

# I Couldn't, I Wouldn't, I Shouldn't, I Just Did.... Keeping Professional Boundaries in Nursing

JONATHAN WOODS RN, MSN, NE-BC

---

---

---

---

---

---

---

## Speaker Disclosure

- ▶ I have nothing to disclose, nor conflict of interest, bias, or intent to discuss off-label use.

---

---

---

---

---

---

---

## Presentation Objectives

- ▶ Participants will identify the differences between boundary crossings and boundary violations.
- ▶ Participants will recognize 3 of the common early warning signs to professional boundary violations.
- ▶ Participants will identify 3 at-risk groups most vulnerable to boundary violations.

---

---

---

---

---

---

---

## Professional Boundary Definition

- ▶ The National Council of State Boards of Nursing (NCSBN) defines professional boundaries as "the space between the nurse's power and the client's vulnerability."
- ▶ The very nature of providing patient care in a personal and intimate setting creates the opportunity for nurses to be influenced by emotions during patient encounters leading them to perceive those interactions as having a deeper meaning which can result in blurred boundaries by either the patient or caregiver.



---

---

---

---

---

---

---

## 3 Categories of inappropriate behaviors



### Boundary Crossing

Generally harmless, but have the potential to lead to more serious boundary concerns



### Boundary Violation

Non-therapeutic boundary crossings that is unprofessional and can cause harm.



### Sexual Misconduct

Forbidden behavior that can be one of the most serious failures of the nurse's responsibility for the well-being of the patient.

---

---

---

---

---

---

---

## What is the difference between a boundary crossing and a boundary violation?

### Boundary Crossings

- ▶ Relatively harmless
- ▶ Therapeutic purpose
- ▶ Generally acceptable when performed for a patient's well being.
- ▶ Has the potential to lead to more serious violations in the absence of accountability.

### Boundary Violations

- ▶ Harmful in nature (physical, mental, emotional, spiritual)
- ▶ Self-centered purpose
- ▶ Not acceptable and often done in secrecy or with ulterior motives.
- ▶ Clearly exploitive or harmful transgressions.

---

---

---

---

---

---

---

### Examples of professional boundary crossings

- ▶ A nurse receives a cookie tray from the patient after caring for them for three shifts in a row.
- ▶ The nurse shares minor personal details in order to ease the fears and concerns of the patient.
- ▶ The RN brings the patient their favorite drink or meal from a restaurant before their shift to help encourage their oral intake.
- ▶ A nurse goes out of her way to give a patient the most convenient follow up appointment time.

---

---

---

---

---

---

---

### Trouble in the making.....

- ▶ Nurses must be cognizant about the specific differences between their role as a healthcare professional and a role that is more personal and social in nature.
- ▶ Nurses must remember we are nurses all the time, both in the workplace and in the community, and it is critical to seek guidance early when questions or dilemmas around professional boundaries arise.



---

---

---

---

---

---

---

### Examples of professional boundary violations

- ▶ Lending money to a patient and developing a co-dependent relationship.
- ▶ Developing such a personal relationship with the patient/family that you are viewed as part of the family and not part of the professional health care team.
- ▶ Offering to give a sports ticket to a patient so they can go to the game with you.
- ▶ "Friending" patients on social media or developing a personal relationship with the patient/family that inhibits the health care team member from being aware of manipulation that is occurring.
- ▶ Developing a romantic relationship with a patient.

---

---

---

---

---

---

---




---

---

---

---

---

---

---

### The 7 themes related to professional boundaries

- ▶ Dual relationships/role reversal
- ▶ Gifts and money
- ▶ Excessive self-disclosure
- ▶ Secretive behavior
- ▶ Excessive attention/over-involvement
- ▶ Sexual behavior
- ▶ Social media

---

---

---

---

---

---

---

### Identifying those at risk

- ▶ Inexperienced or younger nurses
- ▶ History of childhood abuse, physical abuse, or substance abuse.
- ▶ Female patients, pediatric population, & chronically ill patients.
- ▶ Night shift / weekend personnel
- ▶ A diagnosis of bipolar disorder and/or other personality disorder
- ▶ Long term care facilities
- ▶ Patients that prefer to keep secrets from staff or doctors

conduct as moralit  
cal-ly adv. — eth/ics  
eth-ics (eth'iks) n. 2  
The study and philos  
on the determination  
of right conduct with  
of life, etc. 3. A te  
Ethiopi

