

CMTCA Accreditation Standards for Massage Therapy Education Programs in Canada (2024)



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Accreditation

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CMTCA ACCREDITATION STANDARDS FOR MASSAGE THERAPY EDUCATION PROGRAMS IN CANADA (2024)

PREAMBLE

In March 2024, the Canadian Massage Therapy Council for Accreditation (CMTCA) published its revised national standards for the accreditation of entry-level massage therapy education programs in Canada. The *CMTCA Accreditation Standards for Massage Therapy Education Programs in Canada (2024)* replaces the May 2021 version of the standards.

CMTCA defines accreditation as “approval by an independent agency that an education program meets a pre-defined standard.” Meeting national accreditation standards provides clear and objective information about program quality and content. The CMTCA standards and accreditation process are a foundation for inspiring excellence and continued quality improvement in massage therapy education programs across Canada.

Standards review process

CMTCA initiated a review of its accreditation standards in 2022, conducting widespread consultation with massage therapy education programs, regulators, surveyors, CMTCA staff and Board, and other interested parties. The intent was to improve the accreditation process and ultimately the quality of massage therapy education by clarifying criteria that were challenging to interpret or apply, and by adding or amending others to reflect leading or best practices in the massage therapy profession and in educational practice.

For more information about the review and update process, see Appendix A: Standards Development and Review.

Quality descriptors

CMTCA uses eight quality descriptors to define the characteristics of high-quality massage therapy education programs.

Quality Descriptor	Definition
The program is...	The program...
Accessible	Offers diverse and equitable resources and services
Accountable	Includes evaluation of program development and implementation
Collaborative	Engages with faculty, staff, students, patients/clients, and the general public
Ethical	Leads and operates with integrity and equity

Learning centred	Champions professional development and advocacy and promotes lifelong learning for students
Relevant	Provides professional, current, and timely education and clinical experience
Safe	Protects patients/clients, students, faculty, and staff
Sustainable	Ensures ongoing stability and works to be significant, innovative, and progressive

The structure of the standards

The CMTCA standards set rigorous expectations without being overly prescriptive, thus allowing massage therapy education programs to showcase their individual strengths and approaches. There are seven standards that address key components of high-quality massage therapy education, as follows:

- Standard 1.0 Curriculum Content and Delivery
- Standard 2.0 Faculty and Learning
- Standard 3.0 Student Support
- Standard 4.0 Leadership and Administration
- Standard 5.0 Human Resources
- Standard 6.0 Resources and Infrastructure
- Standard 7.0 Quality Improvement

Each standard is structured as follows.

- *Standard statement (e.g., 1.0, 2.0):* An overarching statement of intent for that standard.
- *Criteria (e.g., 1.1, 2.1):* Specific, measurable requirements that education programs must meet to show they have achieved the intent of the standard.
- *Potential evidence:* Each criterion includes a list of evidence that education programs may provide to show their compliance with the criterion. Except for specific worksheets required for Preliminary Accreditation reviews (which are labelled as mandatory), the items listed under potential evidence are suggestions and are not mandatory. Programs may submit any or all of the listed evidence, or substitute other evidence that they believe best shows their compliance with the criterion. Surveyors may request more or different evidence from what is listed.

Evidence usually consists of documents, plans, materials, reports, or other information; for instance, a quality audit process report may be used to show compliance with safety or health regulations, or building codes.

For Preliminary Accreditation (the first step toward accreditation), the education program collects and submits evidence to CMTCA. During the

site visit, surveyors review most evidence in the location where it is normally kept, reducing the need to collect and submit information to CMTCA.

Rating scale

During an accreditation review, surveyors rate the education program against each criterion, using observations, discussions, and evidence to assign a rating of met, partially met, or unmet. Surveyors also provide recommendations to guide the program's continuing quality improvement activities.

Rating	Definition
Met	The requirement is fully implemented.
Partially Met	The requirement is implemented to some extent, in policy, process, or practice.
Unmet	The requirement is not in place, or the current practice is unsafe or unethical.

A vital quality improvement tool

The CMTCA standards and the accreditation process support and advance quality improvement in massage therapy education. Quality improvement is an ongoing, iterative, and creative process and education programs are encouraged to develop and refine their own approaches in addition to what is outlined in the standards.

The accreditation process inspires education programs to strive for excellence and reflects the commitment to professionalism and high quality that is expected of all respected healthcare educators and practitioners. Choosing an accredited education program gives students confidence that their education will prepare them to deliver effective, safe, and ethical massage therapy to the public.

STANDARD 1.0 Curriculum Content and Delivery

The education program's curriculum teaches students the knowledge and skills they need to provide effective, safe, and ethical massage therapy.

This standard focuses on the need for all components of the curriculum, including content and student learning outcomes, and the delivery systems, to reflect current and emerging developments in massage therapy education.

1.1 The Practice Competencies in the most recent version of the Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice are taught throughout the course of study to the designated level of complexity required for each learning domain associated with the Practice Competency.

Potential evidence

- Completed Worksheet: Mapping of PCs and PIs (mandatory for Preliminary Accreditation review)
- Course outlines for each course, including learning outcomes, associated course material and reference texts/resources (electronic and physical), assessment methods, and date the course was last revised (mandatory for Preliminary Accreditation review)
- Teaching material including lesson plans, presentations, lecture notes, workbooks, case studies, or scenarios, as well as external resources if any

1.2 Student progress toward achievement of the Performance Indicators in the most recent version of the Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice is assessed throughout the course of study, using the assigned assessment vehicles including formative assessments.

Potential evidence

- Completed Worksheet: Mapping of PCs and PIs (mandatory for Preliminary Accreditation review)
- Course outlines for each course, including learning outcomes, associated course material and reference texts/resources (electronic and physical), assessment methods, and date the course was last revised (mandatory for Preliminary Accreditation review)
- Assessments (e.g., exams, tests, quizzes, assignments, feedback forms, scoring rubrics, scenarios, scripts) used in each course in academic, simulated, and clinical environments
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to academic progression, prerequisites, exemptions, and failures

CURRICULUM CONTENT AND DELIVERY

1.3 The curriculum covers, throughout the course of study, foundational health sciences core content to a breadth and depth sufficient to enable graduates to be knowledgeable about the commonly occurring conditions and impairments identified in the most recent version of the [Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice](#), and to apply this knowledge in order to safely and effectively assess and treat patients/clients who present with these conditions and impairments.

Potential evidence

- Completed Worksheet: Commonly Occurring Conditions and Impairments (mandatory for Preliminary Accreditation review)
- Course outlines for each course, including learning outcomes, associated course material and reference texts/resources (electronic and physical), assessment methods, and date the course was last revised
- Teaching material including lesson plans, presentations, lecture notes, workbooks, case studies, or scenarios, as well as external resources if any
- Assessments (e.g., exams, tests, quizzes, assignments, feedback forms, scoring rubrics, scenarios, scripts) used in each course in academic, simulated, and clinical environments

1.4 The curriculum covers, throughout the course of study, ethical standards for professional practice related to awareness, prevention, and reporting of offenses of a sexual nature in the massage therapy profession, including the terms used for and the definitions of these offenses; the impact of these offenses on patients/clients, massage therapists, and the profession; approaches to prevention; reporting requirements, including the process to report and who is required to report; the vulnerabilities of patients/clients when undergoing treatment; and the risk factors that may contribute to the development of an inappropriate relationship.

Potential evidence

- Course outlines, including learning outcomes, associated course material and reference texts/resources (electronic and physical), assessment methods, and date the course was last revised
- Teaching material including lesson plans, presentations, lecture notes, workbooks, case studies, or scenarios, as well as external resources if any
- Assessments (e.g., exams, tests, quizzes, assignments, feedback forms, scoring rubrics, scenarios, scripts) used in each course in academic, simulated, and clinical environments

1.5 The curriculum covers, throughout the course of study, ethical standards for professional practice related to trauma- and violence-informed approaches to care in the massage therapy profession.

Potential evidence

- Teaching material including lesson plans, presentations, lecture notes, workbooks, case studies, or scenarios, as well as external resources if any, used to raise students' awareness of the history of racism and oppression of Indigenous and other peoples in the Canadian health care context
- Examples of how students learn how to minimize the potential for harm and re-traumatization
- Assessments (e.g., exams, tests, quizzes, assignments, feedback forms, scoring rubrics, scenarios, scripts) used in each course in academic, simulated, and clinical environments

1.6 The curriculum covers, throughout the course of study, ethical standards for professional practice related to cultural competency, cultural safety, and cultural humility in the massage therapy profession.

Potential evidence

- Teaching material including lesson plans, presentations, lecture notes, workbooks, case studies, or scenarios, as well as external resources if any, used to teach students about cultural competency, cultural safety, and cultural humility and enhance safety, control, and resilience for patients/clients
- Assessments (e.g., exams, tests, quizzes, assignments, feedback forms, scoring rubrics, scenarios, scripts) used in each course in academic, simulated, and clinical environments

1.7 The curriculum covers, throughout the course of study, ethical standards for professional practice related to identifying and avoiding fraudulent activities (e.g., acting in a conflict of interest, receiving unlawful benefits, payment through deceit, identity theft) and fraud protection in the massage therapy profession.

Potential evidence

- Teaching material including lesson plans, presentations, lecture notes, workbooks, case studies, or scenarios, as well as external resources if any, used to teach students about fraudulent activities
- Assessments (e.g., exams, tests, quizzes, assignments, feedback forms, scoring rubrics, scenarios, scripts) used in each course in academic, simulated, and clinical environments

1.8 A written rationale for the delivery and assessment method(s) (e.g., virtual, in person, hybrid) used for each component of the curriculum is available, that is based on adult learning principles.

