



Code of ethics and professional practise for Gestalt Practitioners in Organisations

Introduction

This is the second edition of a Code of Ethics and Professional Practice for Gestalt Practitioners in Organizations (GPO) of the European Association for Gestalt Therapy. The purpose of this code is twofold: firstly, to define general values and principles and to establish standards of professional conduct for GPO's, and, secondly, to inform and protect those members of the public who seek their services.

Gestalt Practitioners are responsible for the observation of the principles inherent in the GPO Code of Ethics and the Professional Practice and are to use this code as the basis of good practice rather than a set of minimal requirements. These codes are designed to be beneficial not only for the protection of clients but are also meant to protect the practitioner by establishing standards of conduct that clarify the boundaries of practice and accountability in the work setting.

The general aim of the GPO's work is to enable the client and/ or the team to increase competency (training), to reach objectives (coaching), to take good decisions (counsel) and as a result of that, to increase wellbeing in the organizational field, (consulting).

This code is applicable to all GPO members of the European Association for Gestalt Therapy at an international level. When a discrepancy between this code and national codes occur, the conditions of the national code take preference.

This code is subject to revision in the event that it proves inadequate in the practical application as a means of establishing standards of professional conduct.

The code is divided into four sections. The first section gives some definitions and the second one states those values and principles that are inalienable rights of the individual. The third section demonstrates guidelines that honor and protect these rights. The fourth section consists of the complaints procedure.

The complaints procedure is the procedure that is to be followed in the event that there is a grievance or a complaint against a GPO Member of the EAGT.

All members of the EAGT agree to have a complaints procedure.

The EAGT Ethics Committee is responsible for maintaining an overview of the GPO code of ethics and complaints procedure. (Discussed and agreed change with Ethics Com).

The EAGT will encourage and support each national umbrella organization to be aware of and respect the GPO code of ethics and complaints procedure.

A. Definitions

GPO

A GPO is a Gestalt Practitioner in Organizations with recognized experience and specialized skills in applying the Gestalt approach while working as a manager, leader, coach, consultant or trainer in organizations

Professional relationship

A professional relationship exists when the relationship is based on or includes a business agreement or contract that defines the responsibilities of each party. This contract may be explicit, written or verbal. Particular caution should be taken with verbal agreements.

Client and assigner or sponsor

In order to clarify roles in the professional relationship, it is often necessary to distinguish between a client and the assigner or sponsor. In most cases, the client and assigner or sponsor are the same person and therefore jointly referred to as the client or client system. For purposes of identification, however, we define these roles as follows:

- Client: The “client” is the person(s) being managed, coached, consulted or trained.
- Assigner or Sponsor: The entity (including its representatives) paying for and/or arranging for the services to be provided.

In all cases, engagement contracts or agreements should clearly establish the rights, roles and responsibilities for both the client and assigner or sponsor if they are not the same persons and as a consequence of this, there should be total clarity concerning the figural unit of work, which can be: person or persons/teams/organisation. Where possible, these contracts/agreements should be explicit and in writing.

B. Code of ethics

1. A GPO treats people with respect and dignity regardless of the differences in role or status
2. A GPO shows respect for the uniqueness, worth and dignity of the individual.
3. A GPO appreciates and values the diversity of race, extraction, ethnicity, gender, sexual identity or preference, disability, age, religion, language, social or economic status and of the need for spirituality.

C. Code of professional practise

1. Advertising and publications
 - 1.1. The GPO will not knowingly make any public statement that is untrue or misleading about what he/she offers or make false claims in any written documents relating to the profession or his/her credentials and/or areas of competence and expertise.
2. Competence
 - 2.1. The GPO will only undertake tasks where he/she knows or should know that he/she has the necessary competence to address these tasks and bring them to a completion that is beneficial to the client or client system.
 - 2.2. During the working process, the GPO, upon discovering the limits of his/her competence, will either refer the client to another professional or will establish collaboration with another professional/other professionals. If this is not possible, he will refuse to continue the contract.
 - 2.3. A GPO will not apply therapy to his client, unless he is also a qualified Gestalt therapist and this change is clearly agreed upon by both client and the assigner. In this case, the contracted change should be recorded in writing.
 - 2.4. In cases where the GPO reaches challenges or limits to his/her competence, the first step during this process is the renegotiation of the original contract with the client. Continuing with the client means taking the necessary action to improve competence. Such action can be:

