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FALL ISSUE 2019

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Inside

THE RMTBC REVIEW FALL 2019

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RMT Magazine is published twice a year for Registered Massage Therapists (RMTs). It provides a voice for RMTs and acts as a source for the latest research. It is a vehicle for the general population to understand and respect the valuable work of RMTs. Funding is provided by the RMTBC and through advertising revenue.

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You & Your Business

How accounting can help Massage Therapists be more profitable.
By Bob Wang, ctrl by Deloitte leader for the British Columbia region.



“The reality is, by staying on top of your books, you actually set your business up for success. Without it, you expose your business to risks.”

INCREASE YOUR RANGE OF MOTION

Why massage therapists need bookkeeping

Most massage clinic owners agree that bookkeeping is a necessary part of running a business. Yet with so many demands on your time, I’m willing to bet that bookkeeping often falls to the bottom of your to-do list. It shouldn’t. The reality is, by staying on top of your books, you actually set your business up for success. Without it, you expose your business to risks.

Bookkeeping: A health check for your business

There’s a direct relationship between bookkeeping and business health. Quite simply, you can’t monitor something you don’t have data for.

You might be surprised to hear how many business owners manage their business through their bank statements alone. If the statement shows money in the bank, then the perception is that everything is good. That’s dangerous.

Hopefully you’re not doing this, but if you are, remember that a lot of the money in your bank account isn’t even yours. Much of it is earmarked for GST or HST, payroll taxes, and other commitments you’ve already made. So when the end of the year rolls around, you could get a surprise tax bill that you haven’t put aside the cash for.

Up-to-date bookkeeping, on the other hand, gives you a clear picture of where you stand. Think of it like a medical check up: bookkeeping gives you the details you need to understand the overall health of your company.

Bookkeeping gives you insight

One of the biggest benefits of regular bookkeeping is that you’ll see a clear, timely picture of how your business is actually doing, day to day. This can help you manage your costs more effectively.

For example, as a massage clinic owner, you want to keep your labour costs under a certain percentage of what you’re charging. So knowing what your labour costs are, and comparing them to your pricing, is the first step toward ensuring that you’re actually generating positive margins on your services.

Similarly, as your business grows, you’ll find more and more costs seeping into your expense line. Prices on supplies will go up. Your rent will increase each year. By closely monitoring your expenses, you’ll know when to factor those increased costs into your pricing. Without that insight, your margins will start to erode.

Think of it like a medical check up [on the] health of your company.



“Comparing profits and expenses can show you exactly where your business is making money, and whether you’re spending that money in the right place.”

Bookkeeping provides the big picture

Bookkeeping is vital to your big-picture planning as well. For example, comparing profits and expenses can show you exactly where your business is making money, and whether you’re spending that money in the right place. Your clinic, for instance, might have more capacity than you’re using, which could suggest a need to downsize. Or worse, maybe your clinic is too small or you haven’t brought in enough contractors to keep up with demand, making you miss out on potential clients.

Bookkeeping can reveal other important trends as well. For instance, if you have multiple locations, the last thing you want is for a profitable location to be covering the losses of a less successful one. But without detailed bookkeeping, how would you know that was happening? Bookkeeping allows you to track the profitability of each location independently, making it easier to spot discrepancies in performance and highlight where improvement is needed.

Bookkeeping will even allow you to track customers and profit margin per associate, which can help you decide whether to hire a full-time employee or bring in a part-time contractor.

A need-to-have when you need money

Let’s face it, expanding a clinic, hiring more practitioners or opening up a new location costs money. You need financing to help make it happen. Here, bookkeeping is absolutely key.

Banks want to see that you’re a successful, growing business. When considering loans, they’ll ask for both prior year and year-to-date financials. Even if, say, you had a bad year last year but nine months into this year you’re doing great, having up-to-date books helps to give banks the whole story, increasing their confidence in you.

Books that are clean, understandable, and completed on time communicate confidence and make banks much more willing to loan you the money you’re looking for.

Look forward by looking back

Every business owner has big long-term goals. But it’s almost impossible to project into the future if you don’t have good historical data. That’s where bookkeeping is crucial.

Let’s say, for example, that you’re operating a single clinic, but you want to open a second. Without good accounting data, you won’t know how long it’ll take you to put the money together to do so, or how big a loan you might need. When you know your financials, you’re better able to plan ahead.

No matter what your future holds, make a point of completing your bookkeeping regularly, and you’ll be well on your way to success.



Bob Wang

Bob Wang is the ctrl by Deloitte leader for the British Columbia region. If you’re a business owner looking for bookkeeping assistance, reach out to Bob today at bobwang@deloitte.ca

When Bad Things Happen

*By Glen MacRae, Vice-President, Claims
Wilson M. Beck Insurance*

What started out as a good day, rapidly went downhill when a RMT opened the letter from the College of Massage Therapists. It read:

“Re: Complaint made to the College of Massage Therapists of B.C. by..., File No.: INQ-2019 –

A second, and third reading of the letter did nothing to calm the storm of emotions of the reader. The confusion, frustration, indignation, anger, embarrassment felt is common to everyone who has been the subject of a complaint. When emotions settled, the RMT reached out to the RMTBC for help and advice. They were told that along with their membership they also purchased malpractice insurance for such cases and were directed

to call Wilson M. Beck Insurance for help and guidance. They spoke with either Nikki Keith, Carlyle Machinski or Glen MacRae who guided them through the next step of the process. The RMT is advised that many complaints are investigated by the college are dismissed outright and of the remainder, all but a very few disciplinary hearings are resolved through either a consent resolution or some other means. A very small portion of the most serious claims result in some sort of extraordinary disciplinary action. Even with that knowledge, our RMT is still on edge. The wonder what to do? What will it cost? How will it affect their practice and reputation?

