion of the Society, which need not give the reason for its decision. In the event of rejection the membership fee will be refunded as soon as possible.

4.6. The Society may confer "honorary membership" and nominate patrons and sponsors. The Full committee (Committee and "Standards" and Assessments Sub-Committee) may use its initiative to confer "honorary membership" and/or nominate patrons and sponsors, but only until the AGM.

4.7. Only paid up members are eligible for election to the Committee, the Standards and Accreditation sub-Committee and to vote at AGM, EGM or meetings of the Society.

4.8. Conditional membership: When membership has lapsed for longer than 2 years registration shall not be renewed for Practitioners, assistant Teachers, Teachers or Consultants without application to and acceptance by the "Standards" sub-committee. Registration is an annual award from the SPSI and not an automatic right.

4.9. Lapsed Practitioners automatically, and immediately, lose the right to use the Accreditation/designation RSPSI, RSPSI-T and RSPSI-C, as membership is conditional on payment of membership fee and adequate insurance cover as well as other criteria, which are at the discretion of the Standards and Assessments Sub-Committee, which may be called "Standards".

## 5. Organisation and administration

5.1. Committee members and officers of the Society shall be elected at an AGM and shall hold office until the next AGM. The Committee shall be composed of the Chairperson, Secretary, Treasurer and such other members as may be deemed appropriate. The Co-Ordinator of the Standard and Assessments sub-Committee should attend Committee meetings. In his/her absence at least one "Standards" member should attend all Committee meetings. The attending "Standards" Co-Ordinator (or nominee) shall be a Committee officer. All "Standards" members shall be accepted as Committee members for issues involving "Standards" Education, Conduct and Ethics.

5.2. The Committee and "Standards" Sub-committee together shall be called the FULL committee. A person on both committee and "Standards" shall have only one vote.

5.3. The Chairperson shall promote full contact between the Society and organisations representing and/ or interested in SCENAR, shall take the chair at all meetings of the Society.

5.4. The Secretary shall be responsible for the general administration of the Society, shall maintain contact with, and shall communicate the decisions of Annual General Meetings, Extraordinary General meetings and council meetings, to the membership and shall be responsible for dissemination of accurate information about the Society and its activities to the public, shall assist the Chairperson in representing the Society to, or on, outside bodies, shall normally take the chair at meetings in the Chairperson's absence. Before each AGM the Secretary shall collect and file Committee and "Standards" minutes and any other items for filing. The Secretary shall ensure that at all times an up to date Constitution with Code of Ethics and Standards is available in one file with minutes of contentious decisions made at AGM, at Committee meetings or at "Standards" meetings. All shall be dated and signed as valid.

5.5. The Treasurer shall maintain the books of accounts in good order, and be able to give an account of the financial state of the Society to the Committee and of its' income and expenditure each year to the Society at the AGM. The treasurer shall arrange the annual audit of the books of account when required to do so by the Committee or by a General Meeting of members and shall be responsible for making payments in respect of gratuities, fees and other expenditure arising from the activities of the Society.

5.5.i. Practitioners and members subscriptions, gifts, grants and bequests shall form the basis of the Society's funds. Additional income from sources compatible with the ethics and principles of the Society may be organised by the Committee from time to time.

5.5.ii. The membership fee for RSPSI shall be initiated at a level being the value of 4x1 hour SCENAR treatments at the average recommended fee, as decided by the Committee. If this amount is insufficient, then a surcharge may be agreed at the AGM. Membership fee for members shall be 50% of RSPSI fee.

5.5.iii. Expenses. Most work done on behalf of the Society shall be volunteered and no payment shall be made, but at the discretion of the Full Committee, payment may be made for work, which has been contracted rather than volunteered. Expenses shall, finances permitting, be paid for attendance at Committee and "Standards" meetings at the discretion of the Treasurer and the Co-Ordinator of "Standards".

5.5.iv. Any Practitioner or member may request an examination of the accounts, giving reasonable notice.

