



FAQ

Professional Standard: Professional Boundaries and Prevention of Sexual Misconduct

Introduction

The [Professional Standard: Professional Boundaries and Prevention of Sexual Misconduct](#) sets out the *minimum expectations* for professionalism and ethical conduct that licensees must meet to ensure they maintain appropriate professional boundaries; recognize and manage conflicts of interest that may affect care; identify and appropriately address dual relationships; and refrain from engaging in any form of sexual misconduct or sexual abuse.

Below are frequently asked questions by licensees.

Q: A patient has crossed a boundary – what should a licensee do?

Professional Standard: Professional Boundaries and Prevention of Sexual Misconduct, Principle 1.7 states licensees must:

1.7 *Advise and redirect a patient if a boundary crossing occurs by:*

1.7.1 *Acting in accordance with the licensee's responsibility to establish and maintain Professional Boundaries;*

1.7.2 *Re-establishing Professional Boundaries with the patient;*

1.7.3 *Ending the therapeutic relationship when a potential or actual boundary crossing cannot be adequately resolved; and,*

1.7.4 *Documenting boundary crossings or violations and any corrective actions taken in the patient health care record.*



Only a licensee can determine whether a boundary has irreversibly been crossed; a key consideration is whether a licensee can continue to provide care that is objective, respectful, and free from bias or personal influence.

Q: How does a licensee end the therapeutic relationship when a Professional Boundary has been crossed?

The specific steps to ending a therapeutic relationship are covered in [Professional Standard: Integrated Person-Centred Care](#), Principle 2.3 which states licensees must:

2.3 Terminate a therapeutic relationship by:

2.3.1 Providing written notification to the patient of the decision;

2.3.2 Documenting reasons for termination in the patient health care record, including steps taken to resolve the situation;

2.3.3 Informing the patient that they are entitled to a copy of their health care records, and the process for obtaining a copy;

2.3.4 Ensuring the timely transfer of a copy of the patient's health care records, if requested by the patient;

2.3.5 Providing a reasonable time frame for the patient to find another health practitioner, and arrange interim care if required; and,

2.3.6 Supporting the patient in finding another health care practitioner where care can be transferred, unless the therapeutic relationship was terminated due to sexual conduct, harassment, discrimination, or other conduct by the patient that placed the licensee at risk of harm.

Q: Can a licensee treat friends and family?

It is not prohibited to treat friends and family; however, when possible, it is required that licensees avoid providing care to family members or others with whom a dual relationship would exist.

Professional Standard: Professional Boundaries and Prevention of Sexual Misconduct, Principle 3.2 states licensees must:

3.2 Avoid, when possible, from providing care to family members or others where a dual relationship exists.



However, should a licensee choose to provide care to a family member or to others with whom a dual relationship would exist, the licensee must abide by the requirements outlined in Principle 3.3 of the Professional Standard, which states that licensees must:

3.3 When it is necessary to provide care in a dual relationship:

3.3.1 assess for actual or perceived conflicts of interest in accordance with Principle 2;

3.3.1.1 maintain thorough clinical records in accordance with all applicable standards and legislation, including documentation of the nature of the dual relationship;

3.3.2 clearly communicate when they are acting in a professional capacity, distinguishing this from any personal relationship;

3.3.3 offer referral options to another qualified health care practitioner when appropriate; and,

3.3.4 maintain professional boundaries when acting in a professional capacity.

Q: Can a licensee date a former patient?

Licensees are responsible to use sound judgement and thoughtfully consider the factors outlined in Professional Standard: Professional Boundaries and Prevention of Sexual Misconduct, Principle 4.6 to determine whether pursuing a relationship with a former patient is appropriate.

Principle 4.6 states that licensees must:

4.6 Not engage in a sexual relationship with a former patient, unless the licensee ensures that residual power imbalance from any therapeutic relationship no longer exists. Factors impacting the appropriateness of a possible relationship include:

4.6.1 the amount of time that has passed since the therapeutic relationship ended;

4.6.2 any particular maturity or vulnerability of the former patient;

4.6.3 the capacity of the former patient;

4.6.4 the nature, intensity, and duration of the care that was provided; and

4.6.5 whether the former patient is likely to require the licensee's care again.