The Association's medical mal-practice insurance is available for purchase by members in good standing and who have met the requirements of the underwriter. For Inquiry Committee investigations it pays, from the first dollar, the cost of legal representation through the entire process. When the RMT reports the complaint and provides a copy of the written complaint to us before 3:00 pm, a lawyer will be assigned by 5:00 pm that day. The insurance company has a panel of law firms they use exclusively to represent RMTBC members. These firms, Whitelaw Twining and Alexander Holburn, have extensive experience in medical malpractice law. Once Wilson Beck appoints a law firm, from that point on the law firm

fully represent the RMT. The legal fees are sent directly to the insurance company and the RMT never sees an invoice. On average, it costs between \$5,000 and \$9,000 in legal fees to conclude an inquiry regarding a complaint.

Typically, there are two classes of complaint; one involves a matter raised by a client/patient and the other involves inquiries launched by the College on its own behalf. The regulator will state the RMT's obligations in the investigation process. The College will normally advise the RMT to retain records relating to the subject of the inquiry and in some cases they will demand production of those records and provide a due date to comply. At times it isn't possible for the RMT to meet the outlined deadline so, we at Wilson Beck, will inform the College that the matter has been reported to legal counsel and the insurance company and request an extension until counsel can speak with the RMT and respond on their behalf. We have

found the College to be professional and accommodating in respect to these requests. In all inquiries, records should be viewed by the RMT's lawyer prior to being turned over to the college investigator.

When the College begins its investigation, they will appoint an investigator to gather information. The College will engage a professional independent investigator, usually a lawyer experienced in this class of investigation. Their role is to gather facts and not to form opinions on the conduct of the RMT. When the RMT is represented by legal counsel, their lawyer will typically ask the college to provide advance notice of the investigation. In the process they will interview the RMT who is accompanied by the lawyer assigned to them. In advance of the interview, the RMT and their lawyer prepare for that meeting and following that interview, the investigator produces a summary which is vetted by the RMT's lawyer to ensure it accurately captures what was disclosed. In

due course the investigator produces a report with all supporting evidence which is reviewed and clarified if necessary by the RMT's legal counsel. If needed counsel will respond setting out the RMT's position and may recommend to the inquiry committee a course of action that they think is acceptable under the circumstances.

The Inquiry committee deliberates and writes to the RMT's lawyer with their findings.

All but a very few involve a resolution that is negotiated between the RMT, their lawyer and the College that is satisfactory to all parties. The College is required to publish the outcomes on their website as per the requirements of the Health Professions Act.

In this particular situation and at the conclusion of the process, the RMT was relieved by the support provided by the RMTBC, Wilson M Beck and their appointed legal counsel.



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Working at GF Strong

Lalita Kuehn, RMT tells us about her massage therapy experiences working in rehabilitation at GF Strong in Vancouver BC.



Lalita Kuehn RMT, photo by Lucy Robinson.

What led you to this path working at GF Strong?

Please tell us about your training, your practice and your interests.

Since graduating from West Coast College of Massage Therapy in 1995, I have worked in a variety of multidisciplinary clinics treating a range of conditions from chronic and acute injury rehab, to pre/perinatal care, as well as chronic illness pain management, and palliative care. I also have extensive experience in the field of Sports Massage Therapy.

I am thrilled to now be giving back to the profession by teaching at my alma mater, WCCMT. For the past several years I have been teaching manual skills, offering clinical supervision, and coordinating and supervising outreaches at sporting events, as well as running the outreach at GF Strong.

I am also a Certified Personal Trainer and Group Fitness Instructor, so I spend a lot of my spare time researching treatment approaches and planning workouts for my groups. I love learning about movement and the human body; all of my bookmarks are either related to Massage Therapy, fitness or nutrition. I love my anatomy apps!

How did you get started working at GF Strong?

My work at GF Strong is the result of a partnership between the West Coast College of Massage Therapy (WCCMT) and GFS, to give students the opportunity to apply their training in the treatment of Central Nervous System (CNS) conditions, while providing patients the benefits of Massage Therapy treatments at no cost. There is benefit to both the students as well as the patients, and I believe, to the profession as well. My role as a supervisor and facilitator includes coordinating and overseeing treatments, offering experiential learning opportunities, and communicating with other health care professionals at GFS.

Do you work within a team of health care professionals? How is the team assembled and who decides on the types of treatment?

Yes. At GFS, there is a team approach to care. Patients are regularly seeing many health care professionals during their stay and there is a lot of communication between disciplines. As a RMT, I am both gratified and deeply humbled to be able to contribute to the improvement in health and quality of life of these patients. I am fortunate to have excellent communication with the health care team, who offer guidance regarding patient needs, areas to be treated and



Above: GF Strong Rehabilitation Centre 2019. Photo courtesy of Vancouver Coastal Health.

possible precautions or considerations. The students are required to write up treatment plans which must be approved before any treatments are given.

What conditions do you treat?

There are 3 main programs operating at GF Strong; Spinal Cord Injuries (SCI), Acquired Brain Injuries (ABI) both traumatic and non traumatic, and Neuromusculoskeletal (NMS) which includes conditions such as MS, arthritis, burns, amputations, organ transplants, and joint replacements among others. My team works on site with the inpatient population in all of these programs.

Approximately 2/3 of our patients come from the SCI program. With Spinal Cord Injuries there is some degree of loss of voluntary motor control and varying loss of sensation depending on level and severity of injury. There are a host of musculoskeletal concerns that can develop, such as hyperreflexia, spasticity, changes in muscle tone, especially in muscle groups that are no longer opposed, loss of flexibility, decreased ROM, postural or joint dysfunctions, contractures, and edema. Also, patients can develop symptoms from prolonged static postures (ie. tight hip flexors from sitting in a wheelchair) or overuse syndromes in the shoulders and upper extremity if they are in a manual wheelchair. Massage Therapy can be effective at treating and reducing the pain

associated with many of these symptoms. Some other associated conditions that we don't treat directly but affect treatment planning are DVTs, decubitus ulcers, increased risk of osteoporosis from lack of weight bearing, and heterotopic ossification (painful calcium deposits in soft issue). There are also, considerations such as surgical interventions like spinal fusions, and laminectomies, which stabilize the spine and decompress the spinal cord, tracheostomies, when breathing support is needed, and medical devices such as IV tubes and urinary catheters.

