

the College STANDARD

November 2005 • Volume 12 Issue 3



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and complementary/
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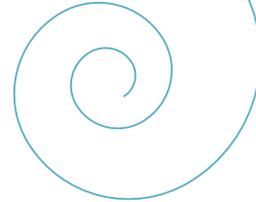
Providing complementary
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Registration Renewals –
Photo ID and Receipts



the College STANDARD

The College of Massage Therapists of Ontario is dedicated to excellence in protecting the public, serving its members, and promoting the highest possible quality of the practice of massage therapy in a safe and ethical manner.



Council

Executive Committee

Rick Overeem, MT, President
District 6, Voice Mail #133

Alpa Patel, MT, Vice President
District 2, Voice Mail #139

Jane Mederak, Executive Member
Public Member
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Council Members

Denise Aumont, MT
District 1, Voice Mail #131

Qodrat Azima, Public Member
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Lynn Beyak, Public Member
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Lynn Dobson, Public Member
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Shanna Grabinsky, Public Member
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Wendy Hunter, MT
District 4, Voice Mail #136

Contributors This Issue

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The College Standard is published quarterly by the College of Massage Therapists of Ontario to inform its membership about issues related to the profession as well as the activities and decisions of the College. The Standard also provides a forum for discussion of related issues and professional practice. The views expressed in the articles are those of the author and do not necessarily represent the official position of the College.

Letters to the editor and submissions on topics of interest to the profession are welcome. To be considered for publication all letters must be signed and provide the writer's daytime telephone number. Any unsolicited material cannot be returned unless it is accompanied by a self-addressed, stamped envelope. No part of this publication may be reproduced without permission from the College of Massage Therapists of Ontario.

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from the PRESIDENT



As a professional, have you ever wondered what it is that you actually do for your client? How do you know what the outcome of using a particular manipulation during the course of treatment is? Is it simply because you have performed a certain technique numerous times and it actually works? Is it because someone told you that it works? Have you given any thought to what the effects of using a certain technique really are? In this profession, there are many unanswered questions as to why massage therapy has its clinical benefits in treatment.

The need for massage therapy practitioners to engage in research is vital. It is becoming more and more evident that this profession needs to develop clinical practice guidelines and best practices. Good research can enhance and challenge the status quo and help enhance the day-to-day work of massage therapists as they seek to accomplish the increasingly complex tasks of healing, rehabilitation and health promotion.

We live in an ever-changing world. Today, consumer use of massage therapy as a form of health care is growing, according to the latest Collis and Reed survey. There is much more acceptance of massage therapy and its uses.

One of several reasons for this is an increasing awareness and understanding of the professional standards and competencies as defined by the College and demonstrated by the profession.

Another is research. Current massage therapy students must demonstrate research literacy. There is an expectation for massage therapists to develop client-focused, evidence-based treatment plans as dictated by modern health care practice. It is through systematic processes of research and inquiry that we can expand our professional capacities, improve the effectiveness of massage intervention and enhance outcomes for the clients we treat. This would enable the profession to be involved and remain included in today's primary health care system.

So what can you do as an individual practitioner in this regard? Massage therapists can contribute to research in several ways. As President of the College, I would encourage you to donate to the *Massage Therapy Research Fund* of the Holistic Health Research Foundation of Canada. Holistic Health Research is Canada's first and only national registered charitable organization dedicated to supporting research, public awareness and professional education in complementary and alternative health care. Even the smallest donations are gratefully accepted. To donate, visit www.HolisticHealthResearch.ca and follow the instructions. More information about this initiative can be found on page 13.

I would also encourage you to learn more about research. The College Council approved and supports a web-based research literacy course for Complementary and Alternative Health Care (CAHC) Practitioners, developed two years ago. This research course is funded by Human Resources Development Canada along with the Canadian Massage Therapist Alliance and the College. I encourage you to register for the next session of this course offered through Centennial College in January 2006. Interested participants can contact Centennial College at (416) 289-5300 or tdryden@centennialcollege.ca.

The College Council has some new faces since the last College Standard was published. In May, Mr. William Davies, public member, and Vanessa Young, MT resigned for personal reasons. Council also received resignations from Doug Cressman, MT, District 1 and Emily Farrell, MT, District 3. All have contributed enormously to Council throughout their respective terms and I thank them for their hard work and dedication. In District 1, Denise Aumont, MT was acclaimed – welcome, Denise! I would also like to welcome new public member Shanna Grabinsky. A representative from District 3 has yet to be announced.

As always, I welcome your comments or feedback and challenge you to become more informed with regard to research literacy and massage therapy.

Rick Overeem, B.A., MT
President

from
the
REGISTRAR



Effective October 31, 2005, the Workplace Safety and Insurance Board (WSIB) implemented the WSIB Upper Extremity Injuries Program of Care (UEI POC). This is an evidence-based program of treatment for workers in Ontario with a confirmed diagnosis of rotator cuff pathology (including partial tears and tendonitis), lateral epicondylitis and carpal tunnel syndrome.

