

Virginia Board of Nursing – Massage Therapy Advisory Board

Instructions for Accessing November 2, 2020 at 2:00 P.M.

Virtual Business Meeting/Public Hearing and Providing Public Comment

- ❖ **Access:** Perimeter Center building access remains restricted to the public due to the COVID-19 pandemic. To observe this virtual meeting, use one of the options below. Participation capacity is limited and is on a first come, first serve basis due to the capacity of CISCO WebEx technology.
- ❖ **Public comment:** Comments will be received during the public hearings and during the board meeting from those persons who have submitted an email to: MassageTherapy@dhp.virginia.gov no later than 12:00 P.M. (noon) on November 2, 2020 indicating that they wish to offer comment. Be sure to specify if the comment is associated with the public hearing or the board meeting. Comment may be offered by these individuals when their names are announced by the chairman.
- ❖ Public participation connections will be muted following the public comment periods.
- ❖ Should the Board enter into a closed session, public participants will be blocked from seeing or hearing the discussion. When the Board re-enters into open session, public participation connections to see and hear the discussions will be restored.
- ❖ Please call from a location without background noise.
- ❖ Dial (804) 367-4670 to report an interruption during the broadcast.
- ❖ FOIA Council *Electronic Meetings Public Comment* form for submitted feedback on this electronic meeting may be accessed at:
<http://foiacouncil.dls.virginia.gov/sample%20letters/welcome.htm>.

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Meeting number (access code): 171 921 3485

- ***Please note: Type your real name upon entering the meeting. **Do not enter the meeting using the default username.** It is imperative that the meeting organizer be able to determine who is attending.***

Virginia Board of Nursing Massage Therapy Advisory Board

Monday, November 2, 2020
2:00 P.M. – VIRTUAL Meeting
Department of Health Professions
9960 Mayland Drive, Suite 201
Henrico, VA 23233

Agenda

- I. **Call to Order:** Dawn M. Hogue, L.M.T., Chair
- II. **Establishment of a Quorum**
- III. **Announcements**
 - New Advisory Board Members:
 - Shawnté L. Peterson, L.M.T.
 - Erin C. Osiol, L.M.T.
 - María Mercedes Olivieri, L.M.T.
 - Kristina Page, L.M.T., Resigned Effective February 3, 2020
- IV. **Old Business**
 - Review & approval of minutes from May 29, 2019 meeting
 - Federation of State Massage Therapy Boards (FSMTB) Massage Therapy Licensing Database (MTLD)
- V. **Public Comment/Open Forum**
- VI. **New Business**
 - Election of Officers – Ms. Hogue
 - December 2020 & 2021 Informal Conference Schedule (Jan - June) / 2021 Formal Hearing Schedule – Ms. Ridout
 - 2020 Virginia General Assembly – Chapter 727 (HB 1121), Effective July 1, 2020
 - Review of Guidance Document 90-59, Impact of Criminal Convictions on Licensure of Massage Therapists and Registration of Medication Aides, adopted May, 2010, reviewed December 2016
 - Scope of Practice
 - Department of Health Professions COVID-19 Response: Extension of Continuing Competency Requirements and Renewal Late Fees
 - Cedar Stone School of Massage Therapy – NCBTMB Certification Exam vs. MBLEx
 - Eastern Virginia Community College – Hourly Requirements
- VII. **Reports**
 - L.M.T. Discipline Case Report – Ms. Ridout
 - L.M.T. Licensure Report – Ms. Hanchey
 - Report on FSMTB Event September 17, 2020 – Sexual Misconduct Allegations Within Massage Therapy: An informed approach to protect both clients and practitioners by Michael Vogel, PsyD, ABPP – Ms. Hanchey

VIII. Information Only (No Action Required)

- FSMTB 2019 Annual Report - https://www.fsmtb.org/media/2021/fsmtb-2019-annual-report_web.pdf
- FSMTB 2020 Annual Report - <https://www.fsmtb.org/media/2407/fsmtb2020annual-report.pdf>
- FSMTB 2020 Annual Meeting Board of Directors Election Results
- FSMTB In Touch Newsletters
 - Introducing the MBLEx Check!
 - FSMTB Launches REACH
- FSMTB COVID-19 Guidelines
- “Behind Illicit Massage Parlors Lie a Vast Crime Network and Modern Indentured Servitude,” *The New York Times*, March 2, 2019

IX. Discussion for Future Meetings

X. Adjournment of Meeting

**VIRGINIA BOARD OF NURSING
MASSAGE THERAPY ADVISORY BOARD
MINUTES**

Wednesday, May 29, 2019

- TIME AND PLACE:** The meeting of the of the Massage Therapy Advisory Board convened at 10:00 a.m. in Training Room 1, Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia.
- PRESIDING:** Dawn Hogue, L.M.T., Chair
- MEMBERS PRESENT:** Dawn Hogue, L.M.T., Chair
Stephanie Quinby, L.M.T., Vice-Chair
Joseph L. Schibner, IV, L.M.T., L.Ac. D.O.M.
Jermaine Mincey, Citizen Member
- MEMBERS ABSENT:** Kristina Page, L.M.T.
- STAFF PRESENT:** Jay P. Douglas, R.N., M.S.M., C.S.A.C., F.R.E., Executive Director
Charlette N. Ridout, R.N., M.S., C.N.E., Deputy Executive Director
Elaine Yeatts, Senior Policy Analyst, Department of Health Professions
Cathy Hanchey, Administrative Specialist
- IN THE AUDIENCE:** Becky Bowers-Lanier, American Massage Therapy Association-VA Chapter
Jerry J. Gentile, Virginia Department of Planning & Budget
- CALL TO ORDER:** Ms. Hogue called the business meeting to order at 10:00 a.m., noting that a quorum was established.
- OLD BUSINESS:** Dr. Schibner requested that the Board discuss Thai Yoga Massage further at this meeting. Ms. Hogue recommended that the discussion concerning the Federation of State Massage Therapy Boards' Massage Therapy Licensing Database take place in open session and that Dr. Schibner's request for Thai Yoga Massage be taken up at this meeting. The Agenda as revised was adopted.
- An overview was done of the minutes from the last Massage Therapy Advisory Board meeting held on November 5, 2018. Dr. Schibner moved that the minutes from the November 5, 2018 meeting be approved. The motion was seconded by Ms. Quinby and carried unanimously.
- PUBLIC COMMENT:** Ms. Bowers-Lanier stated that the Virginia Chapter of the American Massage Therapy Association had no public comment at this time.
- NEW BUSINESS:** Ms. Hogue announced that Dr. Schibner and Ms. Quinby's terms expire June 30, 2019, and thanked them for their service. Ms. Douglas advised that she has spoken with the office for the Secretary of Health and Human Resources concerning the necessity for filling the positions. Additionally, Ms. Douglas reminded Ms. Quinby that she is a member of the Advisory Board until her position has been filled. Ms.

Quinby agreed. There is an online application process available for interested persons.

Elections were made for a Vice-Chair for the Advisory Board on Massage Therapy. Ms. Quinby made a motion to nominate Mr. Mincey as Vice-Chair. The motion was seconded by Dr. Schibner and carried unanimously.

Ms. Ridout reviewed the Informal Conference and Formal Hearing schedule for July – December 2019. Ms. Hogue agreed to share her availability upon return to her office, and Board Staff agreed to check with Ms. Page concerning her availability. Ms. Hogue confirmed her availability for the July 2019 Formal Hearings as previously scheduled.

Ms. Ridout presented information to the Advisory Board concerning recent developments and challenges to 18VAC90-50-40 A 2 of the Regulations Governing the Licensure of Massage Therapists for applicants who pass the Massage & Bodywork Licensing Exam (MBLEx) but have not completed or graduated from an approved massage therapy program. MBLEx applicants do not need to graduate from a massage therapy education program prior to applying for the MBLEx, but they are required to verify that they have education and training in the content areas. Discussion focused on public safety, schools providing training in all areas, benchmarks for graduation rates, and importance of clinical experience. Ms. Yeatts advised that lay midwives are the only Department of Health Professions' (DHP) discipline that does not have an educational requirement. Completion of a program is required for all other DHP practitioners. Ms. Quinby moved to recommend a legislative change to § 54.1-3029 A 2 of the Code of Virginia to read as follows: “Has successfully completed a ~~minimum of 500 hours of training from a massage therapy program,~~ consisting of a minimum of 500 hours, certified or approved by the State Council of Higher Education or an agency in another state, ...” The motion was seconded by Dr. Schibner and carried unanimously.

RECESS: The Advisory Board recessed at 10:25 A.M.

RECONVENTION: The Advisory Board reconvened at 10:50 A.M.

NEW BUSINESS (con't.): Ms. Ridout reminded the Advisory Board that provisional licensure under 18VAC90-50-60 of the Regulations Governing the Licensure of Massage Therapists is not automatic. An applicant must request provisional licensure from the Board of Nursing in writing.

Ms. Hanchey noted that the Board of Nursing's web site was recently updated to be more “user-friendly” and specifically addressed the Frequently Asked Questions (FAQs). The Advisory Board suggested revising the answer for “Does Virginia offer provisional licensure for massage therapists?” to “Provisional licensure is available upon request to an eligible candidate who has filed a completed application ...”

Ms. Ridout advised that for the January – May 2019 time period, serious sexual boundary cases have doubled when compared to the same time period for 2017 and 2018. Many of these cases also result in criminal action. Ms. Quinby noted that the Sanction Reference Points (SRPs) for massage therapist cases should be re-evaluated, and Ms. Douglas advised that the SRPs are potentially under review for 2020. Additional discussion concerning the types of consumer information available through professional organizations was conducted, noting that information is primarily limited to how to find a massage therapist versus what to expect from a practitioner. Dr. Schibner also noted that enrollment in massage therapy classes has been greatly reduced. A request was made to continue reviewing the number of massage therapists who are licensed each year.

Ms. Hanchey presented a brief synopsis of the Federation of State Massage Therapy Boards' (FSMTB) Massage Therapy Licensing Database (MTLD) and provided answers to questions addressed at the previous Advisory Board meeting as follows:

- There are no additional fees for using MTLT. There may be in-house costs and staff time associated with developing the way information is uploaded, but no charges for the software or templates used.
- There is no public access to MTLT. If an applicant were to challenge the information obtained from MTLT, they would be able to address any inconsistencies or errors through the disciplinary process.
- Each participating state will have access to its own secure FTP site. Virginia's information would not be able to be "overwritten" by another state's information.
- There are currently six states that have signed Memorandums and are considered participating states.

Dr. Schibner moved to recommend that the Virginia Board of Nursing execute the Memorandum with FSMTB to participate fully in the MTLT. The motion was seconded by Ms. Quinby and carried unanimously.

Dr. Schibner requested discussion concerning Thai Yoga Massage. This is physically manipulating the body, soft tissues, pushing the body, and stretching. Ms. Douglas reminded the Advisory Board that it does not provide a laundry list of therapies and looks to the facts of the situation for cases. The concern is that schools may be teaching Thai Yoga Massage, but it does not fall under the massage therapy program and instructors are not letting students know they need to be licensed. Yoga schools are exempt from oversight by the State Council of Higher Education for Virginia (SCHEV), but the Virginia Board of Nursing could have discussion with SCHEV that if schools are teaching Thai Yoga Massage, they will need to meet the industry standard.

REPORTS:

Ms. Hanchey provided an oral report re-capping the FSMTB Third Annual Member Board Executive Summit held in Cleveland, Ohio on April 18-19, 2019.

- FSMTB is available to attend states' Board meetings to discuss the benefits of FSMTB membership at no charge to the inviting state.
- FSMTB's Regulatory Education and Competence Hub (REACH) is an online education center. Virginia may be able to refer respondents to FSMTB to meet specific education requirements.

- Tennessee performed a 100% audit of continuing education requirements and found that 83-87% of licensees were noncompliant.
- There is pending federal litigation about offering the MBLEx in Mandarin Chinese.
- MBLEx application fees will be \$260 effective April 1, 2020.
- There is a current trend toward deregulation; however, in the biggest deregulatory state of Colorado, none of the professions were in the medical field.
- MBLEx security discussion focused on item harvesting, identity fraud, human trafficking, and training centers. FSMTB will investigate if the state thinks there is an issue, and may result in MBLEx score invalidation.
- California is no longer requiring the MBLEx, but they may come back to it after two years.

INFORMATION ONLY: Ms. Hanchey reiterated that applications for initial licensure are exclusively accepted online. Paper applications are only available for applicants whose first application expired before completion. Reinstatement applications may be requested from the Board, and new versions will be posted to the web site shortly.

DISCUSSION OF FUTURE MEETINGS: Board staff will coordinate with the Advisory Board on Massage Therapy members on availability for a meeting in the spring 2020.

ADJOURNMENT: Dr. Schibner made a motion to conclude the meeting. The motion was seconded by Mr. Mincey and carried unanimously. The meeting was adjourned at 12:05 p.m.

Charlette N. Ridout, R.N., M.S., C.N.E.
Executive Director

LMT ADVISORY BOARD MEMBERS
NEEDS FOR IFC & FH COVERAGE

2021

Informal conferences (IFCs) Dates for January – June, 2021

IFC dates that we will need an LMT advisory board member to be on the committee:

- *TBD*

It could be no cases, 1 or 2 cases, or a full day of cases.

Normally it is only for morning cases (4 or 5 cases), so you would only be here 9:00 am until 12:00 noon, or 1:00 pm.

Occasionally, we will have LMT cases scheduled all day, but it is rare.

No matter how many cases, you could still get a free lunch!

Please look at your calendar and let me know if you are available on any one of these dates.

Formal Hearings (FHs) Dates for 2021

FH dates that we may need an LMT advisory board member on the panel:

- *January 25-28, 2021*
- *March 22-25, 2021*
- *May 17-20, 2021*
- *July 19-22, 2021*
- *September 13-16, 2021*
- *November 15-18, 2021*

To be scheduled for a formal hearing, it would be (1) certain reinstatements; (2) appealing an IFC decision; (3) not signing a consent order that is offered at an IFC. If #2 or #3, it could not be the same LMT person that was on the committee for the IFC as you would be conflicted with the case. So, please look at dates and consider when you may or may not be available, but it will depend on who and why the FH is scheduled, and we will have to ask on a case-by-case basis.

VIRGINIA ACTS OF ASSEMBLY -- 2020 SESSION

CHAPTER 727

An Act to amend and reenact § 54.1-3029 of the Code of Virginia, relating to massage therapists; qualifications; license.

[H 1121]

Approved April 6, 2020

Be it enacted by the General Assembly of Virginia:

1. That § 54.1-3029 of the Code of Virginia is amended and reenacted as follows:

§ 54.1-3029. Qualifications for a licensed massage therapist.

A. In order to be licensed as a massage therapist, the applicant shall furnish evidence satisfactory to the Board that the applicant:

1. Is at least 18 years old;

2. Has successfully completed a ~~minimum of 500 hours of training from~~ a massage therapy educational program, ~~that required a minimum of 500 hours of training.~~ *The massage therapy educational program shall be certified or approved by the State Council of Higher Education for Virginia or an agency in another state, the District of Columbia, or a United States territory that approves educational programs, notwithstanding the provisions of § 23.1-226;*

3. Has passed the Licensing Examination of the Federation of State Massage Therapy Boards or an examination deemed acceptable to the Board of Nursing; and

4. Has not committed any acts or omissions that would be grounds for disciplinary action or denial of licensure as set forth in this chapter.

B. The Board may issue a provisional license to an applicant prior to passing the Licensing Examination of the Federation of State Massage Therapy Boards for such time and in such manner as prescribed by the Board. No more than one provisional license shall be issued to any applicant.

C. The Board may license without examination any applicant who is licensed as a massage therapist in another state, the District of Columbia, a United States possession or territory, or another country, and, in the opinion of the Board, meets the requirements for licensed massage therapists in the Commonwealth.

D. *An applicant who completed a massage therapy educational program in a foreign country may apply for licensure as a massage therapist upon submission of evidence, satisfactory to the Board, that the applicant:*

1. Is at least 18 years old;

2. Has successfully completed a massage therapy educational program in a foreign country that is comparable to a massage therapy educational program required for licensure by the Board as demonstrated by submission of evidence of comparability and equivalency provided by an agency that evaluates credentials for persons who have studied outside the United States;

3. Has passed a Board-approved English language proficiency examination; and

4. Has not committed any acts or omissions that would be grounds for disciplinary action or denial of licensure as set forth in this chapter.

The Board shall issue a license to an applicant who meets the requirements in this subsection upon submission by the applicant of evidence satisfactory to the Board that the applicant has completed an English version of the Licensing Examination of the Federation of State Massage Therapy Boards or a comparable examination deemed acceptable to the Board.

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3. Has passed the Licensing Examination of the Federation of State Massage Therapy Boards or an examination deemed acceptable to the Board of Nursing; and
4. Has not committed any acts or omissions that would be grounds for disciplinary action or denial of licensure as set forth in this chapter.

B. The Board may issue a provisional license to an applicant prior to passing the Licensing Examination of the Federation of State Massage Therapy Boards for such time and in such manner as prescribed by the Board. No more than one provisional license shall be issued to any applicant.

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D. An applicant who completed a massage therapy educational program in a foreign country may apply for licensure as a massage therapist upon submission of evidence, satisfactory to the Board, that the applicant:

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2. Has successfully completed a massage therapy educational program in a foreign country that is comparable to a massage therapy educational program required for licensure by the Board as demonstrated by submission of evidence of comparability and equivalency provided by an agency that evaluates credentials for persons who have studied outside the United States;
3. Has passed a Board-approved English language proficiency examination; and
4. Has not committed any acts or omissions that would be grounds for disciplinary action or denial of licensure as set forth in this chapter.

The Board shall issue a license to an applicant who meets the requirements in this subsection upon submission by the applicant of evidence satisfactory to the Board that the applicant has completed an English version of the Licensing Examination of the Federation of State Massage

Therapy Boards or a comparable examination deemed acceptable to the Board.

1996, c. 166;1997, c. 599;2004, c. 991;2012, c. 764;2016, c. 324;2020, c. 727.

The chapters of the acts of assembly referenced in the historical citation at the end of this section may not constitute a comprehensive list of such chapters and may exclude chapters whose provisions have expired.

Commonwealth of Virginia



REGULATIONS
GOVERNING THE LICENSURE OF
MASSAGE THERAPISTS

VIRGINIA BOARD OF NURSING

Title of Regulations: 18 VAC 90-50-10 et seq.

Statutory Authority: §§ 54.1-2400 and Chapter 30 of Title 54.1
of the *Code of Virginia*

Revised Date: September 30, 2020

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Part I. General Provisions.

18VAC90-50-10. Definitions.

A. The following words and terms when used in this chapter shall have the meanings ascribed to them in § 54.1-3000 of the Code of Virginia:

"Board"

"Massage therapist"

"Massage therapy"

B. The following word when used in this chapter shall have the following meaning unless the context clearly indicates otherwise:

"NCBTMB" means the National Certification Board for Therapeutic Massage and Bodywork.

18VAC90-50-20. Operational requirements.

A. Requirements for current mailing address.

1. Each applicant or licensee shall maintain a current address of record with the board. Any change in the address of record or the public address, if different from the address of record, shall be submitted electronically or in writing to the board within 30 days of such change.
2. All required notices mailed by the board to any applicant or licensee shall be validly given when mailed to the latest address of record on file with the board.

B. A licensee who has had a change of name shall submit as legal proof to the board a copy of the marriage certificate, a certificate of naturalization, or a court order evidencing the change. A duplicate license shall be issued by the board upon receipt of such evidence and the required fee.

C. Each licensed massage therapist shall conspicuously post his current Virginia license in a public area at his practice location.

18VAC90-50-30. Fees.

A. Fees listed in this section shall be payable to the Treasurer of Virginia and shall not be refunded unless otherwise provided.

B. Fees required by the board are:

- | | |
|---|-------|
| 1. Application and initial licensure | \$140 |
| 2. Biennial renewal | \$95 |
| 3. Late renewal | \$30 |
| 4. Reinstatement of licensure | \$150 |
| 5. Reinstatement after suspension or revocation | \$200 |

6. Duplicate license	\$15
7. Replacement wall certificate	\$25
8. Verification of licensure	\$35
9. Transcript of all or part of applicant/licensee records	\$35
10. Handling fee for returned check or dishonored credit card or debit card	\$50

C. For renewal of licensure from July 1, 2017 through June 30, 2019, the following fee shall be in effect:

Biennial renewal	\$71
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Part II. Requirements for Certification.

18VAC90-50-40. Initial licensure.

A. An applicant seeking initial licensure shall submit a completed application and required fee and verification of meeting the requirements of § 54.1-3029 A of the Code of Virginia as follows:

1. Is at least 18 years old;
2. Has successfully completed a massage therapy educational program that required a minimum of 500 hours of training. The massage therapy educational program shall be certified or approved by the State Council of Higher Education for Virginia or an agency in another state, the District of Columbia, or a United States territory that approves educational programs, notwithstanding the provisions of § 23.1-226 of the Code of Virginia;
3. Has passed the Licensing Examination of the Federation of State Massage Therapy Boards, or an exam deemed acceptable to the board;
4. Has not committed any acts or omissions that would be grounds for disciplinary action or denial of certification as set forth in § 54.1-3007 of the Code of Virginia and 18VAC90-50-90; and
5. Has completed a criminal history background check as required by § 54.1-3005.1 of the Code of Virginia.

B. An applicant shall attest that he has read and will comply with laws and regulations and the professional code of ethics relating to massage therapy.

C. An applicant who completed a massage therapy educational program in a foreign country may apply for licensure as a massage therapist upon submission of evidence satisfactory to the board that the applicant:

1. Is at least 18 years old;
2. Has successfully completed a massage therapy educational program in a foreign country that is comparable to a massage therapy educational program required for licensure by the

board as demonstrated by submission of evidence of comparability and equivalency provided by an agency that evaluates credentials for persons who have studied outside the United States;

3. Has passed a board-approved English language proficiency examination; and

4. Has not committed any acts or omissions that would be grounds for disciplinary action or denial of licensure as set forth in Chapter 30 (§ 54.1-3000 et seq.) of Title 54.1 of the Code of Virginia.

The board shall issue a license to an applicant who meets the requirements in this subsection upon submission by the applicant of evidence satisfactory to the board that the applicant has completed an English version of the Licensing Examination of the Federation of State Massage Therapy Boards or a comparable examination deemed acceptable to the board.

18VAC90-50-50. Licensure by endorsement.

A. A massage therapist who has been licensed in another United States jurisdiction with requirements substantially equivalent to those stated in 18VAC90-50-40 and who is in good standing or is eligible for reinstatement, if lapsed, shall be eligible to apply for licensure by endorsement in Virginia.

B. An applicant for licensure by endorsement shall submit a completed application and required fee, including a criminal history background check as required by § 54.1-3005.1 of the Code of Virginia, to the board and shall submit the required form to the appropriate credentialing agency in the state of original licensure or certification for verification.

18VAC90-50-60. Provisional licensure.

A. An eligible candidate who has filed a completed application for licensure in Virginia, including completion of education requirements, may engage in the provisional practice of massage therapy in Virginia while waiting to take the licensing examination for a period not to exceed 90 days from the date on the written authorization from the board. A provisional license may be issued for one 90-day period and may not be renewed.

B. The designation of "massage therapist" or "licensed massage therapist" shall not be used by the applicant during the 90 days of provisional licensure.

C. An applicant who fails the licensing examination shall have his provisional licensure withdrawn upon the receipt of the examination results and shall not be eligible for licensure until he passes such examination.

Part III. Renewal and Reinstatement.

18VAC90-50-70. Renewal of licensure.

A. Licensees born in even-numbered years shall renew their licenses by the last day of the birth month in even-numbered years. Licensees born in odd-numbered years shall renew their licenses by the last day of the birth month in odd-numbered years.

B. The licensee shall complete the renewal form and submit it with the required fee and attest that he has complied with continuing competency requirements of 18VAC90-50-75.

C. Failure to receive the application for renewal shall not relieve the licensed massage therapist of the responsibility for renewing the license by the expiration date.

D. The license shall automatically lapse by the last day of the birth month if not renewed, and the practice of massage therapy or use of the title "massage therapist" or "licensed massage therapist" is prohibited.

18VAC90-50-75. Continuing competency requirements.

A. In order to renew a license biennially, a licensed massage therapist shall:

1. Hold current certification by the NCBTMB; or

2. Complete at least 24 hours of continuing education or learning activities with at least one hour in professional ethics. Hours chosen shall be those that enhance and expand the skills and knowledge related to the clinical practice of massage therapy and may be distributed as follows:

a. A minimum of 12 of the 24 hours shall be in activities or courses provided by one of the following providers and may include seminars, workshops, home study courses, and continuing education courses.

(1) NCBTMB;

(2) Federation of State Massage Therapy Boards (FSMTB);

(3) American Massage Therapy Association (AMTA);

(4) Associated Bodywork and Massage Professionals (ABMP);

(5) Commission on Massage Therapy Accreditation (COMTA);

(6) A nationally or regionally accredited school or program of massage therapy; or

(7) A school of massage therapy approved by the State Council of Higher Education for Virginia.

b. No more than 12 of the 24 hours may be activities or courses that may include consultation, independent reading or research, preparation for a presentation, a course in cardiopulmonary resuscitation, or other such experiences that promote continued learning.

B. A massage therapist shall be exempt from the continuing competency requirements for the first biennial renewal following the date of initial licensure in Virginia.

C. The massage therapist shall retain in his records the completed form with all supporting documentation for a period of four years following the renewal of an active license.

D. The board shall periodically conduct a random audit of licensees to determine compliance. The persons selected for the audit shall provide evidence of current NCBTMB certification or the completed continued competency form provided by the board and all supporting documentation within 30 days of receiving notification of the audit.

E. Failure to comply with these requirements may subject the massage therapist to disciplinary action by the board.

F. The board may grant an extension of the deadline for continuing competency requirements, for up to one year, for good cause shown upon a written request from the licensee prior to the renewal date.

G. The board may grant an exemption for all or part of the requirements for circumstances beyond the control of the licensee, such as temporary disability, mandatory military service, or officially declared disasters.

18VAC90-50-80. Reinstatement of licensure.

A. A massage therapist whose license has lapsed may reinstate licensure within one renewal period by attesting to completion of continuing competency requirements for the period and payment of the current renewal fee and the late renewal fee.

B. A massage therapist whose license has lapsed for more than one renewal period shall file a reinstatement application, attest to completion of continuing competency requirements for the period in which the license has been lapsed, not to exceed four years, and pay the reinstatement fee.

C. A massage therapist whose license has been suspended or revoked may apply for reinstatement by filing a reinstatement application meeting the requirements of subsection B of this section, and paying the fee for reinstatement after suspension or revocation.

D. The board may require evidence that the massage therapist is prepared to resume practice in a competent manner.

Part IV. Disciplinary Provisions.

18VAC90-50-90. Disciplinary provisions.

The board has the authority to deny, revoke, or suspend a license issued by it or to otherwise discipline a licensee upon proof that the practitioner has violated any of the provisions of § 54.1-3007 of the Code of Virginia or of this chapter or has engaged in the following:

1. Fraud or deceit which shall mean, but shall not be limited to:

- a. Filing false credentials;
 - b. Falsely representing facts on an application for initial licensure, or reinstatement or renewal of a license; or
 - c. Misrepresenting one's qualifications including scope of practice.
2. Unprofessional conduct which shall mean, but shall not be limited to:
- a. Performing acts that constitute the practice of any other health care profession for which a license or a certificate is required or acts that are beyond the limits of the practice of massage therapy as defined in § 54.1-3000 of the Code of Virginia;
 - b. Assuming duties and responsibilities within the practice of massage therapy without adequate training or when competency has not been maintained;
 - c. Failing to acknowledge the limitations of and contraindications for massage and bodywork or failing to refer patients to appropriate health care professionals when indicated;
 - d. Entering into a relationship with a patient or client that constitutes a professional boundary violation in which the massage therapist uses his professional position to take advantage of the vulnerability of a patient, a client, or his family, to include but not be limited to actions that result in personal gain at the expense of the patient or client, a nontherapeutic personal involvement or sexual conduct with a patient or client;
 - e. Falsifying or otherwise altering patient or employer records;
 - f. Violating the privacy of patients or the confidentiality of patient information unless required to do so by law;
 - g. Employing or assigning unqualified persons to practice under the title of "massage therapist" or "licensed massage therapist";
 - h. Engaging in any material misrepresentation in the course of one's practice as a massage therapist;
 - i. Obtaining money or property of a patient or client by fraud, misrepresentation or duress;
 - j. Violating state laws relating to the privacy of patient information, including §32.1-127.1:03 of the Code of Virginia;
 - k. Providing false information to staff or board members in the course of an investigation or proceeding;
 - l. Failing to report evidence of child abuse or neglect as required in § 63.2-1509 of the Code of Virginia or elder abuse or neglect as required in § 63.2-1606 of the Code of Virginia;
 - m. Violating any provision of this chapter; or

n. Failing to practice in a manner consistent with the code of ethics of the NCBTMB, as incorporated by reference into this chapter with the exception of the requirement to follow all policies, procedures, guidelines, regulations, codes, and requirements promulgated by the NCBTMB.

Impact of Criminal Convictions on Registration of Medication Aides and Licensure of Massage Therapist in Virginia

INTRODUCTION

Certain criminal convictions may prevent registration of medication aides or licensure of massage therapist in Virginia. Criminal convictions may also prohibit employment in certain health care settings.

This document provides information for persons interested in becoming a Registered Medication Aide or a Licensed Massage Therapist. It clarifies how convictions and other past history may affect the application process and subsequent registration or licensure by the Board of Nursing. It also clarifies the criminal convictions that prohibit employment in nursing home facilities, home care organizations, hospice programs, and assisted living facilities, ¹and identifies what is commonly referred to as “barrier crimes.”

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¹ Individuals registered or licensed by the Board of Nursing may be eligible for employment in other health care settings, depending upon the hiring and employment practices of the particular employer.

I. IMPACT OF CRIMINAL CONVICTIONS ON BOARD OF NURSING REGISTRATION AND LICENSURE

Criminal convictions can affect an individual during the registration or licensure application process and may affect an individual's employment options after registration or licensure by the Board.

Until an individual applies for registration or licensure, the Board of Nursing is unable to review, or consider for approval, an individual with a criminal conviction, history of action taken in another jurisdiction, or history of possible impairment. The Board has no jurisdiction until an application has been filed.

APPLICATION PROCESS FOR REGISTRATION OR LICENSURE WITH THE BOARD OF NURSING

After successfully completing an approved registered medication aide training program or the training and licensing examination of the Federation of State Massage Therapy Boards (FSMTB) for massage therapists, the individual is eligible to apply for registration or licensure by the Virginia Board of Nursing of the Department of Health Professions (DHP).

Applicants seeking registration as a medication aide by examination: An application for registration by examination is made directly to the Virginia Board of Nursing. Upon receipt of a completed application with appropriate application fee and proof of meeting all requirements for registration, the Board determines and communicates eligibility for testing to the testing company that administers the registered medication aide examination. The applicant must also submit a separate registration form and fee to the testing company that administers the exam for registration. Both application for "registration by exam" and the registration packet for the testing company are available from the Board of Nursing web site or by calling the Board office at (804) 367-4515. The applications, registration and information about testing may be obtained from the DHP - Board of Nursing website at: www.dhp.virginia.gov/nursing and choosing "Forms and Applications."