With Brain Injuries we see some similar musculoskeletal issues as with SCI, spasticity, flaccidity, joint dysfunction etc, but with the typical unilateral flexor/extensor patterns. Therapy is focused on improving functional use of the affected limb(s). Depending on the area of the brain affected, there can be cognitive or speech impairments that can make communication more difficult. Students learn strategies to effectively communicate with their patients.

With the NMS group, treatment is dependent upon the condition/ symptoms being treated, be it gentle scar tissue mobilization after burn treatment, treating overworking accessory muscles of breathing in the case of lung transplant patients, or simply focusing on improving ROM, or pain management. There is a lot of variety.

How is massage therapy integrated into the treatment regime?

Patients staying at GFS maintain a busy rehabilitation schedule (both cognitive and physical) throughout the day, so as a result our Registered Massage Therapy training program happens in the evening so as not to disrupt their regimen. By the end of the day they can be quite fatigued and very happy to see us. Treatment sessions are given in the patient's room, either in their bed or wheelchair.

What do you enjoy most about your vocation?

As an instructor, I love seeing the 'AHA' moments when the students' conceptual learning meets the practical therapeutic applications. They get so excited, and that gets me excited. They get to form connections with the patients and witness the progress first hand. Most of them wish this outreach was longer, and honestly, so do I.

On a personal level, I find this work so incredibly rewarding. I get to meet so many different people from all walks of life and all ages and cultural backgrounds. I love hearing their stories; where they are from and about their families. I feel like I get to witness what love truly is, when I see partners, family members, and friends rally around and support their loved ones.

As RMTs we get the gift of spending time with our patients and really getting to know them better. Apart from the physical benefits of therapy we provide, I believe there is also the benefit of human connection. My personal goals for my practice, no matter the setting, are to provide warmth, engagement, and encouragement.

Do you think there are further opportunities for RMTs to work in this type of environment and/or hospitals?

YES. YES. And YES!! Patients are always looking for RMTs that are willing to come provide Massage Therapy in the hospital. There is a huge opportunity for anyone that has a passion for improving the quality of patient's lives. Because the students are unable to treat ICBC and WorkSafe patients, there is a large cohort of patients that could really use regular treatment but won't get it unless they can get mobile RMTs to come to the facility. There are definitely some challenges in getting started, but most of that is just learning a different system of paperwork, and being willing to work the available hours.

Also, because the patients who are treated at GFS come from all over BC and the Yukon, there is a need for continuity of care when they return to their home communities.



Lalita Kuehn

Many thanks to Lalita for taking the time out of her busy schedule to share this information. Photo credit: Lucy Robinson.



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DEATH DYING & THE BREAKABILITY OF US ALL

BY LAUREN CATES

WE'RE ALL BROKEN. THIS IS A FACT FOR WHICH WE CAN BE DEEPLY AND TRULY THANKFUL. THE WOUNDS THAT MAKE THIS TRUE HAVE MADE, AND WILL MAKE, YOU WHO YOU ARE. THE J-O-B CALLED "MASSAGE" IS SIMPLE. RUB THE KNOTS OUT, AGREE SYMPATHETICALLY THAT, YES, THESE ARE THE TIGHTEST SHOULDERS YOU'VE EVER FELT, TELL THIS PERSON WHOSE KNOTS YOU JUST RUBBED TO DRINK WATER, COLLECT SOME MONEY FROM THIS PERSON, AND MOVE ON TO YOUR NEXT CLIENT. LATHER, RINSE, REPEAT. RIGHT?

MAYBE.

Except that this story is a lie. Worse yet, telling this story and believing it is like forgetting to RSVP to what might be the most important invitation you'll ever receive.

Touching humans for a living is a daily invitation to be real and present. It doesn't matter how "healthy" you think those humans are or how much they do or don't "need" massage. It's not about their muscles, and it's certainly not about that big muscle on top of your shoulders.

This article first appeared in *Massage & Bodywork Magazine* and won a Maggie Award from the Western Publishing Association last year. Lauren Cates was a keynote speaker at the RMTBC 2019 Conference on Massage Therapy and Oncology.

“THE RUB IS THAT HUMANS ARE BREAKABLE,
AND EVERY SINGLE ONE OF US WILL GET
WEAK OR SICK OR OLD AND EVERY ONE OF
US WILL DIE. WHEN YOU ARE HONEST ABOUT
THAT AS YOU’RE TOUCHING A PERSON’S
BODY, IT CHANGES WHAT HAPPENS.”

Personally, I make my living touching humans that would be deemed, by most standards, to be very, very sick and even dying. I have been lucky enough, since 2005, to do my work with people who find themselves in hospital beds either receiving care as they approach the end of their lives or who are being treated for severe and often complex symptoms from advanced disease. I go to their homes, I go to long-term care facilities. Over the years, even some of the “sickest” clients have willed themselves into their cars to come to my office. As a result, I’ve been invited to see massage therapy, and my own life, through a lens that makes it really hard to keep up the story. The story of “wellness” and that of the “wellness practitioner” is one of invincibility, expertise, and control. Of course, I’ve also had plenty of “healthy” clients who believe that story and who like the way that it allows them to not think much at all about being sick or about dying or mortality or how incredibly breakable they are.

That’s pretty typical.

AN IMPORTANT INVITATION

Humans are convincing storytellers. We are constantly telling stories about our spouses, our parents, our bosses, our clients, ourselves. Some are true stories, but most are just fabrications to make sense of things from a safe and comfortable distance. These stories help us pretend we are separate and that what’s happening to another could never happen to us, or that we’d handle it better or differently than they’re handling it if it ever did happen to us. Stories that let us believe we know things that will make someone else “better.” Stories that have never been fact-checked, but that nevertheless shape how or even if we see each other.

Massage therapists touch people for a living and, yet, we rarely see the people we touch. We want desperately to avoid the experience of having our own vulnerability mirrored back to us by the injured and malfunctioning bodies of our clients. We see pain and hear suffering as they tell us why they think they’ve come for massage today and, before they’ve finished their sentences, we are hard at work telling a story about how we’ll stop that pain—for them and for us. And by doing so, we’ve lost the most important aspect of this work, being truly present with another.

