

# Vermont Psychiatric Care Hospital Procedure

## Professional Behavior and Personal Boundaries

Revised: X

Date: 04/07/14

### Definitions:

- I. **Professional Behavior:** Professional behavior is consistent conduct and behavior that conveys respect for the dignity of patients and others.
- II. **Boundary:** A limit or margin that describes the way employees interact and/or communicate with patients. Professionals are expected to maintain the necessary workplace behaviors and attitudes required by the ethical standards of their professional discipline.
- III. **Boundary Violations:** An infringement of the limit or margins. The failure to maintain a boundary and become involved in a manner that has the potential to compromise patient care. Boundary violations may be emotional, physical, spiritual, financial or sexual in nature, and may be brief, extended, accidental or intentional.
- IV. **Staff member:** All staff, contracted staff, students, and volunteers.
- V. **Therapeutic Relationship** - is a professional relationship between the patient and the staff member in which the latter has the responsibility for ensuring that the needs of the patient as described by the treatment plan are met.

### CONSIDERATIONS/REQUIRED STEPS:

- I. **Introduction.** The rights and needs of patients must be respected at all times. However, by the very nature of the illness / disability of the patients at Vermont Psychiatric Care Hospital (VPCH) the relationship between patient and staff is not one of equal balance.
  - A. Staff must recognize and understand that they are in a position of power. This power must not be abused at any time. It is essential, therefore, that all interactions between patients and staff must be seen in terms of a professional relationship.
  - B. Staff must have a clear framework within which to carry out therapeutic interactions. Because there is a potential for positions of power to be abused and professional boundaries broken, VPCH must make it clear that the responsibility to maintain such boundaries rest with the individual staff members. Failure to meet this responsibility may lead to formal disciplinary action.
  - C. Staff must ensure that working relationships are not misread or confused with friendship or other personal relationships. This is essential in order to protect VPCH patients at a time when they may be vulnerable and also to protect staff from the risk of potential false allegations.

- D.** If a staff member is ever in doubt, they should seek advice from the Nursing Supervisor.
- II.** All interactions and communications between patients and staff shall occur within the hours and limits of the staff members job and role responsibilities. All staff members perceiving an attempt by a patient to initiate an interaction or communication that is, or could lead to, a boundary violation or potential boundary violation shall consult with the Nursing Supervisor and/or members of the patient's treatment team.
- III. Boundary violations and potential boundary violations.**
- A. Boundary violations.** Behaviors which are prohibited and outside of the staff members job and role responsibilities include, but are not limited to:
- i.** providing special favors to certain patients over others;
  - ii.** developing an exclusive relationship with a patients for social or therapeutic reasons, with the exception of psychotherapy;
  - iii.** engaging in a social relationship with a patient outside work hours, including after discharge;
  - iv.** giving personal gifts, money or other items of value to a patient;
  - v.** sharing sexual feelings, remarks, jokes;
  - vi.** sexual relationships with a patient;
  - vii.** drug or alcohol related remarks to a patient, except as used for patient/family education;
  - viii.** providing to a patient or accepting from patient any illicit and non-prescribed drug or alcohol;
  - ix.** engaging in personal, non-therapeutic correspondence with any patient. If a staff person is contacted by a patient after discharge, he or she shall notify their supervisor. If a staff person receives personal contact from a patient while at VPCH, he or she shall notify supervisor and treatment team; and
  - x.** making disparaging or other critical remarks to a patient about other VPCH employees, hospital policy or operations.
- B. Potential boundary violations.** Behaviors of concern that may be outside of the staff members job and role responsibilities include, but are not limited to the following:
- i.** intentional disclosure to a patient of staff member's personal, non-patient care related information such as details of marital status, telephone numbers, family issues, job or disciplinary action concerns for non-therapeutic reasons; and
  - ii.** receiving personal items, or other gifts of value from a patient.
- IV. Physical touch.** Physical touch to a patient is necessary for providing direct care, as well as for any necessary interventions related to treatment. However, physical touch has many recognizable interpretations and misinterpretations and should be used sparingly and thoughtfully unless otherwise described in a patient's treatment plan.

**V. Review and reporting responsibilities**

- A. Any employee who in any way becomes aware of an actual or potential boundary violation between a patient and another employee shall report this information to the Nursing Supervisor.
- B. Any Nursing Supervisor who becomes aware of an actual or potential boundary violation shall collect all relevant information and respond as follows:
  - i. If the relevant information presents any reason to suspect that a staff member has engaged in prohibited behavior, the Nursing Supervisor shall proceed in accordance with the internal review stages for a mandatory report. Information collected will be submitted to the Nursing Administrator and the VPCH Chief Executive Officer for action. If the information collected identifies an action requiring a report, the *VPCH Mandatory Reporting Policy and Procedure* shall be followed and a decision will be made regarding whether to immediately remove or reassign staff.
  - ii. If the relevant information involves a potential boundary violation or prohibited behavior that may or may not result in a mandatory report, Nursing Supervisor shall discuss the concerning behavior with the staff member and with members of the patient's treatment team and/or take other action, including disciplinary action when indicated.

**VI. Pre-existing relationship.** Any staff member who becomes aware of a potential or actual boundary complication, between themselves and a patient (i.e. hospitalization of family member, friend, or acquaintance in the community) shall report this information to the Nursing Supervisor. All potential boundary complications shall be reviewed and may require reassignment or other intervention.

Approved by	Signature	Date
Frank Reed, Commissioner of DMH		11/29/16