Managing Professional Boundaries

Mary Ann Hoffmans MN, RN-BC

Objectives:
- Examine boundary theory and relationship to clinical practice.
- Differentiate between boundary crossings and boundary violations.
- Describe the impact that social media has on professional boundaries.
- Identify warning signs of boundary issues.
- Discuss strategies that can assist with management of boundaries.
- Apply knowledge to critical thinking exercises and case scenarios.

Theory:

As we begin to look at Professional Boundaries in our clinical practice it is important to understand a few key concepts.
Why Do We Need Professional Boundaries?

- Boundaries help to outline the safest area of behavior for health care professionals when working with patients.
- Boundaries provide a secure foundation for the health care professional/patient therapeutic relationship by nurturing the sense of trust in the patient.
- Boundaries control the power differential, by providing space between healthcare professionals power and patients' vulnerability. This provides a safe connection with patients based on their needs.

(Sheets, 2001)

Appropriate Boundaries actually increase our ability to care about others.

- Makes it possible to do our jobs better.
- Helps us stay focused.
- Gives us room to empathize without trying to fix everything.

How is Therapeutic Relationship Defined?

A Therapeutic relationship is central and fundamental to the health care professionals practice. It is not social but is goal oriented, theory based and open to supervision. (Barron & Morrison, 1989)

Remember these key points about therapeutic relationships:
- Focused on needs of the client
- Based on trust and respect
- Conducted within well defined boundaries
What is Meant by Power Differential?

- Power differential is the inequalities that exist between professional and patient.
- Health care professional has more power than the patient/client due to influence, specialized knowledge and skills and access to information.
- Patients are vulnerable because of illness or emergency for which they seek services.
- This can create a potential for misuse, abuse or taking advantage of the patient.

What is a Boundary Crossing?

- “Brief excursions across boundaries that may be inadvertent, thoughtless or even purposeful if done to meet a special therapeutic need.” (NCSBN, 2007)
- Boundary crossings imply no harmful long-term effects.
- If part of the therapeutic plan it needs to be documented in the patient’s record.
- Continual crossing should be avoided because can lead to boundary violations.
- Examples: purchasing toiletries for a patient, accepting a handmade gift from a patient, giving a gift that meets a therapeutic purpose, such as an inspirational book, disclosure of own successful health battle to encourage a patient.

What is a Boundary Violation?

- Occurs when a nurse or health care professional consciously or unconsciously uses the professional/patient relationship to meet personal needs rather than patient needs.
- Implies harm to the patient or exploitive to the patient’s needs.
- The healthcare professional confuses own needs with needs of the patient.
- Examples: disclosure of personal information to vent feelings, offers of secrecy in exchange for favors, reports only certain aspects of patients behavior in order to control care.
What is appropriate professional behavior in one situation may be inappropriate in another. Need to consider the health care professional’s intention and the patient’s perception of the intervention or event.

Questions to ask:
- Whose needs are being met?
- Is this something I can chart clearly?
- Is it something I can openly and honestly discuss with a coworker?
- How does this “look” to others and the patient?

(Holder & Schenthal, 2007)

In the following exercises, you will be given an opportunity to test your knowledge. As you read each statement indicate whether you think the behavior is:

Always Ok, Sometimes Ok, or Never Ok

1. Accepting personal gifts from patients or families.
2. Sharing personal information with patients or families.

Always Ok  Sometimes Ok  Never Ok

3. Giving out your cell phone # to your patient and family.

Always Ok  Sometimes Ok  Never Ok

Keeping in mind the key concepts just presented, let’s look at the relationship of these concepts to clinical practice.
Continuum of Professional Behavior

[Diagram showing a continuum of professional behavior]

(NCSBN, 2007)

What are Some Contributing Factors?