Applicants seeking licensure as a massage therapist (LMT): The application is made and fee paid directly to Virginia Board of Nursing. Completion of the FSMTB exam is required prior to applying for licensure. Please refer to the regulations for LMTs that can be found on our website at www.dhp.virginia.gov/nursing.

Applicants seeking registration or licensure by endorsement from another state: Endorsement applicants already registered or licensed in other jurisdictions must apply and pay fee directly to the Virginia Board of Nursing. Applications with instructions can also be accessed from the DHP- Board of Nursing web site at www.dhp.virginia.gov/nursing and choosing "Forms and Applications."

BASIS FOR DENIAL OF REGISTRATION OR LICENSURE

According to §54.1-3007 of the Code of Virginia, the Board of Nursing may refuse to admit a candidate to any examination, or refuse to issue a registration or license, to any applicant with certain criminal convictions. Likewise, the Board may refuse registration or licensure to an applicant who uses alcohol or drugs to the extent that it renders the applicant unsafe to practice, or who has a mental or physical illness rendering the applicant unsafe to practice (referred to as a history of impairment).

Criminal convictions for ANY felony can cause an applicant to be denied medication aide registration or massage therapist licensure.

Misdemeanor convictions involving moral turpitude may also prevent registration or licensure. Moral turpitude means convictions related to lying, cheating or stealing. Examples include, but are not limited to: reporting false information to the police, shoplifting or concealment of merchandise, petit larceny, welfare fraud, embezzlement, and writing worthless checks. While information must be gathered regarding all convictions, misdemeanor convictions other than those involving moral turpitude will not prevent an applicant from becoming a registered medication aide or a licensed massage therapist. However, if the misdemeanor conviction information also suggests a possible impairment issue, such as DUI and illegal drug possession convictions, then there still may be a basis for denial during the registration or licensure application process.

Each applicant is considered on an individual basis. There are NO criminal convictions or impairments that are an absolute bar to medication aide registration or massage therapy licensure.

ADDITIONAL INFORMATION NEEDED REGARDING CRIMINAL CONVICTIONS, PAST ACTIONS, OR POSSIBLE IMPAIRMENTS

Applications for registration and licensure include questions about the applicant's history, specifically:

1. Any and all criminal convictions ever received;
2. Any past action taken against the applicant in another state or jurisdiction, including denial of licensure or certification in another state or jurisdiction; and
3. Any mental or physical illness, or chemical dependency condition that could interfere with the applicant's ability to practice.

Indicating "yes" to any questions about convictions, past actions, or possible impairment does not mean the application will be denied. It means more information must be gathered and considered before a decision can be made, which delays the usual application and testing process. Sometimes an administrative proceeding is required before a decision regarding the

application can be made. The Board of Nursing has the ultimate authority to approve an applicant for testing and subsequent registration or licensure, or to deny approval.

The following information will be requested from an applicant with a criminal conviction:

- A certified copy of all conviction orders (obtained from the courthouse of record);
- Evidence that all court ordered requirements were met (i.e., letter from the probation officer if on supervised probation, paid fines and restitution, etc.);
- A letter from the applicant explaining the factual circumstances leading to the criminal offense(s); and
- Letters from employers concerning work performance (specifically from practice-related employers, if possible).

The following information will be requested from the applicant with past disciplinary action or licensure/certification/registration denial in another state:

- A certified copy of the Order for disciplinary action or denial from the other state licensing entity; and certified copy of any subsequent actions (i.e. reinstatement), if applicable;
- A letter from the applicant explaining the factual circumstances leading to the action or denial; and
- Letters from employers concerning work performance (practice-related preferred) since action.

The following information may be requested from applicants with a possible impairment:

- Evidence of any past treatment (i.e., discharge summary from outpatient treatment and inpatient hospitalizations);
- A letter from the applicant's current treating healthcare provider(s) indicating diagnosis, treatment regimen, compliance with treatment, and ability to practice safely;
- A letter from the applicant explaining the factual circumstances of condition or impairment and addressing ongoing efforts to function safely (including efforts to remain compliant with treatment, maintain sobriety, attendance at AA/NA meetings, etc.); and
- Letters from employers concerning work performance (specifically from practice-related employers, if possible).

NOTE: Some applicants may be eligible for the Health Practitioner's Monitoring Program (HPMP), which is a monitoring program for persons with impairments due to chemical dependency, mental health or physical disabilities. Willingness to participate in the HPMP is information the Board of Nursing will consider during the review process for applicants with a criminal conviction history related to impairment or a history of impairment alone. Information about the Virginia HPMP may be obtained directly from the DHP homepage at www.dhp.virginia.gov.

Once the Board of Nursing has received the necessary and relevant additional information, the application will be considered. Some applicants may be approved based on review of the documentation provided. Other applicants may be required to meet with Board of Nursing representative(s) for an informal fact finding conference to consider the application. After the

informal fact-finding conference, the application may be: i) approved, ii) approved with conditions or terms, or iii) denied.

For registration as a medication aide, the Board will notify the testing company directly of all applicants approved so that testing for the state exam may be scheduled. Upon notification of successful completion of the registration or licensure exam, the Board of Nursing will license or register the individual based on the Board's Order, including any terms imposed for practice.

NOTE: Failure to reveal criminal convictions, past disciplinary actions, and/or possible impairment issues on any application for registration or licensure is grounds for disciplinary action by the Board of Nursing, even after the license or registration has been issued. It is considered to be "fraud or deceit in procuring or attempting to procure a license," and a basis for disciplinary action that is separate from the underlying conviction, past action, or impairment issue once discovered. Possible disciplinary actions that may be taken range from reprimand to revocation of a registration or license.

FOLLOWING REGISTRATION OR LICENSURE

Criminal convictions and other actions can also affect an individual already registered as a medication aide or licensed as a massage therapist by the Board of Nursing. Any felony conviction, court adjudication of incompetence, or suspension or revocation of a license, registration, or certificate held in another state will result in a "mandatory suspension" of the individual's registration or certificate to practice in Virginia. This is a nondiscretionary action taken by the Director of DHP, rather than the Board of Nursing, according to § 54.1-2409 of the Code of Virginia. The mandatory suspension remains in effect until the individual applies for reinstatement and appears at a formal hearing before at least a panel of the Board of Nursing and demonstrates sufficient evidence that he or she is safe and competent to return to practice. At the formal hearing, three quarters of the Board members present must agree to reinstate the individual to practice in order for the registration or license to be restored.

II. CRIMINAL CONVICTIONS AND EMPLOYMENT IN NURSING FACILITIES, HOME CARE, HOSPICE AND ASSISTED LIVING FACILITIES²

According to §§32.1-126.01 and 32.1-162.9:1 of Title 32.1 and §§ 63.2-1719 and 63.2-1720 of Title 63.2 of the Code of Virginia, persons with certain criminal convictions are prohibited from employment in nursing facilities, home care organizations, hospice programs, or assisted living facilities, whether or not the person is registered or licensed by the Board of Nursing. These convictions are commonly known as "barrier crimes" to employment.

The law requires that owners/operators of nursing facilities, home care organizations, hospice programs, and assisted living facilities obtain a criminal record background check on each new

² Individuals licensed or registered by the Board of Nursing may be eligible for employment in other health care settings, depending upon the hiring and employment practices of the particular employer.

hire within 30 days of their employment. The law requires that these background checks be obtained using the Central Criminal Records Exchange of the Virginia Department of State Police.

Generally, criminal convictions for offenses involving abuse or neglect disqualify an applicant. See a listing of the “barrier” crimes that prevent employment in a nursing facility, home care organization, hospice program or assisted living facility in the Appendix beginning on page 9.

CONVICTIONS THAT DO NOT DISQUALIFY AN APPLICANT FROM EMPLOYMENT

Under Virginia law, criminal convictions for offenses unrelated to abuse or neglect would not disqualify an applicant for employment. For example, criminal convictions such as traffic violations, possession of marijuana, and prostitution, may not disqualify an applicant. However, these convictions *may* disqualify an applicant based on a particular employer’s hiring or personnel policies, or based on other regulations or policies³.

Even if the applicant has been convicted of a barrier crime, it may not always prevent employment. An applicant may be hired if:

- (i) The individual has only one misdemeanor conviction considered to be a barrier crime;*
- (i) The criminal offense did NOT involve abuse or neglect; AND*
- (ii) Five years have lapsed since the conviction occurred.*

Examples of such misdemeanor convictions that would not necessarily be a barrier to employment may include, but are not limited to:

- Hazing
- Reckless handling of a firearm
- DUI
- Disorderly conduct
- Access to loaded firearm by children
- Assault and battery
- Assault and battery against law enforcement officers
- Burning or destroying any other building, or structure valued less than \$200
- Burning or destroying personal property, standing grain, etc., valued less than \$200
- Threats to bomb or damage buildings or means of transportation, false information as to danger to such buildings, etc. (if person is younger than 15 years of age)
- Setting woods, etc, on fire intentionally whereby another is damaged or jeopardized
- Setting off chemical bombs capable of producing smoke in certain public buildings
- Carelessly damaging property by fire

³ Such as federal Medicare or Medicaid certification regulations.

DISCLOSURE OF CRIMINAL CONVICTIONS

If an applicant is denied employment because of convictions appearing on his criminal history record, the employer is required to provide a copy of the information obtained from the Central Criminal Records Exchange to the applicant.

While further dissemination of the results of a criminal record check by an employer is prohibited, employers may provide criminal record information and reason for employment termination to state authorities to comply with legal reporting requirements.⁴ Criminal conviction information reported to the Board of Nursing that was not revealed by the Registered Medication Aide or the Licensed Massage Therapist upon initial application for registration or licensure may form the basis for disciplinary action to be taken by the Board of Nursing. Disciplinary actions for such “fraud or deceit in procuring a registration or license” or for falsifying an employment application may range from reprimand to revocation of the registration or licensure.

Note: The law specifies that incomplete or false statements in an applicant’s sworn statement or affirmation disclosing any criminal convictions or any pending criminal charges constitutes a misdemeanor offense. Subsequent disclosure or discovery of a relevant criminal conviction or convictions may also disqualify the person from being hired and from continuing on in the hired employment.

III. GETTING A CRIMINAL RECORD EXPUNGED

Having been granted a pardon, clemency, or having civil rights restored following a felony conviction does not change the fact that a person has a criminal conviction. That conviction remains on the individual’s registration/licensure or employment record. Therefore, any criminal conviction *must* be revealed on any application for registration/licensure or employment, unless it has been expunged.

Chapter 23.1 of Title 19.2 of the Code of Virginia describes the process for expunging criminal records. If a person wants a conviction to be removed from their record, the individual must seek expungement pursuant to §19.2-392.2 of the Code of Virginia. Individuals should seek legal counsel to pursue this course, which involves specific petitions to the court, State Police procedures, and hearings in court.

APPENDIX.

BARRIER CRIMES PROHIBITING EMPLOYMENT IN NURSING HOME FACILITIES, HOME CARE ORGANIZATIONS,

⁴ See § 54.1-2400.6 of the Code of Virginia for mandatory reporting requirements.

HOSPICE PROGRAMS AND ASSISTED LIVING FACILITIES

NOTE: This list is not all-inclusive and should be used only as a guide. For further clarification regarding criminal offenses, refer to Title 18.2 Crimes and Offenses Generally of the *Code of Virginia*.

State Code	Offense
18.2 - 30	Murder and manslaughter declared felonies
18.2 - 31	Capital murder defined
18.2 - 32	First and second degree murder defined
18.2 - 32.1	Murder of a pregnant woman
18.2 - 33	Felony homicide
18.2 - 35	How voluntary manslaughter punished
18.2 - 36	How involuntary manslaughter punished
18.2 - 36.1	Certain conduct punishable as involuntary manslaughter
18.2 - 37	How and where homicide prosecuted and punished
18.2 - 41	Malicious wounding by a mob
18.2 - 47	Abduction
18.2 - 48	Abduction with intent to extort money or for immoral purposes
18.2 - 51	Shooting, stabbing, etc. with intent to maim, kill, etc.
18.2 - 51.1	Malicious bodily injury to law enforcement officers or firefighters
18.2 - 51.2	Aggravated malicious wounding
18.2 - 51.3	Reckless endangerment/throwing objects from places higher than one story
18.2 - 51.4	Maiming, etc., of another resulting from driving while intoxicated
18.2 - 52	Malicious bodily injury by means of caustic substance
18.2 - 52.1	Possession of infectious biological substances
18.2 - 53	Shooting, etc., in committing or attempting a felony
18.2 - 53.1	Use or display of firearm in committing felony
18.2 - 54.1	Attempts to poison
18.2 - 54.2	Alteration of food, drink, drugs, cosmetics, etc.
18.2 - 55	Bodily injuries caused by prisoners, probationers, or parolees
18.2 - 56	Hazing
18.2 - 56.1	Reckless handling of firearms
18.2 - 56.2	Allowing access to firearms by children
18.2 - 57	Assault and battery
18.2 - 57.01	Pointing a laser at law-enforcement officer
18.2 - 57.2	Assault and battery against a family or household member
18.2 - 58	Robbery
18.2 - 58.1	Carjacking
18.2 - 60	Threats of death or bodily injury
18.2 - 60.3	Felony stalking
18.2 - 61	Rape
18.2 - 63	Carnal knowledge of child between 13 and 15 years of age
18.2 - 64.1	Carnal knowledge of certain minors

State Code	Offense
18.2 - 64.2	Carnal knowledge of inmate, parolee, probationer, or pre-trial or post-trial offender
18.2 - 67.1	Forcible sodomy
18.2 - 67.2	Object sexual penetration
18.2 - 67.2:1	Marital sexual assault
18.2 - 67.3	Aggravated sexual battery
18.2 - 67.4	Sexual battery
18.2 - 67.4:1	Infected sexual battery
18.2 - 67.5	Attempted rape, forcible sodomy, object sexual penetration, aggravated sexual battery, and sexual battery
18.2 - 77	Burning or destroying dwelling house, <u>etc.</u>
18.2 - 79	Burning or destroying meeting house, <u>etc.</u>
18.2 - 80	Burning or destroying any other building or structure (valued at \$200 or more)
18.2 - 81	Burning or destroying personal property, standing grain, <u>etc.</u> (valued at \$200 or more)
18.2 - 82	Burning building or structure while in such building or structure with intent to commit felony
18.2 - 83	Threats to bomb or damage buildings or means of transportation, false information as to danger to such buildings, <u>etc.</u> (if person is older than 15 years of age)
18.2 - 84	Causing, inciting, <u>etc.</u> , commission or acts described in 18.2 - 83 (if person is older than 15 years of age)
18.2 - 85	Manufacture, possession, use, <u>etc.</u> of fire bombs or explosive material or devices
18.2 - 86	Setting fire to woods, fences, grass, <u>etc.</u>
18.2 - 87	Setting woods, <u>etc.</u> on fire intentionally, where another's property is damaged or jeopardized
18.2 - 87.1	Setting of chemical bombs capable of producing smoke in certain public buildings
18.2 - 88	Carelessly damaging property by fire
18.2 - 286.1	Drive by shooting
18.2 - 289	Use of a machine gun in a crime of violence
18.2 - 290	Aggressive use of a machine gun
18.2 - 300	Use of a sawed-off shotgun in a crime of violence
18.2 - 314	Failing to secure medical attention for injured child
18.2 - 355	Pandering, taking, detaining, <u>etc.</u> , person for prostitution, <u>etc.</u> , or consenting thereto
18.2 - 361	Crimes against nature involving children
18.2 - 366	Incest
18.2 - 369	Abuse and neglect of incapacitated adults
18.2 - 370	Taking indecent liberties with children
18.2 - 370.1	Taking indecent liberties with child by person in custodial or supervisory relationship
18.2 - 371.1	Abuse and neglect of children
18.2 - 373	Obscene items enumerated
18.2 - 374	Production, publication, sale, possession, <u>etc.</u> , of obscene items
18.2 - 374.1	Production, publication, sale, possession with intent to distribute, financing, <u>etc.</u> , of sexually explicit items involving children

State Code	Offense
18.2 – 374.1:1	Possession of child pornography
18.2 – 374.3	Electronic facilitation of pornography
18.2 – 375	Obscene exhibitions and performances
18.2 - 376	Advertising, etc., obscene items, exhibitions or performances
18.2 – 376.1	Enhanced penalties for using a computer in certain violations
18.2 - 377	Placards, posters, bills, etc.
18.2 – 378	Coercing acceptance of obscene articles or publications
18.2 - 379	Employing or permitting minor to assist in offense under article.
18.2 – 474.1	Delivery of drugs to prisoners
18.2 – 477	Escape from jail
53.1 - 203	Felonies by prisoners
	Equivalent offense in another state



COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

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TEL (804) 367-4400
FAX (804) 527-4475

On March 12, 2020, Governor Ralph Northam declared a state of emergency due to novel coronavirus (COVID-19). In the declaration, [Executive Order 51](#), the Governor directed state agencies to render appropriate assistance to prepare for and mitigate the effects of the coronavirus (COVID-19) outbreak. Pursuant to the authority granted to the agency head by Executive Order 51 (2020), I hereby grant the below exceptions:

1. Extension of Continuing Competency Requirements:

All Boards have granted an extension of continuing competency requirements for a period of six months for any renewal currently due through June 30, 2020.

2. Expedited Licensure:

The Board of Medicine is streamlining its licensing process for the following professions: medicine and surgery, osteopathic medicine and surgery, physician assistant, podiatry, and respiratory therapy. The following are not required in the application process:

- Transcripts of professional education.
- Form b employment verifications.
- State verifications of licensure.

In addition, the Board already has an expedited licensure by endorsement process for medicine and osteopathy applicants who:

- Have practiced in another state for 5 years.
- Are board certified.

3. Renewal Late Fees:

DHP will be temporarily waiving renewal late fees beginning with the March renewals. This waiver is not intended to be back dated to older renewals. We plan to continue the waiver for future renewals depending on the duration of the COVID-19 pandemic period.

David E. Brown, D.C.
Director



SCHOOL OF MASSAGE

1834 South Main Street, Harrisonburg, VA 22801

NOV 12 2019 540-801-0078

DHP

November 5, 2019

Ms. Cathy Hanchey
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico Virginia 23233-1463

Dear Ms. Hanchey;

We, Cedar Stone School of Massage, are writing this letter to request the continued approval of NCBTMB Board Certification Exam as an exam acceptable for certification as a massage therapist in the Commonwealth of Virginia. This exam had previously been approved on November 18, 2014 by the Boards. I have attached a copy of the email notification we received of the Board's approval in 2014.

In 2016, NCETMB and NCETM were removed as acceptable licensure exams. However, NCBTMB Board Certification Exam was not removed and based on the Boards approval in 2014 could still be approved and/or qualify as an exam approved by the Boards. The regulation citing: Regulations for initial licensure now read as follows: "Has passed the Licensing Examination of the Federation of State Massage Therapy Boards, or an exam deemed acceptable to the board..." It appears from this statement, "deemed acceptable to the board", that the NCBTMB Board Certification exam has met the requirements to be a qualified licensing exam for Virginia since it was approved in 2014. Hence, we are requesting that the original approval in 2014 be continued or reinstated, if necessary, for NCBTMB Board Certification Exam as an acceptable Virginia licensure exam.

NCBTMB Board Certification Exam in our opinion is a more rigorous exam, requiring a deeper understanding of ethics, anatomy and massage treatment applications. We see the increased rigor as benefiting the massage therapy profession and our clientele. Further, passing this exam qualifies therapists for Board Certification in our profession. This designation is another benefit for the profession and our clientele. A detailed description of NCBTMB Board Certification is found at this link: [Board Certification | NCBTMB](#)

I have sent copies of this letter through the postal mail. We thank you for your consideration of our request. If additional information is required, please email us at cedarstoneschoolofmassage@yahoo.com or call us at 540-801-0078.

Sincerely,

Sandra Hoak, M.A., Ed.S.
Director
Cedar Stone School of Massage

Attachments

Original Approval of Board Certification Exam in 2014

From: **Austin, Latasha (DHP)** <Latasha.Austin@dhp.virginia.gov>
Date: Mon, Dec 1, 2014 at 9:28 AM
Subject: RE: Massage Therapy Question
To: Robyn Jarvis <rmjarv@gmail.com>
Cc: "Krohn, Brenda (DHP)" <Brenda.Krohn@dhp.virginia.gov>

Ms. Jarvis,

At the Boards meeting on November 18, 2014, it was deemed that we can accept the NCBTMB Board Certification Exam as an exam acceptable for certification as a massage therapist in the Commonwealth of Virginia based on the Board's interpretation of its own current regulations.

Latasha B. Austin
Discipline Specialist & Massage Therapy Certification Specialist

COMMONWEALTH of VIRGINIA
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www.dhp.virginia.gov

Applicants for certification as massage therapist can now apply online at www.dhp.virginia.gov/nursing/nursing_forms.htm#MassageTherapist

Virginia Board of Nursing Forms and Applications

Our mission is to ensure safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to health care practitioners and the public.

Any and all statements provided herein shall not be construed as an official policy, position, opinion or statement of the Virginia Board of Nursing (VBON). VBON staff cannot and do not provide legal advice. VBON staff provide assistance to the public by providing reference to the VBON statutes and regulations; however, any such assistance provided by VBON staff shall not be construed as legal advice for any particular situation, nor shall any such assistance be construed to communicate all applicable laws and regulations governing any particular situation or occupation. Please consult an attorney regarding any legal questions related to state or federal laws and regulations, including the interpretation and application of the laws and regulations governing the VBON. Under no circumstances shall VBON, its members, officers, agents, or employees be liable for any actions taken or omissions made in reliance on any information contained in this e mail.

Letter from Cathy Hanchey regarding current exam requirements for licensure

Dear Ms. LaFrance:

Thank you for your telephone call last week concerning the exam requirement for licensure as a massage therapist in Virginia.

Current exam requirements for licensure as a massage therapist in Virginia are outlined in [§ 54.1-3029\(A\)\(3\)](#) of the *Code of Virginia* and [18VAC90-50-40\(A\)\(3\)](#) of the Regulations Governing the Licensure of Massage Therapists.

On September 21, 2016, the Virginia Board of Nursing adopted new Regulations Governing the Licensure of Massage Therapists that, among other revisions, removed the National Certification Exam for Therapeutic Massage and Bodywork (NCETMB) and the National Certification Exam for Therapeutic Massage (NCETM). Section 54.1-3029(A)(3) of the Code of Virginia and 18VAC90-50-40(A)(3) of the Regulations for initial licensure now read as follows: "Has passed the Licensing Examination of the Federation of State Massage Therapy Boards, or an exam deemed acceptable to the board..."

As of September 21, 2016, the Virginia Board of Nursing requires the Massage Therapy Licensing Examination (MBLEx) for licensure. All applicants after that date are required to have taken the MBLEx. For another type of exam to be "deemed acceptable to the board," the applicant would need to appear at an informal conference before the Board to review the exam requirements and receive approval.

If you have additional questions, please feel free to call.

Cathy M. Hanchey

Senior Licensing/Discipline Specialist

Department of Health Professions

Virginia Board of Nursing

9960 Mayland Drive, Suite 300

Henrico, Virginia 23233-1463

(804) 367-4481 Cathy.Hanchey@dhp.virginia.gov

----- Forwarded message -----

From: **Cisco Arnold** <CArnold@evcc.edu>

Date: Thu, Mar 12, 2020 at 11:24 AM

Subject: RE: FW: Question concerning Massage Therapy education for distance - Covid 19

To: Ridout, Charlette <charlette.ridout@dhp.virginia.gov>

Greetings,

I was referring to the manner in which the hours are dictated.

It seems that VA specifically stipulates that a massage program be a “minimum” of 500 hours, in the direct law (§ 54.1-3029), However, numerous other educational programs such as Nursing don’t have this direct stipulation in the law. Practical nursing law requires “a diploma from an approved practical nursing program” (§ 54.1-3020), similarly RN training requires diploma or degree from approved programs (§ 54.1-3017) without specifically stating hours. I realize that hours are stipulated, but in the rules maintained by the Board, rather than the state law.

It seems that DOE has uses the wording in the law to identify specific bounds and limitations. Since the law for massage programs stipulates specific hours, this causes it to be relegated to being a “Clock Hour” program and caps at the diploma level, this (along with DOE 150% regs) limits what can be done with Massage Education. Also, prevents us from developing greater Manual Therapy programs.

I’m about the source of § 54.1-3029, stipulation for specific hours; and thereby, if it can be altered to allow for a greater development of the Massage profession in the state.

Thank you again,

Cisco Arnold

From: Ridout, Charlette [mailto:charlette.ridout@dhp.virginia.gov]

Sent: Thursday, March 12, 2020 8:54 AM

To: Cisco Arnold

Subject: Re: FW: Question concerning Massage Therapy education for distance - Covid 19

You are correct that nurse aides have a specific hour requirement as do massage therapist. But actually all of the professions that the Board of Nursing regulate including RN, LPN and registered medication aides have hours requirements as well. These hours relate to required hands on clinical hours. The exact hours required are listed in the regulations governing each profession or educational programs.

The Board actually does regulate the education of all the above mentioned profession expect massage therapy.

I hope this is helpful.

On Thu, Mar 12, 2020 at 8:48 AM Cisco Arnold <CArnold@evcc.edu> wrote:

Greetings,

If you wouldn't mind, I've got an unrelated question about educational regulations.

I've noticed that Massage seems to be the only occupation (I've seen, possible nurse aide) with specific hours requirements list in the law. Do you have any idea of the reason for this?

I ask, because it limits the amount of education we can provide in programs and prevents us from being able to develop larger manual therapy programs (with the 150% rule from Fed DOE).

Thank you for being willing to field the question,

Cisco Arnold

From: Ridout, Charlette [mailto:charlette.ridout@dhp.virginia.gov]
Sent: Wednesday, March 11, 2020 3:33 PM
To: Cisco Arnold
Subject: Re: FW: Question concerning Massage Therapy education for distance - Covid 19

No problem. Let me know if you have any other questions.

Charlette N. Ridout, RN, MS, CNE
Deputy Executive Director
Virginia Board of Nursing
804-367-4614

Any and all statements provided herein shall not be construed as an official policy, position, opinion or statement of the Virginia Board of Nursing (VBON). VBON staff cannot and do not provide legal advice. VBON staff provide assistance to the public by providing reference to the VBON statutes and regulations; however, any such assistance provided by VBON staff shall not be construed as legal advice for any particular situation, nor shall any such assistance be construed to communicate all applicable laws and regulations governing any particular situation or occupation. Please consult an attorney regarding any legal questions related to state or federal laws and regulations, including the interpretation and application of the laws and regulations governing the VBON.

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On Wed, Mar 11, 2020 at 2:08 PM Cisco Arnold <CArnold@evcc.edu> wrote:

Greetings,

Thanks for getting this back to me. I didn't think that the Nursing board stipulated anything, but my Academic Director asked me to check and see if there were any obscure requirements.

Thank you for your help,

Cisco Arnold

From: Ridout, Charlette [mailto:charlette.ridout@dhp.virginia.gov]
Sent: Wednesday, March 11, 2020 1:49 PM
To: Cisco Arnold
Subject: Re: FW: Question concerning Massage Therapy education for distance - Covid 19

Good afternoon.

I have been asked to respond to the email you sent to the Board of Nursing regarding massage therapy education.

The Board of Nursing does not regulate the educational programs for massage therapy. The Board of Nursing does regulate the licensing of massage therapist but not the educational programs.

I hope this answers your questions.

Best regards.

Charlette N. Ridout, RN, MS, CNE
Deputy Executive Director
Virginia Board of Nursing
804-367-4614

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From: Cisco Arnold <CArnold@evcc.edu>
Sent: Wednesday, March 11, 2020 12:13 PM
To: jacquelyn.wilmoth@dhp.virginia.gov
Subject: Question concerning Massage Therapy education for distance - Covid 19

Greetings,

I am writing to ask about the Board's input on temporarily teach theory concepts online to students as a result of an institutional impact resulting from COVID-19 cases in the local community.

Are there any problems or rules preventing the use of online/distance modalities for massage education?

Our Academic director has already gotten temporary approval from our accreditor, Council on Occupational Education (COE), to allow for alteration.

I welcome any input, insight, or direction you might be able to provide.

Thank you for being able to assist,

Respectfully,

R. Cisco Arnold, MA, LMT
Massage Therapy Program Director
General Education Program Director
Eastern Virginia Career College
[10304 Spotsylvania Ave., Suite 400
Fredericksburg, VA 22408](https://www.evcc.edu/10304-Spotsylvania-Ave-Suite-400-Fredericksburg-VA-22408)
(540) 373-2200
CArnold@evcc.edu



10304 Spotsylvania Ave Ste 400
Fredericksburg, VA 22408
Ph: 540.373.2200 | Fax: 540.373.4465

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COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions

Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367- 4400
FAX (804) 527- 4475

Virginia Board of Nursing
Jay P. Douglas, MSM, RN, CSAC, FRE
Executive Director

Board of Nursing (804) 367-4515
Nurse Aide Registry (804) 367-4569
FAX (804) 527-4455

The Board of Nursing (Board) received **131** cases between October 1, 2018 and December 31, 2020, and the Board closed **113** cases, issuing case decisions for **55** cases, described below.

