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Reiki Australia moves toward voluntary self-regulation

Volunteers create national standards for treatment practitioners

By Lindel Gregger (Reiki Australia member)

Reiki Australia, a progressive national body, is well along the path to achieving its mission: “To facilitate the availability of exemplary Reiki Treatment Practitioners to offer Reiki treatments in diverse health and community environments”.

Currently there are not enough exemplary Reiki treatment practitioners to provide treatments in these environments, says Reiki Australia executive director, Lynette Kirkman.

These diverse health and community environments include hospitals, hospices, private clinics, correctional centres, veterinary clinics, cancer support units, wellness centres, rehabilitation units, refuge centres and beyond.

“With consumers increasingly choosing Reiki to complement treatment for conditions such as cancer, drug withdrawal and trauma counselling, there is a shortage of Reiki practitioners who have been trained to work in these settings,” she says.

“By exemplary, we mean Reiki practitioners who have trained to meet healthcare industry requirements, such as having well developed communication skills to facilitate the therapeutic relationship, being able to comply with occupational health and safety regulations, following appropriate legal and ethical guidelines for Reiki practice, and operating within defined forms of Reiki practice.

“Reiki Australia recognises that lay practice is the foundation for vocational practice and belongs as a pre-requisite to professional training, but it is not intended to provide students with the competencies required for professional practice,” says Lynette Kirkman.

“Reiki lay training does not prepare the practitioner with the range of skills to confidently, competently and compassionately facilitate the healing process in a setting where practitioners are likely to be treating a range of clients who may be in a very vulnerable state.”

In Australia, the proposed Reiki Treatment Practitioner qualification will only apply to practitioners who are offering Reiki treatments in healthcare and community environments; it will not apply to Masters in their teaching of Reiki as a healing art and spiritual practice. (See breakout story).

Another benefit from the introduction of a standard for Reiki treatment practitioners is to enable health care facilities to have a benchmark for employing a Reiki practitioner, whether they are in a paid or a voluntary capacity.

In the absence of a standard for Reiki treatment practice, some facilities, such as the Karuna Hospice Services in Brisbane, Queensland, require that all its Reiki practitioners be Masters. Karuna Hospice Services director, Venerable Yeshe Khadro, says: "In using Complementary Therapies with our clients we look for therapists with professionally recognised qualifications." Lynette Kirkman says, in the absence of standards, the misconceptions are that Reiki Masters are automatically better treatment practitioners and are automatically endowed with the skills and experience to better case-manage treatments in these environments.

The absence of any competency standards may foster the perception that there is minimum risk to the public from a Reiki treatment.

"While it is true that Reiki itself cannot harm, with any healthcare practice there are many risks associated with practitioner behaviours and boundaries," says Lynette Kirkman.

"Without adequate standards, practitioners may make inappropriate recommendations, neglect to refer patients when necessary for medical assessment, make unsubstantiated claims of therapeutic benefit or conduct themselves in an unethical manner.

"In addition to these concerns, there is currently little or no information shared between a patient's Reiki practitioner and their other healthcare providers, and a skills deficiency exists in interpreting and understanding the interaction and implications of Reiki treatment with other therapies and medication."

National standards will also open funding opportunities for conducting controlled research trials into the effects of Reiki, and this data will further ease the passage of Reiki into healthcare and community facilities.

Reiki Australia has been working co-operatively with the Federal Government's Community Services and Health Industry Skills Council (CSHISC) in the review of the Complementary and Alternative (CAH) Health Training Package and has made a lengthy submission to CSHISC for the inclusion of a multi-level Reiki Treatment Practitioner qualification as part of its Health Training Package Review. The first draft of this qualification is expected to be open for public comment on the CSHISC website by June 2005. (Visit www.cshisc.com.au, go to Current Projects and follow the link to Health Training Package HLT02 Review to view the draft.)

In acknowledgement of its credibility and methodology over the past four and a half years of consultation, Reiki Australia has also been appointed, by CSHISC, to the national Industry Reference Group, which has input into the direction of all Complementary and Alternative Health policies in Australia.

Membership to Reiki Australia opened in April 2003 with an introductory category, and today there are seven membership options. Membership is open to national and international individuals and organisations wishing to support Reiki Australia's mission, and additional categories will be added once a training qualification for treatment practitioners becomes available.

Depending on their membership category, members have access to a comprehensive Code of Ethics and Code of Professional Conduct for Reiki Practice, an Ethics Committee, personal and

professional development workshops, networking opportunities, a newsletter “The Journey”, and eligibility for professional indemnity and public liability insurance. Practitioners and Masters also have the opportunity to advertise on the official website: **www.reikiaustralia.com.au**

Members enjoy not only these tangible benefits but also the fulfilment of working collaboratively towards a higher purpose. A large number of volunteers have joined Reiki Australia’s various project teams which contribute to areas such as training development and coordination, membership, media and advertising, conference planning, administration, and health and community care facility liaison.

Other Reiki Australia projects include a series of national learning and development workshops, the first of which will be on the topic of Ethics and Informed Consent in Case Management, presented by Geraldine Milton, a second degree Reiki practitioner, nurse, bio-ethicist, member of Reiki Australia’s Ethics Committee and past adviser to its Professional Standards Team.

“The aim is to develop this series of workshops within the context of Reiki treatment practice, rather than becoming a multi-modality therapy,” said Reiki Australia Chair and Training Project Team member, Paula Wilson.

“Reiki Australia is also exploring distance learning program opportunities for regional and overseas members who wish to become qualified treatment practitioners.”

The organisation is looking forward to hosting the 3rd National Reiki Conference to be held in Brisbane on October 12-13, 2006. The conference, which is still in the early stages of planning, will be followed by two days of concurrent seminars with Lineage Bearers and Founders of Reiki Practice. Reiki Australia is in communication with Phyllis Lei Furumoto, Dr Ranga Premaratna and Doi Sensei, with a view to conducting seminars designed to support Reiki practitioners and teachers to explore their definition of form.

For more details on Reiki Australia, the Model for Professional Practice and the conference visit **www.reikiaustralia.com.au**

(Breakout story follows on next page, to run with this article)

Standards imbued with Spiritual essence

Reiki Australia's quest to maintain Reiki's sacred path

As a result of years of consultation, Reiki Australia's Model for Professional Practice of Reiki has been designed to support and preserve the spiritual nature of Reiki, including the oral tradition at the heart of the lay practice. This model has the capacity to allow for the inclusion of practices that meet the criteria and implementation will enable Reiki membership bodies to accredit their members.

Consultation has included Reiki practitioners, research organisations, health-related work sites and other prospective employers of Reiki treatment practitioners. Dialogue with Lineage Bearers and Founders has included Phyllis Lei Furumoto, Dr Ranga Premaratna, Doi Sensei, William Rand and Kathleen Milner. Barbara Webber-Ray was also contacted, although hasn't responded to date.

From this widespread feedback, Reiki Australia has developed the following five guiding principles, which underpin the Model for Professional Practice as well as all strategic and operational aims of the organisation:

1. Preservation of Reiki as a spiritual practice and healing art is paramount;
2. Lay practice, i.e. Reiki as a spiritual practice and healing art, is the foundation of professional practice;
3. All levels of Reiki initiation and training belong in the lay practice and are not included as part of vocational training for Reiki treatment practitioners;
4. Vocational training for Reiki treatment practitioners must embody the spiritual practice and healing art of Reiki; and
5. Specialised vocational training is necessary to suitably prepare Reiki treatment practitioners to work in a variety of health and community settings.