

Massage Therapy service restrictions during COVID

This 5-level restrictions matrix is based on detailed, industry-specific risk assessments. It reflects the current understanding of transmission of COVID-19 in particular environments and settings, and the risks to clients in vulnerable categories. The objective is to provide:

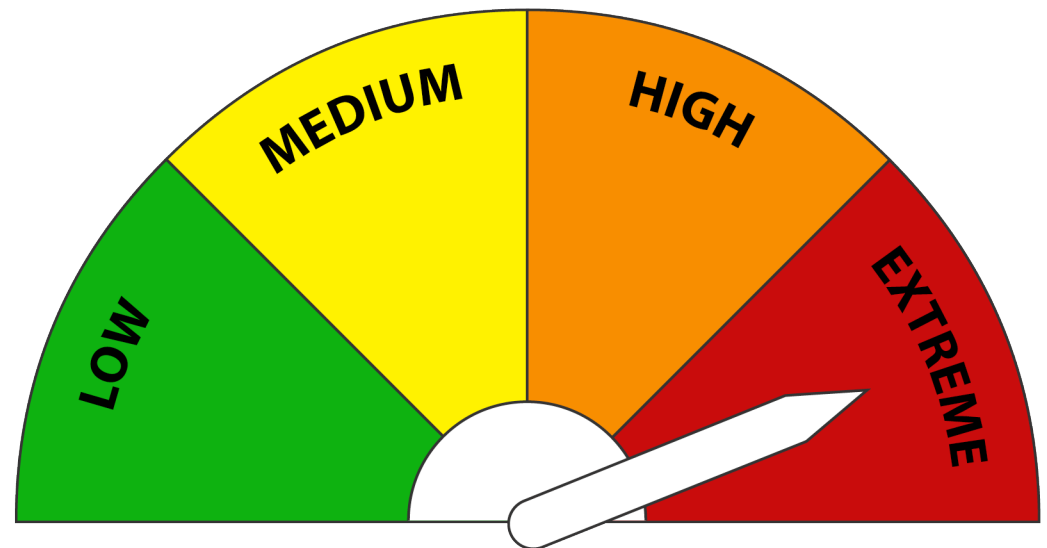
1. a proportionate pre-planned response to the possible escalation of COVID-19
2. staged restriction of certain services and treatment settings to reduce transmission risks for COVID-19 when community transmission is occurring.

The following scale is used in the matrix to designate the degree of risk:

Extreme (red)

It is not safe to provide massage therapy in this environment.

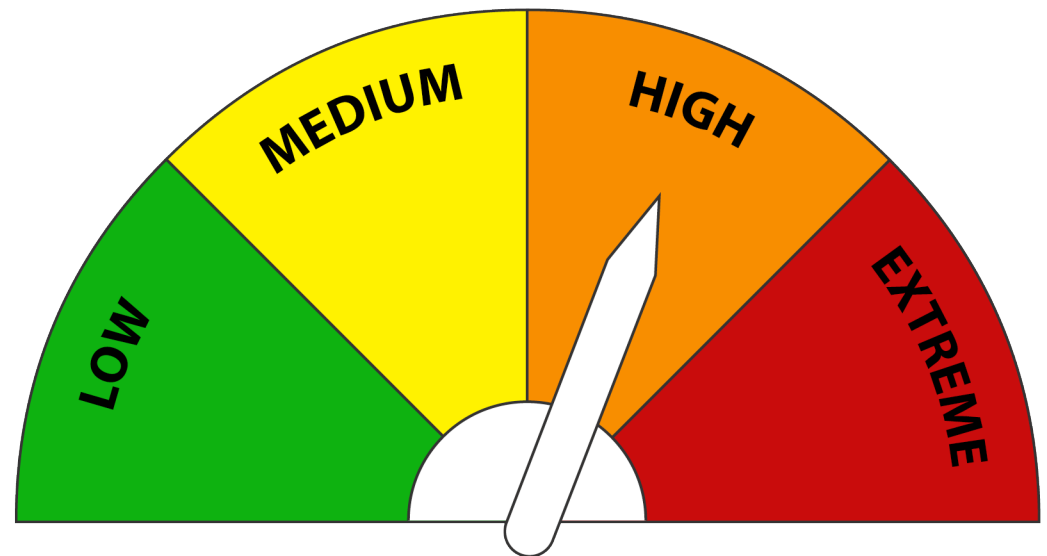
Face-to-face treatment should be deferred. The potential benefit of providing massage therapy to clients does not outweigh the risks because the consequences could be severe illness and fatality. Telephone and online consultation should be considered or referral to another health service that does not require prolonged close contact.