- Families are in crisis, may not have family near by for support.
- Those who choose the health care professions generally do so out of a desire to help others.
- Family Centered Care Model promotes more homelike, collaborative model of care.
- Increasing numbers of long term, chronic patients.
- Social Media.
- Pediatrics is a specialty that involves different physical boundaries than adults and includes parents who may need care too.

Social Media: Impact on Professional Boundaries

- Social networking is a part of many people’s every day lives, sometimes it’s easy to forget about privacy and confidentiality issues.
- Privacy relates to the patient’s expectation to be treated with dignity and respect. Effective therapeutic relationships are based on trust. The patient needs to be confident that their most personal information and basic dignity will be protected. Any breach of trust damages the therapeutic relationship.
- Confidentiality relates to the safeguarding of any patient information learned during the course of treatment.
Social Media: Impact on Professional Boundaries

- Patient privacy and confidentiality are protected by state and federal laws.
- Improper use of social media violates these laws and can result in civil and criminal penalties.
- Social interactions with patients on Facebook or other social networking sites can result in blurring of professional boundaries as well as compromise patient confidentiality and privacy.

Let’s Talk About Facebook

- Individuals have access to personal information that you might not otherwise share in a professional relationship.
- Hobbies, relationships, lifestyles, and political views may become potential areas for disagreement or disapproval.
- You may find out things about the patient or family that they did not intend you to know. What if it raises a concern about your patient’s well being?
- Your patient/family may learn something about you that you would rather they not know.

While this may be inadvertent it can lead to privacy and confidentiality issues

Social Media Tips

- When using social networking sites:
  - Always keep principles of patient confidentiality and privacy uppermost in your mind.
  - Prepare in advance, and practice scripted answers to requests by patients and families to engage on social media sites.
  - Always be respectful of your colleagues and employer.
  - Always consider and think about the principles and concepts related to patient/professional boundaries.
Warning Signs of Boundary Issues

- Avoiding the patient and family.
- Excessive personal disclosure.
- Secrecy with patient/family.
- Feeling other team members don’t understand the patient/family as you do.
- Patient/family will only speak to you and only want you to care for them.
- Excessive patient attention, trade assignments to provide care, visits on day off.
- You fail to set limits with a patient.

More Warning Signs

- You give patients personal contact information or money.
- You speak poorly of co-workers to patients.
- You talk to patient/families about things that are out of your scope of practice.
- You speak to patient about your own professional needs or inability.
- You become defensive when questioned about your interaction with a patient.
- You use selective communication, not fully relating all necessary information to others thus retaining some control over the care.

Application

In the following exercises, you will be given an opportunity to test your knowledge. As you read each statement indicate whether you think the behavior is:

Always Ok, Sometimes Ok, or Never Ok
1. Giving a patient or family a ride home.

- Always Ok
- Sometimes Ok
- Never Ok

2. Babysitting for a patient on your off time.

- Always Ok
- Sometimes Ok
- Never Ok

MANAGING BOUNDARY ISSUES

After examining boundary theory, and its relationship to clinical practice we now turn our attention to managing boundary issues.
How to Manage Boundaries

- Self Assessment—be aware of your triggers.
- Determine ahead of time what your boundaries are and communicate them up front. It is ALWAYS the professional who is responsible for establishing and maintaining appropriate boundaries.
- Develop a script for limit setting and practice this with a co-worker.
- Seek help from trusted colleagues when issues are complex and boundaries are not immediately clear.
- Follow organizational policy and professional standards (they are there to help you.)
- Take steps to meet your own social/emotional needs outside of work.
- Follow the patient’s care plan, focusing on patient and family problems and goals.

Self Assessment

- Is my behavior consistent with standards and ethical codes of my profession?
- Am I considering the patients needs or could there be a conflict between my needs and those of the patient?
- Would I support another professional having the same relationship with the patient?
- Could I be using the patient to meet personal needs?
- Am I preoccupied with the patient?
- Do others perceive me to be giving preferential care to the patient?