Case Decisions for 55 Licensed Massage Therapists (LMTs) October 1, 2018 – September 30, 2020

Action Taken	Count of Action Taken
Case Dismissed	4
License Granted	12
License Surrendered	4
Mandatory Suspension	6
Monetary Penalty	7
Reinstatement Denied	1
Reinstatement Granted	1
Renewal Right Denied	9
Reprimand	15
Revocation	17
Summary Suspension	7
Suspension	6
Terms Imposed – Other	6
Terms Terminated	4
Grand Total	99



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FAX (804) 527- 4475

Case Category Report for Nursing - Cases Received Between:					
		<u>1/1/2017 -</u> <u>12/31/2017</u>	<u>1/1/2018 -</u> <u>12/31/2018</u>	<u>1/1/2019 -</u> <u>12/31/2019</u>	<u>1/1/2020 -</u> <u>9/30/2020</u>
01	Inability to Safely Practice	4	6	5	4
02	Drug Related, Patient Care	1			
03	Abuse/Abandonment/Neglect	13	17	23	9
05	Std of Care, Diagnosis/Treatment	8	8	4	3
07	Std of Care, Malpractice Reports		1	1	
08	Std of Care, Exceeding Scope	4		1	
09	Std of Care, Other				1
10	Inappropriate Relationship	17	16	24	14
11	Unlicensed Activity	19	15	9	2
14	Action by Another Board, Patient Care	1	1		
50	Criminal Activity	14	9	11	3
51	HPMP				1
52	Drug Related, Non-Patient Care	1			
53	Fraud, Non-Patient Care	13	2	17	10
54	Business Practice Issues	9	10	8	7
56	Compliance	2	1		2
57	Misappropriation of Property, NPC	1			
59	Continuing Competency Req Not Met			7	2
62	Action by Another Board, NPC	2		2	2
63	Reinstatement	1	2	2	1
64	Eligibility	<u>25</u>	<u>13</u>	<u>19</u>	<u>6</u>
		135	101	133	67

Massage Advisory Board Members

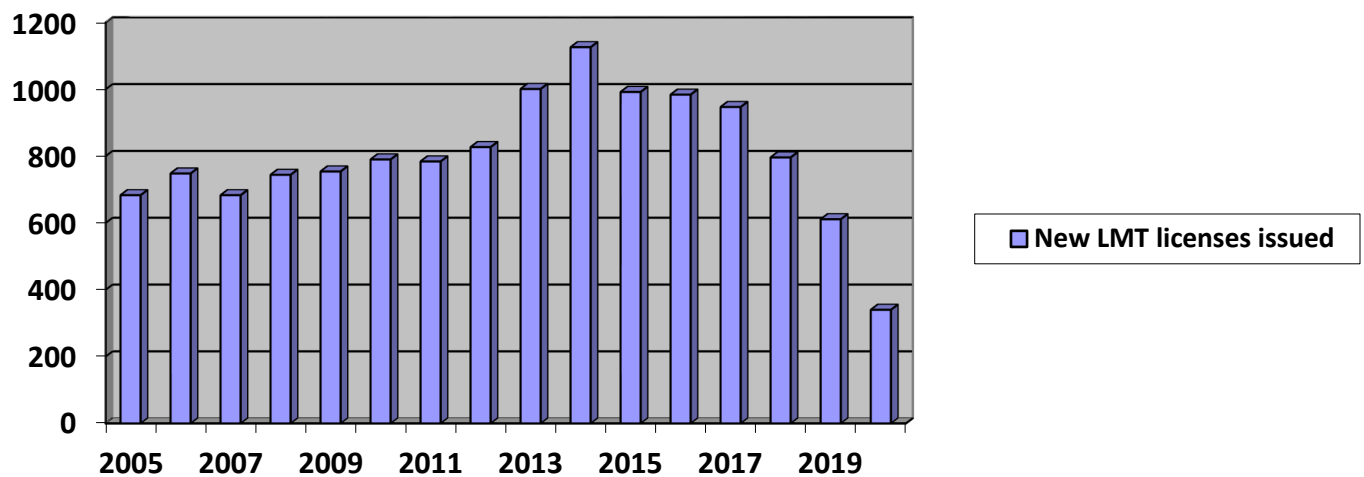
(Revised October 16, 2020)

<u>NAME:</u>	<u>TERM EXPIRES:</u>
Dawn M. Hogue, MA, LMT, Chair, Virginia Beach	2024
Jermaine Mincey, Citizen Member, Annandale	2021
Erin C. Osiol, MSW, LMT, Richmond	2023
Shawnté Peterson, LMT, Chesapeake	2023
María Mercedes Olivieri, LMT. Burke	2024

STATISTICAL INFORMATION

Number of new Massage Licenses Issued

2020 (Jan 1- Sept 30)	340
2019 (Jan 1- Dec 31)	616
2018 (Jan 1- Dec 31)	796
2017 (Jan 1- Dec 31)	947
2016 (Jan 1- Dec 31)	984
2015 (Jan 1- Dec 31)	992
2014 (Jan 1- Dec 31)	1,126
2013 (Jan 1- Dec 31)	1,001
2012 (Jan 1- Dec 31)	827
2011 (Jan 1- Dec 31)	784
2010 (Jan 1- Dec 31)	790
2009 (Jan 1- Dec 31)	754
2008 (Jan 1- Dec 31)	744
2007 (Jan 1- Dec 31)	683
2006 (Jan 1- Dec 31)	748
2005 (Jan 1- Dec 31)	683



MBLEX was accepted as exam for certification in Virginia as of July 1, 2013

Total # of massage therapist **currently** active in Virginia as of **October 16, 2020**:

8,479

Online Massage Applications Received

	By Application	By Endorsement	Total
2020 (Jan 1 – Sept 30)	243	112	355
2019 (Jan 1 – Dec 31)	504	195	699
2018 (Jan 1 – Dec 31)	564	227	791
2017 (Jan 1 – Dec 31)	747	205	952
2016 (Jan 1 – Dec 31)	839	255	1,094
2015 (Jan 1 – Dec 31)	766	210	976
2014 (April 1 -Dec 31)	450	156	606

- The Virginia Board of Nursing started accepting massage applications online as of April 2014
- Implementation of Licensure for Massage Therapist effective January 1, 2017 (*from Certified Massage Therapist-CMT to Licensed Massage Therapist-LMT*)
- Pursuant to Virginia Code 54.1-3005.1, the Virginia Board of Nursing incorporated both state and federal criminal background checks as part of the application process for Massage Therapist effective January 1, 2017. This requirement applies to applicants by initial application, endorsement and reinstatement.
- Effective April 16, 2020, the Board of Nursing no longer provides official verification for licensees wishing to obtain out-of-state licensure. Licensees are directed to [License Lookup](#).
- Effective September 30, 2020, pursuant to Virginia Code 54.1-3029, the Virginia Board of Nursing clarified the requirement for applicants to have **completed** a massage therapy program that is at least 500 hours, **and** requires a Board-approved English-proficiency exam for applicants educated outside of the United States.

LMT Total Count (October 1, 2018 - September 30, 2020)

New Applications (initial & endorsement- paper & online)	1,253
Duplicate License Request	283
Duplicate Wall Certificate Request	49
Verification Request	400
Reinstatement Application after Discipline	1
Reinstatement Applications	88
Renewals	7,272
Late Renewals	858



2019 Annual Meeting Minutes

Atlanta, GA

October 4-5, 2019

Friday, October 4, 2019

Opening Session

The 2019 FSMTB Annual Meeting was called to order at 8:30 AM ET by Charlene Russell, President of the Board of Directors.

Membership Delegation Roll Call

Delegate Name:

Keith Warren
Tracy Gilmore
Mlee Clark
Mark Dixon
Zen Mayhugh
Cary Bland
Christopher Brooks
Cindy King
Justin Kobbe Solace
Rebecca Saban
Barbara Lis
LeAnne Stevens
Brandy Madding
Sallye Raymond
Gwenda Harrison
Saskia Cote
Jodi Wiley
Jeffrey Miller
Brandy Mouser
Steve Carper
Deirdre Strunk
Julie Smith
ToniAnn Petrella-Diaz
Elizabeth Kirk
Jennifer Staska
Teresa Pollak

State/Territory:

Alabama Board of Massage Therapy
Alaska Board of Massage Therapists
Arizona State Board of Massage Therapy
California Massage Therapy Council
Colorado Office of Massage Therapy Licensure
District of Columbia Board of Massage Therapy
Florida Board of Massage Therapy
Georgia Board of Massage Therapy
Idaho Board of Massage Therapy
Illinois Massage Licensing Board
Indiana State Board of Massage Therapy
Iowa Board of Massage Therapy
Kentucky Board of Licensure for Massage Therapy
Louisiana Board of Massage Therapy
Maryland State Board of Massage Therapy Examiners
Massachusetts Board of Registration of Massage Therapy
Michigan Board of Massage Therapy
Mississippi State Board of Massage Therapy
Missouri Board of Therapeutic Massage
Nebraska Board of Massage Therapy
Nevada State Board of Massage Therapy
New Hampshire Advisory Board of Massage Therapists
New Jersey Board of Massage and Bodywork Therapy
North Carolina Board of Massage and Bodywork Therapy
North Dakota Board of Massage Therapy
Ohio State Medical Board



Kelli Lene
John Combe
Becca Kaufman
Elizabeth Rios
John Balletto
Jan Shaw
Bridget Myers
Marvis Burke
Lorraine Sroufe
Roger Olbrot
Dawn Hogue
Heidi Williams
Linda Lyter
Carla Hedtke

Oklahoma State Board of Cosmetology and Barbering
Oregon Board of Massage Therapists
Pennsylvania State Board of Massage Therapy
Puerto Rico Massage Therapy Board
Rhode Island Massage Therapy Examining Board
South Carolina Board of Massage/Bodywork Therapy
South Dakota Board of Massage Therapy
Tennessee Board of Massage Licensure
Texas Department of Licensing and Regulation
Utah Board of Massage Therapy
Virginia Board of Nursing
Washington State Board of Massage
West Virginia Massage Therapy Licensure Board
Wisconsin Massage Therapy and Bodywork Affiliated
Credentialing Board

Total Present: 40

Not present: Arkansas, Delaware, Montana, New Mexico, New York

Total Not Present: 5

Russell declared a quorum established.

Approval of 2019 Agenda

Russell requested a motion to approve the agenda.

MOTION to amend the agenda to accommodate scheduling.

Made by John Combe (OR) and seconded by Christopher Brooks (FL)

Motion adopted unanimously

MOTION to approve rules of debate.

Made by Mark Dixon (CA) and seconded John Combe (OR)

Motion adopted unanimously

Craig Knowles (GA) welcomed all attendees to Georgia.



President's Report

Russell presented an overview of the accomplishments of the organization over the past year. Russell thanked the delegates, board of directors, staff, vendors, legal counsel, family, friends, and coworkers. She announced the move of the FSMTB executive office from one location to another in Overland Park, KS. She also announced that both the Massage Therapy Licensing Database and CE Registry were live and in the process of onboarding member boards and CE providers respectively.

Presentation of Slate of Candidates

Russell introduced Dianne Layden, board of directors liaison to the policy committee, who introduced its members – Tiffany Gennety (MI), Jamie Corey (PA), Linda Lyter (WV) and Kama Monroe (FL) – and discussed the considerations and recommendations the committee had for changes to the voting process.

Nominations: 2020 Nominating Committee

Micheal Black (UT), chair of the nominating committee, introduced the nominating committee members: Bridget Myers (SD) and Lydia Nixon (FL). Black explained the process for selecting the candidates.

Seat 1: David Cox (MD)

Seat 2: Charlene Russell (MS) (former)

Black introduced Robin Alexander, Vice President of the FSMTB.

Alexander explained the voting process and invited each candidate to speak for three minutes. Each candidate selected and answered two questions at random. The candidates could be declared elected by acclamation, wherein all delegates agree that voting is not required since there are two candidates and two open positions on the board, unless challenged. There were objections from Mark Dixon (CA) and Cindy King (GA).

Alexander declared that there would be a vote on Saturday morning. She reminded the attendees that a majority vote would be necessary for each candidate and if that majority was not met it would leave an open seat on the board.

Nominees for the 2020 Nomination committee are Micheal Black (UT), Lydia Nixon (FL) (not present) and April Whiting (NV). There were no nominations from the floor. Alexander closed the nominations and announced that the voting will take place on Saturday morning.

Treasurer's Report

Financial Highlights for the last fiscal year were given by the Treasurer David Cox (MD).

Cox introduced the Finance Committee – Sandy Anderson (NV), Micheal Black (UT), Keith Warren (AL), and AJ Groeber (OH)(not present) – and thanked them for their work.



Cox announced that there was a \$323,000 surplus last year and that there was an increase in expenditures. The bulk of the increase in expenses from last year to this year is due to professional legal fees when the FSMTB was in active litigation for two cases. Cox went on to say that investment returns are up and that the reserves are needed, not only for organizational health but also to protect the integrity of the licensing examination and the licensure process. An annual audit was conducted and there were no significant findings. The FSMTB is seeking to reduce costs and increase service by bringing outsourced functions in-house. To move forward with this project, the FSMTB headquarters in Overland Park moved to another location to facilitate an increase in staff and services.

Cox stated, *“although the Federation has had a strong year financially, we have several projects that will require significant funding. Any profit is reinvested into the Federation’s services to promote public protection. We remain diligent with spending your money and take our fiscal responsibility very seriously.”*

Executive Session

The membership moved into executive session to discuss examination matters.

Member Board Reports 1 of 3

The delegate from each FSMTB Member Board presented a summary of regulatory issues and key concerns in their states. FSMTB Vice President Robin Alexander facilitated the first segment of the discussion.

Communicating with Regulatory Agencies: School Oversight (Members only)

Due to the sensitive nature of some of the content all non-members were excused from this presentation.

Adam Campbell from the Illinois Board of Higher Education presented information about approvals of schools and programs, application information and how those programs are accredited. Best practices were identified.

Member Board Reports 2 of 3

FSMTB Director Craig Knowles (GA) facilitated the second section of member board reports.

Member Board Reports 3 of 3

FSMTB Director Victoria Drago (FL) facilitated the third section of member board reports. Due to a time limitation, the last 5 member reports were moved to the end of the meeting day.

Communication with Industry Stakeholders

Public Safety - Massage Envy

A presentation was made by Kristin Paiva, General Counsel for Massage Envy, about efforts to support public safety and the six-point plan that was created to address it in the Massage Envy franchises.



Transcripts and Online Education

Lorena Haynes, FSMTB Director of Government Relations, presented information about entry-level transcripts for online courses, research into online education, and accreditation for distance education, to bring awareness to member boards.

Massage Therapy Coalition – Charlene Russell, FSMTB President, gave an overview of the activities of the Massage Therapy Coalition over the past year.

Member Board Reports (continued)

FSMTB Vice President Robin Alexander facilitated the last section of member board reports.

The meeting was recessed for the day at 5:00 PM ET

Saturday, October 5, 2019

Reconvene 8:30 AM ET

Roll call

Delegate Name:

Keith Warren
Tracy Gilmore
Mlee Clark
Mark Dixon
Zen Mayhugh
Cary Bland
Christopher Brooks
Cindy King
Justin Kobbe Solace
Rebecca Saban
Barbara Lis
LeAnne Stevens
Brandy Madding
Sallye Raymond
Gwenda Harrison
Saskia Cote
Jodi Wiley
Jeffrey Miller
Brandy Mouser

State/Territory:

Alabama Board of Massage Therapy
Alaska Board of Massage Therapists
Arizona State Board of Massage Therapy
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Iowa Board of Massage Therapy
Kentucky Board of Licensure for Massage Therapy
Louisiana Board of Massage Therapy
Maryland State Board of Massage Therapy Examiners
Massachusetts Board of Registration of Massage Therapy
Michigan Board of Massage Therapy
Mississippi State Board of Massage Therapy
Missouri Board of Therapeutic Massage



Steve Carper
Deirdre Strunk
Julie Smith
ToniAnn Petrella-Diaz
Elizabeth Kirk
Jennifer Staska
Teresa Pollak
Kelli Lene
John Combe
Becca Cauffman
Elizabeth Rios
John Balleto
Jan Shaw
Bridget Myers
Marvis Burke
Lorraine Sroufe
Roger Olbrot
Dawn Hogue
Heidi Williams
Linda Lyter
Carla Hedtke

Nebraska Board of Massage Therapy
Nevada State Board of Massage Therapy
New Hampshire Advisory Board of Massage Therapists
New Jersey Board of Massage and Bodywork Therapy
North Carolina Board of Massage and Bodywork Therapy
North Dakota Board of Massage Therapy
Ohio State Medical Board
Oklahoma State Board of Cosmetology and Barbering
Oregon Board of Massage Therapists
Pennsylvania State Board of Massage Therapy
Puerto Rico Massage Therapy Board
Rhode Island Massage Therapy Examining Board
South Carolina Board of Massage/Bodywork Therapy
South Dakota Board of Massage Therapy
Tennessee Board of Massage Licensure
Texas Department of Licensing and Regulation
Utah Board of Massage Therapy
Virginia Board of Nursing
Washington State Board of Massage
West Virginia Massage Therapy Licensure Board
Wisconsin Massage Therapy and Bodywork Affiliated
Credentialing Board

The president announced that a quorum was established – 40

Operation Mississippi Delta

Dr. Debra Persinger, FSMTB Executive Director, presented information about the FSMTB effort to assist the Mississippi board in a project to improve education in the state that would consequently improve MBLEx pass rates.

Regulators working with Law Enforcement

Sandy Anderson (NV) discussed the relationship between law enforcement and the Nevada State Board of Massage Therapy. She reminded members of the need for executive directors to coordinate with law enforcement.

Executive Session Confidentiality

Mai Lin Noffke, FSMTB legal counsel, reminded delegates to seek advice from their member board counsel regarding sharing information from the executive session with member boards and discussing this information in a public venue. Noffke made it clear that the executive session content should not be shared in a public forum.



Facilitated Discussion – Establishment Licensing

Tom Ryan, FSMTB Director, facilitated a discussion on establishment licensing. Members asked questions and discussed current situations concerning establishment licensing in their jurisdictions.

Elections

Russell (president) introduced the tellers – Foad Araiinejad (AL), Kimberly Hodge (TN), Rhonda McManus (LA) – and turned the meeting over to Robin Alexander (vice president) who reviewed the candidate names and gave instructions to the delegates.

Election results for Board of Directors

David Cox (MD) and Charlene Russell (MS) were elected to the Board of Directors.

Point of order: John Combe (OR) requested a teller report of the vote count. Mai Lin Noffke, FSMTB legal counsel, indicated that each candidate received a majority of affirmative votes.

Awards and Recognition

Bolden presented service awards to Charlene Russell and David Cox for their work on the Board of Directors. An award was also presented to Charlene Russell for her work as President of the FSMTB.

Candidates for the 2020 nominating committee:

- Micheal Black (UT)
- Lydia Nixon (FL)
- April Whiting (NV)

Ballots were distributed and collected from the delegate assembly.

Micheal Black (UT), Lydia Nixon (FL), and April Whiting (NV) were elected to the 2020 nominating committee.

The meeting recessed for a break and reconvened at 11:00 AM ET.

Facilitated Discussion – CBD Oil

Ed Bolden facilitated a discussion on the legal ramifications of licensed massage therapists using or selling CBD oil in their practice. Delegates commented on how their jurisdictions are addressing this issue.

Facilitated Discussion - Deregulation

Ed Bolden facilitated a discussion of delegates who faced deregulation and its effects upon their respective boards.



Closing Remarks and Adjournment

Russell acknowledged the 2019 nominating committee – Bridget Myers (SD), Micheal Black (UT), and Lydia Nixon (FL) (not present).

Appreciation was given for the many volunteer applications, and members were encouraged to reach out to staff about committee work. Russell recognized Elizabeth Rios and Brenda as facilitators, thanking them for their contributions.

MOTION to adjourn.

Made by Mlee Clark (AZ) and seconded by Keith Warren (AL).

Motion to adjourn was adopted unanimously.

The 2019 annual meeting of the FSMTB adjourned at 11: 58 AM ET.



FSMTB

FEDERATION OF STATE
MASSAGE THERAPY BOARDS

ANNUAL REPORT

October 2019



MESSAGE FROM THE PRESIDENT

“Vision without action is merely a dream. Action without vision just passes the time. Vision with action can change the world.” Joel A. Barker

The vision that began so long ago has continued to be coupled with actions necessary for the progress we all desired. I am grateful to be part of the team, as a volunteer director, responsible for the consistent actions that bring that vision to life.

This 2019 Annual Report includes information on FSMTB’s programs, services, finances and communication efforts. The data is a clear indication of the focus and work our organization brings to the massage community. However, what the data does not show is the many hours of collaboration, coordination and intense planning that go into each and every decision made and project completed by those who believe in what we do by putting heart into every layer of the process.

The growth of the organization can be seen in the number of services offered, the enthusiasm of volunteers, and the expansion of our executive office to bring more services in house. These additions have allowed for improved efficiency, transparency, and accountability with the stamp of integrity we all hold dear. Every day we are working to identify new and improved ways to support the work of our member boards in regulation and public protection and affirm the value and importance of this organization. I believe open and honest communication is the key to reaching our goals, while working to collaborate with those who share our vision.

It has been an honor and a privilege to work with such a wide range of dedicated and caring individuals throughout the organization. Our success is Your success. With the ongoing support of delegates, committee volunteers, directors, staff and massage professionals nationwide, FSMTB is ready for the challenges and achievements ahead in 2020. I have no doubt that staying true to

our values and our mission will continue to lead us to positive growth, national standards, professional mobility, and a legacy of which we can all be proud.



Yours in service,
Charlene Russell
FSMTB President

FEDERATION OF STATE MASSAGE THERAPY BOARDS

The mission of the Federation is to support its Member Boards in their work to ensure that the practice of massage therapy is provided to the public in a safe and effective manner. In carrying out this mission, the Federation shall:

- Facilitate communication among Member Boards and provide a forum for the exchange of information and experience.
- Provide education, services, and guidance to Member Boards that help them fulfill their statutory, professional, public, and ethical obligations.
- Support efforts among Member Boards to establish compatible requirements and cooperative procedures for the legal regulation of massage therapists, in order to facilitate professional mobility, and to simplify and standardize the licensing process.
- Ensure the provision of a valid, reliable licensing examination to determine entry-level competence.
- Improve the standards of massage therapy education, licensure, and practice through cooperation with entities that share this objective, including other massage therapy organizations, accrediting agencies, governmental bodies, and groups whose areas of interest may coincide with those of Member Boards.
- Represent the interests of its Member Boards in matters consistent with the scope of the Bylaws.




NON-PROFIT ORGANIZATION

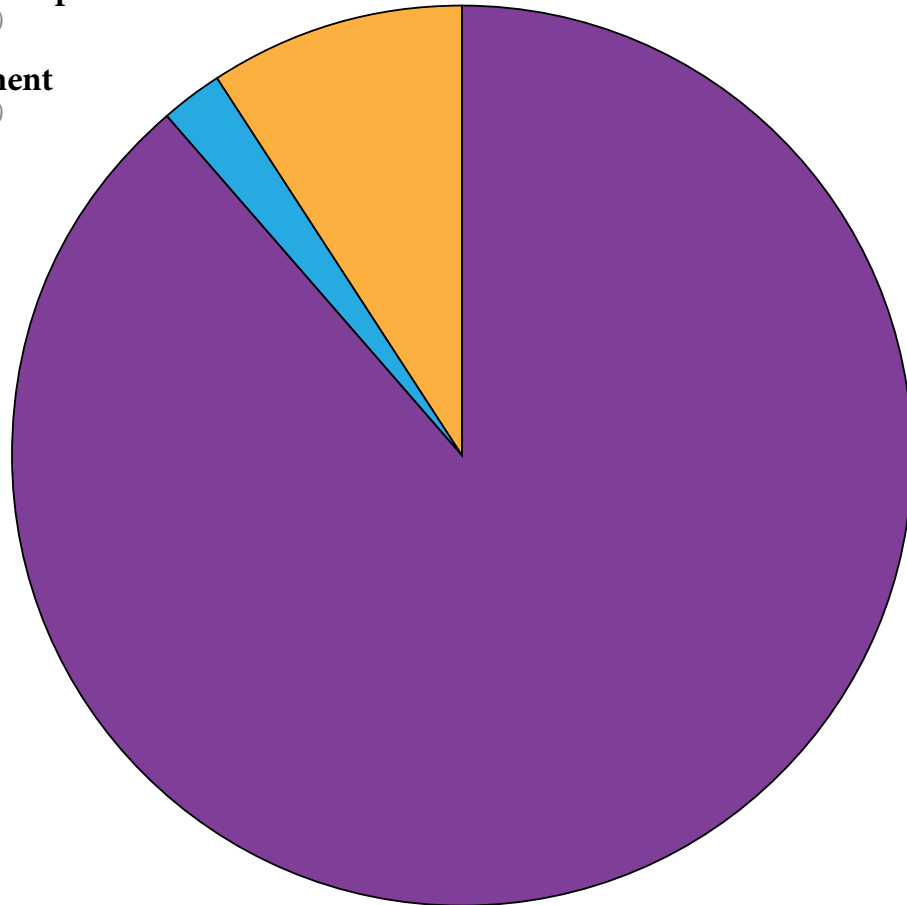
The FSMTB is a fully autonomous, non-profit organization. It operates under Section 501(c)(3) of the Internal Revenue Code. All revenue collected by the organization is used to enhance FSMTB programs; improve the quality of its examinations and services; and provide support to its Members in fulfilling their responsibility of protecting the public from unsafe practice.

FINANCE



INCOME* (JULY 1, 2018 – JUNE 30, 2019)





-  **Examination Services**
(\$5,142,000)
-  **Membership Services**
(\$139,000)
-  **Investment**
(\$519,500)

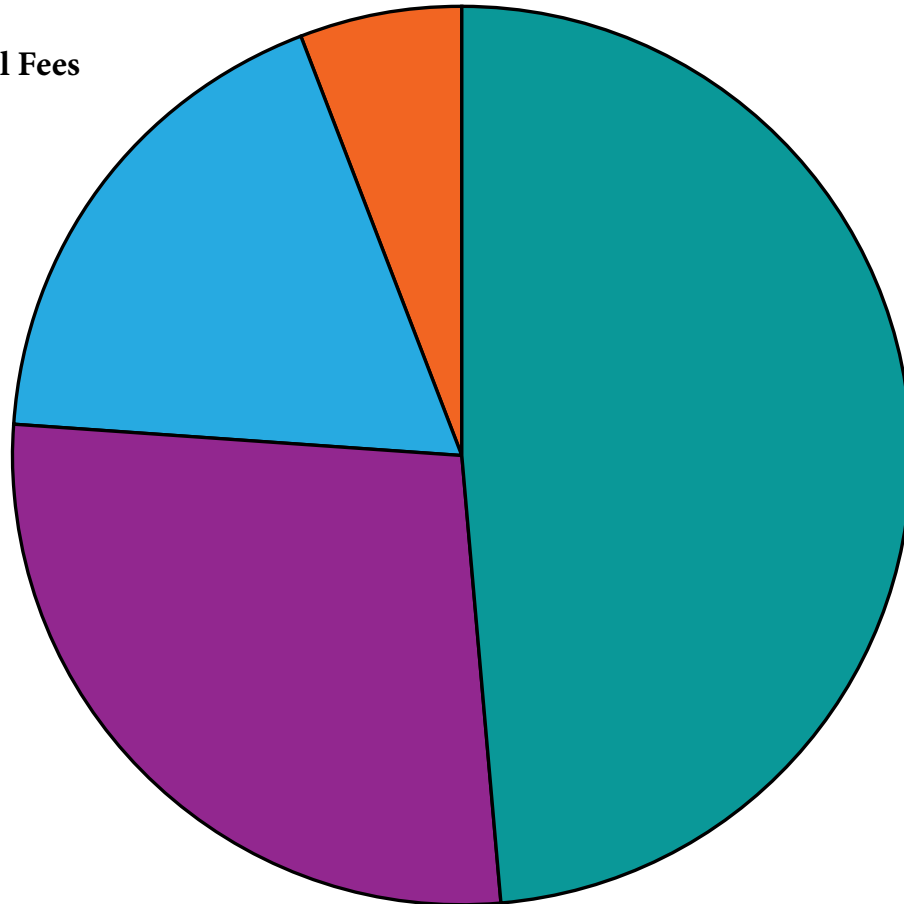


**Approximate/Unaudited*



EXPENSES* (JULY 1, 2018 – JUNE 30, 2019)

-  **Examination Fees**
(\$2,664,000)
-  **General Operating Expenses**
(\$1,516,000)
-  **Professional Fees**
(\$984,000)
-  **Travel**
(\$315,500)



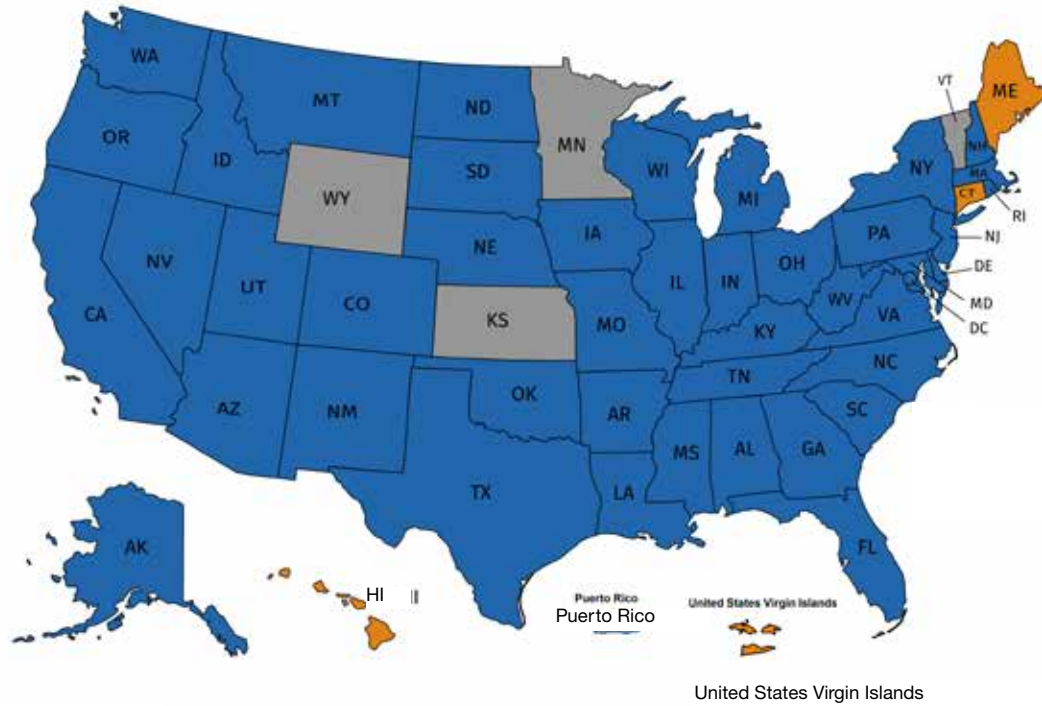
**Approximate/Unaudited*

PROGRAMS AND SERVICES





FSMTB MEMBERSHIP

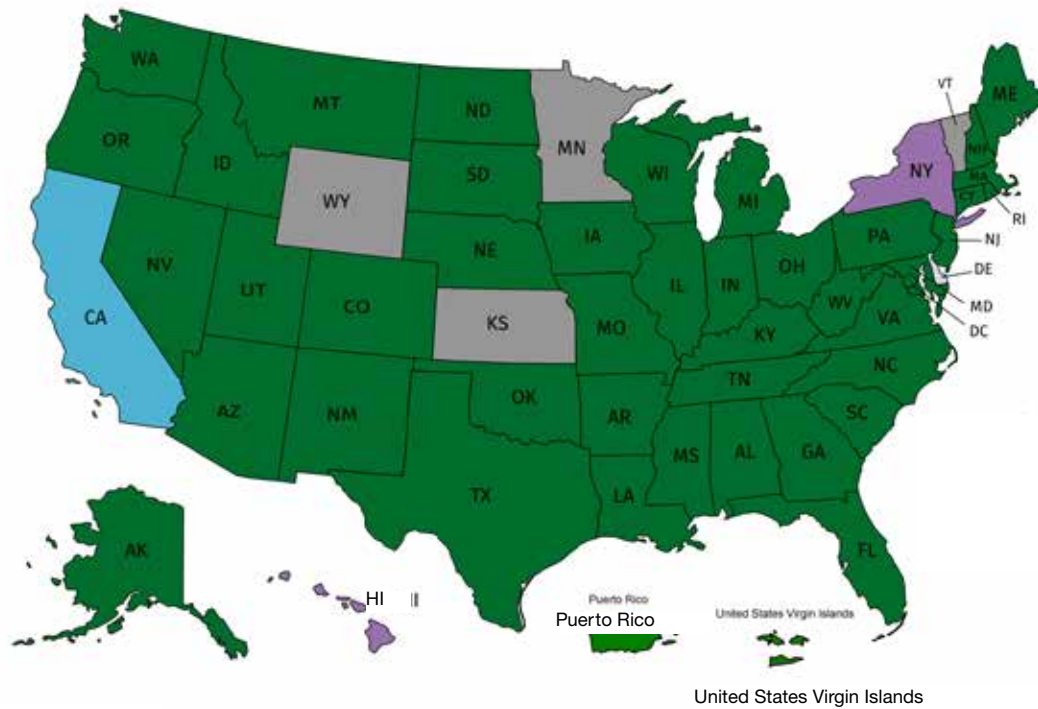


 **FSMTB Members**

 **Non-Member, Regulated**


 **Not Regulated**


MASSAGE & BODYWORK LICENSING EXAMINATION ADOPTION (AS OF JUNE, 2019)