Potential evidence

- Completed Worksheet: Mapping of PCs and PIs (mandatory for Preliminary Accreditation review)

CURRICULUM CONTENT AND DELIVERY

- Rationale for the selection of in-person, virtual, or hybrid instruction method(s) for each component of the curriculum, including student assessment
- Rationale for the frequency of in-person instruction and faculty-supervised clinical practice
- Rationale for the selection of virtual learning methods and platforms, if used

1.9 Students have access to curriculum-related references and resources, including electronic resources, that are needed to support their learning.

Potential evidence

- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to access to physical and electronic references and resources
- Description of where and how students access resources
- List of research journal subscriptions
- If available, signed agreements or licences with physical content providers, electronic content providers, external libraries, or resource centres
- Inventory of on-site resources available for student use
- Description of how resources are sufficient to meet program needs

1.10 Community collaborations and partnerships to increase students' interprofessional educational exposure and clinical knowledge and skills are developed and documented.

Potential evidence

- List of community collaborations and partnerships with interprofessional partners, including the rationale for selecting them and copies of signed agreements with each
- Student participation records for interprofessional educational opportunities for the previous three years

1.11 Students apply their massage therapy knowledge and professional values and practice their massage therapy skills in simulated and clinical environments through diverse applications (e.g., seated, clothed, traditional) and with a variety of populations (e.g., age groups, conditions), as outlined in the most recent version of the [Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice](#).

Potential evidence

- Completed Worksheet: Commonly Occurring Conditions and Impairments (mandatory for Preliminary Accreditation review)
- Rationale for selection of student clinic opportunities
- Supporting documents (e.g., policies, procedures, handbooks, manuals, or other material) related to student attendance, participation, and performance evaluation at student clinics
- Student participation records for student clinics for the previous three years

1.12 As part of graduation requirements, students are required to have provided a minimum of 330 hours of faculty-supervised direct massage therapy to the public.

NOTE for criterion 1.12: To avoid dual relationships and the ethical dilemmas and conflicts of interest that may arise from providing treatment to people such as faculty, staff, family, or friends, and to protect confidentiality, for the purpose of this criterion “public” is defined as people who do not have a personal relationship with the student and with whom the student does not interact regularly.

Potential evidence

- Policy on number of student clinic hours required for graduation
- Description and schedule of student clinic requirements
- Description of activities recognized as direct massage therapy for the purpose of this criterion
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to student attendance, participation, and assessment during student clinics
- Records for the previous three years showing student clinic hours, including breakdown of direct and indirect hours, completed by students and verified by faculty

1.13 Faculty in academic environments have post-secondary credentials related to their teaching assignments.

Potential evidence

- Description of how faculty credentials, registrations, and memberships are verified initially and on an ongoing basis
- For each academic subject area or course, description of how the suitability of academic faculty teaching the subject or course is assessed
- Curricula Vitae showing professional credentials of academic faculty

1.14 Simulated and clinical environments are supervised by faculty members who are massage therapists in good standing with a minimum of two years of clinical practice as massage therapists.

Potential evidence

- Description of how faculty credentials, registrations, and memberships are verified initially and on an ongoing basis
- Description of how the suitability of faculty who supervise simulated and clinical environments is assessed
- Curricula Vitae showing professional credentials of faculty who supervise simulated and clinical environments

STANDARD 2.0 Faculty and Learning

Students are taught by competent and qualified faculty and assessed fairly and objectively.

This standard focuses on the role of faculty competence and methods of instruction in promoting a student-centred learning culture in academic, simulated, and clinical educational environments, as defined in the most recent version of the [*Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice*](#). See also Appendix B: Glossary and Usage.

Faculty competence

2.1 Faculty participate in training on adult learning principles and teaching techniques, and their participation is documented.

Potential evidence

- Records of faculty participation in continuing education opportunities focused on adult learning principles and teaching techniques
- Description of the process to assess academic faculty's proficiency in facilitating an adult learning environment
- Assessment tools used by supervisors, colleagues, and students to evaluate academic faculty's understanding and application of adult learning principles and teaching techniques
- Curricula Vitae for faculty, showing training in adult learning principles and teaching techniques

2.2 Minimum student/faculty ratios for different educational environments (i.e., academic, simulated, clinical) are in place and adhered to, and there is a written rationale for the ratios.

Potential evidence

- Student/faculty ratios and rationale to support the ratio for each educational environment
- List of faculty and staff indicating titles, roles, and course load responsibilities
- Staffing schedules, including for student clinic faculty and staff

2.3 Faculty use a variety of resources, tools, and teaching methods that include accessible learning strategies, as appropriate to the course content and student learning needs, and promote active participation by all students.

Potential evidence

- Completed Worksheet: Resources, Tools, and Methods (mandatory for Preliminary Accreditation review)
- Course outlines for each course, including learning outcomes, associated course material and reference texts/resources (electronic and physical), assessment methods, and date the course was last revised
- Description of how experiential education is developed, promoted, and encouraged throughout the education program
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to student attendance and participation
- Teaching material including lesson plans, presentations, lecture notes, workbooks, case studies, or scenarios, as well as external resources if any

2.4 Teaching methods and materials promote critical thinking and problem-solving skills.

Potential evidence

- Completed Worksheet: Resources, Tools, and Methods (mandatory for Preliminary Accreditation review)
- Completed Worksheet: Critical Thinking and Problem-Solving (mandatory for Preliminary Accreditation review)
- Course outlines for each course, including learning outcomes, associated course material and reference texts and resources (electronic and physical), assessment methods, and date the course was last revised
- Teaching material including lesson plans, presentations, lecture notes, workbooks, case studies, or scenarios and activities, as well as external resources if any, used to promote and support critical thinking and problem-solving skills

2.5 Students are given the opportunity to complete course evaluations that provide timely, constructive, and informative feedback that is used by course developers, faculty, and the program for quality improvement.

Potential evidence

- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to the administration, tabulation, and response to course evaluations
- Description of when and how students complete course evaluations
- Template and completed course evaluation forms
- List of positions responsible for administering and tabulating student course evaluations
- Description of how results of student evaluations are shared with faculty

Student clinic operations

2.6 Policies and procedures for the operation of student clinics are in place and followed, and are available to students, faculty, and patients/clients as required.

Potential evidence

- Policies and procedures on the operation of student clinics
- Description of how students, faculty, and patients/clients are made aware of student clinic policies and procedures, and how they may access them
- Template and completed forms used in student clinics, in accordance with policies and procedures

2.7 A designated person or role is responsible for overall administration of student clinics.

Potential evidence

- Job or role description that includes responsibilities for student clinic administration
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to expectations for student clinic administration
- Internal and external job postings related to student clinic administration

2.8 Students have equitable opportunities to participate in student clinics.

Potential evidence

- Student clinic schedules
- Description of how student clinic schedules are developed
- Description of how students are made aware of opportunities to participate in student clinics
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to student selection and participation in student clinics
- Template and completed forms used by students to apply for student clinic opportunities
- Template and completed forms used by patients/clients to schedule appointments at student clinics

2.9 Faculty are physically present at all times when students are providing massage in simulated or clinical environments, in order to provide timely consultation, assistance, feedback, and demonstration; assess student techniques against the competencies in the most recent version of the [Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice](#); and ensure patients/clients receive safe and effective treatment.

Potential evidence

- Completed Worksheet: Mapping of PCs and PIs (mandatory for Preliminary Accreditation review)
- Job descriptions and schedules of student clinic supervisors
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to student clinic operations, supervisory schedules, student attendance and evaluation, protection of patients/clients and students, and responding to incidents where students require support
- Assessments (e.g., feedback forms, scoring rubrics, scenarios, scripts) used in each course in simulated and clinical environments

2.10 Patients/clients at student clinics are given the opportunity to provide feedback on their experience at the clinic.

Potential evidence

- Description of methods used to solicit feedback from patients/clients about their experience at the clinic
- Template and completed forms used by patients/clients to provide feedback

Student assessment

2.11 Course learning objectives and outcomes, assessment criteria, assessment schedules, and grading scales that include minimum passing grades are provided to students at the beginning of each course.

Potential evidence

- Course outlines for each course, including learning outcomes, associated course material and reference texts/resources (electronic and physical), assessment methods, and date the course was last revised
- Assessments (e.g., exams, tests, quizzes, assignments, feedback forms, scoring rubrics, scenarios, scripts) used in each course in academic, simulated, and clinical environments
- Description of how and when course and assessment information is provided to students
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to student examination, testing, and assessment

2.12 Grades are assigned based on assessments of student knowledge and skills and, where appropriate, strengths and areas for improvement are identified.

Potential evidence

- Course outlines for each course, including learning outcomes, associated course material and reference texts/resources (electronic and physical), assessment methods, and date the course was last revised

FACULTY AND LEARNING

- Assessments (e.g., exams, tests, quizzes, assignments, feedback forms, scoring rubrics, scenarios, scripts) used in each course in academic, simulated, and clinical environments
- Supporting documents (e.g., policies, procedures, handbooks, manuals, student records, other material) related to student examination, testing, and assessment

2.13 Policies and procedures for students to appeal their grades and assessment results are in place and followed and include timelines to submit the appeal and for the program to respond, how appeals may be escalated, and the process to inform the student of the results of the appeal.

Potential evidence

- Policies and procedures on student appeals of grades and assessment results
- Description of how students are made aware of policies and procedures to appeal their grades and assessment results
- Template and completed forms and related documents associated with active and resolved student appeals of grades and assessment results

2.14 Students participate in summative evaluations or practice exams. In regulated provinces, these exams follow a similar format to the entry-to-practice exams of the jurisdictional regulator.

Potential evidence

- Description of summative evaluations, practice exams, or other assessments, including a schedule of when they are available
- Template and completed summative evaluations, practice exams, or other assessments used in academic, simulated, and clinical environments

2.15 Requirements for graduation are documented and available to prospective students, students, faculty, staff, and the general public.

