# SMTO Membership Handbook

Information for SMTO Members



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# SMTO Membership Handbook

Information for SMTO Members

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# Summary of the SMTO Membership Handbook

The SMTO Membership Handbook provides details on the SMTO, its aims and objectives and its role. It also provides details on SMTO membership, including the conditions and criteria, how to apply and the advantages of becoming a Member.

The Appendices contain the documents by which the SMTO is governed, namely the SMTO Practice Standards: Code of Conduct, Performance & Ethics, the SMTO Disciplinary & Complaints Policy, and the SMTO Continuing Professional Development Policy. All Members must adhere to these standards and agree to be bound by their terms.

## Introduction

The Scottish Massage Therapists Organisation (SMTO) was formed in 1992, by the late Nick Carter DO, MBRA, FSMTO and Maggie Brooks DO, RGN, SMTO, and exists to provide a service to the public, the Massage and Soft Tissue Therapist and the profession. The SMTO was the first Scottish organisation for Swedish, Remedial, Remedial and Sports Massage, Advanced Remedial, On-Site Massage Therapists, Manipulative Therapists, Clinical Aromatherapists and Reflexologists who also have a massage qualification. The Scottish Office stated that the SMTO is, in fact, preeminent in Scotland.

The key function of the SMTO is to establish, maintain and improve the standards of all Massage and Soft Tissue Therapies in order to protect both the public, its registrants and the profession and to work alongside suitable companies, statutory bodies and organisations in developing and maintaining these standards.

As a Professional Association, the SMTO provides membership to its Members and offers them the SMTO Block Scheme Insurance Policy, if required and subject to acceptance by the insurers, Balens Ltd. The SMTO is an Introducer Appointed Representative of Balens Limited, 2 Nimrod House, Sandy's Road, Malvern, Worcs WR14 1JJ, who are authorised and regulated by the Financial Conduct Authority.

# Aims and Objectives of the SMTO

- To promote the art and science of Massage Therapy in all its forms, as the very safe and effective therapy that it is
- To promote Massage Therapy and related techniques in the health care service
- To promote the Holistic Approach to Healthcare
- To improve and maintain standards in Massage Therapies
- To further the aims and objectives of the Members of the Organisation and to provide a central body, giving a voice to and contact between them.
- To provide a Directory of practicing registrants of the SMTO online
- To promote the advancement of study of its Members
- To provide Continuing Professional Development opportunities for its Members
- To provide a strong and unified voice enabling Members to influence the advancement of Massage Therapy both here and abroad
- To publish a magazine 'On the Massage Scene' free to its Members, and available by subscription to non-registrants of the Company
- To provide affiliation for training schools and companies in order to verify that the national occupational standards of their approved courses meet and maintain these criteria and that Members will be entitled to practice the therapy on completion of the approved courses, and that recommended courses meet the criteria set by the SMTO for Continuing Professional Development (CPD).
- To work with the General Council for Massage and Soft Tissue Therapies (GCMT) in developing and maintaining standards
- To act as a verifying organisation for the Complementary and Natural Healthcare Council (CNHC).

# Role of the SMTO

- 1. To set appropriate Practice Standards, to outline the safe, competent and ethical practice of Massage and Soft Tissue Therapies, comprising the Standards of Proficiency and the Code of Practice, and to play a central role in the requirements for training standards in Massage and Soft Tissue Therapies, and the achievement and retention of membership with the SMTO.
- 2. To establish and keep under review the standards of conduct, professionalism and ethics expected of Members and give them guidance on these matters as is necessary or applicable.
- 3. To enhance public protection by ensuring that Members maintain the standards of conduct and competence required by them to promote clients' health and wellbeing and protect them from harm, and to set appropriate Disciplinary and Complaints procedures to help and encourage all Members to achieve and maintain these standards.
- 4. To ensure consistent and fair treatment for all Members during formal complaints of their fitness to practice and to investigate the aforementioned complaints and apply sanctions, where necessary, to its Members.

# **Conditions and Criteria of Membership**

#### All Members must agree to be bound by these conditions and criteria:

- 1. Meet the required standards as determined by the SMTO
- 2. Hold, at least, a Diploma in Swedish Massage gained at a course that has undertaken to provide a good standard of training minimum 120 hours. This will include practical and theoretical teaching with assessment under examination conditions.
- 3. Provide a copy of all Diplomas, at registration, and thereafter on completion of additional training.
- 4. Provide references so that the SMTO may ensure that all its Members are of good character.
- 5. Accept that the SMTO has final authority to approve/refuse any application for Membership.
- 6. Confirm that they have read, and agree to observe, the SMTO Practice Standards: Code of Conduct, Performance and Ethics; every Member must be familiar with the standards and must ensure that they are observed. The standards apply to all Members and govern their membership.
- Undertake to abide by the SMTO Practice Standards, and additionally accept they are subject to the SMTO Disciplinary & Complaints Procedures if charged with professional malpractice or ethical misconduct.
- 8. Continue to pay their membership subscription fees on time; all membership subscription fees are non-refundable.
- Maintain professional indemnity insurance, to practise at the level to which they wish to be represented in the online Directory of Therapists, at all times to a minimum level of cover of £2,000,000.
- 10. Maintain an up to date certification in First Aid.
- 11. Understand that in order to remain in the online Directory of Therapists they keep abreast of new knowledge and/or developments and skill acquisition by fulfilling the CPD requirements set out in the SMTO Continuing Professional Development Policy. As of 2007, proof of a minimum 18 hours of Continuing Professional Development per annum is required as part of the renewal process.
- 12. Understand that if you have a qualification that requires updating, you agree to undertake appropriate additional training within a one year period.
- 13. Accept that the membership/registration certificate issued by the SMTO remains the property of the SMTO and agree to its return on cessation of membership or on demand by the SMTO.
- 14. Confirm that you have not been refused nor had any membership terminated for any disciplinary or professional matter by any professional body or association.
- 15. Help the SMTO to spread the massage message by supporting and promoting the Organisation whenever possible.

# Applying for Membership

The annual subscription fee details are on the application form and are for 12 months of membership. Renewals are sent out, by email, 4 weeks prior to your renewal date. If you do not have email a paper form can be provided.

Applying for membership can be done in one of two ways:

- By completing the online application form, found in the 'Members Area' of the website, <u>www.scotmass.co.uk</u>, uploading/sending in copies of your Diplomas/certificates, and making payment of the annual subscription fee through PayPal, bank transfer or cheque, or
- 2. By returning the completed SMTO application form, with the annual subscription fee and copies of your Diplomas/certificates.

Please note: if you trained at a school that is affiliated with the SMTO then your application will be processed more quickly. If your school is not affiliated, then we will require you to fill in an additional form about your training. It is essential that our criteria be met.

# Advantages of Membership

#### **Membership Certificates**

All successful applicants will be sent an SMTO Certificate of Membership, which remains the property of the SMTO (see item 13 in 'Conditions & Criteria of Membership'). Each year on completion of your renewal, and receipt of your annual subscription, you will be sent an Annual Certificate. This should be displayed for the benefit of the public.

#### **Block Scheme Insurance**

Balens organise a Block Insurance Scheme for Members of the SMTO. The highlights of the scheme are:

- Flexibility.
- Lower cost wider cover for you.
- Specialist attention and personal service.
- Proactive support in event of an incident occurring.
- Fuller retroactive cover for previous work performed.
- Extended range of covers in event of you ceasing practice.
- Multi therapy included if qualified.
- Teaching included.
- Voluntary work and good Samaritan acts included.
- Cover available for your therapy room at low cost.
- Wide range of other insurance service for you.

#### Website

The SMTO website, <u>www.scotmass.co.uk</u>, contains information for members of the public and SMTO Members on all aspects of the SMTO.

The Members area of the website contains member resources, a membership forum and an online membership application/renewal facility.

The SMTO keeps their Members informed as to what is going on in the profession, job opportunities, volunteering opportunities, etc. by means of the 'SMTO News' section of the website, through Facebook and by emailing out newsletters.

#### **Promotional Materials**

Posters and leaflets are available to download to help with individual Members' promotional work through the 'Members Area' of the website.

#### **Online Directory of Therapists**

As a practising therapist, Members will be given the opportunity to be included in the online Directory of Therapists (some Members may choose to opt out). The online search engine is regularly updated with new members, and, any qualifications completed by Members throughout their membership year. *Please note: requests for inclusion of additional qualifications must be accompanied by a copy of the Diploma/certificate.* 

#### **On The Massage Scene**

'On The Massage Scene (OTMS)' is the SMTO magazine with each issue covering a wide range of themes. There are three issues per year: February, June and October. Each issue contains news & views, articles of interest for all, especially those involved in Swedish Massage, Remedial & Sports Massage, Advanced Remedial Massage, Manipulative Therapy, Clinical Aromatherapy, On-Site Massage and Reflexology. News of up and coming events/seminars/workshops are also advertised. Members are encouraged to write articles of interest to Massage Therapists and to keep in touch.

#### **CPD Events**

The SMTO organise an Annual Conference to coincide with their AGM in March/April each year. Details of this, and previous conferences, can be found on the website.

There is also an interactive 'Events Calendar' containing details of upcoming SMTO affiliated training courses, CPD events and conferences.

Certificates of attendance are given for each workshop or seminar attended; these should be kept in a CPD portfolio.

#### **Regional Representation**

There are Regional Representatives of the SMTO across Scotland who organise Therapist Exchange sessions, social events and publicity events. The Regional Representatives can be found on the editorial page of 'On The Massage Scene' and on the 'Committee' page on the website.

#### Merchandise

- SMTO lapel badges are available.
- SMTO poloshirts. White SMTO short sleeved poloshirts are available, on request, with an embroidered logo on the left breast.
- SMTO sweatshirts. Coloured SMTO long sleeved sweatshirts are available, on request, with an embroidered logo on the left breast.
- Christmas cards and Gift Vouchers are also available for you to promote your business.