This program was developed through a collaborative process that included the College, along with representatives of health professional associations, other regulatory Colleges, employer and worker associations and the WSIB. As with the other programs of care implemented by WSIB, this will evolve based on ongoing clinical and program outcome measurements, and on the emergence of new evidence. An independent third party will evaluate health professional, worker and employer satisfaction in addition to health care outcomes, changes to practice patterns and economic benefits.

Information on this new program has been mailed to massage therapists registered with WSIB. The package includes a reference guide, quick reference, fee schedule, forms, measurement tools (QuickDASH) and a three-step clinical screening guide. For those interested in participating in this program, please check the website at www.wsib.on.ca, call the Health Professionals Access Line at 416 344-4526 / 800 569-7919 or e-mail programofcare@wsib.on.ca.

The College has placed a bulletin on its website (www.cmta.com) announcing the two web-based information sessions offered by WSIB in late October for those who can deliver the UEI POC.

Enclosed with this edition of the College Standard is a survey on massage therapists' involvement with WSIB and provision of health care under the Programs of Care. We would encourage all therapists to complete this survey and return it to the College. The College will be using this data, along with subsequent surveys on members' involvement with third party insurance, to gather a broader understanding of the current practice environment in Ontario.

A handwritten signature in blue ink that reads "D Worrad".

Deborah Worrad, CA
Registrar



the bulletin BOARD



New Faces on Council in 2005

2005 has seen a lot of changes on Council. Vanessa Young MT, the professional member from District 5, resigned in May. Because the District must hold an election on January 11, 2006 in accordance with the cycle set out in By-law No. 2, Election of Members to Council, Council made the decision not to run a by-election for that district. William Davies, the public member appointed to the College last year, also resigned in May and was replaced by Shanna Grabinsky.

Doug Cressman MT, the professional member for District 1, acclaimed in the District 1 election on January 11, 2005, resigned in June to take a full-time teaching position at Sault College in Sault Ste. Marie. A by-election was run in District 1 and Denise Aumont MT of Sudbury was acclaimed. At the beginning of September, Emily Farrell MT, the professional member for District 3, resigned because she was accepted into the Master of Science, Anthropology of Health and Illness (Medical

Anthropology) programme at the University of Edinburgh, Scotland. A by-election is being held in District 3 and the outcome will be posted in the "News" section of the College's website, shortly after the election date of November 4, 2005.

The College acknowledges the hard work of Vanessa, Doug, Bill and Emily and their willingness to accept the difficult challenges that arise from protecting the public interest while being sensitive to the concerns of massage therapists. In particular, the College wishes to recognize Emily Farrell for her years of service with both the College and the Board of Directors of Masseurs of Ontario, especially in relation to the work of the Discipline Committee, the WSIB Programs of Care and research into the history of the regulation of massage therapy in Ontario and Canada.

New Council Members

Denise Aumont MT

Denise Aumont became a massage therapist in 2000 after working in another career. She started her own massage therapy business, "Massage Vita Dolce," but sold it after two years, although she continues to work for the business. Denise taught for one semester in the massage therapy program at Collège Boréal, replacing an instructor on sick leave. For three years, Denise has been supervising the massage therapy student clinics at Collège Boréal.

Currently, Denise is a tutor for students in the Sudbury area who require remediation before they can take the Certification Examination. Denise is honoured to represent District 1 on the Council of the College of Massage Therapists of Ontario.

Shanna Grabinsky

Shanna Grabinsky graduated from the University of Guelph in 2003 with a Bachelor of Arts Honours Degree in psychology. She has worked with the Durham District School Board, assisting children with special needs to excel within the school system.

Currently working in sales for a major fashion importer, Shanna says she is always grateful for new experiences and opportunities to learn as much as she possibly can in many areas of life. She was appointed to the Council of the College of Massage Therapists of Ontario in July for a three-year term and looks forward to this challenging opportunity and to contributing to the College's success.



Council Highlights – September 9, 2005

Council welcomed Denise Aumont, MT, Professional Member – District 1 and Shanna Grabinsky, Public Member, to their first Council meetings. Council also acknowledged the resignation of Emily Farrell, MT.

INFECTION CONTROL GUIDELINES

The Quality Assurance Committee approved new Infection Control Guidelines, prepared by a group from the Quality Assurance Working Group of the Federation of Health Regulatory Colleges of Ontario. The evidence-based, online guideline for use in day-to-day practice is available on the Downloads section of the College website at <http://www.cmto.com/about/down.htm>. (In the case of an infectious disease health alert, Ministry guidelines would take precedence).

MEMBERS' E-MAIL ADDRESSES

Council made the decision that although it collects members' e-mail addresses for the purposes of communicating with them and administering the RHPA, members' e-mail addresses will not be placed on the public register.

POLICY ON DISCOUNTS AND PACKAGE DEALS

Council revoked the policy on Discounts and Package Deals. The Council will be looking at a new Advertising Regulation at the December Council meeting and will specify how massage therapists will approach marketing practices within that regulation. Please see page 18 for more information.

POLICY ON DIRECT CLIENT CARE

Council revised the Direct Client Care policy. The revised policy no longer allows the College to consider profession-related activities when counting direct client care hours for registration renewal.