 States and Territories
that use MBLEx

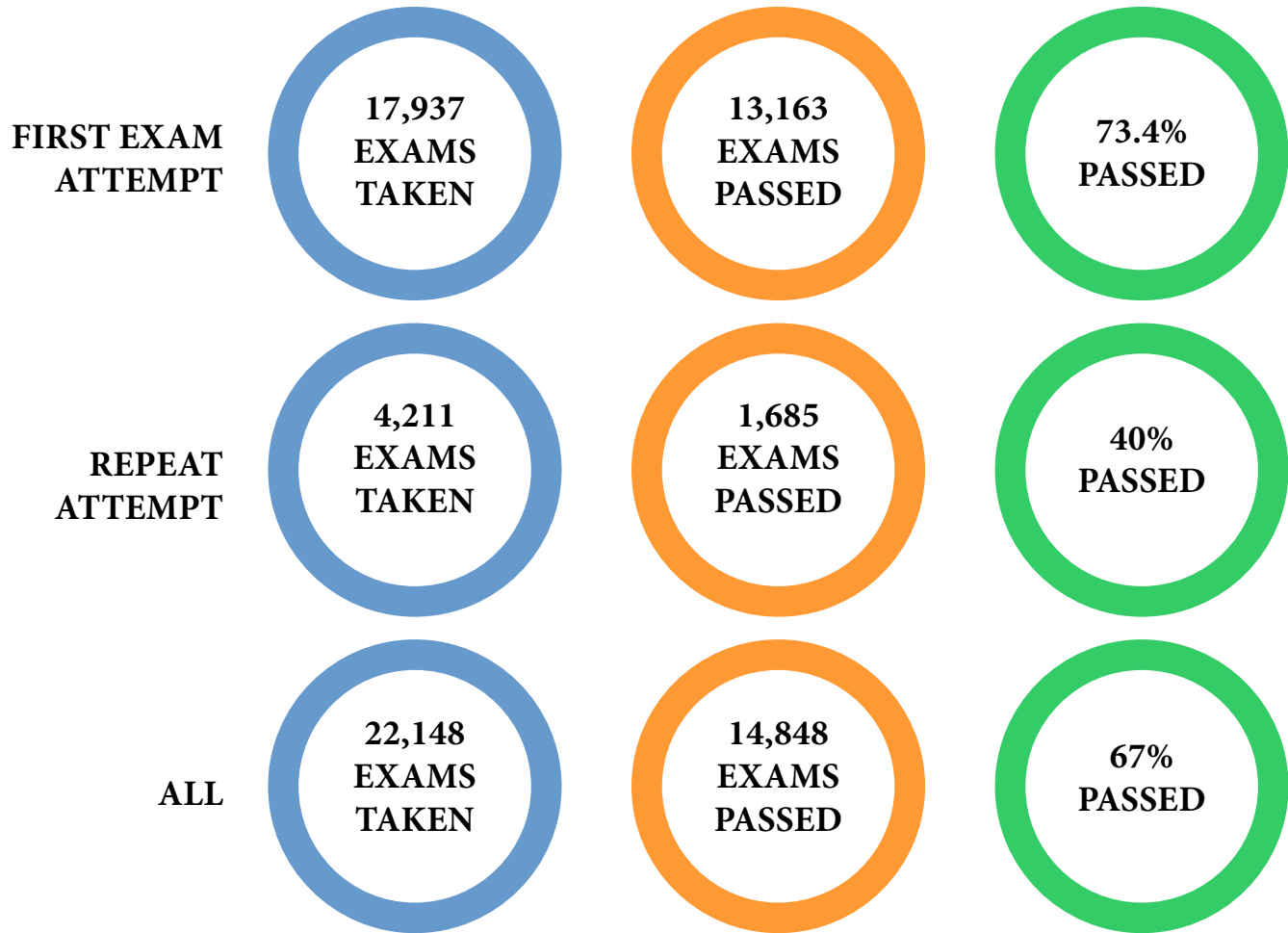
 Not Regulated

 States that do
not use MBLEx

 States that do not use
any exam

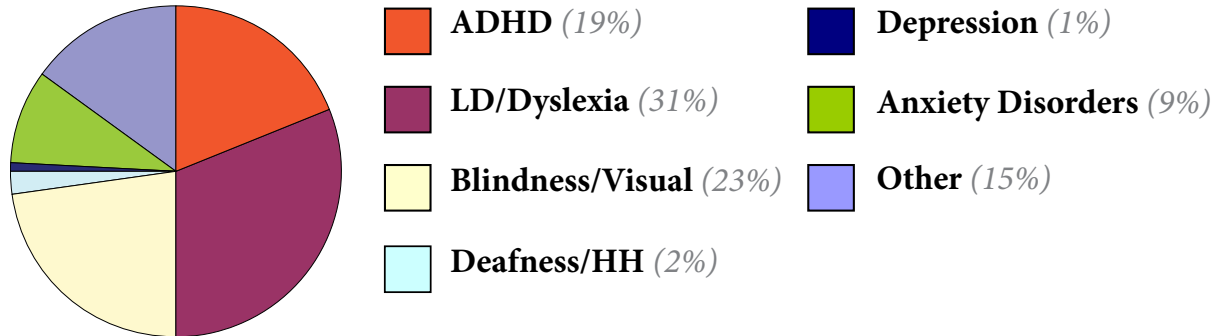


MBLEx PASS RATE (JULY 1, 2018 – JUNE 30, 2019)

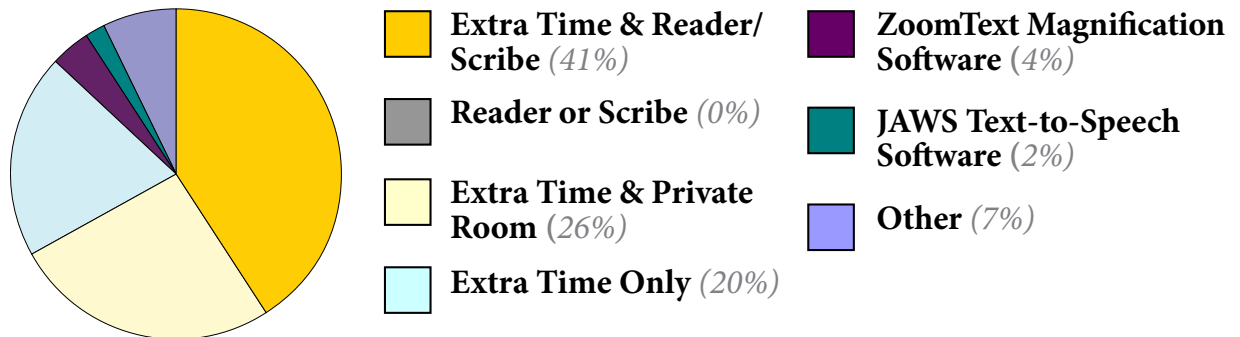


TESTING ACCOMMODATIONS

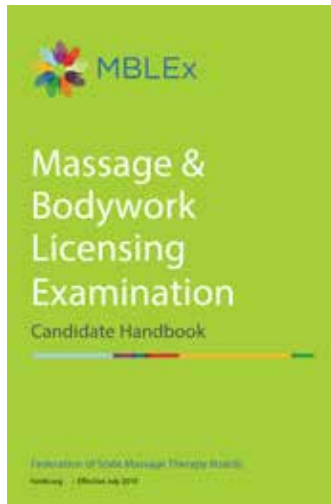
NATURE OF DISABILITY



TYPES OF ACCOMMODATIONS



The Federation of State Massage Therapy Boards (FSMTB) complies with federal laws regarding the Americans with Disabilities Act. FSMTB will consider requests from qualified candidates with a diagnosed disability for accommodations to take the Massage & Bodywork Licensing Examination (MBLEx) if the request is reasonable and properly documented and does not fundamentally alter the examination or jeopardize exam security. The costs for the accommodations are not passed on to the candidate. FSMTB supported 306 ADA applicant accommodations in this reporting year.



MBLEx CANDIDATE HANDBOOK

The latest edition of the MBLEx Candidate Handbook was published in July 2019. The Handbook is available electronically at fsmtb.org and paper copies are available free of charge to applicants and schools.

This year, FSMTB has mailed 12,258 FREE handbooks to schools and applicants.

MBLEx FEE INCREASE

It was announced that the Federation of State Massage Therapy Boards (FSMTB) is increasing the Massage & Bodywork Licensing Examination (MBLEx) fee from \$195 to \$265 beginning April 1, 2020. This is the first time in 13 years FSMTB has raised the fee for the examination.

The MBLEx fee covers application processing, transcript validation, provision of the examination at secure test centers and exam result reporting and storage. Behind the scenes, expenses include examination development as well as psychometric and legal defensibility. Additionally, FSMTB provides testing accommodations for those who qualify and MBLEx Candidate Handbooks to schools and candidates, all at no cost.

FSMTB remains dedicated to maintaining the quality and integrity of the MBLEx in the most cost-effective manner possible and supporting FSMTB member boards in their work to ensure the practice of massage therapy is provided to the public safely and competently.



FSMTB SCHOOL SUPPORT

The FSMTB School Support team assists administrative staff and faculty members from massage therapy training programs as they help their students with the process of becoming licensed massage therapists.

Education Record Center

The FSMTB Education Record Center continues to support state-approved massage therapy training programs with a quick and efficient process of submitting student education records for verification purposes.

Nine hundred and fifty two state-approved massage therapy training programs are registered to use the Education Record Center.

School Outreach

The FSMTB School Support team traveled to Dallas and Houston, TX; Charlotte, NC; Lansing, MI; San Francisco and Los Angeles, CA; and Seattle, WA to host information sessions entitled *MBLEx 411: FSMTB on the Road – Supporting Schools and Students*. These sessions included topics that cover an overview of FSMTB, MBLEx development and delivery, MBLEx application processing, using the Education Record Center, FSMTB support services for schools and students, and school issues and trends.

The School Support team also participated in several events, including the American Massage Therapy Association school summit in February and national convention in August, the Associated Bodywork & Massage Professionals school forum in April, the Northwest Career Colleges Federation Summit in May, and the Florida State Massage Therapy Association national massage congress in June.

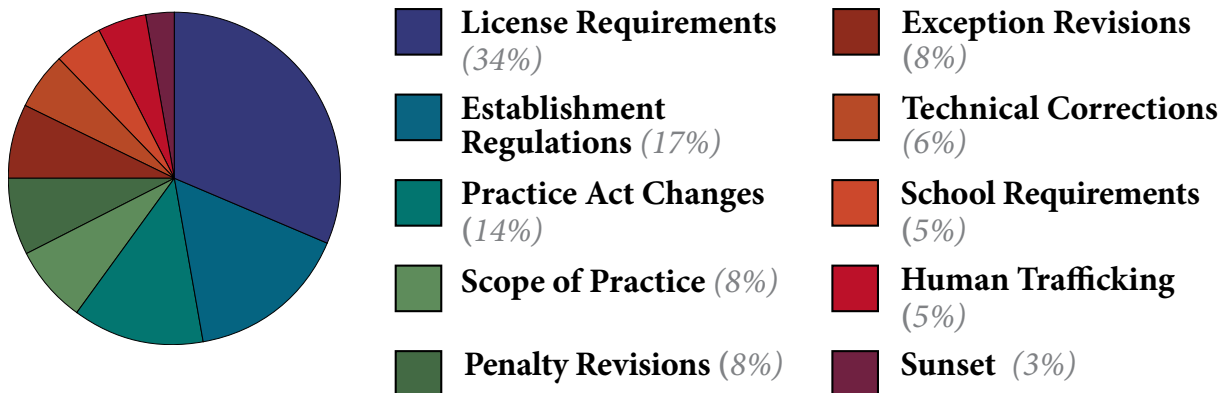
GOVERNMENT RELATIONS

Tracking proposed legislation related to the profession and sharing resources on state regulatory topics are two of the most important functions of the Government Relations team. Proposed legislation is tracked on a daily basis and where necessary, communications are established to support member boards. The FSMTB provides regulatory data to decisionmakers in an effort to ensure that all information is made available as part of the regulatory process.

FSMTB monitors for new or changing legislation that may affect the massage profession or FSMTB member boards. In the past year, the team tracked 97 pieces of legislation related to massage regulation across the US.

A majority of the legislation tracked addressed changes to license requirements for massage. The Government Relations department provides member boards with resources on state massage regulatory topics. This year, over 30 reports and other resources were shared with member boards on topics such as licensing requirements and establishment regulations. Member boards can request information at any time and can ask FSMTB representatives to attend a board meeting to present or answer questions about the other programs and services that the FSMTB has to offer.

LEGISLATION TOPICS TRACKED



MASSAGE THERAPY LICENSING DATABASE (MTLD)

The Massage Therapy Licensing Database (MTLD) is available for state boards and agencies to implement into your operations. FSMTB has procedures in place to assist each state with the participation process.

Benefits for Licensing Boards/Agencies

✓	Integrity of the massage therapy licensure process
✓	Central repository of therapist records
✓	Searching and reporting capabilities
✓	Easily accessible via fsmtb.org
✓	No cost to access MTLD
✓	Support license portability with quick and thorough verification of licensure in other states
✓	Secure data uploads and data encryption
✓	Access current and accurate information regarding licensed massage therapists in other states
✓	Improve efficiencies and increase capacity for board administrative staff to verify licensure details
✓	Provides a single source to enter and review board/disciplinary actions or licensee investigations to aid other state boards/agencies
✓	See completed continuing education credit provided by FSMTB CE Registry providers
✓	Facilitate enforcement decisions
✓	Assist staff in detecting fraud in licensure application documents
✓	Shows MBLEx Result Adjustments in a licensee record

Once a state is participating in MTLD, they are able to query the database to assist in the license application and renewal process.

In one secure place, designed specifically for state licensing boards, administrative staff can access:

- State licensing data;
- Education history;
- Board/disciplinary actions; and
- Professional continuing education from the FSMTB CE Registry of Providers.

CONTINUING EDUCATION REGISTRY

CE Registry is the facet of the national Massage Therapy Licensing Database (MTLD) that collects primary source documentation of the completion of acceptable Continuing Education courses across the country for use by state boards and agencies participating in MTLD to verify continuing education hours for license renewal. The CE Registry program is in place to meet the FSMTB mission of facilitating professional mobility and simplifying and standardizing the licensing and renewal processes. Last year multiple tests and revisions were performed, guided by state board representatives, and initial users were invited to register in the program. Multiple presentations were conducted at industry events and member meetings where questions about the program were answered for the public and state boards. The CE Registry is a solution that meets the needs of the regulatory community by:

1. Verifying primary source documentation of CE's in MTLD.
2. Supporting the authority of individual member boards to determine CE for license renewal.
3. Reducing the instance of CE fraud among licensees.
4. Protecting the licensees from predatory practices by CE providers.
5. Identifying and making transparent the providers that are not compliant with the standards established by the FSMTB membership.

The following states currently have regulatory language to accept courses from providers in CE Registry. State regulatory boards determine if continuing education hours recorded in MTLD meet their requirements for license renewal.

Alabama	Kentucky	New Mexico
Arkansas	Maryland	Oregon
District of Columbia	Missouri	Oklahoma
Idaho	Montana	Tennessee
Illinois	New Hampshire	Virginia
Iowa	New Jersey	Wisconsin



REGULATORY EDUCATION AND COMPETENCE HUB (REACH)

The North Carolina Board of Massage and Bodywork Therapy (NCBMBT) requested the assistance of FSMTB to develop disciplinary courses to address some of the matters that most commonly come before the board regarding licensee conduct. FSMTB custom developed three courses: Client Intake Communication, Client Assessment & Documentation, and North Carolina Laws & Rules for Client Assessment and Documentation. The Client Intake Communication and Client Assessment & Documentation courses will be available for utilization by all of our member boards. These courses will be available through the Regulatory Education and Competence Hub (REACH).

MEMBER BOARD EXECUTIVE SUMMIT

The 3rd Annual Member Board Executive Summit was held in Cleveland, Ohio. The summit was attended by 34 people, representing 24 member boards. This event is offered as a member benefit to provide massage board staff executives opportunities for professional development and networking with other state board colleagues.

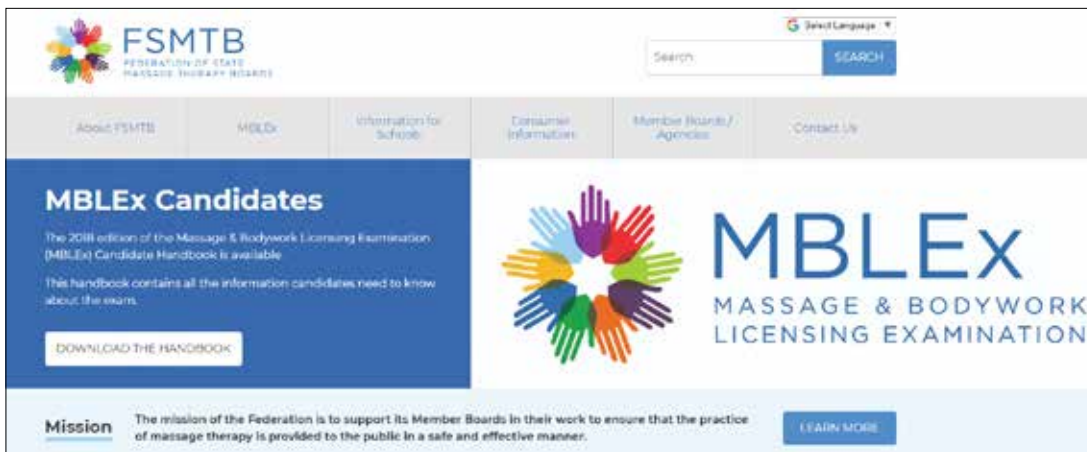
COMMUNICATIONS



WEBSITE

The FSMTB website, fsmtb.org, remains the foremost resource for individuals seeking information about FSMTB and the MBLEx.

During the past year, the website hosted over 785,000 page views, which is a nearly five percent increase when compared to the prior year.



SOCIAL MEDIA

FSMTB shares organizational news and regulatory information with the profession via its social media presence. In the past year, FSMTB saw a nearly five percent growth in Facebook followers, and a 25 percent growth in Twitter followers.

Follow FSMTB on all of your preferred social media channels:



facebook.com/fsmtb



twitter.com/fsmtb



linkedin.com/fsmtb



[Youtube.com The FSMTB](https://Youtube.com/TheFSMTB)

NEWSLETTERS

FSMTB's two monthly newsletters, *In Touch with FSMTB* and *In Touch with Education*, provide the regulatory community and educators, respectively, with timely updates. In 2018, the format of both newsletters was revised to enhance readability.



FSMTB 2019 Annual Meeting

Mark your calendars!

The FSMTB 2019 Annual Meeting will be held on October 3-5, 2019 in Atlanta, Georgia. Who will serve as your voting delegate? Member registration will open July 1.



MBLEx Timing

Each MBLEx candidate will schedule a two-hour (120 minutes) appointment with Pearson VUE to take their examination. Of that time, up to **five minutes** is allotted for the completion of a demographic survey; up to **five minutes** is allotted for the security and confidentiality agreement; and **110 minutes** is allotted for the completion of the exam. Any minutes remaining from the pre-exam modules are **not** carried over and **do not** add to the exam time. Please consult the MBLEx [Candidate Handbook](#) for further details.



Amazon Smile

You can support FSMTB when you shop at smile.amazon.com. Select the Federation of State Massage Therapy Boards as your charity of choice, and Amazon will make a donation based upon your total purchase.



VOLUNTEERS



VOLUNTEERS

Volunteers remain integral to carrying out the mission of FSMTB. Our volunteers come together from across the United States to serve on task forces, committees and in leadership roles. April is National Volunteer Month, and during that time, FSMTB staff created videos to post on social media, sharing gratitude for our volunteers. To each person that gives their time, insight and passion to our organization to support smart massage therapy regulation and public protection, we thank you.





2018-2019 FSMTB BOARD OF DIRECTORS

PRESIDENT

CHARLENE RUSSELL

Mississippi State Board of Massage Therapy
(former)
crussell@fsmtb.org

VICE PRESIDENT

ROBIN ALEXANDER

Louisiana Board of Massage Therapy
ralexander@fsmtb.org

TREASURER

DAVID COX

Secretary/Treasurer of the Maryland State
Board of Massage Therapy Examiners
dcox@fsmtb.org

DIRECTOR

VICTORIA DRAGO

Florida Board of Massage Therapy
vdrago@fsmtb.org

DIRECTOR

CRAIG KNOWLES

Chair, Georgia Board of Massage Therapy
cknowles@fsmtb.org

DIRECTOR

DIANNE LAYDEN

North Carolina Board of Massage
and Bodywork Therapy
dlayden@fsmtb.org

DIRECTOR

TOM RYAN

Administrator of the Division of Legal
Services and Compliance, Wisconsin
Department of Safety and Professional
Services
tryan@fsmtb.org

IMMEDIATE PAST PRESIDENT

ED BOLDEN

Tennessee Board of Massage Licensure
ebolden@fsmtb.org

EXECUTIVE DIRECTOR

DR. DEBRA PERSINGER

dpersinger@fsmtb.org

VOLUNTEER COMMITTEES AND TASK FORCES

COURSE DEVELOPMENT ADVISORY PANEL

Ed Bolden, Board Liaison | Tennessee Board
of Massage Licensure

Adam Baritot | New York

Marcela Collins | Florida/Tennessee Board
of Massage Licensure (*former*)

Samantha Lucatero | Texas

Halley Moore | Missouri

Robert Phillips IV | Texas

Susan Salvo | Louisiana

Lori Vargas | Illinois

CE REGISTRY REVIEW PANEL

Denise Barker | North Carolina

David Gonzalez | Florida

Monique Gray | California

ELIGIBILITY REVIEW PANEL

Lance Gilliland, Chair | Alabama Board
of Massage Therapy

Craig Knowles, Board Liaison | Georgia
Board of Massage Therapy

Micheal Black | Utah Board of
Massage Therapy

Tamara Leach | Montana Board
of Massage Therapy

EXAMINATION DEVELOPMENT COMMITTEE

Ed Bolden, Board Liaison
Tennessee Board of Massage Licensure

Sarah Albanawi | Virginia

Karen Armstrong | Michigan Board of
Massage Therapy (*former*)

Tara Barrett | Pennsylvania

Su Bibik | Michigan

Vickie Branch | New Hampshire Advisory
Board of Massage Therapists (*former*)

Fran Candelaria | Indiana

Laurie Craig | Georgia

Alexander Dale | California

Rosendo Galvez | Illinois

Jimmy Gialelis | Arizona

Jacque Hungerford | Texas

Maria Leonard | Minnesota





Bethany Lowrie | Pennsylvania
 Jeff Mahadeen | New Hampshire Advisory
 Board of Massage Therapists
 Wendy McGinley | North Dakota Board
 of Massage (*former*)
 Bethann Olsavsky | Illinois
 Ceena Owens | Kansas
 Charlotte Phillips | Vermont
 Drew Riffe | Texas
 Jill Sanders | Oregon
 Elan Schacter | North Carolina
 Cherie Sohnen-Moe | Arizona
 Tracy Sullivan | Connecticut
 Charles Watson | Nebraska

EXAMINATION POLICY COMMITTEE

Caroline Fox Guerin, Chair | Texas Massage
 Therapy Advisory Board
 Ed Bolden, Board Liaison | Tennessee Board
 of Massage Licensure
 Kim Adams-Johnson | Nebraska Board
 of Massage Therapy
 Sandy Anderson | Nevada State Board
 of Massage Therapy
 Emmanuel Bistas | Illinois Department
 of Financial & Professional Regulation

Michael Eayrs | Montana Board of Massage
 Therapy (*former*)
 Gwenda Harrison | Maryland State Board
 of Massage Therapy Examiners

FINANCE COMMITTEE

David Cox, Chair | Maryland State Board
 of Massage Therapy Examiners
 Sandy Anderson | Nevada State Board
 of Massage Therapy
 Micheal Black | Utah Board of
 Massage Therapy
 AJ Groeber | Ohio State Medical Board
 Keith Warren | Alabama Board of
 Massage Therapy

LICENSE RENEWAL COMMITTEE

Becky Cauffman, Chair | Pennsylvania State
 Board of Massage Therapy
 Victoria Drago, Board Liaison | Florida Board
 of Massage Therapy
 Karen Armstrong | Michigan Board of
 Massage Therapy (*former*)
 Micheal Black | Utah Board of
 Massage Therapy
 Earl Duskey | Arizona State Board
 of Massage Therapy

Karen Fink | Ohio State Massage Therapy
Advisory Committee

Joe Frazer | New Hampshire Advisory
Board of Massage Therapists

Lance Gilliland | Alabama Board
of Massage Therapy

Barbara Lis | Indiana State Board
of Massage Therapy

Denise Logsdon | Kentucky Board of
Licensure for Massage Therapy

Wendy McGinley | North Dakota Board
of Massage (*former*)

Jan Shaw | South Carolina Board of
Massage/Bodywork Therapy

NOMINATING COMMITTEE

Micheal Black, Chair | Utah Board of
Massage Therapy

Bridget Myers | South Dakota Board of
Massage Therapy

Lydia Nixon | Florida Board of
Massage Therapy

POLICY COMMITTEE

Tiffany Gennety, Chair | Michigan Board
of Massage Therapy

Dianne Layden, Board Liaison | North
Carolina Board of Massage and Bodywork
Therapy

Jamie Corey | Pennsylvania State Board of
Massage Therapy

Linda Lyter | West Virginia Massage Therapy
Licensure Board

Kama Monroe | Florida Board of
Massage Therapy



NOTES







FSMTB

FEDERATION OF STATE
MASSAGE THERAPY BOARDS

Federation of State Massage Therapy Boards
7300 College Boulevard, Suite 650
Overland Park, KS 66210
www.fsmtb.org



FSMTB

FEDERATION OF STATE
MASSAGE THERAPY BOARDS

Annual Report

October 2020

MESSAGE FROM THE PRESIDENT

Over the past year, FSMTB began with a plan to continue on-going projects, provide quality service to our members, and look for new ways to improve our organization while celebrating 15 years of growth and success. Last year we said we were ready for the challenges and achievements ahead. However, we had no idea what this year really had in store for us all.

This 2020 annual report portrays our accomplishments and the steadfast progression toward meeting the needs of all members. The initiatives you'll read about in this report, along with excellent customer service, prove our dedication to massage therapy, the preparation of emerging professionals, and our duty for public protection.

The value of the work being done each day by our members and volunteers to regulate and enforce public protection is appreciated at all levels. We look forward to another 15 years of collaborative effort and accomplishments. On behalf of the board of directors, I thank you for the passion you exemplify for the profession, its regulation, and the push to move forward together.



Yours in Service,
Charlene "Charlie" Russell
FSMTB President

MISSION STATEMENT

The mission of the Federation is to support its Member Boards in their work to ensure that the practice of massage therapy is provided to the public in a safe and competent manner. In

carrying out this mission, the Federation shall:

- » Facilitate communication among Member Boards and provide a forum for the exchange of information and experience.
- » Provide education, services, and guidance to Member Boards that help them fulfill their statutory, professional, public, and ethical obligations.
- » Support efforts among Member Boards to establish compatible requirements and cooperative procedures for the legal regulation of massage therapists, in order to facilitate professional mobility, and to simplify and standardize the licensing process.
- » Ensure the provision of a valid, reliable licensing examination to determine entry-level competence.
- » Improve the standards of massage therapy education, licensure, and practice through cooperation with entities that share this objective, including other massage therapy organizations, accrediting agencies, governmental bodies,

and groups whose areas of interest may coincide with those of Member Boards.

- » Represent the interests of its Member Boards in matters consistent with the scope of the Bylaws.

NON-PROFIT ORGANIZATION

The FSMTB is a fully autonomous, non-profit organization. It operates under Section 501(c)(3) of the Internal

Revenue Code. All revenue collected by the organization is used to enhance FSMTB programs; improve the quality of its examinations and services; and provide support to its Members in fulfilling their responsibility of protecting the public from unsafe practice.

PRESIDENT'S REPORT

While preparing this report to be digitized, in place of presenting to you in person, I am saddened to think about the wonderful interactions with volunteers and delegates we will miss this year due to the cancellation of the 2020 Annual Meeting.

Our time together sharing thoughts, concerns, achievements, best practices, meals and free time is always a highlight of the year. However, not being able to meet in person has not stopped you or the Federation from continuing to address the mission and visions we all share. Those of you chosen by your states to serve as voting delegates in the annual governing member election, to be a voice for your people - Thank You!

ACKNOWLEDGMENTS

I would like to take a moment to extend heartfelt gratitude to the many amazing volunteers participating on the FSMTB committees, subject matter experts offering years of experience and insight, and dedicated state board members and staff

who contribute to setting standards for entry level practice, regulation of massage, and protection of the public. The Federation succeeds because of you.

I would also like to thank the Board of Directors and committee chairs for providing leadership and guidance throughout the year. I extend a special thank you to my fellow FSMTB officers, Vice President Craig Knowles and Treasurer David Cox, who willingly stepped up and led our team through unprecedented times while I was addressing personal matters at home.

On behalf of the Board of Directors and fellow volunteers of the Federation, I would like to express our sincere appreciation for our executive director, Dr. Debra Persinger, and the amazing staff members who always take such good care of FSMTB. This year they went above and beyond by continuing to meet the daily needs of the organization, connecting our members during a national quarantine, reassuring candidates, and juggling the personal needs of each staff member and their families with the utmost care and compassion. I would also like to acknowledge our support teams who provide great service in the technical, legal and professional aspects needed on each project throughout the year.

THE YEAR IN REVIEW

The organization and its members have continued to persevere through the many speed bumps and detours that the COVID-19 pandemic set in front of us. Everyone continued the drive for efficiency, transparency and integrity while finding ways to uphold the laws AND inspire compassion and understanding for those we all serve.

Massage therapists collectively work to provide a way for so many to heal. In order for those healers to practice, FSMTB and its members must work together to ensure each step of the licensing process is available. Services provided by the Federation have addressed each part of that process while working to set standards and recognize best practices. We continue to be stronger together. And the next 15 years have a strong foundation upon which to build.

I believe this year has given us a great example of what we may need to address and/or change regarding education, teaching methods, and regulatory guidelines. Increasing our awareness, having the difficult discussions, continuing to communicate in different ways, and setting examples for best practices and standards for the regulation of massage will serve us all well.

