College of Massage Therapists of Ontario

Standards of Practice

Approved: September 8, 2026

College of Massage Therapists of Ontario

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Standard of Practice: Acupuncture

Patient Outcome

The **patient** receives acupuncture treatment from a competent, authorized RMT/MT who provides safe, effective and ethical care within the **Scope of Practice of Massage Therapy.**

Registered Massage Therapist Outcome

An authorized Registered Massage Therapist/Massage Therapist (RMT/MT) performs the **controlled act** of **acupuncture** in compliance with relevant legislation and Standards of Practice.

Requirements

The RMT/MT must:

1. Always practise within the Scope of Practice of Massage Therapy, CMTO's definition of acupuncture, and all Standards of Practice.

2. Have successfully completed a Confirmed Acupuncture Education Program or have been legacy exempted by CMTO and have the required entry-level acupuncture practice competencies (obtained prior to January 1, 2017) as outlined in the Acupuncture Practice Competencies and Performance Indicators.

3. Have applied for and been granted authorization from CMTO to practise acupuncture.

4. Have the required professional liability insurance to practise acupuncture.

5. During registration renewal, comply with CMTO's annual declaration requirements regarding acupuncture practise.

6. Only practise acupuncture when competent to safely do so.

7. Comply with current **Infection Prevention and Control (IPAC)** and safety measures including:

    a. ensuring needles are sterile prior to use;

    b. storing and disposing of used needles safely;

    c. implementing and documenting needlestick injury protocols; and

    d. vigilance in maintaining high standards of cleanliness, skin disinfection technique, needling technique and careful anatomical considerations.

8. See also the *Standard of Practice: Consent, Standard of Practice: Patient-Centred Care* and *Standard of Practice: Professional Boundaries, Draping, and Physical Privacy.*

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Standard of Practice: Advertising and Social Media

Patient Outcome

Patients receive accurate, clear, and trustworthy information about Massage Therapy services, enabling them to make informed choices about their care without encountering misleading, deceptive, or undignified promotions.

Registered Massage Therapist Outcome

The Registered Massage Therapist/Massage Therapist (RMT/MT) ensures all advertising related to their practice is factual, verifiable, easy to understand, not misleading or deceptive.

Requirements

The RMT/MT must:

1. Ensure that advertising is factual, easy to understand and not misleading or deceptive.

2. Respect patient choice and be appropriate to the context and medium (e.g., print or online) when promoting their practice. Massage Therapy advertisements must be factual, easy to understand, and identify the RMT(s)/MT(s) primarily responsible for the practice.

The RMT/MT may:

3. Use advertisements that include:

    a. general information about the practice, such as its location, accessibility, hours of operation, address and telephone number;

    b. information about the RMT's/MT's additional training in a particular area of practice;

c. references to the Scope of Practice of Massage Therapy that the RMT/MT provides; and/or

d. information on the types of services available.

The RMT/MT's advertisements **must not** include any:

4. Information that is false, misleading or deceptive;

5. Information that the RMT/MT cannot verify;

6. Comparison to another RMT/MT or Massage Therapy practice that could be reasonably interpreted as a representation of superiority;

7. Undue pressure or promotion of unnecessary products or services;

8. Testimonials by anyone, including from existing or former patients, or their friends or relatives. RMTs/MTs should take all reasonable steps to disable social media functions that allow for testimonials, and/or remove the content, or disassociate it from pages related to their practice (General Regulation of the *Massage Therapy Act, 1991*);

9. Express or implied endorsement (or recommendation for the exclusive use) of a supplement, product or brand of equipment used to provide services;

10. Content that is undignified or that could negatively impact public confidence in the practice of the Massage Therapy profession;

11. References to other practice locations unless the RMT/MT practises at that location; and/or

12. Term, title or designation that states or implies the RMT/MT is qualified to practice in a specialty of the profession;

13. Display of the CMTO logo in RMT/MT advertisements, including websites or social media pages and/or accounts, as they may misleadingly imply an endorsement by CMTO. RMTs/MTs must only practise Massage Therapy using the names displayed on CMTO's public register and any advertisements should only reference the RMT's/MT's names that are found on the public register.

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Standard of Practice: Collaboration and Professional Relationships

Patient Outcome

The patient understands that the Registered Massage Therapist/Massage Therapist (RMT/MT) will work with others as required to provide the best care to meet the needs of the patient.

Registered Massage Therapist Outcome

The RMT/MT practises in collaboration with **patients, other healthcare professionals** and others involved in the patient's care to provide safe, effective and ethical care.

Requirements

The RMT/MT must:

1. Take reasonable steps to understand what other care the patient is receiving and ensure the Massage Therapy **treatment plan** complements the care provided by others within the patient's **circle of care**.

2. Document significant collaboration and professional relationships in a patient's **health record** relevant to the proposed treatment plan, including:

    a. reports received for examinations, tests, consultations or treatments; and

    b. the details of every referral made.

