What Are Professional Boundaries?

The relationship between nurses and their patients is a therapeutic, caring relationship. Its sole focus must be to meet the healthcare needs of the patient. In doing so, there are clear boundaries that exist and determine behavior that is unacceptable. According to the National Council of State Boards of Nursing or NCSBN (2014), professional boundaries are essential in the nursing profession. In their brochure, A Nurse’s Guide to Professional Boundaries, they provide the following information on this topic:

• A therapeutic relationship is one that allows nurses to apply their professional knowledge, skills, abilities and experiences towards meeting the health needs of the patient. This relationship is dynamic, goal-oriented and patient-centered because it is designed to meet the needs of the patient. Regardless of the context or length of interaction, the therapeutic nurse–patient relationship protects the patient’s dignity, autonomy and privacy and allows for the development of trust and respect (ANA, n.d., p. 4).

• Professional boundaries are the spaces between the nurse’s power and the patient’s vulnerability. The power of the nurse comes from the nurse’s professional position and access to sensitive personal information. The difference in personal information the nurse knows about the patient versus personal information the patient knows about the nurse creates an imbalance in the nurse–patient relationship. Nurses should make every effort to respect the power imbalance and ensure a patient-centered relationship (ANA, n.d., p. 4).

• Boundary crossings are brief excursions across professional lines of behavior that may be inadvertent, thoughtless or even purposeful, while attempting to meet a special therapeutic need of the patient. Boundary crossings can result in a return to established boundaries, but should be evaluated by the nurse for potential adverse patient consequences and implications. Repeated boundary crossings should be avoided. (ANA, n.d., p. 4).

• Boundary violations can result when there is confusion between the needs of the nurse and those of the patient. Such violations are characterized by excessive personal disclosure by the nurse, secrecy or even a reversal of roles. Boundary violations can cause distress for the patient, which may not be recognized or felt by the patient until harmful consequences occur. (ANA, n.d., p. 4).

• A nurse’s use of social media is another way that nurses can unintentionally blur the lines between their professional and personal lives. Making a comment via social media, even if done on a nurse’s own time and in their own home, regarding an incident or person in the scope of their employment, may be a breach of patient confidentiality or privacy, as well as a boundary violation (ANA, n.d., p. 4).

• Professional sexual misconduct is an extreme form of boundary violation and includes any behavior that is seductive, sexually demeaning, harassing or reasonably interpreted as sexual by the patient. Professional sexual misconduct is an extremely serious, and criminal, violation. (ANA, n.d., p. 5).

A Continuum of Professional Behavior

Every nurse-patient relationship can be plotted on the continuum of professional behavior illustrated above.
The NCSBN (2014) also provides the list below to help nurses identify a potential boundary violation and states, “Some behavioral indicators can alert nurses to potential boundary issues for which there may be reasonable explanations, however, nurses who display one or more of the following behaviors should examine their patient relationships for possible boundary crossings or violations. Signs of inappropriate behavior can be subtle at first, but early warning signs that should raise a “red flag” can include:

- Discussing intimate or personal issues with a patient
- Engaging in behaviors that could reasonably be interpreted as flirting
- Keeping secrets with a patient or for a patient
- Believing that you are the only one who truly understands or can help the patient
- Spending more time than is necessary with a particular patient
- Speaking poorly about colleagues or your employment setting with the patient and/or family
- Showing favoritism
- Meeting a patient in settings besides those used to provide direct patient care or when you are not at work

Patients can also demonstrate signs of over involvement by asking questions about a particular nurse, or seeking personal information. If this occurs, the nurse should request assistance from a trusted colleague or a supervisor” (p. 9).

Other behaviors that are warning signs of unhealthy boundaries include speaking poorly of co-workers or the hospital to patients, telling a patient about your own professional needs or inabilities, talking to patients and/or their families about things that are out of your scope of practice, and failing to set limits with a patient. Professional boundaries are being violated when a nurse does any of these things and when he or she alters his or her caregiver role and becomes the person in need of care or sympathy. A nurse’s sole focus must be on the care and treatment needs of the patient in order to have an effective nurse-patient relationship.

Professional Boundaries and Social Media

Many nurses may be aware of their professional boundaries in interactions with patients while on duty, but they may not consider these boundaries when not at work. According to the American Nurses Association or ANA (n.d.), Social networks and the Internet provide unparalleled opportunities for rapid knowledge exchange and dissemination among many people, but this exchange does not come without risk. Nurses and nursing students have an obligation to understand the nature, benefits, and consequences of participating in social networking of all types. Online content and behavior has the potential to enhance or undermine not only the individual nurse’s career, but also the nursing profession. In order to provide guidance on this, the ANA (n.d.) has established principles for social networking and some tips to avoid social media problems. They are:

**ANA’s Principles for Social Networking**

1. Nurses must not transmit or place online individually identifiable patient information.
2. Nurses must observe ethically prescribed professional patient-nurse boundaries.
3. Nurses should understand that patients, colleagues, organizations, and employers may view postings.
4. Nurses should take advantage of privacy settings and seek to separate personal and professional information online.
5. Nurses should bring content that could harm a patient’s privacy, rights, or welfare to the attention of appropriate authorities.
6. Nurses should participate in developing organizational policies governing online conduct.

**ANA’s Social Media Tips**

1. Remember that standards of professionalism are the same online as in any other circumstance.
2. Do not share or post information or photos gained through the nurse-patient relationship.
3. Maintain professional boundaries in the use of electronic media. Online contact with patients blurs this boundary.
4. Do not make disparaging remarks about patients, employers, or co-workers, even if they are not identified.
5. Do not take photos or videos of patients on personal devices, including cell phones.
6. Promptly report a breach of confidentiality or privacy.

It’s crucial that nurses keep all patient-related information to themselves. Patients deserve confidentiality and to be cared for professionally and ethically when they are at their most vulnerable. Nurses need to practice in a manner consistent with professional standards and within professional boundaries. Personal relationships with patients are not appropriate, and nurses should always act in the best interest of their patients with their care and treatment in mind.

**References**