To order any of the above items contact the SMTO office on 08454-638852 or 07715-663852, or by email <u>info@scotmass.co.uk</u>.

# Conclusion

#### Reputation

The Scottish Massage Therapists Organisation has established a respectable reputation over the years. Some therapists are working within the National Health Service already, others in private medical clinics or in private practice.

We want the medical profession to be confident that Membership of the SMTO means professionalism with a high standard of care.

#### **Keep In Touch**

We are always open to suggestions - if you have a specific interest please let us know - also if you have a specialist area that you would like to share with us!

Please communicate through the Magazine - especially through the Members' Page. If you require any further information, please get in touch. We look forward to hearing from you.

# SMTO Practice Standards

Code of Conduct, Performance and Ethics

Information for SMTO Members

# SMTO Practice Standards

Code of Conduct, Performance and Ethics

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# Summary of the SMTO Practice Standards

The SMTO Practice Standards comprises both the Standards of Proficiency and the Code of Practice for Massage Therapists.

This document presents all the standards of conduct and competence required of Massage Therapists to promote clients' health and wellbeing and to protect them from harm.

# Introduction

The Scottish Massage Therapists Organisation (SMTO) was formed in 1992 and exists to provide a service to the public, the Massage Therapist and the profession. The SMTO also works with the General Council for Massage and Soft Tissue Therapies (GCMT) in developing and maintaining standards, and has been approved by the Complementary and Natural Healthcare Council (CNHC) as a verifying organization.

Our key function is to enhance public protection by ensuring that SMTO Members maintain these standards and demonstrate that they meet, as a minimum, the National Occupational Standards (NOS) for Massage Therapy. All SMTO Members must adhere to the SMTO Practice Standards: Code of Conduct, Performance and Ethics and agree to be bound by its terms to include the SMTO CPD Policy and the SMTO Disciplinary and Complaints Policy.

As a Professional Association, the SMTO provides membership to its Members and offers them the SMTO Block Scheme Insurance Policy if required and subject to acceptance by the insurers, Balens Ltd. The SMTO is an Introducer Appointed Representative of Balens Limited, 2 Nimrod House, Sandy's Road, Malvern, Worcs WR14 1JJ, who are authorised and regulated by the Financial Conduct Authority.

The SMTO Practice Standards comprise both the Standard of Proficiency and the Code of Practice for its Members; Massage Therapists and/or Soft Tissue Therapists. This document presents all the standards of conduct and competence required of Members to promote clients' health and wellbeing and to protect them from harm.

The SMTO Practice Standards play a central role in the requirements for training standards in Massage and Soft Tissue Therapies, and the achievement and retention of membership with the SMTO. The document outlines the safe, competent and ethical practice of Massage and Soft Tissue Therapies. All applicants for membership of the SMTO must confirm that they have read, and agree to observe, the standards set out in this document. Every Member must be familiar with the standards and must ensure that they are observed. The standards apply to all Members.

The SMTO will establish and keep under review the standards of conduct, professionalism and ethics expected of registrants and give them such guidance on these matters as is necessary (or applicable).

## **Principles**

Your main duty as a Member of the Scottish Massage Therapists Organisation (SMTO) is to protect the health and wellbeing of all those who use your services.

- The care of your client must be your first concern
- You must provide a high standard of care at all times
- Clients must be treated with respect, as individuals
- Your professional knowledge must be kept up-to-date
- You must act lawfully and professionally in your professional practice, and maintain appropriate personal boundaries at all times; this protects your livelihood.
- You are personally accountable for your professional activity

## Format

The Standards of Proficiency (in blue) and guidance are arranged in three main themes:

- A. Code of Conduct
- B. Knowledge, skills and performance
- C. Professionalism and Ethics

The standards (left-hand column) outline requirements. The supporting guidance (right-hand column) outlines how these requirements may be achieved. The guidance is not exhaustive.

There is a separate section on the code of practice (in purple): D Code of Practice

A. Code of Conduct Members of the SMTO must always maintain high standards of conduct. Members must:

STAN	DARDS	GUIDANCE	
41	Act in the best interests of your clients	Members must maintain the high standards of professional conduct appropriate to membership of the SMTO in which the interests and welfare of the client are deemed to be paramount.	
		Do not allow your views about clients' gender, age, colour, race, disability, sexuality, social or economic status, lifestyle, culture or religious beliefs to affect the way you treat them or the professional advice you give.	
		Be sensitive to clients in regard to modesty and special needs, e.g. language difficulties, disability or if they wish a companion to be present.	
		Be personally responsible for making sure tha you promote and protect the best interests of the people you care for.	
		Respect the client's autonomy and allow then a choice; never take advantage of the power that exists in, or exploit the therapist/client relationship; this would constitute abuse.	
		Members must act to protect the interests of clients, carers and other members of the public at all times.	
		Members should provide the best possible care, either alone or as part of a team, with other insured and experienced practitioners, health/social care professions.	
		Members must not do anything, or allow anything to be done that they have reason to believe will put the health or safety of a client in danger; this includes both their own action and those of others.	
		Members must remain accountable for their professional conduct, any care or professiona advice they provide, any failure to act and any tasks they may delegate, both within and outwith the treatment session; this includes when working individually or as part of a team	
		Members must protect clients if they believe that the client is actually, or potentially, at risk from a colleague's conduct, performance or health. The safety of clients must come before any personal and professional loyalties at all times. As soon as they become aware of any situation that puts a client at risk, Members should discuss the matter with a senior professional colleague or the SMTO	

STANDARDS		GUIDANCE	
42	Respect the confidentiality of your clients	Respect the therapist/client relationship, in particular the confidentiality of the client, endeavouring to foster and maintain trust at all times.	
		<ul> <li>Treat information about clients as confidential and use it only for the purpose for which it was given; only use information about a client:</li> <li>to continue to care for that person; or</li> <li>for purposes where that person has given you specific, written and signed permission to use the information.</li> </ul>	
		Never knowingly release or discuss any personal or confidential information to anyone who is not legally entitled to it. Provide information (if requested) to other health professionals ONLY with the client's written consent.	
		Keep to the conditions of any relevant Data Protection legislation and follow best practice for handling confidential information relating to individuals at all times; best practice is likely to change over time it is the Member's responsibility to stay up-to-date. When records are stored on a computer, registration with database authorities is required.	
		Be particularly careful not to reveal, deliberately or accidentally, confidential information that is stored on computers.	
		Confidentiality can be a particular challenge when treating minors. In most circumstances it would be most appropriate to have an adult present at the consultation but the issue of confidentiality would need to be carefully considered and decisions made depending upon individual circumstances.	
43	Maintain high standards of personal conduct	Members must keep high standards of personal conduct, as well as professional conduct; they must not do anything that may affect someone's treatment by, or confidence, in them.	
		Members must inform the SMTO, immediately, if they are convicted of a criminal offence or have accepted a police caution. Each case will be considered individually and a decision made in the light of the circumstances of the case. Membership may be at risk if they are convicted of a criminal offence that involves, for example, one of the following types of behaviour: Violence Abuse Sexual misconduct Supplying drugs Drink-driving offences where someone was hurt or killed	
		<ul> <li>was hurt or killed</li> <li>Serious offences involving dishonesty</li> <li>Any serious criminal offences for which a custodial sentence was given.</li> </ul>	

#### STANDARDS OF PROFICIENCY

#### STANDARDS

A4

Provide to the SMTO, on request, any relevant information about your conduct, competence or health

#### GUIDANCE

Members should inform the SMTO (and other relevant regulators and professional bodies) if they have any relevant information about their own conduct or competence, or about other professionals they work with. In particular, Members must inform the SMTO straight away if they are:

- convicted of a criminal offence (other than a minor motoring offence) or accept a police caution (also see A3);
- disciplined by any organisation responsible for regulating or licensing a healthcare practitioner or social care professional; or
- suspended or placed under a practice restriction order by an employer or similar organisation because of concerns about their conduct or competence.

Members must co-operate with any SMTO investigation or formal inquiry into their professional conduct, competence or health, or the conduct of any other healthcare provider, or the treatment of a client, where appropriate. Relevant information in connection with their conduct or competence should be supplied to any legitimate enquirer.

Members must provide information about the conduct or competence of other healthcare providers if someone who is entitled to know asks them for it. This relates to their duty to act in the best interests of their clients and users. A complaint about a colleague should be referred to the SMTO for advice. Please note, Members must refrain from criticising fellow practitioners and must not attempt to entice clients away from another therapist.

**B. Knowledge, Skills and Performance** Ethically Members must possess the relevant knowledge and skills required to function as a complementary healthcare professional.

STANDARDS OF PROFICIENCY			
STAN	DARDS	GUIDANCE	
B1	Members must keep their professional knowledge, skills and performance up- to-date and relevant to their field(s) of practice	Members must meet the Standards of Proficiency that relate to Massage Therapy, as defined by the SMTO, in conjunction with the National Occupational Standards (NOS) for Massage, and the CNHC. Members are required to meet these standards, whether they are in practice or not. The Standards of Proficiency describe minimum standards of clinical practice. Members must stay up-to- date with any changes to the Standards of Proficiency that the SMTO, the National Occupational Standards for Massage and the CNHC may make for each of their disciplines as knowledge and techniques develop.	
		Members should ensure, by means of continuous update of information and training, a level of competence consistent with the highest standards of the profession.	
		Members must maintain a portfolio of Continuing Professional Development.	
B2	Members must act always within the limits of their knowledge, skills and experience and, if necessary, refer on to another Member or healthcare	Members must always observe the highest degree of integrity and responsibility in regard to the practice of Massage Therapy, working within their professional competences.	
	professional	Member should keep within their scope of practice; this means that they should only practise in those fields in which they have appropriate education, training, qualification and experience.	
		The duty of care to a client includes the obligation to refer them for further professional advice or treatment if it becomes clear that what they need is beyond the Member's own scope of practice. If Members accept a referral from another healthcare or social care professional, they must make sure that they fully understand the request. They should only provide the treatment or advice if they believe this is appropriate. If this is not the case, they must discuss the matter with the practitioner who has made the referral, and also the client, before they begin any treatment.	
		Members must seek appropriate medical advice in any situation in which they may lack the necessary competence or experience to administer treatment. Members should not knowingly treat anyone with a serious medical condition without prior approval by their doctor, unless the client signs a disclaimer giving written permission to the Member.	

