

Patient Behaviour Decision Tree

Evaluating Patient Behaviour

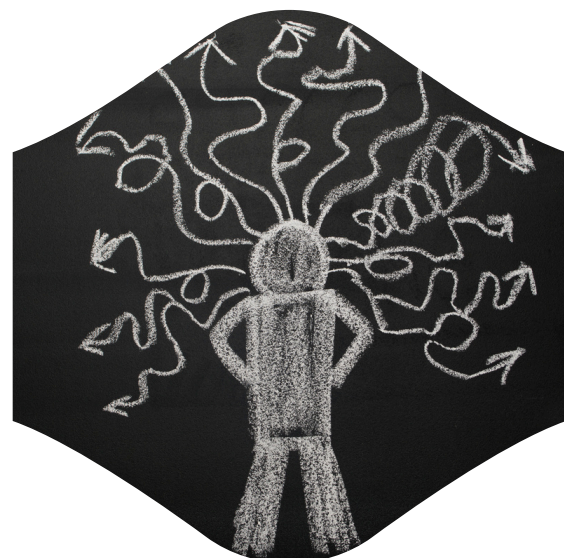
Many RMTs experience patients making comments that make them uncomfortable. In some cases, the behaviour may be clearly sexual in nature, and the RMT doesn't know how to react in the moment.

In other situations, the behaviour may feel more ambiguous, leaving the RMT unsure whether a professional boundary has been crossed, despite their discomfort.

The patient may have tried to minimize or justify their behaviour, which can lead the RMT to question their reaction or whether they should address it.

This resource provides insight into:

- How to determine whether a patient's behaviour is inappropriate or ambiguous.
- Advice on how to react in the moment when a patient is behaving inappropriately.



Inappropriate vs. Ambiguous Behaviour

There are several methods to help you determine whether a behaviour is appropriate, ambiguous or inappropriate.

The following framework can help you assess behaviour.

➤ Clinical Relevance

Is this action appropriately related to treatment?

- **Appropriate** – “This area is sore when I run.”
- **Ambiguous** – “As you may be able to tell, I work out a lot.”
- **Inappropriate** – “You have a really sexy body.”

➤ Professional Standards Test

Would this behaviour be considered acceptable to say to another health professional, like a doctor or nurse?

- If the answer is no, it is inappropriate.
- If you hesitate when answering, it is still appropriate to set a boundary.

Inappropriate vs. Ambiguous Behaviour

➤ Pattern of Behaviour

- Was it a single comment that was neutral or related to a personality characteristic, such as “You’re very kind”? If so, it may be ambiguous.
- Was it repeating or escalating behaviour, such as repeated comments about appearance? If so, this can become inappropriate.

➤ Negative Impact

- Even if a patient says they were “Just joking”, if the behaviour makes you uncomfortable or crosses a professional boundary, it is inappropriate.

Inappropriate vs. Ambiguous Behaviour

► Body-Related Comments

- **Appropriate** – Comments related to treatment, symptoms, pain or function.
- **Ambiguous** – General body-related comments that may or may not be related to treatment, e.g. “You’re strong.”
- **Inappropriate** – Any sexualized or appearance-based comments.

► Massage Therapy Context

- Behaviour that may seem minor in a different setting may be inappropriate in massage therapy because the profession increases vulnerability and requires heightened boundary awareness by:
 - Patients being undressed.
 - Treatment involving therapeutic touch.
 - Private, closed-door setting.

Inappropriate vs. Ambiguous Behaviour

➤ Trust Your Instincts

If something feels off, you should treat it as a boundary issue.

- You don't need any proof to set a boundary.
- You don't need justification for your discomfort.
- It's important to reinforce your boundaries early and often.

➤ Documentation Standard

- If a behaviour is not appropriate to document in your clinical notes, it does not belong in the treatment room.

Examples of Behaviours

Below are examples of behaviours that may be considered appropriate, ambiguous or inappropriate.



Appropriate Behaviour

- Clinically relevant
- Maintains a professional tone
- Stops any unwanted behaviour immediately and permanently when redirected.



Ambiguous or Boundary Testing

- Personal questions
- “Jokes” that cause any discomfort
- Comments about the RMT’s body or appearance
- Repetition of any of the above behaviours after attempted redirection

After any ambiguous behaviour, you should set a boundary and closely monitor whether it is respected.

Examples of Behaviours



Inappropriate Behaviour

- Sexual comments or requests
- Indecent exposure
- Touching the RMT
- Ignoring or challenging an established boundary

In cases of inappropriate behaviour, set a firm boundary or end the session immediately.

Sometimes RMTs are unsure of exactly how to react or what to do when a behaviour is inappropriate or uncertain. The decision tree below was designed to help take some of the guesswork out of these uncomfortable situations.



Decision Making Framework



At any point, if you feel unsafe, skip steps and end the session immediately. Begin the framework after patient behaviour occurs

1 Identify the Behaviour

Is the behaviour clearly inappropriate?
(e.g. sexual comment, touching, exposure, explicit request)

YES – Go to step 3

NO/UNSURE – Go to step 2.