Potential evidence

- Completed Worksheet: Requirements for Graduation
- Description of how prospective students, students, faculty, staff, and the public are made aware of requirements for graduation

STANDARD 3.0 Student Support

The education program creates a student-centred learning environment focused on supporting students and helping them succeed.

This standard addresses the importance of supporting students throughout their education and providing them with clear information about their rights and responsibilities, and what is expected of them.

Access to support and services

3.1 Policies and procedures that meet, at minimum, applicable jurisdictional requirements for student diversity, equity, and inclusion, are in place and followed.

Potential evidence

- Applicable jurisdictional requirements related to student diversity, equity, and inclusion
- Policies and procedures on student diversity, equity, and inclusion
- Description of how applicable jurisdictional requirements related to student diversity, equity, and inclusion are identified and monitored for changes
- Description of actions taken to meet applicable jurisdictional requirements for student diversity, equity, and inclusion

3.2 Students with identified disabilities are accommodated as per program policies and applicable jurisdictional requirements.

Potential evidence

- Applicable jurisdictional requirements related to students with identified disabilities
- Policies and procedures on the identification and accommodation of students with identified disabilities
- Description of how applicable jurisdictional requirements related to accommodation of students with identified disabilities are identified and monitored for changes
- Description of accommodations that have been or could be made to accommodate students with identified disabilities

3.3 Resources related to social, cultural, language, mental health, addiction, or other similar issues are available to students, and support or personal counselling services are provided by individuals who are qualified to perform this function by credentials, experience, or both.

Potential evidence

- Completed Worksheet: Student Resources
- Description of and contact information for the supportive resources
- Description of how supportive resources are identified and selected for use as possible support mechanisms

3.4 Support with the registration process is available to prospective students.

Potential evidence

- Completed Worksheet: Student Resources
- Description of and contact information for the supportive resources, including a list of staff positions responsible for providing support with the registration process

3.5 Academic advisory or support services are available to students.

Potential evidence

- Completed Worksheet: Student Resources
- Description of and contact information for the supportive resources
- Description of how supportive resources are identified and selected for use as possible support mechanisms

3.6 Financial aid information and services are available to students.

Potential evidence

- Completed Worksheet: Student Resources
- Description of and contact information for the supportive resources, including a list of staff positions responsible for providing financial aid information
- Description of how supportive resources are identified and selected for use as possible support mechanisms
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other information) related to the provision of financial aid services
- Financial aid forms, documents, and resources

3.7 Two-way mechanisms are established and used to enable timely and ongoing communication between students and leadership, faculty, and staff.

Potential evidence

- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to dissemination of information between students and leadership, faculty, and staff and to receiving and responding to student communication
- Description of mechanisms that facilitate two-way communication, including forms and resources used
- Description of instances where communication mechanisms were used to relay information to students and receive information from students

3.8 Career development resources and information about employment opportunities are available to students.

Potential evidence

- Description of available career development resources such as job boards, job fairs, career counselling and information sessions
- List of community collaborations and partnerships developed to increase student exposure to diverse employment settings

3.9 Students are made aware of the need to commit to lifelong learning to keep their massage therapy knowledge and skills current after graduation, to maintain the integrity and quality assurance of the profession.

Potential evidence

- Description of the role of faculty in promoting professional development
- Teaching material including lesson plans, presentations, lecture notes, workbooks, case studies, or scenarios, as well as external resources if any, used to teach students about the need to commit to lifelong learning after graduation

Student conduct and behaviour

3.10 Student rights and responsibilities are defined.

Potential evidence

- Student handbook or other document where rights and responsibilities are defined
- Description of how student rights and responsibilities are communicated to students
- Template and completed forms used to document student acknowledgement of being informed of their rights and responsibilities

3.11 Students have access to a formal complaint process.

Potential evidence

- Description of the complaint process available to students, and where students may find it (e.g., student handbook or other similar document)
- Description of how students are informed about the formal complaint process
- Template and completed forms used to document student acknowledgement of being informed of the complaint process
- Active and resolved formal complaints from students

3.12 A student code of conduct that defines and outlines expectations for students to refrain from, at minimum, discrimination, harassment, bullying, violence, and offenses of a sexual nature, and that specifies potential consequences if the code of conduct is violated, is provided to each student on admission.

Potential evidence

- Student code of conduct
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to students that address, at minimum, discrimination, harassment, bullying, violence, and offenses of a sexual nature
- Description of how students are made aware of the student code of conduct and policies and procedures related to, at minimum, discrimination, harassment, bullying, violence, and offenses of a sexual nature
- Template and completed forms used to document student acknowledgement of being informed of the student code of conduct and policies and procedures related to, at minimum, discrimination, harassment, bullying, violence, and offenses of a sexual nature

3.13 Policies and procedures to report, investigate, and resolve violations of the student code of conduct are in place and followed.

Potential evidence

- Policies and procedures on reporting, investigating, and resolving violations of the student code of conduct
- Template and completed forms and documents used to report, investigate, and resolve violations of the student code of conduct
- Active and resolved cases related to violations of the student code of conduct

3.14 Violations of the student code of conduct, particularly for offenses of a sexual nature, are addressed through a structured and progressive discipline process that specifies that consequences up to and including expulsion and reporting to the appropriate authorities may be imposed.

Potential evidence

- Description of the progressive discipline process
- Template and completed forms used to document student acknowledgement of being informed of the discipline process
- Active and resolved cases when the discipline process was used to respond to violations of the student code of conduct

3.15 Ethical or behavioural student issues (e.g., plagiarism, cheating, hiring out work, violence, harassment, safety incidents, offenses of a sexual nature) are addressed through program policies and the student code of conduct, in accordance with applicable jurisdictional requirements.

Potential evidence

- Applicable jurisdictional requirements related to ethical or behavioural student issues
- Description of how applicable jurisdictional requirements related to ethical or behavioural student issues are identified and monitored for changes

3.16 An inclusive student dress code that upholds the high degree of professionalism that massage therapists bring to their role as health care providers is in place and followed. It recognizes variations for academic, simulated, and clinical environments without compromising hygiene or safety, and does not discriminate based on sex, religion, or other protected grounds.

Potential evidence

- Student dress code
- Description of how students are made aware of the dress code and how it is enforced
- Description of instances where the dress code was enforced

STANDARD 4.0 Leadership and Administration

The education program's leadership ensures the program is developed, managed, and evaluated effectively.

This standard focuses on the role of leadership in promoting a student-centred learning culture throughout the program. This includes effective strategic planning; ongoing communication and collaboration; and meaningful opportunities for faculty, staff, and students to contribute.

Planning and administration

4.1 A mission statement that applies to the program and includes measurable goals and objectives is in place and disseminated to faculty, staff, and students.

Potential evidence

- Mission statement and measurable goals and objectives
- Strategy for communicating mission statement that includes responsibilities for reporting on and accountability for progress made toward achieving the goals and objectives
- Most recent report on progress made toward achieving the goals and objectives

4.2 A strategic plan that includes considerations related to the long-term viability and continuity of the program is developed and implemented as part of anticipating risk and planning for future needs.

Potential evidence

- Strategic plan
- Description of the strategic planning process, including development, implementation, and review of the strategic plan
- Description of how program viability is monitored and sustained, including a risk management strategy and how the plan addresses changes in the massage therapy profession

4.3 A master schedule showing times, titles, and course descriptions is available to students, faculty, and staff.

Potential evidence

- Master schedule, including student clinic opportunities
- Description of scheduling process and procedure for making schedule changes

4.4 Effective financial safeguards and controls and sufficient financial resources to sustain ongoing program operations are in place. The financial position, performance, and cash flow of the program or institution are monitored, and financial reporting meets jurisdictional accounting standards.

Potential evidence

- Description of how requirements for financial management and accountability are met
- Template and completed forms and documentation used to meet requirements for financial management and accountability
- Confirmation from financial oversight bodies that financial management and accountability requirements are met

4.5 Policies and procedures are up to date, communicated, and available to users.

Potential evidence

- Completed Worksheet: Policies and Procedures
- Description of the process to review and update policies and procedures and notify users of changes

4.6 Policies and procedures to protect patients/clients, students, faculty, and staff from harm are in place and followed, and include provisions related to prevention, awareness, and reporting of offenses of a sexual nature, including the terms used for and the definitions of these offenses; the program's approach to preventing offenses of a sexual nature against and by students, patient/clients, faculty, and staff; responsibilities to report; potential consequences that may be imposed by the program; and information about professional practice and codes of ethical conduct.

Potential evidence

- Policies and procedures on protection of patients/clients, students, and faculty and staff
- Policies and procedures on potential consequences if an incident occurs

4.7 Policies and procedures that facilitate effective program administration are in place and followed.

Potential evidence

- Policies and procedures on program administration

LEADERSHIP AND ADMINISTRATION

4.8 Community partners, student clinic patients/clients, and other interested and affected parties have access to a formal complaint process.

Potential evidence

- Description of the complaint process available to community partners, student clinic patients/clients, and other interested and affected parties, and where they may find it (e.g., policy document)
- Description of how community partners, student clinic patients/clients, and other interested and affected parties are informed about the formal complaint process
- Template and completed forms and associated documentation used in the formal complaint process
- Active and resolved formal complaints from partners, student clinic patients/clients, or other interested and affected parties

4.9 Up-to-date information about the leadership and staffing structure is available in an organizational chart or other similar document.

Potential evidence

- Organizational chart, diagram, or similar document that show the program's organizational structure

4.10 Resources are allocated effectively, using a defined process.

Potential evidence

- Description of process to request resources, including the approval process and rationale for resource allocation

4.11 A leadership team or other oversight body is established and has a documented mandate and terms of reference. This body meets according to an established schedule, and meeting minutes are documented.

