Calendar of Events

Council Meetings
September 20, 2004
December 3, 2004

OSCE Exams
July 24 and 25, 2004
August 7 and 8, 2004
October 30 and 31, 2004

Making Ethical Decisions and Maintaining Boundaries in Professional Relationships Workshops
District 6 – London – October 17 & 18, 2004
District 3 – Oshawa – November 7 & 8, 2004

In this Issue

Massage therapy research
2003 Massage Therapy Census highlights
Health Information Protection Act (HIPA) update
Complaints case summary
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.
In May, the College sent four representatives, two Council members and two senior staff to the International Symposium on the Science of Touch, Towards an Integrative Medicine, held in Montreal.

The symposium brought together researchers and other presenters from around the world to share information and progress in massage therapy research. The keynote speakers were David Eisenberg, M.D., Osher Institute, Harvard Medical School; Tiffany Field, Ph.D., Touch Research Institute, University of Miami School of Medicine; and Mytheenkunju Shajahan, Ph.D., Touch Research Institute, University of Miami Osher Institute, Harvard Medical School; and Tiffany Field, The keynote speakers were David Eisenberg, M.D., Osher Institute, Harvard Medical School; Tiffany Field, Ph.D., Touch Research Institute, University of Miami School of Medicine; and Mytheenkunju Shajahan, Ph.D., Touch Research Institute, University of Miami Osher Institute, Harvard Medical School; and Tiffany Field, who were well represented from other jurisdictions were the United Kingdom, France, and Australia. Attendees at the conference from other jurisdictions were well represented and notable was a seven person delegation from South Korea.

Other speakers represented Canada (including Trish Dryden, M.Ed., RMT), United States, Sweden, United Kingdom, France, and Australia. Attendees at the conference from other jurisdictions were well represented and notable was a seven person delegation from South Korea.

Pam Hodgson MT, presented a poster of her research monies into a dedicated massage therapy research fund of the Holistic Health Research Foundation of Canada, of which we are a founding partner. The Holistic Health Research Foundation of Canada is a national charity dedicated to improving the health, wellness and quality of life of all Canadians by advancing our scientific understanding of complementary and alternative therapies. It will be launching publicly in November of this year.

I would encourage members to consider making personal donations, either to the Foundation as a whole (you can make a secure, tax-receipptable donation through their website) or to the designated massage therapy research fund, which is expected to be set up by September. Information can be found at www.holistichealthresearch.ca.

In the coming months, the College will be featuring more information about this organization and our role in supporting research in massage therapy.

Rick Overeem, MT
President

As you will see later in this issue of the College Standard, we have released the 2003 Massage Therapy Census, which provides a snapshot of the profession from a variety of views. In reviewing some of the data, I was struck by how much the demographics of the profession have changed over the last fifteen years with respect to the number of years in practice and the ages of members of the profession.

For example, 76% of the profession is less than 40 years of age and of that group, 40% is less than 30 years of age. Couple that with the fact that 71% of the members have practised six years or fewer, and it reveals a relatively young profession with respect to experience.

That is why those few massage therapists who have practised more than 20 years should be so valued as members of the massage therapy community. They hold the collective history and wisdom of the profession and should be honoured as the exemplars and mentors for the newer massage therapists.

The following chart shows the current breakdown for these members:

<table>
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<tr>
<th>YEARS REGISTERED</th>
<th>TOTAL NUMBER</th>
<th>FEMALE</th>
<th>MALE</th>
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<tbody>
<tr>
<td>20 – 24</td>
<td>169</td>
<td>132</td>
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<td>25 – 29</td>
<td>81</td>
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Of those 289 members, 258 are practising in Ontario and 31 are practising outside the province. When I began in my position as Registrar in 1989, there were 732 registered members of the profession. In the first few years following, when there were only four schools educating individuals for entry into the profession, I had the opportunity to meet every candidate through the examination process. In recent years that has been impossible with the increasing complexity and size of the College and all its processes required to properly administer the Regulated Health Professions Act, 1991 and the Massage Therapy Act, 1991 for the current registration base of 6,672 members.

There is a wealth of diversity within the profession throughout the province. One of the benefits to the public of the profession’s growth is that there are now therapists in most communities in Ontario. This gives the public greater choice about their health care. But a large, scattered group presents challenges with respect to maintaining a vision of the profession as a whole, moving it forward in excellence supported by solid credible research, and enhancing the public’s understanding of the work the profession accomplishes for its clients.

