



## Statement on Professional Boundary Setting

### Introduction

The JCCP and CPSA Code of Practice requires all Practitioners to ensure that they keep their clients emotionally and psychologically safe. Safe professional practice is underpinned by the principle of setting explicit boundaries which may be defined as agreed limits or rules which help to protect and safeguard both the client and the practitioner. They define a formal structure, purpose and standards for the administration of aesthetics procedures.

Practitioners are responsible for setting up, monitoring and maintaining boundaries as part of their professional practice. Boundary setting requires practitioners to create a therapeutic relationship where the client feels safe and comfortable and free from both conscious and unconscious intimidation or exploitation.

Boundaries should always serve the patient/client's interests.

### Boundaries

There are a range of instances when boundaries should be set to define the parameters of your interaction with your clients/patients. Boundaries can include practical details such as fees and appointment times, or what contact you might have between sessions. These may be negotiated at the outset as part of your contract with the client/patient.

Other boundaries may not be explicitly discussed but are essential as part of the practitioner's code of professional/ethical practice – such as refraining from any form of conversation or behaviour that might be interpreted as being 'sexual' in nature (including not having **any form** of sexual relationship with a client/patient).

Other boundaries are explored in the JCCP/CPSA Code of Practice and relate to the Practitioner's scope of knowledge and the need to always conduct as assessment or treatment session in a professional and non-intrusive manner. It is always advisable to ask clients/patients about their preferences for social distancing and ensure that the client/patient has been fully briefed and consents to any form of 'physical touch' or close proximity. Practitioners should undertake to ensure that their clients/patients 'feel comfortable' with their proposed treatment plan.

Boundaries that all practitioners should maintain include:

- providing consistency, predictability and security during all procedural encounters, ensuring sessions take place in a calm environment with no distractions and where confidentiality can be ensured

- limiting contact between the practitioner and the client/patient to pre-arranged appointments, as far as possible
- appropriately and ethically managing any emotional and/or physical attraction between you and offering to provide a chaperone if requested
- remaining impartial rather than judging your clients or imposing on their values
- not giving, receiving or exchanging any gifts during the treatment sessions
- managing the end of the treatment contract in an appropriate way and ensuring formal boundaries are maintained during any breaks in treatment and after treatment has ended.

## Good Practice for Boundary Setting

Practitioners should:

- make clear, professional arrangements regarding fees and appointments
- readily provide information about your training and experience
- focus on your client/patient and their concerns
- demonstrate how feelings can be safely discussed and understood rather than acted upon
- support and encourage client self-confidence and autonomy
- treat clients with respect, care and dignity
- engaging in professional supervision sessions that facilitate time to discuss professional boundary issues
- maintain boundaries of confidentiality as set out in the JCCP/CPSA Code of Practice. These should be clearly explained at the start of the treatment contract and discussed with each client/patient.

## Crossing Boundaries

If a Practitioner deliberately crosses a boundary, this should be based on:

- their professional judgement about whether it is appropriate in the context of an individual client/patient's treatment plan
- confidence that you could justify your decision to professional colleagues/regulators, if challenged
- anticipating the likely effect that the boundary crossing, and your intention to do it, may have on your client/patient

## Examples of Boundary Crossing

- Practitioners seeking praise, reassurance or constantly wanting clients/patients to show gratitude for their work
- Practitioners gradually changing from their usual practice or drifting away from the contract originally agreed with their patient/client.
- Practitioners focusing on their own needs rather than their patient/client – for example talking about themselves or unexpectedly ending sessions early.
- Practitioners sharing their problems and expectations with their patient/client or encouraging them 'empathise' with you.
- Suggesting you are the only practitioner or person who can meet their patient/client's needs.
- Offering additional sessions, not agreed at the outset, without there being a clinical justification.

- Practitioners behaving in an insincere or flattering manner towards their patient/client or appearing to judge or blame them.
- 'Flirting with patients/clients - no practitioner should ever make sexual advances towards their patient/client.
- Practitioners who 'take sides with their patient/client, no matter what the situation, or who argue with their patient/client.
- Lending or borrowing money from their Practitioner.
- Practitioners working with their patient/client despite any issues which seem beyond their competence or experience.
- Practitioners who infer/suggest one of their patients/clients might have a special relationship with them, which may seem exciting or flattering but implies something secretive or unprofessional.
- Making patients/clients feel uneasy, tense or unsafe.
- Often allowing sessions to overrun the agreed time.

## Conclusion

These guidelines sit alongside the JCCP's Code of Conduct 2023. They are designed to assist you to manage your practice in relation to safeguarding and compliance to the standards set out by any organisation that you are working for or are regulated by. These guidelines are designed to inform and enable adherence to standards of good practice within a sound ethical framework. It is important that you keep up to date with the statutory regulations pertaining to safeguarding in your part of the UK as there are different interpretations and processes across the individual home nations.

The JCCP recognises that sometimes practitioners are concerned or confused about boundaries being broken. Practitioners can sometimes cross a boundary without it causing a major problem, but this should not be ignored. Practitioners should always record their concerns and ensure that a confidential discussion takes place with their line manager and supervisor. Sometimes breaking boundaries can be a fitness to practice and/or legal matter as well as being grounds for complaint. For example, a practitioner making sexual advances to a client may be a criminal offence and a reportable offence to their professional regulator and to the JCCP in their capacity as a Professional Standards Authority Accredited Register.

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