

**The Learning Company
Communications and Ethics
Class 2**

- A. Student Policy and Position Statement
- B. Aspects of the RHPA

Position Statements

CONDUCTING A CLINICAL MASSAGE THERAPY PRACTICE

Background

Massage therapists work in both traditional and non-traditional practice settings. All massage therapists are expected to adhere to the College's Standards of Practice regardless of where they practice. These guidelines have been drafted to assist members in conforming to College standards by documenting the Council's expectations relating to the operation of a massage therapy practice.

Position

The Council believes that massage therapy practice should be client centered. This means that, to the extent possible, the client should be in control of the encounter and the attitude of the staff and physical setting of the practice should facilitate client comfort.

Guidelines

Physical Setting

The physical setting should be consistent with the public's expectations for an encounter with a health care professional. There should be adequate space for; reception, waiting area, individual treatment, storage and washroom facilities. The office must be clean, well maintained, well lit, and arranged to allow sufficient privacy for clients and staff. Clients should be offered choices regarding the use, if proposed, of aromatherapy products, oils or lotions and/or background audio sound.

The setting should not contain:

- Inappropriately placed mirrors
- Video cameras

Staffing

Hands-on massage therapy treatment is to be provided only by the Massage Therapist. Individuals involved in treatment to clients should be readily identifiable.

Equipment

- Equipment must be cleaned and maintained on a regular basis. A written record of all repair and maintenance activities must be kept.
- Sheets and towels must be available in the treatment area to provide adequate draping.
- Linens including towels, pillowcases, sheets etc. are to be changed as described in the College's Standards of Practice document.

Policies and Procedures

A clinic with substantial staffing should have written policies and procedures that document procedures relating to:

- Staff performance and conduct - job descriptions, performance appraisals, supervision of students / volunteers;
- Customer service - appointment scheduling, billing, contact with referral sources, funding;
- Clinic operations - treatment setting, hygiene, equipment maintenance, safety; and
- Legal requirements - consent for treatment, release of records.

MESSAGE THERAPY GRADUATES/STUDENTS PRACTICING BEFORE REGISTRATION

Background

Under the *Regulated Health Professions Act, 1991* the therapy provided by massage therapists during client treatment are not controlled acts and are therefore in the public domain. Only members of the College of Massage Therapists of Ontario (the College) are permitted to use the title Massage Therapist (MT).

The public has a right to safety, the right to be informed, the right to choose, the right to be heard, the right to information, and the right to redress.

Clients receiving services from unregulated individuals may not realize that the services will not be covered by their insurance plan or that the provider has no professional liability insurance.

Unregulated individuals are not required to adhere to the Code of Ethics and Standards of Practice, and the College has no jurisdiction over the individual if the client is not satisfied with the conduct or actions of the person and wishes to file a complaint.

Position

Massage therapy students or graduates who have not yet taken, or have failed the certification examinations are not yet members of the College. The College believes that it is not in the public's interest for students or unregistered graduates to practice massage therapy before they are registered with the College.

The College advises Massage Therapists that they cannot supervise the work of an unregulated individual and bill that service as massage therapy and should not allow unregistered students/graduates to work as massage therapists in their practice.

If the College receives a complaint about the practice of a massage therapy student or graduate who is, or has been, practicing before being registered, the information will be investigated to determine if the student has contravened the title and official marks provisions of the *Massage Therapy Act, 1991*. When the student or graduate files an application for registration the complaint will be reviewed by the Registrar to determine if the application should be referred to the Registration Committee for a decision to refuse to register the applicant or to impose terms, conditions, or limitations on the certificate.

The Registration Committee will consider the individual's decision to practice massage therapy while unregistered, and may determine that the individual has not adhered to the four Principles of the Code of Ethics and does not meet the registration requirement to demonstrate that he/she has the required judgment to practice safely and ethically.

TREATMENT OF SENSITIVE AREAS

Information Sharing and Consent Involving Treatment for Conditions of the Chest Wall Musculature, Breast Tissue, Inner Thigh, and Gluteal Region

Background

The chest wall musculature, breast tissue, inner thigh and gluteal region are considered sensitive areas of the body generally regarded as potential targets for both misunderstandings of intent and actual sexual abuse. To address increased allegations of violation of clients' rights and sexual abuse, the College would like to ensure that sufficient information is being shared with clients regarding the nature of treatment plans and draping being proposed.