I stay connected within this professional community through speaking at schools, group meetings of massage therapists, telephone and e-mail contact. It is crucially important for members of the profession to maintain links with each other for peer support and with those senior members of the profession who, through their experience, can guide and mentor the newer massage therapists.

Deborah Worrad
Registrar
Research Announcement – Tim Tanaka MT, PhD

In April 2001, Tim Tanaka MT, PhD was awarded a College research grant to study “The effect of massage on muscle fatigue and recovery.” This was a study in two parts with the second being conducted in Tsukuba, Japan. The Toronto phase of the study was published in the BMC Alternative and Complementary Medicine 2002. The Japanese study, “Effects of massage on blood flow and muscle fatigue following isometric lumbar exercise,” has been published in the May 2004 edition of the Medical Science Monitor (WISM) and is available at www.medsciimon.com.

Dr. Tanaka was a keynote speaker at the 53rd Annual Meeting of the Japan Society of Acupuncture, June 11-13 in Chiba, Japan. Although speaking on acupuncture and EMG, he took the opportunity to introduce the results of the two massage therapy studies to the conference.

Research Colleges seek investigative status under the Personal Information and Electronic Documents Act (PIPEDA)

Prior to the implementation of PIPEDA, one of the issues for the Health Regulatory Colleges in Ontario was whether the legislation would impede their ability to conduct investigations pursuant to the Regulated Health Professions Act, 1991, (the “RHPA”). The Colleges collectively applied, through the Federation of Health Regulatory Colleges, to Industry Canada for status as “investigative bodies” and the designation was granted. Designation as an “investigative body” ensures that, under the auspices of PIPEDA, personal information cannot be withheld from colleges during the course of conducting their regulatory functions.

Health Information Protection Act (HIPA) update

The McGuinty government introduced the Health Information Protection Act to ensure that personal health information is private, confidential and secure. This legislation received Royal Assent on May 20, 2004 and will come into effect on November 1, 2004. The Health Information Protection Act consists of two parts: the Personal Health Information Protection Act, and the Quality of Care Information Protection Act. It will provide consistent and comprehensive rules for individuals and organizations that collect, use and disclose personal health information.

HIPA will take precedence over the provisions of the federal privacy act, the Personal Information Protection and Electronic Documents Act (PIPEDA). The College will provide more detailed information at a later date regarding how massage therapists should work with these two pieces of legislation.

Notice – CEU Reporting

All members holding a General Certificate, registered between October 18, 1998 and October 31, 1998 and those registered between November 1, 2000 and October 31, 2001, will be completing their CEU cycles on October 31, 2004. We will be sending these members their CEU reporting forms in early November. The form is due in the College office by December 31, 2004. Please note that members will need to have completed 30 CEUs by the end of the cycle.

Kiné-Concept Institute initiates upgrading program for orthotherapists

Kiné-Concept Institute in Ottawa will be running an upgrading program for orthotherapists beginning in September 2004. The program will be 14 months long and on completion, the participants will have acquired the competencies taught in the recognized massage therapy program and will be eligible to take the College’s certification examination for massage therapists. The program is approved by the College.

A Thank You from the Client Relations Committee

The Client Relations Committee would like to thank all the members who responded to the request for comments relating to the definition of a client (College Standard, March 2004 edition). The responses were impressive and will provide very valuable information. The Committee is presently reviewing the information with the view to developing further initiatives in relation to this issue.

Infection Control and Surveillance Guidelines for Community Settings

The Ministry of Health and Long-Term Care has posted a number of new standards and directives regarding febrile respiratory illness (FRI). As regulated health practitioners, massage therapists are required to be familiar with these directives. The directives are comprehensive and cover specific areas of concern. These areas include: surveillance, screening, counselling and referral, reporting, infection control, education and communication. To obtain a PDF of the new directives, go to: http://www.health.gov.on.ca/english/providers/program/pubhealth/sars/sars_mn.html and look for Preventing Respiratory Illnesses in Community Settings – Infection Control and Surveillance for Febrile Respiratory Illness (FRI) in Community Settings in Non-Outbreak Conditions (March 11, 2004). Both a PDF format and a slide presentation can be downloaded from the Internet. It is anticipated that a new Standard of Practice, “Risk Identification and Management for an Outbreak of Infectious Disease,” will be adopted by Council later this year. Once adopted, this standard will provide further guidance to members.

The College requests that members also review Standard 42, “Use of Protective Barriers during a Treatment” and Appendix A, “Guideline for Handwashing and Hospital Environmental Control,” in the Standards of Practice.