RECORD REGULATION AMENDMENT

To comply with Ontario Bill 171, the Spousal Relationships Law Amendment Act, 2005, the Ministry has directed the College to amend Ontario Regulation 544/94, Amended to O. Reg. 474/99, General, Part III Records, Section 13(2)4iii, removing the phrase "of the opposite or same sex." Members were mailed the proposed amendments and given 60 days to make comment to the College as required by the RHPA.

More details on these items can be found elsewhere in the Bulletin Board.

True or False?

Members may hold an Inactive Certificate for only 2 years.

Answer: False.

In fact, the regulations do not limit the number of years a member can hold an Inactive Certificate. If a member wants to revert back to a General Certificate, they must have the required 500 hours of direct client care in the previous three years or will have to take a refresher course to become eligible for a General Certificate. To learn more, see page 15.

Use of Members' E-mail Addresses

Although the College collects members' e-mail addresses for the purposes of communicating with them and administering the RHPA, these e-mail addresses will not be placed on the public register and made available to the public.

In making this decision, Council considered the huge administrative burden that would be placed on the College by tracking e-mail address changes, as members change their e-mail addresses frequently. Additionally, many members have e-mail addresses that they do not consider to be business addresses and are inappropriate if used in a professional context (e.g., "scootergirl@..."). Council was also concerned about privacy issues that could arise should it make e-mail addresses public. Although e-mail addresses will not be made public, the College considers them a very important avenue of communication between members and the College. The College will continue to expand the number of e-mail messages it sends to members. Members need to keep their e-mail addresses current with the College.

Thank You from the Client Relations Committee

The Client Relations Committee would like to thank all members who responded to the request for comments relating to the article entitled "Client-Centred Care" which appeared in the *College Standard*, March 2005 edition.

The Committee is hopeful that the article sparked discussion among colleagues and provided an opportunity for reflection on your individual practice.

Again, the Committee is very much appreciative of the time and effort put forth by a number of members.

the bulletin

BOARD continued

Policy on Discounts and Package Deals Revoked

Discounts and package deals have been an issue for the College for some time. The policy, as it was written, went beyond the Regulations and therefore neither had the force of law nor was defensible. Council indicated that in accordance with the Professional Misconduct Regulations, massage therapists must post their fees in a visible location in their clinic. They may charge a greater or lesser fee than their posted rates, as long as they indicate the amount that was charged and the reason for it in the client's record. Thus members have always had the ability to charge a different fee to a client on a case-by-case basis.

What is really at issue is advertising and marketing practices. Council has revoked the policy on Discounts and Package Deals and will be looking at a new Advertising Regulation at the December Council meeting which will specify how to approach marketing practices.

In Memorium

Holly Wass MT (December 25, 1962–October 3, 2005)

The College extends its deepest sympathies to Holly's colleagues and friends.

Record Regulation Amended

The government of Ontario recently passed Bill 171, the *Spousal Relationships Law Amendment Act, 2005*. This Act amended all Ontario statutes to remove gender-based spousal definitions. To comply with this statute change the Ministry of Health and Long-Term Care has directed us to amend Ontario Regulation 544/94, Amended to O. Reg. 474/99, General, Part III Records, Section 13(2)4iii which allows for the provision of copies of health records to certain categories of persons.

CURRENT:

13 (2) A member shall provide copies from a client health record for which the member has primary responsibility to any of the following persons upon receiving a written request:

- 4 iii a person, *of the opposite or same sex*, with whom the client is living in a conjugal relationship outside marriage if the client and the person,

A. have cohabited for at least one year,

REQUIRED AMENDMENT:

13 (2) A member shall provide copies from a client health record for which the member has primary responsibility to any of the following persons upon receiving a written request:

- 4 iii a person with whom the client is living in a conjugal relationship outside marriage if the client and the person,

A. have cohabited for at least one year,

NOTE: the phrase "*of the opposite or same sex*" has been removed.

Members have been sent notice of the proposed changes as required by the RHPA and have until **December 2, 2005** to make comments on the proposal to the College. Comments can also be e-mailed to the College at <http://www.cmta.com/member/MemberFeedback.htm>



New Infection Control Guidelines

A group from the Quality Assurance Working Group of the Federation of Health Regulatory Colleges joined together to create a reference document for infection control in the community practice setting. This education reference manual was designed to assist health care professionals in a variety of settings to implement best practices in infection control in order to protect their clients and themselves from disease. The manual was designed to be available online for members of various health professions, with each College selecting the sections that it feels are most relevant to its membership.

The guideline is based on evidence-based measures using the Health Canada recommendations as its basis. The document is laid out in a manner to assist health care professionals in community-based settings to develop their own infection control protocols for their workplace. Routine and additional precautions required to limit the spread of an infectious disease – including hand wash-

ing techniques, cleaning protocols, when to use personal protective equipment, what kind of personal protective equipment to use and how to remove it, and the disposal and cleaning of contaminated materials – are discussed in an easy-to-follow manner. The guideline also provides a glossary of terms, as well as references to assist members in finding additional information on infection control.

The guidelines are meant to be used in day-to-day practice, not in the case of an infectious disease outbreak. If there is a health alert for an infectious disease, any guidelines issued by the Ministry of Health and Long-Term Care would take precedence.