Position

Clients are entitled to informed choice concerning all proposed treatments and treatment plans. All clients regardless of age or gender who receive massage therapy are entitled to a complete explanation of the proposed treatment including: prediction of both frequency and duration of treatments, proposed draping and positioning, risks and benefits, alternatives to treatment or draping, and right of refusal throughout the care plan. In addition, it is the College's position that for proposed treatment of sensitive areas, chest wall musculature, breast tissue, inner thigh and gluteal region, a signed form acknowledging that information sharing and informed choice has occurred should be placed in the client's file. Changes to this consent should also be recorded as they occur.

Guidelines

Massage therapists need to remember, and should inform their clients that, a signed consent is not valid without ongoing informed consent. Therapists should be careful to obtain and record verbal consent for all procedures, including massage to sensitive areas, each time treatment is delivered.

The client has the right to a re-assessment of the treatment plan, and when the treatment plan outcomes have been met, treatment of the sensitive area is to be discontinued.

When a condition does not respond to the proposed treatment plan, it is the responsibility of the therapist to discontinue the plan and refer the client to the appropriate care provider.

Massage Therapists must conduct themselves responsibly and understand that treatment of chest wall musculature, breast tissue, inner thigh and gluteal structures that exceeds reasonable professional practice is disconcerting to the public and the College, and may be considered grounds for charges of professional misconduct.

None of the above should prevent or discourage a therapist from creating an alternative Information and Consent Form to include signed consents for all treatment plans, but it is not the College's position at this time that this is required.

An example of a consent form is below:

I understand that by signing this form that I am choosing to proceed with the treatment and /or treatment plan proposed at this time. I understand that I may change my mind, alter or refuse treatment at any time during this or any other treatment. This completed form will be kept in my client file held by _____ MT.

Please read and sign.

I have been informed of and have understood the reason(s) for receiving massage to my

_____ breast tissue

Regarding massage of my breast(s), I have been informed of the clinical indicators for breast massage that relate to my situation: _____ (Massage Therapy Standards of Practice).

As well, I understand that the nipples and/or areolas of my breasts will not be touched during the breast massage

_____ chest wall muscles _____ inner thigh(s) _____ buttock(s) (gluteal muscles)

by _____, MT _____ Registration # _____.

For any of the above areas, I have been informed of the reasons, the benefits, risks and side effects, and the proposed draping (covering). In addition, I have had all of my questions regarding this treatment answered by the massage therapist.

I understand that I can alter or rescind my consent at any time during this or any treatment.

At this time, I am voluntarily giving my consent for the treatment and/or treatment plan as discussed with me.

Name _____

Date _____

Signature: _____

Thank you for your cooperation.

USE OF TITLES AND CREDENTIALS

Background

The *Regulated Health Professions Act*, the *Massage Therapy Act* and Regulations provide members with protection of title. In Ontario the use of the title Massage Therapist, Registered Massage Therapist, the French equivalent and any variation or abbreviation is reserved for individuals registered with the College of Massage Therapists of Ontario (the College).

Title protection as part of the regulation of a profession is one mechanism used to help the public readily identify individuals registered with the College. It is a privilege extended to those massage therapists who have met the entry to practice requirements and maintain their accountability to a regulatory body.

The use of titles, designations or credentials that are inappropriate, unclear or inconsistent may undermine the purpose of the protected title by making it difficult for the public to determine whether a person is a member of the profession. The (proposed) advertising regulations made under The *Massage Therapy Act* sets out that an advertisement must not contain any term, title or designation that indicates or implies the member is a specialist in any aspect of massage therapy. This position statement further clarifies the use of titles and credentials by members in order that the public will be able to better identify massage therapists who are members of the College. The intent of the position statement is also to guide the members in the use of titles in conjunction with their practice of the profession.

Position Statement

This position statement has been drafted to provide members with information on which titles, designations and credentials they may use.

