Professional Boundaries for Caregivers

Type of Boundary Crossing Sharing Personal Information: It may be tempting to talk to your client about your personal life or problems. Doing so may cause the client to see you as a friend instead of seeing you as a health care professional. As a result, the client may take on your worries as well as their own. Not Seeing Behavior as Symptomatic: Sometimes caregivers react emotionally to the actions of a client and forget.

Staying In-bounds

- Use caution when talking to a client about your personal life
- Do not share information because you need to talk, or to help you feel better
- Remember that your relationship with your client must be therapeutic, not social

Not Seeing Behavior as
Symptomatic: Sometimes
caregivers react emotionally to
the actions of a client 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 client. In a
worst case, it can lead to abuse
or neglect of a client.

- Be aware that a client's behavior is the result of a disease or disorder
- Know the client's care plan!
- If you are about to respond emotionally or reflexively to the negative behavior of a client, step back and re-approach the client later
- Note that the client 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 client communicate or react differently

Nicknames/Endearments:

Calling a client 'sweetie' or 'honey' may be comforting to that client, or it might suggest a more personal interest than you intend. It might also point out that you favor one client over another. Some clients may find the use of nicknames or endearments offensive.

- Avoid using terms like honey and sweetie
- Ask your client 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
- Remember that the way you address a client indicates your level of professionalism

Touch: Touch is a powerful tool. It can be healing and comforting or it can be confusing, hurtful, or simply unwelcome. Touch should be used sparingly and thoughtfully.

- Use touch only when it will serve a good purpose for the client
- Ask your client if he/she is comfortable with your touch
- Be aware that a client may react differently to touch than you intend
- When using touch, be sure it is serving the client's needs and not your own

Unprofessional Demeanor:

Demeanor includes appearance, tone and volume of voice, speech patterns, body language, etc. Your professional demeanor affects how others perceive you. Personal and professional demeanor may be different.

- Clients may be frightened or confused by loud voices or fast talk
- Good personal hygiene is a top priority due to close proximity to clients
- Professional attire sends the message that you are serious about your job
- Off-color jokes, racial slurs, profanity are never appropriate
- Body language and facial expressions speak volumes to clients

Gifts/Tips/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 client 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
- It's ok to tell clients that you are not allowed to accept gifts, tips
- To protect yourself, report offers of unusual or large gifts to your supervisor

Over-involvement: Signs may include spending inappropriate amounts of time with a particular client, visiting the client when off duty, trading assignments to be with the client, thinking that you are the only caregiver who can meet the client's needs. Under-involvement is the opposite of over-involvement and may include disinterest and neglect.

- Focus on the needs of those in your care, rather than personalities
- Don't confuse the needs of the client with your own needs
- Maintain a helpful relationship, treating each client with the same quality of care and attention, regardless of your emotional reaction to the client
- Ask yourself: Are you becoming overly involved with the client's personal life?
 If so, discuss your feelings with your supervisor

Relationships: A caregiver is never permitted to have a romantic or sexual relationship with a client. In most cases, sexual contact with a client is a crime in Wisconsin.

- 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 client
- Discourage flirting or suggestive behavior by your client
- 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 client are different than client confidentiality.
Confidential information is shared with a few others members of a team providing care to a resident. Personal secrets compromise role boundaries and can result in abuse or neglect of a client.

- Do not keep personal or health-related secrets with a client
- Remember that your role is to accurately report any changes in your client's condition