Potential evidence

- Terms of reference for the leadership team or other oversight body
- Schedule of meetings of the leadership team or other oversight body for the previous 12 months and for the upcoming 12 months
- Minutes of meetings of the leadership team or other oversight body, including records of attendance, from the previous 12 months
- If an oversight body exists, selection criteria for members
- If an oversight body exists, description of how the oversight body manages conflict of interest, non-contribution, and absenteeism

Advisory input

4.12 An advisory body (which may be called a program advisory council or committee, quality council, academic advisory council or board, or other such name) is established and has a documented mandate and terms of reference that may include providing advice and input on the program’s role, operations, and curriculum; student clinics; quality improvement initiatives; technology; public relations; or other matters agreed upon by its members. This body meets according to an established schedule and meeting minutes are documented.

Potential evidence

- Terms of reference for the advisory body
- Schedule of advisory body meetings for the previous 12 months and for the upcoming 12 months
- Minutes of advisory body meetings, including records of attendance, from the previous 12 months
- Description of initiatives implemented as a result of advisory body recommendations, including dates of implementation

4.13 Advisory body membership includes members with diverse perspectives such as program faculty, staff, or both; external massage therapists; program graduates; community members including business or industry representatives; health professionals from other fields; and prospective employers.

Potential evidence

- List of advisory body members, qualifications, and term of appointments
- Selection criteria for advisory body members
- Recruitment strategy
- Description of how the advisory body manages conflict of interest, non-contribution, and absenteeism

Registration and admission

4.14 Up-to-date and accurate information about the program, the requirements and expectations, and massage therapy as a profession is available to prospective students, students, faculty, staff, and the general public.

Potential evidence

- Completed Worksheet: Publicly Available Information (mandatory for Preliminary Accreditation review)
- Description of the program, entry and graduation requirements, and expectations of students
- List, description, and examples of marketing material, tools, and tactics used to promote the program

LEADERSHIP AND ADMINISTRATION

4.15 The registration process includes timelines, deadlines, and information about how to apply to the program.

Potential evidence

- Description of registration process
- Description of how applicants are informed of timelines, deadlines, and other information related to the registration process
- Template and completed registration and application forms

4.16 Program eligibility requirements address required academic and language proficiencies, or meet applicable jurisdictional requirements; include a criminal record check and a vulnerable sector check drawn within the previous six months; and specify requirements for participation in program activities such as student clinics that are required for graduation.

Potential evidence

- Applicable jurisdictional requirements related to admissions
- Description of how applicable jurisdictional requirements related to admissions are identified and monitored for change
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to admissions, including refusing admission
- Student selection criteria and rationale
- Description of special or exceptional admission processes

4.17 Policies and procedures to assess, recognize, and transfer prior student learning are in place and followed.

Potential evidence

- Policies and procedures on prior learning assessment and recognition
- Description of how potential and current students are informed of the process to have their prior learning assessed, recognized, and transferred
- Template and completed forms used to implement the policy and procedure on prior learning assessment and recognition

Health and safety

4.18 A faculty or staff member or designate with up-to-date Standard First Aid, CPR, and automated external defibrillator (AED) certification is in the facility and present during student clinics when students or patients/clients are present.

Potential evidence

- List of staff and faculty with current Standard First Aid, CPR, and automated external defibrillator (AED) certification

- Confirmation of the status of staff and faculty Standard First Aid, CPR, and automated external defibrillator (AED) certification
- Schedule of certified staff and faculty supervisory assignments

4.19 Safety incidents that occur on or off the education program’s premises and are related to the program are investigated, documented, reported, and disclosed as appropriate.

Potential evidence

- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to reporting, investigating, documenting, and disclosing safety incidents
- Template and completed safety incident report forms and associated documentation

4.20 A health and safety committee meets as required to manage and oversee health and safety issues, and minutes are documented.

Potential evidence

- Health and safety committee terms of reference
- Schedule of health and safety committee meetings for the previous 12 months and for the upcoming 12 months
- Minutes of health and safety committee meetings, including records of attendance, from the previous 12 months
- Description of initiatives implemented as a result of health and safety committee recommendations, including dates of implementation

Records

4.21 Policies and procedures that align with applicable jurisdictional requirements to protect student, patient/client, faculty, and staff privacy and confidentiality are in place and followed.

Potential evidence

- Applicable jurisdictional requirements related to protecting privacy and confidentiality
- Policies and procedures on protecting privacy and confidentiality
- Description of how applicable jurisdictional requirements related to protecting privacy and confidentiality are identified and monitored for changes

4.22 Policies and procedures to allow students, patients/clients, faculty, and staff to access their records are in place and followed.

Potential evidence

- Policies and procedures on student, patient/client, faculty, and staff access to records

LEADERSHIP AND ADMINISTRATION

- Description of how students, patients/clients, faculty, and staff are informed of their right to access their records
- Template and completed forms used by students, patients/clients, faculty, and staff to request access to their records

4.23 Policies and procedures related to student, patient/client, faculty, and staff records, including retention, destruction, and handling of breaches of privacy, are in place and followed. The policies specify which parts of the record are to be retained and for how long. Retained student records include, at minimum, contact information, grades, clinical experience data (e.g., number of hours, number of massage treatments provided), and professional conduct issues.

Potential evidence

- Applicable jurisdictional requirements related to records
- Policies and procedures on retention and destruction of records, and breaches of privacy
- Description of how applicable jurisdictional requirements related to record keeping are identified and monitored for changes

4.24 Program records, including records for students, patients/clients, faculty, and staff, are stored securely and confidentially, with appropriate physical, administrative, and technical safeguards including back-up and recovery systems.

Potential evidence

- Applicable jurisdictional requirements related to storage of records
- Description of how program records are stored securely and confidentially
- Description of back-up and recovery systems
- Where records management is outsourced, signed agreements with providers, documenting obligations

STANDARD 5.0 Human Resources

The education program follows effective human resources practices to support the delivery of quality education.

This standard focuses on creating a healthy workplace, where faculty and staff know their roles and responsibilities, professional development is encouraged and supported, and there is regular feedback and communication to enable them to continue to grow and meet the learning needs of students.

Hiring and development

5.1 Roles and responsibilities for faculty and staff are documented in job descriptions, contracts, employment agreements, or other such documents. The tasks and functions of the job, criteria for employment including required credentials, accountabilities, and expectations for professional development are defined.

Potential evidence

- Job descriptions or other documents that identify required credentials and experience for faculty and staff
- Internal and external job postings
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to expectations for faculty and staff professional development
- Human resources files for faculty and staff

5.2 Faculty and staff receive a comprehensive orientation to the program and the job expectations when they are hired, including the program's approach to preventing discrimination, harassment, bullying, violence, sexual misconduct, and sexual assault; and also including, for academic faculty, an orientation to how the course(s) they will teach align with program objectives.

Potential evidence

- Faculty and staff orientation handbook, manual, or other related documents
- Description of faculty and staff orientation and training program
- Description of how human resources files for faculty and staff are organized and what they contain
- Human resources files for faculty and staff

5.3 Faculty and staff participate in regular, ongoing, and relevant professional development, including cultural competency training, and adult education and instructional skills training, and their participation is documented

Potential evidence

- List of professional development expectations for faculty and staff
- Description of professional development opportunities available to faculty and staff, including rationale for selection of opportunities
- Template and completed forms used to document completion of faculty and staff professional development activities
- Human resources files for faculty and staff

5.4 Regular evaluations of faculty and staff performance are conducted and documented, and include identification of relevant professional development opportunities and opportunities for faculty and staff input and self-reflection.

Potential evidence

- Description of performance evaluation processes
- Template and completed forms used to conduct faculty and staff performance evaluations
- Human resources files for faculty and staff

5.5 Policies and procedures for faculty and staff to appeal performance evaluation results are in place and followed, and include timelines to submit the appeal and for the program to respond.

Potential evidence

- Policies and procedures on the faculty and staff performance evaluations appeals process
- Description of how faculty are made aware of policies and procedures to appeal the results of their performance evaluation
- Template and completed forms related to faculty and staff appeals of performance evaluations
- Active and resolved faculty or staff performance evaluation appeals

Work-life

5.6 Healthy workplace strategies that support work-life quality and work-life balance for faculty and staff are developed, implemented, and available to faculty and staff.

Potential evidence

- Description of how work-life quality and balance is facilitated for faculty and staff

- Strategies (e.g., policies, procedures, activities, programs) used to support healthy work-life quality and balance

5.7 An ethics decision-making framework to help faculty and staff resolve ethical dilemmas is in place and used.

Potential evidence

- Ethics decision-making framework
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to the process to use the ethics decision-making framework, including when it is used
- Description of instances when the ethics decision-making framework was used, and the results

5.8 Faculty and staff have access to a formal complaint process.

Potential evidence

- Description of the complaint process available to faculty and staff, and where they may find it (e.g., orientation handbook or other similar document)
- Description of how faculty and staff are informed about the formal complaint process
- Active and resolved formal complaints from faculty and staff

5.9 A code of conduct for faculty and staff that defines and outlines expectations to refrain from, at minimum, discrimination, harassment, bullying, violence, and offenses of a sexual nature, and that specifies potential consequences if the code of conduct is violated, is in place and followed.

Potential evidence

- Faculty and staff code of conduct
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to faculty and staff that address, at minimum, discrimination, harassment, bullying, violence, and offenses of a sexual nature
- Description of how faculty and staff are made aware of the code of conduct and the policies and procedures related to, at minimum, discrimination, harassment, bullying, violence, and offenses of a sexual nature
- Template and completed forms used to document faculty and staff acknowledgement of the code of conduct and policies and procedures related to, at minimum, discrimination, harassment, bullying, violence, and offenses of a sexual nature

5.10 Policies and procedures to report, investigate, and resolve violations of the faculty and staff code of conduct are in place and followed.