- 2.4.1. The GPO examines carefully whether his/her competence can be applied in the field in which the work is to take place fully to the benefit of the client. If the GPO determines that the organizational field, its structure, boundaries and the aims that dominate that field to be in any way contradictory or too restrictive to /for the unfolding of the competence that is necessary to further the client's process, he/she abstains from any further working project undertaken in this field.
 - 2.4.2. The GPO seeks support and clarification of his/her difficulty regarding a problematic situation in a supervision/hypervision or intervision context with experienced colleagues.
 - 2.4.3. The GPO has regular supervision to clarify his/her stakes in interventions and to support his/her integrity.
 - 2.4.4. The GPO establishes and maintains relationships with his/her professional networks.
 - 2.5. The GPO prevents all activities like conferences, interviews in the public media, seminars etc. that might contradict his/her ethics.
 - 2.6. The methodological and technical approaches in the process of work must serve the aims and developmental requirements of the client (system) agreed upon in the contracting.
 - 2.7. In an educative process lasting a whole professional life, the GPO takes care to enlarge and deepen his/her professional and personal competence. The GPO is open to important developments that affect this process, whether in the field of Gestalt theory and practice or in other fields or schools of organizational research and practice, with regard to the benefit of the clients.
 - 2.8. The GPO maintains careful documentation of his/her work with the client and observes any prescriptions for the duration of document preservation, the security measures demanded and maintains the strictest levels of confidentiality unless release is required by law. [
3. The client – practitioner (C/P) relationship
 - 3.1. The C/P relationship is a professional relationship within which respect for the welfare of the client and organization is the practitioners primary concern.
 - 3.2. The GPO recognizes the importance of the relationship for effective results and is aware of the power and influence and the issues of dependency inherent in this situation. The GPO will act in a manner consistent with this recognition and not exploit or abuse clients in whatever way for his/her own personal advantage, or the advantage of any other person or institution.
 - 3.3. The GPO will check that other relationships or external commitments do not conflict with the interests of the client. When such a conflict of interests exists, it is the responsibility of the GPO to bring it openly into the relationship with the client and the assigner or sponsor and take necessary action to resolve the issue.
 - 3.4. The GPO makes sure that pre-existing relationships, such as employee, close friend, relative, neighbour or partner do not interfere with present activities.
4. Confidentiality
 - 4.1. All exchanges between the GPO and client are regarded as confidential.
 - 4.2. In case the client is another person than the assigner or sponsor, clear agreements must be made regarding exchanging information about the client and the process with the assigner of sponsor.
 - 4.3. The storing of clients' personal data, including case notes, is subjected to the relevant national legal and professional regulations.
 - 4.4. The GPO takes care that personally identifiable information is not transmitted through overlapping networks of confidential relationships, such as supervision, email exchanges, conferences and articles.
 - 4.5. When a GPO wishes to use specific information gained during work with a client or client system, the client's and assigner's permission will be obtained and this can only be done if obtaining this permission is not harmful to either one of them and strict anonymity is preserved around names, data, etc.