STAN	IDARDS	GUIDANCE	
B3	Maintain appropriate and effective communication with clients, carers and other Members and professionals	Members must take all reasonable steps to make sure that they can communicate properly and effectively with their clients, an their client's carers and family (when the client's permission is given).	
		Members should, where possible, co-operate and share their knowledge and expertise wit professional colleagues for the benefit of clients. This is of particular importance wher entering into multiple relationships involving the same client; please note: written permission must be sought from the client before any personal information can be discussed or shared.	
		It is essential that every client understands what is required of him/her and why. Clients should not be left in the room during a Massage Therapy session without being advised, nor should they be confused as to t actions of the Member in the room. Member must at all times, communicate clearly and check that the client has understood the request, instruction or explanation. This is essential for safe practice. Members should always ask for permission to proceed. Clients should feel comfortable, safe and in control throughout any treatment session and fully understand all procedures with regard to the consultation, the assessment, the removal o clothes, getting onto the treatment table, ar techniques being used, in particular those the may be uncomfortable, and reassessment. Clients should also be advised that they are entitled to have a chaperone present.	
Β4	Members must effectively supervise tasks they have delegated	People who consult or receive treatment or services from Members are entitled to assur that a person who has the knowledge and sk to practise their profession will carry out the treatment. Whenever Members give tasks to another person to carry out on their behalf, they must be sure that they have the knowledge, skills and experience to carry ou the task safely and effectively. If they are no suitably qualified healthcare professionals, Members must not ask them to do the work healthcare professionals. If they are healthcare professionals, Members must not ask them do work that is outside their scope of practice If they are training to be healthcare professionals, Members should be sure that they are capable of carrying out the task safe	

Whoever Members ask to carry out a task, they must always continue to give adequate and appropriate supervision and remain accountable for the outcome. If someone tells them that they are unwilling to carry out a task because they do not think they are capable of doing so safely and effectively, Members must not put pressure on them to carry out the task. If their refusal raises a disciplinary or training issue, they must deal with that separately, without endangering the safety of the client.

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STAN	IDARDS	GUIDANCE	
B5	Obtain informed consent to give treatment (except in an emergency)	Members must maintain good communication at all times thus ensuring the client understands and has given consent to all procedures. Where a client is unable to consent, then consent must be obtained from someone who can give it on the client's behalf Members must explain to the client the treatment they are intending to carry out, the risks involved and any other treatments possible. They must make sure that they obtain informed and <b>signed</b> consent to any treatment they do proceed with. Members must make a record of the client's treatment decisions and pass this on to all members of the healthcare or social care team involved in their care (where the client's permission has been given). It is recognised that in emergencies, Members may not be able to fully explain treatment or get informed consent at the time, but this should be fully	
B6	Keep accurate client records	<ul> <li>documented on the client's records.</li> <li>Making and keeping records is an essential part of care and Members must keep records for everyone they treat or who asks for professional advice or services, in order to safeguard both themselves and their clients. All records must be complete and legible, and Members should sign and date all entries. Clients should sign records for consent to treatment. Please note that records are the property of the client.</li> <li>Members must maintain careful, legible and understandable records of all clients, including a full medical history and presenting complaint, assessment and procedures performed, up-to-date medical records, clinica findings (to the level of competence gained), information and advice given and any comments made, as well as details of any suggested referral. Records should be kept for a minimum of 7 years. In the case of children, records must be kept for a minimum of 21 years. For seriously ill, injured or disabled clients, records should advise clients to consult a doctor if they are in any doubt as to the client's health or the suitability of the treatment; this advice, as all advises, should be recorded.</li> </ul>	
		<ul> <li>When supervising student therapists,</li> <li>Members should also counter-sign any student entries in the notes. Whenever Members review the records, they should update them and include a record of any arrangements they have made for the continuing care of the client.</li> <li>Members must protect information in records against loss, damage or use by anyone who is not authorised. They can use computer-based systems for keeping records, but only if they are protected against anyone tampering with them (including other healthcare professionals). If Members update a record, they must not erase information that was previously there, or make that information difficult to read; instead, they must mark it in some way. Members must adhere to Data Protection guidelines with regard to the handling of personal information (see A2).</li> </ul>	

STAN	DARDS	GUIDANCE	
B7	Be aware of, and manage effectively and safely, the risks of infection	Members must take appropriate precautions to protect their clients, client's carers and families, staff and themselves from infection.	
		Members must also take precautions against the risks that they might infect someone else. This is especially important if they suspect or know that they have an infection that could harm others, particularly clients and they mus get medical advice and act on it. This may include the need for the Member to stop practising altogether, or to change their practice in some way in the best interests of protecting their clients.	
		Members must keep to the rules of confidentiality when dealing with people who have infections. For some infections, such as sexually transmitted infections, these rules may be more restrictive than the rules of confidentiality for people in other circumstances. However, Members are duty bound to report all notifiable disease states according to applicable laws.	
B8	Members must limit their work or stop practising if they or another person has any reason to believe that their performance of judgment is affected by their physical, emotional or mental health.	Members have a duty to take action if their physical, emotional or mental health could be affecting their fitness to practise. They should get advice from a consultant in occupational health or another suitably qualified medical practitioner and act on that advice. This advice should consider whether, and in what ways, they might need to change their practice, including stopping practising, should this be deemed necessary. They also have a duty to report any other SMTO Member if they believ they are failing to meet this requirement.	
B9	Ensure appropriate First Aid skills and valid certification.	It is the responsibility of Members to keep their First Aid certification up-to-date. Members must have the necessary skills to cope in an emergency situation. Members should be prepared and competent to administer emergency procedures as may be required by the client, and maintain such procedures until relieved. Any incident should be recorded on the client's records.	

# C. Professionalism and Ethics

Members must maintain high professionalism and ethical standards.

STAN	IDARDS OF PROFICIENCY	
STAN	IDARDS	GUIDANCE
C1	Members must conduct themselves in a professional and ethical way at all times.	Members must carry out their duties and responsibilities in a professional and ethical way. Clients are entitled to receive good and safe standards of practice and care, with clear instructions given at all times. The SMTO seeks to protect the public from unprofessional and unethical behaviour, and to make sure that Members know the standards expected of them.
C2	Behave with integrity and honesty	Members must ensure that they behave with integrity and honesty and keep to high standards of personal and professional conduct at all times. Members should act honourably towards clients and fellow practitioners at all times. They must uphold and maintain the high standards of the profession. They must seek good relationships and co-operate with other healthcare professionals.
СЗ	Follow SMTO guidance in relation to advertising your services	Any advertising Members undertake in relation to their professional activities must be accurate. Advertisements must not be misleading, false, unfair or exaggerated. Members must not claim that their personal skills, equipment or facilities are better than anyone else's.
		Members must abstain from any claim or statement misrepresenting the therapeutic benefits of Swedish Massage, Remedial and Sports Massage, Remedial Massage, Sports Therapy, Advanced Remedial Massage, Manipulative Therapy, Reflexology, Clinical Aromatherapy, On-Site Massage, or any other modality that you may be qualified in.
		If Members are involved in advertising or promoting any other product or service, they must make sure that they use their knowledge, healthcare skills, qualifications and experience in an accurate and professionally responsible way. They must not make or support unjustifiable statements relating to particular products or services. Any potential financial rewards to them should be made explicit and play no part at all in the advice or recommendations of products and services that they give to clients.
C4	Members must not be involved in any behaviour or activity which is likely to damage their profession's reputation or undermine public confidence in their profession.	Members' behaviour will potentially be under scrutiny at all times by the public and they should ensure they do nothing to bring their profession into disrepute. Appropriate professional boundaries must be maintained between Members and their clients. Development of a personal relationship must result in the cessation of the therapeutic relationship.
C5	Appropriate procedures for dealing with workplace issues.	Members should ensure that they have appropriate procedures in place for dealing with complaints and criticisms in the workplace, whether from clients, staff, or other practitioners, in an efficient and professional manner.

professional manner.

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# **D.** Code of Practice

This code of practice is a set of rules outlining the responsibilities of Members.