3. Allow others within the patient's circle of care to access the patient's health record where such access is reasonably necessary for the provision of healthcare, unless the patient has expressly instructed the RMT/MT not to provide such access.

4. Work to resolve any problems or conflicts that may arise between the RMT/MT and those involved in the patient's care that could interfere with the delivery of safe, effective and ethical care. Document these concerns and the steps taken to resolve them.

5. Refer the patient to another RMT/MT, healthcare professional or person whose expertise can best address the patient's needs when appropriate and with the patient's **consent**. (See also the *Standard of Practice: Privacy and Confidentiality* and the *Standard of Practice: Consent*).

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Standard of Practice: Collecting Personal Health Information from Patients

Patient Outcome

The **Registered Massage Therapist/Massage Therapist** (RMT/MT) asks the **patient** to share the **Personal Health Information** (PHI) that is necessary for Massage Therapy care. The patient is protected from requests for sensitive or unnecessary PHI that could result in harm, **stigmatization**, or **discrimination**. The patient has a right to control how the RMT/MT collects, uses, and/or discloses their PHI.

Registered Massage Therapist Outcome

The Registered Massage Therapist/Massage Therapist collects PHI from the patient using professional judgment and a **patient-centred** approach to only collect information necessary to provide safe and effective care.

Requirements

CMTO requires RMTs/MTs to use a patient-centred approach to:

1. Inform patients about PHI collection practices, including the patient's right to give, withhold, or withdraw **consent** to the collection, use, or disclosure of their PHI.

2. Only collect information reasonably needed to provide safe and effective Massage Therapy treatment.

3. Ensure different patients' needs and preferences are met by offering more than one option for PHI collection, including verbal, written, electronic, or through a combination of approaches.

4. Use a sensitive and inclusive approach to collecting PHI that does not discriminate against or stigmatize the patient.

5. Use professional judgment to tailor PHI collection to each individual patient and their Massage Therapy needs.

6. Ask clarifying questions throughout the session when appropriate to provide safe and effective Massage Therapy care.

7. Explain the reasons for collecting PHI when the patient asks.

In order to understand the patient's unique needs, views, preferences, and concerns when collecting PHI, the RMT/MT must ask for:

- The patient's name, contact information, and emergency contact details;
- Name and address of primary physician and referring practitioners, if any;
- Date of birth and/or age, language preferences, and accessibility/mobility needs;
- History of Massage Therapy care;
- Updates or changes to PHI since the client's last appointment (for subsequent visits);
- Information that is necessary to address an acute health concern requiring first aid, and/or referral for immediate or emergency care;
- Reason for seeking Massage Therapy care; and
- Allergies.

The RMT/MT must never ask the client about the following:

- PHI and/or personal information that is unrelated and/or not necessary for safe, effective, and ethical Massage Therapy care (e.g., personal life); or
- Risks already addressed by routine infection-control practices (e.g., HIV/AIDS, Hepatitis C) outlined in CMTO's *Standard of Practice: Infection Prevention and Control* and Public Health Ontario's Routine Practices.

The RMT/MT must use professional judgment when collecting PHI to ensure the patient receives Massage Therapy care that is safe for and tailored to their individual circumstances and specific needs. The RMT/MT may consider asking the patient about their personal preferences, health conditions, symptoms and medications including, but not limited to, the following:

- Stage of life, e.g.:
    a. Pregnancy;
    b. Infancy and childhood;
    c. Adolescence;
    d. Adulthood;
    e. Senior years; and/or
    f. End of life.
- Reproductive system conditions/disorders, e.g.:
    a. Uterine fibroids, endometriosis; and/or
    b. Details related to pregnancies, childbirths and children when patients are receiving concurrent treatment for perinatal or reproductive disorders.
- Gender identity and pronouns;
- Recent/current injuries (strains, etc.);
- Conditions/disorders relevant to Massage Therapy treatment, e.g.:
    a. Skin, muscle, joint, bone, pain;
    b. Inflammatory;
    c. Cardiovascular; and/or
    d. Respiratory.

- Increased sensitivity to pain or pressure;
- Unmanaged immune dysfunction;
- Cancer status, including if:
    a. A patient voluntarily discloses that they have/have had cancer, and/or if they are receiving/have received chemotherapy or radiation treatment.
- When a patient voluntarily reports that they are seeking treatment for physical symptoms related to a mental health condition/disorder, an RMT/MT should limit their questions to the patient's physical symptoms; and
- Symptoms resulting from acute injury, infection or illness:
    a. Bruising;
    b. Fever;
    c. Pain and/or swelling/inflammation;
    d. Dizziness;
    e. Generalized loss of muscle strength; and/or
    f. Increased blood pressure/heart rate (e.g., palpitations).
- Current use of the following types of medications:
    a. Analgesics (pain medications);
    b. Non-steroidal anti-inflammatory medications (NSAIDs);
    c. Corticosteroids;
    d. Muscle relaxants;
    e. Anti-coagulants (blood thinners);
    f. Medications to address respiratory, bronchial conditions/disorders (inhalers etc.);
    g. Medications, recreational drugs, or substances that affect the ability to sense/experience pain;
    h. Medications that affect sensation; and/or
    i. Medications to address cardiovascular/circulatory conditions/disorders (e.g., anti-hypertensives etc.).