Two Ontario MTs selected for Canadian Olympic Health Care Team

Congratulations to members Frank A. Manzo, RMT, SMTC and Carolyn Caesar, MT, SMTC, who have been selected to the Canadian Health Care Team for the 2004 Olympic Games in Athens, Greece.

Frank and Carolyn are among only six massage therapists from across Canada chosen to be part of the team. Their duties will include providing health care support and therapy services to the entire Canadian team, along with health care clinic work and assignments to a variety of sports during the Games.

“To represent Canada and my profession at any major Games is truly an honour,” says Frank, who has previously volunteered at a number of major sporting events, including the 2000 Paralympic Summer Games in Sydney, Australia. “I don’t think this would be possible without regulation – I strongly believe that without the assurance that there are professional standards and comprehensive rules for individuals and organizations that collect, use and disclose personal health information.”

A lot of success.

The College wishes them all – and Team Canada – lots of success.

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The City of Guelph is currently reviewing all of its municipal by-laws and is proposing to regulate massage therapists, as many municipalities have historically chosen to do, due to the perceived sensitivities involved in the work. The College, on behalf of the membership, made submissions to the City regarding the inappropriateness of including massage therapists in its by-laws.

On May 19, 2004, the Registrar, Deborah Worrall, together with the College’s legal counsel, Richard Shekter, appeared before the City’s finance and administration committee to further reinforce the College’s position. When the review is completed, the College believes that massage therapists are regulated and how it protects the public. Many people stopped by the booth with questions and comments over the course of the two-day show.

The College regrets to inform members of the death of Rick Cline MT on March 14, 2004.

Rick was a practicing massage therapist based in Midland, Ontario and a long-time teacher at Sutherland Chan. We offer our sincere condolences to Rick’s family, friends and colleagues.

When the Review is completed, the College is hoping a committee to further reinforce the College’s position.

The College opposes proposed Guelph By-law to regulate profession.

When the College was considering setting up the online registration renewal system, it sought a legal opinion about whether the completion of an online renewal is legally equivalent to completing and signing a paper renewal form. The College’s legal counsel informed the College that an online registration is binding on the member and that clicking the “Submit” button is legally equivalent to signing a paper document. Completing an online registration renewal is therefore equivalent to filling out the paper renewal form and can only be done legally by the member of the College who is renewing his or her own registration.

It may be convenient for one reason or another to have someone else complete your registration, but if discovered, the College would treat the matter very seriously. If you lack the computer skills to renew online, send in a paper renewal form or ask a computer-literate person to guide you through the process. It is not acceptable to have an employee of your clinic, your spouse, or a family member complete it for you.

The legal powers and duties of the College are set out in the Regulated Health Professions Act, 1991, the Health Professions Procedural Code and the Massage Therapy Act, 1991 (MTA). Renewal of registration requires members to sign several mandatory declarations which are required for registration renewal under the Regulations. Members must also acknowledge that they understand their professional and legal obligations. In addition, there may be issues involving document falsification and professional misconduct.

The Show provided the College with an opportunity to communicate its position and how it protects the public, including the appropriate responses to questions that were asked. The College has discovered that some members may have had another person complete their registration renewal. The College considers this a very serious matter and is concerned that these members have not fulfilled their professional and legal obligations. In addition, these may be issues involving document falsification and professional misconduct.

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Sections of the Massage Therapy Act, 1991 regarding registration renewal indicate information the member is required to provide. Included are the requirements in sections 4 and 7 of the Registration Regulation, Ontario Regulation 884/93 as amended, each of which states the conditions of a certificate of registration of any class. Controlling a condition of a certificate of registration is a professional misconduct.

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When you renew your registration, please contact either Marjory Embree (extension 117 or e-mail marjory.embree@cmto.com) or Richard Prevost (extension 118 or e-mail richard.prevost@cmto.com) well in advance and we will advise you of possible solutions.
CEU Questions:
1. Can a massage therapist have two or more wall certificates?
2. What is the purpose of the registration number?
3. Where should a massage therapist display their certificate of registration?
4. Why would the College prosecute any member found to be “selling” their certificates of registration?
Last year the College commissioned Collis & Reed Research to conduct a Massage Therapy Census to identify the current status of the profession, identify the changes and needs that are anticipated and estimate future demands for the profession.