#### CODE OF PRACTICE

#### **STANDARDS**

- **D1** Personal. A practitioner should at all times maintain the correct appearance, behaviour and conduct expected of a professional person; abuse of alcohol, drugs, or good order is deemed to be a serious offence against this code.
- **D2** Members shall have respect for the religious, spiritual, political and social views of any individual irrespective of race, colour, creed, sexual orientation or gender.
- **D3** Members shall at all times conduct themselves in an honourable and courteous manner and with due diligence in their relations with their clients and the public. They should seek a good relationship and shall work in a co-operative manner with other healthcare professionals and recognise and respect their particular contribution within the healthcare team, irrespective of whether they perform from an allopathic or alternative/complementary base.
- D4 The relationship between a Member and her/his client is that of a professional with a client. The client places trust in a Member's care, skill and integrity and it is the Member's duty to act with due diligence at all times and not to abuse this trust in any way.
- **D5** Proper moral conduct must always be paramount in Members' relations with clients. They must behave with courtesy, respect, dignity, discretion and tact. Their attitude must be competent and sympathetic, hopeful and positive, thus encouraging an uplift in the client's mental outlook and belief in a progression towards good health practices.
- **D6** In furtherance of D5, Members must not enter into a sexual relationship of any kind with a client, where client means anyone who attends for therapy and the Member has client records for. Members must be diligent in guarding against any act, suggestion or statement that may be interpreted, mistakenly or otherwise, as having a sexual implication.
- **D7** All Members must use modern information and communication technologies (ICT), e.g. text messaging, email and social media, in an appropriate and professional manner when connecting with clients and other therapists. ICT should neither be used to harm or harass other people in a deliberate, repeated and hostile manner nor be used to defame or humiliate them. If Members are using social media (e.g. Facebook, Twitter etc.) it is recommended that they should have a business site for their work and a separate social one, for personal relationships. As with all professional behaviour, boundaries must be in place to protect both the Member from complaint or compromise as well as the all-important client.
- **D8** All Members working within hospitals, hospices and any other medical establishment will comply with the protocols and guidelines in force at such establishments.
- **D9** Members must never make any written or unwritten claims to 'cure'. The possible therapeutic benefits may be described; 'recovery' must never be guaranteed.
- **D10** Members should ensure that they themselves are medically, physically and psychologically fit to practise.
- D11 Discretion must be used for the protection of Members when carrying out private treatment with clients who are mentally unstable, addicted to drugs or alcohol, or severely depressed, suicidal or hallucinated. Such clients must be treated only by Members with relevant competency. In these treatment situations, it is advised to have a chaperone/companion present. Members must not treat a client in any case which exceeds her/his capacity, training and competence. Where appropriate, Members must seek referral to a more qualified person.
- **D12** The aim of SMTO membership is to offer a service to clients as well as a service and therapeutic modalities to, and with, the medical profession. Members must recognise that where a client is delegated to them by a registered medical practitioner, that person remains clinically accountable for their patient and for the care offered by Members.
- **D13** Referrals. Members should be aware when it is appropriate and in the client's best interests to refer them to another health professional.

#### **STANDARDS**

- D14 Members must guard against the danger that a client without previously consulting a doctor may come for therapy for a known disorder and subsequently be found, too late, to be suffering from another serious disorder. To this end new clients must be asked what medical advice they have received. If they have not seen a doctor, they must be advised to do so. Since it is legal to refuse medical treatment, no client can be forced to consult a doctor. The advice must be recorded for the Member's protection. It is not a breach of ethics to treat a client who gives informed consent to receive a therapy, but Members may not knowingly apply massage therapy to a person who is already receiving medical treatment for a condition without the respective practitioner's consent.
- **D15** Members must not countermand instructions or prescriptions given by a doctor.
- **D16** Members must not advise a particular course of medical treatment, such as to undergo an operation or to take specific drugs. It must be left to the client to make her/his own decision in the light of medical advice.
- D17 Members must never give a medical diagnosis to a client in any circumstances, unless medically qualified to do so; this is the responsibility of a registered medical practitioner. However, Members practising therapies, for example Reflexology, may, during the course of their treatment, discover imbalances in physical, emotional, mental and spiritual aspects. In these cases Members may make mention of any imbalances which they may have discovered, and advise the client to see his/her doctor for a medical diagnosis. This action should be recorded on the client's records.
- **D18** Members must not use titles or descriptions to give the impression of medical or other qualifications unless they possess them and must make it clear to their clients that they are not medical doctors and do not purport to have their knowledge or skills. Members may also not address or refer to an assistant as 'nurse' unless the person referred to holds a nursing qualification in the country in which the practitioner is operating a clinic.
- **D19** Members are forbidden to diagnose, perform tests on or treat animals in any way, unless specifically qualified, or given express permission, following diagnosis, by a registered veterinary surgeon; they must not countermand her/his instructions.
- **D20** Members must not attend women in childbirth or treat them for ten days thereafter unless they hold an appropriate qualification in midwifery or one approved by the SMTO. This does not preclude treatment given with the permission of the client's midwife, doctor or medical team.
- **D21** Members must not practise dentistry unless they hold an appropriate qualification.
- D22 Members must not treat any venereal disease as defined in the 1917 Act.
- D23 Clients suffering from AIDS may be treated at the discretion of the Member.
- **D24** Members must not use manipulation or vigorous massage unless they possess an appropriate professional qualification.
- **D25** Members must not prescribe or administer remedies, herbs, supplements, essential oils or other products unless their training and qualifications entitle them to do so.
- D26 At the present time, no alternative or complementary therapy is approved as 'medical aid' under the law. It is a criminal offence for a parent or guardian not to seek 'medical aid' for a child under the age of 16. The Member should secure a signed statement from a parent or guardian who refuses to seek medical aid as defined under the law in the following format: "I have been warned by (enter name of Member) that according to law I should consult a doctor concerning the health of my child (enter name of the child) Signed (signed by parent or guardian) Signed (by person witnessing the parent's or guardian's signature).
- **D27** Members should display their certificate of membership of the SMTO in their normal place of work. Members working in several locations and/or offering visiting services will have available at all times a copy of their current annual membership certificate, issued by the SMTO.
- **D28** Before treatment Members must explain fully, either in writing or verbally, all the procedures involved in the treatment including such matters as the completion of a consultation form, the likely content and length of the consultation, the possibility that follow-up treatments may be required, the cost of treatment etc. Members must ensure that they have the client's informed consent **in writing** to perform any treatment. Where a client has an existing medical condition consent should be provided by the client's medical practitioner. Alternatively, the client must sign a disclaimer giving written permission for the treatment.

#### CODE OF PRACTICE (cont)

#### STANDARDS

D29	No third party, including assistants and members of the client's family, may be present
	during the course of a consultation with an adult without the client's express consent,
	which should be recorded. However, clients should be informed that they are entitled to
	have a chaperone present.

- **D30** Members may not undertake any physical examination or treatment on any child under 16 except in the presence of the parent, guardian or authorised person, who will have given written consent.
- **D31** Members must act with consideration concerning fees and justification for treatment. Members should not be judgmental and they should recognise the client's right to refuse treatment or ignore advice. It is the client's prerogative to make their own choice(s) with regard to their health, lifestyle and finances.
- D32 Members may not carry out any treatment of a client who has already received similar treatment for the same condition from another therapist unless the client has, of his/her own volition, decided to discontinue the original therapist's treatment.
- **D33** Records. Members must ensure they keep clear, accurate and comprehensive records of client details and their treatments including the dates, advice given and all consent forms. This is especially important for the defence of any negligence actions, as well as for efficient and careful practice. All records should be kept for a minimum of 7 years. In the case of children records must be kept for a minimum of 21 years. For seriously ill, injured or disabled clients, records should be kept indefinitely.
- **D34** Members are accountable for their treatment choices, as an explanation from them in regard to their treatment may be necessary at a future date e.g. in the case of an investigation. In determining whether or not any record of the nature of any treatment administered is reasonable, Members must be able to provide client records that demonstrate what treatment was undertaken, the reasons for this treatment choice, that the client consented to the treatment, and whether that treatment was competently and reasonably undertaken.
- **D35** Confidentiality. Members, their assistants and receptionists have an implicit duty to keep attendances, all information, records and views formed about clients entirely confidential. No disclosure may be made to any third party, including any member of the client's own family, without the client's consent unless it is required by due process of the law, whether that be by Statute, Statutory instrument, order of any court of competent jurisdiction or howsoever otherwise.
- **D36** Security. Members must ensure that their client's confidential records are kept in a secure place, properly safeguarded and not accessible to third parties. Client's belongings should also be kept in a safe place, with the client advised of where they are, at all times.
- D37 Members must ensure that they comply with the Data Protection Act.
- **D38** Insurance. All Members must hold adequate insurance cover to practise. Normally this will be through the SMTO policy, but private insurance is permitted, and if adopted, Members must provide evidence of this to the SMTO. The insurance policy must state provision for public liability and indemnity as well as the provision for professional treatments.
- D39 Premises. All Members shall ensure that their working conditions are suitable for the practice of their therapy. Treatment areas must be hygienic, appropriate and equipped to minimal health and safety standards and must comply with local health and safety regulations. Staff facilities and public areas (waiting rooms, hallways, stairs, toilet facilities etc.) must also comply with current health and safety regulations. When the client is treated in their own home, all reasonable efforts to ensure the client's safety must be made.
- D40 Advertising and professional leaflets must be dignified in tone and shall not contain named testimonials or claim to cure any disease etc. Members shall be free to advertise their services and practices as they see fit, but it is recommended that all advertising shall be confined to promoting the therapy/therapies available, the expected effects of the therapy and/or any research in support of the therapy. The qualifications of the Member should be displayed and offer a general service together with any necessary details, e.g. means of contact.

All advertisements MUST adhere to the following guidelines:

- be legal, decent, honest and truthful and in accordance with the British Code of Advertising Practice or appropriate overseas code
- not be of a character that could reasonably be regarded as likely to bring the profession into disrepute
- not be such as to abuse the trust of existing or potential clients or exploit their lack of knowledge

#### **CODE OF PRACTICE (cont)**

#### **STANDARDS**

- **D41** Stationery and other productions. Professional letterheads should be of good quality and print. A full Member may use the SMTO logo on business stationery only, but in other circumstances at the discretion of the Committee.
- **D42** Publications. Nothing may be published in the name of the Scottish Massage Therapists Organisation without the prior agreement of the Committee, or sub-committee or Member acting with the full authority of the Committee.
- D43 Discipline. Members will follow and abide by decisions made under the disciplinary, complaints and appeals procedures appended to this Code. Members must understand that by signing the application and annual renewal forms that they are agreeing to abide by the SMTO Practice Standards: Code of Conduct, Performance and Ethics and it is in the remit of the SMTO to sanction Members who do not uphold the standards and obey the contents of this document, as laid out in the SMTO Disciplinary & Complaints Policy.

# **Disciplinary & Complaints Procedure**

The goal of the SMTO is to establish, maintain and improve the standards of all Massage Therapies in order to protect both the public and its Members. A Disciplinary & Complaints Procedure allows the public, as well as fellow practitioners, to make a complaint about a Member, affiliated training organisation or the SMTO itself, if they feel that it is appropriate.

The way that the SMTO upholds their standards it to investigate any complaint made. The SMTO supports Members by following the SMTO Complaints Procedure.