PERSEVERANCE

We are also nearing the end of our current strategic plan. The Board of Directors is in the process of evaluating, discussing, and creating priorities for the next few years. We understand that the road map has changed a bit; that 2020 dealt each of us, the nation, and the world, obstacles we may not have been prepared to overcome. But as a resident of a state frequented by hurricanes and natural disasters, I have been humbled by the power of the storms that push us down ... and inspired by the people around us who sacrifice to pull us up. I continue to be humbled by those of you who have survived this year with strength and grace, and I am inspired by those of you who have persevered – not just for yourselves, but for those you serve.

Over the next few months the Board of Directors will evaluate our place on the map and envision the right path and the right tools and resources to deal with any future obstacles. We have all learned a valuable lesson. Plan for anything. Be prepared for everything.

Believe in each other, and fill the world with compassion and mindfulness. Our future is what we make it!



In Service,
Charlene "Charlie" Russell



15-Year Anniversary

Milestones • Past Presidents • Special Thanks

ANNIVERSARY MESSAGE FROM THE 2020 PRESIDENT

As soon as the annual meeting ends each year, delegates and volunteers travel home to continue work in their home states.

The Board of Directors and staff of FSMTB immediately begin preparing for the year to come, electing officers, gathering feedback from attendees, appointing committees, and planning the next Annual Meeting.

We intended to celebrate our 15 year anniversary in 2020 by acknowledging the hard work and accomplishments that led to the exponential growth of an organization once housed in an Overland Park home basement, funded and fed by dreams of many who believed in a future filled with potential.

The Federation membership envisioned some enterprising and bold accomplishments – a future where standards would be created and agreed upon to ensure emerging professionals were competent to practice; where volunteers would provide expertise in subject matter areas and a rigorous review process to ensure a valid and psychometrically sound national licensure exam; where states would come together to face the obstacles affecting licensees in their jurisdictions while ensuring proper and adequate protection of the public; and a future where all entities and organizations with a mission and vision for the massage community would unite to create, support and

promote common standards and goals. We planned to rejoice with our members and supporters in the fact that we have experienced that “future” and are well on the path to accomplishing these lofty goals.

Nelson Mandela said, *“It always seems impossible until it’s done.”*

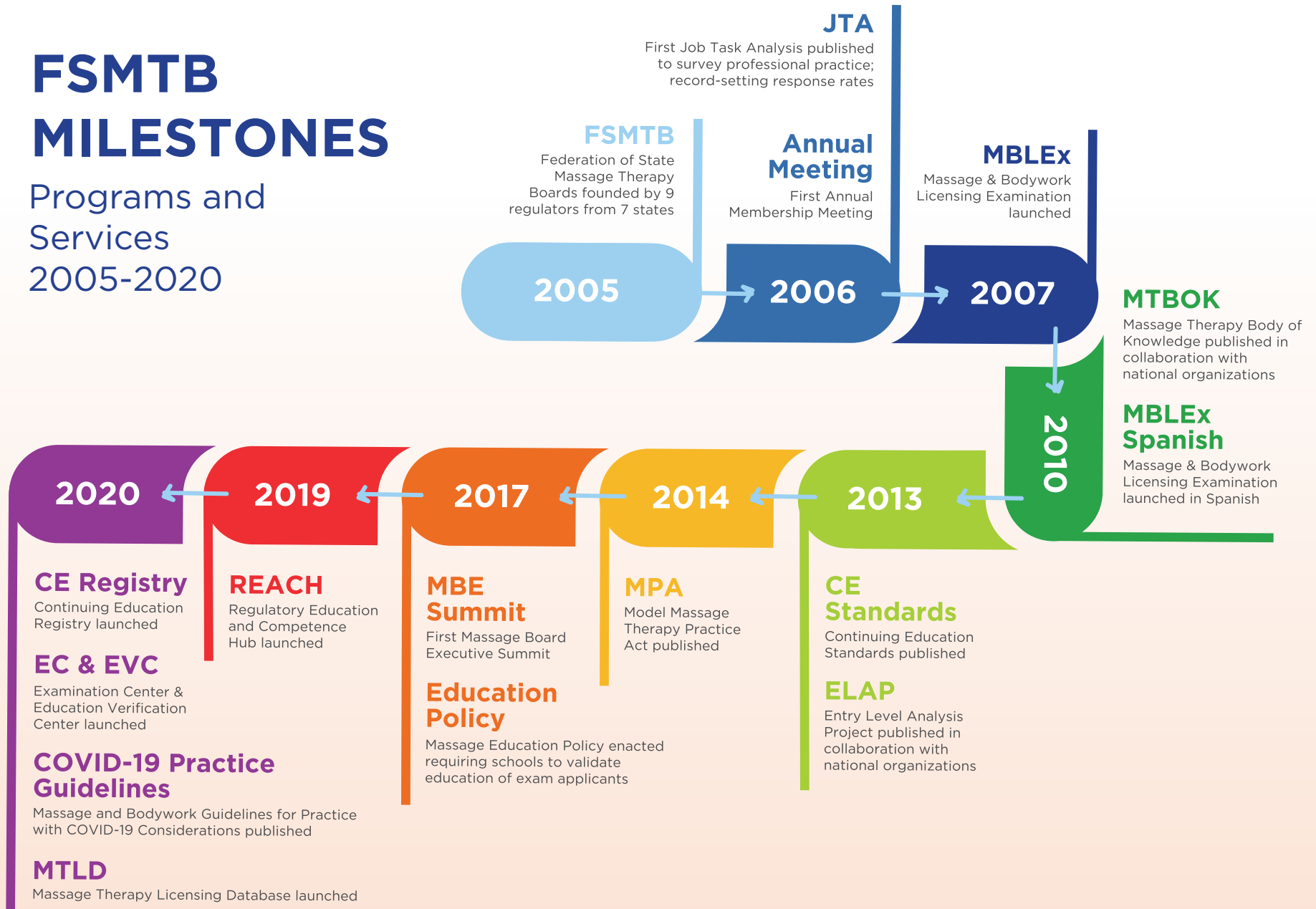
I would like to thank everyone, who over the last one and a half decades, has poured their hearts and souls into creating and supporting this strong, empowering organization of big dreamers and hard workers known as the Federation of State Massage Therapy Boards. At 15 years of age, the human body undergoes a metamorphosis of sorts. Supercharged growth and development. We should look at our mission and plan to move forward with similar growth and development. We are no longer a “new” organization. We must now enter the next phase of expanded growth and vision.



In Service,
Charlene "Charlie" Russell
President 2019-2020

FSMTB MILESTONES

Programs and
Services
2005-2020



ANNIVERSARY MESSAGES FROM PAST PRESIDENTS

FSMTB was formally conceived in May 2005, when a group of educators, regulators and association leaders came together to discuss the needs of our profession! That

group had a united vision for the future of massage ... one of portability and/or reciprocity of licensure between the states and territories to create a more fluid and hospitable profession!

Over the past 15 years, FSMTB has put in place the framework to make that vision a reality! However, that alone is not enough! To truly achieve the goal of license mobility, the professional organizations, states and professionals must be united as well! As we near the end of 2020, where we have seen so much division, I call upon this profession to look past our differences of opinion and perspective and once and for all come together to finalize and implement practice act language that will allow our therapists the ease of movement between states that our future necessitates!

Congratulations FSMTB on 15 years of hard work, dedication and commitment to massage! I truly look forward to seeing what we can accomplish as a united profession over the next 15 years!

Patty Glenn

Founding President, 2006-2008

Happy 15th anniversary FSMTB! A huge Thank You to all that have served on the board of directors, task forces and committees in support of FSMTB and the state regulatory boards. I look forward to what the next 15 years will bring.

Kevin Snedden

President, 2009-2011

I am awestruck at the progress made by FSMTB.

What started as wishful thinking, hopeful dreams, and spirited visions has now become the new reality for the massage profession. I am so proud and truly grateful for the FSMTB leadership team, all member state boards and staff for their passion to unite and create the much needed resources to assist state boards to better serve their communities.

Kathy Jensen

President, 2012

ANNIVERSARY MESSAGES FROM PAST PRESIDENTS

FSMTB, Debra, and staff! Fifteen years is quite an accomplishment on its own, not to mention all the programs, problems, and educational opportunities that have been initiated, or instigated LOL, on behalf of the State Boards. The MBLEx and all the associated guides and practice tests, as well as its constant security and updating questions, is an absolute marvel. Though you may leave the position of the President, the FSMTB, the people, the friendships, and the experiences are forever embedded within you.

Dennis Beye
President, 2014

The success of FSMTB is a testament that teamwork pays off. The partnership between the board of directors, the staff, and the valuable volunteers is driven by the core values of people, integrity, transparency, and accountability. Ideas have become reality with strong leadership and progressive thinking. Watching the growth and accomplishments of FSMTB in 15 short years is nothing less than astonishing. I'm proud to have served the FSMTB community and continue to volunteer for this dynamic organization.

Karen Armstrong
President, 2014-2016

I stand in awe when I contemplate the past fifteen years of services that the Federation of State Massage Therapy Boards has given to our Member Boards. I am so proud of the strong culture of organizational ethics and integrity that has piloted the organization to its unspoken philosophy of “doing the right thing because it’s the right thing to do.” It would be easy to attribute the Federation’s ongoing success to our long-standing history of strong leadership and generous volunteerism; however, we would we would be extremely remiss if we failed to acknowledge the dedication and expertise of Dr. Debra Persinger and her extraordinary staff that brilliantly direct the day-to-day operations of the organization, while continuously fostering a caring and supportive community for everyone associated with FSMTB.

Ed Bolden
President, 2017-2018

SPECIAL THANKS

The FSMTB is deeply and profoundly grateful to work with an outstanding group of professionals who have provided dedicated volunteer service to the regulatory community for 15 years. From the initial development of the Massage & Bodywork Licensing Examination through to the present day, the psychometric defensibility of the examination is due in large part to the expertise, care, and dedication of the following members of the examination development committee.

Thank
you

- » Su Bibik - *Michigan*
- » Laurie Craig - *Georgia*
- » Maria Leonard - *Minnesota*
- » Jeff Mahadeen - *New Hampshire*
- » Charlotte Phillips - *Vermont*
- » Jill Sanders - *Oregon*
- » Elan Schacter - *North Carolina*
- » Cherie Sohnen-Moe - *Arizona*

We value their experience and proficiency in ensuring the exceptional quality of the national licensing examination and we are so fortunate to have them as valued members of the Federation family.



Finance

JULY 1, 2019 – JUNE 30, 2020

REPORT FROM THE TREASURER

Thank you to the members of the finance committee. We appreciate your service and skills to help the Federation with fiscal accountability to our members. The committee convened early in 2020 to meet with the auditors, accountants and investment advisors and to work on the budget for the 2020-2021 fiscal year.

SNAPSHOT OF THE 2019-2020 FISCAL YEAR

We had approximately a \$2.5 million projected budget deficit for the year and I am happy to report that it did not come to fruition, primarily due to a reduction in legal fees and travel. We had a \$63,000 surplus, resulting in \$2.56 million more than expected. We typically project the budget lower on the side of revenue and higher on the side expenses and we worked closely with the finance committee to get as close to actual projections as possible for this current fiscal year. However, the financial ramifications of the COVID-19 pandemic sent every expectation awry.

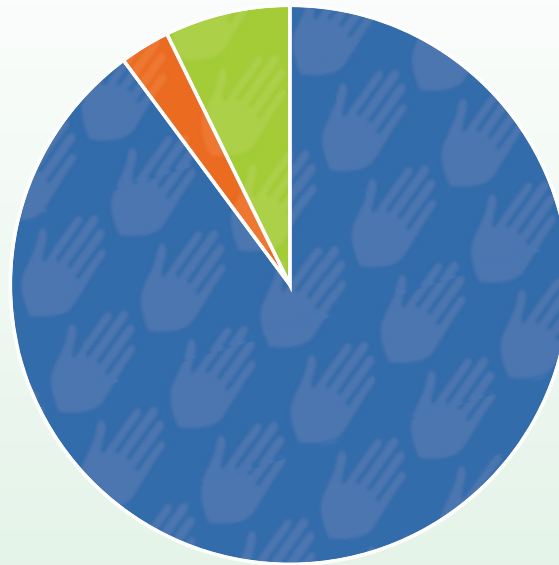
FSMTB successfully secured a federal government loan of approximately \$176,000 in response to the global pandemic. This offset the lack of revenue when testing was shut down across the nation. Though our income was significantly less than anticipated, an even greater reduction in expenses resulted in a small, though welcome surplus.

- » **TOTAL ASSETS:** \$14.0 million
(cash and investments)
- » **INCOME:** \$4.16 million
(fees and dues)
- » **EXPENSES:** \$4.01 million *(exam, general operating, professional fees, travel)*
- » **SURPLUS:** \$63,000
- » **BUDGET:** \$2.5 million (loss/negative)
- » **ACTUAL:** \$2.56 million more than expected

**Approximate/Unaudited*

REVENUE

Our actual revenue was less than the projected revenue that was budgeted for the fiscal year. From the ratio of revenue, exam fees account for 90% of our revenue that gets disbursed among all FSMTB services for our members.



Revenue*

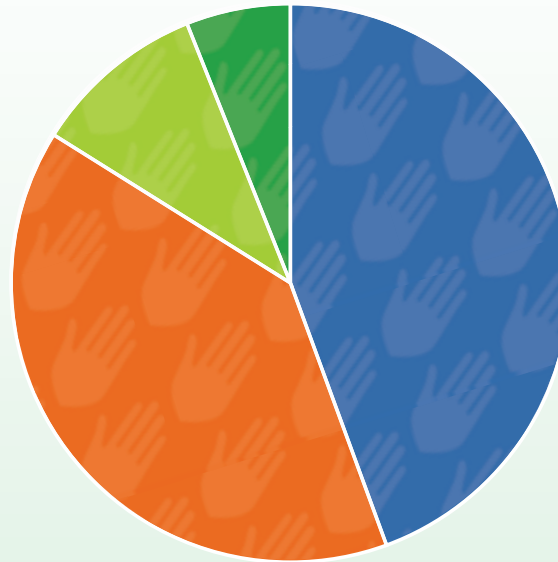
JULY 1, 2019 - JUNE 30, 2020

- Exam (\$3,492,000)
- Membership (\$98,700)
- Investment (\$284,800)

**Approximate/Unaudited*

EXPENSES

The total expenditures for the year were less than the projected expenses that were budgeted. Our exam fees account for 45% of our expenses, professional fees dropped from 18% last year to 10% this year, primarily due to reduced litigation costs; general operating expenses increased from 27% last year to 39%, primarily due to bringing exam processing services in-house; and travel increased by a percent to 6%.



Expenses*

JULY 1, 2019 - JUNE 30, 2020

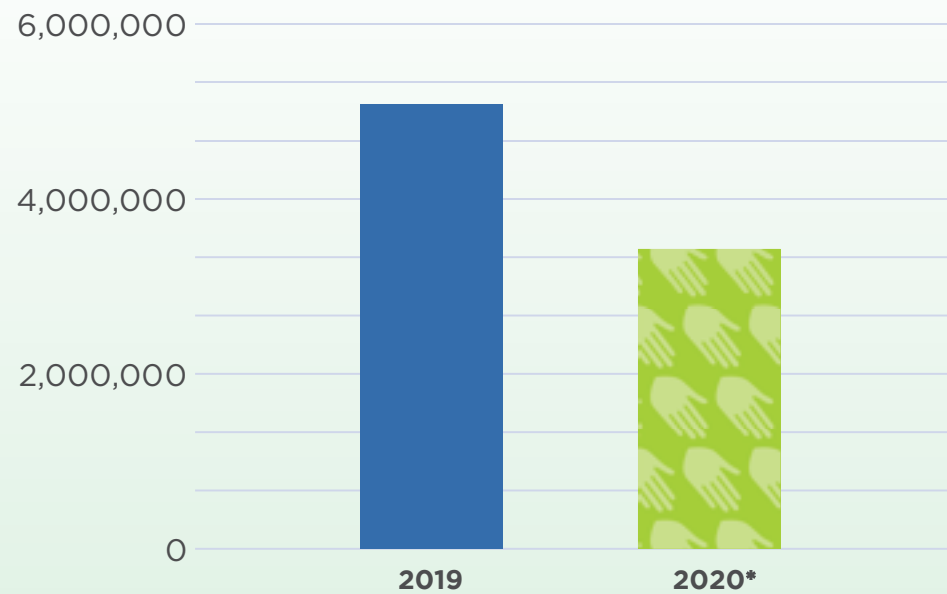
- Exam (\$1,826,000)
- General Operating (\$1,603,000)
- Professional Fees (\$421,000)
- Travel (\$284,000)

**Approximate/Unaudited*

REVENUE

The bulk of our revenue comes from exam fees. The following chart shows a comparison of 2020 revenue with the prior year. We saw a significant dip in 2020 due to national test centers being shut down in response to the COVID-19 pandemic.

Exam Revenue 2019-2020 Comparison



**Approximate/Unaudited*

EXPENSES

Looking at this year's expenditures compared to last year, while the exam fees went down in parallel with lower candidate volume, we worked hard to control costs where we could. The bulk of the reduction in expenses from last year to this year is due to professional legal fees when we were in active litigation.



Expenses 2019-2020 Comparison



**Approximate/Unaudited*



INVESTMENTS

Financial reserves are needed, not only for organizational health but also to protect the integrity of the licensing exam and the licensure process. We allocated some reserve funds to support the transition of some administrative functions in house. At the beginning of the fiscal year we had \$10.4 million and as of the end of our fiscal year we were sitting at \$10.7 million in reserves.

AUDIT

Auditors reviewed the financial status of the organization and assess the following essential elements:

- » Examination of amounts and disclosures in financial statements
- » Evaluation of appropriateness of accounting policies
- » Reasonableness of significant accounting estimates made by management
- » Evaluation of overall presentation of the financial statements



Total
Year Ending 2019-2020 Comparison



**Approximate/Unaudited*

An audit report was conducted for the prior fiscal year. It was presented to the finance committee and the board of directors in February. It was a very good audit report with no significant findings.

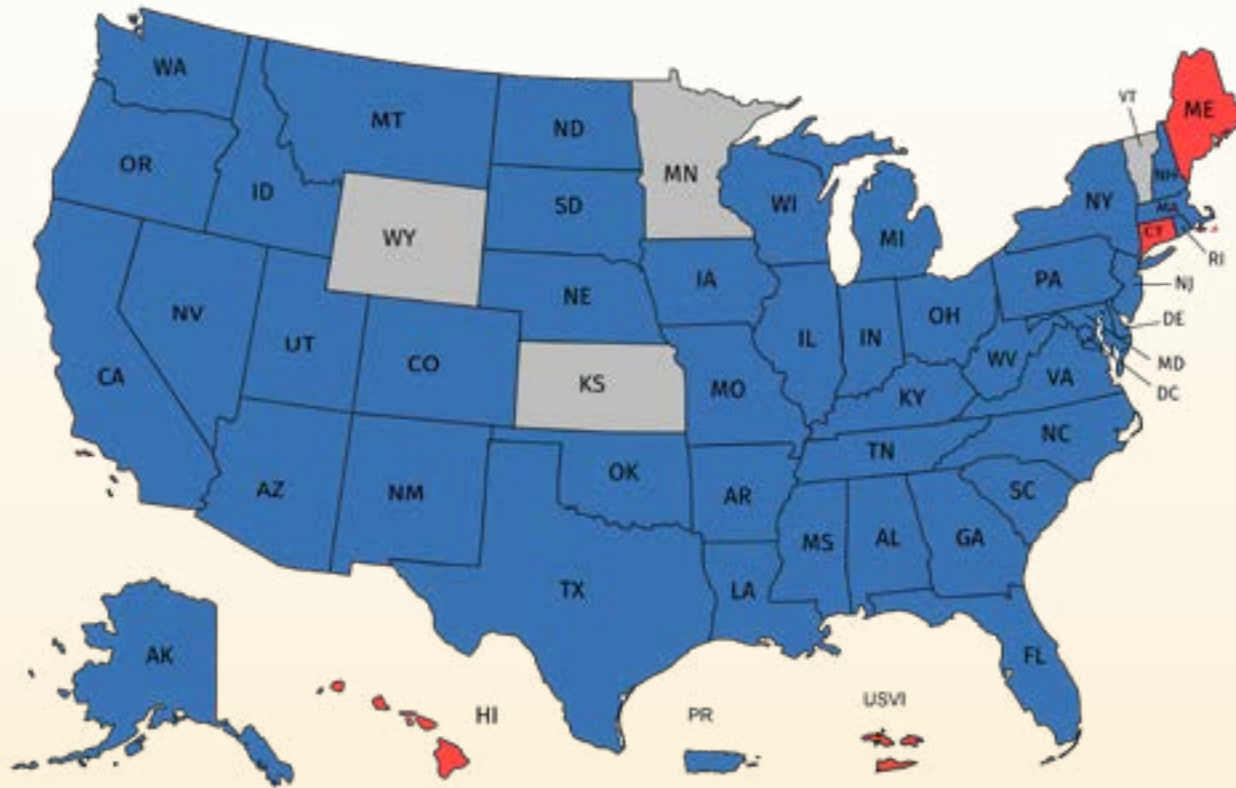
Although the Federation has weathered a challenging year financially, we remain diligent with spending your money and take our fiscal responsibility very seriously.



Member Services

MBLEx • Continuing Education • Communication •
MTLD • Meetings

FSMTB MEMBERSHIP

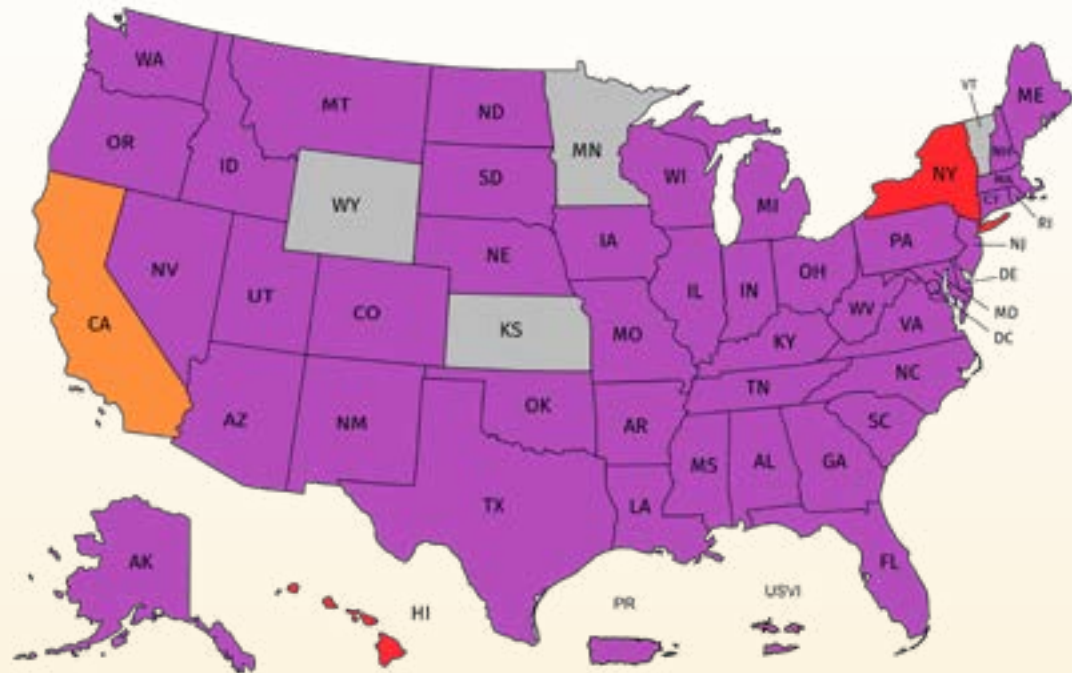


FSMTB Membership by State

- Not Regulated
- Non-Members
- FSMTB Members

MASSAGE & BODYWORK LICENSING EXAMINATION (MBLEx)

The Massage & Bodywork Licensing Examination, more commonly known by its acronym as the MBLEx, is our flagship program. Envisioned long before it came to be, this entry level licensing exam has become an integral part of the licensure process. Providing a valid and psychometrically sound exam to measure the competency of emerging professionals has been made possible by many long hours of item writing, reviews, and security measures. The MBLEx has become a remarkable tool for our member boards, as well as a respected product in the testing community. Collaboration between FSMTB, member boards and law enforcement agencies provides a network of resources to protect both the exam and the licensing process.



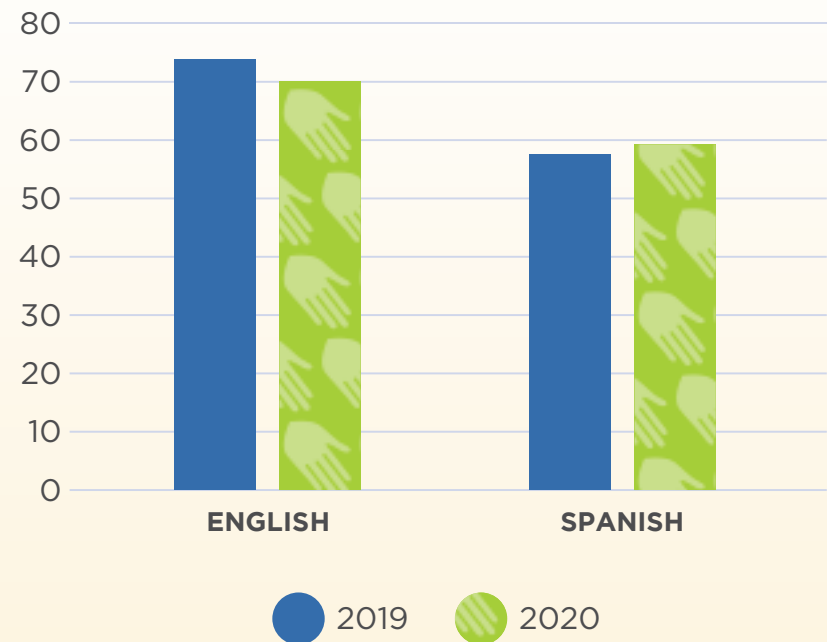
- States & Territories that use MBLEx
- States that do not use any exam
- Not Regulated
- States that do not use MBLEx

MBLEx PERFORMANCE DATA

The COVID-19 pandemic impacted MBLEx administrations in a significant way. The Pearson VUE testing centers closed at the end of March, zero examinations were administered, and as of October 2020, testing is not yet operating at full capacity.

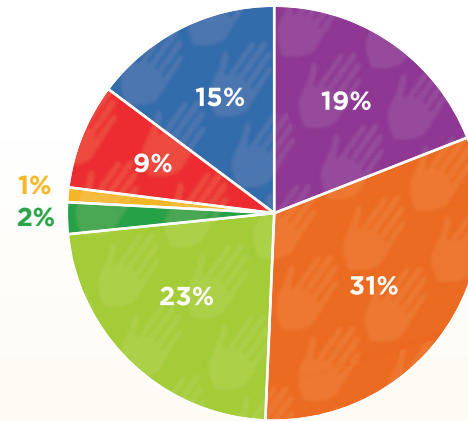
It is helpful to consider examination performance of candidates taking the examination for the first time. Given that the pass rate for the MBLEx taken in Spanish is lower than the pass rate for those who take the exam in English, if performance in both languages is merged, the pass rate would be lowered. Similarly, by extracting test takers who repeatedly fail the examination, regardless of examination language, it also prevents a negative distortion in the overall pass rate.

MBLEx Pass Rate % *First Exam Attempt*



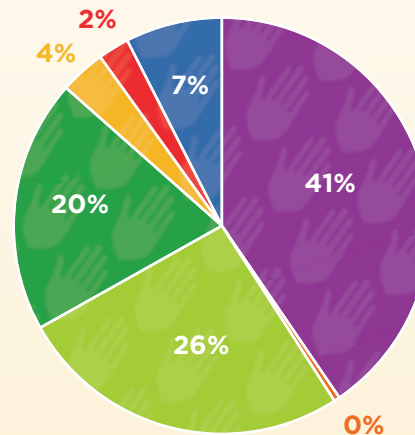
MBLEx TESTING ACCOMMODATIONS

The FSMTB complies with federal laws regarding the Americans with Disabilities Act and will accept requests, from qualified candidates with a diagnosed disability, for accommodations to take the MBLEx if the request is reasonable, properly documented and does not fundamentally alter the examination or jeopardize exam security. This year, FSMTB supported 276 testing accommodation candidates.



Nature of Disability

- ADHD
- LD / Dyslexia
- Blindness / Visual
- Deafness / HH
- Depression
- Anxiety Disorders
- Other



Types of Accommodations

- Extra Time and Reader/Scribe
- Reader or Scribe
- Extra Time and Private Room
- Extra Time only
- Zoom Text Magnification Software
- JAWS Text-to-Speech Software
- Other

MBLEx CANDIDATE HANDBOOK

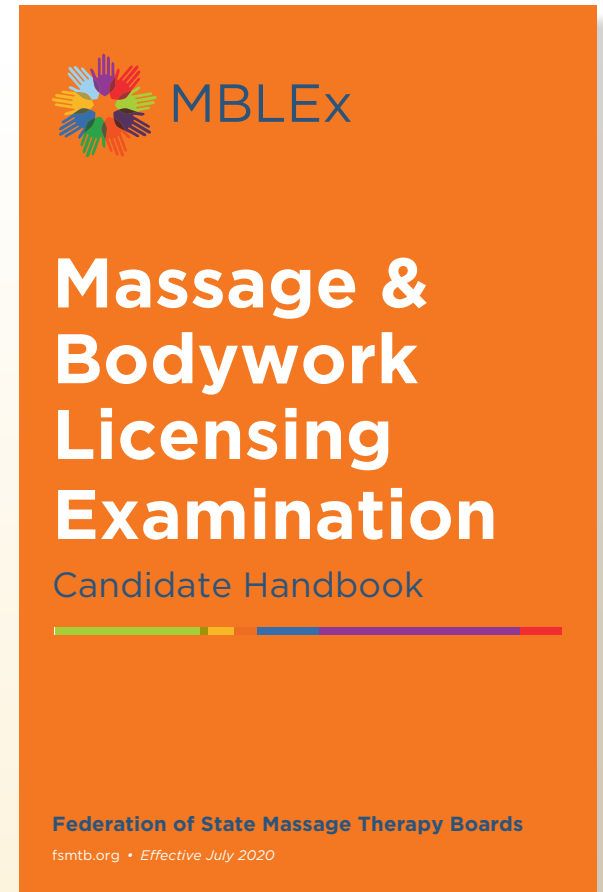
The most recent edition of the MBLEx Candidate Handbook was published on July 1, 2020. FSMTB chose to forgo printing the Handbook this year. The Handbook is available electronically at fsmtb.org.

MBLEx FEE INCREASE

It was announced in April of 2019 that the Federation of State Massage Therapy Boards (FSMTB) was increasing the Massage & Bodywork Licensing Examination (MBLEx) fee from \$195 to \$265 beginning April 1, 2020. This fee increase, the first in 13 years, was subsequently delayed until October 1, 2020.