PATHOLOGY: I DO NOT THINK THAT WORD MEANS WHAT YOU THINK IT MEANS

The word pathology comes to us, as do so many good and co-opted words in the English language, from Greek. Pathos means “experience” or “suffering,” and the word

pathology has been translated, in some texts, as “the study of emotions/passions.”

It’s reasonable to say that a majority of people seek out massage because they are experiencing some kind of suffering. The Buddhists define suffering simply as “dissatisfaction with what is.” In this definition, disappointment in the fit of those jeans you just bought is on par with starvation. There’s no hierarchy. Ill-fitting jeans and starvation are both experiences that inspire us to wish things were different.

That pretty much sums it up.

Most of the people we touch are not happy with their bodies. Their bodies are causing them pain. Their bodies are not letting them run as far, walk as fast, or even live as long as they want. Their bodies are responding to messages from a disease or an injury or some misuse that is making their joints ache or their guts rumble or their feet tingle.

They hate this, and so do we.

They pay us to join them in their dissatisfaction, and then to fix it.

In the West, we are conditioned to resist and avoid suffering at all costs. We feel pretty certain that any sense of physical or emotional discomfort is an indication that something is wrong. Very, very wrong. We have a hard time believing there is anything redemptive or valuable about being with our pain, with illness, or really, about being with any experience that isn’t one we have envisioned for ourselves. We stand, demanding to “see the manager,” when something other than what we have expected is what we see before us or, heaven forbid, feel inside us.

And if you’ve been taught that your job is to do things with your hands that help people escape from their discomfort, you will be both always busy and never successful.

Thanks to some uniquely raw and intimate encounters with a few profoundly ill people in my treatment room over the years, and thanks to some kind Buddhist and Buddhist-inspired folks who invited me to consider the possibilities inherent in simply feeling what I was feeling, I started to see, early in my practice, that all of my clients were frail and traveling around in breakable outfits that were mostly a mystery to both of us. The palliative-care patients, the marathon runners, the desk workers, the people in cancer treatment, the CrossFitters. Everyone. Every person I touched was supremely breakable and, in fact, as the second of the Buddha’s Five Remembrances suggests, they were, as am I, “Of the nature to have ill health.”

“IF YOU’RE A MASSAGE THERAPIST, THAT IS YOUR JOB. BEING WITH HUMANS. MOST HUMANS HATE THAT CHANGE IS THE ONLY CONSTANT IN THIS LIFE.”

GOOD LUCK WITH THAT

Being a massage therapist in the modern world is a total setup. It doesn’t matter where or with what population you practice.

- “I’ve had pain in my low-back for the last six months. I’ve come so you can fix it and reverse it in the next 60 minutes. Go!”
- “I have multiple sclerosis. My joints ache, and pain and anxiety keep me awake most nights. I’ve made a 45-minute appointment. Fix it, please.”
- “I am exhausted as I head into week five of radiation therapy for ovarian cancer. I’d like to have enough energy to be able to go home and clean my guest room for my sister’s visit this weekend. You can do that in 60 minutes, right?”

Take a minute to notice what’s happening inside you right now.

Maybe you’re exhausted because this is what your job is like, and you feel like you don’t help anybody.

Maybe you’re thinking, “Yeah, I can do that. What are you talking about? Piece of cake!”

Maybe you’re like, “Nope. This doesn’t happen to me. I love my clients, and they all feel great when I’m done with them.”

Or, “My aunt/uncle/boss has/had low-back pain/MS/ovarian cancer. I know exactly what will help.”

I wonder if we could notice the habitual responses these scenarios elicit inside us. Just notice, without judgment. Notice ourselves.

Notice this person we’re touching. And let whatever we notice just be true.

This is not a quiz or a measure of your skill or goodness. This is just information.

What would happen if we considered that these are very human requests and expectations from very real and individual people who are facing realities that are disappointingly different from the ones they mapped out for themselves? I wonder what would happen if we could take a deep and compassionate breath for ourselves and for them before we tip over into how we’ll fix them, fail them, or treat them like someone we’ve decided is similar.

Being with humans is hard.

If you’re a massage therapist, that is your job. Being with humans. Most humans hate that change is the only constant in this life. Our reality as humans is impermanence and, yes, suffering. We’re hardwired for dissatisfaction. “Boo!” we say. “Let’s look at something else. If I just learn more stuff and master more techniques, I can fix it. I can fix it all.”

Stop. Breathe.

This would be another great opportunity to take a moment and just notice what’s happening inside you.

Are you feeling some resistance to what you just read?

Are you feeling angry that I’ve drawn attention to change and pain as standard aspects of all human experience?

I wonder if you’ve just decided that I’m talking to “other” massage therapists.

“That’s not my life. I have a lot of joy, and I keep a gratitude journal.”

“I love humans, and I totally see every person I touch.”

“I give my clients hope. That’s why they love me.”

“I’m a healer.”

Noticing any tightness in your body now? Any increase in heart rate? Mild agitation? What if I told you that you and I are not fighting here?

I’m not suggesting any of what you might be feeling is false. I am, however, inviting you to notice how tightly you’re holding on to any of it.

When you walk into a session or a hospital room, how important is it to you that you change what’s happening for the person you’re about to touch? How important is it to you the person on your table feels “better” when you’re “done”? Are you invested in how smart, skilled, or expert your clients and colleagues think you are? (Hint: If you’re not, you might be malfunctioning because it’s really, really human to find these things important.) If you are, that’s great. Now, I am going to ask you to notice your attachment to those stories and then to decide if you have the grip strength to keep that up for the next 20–30 years of your career as someone who touches humans who live in breakable, mysterious, constantly changing bodies.

THANKFULLY, NONE OF US IS GETTING OUT OF THIS THING ALIVE

My friend and mentor Tracy Walton is fond of saying, “There is nothing unnatural about dying.” And so it is. Similarly, there is nothing unnatural about limited range of motion, a hamstring strain, a sprained ankle, neuropathy, swelling near the end of life. Inconvenient? Definitely. Painful? Probably. Unplanned? Most definitely, but very, very natural. And certainly, if we’re going back to the root, pathology.