1. Massage therapists who have been issued a certificate of registration by the College are entitled to use the protected titles and trademarks that indicate their registration with the College. These are:

Massage Therapist	M.T.
Registered Massage Therapist	R.M.T.
Massothérapeute	
Massage Therapy	Massothérapie
Therapeutic Massage	Massage Thérapeutique

2. The College recommends the use of the protected title as the member's primary means of indicating his or her professional status in Ontario in conjunction with their practice of the profession.
3. The College recommends that academic degrees or certificates from recognized universities, colleges and/or private vocational schools be used after and in conjunction with the member's protected title.

4. The order of using protected titles and academic credentials should be consistent with the position of the member. If a member is working as a massage therapist, the College recommends that protected titles be used before academic credentials. If the member is working in an educational or other setting it may be more appropriate for them to use their academic credentials first.
5. The use of any other title, term or designation that indicates or implies the member is a specialist in any aspect of massage therapy is not permitted. Members may take courses focused on a specific modality that is not recognized as a specialty or as being in compliance with the Standard of Practice. Reference to these courses, or the title conferred by the completion of them, should not be used by the member. The public may misinterpret these other titles as specialized fields of knowledge with established professional standards of practice and licensing regulations.

People who are not registered with the College cannot use the protected titles. Section 7(1) of the *Massage Therapy Act* forbids anyone who is not a member of the College from using the titles "massage therapist" a variation, or **RMT Designation**

Introduction

The use of any title or designation is an effective method of quickly imparting considerable information to others, especially in the case of professional designations. Some titles such as "Massage Therapist" are protected by legislation and their use is only granted through registration with the regulatory body for the profession.

Background

The principle purpose for protection of title is to prevent confusion or misrepresentation to the public. One of the central elements of the *Regulated Health Professions Act (RHPA), 1991 and the Massage Therapy Act, 1991* is the protection of title. In Ontario, the title "Massage Therapist" or "M.T." or any variation or abbreviation of them, is reserved for individuals registered with the College of Massage Therapists of Ontario (the College). Title protection allows the public to readily identify those individuals who are registered with the College and are consequently accountable for the delivery of massage therapy service that meets the established standards of the profession.

There has been ongoing confusion about the appropriate designation that distinguishes a Massage Therapist who is registered with the College. Many members of the public are unaware of protected titles and believe that the designation for registered members of the College is RMT and that members using the MT designation are not trained to the same standard or registered with the College.

Position

Massage therapists should represent themselves in a clear, open, and straightforward manner. In order to achieve transparency and to avoid misrepresentation or confusion for the public, it is essential that therapists use a consistent designation.

The Council of the College has determined that, in the interest of transparency, RMT should be the only designation used by members of the College, abbreviation or an equivalent term in another language.

CONDUCTING PUBLIC EDUCATION CLASSES

Background

Education of the public through the use of community educational opportunities is recognized as a valuable mechanism to improve public health. These classes are often conducted by health professionals on a voluntary basis as part of the individual professional's public service or for a nominal fee. Massage therapists are often asked to participate in classes offered through fitness centers, public health departments and community centers.

Position

The College does not believe that members of a public education class are clients of the massage therapist. This is because no health history is taken, no individual assessment or treatment is provided and no health record is maintained.

Guidelines

Massage therapists who conduct public education classes need to consider the following:

- The difference between the education provided to individuals during a treatment encounter and the education provided to consumers in a classroom setting;
- The type of program that they are offering; and
- The expectations of the participants regarding the information they have obtained.

Individual Versus Group Education

The information provided in a public education class should be general in nature. It may be related to the management of a particular condition i.e. stress or pregnancy, but should not pertain to the consumer's specific medical condition. Class members need to be advised of this prior to participation in the class and should be directed to their health care professional if they ask questions specifically relating to their condition.

The Type of Program Being Offered

Massage therapists must be clear about the type of class they are conducting.

The most common types of classes include:

- Educational seminars of a general nature focusing on such topics as wellness or stress management; and
- Instruction in basic massage therapy techniques offered to couples as an adjunct to pre-natal education or to new mothers who wish to use massage therapy techniques on their babies.

Massage therapists who offer any courses that provide instruction in specific massage therapy techniques should advise participants that these techniques are for use on family and/or friends only. The public should understand that the instruction they are receiving does not qualify them to call themselves a massage therapist or use the information for commercial purposes.