The MBLEx fee covers application processing, education verification, provision of the examination at secure test centers and exam result reporting and storage. Behind the scenes, expenses include examination development as well as psychometric and legal defensibility. Additionally, FSMTB provides testing accommodations for those who qualify, all at no cost to the candidate.

The FSMTB remains dedicated to maintaining the quality and integrity of the MBLEx in the most cost-effective manner possible and supporting FSMTB member boards in their work to ensure the practice of massage therapy is provided to the public safely and competently.



STUDY RESOURCES

For candidates applying to take the MBLEx, study resources are available through FSMTB. The Federation introduced the MBLEx Check, an online readiness assessment for candidates. This practice exam is designed to simulate the MBLEx experience, allowing candidates an opportunity to prepare for the exam and determine which areas of content need their additional focus.



**The Practice Exam is Here —
the MBLEx Check!**

- The MBLEx Check** is designed to simulate the MBLEx experience
- 110 minutes** to complete 100 multiple choice questions
- Results broken down** into content areas for focused studying

The MBLEx Check is available through FSMTB's Regulatory Education and Competence Hub (REACH) at reach4ce.org.

Questions about the MBLEx Check? Send us an email at info@fsmtb.org

FSMTB
FEDERATION OF STATE
MESSAGE THERAPY BOARDS

FSMTB SCHOOL SUPPORT

The FSMTB School Support team assists massage therapy training programs, administrators and faculty in support of their students' successes as they move towards becoming licensed massage therapists.

EDUCATION VERIFICATION CENTER (EVC)

FSMTB streamlined the education verification process for state-approved massage therapy training programs. The former Education Record Center (ERC) has been replaced by the Education Verification Center (EVC). The new technology provides a simplified and efficient process for schools when verifying a student's training and education.

One thousand four state-approved massage therapy training programs are registered with the EVC.

SCHOOL OUTREACH

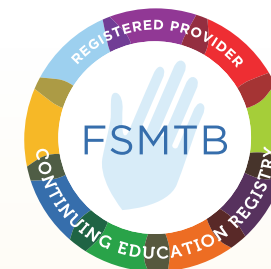
FSMTB hosted school information sessions in Oklahoma and South Dakota, in conjunction with their state massage therapy board meetings. The School Support team also participated in the American Massage Therapy Association's annual school summit.

Due to the COVID-19 pandemic, many massage therapy school meetings and conferences were cancelled. The School Support team continues to participate in conference calls and virtual meetings in support of state-approved massage therapy training programs and the massage therapy regulatory boards.

CONTINUING EDUCATION

CE REGISTRY

CE Registry is the facet of the national Massage Therapy Licensing Database (MTLD) that collects primary source documentation of the completion of acceptable Continuing Education (CE) courses across the country for use by state boards and agencies participating in MTLD to verify continuing education requirements for license renewal. After completion of a pilot testing phase, the CE Registry program launched this year, in support of the FSMTB mission of facilitating professional mobility and simplifying and standardizing the licensing and renewal processes. Multiple presentations have been conducted at industry events and meetings where questions about the program were answered for the public and State boards.



The CE Registry is a solution that meets the needs of the regulatory community by:

1. Verifying primary source documentation of CE in MTLD.
2. Supporting the authority of individual member boards to determine CE for license renewal.
3. Reducing the instance of CE fraud among licensees.
4. Protecting the licensees from predatory practices by unscrupulous CE providers.
5. Identifying and making transparent the providers that are not compliant with the standards established by the FSMTB membership.

Since launching in May 2020, CE Registry has had 440 roster uploads with survey feedback of over 90% indicating course satisfaction and compliance.

FSMTB continues to see growth of the license renewal verification services as the following states currently have regulatory language to accept courses from FSMTB. State regulatory boards determine if continuing education hours recorded in MTLD meet their requirements for license renewal.

Alabama	Michigan	Oregon
Alaska	Missouri	Rhode Island
Arkansas	Montana	South Carolina (<i>REACH only</i>)
Connecticut	Nebraska	South Dakota
District of Columbia	Nevada	Tennessee
Idaho	New Hampshire	Virginia
Iowa	New Jersey	Washington
Kentucky	New Mexico	West Virginia
Maryland	Oklahoma	Wisconsin

REGULATORY EDUCATION AND COMPETENCE HUB (REACH)

This year, the FSMTB launched the Regulatory Education and Competence Hub (REACH) which offers online CE courses sponsored by massage regulatory boards. Courses focus on regulatory education with topics such as ethics, laws, boundaries, scope of practice and cultural competence. Courses in REACH can be taken online at any time, and course completion information is recorded in the Massage Therapy Licensing Database (MTLD) for participating state boards to access. All continuing education courses offered through REACH meet FSMTB Continuing Education Standards. Current courses available for utilization by all of our member boards on REACH at [REACH4CE.org](https://reach4ce.org) include Client Assessment and Documentation; Cultural Competence: Bias; Cultural Competence: Prejudice, Racism and Discrimination; Cultural Competence: Sex, Gender, Gender Identity, and Sexual Orientation; Human Trafficking; and Intake Communication. MBLEx Check, an online readiness assessment for candidates preparing to take the Massage & Bodywork Licensing Examination is also available through REACH.



At FSMTB, we believe that we must be intentional and proactive in supporting each other and in facilitating change. *We acknowledge our responsibility to provide community, advocacy, education and action; to be part of the solution. We are committed to doing our part. And we pledge to continue to develop meaningful ways to use our platform and resources to educate, to fight injustice and to support all those at the forefront of communities where people are hurting and in need of healing.*

Based on this vision, FSMTB offered the Cultural Competence: Prejudice, Racism and Discrimination course free of charge during the months of June and July. Over 600 massage and bodywork therapists, as well as members of the general public, registered for the free course during that time period with 93% responding that they would recommend the course to others.

GOVERNMENT RELATIONS

As part of the value of membership in the Federation, the FSMTB tracks proposed regulations that could affect its membership and supports its members with research and language recommendations. Members can request information on a variety of topics including assistance with adopting language from the Model Massage Therapy Practice Act. In the past year, the FSMTB attended 20 state board meetings to make presentations or answer questions about member programs and services. We corresponded with decision makers and state committees on matters of concern to the membership. This resulted in every state Governor, including the US Virgin Islands, Puerto Rico and the Mayor of Washington DC, being contacted by the FSMTB at some point during the year.

In the past year, FSMTB tracked 373 pieces of legislation related to massage and bodywork therapy. Aside from the emergency orders for the pandemic, the majority of these bills were concerning human trafficking. It is encouraging to note that some of them were associated with new practice act language that would bring state licensure to the states that do not currently have it. The rest were a collection of bills spanning from new continuing education requirements to fee increases.

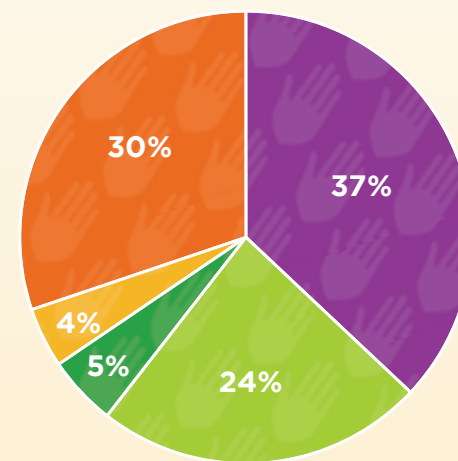
A wave of occupational regulatory bills that were focused on easing state licensing requirements in the interest of portability were identified. Some of these bills were beneficial to the portability of massage licensees, while some created challenges for our members.

Since the beginning of the 2020 emergency, COVID-19 regulations have taken a front seat to a number of other bills this legislative session. A few of these bills made it through the lawmaking process while others will be reintroduced in the next legislative session.

The FSMTB commends its members and their commitment to public protection and the massage therapy profession, by recognizing the effort they put forth to make emergency decisions and continue operations during these unprecedented times.

2019-2020 Bill Categories

- Emergency Orders
- Other
- Human Trafficking
- Technical Adjustments
- New Massage Practice Acts



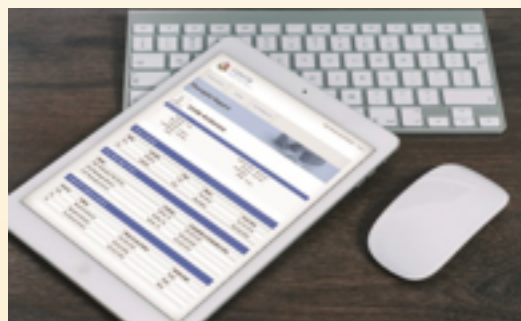
MASSAGE THERAPY LICENSING DATABASE

The Massage Therapy Licensing Database (MTLD) was created at the request of state regulators and initiated unanimously by the 2007 Annual Delegate Assembly. Our members believed in the vision and benefits it offered the massage and bodywork profession. After immeasurable hours of volunteerism and technical work, FSMTB has created a product that will serve our members while providing information security and efficient access to assist the state boards in addressing fraud, portability and a consistent licensure process. This tool is free to our members and can change the future of massage regulation. It is designed to provide a comprehensive view of therapists regulated in the United States, to facilitate the role of public protection among state licensing board and agencies, and to support license portability.

State regulatory administrative staff were searching multiple websites for the current license status of applicants in order to verify and validate the information and documentation submitted during the license application and renewal processes. The MTLD provides a complete therapist profile including affiliated addresses, names and aliases, photograph, education, exam performance and license renewal and license status. With the MTLD, staff can look up a therapist record and verify information for the licensing process quickly and securely.

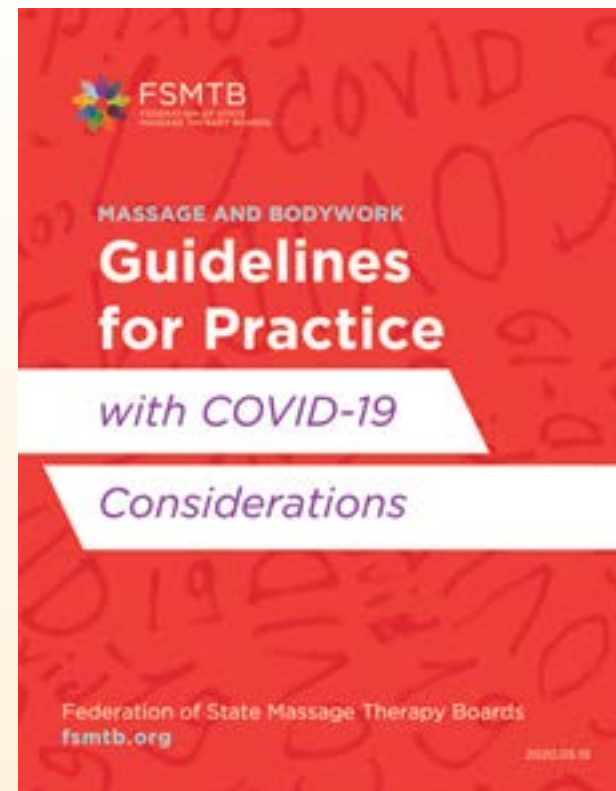
The MTLD is also designed to be mobile so that state inspectors can be present in an establishment and pull up the license information for licensees in real time. The MTLD, with its comprehensive view of therapist information, is one of the best tools to use against fraud in the licensing process.

The commitment of members to using this tool, requesting information, and evaluating the process to participate is gratifying. These efforts add to the value of membership in the FSMTB as together, regulators have a better chance at reducing the amount of fraud in the licensing process by sharing information, ideas and solutions. Success in combatting this problem will depend on the degree of collaboration and level of sustained commitment to populating the MTLD and will assist in reducing the prevalence and impact of this problem over the long term.



MASSAGE AND BODYWORK GUIDELINES FOR PRACTICE WITH COVID-19 CONSIDERATIONS

The Massage and Bodywork Guidelines for Practice with COVID-19 Considerations were created at the request of FSMTB Member Boards for use in conjunction with the regulatory structures in each jurisdiction. The publication contains recommendations and guidelines for massage and bodywork practitioners to mitigate the spread of COVID-19. The intent of the Guidelines is to provide a resource to FSMTB Member Boards and Agencies, massage and bodywork professionals, and massage school staff in order to support public protection. The members of the Task Force worked diligently to research and prepare the Practice Guidelines and to share best practices for massage and bodywork practitioners during the global COVID-19 pandemic. The FSMTB is profoundly grateful for their subject matter expertise and their service.



MEETINGS

MASSAGE BOARD EXECUTIVE MEETINGS

Due to the pandemic, the regularly scheduled Spring Massage Board Executive (MBE) Summit was cancelled. In an effort to continue to facilitate communication between our executive directors, the FSMTB hosted a series of virtual MBE Town Hall meetings. These monthly town halls have been well attended by Executive Directors from our member boards across the country. The group discussed pandemic responses, rule changes and engaged in ongoing information exchanges.

ANNUAL MEETING

The FSMTB Board of Directors made the difficult decision to cancel the in-person annual meeting scheduled October 15-17, 2020, in Chicago, Illinois. The official business of the Federation is conducted at the annual meeting and in consultation with legal counsel, the Board determined that only the essential business of elections would be conducted virtually. All other typical programming such as educational sessions, bylaws amendments and resolutions are not scheduled to occur in 2020.

EDUCATION

The virtual educational session, *Sexual misconduct allegations within massage therapy: An informed approach to protect both clients and practitioners* was open to all board members, board/agency staff, investigators and legal counsel of FSMTB member boards. The participants in the session represented twenty-three different jurisdictions.

INDUSTRY RELATIONS

Directors, staff and committee volunteers spent the year giving positive recognition for the regulatory community and fostering relationships with people who support the work that all of our members do in the arena of public protection. This year the usual hours on the road spent in airports, taxis, and meeting rooms were replaced with virtual meetings. We appreciated the same great smiles, fewer transportation costs, and even less packing. Despite the cancellation of conventions and forums normally presented by other national and regional organizations, the Federation of Associations of Regulatory Boards and the National Massage Coalition members continued to provide updates and resources in other formats.

COMMUNICATIONS

SERVICE SUPPORT CENTER

In 2018 the Federation Board of Directors initiated a plan to create our own Service Support Center within the FSMTB headquarters, allowing us to elevate the quality of care we provide to our examination candidates, those seeking license renewal services such as continuing education and CE Registry assistance, as well as for the membership and general public.

This expansion, intended to decrease our financial expenses and amplify our core values, was due to move to the final phase in April 2020. Despite obstacles of battling the coronavirus, additional staff members were hired and all candidate application processing was permanently routed through our headquarters in April, as planned.

SOCIAL MEDIA



In the past year, the number of **FACEBOOK** followers increased by **13%**.



In the past year, the number of **TWITTER** followers increased by **19%**.

You can also find FSMTB on LinkedIn at [linkedin.com/fsmtb](https://www.linkedin.com/company/fsmtb) and YouTube.com (search FSMTB).

DIGITAL PUBLICATIONS

FSMTB's two monthly digital publications, In Touch with FSMTB and In Touch with Education, provide the regulatory and educational communities respectively, with timely updates.



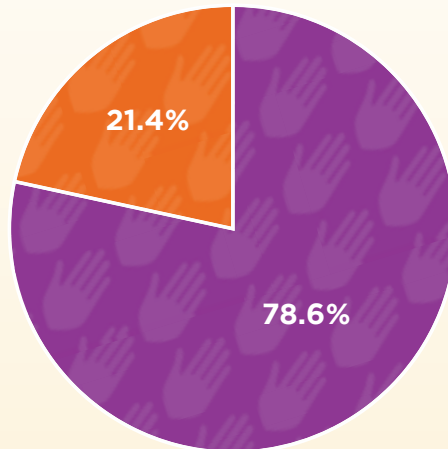
WEBSITE

The FSMTB website, fsmtb.org, is the primary online resource for individuals seeking information about FSMTB, the MBLEx, School Support, and Continuing Education. This past year, the number of products and services highlighted on the home page was expanded, making the site easier to navigate.

July 1, 2019 - June 30, 2020

- New Visitor
- Returning Visitor

During 2019-2020, the website hosted more than 160,730 users, an increase of 15% over the previous year. New users made up more than 78% of site visits this past year.





People

Volunteers • Board of Directors •
Volunteer Committees, Panels and Task Forces

VOLUNTEERS

Thank
you

As a federation that strives to carry out the directions of its member boards and agencies, FSMTB views its volunteers as its most important asset. Volunteers serve in a variety of capacities, such as on committees, as item writers for the Massage & Bodywork Licensing Examination (MBLEx) and on the board of directors. April is National Volunteer Month, and during that time, FSMTB sent a special thank you message to its volunteers and posted a special notice on social media, sharing gratitude for our volunteers. To each person that gives their time, insight and passion to our organization to support smart massage therapy regulation and public protection, we thank you.

2020 FSMTB BOARD OF DIRECTORS

PRESIDENT

Charlene Russell

Mississippi State Board of Massage Therapy (former)

crussell@fsmtb.org

VICE PRESIDENT

Craig Knowles

Chair, Georgia Board of Massage Therapy

cknowles@fsmtb.org

TREASURER

David Cox

Secretary/Treasurer, Maryland State Board
of Massage Therapy Examiners

dcox@fsmtb.org

DIRECTOR

Robin Alexander

Louisiana Board of Massage Therapy (former)

ralexander@fsmtb.org

DIRECTOR

Victoria Drago

Florida Board of Massage Therapy

vdrago@fsmtb.org

DIRECTOR

Dianne Layden

North Carolina Board of Massage and
Bodywork Therapy (former)

dlayden@fsmtb.org

DIRECTOR

Tom Ryan

Administrator of the Division of Legal Services
and Compliance, Wisconsin Department
of Safety and Professional Services

tryan@fsmtb.org

EXECUTIVE DIRECTOR

Dr. Debra Persinger

dpersinger@fsmtb.org

VOLUNTEER COMMITTEES, PANELS & TASK FORCES

COURSE DEVELOPMENT

Kim Adams Johnson (NE)	Barbara Lis (IN)
Nicole Alvarez (PA)	Denise Logsdon (KY)
Karen Armstrong (MI)	Samantha Lucatero (TX)
Adam Baritot (NY)	Ceena Owens (KS)
Marcela Collins (FL)	Tammy Parnell (AR)
Monica DeVaughn-Nobling (NJ)	Susan Salvo (LA)
Jamie Ehmer (WI)	Elan Schacter (NC)
Joe Frazer (MA)	Connie Shanks Knight (MS)
Lance Gilliland (AL)	Lori Vargas (IL)
Eric Hart (MT)	Casey White (VA)
Fallon Helm (SD)	Heidi Williams (WA)

CE REGISTRY

Kim Adams Johnson (NE)
Karen Armstrong (MI)
Joe Frazer (MA)
Lance Gilliland (AL)
Barbara Lis (IN)
Elan Schacter (NC)
Jan Shaw (SC)

EXAMINATION DEVELOPMENT

Sarah Albanawi (VA)	John Marasigan (CA)
Karen Armstrong (MI)	Wendy McGinley (ND)
Su Bibik (MI)	Bethann Olsavsky (IL)
Ed Bolden (TN)	Ceena Owens (KS)
Vickie Branch (NH)	Charlotte Phillips (VT)
Fran Candelaria (IN)	Drew Riffe (TX)
Laurie Craig (GA)	Brenda Ruiz (PR)
Alexander (Sasha) Dale (CA)	Susan Salvo (LA)
Rosendo Galvez (IL)	Jill Sanders (OR)
Jacqueline Hungerford (TX)	Elan Schacter (NC)
Maria Leonard (MN)	Cherie Sohnen-Moe (AZ)
Bethany Lowrie (PA)	Tracy Sullivan (CT)
Jeff Mahadeen (NH)	Charles Watson (KY)

EXAMINATION ELIGIBILITY

Board Liaison: Robin Alexander (TX)
Christopher Brooks (FL)
Lance Gilliland (AL)
Fallon Helm (SD)
Tamara Leach (MT)

EXAMINATION POLICY

Board Liaison: Craig Knowles (GA)

Chair: Caroline Fox Guerin (TX)

Sandy Anderson (NV)

Ed Bolden (TN)

Michael Eayrs (MT)

Lance Gilliland (AL)

Gwenda Harrison (MD)

FINANCE

Treasurer: David Cox (MD)

Sandy Anderson (NV)

Micheal Black (UT)

Ed Bolden (TN)

Keith Warren (AL)

GUIDELINES FOR PRACTICE WITH COVID-19 CONSIDERATIONS

Chair: David Cox (MD)

Susan Salvo (LA)

Laura Allen (NC)

Eric Stephenson (CO)

Karen Armstrong (MI)

Deirdre Strunk (NV)

Ed Bolden (TN)

Ruth Werner (OR)

Becca Cauffman (PA)

LICENSE RENEWAL

Board Liaison: Victoria Drago (FL)

Joe Frazer (NH)

Chair: Becca Cauffman (PA)

Lance Gilliland (AL)

Karen Armstrong (MI)

Barbara Lis (IN)

Micheal Black (UT)

Wendy McGinley (ND)

Karen Fink (OH)

Jan Shaw (SC)

Rebecca Forde (ND)

Heidi Williams (WA)

NOMINATING

Chair: Lydia Nixon (FL)

Micheal Black (UT)

April Whiting (NV)

POLICY

Board Liaison: Dianne Layden (NC)

Chair: Sandy Anderson (NV)

Becca Cauffman (PA)

Jamie Corey (PA)

Linda Lyter (WV)

Kama Monroe (FL)

EXAMINATION ITEM WRITERS

Examination item writers play a vital role within our organization. Their support and selfless effort enables us to continue in our mission to assist state regulatory boards in ensuring that the practice of massage therapy is provided in communities safely and effectively. We truly appreciate their willingness to contribute to the MBLEx and the MBLEx Check: Online Readiness Assessment as well as the time they are willing to commit to item writing assignments. They are so appreciated and we thank them for the quality, expertise, and passion they bring in supporting FSMTB and contributing to the greater good of the profession.



FSMTB

FEDERATION OF STATE
MASSAGE THERAPY BOARDS

Federation of State Massage Therapy Boards

7300 College Boulevard, Suite 650
Overland Park, KS 66210
www.fsmtb.org

From: FSMTB <dpersinger@fsmtb.org> on behalf of FSMTB
Sent: Tuesday, October 13, 2020 4:32 PM
To: massagetherapy@dhp.virginia.gov
Subject: FSMTB 2020 Election Results



FSMTB 2020 Election Results

The 15th annual election of the Federation of State Massage Therapy Boards (FSMTB) was conducted online from October 5-13, 2020.

A quorum was established by registration of voting delegates representing 41 FSMTB member boards and agencies.

Position One: Incumbent **Robin Alexander**, not affiliated with a state board, was elected to serve a three-year term on the board of directors.

Position Two: **Sandy Anderson**, executive director of the Nevada State Board of Massage Therapy was elected to serve a three-year term on the board of directors.

There were three open positions to serve on the 2021 Nominating Committee. Three candidates presented; therefore, all three are elected by acclamation.

The 2021 Nominating Committee members are:

- **Carla Hedtke**, Wisconsin Massage Therapy and Bodywork Therapy Affiliated Credentialing Board
- **Megan Maxey**, Washington State Board of Massage
- **Allyson Pettley**, Utah Board of Massage Therapy

We extend our thanks to Thomas Ryan, former Executive Director, Wisconsin Massage Therapy and Bodywork Therapy Affiliated Credentialing Board, who completes a three-year term of service on the board of directors. Sincere thanks are also due to the excellent candidates who were not successfully elected in 2020. The Federation benefits from leadership and the experience of

our members; we encourage them to remain involved in supporting the work of the FSMTB and consider re-applying at the next available opportunity.

The newly constituted board of directors will meet on Friday, October 16, 2020 to elect the president, vice president and treasurer of the board.

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Introducing the MBLEx Check!

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MESSAGE THERAPY BOARDS

Dear Member,

Today the Federation of State Massage Therapy Boards (FSMTB) is launching the MBLEx Check, an online readiness assessment. The MBLEx Check is the only practice exam offered by the same experts who provide the MBLEx. It is available for \$25 by visiting FSMTB's Regulatory Education and Competence Hub (REACH) at www.reach4ce.org.

We developed the MBLEx Check to provide MBLEx candidates with an opportunity to both test their knowledge and familiarize themselves with the testing environment of the MBLEx prior to their testing date. The MBLEx Check is a beneficial way for candidates to study for the MBLEx because it replicates the appearance and timing that they will experience with the MBLEx.

As on the MBLEx, the MBLEx Check features 100 questions that cover each of the examination's content areas, including: Anatomy & Physiology; Kinesiology; Pathology, Contraindications, Areas of Caution, Special Population changes; Benefits and Physiological Effects of Techniques that Manipulate Soft Tissue changes; Client Assessment Reassessment & Treatment Planning; Ethics, Boundaries, Laws and Regulations; and Guidelines for Professional Practice. Questions on the MBLEx Check will not appear on the MBLEx.

Upon completion of the MBLEx Check, candidates will be able to review their results in each content area to help them prepare for their exam.

If you have any questions, please email us at info@fsmtb.org.

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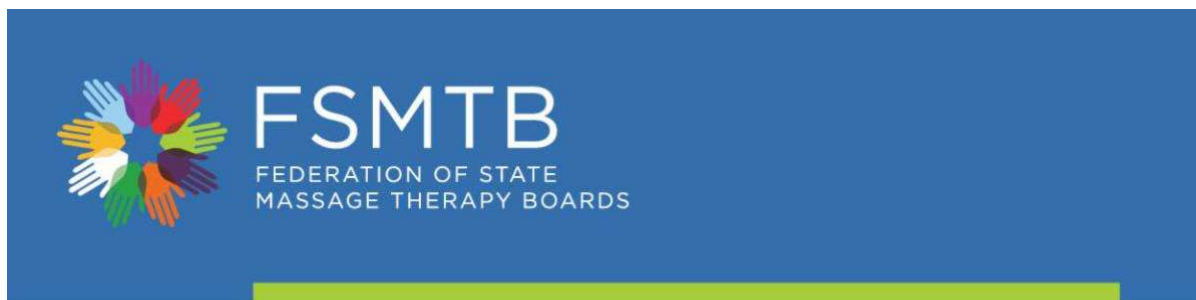
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**FSMTB LAUNCHES
REGULATORY EDUCATION AND COMPETENCE HUB (REACH)**

FSMTB is pleased to announce the launch of a new member service, the Regulatory Education and Competence Hub (REACH), available at www.reach4ce.org.

REACH is an online education center that offers continuing education courses that support required learning to sustain therapist competence and desired professional development, as well as directed learning to support state regulatory requirements and disciplinary actions. REACH was developed as a way to provide additional educational resources to massage and bodywork therapy professionals and assist state massage boards.

All REACH courses meet FSMTB Continuing Education Standards, which were created by expert representatives from regulatory boards. Course completion results for licensed massage therapists will automatically load into FSMTB's Massage Therapy Licensing Database (MTLD). MTLD provides a comprehensive view of massage and bodywork therapists regulated in the United States to facilitate the role of public protection among state licensing boards/agencies and to support licensure portability.

The first course to be offered is *Cultural Competence: Bias* which addresses implicit and explicit bias, the impact of bias on others, and the effect of bias within the massage and bodywork profession in the United States.

Let us know how we may be able to assist with your upcoming continuing education or disciplinary requirement needs. If you have any questions, please contact FSMTB at reach@fsmtb.org.

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MASSAGE AND BODYWORK

Guidelines for Practice

with COVID-19

Considerations

Federation of State Massage Therapy Boards
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2020.05.19
0124

FSMTB MISSION STATEMENT

The mission of the Federation is to support its Member Boards in their work to ensure that the practice of massage therapy is provided to the public in a safe and effective manner.

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Introduction

Clean facilities, proper practitioner hygiene, procedures to ensure client safety, and disease prevention protocols have long been a cornerstone of professional massage and bodywork practice. The outbreak and rapid spread of coronavirus 19 (COVID-19) highlights the need for renewed attention and increased vigilance in these areas as states lift stay-at-home orders (also called stay-in-place orders) and massage and bodywork practitioners return to practice.

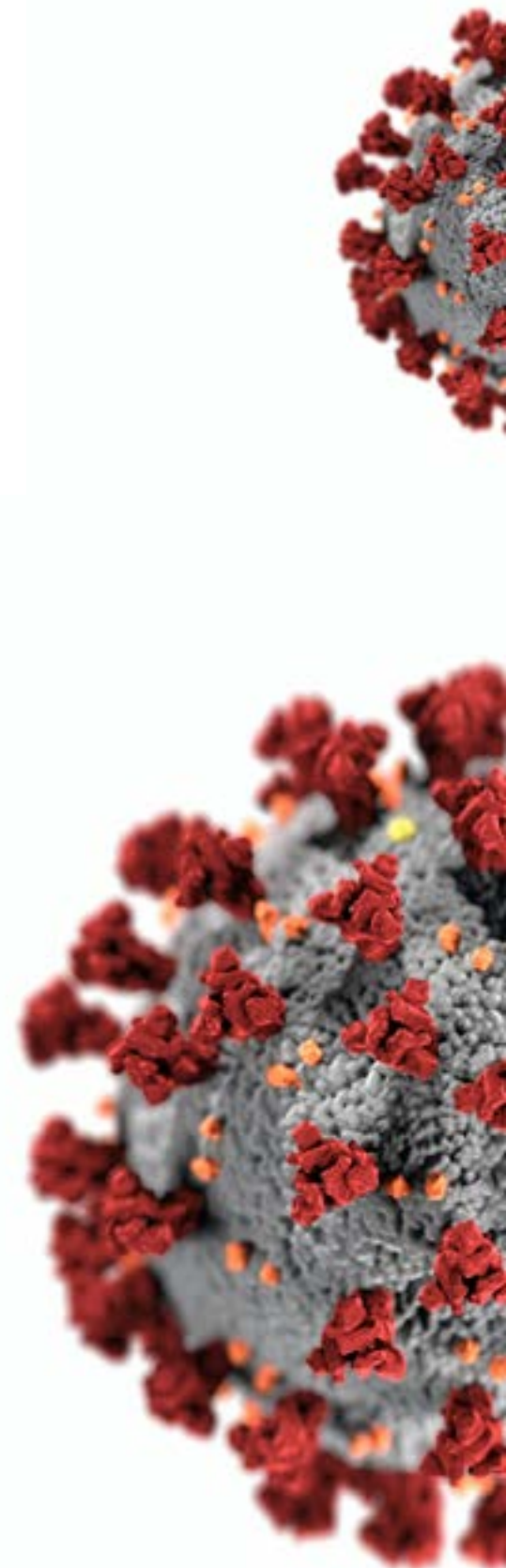
The Federation of State Massage Therapy Boards (FSMTB) is pleased to present the *Guidelines for Practice with COVID-19 Considerations*. This document contains recommendations and guidelines for massage and bodywork practitioners to mitigate the spread of COVID-19.

The intent of this document is to provide a resource to FSMTB Member Boards and Agencies, massage and bodywork professionals, and massage school staff in order to support public protection. Readers are encouraged to refer to and use the FSMTB *Guidelines for Practice with COVID-19 Considerations* within the confines of the regulatory structures of their respective states.