Potential evidence

- Policies and procedures on reporting, investigating, and resolving violations of the faculty and staff code of conduct
- Template and completed forms used to report, investigate, and resolve violations of the faculty and staff code of conduct

5.11 Violations of the faculty and staff code of conduct, particularly offenses of a sexual nature, are addressed through a structured and progressive discipline process that specifies that consequences up to and including dismissal and reporting to the appropriate authorities may be imposed.

Potential evidence

- Policies and procedures that address progressive discipline for violations of the faculty and staff code of conduct
- Description of how faculty and staff are made aware of policies and procedures that address progressive discipline for violations of the faculty and staff code of conduct
- Template and completed forms related to progressive discipline for violations of the faculty and staff code of conduct
- Active and resolved cases where the discipline process was used to respond to violations of the faculty and staff code of conduct

STANDARD 6.0 Resources and Infrastructure

The education program has the resources and infrastructure needed to manage the program. Resources and infrastructure include buildings, grounds, equipment, supplies, and learning resources belonging to or used by the education program.

This standard focuses on the availability and maintenance of, and access to, resources and infrastructure. It also addresses the need for the education program to meet applicable jurisdictional requirements related to health, safety, and building regulations and codes. Jurisdictional requirements may be federal, provincial or territorial, or local.

The facility

6.1 Applicable jurisdictional requirements for health and safety in facilities are met. Meeting jurisdictional safety requirements includes considerations related to space requirements, physical plant equipment, risk management and emergency preparedness, safety drills, fire safety equipment, and public health protocols.

Potential evidence

- Policies and procedures that address health, safety, and emergency response
- Description of the training program on health, safety, and emergency response, including a list of which positions need to be trained and how they are identified
- Applicable jurisdictional requirements related to health and safety in facilities
- Description of how applicable jurisdictional requirements related to health and safety in facilities are identified and monitored for changes
- Description of how applicable jurisdictional requirements related to health and safety in facilities are met and followed
- Documents showing compliance with applicable jurisdictional requirements related to health and safety in facilities (e.g., reports, inspections, licences, certifications)

6.2 Policies and procedures on infection prevention and control that address, at minimum, hand hygiene, the use of personal protective equipment, care and cleaning of equipment, managing soiled linen and hazardous waste, and personal care which may include immunizations, are in place and followed.

Potential evidence

- Policies and procedures on infection prevention and control
- Signed and dated infection prevention and control logs and checklists

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- Infection prevention and control training records for staff, faculty, and students
- Description of how policies and procedures on infection prevention and control are communicated to faculty, staff, students, patients/clients, and the general public

6.3 The facility is clean, uncluttered, and in good repair.

Potential evidence

- Cleaning and maintenance procedures, schedules, and logs
- Where cleaning and maintenance services are outsourced, signed agreements with providers, documenting obligations, and cleaning/maintenance duties and schedules, for facilities and grounds
- Feedback on or results of evaluations of the facilities

6.4 Applicable jurisdictional requirements for accessibility are met.

Potential evidence

- Applicable jurisdictional requirements related to accessibility
- Description of how applicable jurisdictional requirements related to accessibility are met
- Description of how applicable jurisdictional requirements related to accessibility are identified and monitored for changes
- List of accessible spaces in the facility

6.5 Efforts are made to provide gender-neutral washrooms and change facilities.

Potential evidence

- Description of approach to providing gender-neutral washrooms and change facilities

6.6 Based on program enrolment and applicable jurisdictional requirements, sufficient space is designated for administrative and academic work, labs, practical classes, student clinics, and any other functions necessary for the program to achieve its mission and support learning outcomes.

Potential evidence

- Applicable jurisdictional requirements related to occupancy and use of space
- Description of how applicable jurisdictional requirements related to occupancy and use of space are identified and monitored for changes
- Blueprint of the facility showing the various areas
- Rationale for use of space
- Maximum occupancy or occupancy permit as per applicable jurisdictional requirements
- Total enrolment numbers

6.7 At least one designated area is available where faculty, staff, and students can conduct private meetings or consultations, including with patients/clients when required.

Potential evidence

- List and description of area(s) where private consultations are conducted

6.8 Sufficient space is provided for rest or break areas, and student rest or break areas are separate from areas for faculty and staff.

Potential evidence

- List of rest or break area(s) for faculty/ staff
- List of rest or break area(s) for students

6.9 Internet service, with bandwidth appropriate to program enrolment and the faculty and staff complement, is available and faculty, staff, and students are able to access it.

Potential evidence

- Description of internet service and rationale for available bandwidth
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to access to and use of internet services
- Description of how information about use of internet services is communicated to users

Resources

6.10 Based on program enrolment and student learning needs, classrooms are equipped with sufficient technology to enable effective learning and active student participation.

Potential evidence

- Description of and rationale for technology available to students in classrooms

6.11 Faculty and staff have sufficient equipment and technology (e.g., desks, photocopiers, printers, scanners, supplies, computers) to do their work.

Potential evidence

- List of equipment and technology available to faculty
- Rationale for the type of equipment and technology selected for use

6.12 Labs, practical classes, and student clinics have sufficient equipment, resources, and supplies for the number of students and the provision of safe massage therapy. Where these are defined as a ratio or minimum standards, a rationale is available.

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Potential evidence

- Rationale for ratio or minimum standards for equipment, resources, and supplies
- Inventory of available equipment, resources, and supplies (e.g., massage tables, linens, oils and lotions, thermal [hot and cold] applications, paraffin wax, skeleton models, tools, sinks, disinfectant, charts) and description of how they are used
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to ensuring sufficient equipment, resources, and supplies are available

6.13 Patient/client privacy during student clinics is assured through screens, curtains, and private changing areas. Treatment areas ensure privacy for patients/clients throughout treatment, including the ability to disrobe and get on and off the treatment table and dress in privacy.

Potential evidence

- Description of mechanisms to ensure patient/client privacy in student clinics
- Supporting documents (e.g., policies, procedures, handbooks, manuals, or other material) related to privacy practices for patients/clients in student clinics
- Description of how patients/clients are informed about privacy practices in student clinics

6.14 Student privacy during labs and practical classes is assured through screens, curtains, and private changing areas. Treatment areas ensure privacy for students throughout treatment, including the ability to disrobe and get on and off the treatment table and dress in privacy.

Potential evidence

- Description of mechanisms to ensure student privacy in labs and practical classes
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to privacy practices for students in student clinics
- Description of how students are informed about privacy practices in student clinics

6.15 Policies and procedures on appropriate and professional communication by students, faculty, and staff, including the use of social media and expectations to protect privacy and confidentiality and maintain professionalism and the reputation of the program, are in place and followed.

Potential evidence

- Policies and procedures related to the use of social media
- Policies and procedures related to the protection of confidentiality
- Policies and procedures related to faculty, staff, and student behaviour
- Faculty, staff, and student codes of conduct or handbooks

6.16 Faculty, staff, and students have access to reference materials and up-to-date research related to the massage therapy field.

Potential evidence

- Description of where and how faculty, staff, and students access resources
- List of research journal subscriptions
- If available, signed agreements or licences with physical content providers, electronic content providers, external libraries, or resource centres
- Inventory of on-site resources available for faculty, staff, and student use
- Description of how resources are sufficient to meet program needs

Cleaning and maintenance

6.17 The facility and grounds are cleaned and maintained as per applicable jurisdictional requirements. Where premises are leased, cleaning and maintenance schedules are stipulated in the lease agreement and followed.

Potential evidence

- Applicable jurisdictional requirements for cleaning and maintenance of facilities and grounds
- Description of how applicable jurisdictional requirements related to cleaning and maintenance are identified and monitored for changes
- Cleaning and maintenance procedures, schedules, and logs for facilities and grounds
- Where cleaning and maintenance services are outsourced, signed agreements with providers, documenting obligations, and cleaning/maintenance duties and schedules, for facilities and grounds
- Description of how applicable jurisdictional requirements are met (e.g., municipal licences, inspection records)

6.18 Routine safety checks of equipment, resources, and supplies are scheduled, conducted, and logged by individuals who are qualified to perform this function by credentials, experience, or both.

Potential evidence

- Process for routine maintenance and safety checks
- Logs and schedules of routine safety checks of equipment, resources, and supplies
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to qualifications, credentials, roles, responsibilities, and experience of individuals conducting safety checks
- List of equipment, resources, and supplies that require safety checks (e.g., massage tables, linens, oils and lotions, thermal [hot and cold] applications, paraffin wax, skeleton models, tools, sinks, disinfectant, charts)

RESOURCES AND INFRASTRUCTURE

6.19 Equipment, resources, and supplies are safe, in good repair, clean, and functioning, and manufacturer instructions for maintenance and repair of equipment, where available, are followed.

Potential evidence

- Manufacturer-recommended maintenance schedules
- Maintenance logs for equipment

6.20 Damaged or defective equipment, resources, or supplies are promptly removed, replaced, or repaired.

Potential evidence

- Description of process to identify and remove, replace, or repair defective equipment, resources, or supplies
- Template and completed forms used to request and ensure removal, replacement, or repair of defective equipment, resources, or supplies

STANDARD 7.0 Quality Improvement

The education program gathers and analyzes data and uses it to make improvements to the program.

This standard addresses the need for education programs to continually strive to create and promote a culture of continuous quality improvement. Collecting and analyzing data to evaluate and improve the program are part of an ongoing cycle of planning, testing, and implementation. The quality improvement cycle is a foundation of the accreditation process and integral to maintaining a high-quality massage therapy education program.

7.1 Policies and procedures for ongoing quality improvement, including collecting, evaluating, and analyzing evaluation data and feedback on a regular and ongoing basis, are in place and followed.