High (orange)

It is not safe to provide massage therapy in this environment without extensive ongoing monitoring and risk assessment.

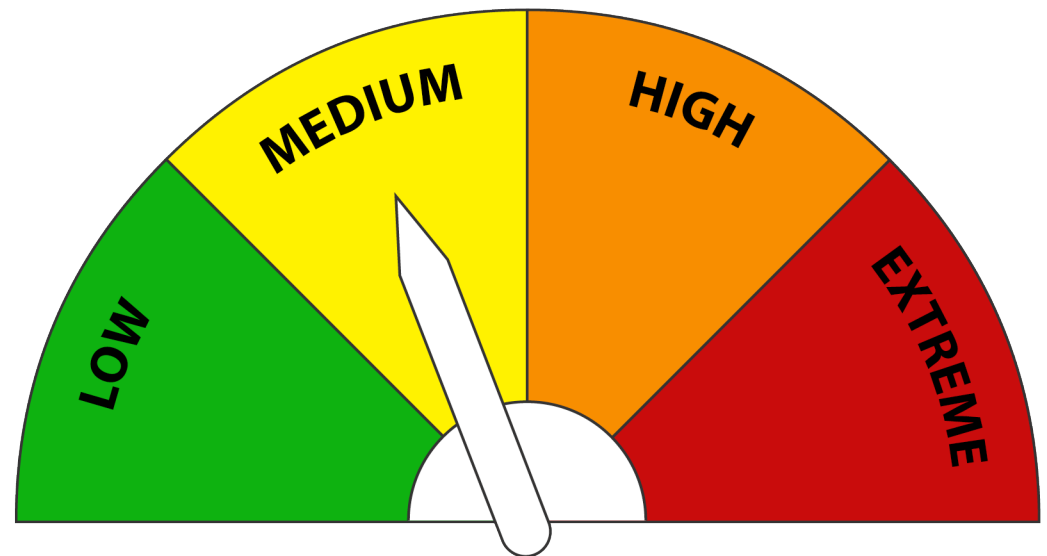
Significant control measures must be implemented and maintained. Records of all administrative controls must be kept (e.g. cleaning log, appointment schedule and screening protocols). Clients at high risk of severe illness from COVID-19 should be deferred or referred on to another health service that does not require prolonged close contact. Therapists working in this setting who may themselves be at risk of serious illness from COVID-19 or who are not able to limit their own contacts and potential exposure, such as avoiding public transport, large gatherings and crowds, should carefully consider whether it is safe to treat in this setting.



Medium (yellow)

It is relatively safe to provide massage therapy in this environment with extensive ongoing monitoring and risk assessment.

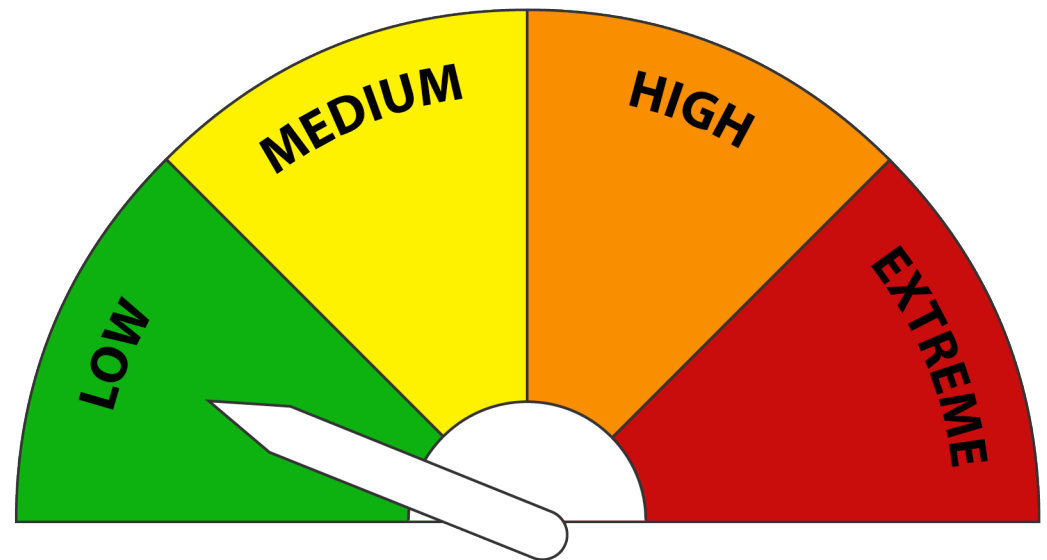
Significant control measures must be implemented and maintained. Records of all administrative controls must be kept (e.g. cleaning log, appointment schedule and screening protocols). Therapists working in this environment who are not able to limit their own contacts and potential exposure, such as avoiding public transport, large gatherings and crowds, should carefully consider whether it is safe to treat high risk clients.