FSMTB recognizes that some customization and flexibility are necessary to allow these concepts to be of assistance in each jurisdiction and practice setting. Each massage practice will have its own time frame for returning to work based on the state's stay-at-home orders, supply of personal protective equipment (PPE), funding for massage programs, availability of COVID-19 tests, COVID-19 testing rates, and stable or falling COVID-related hospitalization rates for two weeks or more.

These recommendations and guidelines do not replace any directives or guidance provided by federal or state agencies, regulatory boards, or other authorities having jurisdiction.

Where conflicts occur, the stricter requirement will apply.





The Centers for Disease Control and Prevention (CDC) offers extensive guidelines for healthcare professionals related to preventing disease and the spread of COVID-19.¹ At the core of CDC recommendations for healthcare professionals is the concept of Standard Precautions.

The CDC defines Standard Precautions as:

“The minimum infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where health care is delivered.”

No matter the overall health picture of a client, massage professionals must apply minimum infection prevention practices with strict attention to protect the client and themselves from the spread of infection.²

The FSMTB *Guidelines for Practice with COVID-19 Considerations* references Standard Precautions and Transmission-Based Precautions, CDC protocols and adapts them to the specific practice environment of massage and bodywork. Whenever possible, this document reflects specific CDC recommendations to provide guidance on facility cleanliness and disinfection, use of PPEs, facility policies and procedures, and requirements for massage practitioner hygiene.

See the [Resources](#) section for a complete list of the governmental guidelines that inform this document. In some cases, when appropriate, specific documents or research studies are referenced and listed in the References section.

Please note that COVID-19 is a rapidly evolving situation. The FSMTB affirms the importance of regulated massage and bodywork professionals who are adequately informed to practice safely and competently. This document will be modified as necessary when further relevant information becomes available. We invite both your use of these *Guidelines for Practice with COVID-19 Considerations* and your ongoing interest in future versions of this essential resource.



GUIDELINES FOR

Facility Cleanliness, Disinfection, and Disease Prevention

Infection control guidance from the CDC reminds healthcare providers that COVID-19 is spread primarily through person-to-person contact. Infectious respiratory droplets, produced when someone with COVID-19 coughs, sneezes, or speaks, can land on the eyes, mouth, or nose of an uninfected person, or be inhaled by an uninfected person standing close by. Smaller droplets may hang in the air for a period of time, while heavier droplets fall to surfaces. An uninfected person might touch a contaminated surface and then touch their face, mouth, or nose giving the virus entry to the body. Protocols that reduce the dispersal of respiratory droplets and the regular disinfection of surfaces in a massage workplace help reduce the spread of COVID-19.^{3,4}

Here, guidance is provided on cleaning and disinfecting products, cleaning and disinfection of different areas of a massage facility, methods that reduce the entry of COVID-19 to a facility, and the management of potentially contaminated linens.

Cleaning and Disinfecting Products



- » **Commercial or household-grade products** may be used for routine cleaning such as washing surfaces with soap and water to remove visible soil, dusting, and cleaning glass surfaces with a glass cleaner.

- » **Homemade cleaning products (e.g., vinegar and essential oils) are not approved cleaning agents or disinfectants.**

- » **Disinfectants registered by the Environmental Protection Agency (EPA)** must be used to disinfect surfaces that may become contaminated through touch or respiratory droplets during a workday.

- » **Disinfect surfaces** by applying an EPA-registered disinfectant to the surface, following label directions. If surfaces are dirty, they must first be cleaned to remove dirt or impurities, followed by disinfection.

- » **Fabrics such as curtains or upholstery are disinfected with fabric-specific EPA-registered disinfectants.**

- » **Find an EPA-registered disinfectant specific for use against SARS-CoV-2** (*the virus that causes COVID-19*) at www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2.

- » **Follow the label directions for the use** of all cleaning and disinfecting products and follow recommended contact times (amount of time a surface should be visibly wet with the product).

- » **Some cleaning and disinfection products require ventilating the space** by opening doors and windows and by running fans to reduce the airborne presence of cleaning chemicals.

- » **Some cleaning and disinfection products require wearing cleaning gloves, eye protection, and a face mask.**

Guidelines for Specific Facility Areas

Massage professionals and massage business owners are encouraged to consider the areas of their businesses that need to be regularly disinfected, how surfaces are touched or potentially contaminated, how different types of surfaces can be disinfected (e.g., *disinfecting fabrics such as curtains or upholstery as opposed to hard surfaces such as countertops*), the disinfection products needed to respond effectively to COVID-19, and ways to reduce the likelihood that COVID-19 could enter their facilities.

THE RECEPTION AREA

- » **Declutter and remove items** from the reception area that might become contaminated and require repeated disinfecting (e.g., *magazines, pamphlets, knickknacks, candy bowls, the tea station, etc.*).
- » **Organize the reception area to promote physical distancing** by removing chairs, spacing chairs 6 feet (*2 meters*) apart, placing tape in the shape of an X on areas where people should not sit or stand, or by blocking off the reception area and escorting clients directly to session rooms (see [Policies and Procedures](#)).
- » **Make alcohol-based hand sanitizer** (60-95% alcohol) easily accessible to clients entering the facility and encourage clients to sanitize their hands upon arrival.
- » **Make tissues and no-touch trash cans available** for the practice of respiratory hygiene and cough etiquette.
- » **Encourage clients to wear their own face mask to the facility.** Provide surgical or other disposable face masks to those without a face covering upon arrival.
- » **Place signs** (available from the CDC) at eye level to educate clients about respiratory hygiene and cough etiquette, hand hygiene, symptoms of COVID-19, and physical distancing.
- » **Disinfect high-touch surfaces** (surfaces that are handled frequently throughout the day by numerous people) between clients with an EPA-registered disinfectant. High-touch surfaces include door handles, counters, tabletops, pens or pencils used to complete paperwork, clipboards, desks, light switches, water fountains, and payment touch screens.
- » **Ventilate** the reception area often by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.
- » **Clean floors** at the end of the day by mopping hard floors with an EPA-registered floor cleaner. Vacuum carpeted floors using a vacuum cleaner with a HEPA air filter if one is available. Wear a face mask and vacuum when there are no people in the space (*vacuums can disperse respiratory particles into the air*).

THE RETAIL AREA

As of May 18, 2020, the CDC does not offer guidance on the prevention of COVID-19 transmission in retail areas of hospitals or healthcare facilities. CDC recommendations applied to a retail area suggest these guidelines:

- » **The retail area should be clean, free of dust, and organized to promote the maintenance of physical distance.**
- » **Make alcohol-based hand sanitizer** easily accessible to clients entering the retail area. Clients are encouraged to sanitize their hands upon arrival.
- » **Retail items handled by clients are disinfected between clients.**
- » **Communal product samples** (*testers*) should be removed from shelves.
- » **High-touch surfaces** such as display tables, door handles, and payment touch screens are disinfected between clients.

THE RESTROOM

- » **Disinfect high-touch restroom surfaces between clients with an EPA-registered disinfectant.** High-touch surfaces include door handles, stall doors, the toilet seat, restroom counters, light switches, the toilet handle, faucet fixtures, the toilet paper dispenser, and the paper towel dispenser.
- » **Place signs at eye level** in the restroom to educate clients about proper hand washing.
- » **Place signs** indicating that toilet lids (*if present*) should be closed before flushing.
- » **Deep clean the restroom at the end of the workday** by cleaning the toilet bowl, toilet seat, the toilet lid, the walls around the toilet, and all surfaces with appropriate cleaning products and an EPA-registered disinfectant.
- » **Mop restroom floors** with an EPA-registered floor cleaner. Pay special attention to the floor around the toilet which may be a reservoir for microorganisms and body fluids.
- » **Ventilate restrooms overnight** by opening doors and windows or running a HEPA air filtration unit in the area.

HALLWAYS

- » **Disinfect high-touch surfaces between clients** with an EPA-registered disinfectant. High touch surfaces include handrails, door handles, keypads, light switches, and stairway banisters.



THE SESSION ROOM

- » **Declutter and remove items from the session room** that might become dusty, or contaminated and require repeated cleaning and disinfecting (e.g., *magazines, pamphlets, knickknacks, bookshelves, books, decorative tables, extra chairs, etc.*).
- » **Make alcohol-based hand sanitizer easily accessible to clients entering the session room.**
- » **Both the client and the practitioner must wear a face mask during the session.** The client must also wear a face mask from the time they enter to the time they leave the facility.
- » **Disinfect high-touch surfaces between clients with an EPA-registered disinfectant.** High touch surfaces include door handles, counters, tabletops, light switches, massage lubricant bottles, or any surface the practitioner or client might touch before, during, and after sessions.
- » **Handle soiled linens properly as discussed in the section titled Linen Management.**
- » **Cover the massage table or the warmer and padding on the massage table with a heavy-duty plastic sheet or table protector.** Disinfect the plastic sheet over the massage table with an EPA-registered disinfectant between clients. If a plastic sheet is not used, clean the massage table with soap and water between clients and wipe it with a massage table specific disinfectant.
- » **Prepare the massage table with clean linens as discussed in the section titled Linen Management.**
- » **Ventilate the session room between clients** by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.
- » **Clean floors at the end of the day** by mopping hard floors with an EPA-registered floor cleaner. Vacuum carpeted floors using a vacuum cleaner with a HEPA air filter if one is available. Wear a face mask and vacuum when there are no people in the space.
- » **Ventilate the session room at the end of the day** by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.

SPECIALIZED SPA EQUIPMENT

- » **Clean all specialized spa equipment according to the manufacturer's instructions, after each use.**
- » **Ultraviolet radiation (UV) is an accepted disinfection method** for spa equipment when appropriate, based on the manufacturer's recommendations.
- » **Flush hydrotherapy tub jets, foot basin jets, and whirlpool jets** with a manufacturer-approved disinfectant between clients.

THE BREAK ROOM

- » **Declutter and remove items** from the break room that might become contaminated and require repeated disinfecting.
- » **Organize the break area to promote physical distancing** by removing chairs, spacing chairs 6 feet apart, and placing tape in the shape of an X on areas where people should not sit or stand.
- » **Staff should wash their hands with soap and water** or apply an alcohol-based hand sanitizer directly before entering or upon entering the break area.
- » **Hang signs at eye level** to remind staff about respiratory hygiene and cough etiquette, hand hygiene, and physical distancing.
- » **Stagger break times** to reduce the number of people in the break room at one time.

- » **Clean and disinfect showers, sauna, steam cabinets, wet tables, hydrotherapy tubs, bathtubs, foot soaking basins, and other equipment with an EPA-registered disinfectant, after use with each client.** Dry the showers, hydrotherapy tubs, bathtubs, wet tables, and foot soaking basins completely with clean towels, after proper disinfectant surface contact times are observed.
- » **Clean and disinfect high touch wet room surfaces between clients with an EPA-registered disinfectant.** High touch surfaces include door handles, handrails, counters, faucet fixtures, light switches, seating, and the floor around tubs, wet tables, and showers.
- » **Wear face masks** in the break room when not consuming food or beverages.
- » **Hang signs** to remind staff to clean and disinfect any surfaces they touch in the break room with an EPA-registered disinfectant directly before exiting the area. Surfaces include door handles, counters, tabletops, light switches, cabinet doors, the coffee or tea maker, the refrigerator door handle, chair backs, vending machine, or other surfaces.
- » **Clean floors** at the end of the day by mopping hard floors with an EPA-registered floor cleaner. Vacuum carpeted floors using a vacuum cleaner with a HEPA air filter if one is available. Wear a face mask and vacuum when there are no people in the space.
- » **Ventilate the break room** often by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.

THE LAUNDRY ROOM

- » **Maintain a physical distance of 6 feet** while using the laundry room and limit the number of people who are in the laundry room at one time.

- » **Follow guidelines for the proper management of linens as discussed in the section titled, [Linen Management](#).**

- » **Disinfect surfaces** in the laundry room at the end of the day with an EPA-registered disinfectant. Surfaces include linen storage containers, countertops, cabinet handles, detergent bottles, door handles, light switches, and the controls on the washer and dryer.

- » **Clean floors** at the end of the day by mopping hard floors with an EPA-registered floor cleaner. Vacuum carpeted floors using a vacuum cleaner with a HEPA air filter if one is available. Wear a face mask and vacuum when there are no people in the space.

- » **Ventilate the laundry room** by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.



ONSITE AND OUTCALL LOCATIONS

Onsite locations refer to places such as airport chair massage businesses and corporate settings, or anywhere massage is performed in a massage chair or on a portable massage table at locations where clients are not enclosed in a session room and remain clothed throughout the massage.

Outcall locations refer to mobile massage provided in a client's home or hotel room.

While COVID-19 is present in a community, mobile massage/outcall massage is unsafe and therefore prohibited. Massage practitioners are unable to control the cleanliness or disinfection practices at client homes, exposing the massage practitioner to increased risk of infection.

At onsite settings, massage practitioners are still subject to the same cleanliness and disinfection protocols as other massage business locations, to the proper management of linens, to pertinent client policies and procedures, and to practitioner hygiene requirements discussed in other sections of this document.

- » **For corporate accounts, the practitioner should communicate with management ahead of time to inquire if any employees have been diagnosed with COVID-19 or other communicable diseases within 14 days of the massage practitioner's intended visit.** If infection is present, the practitioner should not perform massage at the location until it is verified that no employees have been diagnosed or experienced symptoms of COVID-19 in the past 14 days.
- » **Arrange with management ahead of time the use of a private space that allows for physical distancing.** Ideally the space would contain few surfaces that require disinfecting between clients.

- » **Organize the space to promote physical distancing** by removing chairs, spacing chairs 6 feet apart, and placing tape in the shape of an X on areas where people should not sit or stand while waiting for their sessions.
- » **Make alcohol-based hand sanitizer** (60-95% alcohol) easily accessible to clients entering the area and encourage clients to sanitize their hands upon arrival.
- » **Encourage clients to wear their own face mask to the massage.** Require corporate accounts to provide surgical one-time-use or other disposable face masks to those without face masks. Both massage practitioners and clients wear face masks for the duration of sessions.
- » **Disinfect high-touch surfaces between clients** with an EPA-registered disinfectant. High touch surfaces include door handles, counters, light switches, massage lubricant bottles, pens and clipboards used for health intake processes, or any surface the client or practitioner might touch during a session.
- » **Disinfect the entire massage chair** including all surfaces of the face rest with an EPA-registered disinfectant between clients, following product label directions for proper application and dry time.
- » **Provide a clean face-rest cover for each client.**
- » **At onsite locations, soiled linens are stored in a leak-proof bag such as a heavy trash bag until they can be laundered as discussed in the section titled, [Linen Management](#).** Ensure this bag is carefully sealed before linens are transported in a vehicle.

Linen Management

Linens include massage sheets, face-rest covers, pillow cases, bolster covers, hand towels, bath sheets or towels, bath or shower mats, hair wraps, bathrobes, blankets, and any other cloth material used to cover surfaces or cover the client during a massage session.

Soiled linens are defined as any cloth material used during a massage session that makes contact with the client's skin or hair. Any linen that touches a client's skin or hair must be properly laundered before use with another client.



- » **Wear a face mask** while handling soiled linens when COVID-19 is present in the community.

- » **If blood or body fluid is present on the linens, wear gloves when handling the linens and store the linens in a leak proof bag separately from other soiled linens.**

- » **At the conclusion of a massage session, identify, gather, and remove all soiled linens from the session room.** Do not leave soiled linens in the session room.

- » **Do not shake soiled linens** as this may disperse contaminated respiratory droplets into the air.

- » Typically, linens are stored in a ventilated container in the laundry area. **While COVID-19 is present in a community, store linens in a closed container.**

- » **Wash soiled linens with detergent in hot water and dry it completely using heat.** Wash linens promptly (*by the end of the workday*).

- » **Linens soiled with blood or body fluid are washed separately with hot water, detergent, and fabric-safe bleach and then dried with heat.**

- » After handling soiled linens, massage practitioners should **immediately wash or disinfect their hands** as described in the section titled [Hand Hygiene](#).

- » Before handling clean linens, massage practitioners should **disinfect their hands with an alcohol-based hand sanitizer** as described in the section titled [Hand Hygiene](#).

- » **Clean linens are stored in the session room** (not in the laundry area where they might come into contact with soiled linens) in a closed container until use.



GUIDELINES FOR Policies and Procedures

These updates and changes to standard massage policies and procedures aim to decrease health risks while COVID-19 is present in communities. Symptoms of COVID-19, waiting for the results of a COVID-19 test, and a positive COVID-19 test contraindicates massage. The FSMTB assumes that massage is only practiced when it is authorized by state and local regulations. **The FSMTB recommends these policy changes and procedural guidelines.**

Changes to Client Informed Consent

Massage practitioners must assume that clients are unaware that the risk of infection from COVID-19 increases through close contact with other people, like the level of contact required to provide massage. Therefore, practitioners must inform clients of this risk and obtain their signature indicating that they understand the risk and wish to receive massage therapy.

Sample language:

“I understand that close contact with people increases the risk of infection from COVID-19. By signing this form, I acknowledge that I am aware of the risks involved and give consent to receive massage from this practitioner.”

Practitioners must also alert clients of procedures related to possible exposure to COVID-19.

Sample language:

“I understand that my name and contact information might be shared with the state health department in the event that a client or practitioner at this facility tests positive for COVID-19. My contact details will only be shared in the event they are relevant based on suspected exposure date, and only for appropriate follow-up by the health department.”

Changes to Session Scheduling

- » If multiple massage practitioners work at one facility, **stagger session schedules** to prevent crowding in reception areas. Promote physical distancing of 6 feet of space between all people at the facility.

- » **Allow ample time between clients** to properly use disinfectant products, including required contact times.

- » **Clients receiving massage require pre-session health intake processes and communication.** Therefore, walk-in appointments are not advised. Change your current policies to “by appointment only.”

Changes to Health Screening Procedures



- » If possible, **conduct health intakes and updates to client health forms before the client's session** through email and a phone call.

- » **Include a COVID-19 specific health intake addendum** (see [Appendix A](#) for an example) as part of emailed client health forms. Use this form to determine if it is safe for the client to visit the massage facility.

- » **Alternatively, screen clients by asking COVID-19 specific questions including:**

- › **Have you been asked to self-isolate or quarantine** by a doctor or a local public health official in the last 14 days?

- › **Have you experienced any cold or flu-like symptoms** in the last 14 days (*fever, cough, shortness of breath or other respiratory problem*)?

- › **Have you had close contact with or cared for someone diagnosed with COVID-19**, or someone exhibiting cold or flu-like symptoms within the last 14 days?

- › **Have you been tested for COVID-19?** What type of test did you have? When were you tested? What was the result?

- » **If you have any reason to suspect that the client is not completely healthy, postpone their session.**

Changes to Client Arrival Procedures



Clients at High Risk

Unless otherwise directed by the client's primary healthcare provider, clients at higher risk of severe illness from COVID-19 should forgo massage while the virus is present in their communities.

- » **Ask clients to wait in their cars or outside** until you text them or call them to come in.

- » **Greet clients at the door, avoiding practices such as handshaking or hugging.** Use a no-touch thermal temperature scan to confirm the client's temperature is no higher than 100.4°F [38°C]. If a client has a temperature above 100.4°F, or if they have developed cold or flu-like symptoms or other symptoms suggesting illness since the pre-session phone call, reschedule their massage session and suggest that they call their primary care provider for consultation.

- » **If the client arrives wearing medical gloves, request that they remove these gloves before entry, as gloves may be contaminated with respiratory droplets from the client touching their nose or face.**

- » **Confirm that the client has an acceptable face mask.** If the client does not have an acceptable face mask, provide the client with a disposable face mask.

- » **Ask the client to sanitize their hands with an alcohol-based hand sanitizer and demonstrate how to put on and take off the face mask correctly** (*use your own mask as an example*). The client should sanitize their hands before putting on their mask.

- » **Escort the client to the session room.**

- » While information is still limited, the **CDC indicates that these underlying conditions** place people at higher risk for severe illness from COVID-19:
 - » *People 65 years or older*

 - » *Chronic lung disease*

 - » *Moderate to severe asthma*

 - » *Heart conditions*

 - » *Compromised or suppressed immunity*

 - » *Severe obesity (body mass index of 40 or higher)*

 - » *Diabetes*

 - » *Chronic kidney disease*

 - » *Liver disease*

Changes to Session Procedures

While COVID-19 is present in the community, these changes to session procedures are advised:

-
- » **Friends and family of the client are not allowed to wait** in the reception area while the client receives massage, unless they are that client's legal guardian.
-
- » **Both the practitioner and client must wear a face mask during the session.** The client must also wear a face mask from the time they enter to the time they leave the facility.
-
- » The CDC suggests that COVID-19 infected respiratory droplets can be dispersed when people talk. For this reason, **talking is limited to communication about pressure, warmth, and comfort** while in the enclosed space of the session room.
-
- » **Intra-oral or nasal massage is prohibited** at this time because it increases the risk of COVID-19 exposure.
-
- » Because a face mask is worn for the duration of the massage, **safe face massage is not possible and therefore prohibited at this time.**
-
- » **If possible, process the client's payment and rebooking the next session in the session room after the client has had the opportunity to dress.** The disinfection load on the facility is reduced when there is less opportunity for clients or practitioners to contaminate surfaces when performing these session procedures.
-
- » **If applicable, utilize electronic methods for charting and client surveys/feedback.**
-
- » **Practitioners should disinfect their hands directly after handling client payment materials such as credit cards, cash and receipts as these surfaces may be contaminated.**
-
- » **Request that the client sanitize their hands** with an alcohol-based hand sanitizer directly before they leave the session room and before they pass through common areas of the facility.
-



Client Follow Up Procedures

- » **Ask clients to share if they have developed any cold or flu-like symptoms or tested positive for COVID-19.**

- » **Massage practitioners are not authorized to share the health data of their clients without the client's written consent.**
However, should a client develop symptoms of COVID-19 within two weeks of a session, practitioners should contact their local health department for consultation and guidance.

Client Communication

- » **Update the business website to reflect business policy and procedural changes related to COVID-19.**

- » **Communicate policy and procedure changes to clients during the booking phone call.** Email clients an outline of procedures they can expect as part of the health intake phone call and when they arrive at the business for their session. (See [Appendix C](#) for a Sample Client Notice.)



GUIDELINES FOR

Practitioner Hygiene

Hygiene is defined as the practice or principles of keeping oneself or the environment clean in order to maintain health and prevent disease. Proper practitioner hygiene reduces the spread of infectious pathogens to others and increases the likelihood that the practitioner remains healthy.

Cleanliness on Workdays

- » **Practitioners must shower and wash their hair on workdays.** Facial hair is neatly trimmed. Long hair is pulled back and secured so that it will not touch a client during a massage.
- » **Practitioners must practice appropriate oral healthcare** before sessions, between sessions, and after consuming food or beverages.
- » **Practitioners keep their fingernails short**, filed to a smooth edge, and natural (*no nail polish, long nails, or artificial nails*).
- » **Practitioners remove rings, bracelets, watches, and fitness trackers from their hands, wrists, and forearms during the massage workday.**

Hand Hygiene

Follow the CDC protocol for proper hand washing directly before every massage session, directly after every massage session, directly after using the restroom, directly after handling soiled linens, and directly before and after eating while at work. Increased hand washing helps protect against infectious diseases.

- » **Wet the hands** with water of any temperature.
- » **Add liquid soap to wet hands** and use friction for 20-seconds to work the soap into a lather and lift contaminants off the skin's surface.
- » **Use friction on every surface of your hands.** Rub your hands palm to palm, lather the backs of your hands, scrub between your fingers and thumbs, rub the backs of your fingers on the opposing palms, and clean your thumbs and fingertips.
- » **Because massage practitioners provide massage with the forearms and elbows, wash these areas with soap and water, too.** Lather the entire forearm over the elbow for an additional 20 seconds of friction.
- » **Rinse** the hands, elbows, forearms and wrists with water.
- » **Dry the arms and hands** with disposable paper towels and use the same paper towels to turn off the water and open any doors on the way to the session room.

Use of Alcohol-Based Hand Sanitizers



- » Alcohol-based hand sanitizers (hand sanitizer) used in a massage practice should contain between **60-95% alcohol**.

- » **Apply enough hand sanitizer** to cover your hands, forearms, and elbows.

- » Rub the hands together and rub the hands over the forearms and elbows using friction until the product is completely dry.

- » **Note that hand washing with liquid soap and water is preferable to the use of hand sanitizer**, but hand sanitizer may be used when soap and water are not available.

- » Be aware that **hand sanitizer is less effective when applied to greasy hands** (e.g., when hands are covered by massage lubricant).

- » Use hand sanitizer **directly before you touch a client** to begin a massage **and directly after you complete a massage** before you leave the session room.

- » **If liquid soap and water is not readily available**, use hand sanitizer directly after handling soiled massage linens.

- » Use hand sanitizer **directly before you handle clean massage linens** to prepare the massage table.

- » Use hand sanitizer **directly before you put on a face mask** and **directly after you remove a face mask**.

- » Use hand sanitizer **directly before you put on medical gloves** and **directly after you remove medical gloves**.

- » Use hand sanitizer **directly after you absentmindedly or inadvertently touch your face, mouth, nose, facial hair, or hair during a massage session and before you resume massage**.

- » Use hand sanitizer **directly after you sneeze into an elbow**.

- » Use hand sanitizer **directly after handling anything that is potentially contaminated**.



Respiratory Hygiene and Cough Etiquette

Respiratory hygiene and cough etiquette aim to prevent or reduce the distribution of respiratory droplets into the environment.

Respiratory hygiene and cough etiquette are practiced consistently by massage practitioners and encouraged in clients.

- » **Cover the mouth and nose** when coughing or sneezing with a tissue. If a tissue is not available, cough or sneeze into an elbow.

- » **Dispose of soiled tissues** immediately after use in a no-touch trash can.

- » **Wash your hands after contact with respiratory secretions.** If soap and water is not available, decontaminate your hands with an alcohol-based hand sanitizer.

- » **To encourage respiratory hygiene and cough etiquette, provide tissues, no-touch trash cans, and alcohol-based hand sanitizer throughout the massage facility.** Post signs to educate clients and remind staff to practice respiratory hygiene and cough etiquette while at the massage facility.

Use of Appropriate Personal Protective Equipment

Personal protective equipment (PPE) refers to gloves, face masks, respirators, protective eye wear, and special clothing healthcare professionals use to shield themselves from infectious diseases while working with patients and clients. In response to COVID-19, massage practitioners are advised to use face masks and protective clothing. Gloves are worn to handle potentially contaminated linens and when discontinuous skin, blood, or body fluid is present.

FACE MASKS

- » **Disposable surgical face masks are thin, paper-like material that fit loosely around the mouth and nose.** They are disposable and replaced with a fresh mask at the end of each massage session. Surgical masks block large-particle respiratory droplets from being expelled or inhaled.
- » **N95 respirators, simply called “respirators” offer more protection.** They protect against large and small particle droplets dispersed from the respiratory system. They do not fit properly when worn over facial hair because they must adhere to smooth skin.
- » **Respirators are worn for a massage workday and decontaminated by storing them in a breathable paper bag for 24 hours before they are reused.** COVID-19 persists for 17 hours on respirator material. The CDC notes that respirators can be recycled in this way until they show signs of wear or fail to adhere to smooth skin.
- » **Directly before putting on a mask, wash hands with liquid soap and water or sanitize them with an alcohol-based hand sanitizer.**
- » **Cover the nose and mouth with the mask and tighten the straps to ensure that there are no gaps around the edges of the mask.** With respirator masks, place both clean hands completely over the mask and inhale strongly. The mask should pull into your face.
- » **Avoid touching the outside surface of the face mask** and the inside surface of the face mask while wearing the mask as these surfaces are contaminated.
- » **If you touch your mask while providing massage, pause and sanitize your hands with alcohol-based hand sanitizer before you resume.**
- » **Remove the mask from behind to avoid touching the surface of the mask,** wash hands with liquid soap and water or sanitize them with an alcohol-based hand sanitizer.



PROTECTIVE CLOTHING

- » While COVID-19 is present in the community, **cover your clothing with protective aprons, short-sleeved lab coats, or disposable medical gowns.** Change these protective garments between clients.
- » Alternatively, **purchase multiple pairs of scrubs** and change them between clients.
- » **The CDC recommends changing out of work clothes and work shoes into street clothes and washing work garments at the healthcare facility** to avoid the transport of potentially contaminated items to the healthcare professional's home.
- » If circumstances do not permit laundering on site, **work clothes should be removed and contained for laundering**, prior to entering the home environment.
- » **Safety goggles or glasses** (*note: eyeglasses are not acceptable protection*) must be washed between each client or replaced.

GLOVES

- » **Practitioners use nitrile or vinyl, un-powdered gloves anytime the potential exists to come into contact with blood or body fluids** including when a client has broken skin in an area where massage is provided or when the practitioner has broken skin on the hands or forearms.
- » **Considerations for COVID-19 do not require special glove use.** Gloves might be worn when handling potentially contaminated laundry, but are not necessary so long as the practitioner practices correct hand hygiene. Heavy duty nitrile cleaning gloves can also be worn, sanitized and reused, reducing environmental waste.



Self-Monitoring for Signs and Symptoms of COVID-19

- » **The practitioner should self-monitor** for the signs and symptoms of COVID-19 every day.

- » **Take your temperature before the workday** and then **again in the afternoon** (*when viruses tend to spike temperature*).

- » **COVID-19 causes a wide range of symptoms.** Treat any new symptom as suspicious. The most common symptoms are mild cold or flu-like symptoms, especially a cough, sore throat, and shortness of breath.

- » **Should a practitioner develop a temperature or symptoms of illness, they should cancel their massage appointments** and self-isolate for 14 day or seek to obtain COVID-19 testing so they can be cleared of infection and return to work.

Exposure or Expected Exposure to COVID-19

- » **In the event that a practitioner suspects that they have been exposed to COVID-19** they should self-isolate until they can obtain testing and be cleared of infection.

- » **If a client calls to report that they have tested positive for COVID-19 within 2 weeks of the massage session,** the practitioner should self-isolate until they can obtain testing and be cleared of infection.

COVID-19 Testing

- » **If you believe you need a COVID-19 test,** contact your primary care provider for consultation and guidance.

- » **COVID-19 testing may also be available at a local urgent care facility.** Call to make an appointment or receive consultation and guidance.

- » Because of the widespread unavailability of tests and their need by healthcare professionals at higher risk of infection, **the FSMTB is not recommending the mandatory and regular testing of massage professionals.**



GUIDANCE FOR Massage Schools

The outbreak of COVID-19 disrupted colleges, universities, and vocational programs across the country. Now, as states begin to lift stay-at-home orders, schools are preparing their campuses for the return of students in communities where COVID-19 is still present.

The guidance offered here is meant to supplement procedures already in place from the U.S. Department of Education and each state's Department of Education. Schools must adhere to the policies outlined by these governmental institutions. Therefore, direction offered by the FSMTB is massage and bodywork specific and school administrators are asked to apply information from previous sections to the practice of massage in the classroom and student clinic.

If a student, faculty, or staff member becomes sick with symptoms of COVID-19, or tests positive for COVID-19, ask that person to self-isolate and contact the state health department for consultation and guidance.

Here we'll address school cleanliness, disinfection, and disease prevention, classroom policies and procedures, and COVID-19 training.