---

---

---

---

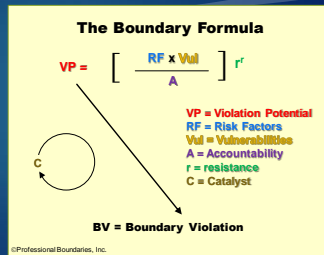
---

---

---

## Professional Boundary Teaching Tools

### The Boundary Formula




---

---

---

---

---

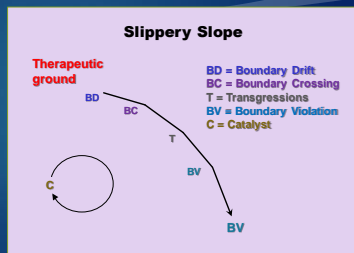
---

---

---

## Professional Boundary Teaching Tools

### Slippery Slope




---

---

---

---

---

---

---

---

## Risk Factors and Vulnerabilities

### Risk Factors

- ▶ Encompass a number of external elements such as:
  - ▶ Work setting
  - ▶ Patient type
  - ▶ Experience/skill mix

### Vulnerabilities

- ▶ Represent psychosocial elements that influence our boundary interactions such as:
  - ▶ Childhood trauma
  - ▶ Shame-based injuries
  - ▶ Emotional and dramatic event

---

---

---

---

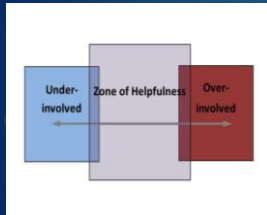
---

---

---

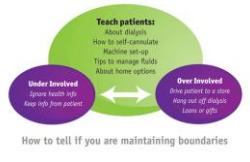
---

## Continuum of Professional Behavior



<http://correctionsnurse.net/manifesto-proposition-four-maintaining-professional-boundaries/>

### Zone of Helpfulness



<http://dailydiapct.org/professionalism-and-boundaries/understanding-boundaries/>

---

---

---

---

---

---

---

---

## Are boundary violations always so obvious?




---

---

---

---

---

---

---

---

## Not always, but things to look out for include:

- ▶ Excessive patient attention leaving the rest of the patient assignment unattended.
- ▶ Information withholding to manipulate the situation.
- ▶ Secretive behavior between the patient and nurse.
- ▶ Flirting with the patient.
- ▶ Over-sharing of personal and intimate details including feelings of sexual attraction.
- ▶ Overly protective or defensive behavior whereby the nurse assumes the attitude of "you and me against the world".

---

---

---

---

---

---

---

---

## Recognizing warning signs

- ▶ Early signs might include spending a disproportionate amount of time with a patient, preferential treatment, or connecting with a patient in areas besides those used to provide direct patient care.
- ▶ Ignoring the early warning signs or simply a delayed response by a nurse leader increases the potential for more serious boundary violations to occur.



---

---

---

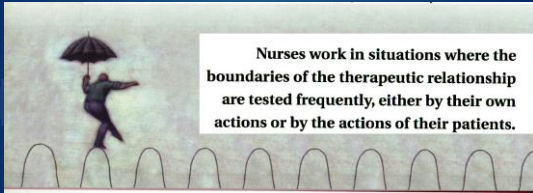
---

---

---

---

## Why is it so difficult?



Nurses work in situations where the boundaries of the therapeutic relationship are tested frequently, either by their own actions or by the actions of their patients.

---

---

---

---

---

---

---

## Strategies to keep within professional boundaries

- ▶ Keep to relevant personal details when taking a history.
- ▶ Honor confidentiality.
- ▶ Get help early for personal crises.
- ▶ Be culturally sensitive to your patient and environment.
- ▶ Consult with your peers about difficult situations.
- ▶ Be cautious of the context and intent if accepting a gift from a person in your care.
- ▶ Refrain from undue familiarity.
- ▶ Never use sexual demeaning words or actions or dirty jokes.

---

---

---

---

---

---

---

## Prevention

- ▶ Education is the most effective way to prevent boundary violations and must be done in nursing school curriculums. Annual training in the healthcare setting to prepare nurses to respond appropriately.
- ▶ Accountability must be present in the work environment at all levels with regular usage of accountability groups if available.



---

---

---

---

---

---

---

## Prevention Strategies for Professional Boundary Violations

- ▶ Maintain a therapeutic relationship.
- ▶ Be cognizant of social media boundaries.
- ▶ Maintain professional liability insurance.
- ▶ Have supervision available to all home care workers.
- ▶ Pre and post licensure education.



---

---

---

---

---

---

---

## Social Media's Role in Boundary Issues

- ▶ Social Media creates a forum that nurses are increasingly using for personal and professional communications, education, and expression of feelings which easily leads to oversharing.
- ▶ Developing a robust social media policy and educating staff about it is the most effective method to harness the benefits of social media while mitigating the inherent risks.