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Standard of Practice: Communication

Patient Outcome

The patient receives the information needed to make an informed decision about their care and is given the opportunity to ask questions of their Registered Massage Therapist/Massage Therapist (RMT/MT).

Registered Massage Therapist Outcome

The RMT/MT clearly provides the **patient** with the information required to make informed decisions about their care and communicates in a professional manner.

Requirements

The RMT/MT must:

1. Engage the patient in dialogue to ensure they are given the opportunity to discuss their goals, raise concerns, ask questions, participate in decision-making and suggest changes to treatment (see also the *Standard of Practice Collecting Personal Health Information from Patients* and *Standard of Practice Consent*).

2. Use effective communication including plain language and active listening to accurately transmit information about Massage Therapy whenever possible.

3. Adapt communication practices according to the patient's understanding, needs and preferences.

4. Allow a third party chosen by the patient to be present to assist with communication when requested.

5. Ensure that all forms of communication (spoken; written, including paper and electronic; and social media) are respectful, ethical and professional, and that patient **privacy** and **confidentiality** is always maintained.

6. When using social media platforms, RMTs/MTs must:

    a. Carefully consider whether professional boundaries will be blurred if "friending" or "following" a patient on social media.

    b. Respond to social media messages in a professional and courteous manner, assuming it may become public.

    c. Maintain privacy and confidentiality and never post or reveal any patient information (see also the *Standard of Practice: Privacy and Confidentiality*).

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Standard of Practice: Conflict of Interest

Patient Outcome

The patient receives services that are solely in their best interest and not compromised by any potential, real or perceived personal or financial interest.

Registered Massage Therapist Outcome

The Registered Massage Therapist/Massage Therapist (RMT/MT) avoids any potential, real or perceived personal or financial conflict of interest. If the **conflict of interest** cannot be avoided, it must be managed and disclosed to the **patient**.

Requirements

The RMT/MT must not practise while in a conflict of interest, including but not limited to:

1. Providing or receiving a monetary or **other benefit** (such as a referral fee or a reduction in rent) for referring a patient to or from any other business.

2. Recommending a product or service in which the RMT/MT has a personal or financial interest without first disclosing the nature of the interest and advising the patient that they may obtain a suitable alternative product or service elsewhere. Document this discussion in the patient **health record**.

3. Sharing revenue, fees or income with someone associated with their practice who is not a regulated health professional in Ontario, unless the RMT/MT has a written agreement in place that ensures the RMT/MT is still responsible for the professional aspects of their practice, including record keeping and billing.

4. Renting premises to or from any person or business where the rent is determined, in whole or in part, by the volume of patient referrals to or from the landlord.

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Standard of Practice: Consent

Patient Outcome

The patient receives the information they need to make an informed decision about their care and is given the opportunity to ask questions of their RMT/MT. Assessment and/or treatment only begins after the patient has given the RMT/MT consent. The patient is aware they can withdraw their consent at any time.

Registered Massage Therapist Outcome

The Registered Massage Therapist/Massage Therapist (RMT/MT) obtains **informed consent** (from **patients** or their **substitute decision-makers**) prior to and throughout assessment and treatment.

Requirements

The RMT/MT must:

1. Obtain the patient's consent prior to conducting an assessment, providing treatment, or modifying a treatment plan. Consent must include a discussion with the patient about the following six elements:

    a. The nature of the treatment;

    b. The expected benefits;

    c. Risks and side effects;

    d. Alternative courses of action;

    e. Likely consequences of not having treatment; and

f. The patient's right to ask questions about the information provided and that assessment or treatment will be stopped or modified at any time at their request (see also the *Standard of Practice: Collecting Health Information from Patients*) .

2. Obtain the patient's informed consent (written or electronic) prior to every assessment and/or treatment of **sensitive areas** including the upper inner thighs, chest wall muscles, and the breasts. The RMT/MT must not touch the breasts except when assessing and/or treating the breast if the patient has requested that for a clinically indicated reason (for example, surgical intervention or perinatal care). The RMT/MT must also obtain informed consent (written or electronic) prior to assessing and/or treating the buttocks (gluteal muscles) at the first visit in a treatment plan, then verbally prior to every treatment within that same treatment plan (see also the *Standard of Practice: Prevention of and Zero Tolerance for Sexual Abuse*).

3. Ensure that consent relates to the assessment and/or treatment being proposed, is given voluntarily, and not obtained through misrepresentation or fraud.

4. Confirm the patient who is providing consent is capable. If the patient is incapable, then a substitute decision-maker can provide consent on behalf of the patient. If a patient is incapable and no substitute decision-maker is available, RMTs/MTs must refuse to provide assessment and/or treatment.