Council adopted the Infection Control Guidelines at its meeting on September 9, 2005. Copies may be downloaded either from the College's website under Guidelines and Bulletins in the Standards and Regulations section or in the Downloads section.

Reminder – Registration Renewal

In late October the College sent renewal forms to all members. Your registration renewal must be postmarked Saturday, December 31 or earlier. If it is not, a late fee of \$100.00 will be charged and your form will be returned to you as incomplete if you have not included the late fee.

If you have not received your form, please download a form from the website (<http://www.cmtc.com/about/down.htm>) or contact us as early as possible to request a form (include your correct address information to ensure that we send your form to the correct address).

New for 2006 – Photo ID Cards and Receipts

The College has developed a new photo ID card which will be reprinted each year. It is similar to the current ID card and includes your picture, registration number, renewal number and an expiry date. The card is self-laminating and instructions are included with it. The ID card and the receipt are printed out as one document with perforations to make it easy to separate the two parts of the form. This change will streamline and speed up the registration renewal process for the College. These cards will replace the card you received upon initial registration.

TELEPHONING OR E-MAILING THE COLLEGE DURING THE RENEWAL PERIOD: The College currently has 7,500 members, the majority of whom usually send their renewals to the College in late December. The staff of

the College become extremely busy in early December and are unable to keep up with the volume of telephone messages and e-mails from members checking to find out if the College received their renewal forms. It would be appreciated if members review all the renewal information sent to them before calling the College for assistance during the period of December 1 to January 21. The College will process the forms as quickly as it can and send out the receipts, so please be patient.

RENEWING ONLINE: You may also want to consider renewing online since the online registration renewal is instantaneous. If you wish to renew online and do not remember your login and password, please e-mail the College the following information: your full name, registration number, the massage therapy school you attended, your date of birth, and your year of initial registration with the College. For your security, we must verify that we are giving information to the correct person.

Staff can give you your login but are unable to see your password. However, staff can change your password. When you send your identifying information, **please include the password you would like us to enter.** Please note that it must be at least six characters and have at least one number and one letter.

The College is always working to reduce expenses and increase service. Renewing online is an excellent way to reduce costs for the College and to ensure that your renewal has been processed.

the bulletin BOARD continued

ACUPUNCTURE REQUIREMENTS: The College is requiring all members who practise acupuncture within the scope of practice of massage therapy to send the College a copy of a certificate proving that they have completed the minimum educational requirements to practise acupuncture as a massage therapy modality. If you are adding acupuncture to your list of modalities you must also send a copy of your acupuncture certificate. The list of schools which meet the acupuncture education requirement can be found on the College's website at <http://www.cmto.com/regulations/regs.htm>, Acupuncture Training Requirements.

Elections 2006

Elections to Council of the College will take place on January 11, 2006 for Electoral Districts 2 and 5, in accordance with the By-laws of the College. Nomination forms have already been sent out. If your business is situated in either Electoral Districts 2 or 5, you will receive a nomination form and a ballot for voting in the elections.

Feedback received from members regarding the recent fee increase proposal indicated that there are still many members who do not realize that the College and the Ontario Massage Therapist Association (OMTA) have very different mandates. The annual election is an opportune time to remind all massage therapists of the objects of the College as described in s. 3 of the Health Professions Procedural Code.

OBJECTS OF THE COLLEGE

1. To regulate the practice of the profession and to govern the members in accordance with the *Massage Therapy Act*, the *Health Professions Procedural Code*, the *Regulated Health Professions Act, 1991* and the regulations and By-laws.
2. To develop, establish and maintain standards of qualification for persons to be issued certificates of registration.
3. To develop, establish and maintain programs and standards of practice to assure the quality of the practice of the profession.
4. To develop, establish and maintain standards of knowledge and skill and programs to promote continuing competence among the members.
5. To develop, establish and maintain standards of professional ethics for the members.
6. To develop, establish and maintain programs to assist individuals to exercise their rights under this Code and the *Regulated Health Professions Act, 1991*.
7. To administer the health profession Act, this Code and the *Regulated Health Professions Act, 1991* as it relates to the profession and to perform the other duties and exercise the other powers that are imposed or conferred on the College.
8. Any other objects relating to human health care that the Council considers desirable.

Those members you elect to Council will be charged with the responsibility to fulfill the objects as stated above. The role of a Council member is not to represent the best interests of the profession, but to protect the public of Ontario through appropriate policy development and creation of standards.

Massage therapists can do their part toward self-regulation by following the Code of Ethics, Standards of Practice, Regulations and policies and by striving daily to act in a professional manner befitting a valued member of the Ontario healthcare team. Massage therapists can also assist by remembering that the Council member elected from their Electoral District cannot further the special interests of massage therapists at Council.

While policy development does necessitate the need to obtain input and information from the members through various means, it is important to remember that the final decisions made by Council must be in keeping with the objects of the College. This is contrasted with the role of the Ontario Massage Therapist Association, which represents and serves its members.

