



Registered Massage Therapists'
Association of Ontario

1243 Islington Avenue, Suite 704
Toronto, Ontario M8X 1Y9

Tel 416.979.2010
Toll Free 1.800.668.2022
Fax 416.979.1144

RMTAO.com
RMTFind.com

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Marnie Lofsky
Director, Professional Practice
College of Massage Therapists of Ontario
1867 Yonge Street, Suite 810
Toronto, Ontario
M4S 1Y5

RE: Consultation on Proposed New Standards for Maintaining Professional Boundaries and Preventing Sexual Abuse

Dear Ms. Lofsky,

The Board of Directors of the Registered Massage Therapists' of Ontario (RMTAO) would like to commend the College of Massage Therapists of Ontario (CMTO) for their work and due diligence in drafting the new *Standards for Maintaining Professional Boundaries and Preventing Sexual Abuse* in response to the passage and introduction of Bill 87, *Protecting Patients Act, 2017*. The RMTAO would also like to thank the CMTO for consulting with registrants and granting the opportunity to provide feedback to the proposed standards.

The RMTAO Board of Directors recognize the significance of the introduction and implications of the *Protecting Patients Act* and the requirement of the CMTO to update the standards to ensure registrant alignment with the Act. There are however some specific areas of concern in the proposed standards that have been identified by the RMTAO Board of Directors.

Part A: Maintaining Professional Boundaries

The RMTAO believes that "Part A: Maintaining Professional Boundaries" succinctly outlines the ethical and moral criteria for the profession to engage in the respectful and professional practice of Massage Therapy. However, the RMTAO Board of Directors has some concerns with the proposed standards outlined in this section.

Part A, Standard 1: Establishing a Practice Setting that Maintains Professional Boundaries

The RMTAO agrees with the majority of the content outlined in Standard 1, with the exception of the sixth bullet point: "Does not contain monitoring, video or photographic

recording equipment in areas designated for clinical assessment or treatment.” While the intent of the point is clear, it is based on the assumption that any monitoring, video or photographic recording equipment is owned purely for non-clinical usage. For the most part, these devices or equipment are present for other clinical reasons. Massage Therapists make use of their personal electronic devices, including smartphones or tablets, to stream music in the treatment room or to take photographs for the purposes of assessment records and client education. These devices can also be used as the main conduit for communication or record keeping for the Massage Therapist in the course of their professional practice. It may be more precise to establish that any electronic device in the treatment room must have a specific clinical function within the boundaries of professional practice.

Part A, Standard 2: Interpersonal Behaviours and Non-Verbal Communication

The RMTAO agrees with the significance of interpersonal behaviour and non-verbal communication in maintaining professional boundaries, however we also recognize that each client and situation can be different and require their own professional considerations. It is important that the boundaries are communicated clearly and concisely so that they can be uniformly applied to individual professional situations. Professional behaviour should be encouraged, rather than situational requirements prescribed.

We suggest the removal of the examples provided in the parenthesis contained in this section. Specifically, the use of the example of hugging, as a physical gesture. Providing specific examples implies forbidden actions and restricts the capacity of the therapist to discern appropriate context and behavior within the professional relationship.

There is no consistent definition of “professional attire appropriate to health care professionals” as outlined in the first bullet point. This could lead to misinterpretation of the standard. The same is true of the last bullet point relating to gestures that may be interpreted differently than intended. It would be difficult to determine which gestures may be interpreted as hostile, sexual or demeaning by a client.

Rather than using restrictive language by outlining what the Massage Therapist must refrain from doing, the RMTAO suggests less prescriptive and more positive language be used, as in bullet points 3, 4 and 5, which offer positive direction for interpersonal and non-verbal interaction with the client while allowing for a level of variation.

The RMTAO Board of Directors believe that the introductory paragraphs, as well as bullet points 3, 4 and 5, are sufficiently broad and all-encompassing, therefore removing the necessity of bullet points 1 and 6, as well as the reference to hugs and all words contained in parentheses in this standard.

Part B: Preventing Sexual Abuse

The RMTAO believes that the introduction to part B, including “Defining Sexual Abuse” is a timely reminder to the profession given the passage through the Legislative Assembly of Ontario of Bill 87, Protecting Patients Act, 2017. The RMTAO also agrees that sexual abuse is often preceded by growing boundary crossings and violations which may be avoided by a clear understanding of boundaries and the limits of the professional relationship.

Standard 1: Treatment of Sensitive Areas.