Potential evidence

- Completed Worksheet: Evaluation Data and Feedback
- Supporting documents (e.g., policies, procedures, handbooks, manuals, other material) related to collecting program evaluation data and feedback
- Template and completed forms used to collect program evaluation data and feedback
- Schedule for collecting program evaluation data and feedback for the previous 12 months and for the upcoming 12 months

7.2 As part of regular and ongoing program evaluation, feedback is solicited, using a variety of methods, from diverse interested and affected groups.

Potential evidence

- Completed Worksheet: Evaluation Data and Feedback
- Schedule and description of methods used to solicit ongoing program evaluation data and feedback from a range of interested and affected groups such as students, graduates, faculty, staff, massage therapists, patients/clients, and community members

7.3 If exam results are available, they are collected annually from provincial regulators in regulated provinces and used as a component of evaluating program effectiveness. In unregulated provinces or territories or where exam results are not available, regular and ongoing processes are in place to evaluate program effectiveness.

Potential evidence

- Completed Worksheet: Graduate Success
- For education programs whose graduates have challenged regulator exams, data received from regulators
- Description of how program effectiveness is defined

- Description of the process used to evaluate program effectiveness

7.4 Student data and feedback from program, course, or faculty evaluations are considered and responded to as appropriate, and used as a component of evaluating program effectiveness.

Potential evidence

- Description of process used to consider student data and feedback and determine appropriate responses, including the decision-making framework if one has been developed
- Description of how student data and feedback are used to evaluate and improve program effectiveness
- Description of how responses to student data and feedback are communicated
- Description of responses to student data and feedback

7.5 Evaluation data are analyzed to identify strengths, trends, and opportunities for improvement, and the results are used to make timely improvements.

Potential evidence

- Completed Worksheet: Evaluation Data and Feedback
- Description of the process used to identify strengths, trends, and opportunities for improvement
- Description of the process used to determine action to be taken to further support or respond to identified strengths, trends, and opportunities for improvement
- Minutes of meetings, from the previous 12 months, where evaluation data were analyzed and decisions to implement program improvement occurred, including records of attendance, action taken, and timelines for implementation

7.6 Multiple communication channels are used to share improvements widely and build transparency and accountability.

Potential evidence

- Completed Worksheet: Communication Channels
- Description of the channels used to share program improvements with targeted audiences

7.7 Accreditation review recommendations and ratings, including recommendations to strengthen compliance, are reviewed and addressed, and progress is reported through an annual report to the accrediting body.

Potential evidence

- Previous Accreditation Reports and, where applicable, Program Annual Reports to CMTCA
- Description and examples of how Accreditation Report ratings, comments, and recommendations are reviewed and addressed
- Description of how Program Annual Reports are created

Data sources for Standard 7 may include:

Curriculum Content and Delivery: Program enrolment rates, retention rates, attendance rates, student grades, advisory body feedback, program growth (e.g., number of students, faculty), program/course evaluation results, external feedback, satisfaction survey results

Faculty and Learning: Course evaluations, student success rates, faculty participation in professional development, satisfaction survey results

Student Support: Graduation rates, attrition rates, absenteeism, course evaluations, interviews with graduates, satisfaction survey results

Leadership and Administration / Human Resources: Retention rates, vacancy rates, professional development opportunities, overtime, absenteeism, safety incidents, student success rates, satisfaction survey results

Resources and Infrastructure: Resource logs, maintenance checklists, equipment inventories, safety incidents, satisfaction survey results

Appendix A: Standards Development and Review

1. In 2013, following widespread consultation and discussion with experts and interested parties, the National Accreditation Planning Committee developed a comprehensive report that included a collective vision of the goals of accreditation for massage therapy education programs.
2. In 2015, a twelve-member Standards Advisory Committee comprising massage therapy regulatory and education professionals from across the country was convened. Using the vision as the starting point, they refined the concept and identified key topics and issues to be addressed in the standards and the accreditation process.
3. Based on this work and an extensive review of accreditation resources (see Appendix C: Resources) from massage therapy, nursing, and other regulated health professions, as well as engineering, CMTCA developed draft standards.
4. In March 2016, the draft standards were sent for consultation to massage therapy interested parties across the country, including regulators, associations, and education programs, and their feedback was incorporated into the standards.
5. Eight pilot test accreditation site visits were conducted from April to June 2016. In preparation, 24 surveyors were trained on the accreditation process and the standards, with 10 of them participating in the pilot tests.
6. Feedback from the pilot tests was used to refine the standards and the accreditation process.
7. The revised standards were shared with interested parties from September to November 2016 and their feedback was incorporated into the draft.
8. The CMTCA Board of Directors reviewed and approved the standards and the accreditation process in March 2017.
9. The standards and the accreditation process were released on April 3, 2017, and education programs became eligible to apply for accreditation.
10. In 2022, a Standards Review Committee (SRC) comprising massage therapy educators from across Canada who were familiar with the CMTCA accreditation process and the standards, and several CMTCA surveyors, was convened to update the standards. The review took the following steps:
 - Conducting a survey of accredited massage therapy education programs, surveyors, Board members, and regulators

- Incorporating recommendations from the SRC after its review of a summary of the survey responses
- Incorporating input from the SRC based on the members' experiences using the standards
- Incorporating input from a CMTCA staff and surveyor focus groups, and conversations with regulatory partners
- Analyzing historical evaluation data from site visits and criterion compliance data tracked over many accreditation reviews

11. Facilitated discussions were conducted with the Standards Review Committee to review and consider all feedback and provide their expertise to revise criteria identified as needing change and add new criteria.
12. A draft of the standards was circulated to key parties from October 13 to December 12, 2023, as per the 60-day Duty to Consult in the CMTCA ByLaw.
13. Following consideration of input received, the Board reviewed additional recommendations for change and approved the revised standards in January 2024.
14. The revised *CMTCA Accreditation Standards for Massage Therapy Education Programs in Canada (2024)* were released in March 2024, with an accompanying mapping of the old and new criteria numbers.

Appendix B: Glossary and Usage

The terms in this glossary are defined for the purposes of the CMTCA standards and are specific to the context of massage therapy education programs. These terms provide guidance to education programs and surveyors. However, the list is not exhaustive, and other sources of information may be used to determine compliance with the criteria.

Term	Definition
Accommodation	Making changes or adjustments to meet an individual's needs or requirements, such as providing extra time for exams or accessible learning materials for students with a disability. The goal of accommodation is to provide equity, not advantage. ¹²
Accessible learning strategies	Methods used to create a learning environment that supports successful learning for students with learning differences or neural diversity. Includes using universal design for learning, an approach that focuses on flexibility and removing barriers to give all students equal opportunities for success by recognizing students' needs for different ways to access materials, demonstrate their knowledge, and stay motivated.
Accreditation	A process whereby an independent agency determines, through a process of peer review, that a program or organization meets or exceeds pre-defined standards for quality, safety, competence, and professionalism.
Applicable jurisdictional requirements	The laws, regulations, and practices that govern institutions or programs in a given geographic region. These requirements may be established at a local, regional, or federal level, and often vary significantly across Canada. Massage therapy education programs are expected to know and comply with the jurisdictional requirements that apply to their program. Such requirements may address, for example, professional qualifications, health and safety, building codes, human rights, diversity and inclusion, and financial accountability.

¹ Ontario Human Rights Commission (2012). *Appropriate accommodation. 2011-2012 Annual Report.* <https://www.ohrc.on.ca/en/guidelines-accessible-education/appropriate-accommodation>

² College of Massage Therapists of Ontario. (2022). *Policy: Accessibility and Accommodation.* <https://www.cmto.com/policies/accessibility-policy/>

Assessment vehicles	<p>The <i>Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice</i>³ outlines the following assessment vehicles that are associated with each of the educational environments for entry-level massage therapy education programs:</p> <ul style="list-style-type: none"> ▪ Academic assessment vehicle: Should be a written and/or oral evaluation designed to identify behaviours consistent with the designated Performance Indicators, within the context of the definition of Entry-Level Proficiency. ▪ Simulated assessment vehicle: Should ensure repeated and reliable demonstration of behaviours consistent with the designated Performance Indicators, within the context of the definition of Entry-Level Proficiency. ▪ Clinical assessment vehicle: Should ensure repeated and reliable demonstration of behaviours consistent with the designated Performance Indicators, within the context of the definition of Entry-Level Proficiency, and with a variety of patients/clients. <p>The registration examination provides two additional assessment vehicles: multiple choice questions and practical, sometimes described as performance-based assessment or objective, structured clinical evaluation.</p>
Criteria (plural), Criterion (singular)	Specific, measurable requirements that education programs must meet to show they have achieved the intent of the standard.
Cultural safety	An outcome based on respectful engagement that recognizes and strives to address power imbalances in the health care system. Cultural safety is the outcome of people feeling safe when receiving health care. ⁴

³ Federation of Massage Therapy Regulatory Authorities of Canada. (2016). *Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice*, 7-9 <https://www.fomtrac.ca/wp-content/uploads/2016/10/FOMTRAC-PCs-PIs-September-2016.pdf>

⁴ First Nations Health Authority. (n.d.). *Cultural safety and humility in health services delivery for First Nations and Aboriginal Peoples in British Columbia*. <https://www.fnha.ca/Documents/FNHA-Creating-a-Climate-For-Change-Cultural-Humility-Resource-Booklet.pdf>

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Cultural humility	A process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another's experience. ⁵
Curriculum	The courses offered by the education program. Includes course content, lesson plans, topical or course outlines, employability skills maps, or a book of course outlines.
Direct massage therapy	Activities that support the application of therapeutic practice and are done in direct contact with the patient/client. Direct massage therapy includes taking a history and consulting with the patient/client; developing and implementing an assessment plan; developing and implementing treatment plans; providing remedial exercise and self-care; and charting and recording of notes and findings. It does not include activities such as booking appointments or attending to laundry, or other such activities that could be done by someone else such as a receptionist or an assistant.
Discrimination	Discrimination is an action or a decision that treats a person or a group badly for reasons such as their race, age, religion, sex, sexual orientation, gender identity or expression, marital or family status, or a disability. ⁶