For more information on the differences between the two organizations, please go to <http://www.cmto.com/about/omta.htm>.

providing treatments which make unsubstantiated CLAIMS



The Registration Committee is sometimes asked to review modalities for which there are unverified claims about the effects of the treatment or equipment; for example, that it changes the pH of the blood or gets rid of cellulite. Usually, there are assertions by the manufacturer of the equipment or the school offering courses on the modality, but no studies or tests of any kind to support the supposed effect of the treatment. The evidence, if any, often consists of anecdotes (“All of my clients have experienced a significant improvement in health after I began giving them this treatment!”) and testimonials (“I tried this treatment and it completely cured my bone cancer!”).

Many of these treatments could be considered outright quackery while others may just be over-promotion of unproven procedures or equipment. The College believes that it is in the best interests of the public and the profession that members do not promote unproven procedures, products or services.

Massage therapy, of course, includes many techniques and modalities which have not yet been studied scientifically but have been used for many years and are generally agreed by the profession to provide specific effects for clients. The College’s concern is not for these techniques and modalities, but for the unproven alternative therapies promoted by those who want to make a profit by teaching a course or selling equipment.

Members have a professional responsibility to practise within the scope of practice for massage therapy and to ensure that they make no unverified claims regarding the effects of any treatment modality they provide, either in person or in their advertising.

Clients must be told only what is provable concerning the effects of the treatment; claiming additional benefits might lead to a complaint and the matter might be referred to the Discipline Committee.

If you would like to find out about a specific treatment and have access to the Internet, you can “google” it by using Google as your search engine. Reading through a few of the sites will usually shed light on how the treatment or equipment is being marketed and will give you an indication of how trustworthy the information sources may be. Adding the word “research” to the name of the modality or equipment should turn up sites with research papers, if any exist, and the conclusions section of the paper will tell you whether any evidence was found for the effectiveness of the treatment or equipment. Better still, take the online course in Research Literacy for Complementary and Alternative Health Care Practitioners through Centennial College to learn how to search academic databases and evaluate the quality of research studies.



research literacy for complementary & alternative health care PRACTITIONERS



Graduates of the recognized massage therapy programs in Ontario are now required to have competency in the area of research literacy. To assist current members in developing this competency, the College of Massage Therapists of Ontario co-funded, along with Human Resources Development Canada and the Canadian Massage Therapist Alliance, the creation of an innovative, 12-week online course designed to help complementary and alternative health care (CAHC) practitioners (chiropractors, massage therapists, herbalists, naturopathic doctors, homeopaths, TCM practitioners) develop basic and effective strategies to find, understand, and critically evaluate research evidence for application in professional practice. Utilizing self-reflection, critical thinking, and problem-based learning, this course is intended to foster lively, respectful and supportive online interactions between students, as well as with the instructors, to help create a virtual community of practice.

Students learn to effectively search online databases, find and critically evaluate peer-reviewed research papers and apply their learning to client/patient care. Students taking part in this course may also be asked to participate in ongoing research on online learning and the transfer of knowledge to practice. Please check that you have at least the minimum online computer requirements for this course.

On average, students spend between four and eight hours per week in online learning, discussions and reading. There are both individual and group assignments such as the creation of a two-page, plain language newsletter for clients/patients on best evidence for the treatment of a specific condition.

For further information:

Please call Centennial College at (416) 289-5300 or email: tdryden@centennialcollege.ca.

REGISTER ONLINE

<https://secure.centennialcollege.ca/webreg>

OR TELEPHONE

(416) 289-5300

COURSE CODE:

Ther 705 - WINTER 2006 Sec. 420 –
Monday, Jan. 16 - April 7

COURSE FEE:

\$400 & textbook (approx. \$25)

This course qualifies for Continuing Education Credits

To be a successful online learner, you need to:

- have access to computer and Internet services (we recommend high speed access);
- have basic computer skills;
- be a self-disciplined person who can set goals and see them through;
- be able to dedicate four to eight hours each week, online and off, to your online studies;
- convey your ideas well in English;
- be comfortable with sharing your ideas actively and respectfully in online discussions.

Minimum online computer requirements:

- personal computer (minimum Pentium 1 with 64 MB RAM; or MAC with 8MB RAM)
- Windows 2000 or XP (or MAC OS 9.1/9.2 or higher)
- Internet account/access and Internet Explorer (5.5 or higher)

new massage therapy research fund to strengthen PROFESSIONAL PRACTICE

Launched in November 2004, the **Holistic Health Research Foundation of Canada** is blazing new trails as the first Canadian registered charitable organization dedicated to funding research and public education in complementary and alternative health care. For the first time, biomedical researchers, health professional organizations and experts in complementary and alternative therapies are working together towards a common vision of health care for Canadians.

With support from the College of Massage Therapists of Ontario, Holistic Health Research has created a designated **Massage Therapy Research Fund** and an initial massage therapy research project is currently underway. Over time and with the help of individual Canadians, massage therapy practitioners and their clients, and others, research funded through this initiative will make a significant contribution to the evidence base for massage therapy, and in turn strengthen individual practice and the profession as a whole.

Holistic Health Research was established in response to the increased usage of complementary and alternative medicine among the Canadian public. Recent polls show that nearly half of Canadians use some form of complementary and alternative therapy – ranging from clinical nutrition and herbal supplements to massage therapy and acupuncture – to complement the conventional care they receive. But while there are some good studies available on certain complementary therapies, much more vital research needs to be done – independent, peer-reviewed research that is based on innovative science and a deep understanding of each therapy and how it is practised.