The SMTO has a Professional Conduct Panel (PCP), which will consider complaints against Members based on the expectations set out above in this Code of Conduct, Performance and Ethics.

Every complaint is considered in line with the SMTO Disciplinary & Complaints Procedure which is available to all Members, and the general public, at <u>www.scotmass.co.uk</u>.

An Initial Investigation will decide whether there is a case to answer, and if there is, deal with the complaint according to the Disciplinary & Complaints Procedure. If it is found that a case against a Member is justified, the SMTO can take a range of appropriate measures against the Member as necessary. The ultimate sanction would be termination of SMTO membership.

When an allegation is made against a Member, the SMTO will always take account of the standards set out in these Practice Standards when considering that allegation. While this document contains several examples of issues that may be considered, it is not an exhaustive list. An allegation against a Member may be upheld even if the details of the issues that arise in their case are not specifically mentioned in this document. Every case referred to the SMTO will be considered on an individual basis.

# SMTO Disciplinary & Complaints Policy

A guide to handling professional conduct and complaints

Information for SMTO Members and the General Public

# Summary of the SMTO Disciplinary & Complaints Policy

The purpose of this guide is to set out the procedure to be followed when a complaint is received by the Scottish Massage Therapists Organisation (SMTO), either about the organisation, one of its affiliated schools or one of its Members.

# SMTO Disciplinary & Complaints Policy

A guide to handling professional conduct and complaints

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## Introduction

The Scottish Massage Therapists Organisation (SMTO) was formed in 1992 and exists to provide a service to the public, the Massage Therapist and the profession. The SMTO also works with the General Council for Massage and Soft Tissue Therapies (GCMT) in developing and maintaining standards, and has been approved by the Complementary and Natural Healthcare Council (CNHC) as a verifying organisation.

Our key function is to enhance public protection by ensuring that SMTO Members maintain these standards and demonstrate that they meet, as a minimum, the National Occupational Standards (NOS) for Massage Therapy. All SMTO Members must adhere to the SMTO Practice Standards: Code of Conduct, Performance and Ethics and agree to be bound by its terms to include the SMTO Continuing Professional Development Policy and the SMTO Disciplinary and Complaints Policy. Members of the public can expect Members to uphold these standards.

As a Professional Association, the SMTO provides membership to its Members and offers them the SMTO Block Scheme Insurance Policy if required and subject to acceptance by the insurers, Balens Ltd. The SMTO is an Introducer Appointed Representative of Balens Limited, 2 Nimrod House, Sandy's Road, Malvern, Worcs WR14 1JJ, who are authorised and regulated by the Financial Conduct Authority.

The purpose of this guide is to set out the procedure to be followed when a complaint is received by the Scottish Massage Therapists Organisation (SMTO), either about the organisation, one of its affiliated schools or one of its Members.

The goal of the SMTO is to establish, maintain and improve the standards of all Massage Therapies in order to protect both the public and its Members. A Disciplinary & Complaints Procedure allows members of the public, as well as fellow practitioners, to make a complaint about a Member, affiliated training organisation or the SMTO itself, if they feel that it is appropriate. This helps us to ensure that the best service is available to everyone.

In the case where the complaint is made against a Member then, following initial investigation by the Secretary, the complaint will be:

- a) Dealt with by the Secretary or Designated Person (DP), i.e. an informal complaint
- b) Referred to the Professional Conduct Panel, i.e. a formal complaint

For the purposes of this document "Member" may refer to an individual or training provider/ establishment and "Complainant" refers to the person lodging the complaint.

Every SMTO Member is subject to the under mentioned Disciplinary and Complaints Procedure and agree to this by signing the SMTO membership application form.

## Types of complaints which can be considered

The SMTO can only consider complaints about fitness to practice. These types of complaints are those which question whether an SMTO Member's fitness to practise is 'impaired' by:

- A lack of competence.
- Misconduct.
- Failure to observe personal standards, for example, acts of dishonesty, indecency or violence, conviction in a court of law, drunkenness or drug abuse. These may have serious consequences even if not directly connected with your professional practice. This would include a conviction outside of the jurisdiction if it would be considered to be a recognised conviction in this jurisdiction.
- Their physical or mental health.
- An adverse determination made by another regulator responsible for massage practice.
- Allegations that a successful application for SMTO membership has been made fraudulently or incorrectly.

Any action taken by the SMTO may affect a person's membership throughout the UK.

#### **Cases can include:**

- Theft
- Violence

#### **Misconduct includes:**

- Not keeping adequate or satisfactory records.
- Not communicating well enough with clients.
- Child Pornography
- Inappropriate behaviour
- Working under the influence of alcohol or drugs.
- Having sexual relationships with clients.

# N.B. This is by no means an exhaustive list: each case will be considered separately with reference to the specific set of facts.

# **Disciplinary & Complaints Procedure**

This procedure is designed to help and encourage all Members to achieve and maintain standards of conduct and practice as laid down in the SMTO Practice Standards: Code of Conduct, Performance and Ethics. The aim is to ensure consistent and fair treatment for all Members if a formal complaint is received about alleged violations of any of the set SMTO ethical standards, allegations of professional misconduct or allegations of serious impairment due to ill health of a Member of the SMTO.

The SMTO, the SMTO Committee and any Disciplinary Panels, e.g. Professional Conduct Panel (PCP) or Appeals Committee (AC) support the Member by following these procedures.

### Principles

- 1. The SMTO can only become involved if the complaint is about an SMTO Member's fitness to practise. The SMTO cannot (i) look at complaints about professionals who are not members of the SMTO or (ii) help you make a claim for compensation.
- 2. All complaints will be received positively and taken seriously.
- 3. The SMTO considers all complaints including those, which if serious enough, would justify removing the Member from the online Directory of Therapists in order to protect the public.
- 4. All complaints should normally be made within six (6) months from the time of the event; however, complaints being made outwith these guidelines are at the discretion of the Secretary or Designated Person (DP).
- 5. The Secretary or DP of the SMTO is responsible for discussing the initial complaint and then initiating and ensuring that the correct procedures are followed. Many complaints may be satisfactorily resolved and dealt with quickly and easily by the initial response that is made. The SMTO Secretary will endeavour to liaise with the complainant and the Member to reach a resolution.
- 6. Complaints will be dealt with promptly and investigated thoroughly and all parties will be kept fully informed at all times especially when there is a delay in resolving the issue. Timescales are for guidance, and will depend upon the nature of the complaint, and should not be imposed where the integrity of the process may be compromised.
- 7. Once a completed formal written complaint form has been received by the SMTO the Member will be informed of the nature of the complaint/allegation against them and be given the opportunity to state their case.
- 8. If disciplinary action is necessary, it will be taken only after the case has been fully investigated.
- 9. If disciplinary action is decided upon by the Secretary or DP then the matter will be referred to the PCP who may consider it necessary for a hearing to be arranged. The Member will have the right to be accompanied by a person of their choosing at any hearings that may be held, if they are invited to attend.
- 10. A Member will have the right to appeal against any disciplinary penalty imposed by the PCP through an Appeals Committee (AC). The decision of the Appeals Committee is final and binding on all parties.

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## Procedure

- 1. In the first instance, complaints should normally be directed to the SMTO Secretary or Chairperson. Any Member receiving a complaint direct from a client and/or member of the public should refer this on to the SMTO Secretary or Chairperson immediately.
- 2. Any complaint received verbally, electronically or in writing against a Member will be verbally acknowledged by the SMTO and recorded in the Complaints Register. If in the event no formal written complaint is made the entry in the Complaints Register will be erased.
- 3. The Secretary, or DP, will acknowledge any verbal or written complaint, that is submitted to the SMTO, in writing, and will enclose a copy of the 'SMTO Disciplinary and Complaints Policy' and the 'SMTO Complaints Form' within five (5) working days of its receipt.
- 4. All complainants will be required to put their complaint in writing using the 'SMTO Complaints Form' provided to them. If a written statement is not possible then an alternative method of recording the complaint will be agreed upon. If assistance is required in filling out the form, contact should be made to the Secretary or DP.
- 5. The complainant should identify the persons alleged to be involved and the facts concerning the alleged conduct in as much detail and specificity as possible, with available documentation. The statement should identify by name, address and telephone number the person making the information known to the SMTO and others who may have knowledge of the facts and circumstances concerning the alleged misconduct.
- 6. The completed 'SMTO Complaints Form' should be addressed to the Secretary and sent by recorded mail. Supplementary information relating to the complaint may be requested.
- 7. Once the 'SMTO Complaints Form' is received a copy of the formal written complaint will be sent to the Member, who is the subject of the complaint, requesting agreement or rebuttal within fifteen (15) working days. The Member will be advised to make immediate contact with their insurance company's claims department for advice. At the same time, the complainant will be sent written confirmation that the complaint is being investigated.
- 8. On receipt of the completed 'SMTO Complaints Form' the Secretary or DP will carry out further investigation as appropriate. This review will normally take no longer than thirty (30) working days and includes time for the response by the Member to the complaint. If the complaint is of a minor nature it may be possible for the Secretary to resolve it and complaints falling into this category will normally be resolved within a further ten (10) working days.
- 9. On receipt of the reply by the Member who is the subject of the complaint, the Secretary or DP will determine if there is a case to be answered. It may be necessary for the Secretary or DP to consult with one or more relevantly qualified members of the SMTO committee in order to make this decision.
- 10. Standard of Proof will be the civil and not the criminal standard. The burden of proof will be with the party or parties bringing the complaint, unless otherwise stated.
- 11. All Complaints are judged against the SMTO Practice Standards: Code of Conduct, Performance and Ethics.
- 12. Professional misconduct complaints would include, but not be limited to (as already defined in pages 2 and 3):
  - inappropriate behaviour e.g. this would apply to complaints arising from lack of respect in regard to the views and beliefs of their clients in regard to gender, ethnic origins, culture, sexuality, lifestyle, age and social status.
  - exploitation of client/therapist relationship, e.g. disregard of personal and professional boundaries, involvement in sexual relationships, etc.
  - physical, sexual or verbal abuse of clients, and/or cyberbullying and inappropriate use of modern information and communication technologies, e.g. text, email, social media.
  - professional incompetence
  - stealing from clients
  - failing to keep proper records and/or falsifying them
  - failing to care for clients properly by obtaining consent
  - failing to care for client's property including safety in the treatment room
  - deliberately concealing unsafe practice
  - committing serious criminal offences

