



Registered Massage Therapists'
Association of Ontario

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Marnie Lofsky
Director, Professional Practice
College of Massage Therapists of Ontario
1867 Yonge Street, Suite 810
Toronto, Ontario
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RE: Consultation on Proposed New Standards for Maintaining Professional Boundaries and Preventing Sexual Abuse

Dear Ms. Lofsky,

The Board of Directors of the Registered Massage Therapists' of Ontario (RMTAO) wish to commend the College of Massage Therapists of Ontario (CMTO) for their consultative process in drafting the revised new *Standards for Maintaining Professional Boundaries and Preventing Sexual Abuse*. It is clear that the process has led to further clarification and understanding by the profession in Ontario.

In particular, the RMTAO is pleased that the CMTO has clarified positions with regard to video/photographic/recording devices, supportive physical contact (hugging), and touch within a spousal relationship as opposed to touch within a clinical context. The RMTAO is also pleased with clarification of language throughout the document, and the removal of the requirement of a written note from a primary care physician before specific treatments of a sensitive area.

The RMTAO Board of Directors continues to recognize the implications of the *Protecting Patients Act* and is committed to working with all of the profession's stakeholders to deliver safe and effective healthcare.

There remain, however, some particular areas of concern. Specifically, The RMTAO would ask that the CMTO remove the requirement for written consent prior to every treatment of certain sensitive areas unless there is a substantive change in the treatment plan or approach to care.

Standard B1 (C): Treatment of Sensitive Areas:

The new standard requires that the RMT identify the sensitive area(s) with the client and receive written consent to assess and treat the sensitive area(s). It also requires that the therapist obtain written consent each appointment within the same treatment plan for some of the identified sensitive areas. It is understood by the RMTAO that these areas include the chest wall musculature, the breast, upper inner thigh, and gluteal region (treatment plan only), identified as sensitive within *Bill 87, Protecting Patients Act, 2017*. The *Protecting Patients Act, 2017*, does not, however, mention that written consent to treat related to those areas is a requirement. Written consent to treat is not referred to in the *Health Care Consent Act*, or the *Regulated Health Professions Act*. There is only a requirement under the *Massage Therapy Act, 1991 (Section 11 (2) (10))* to have a written record of consent (non-specific) obtained.

The RMTAO understands that these identified sensitive areas are open to “*misinterpretation, misunderstanding and may be experienced by the client as a violation of their body – potentially as sexual abuse*” (CMTO September 2017). However, what has not been provided to health care providers by either the Ministry of Health and Long-Term Care or the College of Massage Therapists of Ontario is a definition of where a sensitive area begins or ends. The new standard has no clear anatomical parameters and this will lead to confusion and uncertainty for the members of the profession. There is a real possibility that the client will not understand that the continuous request for consent is meant for their benefit. It will instead be perceived as the correction of a misunderstanding, or lack of professional practice abilities. This in itself could present a barrier to care for clients in need by undermining client confidence in the massage therapist.

The standards would be most effective by encouraging and enabling effective professional communication, not prescribing undue process which is perceived to undermine the therapists’ professionalism. The RMTAO recognizes that this standard is meant to reduce unfounded complaints or unintended consequences, but receiving written consent in the manner and frequency outlined in the current standards is not reasonable and is seen by the RMTAO as a step backward for this profession.

Informed Consent

Informed consent provides for transparency by the practitioner in their communication to the patient or their substitute decision-maker about the intended treatment, expected outcomes, risks inherent in the treatment, possible alternatives, and the areas that will be involved in the treatment. Communicating these elements is essential for the clear and effective delivery of health care. A central part of the discussion is the ability of the client to be in control of their health care decisions. This why consent can be withdrawn at any time

by the client. To continuously require written consent is to ask the client to repeatedly answer the same questions. This is an onerous process, and after providing continuously written consent the client may not understand their ability to withdraw consent at any time.

The RMTAO believes and recommends that requiring written consent at the initial assessment, initial treatment within a treatment plan, or substantive change in the direction of that treatment plan is more than sufficient and has become the standard across other health care professions. Ongoing written consent represents a barrier to care for the client over time through frustration with repetitive tasks and opens up the potential for clients to misinterpret or misunderstand their ability to withdraw consent at any time.

The RMTAO applauds the CMTO for its commitment to the public interest, and we understand that these standards are designed to address a serious set of issues within the profession. The issue of professional communication is of paramount importance, and it's therefore important to clearly define or delineate the sensitive areas and recommended approaches in order to ensure that the public can be effectively protected.

We would advocate strongly for representatives of the regulatory body, the education sector, and the association to come together to more fully investigate appropriate curricular requirements for communication at the student level. The issue(s) should be approached substantively before a registrant has completed the registration process. Appropriate education in client communication is the only approach that will create and enshrine the changes necessary for the public interest.

The members of the profession of massage therapy are committed health professionals that have a central place in the health care they provide to their clients. The true goal of this process should be to encourage more appropriate and in-depth professional communication. The RMTAO recommends the removal of the requirement for written consent prior to every treatment of certain sensitive areas. We look forward to further communication and collaboration so that we can work together to increase professional communication in a manner that is reasonable, appropriate and respectful to the client, massage therapist and the profession.

Respectfully submitted,

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

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