

Boundaries

And

Protecting Yourself







Introduction



All staff, volunteers, and placement students carrying out their duties within Eden Valley Hospice and Jigsaw, Cumbria's Children's Hospice, have a responsibility to provide safe, effective and caring services to patients, families and clients.

A friendly rapport is important to put people at their ease; however it is important that appropriate boundaries are established and maintained within a professional relationship.

Working relationships should not be misread or confused with friendship or other personal relationships. Policies and procedures and clear job/role descriptions set out the boundaries expected from all staff and volunteers when carrying out their duties. This also applies to working boundaries between colleagues.

This is to protect our patients and clients, as well as staff and volunteers. Throughout this booklet are real examples of when a boundary has been crossed or stretched. These examples were shared by volunteers during an awareness session into what is a boundary and some of the more difficult areas.

Boundaries Health care Professionals What is a Boundary? **Patient or client** A perimeter **Family** Knowing the limits of your role Staff/Volunteer **Friends A Dividing Line Beliefs** Knowing what is ok and what is not. Remember.... there may be other **Community** influencing factors (which you may be unaware of) which could create **Other** additional boundaries for the patient and/or client.

Difficult to define

Knowing the distinction between right/wrong, good/bad, and okay/not okay. Appropriate/inappropriate... may not always be crystal clear.

Eden Valley Hospice Responsibility

We have an ethical responsibility to help staff and volunteers with the difficult elements of their roles and to ensure the protection and safety of all who use, work in or access the services provided.

Respect for Colleagues

Respect for other staff and volunteers helps to ensure teams work together consistently by supporting each other, sharing the workload and not contradicting each other.

Why are Boundaries so important for staff and volunteers?

- Protection: Making clear what types of behaviour are/are not acceptable
- Confidence in the role and knowing how to react in certain situations
- Forming of trusting working relationships
- Professionalism and consistency
- Role containment
- Duty of care
- Avoids awkward or compromising situations
- You may not be aware of the full situation relating to a patient, client or individual

Example:

'A patient became personally close to a volunteer. The patient asked the volunteer where they lived and then looked up their home telephone number. The patient then started to telephone the volunteer at home.

Outcome: This made the volunteer feel uncomfortable as their personal and private space had been intruded.

Possible Solution: Be vague about where you live, especially if you have an unusual surname and are listed in the telephone directory.

Boundaries around the role

- Define the edges and limitations of the role
- What's expected from the role being carried out and what's not
- Understand and identify boundary issues which may arise
- Not to impart your personal beliefs onto others
- Not to be judgemental
- Not to get too close
- Not to give false expectations
- To pass on relevant information
- Not asking intrusive questions. For example:
 - So what are you in here for?'
 - o What's wrong with you?
 - o How did you get that scar?
 - o How much money do you have?
 - o How much do you weigh?
 - o How old are you?
 - o Are you gay?

Boundaries around relationships

The relationship between staff/volunteer and patient or client is one of trust: Be aware of

- When 'helpful' becomes personal
- When 'friendly' become a friendship
- What 'appropriate' and 'inappropriate' mean in a particular role/setting
- The definition of intimate (getting too close)

If you feel a boundary has been crossed: For example;

- Regarding the specific behaviour of colleagues
- Staff/volunteers who you feel are being unprofessional or who are overstepping their boundaries
- Staff/volunteers you feel are being discriminatory

Please discuss confidentially with your line manager.

Socialising

Do not socialise with patients/clients outside of your hospice duties

This can blur private/professional roles and also make maintaining confidentiality difficult. It can also carry the risk of allegations being made or the risk of your good faith being exploited.

Confidential Information

Information regarded as personal, which is not meant for public or general knowledge.

- If you meet a patient/client in the street you may break their confidence by acknowledging them let that person make the decision to recognise you or not
- Never become involved in conversations with patients/clients about other patients/clients

Personal Information

- Don't give out personal information about staff, volunteers, patients or clients.
- Be very careful about information you disclose about yourself: for example do not give out your address, phone numbers, health information, social details etc. so that you do not expose or put yourself at risk
- If you need to telephone a patient/client from personal telephone dial 141 first to withhold the number

Example:

When taking a patient home, a volunteer driver was asked to go to a DIY store to collect wallpaper and paint. At the checkout – the patient did not have any money with them. Rather than put everything back – the volunteer driver paid for the goods with their credit card, and then the patient reimbursed the driver with the money.