- 4.6. When a GPO wishes to use specific case material for case studies, reports or publications, he/she obtains the client's and assigner's informed consent wherever possible and must effectively protect client's anonymity.
 - 4.7. Video, photo and tape recordings or films require the written permission of the client or his/her legal representative's, as well as the written permission of the assigner or sponsor.
 - 4.8. The GPO will act according to the laws of the relevant country regarding the protection of personal data. In cases of organisations spanning more than one country, careful consideration must be given to any possible conflicts between national and international/organisational guidelines. Such conflicts can be discussed in supervision, recorded and raised with the client and/or sponsor.
 - 4.9. The GPO has to respect his/her legal obligations to report or certify in court, after informing clients.
 - 4.10. In case, the GPO has reasonable doubt or worry about the safety of the client and/or his/her environment, it may substantiate his/her decision to break the rule on confidentiality and to inform those officials or professionals, who are able to intervene and prevent the assumed danger or risk. The GPO must inform the client about this his/her decision in all cases where possible.
5. Contracting with client
 - 5.1. Any contract made between a GPO and a client, assigner or sponsor is binding for both parties whether it is written or verbal.
 - 5.2. Contracts with clients, assigners or sponsors whether written or verbal, are explicit regarding fees, payment schedule, location, breaks and cancellation of activities by client or GPO. Where possible they should also attend to issues of possible risk, (physical, emotional, business or financial), arising from the work in order that informed consent can be judged to have been given. Particular care should be taken that all members of teams/larger units can be judged as having given informed consent
 - 5.3. Any changes that occur in the above-mentioned conditions will require the re-negotiation of the original contract.
 6. Safety
 - 6.1. The GPO will take all reasonable steps to ensure that the client suffers neither physical nor psychological harm during his/her interventions or as a result of his/her interventions.
 - 6.2. The GPO is required to ensure that his/her professional work is adequately covered by appropriate indemnity insurance (when this is available in the country).
 7. Management of the GPO's role in society
 - 7.1. The GPO is open to cooperate with and to contribute to research work that is instrumental to further development in professional work and makes his/her own research work accessible to the GPO community. In all these cases respect for confidentiality and client interest is paramount.
 - 7.2. In his/her own research work, the GPO observes the rules that respect his/her colleagues' work and the copyrights of all professional material will be observed.
 - 7.3. The GPO respects, also in public, the work of other colleagues and abstains from disqualifying remarks about other theoretical models, schools or colleagues in different professional roles.
 - 7.4. Political aspects of organizational work. The GPO is aware of the social and political implications of his/her work and the social and political aspects influencing the contexts of their clients or client systems, organizations.
 - 7.5. In cases where conditions are believed to have been breached, GPO's should consider reporting breaches to the EAGT ethical committee for further advice.
 8. Training and education of Gestalt Practitioners in organizations

8.1. The task of education is to inform those in learning of the theoretical, methodological and technical developments of organizational work in general and the Gestalt approach in particular, in an objective and comprehensible manner. Personal views of teachers are to be declared as such. No false expectations are to be awakened especially as far as official recognition of the education concerned by the national authorities and laws.

8.4. The GPO should not teach in an institute not respecting the ethics of GPO.

9. Conflicts of interest

9.1. GPOs will seek to be conscious of any conflict or potential conflict of interest, openly disclose any such conflict and offer to withdraw if such a conflict arises. If the GPO finds himself/herself in conflict between different or several ethical positions and requirements and cannot solve this conflict himself/herself or with the help of intervision and supervision, he/she addresses himself/herself to the ethical committee installed in his/her institute or professional association in order to get the necessary support or consultation.

9.2. It can be advisable to seek support/consultation from the EAGT/GPO ethical committee and to keep that committee informed.

10. Legal proceedings

10.1. Any GPO who is a member of the EAGT and is convicted in a court of law for any criminal offence against a client or is the subject of a successful civil action by a client will inform the Executive Committee of the EAGT.

D. Complaints and appeals procedure

Introduction to the complaints and appeals procedure

The following are the procedure to be implemented in the event that there is a complaint against a GPO member of the EAGT.

Organization and roles

The Complaint Committee (ECC)

This committee manages the complaints procedure and process. The committee comprises at least 3 members, from both Gestalt Practitioner in Organization (GPO) and Gestalt Therapist (GT) and are elected by the EAGT members for a period of 3 years. The committee will submit a report after the closure of a case, which preserves anonymity (of both the complainant and the member complained about) to the Ethics Committee and the Executive Committee. This would include the nature, number, outcomes and any process issues arising from the complaint's procedure.

The Complaints Panel

To address each formal complaint, the Chair of the Complaints Committee will form a panel of three persons. This panel will consist of at least one member of the Complaints Committee and up to two appointed ad hoc members as appropriate. The Complaints panel will submit a written report to the chair of the Complaints committee (see D.1.13.).

In the event of an appeal, the following bodies would be involved:



The Appeals Coordinator

The Appeals Coordinator is a full member of EAGT, who has been elected by the General Meeting of Members. S/he appoints an Appeals Panel of which s/he is a member.