5. Use professional judgement to determine if the patient can understand the potential benefits and risks of Massage Therapy treatment as explained, and whether the patient's perception of pain or pressure levels, or indeed of what occurred during the treatment itself, could be impacted, if the RMT/MT believes the patient has used an impairing substance (e.g., cannabis or alcohol).

6. Not use or sell any modality or product (including topical products and lubricants) about which the RMT/MT lacks sufficient information about its risks, benefits, and contraindications. Without this information, the RMT/MT cannot obtain valid consent and so must not use the modality or apply the product during treatment.

7. Not use or sell topical cannabis products (whether provided by the patient or the RMT/MT) during Massage Therapy treatment. Current research does not address the risks, benefits, and contraindications of such products; without this information, the RMT/MT cannot assess the risk to the patient, informed consent cannot be obtained, and the product must not be applied.

8. Monitor the patient throughout assessment and treatment and, when appropriate, reverify consent.

9. Document consent conversations in the patient **health record** within 24 hours of the appointment at which consent was obtained. When the RMT/MT obtains written or electronic consent for assessment and/or treatment of sensitive areas, it must also be kept in the patient's health record.

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Standard of Practice: Fees and Billing

Patient Outcome

The patient is charged reasonable fees that are fair and explained to them before receiving care.

Registered Massage Therapist Outcome

The Registered Massage Therapist/Massage Therapist (RMT/MT) charges fees that are **fair and equitable**, reasonable, transparent, and communicated to the **patient**.

Requirements

The RMT/MT must:

1. Keep a **financial record** for each patient that contains accurate details of services provided, fees charged, and a copy of the receipt issued to the patient.

2. Not submit an account or charge for services that the RMT/MT knows is false or misleading.

3. Not sell or assign any debt owed for professional services to a third party (for example, a collection agency). This does not prohibit the payment of services by credit cards.

4. Inform the patient of any penalties for missing or cancelling appointments in advance of their first appointment and inform them of any subsequent changes to the policy.

5. Prior to providing services, inform the patient if the RMT/MT is delisted with the patient's insurance provider(s).

6. Communicate fees to the patient prior to providing services.

7. Itemize fees on a receipt, if requested by the patient or a person or agency paying for the services.

8. Post fees in a visible location in the practice setting.

9. Ensure fees do not differ from the posted fee without noting the rationale and difference in the patient's **health record**, and without the prior acceptance of the patient.

10. Ensure fees are not excessive or unreasonable.

11. Not reduce fees in exchange for prompt payment.

12. Ensure that any receipts issued for Massage Therapy (either paper or electronic), include at a minimum:

    a. date of appointment;

    b. length of appointment;

    c. name of patient;

    d. name of the RMT/MT;

    e. dollar amount of the transaction;

    f. signature and registration number of the RMT/MT; and

    g. HST number (if applicable).

13. Only indicate "Massage Therapy treatment" and include the RMT's/MT's registrant number for products and services that are within the **Scope of Practice of Massage Therapy**, and that have only been provided/performed by the RMT/MT themselves on receipts. Receipts for products and services outside the Scope of Practice of Massage Therapy must indicate the product or service provided and must not refer to Massage Therapy.

14. Ensure the receipt for a gift certificate/card, or other prepaid form of credit, describes the service as "Gift Certificate or Gift Card" and must include the dollar amount paid. When the gift certificate/card is redeemed, a receipt for the dollar amount of the gift certificate/card must not be issued. If the redeemer wishes to receive a receipt, then the description must be "gift certificate/card redeemed" with no dollar amount given.

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Standard of Practice: Patient-Centred Care

Patient Outcome

The patient is meaningfully engaged in decision-making for their Massage Therapy care that centres the patient's unique needs, views, preferences, concerns and health goals.

Registered Massage Therapist Outcome

The Registered Massage Therapist/Massage Therapist (RMT/MT) provides Massage Therapy that is focused on the best interests and unique needs, views, preferences and concerns of each individual patient ensuring the **patient** is actively involved in decision-making regarding their care.

Requirements

The RMT/MT must:

1. Obtain the patient's **informed consent** prior to conducting an assessment, providing treatment or modifying a **treatment plan**. (see also the *Standard of Practice: Prevention of and Zero Tolerance for Sexual Abuse* and, *Standard of Practice: Consent*). Promote the patient's involvement in their own health goals by considering patient input and supporting their informed decision-making in all aspects of patient care.

2. Assess the patient, including obtaining **personal health information**, to determine the patient's condition and if Massage Therapy is indicated, using the RMT's/MT's knowledge, skills and professional judgement (see also the *Standard of Practice: Collecting Health Information from Patients*).

3. Develop a treatment plan for each patient based on the assessment and patient's goals for treatment, monitor the patient's response and modify treatment accordingly.