- 13. Medical unfitness to practise complaints, which would require two independent opinions to be sought, include:
  - alcohol or drug dependency
  - untreated mental illness
  - serious personality disorder
  - physical disability or illness, including contagious diseases
- 14. If it is decided there is no case to answer, the person making the complaint will be informed in writing of the decision and the reasons for the decision.
- 15. Where the complaint is to be referred for further investigation, or is deemed to be one of alleged professional misconduct or unfitness to practice, the Secretary will inform the members of the Professional Conduct Panel (PCP) and convene a meeting within fifteen (15) working days to review the complaint and discuss further action. The Chairperson of the PCP will be provided with a copy of the formal complaint to distribute to the PCP ahead of this meeting.
- 16. The PCP may take disciplinary action against the Member if in their opinion the Member has conducted him/herself in any way against the SMTO Practice Standards: Code of Conduct, Performance and Ethics. Such disciplinary action will follow the procedures herein set out.
- 17. Criminal proceedings. In the event that in the opinion of the PCP the matter complained of is in the nature of a criminal act or omission the complainant will be advised to contact her/his local police authority and the Member will be so informed. Regardless of the outcome the PCP may still take disciplinary action against the Member if in the PCP's opinion the therapist has conducted him/herself in any way against the SMTO Practice Standards: Code of Conduct, Performance and Ethics. Such disciplinary action will follow the procedures herein set out.
- 18. Having considered the complaint and the Member's reply, the Chairperson of the PCP or SMTO will send a written response within thirty (30) working days of the decision to proceed, making the PCP's findings known to the Member and the complainant.
- 19. Where considered necessary a hearing may be held. The PCP may call witnesses, who may include the person making the complaint and/or the Member who is the subject of the complaint. Additionally, the person bringing the complaint and the Member who is the subject of the complaint, have the right to provide a full written explanation of all the circumstances. In cases deemed by the PCP to be of a particularly serious nature the complainant and the Member may be invited, at the discretion of the PCP, to give personal evidence if they wish to do so and each may be accompanied by a person of their choosing, e.g. friend, adviser etc. All costs of attending any such hearing(s) shall fall to the parties.
- 20. If the PCP decides to arrange a hearing any party may request an adjournment in order for further facts to be gathered. The PCP, complainant and the Member who is the subject of the complaint should, in principle, agree on all dates and timings, however, should this prove impossible the decision of the PCP is final.
- 21. At the hearing, those invited, e.g. the complainant and/or the Member, may make opening statements, present documents and testimony, examine and cross-examine any witnesses, make closing statements and present written briefs as scheduled by the PCP.
- 22. Once the PCP has considered the complaint and the outcome of the hearing (where necessary) one or more of the following actions would be taken:
  - the case may be found unproven or does not constitute professional misconduct and/or unfitness to practice, in which case no action would be taken
  - a formal written caution or reprimand could be issued; this would be kept on record for a fixed period of time as specified by the PCP
  - recommendation of any other action as specified by the PCP including, but not limited to, counselling or retraining
  - a period of supervision with the possibility of formal reassessment before reinstatement, as appropriate
  - suspension of membership for a fixed period of time as determined by the PCP/SMTO after which the Member could apply formally to be restored to the online Directory of Therapists
  - interim suspension until such times that the problem has been resolved this might be when criminal proceedings are underway and would be reviewed after the court case and/or every three months
  - removal of the member from the online Directory of Therapists indefinitely

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- expulsion from membership N.B. sexual abuse of a client will result in automatic, permanent expulsion
- or a combination of the above
- 23. Once the PCP reaches a decision, the Chairperson of the PCP or SMTO will send a written response within ten (10) working days to the Member and the complainant informing them of the ruling; this will contain factual findings, conclusions and any sanctions applied.
- 24. All decisions of the PCP must be reported to the SMTO Committee at its next meeting. The SMTO Committee shall not have the power to overturn any decision (other than through the process of the Appeals Committee set out below) but may advise the Chairperson of the PCP of its views.
- 25. The Member and the complainant will have ten (10) working days to lodge an appeal or accept the decision of the PCP, **in writing**.
- 26. If the decision rendered by the PCP is not favourable to the Member, they can appeal the decision to the SMTO Committee by submitting a written appeals statement to the Chairperson. The SMTO Committee will consider the appeal and any further evidence, and if the appeal is thought to be justified they will form an Appeals Committee (AC) and appoint a Chairperson. The final decision of the majority of the SMTO Committee will be binding.
- 27. The Member and the complainant will be informed, in writing, as to whether the Appeal was deemed reasonable or not within ten (10) working days. If the complaint goes to the Appeals Committee (AC) then the decision of the Appeals Committee is final and binding on all parties.
- 28. Should the complaint be upheld by the AC, they can uphold the decision of the PCP or apply their own sanction, see clause 21 above.
- 29. The name of any Member expelled from the SMTO will be advised to any other professional organisation to which the Member belongs.
- 30. In the event the complaint is withdrawn at any time, the Member will be informed and, subject to clause 2 above, the complaint will be deleted from the Member's record.
- 31. The upkeep of the Complaints Register is the responsibility of the Secretary or DP and will contain accurate records of all complaints and their outcomes; this includes complaints about individual Members, affiliated training organisations or the SMTO itself.
- 32. The Secretary will inform the SMTO Committee of the number of complaints in the Complaints Register, and their outcomes at the SMTO Committee Meetings.
- 33. If the Complaints Register has been updated in the twelve (12) months following the SMTO AGM, then a Complaints' Report will form part of the Secretary's AGM report for all completed complaints.
- 34. Costs. No costs are charged for the process of the Initial Investigation or PCP but the Member will be charged a fee of £100.00 to cover the costs of any Appeal by that Member.
- 35. Non-renewal. Should the Member's SMTO membership expire during the complaints process it will be at the discretion of the SMTO whether to continue with the process or not.

## **Initial Investigation**

- 1. In the case where a complaint is made against a Member an initial investigation into the complaint will be completed by the Secretary, or Designated Person (DP)
- 2. If the complaint is informal then the Secretary or DP will deal with the complaint in an 'informal' way.
- 3. If the complainant has completed and submitted the SMTO Complaints Form, the Member will be given the opportunity to respond to the complaint, and if disciplinary action is decided upon by the Secretary or DP then the matter will be referred to the Professional Conduct Panel (PCP).

# Professional Conduct Panel (PCP)

- 1. The Members of the SMTO Committee shall elect persons to form the Professional Conduct Panel (PCP). The PCP shall consist of a Chairperson and two other Members.
- 2. The Chairperson will be a permanent appointment on a fixed two-year term. There is no limit to the number of consecutive terms a Chairperson may be appointed.
- The other two members will be invited as required and will be drawn from a wide range of modalities within complementary medicine, and will both be Members of the SMTO.
   However, in exceptional circumstances, if in the opinion of the PCP Chairperson a particular

expertise is needed to adjudicate the issue, one Member of the PCP may be appointed from outside the membership of the SMTO.

- 4. The Chairperson of the PCP may co-opt further Members, with the prior agreement of the SMTO, when considered appropriate.
- 5. The PCP will consider alleged violations of any of the set SMTO ethical standards, allegations of professional misconduct or allegations of serious impairment due to ill health of a registered massage therapist, referred to it by the Secretary or DP.
- 6. A PCP member may not serve in any situation where his or her impartiality or the presence of actual or apparent conflict of interest might reasonably be questioned.
- 7. A quorum consists of three PCP members, and PCP action shall be determined by majority vote.
- 8. Where a vacancy of a PCP member occurs as a result of resignation, unavailability, disqualification, expiry of term, or a conflict of interest (see 6 above), the members of the SMTO Committee shall designate or elect a substitute/replacement, as appropriate.

# Appeals Committee (AC)

- 1. In the event of an appeal against the decision of the Professional Conduct Panel (PCP), an Appeals Committee (AC) will be formed by the SMTO Committee, and a Chairperson appointed.
- 2. The justification of the appeal and all documentary evidence and assessment by the PCP will be sent to the Chairperson of the AC.
- 3. The appeals procedure may take up to four calendar months.
- 4. The decision of the AC, submitted in writing to the SMTO Committee, is final and will be binding on all parties. Copies of the decision will be available to the Member and the complainant.
- 5. There is no further appeal process within the SMTO.

## **Contact Details**

Any individual or organisation wishing to make a complaint against the SMTO (organisation), one of its affiliated schools or an SMTO Member, within the context of the SMTO Practice Standards: Code of Conduct, Performance and Ethics should in the first instance contact:

THE SECRETARY SCOTTISH MASSAGE THERAPISTS ORGANISATION 27 CRAIGS AVENUE EDINBURGH EH12 8HS Tel: 08454-638852 or 07715-663852 Email: info@scotmass.co.uk

# Appendix A: SMTO Complaints Form



# SMTO Complaints Form

Scottish Massage Therapists Organisation

#### Making a Complaint

The SMTO Disciplinary & Complaints Policy explains how the SMTO can help you if you have a problem with the SMTO, an affiliated training organisation or one of its Members. It will help you to understand how the SMTO deals with complaints against its members. If you have read the policy and wish to proceed with a complaint please help us by providing the following information. If you need help with this form, please telephone the SMTO and we will do our best to help you.

