

These Massage & Myotherapy Australia Draping and Positioning guidelines are designed to facilitate best draping practice to ensure greater protection for both clients and clinicians.



#### Preamble

The issues surrounding the practice of draping and positioning are numerous. They include legal, moral, therapist training and practice and protection of the consumer. Massage & Myotherapy Australia (M&MA) receives ethical complaints in relation to inadequate and/or inappropriate draping and positioning which at times are difficult to resolve based on inadequate information, inconsistent practice and poor therapist/client communication.

This Position Statement is to serve as a context for therapists for best draping and positioning practice and a platform from where the National Ethics Committee can make an informed determination in relation to any complaints that arise. This Position Statement should be read in conjunction with the M&MA Code of Ethics, Standards of Practice and Draping and Positioning Practice Guidelines "Draping Essentials".

The M&MA Board of Directors serves to protect both the membership and the public by adopting this position statement which is resolutely linked to the overall policy of the M&MA Code of Ethics and the Standards of Practice.

The M&MA Draping and Positioning Policy is designed to facilitate best practice for client draping during treatment and to provide optimal client comfort and safety.

This policy does not replace formal training in positioning and draping, however it provides an outline of the principles of best draping practice to ensure greatest protection for both clients and clinicians.

The Board of Directors of M&MA reserve the right to amend this policy as and when deemed necessary.

#### **Position statement**

Every therapist has the right to make the decision as to the appropriateness of the draping and positioning of both male and female clients. However, decision-making and draping protocols should be consistent in context with the treatment, the pathology, within the scope of practice of the practitioner, and in consultation with the client.

Professional massage therapists should never, under any circumstances, proceed with treatment of any area of the body without first obtaining written "informed consent" and providing the client with information about how the treatment will be performed.

Massage Therapists must recognise, accept and respect the right of every individual client to choose whether he or she wishes to decline treatment based on the draping and positioning methods used. Therapists must carefully ensure that clients are never, in any way, subjected to any form of pressure whatsoever (either direct or implied) to accept the proposed draping and positioning.

Appropriate full draping is to be utilised during any massage treatment and unless modality specific, there is no requirement for any area other than that being treated, to be exposed. The M&MA recommends that to avoid discrimination it is suggested that any client's breasts and genitalia be covered at all times with towels or in the case of females, a soft bra/bra top.

#### Principles of Draping

- 1. Introduction and explanation to the client
- 2. Create an environment of safety and security
- 3. Ensure comfort and temperature control
- 4. Setting and maintaining boundaries
- 5. Draping materials, transport, storage and laundry
- 6. Therapist Occupational Health and Safety.

Comprehensive draping procedures are provided in the M&MA Member Brochure.

#### Other documents

- 7. M&MA Code of Ethics
- 8. M&MA Standards of Practice
- 9. M&MA Practice Guidelines Draping and Positioning
- 10. M&MA Member Information Draping and Positioning Procedures
- 11. M&MA Position Statement Informed Consent.

#### References & Further Reading

Fritz. S (2013) *Mosby's Fundamentals of Therapeutic Massage* 5th Ed, Mosby's, St Louis Casanelia, L., & Stelfox, D., (2009). *Foundations of Massage 3rd Ed*, Elesvier, Sydney Department of Human Services (2004). *Health guidelines for personal care and body art industries*, Victorian Government, Melbourne: www.health.vic.gov.au/data/assets/pdf\_file/0012/20019/health\_guidelines.pdf



## Introduction



## **1** Linen and table accessories

#### A set of linen consists of:

#### Dressing the table

- 1. A fitted table cover
- 2. A fitted sheet or bath sheet (spa size towel) to cover the table cover
- 3. A fitted cover, hand towel or disposable cover for the face cradle (be careful of allergy to latex)
- 4. Pillow cases to cover any pillows
- 5. Hand towel to cover bolsters.

#### For the client

- 6. A bath sheet (spa size towel)
- 7. A bath towel
- 8. A hand towel
- 9. A polar fleece, doona or blanket (in case client gets cold).

If working in hot climates, use sheets instead of towels. Ensure sheets are not transparent – use percale or Egyptian quality sheets.