The Appeals Panel

The panel will consist of three persons including the Appeals Coordinator, and an independent person as chair. The decision from this panel is grounded on the guidelines and the Appeals Panel are not dealing with the content of the complaint (see 2.2.). This panel determines whether there is a just cause for appeal and will organize and conduct the appeals procedure and report their findings to the chair of the Complaints Committee, the complainant and the member complained against.

The Executive Committee

This body will ratify any recommendations and sanctions. The Executive Committee is informed of any complaints and appeals processes in a report which preserves anonymity.

D.1 Complaints procedure

D1.1. The following procedures are intended to provide a forum for communication, presentation of points of views, investigation, reconciliation and redress in which all parties concerned in a complaint can feel supported and heard.

All complaints should be directed to the office manager of EAGT (info@eagt.org) who will give the complainant anonymity until the ECC have accepted the complaint. Complaints should be made as near as possible to the time of origin.

Potentially there are three stages in the procedures:

1. An informal meeting between the complainant and member complained against, with an independent person(s) to facilitate a dialogue process
2. A complaints panel takes on a formal complaint process in an arbitration * meeting
3. A formal appeal
 - Arbitration meeting is a formal meeting, where the complaints panels role is to form an opinion and make decisions on how to handle the situation.

D1.2. The party complained against must have been a member of EAGT at the time of the alleged breach in the Code(s) of Ethics and/or Professional Practise. Should the individual member resign his/her membership of EAGT during the process of a complaint or appeal, the process will continue.

D1.3. Complaints concerning legal, statutory or commercial contractual matters are not within the remit of the Complaints Committee. In the cases complaints should be send to the instances in accordance with the national legislation.

D1.4. In the event that there is a grievance or complaint against a member of EAGT, the complainant will submit his/her complaint in English to the office manager who will send it over to the chair of the Complaints Committee. The Complaints Committee will determine as quickly as possible if the complaint contains sufficient grounds for a complaint. (See the Code of Ethics).

- A. If there are some obscurities, the chair will refer the complaint to the complainant for further clarification regarding the format and/or the content of the complaint.

- B. The chair of the Complaints Committee will record the complaint and will acknowledge the receipt of the complaint to the complainant and send a copy to the member complained against within seven working days.
- C. In the event that the Complaints Committee determines that the complaint does not contain sufficient grounds, the chair will notify the considerations of the Committee to the complainant and the member, and dismiss the case within 14 working days.

If the complainant does not accept the decision, it is possible for the complainant to make an appeal.

D1.5. If the complaint is accepted, the Complaints Committee will contact the complainant and inform the member within 14 working days to discuss the options and procedures available to the complainant. This Complaints Committee member will, as the first step, encourage the complainant and the member to engage in an informal dialogue in order to come to a mutually satisfactory agreement, as a resolution, and give them the possibility to respond.

(When there is a prima facie case of alleged gross professional misconduct the case will be handled as a formal complaint by a Complaints Panel directly.)

D1.6. In the event that the dialogue is rejected or does not result in a resolution, the complainant may submit a formal written complaint that is directed to the chair of the Complaints Committee of the EAGT. The Complaints Committee member who has already been involved will withdraw him/herself from the following process. When the complainant chooses to make a formal written complaint, he/she will pay a fee in advance to EAGT as a deposit. (see D.1.16)

D.1.7. The member complained against, and the complainant will be informed that the complaint will now be handled as a formal complaint. The member is expected to send a written response to the complaint, within 20 working days of receiving it, to the chair of the Complaints Committee who will forward a copy to the complainant.

D.1.8. The chair of the Complaints Committee will endeavour to appoint a Complaints panel, which is as impartial as possible. There will be 20 working days granted to this appointment process. If availability of members or other practical considerations will hinder the appointment, this may result in a delay, which needs to be communicated to the parties and an extension of 20 working days granted.

D.1.9. The chair of the Complaints panel notifies both parties of the particulars of the arbitration meeting. This would usually involve a face-to-face meeting of the panel with both parties present. When not feasible, the Complaints Panel will determine an alternative form of verbal communication within a reasonable time frame.

D1.10. The complainant and the member complained against will each have the right to nominate one advisor/supporter who would be available during the arbitration.