The Census was conducted in five separate surveys: the Membership Survey, the Student Survey, the Other Health Care Practitioners Survey, the General Public Survey and the Clients of Massage Therapists Survey. All of these have been available on the College’s web site at www.cmto.com/members/2003 Massage Therapy Census since late March in PDF format. Should you wish to review the full reports, they may be printed from these files.

REPORT HIGHLIGHTS

Membership Survey Report

Current Practice
1. The most common practice settings were massage therapy clinics, outcalls, residences and chiropractic offices.
2. On average, respondents:
   - Performed 18.9 hand-on hours weekly.
   - Performed 9.8 non hand-on hours weekly.
   - Treated 177.4 MDN = 100 clients annually.
   - Could work 26.4 hand-on hours.
   - Had 43.2 active clients.
   - Worked 4.7 days per week.

3. Overall:
   - 22.8% worked outside of the profession.
   - 57% earned less than $30,000 annually.
   - 88.1% stated massage therapy is their main source of income.
   - 77.4% considered themselves lifetime massage therapists.
   - Respondents most frequently noted hand/wrist and lower back problems due to their profession.

4. Respondents reported that:
   - On average they spent $546.14 annually on advertising.
   - On average they spent $10,412.20 annually on overhead.
   - The majority of clients paid by extended health plans or out of pocket.
   - 32% of their clients were referred to them from other health care professionals.
   - Most referrals came from chiropractors and medical doctors.
   - There had been an increase in the number of referrals in the last five years.
   - The majority of their clients were over 35 years of age and were female.

5. Females:
   - Worked fewer non hand-on hours than males.
   - Were able to work fewer hours than males.
   - Charged less than males.

General Observations
1. Massage therapists reported that their clients are mainly females and older than 35. This is consistent with the 1997 report. Most clients receive massage therapy for relaxation and for relief from chronic problems. In addition, these clients also see chiropractors, physiotherapists and naturopaths. Based on other surveys conducted for this project, the majority of the general public would try massage therapy, while massage therapists, students, clients and other health care professionals felt there is increasing knowledge about massage therapy benefits and what massage therapists do in the general public. Since the primary client type (older females) has not changed, it is possible that many potential clients who know and feel positive about the profession are not seeking treatment. Finally, therapists reported that only one-third of their clientele were referred to them, while most other health care providers stated that they do make referrals to massage therapists. Other health care professionals state that they receive much information about massage therapy through word of mouth and much health care information through professional journals and newsletters. Clients and the general public receive their health care information from their health care professionals. Targeting groups that do show some interest in the profession such as chiropractors, physiotherapists and naturopaths might result in better knowledge of massage therapy standards and regulation. In addition, professional outreach at conferences and through other professional publications might increase knowledge of massage therapy regulation.

2. Female therapists make up the large majority of the profession. On average, these therapists work fewer hours and are able to work fewer hours than males and they charge less for therapy than their male counterparts. Given that females make up the majority of the profession and many therapists state that their salary does not meet their expectations, these differences between male and female therapists need to be closely examined. It is possible that due to lifestyle issues some females choose to work less than males, however, they also charge less.

3. There is continual growth in utilization of massage therapy in Ontario. Growth is likely affected by many factors such as economics, public knowledge of massage therapy, health insurance coverage, and recommendations from health professionals.

Other Health Care Practitioners Survey

1. Most other health care practitioners received referrals from massage therapists and sent referrals to massage therapists.

2. The majority of other health care practitioners had a massage therapist working with them, had received massage therapy or would consider massage therapy as part of their health care.

3. Practitioners suggested that having a higher community profile among professionals could help massage therapy.

4. Practitioners most often received health care information from professional journals, magazines and newsletters.

5. Practitioners received information about massage therapy from massage therapists.

Health Care Communication
1. More than 81% of other health care practitioners had noticed that the public is more aware of what massage therapists do and the benefits of massage therapy.

2. The majority of other health care practitioners were aware of the College.
Student Survey

Student Background
1. The majority of students reported attending high school or attending/graduating from college prior to their massage therapy education program.
2. The majority of students reported that their previous occupation, prior to their program, was student, retail or office work.
3. Students most often chose their school because of its location or reputation.
4. Students were most influenced to study massage therapy because:
   - They desired to help people
   - They desired to work in a health field
   - There were many job opportunities in massage therapy
   - They learned about massage therapy from a massage therapist

General Observations
The general objective of the survey of Ontario massage therapy students was to better understand the expectations and backgrounds of students entering massage therapy programs in Ontario. The following describes general observations:
1. Students were influenced to study massage therapy because they desired to help others through work in health care. They chose their schools because of the quality of education at that institution or because of the location of the institution. Interestingly, they most often desired to work near the location where they were educated. Thus, school location may influence the distribution of new therapists in Ontario.
2. Students were well informed of the regulation of the profession. Students explained that their schools, professors and textbooks were very clear about professional regulation.
3. Students desired to treat healthy adults and athletes. This desire might in part be driven by limited experiences students have with clients and desires to work in resort/spa atmospheres. More education about the benefits of treating many different types of clients might influence students to work with clients with differing needs.