**BOLSTERS:** use ready-made bolsters and/or pillows and/or rolled up towels. Have a mixture of sizes to accommodate your clients' requirements.

**PURCHASING LINEN:** top of the range quality is not essential. Linen needs to be of varying sizes, not translucent or see-through, and of the colour that best suits the clinic and company branding.

Linen will need to be replaced every so often. It is time to replace linen when the heaviness of residue oil is felt or there is an unpleasant odour.

**WASHING LINEN WITH OIL:** be careful! Oil is a combustible substance. Use a clothes dryer on a low heat for a short period of time – and check on it. The best and safest method of drying linen is on a clothes line to dry naturally. If washing at a laundromat, tell them about the oil content/residue in your linen for necessary safety precautions.

### **2** Create the clinic environment

**SAFETY AND SECURITY:** a clinic should be, and feel, safe, secure, private and dry.

**ROOM TEMPERATURE:** a clinic room should be warm – appropriate to the seasons. Keep the room smelling fresh. Remember some people are allergic to sprays and flowers.

**BATHROOM FACILITIES:** should be close by for the clients to use and for hand washing immediately before and after each massage.

MUSIC ... OR NOT? ask your client. If "yes" provide some options.





### **3** The client

- 10. Treat every client with respect, with dignity, and with inclusiveness they have a right to be included in their treatment plan discussion.
- 11. Gain their written consent to that plan before the massage session begins.
- 12. If the plan is modified during the massage, verbal consent is necessary and should be included in the clinical notes for the session.
- 13. Apply the M&MA Code of Ethics and Standards of Practice ALWAYS.
- 14. Drape men and women exactly the same way breasts and genitalia should be covered at all times.
- 15. Only ever uncover the area you are working on unless modality specific in context with the treatment, the pathology and within your scope of practice.

The therapist must leave the room before the client undresses and before the client gets up from the table at completion of the massage. If assistance is requested by the client, only remain in clinic room to assist the client on and off the table.

### 4 Communication

- 16. Engage in active listening listen, hear, paraphrase.
- 17. Use professional language and use lay terms as they are not health professionals.
- 18. Ask open-ended questions.
- 19. Include your clients in their treatment plan.
- 20. Take extensive clinical notes.
- 21. Set up a pressure feedback system check in with your clients during the massage to ensure applied pressure is adequate and comfortable.

Follow up, especially if:

- they are first-time clients
- a deeper than usual massage was applied
- the treatment plan was changed during the session.

Use a clean, dry set of linen for every client. Clients must leave underpants on. Draping techniques should be proficient minimise the amount of adjusting. Only uncover the area you are working on. Only massage to the edge of the draping.

# **Draping Guidelines**

### Bolstering (pillows, bolsters, rolled towels)

#### In prone



Always ask clients if they want support bolsters under the ankles.



Small pillow under the hips/ abdomen – especially if the client suffers with low back pain (LBP).

#### In supine - in side-lying



Bolster under the knees.



Pillow between the knees ... and pillow under the head ... and some clients like a pillow to "cuddle".





### Draping for the back



With client approval, bolster under the ankles and/or the hips/abdomen.



Grasp the outer edges of the draping at the shoulders.



Fold draping back over itself to lie at PSIS level. Tuck draping into outer edges of the undergarment. Begin the back massage.



Cover the entire back when you have completed the back massage.

Offer to place a bolster under the ankles and hips/abdomen. Fold draping back to lie in line with the PSIS. Tuck the draping into the outer edges of the undergarment. If concentrating on low back massage, place a towel across the shoulders. Cover the entire back when the back massage has been completed.

### Draping for the legs (prone)



Fold draping back to lie over the leg not being massaged. Allow the draping to fall in the midline between the legs.



Support the knee with one hand and pull the draping through from the midline under the knee – to anchor the draping.



Tuck the draping into the outer edge of the undergarment at the hip.



Draping for a prone leg massage should look like this.

Offer to place a bolster under the ankles. Only uncover the leg you are working on. Tuck the draping under the (same) knee to anchor the draping. Cover the entire leg (and foot) when leg massage completed.