Self Assessment

- Do you share more about yourself than necessary with patients or families? Self-disclosure can be therapeutic only if shared in the best interest of the patient.
- Do you become defensive if someone questions what you do with the patient? Secretive Behavior is never acceptable. (NCSBN, 2007)
- Have you ever thought that no one else can understand the patient or care for the patient like you do?
- Can your contacts with the patient/family be documented and reflect the need for intervention?
Professional Standards

- Codes of Ethical Behavior.
  Always follow your disciplines code of ethics and standards of conduct.

- Standards of Professional Performance and Practice.
  There are state boards that license most health care professionals. It is important to know the standards set by your practice and follow accordingly.
  Example: Nurse Practice Act.

Hospital Policy and Procedures

Review your hospital policies related to Professional Boundaries.

Examples at Texas Children’s
- Patient Photography Policy
- Social Media Guidelines

APPLICATION

In the following exercises, you will be given an opportunity to test your knowledge. As you read each statement indicate whether you think the behavior is:

Appropriate or NOT Appropriate
1. You befriend a single mom whose child is in and out of the hospital. You are a single mom with a child the same age so after discharge you decide to invite them to go on outings with you and your child.

   **Appropriate or Not? You Decide!**

   ![Appropriate](image1)
   ![Not](image2)

2. You discover that you live near a patient you have been working with for the last few months. The family struggles financially and the mother confided that at times they do not have money for food. On your way home from work you stop by a local Luby’s and drop off a meal to the family. You are trying to be a good person and help the family out.

   **Appropriate or Not? You Decide!**

   ![Appropriate](image3)
   ![Not](image4)

3. The patient’s family is so appreciative of the time the nurse spent with the family, easing the anxiety of hospitalization, they give her $50 and tell her to please go buy something for herself. The nurse thanks the family and heads to the mall.

   **Appropriate or Not? You Decide!**

   ![Appropriate](image5)
   ![Not](image6)
4. A nurse notices the mother of a patient on Facebook while sitting at the child’s bedside. The nurse begins talking about Facebook with the parent and the parent says, “I am going to send you a friend request.” The nurse responds by saying, “Great, I will check you out when I get home.”

Appropriate or Not? You Decide!

5. A family you cared for shared with you that they were going to have to move to a smaller place and needed to sell some of their household goods. They asked if you would be interested in buying anything. You need a bedroom set and purchase from the family.

Appropriate or Not? You Decide!

6. A Nurse had developed a relationship with patient/family but was not assigned to care for the patient on a particular day. The nurse continually checked on the child and while in the room provided care. The nurse assigned to the patient was frustrated because the family seemed to prefer the other nurse.
Identifying the Red Flags

View the following video scenario and as you watch consider the Professional Boundary “Red Flags”.

Case Scenario Debrief

1.

2.
Case Scenario Debrief (cont’d)

3. 

4. 

Key Points to Remember

- It is human nature to be drawn to certain patients but it can create a situation that is not therapeutic for patient or healthcare professional if too involved.
- It is unfair to other patients, all patients and their families deserve equal care and attention.
- It can make it difficult for others to care for the patient because they can not meet the same standard of care as the staff member who has grown too close.
- Families become overly dependent and are not guided to appropriate resources for support and/ or advice.

Maintaining Professional Boundaries is Everyone’s Responsibility

- Some boundaries are absolute while others may require careful consideration and professional judgment.
- Issues can be complex and not immediately clear.
- Relationships are gray, not black and white.
- Approach care by thinking about the principles presented in this module.
- When faced with challenging situations talk to a trusted colleague.
- When you observe a colleague struggling with a patient/family relationship, offer feedback.
- Step back and ask yourself, “Would I, Could I Should I do this for every patient and family I care for? (Maucom, 2008)
References

7. Mass G. "How do you know when professional boundaries have been crossed?" Oncology Nursing Society News. 2003 Aug; 18(8): 1,4-5.