To address the call of the public, practitioners and policy makers for more and better research, and to fill the significant existing gap in funding, Holistic Health Research is working collaboratively to support and fund:

- High calibre, multidisciplinary, outcomes-based **research** in complementary therapies
- Public **awareness and information** activities regarding the safe and effective use of complementary therapies
- **Education and dialogue** between complementary and conventional health professionals towards a common vision

Massage Therapy for Hospitalized High Risk Pregnant Women

The Holistic Health Research Foundation of Canada is currently funding its first massage therapy study, entitled: *Massage Therapy for Hospitalized High Risk Pregnant Women*. The primary purpose of this pilot study is to provide high risk, pregnant women in hospital with massage therapy to investigate patient satisfaction, quality of life and mood. Secondly, the study will assess physiological changes such as pain, weight gain/loss, gestational date achieved and birth outcomes. The research team for this study is both cross-sector and cross-discipline. It is led by a massage therapist/researcher and is a model for a new wave of innovative research teams. The team includes researchers and clinicians from obstetrics, nursing, psychiatry and massage therapy. The principal investigator is Trish Dryden, MT.

The rationale for this study is that hospitalization of high risk pregnant women to prevent pre-term labour and mortality is common; estimated to be 8.7% of all pregnancies (1). Complete or partial bed rest is prescribed in almost 20% of all pregnancies to reduce the risk of pre-term or early labour in pregnant women with a variety of medical conditions, although there is little evidence for the effectiveness

continued on page 14

of bed rest (2,3). High risk pregnant women in hospital, including those on bed rest, can experience significant and lasting physical and psychosocial side-effects including: weight loss, muscle dysfunction and pain, fatigue, and increased stress (4,5). This patient population has significant need for support and to reduce the physical and emotional discomforts of hospitalization (4). Massage therapy has the potential to improve quality of life for high risk pregnant women in hospital and to reduce the associated physical and emotional discomforts (6-11).

Underway since September 2005 at the Women's College Campus of Sunnybrook and Women's College Health Science Centre in Toronto, the study involves recruiting 40-50 hospitalized high risk pregnant women and randomizing them to one of two groups: one group of 20 women will receive standard medical care and the massage therapy intervention (2 times per week for 30-50 minutes each session, for the duration of their hospital stay) and one group of 20 women will receive standard medical care alone. Data collection is expected to conclude by the end of 2005 and it is anticipated that the pilot data and outcomes generated from this study will be published in a peer-reviewed journal. If the results are promising, the pilot data may also be used to develop a larger multi-centre randomized controlled trial.

Practitioner and public support is vital

The Foundation's task is enormous and the need is vital. Relationships with corporate sponsors, health professional associations and private foundations are being forged, but to succeed over the long term, Holistic Health Research **needs the support of individual Canadians and health practitioners who care about this cause.**

As a massage therapist, you can help support this important work by:

- Making a tax-receiptable donation today – donations received prior to December 31 will effectively double in value through a fundraising "challenge grant" provided by the Lotte & John Hecht Memorial Foundation. Donations can be made directly to the Massage Therapy Research Fund by phone, fax, mail or online.
- Issuing your own "challenge" fundraising letter to friends, colleagues and clients
- Purchasing \$3 "Power of Touch" wristbands, generously provided by Massage Therapy Canada Magazine and available online through their website (www.massagetherapycanada.ca)



- Displaying Foundation brochures in your client waiting area
- Including a brief article about the Fund in your client newsletter (pre-written articles are available from the Foundation)
- Contributing your time and talents for fundraisers, silent auctions etc.

For more information, please visit
www.HolisticHealthResearch.ca or call
416-778-4443/1-866-778-4443.

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changing your general certificate to an INACTIVE CERTIFICATE

Members often contact the College to ask questions about why, when, and how they should change their General Certificate to an Inactive Certificate and what will happen when they are ready to return to a General Certificate.

It is best to change your General Certificate to an Inactive Certificate if you:

1. do not meet the direct client care hours requirement and have to take a refresher course,
2. are going on an extended holiday,
3. are going on maternity leave,
4. are going back to school, or
5. will not be practising at all in Ontario for an extended period for any other reason.

You will still be a member of the College and will receive all College publications, but will not be required to participate in the Quality Assurance Programme, although you can choose to participate voluntarily. You will not have to maintain liability insurance and the annual renewal fee is \$125.00 instead of \$425.00.

The process for changing your status is very easy. There is a form in the Downloads section of the website called "Status Change GC to IN" which you can print, or you can request a form by mail, fax or e-mail. The form gives you the option of selecting a change date in the near future or immediately. You can also change your status at renewal time if you will be ceasing practice as of January 1 of the next year. You cannot change your status through the website.

The most frequently stated myth about Inactive Certificates is that they can be held for only three years. In fact, the regulations do not limit the number of years a member can remain inactive. If you want to revert back to a General Certificate, you must have the required 500 hours of direct client care in the previous three years or you will have to take a refresher course to become eligible for a General Certificate.