Student Expectations
1. Students most frequently desired to seek employment in:
   - Massage therapy clinics
   - Multidisciplinary centres
   - Wellness centres
   - Rehabilitation centres
   - Chiropractic clinics
2. Overall, 63% of the students planned to practise in the Electoral District where they were educated.
   - Two percent of students planned to practice outside Ontario.
3. Most students planned to treat healthy adults and athletes.

Knowledge of Regulation
- Overall, students were aware of all areas of massage therapy regulation.
- Students learned of regulation from their schools, professors and textbooks.

Client Impressions
1. Most common reasons for seeking therapy were relaxation, regular health care, chronic physical problems and chronic injury.
2. Reasons for choosing massage therapy over other therapies included the following:
   - Massage therapy was recommended
   - Massage therapy helps with pain in back, neck and muscles
   - Massage therapy works
   - Massage therapy complements other forms of treatment
   - Massage therapy is good for stress and relaxation

Client Knowledge and Relations
1. Most clients were aware that:
   - Massage therapists receive two to three years of specialized training
   - Massage therapists must pass a certification examination
   - Ontario has a regulatory body that establishes standards and ensures standards
   - Massage therapists must pass a self-assessment tool
2. Most clients were unaware that:
   - The general public can verify the credentials of massage therapists through the College
   - The College can address concerns made by the general public
   - The College is a regulatory organization and not a teaching institution
   - Massage therapists must periodically complete a self-assessment tool
   - The College has continuing education requirements for massage therapists
   - The College sends peers to review massage therapists’ practices to ensure public safety
   - Massage therapists are required to participate in a quality assurance program (QAP) that promotes lifelong learning and maintenance of high standards
   - The College has a mandate to educate the public about the prevention of all forms of abuse

 Clients of Massage Therapists Survey

Health Care Resources
1. Most clients receive health care information from health care professionals.
2. Most clients report that they also receive treatment from chiropractors, physiotherapists and naturopaths.

General Observations
The general objective of the client survey was to better understand knowledge of clients about massage therapy and massage therapy regulation in Ontario. The following describes general observations:
1. Clients were knowledgeable about the College, education of massage therapists and the certification examination. Clients also noted that their therapists explained treatment, assessment, consent and referrals. Clients stated that they learned of health care issues through health care practitioners. This suggests that one way to further educate current clients is through practicing massage therapists.
2. Clients sought treatment from massage therapists for a variety of reasons and pointed out the benefits of choosing massage therapy over other therapies. This suggests that clients could be a valuable source of information about standards and regulation.
The College Standard

2003 massage therapy census

General Public Survey

General Health Care
1. The most common resources used to find health care information included health care practitioners, the Internet and family and friends.
2. Less than 14% of the general public report currently receiving health care from:
   • Massage therapists
   • Chiropractors
   • Physiotherapists
   • Naturopaths

Overall, 69% of respondents would consider massage therapy as part of their health care routine.

Knowledge of Regulations
1. The public was aware that:
   • Massage therapists receive two to three years of specialized training
   • Massage therapists must pass a certification examination

2. It is important to understand the general public's use of the Internet for health care information. It is possible that individuals search for specific information when needed rather than doing general searches for health care information. Specific key word searches might not lead the public to the College's website.

Members are encouraged to review the full study on the College's website.

General Observations
The general objective of the general public survey was to better understand knowledge of the general public about massage therapy in Ontario. The following describes general observations.

1. Overall, the members of the general public answering the survey had some knowledge of massage therapy in terms of education and examination. These individuals noted that they learn about health care issues through health care practitioners, the Internet and word of mouth. This suggests that by educating health care practitioners about the benefits of massage therapy, the public will become more educated.

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Members are encouraged to review the full study on the College's website.

One of the benefits of the 2003 Massage Therapy Census is the creation of a permanent Consumer Panel, made up of people who participated in the Clients of Massage Therapists Survey. This group indicated a willingness to work with the College as a stakeholder group and provide input on other issues as they arise. Communications will be accomplished through e-mail which facilitates their participation and streamlines the College’s ability to collect information from the public.

