

Academic Collaborative for Integrative Health (ACIH)
Hospital Based Massage Therapy (HBMT)
Competencies for Optimal Practice in Integrated Environments

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Background and Context

An estimated 250 hospitals in the United States offer some form of massage therapy service for in-patients. In the past, nurses were trained in providing massage (back rubs) routinely to in-patients. Recognized training, protocols and competencies for massage existed for nurses as early as the turn of the last century. When nursing was no longer able to provide the service, mostly due to increased responsibilities, massage was often abandoned. A few hospitals however, reinstated the service with dedicated practitioners who were either RNs or Massage Therapists (MTs). Some hospitals added training programs and created standards of practice, protocols and competencies. To date, there has not been a field-wide standard of practice. A notable exception was the Hospital Based Massage Network (<http://www.hbmn.com>) which collected and published directories of services, research and resources from the mid-1990's through 2005. This information is still available but has not been updated.

In 2012, the Hospital Based Massage Therapy task force (HBMT-TF) formed within the Academic Collaborative for Integrative Health (ACIH, formerly known as the Academic Consortium for Complementary and Alternative Health Care) to explore the need for a set of standards or competencies, gather information about current standards for the field, and possibly develop HBMT specific competencies that could be shared with all interested parties, particularly hospitals, massage therapy educators and massage therapists in the field. HBMT-TF membership consisted of MK Brennan, RN, LMT (ACIH CWG member), Dale Healey, DC, PhD (ACIH EWG co-chair), Carolyn Tague, MA, CMT (ACIH EWG member), Beth Rosenthal, PhD, MBA, MPH (ACIH Assistant Director).

The HBMT-TF created an online survey which was sent to 37 HBMT programs (March 2013) to assess the need for competencies and gather baseline information about HBMT programs. This initial look at HBMT programs offered across the US confirmed that services were being provided to hospital patients, family, and/or staff with a tremendous amount of variation in delivery and practice standards. Along with the variations in who receives a massage and the employment status of the massage therapists, there clearly was not a set standard of competencies across the board for the massage therapists. More detail about the survey is available here: <https://www.massagemag.com/hospital-based-massage-therapy-call-competencies-37084/>

The work on HBMT specific competencies drew from survey results and work previously done by ACIH in identifying Competencies for Optimal Practices in Integrated Environments (<https://integrativehealth.org/competencies-integrated-practices/>). The ACIH Competencies for Optimal Practices in Integrated Environments are "for collaborative efforts toward better patient care through enhancing mutual respect and understanding across healthcare professions". The set of HBMT specific competencies provided here include some of the ACIH Competencies most relevant to HBMT and additional competencies that specifically address practical issues relevant to HBMT practice. Where the ACIH Competencies are used verbatim, the competency field and number are given in parenthesis.

HBMT Competencies for Optimal Practice in Integrated Environments

HBMT Competency 1 – Hospital Environment (HE)

General Competency Statement: Work with patients, families, staff, and individuals of other professions to maintain a climate of mutual respect, shared values and safety within a hospital environment.

HE1 – Value and Ethics (VE) for Interprofessional Practice [ACIH COMPETENCY Field 1, Value and Ethics for Interprofessional Practice, includes all the sub-competencies below, VE1-VE11]. *General Competency Statement: Work with individuals of other professions to maintain a climate of mutual respect and shared values.*

- VE1. Place the interests of patients and populations at the center of interprofessional health care delivery.
- VE2. Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of team-based care.
- VE3. Embrace the cultural diversity and individual differences that characterize patients, populations, and the health care team.
- VE4. Respect the unique cultures, values, roles/responsibilities, and expertise of other health professions.
- VE5. Work in cooperation with those who receive care, those who provide care, and others who contribute to or support the delivery of prevention and health services.
- VE6. Develop a trusting relationship with patients, families, and other team members.
- VE7. Demonstrate high standards of ethical conduct and quality of care in one's contributions to team-based care.
- VE8. Manage ethical dilemmas specific to interprofessional patient/population centered care situations.
- VE9. Act with honesty and integrity in relationships with patients, families, and other team members.
- VE10. Maintain competence in one's own profession appropriate to scope of practice.
- VE11. Demonstrate personal behaviors and self-care practices that reflect optimal health and wellness.

HE2 – Demonstrate the ability to obtain information from patient charts and record documentation of assessment and treatment plan following hospital protocols and policies, including use of an Electronic Medical Record (EMR), if appropriate.

HE3 – Demonstrate a working knowledge of common medical terminology and efficient access to resources for unfamiliar terms.

HE4 – Communicate with hospital staff following the appropriate channels including reporting suspected patient abuse or non-compliance with care plan.

HE5 – Demonstrate knowledge of common medical devices and equipment such as foley catheters, central lines, PICC lines, mechanical ventilators, hospital beds.

HE6 – Demonstrate evidence informed decision making and knowledge of research involving massage therapy for patient populations served.

HE7 – Communicate one’s role and responsibilities clearly to patients, families, and other professionals. [ACIH Competency: RR1]

HE8 – Demonstrate knowledge and practice of infection control protocols including precautions used for patients, such as ‘droplet’ and ‘contact’ as well as use of personal protective equipment (PPE).

HE9 – Obtain and maintain necessary credentials and training that may be required such as CPR certification, NPI number, and TB screening.

HE10 – Explain the concept of informed consent, and be able to communicate the benefits and risks of care options. [ACIH Competency: IH7]

HBMT Competency 2 – Massage Protocols (MP)

General Competency Statement: Demonstrate understanding of massage protocols within a hospital environment.

MP 1 - Understand common medical conditions and symptoms and how they inform assessment and treatment plan of the massage session.

MP2 – Demonstrate ability to appropriately adjust massage techniques based on the patient’s medical diagnosis and condition, including psycho/social condition. Treatment adjustments include pressure, positioning, site, pacing, duration and dosing.

MP3 – Understand indications, contraindications and precautions for massage therapy including infection control measures, health risk factors based on patient’s presenting condition(s), and practitioner’s safety needs.

MP4 – Demonstrate ability to provide massage therapy around hospital equipment such as hospital beds, wheelchairs, and infusion chairs.

MP5 - Recognize one’s limitations in skills, knowledge, and abilities. [ACIH Competency: RR2]

MP6 - Demonstrate correct body mechanics for the hospital environment.

HBMT Competency 3 – Therapeutic Presence (TP)

General Competency Statement: Demonstrate therapeutic presence within a hospital environment.

TP1 - Express one's knowledge and opinions to team members involved in patient care with confidence, clarity, and respect, working to ensure common understanding of information and treatment and care decisions. [ACIH Competency: CC3]

TP2 - Recognize how one's own uniqueness, including experience level, expertise, culture, power, and hierarchy within the healthcare team, contributes to effective communication, conflict resolution, and positive interprofessional working relationships (University of Toronto, 2008), [ACIH Competency: CC7]

TP3 - Identify signs of patient stress, anxiety, pain, grief and/or trauma.

TP4 - Demonstrate an ability for "holding space" for patients, which does not attempt to cure or fix any conditions. Appropriately maintains "scope of practice" boundaries.

TP5 - Describe appropriate boundaries for both therapist-patient and therapist-hospital staff interactions.

TP6 - Maintain a routine of self-care practices including the ability to maintain a professional demeanor while in the presence of potentially emotionally challenging situations and/or circumstances.