



Professional Code of Ethics, Standards and National Code of Conduct

Version 2.0



AUSTRALIAN KINESIOLOGY ASSOCIATION INC.

Administration Office: PO Box 233, Kerrimuir VIC 3129 Australia

Ph: 03 9898 7406 Email: enquiries@aka.asn.au

 Australian Kinesiology Association

ABN: 31 074 034 709

www.aka.asn.au

AKA Standard Review and Evaluation Controls

A Document Revision & Version Control Record holds details of all edits to the document. Revisions are made to reflect new or updated business requirements, methods or legislation and/or improved quality practices. The Revision Record indicates all revisions (edits) to the latest version of the document. General formatting and styling is not considered a part of revision.

The following “Conditions of Use” apply to the Document Revision & Version Control Record:

Revisions are made by replacing applicable page/s

Each revised page is identified by a revision number and the date of revision

After 5 revisions to any version, or where a revision includes a major portion of the document (more than 20%), the document is to be re-issued with a new version number. Version 1 and all subsequent versions and revisions must remain part of this document.

Each new version cancels and replaces all previous versions and revisions.

Version		Version Date		Document writers		AKAMC Ratification date	
1.0		June 2020		AKA MC			
Revision No.	Revision Date	Revision Version	Relevant Rule	Revision Description	Revised By:	AKAMC Ratification Date	
1.7	2015	1.7					
2.0	2020	2.0	Complete Overhaul		Sophia Williams-Martin Jenne Burns Alice Bullivant		

Opening Comment

This Code of Ethics, Professional Standards and National Code of Conduct (Code) is a statement about the appropriate and expected conduct of all members of the Australian Kinesiology Association Inc. (AKA) and reflects the values of the association.

The Code is a platform of ethical standards, professional care and behaviour to be reflected in AKA members. It describes the professional conduct expected from members to preserve and enhance our professional reputation, as well as the general kinesiology industry in Australia with regard best practice models and requirements. The Code governs the relationships between the association, its members, clients, other professionals, the public, trainers, and students.

The Code has been developed and updated to inform and guide the decisions and behaviours of our members based on best industry practice. AKA members must comply with the Code (noting that failure to do so may result in disciplinary action against a member) acknowledging the values and principles intended to enhance the reputation of kinesiology.

AKA Code of Conduct review team

Sophia Williams-Martin

Jenne Burns

Alice Bullivant

2020

Revocation of previous Code, Procedures and Guidelines

The Code supersedes any previous Code, Procedures and Guidelines that deal with any of the matters set out in the Code and the same here expressed to be revoked. This will substitute for any Code, even if a complaint or resolution process commenced prior to the adoption of this Code and the revocation of any application of the previous Code.

Contents

AKA Standard Review and Evaluation Controls.....	2
Opening Comment	3
Revocation of previous Code, Procedures and Guidelines:.....	3
Professional Standards	6
Practitioner Code of Ethics	5
Standards of Practice	6
Compliance	6
Professional Conduct	6
Record Keeping	7
Ethical Practice	7
Health Directives	7
Premises.....	7
Clinical Setting	7
Hygiene and Infection Control	8
Professional Care.....	9
Competence	9
Fitness to Practice	9
Responsibility.....	10
Member and the Client.....	10
Member and Colleagues and Other Health Providers	10
Consent of the Client	11
Touch.....	11
Mandatory Reporting	11
Self-Care.....	11
Social Media	12
Vulnerable Persons.....	12
Members and Clients.....	12
Members and Colleagues and Other Health Providers	13
Consent of the Client	13
Self-care in relation to treating Vulnerable Persons.....	14
Professional Behaviour	14
Misconduct and Complaints	14
Appealing Decisions	14
Fraud, Gifts and Exploitation	14
Practitioner and Client Relationships	15
Clients	15
Member and Colleagues and other health practitioners.	15
Inappropriate Conduct	16
Sexualised Behaviour	16
Sexual Misconduct	16
Sexual Exploitation	16
Sexual Harassment	16
Coercion or Grooming Behaviour	17
Further information and links	17

Practitioner Code of Ethics

I set a credible, honorable, and ethical example for my profession as a kinesiologist.

I conduct my work with the highest integrity.

I honor the confidentiality of my clients.

I encourage clients to be self-responsible in realizing their own health.

I honor the decision-making process of the person and recognise the muscle monitoring may not be used to replace this process.