4. Integrate an evidence-informed approach to care including using professional knowledge, experience and practice evaluation, external research, patient perspective and practice context.

5. Only treat, or attempt to treat, conditions within the RMT's/MT's competence and the **Scope of Practice of Massage Therapy**.

6. Ensure the patient understands when and in what circumstances they are providing care within the Scope of Practice of Massage Therapy, and when the registrant is providing care within the scope of another health profession in which they are regulated, if the RMT/MT has **dual registration**.

7. When appropriate and with the patient's consent, refer the patient to another RMT/MT, **healthcare professional** or person whose expertise can best address the patient's needs.

8. Provide **fair and equitable** access and consistent quality of care to all patients.

9. Treat all patients with respect and dignity.

10. Ensure the patient's continuing comfort and safety during the treatment, addressing any intended and unintended effects and outcomes as required.

11. Work with the patient and others, as required, to plan and implement **discharge** from care.

12. Only discontinue providing care that is needed to a patient if the discharge process has been documented in the patient's file and:

    a. the patient requests discontinuation; or

    b. alternative services are arranged, or the patient is given reasonable opportunity to arrange alternative services; or

    c. the patient is unable or unwilling to provide payment; or

    d. the **patient is abusive toward the RMT/MT** or poses a real or perceived threat, and the RMT/MT has referred the patient to CMTO's Public Register.

13. Never **abuse** a patient; including, verbal, physical, psychological, emotional, sexual or financial abuse.

14. Never have a sexual relationship with a patient. This is **sexual abuse**. An RMT/MT may not enter into a sexual relationship with a patient for a period of one year after the patient ceased to be a Massage Therapy patient. (see also the *Standard of Practice: Prevention of and Zero Tolerance for Sexual Abuse*).

15. At the patient's request, securely transfer copies of the patient's **health record** to another RMT/MT or other healthcare professional.

16. Upon resignation, or closure of a clinic, refer the patient to another RMT/MT, healthcare professional or person whose expertise can best address the patient's needs; and take necessary actions to ensure patient health records are properly retained, transferred and disposed of.

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Standard of Practice: Prevention of and Zero Tolerance for Sexual Abuse

Patient Outcome

The patient is not sexually abused by an RMT/MT.

Registered Massage Therapist Outcome

The Registered Massage Therapist/Massage Therapist (RMT/MT) does not sexually **abuse patients** or engage in any activities of a **sexual nature** with patients and takes active steps to prevent **sexual abuse**.

Requirements

The RMT/MT must never:

1. Sexually abuse patients. Note that the ***Health Professions Procedural Code***, **being *Schedule 2* to the *Regulated Health Professions Act, 1991* (RHPA)** defines "sexual abuse" of a patient as:
    - Sexual intercourse or other forms of physical sexual relations between the RMT/MT and the patient;
    - Touching, of a sexual nature, of the patient by the RMT/MT; or
    - Behaviour or remarks of a sexual nature by the RMT/MT towards the patient.
        - "Sexual nature" does not include touching, behaviour or remarks of a clinical nature appropriate to the care provided.
2. Touch the patient's genitals or anus, as this is always considered sexual abuse.

The RMT/MT must:

3. Ensure any mirrors present in a treatment area are placed in a location that respects the patient's **physical/personal privacy**.

4. File a **mandatory report** with the appropriate college if the RMT/MT has reasonable grounds, obtained while practising, to believe that an RMT/MT or regulated health professional has sexually abused a patient and the RMT/MT knows the registrant's name.

5. Disable all audio, video or photographic transmitting and recording functions of all devices in the room, unless:

    a. The RMT/MT obtains informed **consent** for the use of audio, video or photographic recording equipment; and

    b. The recording functions are for assessment, treatment and/or educational purposes. (see also the *Standard of Practice: Privacy and Confidentiality*)

6. Be sensitive to each patient's individual culture, experience, gender, age and history, which may influence sensitivity to touch and touching certain areas.

The RMT/MT may only assess/treat **sensitive areas** when:

7. Assessment/treatment is clinically indicated; and

8. The patient's informed consent (written or electronic) is obtained prior to every assessment and/or treatment of sensitive areas including the upper inner thighs, chest wall muscles, and the breasts. The RMT/MT must not touch the breast except when assessing and/or treating the breast if the patient has requested that for a clinically indicated reason (for example, surgical intervention or perinatal care). The RMT/MT must also obtain informed consent (written or electronic) prior to assessing and/or treating the buttocks (gluteal muscles) at the first visit in a treatment plan, then verbally prior to every treatment within that same treatment plan (see also the *Standard of Practice: Consent*).

Important Information:

- "Sexual abuse" includes unwanted touching of a patient by an RMT/MT and any sexual relationship with a patient, even if the patient is a spouse or current sexual partner. The only time the RHPA permits an RMT/MT to provide Massage Therapy services to a person with whom the RMT/MT is in a current sexual relationship (including a spouse) is where the treatment is emergency treatment, or minor treatment and a referral is made to another practitioner.