Massage therapists should not offer a certificate of completion at the conclusion of the course as this may lead participants to believe that they are now qualified to practice massage therapy. The certificate could also be used to mislead the public.

Massage therapists should have information on more formal massage therapy training available if participants show an interest in obtaining further education.

Expectations of Participants

The massage therapist, in any written literature about the class and as part of the introduction to the session, should clearly identify:

- Their qualifications and relationship to the sponsoring agency; and
- The learning objectives for the program.

Scenario

Nancy is a massage therapist who operates a practice in a suburban area near a large city. One of her clients (Joan) is a recreation co-ordinator at the local community centre. Part of Joan's job is to come up with new ideas for public education classes. Joan tells Nancy that the community centre offers various parenting courses for new mothers and their babies. The program provides health, educational and fitness information to the participants. Joan asks Nancy if she would consider incorporating massage therapy techniques into the program. Nancy believes that massage therapy techniques are an excellent way for mothers to bond with their babies. In addition, she decides that this would be a good opportunity to become better known in the community.

During the spring session, Nancy teaches three sessions on massage therapy and relaxation techniques as part of the course. She is quite pleased with the response from the mothers. A couple of months later, Nancy is in the community centre and notices a flyer on the bulletin board. One of the participants in the parenting programme, is offering her services in massage therapy to new mothers.

Nancy is quite distressed. She calls the College and confirms that this individual is not a massage therapist. In conducting the class, it was never Nancy's intention to have course participants believe that they had received training as massage therapists and that they could offer their services commercially.

Conclusion

Nancy had the best of intentions in offering the massage therapy instruction as part of the parenting program. She did not expect that the information would be used in this way. It is very hard for Nancy or any other instructor to control what participants do with the information they receive in a class.

In future, however, Nancy will ensure that she tells participants that the techniques they are learning are some components of massage therapy practice, and that they are to be used only on family and friends. She will explain that the practice of massage therapy is regulated in Ontario, and if asked, will have information available on the educational institutions in her area that offer training in massage therapy.

INHALATION THERAPY

Position

The College of Massage Therapists of Ontario acknowledges the practice of delivery of demonstrably safe substances, such as eucalyptus, by inhalation, through commonly applied means in hydrotherapy/massage therapy practices, such as steams, to be within the scope of practice of massage therapy.

It is the position of the College that this practice does not constitute a controlled act as described in the *Regulated Health Professions Act, 1991* Sec. 27(2)5. This practice does not constitute "administering" a substance as we understand the Act to mean it. We understand 'administering' to mean the direct nebulizing of substances such as medications which, if improperly administered, would result in a substantial risk of harm to the public.

INTER-PROFESSIONAL DISAGREEMENT

Background

Massage therapists, whether they practice in an independent setting or as part of a multi-disciplinary team, are expected to work in collaboration with other health care providers in order to meet the client's needs.

In most cases, treatment objectives and methodologies will be complementary and all that will be required is communication between the client, therapist and other provider to ensure that the plan of care is co-ordinated.

Occasionally practitioners may disagree about the cause of the client's problem or the best treatment method to address it. In these circumstances, the massage therapist is expected to discuss the situation with the client and other provider to achieve the most suitable outcome for the client.

Position

The massage therapist has an ethical obligation to advise the client if he/she has concerns about the treatment methodology or philosophy being used by another clinician. The massage therapist will also need to advise the client if instructions are being received from a physician or clinic owner that the massage therapist believes should not be followed. The obligation to the client takes precedent over any employment obligations when the two values conflict.

Guidelines

In managing professional disagreements, massage therapists should ensure that:

- The client is not placed in the middle of a disagreement between professional;
- The client's consent is obtained prior to speaking with the other provider;
- The concern is discussed with the other provider and an attempt is made to resolve the disagreement;
- The client is provided with the most accurate information possible regarding the massage therapist's rationale for his/her treatment decision; and
- The client's choice of provider and treatment approach is respected.