I remain impartial to the muscle monitoring process.

I maintain a high standard of professionalism in my behaviour, hygiene, manner, language, business, and financial activities.

I honour my financial responsibilities, being fair and honest in all areas of my business.

I regard as imperative the financial success, stability, and growth for my business in alignment with this code of ethics.

To any person, I do not defame or criticise other models of medicine or healing.

I acknowledge the need to refer my clients to other professionals whenever necessary.

I continue to expand and update my kinesiology skills.

I continue to explore my own self development through kinesiology and other modalities.

I recognise the importance of my role as a professional Kinesiologist and continue to promote the expansion of kinesiology in the community.

I honour my personal commitment to my profession through compassion, caring, and love for myself, my fellow beings, and our world.

Professional Standards

Standards of Practice

Kinesiology encompasses holistic health disciplines which use the gentle art of muscle monitoring to access information about a person's well-being. It identifies the elements which inhibit the body's natural healing processes and assists with stimulating a person's natural internal energies and accessing their life enhancing potential. Kinesiology does not treat, diagnose, or prescribe, but rather balances a person's energy. Members of the AKA must not make any claims or engage in any conduct that is inconsistent with those statements. Our members that are practitioners must comply with the training and competency standards required by the AKA.

Compliance

Members will conduct their practice in an accepted professional manner under this Code and in accordance with all applicable laws, having regard to any legally binding requirements that apply to:

- The practitioner;
- The client; or
- In the case of a minor, their parent or legal guardian at the time of treatment.

In the event of a conflict arising between the standards of practice, legal requirements and professional obligations of a practitioner, the member should decline to treat the relevant client until such a time as the conflict is reasonably resolved and the rights and obligations of each party are clear. Conflicts of interest should not be influenced by self-interest or personal gain: if a member becomes aware that a practitioner or employee has a real, potential, or perceived conflict of interest, report the matter to their supervisor or association.

If a compliance conflict arises due to a member being affiliated with multiple associations, the AKA expects the member to follow the rules of the association their insurance is aligned with. If the member's insurance is not aligned with any association, the member must abide by the rules of the AKA.

Professional Conduct

Members must always comply with the Constitution, This Code and Standards of Practice of the Australian Kinesiology Association and all position statements, policies and guidelines as adopted by the AKA from time to time. To do so, each member must (amongst other things):

- a. Fully cooperate with any enquiry, audit or request instituted by the AKA in respect to this Code or any membership issue raised by the AKA.
- b. Complete annual Continuing Professional Education (CPE) points if applicable to membership type.

- c. Maintain public Liability and Indemnity Insurance to such levels relevant to their scope of practice.
- d. Maintain currency of First Aid certificates for themselves and any employees.

It is also recommended that each member:

- a. Maintain current CPR certificates for themselves and any employees.
- b. Hold a current Working with Children Check Card and/or a Working with Vulnerable People (WWVP) card.

Record Keeping

Members must:

- a. Maintain detailed, relevant records and client consent to protect both the client and the practitioner.
- b. Store all client information according to privacy laws and legislation.
- c. Keep records for a minimum of seven years since the last client contact unless legal requirements specify otherwise at the relevant time.
- d. Comply with all Commonwealth, State and Territory laws relating to their client's health information and the conduct of their practice.

Ethical Practice

Members must:

- a. Act competently and professionally.
- b. Be courteous, respectful, and discrete.
- c. Be open, honest, transparent, and accountable.
- d. Be sensitive to cultural differences.
- e. Act fairly and impartially.
- f. Act responsibly.
- g. Follow lawful directions from a person in authority; and
- h. Act in accordance with these Rules.

Health Directives

Members must:

- a. Follow the health directives of their relevant State or Territory in times of national pandemics and other such situations.

Premises

Clinical Setting

A clinical setting includes but is not limited to, a clinic or home-based practice, corporate, mobile, hospice and/or event environments. Regardless of the physical clinical setting, each member must:

- a. If an employer or sole trader, ensure that their workplace is safe for employees, clients, and visitors.
- b. Ensure that adequate insurance is in place.
- c. Ensure that all clients have access and safe exit from the setting.
- d. Ensure the clinical setting considers the client's privacy, modesty, and safety before, during and after their session.
- e. With a mobile practice, ensure all practical measures to comply with optimal clinical setting would translate to best practice.
- f. Guard against physical risk of violence, abuse (verbal or physical) and theft by always maintaining a safe clinical environment (in accordance with proper and prudent practice). Eg. By always having the client's phone number and calling unknown clients before their first appointment.