D.1.11. The Complaints Panel will take responsibility for ensuring that the arbitration process will be audio taped. The recording and all written material will be returned to the chair of the Complaints Committee and held until such time as the matter is concluded, when it will be erased or destroyed. All evidence and other written documents and testimony from the Complaints Panel will be stored in compliance with legal regulations (GDPR).

D.1.12. The Complaints Panel will require all relevant documentation no later than 20 working days before the arbitration meeting so that this can be forward to the other party and the Complaints Panel.

D.1.13. The Complaints Panel will send a written report of the arbitration meeting and their recommendations to the chair of the Complaints Committee within 10 working days. Copies of the report will be forwarded by the chair of the Complaints Committee, to the complainant and the member complained against within one week of receiving it.

D.1.14. The report will clarify the nature of the complaint, the procedures followed and the outcome of the process for both parties. The Complaints Panel's concluding options are:

- That the matter has been resolved to the reasonable satisfaction of all parties and no further action be taken;
- That the complaint is not upheld in any respect;
- That the complaint is upheld in some or all respects. If the complaint is upheld, then the report will include specific statements as to whether each of the alleged breaches of clauses of the Code of Ethics and Practice is upheld. The Complaints Panel may recommend any of the following sanctions, only if the complaint is upheld in any respect:
 - a. Additional supervision;
 - b. Review of the member's practice;
 - c. Further training;
 - d. A formal warning and requiring and undertaking that the member ceases to work in a particular manner;
 - e. Suspension or withdrawal of membership may be recommended in cases of gross professional misconduct, such as active sexual involvement with a client.

The Complaints Panel should stipulate time scales by which sanctions should have been completed.

D.1.15. The outcome of complaints, which are upheld, will be notified to the Executive Committee by the chair of the Complaints Committee. Recommendation of suspension or withdrawal of membership will be reported to the Executive Committee for their ratification. The complainant and member complained against will be notified as to whether the complaint has been upheld or not within 20 working days of the Complaints Panel meeting. The member complaint against will be notified about any sanctions they are required to fulfil, and the time schedule required for completion. When the Executive Committee's ratification is required, parties will be notified within 10 working days of the Executive Committee's next meeting.

D.1.16. The process of complaint normally has a fee. This fee will be paid in advance by the complainant and will be paid back by the member complained against in the event the complaint is substantiated. The actual fee is €300,00 for complainants from Western European countries and €150,00 for complainants from Eastern European countries.

D.2. Appeals procedure

D.2.1. the member complained against, and the complainant may appeal against the outcome from the Complaints Panel. A decision to appeal should be sent to the Office Manager who will refer it to the appeals coordinator within 15 working days subsequent to the receipt of the Complaint Panel's report.

D.2.2. The appellant is required to give clear and convincing reasons to support his or her opinion that one or both of the following conditions have been met that:

- The outcome of the complaint is inappropriate to the situation
- The published procedures for managing complaints were not followed to such an extent that the outcome was prejudiced in some way.



D.2.3. The appeal is considered by the Appeals Coordinator who appoints an Appeals Panel of which s/he is a member. The Appeals Panel's task is to determine whether there is just cause for appeal.

D.2.4. The process of appeal has the same fee structure as the Complaints Procedure.

D.2.5. If the appeal is accepted, by the Appeals Panel, the Appeals Coordinator will inform both parties to the appeal. The presence of both parties will only be required at the discretion of the Appeals Panel.

D.2.6. All the papers and audio recording, which were available during the complaint process, will be made available to the Appeals Panel. No additional material, neither verbal nor written, by either party to the complaint, may be submitted.

D.2.7. During the organization and conducting of the appeal, the members of the Appeals Panel may choose to use a conference link given travel constraints. It is intended that the appeals process, once the appeal has been accepted, will be completed within 30 working days.

D.2.8. The decision of the Appeals Panel will be conveyed in writing within 7 working days to the chair of the Complaints Committee, the chair of the Executive Committee and the Appeals coordinator. The Appeals coordinator will inform the appellant(s) of the outcome within 7 working days. This decision will be final and binding for all parties concerned.

D.2.9. All evidence and other written documents and testimony from the appeal will be stored in compliance with legal regulations.

*Approved by vote of EAGT Meeting of Members, September 19th, 2019 Approved
by vote of EAGT meeting of Members, September 11th, 2021*