Low (green)

It is safe to offer massage therapy in this environment.

Ongoing monitoring of local transmission is required. Significant control measures must be implemented and maintained. Records of all administrative controls must be kept (e.g. cleaning log, appointment schedules and screening protocols).



Ventilation

Ventilation is a critical consideration in mitigating the risk of transmission of COVID-19 in the clinic setting. The safest indoor space has natural ventilation, which means that lots of outside air is constantly replacing the stale air inside through open doors and windows.

Environmental engineers quantify how much outside air is getting into a building using 'air exchange rate' (AER). It is a measure of the number of times the air inside a space gets replaced with air from outside in a single hour.

Around 6 air exchanges an hour for a 3 by 3 metre room with 2 people in it is considered good ventilation. During a pandemic, the exchange rate should ideally be higher.

There are obviously many factors that influence the level of ventilation in a space, such as position and aspect of windows, amount of breeze etc. If you are unsure about whether your clinic is well ventilated, you can use carbon dioxide levels as a proxy measurement of ventilation. Outdoors, CO₂ levels are just above 400 parts per million (ppm). A well-ventilated room will have around 800ppm of CO₂ but during COVID, aiming for 600ppm would be the risk mitigation goal.

You can purchase room CO₂ monitors online for around \$50-\$150. One of these will be a far more important risk mitigation strategy in your COVID response than a scanning thermometer.

The following definitions of well ventilated and poorly ventilated should be used when interpreting the 5-level matrix.



Well-ventilated

A well-ventilated space has 6 - 9 air exchanges per hour via either natural or mechanical ventilation.

The size of your room, aspect, and the number and size of windows and doors will dictate the rate of air exchange from natural ventilation. For example, a 3 by 3 metre room with a 2.5 metre ceiling would need an outside opening (open windows and / or doors) of at least 0.7 square metres (i.e. 1 metre by 0.7m) to facilitate 9 air exchanges per hour.

If the weather does not permit natural ventilation throughout the treatment, external windows or doors must be open for at least half an hour between clients. Placing a portable fan in the window or door facing outwards can significantly increase the rate of air exchange in the space as well. However, only using between-client ventilation still exposes both practitioner and client to higher risks of virus transmission during the treatment.

The following table is intended as a rough guide to calculate whether natural room ventilation can meet the requirement for around 9 air exchanges per hour, based on the least favourable wind conditions and two occupants in the room.



Room volume	Room dimensions	Window/door opening required
18.5m ²	3m x 2.5m x 2.5m	0.6m ²
22.5m ²	3m x 3m x 2.5m	0.7m ²
30m ²	3m x 4m x 2.5m	0.8m ²
35m ²	3.5m x 4m x 2.5m	1m ²
40m ²	4m x 4m x 2.5m	1.1m ²

Alternatively, mechanical ventilation can be achieved through a portable HEPA-based air purifier with a Clean Air Delivery Rate (CADR) that creates at least 9 air exchanges per hour. If you are considering this option in a room that does not have natural ventilation, ask the manufacturer/salesperson to do the calculation for you based on your room specifications. It may be advisable to consider two smaller units at either end of the room rather than a single large unit but seek advice on this.

Poorly-ventilated

A poorly ventilated space has an air exchange rate of less than 6 exchanges per hour. The room would likely have either no natural ventilation or an external opening that is too small to create sufficient exchange. Clinics with air conditioning systems that use recycled air, such as split systems, ducted systems and large HVAC systems, are also considered to be poorly ventilated.