These experiences inspire strong emotions. We get frustrated and impatient when our parts aren’t working. This is a completely natural response.



“WHEN YOUR PRESENCE IS HEALING, THAT’S
NOT A THING YOU’RE DOING. YOU’RE JUST BEING.
UNVARNISHED. AGENDA-FREE. VULNERABLE.
NONSTRIVING. BROKEN, BEAUTIFUL, WRETCHED YOU.”

LOVE YOURSELF AND GET OUT OF THE WAY

Irene Smith, a pioneer in compassionate care and end-of-life work, says, “This work is not about healing others. We can’t heal another human being. We can only heal ourselves until our presence is healing.”

When your presence is healing, that’s not a thing you’re doing. You’re just being. Unvarnished. Agenda-free. Vulnerable. Nonstriving. Broken, beautiful, wretched you. This version of you is the best mirror any other human could wish to gaze into.

The best work we can do is to find and cultivate that version of ourselves and to stop reserving it for people who “really need it.” YOU. NEED. IT. The world needs the you that has the courage to be honest about how truly irrelevant your “expertise” is and about what’s really happening in front of your eyes. The world needs the you who is more interested in what might be next than in what you can make happen next.

My friend and colleague Kerry Jordan teaches that massage is essentially a relationship in which “I’m pressing the surface of my brain to the surface of your brain.” That’s probably about the most intimate you can get with another human, but intimacy does not show itself to expertise. When we think we know what happens next, when we’re expert, there’s nothing intimate or connected about that. There’s only anticipation, a serious limitation on the number or shape of satisfying outcomes, and the likelihood of disappointment.

WORK KINDER, NOT HARDER

I suspect that much of what you have read here you have read or heard in other places or even come to in your own way and time. And yet, much of it probably struck you as new or at least as something worth remembering. That’s always been my experience when I have “learned” things that are essential, simple, and true. Things I swore I’d never forget ...

And then?
I forgot them.
Completely.

I have been blessed by an army of incredibly generous and sometimes ruthless teachers. Clients, meditation instructors, fellow therapists, doctors, nurses, social workers, my own son. They have taught me how exhausting it is to need to be the smartest or funniest or most skilled person in the room. It’s exhausting to be a helper, to be the one who shows up to heal others. It’s exhausting to be too busy or too scared or too special and important to feel things.

These teachers invited me (and keep inviting me) to stop.

To be still and to be honest.

Early in my career, as I tried to make sense of why I felt so “at home” in massage, I told a story about how I was called to help, but that was just a story. Another lie.

The call was actually something I never could have imagined. The call was to be authentic and present. Humble and curious.

As massage therapists, these are beautiful moments in which to remember that “Angry is sad’s bodyguard.” When we remember this, we can glimpse the tenderness that lies underneath the emotions most salient in so many of the people we touch. We can remember, if only inside ourselves, the person under our hands is scared. So many of the people we touch find themselves receiving massage because they’re not willing or able to tell a story in which their body is breakable and will someday stop. They are sad because their body has changed or is changing. Their experience is different than it has been. This is not what they ordered. Their plans have been altered, interrupted, maybe destroyed by this noncompliant but natural body. They

have been reminded, in this inconvenient (but, they hope, fixable) way that they are fragile and that they have existed, all this time, at the will of their bodies.

The wisest parts of you know that your job is to be with this person. But this person thinks your job is to help them forget all this inconvenient information and all these uncomfortable sensations. What a lonely place for us each to be.

Let me be clear. This is not something a majority of the people you touch are consciously aware of. This realization, for most of us, is deeply and safely buried, and when our time touching a person is over, that time ends with them often feeling

better enough that they can go back to their old stories of health or expected function or immortality for at least another hour, another week, another month.

The rub is that humans are breakable, and every single one of us will get weak or sick or old and every one of us will die. When you are honest about that as you’re touching a person’s body, it changes what happens. You don’t ever have to tell the person a thing about it with your mouth. In fact, often it’s true that the less you say, the better. The person under your hands doesn’t have to “believe” in their breakability for your awareness of it to matter.

Today, I can look back and know that I was led to massage therapy in 2003 by a deep sense of my own worthlessness. (Yes. You read that correctly.) I was not and would likely never be enough, but maybe I could be good. If I could be good, I could qualify. For love. To be seen. To be valuable.

Massage also just seemed like a job I could do. I like people. I like touching and being touched. Typically, people tend to like me. How hard could it be?

Hard.
Really, really hard.

I know now that while it looked like an accident, some deeper wisdom probably propelled me to pursue massage therapy. I don't go in for all that "everything happens for a reason" malarkey. I'm just saying that, in hindsight, I know there was a deep longing inside me to be so truly myself that, as spiritual teacher and author Adyashanti says, "All that will be left of [me] will be a tendency to shine." Massage school was the first step on that path for me.

I feel lucky to have learned early that kindness is, and will always be, my primary tool, but that was just the beginning. Poet Naomi Shihab Nye removes our romantic notions about kindness and reminds us of the cost of its cultivation in her poem "Kindness." "Before you can know kindness as the deepest thing inside / you must know sorrow as the other deepest thing."

Kindness does not come from our desire to help, nor does it come from politeness or manners, nor is it one of the trappings of good customer service. Kindness is what's left when you've plumbed so many of your own depths that you know them well and intimately. Kindness is what grows up in the place of the stories you used to tell about how "I'll be better after ..." and "If only I could ..." when wisdom invites you to stop telling them. Kindness is deep. It sees through appearances, and it lets you work and live from a place of truth that's not up for grabs.

The assertion that one is a "healer" or someone who can fix the unfixable or know the unknowable—these are prevalent and dangerous stories in the massage therapy community. No matter how many specializations I have, no matter how many fancy-pants massage celebrities have taught me their magic tricks and copyrighted modalities, every body in every moment is unique and worthy of kindness before and above anything else I can offer. When people come to me for massage, they're coming to be seen and to be loved. Even if they have a rotator cuff injury. Even if they have plantar

fasciitis or diabetes or IT band "issues."