2 Set a boundary

For mild or ambiguous behaviour (such as odd comments or personal questions), set a clear verbal boundary.



If the behaviour stops - continue the treatment and monitor



If the behaviour continues - escalate (go to step 3)

3 Address the behaviour

If there was a clear boundary violation (e.g. repeated comments, sexual requests, inappropriate draping adjustments), first:



State: "This is not appropriate."



Warn: "If this continues, I will end the session."



Then ask yourself - did the behaviour stop?

If yes, continue only if you feel safe.

If no, go to step 4.

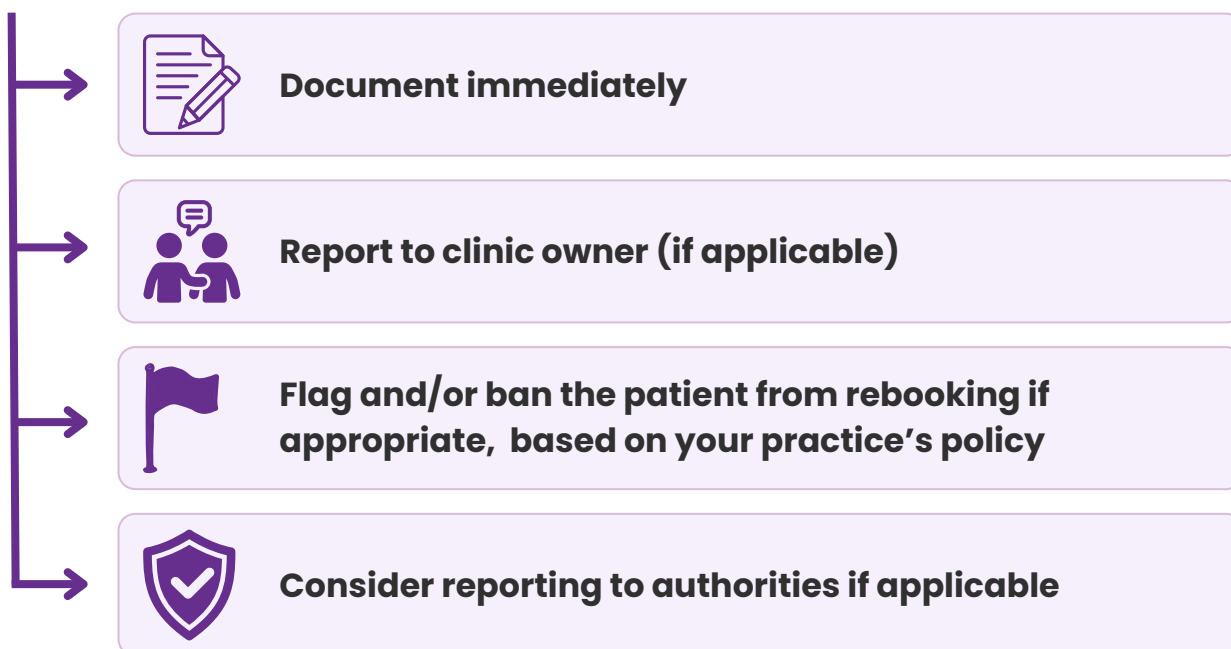
Decision Making Framework

4 End the session

If this is ongoing, severe behaviour (e.g. touching, exposure, explicit harassment), you should:



5 After any instance, regardless of outcome you should:





Common Rationalizations from Patients/RMTs

When you set a boundary, a patient may try to rationalize their behaviour, make excuses for it or make it seem less bad.

Some common rationalizations may include:

- “I was just joking.”
- “I didn’t mean it like that.”
- “Other therapists are fine with it.”
- “I’m just being friendly.”
- “You must get this all the time.”
- “I didn’t know this wasn’t allowed.”
- Apologizing but continuing the behaviour anyway.

RMTs may also find themselves trying to excuse behaviour, downplay it or try to avoid any conflict.

RMTs may be thinking things like:

- They didn’t really mean it.
 - It’s not that bad.
 - I don’t want to overreact.
 - This is something everyone deals with.
- I don’t want to cause a scene.

To stay grounded:

- Make decisions based on the behaviour, not the perceived intent.
- Remind yourself that you are evaluating the behaviour, not the person.
- Repeat your boundary as many times as necessary (don’t debate).
- Be mindful of whether the behaviour changes, regardless of apologies.
- Give yourself permission to escalate when you have a reasonable boundary concern – do not wait for certainty.

Maintaining Your Boundaries

Maintaining strong boundaries is essential for safe, ethical massage therapy practice. Some uncomfortable situations are more obviously inappropriate, but others may feel more uncertain. This is especially true when the behaviour is framed as a joke, minimized or accompanied by reassurance.

With this type of situation, you do not need certainty or knowledge of intent before acting. When behaviour is outside of a professional, clinical context, it is appropriate to set a boundary. If that boundary is not respected, it is appropriate to escalate the response, which may include ending the session.

Consistent boundaries, which this resource can help you develop, support your safety and reinforce shared standards across the profession.

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