LEVEL 1 – NO RESTRICTIONS

All services and settings are open with COVIDsafe plans and protocols in place. Risk assessments must be reviewed regularly.

Setting	Low risk client		Elderly/vulnerable client	
	Well ventilated > 6 AERs per hour	Poorly ventilated <6 AERs per hour	Well ventilated > 6 AERs per hour	Poorly ventilated <6 AERs per hour
Sole practitioner, separate facilities (commercial and home based)	Green	Yellow	Green	Yellow
Sole practitioner, shared facilities (commercial and home based)	Green	Yellow	Green	Yellow
Multi practitioner, shopping centre and day spa	Green	Yellow	Green	Yellow
Mobile	Green	Yellow	Yellow	Yellow
RTO	Green	Yellow	Green	Yellow
Corporate and sports massage in a team setting	Green	Yellow	Green	Yellow

LEVEL 2 – CONSIDER THE NEED TO TREAT VULNERABLE CLIENTS

Most settings and services are open with COVIDsafe plans in place. Carefully consider the need to treat vulnerable or elderly clients in a clinic that is poorly ventilated.

Setting	Low risk client		Elderly/vulnerable client	
	Well ventilated > 6 AERs per hour	Poorly ventilated <6 AERs per hour	Well ventilated > 6 AERs per hour	Poorly ventilated <6 AERs per hour
Sole practitioner, separate facilities (commercial and home based)	Green	Yellow	Green	Yellow
Sole practitioner, shared facilities (commercial and home based)	Green	Yellow	Yellow	Orange
Multi practitioner, shopping centre and day spa	Green	Yellow	Yellow	Orange
Mobile	Green	Yellow	Yellow	Orange
RTO	Green	Yellow	Yellow	Orange
Corporate and sports massage in a team setting	Green	Yellow	Yellow	Red

LEVEL 3 – IT IS NOT SAFE TO TREAT VULNERABLE CLIENTS, ESPECIALLY IN POORLY VENTILATED SPACES

Low risk clients can still be treated in most settings but extensive COVIDsafe protocols must be in place.

Setting	Low risk client		Elderly/vulnerable client	
	Well ventilated > 6 AERs per hour	Poorly ventilated <6 AERs per hour	Well ventilated > 6 AERs per hour	Poorly ventilated <6 AERs per hour
Sole practitioner, separate facilities (commercial and home based)	Yellow	Orange	Orange	Red
Sole practitioner, shared facilities (commercial and home based)	Yellow	Orange	Orange	Red
Multi practitioner, shopping centre and day spa	Yellow	Orange	Orange	Red
Mobile	Yellow	Orange	Red	Red
RTO	Yellow	Yellow	Red	Red
Corporate and sports massage in a team setting	Orange	Red	Red	Red

LEVEL 4 – IT IS NOT SAFE TO TREAT VULNERABLE CLIENTS IN ANY SETTING

Consider the need to treat low risk clients in well-ventilated spaces and defer all face-to-face treatment in poorly ventilated spaces.

Setting	Low risk client		Elderly/vulnerable client	
	Well ventilated > 6 AERs per hour	Poorly ventilated <6 AERs per hour	Well ventilated > 6 AERs per hour	Poorly ventilated <6 AERs per hour
Sole practitioner, separate facilities (commercial and home based)	Orange	Orange	Red	Red
Sole practitioner, shared facilities (commercial and home based)	Orange	Red	Red	Red
Multi practitioner, shopping centre and day spa	Orange	Red	Red	Red
Mobile	Orange	Red	Red	Red
RTO	Orange	Red	Red	Red
Corporate and sports massage in a team setting	Red	Red	Red	Red

LEVEL 5 – ALL SERVICES AND SETTINGS ARE RESTRICTED

It is not safe to provide face-to-face treatment. Online consultation only.

Setting	Low risk client		Elderly/vulnerable client	
	Well ventilated > 6 AERs per hour	Poorly ventilated <6 AERs per hour	Well ventilated > 6 AERs per hour	Poorly ventilated <6 AERs per hour
Sole practitioner, separate facilities (commercial and home based)				
Sole practitioner, shared facilities (commercial and home based)				
Multi practitioner, shopping centre and day spa				
Mobile				
RTO				
Corporate and sports massage in a team setting				



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