

PROFESSIONAL BOUNDARIES in a Therapeutic Relationship

Preamble

The relationship between a patient and a physiotherapist is fundamental to the delivery of safe, quality and effective physiotherapy care. A *therapeutic relationship* is based on trust, respect, personal closeness and the appropriate use of the physiotherapist's inherent power.

The physiotherapist establishes and maintains this essential relationship not only by using knowledge, skills and judgment but also by applying effective communication strategies and interpersonal skills. Regardless of the setting and the length of the interaction, the physiotherapist is expected to act professionally and appropriately manage the boundaries of the relationship.

DEFINITIONS

Therapeutic Relationship: The relationship that exists between a physiotherapist and their patient during the course of physiotherapy care.

Personal Relationship: A "personal relationship" in the context of this Standard means a relationship with a person that has elements of specialness, exclusivity or intimacy. Joining the same community organization would not usually, in the context of this Standard, constitute a close personal relationship.

Sexual Abuse: Physical relations of a sexual nature between the physiotherapist and the patient, including but not limited to:

- sexual intercourse
- touching of a sexual nature
- behaviour and/or remarks of a sexual nature

"Sexual nature" does not include touching, behaviour or remarks of a clinical nature appropriate to the services provided.

STANDARD STATEMENT

Physiotherapists are responsible for understanding the difference between a therapeutic and a personal relationship with a patient in order to establish and maintain appropriate professional boundaries. They are responsible for managing the relationship at all times in the best interest of the patient.

Physiotherapists demonstrate the Standard by:

1. Understanding the difference between a therapeutic relationship and a personal relationship with a patient and being aware of the components that characterize the difference:
 - Power
 - Trust
 - Respect
 - Personal Closeness
2. Refraining from any activity that constitutes sexual abuse, neglect or any other types of abuse such as emotional, financial or physical.
3. Accepting the responsibility for always managing the patient-therapist relationship by
 - continuously self-evaluating their conduct and correcting any inappropriate comments, behaviours or attitudes; and
 - recognizing the signs in a patient interaction that, if not managed appropriately, could lead to a boundary crossing and by taking immediate remedial action.
4. Demonstrating sensitivity to religious and cultural beliefs, values and lifestyles.
5. Recognizing that the treatment of a partner or immediate family member is a conflict of interest and not billing an insurer or 3rd party for any such treatments.
6. Recognizing that the treatment of a friend or relative may constitute a conflict of interest and should only occur after other options have been fully explored and with informed consent.
7. In all other circumstances, excluding paragraphs five (5) and six (6), refraining from entering into a close personal relationship with a patient, a patient's partner or family member while the patient is receiving physiotherapy treatment.
8. Refraining from entering into a close personal relationship with a **former patient** unless:
 - a reasonable time period has elapsed since the patient was discharged from physiotherapy care;
 - the physiotherapist is satisfied that the power differential inherent in a therapeutic relationship no longer exists; and
 - the physiotherapist reasonably believes the patient is not dependent on him/her.

References:

NSCP (2016) Professional Boundaries / Managing the Therapeutic Relationship,
CPTBC (2015) *Where's The Line? Professional Boundaries in a Therapeutic Relationship*,
CPO.(2013) *Guide to therapeutic relationships and professional Boundaries*
Pugh, D. (2011) A Fine Line: The role of personal and professional vulnerability in allegations of unprofessional conduct.
Journal of Nursing Law, 14, 21-31.