Humans are aching for other humans to touch them kindly and without agenda.

When you are open to the mystery of being human—of bodies and their breakability—dying and death are no more sacred than living and life or health and illness. You see through the stories you tell that hold up your beliefs and ideas about who you are and how you fit into it all. You get honest about how most of what you're doing is not influencing, but simply witnessing. Another friend and mentor, Gayle MacDonald, says, "Love needs fewer or no words and silence can be as supportive and welcome as conversation."

The time has come to be quiet.

Break up with your inner-fixer. (That relationship was never good for you anyway. Ask any of your friends who love you.)

Listen more than you talk.
Stay open.
Be curious.

See the people you touch with new eyes and beginner's hands.

They want your presence more than your expertise.

And, for cryin' out loud, please be kind to yourself along the way. Resist the temptation to pile more and more capital letters behind your name or to chase CE credits and specializations to try to fill your holes. Learn and keep learning, absolutely. Just notice what you're after and do it all with your eyes and your heart wide open. Get to know yourself. Become friends with all the stories you tell and why.

Getting to the ease I now experience with most of the people I work with is hard, and some days I still miss the mark entirely, but my work and my life are more human than I ever knew they could be or than I ever thought I wanted them to be. More real and fragile and vulnerable and nuanced than my limited ideas of helping and loving and touching could have held in those first months and years of "doing massage." And I wouldn't trade any of it.

Being with humans is a good gig if you can get it.

That's your job and that's plenty. Stop wearing yourself out making it anything more than that.

Bodies do what bodies do. We know so little about what they really do and why, it's mind-blowing. Get honest about that and you might be on to something.

LAUREN CATES IS AN EDUCATOR, WRITER, AND SPEAKER ON TOPICS RANGING FROM MASSAGE THERAPY IN THE HOSPITAL SETTING TO END OF LIFE AND MASSAGE THERAPY POLICY AND REGULATION. A FOUNDING DIRECTOR OF THE SOCIETY FOR ONCOLOGY MASSAGE FROM 2007–2014 AND CURRENT EXECUTIVE DIRECTOR AND FOUNDER OF HEALWELL, CATES WORKS WITHIN AND BEYOND THE MASSAGE THERAPY COMMUNITY TO ELEVATE THE LEVEL OF PRACTICE AND INTEGRATION OF MASSAGE OVERALL AND IN HEALTH-CARE SPECIFICALLY.



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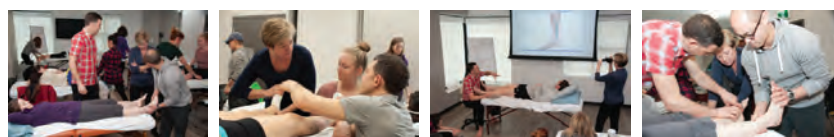
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Mark Finch
RMT



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Learn
with Diane Lee
engage experience empower

Massage Therapy in a Hospital Setting

Educating the healthcare system and the story of Healwell.



Lauren Cates visits with an elderly patient in a care facility as the patient struggles to find her words before a massage session.

Healwell, a nonprofit agency that trains and then connects massage therapists with hospitals, hospices, and rehabilitation centers, is a natural outgrowth of my own journey. When I graduated from massage school in 2005, I had the good fortune to meet and work with a visionary massage therapist and businesswoman named Brenda Teal. Brenda had just been invited to open a second location of her business, The Teal Center, on the campus of one of the local hospitals in Arlington, Virginia. I wanted to work in a hospital. Brenda and I both wanted to make a value-added contribution to health care.

Voilà! We started figuring out what it looked like to bring massage therapy to the hospital.

I think it's safe to say that none of us really knew what we were getting into at the time, but like the evolution of so many things that ultimately prove to be good or successful, we just paid attention and followed where opportunities could be leveraged or created, and beautiful things happened. The right

people came along (thank you, Lucille Eddy!), we made way for the right circumstances, and the ball started to roll.

Through lots of trial and error, we began to see and create what was needed. We established a standard of training and experience for the therapists we would hire. We educated and educated again and educated once more hospital administrators, nurses, social workers, and doctors about who we were, what we did, and why it was important.

It's a long story, but over time, we observed a few interrelated factors that made it hard to bring massage into the hospital.

- Massage therapists are not trained to be health-care professionals. Most leave massage school as minimally trained tradespeople who provide a service to healthy humans.
- There is a woeful lack of well-conducted research about massage therapy of any

kind, but specifically about massage therapy's effects on the lives and bodies of very sick people.

- The massage profession has set itself up, through years of well-meaning volunteerism, to be welcome in health-care settings as long as we don't expect to get paid.

This was a big, mangy mutt chasing its own tail. These were problems that could not be addressed in a vacuum. Each fed the other, and we knew we had to address them simultaneously with an eye toward elevating not only the level of practice of massage therapy, but the profession as a whole.

We had to tackle all of it to create real change.

We saw, firsthand, that making a meaningful contribution required highly skilled and self-aware therapists. Creating trust in a health-care facility required humble but knowledgeable practitioners who could speak the language of health care. Commanding appropriate compensation meant that we would have to bring something to the table that wasn't already there.

Healwell bridges the gap between foundational massage training and the essential skills necessary for integration of massage therapists in a clinical setting. Our courses cover not only the specialty practice areas of scar tissue mobilization, oncology massage, and hospital-based massage, but also research, ethics, and the presence and self-awareness that are essential to bringing all of these skills and knowledge together.

For more information about Healwell, visit www.healwell.org.



Association News

Keeping you up to date.



OUTREACH AND DIALOGUE

RMTBC Annual General Meeting

We were pleased to see the 64 Members who attended this very succesful AGM on September 22nd. Engaging conversations emerged around education and developing a standardized curriculum for Registered Massage Therapy. Thank you to those who shared their perspectives, they help move the profession forward.

Re-election of the board was announced, congratulations again to Anne Horng, Alison Coolican, Sandra Coldwell, James Johnston, Voula Soursos and Theresa Draper.

The meeting was followed by workshops with Dr. Nik Vizniak who had the RMTs stretching and learning by experience! We're feeling good moving into the year ahead.