Hygiene and Infection Control

A member must ensure that their clinical setting used for treatment meets all hygiene and infection control requirements relevant to the clinical setting. Members must comply with the Health Act and the National Code in respect to hygiene and infection control matters.

Members must assess and manage infection risk and ensure services and/or facilities:

- a. Have an updated policy and procedure Work, Health and Safety manual available for their clinic.
- b. Have access to a hygienically maintained toilet and bathroom facility for their clients.
- c. Provide a professional and hygienic environment that includes taking current precautions and reflects best practice in the control of any infection.
- d. Adhere to and stay current with the AKA and state guidelines in relation to infection control measures and requirements.

Professional Care

Competence

Members must always recognise and conduct their practice within the limits of their scope and knowledge. Members must:

- a. Continue development of knowledge, skills and professional behaviour throughout the practitioner's active membership.
- b. Act impartially in the muscle monitoring process.
- c. Inform clients of known adverse interactions or contraindications between kinesiology and other therapies and/or medications being taken by the client.
- d. Carry out sessions within the agreed time frames.
- e. Provide a well-researched, informed, and detailed referral network for when a client's issues are beyond your scope or knowledge base. Members require impartiality in their referral process with the well-being of their client at the forefront of their decision making.
- f. Act consistently, promptly, openly, and fairly in all matters concerning their professional practice.
- g. No member will perform any technique or correction that contravenes an Australian Federal, State or Territory legislation pertinent to their scope of practice.

Fitness to Practice

All members of the AKA must always be 'fit to practice' when dealing with clients. To be fit to practice, you must have the skills, knowledge, health, and character to practice professionally, effectively, and safely.

Members must perform all techniques/corrections with the well-being of the client as priority.

A member must ensure they stop practicing or provide treatment to any person if:

- a. They have exploited the client/practitioner relationship and/or trust in any way.
- b. They have failed to allow the client the right to make their own choices about their own care.
- c. Their judgement or performance is or may be affected by their mental or physical health.
- d. Their judgement or performance is affected or impaired by substance abuse or misuse.
- e. They have been violent or displayed threatening behaviour.
- f. They have been dishonest, committed fraud or failed to co-operate with any investigation undertaken by the AKA into their conduct.
- g. They have received notice from the AKA stating they have engaged in any serious and undesirable professional conduct (as determined by the management committee in its

complete discretion) that management committee believes may affect public confidence in the profession.

- h. They are under investigation and have been requested to stop work during this investigation process.

Responsibility

Members must always conduct their practice responsibly, be personally responsible for their professional decisions and give due consideration to the foreseeable consequences of their actions towards a client.

Members must ensure they have a working knowledge of, and practice within, the relevant principles of law and policies that relate to their work practice, the conduct of their treatments, their business operations, and premises.

Each member must ensure that they observe the following:

Member and the Client

Members must:

- a. Adhere to privacy and confidentiality laws in relation to client information.
- b. Facilitate client's access to their information in a timely and efficient manner, including transferring client's records upon request to the individual or legal representative.
- c. Always exercise discretion and confidentiality inside and outside of clinic.
- d. Treat clients with equality and without discrimination.
- e. Keep personal values and opinions to themselves.
- f. Respect the clients right to be involved with their treatment plans and the right to refuse treatment at any point of their sessions should they choose.
- g. Respect the clients right to change practitioner without question, harassment, or opinion.
- h. Determine the need for referral to other health services based on client needs, scope of practice, appropriate skills and expertise and assessment indications.
- i. Provide transparency before the first consultation advising clients of fee structures, payment terms, refund policies, non-attendance policies and complaints procedures.
- j. Permit a support person of the client to attend any treatment if required. Eg. in relation to ability, language, or cultural needs.
- k. Ensure that sexual or emotional relationships are not formed with current clients, and that those formed with former clients are subject to a reasonable time delay since the conclusion of the professional relationship and do not take advantage of any client vulnerability.

Members, Colleagues and Other Health Providers

Members must:

- a. Support the development and implementation of laws and policies that promote best practice.
- b. Cooperate with colleagues and other health professionals.

