



College of
**COMPLEMENTARY HEALTH
PROFESSIONALS OF BC**

Practice Environment Standard of Practice

Applies to Registered Massage Therapists

The College of Complementary Health Professionals of BC was created on June 28, 2024 through the amalgamation of four health regulatory colleges:

- College of Chiropractors of BC
- College of Massage Therapists of BC
- College of Naturopathic Physicians of BC
- College of Traditional Chinese Medicine Practitioners and Acupuncturists of BC

All current requirements for standards of clinical and ethical practice issued by the four colleges remain in place upon amalgamation.

This document was created by the College of Massage Therapists of BC and will be updated to reflect the amalgamation.

CMTBC Standards of Practice

Purpose

Practice standards define the minimum level of expected performance for registered massage therapists, and therefore define what constitutes safe, ethical, and competent delivery of care by RMTs.

RMTs are responsible for exercising their professional judgment to apply the standards to the situations that they face in practice.

Practice Environment

Definition

The “practice environment” refers to the physical environment where the registered massage therapist (RMT) delivers treatment and provides care to patients, as well as to the objects and equipment within that environment. Depending on the size and layout of the practice environment, it may include spaces such as waiting rooms, entry areas, exercise areas, staff rooms, washrooms and treatment rooms. For an RMT with a mobile practice that results in the RMT delivering massage therapy in locations such as a patient’s home or a hospital, the practice environment may be limited to the RMT’s immediate workspace.

RMTs are health professionals and provide treatment in professional practice environments that allow them to satisfy all professional and practice standards.

RMTs promote and maintain a safe treatment space within the practice environment for patients, colleagues, themselves, and others.

Some RMTs provide treatment in practice environments that they themselves do not fully control (e.g. extended care facility, clinic or spa owned by others). It is each RMT’s responsibility, however, to ensure the RMT’s provision of care meets the minimum requirements for the practice environment described below.

Requirements

1. An RMT maintains a practice environment which promotes the safety of patients and practitioners through all aspects of treatment delivery, including by:
 - a. ensuring the cleanliness of all spaces, equipment, tools and other resources;
 - b. ensuring an obstacle-free, tidy environment;
 - c. being aware of and applying requirements of and best practices recommended by current public health and infection prevention and control agencies, including requirements set by CMTBC based on these requirements or best practices (see Application to Practice section of this standard).

2. An RMT adheres to all applicable jurisdictional licensing requirements including and not limited to legislation, regulations, BC Codes (including the Fire Code, Building Code, and Plumbing Code) and municipal bylaws, including any applicable municipal zoning guidelines or bylaws regarding parking, access, and health department approval.
3. An RMT documents and ensures that any equipment used in the RMT's massage therapy practice is maintained and inspected on a regular basis, according to manufacturers' recommendations where available or applicable, and replaced when necessary to ensure patient safety. Examples of equipment include (and are not limited to) power-operated or hydraulic massage tables, screws and bolts on manually adjusted massage tables, exercise equipment, and heating or cooling devices. For guidance on documentation, see Application to Practice.
4. An RMT complies with applicable privacy legislation in the practice environment (the BC [*Personal Information Protection Act*](#)), including with respect to storage of patient records, surveillance cameras, and imaging or videotaping of patients for therapeutic purposes. This also requires that the RMT identify potential risks for breaches of privacy or confidentiality and requires that the RMT implement and maintain appropriate measures to mitigate/manage any such risks.
5. An RMT ensures physical safety of the patient and the therapist in the event of an emergency, including by:
 - a. ensuring unobstructed emergency exits, readily available fire extinguishers and appropriate training of staff in fire and evacuation procedures;
 - b. participating in emergency preparedness and response training appropriate to the practice environment such as fire and earthquake drills; and
 - c. maintaining an up-to-date and comprehensive first aid kit.
6. An RMT ensures adequate space in a treatment room and elsewhere in the practice environment for the safe movement of the patient and the RMT, and to prevent the occurrence of non-therapeutic, unintentional or incidental physical contact with the patient's body by the RMT.
7. An RMT ensures that there is a washroom for patient use in the practice environment, or that patients can access a washroom within a reasonable distance from the practice environment.
8. An RMT ensures that there is a sink in the practice environment.
9. An RMT ensures that a mirror is not placed in a treatment room in which the RMT practices in a manner which may result in a patient perceiving that the RMT has viewed or may have viewed the patient's exposed body in the mirror.
10. An RMT ensures that there is adequate lighting (see Appendix for definition) to support both the patient and the RMT in the practice environment and contribute to their safety.
11. An RMT ensures that if an electronic recording device (see Appendix for definition) is used in the treatment room when a patient is present, it is only for a permitted purpose. A permitted purpose is one or more of the following: intake, assessment, treatment, charting or education (including home care instruction), as well as voice recording by an RMT who is visually impaired and makes voice notes for charting purposes. If using an electronic recording device for a permitted purpose (as defined above), an RMT must:

- a. explain the proposed use of the electronic recording device to the patient and also explain to the patient that the recording capabilities of the device will not be used for any other purpose;
- b. obtain the patient's verbal consent to use the electronic recording device for the stated purpose;
- c. record in the patient's health record that verbal consent was obtained;
- d. not use the electronic device for any purpose other than a permitted purpose to which the patient has consented; and
- e. at all times when the patient is in the treatment room, ensure that the electronic recording device is not positioned in a manner that would enable a video, photographic or audio recording of the patient without the patient's knowledge and consent.

If the electronic recording device is being used to create a video, photographic or audio recording of the patient for the purpose(s) of intake, assessment, treatment, or education, the RMT must obtain the patient's consent as required under PIPA.

Playing music on an electronic recording device is a permitted purpose within the meaning of this section, but only where it does not require the RMT to manipulate or handle the electronic recording device while the patient is present (except at the patient's request due to patient preference of music).

12. An RMT with a mobile practice that results in the RMT working in a patient's home or another location such as a residential care facility or hospital, must comply with sections 1 through 4, 5(c), 6 and 11 to 12 of this standard, but may not be able to meet the other requirements of this standard in all circumstances. An RMT with a mobile practice will comply with sections 5(a) and (b) and 7 through 10 of this standard where possible. An RMT with a mobile practice must meet all other CMTBC practice standards.
13. An RMT with a home-based practice must meet all of the requirements in this standard, as well as all other CMTBC practice standards.

Appendix – Defined Terms

For the purpose of this Practice Standard, an **“electronic recording device”** is a device which may have features including photographic, video or audio recording capacity, and includes but is not limited to:

- mobile electronic devices for sending and receiving messages or information, such as cell phones or “smart phones”;
- desktop computers and laptop computers; and
- tablets.

It does not include any device which does not have photographic, video or audio recording capacity.

For the purpose of this Practice Standard, **“adequate lighting”** is lighting which supports both the patient and the RMT individually and contributes to safety in the practice environment, as follows:

For the patient:

- allows the patient to move comfortably and safely including when the RMT is not in the treatment room;
- supports continued communication and discussion of consent during treatment; and
- allows the patient to know where the RMT is in the treatment room and anticipate what the RMT is doing.

For the RMT:

- allows the RMT to make entries in the health record without relying on the light from a tablet or other electronic screen as the only source of lighting;
- creates a professional and clinical atmosphere appropriate for treatment delivery; and supports continued communication and discussion of consent during the treatment.

For safety:

- includes access to an emergency light source in the treatment room (e.g. flashlights, generator) in case of a power outage; and
- includes areas outside the treatment room, e.g., waiting area, washrooms, and the entry area, and provides emergency light sources in these areas as needed, in case of a power outage.

Application to Practice

For the purposes of section 1(c) of this standard, the requirements currently set by CMTBC based on requirements/recommendations of current public health and infection prevention and control agencies are the Communicable Disease Prevention Requirements.

In complying with section 3 of this standard, regarding documentation and inspection of equipment, an RMT should consider the use of a checklist of routine maintenance and inspection steps, which is updated at least every two months, but more often where appropriate.