The RMTAO understands that the definition of sensitive areas has been provided to the profession since the adoption of the Position Statement: Treatment of Sensitive Areas, Information Sharing and Consent Involving Treatment for Conditions of the Chest Wall Musculature, Breast Tissue, Inner Thigh and Gluteal Region, February 17, 2004. With the adoption of Bill 87, the Government of Ontario through the Ministry of Health and Long-Term Care has made it clear that they will require all regulatory Health Colleges to strongly enforce the Zero Tolerance Policy advocated by the Task Force on Sexual Abuse. The RMTAO strongly supports the adoption of these principles and criteria. However, Bill 87 does not actually identify any new areas of concern for massage therapy that were not originally identified in 2004.

The RMTAO Board of Directors does, however, have some concerns with specific standards outlined in this section.

Part B, Standard 1: Section A: Treatment of Sensitive Areas Must be Clinically Indicated

The requirement that all treatments be clinically indicated is already inherent in any treatment by any health care professional. It is presumed that all aspects of the application of treatment are within a clinically indicated professional practice.

The second paragraph of this section includes the phrase “...a client must request the massage of the sensitive area and must further provide informed consent that is documented in writing prior to treatment being initiated.” This presumes that the client is aware of all their clinical needs and of the reasons that massage therapy may be clinically indicated, which is not the case with the majority of clients. If the Massage Therapist, in their clinical judgement, believes that treatment of a sensitive area is clinically indicated, they may initiate discussion of the benefits, risks and alternatives to treatment of a sensitive area, as outlined in this section. It is then up to the client to decide if they wish to proceed with the treatment plan, including the sensitive area. The requirement for the client to specifically request the treatment of a sensitive area is not a necessary step if the massage

therapist has sufficiently discussed the treatment of the sensitive area with the client and agreement and consent is obtained.

This section also outlines the specific clinical indications for each of the identified sensitive areas. The clinical indications for breast massage includes the requirement for the Massage Therapist to obtain written confirmation by a physician of the specific diagnosis of the breast pain and breast tissue impairments resulting from a concurrent health diagnosis. The RMTAO takes the position that the education of Massage Therapists allows them to independently clinically assess an area through the applicable subjective and objective information obtained. The decision as to whether the treatment of any given area is clinically indicated must be left to the discretion of the individual health professional. To create a condition within a standard that requires permission from another health care provider to proceed with treatment reduces public access to health care.

Part B, Standard 1: Section C: Treatment of Sensitive Areas is Discussed with the Client and Written Informed Consent is Obtained.

The RMTAO does not believe that written consent for the treatment of sensitive areas is necessary to fulfill the requirements outlined by Bill 87. The RMTAO is unaware of any other health professional that is required to obtain such comprehensive informed consent. In addition, the information contained within this section lacks clarity as to whether separate written consent is expected to be obtained prior to each treatment session or if only one consent form is required for the entirety of the treatment plan.

We believe that the sample consent forms provided by the CMTO are unduly restrictive to the Massage Therapist, will create fear and suspicion in clients and will diminish the client's belief that they can withdraw their consent at any time. This undue process of obtaining written consent may also cause the client to withhold consent and forego necessary care. It may also be viewed by the client as a method for the Massage Therapist to protect themselves from legal repercussions rather as a platform to provide a more thorough understanding of the treatment to the patient. Written consent forms may also create a sense of obligation on behalf of the client, resulting in a hesitancy to withdraw the consent if the client's needs or desires have changed. A lack or degradation of trust in the therapeutic relationship is not in the best interest of the client and the RMTAO does not support the requirement of written consent for the treatment of sensitive areas. We do however recognize that there are occasions where RMTs may find it appropriate to obtain written consent for such treatments, and we support their right to use their best judgement.

The Board of Directors of the RMTAO believes that the purpose of the proposed *Standards for Professional Boundaries and Prevention of Sexual Abuse* should be to clarify the practices

and procedures that will reduce miscommunication, misunderstandings and assumptions, thereby protecting the public from boundary violations.

We hope that the implementation of the final version of these standards will allow Massage Therapists and clients to build therapeutic relationships of trust, open communication and understanding. We thank you for your consideration of our concerns and feedback. The RMTAO Board of Directors hope that we have been of assistance in further clarifying these proposed standards, so that the final standards will be easily understood and actively adopted by RMTs across Ontario.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Krystin Bokalo', written in a cursive style.

Krystin Bokalo
Chair, Board of Directors
Registered Massage Therapists' Association of Ontario