### Draping for the gluteals (with a leg massage)





Tuck the edge of the towel into the undergarment's legband.

At the same time, push the towel and undergarment upwards towards the sacrum to expose the gluteals to be worked on.

### Draping for the gluteals (with a back massage)



Stand in line with client's thigh, facing the head. Tuck the draping into the undergarment at the side of the hip. Use your inside hand to hold (anchor) the draping at the sacrum while, with your outside hand, pulling the draping and the undergarment, together, downwards to expose the gluteals.

BEFORE you massage the gluteals you must have client consent. Massaging the gluteals must have relevance to the treatment plan.

You should stand facing the client's head while uncovering the gluteals. Only uncover the gluteals you are working on. Note the bath towel across the shoulders - cover the shoulders for warmth and privacy when working on the low back and gluteals.

### Draping for the turn over



Grasp the draping at the mid neck and at the feet. Lift draping directly upwards to make a tent shape.



Ask clients to slowly turn away from you onto their sides ... then onto their backs.



Ask clients if they would like pillows under their heads. Gain consent from under their knees. clients to use eye-coverings.



Ask if they would like a bolster

Remove all bolsters before turning. Form a tent shape with draping so the clients can move easily and comfortably. Clients should turn with their backs to you – this is a safety measure. Clients with a shoulder or hip issue should not turn onto that side. Ask elderly clients to turn slowly - onto their side - then onto their back ... or the other way if turning from supine to prone.



# Draping for the legs (supine)



Fold draping back to lie over the leg not being massaged. Allow the edges of the draping to fall to the midline (between the legs).



Lift the undraped leg with the inside arm (supporting under the knee). With the outside hand, pull the edge of the draping through from the midline under the knee – to anchor the draping.

Offer to place a bolster under the knees. Only uncover the leg you are working on. Tuck the draping under the (same) knee to anchor the draping. Only massage to the edge of the draping. Cover the entire leg (and foot) when leg massage completed.

# Draping for the abdominals



Place a bath towel across the chest on top of the existing draping.



Hold the bath towel firmly while pulling the underneath draping slowly out.



Tuck the top edge of the draping into the sides of the undergarment and in line with the ASIS.



Re-cover shoulders on completion of the abdominal massage. Hold the edge of the top draping and gently pull the bath towel out from across the shoulders.

First – cover the chest with a second towel over the existing draping. The underneath draping should be folded down to lay in line with the ASIS. Tuck draping into sides of undergarment at the hip. Re-cover to shoulders on completion of abdominal massage.





## Draping for the pectorals, arms, face and scalp



Grasp draping at either edge (by the shoulders).



Fold draping to lie in line with the underarm.



Ask clients to slowly bring one arm out (then the other) from underneath the draping to lie on top.



If the client is cold, cover the arms by folding the overhanging side of the draping back over the arm.

### Draping for side-lying (massage of the back)



Ask if the client wants a pillow placed between the knees. Some clients also like a pillow to "cuddle". This adds further security to the draping as well as for comfort.



Place a bath towel across shoulders on top of existing draping. The client's arm should lie on top of that bath towel to anchor the towel.



Hold the bath towel firmly at the shoulder or neck line while slowly pulling the existing draping out from underneath and down to lay across the hip (as for next image).



Fold the bath towel across the shoulders over the client's arm to uncover the entire upper back. Recover completely once finished the massage or follow the next steps for addressing the gluteals and legs.

# Draping for side-lying (massage of the gluteals)



Tuck the top edge of the draping into the undergarment at the hip.



Slide the draping and the undergarment together downwards to uncover the gluteals. Ask the client to roll forward slightly. Tuck the draping under the client's hip (on the table). Ask the client to roll back.

### Draping for side-lying (massage of the legs)



Ask the client to straighten the leg on the table. The top leg should be flexed and rest on the pillow that is between the knees. Fold the draping back to the midline between the legs.



Tuck the draping into the leg of the undergarment. Lift the knee and pull the draping through from the midline to rest under the knee that is uncovered (to anchor the draping). Re-cover the entire leg and foot on completion of the leg massage.



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