- c. Treat colleagues, including administration staff with professional integrity, politeness, and respect.
- d. If a client is referred from another practitioner, report back to the referee once consent from the client is obtained.
- e. Must not engage in the solicitation of clients under any circumstance.

Consent of the Client

Members must:

- a. Document client consent appropriately both in writing and verbally in accordance with best practice.
- b. Ensure the client understands the purpose, and is informed of the outcome of, individual corrections and the overall treatment.
- c. Request feedback from the client throughout the session regarding comfort and pain levels and adjust the session according to the client's requirements or requests.
- d. When a parent requests a child to receive treatment you can only proceed with the child's consent. Eg. muscle testing consent for a baby, or verbal permission for an older child.

Touch

Members must:

- a. Ensure professional draping is applied if clothing is needed to be removed for any technique.
- b. At the beginning of a technique that requires removal of some clothing, first provide an explanation and outcome, followed by consent, and provide privacy.
- c. Not touch the client's genitalia or surrounding area (pubic bone).
- d. Not touch the breast area, regardless of gender unless required for legitimate kinesiology correction, after assessment and documented informed consent has been obtained.
- e. Find an alternative way to convey the kinesiology technique when working on an area that is deemed private. For example, demonstrate on self and/or have the client use their own fingers to find the point and/or massage themselves.

Mandatory Reporting

Members must:

- a. Disclose information of a client who is in potential harmful situations to another health professional or relevant agency, if it is in the client's best interest or in line with the laws of each State and Territory.
- b. Be responsible and aware of your reporting requirements to the appropriate authority and the AKA when witnessing unlawful conduct by colleagues in conducting their practice.
- c. Report criminal conduct against a child.

Self-Care

Members should:

- a. Maintain and support their own physical and mental health by creating a personal health strategy.
- b. Seek assistance and/or professional support when needed, recommended, or requested by another health professional.
- c. Maintain a healthy balance of boundaries from work.

Social Media

Members must:

- a. Maintain the intellectual property rights of their clients or another person.
- b. Ensure all social media content, personal or work related, are appropriate.
- c. Not misrepresent their skill level and knowledge, malign other practitioners, or bring (or potentially bring) the AKA into disrepute.
- d. Not generate or participate in personal correspondence (including electronic communication) of a sexual or romantic nature with their clients or respond to initiated correspondence of this nature.

Vulnerable Persons

Members must always conduct their practice responsibly, be personally responsible for their professional decisions and give due consideration to the foreseeable consequences of their actions towards a client.

Vulnerable persons are people who may be sensitive or susceptible to exposure or particular behaviours, because of a variety of factors.

Vulnerable persons may include (but are not limited to) children, pregnant or breastfeeding women, aged persons, persons suffering from a known mental health illness, persons with a known disability, minority groups and those receiving end of life care. Individuals can belong to more than one category of vulnerability and may become vulnerable within or throughout the course of treatment.

Members must reassess in future appointments to check if their client could be considered a vulnerable person and adjust the manner and delivery of their session accordingly.

While no two clients can be the same, awareness of vulnerable individuals create a new set of challenges for a member and we must find ways of meeting those challenges through a distinct framework of self-reflection and care.

Best practice includes but is not limited to undertaking the following:

Members and Clients

Members must:

- a. Take appropriate and timely measures to minimise any physical, emotional, or mental harm to clients.
- b. Unless otherwise instructed by their client, inform relevant authorities if they have reasonable grounds to believe their client is a victim of domestic violence, abuse or is at imminent risk of suicide or self-harm.

- c. Inform relevant child protection or other appropriate authorities if they have reasonable grounds to believe a client has suffered neglect or abuse.
- d. Ensure that when communicating with a vulnerable person you treat them with respect, listen attentively, encourage questions, and communicate in a way the client can understand.
- e. Anticipate and consider client sensitivities to ensure client dignity is maintained.
- f. Ensure you use clear verbal and non-verbal communication to build rapport, safety and trust when establishing and maintaining the professional relationship.
- g. Recognise there is a greater power imbalance in the practitioner/client relationship with vulnerable clients who may be more open to abuse either physically, emotionally, sexually, or financially and adjust the manner in which you perform your session.
- h. When working with a client under the age of 16, the AKA recommend the child is accompanied by a parent or legal guardian or hold written permission by the above in their absence; it is still prudent to have the relevant adult present.
- i. Respect client's rights and do not undervalue their decisions including refusal if they choose.
- j. Demonstrate professional responsibility when a presenting condition falls outside of your scope.

