

# Professional Boundaries

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# Professional Boundaries

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- Goals of this presentation
    - To understand the need for boundaries in order to prevent the exploitation of pts. and protect ourselves
    - To stimulate thought & discussion around appropriate boundaries in various situations encountered in practice
    - To increase awareness of the vulnerabilities of patients & of physicians which may lead to boundary violations
    - To develop appropriate awareness of our personal needs and recognition of warning signs in order to prevent exploitation
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# Professional Boundaries

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- What are Boundaries?
  - Definition of Exploitation
    - Using another for one's own ends/needs
  
  - Types of Boundaries:
    - Intellectual – freedom to choose what we want to think
    - Physical – personal space
    - Emotional – space needed to process our feelings, identify our feelings and separate them from others
    - Spiritual - respect for other's religious beliefs – no agenda for changing or fixing others beliefs
    - Sexual – consent, role/power
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# Professional Boundaries

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- The boundaries of professionalism assist in focusing on the patient need, and reduce the likelihood of introducing our own emotional, sexual or financial needs into the relationship.
  - In the doctor-patient relationship, as opposed to a social relationship, it is understood that the relationship exists solely for the patient's benefit and that the doctor's needs do not enter into it.
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- It is **not** the patient's responsibility to maintain our professional boundaries.
  - Some boundaries are very clear – sexual contact with patients is forbidden. Other situations are, however, more grey and require the use of clinical judgment – such as self disclosure, appropriate touch, relationships with co-workers and dual relationships in small communities.
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# Cornered

by Mike Baldwin

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Doctors without Boundaries

# Professional Boundaries

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- Boundary Crossings vs. Boundary Violations
    - Always ask yourself “Is this for the patient’s benefit?”
    - Document your decision making process
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# Professional Boundaries

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How can this breakdown of boundaries happen?

- Vulnerabilities of Patients
    - Their role - imbalance of power
    - Gender, age, culture
    - History of incest or sexual abuse
    - Poor communication skills/boundaries
    - Psychiatric illness
    - Addiction
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# Professional Boundaries

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How can this breakdown of boundaries happen?

- Vulnerabilities of physicians
    - Being human
    - Increased needs during times of personal crisis
    - Mental health issues (including paraphilia, personality disorders, organic, impulse control disorders, OCD)
    - Substance abuse/addiction (including sexual addiction)
    - Isolation in medical setting and personally
    - Marital discord &/or sexual dysfunction
    - Professional Arrogance - minimal consequences for small boundary violations
    - Lack of assertiveness skills/co-dependency
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# Professional Boundaries

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- Prevention
    - Understand & accept the need for professional boundaries
    - Think carefully about boundary crossings - document
    - Recognize our vulnerabilities
    - Pay attention to boundaries during times of increased vulnerability
    - Be aware of our feelings and motives
    - Be alert to “red flags” – which patient behaviors trigger us?
    - Discuss difficult situations & feelings with trusted colleagues
    - Acknowledge our needs & develop satisfaction in our personal lives
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You are a physician in Saskatchewan, and:

- A male patient invites you to join him and some buddies at the bar Saturday night
  - A young female patient invites you out for coffee
  - An elderly female patient invites you out for coffee
  - A young male patient invites you out for coffee
  - A 14 year old male or female patient invites you out for coffee to discuss personal problems they are having
  - A female patient offers to give you a hug or requests one from you
  - A patient asks you personal questions
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- A physician colleague stops you in the hallway at the hospital requesting a prescription from you as they just don't have time to visit their regular doctor.
    - The Rx is for some antibiotics
    - The Rx is for an antidepressant
    - The Rx is for Oxycontin
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- ❑ A patient flirts with you, invites you into sexual contact
  - ❑ A resident flirts with you, invites you into sexual contact
  - ❑ A colleague flirts with you, invites you into sexual contact
  - ❑ Your department head or SMO flirts with you, invites you into sexual contact
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- ❑ A physician colleague stops you in the hallway at the hospital requesting a prescription from you for their spouse as she can't get into see her regular doctor
  - ❑ Work functions where alcohol is available
  - ❑ You become aware that you have made a medical error.
  - ❑ A colleague calls you "darling"
  - ❑ A colleague is repeatedly sharing gossip, undermines other staff, bullies others, makes negative comments about others in the disguise of humor
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- ❑ A staff member makes a racial slur regarding a foreign physician
  - ❑ A nurse challenges you on your diagnosis or treatment plan
  - ❑ Your receptionist at the clinic asks if she can see you as her family doctor – can you?
  - ❑ A long term patient of yours is hired as a staff member at your clinic – can you still see them as a patient?
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## How to tell if your dog is involved in a sex scandal

