

## RMTAO AGM 2023 Questions

- 1) In the Friday File, December 9<sup>th</sup>, 2022 edition, M. Feraday reported, “I met with MPP France Gelinas, the NDP Health and Long-Term Care Critic. Gelinas will be following up on our behalf after our upcoming meeting with Nadia Surani, Director of Primary Health Care at the Ministry of Health. I also had positive meetings with the Minister of Children, Community and Social Services, Merrilee Fullerton; staff of the Minister for Seniors and Accessibility, as well as MPP Mary-Margaret McMahon and MPP Chris Glover. We are gaining support for our advocacy effort with the Ministry of Health from all these MPPs.”

Questions: What support, specifically and tangibly, are you asking from these MPPs? If the MPPs granted your ask, what would tangibly change for RMTs in practice?

- 2) In the 2021-2022 RMTAO Strategic Plan Summary <https://rmtao.com/about-rmtao/our-goals>, one of the six objectives is “The profession of massage therapy participates in integrated team-oriented healthcare to achieve the best possible treatment outcomes for the patient.” The RMTAO has promoted the inclusion of RMTs on teams in healthcare settings in a variety of its messaging in most recent years. Yet we must consider serious barriers to inclusion: 1) education streams separate from gatekeeper health disciplines (MDs, RNPs, and increasingly DPharm and physiotherapists); 2) integrating health services endorsed by government/covered by provincial health insurance with services not covered 3) slow progression of research literacy and capacity in the profession; and 4) shifting our profession’s cultural thinking from sole practitioner practice to multi-discipline team settings with increased regulatory structure, among other barriers.

Questions: What do you believe RMTs and their representative must do to qualify for such an integration?

- 3) In the 2022 RMTAO membership survey, under “resources”, additional requests from members include: regular updates on advocacy efforts (specifically HST); more posters, videos and shareable social media resources; access to research database and assistance with research analysis; editable social media templates; information re: prepping for retirement, assistance with peer assessments, raising RMT profile in medical community and mental health resources; information re: accounting, tax filing and audits; printed materials re: evidence basis for massage therapy; webinars demonstrating hands-on techniques; access to prior webinars; an explanation of how fees listed in the Services and Fees Guideline are calculated.

Question: Will the RMTAO address these requests in future plans?

- 4) Follow up re: 2022 membership survey, re: Community-Based Networks (CBNs). Fifty-seven percent of RMTs completing the survey reported they were unaware of these essential hubs of collegial support.

Questions: What has the RMTAO done this year to raise the profile of CBN’s, and to train CBN leaders in meeting facilitation and promotion? How has the RMTAO used CBNs as a direct source of two-way communication and interaction with its membership? What are the

RMTAO's plans for further strengthening CBNs?

- 5) In 2019 the Ontario regulator halted its funding of the Massage Therapy Research Fund. Despite a stated objective by all stakeholders – the regulator, the representative and the training schools – towards research literacy and capacity, it appears there is no concerted effort to fund this objective.

Question: Is the RMTAO in discussions with the regulator to resurrect the Massage Therapy Research Fund? If not, what conversations are the stakeholders having in ensuring the proper funding of research in massage therapy?

- 6) What are the RMTAO's specific plans to increase member engagement and dialogue? What are the RMTAO's intentions to increase available data and statistics re: RMTs and their practices?
- 7) What is the RMTAO doing to advocate for populations who would benefit from massage therapy care, but don't access due to financing or other barriers?
- 8) What does the RMTAO do for entry-level practitioners – besides hosting documents of the Resource section of the website – to properly mentor and ensure knowledge-transfer of best practices to these fledgling practitioners?
- 9) What variables does the RMTAO Board use in measuring influences on RMT practice – particularly government, insurers, gatekeeper health disciplines and public perception/media – and for forecasting to effectively prepare RMTs for the future?

### **RMTAO AGM 2022 Questions**

- 1) On the RMTAO website "Our Actions" page, correspondence was initiated to Ontario Premier Doug Ford, Ontario Liberal Leader Steven Del Duca, and NDP Leader Andrea Horvath re: integrating massage therapists cohesively into the health care system. Question: Have you received a response from these government representatives, and if so, what was the response?
- 2) According to the RMTAO membership benefits survey, early 2021 <https://rmtao.com/member-survey-results-2021> a number of resources to "add or improve" were listed. Outside of the diagram below, support for Community Based Networks (CBNs) was also mentioned.