Name:	Section One -	Your details			
Image: Postcode:       Postcode:       Image:	Name:				
Daytime Tel no.       Mobile no.         Email address:       Yes         Yes       No         Are you the client in the complaint?       I         If yes, are you still seeing the Massage Therapist?       I         Are you complaining on behalf of a client?       I         If yes, what is your relationship to the client?       Yes         No       Yes         Does the client know you are making this complaint on their behalf?       I         Have you raised the complaint directly with the Massage Therapist?       I         If yes, please describe what happened. If no, please explain why you directed not to:       Yes         Yes       No	Address:				
Email address:       Yes       No         Yes you the client in the complaint?       Image: Client is point of a client?       Image: Client is point of a client?         Are you complaining on behalf of a client?       Image: Client is point relationship to the client?       Image: Client is point of a client?         Mo       Yes       No         Does the client know you are making this complaint on their behalf?       Image: Client is point of the client?       Image: Client is point of the client?         Have you raised the complaint directly with the Massage Therapist?       Image: Client is point of the client is point on their behalf?       Image: Client is point of the client is		Postcode:			
Yes       No         Are you the client in the complaint?       Image: Client in the complaint?       Image: Client in the complaint in the complaint?       Image: Client in the complaint of a dient?       Image: Client in the complaint of the client?       Image: Client in the complaint directly with the Massage Therapist?       Image: Client in the complaint directly with the Massage Therapist?       Image: Client in the complaint directly with the Massage Therapist?       Image: Client in the complaint directly with the Massage Therapist?       Image: Client in the complaint directly with the Massage Therapist?       Image: Client in the complaint directly with the Massage Therapist?       Image: Client in the complaint directly with the Massage Therapist?       Image: Client in the complaint directly with the Massage Therapist?       Image: Client in the complaint directly with the Massage Therapist?       Image: Client in the complaint directly with the Massage Therapist?       Image: Client in the client i	Daytime Tel no.	Mobile no.			
Are you the client in the complaint?       Image: Complaint of the complaint?       Image: Complaint of the client?       Image: Complaint of the complaint	Email address:				
If yes, are you still seeing the Massage Therapist?			Yes	No	
Are you complaining on behalf of a client?       Image: Complaining on behalf of a client?         If yes, what is your relationship to the client?       Yes         Yes       No         Does the client know you are making this complaint on their behalf?       Image: Complaining on behalf of a client?         Have you raised the complaint directly with the Massage Therapist?       Image: Complaining on behalf of a client?         If yes, please describe what happened. If no, please explain why you decided not to:       Yes         Yes       No	Are you the client	in the complaint?			
If yes, what is your relationship to the client?       Yes       No         Yes       No         Does the client know you are making this complaint on their behalf?       Image: Client in the complaint directly with the Massage Therapist?       Image: Client in the	lf yes, are you still	seeing the Massage Therapist?			
Yes       No         Does the client know you are making this complaint on their behalf?       Image: Client complaint directly with the Massage Therapist?       Image: Client c	Are you complaini	ng on behalf of a client?			
Does the client know you are making this complaint on their behalf?       Image: Complaint directly with the Massage Therapist?         Have you raised the complaint directly with the Massage Therapist?       Image: Complaint directly with the Massage Therapist?         If yes, please describe what happened. If no, please explain why you decided not to.       Image: Complaint directly with the Massage Therapist?         Yes       No	If yes, what is your	relationship to the client?			
Have you raised the complaint directly with the Massage Therapist? If yes, please describe what happened. If no, please explain why you decided not to. Yes No			Yes	No	
If yes, please describe what happened. If no, please explain why you decided not to. Yes No	Does the client kno	ow you are making this complaint on their behalf?			
Yes No	Have you raised the complaint directly with the Massage Therapist?				
	If yes, please describe what happened. If no, please explain why you decided not to.				
If you are claiming that your Massage Theranist has been negligent			Yes	No	
have you seen a solicitor or taken legal advice?	• •	that your Massage Therapist has been negligent licitor or taken legal advice?			

Page 1 of 4

If you wish to make a complaint about a Member of the SMTO please complete SECTION TWO.

If you wish to make a complaint about an affiliated training organisation please complete SECTION THREE.

If you wish to make a complaint about the Scottish Massage Therapists Organisation please complete SECTION FOUR

All complainants must fill in Sections 1, (2, 3 or 4), 5 and 6 or the form will be returned as incomplete.

#### Section 2 – Massage Therapist Details

Please provide as much information as you can about the person that you are reporting. This will help us to identify them on the SMTO Database.

Name of Massage Therapist involved in the complaint:				
Therapy practised:				
Practice address:				
			Yes	No
Were you/the client referred to t other healthcare professional?	he Massa	ge Therapist by a doctor or		
If yes, please give name and addı	ress.			
			Date of first visit	Number of visits
Please state for how long you/th Therapist and how many visits yo				
Section Three – Training	g Organ	isation Details		
Name of Training Organisation involved in the complaint:				
Training organisation address:				
Section Four – Complain	nt again:	st the SMTO		
*	U		Yes	No
Do you wish to make a complain Therapists Organisation (SMTO)?	-	he Scottish Massage		

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#### Section Five - Complaint Details

When did the incident take place?

Where did it take place?

Please describe what you think happened?

Did anyone else see what happened? If so, please give us their contact details.

#### **Other Organisations**

Have you reported this matter to anybody else (e.g. police, employer, another professional body)?

If so, what was their response?

Please give us their contact details. Please keep us informed of any progress with the matter you have reported and let us know the final decision.

### Additional Information

Please list below any papers or documents that you are sending us with this form.

Please also use the space to provide us with any additional information that might help us to deal with this matter. Please continue on another page, if necessary.

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#### Section Six - Checklist & Declaration

Thank you for completing this form. Now please make sure you have:

- Fully completed Section One Your Details
- Fully completed Section Two Massage Therapist Details (if applicable)
- Fully completed Section Three Training Organisation Details (if applicable)
- Fully completed Section Four Complaint against the SMTO (if applicable)
- Fully completed Section Five Complaint Details
- Fully completed Section Six Checklist & Declaration (please read this carefully)
- Given as many details as you can about your complaint, together with any supporting papers and documents.
- Kept a copy of this completed form for you records

#### Declaration

I have no objection to the Massage Therapist/Training Organisation/SMTO<sup>\*delete</sup> seeing my complaint

I consent to any medical/client records and/or reports being forwarded to the Scottish Massage Therapists Organisation to help them investigate the allegations that I have made

I would be willing to appear as a witness in any hearing that might take place

I declare that the information that I have given is true and accurate.

Signed:

Date:

If you would like to discuss any part of your complaint before sending this form, or would like help completing it, please telephone 08454-638852 or 07715-663852

When you have completed this form, please send it recorded delivery, along with all supporting documents, to:

SMTO Secretary, 27 Craigs Avenue, EDINBURGH, EH12 8HS

We will acknowledge receipt of your complaint and then keep you informed about what is happening next.

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# SMTO Continuing Professional Development Policy

Continuing Professional Development and your membership

Information for SMTO Members

# Summary of the SMTO's CPD policy

undertake CPD to continue their membership of the required by the UK Government for all healthcare professionals professional bodies. The SMTO has set standards which your CPD must renew your need to confirm that you have met these an audit (check) you will evidence to show how Members to keep an of their CPD.

# SMTO Continuing Professional Development Policy

Continuing Professional Development and your membership

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## Introduction

The Scottish Massage Therapists Organisation (SMTO) was formed in 1992 and exists to provide a service to the public, the Massage Therapist and the profession. The SMTO also works with the General Council for Massage and Soft Tissue Therapies (GCMT) in developing and maintaining standards, and has been approved by the Complementary and Natural Healthcare Council (CNHC) as a verifying organization.

Our key function is to enhance public protection by ensuring that SMTO Members maintain these standards and demonstrate that they meet, as a minimum, the National Occupational Standards (NOS) for Massage Therapy. All SMTO Members must adhere to the SMTO Practice Standards: Code of Conduct, Performance and Ethics and agree to be bound by its terms to include the SMTO Continuing Professional Development Policy, and the SMTO Disciplinary and Complaints Policy.

As a Professional Association, the SMTO provides membership to its Members and offers them the SMTO Block Scheme Insurance Policy if required and subject to acceptance by the insurers, Balens Ltd. The SMTO is an Introducer Appointed Representative of Balens Limited, 2 Nimrod House, Sandy's Road, Malvern, Worcs WR14 1JJ, who are authorised and regulated by the Financial Conduct Authority.

Initial membership, however, only indicates the meeting of standards at a given point in time. In order to maintain membership, all Members must demonstrate a continued commitment to standards maintenance and this is what Continuing Professional Development (CPD) is all about.

The purpose of this guide is to set out the SMTO's Continuing Professional Development Policy as clearly as possible, to enable you as a current, or prospective Member to understand what is required and how best to achieve it. Please note, a broad range of activities are deemed acceptable as CPD.

N.B. CPD is a compulsory component of SMTO membership, and all Members are required to complete a minimum of 18 hours per annum. However, practical hours can be carried forward for up to three (3) years i.e. so if 100 practical hours were completed in 2013 those CPD hours can be used for renewing in 2013, 2014 & 2015, thereafter any unused hours will expire.

# **Definition of CPD**

The SMTO defines CPD 'as a range of learning activities through which professionals grow and develop throughout their careers to ensure that they retain their capacity to practise safely, effectively and legally within their evolving scope of practice.' Learning activities include anything that can advance a Member's professional competence (see Appendix C: FAQs Q3&4)

# SMTO Standards for CPD

Our standards dictate that Members must:

- 1. maintain a continuous, up-to-date and accurate record of their CPD activities
- 2. demonstrate that their CPD activities are a mixture of learning activities relevant to current or future practice
- 3. seek to ensure that their CPD has contributed to the quality of their practice
- 4. seek to ensure that their CPD benefits their clients
- 5. complete a minimum of 18 hours of CPD per annum, and then confirm this as part of the renewal process each year
- 6. be able, on request by the SMTO, to submit evidence of how they have met these CPD standards

# Meeting these Standards

# Standard 1: Maintain a continuous, up-to-date and accurate record of their CPD activities

The GCMT states, 'All practitioners must be encouraged to take CPD courses and to record all aspects of their professional development in a CPD Portfolio, the information in the portfolio should be kept as simple as possible, but must show sufficient evidence of how the CPD undertaken will help in their service to their patients and the public in general.'