If you wish to view the 2018 Annual Report it can be found at: rmtbc.ca/annual-report



Photos clockwise from top: Opening the RMTBC 2019 AGM with a viewing of the new website, Self Care workshop with Dr. Nik Vizniak, members voicing their perspectives, Eric Wredenhagen Registrar / CEO of the CMTBC with Gordon McDonald Executive Director of the RMTBC, the Mariott Delta Hotel and Casino, registration, Members with Dr. Nik Vizniak.



New School Liaison

We are pleased to announce that Kirk O’Bee has accepting the position of School Liaison. Kirk graduated from the WCCMT program in New Westminster in 2013. He has been practicing as a RMT for 5 years in a clinic setting and a homebased practice. His practice focuses on treating the public, ICBC cases, WorkSafeBC and athletes. Kirk has also worked with the RMTBC for the past 5 years helping assist with member inquiries along with organizing New Graduate information sessions and massage therapy school talks. Kirk will be responsible for conducting school talks to students at any RMTBC member school. School talks are at no cost to the member school. Please contact Kirk at kirk@rmtbc.ca if you would like him to attend a class at your institution.



“I’m quite excited to be taking on this new roll with the RMTBC. It has been a refreshing change of pace from my full time massage therapy practice. Presenting to the massage therapy students takes me back to the days when I was in massage therapy school. I clearly remember when Dee Wilcock came to my class and presented about the MTA, at that time it was named the Massage Therapy Association (MTA). Her presentation made an impression on me. What resonated was the fact that I was beginning my career as health care professional and it was important to have the association in place to support the growth of the profession and myself. Later on, I submitted my case study for the student case study award and won 2nd place. As a student it was a nice bonus awarded by the association and I was grateful for it. Little did I know at the time the association would end up playing a major roll in my career as a health care professional. I am passionate about the RMTBC and truly believe in the importance of the role the association plays in the massage therapy profession. I’m looking forward to meeting new students and instructors over the months ahead and informing them about the RMTBC.”

ADVOCATING FOR YOU

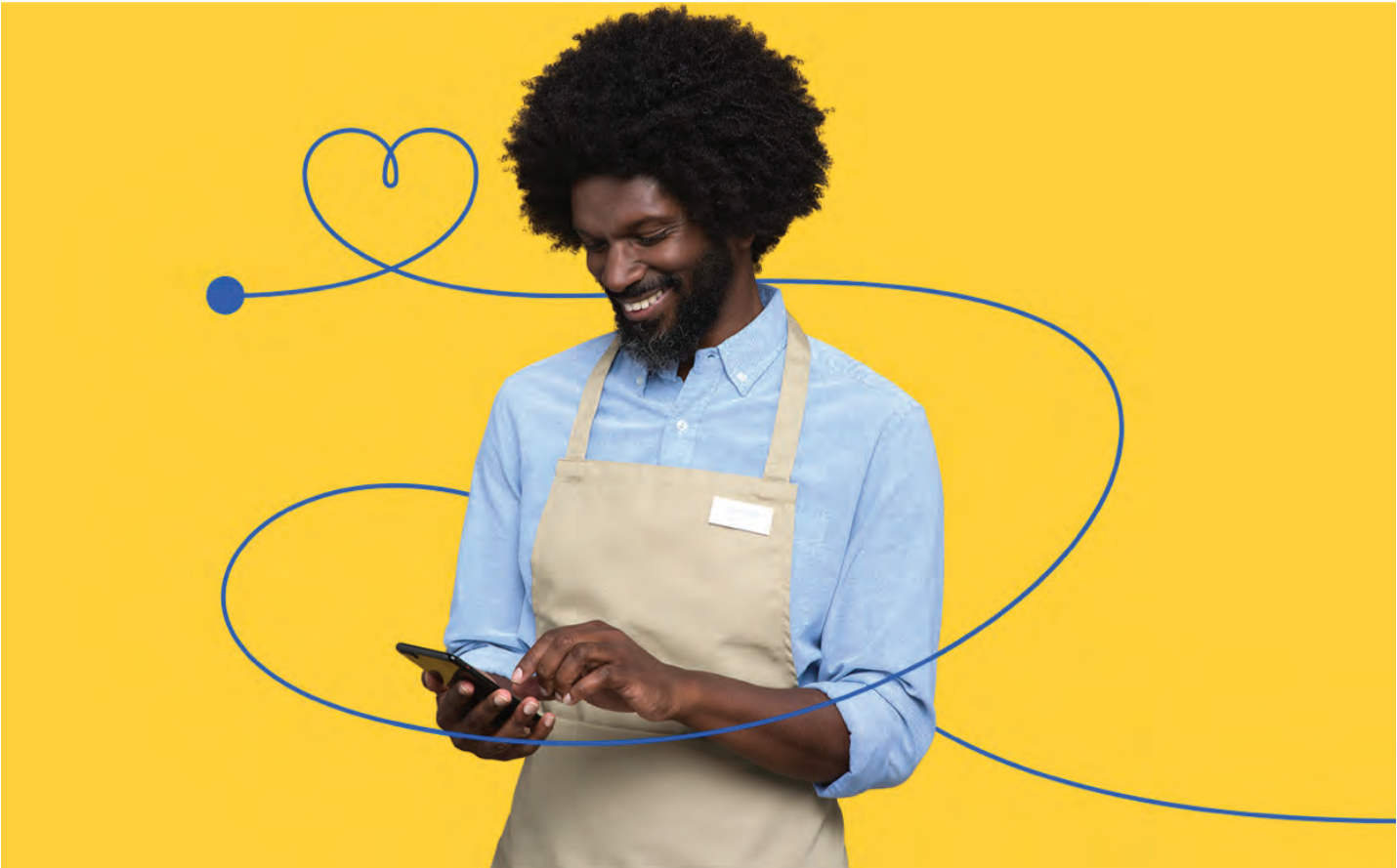
The Canadian Massage Therapy Alliance



Anne Horng, Board Chair and Gordon MacDonald, RMTBC Executive Director attended the recent national meeting of the CMTA in Halifax where Gordon was appointed Secretary of the Canadian Massage Therapy Alliance. This group has formed to advocate for issues impacting RMTs and their patients including the lobbying to exclude GST/HST on RMT fees.

