Professional Boundaries for Caregivers

Professional boundaries are guidelines for caregivers at work. Staying within those boundaries will result in a better outcome for you and those you care for. Listed below are some examples of professional boundaries and how to stay “in bounds.”

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<th>Type of Boundary</th>
<th>Staying In-bounds</th>
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<td><strong>Sharing Personal Information:</strong></td>
<td>• Use caution when talking to a patient about your personal life&lt;br&gt;• Do not share information because you need to talk, or to help you feel better&lt;br&gt;• Only share personal information if you think it might help the patient, such as a teaching example or encouragement</td>
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<td><strong>Emotional Reactions:</strong></td>
<td>• Focus on the needs of those in your care, rather than personalities&lt;br&gt;• Remember that a patient’s behavior may be caused by illness&lt;br&gt;• Practice treating each patient with the same quality of care and attention, regardless of your emotional reaction to the patient</td>
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<td><strong>Nicknames/Endearments:</strong></td>
<td>• Avoid using terms like honey and sweetie&lt;br&gt;• Ask your patient how they would like to be addressed. Some may allow you to use their first name. Others might prefer a more formal approach: Mr., Mrs., Ms, or Miss&lt;br&gt;• Remember: The way you address a patient indicates your level of professionalism</td>
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<td><strong>Touch:</strong></td>
<td>• Use touch only when it will serve a good purpose for the patients&lt;br&gt;• Ask your patients if they are comfortable with you touching their arm&lt;br&gt;• Be aware that a patient may react differently to touch than you intend&lt;br&gt;• When using touch, be sure it is serving the patient’s needs and not your own</td>
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<td><strong>Tone of Voice:</strong></td>
<td>• Be aware that the tone and volume of your voice is a reflection of your emotions&lt;br&gt;• Adjust your voice to convey comfort and caring&lt;br&gt;• The sound of your voice can be a powerful tool in caring for a patient</td>
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| **Gifts/favors:** Giving or receiving gifts, or doing special favors, can blur the line between a personal relationship and a professional one. Accepting a gift from a patient might be taken as fraud or theft by another person or family member. | • Follow your facility’s policy on gifts  
• Practice saying no graciously to a resident who offers a gift that is outside your facility’s boundaries  
• To protect yourself, report offers of unusual or large gifts to your supervisor |
| --- | --- |
| **Clothing:** Clothes help to define the boundaries of your role as a caregiver. Clothes send messages about how you feel about yourself and your role. Clothing choices can support your professional caregiving role or undermine it. | • Think about what message you are communicating with your choice of clothing.  
• Outside of work you may dress to look more attractive.  
• At work, your choice of clothing should reflect that you are a professional caregiver and sincere about your job. Your organization may provide guidelines about appropriate clothing choices. |
| **Scheduled Time:** A caregiver relationship is different than a personal relationship. Personal relationships involve two-way helping. A friend or family member is often expected to be available when needed. But a paid helper is scheduled for particular times. | • Be aware that spending unscheduled time with a patient may indicate that boundaries are getting blurred.  
• If you spend lots of personal time thinking about a particular patient, you may be crossing professional boundaries  
• If you recognize any of these warning signs, talk it over with your supervisor or other trusted professional |
| **Seeing Behavior as Symptomatic:** Sometimes caregivers react emotionally to the actions of a patient and forget that those actions are caused by a disorder or disease (symptomatic). Personal emotional responses can cause a caregiver to lose sight of her role or miss important information from a patient. In a worst case, it can lead to abuse or neglect of a patient. | • Focus on the fact that the behavior of a patient may be directly related to a disease or disorder  
• Take a moment to collect yourself when you realize you are about to respond emotionally or reflexively to an action  
• Note that the patient may think their action is the best way to solve a problem or fill a need. Ask yourself if there is a way to problem solve and help the patient communicate or react differently. |
| **Romantic or Sexual Relationships:** It is never permissible for a professional caregiver to have a romantic or sexual relationship with a patient. In some situations, sexual contact with a patient may be a crime. | • While it may be normal to be attracted to someone in your care, know that it is never appropriate to act on that attraction  
• Do not tell sexually oriented jokes or stories. It may send the wrong message to your patient  
• Discourage flirting or suggestive behavior by your patient  
• If you feel that you are becoming attracted to someone in your care, seek help from your supervisor or other trusted professional right away |
| **Secrets:** Secrets between you and a patient are different than patient confidentiality. Confidential information is shared with a few others members of a team providing care to a resident. Personal secrets compromise role boundaries. | • Do not keep personal or health-related secrets with a patient  
• Be aware that keeping personal or professional secrets indicate that you may have crossed a professional boundary |