Outcome:

The volunteer felt they had been put into an awkward and uncomfortable position **Solution**:

Clear guidelines for both patient and volunteer

Safeguarding

It is essential that where abuse/neglect or serious concerns about the welfare of a vulnerable adult or child is suspected or notified that this is reported to the relevant person in charge — for example, the Clinical Sister. Staff and Volunteers should not let the following prevent them from raising this:

- Fear of reporting the concern
- Fear of the consequences of reporting
- Fear of causing trouble
- Fear of 'rocking the boat'
- Fear of concerns being unfounded

Unacceptable Practice

Unacceptable practices are those which put the professional/personal relationship in danger of crossing the professional 'boundary'. The following list is not exhaustive — if in doubt please talk to your line manager. Examples of unacceptable practice are:

- Sexual Acts
- Requests for/suggestions of sexual acts
- Physical contact which could be construed as sexually suggestive, sexual innuendo and/or insinuation
- Physical abuse
- Mental Abuse
- Emotional abuse
- Financial abuse

Example

A volunteer got to know a patient solely through their volunteer duties at the Hospice. The volunteer decided to visit the patient at home (without the knowledge of the nursing staff)

Outcome:

The volunteer had unwittingly put them self in danger, as there was a member of the household present who had been violent and abusive to health care professionals visiting the home on previous occasions

Solution:

Staff and volunteers should stay within the boundaries of their role to maintain a professional relationship

Subtle inappropriate behaviour

- Inappropriate dress
- Inappropriate use of body or verbal language
- Asking inappropriate questions about lifestyle

Treatment and other Forms of Care

It is not acceptable for a member of staff or volunteer to carry out treatment or give other care when

- It is not part of the patients care plan
- The staff member/volunteer is not qualified to provide this element of care or it has not been discussed with the team

Examples are

- Taking photographs of patients without their permission
- Alternative therapies
- Day Hospice volunteers and drivers visiting patients (known through hospice contact) in their own homes
- Drivers running personal errands for patients

Touching

In a hospice setting, appropriate forms of touching can be beneficial. However, please be aware that not all staff/volunteers/patients etc want to be touched, and for some this will be very inappropriate. It is important that if you feel a hug or the touching of an arm/hand is appropriate that you have the permission of the other party. This permission can be given through verbal and non-verbal communication. Take into account the other person's body language and their own need for personal space.

Lending/Borrowing:

• Do not lend or borrow from patients/clients — especially money.

Alcohol/Drugs

• Do not work under the influence of alcohol or non-prescribed drugs: judgement, emotions and ability to cope with challenging situations will be affected. Also, the organisation's insurance may be invalidated if staff/volunteers are intoxicated.

Illegal Behaviour

• Do not condone or participate in behaviour which is illegal, unwise from a safety perspective or which is discriminatory to others

Example:

A patient asked a volunteer driver to stop at the chemist on the way home to collect a prescription.

Outcome:

The volunteer driver parked opposite the chemist. The patient then ran across the road, without looking. The volunteer driver was shaken as the patient narrowly missed being hit by an oncoming vehicle'.

Solution:

Stay within the boundaries of the role.

Discrimination

All acts of discrimination are taken very seriously by Eden Valley Hospice and Jigsaw, Cumbria's Children's Hospice. Discrimination can take the form of biased comments (which can be written or verbal) in relation to culture or race, gender, sexual orientation or preference, age, physical characteristics or any other personal aspects.

Conclusion

Boundaries are there for the safety, well being and protection of all. They provide a definition and clarity of roles, and also the responsibility and limitations within that role.

Be aware of and know when to refer to someone else. For example — are the skills of someone from the Counselling and Bereavement Support or Chaplaincy Team required? Do you need to discuss this with the nursing staff?

Remember - sometimes it may <u>seem</u> ok to 'go the extra mile' for someone — but please think carefully as to whether or not boundaries are being crossed. Be careful about setting a precedent. What was once a 'one-off' may become an expectation.

If you are unsure about anything — please ask your line manager.

Useful Contact Numbers

Senior Management Team

Chief Executive	Janet Ferguson	01228 817610
Head of Care	Gillian Ward	01228 817611
Head of Support Services	Laura Cadman	01228 817608
Head of Marketing & Income Generation	Chris Bray	01228 817617
Head of Finance (until 20/6/14)	Paul Cookson	01228 817603
Head of Finance (from 20/6/14)	John Hunston	01228 817603
Management Team		
Support Services Manager	Leona Cameron	01228 817608
Hospitality Manager	Doug McGarr	01228 817605
Clinical Sister Day Hospice/Ward	Heather King	01228 817623/7
Clinical Sister Jigsaw	Janet McGreevy	01228 817603
Fundraising Manager Legacies	Karen Durden	01228 817607
HR Manager	Rebecca Miller	01228 817619
Chaplain	Pauline Steenbergen	01228 817609
Acting Consultant	Dr Teresa Storr	01228 817612
Other Contacts		
Retail Manager	Ann Hall	01228 817615
Lottery Manager	Alison Duncan	01228 817614
Fundraising Manager Community	Katrina Sander	01228 817618
Counsellor	Tori Barker-Ross	01228 817646
Social worker	Esna Barnard	01228 817649
Social Worker	Becky Chaddock	01228 817649
Social Worker	Wendy Ashton	01228 817655



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