Gordon MacDonald and Alison Chernof also attended the AMTA National Convention in Indianapolis, connecting with leaders in the field and bringing back ideas for the RMTBC.

Photos left: AMTA National Convention 2019 in Indianapolis, IN.



YOUR BENEFITS

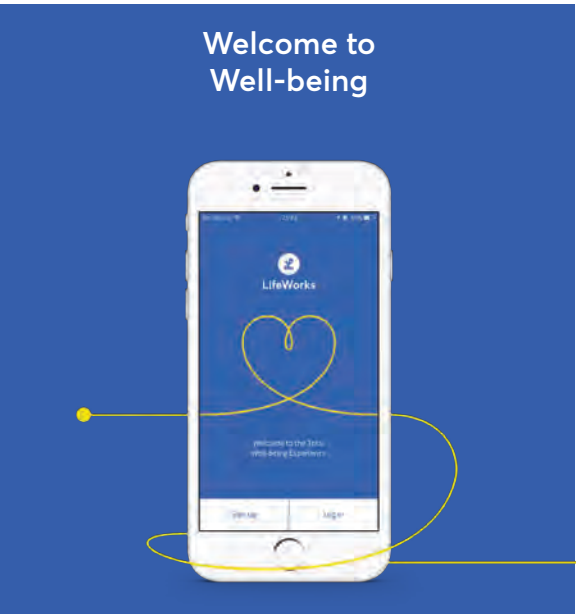
Our renewed partnership with LifeWorks

At RMTBC, we recognize the importance of your well-being to our success. We understand your need to feel supported and appreciated through access to services and benefits that work for you.

That’s why we’re excited to have re-launched LifeWorks as a benefit to our members. LifeWorks is a confidential member assistance program and an exciting, innovative well-being solution now live for RMTBC Members! LifeWorks is available 24/7 to help you:

- Connect to news and updates through the platform’s News Feed
- Recognize the contributions of your colleagues
- Access a wealth of online resources and information to support your mental, physical, social and financial well-being
- Get expert guidance from professional advisors, any time, about any issue, either work-related or in your personal life
- Speak to a counsellor if you have a problem that’s bigger than you, or connect with other specialists including financial and legal professionals
- Make your money go further with exclusive offers and discounts

Haven’t signed up yet? Get started using LifeWorks now with the easy, one-time sign-up: Check your inbox (or junk mail!) for an invitation email from LifeWorks containing your unique link. Just follow the steps in the email!





Funding to promote your practice

The RMTBC is constantly striving to advance your profession and practice throughout the entire province with a broad range of marketing initiatives and materials. Our [Community Health Fair Kits](#) provide up to \$200 for your entrance fee to attend a health fair in your community, as well as supports such as brochures, handouts, etc

QUOTES FROM A FEW OF OUR BOARD MEMBERS



Sandra Coldwell RMT - Director

My interest in serving on the RMTBC Board came out of working in rural communities in Northern British Columbia. Often I was the only RMT in the community. I wanted to bring this perspective and concerns of fellow RMT’s working in similar smaller communities to the Board.

I have been enriched by this experience and I continue to enjoy working collaboratively, sharing in ideas and problem solving as a group.



Alison Coolican RMT - Vice Chair

I’ve been a RMT since 2005 and while I have a busy private practice in Vancouver, I’m also interested in learning about and contributing to many of the different facets of our profession. I have taught at 2 local massage therapy colleges, assisted for various post-grad continuing education courses, taken CE locally and internationally in a broad range of research informed areas, participated in study groups, volunteered at sports events and attended almost all of the RMTBC and CMTBC AGMs that have taken place in my career so far. In 2013 I joined the RMTBC board as a director so that I could learn more about how the stakeholders in our profession work together. As a RMTBC board member, I have enjoyed learning about the work that previous boards have done to advocate for members and I am happy to participate in



Photos: Booths with RMTBC support materials.

the process of developing and voting on current policies and procedures. In addition, I have attended a Canadian Massage Therapy Association (CMTA) AGM and volunteered to be a scrutineer at the CMTBC board election vote count. Our board is made up of hard-working, multi-faceted and professionally-minded RMTs and I enjoy our regular board meetings. We have been a part of many projects that assist RMTs and have developed relationships with other stakeholders in order to move our profession forward. As a profession, it is important that we strive towards national standards in order to demonstrate to the public and other stakeholders, particularly government, the knowledge and skills necessary to be a recognized and regulated health care professional. The RMTBC along with our partners at the CMTA continue to support regulation across Canada and as a board it is important that we help and support this. This challenge is one that I, as a RMT and board member, have a keen interest in and I actively share my knowledge and experiences in order to be a positive influence.

Deetria Egeli RMT - Director



I have been a proud member of the profession for 22 years. I have a viable practice, I am passionate about my profession and I have gained a Masters degree - all in part due to the contributions and inspiration from past and present RMTBC staff and board members. Having graduated in 1997, I have seen our profession grow, gain respect, and open new opportunities in education through the advocacy of the RMTBC. Through the tireless work of the RMTBC I have witnessed the Association negotiate with private and public insurers as well as bring forward issues important to the profession with the Ministry of Health. I believe that massage therapy’s contribution to the health of British Columbia’s matters.

I became a volunteer on the board as for the following reasons:

- a) I care about excellence in MT practice
- b) I love research and I have insight into how research is conducted
- c) I love my profession and I want to see it continue to grow
- d) I want to be inspired and challenged
- e) I want to create new opportunities and growth for others in my profession.

I wish to share my skills, energy, and insight with other members of my profession, and I look forward to continuing to learn, to be inspired and challenged in my role as a board member. I look forward to serving and supporting my profession and my colleagues who are members of the RMTBC.



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CranioSacral Therapy 2 (CS2)

Calgary, AB Mar 19-22, 2020

SomatoEmotional Release 2 (SER2)

Calgary, AB Nov 14-17, 2019

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