If anyone within your practice would like to be a member of this Consumer Panel, please have them send an email to cmto@cmto.com indicating their willingness to participate.

It is important to understand that there is a hierarchy or chain of command for the authorities which govern massage therapists.

The governing authorities include federal and provincial statutes, as well as regulations, College By-laws, policies, position statements, standards of practice and guidelines.

In relation to these governing authorities, federal legislation is the leading authority and includes laws such as the Criminal Code, as well as the Charter of Rights and Freedoms. While these statutes may not directly relate to practicing the profession, they may have implications for practicing the profession.

The next authority in line is provincial legislation, which includes many statutes and regulations that directly relate to how massage therapists are regulated. They include statutes such as the Regulated Health Professions Act, 1991 (the “RHPA”) and its Procedural Code, called the Health Professions Procedural Code (the “Code”), as well as the Massage Therapy Act, 1991 (the “MTA”). The RHPA and the Code set out the framework for the regulation of the entire regulated health sector in Ontario and the Code sets out the duties and responsibilities of the College, its Council and the Statutory Committees. The MTA is a distinct act that deals specifically with issues relating to the regulation of massage therapists. The MTA includes provisions that deal with registration requirements, definitions of professional misconduct, details of the quality assurance programme, recordkeeping requirements, and provides for title protection for members of the profession. It is important to note that the College has the power to develop Regulations under the MTA pursuant to provisions of the RHPA.

In relation to provincial legislation, there are other statutes that establish additional responsibilities when practising the profession. This includes legislation such as the Health Care Consent Act, Child and Family Services Act and most recently, the Health Information Protection Act.

In relation to the remaining authorities such as the Standards of Practice and Code of Ethics, College By-laws, Policies, Position Statements and Guidelines, generally speaking these authorities are tools developed by the College to assist members in understanding their professional responsibilities. They help to clarify Regulations and provide their position on a variety of topics that may not be covered within the legislation or Regulations. Members are expected to uphold the Standards of Practice, Policies and By-laws. In contrast, position statements explain Council’s position on a matter for the guidance of the members, but therapists are not required to implement the position statement. Guidelines provide greater detail on how a policy can be implemented.

Knowing which authority takes precedence in a given situation depends on which authority may be involved in the circumstance, therefore, members must be aware that there is a hierarchy for authorities governing the profession and they must determine which authority will govern their conduct. Members are encouraged to review all the governing authorities so that they are aware of their legal and professional obligations.

References:
A Complete Guide to the Regulated Health Professions Act, Richard Steinbeck
The Jurisprudence Handbook for Dietitians in Ontario, Richard Steinbeck
College of Massage Therapists of Ontario Policies and Practice Statements
The complaint

The complainant, the owner and operator of a spa, alleged that the massage therapist failed to issue receipts to two clients following massage therapy treatments that occurred many months earlier. It was further alleged that despite numerous requests for the receipts from the owner and other employees of the spa, the massage therapist failed to respond. The member had left the employment of the spa four months prior to the letter of complaint.

The member responded to the complaint, stating she was unaware that she had failed to issue the receipts to the clients involved, as she had no record of any requests from the spa for receipts. She further stated that since she had left the employment of the spa, she had had no further contact with the spa although she had kept her telephone number and address upon her departure in the event the spa would need to contact her. The member provided the requested receipts to the clients involved.

Panel’s Decision

The panel determined that a letter of recommendation to the member was warranted in the case. Given this concern, the panel was of the opinion that the member may require additional assistance in her practice to ensure a similar complaint would not be raised in the future.

Commentary

The panel recognized that the nature of a member’s practice setting may sometimes complicate or hinder a member’s ability to comply with record-keeping obligations in a timely fashion. It is recognized that within a spa or multidisciplinary setting, in which a member treats many clients a day, other staff of the facility or spa may provide assistance in issuing receipts or invoices for treatment. Although that may be the case, the individual massage therapist has the professional obligation to maintain client records in compliance with the record-keeping regulation. Given this concern, the member was warranted in this complaint. The panel determined that a letter of recommendation to the member is part of the Client Health Record under the Record Keeping Regulations, and as such, clients of massage therapists are entitled to receive a receipt bearing the name, registration number and description of the treatment provided for insurance purposes. Failure to maintain client records reflects poorly, not only on the individual massage therapist, but on the profession as a whole.