We are often asked if members get a partial refund of their fees when they change to inactive partway through the year. There is no refund. The College cannot prorate fees, except for the initial registration fee for new graduates.

Members also ask if there is a maximum number of hours a member holding an inactive Certificate can practise. When you sign the renewal form or a status change form for an Inactive Certificate, you have to certify that you will not practise at all in Ontario. A General Certificate allows members to practise in Ontario and is required for even one hour of practice during a year.

Once you are ready to change back to a General Certificate, simply download the Status Change IN to GC form from the website or ask us to send you one. Fill in the form and send it to the College with a payment \$300.00 and we are usually able to change your registration status within a few days.

If you have any questions about the procedure or requirements for either type of certificate, please contact the Registration Department at extension 117 or 118 for information.



providing
**complementary
modalities**
as part of a
**TREATMENT
PLAN**

CEU Article



CEU Questions:

1. What are the differences between the modalities the Registration Committee lists as complementary and those listed as out of scope?
2. Can a treatment plan be made up of solely complementary modalities?
3. What types of modalities are included in the out-of-scope schedule?
4. If a massage therapist wishes to offer an out-of-scope modality, how may they do so?
5. Name four complementary modalities.
6. Name four out-of-scope modalities.

The Registration Department is often contacted by members who are confused about which modalities are in the scope of practice and about the difference between complementary modalities and modalities that are outside the scope of practice. They also inquire if and how they can incorporate out-of-scope modalities into their practice.

The main difference between complementary and out-of-scope modalities is that, while **the modalities on both lists are out of scope**, the complementary modalities may be incorporated into a massage therapy treatment plan and a receipt for massage therapy can be issued, but they cannot constitute the majority of the treatments in the plan. Out-of-scope modalities cannot be used in a massage therapy treatment plan at all.

If you are not sure if a modality is to be found on the list of complementary therapies or on the list of outside scope therapies, please look at the schedules attached to the policies. The most up-to-date lists are on the website. (Look under Standards and Regulations and then select Policies <http://www.cmta.com/regulations/regs.htm>). This will give you the list of all College policies so you can open the lists and, if you wish, print them for reference. If you do not have Internet access, you can contact the Registration Manager at the College to request a list by mail.

There is no official list of modalities which are in the scope of practice but the list of modalities members can enter on the registration renewal form (in the Guide to Renewal at the top of the second page) is made up of those modalities generally considered by the profession to be in the scope of practice. The list is also available in the Guidelines for Continuing Education Units in the Category A section.

Complementary Modalities

When the Registration Committee developed the policy on complementary therapies and the schedule, it believed that some modalities may not be in scope but will be useful in augmenting the effects of conventional massage therapy treatments and may be added to a treatment plan to make it more effective.

For example, remedial exercise is part of the scope of practice. The effectiveness of the exercise part of a treatment plan might be improved if members who have the necessary training are able to incorporate appropriate yoga or Pilates exercises; however, this does not mean that a massage therapist should be teaching yoga or Pilates classes and giving the students receipts for massage therapy. The same is true of ultrasound or any of the other electrical therapies; they are effective additions to certain treatment plans but it would not be appropriate to treat a client needing only ultrasound treatments and then give the client receipts for massage therapy.

When deciding whether to use a modality, it is important to consider how it will enhance the overall treatment and outcomes for the client and to choose the modality that is best for the client. It is also important that the therapist is confident about his/her knowledge and skills in performing the proposed modality. The decisions made when choosing the modalities to employ, as well as providing clients with the information necessary to make an informed choice, are part of the member's professional accountability.

Some complementary therapies on the College's list are considered mainstream by some members of the public and the profession, but are considered extremely controversial by others. For instance, Touch for Health may seem a nonsensical and unscientific treatment to some, while others believe that it is an effective treatment. If you are thinking of using a complementary modality for a client, you are responsible for explaining to the client the expected effects, the potential benefits and risks of the proposed modality so the client can make an informed choice. The client must give valid consent for treatment and has the right to refuse to be treated with the complementary modality.

For CEU purposes, complementary modalities that appear on the schedule are granted Category B CEUs.

Outside Scope

The policy on modalities outside the scope of practice for massage therapy states: "If the primary intent, focus, and practical use of a modality is outside the definition of massage therapy's scope of practice, the modality is considered not in the scope of practice."

When the Registration Committee is reviewing a modality which may be outside the scope of practice, it looks at the following criteria to decide if the modality is outside scope:

- 1) The primary intent of the modality is to treat mental, emotional or spiritual function rather than to treat physical function.
- 2) The modality uses the oral ingestion of substances such as herbs or homeopathic remedies which are outside the expertise of a massage therapist and require specific training to ensure competence and public safety.
- 3) The "modality" is another profession with its own training and certification processes (e.g. psychotherapy, osteopathy).
- 4) The modality involves communicating a diagnosis which is a controlled act.
- 5) The modality does not involve assessment or manipulation of the soft tissue or the joints.
- 6) The goal of the therapy is not to develop, maintain, rehabilitate, or augment physical function or relieve pain.
- 7) The modality does not meet the standards of practice for a massage therapist practising in Ontario.
- 8) The modality has no relation to the scope of practice as defined in the *Massage Therapy Act, 1991*.