- For the purposes of the sexual abuse provisions in the RHPA, a patient is someone who was the recipient of Massage Therapy treatment; that person will meet the definition of “patient” for one year after they ceased being the RMT’s/MT’s patient.

- Patient consent is never a defence for inappropriate or sexual touching or relationships of a sexual nature.

- CMTO recognizes the seriousness and extent of harm that sexual abuse and other forms of abuse cause the patient and others related to the patient. It has zero tolerance for any form of abuse: verbal, physical, emotional, financial or sexual, by an RMT/MT.

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Standard of Practice: Privacy and Confidentiality

Patient Outcome

The patient's personal health information, privacy and confidentiality are securely protected.

Registered Massage Therapist Outcome

The Registered Massage Therapist/Massage Therapist (RMT/MT) always maintains **privacy** and **confidentiality** of patients and the patient's personal health information.

Requirements

The RMT/MT must:

1. Comply with the ***Personal Health Information Protection Act, 2004*** (PHIPA).

2. Understand that the rules governing **consent** to decisions involving the collection, use and disclosure of **personal health information** are found in PHIPA and are different from the rules governing consent to treatment found in the ***Health Care Consent Act, 1996*** (HCCA) (see also the *Standard of Practice: Consent*).

3. Ensure that for consent to be valid under PHIPA related to the collection, access, use or disclosure of personal health information under PHIPA, RMTs/MTs must:

    a. Ensure that the patient has provided consent, and knows the purpose of the collection, use or disclosure,

    b. Recognize that the patient may give, withhold, or withdraw consent;

    c. Not obtain consent through deception or coercion.

d. Obtain the patient's consent before disclosing personal health information to a person outside the patient's **circle of care**; and

e. Rely on the patient's implied consent to disclose personal health information within the patient's **circle of care** for healthcare purposes, unless the RMT/MT has reasons to believe that the patient has expressly withheld or withdrawn consent to do so.

4. Obtain consent from the patient's **substitute decision-maker** for the collection, use or disclosure of personal health information if the patient is **incapable**.

5. Only discuss the patient's personal health information in a way that ensures the patient's privacy (for example, avoid treatment-related conversations in non-private places) (see also the *Standard of Practice: Collecting Personal Health Information from Patients*).

6. Use any electronic communication, social media, patient booking and management software and other forms of digital technology ethically and professionally, and in a way that protects the confidentiality of patient information.

7. Store, share, transfer, and dispose of patient data on personal devices in a way that maintains the confidentiality of patient information.

8. Comply with the PHIPA requirements for **mandatory reporting** of privacy breaches.

9. Disable all audio, video or photographic transmitting and recording functions of all devices in the room, unless:

   a. the RMT/MT obtains informed **consent** for the use of audio, video or photographic recording equipment; and

   b. the recording functions are for assessment, treatment and/or educational purposes only.

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Standard of Practice: Professional Boundaries, Draping, and Physical Privacy

Patient Outcome

The patient is treated with respect and dignity, knowing that Registered Massage Therapists/Massage Therapists (RMTs/MTs) maintain professional boundaries and do not subject patients to abuse of any kind. The patient is effectively covered by clothing and/or draping for their comfort and safety and to maintain appropriate boundaries and help prevent **boundary crossings** and **boundary violations**.

Registered Massage Therapist Outcome

The RMT/MT always maintains **professional boundaries** with **patients** to preserve the trust and respect of the **therapeutic relationship** and to prevent **boundary crossing, boundary violation** and **abuse**. The RMT/MT protects **patient physical/personal privacy** and safety and maintains appropriate **boundaries** by effectively using physical barriers.

Requirements

To maintain professional boundaries, the RMT/MT must:

1. Neither give nor receive gifts of significant value to/from patients.

2. Avoid treating family or friends (**dual relationship**), and not have personal relationships with patients where professional boundaries could be at risk of being violated.

3. Recognize that patient participation is never a justification for boundary crossings or violations.

4. Recognize the inherent **power** imbalance in the therapeutic relationship and take necessary actions to manage it as needed.

5. Ensure that all spoken remarks, body language and gestures towards patients are polite, professional and respectful at all times, and refrain from any behaviour that could increase the risk of boundary violation.

6. Address and document unintentional or accidental boundary crossings or violations immediately.

7. Allow patients to have another individual accompany them at an appointment if requested.

8. Not practise Massage Therapy under the influence of any substance (whether legal or illegal) that may impair their judgement.

Draping/clothing are important tools to distinguish areas of assessment and/or treatment. Secure effective visual and physical boundaries are essential to protecting the patient from boundary crossings and violations. The RMT/MT must:

9. Always drape the patient, unless the patient arrives for assessment and/or treatment in clothing suitable for their assessment and/or treatment and prefers to remain clothed.

10. Meaningfully engage the patient in a discussion about the options for draping and clothing for assessment and/or treatment, considering each patient's unique needs, views, preferences and concerns (in line with a **patient-centered** approach) (see also the *Standard of Practice: Patient-centred Care*).