A template 'log' can be found in Appendix A and a completed sample 'log' in Appendix B.

The CPD log sheet provides space for recording:

- the number of hours
- types of activities
- the learning you have gained from each activity
- your reflection on the learning
- how you plan to put this into practice in your work

All Members should keep the completed log sheets in their CPD portfolio alongside their evidence of participation, e.g. CPD certificates etc. For activities that involve reading, research etc. Members should be able to provide a more detailed record of their 'learning'. This can be kept in any easily reproducible format of their choice.

# Standard 2: Demonstrate that their CPD activities are a mixture of learning activities relevant to current or future practice

All Members demonstrate that they have met the standards required for membership; however, it is essential that skills and knowledge are kept up to date. Due to ongoing research and development, as well as the introduction of new techniques/therapies, it is essential that every effort is made to ensure that 'best practice' is maintained and this can be done through completing CPD activities. Also, in a profession that is always learning and developing, CPD is about business and personal development, monitoring quality of care, reflective practice, assessing feedback from clients and colleagues, conducting audits, and networking with other Massage Therapists.

# Standard 3: Seek to ensure that their CPD has contributed to the quality of their practice

All Members demonstrate that they have met the standards required for membership when they join; however, it is essential that skills and knowledge are kept up to date. Due to ongoing research and development, as well as the introduction of new techniques/therapies, it is essential that every effort is made to ensure that 'best practice' is maintained and this can be done through the completion of CPD activities (see Standard 2) to ensure the service delivered is both professional, acceptable and effective.

#### Standard 4: Seek to ensure that their CPD benefits their clients

As well as improving the quality of their work, CPD should also be aimed at improving the service Members provide for their clients. Keeping up to date and developing their practices will help them to continuously improve the care they provide.

Standards of practice:

- 1. Communication. Essential to build on this as complaints are usually a result of poor communication.
- 2. Ethics and professionalism. There must be boundaries in working practice, particularly when working with friends and acquaintances. Reviewing the SMTO Practice Standards and/or attending ethics seminars can help Members to understand what is expected in order to be professional. Members are continually developing these skills with each situation that they are required to deal with in their practices.
- 3. Providing a safe environment and approach to clients. This may involve learning how to communicate with clients with special needs and/or disabilities.
- 4. Competence. Members must keep their knowledge up to date, reviewing their present skills, learning difference applications and developing new skills.

Standard 5: Complete a minimum of 18 hours of CPD per annum, and then confirm this as part of the renewal process each year

When working as a Professional Therapist, it is important that both theoretical and practical knowledge and skills are up to date in two key areas:

- a) Learning more about Massage Therapy
- b) Learning more about how to work as a professional therapist, including any new legislative or other requirements.

Members must complete a minimum of 18 CPD hours per annum to meet the requirements.

CPD includes specific learning, general learning (e.g. health & safety, business development etc.), structured reading and informal learning (such as getting together with fellow students during a course and afterwards to refresh techniques). Reading needs to be structured to improve and update your knowledge, noting down what you learned, and logging any further research into a topic of interest. It does NOT include First Aid as a valid First Aid certificate is a separate **compulsory** requirement for all Members.

Members will be required to confirm annually that they have met the SMTO's CPD requirements as part of the renewal process.

# Standard 6: Be able, on request by the SMTO, to submit evidence of how they have met these CPD standards

Membership audits (checks) do take place and Members will be required to submit evidence of how they have met these CPD standards should they be selected.

Those Members being asked for evidence will be sent the CPD Evidence Form (see Appendix B) which they should complete and return together with all the relevant paperwork to support their CPD efforts, e.g. their CPD log (see sample in Appendix A), attendance certificates, book reports, published articles, meetings attended etc.

## UNABLE TO MEET THESE STANDARDS

If a Member cannot/does not complete the number of hours required, this does not mean they will be unable to remain a Member of the SMTO, nor does it mean that they will be immediately removed from the SMTO Directory. However, they are required to provide details to the SMTO on why they have been unable to meet the annual CPD requirement. Mitigating circumstances will be taken into account. Advice will be offered to enable them to complete the CPD requirement, where possible, over an agreed period of time. Should it still not be possible for the standards to be met, membership will lapse, and the Member will be removed from the SMTO Directory, until such time as the CPD standards can be met.

# APPENDIX A: TEMPLATE CONTINUING PROFESSIONAL DEVELOPMENT (CPD) LOG SHEET

Continuing Professional Development (CPD) Log Sheet



NAME			I ISTED THERADIES.			
MEMBE	MEMBERSHIP No:					
Date				Reflectiv	Reflective practice:	Number of
or CPD activity	<ul> <li>Prease mark next coummit.</li> <li>T for therapy-specific</li> <li>G for general/other</li> </ul>	1/G	What I learned from this activity		How this learning has benefitted my practice	CPD Hours
			F	Total time	Total time spent on therapy–specific activities (T)	
			F	Total time	Total time spent on general/other activities (G)	
			F	Total time	Total time spent on CPD	

# APPENDIX B: COMPLETED SAMPLE OF CONTINUING PROFESSIONAL DEVELOPMENT (CPD) LOG SHEET

Continuing Professional Development (CPD) Log Sheet

4	3	1	
X	3		*
E		9	
	SE	G.	7

NAME: A. N. Other	l. Other		LISTED THERAPIES: Remedial & Sports N	LISTED THERAPIES: Remedial & Sports Massage, Swedish Massage, Indian Head Massage	
MEMBERSH	MEMBERSHIP No: 9999				
Date of	Activity Please mark next column:		Refle	Reflective practice:	Number of
CPD activity	T for therapy-specific     G for general/other	T/G	What I learned from this activity	How this learning has benefitted my practice	CPD Hours
20/08/13	Marketing seminar	U	I learned more ways that I can market my practice effectively and safely through the use of social media.	I have set up a business page on Facebook and Twitter, ensuring that it is separate from my personal page so as to maintain the necessary boundaries. Through this I have engaged with other therapists in the area and we have set up a Therapy/Technique exchange group. I have also had four new clients as a result.	2.5
31/09/13	Therapy/Technique Exchange Group meeting	H	I learned how to fine-tune some client stretches that I had been struggling with, and that I had some good ideas for using MET with difficult clients.	Meeting with other therapists gave me the so opportunity to discuss techniques that I found tricky and get their feedback and approaches so that I could incorporate their ideas into my practice. I also gained more confidence in what I was doing in my practice through my ability to help them too.	7
07/02/14	Reading 'On The Massage Scene' issue 56	T/G	I learned what Clinical Orthopedic Massage Therapy (COMT) was about. I learned the importance of protecting my financial liabilities. I also learned about another therapist's approach to massaging amputees.	After reading about COMT I booked onto this year's Conference as I felt that learning these techniques would be of benefit to my practice. I realised the importance of Income Protection for my business. I was able to use some of the ideas for working with a client who had a below the knee amputation.	0.5/0.5
29/03/14	SMTO Conference 2014: Clinical Orthopedic Massage Therapy (COMT): Neck with Dr Joe Muscolino	F	I learned techniques which have built on my original training and have developed my understanding of how I can use COMT Neck techniques in my practice.	I have been able to incorporate the techniques that I learned into my treatments to the extent that I now feel confident to know when to use them for the benefit of my clients. As a result I feel I have enhanced my treatments and am able to offer a better service to my clients.	14
			Total tir	Total time spent on therapy–specific activities (T)	16.5
			Total tir	Total time spent on general/other activities (G)	3
			Total tir	Total time spent on CPD	19.5

# APPENDIX C: FREQUENTLY ASKED QUESTIONS (FAQs)

#### 1. Q: What is the definition of 'practising'?

A: Practising: means working in any capacity (remunerated or voluntary) on the basis of your professional qualification; it includes teaching.

#### 2. Q: Do I have to do SMTO affiliated/approved courses/activities?

A: No, you are free to choose whatever meets your particular needs at any given time. However, courses must be affiliated/approved for you to add the technique to your SMTO Directory listing.

#### 3. Q: What counts as Therapy-specific (T) CPD?

A: <u>Professional Development – Type I</u> Conference Seminar Therapy course Workshop *e.g. new skill, refresher, one with peers* 

<u>Professional Development – Type III</u> Anatomy lecture Pathology lecture Practical teaching assistant Tutorial/lecture preparation (*first time only*) <u>Professional Development – Type II</u> Article published Book report Journal entries Research

#### 4. Q: What counts as General/Other CPD?

A: <u>Practice Management</u> Accountancy course Communication skills Tax course Time management

> Personal Development Coaching / mentoring Counselling Self-awareness class Stress Management

Business Promotion Business plan Shows Talks TV/radio interviews

<u>Miscellaneous</u> Meetings attended, *e.g. SMTO, GCMT* Research questionnaire completed Sub-committee member Team working

#### 5. Q: What if I want to do something that isn't mentioned here?

A: That's fine as long as you can justify why you chose it.

#### 6. Q: I only work a few hours each week, do I still have to meet all the requirements?

- A: Yes, you need to keep up to date regardless of the hours you work
- 7. Q: Can I count my hours over three years instead of one year if I am doing a longer period of study, or want to take time off for maternity leave?
  - A: Yes, it is possible for members to carry forward practical CPD hours for a maximum period of 3 years, thereafter they will expire.

#### 8. Q: What happens if I can't be bothered to meet by CPD requirements?

A: You will be unable to renew your SMTO membership. Please note, if you falsify your records in any way you may find yourself subject to an allegation of professional misconduct.

#### 9. Q: Can I get any financial help in order to meet the SMTO CPD requirements?

A: Unfortunately, the SMTO has no funding for this purpose.