Question: what are the RMTAO's plans to tangibly address these asked-for resources in the next 2 years?

- 3) from the 2021 RMTAO Annual Report, page 14, "Continued involvement in the Coalition of Health Professional Associations in Ontario Automobile Insurance Services (the "Coalition") to advocate for issues of mutual concern including inadequacy of fees, audits, delisting and shadow regulation, and insurers entering into the business of healthcare delivery."

Question: how are insurers entering into the business of healthcare delivery, and what are the implications for RMTs and their patients?

- 4) from the RMTAO 2021 financial statements, there's a massive shift under "Expenses" and "Membership" from \$113,162 to \$2,588.

Question: What is the function of expenses under "membership" and what is the impact on RMTAO members when investment is low in this area?

- 5) There is a drop in membership numbers from 2020 to 2021. The 2020 report showcases a steady climb to 6611, then a drop this year to 6429 (active members, those actually endorsing the professional representative with membership dollars, is 6130 members). Questions: a) While the CMTO 2020 annual report demonstrates a rise to 14,835 RMTs in Ontario, there doesn't appear to be a subsequent rise in RMTAO membership in 2021. Of course retirement and other factors play on the numbers and we'd need more specific data to discern who's left the RMTAO and why.

Questions: What are your thoughts on the decline in membership? b) Are the numbers represented in the 2020 RMTAO report shown as active members, or total membership?



- 6) (graph from 2021 RMTAO membership satisfaction survey)  
Question: What tangible steps will the RMTAO take over the next 2 years to help RMTAO members address the biggest practice-related issues they face?

- 7) The Canadian Massage Therapist Alliance has changed its identity to an "association". <https://crmta.ca/cmta-now-canadian-massage-therapist-association/> What are the implications of this change (perhaps a change in role and

scope?) for RMTAO members?

## RMTAO AGM 2021 Questions

See petition with questions and full context. <http://dondillon-rmt.com/petition-rmtao/>

## RMTAO AGM 2020 Questions

- 1) In November 2018 the RMTAO conducted a number of meetings with MPPs and senior policy analysts at Queen's Park to forward the interests of massage therapists in Ontario. What was the outcome of the meetings, and tangibly, what relationships have been established to move our interests forward?"
- 2) We understand the Canadian Massage Therapist Alliance (CMTA) is primarily focused on HST deregistration. As a coalition for all the provincial RMT associations, can the CMTA also put resources towards advocacy in government relations, insurer relations, gatekeeper HCP relations and public/media relations across Canada? Such a combined effort would pool successes from each province, prevent duplication and more effectively allocate resources.
- 3) I'm very concerned re: the strained relations massage therapists have with insurers. Greenshield Canada - and presumably all other insurers - are asking for the following:
  - Insurers acknowledge MT provides short-term pain relief. They want comparative studies to demonstrate efficacy as compared to exercise, a yoga class, mindfulness practice or "a nap".
  - Insurers are skeptical of a broad scope of practice not linked directly to evidence or measured outcomes. They want treatment guidelines that estimate costs of treatment plans and deliver tangible benefits to claimants.
  - Insurers demand claimed services are evidence-based and demonstrate efficacy.
  - Insurers imply claims reimbursement can contribute to exploitive business models geared to maximizing financial gain rather than better health outcomes. They want measures taken against fraud and exploitation

My question(s): a) What steps are being taken by the RMTAO and CMTA to address insurer concerns? b) What, specifically, have been the outcomes when RMTAO/CMTA reps have met with Canadian Health and Life Insurance Association (CHLIA)?

- 4) I need help educating the public on massage therapy. I'd like to access a wide variety of media – stock photos, short animations and videos. The infographics provided by the RMTAO is a good start, and I would be happy to pay for effective education media. The RMTAO could scale costs by creating it centrally, and make it available to all members at a reasonable cost. Perhaps members could also pitch in for public advertising campaigns, like the bus campaign in BC and MB. My question, will the RMTAO make available more media to help members educate the public at the grassroots level?