11. Explain to the patient how to best prepare for assessment and/or treatment, including how to position themselves.

12. Explain to the patient clearly what part of the body the RMT/MT intends to assess and/or treat, and determine the patient's preference as to whether the touch will be directly on skin or through a cloth barrier (for example, a sheet or the patient's clothing), and continuously monitor the patient for change in consent and comfort throughout assessment and/or treatment.

13. If assessing and/or treating **sensitive areas**, discuss with the patient how sensitive areas will be draped and/or clothed and how touch will occur (for example, over draping and/or clothing or on skin, and for bilateral exposure). Never expose sensitive areas without the patient's informed consent (written or electronic) (see also the *Standard of Practice: Consent* and *Standard of Practice: Prevention of and Zero Tolerance for Sexual Abuse*).

14. Ensure the patient is protected from exposure of the genital area and the gluteal cleft. Never touch the patient's genitals or anus. If treating a patient during childbirth, obtain explicit consent to have their genital area and gluteal cleft exposed for the purpose of Massage Therapy to other areas of their body.

15. Not reach underneath the draping and/or clothing without explicit consent:

    a. RMTs/MTs must not reach under draping and/or clothing in a way that could risk touching an area of the body for which the patient has not given consent to be touched.

    b. RMTs/MTs when requested by the patient shall discuss options to assess and/or treat under clothing, only when it is in the best interest of the patient and only with the patient's explicit consent.

    c. Some patients may feel better protected during assessment and/or treatment by limiting exposure of some areas of their body or may present with accessibility needs. In these cases, the RMT/MT shall offer options for providing care in a way that does not require touch (for example, instructing patient to stretch) or assessing and/or treating on top of clothing with the patient's consent.

If the patient remains clothed for assessment and/or treatment, the RMT/MT must:

16. Discuss options for maintaining patient physical/personal privacy if assessment and/or treatment occurs in non-private environment.

17. Adjust clothing only with the patient's informed consent and in consideration of the patient's unique needs, views, preferences, concerns, and health goals to protect the patient's physical/personal privacy.

When patient draping is adjusted during assessment and/or treatment, the RMT/MT must:

18. Drape securely using material that provides an effective visual barrier to set clear physical boundaries that separate the areas being treated and/or assessed from the areas of the body where no touch is being applied.

19. Drape to prevent visual exposure of any areas of the patient's body when they are not being treated and/or assessed (except for the shoulders, arms, hands, neck, face, and head). The RMT/MT must not uncover areas of the patient's body when they are not being assessed and/or treated unless it is at the patient's request and for the patient's comfort (such as for temperature regulation), and the patient's informed consent has been obtained. The RMT/MT must obtain the patient's written or electronic consent prior to exposing any sensitive areas when they are being treated and/or assessed.

College of Massage Therapists of Ontario

Standard of Practice: Record Keeping

Patient Outcome

The patient's **health records** are maintained, stored, transferred, and disposed of in a way that keeps patient information confidential and secure.

Registered Massage Therapist Outcome

Registered Massage Therapists/Massage Therapists (RMTs/MTs) will prepare accurate and complete patient **health records** and other documentation.

Requirements

The RMT/MT must:

1. Ensure, and regularly verify, that all records are kept in compliance with the ***Personal Health Information Protection Act, 2004*** (PHIPA), the **Records Regulation** (Part III of the General Regulation under the ***Massage Therapy Act, 1991***), and the Records and Record Keeping sections of the Professional Misconduct Regulation (Part VIII of the General Regulation under the *Massage Therapy Act, 1991*).

2. Identify their role and responsibility related to privacy legislation in every practice [such as **agent** versus **health information custodian** (HIC)] and ensure those details are reflected in applicable employment or contractual agreements for their practice.

3. Protect the confidentiality of all reports and records, including protection from loss, tampering, interference, or unauthorized use or access. (see also the *Standard of Practice: Prevention of and Zero Tolerance for Sexual Abuse*).

4. Patient health records must be retained for 10 years after the patient's last visit, or 10 years after the day the patient turned 18 (if they were under 18 at the time of their visit). Destroying records must only be done after this time, and in a way that maintains patient confidentiality.

5. Provide access to, or a copy of, a patient health record when a request is received from those authorized to access the health record by law, including:

    a. Those designated by CMTO;

    b. Those designated by the Ministry of Health; or

    c. Persons conducting health research, administration or planning after information that could be used to identify individual patients is removed.

6. Transfer patient records when the RMT/MT retires, moves practices or locations, or when otherwise requested by the patient; and

7. Maintain the following records:

    a. A daily appointment record with the name and appointment/treatment time of each patient;

    b. An equipment service record documenting the servicing of equipment used to examine or treat patients;

    c. Financial records for each patient that comply with the Records Regulation; and

    d. Personal health record for each patient that complies with the Records Regulation.