⁵ First Nations Health Authority. (n.d.). *Cultural safety and humility in health services delivery for First Nations and Aboriginal Peoples in British Columbia*. <https://www.fnha.ca/Documents/FNHA-Creating-a-Climate-For-Change-Cultural-Humility-Resource-Booklet.pdf>

⁶ Canadian Human Rights Commission. (2021). *What is Discrimination?*. <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

Educational environments	<p>The <i>Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice</i>⁷ outlines the following environments where learning and assessment should take place in entry-level massage therapy education programs:</p> <ul style="list-style-type: none"> ▪ Academic environment, where learning takes place in a classroom or through guided independent study, and students develop knowledge and thinking skills, and beliefs and values, which enable them to perform the required Performance Indicators. ▪ Simulated environment, where students learn practical, communication and relationship skills which enable them to perform the required Performance Indicators, under the direction of an experienced professional, in a setting that simulates practice. ▪ Clinical environment, where students work directly with a patient/client in a setting designed to provide patient/client care. Students should be supervised throughout their clinical education, in a manner that facilitates development of independent clinical abilities while ensuring that care provided is safe, effective and ethical.
Evidence	<p>Documents, plans, materials, reports, or other information that the education program may provide to show its compliance with the criteria. Evidence may include documents or information including regulatory body documents; for instance, a quality audit process report may be used to show compliance with safety or health regulations or building codes.</p>
Faculty	<p>As defined by the program. Generally, includes the education program’s teaching staff, who may be called teachers, instructors, professors, or other such terms and may be used interchangeably.</p>
Format – Records, files, and documents	<p>Criteria requirements related to records, files, and documents apply to both written and electronic formats.</p>

⁷ Federation of Massage Therapy Regulatory Authorities of Canada. (2016). *Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice*, 9. <https://www.fomtrac.ca/wp-content/uploads/2016/10/FOMTRAC-PCs-PIs-September-2016.pdf>

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<p>Fraudulent practices</p>	<p>Dishonest or deceptive activities carried out by a massage therapist, a massage therapy clinic, or a massage therapy patient/client, with the intent of gaining financial or other unlawful advantages. Fraudulent practice can include:</p> <ul style="list-style-type: none"> ▪ Billing for treatments that were never provided⁸ ▪ Submitting the same claim to multiple insurers ▪ Submitting claims for missed or cancelled appointments ▪ Letting someone not covered by an insurance plan use its benefits, such as providing invoices or submitting claims under a spouse or dependent’s name when the person receiving the service has reached their benefit maximum ▪ Using a massage therapist’s registration number to claim benefits that were received from someone else (such as an esthetician or unregistered massage provider) ▪ Making misleading or false representation of credentials.^{8,9,10}
<p>Harassment</p>	<p>Behaviour or actions that make someone feel unsafe. Harassment does not have to be done face-to-face and can affect those who are interacting online or remotely. It can be verbal, written, physical (sexual or aggressive), or can occur through looks or gestures and other hostile or unwanted acts.^{11,12}</p>
<p>Implement</p>	<p>A criterion that has been implemented has been put into practice or action by the program.</p>

⁸ Canadian Life & Health Insurance Association. (n.d.). *Help Prevent Benefits Fraud*. <https://www.clhia.ca/antifraud>

⁹ Registered Massage Therapists’ Association of Ontario. (2022, February 24). *Fraud Prevention for RMTs*. <https://www.rmtao.com/resources/rmtao-blog/fraud-prevention-for-rmts>

¹⁰ Ontario Ministry of Health. (2023, October 18). *Preventing fraud within Ontario’s health care system*. Government of Ontario. <https://www.ontario.ca/page/preventing-fraud-within-ontarios-health-care-system>

¹¹ Canadian Centre for Occupational Health and Safety. (2023). *Resources for Harassment and Violence Prevention for Employees*. <https://www.ccohs.ca/products/courses/resources/1420667866>

¹² 3 types of workplace harassment to be aware of. (2023, March 3). *Culture Shift - The Change Maker’s Newsletter*. LinkedIn. <https://www.linkedin.com/pulse/3-types-workplace-harassment-aware-culture-shift-communications-ltd/>

In good standing	As defined by the regulator in a regulated province or by a provincial massage therapy association in an unregulated province or territory. "In good standing" generally considers issues related to professional misconduct, fitness to practice, discipline orders, suspensions or revocations, fines, quality assurance concerns, or conditions or limitations on a certificate of registration.
Inclusion	Creating a learning environment in which all people feel welcomed, valued, respected, and enabled to reach their full potential.
<u>Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice ("PCs/PIs")</u>	The comprehensive document that outlines entry-to-practice requirements for massage therapy students. Often referred to as "the PCs/PIs."
Interprofessional education	Learning from practitioners in fields outside of massage therapy, such as other health care professionals who might be part of a patient/client's health care team.
Met	During an accreditation review, education programs receive a rating that indicates their level of compliance with each criterion in the standards. A rating of met means the requirement is fully implemented.

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Offenses of a sexual nature	<p>Many terms are used in Canada to describe inappropriate, unwanted, or illegal sexual behaviour or contact, including sexual touching, sexual harassment, sexual misconduct, sexual abuse, sexual assault, sexual violence, and other such terms, and there is often overlap among these terms. In the massage therapy education context, these behaviours can create an uncomfortable or hostile learning environment and are a violation of professional boundaries and ethical standards. Offenses of a sexual nature can include unwanted sexual advances, comments, jokes, gestures, or requests for sexual favours; displays of inappropriate material; sending sexually explicit messages or content through email, text, or social media; stalking; voyeurism; indecent exposure; or any form of sexual physical contact without explicit consent which may include kissing, fondling, sexual intercourse, oral or anal intercourse, or other forms of penetration.</p> <p>As part of its preparation for accreditation, the program specifies the terms it uses both in its policies and in its curriculum to describe offenses of a sexual nature and defines what they mean, in accordance with applicable jurisdictional requirements and based on an informed decision-making process that takes into account the program context and analysis of available evidence.</p>
Operational	<p>A requirement or criterion is in use, or ready for use, in the program. For example, a policy is operational when all the processes or resources required to apply that policy are available and functioning, either in use or ready for use.</p>
Partially met	<p>During an accreditation review, education programs receive a rating that indicates their level of compliance with each criterion in the standards.</p> <p>A rating of "partially met" means the requirement is implemented to some extent, in policy, process, or practice.</p>
Performance Indicator	<p>A candidate behaviour that can be observed within a specific assessment vehicle, and which provides an indication that a candidate possesses a practice competency.</p>

Practice Competency	The ability to perform a practice task with a specified level of proficiency. ¹³
Qualified	An individual who is competent to perform the required task or function, based on credentials and experience.
Regular and ongoing	As part of its preparation for accreditation, the education program defines “regular and ongoing” by specifying in writing how often the activity is conducted, based on an informed decision that takes into account the program context and analysis of available evidence. There is evidence the activity occurs in accordance with the schedule specified by the education program.
Regulator	The body that regulates the practice of massage therapy in a geographic jurisdiction.
Safety incident	<p>An event or circumstance which could have resulted, or did result, in unnecessary harm to a patient/client.</p> <ul style="list-style-type: none"> ▪ Harmful incident: A patient/client safety incident that resulted in harm to the patient/client. ▪ No harm incident: A patient/client safety incident that reached a patient/client, but no discernible harm resulted. ▪ Near miss: A patient/client safety incident that did not reach the patient/client and therefore no harm resulted.¹⁴
Staff	As defined by the program. Generally includes employees who are not faculty, such as leaders, managers, administrative support, or individuals who are part of the teaching team but not faculty, such as a registered massage therapist assisting in the classroom or lab.
Standard (s)	A set of agreed-upon criteria, guidelines, or specifications written by a recognized authority and designed to improve and measure quality, safety, consistency, and reliability, processes, or products.

¹³ Federation of Massage Therapy Regulatory Authorities of Canada. (2016). *Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice*, 4. <https://www.fomtrac.ca/wp-content/uploads/2016/10/FOMTRAC-PCs-PIs-September-2016.pdf>

¹⁴ Canadian Patient Safety Institute. (2012). *Canadian Incident Analysis Framework*, 8-9. https://www.healthcareexcellence.ca/en/resources/patient-safety-incident-analysis/?gad_source=1&qclid=CjwKCAjwoPOwBhAeEiwAJuXRh5L0NOscS-3aBQF9IHC8qXhRpZaRrLtge4218Ob0zM7P19lm7KGM7hoCGBIQAvD_BwE

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<p>Strategic plan</p>	<p>A document, usually approved by leadership, that summarizes how an education program plans to operate and grow over a defined period of time. A strategic plan generally includes short- and long-term goals, objectives, and priorities for the future.</p>
<p>Student clinic</p>	<p>A clinic located in or associated with an education program where students provide massage therapy to the public under the supervision of faculty members who are massage therapists in good standing, with a minimum of two years of clinical practice as massage therapists, so they can provide immediate feedback and coaching. Student clinics allow students to apply their knowledge and skills and gain practical experience in hands-on, supervised clinical learning environments.</p> <p>External student clinics are planned and overseen by the education program and may include outreach initiatives such as long-term care homes, running clinics or events, or health and wellness events. They are designed to offer students practical experience to provide treatment to diverse populations as well as to raise awareness of the benefits of massage therapy and contribute to the well-being of the community.</p>
<p>Sufficient</p>	<p>As part of its preparation for accreditation, the education program defines “sufficient” in writing, based on an informed decision that takes into account the program’s context and analysis of available evidence.</p>
<p>Trauma- and violence-informed</p>	<p>Trauma- and violence-informed approaches to care acknowledge the often-significant impact of trauma and violence on people’s lives. These approaches are not about treating trauma but on understanding and responding to its effects, and working to minimize the potential for further harm; prevent re-traumatization; and promote safety, empowerment, and resilience. Trauma- and violence-informed approaches benefit everyone, regardless of whether they have experienced trauma or whether their personal history is known to the service provider.^{15,16}</p>