---

---

---

---

---

---

---



## Social Media Considerations

"Nurses must recognize that it is paramount that they maintain patient privacy and confidentiality at all times, regardless of the mechanism that is being used to transmit the message, be it social networking or a simple conversation. As licensed professionals they are legally bound to maintain the appropriate boundaries and treat patients with dignity and respect"



NCSBN Board of Directors President Myra A. Broadway, JD, MS, RN, Executive Director, National State Board of Nursing

---

---

---

---

---

---

---

---

## Professional Resources

"Social Media can be a powerful tool, one with the potential to enhance or undermine not only the individual nurse's career, but also the nursing profession."

ANA President Karen A. Daley, PhD, MPH, RN, FAAN.

- ▶ ANA & NCSBN® Release Social Media White Paper:  
[https://www.ncsbn.org/ProfessionalBoundaries\\_Complete.pdf](https://www.ncsbn.org/ProfessionalBoundaries_Complete.pdf)  
<https://www.ncsbn.org/professional-boundaries.htm>
- ▶ ANA Code of Ethics

---

---

---

---

---

---

---

---

## Carle's Social Media Policy



---

---

---

---

---

---

---

---

## What is the role of the nurse leader?

- ▶ There are legal and ethical mandates that guide professional behaviors and as nurse leaders we are expected to report and investigate boundary issues for the safety and well-being of our patients and staff.
- ▶ Any nurse leader who works in settings with vulnerable patients should be particularly mindful of behavioral warning signs or red flags that occur when patient vulnerability and prolonged patient contact converge.



---

---

---

---

---

---

---

## Role Model Healthy Professional Boundaries



- ▶ It is the nurse leader's responsibility to model healthy professional boundaries, follow up on potential and identified violations, practice within the law, and protect the patients and staff we serve.



---

---

---

---

---

---

---

## Nurse / Nurse Leader Resources

- ▶ Human Resources
- ▶ Employee Assistance Programs (EAP)
- ▶ State Nurse Practice Act
- ▶ Risk Management
- ▶ Education/Training
- ▶ Leadership Colleagues
- ▶ Disciplinary Process
- ▶ Professional Organizations



---

---

---

---

---

---

---

## Closing Thoughts

Today's nurses and nurse leaders have the daunting task of managing the challenge of professional boundaries with the capabilities of social media and the prevalence of malpractice lawsuits. It is imperative to understand your state Nurse Practice Act and to know your resources available to foster and protect a healthy culture that protects the nurse-patient relationship and promotes professional boundaries.



---

---

---

---

---

---

---

## References

- ▶ Anewalt, P. (2009). Fired up or burned out? Understanding the importance of professional boundaries in home healthcare and hospice. *Home Healthcare Nurse*, 27(10), 590-597.
- ▶ Dean, E. (2014). Don't cross the line from professional to personal. *Nursing Standard*, 28(46), 24-25.
- ▶ Fischer, H., Houchen, B., Ferguson-Ramos, L. (2008). Professional boundaries violations. Case studies from a regulatory perspective. *Nursing Administration Quarterly*, 32(4), 317-323.
- ▶ Hanna, A., Suplee, P. (2012). Don't cross the line. Respecting professional boundaries. *Nursing*, 42(9), 40-47.
- ▶ Holder, K., Schenthal, S. (2007). Watch you step: Nursing and professional boundaries. *Nursing Management*, 38(2), 24-29.

---

---

---

---

---

---

---

## References continued...

- ▶ Hudspeth, R. (2006). Professional boundary crossings and boundary violations and their implications. *Nursing Administration Quarterly*, 30(4), 375-376.
- ▶ Manfrin-Ledet, L., Porche, D., Eymard, A. (2015). Professional boundary violations: a literature review. *Home Health Now*, 33(6), 326-332.
- ▶ NCSBN. (2011). *A Nurse's Guide to Professional Boundaries*. Chicago, IL: NCSBN; [https://www.ncsbn.org/ProfessionalBoundaries\\_Complete.pdf](https://www.ncsbn.org/ProfessionalBoundaries_Complete.pdf)
- ▶ Patterson, P. (2012). Social media: Helping staff manage personal, professional boundaries. *OR Manager*, 28(4), 1-3.
- ▶ Thompson, C. (2007). Being clear about professional boundaries. *Kai Tiaki Nursing New Zealand*, 13(8), 29.

---

---

---

---

---

---

---