5.5.v. The Committee shall be responsible for payment of all expenses and accounts appropriate to the proper running of the Society.

5.5.vi. The Society shall have a bank account into which all monies shall be lodged. Cheques shall be signed by the Treasurer and an appointed Committee member, or in the treasurer's absence by an appointed Committee Officer.

5.5.vii. RSPSI or members leaving the Society shall have no claims on its funds.

5.6. The "Standards" sub-committee Co-Ordinator shall communicate and liaise between the Committee and the "Standards" Sub-Committee.

5.6.i. All Committee officers must be Registered Practitioners of the Society (RSPSI), i.e. Chairperson, Secretary, Treasurer, "Standard" Co-Ordinator. The other committee members shall assist and/or deputise for the officers as arranged by the Committee and carry out such other functions as is agreed by the Committee and by AGM.

a) The Committee may invite observers to attend any meeting, at its discretion. Observers may speak, but shall not vote.

b) The Committee shall normally be chaired by the Chairperson, if absent the Secretary, if absent the "Standards" Coordinator. In their absence, the Committee shall elect one of their members to take the Chair, but in this instance no policy changes may be made.

c) The Committee shall cause minutes to be kept of its meeting. At each meeting, the minutes of the previous meeting shall be signed by the Chairperson, or acting Chairperson, as a correct record of what was discussed thereat, and corrected if necessary. The agenda shall be circulated in advance of each meeting. The minutes of the previous meeting may also be circulated if required. The minutes must be kept in file for 10 years.

d) Committee service shall be voluntary.

e) All Committee members with the exception of the "Standards" members shall serve for one year with a maximum of 5 continuous years of duty in any position. All outgoing members shall be eligible for re-election. "Standards" members shall serve for 3 years and be eligible for re-election.

f) Election of Committee members shall be by consensus or failing consensus be by majority vote of the RSPSI at the AGM.

5.7. The Committee shall seek the advice of the Standards and Assessments Sub-Committee on any technical matter it may deem necessary especially in relation to Education, Training, Standards, and ethics.

5.8. Proxy and Postal votes. In all Society matters where a vote is necessary, an RSPSI unable to attend in person may submit a postal vote, if such has been arranged, or vote by proxy. In these cases written consent must be given by the RSPSI whose vote is being used, naming the RSPSI who may use the vote on his/her behalf. The written consent note must show the meeting date and may or may not indicate how the vote is to be used or whether the vote is for a single named issue or every voting issue.

5.9. In the event of it being impractical to hold a meeting of the full voting membership, the Committee shall organise a postal ballot of all the registered Practitioners (RSPSI).

5.10. Any Full Committee member may be removed by a 2/3 vote of the Full Committee and, if appropriate, a replacement be co-opted by a 2/3 vote. This would be an interim arrangement until next AGM (or special EGM). The removal would only be undertaken in serious circumstances and be for the protection of the Society and its membership and of the general public.

5.11. Voting: In all proceedings of the Society, decisions, policies and resolutions shall be framed by reference to the consensus, if any arrived at among the participants. Only where no consensus emerges, AND where a decision is necessary on a matter of importance, shall a vote be taken. Where a vote is taken the Chairperson or member acting as Chairperson shall have a second or casting vote in event of a tie. Only RSPSI have a vote.

5.12. Constitutional changes shall only be made after the issues involved have been discussed appropriately by the membership (after they have been properly informed). The Committee shall then arrange for a postal Ballot of all those entitled to vote and using proper procedures. 6 weeks written notice of the proposed changes must be provided to the membership before the meeting at which the proposed changes are to be discussed. If the proposal is carried then the postal ballot shall be arranged by the committee.