¹⁵ Public Health Agency of Canada. (2018, February 2). *Trauma and violence-informed approaches to policy and practice*. Government of Canada. <https://www.canada.ca/en/public-health/services/publications/health-risks-safety/trauma-violence-informed-approaches-policy-practice.html>

¹⁶ Government of British Columbia. (n.d.). *Trauma-Informed Practice (TIP) - Resources*. <https://www2.gov.bc.ca/gov/content/health/managing-your-health/mental-health-substance-use/child-teen-mental-health/trauma-informed-practice-resources>

Unmet	<p>During an accreditation review, education programs receive a rating that indicates their level of compliance with each criterion in the standards.</p> <p>A rating of unmet means the criterion is not in place, or the current practice is unsafe or unethical.</p>
Up to date	<p>Most recent or current.</p> <p>Note that it is a best-practice for documents to include version control or the release date such that it is clear which version is most up-to-date and when it was last reviewed.</p>
Viability	<p>Putting planning, oversight, and safeguards in place to ensure ongoing stability and long-term sustainability and effectiveness of the program, including incorporating practices and strategies that address how it will secure and maintain sufficient human, financial, and physical resources.</p>
Violence	<p>Any act in which a person is abused, threatened, intimidated, or assaulted. The term violence can also include bullying or harassment.¹⁷</p>
Work-life quality	<p>The overall sense of satisfaction and motivation a person experiences as a result of their work. Many factors influence work-life quality, including job design and personal autonomy, job security, remuneration, career development, degree of involvement in decision making, relationships with colleagues and supervisors, and recognition and rewards. Positive work-life quality can improve job satisfaction, work-life balance, physical and mental health, and productivity, while also decreasing absenteeism and turnover.^{18,19}</p>

¹⁷ Canadian Centre for Occupational Health and Safety. (2024, February 22). *Resources for Harassment and Violence Prevention for Employees*.

<https://www.ccohs.ca/products/courses/resources/1420667866>

¹⁸ Leitao, J., Pereira, D., & Goncalves, A. (2019). Quality of Work Life and Organizational Performance: Workers' Feelings of Contributing, or not, to the organization's productivity. *International Journal of Environmental Research and Public Health*, 16(20). <https://doi.org/10.3390/ijerph16203803>

¹⁹ Sounan, C., Lavigne, G., Lavoie-Tremblay, M., Harripaul, A., Mitchel, J., & MacDonald, B. (2012). Using the Accreditation Canada Quality Worklife Revalidated Model to Predict Healthy Work Environments. *Clinical Health Promotion*, 2(2), 51-58. <https://doi.org/10.29102/clinhp.12008>

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Work-life balance	<p>The optimal arrangement, as perceived by the individual, of work and personal roles without negative impacts on productivity. Poor work-life balance is usually associated with lack of time, scheduling conflicts, and feeling overwhelmed by the pressures of multiple roles. Finding balance does not necessarily mean splitting time equally; rather it is about feeling satisfied with both work and personal roles, regardless of how they are arranged. Health Canada identifies the following categories associated with poor work-life balance: role overload, work- to-family or family-to-work interference, and caregiver strain.²⁰</p> <p>Work-life balance initiatives are benefits, policies, or programs that help create a better balance between the demands of the job and the healthy management and enjoyment of life outside work.²¹</p>
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²⁰ Higgins, C., Duxbury, L., & Lyons, S. (2008). *Reducing Work-Life Conflict: What works? What Doesn't?*, 9-10. https://www.canada.ca/content/dam/hc-sc/migration/hc-sc/ewh-semt/alt_formats/hecs-sesc/pdf/pubs/occup-travail/balancing-equilibre/full_report-rapport_complet-eng.pdf

²¹ Canadian Centre for Occupational Health and Safety. (2022). *Work-Life Balance*. [https://www.ccohs.ca/oshanswers/psychosocial/worklife_balance.html#:~:text=Simply%20put%2C%20work%2Dlife%20balance,enjoyment\)%20of%20life%20outside%20work](https://www.ccohs.ca/oshanswers/psychosocial/worklife_balance.html#:~:text=Simply%20put%2C%20work%2Dlife%20balance,enjoyment)%20of%20life%20outside%20work)

Appendix C: Resources

Please note that hyperlinks were active as of the date of publication of this document.

Massage therapy accreditation and education

Baskwill A., Sumpton, B., Shipwright, S., Atack, L., & Maher, J. (2020, December 13). A Canadian Massage Therapy Education Environmental Scan. *International Journal of Therapeutic Massage Bodywork*, 13(4), 12-24. <https://pubmed.ncbi.nlm.nih.gov/33282032/>

College of Massage Therapists of British Columbia. (2018, November 30). *CMTBC Guidelines for Foundational Knowledge in Massage Therapy Educational Programs*. [2018-11-30-GFK-2018-clean.pdf](https://www.cmtbc.ca/wp-content/uploads/2018/11/30-GFK-2018-clean.pdf)

Federation of Massage Therapy Regulatory Authorities of Canada (FOMTRAC). (2016). *Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice*. www.fomtrac.ca/wp-content/uploads/2016/10/FOMTRAC-PCs-PIs-September-2016.pdf

Healthcare accreditation

Accreditation of Interprofessional Health Education. (2009). *Principles and practices for integrating interprofessional education into the accreditation standards for six health professions in Canada*. https://www.cihc-cpis.com/uploads/1/2/4/7/124777443/aiphe_principles_and_practices_guide_phase_1.pdf

Physiotherapy Education Accreditation Canada. (2020) *2020 Accreditation Standards for Canadian Entry-to-Practice Physiotherapy Education Programs*. <https://peac-aepec.ca/english/>

Canadian Association of Schools of Nursing (CASN). (2020, December). *CASN Accreditation Standards and Framework*. https://accred.casn.ca/content/user_files/2023/10/EN-CASN-Accreditation-Standards-Aug-30-2022-plus-TRC.pdf.

Committee on Accreditation of Canadian Medical Schools (CACMS). (n.d.). *Accreditation*. <https://cacms-cafmc.ca/>

Canadian Council for Accreditation of Pharmacy Programs. (2020). *Canadian Pharmacy Technician Programs*. [Canadian Pharmacy Technician Programs - CCAPP](https://www.ccappp.ca/)

Government regulations and resources

Canada Occupational Health and Safety Regulations (CRC) (2024) SOR-86-304. laws.justice.gc.ca/PDF/SOR-86-304.pdf

Canadian Commission on Building and Fire Codes. (2020). *National Building Code of Canada*. National Research Council of Canada. <https://nrc-publications.canada.ca/eng/view/ft/?id=515340b5-f4e0-4798-be69-692e4ec423e8>.

Office of the Privacy Commissioner of Canada. (2021, December 8). *The Personal Information Protection and Electronic Documents Act (PIPEDA)*. Government of Canada. <https://www.priv.gc.ca/en/privacy-topics/privacy-laws-in-canada/the-personal-information-protection-and-electronic-documents-act-pipeda/>

Office of the Privacy Commissioner of Canada (2024, February 7). *Provincial and territorial collaboration*. Government of Canada. <https://www.priv.gc.ca/en/about-the-opc/what-we-do/provincial-and-territorial-collaboration/>

Canadian Human Rights Commission (n.d.). *Human Rights*. <https://www.chrc-ccdp.gc.ca/en>.

Leadership

- Canadian Health Leadership Network (CHLNet) (2023). *Building Canadian Health Leadership Together*. <https://chl.net.ca/> Canadian College of Health Leaders (2024). *Developing, Supporting and Inspiring Canadian Health Leaders*. www.cchl-ccls.ca/

Healthcare and patient safety

- Healthcare Excellence Canada (HEC). Everyone in Canada wants and deserves safe, high-quality healthcare. <https://www.healthcareexcellence.ca/>
- Health Quality Ontario (HQO). <https://www.hqontario.ca/>
- Infection Prevention and Control Canada (IPAC Canada) <https://ipac-canada.org/>
- Longwoods Health Services Publishing, Education & Recruitment. <https://www.longwoods.com/>
- Public Health Agency of Canada (PHAC) <https://www.canada.ca/en/public-health.html>

Quality improvement

- Agency for Healthcare Research and Quality (AHRQ). U.S. Department of Health and Human Services. <https://www.ahrq.gov/>.
- Institute for Healthcare Improvement (IHI) <https://www.ihl.org/>
- Health Quality Ontario (HQO) <https://www.hqontario.ca/>

Massage therapy regulators

- College of Massage Therapists of British Columbia (CMTBC). www.cmtbc.ca
- College of Massage Therapists of New Brunswick (CMTNB). www.cmtnb.ca
- College of Massage Therapists of Newfoundland and Labrador (CMTNL). www.cmtnl.ca
- College of Massage Therapists of Ontario (CMTO). www.cmtto.com
- College of Massage Therapists of Prince Edward Island (CTPEI). www.cmtpei.ca
- Federation of Massage Therapy Regulatory Authorities of Canada (FOMTRAC) www.fomtrac.ca

Work-life

Mental Health Commission of Canada (2013, January). CAN/CSA-Z1003-13/BNQ 9700-803/2013 (R2022), *Psychological Health and Safety in the Workplace*. www.mentalhealthcommission.ca/English/issues/workplace/national-standard

Canadian Centre for Occupational Health and Safety (CCOHS) (2024, February 10). Work-Life Balance. <https://www.ccohs.ca/topics/wellness/worklife>