Some "modalities" on the **Schedule of Modalities Considered Outside the Scope of Practice of Massage Therapy** are not modalities at all but treatment systems which consist of several modalities and may employ a method of assessing clients which is different from that used by massage therapy. Osteopathy, for instance, is a treatment system which includes several massage therapy modalities, so while the system itself is outside scope, some of the modalities it includes, such as craniosacral therapy, are within scope for massage therapists.

continued on page 19

direct client care POLICY REVISED

At the September Council meeting, Council revised the Direct Client Care policy. The revised policy no longer allows the College to consider profession-related activities when counting direct client care hours for registration renewal.



This change was necessary because of a legal opinion the College received which stated that it is illegal for the College to allow a member to register with a General Certificate with fewer than 500 hours of direct client care in the previous three years. The last two paragraphs of the current policy and their bullets

go beyond the legal authority of the College since they allow the Registration Committee to consider profession-related activities as supplementing the direct client care hours requirement, even though the policy states that they are **not** direct client care. There is no other registration renewal option within the authority of the Registration Committee or of the College.

As a result, any member who does not meet the 500 hour requirement will now be required to complete a refresher course to become eligible for a General Certificate.

The wording of the revised policy on Direct Client Care is as follows. It has been posted on the website under <http://www.cmta.com/regulations/directClient.htm>.

Direct client care policy

REGULATIONS

The registration Regulation made under the Massage Therapy Act, 1991 states the following requirements for renewal of a General Certificate of registration:

- 7,(1)2. The member shall practise the profession only if,
- i. the member has provided at least 500 hours of direct client care within the scope of practice of the profession in previous three years, or
 - ii. the member has, within the previous fifteen months, successfully completed a refresher course approved by the College.

This requirement specifies that the direct client care must be performed within the scope of practice of the profession.

SCOPE STATEMENT

Section 3. of the *Massage Therapy Act, 1991* states:

“The practice of massage therapy is the assessment of the soft tissue and joints of the body and the treatment and prevention of physical dysfunction and pain of the soft tissues and joints by manipulation to develop, maintain, rehabilitate or augment physical function, or relieve pain.”

POLICY

Direct client care is defined as professional activities on behalf of a client or supervision of direct client care.

Each of these activities must be within the scope of practice of massage therapy and must contribute to maintaining competence in massage therapy assessment and treatment. When determining whether a specific activity constitutes direct client care members must consider whether the activity maintains the knowledge and skills required to perform treatments and assessments within a massage therapy practice.

Professional activities include:

- Assessment of the soft tissue and joints ,
- Recommending, developing, or implementing a treatment plan based on the assessment of the client's needs,
- Treatment of the soft tissue and joints,
- Engaging in research in massage therapy that involves the assessment or treatment of clients with soft tissue or joint disorders where the member is directly engaged with the client.

Supervision of direct client care includes:

- Overseeing and evaluating massage therapists or massage therapy students (e.g. conducting performance evaluations or case reviews, assessing treatment plans, and recording and monitoring adherence to the scope of practice as defined by the Code of Ethics, the Standards of Practice and the regulations).
- Supervising research in massage therapy that involves the assessment or treatment of clients requiring massage therapy services where the member is directly engaged with the client.

Approved: September 20, 2004

Amended: September 9, 2005

If members wish to use a modality which is not on any of the lists, they can contact the Registration Manager to inquire about having the Registration Committee review the modality and determine if it is in scope, complementary or outside scope.

The Quality Assurance Committee does not grant CEUs for any modality listed in the out-of-scope schedule of modalities.

Providing Out of Scope Treatments

When the decision is made that a modality or treatment is outside the scope of practice, the member may still wish to provide the modality or treatment to clients and may contact the College to inquire how to do this without committing professional misconduct or insurance fraud.

The member must separate the massage therapy practice completely from the outside scope treatments. This does not mean that two separate practice locations are required, but all advertising, records, and receipts must be completely separate.

Advertising for massage therapy and for outside scope treatments must be completely separate. It is not acceptable to have business cards or advertisements listing both services or to mention in the outside scope advertisements that the member is a massage therapist. Records for the outside scope practice must be kept completely separate from the massage therapy records.

Receipts must not be given for massage therapy for outside scope treatments; it is very important that the receipts not cause any confusion if clients send them in to their insurance provider or the member may be accused of insurance fraud and face criminal proceedings. For example, having "John Smith, RMT" anywhere on a receipt for raindrop therapy (which is outside scope) may be misleading to an insurance company.

The therapist must ensure that clients understand when they are receiving treatment from the practitioner in his/her capacity as a massage therapist and when they are receiving treatment from the practitioner which is outside the scope of practice. Clients must also be informed that outside scope treatments will not be covered by their insurance.

calendar
of
EVENTS

Council Meetings

December 5, 2005

February 10, 2006

Holiday office closing

The office will be closed for the Holidays during the week of December 26, re-opening January 3, 2006.



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*The staff and Council of the
College of Massage Therapists of
Ontario wish you good health,
peace and happiness throughout
the coming Holiday season
and New Year!*