Massage therapists should remember that in most cases there are several generally accepted treatment approaches to manage a condition. Discussion of treatment alternatives, should focus on the pros and cons of the methods available, and should avoid any assumptions or judgmental comments by the massage therapist about the practice of other professions.

Scenario

Cathy is a massage therapist who works in a multi-disciplinary clinic owned by a physician. A client (Ms. Johnson) arrives at the clinic complaining of leg pain. She is seen by the physician who prescribes medication and refers her for massage therapy for her legs.

Cathy conducts an assessment. She believes that while Ms. Johnson is suffering from leg pain, the source of the problem is her low back. Cathy discusses the case with the physician and asks if x-rays have been taken. The physician advises Cathy that x-rays are not necessary because he is sure that the client is experiencing muscular leg pain resulting from her fitness activities. He advises Cathy that it is her job to treat the client not to diagnose the cause of the problem. Cathy feels caught between meeting the needs of the client and following the direction given by her employer. After much thought, Cathy speaks with the client and suggests that she

might want to consider a second opinion.

The client thanks Cathy and does obtain a consultation. Following an assessment and the taking of x-rays, that physician advises Ms. Johnson, that the pain in her legs is referred from her low back. He recommends medication, physiotherapy and massage therapy treatment. The client returns to Cathy for her massage therapy treatment and receives physiotherapy at another clinic. Within a few weeks, Ms. Johnson's condition is resolved.

Conclusion

Cathy demonstrated good clinical skills in assessing the client's condition and identifying the possible cause of her leg pain as a back disorder. When confronted with a professional difference of opinion, Cathy first went to the physician and discussed the case. When resolution was not successful, she elected to meet the client's needs rather than her own personal employment needs. By providing the information to the client, she helped to ensure that appropriate treatment was received.

POST-TERMINATION RELATIONSHIPS

Legislation and Policy

The *Regulated Health Professions Act*, 1991(RHPA) prohibits sexual contact between clients and their treating health care practitioner. It also prescribes a mandatory penalty of revocation of a member's certificate of registration if he/she is found guilty of this offence.

In addition, it places a mandatory obligation on regulated health professionals to report incidents of sexual abuse between clients and professionals that comes to their attention in the course of practicing their profession. The College has adopted a philosophy of zero tolerance with respect to sexual abuse of clients by its members. Practitioners who violate this policy will be prosecuted.

Position

The College advises that massage therapists should not enter into in a sexual relationship with a former client for a period of one year following the date of the last professional contact with the client. This means that a massage therapist may not initiate or respond to any client-initiated invitation to begin a sexual relationship.

Guideline

The College recognizes that a variety of factors need to be considered before deciding when or if a post-termination relationship can commence. These include:

- Determining whether a personal or professional relationship exists with the individual; and
- Evaluating the nature of the treatment provided, the duration of the professional relationship, and the location of the practice.

In some situations, it may never be appropriate for a post-termination relationship to develop (such as cases involving fragile or vulnerable clients).

Key factors in assessing the therapist/client relationship

Clarification of the type of relationship

- A client is any individual who attends upon a Massage Therapist to receive therapeutic services. The client may be a member of the public, another regulated health profession or another massage therapist.
- A client encounter may include, in addition to treatment, some or all of the following: the taking of a case history, the establishment of a treatment plan, the maintenance of client records, and the charging of a fee for services rendered. The providing of services on a voluntary basis or the exchanging of services with another health care provider, does not in and of itself, make the relationship personal and therefore, does not remove the obligations inherent in the therapist/client relationship.
- Massage therapists must make clear distinctions between those individuals with whom they have personal versus therapeutic relationships. These are known as a “dual relationships”. An example of a dual relationship is a massage therapist who also provides massage therapy to a family member.

Nature of the Treatment

- The context in which massage therapy services are offered varies greatly.
- Clients who receive massage therapy treatment to relieve the aches and pains associated with sporting activities may be very different from clients who receive treatment for stress management as an adjunct to counseling.
- Some clients who attend for treatment will have a history of previous sexual abuse. This fact may or may not be disclosed to the therapist.
- Massage therapists, therefore, need to assess the vulnerability of their client when contemplating a post-termination relationship.

Location of the practice

- Massage therapists who work in small communities may be required to provide health care to the entire population.
- It is not the intention of these guidelines to prohibit the massage therapist from having a social life.