Members and Colleagues and Other Health Providers

Members must:

- a. Support the development and implementation of laws and policies that promote best practice.
- b. Acknowledge and practice in a manner that shows you understand some vulnerable clients, including those with impaired decision-making capacity, have additional needs. When managing your duty of care to these clients pay particular attention to communication both verbal and non-verbal and be aware there will be a range of people involved in their health care.
- c. Acknowledge and respect the contribution of all practitioners involved in the care of the client and communicate with these networks with respect and clarity.

Consent of the Client

Members must:

- a. Provide information in a way the client can understand before asking for consent.
- b. Encourage clients to tell you about their condition, how they understand it and what their goal is.
- c. Give adequate opportunity for clients to question or refuse any technique.
- d. When working with a client whose capacity to give consent is impaired or limited, obtain the consent of people with legal authority to act on behalf of the client.
- e. Consider the balance between benefit and harm in all sessions with greater self-reflection.
- f. Request feedback from the client throughout the session regarding comfort with increased frequency and monitor non-verbal cues and adjust accordingly.

Self-care pin relation to treating Vulnerable Persons

Members should:

- a. Use professional work practices and networks to make environments safe for all.
- b. Use reflection strategies to support your ability inclusively.
- c. Identify and act on ways to improve self and social awareness.
- d. Review and document adverse events or situations and implement changes to reduce risk of recurrence.
- e. Accept that there may be times that working with a client is not in your best interest or theirs and respond accordingly.

Professional Behaviour

Misconduct and Complaints

Members are required to uphold the principles, practices and policies set out in the Code at all times.

In the event that a conflict arises between a member and a client the member should decline to treat the relevant client until such a time as the conflict is reasonably resolved and the rights and obligations of each party are clear.

If a member breaches this Code or any allegations of breach against a member are made; the relevant matter will be brought before the AKA management committee and the member may face disciplinary action (including revocation of membership) as set out in the AKA guidelines available at aka.asn.au.

When dealing with a complaint the member must cooperate with the AKA, provide timely, accurate and complete information to the AKA, abide by the AKA complaints procedure policy and any disciplinary measure imposed by the AKA (subject to the members rights under Appealing Decisions).

Members must ensure they:

- a. Provide each client with the relevant State or Territory Health Commission details.
- b. Have a process and system in place for clients to initially raise concerns about the member or a colleague of the member.
- c. Have a process and system in place for clients to access dispute resolution.

Appealing Decisions

The AKA must promptly inform any person who is affected by their decision concerning any matter of the right to have that decision reviewed. Please refer to the AKA Complaints Policy at:

<https://www.aka.asn.au/Resources/Documents/AKA%20Inc.%20Complaints%20Policy%202014%20v2.pdf>

Fraud, Gifts and Exploitation

Members must be aware of and observe all laws in relation to taxation, including GST and financial transactions (providing receipts). Failing to issue appropriate receipts, or receipts containing false information, is fraudulent and is a criminal offense.

Members must ensure:

- a. Gifts are not over the value of \$50.
- b. They do not exploit their relationships with colleagues, employers, or employees.
- c. They do not lodge trivial, unsubstantiated, or vexatious claims against colleagues, competitors, or other members of the AKA.
- d. They do not accept gifts of a sexual, suggestive, or romantic nature as they are in breach of the Code.

Practitioner and Client Relationships

Professional boundaries are important in the provision of any health care service. Members must ensure they conduct their practice responsibly, be personally responsible for their professional decisions and must give due consideration to the foreseeable consequences of their actions.

Members are expected to preserve and enhance their own professional reputation, as well as that of the kinesiology profession in Australia. They must practice in an ethical manner so as to promote and maintain the welfare of the client and protect the public at all times.

The AKA looks to ensure the appropriate standards of professional conduct from its members which, will assist to preserve and enhance the professional reputation of kinesiology in Australia.