8. Not allow an individual to examine a patient record or access information in it, unless the patient or their authorized representative consent to it, or if it is permitted or required by law.

9. Not falsify records relating to the RMTs/MTs practice; or a patient's health record.

10. Not sign or issue in the RMT/MT's professional capacity, a document that the RMT/MT knows or ought to know includes a false or misleading statement.

11. Have a written agreement in place when joining a practice with their employer or the facility operator, setting out the procedures for record handling and storage, and addressing what happens to the records when the RMT/MT ceases to work at that practice, including in cases of termination of employment and the practice closing, relocating or being sold if the RMT/MT is not the **health information custodian (HIC)**.

12. Have a plan in place if the RMT's/MT's employment relationship with a practice ends, and the RMT/MT is not the **HIC**, for the RMT/MT to be given copies or access to patient records.

13. When leaving a facility, share their contact information with the facility prior to changing their practice location.

14. Ensure patients are notified (directly or through a representative) when they are leaving a practice, or if the practice is closing/being sold, to assist with the transfer of care, and ensure patients know what will be done with their records and how to access copies.

15. Not sell patient records and personal health information as an asset of a practice, even upon an RMT's/MT's death.

College of Massage Therapists of Ontario

Standard of Practice: Safety and Risk Management and Infection Prevention and Control

Patient Outcome

The **patient** receives care that is delivered as safely as possible and is not placed at significant risk for transmission of infectious disease or illness.

Registered Massage Therapist Outcome

The Registered Massage Therapist/Massage Therapist (RMT/MT) takes preventative and risk management measures to provide safe care and follows safe **Infection Prevention and Control (IPAC)** procedures to protect the health and safety of **patients**, themselves and others in the practice environment.

Requirements

An RMT/MT must:

1. Implement and follow an IPAC plan tailored to the practice setting that adheres to current health and safety and IPAC government orders and directives, legislation and CMTO guidance.

    a. In the case of differences in requirements, RMTs/MTs must adhere to the most restrictive or stringent requirements.

2. Ensure practice settings are appropriately lit and arranged to allow sufficient physical/personal **privacy** and safety for each patient.

3. Maintain the practice setting in a sanitary manner, and ensure all equipment is in good repair to allow effective cleaning and disinfection.

4. Document maintenance of equipment used to treat patients within the practice setting in an equipment service record or log.

5. Handle any hazardous materials safely and in compliance with established and documented protocols and practices, including the requirements of the **Workplace Hazardous Materials Information System (WHMIS)**.

6. Participate in training and/or certification and support activities related to safety and risk management as required and/or appropriate for the practice setting.

7. Recognize and manage situations that place patients, themselves, other RMTs/MTs, clinic staff and other **healthcare professionals** at risk.

8. Respond effectively to safety incidents, document and disclose them to relevant authorities to prevent future adverse events.

9. Stay informed of current infectious disease risks, symptoms, routes of transmission and prevention strategies in their community and/or practice setting.

10. Follow Public Health Ontario's (PHO's) recommendations for cleaning and disinfecting the practice setting, at a minimum including:

    a. Cleaning and disinfecting massage tables, face cradles and other surfaces touched by the patient and/or RMT/MT after each patient.

    b. Using **cleaned and disinfected linens** and covers for each patient (including but not limited to sheets, pillow covers, blankets, face cradle covers).

    c. Handling soiled linens safely.

    d. Cleaning and disinfecting any equipment, supplies or other tools used in assessment or treatment after each patient (for example, hot stones, oil bottles, pumps, ultrasound equipment, myofascial cups, etc.).

    e. Apply additional IPAC practices when indicated by **risk assessment** or by government or CMTO, such as using **personal protective equipment (PPE)** (for example, gloves, masks, gowns, face shields).

11. Postpone or modify care if appropriate IPAC measures cannot be implemented or required PPE is not available.

12. Provide information to patients about infectious disease risk, IPAC and PPE when appropriate.

13. Document and notify patients of any incidents where IPAC practices could not be maintained and/or a patient was exposed to significant risk of infectious disease transmission.

14. Conduct risk assessments of:

    a. the practice environment and all equipment/supplies used for patient services;

    b. infection transmission; and

    c. intended or likely interactions between RMT/MT and patient (for example, treatment approach and modalities, areas of body being treated, length of treatment).

15. Perform hand hygiene by:

    1. Washing hands using products that meet Public Heath Ontario's expectations such as soap and running water or an alcohol-based hand rub (at least 70% or equivalent);

    2. Washing hands before entering or leaving the practice setting, before and after each patient interaction, after removing soiled linens and prior to handling clean linens, putting on or taking off PPE, after using the bathroom/washroom, before or after/eating drinking, or when hands are otherwise soiled;

    3. Maintaining fingernails for effective hygiene;

    4. Removing jewelry that may impede hand hygiene; and

    5. Covering their own broken skin or open wounds with a protective barrier (for example, finger cot, gloves).