School Cleanliness, Disinfection, and Disease Prevention

Review the section of this document titled *Facility Cleanliness, Disinfection, and Disease Prevention*. These guidelines apply to the school reception area, retail area, restroom, hallways and stairways, session rooms, specialized spa equipment, the break room, and the laundry area of the student clinic.

In general, and for all areas of your school:

- » **Declutter and remove any unnecessary items** from school areas to reduce the daily disinfection burden of wiping surfaces (*e.g., magazines, books, bookshelves, knickknacks, candy bowls, tea stations, damaged equipment waiting to be fixed, learning tools that are rarely used, etc.*).

 - » **Organize school areas to promote physical distancing by removing chairs**, spacing chairs 6 feet apart, placing tape in the shape of an X on areas where people should not sit or stand, or by blocking off areas where people may be tempted to congregate. If possible, install a safety plexiglass shield on reception counters as a physical barrier between people when conducting transactions.

 - » **Make alcohol-based hand sanitizer easily accessible** throughout the facility and encourage students, faculty, and staff to wash and sanitize their hands regularly.

 - » **Make tissues and no-touch trash cans available** for the practice of respiratory hygiene and cough etiquette.

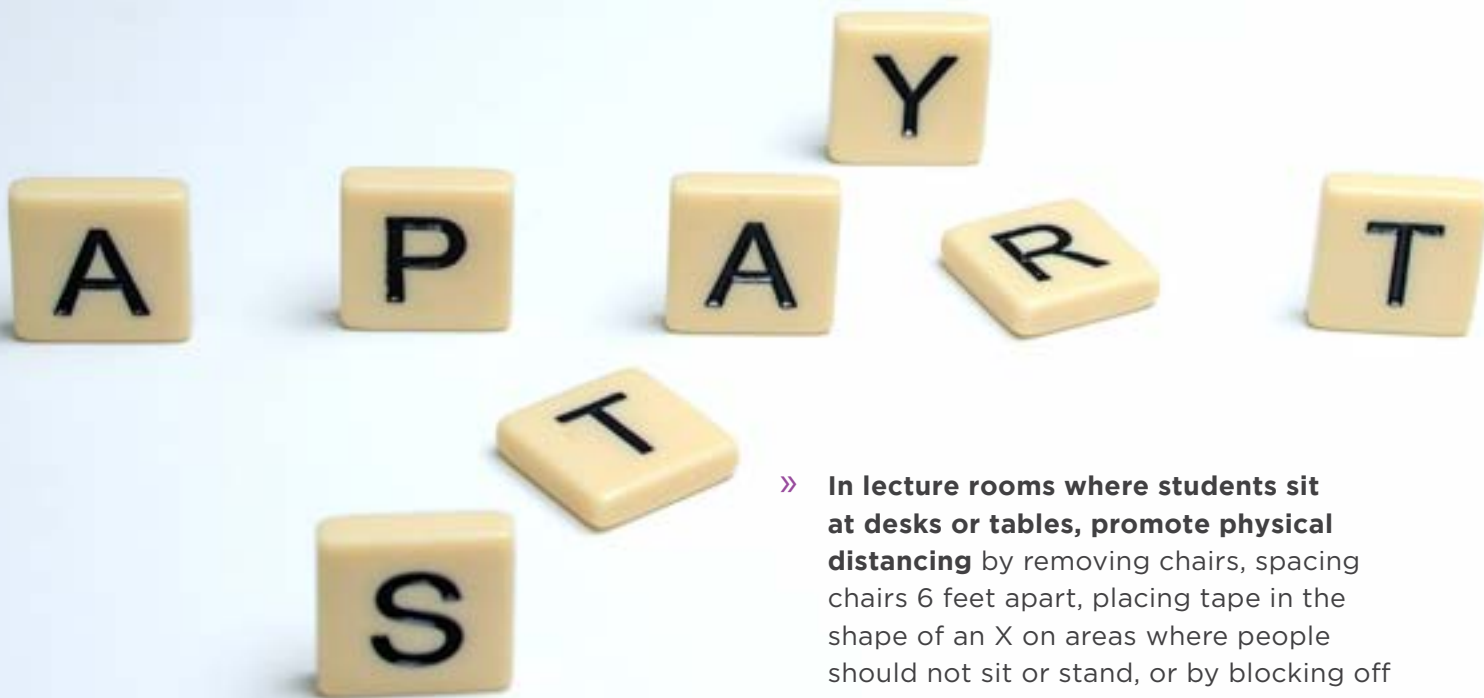
 - » **Encourage students, faculty and staff to wear their own face masks to the facility.** Provide surgical or other disposable face masks to those without a face covering upon arrival.

 - » **Place signs** at eye level to educate students, faculty, and staff about respiratory hygiene and cough etiquette, hand hygiene, symptoms of COVID-19, and physical distancing.
- » **Encourage students, faculty, and staff to clean and disinfect high-touch surfaces throughout the school day with an EPA-registered disinfectant.** High-touch surfaces include door handles, counters, tabletops, pens used to complete paperwork, dry erase markers, clipboards, bones and skeletons used as learning tools, desks, light switches, phones, and keyboards.

 - » **Ventilate areas of the school** to the degree possible by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.

 - » **Clean floors at the end of the day** by mopping hard floors with an EPA-registered floor cleaner. Vacuum carpeted floors using a vacuum cleaner with a HEPA air filter if one is available. Wear a face mask and vacuum when there are no people in the space (*vacuums can disperse respiratory particles into the air*).





» **Review the section of this document titled, [Cleaning and Disinfecting Products](#) and purchase cleaning products and EPA-registered disinfectants to meet the cleaning needs for your school.** Make disinfection products readily available to promote regular high-touch surface decontamination.

» **Determine the number of people that can safely gather** in the school at one time (e.g., 25% of posted maximum capacity by order of the State Fire Marshal, 1 person per 110 square feet of usable space, or issued state requirement). Adjust classroom meeting days and times to accommodate this number, if needed.

» **In lecture rooms where students sit at desks or tables, promote physical distancing** by removing chairs, spacing chairs 6 feet apart, placing tape in the shape of an X on areas where people should not sit or stand, or by blocking off areas where people may be tempted to congregate. Students must wear masks during lectures.

» **Delineate lecture or teaching space for instructors that reminds students to maintain their physical distance.** Unmasked instructors must maintain 6 feet physical distancing from students. Identify areas where teachers can talk with students privately while maintaining physical distance.

» **In classrooms where students exchange massage and bodywork, place tape on flooring to indicate where massage tables are located.** Plan 10 feet of space between places where students stand while giving massage and the next massage area to allow movement around the table and avoid encroachment upon nearby peers.

» **Students should place their personal items on their own desk/table or designated area (e.g., locker).** Be sure locker assignments support physical distancing. Institute a regular schedule for emptying and disinfecting lockers.

Classroom Policies and Procedures

These updates and changes to standard massage policies and procedures aim to decrease health risks while COVID-19 is present in communities. The FSMTB recommends these policy changes and procedural guidelines.

- » **Both the student acting as a client and the student acting as a practitioner must wear a face mask for the duration of the massage exchanges.**

- » **To reduce risk, students acting as massage practitioners should wear a mask while giving massage to classmates and clients in the student clinic.** If N95 masks are used, supply 2 masks to each student. Masks are removed at the end of a class or student clinic shift and placed in a breathable paper bag for 24 hours. COVID-19 lasts on respirator mask surfaces for 17 hours. This practice ensures that students have a sanitary mask to wear to each massage exchange class or student clinic shift.

- » **Encourage and reinforce proper hand hygiene, proper respiratory hygiene and cough etiquette, ongoing physical distancing, and attention to disinfection of high-touch surfaces and surfaces potentially contaminated during massage exchanges.**

- » **The CDC suggests that COVID-19 infected respiratory droplets can be dispersed when people talk.** For this reason, ventilate student clinic session rooms and student classrooms to the degree possible or run HEPA air filtration units.

- » **Review the section titled [Linen Management](#) and ensure students bring a leak-proof trash bag to school for the transport of soiled linens from massage exchange classes.** Remind students that they should not shake soiled linens, but should wash linens promptly in hot water with detergent and dry them with heat. Students must bring freshly laundered linens to classes.

- » **During massage exchange classes, remind students to bring an extra set of clothing to wear after classes.** Students should change their clothing and place contaminated clothing in a leak-proof trash bag for transport home. Remind students to only remove this clothing from the trash bag when they are ready to wash it and to wash their hands demonstrating proper hand hygiene after handling potentially contaminated linens.

- » **Discuss lenience on attendance policies, student sick leave, and online makeup work with the state Department of Education and accreditation agencies.** Develop make up work that students can finish to maintain their grades should they become sick with any illness and need to self-isolate or await COVID-19 testing.

STUDENTS AT HIGH RISK

While information is still limited, the CDC indicates that these underlying conditions place people at higher risk for severe illness from COVID-19:

- › People 65 years or older
- › Heart conditions
- › Diabetes
- › Chronic lung disease
- › Compromised or suppressed immunity
- › Chronic kidney disease
- › Moderate to severe asthma
- › Severe obesity (body mass index of 40 or higher)
- › Liver disease

Unless otherwise directed by the student's primary healthcare provider, students at higher risk of severe illness from COVID-19 should take a leave of absence while the virus is present in their communities. If they choose not to take a leave of absence, schools should obtain student's written informed consent that they understand they are at high risk and wish to continue with their classes anyway.

SELF-MONITORING FOR SIGNS AND SYMPTOMS OF COVID-19

- ›› **Students, staff, and faculty should self-monitor** for the signs and symptoms of COVID-19 every day.
- ›› **Take your temperature before the workday and then again in the afternoon** (when viruses tend to spike temperature).
- ›› **COVID-19 causes a wide range of symptoms.** Treat any new symptom as suspicious. The most common symptoms are mild cold or flu-like symptoms, especially a cough, sore throat, and shortness of breath.
- ›› Should a school community member develop a temperature or symptoms of illness, **they should stay home from school and self-isolate for 14 days** or seek to obtain COVID testing so that they can be cleared of infection and return to school. For a sample Action Plan for a Positive COVID-19 Test, please see [Appendix B](#).

CHANGES TO STUDENT, FACULTY, AND STAFF ARRIVAL PROCEDURES

- » **Assign one or two staff members to greet the school community** at the primary entrance to the building.
- » **Students, staff, and faculty line up at the front door**, maintaining 6 feet of distance between them.
- » **Assigned staff members use no-touch thermal temperature scans to confirm entering people have a temperature that is no higher than 100.4°F.** Ask each arriving person if they have developed cold or flu-like symptoms or other symptoms suggesting illness. If anyone has a fever or has developed symptoms, they are sent home.
- » **Confirm that each arriving person is wearing an acceptable face mask** or provide them with a disposable face mask.
- » Ask each arriving person to **sanitize their hands upon arrival.**

COVID-19 Training

Students, faculty, and staff need to know the school's plan for ensuring their safety. Designate a school administrator, manager, supervisor, or other person to be responsible for monitoring the health of the faculty, instructors, and students and to enforce the COVID-19 safety plan. Use these guidelines as a training foundation.

Alert the school community to policy and procedural changes related to COVID-19 and cover:

- » COVID-19, what is it, what is known about transmission, symptoms, and risk factors related to massage and bodywork.
- » Methods for preventing the spread of COVID-19 in classrooms and in the student clinic.
- » How to practice proper hand hygiene, respiratory hygiene and cough etiquette, physical distancing, and disinfection of high-touch surfaces.
- » How to use PPE. How to put it on. How to take it off. When to use it.
- » School protocols and procedures related to COVID-19.
- » Student clinic protocols and procedures related to COVID-19.
- » Self-monitoring practices and what to do if you develop symptoms.



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SAMPLES

Appendices

Appendix A: Intake Form Addendum

Appendix B: Action Plan for Positive COVID-19 Test

Appendix C: Sample Client Notice

APPENDIX A:

Intake Form Addendum

To best protect your health and the health of others, please fill out this form before each massage and bodywork session. *Thank you!*

NAME: _____ **DATE:** _____

Have you been tested for COVID-19? If yes, what type of test did you have?

When was your test?

What were the results?

Have you been in places with a high infection rate within the last two weeks (e.g., state-designated “hotspots”)? If yes, please explain.

Please check if you are experiencing any of the following as a **NEW PATTERN** since the beginning of the pandemic:

- | | | |
|--|--|--|
| <input type="checkbox"/> Fever | <input type="checkbox"/> Nasal, sinus congestion | <input type="checkbox"/> Sudden onset of muscle soreness
(not related to a specific activity) |
| <input type="checkbox"/> Chills | <input type="checkbox"/> Loss of sense of taste or smell | <input type="checkbox"/> Rash or skin lesions
(especially on the feet) |
| <input type="checkbox"/> Cough | <input type="checkbox"/> Fatigue | |
| <input type="checkbox"/> Sore throat | <input type="checkbox"/> Shortness of breath | |
| <input type="checkbox"/> Diarrhea, digestive upset | | |

Do you have any new discomfort with exertion or exercise?

I declare that the information provided above is true and accurate to the best of my knowledge.

(print name)

(signature)

(date)

APPENDIX B:

Action Plan for Positive COVID-19 Test

IF SOMEONE ASSOCIATED WITH A MASSAGE THERAPY FACILITY TESTS POSITIVE FOR A CURRENT COVID-19 INFECTION:

If a massage practitioner, client, staff member, teacher, or any other personnel associated with an outpatient massage therapy facility (including private practice, school, clinic, spa, franchise, and others) tests positive for a current infection with SARS CoV-2 (COVID-19), then we recommend the following actions:

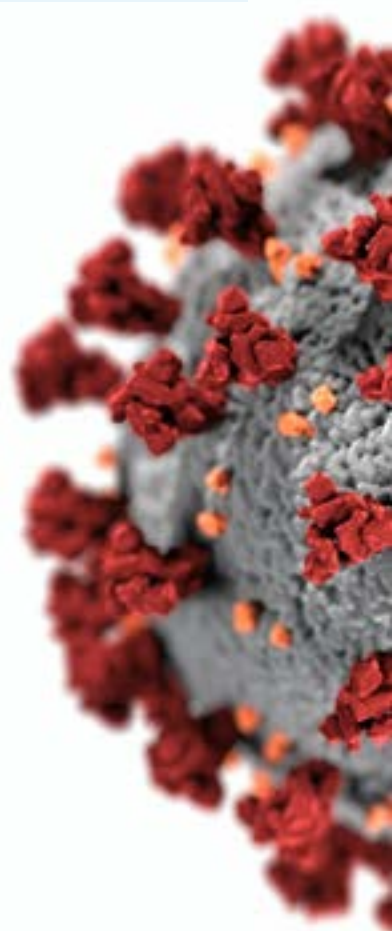
(Note: the terms “self-quarantine” and “close contact” are defined below.)

If the currently infected person is a client, patient, customer, or guest:

- The massage therapy facility complies with contact tracing efforts, working with the Department of Health and other entities as needed.

- The massage practitioner(s) who worked with the client gets tested for the virus (if possible), and must go into self-quarantine for 14 days following close contact with that client.

- All other clients of that massage practitioner who have had close contact with them in the meantime must be notified that they may have been exposed. (Public health statements recommend that they also go into self-quarantine for 14 days after their exposure, but that is not within the purview of the massage therapy facility.)



If the currently infected person is a massage practitioner or student working in a public clinic:

- The massage therapy facility complies with contact tracing efforts, working with the Department of Health and other entities as needed.
- All of the massage practitioner's clients from the two weeks leading up to the positive test must be informed that they have been exposed. (Public health statements recommend that they then go into self-quarantine for 14 days after their exposure.)
- The room(s) and all the tools that the massage practitioner used must be thoroughly disinfected and left unused for a minimum of three days, if possible.
- The massage practitioner must go into self-quarantine until they test negative and all symptoms have resolved.
- Any other personnel at the facility who had close contact with the massage practitioner must go into self-quarantine for 14 days after their exposure. This might be shortened if accurate testing determines that they are not infected.

If the currently infected person is a massage therapy student:

- The school complies with contact tracing efforts, working with the Department of Health and other entities as needed.
- The student must go into self-quarantine until they test negative and all symptoms have resolved.
- All of the students and staff with whom the infected person had close contact within the previous two weeks must be informed that they have been exposed. They must go into self-quarantine for two weeks after their last exposure. This might be shortened if accurate testing determines that they are not infected.
- The infected person's storage area must be emptied, disinfected, and left unused for a minimum of three days.

If the currently infected person is a staff member (front desk, teacher, school administrator, etc.)

- The facility complies with contact tracing efforts, working with the Department of Health and other entities as needed.
- The infected person must go into self-quarantine until they test negative and all symptoms have resolved.
- All people who work at the facility who had close contact with the infected person within the previous two weeks must be notified that they have been exposed, and they must self-quarantine for 14 days after their last exposure. This might be shortened if accurate testing determines that they are not infected.

DEFINITIONS

Self-Quarantine:

“You should monitor your health for fever, cough and shortness of breath during the 14 days after the last day you were in close contact with the person who had COVID-19. You should not go to work or school, and you should avoid public places for 14 days.”

<https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/COVIDExposed.pdf>

<https://www.vdh.virginia.gov/coronavirus/coronavirus/local-exposure/>

NOTE: in addition to these guidelines, we recommend that if a person has been informed that they have been exposed to the virus, they should get tested if possible.

Close Contact:

CDC: March 19, 2020

Being within 6 feet of a person who has the virus for 30 minutes or more

(Note: some hospitals reduce the “safe” exposure time to 10 minutes or more.)

<https://www.cdc.gov/mmwr/volumes/69/wr/mm6911e1.htm>

CDC: April 15, 2020

Close contact for healthcare exposures is defined as follows: a) being within approximately 6 feet (2 meters) of a person with COVID-19 for a prolonged period of time (such as caring for or visiting the patient; or sitting within 6 feet of the patient in a healthcare waiting area or room); or b) having unprotected direct contact with infectious secretions or excretions of the patient (e.g., being coughed on, touching used tissues with a bare hand).

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

CDC: May 5, 2020

a) Being within approximately 6 feet (2 meters) of a COVID-19 case; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case or **b)** having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-criteria.html>

APPENDIX C:

Sample Client Notice

Dear **CLIENT**,

I hope this finds you and your family in good health. While many things have changed, one thing has remained the same: my commitment to your safety and health.

By its very nature, massage and bodywork requires skin-to-skin contact and you should be familiar with the fact that infection control has always been a top priority for my practice. As we navigate life with additional requirements and modify existing measures due to the coronavirus, please help me to support all of my clients by cooperating with some new requirements.

My practice follows Practice Guidelines recommended by the Federation of State Massage Therapy Boards (FSMTB), along with infection control recommendations made by the U.S. Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA).

You may see some changes when it is time for your next appointment. I made these changes to help protect my clients and myself. For example:

- I will communicate with you beforehand to obtain updates to your health information and ask you specifically about your potential exposure to COVID-19.
- When you arrive at the office, I'll ask that you wait in your vehicle until I text you or call you to come in. This ensures that we don't have too many people in the reception area at one time.
- I will greet you at the door and use a no touch thermal temperature screening to confirm that you don't have a fever.
- I'll ask you if you have developed any symptoms of illness since we spoke on the phone. If you feel ill on the day of your session, there is no penalty for canceling your appointment. Massage is not advised if you have any symptoms of illness.
- Please bring a face mask to use while you are in the building, and during your massage.
- I will ask you to sign an informed consent form that states, *"I understand that close contact with people increases the risk of infection from COVID-19. By signing this form, I acknowledge that I am aware of the risks involved and give consent to receive massage from this practitioner."*
- There is a hand-hygiene station that I will ask you to use when you enter the office. You will also find hand sanitizer in the reception area and other places in the office for you to use as needed.

I look forward to seeing you again and am happy to answer any questions you may have about the steps I take to keep you, and every client, safe in my practice. To make an appointment, please call my office at **xxx-xxx-xxxx**. My practice is tentatively scheduled to open on **day, month, date**.

Thank you for being my client. I value your trust and loyalty and look forward to welcoming you back to a safe, therapeutic touch environment.

Your Massage Therapist



Acknowledgments

The Federation of State Massage Therapy Boards extends acknowledgment and sincere appreciation to the members of the Practice Guidelines Task Force. The members of the Task Force worked diligently to research and prepare the Practice Guidelines and to share best practices for massage and bodywork practitioners during the global COVID-19 pandemic. The FSMTB is profoundly grateful for their subject matter expertise and their service.

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EXTERNAL REVIEWERS

The FSMTB appreciates those who supported the project by reviewing and providing comments during the preparation of the Practice Guidelines. Input from national organizational reviewers provided the Task Force with numerous perspectives before finalizing the document.

ABMP – Associated Bodywork and Massage Professionals
AMTA – American Massage Therapy Association
COMTA – Commission on Massage Therapy Accreditation
NCBTMB – National Certification Board for Therapeutic
Massage and Bodywork

TASK FORCE SUPPORT

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FSMTB BOARD OF DIRECTORS

The Board of Directors represents 46 state licensing boards and agencies that regulate the practice of massage and bodywork in the United States and Territories. Thank you to the Board of Directors and the Member Boards for their leadership during the global COVID-19 pandemic and for swiftly addressing the need for Guidelines for Practice with COVID-19 Considerations.

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The New York Times

Behind Illicit Massage Parlors Lie a Vast Crime Network and Modern Indentured Servitude

By Nicholas Kulish, Frances Robles and Patricia Mazzei

March 2, 2019

She was 49, a recent immigrant and deeply in debt to a loan shark back home in China when she answered an employment ad three years ago that promised thousands of dollars a month, but offered no job description. She realized too late that she had been tricked into working at a massage parlor in Flushing, Queens, where besides kneading backs, she was expected to sexually service up to a dozen men a day.

Some of the clients were violent, and the boss charged \$10 a day for her to sleep on a sofa in a room at the parlor where rats nibbled on her food. “The customers were very terrible,” said the woman, who, ashamed of the stigma of her former profession, asked that her name not be used. “After you perform a service, they would find an excuse to take the money away.” They would, she said, “do even worse things.”

In strip malls across the country, neon signs and brightly colored placards promise hot stones, acupuncture and shiatsu with photos of women or couples receiving relaxing shoulder rubs. But a traditionally Asian form of therapeutic relaxation with deep roots in big-city Chinatowns has spun off a different kind of massage parlor that has little to do with traditional remedies. It has exploded into a \$3 billion-a-year sex industry that relies on pervasive secrecy, close-knit ownership rings and tens of thousands of mostly foreign women ensnared in a form of modern indentured servitude.

[Read more about a thriving sex trafficking trade in Florida.]

The frequently middle-aged women who work in parlors with names like Orchids of Asia and Rainbow Spa are often struggling to pay off high debts to family members, loan sharks, labor traffickers and lawyers who help them file phony asylum claims.

In some cases, their passports are taken and their illegal immigration status keeps them further in the shadows, with some of them rotated every 10 days to two weeks between spas operated by the same owners. Forced to pay for their own supplies and even their own condoms, many women must sleep on the same massage tables where they service customers and cook on hot plates in cramped kitchens or on back steps.

“We stopped thinking about just cages, bars and chains as the means of coercion,” said John Richmond, the State Department’s top anti-trafficking official. “They are using nonviolent forms of coercion.”

The recent arrest warrant filed against Robert K. Kraft, owner of the New England Patriots — and the solicitation charges filed against nearly 300 men in multiple jurisdictions as part of the same case — riveted national attention to a stretch of Highway 1 along Florida’s Treasure Coast dotted with strip malls, gas stations and sapphire ocean views. Across the region, parlors were empty and many frequent clients were phoning their lawyers, wondering if more warrants were going to drop.

Law enforcement officials said there were an estimated 9,000 illicit massage parlors across the country, from Orlando to Los Angeles. The epicenter of this national underground is the bustling Chinatown in Flushing, in the New York City borough of Queens. Women — typically Chinese, but also Korean, Thai and East European — arrive at Kennedy International Airport, learn the trade and are sent out to places like Virginia, Iowa, Texas and Florida. Women are recruited locally through ads in Chinese-language newspapers or over the social network WeChat.

“Flushing is the center of this network,” said Lori Cohen, the director of Sanctuary for Families’ Anti-Trafficking Initiative, which has interviewed around 1,000 massage workers over the past five years and helped the 49-year-old immigrant who was sexually assaulted leave the business after she was arrested. “They are showing up in different parts of the country, but all of them have addresses in Flushing, Queens,” she said.

[Read: An epic tragedy in the underground sex industry in Flushing.]

The women are paid just a sliver of the \$60 or more the client pays for an hourlong massage. Their real money — and chance at a better life — comes in the form of tips, which they are encouraged or forced to amplify through illegal means.

A 60-year-old former massage worker from Taiwan, who agreed to be identified only by the nickname she commonly uses, Tina, said she was lured into working at a massage parlor in New York a decade ago by the travel agency broker who helped secure her visa to travel to the United States. “People come here and don’t have a place to live,” she said. “These places offer a place to live, and it seems like a nice idea. They say, ‘It’s not safe to keep your passport on hand,’ and they will ask to hold the passport.”

She was arrested several times before getting out of the business, and feels comparatively lucky. One close friend was spirited to Texas by traffickers, she said, had her passport taken and was forced to see eight to 12 customers a day. One day the tearful calls she often received from her friend came to an abrupt halt.

“A lot of the businesses that look like either nail salons or massage places, especially the places that offer massage, there are bad things happening there,” she said. “It’s 100 percent organized crime.”

The ubiquity of the massage parlors offers an accessibility and sheen of normalcy not offered by traditional brothels. And as the massage parlors have expanded even into small-town America in recent years, meticulously detailed review sites like Rubmaps have served as the Yelp and Foursquare of the illicit parlor business, with graphic anatomical descriptions of the women and explicit breakdowns of the sexual services proffered.

Even at illicit parlors, owners and managers can claim ignorance of the additional services offered by employees behind closed doors. The evidence gathered during raids and searches often tells a far different tale. The police say it is common to find ledgers tracking the number of “dates” women have had, as was found in a bust in Dallas in 2016. In one case in Kansas, a search of the premises yielded a notebook with handwritten Chinese-English translations that “included sexually explicit phrases such as ‘did you bring condom’ and ‘happy ending.’”

A federal law enforcement official, speaking on the condition of anonymity because this person is involved in active cases, said that the most common method for smuggling women from Asian countries was either a fraudulent tourist visa or a fraudulent work visa, such as for nursing work. Many came as students, then overstayed to work in the sex industry.

Many women arrive in the United States from China bearing heavy debt burdens and try to find work in restaurants or nail salons. But the money isn't good enough for the five-figure debts weighing them down. The massage jobs are presented as opportunities for fast, easy money.

"They will talk about how they used to work in a restaurant and it was really hard physically and they couldn't make that much money, and then they heard from somebody or saw an ad saying they could make a lot more money in a massage parlor," said Leigh Latimer, a supervising attorney at the Legal Aid Society's exploitation intervention project in New York.

One reason the Asian massage parlors remain so poorly understood is the extreme reluctance of the women to speak with the police and even with their own lawyers.

"Even though I've represented many, many women arrested in unlicensed massage parlors, because of the level of distrust of people working, almost all immigrants, almost all undocumented, they don't trust even their attorneys enough to let them know what's happened to them," Ms. Latimer said.

Some fear retaliation by traffickers to their families in China, and some feel morally indebted to those who helped find them a job, said Chris Muller, the director of training and external affairs at Restore NYC, an anti-sex-trafficking organization.

"This is a powerful exploitation tactic," he said. "Any favor is implied there is going to be a payment back. 'Look at what I have done for you. I found you a job. I found you a place to live and this is how you repay me?'"

Small networks of spas are also common, and their ownership structures are complex and opaque. "It's rare that you have a mom-and-pop business where they're just running one," said Lt. Christopher Sharpe of the New York Police Department's vice section. "Usually if they're running one, they have a second or a third business."

Bradley Myles, chief executive of Polaris Project, a nonprofit that works to combat human trafficking, said that the madams arrested on big raids like the recent ones in Florida — known as "mamasans" — are often women in their 60s and 70s who have spent decades in the sex trade but are usually pretty far down in the organization.

Above these site managers is usually a person who appears on paperwork as the massage parlor owner, but is often just a frontman running a shell company. The payouts from the shell company go to what is legally known as the “beneficial owner.”

“Very little is known of the behind-the-scene owners,” Mr. Myles said. “They are hiding behind shell companies, hiding behind mamasans. They are hiding behind fake people.”

In addition, the networks have groups of drivers that help move the women from place to place. Some networks are only two or three layers deep, others four or five.

“I’ve certainly seen indicia of larger networks and indicia of powerful transporters,” said the federal law enforcement official.

The Florida Department of Health disciplined 62 massage parlors or therapists last fiscal year, up from 14 the year before, records show. The agency receives upward of 300 complaints about unlicensed massage facilities each year.

Department inspection reports described women inside the spas living in tight quarters cluttered with essentials, including rolling bath carts stuffed with toiletries, shelves lined with coffee mugs and cooking pots and stashes of assorted snacks. The women slept on individual cots and in some cases appeared to keep their belongings and blankets inside locked plastic trunks.

Their IDs showed that several of them had addresses outside Florida, including in Flushing, N.Y.; Lilburn, Ga.; San Gabriel, Calif.; and Temple City, Calif.

Those who are arrested are not necessarily left to their own resources. When sheriff’s deputies in Martin County, Fla., were interviewing Lixia Zhu, 48, one of the massage parlor employees arrested two weeks ago, it wasn’t long before a New York lawyer arrived and identified himself as her lawyer. The lawyer, Baya Harrison IV, told The New York Times that Ms. Zhu used to work in New York and that her friends had hired him to defend her.

The county sheriff, William D. Snyder, said Ms. Zhu had tearfully told deputies and a public defender about how her passport was kept from her in a locked safe and how the woman she worked for once threatened her by brandishing a gun.

One woman in the Florida sting has been charged with human trafficking, after police officers conducting surveillance saw her shuttling two other women carrying suitcases in and out of a spa in Vero Beach.

Bob Houston, a former F.B.I. agent who now works as a consultant to combat trafficking, said that Thai traffickers often employ elaborate schemes to help women intended for the massage industry apply for tourist visas. The traffickers create false back stories, giving women the appearance of an established life at home, including a spouse and bank account, all to help them qualify for a tourist visa. They even produce fake diplomas from massage schools. The tab is usually \$40,000 to \$60,000, he said.

“They owe a bunch of money to the people who recruited them,” he said.

In December, 36 people in Minnesota were convicted for their roles in a Thai sex trafficking ring that shuttled hundreds of women from Bangkok to cities across the United States, including Phoenix, Las Vegas, Atlanta and Minneapolis.

The women, referred to as “flowers” by the criminal organizations, were forced to work at massage parlors with no choice about where, when and with whom they performed sex acts until their debts were paid off. They were permitted to move around outside the parlors only with so-called runners working for the organization, evidence in the case showed.

The decision by law enforcement in Florida to focus on patrons of the establishments in such a public way rather than the women working there has generated a lot of fear among clients.

John Musca, a criminal defense lawyer with an office in Vero Beach whose website advertises sex crime defense, said he has received panicked phone calls from many men who frequented the establishments and are worried that the police are about to come knocking.

“There are a great number of folks who are on pins and needles,” Mr. Musca said.