## 6. General Meetings

6.1. The Society shall hold a General Meeting in every calendar year as its ANNUAL GENERAL MEETING, normally on the last week-end of April at such time and place as may be determined by the Committee, provided that every ANNUAL GENERAL MEETING shall be held not more than 15 months after the holding of the last preceding ANNUAL GENERAL MEETING. Notice in writing of 1 months shall be given to the membership which must be specified as such on the notices. Notice of proposals etc. for the AGM should be given in writing to the Secretary for circulation to the membership not later than 6 weeks before the meeting is to take place.

6.2. Minutes shall be taken at all general and Committee meetings and kept by the Secretary for 12 years.

6.3. The chair at the Annual General Meeting shall be taken by the Chairperson of the Society, or in his/her absence, by the Secretary.

6.4. The agenda of the Annual General Meeting shall be as follows; and preferably in this order:

- I. Chairperson's remarks and report.
- II. Minutes of previous AGM Read and amend if necessary.

III.Reports of Officers: -

I. Secretary

- II. Standards Co-Ordinator
- III. Treasurer
- IV. Questions of officers.
- V. Election of officers to the Committee.
- VI. Election of Non officers to the Committee

VII. Election of "Standards" Sub-Committee and Co-Ordinator when necessary or to elect replacement "Standards" members when necessary. The Co-Ordinator should usually be the most senior and/or experienced RSPSI-T available for service.

VIII. Substantive Motions.

IX. Any other business.

6.1. The membership present at the AGM, which must include 2 of the 3 officers of the Committee and the Co-Ordinator of the "Standard" Sub-Committee, shall be deemed to be a quorum and shall be thereby empowered to transact the business of the Society.

6.2. The Committee shall call an Extraordinary General Meeting whenever it deems necessary or on receipt of a requisition signed by at least one fifth  $(^{1}/_{5})$  of the membership of the Society, by giving 21 days notice of the said meeting, specifying the time, venue and nature of the business to be transacted, to all the membership

6.3. No business shall be transacted at an Extraordinary General Meeting other than that for which the said meeting has been called.

6.4. Standing orders for the conduct of all meetings of the Society may be drawn up by the Committee. On ratification by a two-thirds majority of the Committee; they shall be set out as "Society Standing Orders". They may be suspended or altered only on resolution of a similar majority. These may include, but are not limited to:

I. Procedures for conducting committee meetings.

II. Procedures for designating and recording expenses.

III. Procedures for conducting postal ballots.

IV. Procedures for counting proxy votes.

V. Procedures for getting regular feedback from the membership.

VI. Procedures for organising training courses or other events.

VII. Procedures for delegating and/or for sharing workload.

VIII. Procedures for dealing with complaints against a member.

6.5. The Committee may convene assemblies of the membership whenever it deems necessary for the purpose of communicating with and to allow for the free exchange of views and information among the membership. No votes shall be taken and no decision made at such meetings, which shall be for discussion only.

## 7. Non-liability of SPSI Officials, clarity and openness in decision making.

7.1. Neither the Full committee nor any officer or official of the Society shall be personally liable, jointly or severally, for any claim arising out of or incurred during the exercise of, and within the scope of his/her person, duties and responsibilities as an officer, committee member or official.

7.2.i. All membership is entitled to see copies of the Constitution, standing orders, assessment syllabus, detailed accounts, bye-laws and documents referred to herein, subject to reasonable notice being given.

7.2.ii. All business of the SPSI shall be undertaken in a spirit of openness, clarity and transparency with the interest of the membership and the general public taking precedence over the interests of the officials.

## 8. Dissolution

8.1. The Society may be dissolved by a two-thirds majority vote of the membership at a meeting called expressly for the purpose of passing such a resolution. Two months' notice shall be given of any such meeting to the total membership.

In the event of dissolution any funds remaining shall be donated to a charitable institution agreed on by a simple majority of the membership present at a meeting to dissolve the Society. See remainder of constitution with code of Ethics and Standards under "Code of Ethics".

[1][1] 2.3.i, ii, iii, iv above are taken from Life energies International SCENAR Training and Publicity Literature. [1][2] 2.3.iv above are taken from SCENAR Training Centre Internet Literature