Duration of Treatment

- A single or irregular professional encounter with a client does not develop the same intensity of relationship as a long-term, ongoing professional relationship with a client.

Scenario

Susan operates a massage therapy clinic close to a large university teaching hospital that runs an alcohol and drug treatment centre. Clients are often referred to Susan's clinic for treatment to assist them with stress management and helps them deal with muscular-skeletal aches and pains associated with withdrawal.

John began attending for treatment twice weekly. He was pleased with the results he received from treatment and told Susan that he appreciated both her technical skills as a massage therapist and the attentive way that she listened to him. He advised her that in the past people had not responded to him in a positive way.

After a couple of weeks of treatment, John began arriving with a cup of coffee for Susan. Soon after, he started to give Susan small personal gifts. Susan began to get uncomfortable with the interest that John was showing in her. Susan found John to be very attractive and personable but recognized his vulnerability at this stage in his

treatment process.

At the next visit, John asked Susan out for dinner. Susan thanked John for the invitation and declined. She spent some of the treatment time talking to John about the client/therapist relationship, the prohibitions on personal involvement and the reasons for these rules.

John appeared satisfied that Susan's refusal was not a rejection of him personally and continued to attend for treatment.

Conclusion

Susan's response to John was ethical and professional. She recognized that John was at a vulnerable stage in his life and had misinterpreted Susan's interest in him as being of a personal rather than a professional nature. Susan realized that this had much to do with John's difficulty with personal relationships in the past. She was able to clarify the nature of their relationship without offending John.

RHPA - Regulated Health Professions Act

In Ontario some health professions are regulated by health regulatory colleges. These are not teaching colleges but self-governing bodies established by law to regulate the profession. For example, the College of Pharmacists regulates all of the pharmacists in Ontario; the College of Midwives regulates midwives; and the College of Chiropractors regulates chiropractors. College of Massage Therapist regulates Massage Therapists (CMTA)

These colleges protect the public's right to safe, effective and ethical health care, and they do so under a law called the Regulated Health Professions Act.

Entry to Practice Requirements

- To practice as a regulated health professional in Ontario, an individual must be a member of the regulatory college for their chosen profession, and hold a certificate of registration from their college.
- Regulated health providers are required by law to deliver competent, ethical and professional services, and are accountable to the public through their respective colleges for their professional behaviour and activities.

- Being registered entitles the individual to practice in Ontario and to use the relevant protected title. For example, only individuals registered with the College of Respiratory Therapists can call themselves "respiratory therapists," offer services pertaining to respiratory therapy or hold themselves out as qualified to practice respiratory therapy in Ontario. The same applies to Massage Therapists.
- The following entry-to-practice requirements are common to all health regulatory colleges in Ontario, as required under the *Regulated Health Professions Act*:
 - Successful completion of rigorous educational and training requirements for entry to the profession
 - Successful completion of required examinations to evaluate readiness for professional practice and knowledge of ethics and standards of practice
 - Fluency in English or French
 - Proof of professional liability insurance
 - No conviction for a criminal offence or an offence related to the regulation of the practice of the profession
 - No findings (and no current proceedings) of professional misconduct, incompetence or incapacity in Ontario in relation to another health profession or in another jurisdiction in relation to the profession or another health profession
 - Canadian citizenship, permanent residency, or authorization under the Immigration Act to practice the profession
 - Completion of application process and payment of an annual registration fee
- Once registered, individuals must:
 - Practice according to the laws governing health professionals in Ontario;
 - Practice according to the regulations, guidelines and standards of practice of the college and any other relevant bodies;
 - Comply with the quality assurance program to promote continuing competence.

Massage Therapist

Definition: Massage therapists assess the soft tissue and joints of the body and administer massage treatments to relieve pain and symptoms of stress, or to develop, maintain, rehabilitate or augment physical function.

Entry to Practice Requirements:

- A diploma in massage therapy from a private vocational school in Ontario or a College of Applied Arts and Technology, or a course in massage therapy at an educational institution outside of Ontario that the Registration Committee considers to be equivalent
- Successful completion of a provincial exam
- Proof of professional liability insurance