Clients

Members must:

- a. Establish and manage the client relationship with appropriate professional boundaries and integrity.
- b. Establish and maintain clear sexual boundaries with clients, carers, students and supervisors.
- c. Refrain from any behaviour that sexualises, or appears to sexualise, the clients/practitioner relationship (verbal commenting, touching private areas).
- d. Not engage in or propose sexual contact with any client for any reason whatsoever. Any inappropriate conduct will be dealt with in accordance to the AKA guidelines and third party, including government agencies.
- e. Note that consent by the client is not an acceptable defense in the matter of sexual behaviour or sexual service with that client.
- f. Work with integrity and within ethical and moral standards.
- g. Acknowledge that inadequate draping can be determined as sexual exploitation.
- h. Immediately cease the session if a client initiates sexual behaviour on client notes.
- i. Expand their knowledge and awareness of ethical issues in kinesiology and practice with the highest ethical standards.

Member and Colleagues and Other Health Providers

Members must:

- a. Take appropriate action and/or report conduct of any practitioner/members, trainer or health provider known to be engaging in sexual activity with their client, carer,

- students and supervisors whether the activity is consensual or not to the appropriate authorities and to the AKA.
- b. Assess the risk of boundary violations and support the development and implementation of laws and policies that promote best practice.
 - c. Co-operate with colleagues and other health professions in connection to any investigation conducted around issues of contradiction to the principles set out in the Code.
 - d. When treating colleagues maintain the same professional integrity and respect as with any other client.

Inappropriate Conduct

In an increasingly aware community, the AKA has provided clear and precise governance around how our members are to conduct themselves. The Code provides positive and supportive guidelines. To clarify this further, below, we have supplied a breakdown of what we consider inappropriate and unacceptable conduct by our members.

Sexualised Behaviour

Sexualised behaviour is any behaviour that may reasonably be perceived to be of a sexual nature according to the standards of the time by the person to whom it is directed.

Sexual Misconduct

Sexual misconduct is contact or an invitation, via any means, of a sexual nature which is inconsistent with the integrity of kinesiology. This includes any behaviour that could be reasonably considered to be sexual assault, sexual exploitation, sexual harassment, coercion or grooming of another.

Sexual Exploitation

Sexual exploitation is any sexualised behaviour whether or not there is consent and regardless of who initiated the behaviour. The AKA especially does not condone sexualised behaviour with a person under the age of consent, or with a vulnerable person. Members will not engage in behaviour or a pattern of behaviour aimed at the involvement of others in sexual acts, including but not limited to coercion or grooming behaviour. Members are not to take advantage of the conscious or unconscious use of sexually provocative behaviour. Lastly, the AKA consider it sexual exploitation to ask without legitimate reason, any questions about the intimate details of a person's sexual life or providing details of a members own sexual life.

Sexual Harassment

Sexual harassment means unwelcome sexualised behaviour, whether intended or not, and that person feels in any circumstances offended, belittled, or threatened. This can be a single incident or several incidents over a period of time.

Members are not to engage in making explicit or implicit demands for sexual activity including any gestures, action, or comment of a sexual nature to a person or about a person. Harassment includes making jokes that contain sexual references or innuendo using any form of communication. Physical contact that is inappropriate to the situation or uncomfortable or confusing for the receiver, includes kissing, hugging, touching, pinching, patting or aggressive physical conduct. The use of 'only kidding' or accidental occasions of sexual touch or comment is not acceptable.

Coercion or Grooming Behaviour

Members will not exhibit any behaviour that could be considered coercion or grooming behaviour. The AKA sees coercion/grooming behaviour as the physical or psychological actions intrinsic to initiating or hiding abusive behaviour, which involves the manipulative cultivation of relationships with clients, students, carers and others.

Bullying

Members will not condone or participate in bullying behaviour, where bullying is the seeking out and targeting of another to cause them distress and humiliation or to exploit them, including exclusion from a peer group, intimidation, and extortion.

Further information and links

- Advanced Care Planning Australia: www.advancecareplanning.org.au/resources
- Alcohol and Drug Foundation: www.adf.org.au
- Australian Health Practitioner Regulation Agency: www.ahpra.gov.au
- Australian Health Practitioner Regulation Agency Guidelines for Mandatory Notifications
- Australian Human Rights Commission: www.humanrights.gov.au/our-work/disability-rights
- Beyond Blue: www.beyondblue.org.au
- Child protection authorities in your State or Territory
- Health Care Commission in your State or Territory
- National Code of Conduct in your State or Territory
- Seniors Rights Network

Reference

Breaking the Silence – Code of Conduct (2015 edition)

Massage and Myotherapy Association – Code of Ethics, Standards and National Code of Conduct (July 2018)