

21 July 2017

Dear practitioner,

Professional boundaries practice standard consultation outcome

The Dental Council (the 'Council') has consulted with its stakeholders on a draft *Professional boundaries practice standard* during the May to June 2017 period.

A total of 14 submissions was received and the Council thanks all the stakeholders that engaged in the consultation process for generously sharing their concerns, expertise, and for their time commitment.

There was overall agreement on the draft practice standard, with only a few areas where concerns were raised or further clarification requested.

The main areas of concern related to:

- The guidance of standard 1 which proposed "Having a chairside assistant or a third person (support person or chaperone) present during patient contact time, wherever possible".
- A misunderstanding that the practice standard prevented practitioners from treating family members or those related closely to them.
- A misunderstanding that it was considered a breach of sexual boundaries if practitioners treated someone with whom they had a pre-existing sexual relationship, for example, their spouse or partner.

As a result of submission feedback, some minor changes have been made to the practice standard. The Council's position on these concerns raised, and the key changes made to the practice standard following consideration of the feedback are as follows:

- **Having a third person available during treatment**

The guidance of standard 1 was amended to provide clarity that having a third person present during patient contact time is desirable *when this is feasible* (rather than "wherever possible"). The Council understands that it is not always feasible to have a third person present during patient contact time. However, the practice standard guidance acknowledges certain situations where this is considered important, for example vulnerable patients; patients who have received sedation; and patients with a history of boundary crossings or violations. Practitioners should use their judgement how to best handle individual scenarios.

- [Treating your own partners, family or friends](#)

The practice standard does not prohibit practitioners from treating family members or those close to them. Standard 2 requires practitioners to ensure that the integrity of the professional relationship is not compromised when they do treat someone with whom they have a pre-existing relationship, and guidance is given to enable practitioners to meet the standard.

The standard and associated guidance require the practitioner to acknowledge the existing relationship and the power imbalance that exists within the practitioner-patient relationship, and to protect the integrity of that relationship. The objective is to protect “your ability to be objective; the patient’s ability to give full, free and informed consent; and patient autonomy”. If this cannot be achieved, then the practitioner needs to acknowledge that, and refer the patient.

- [Breach of sexual boundaries](#)

Standard 4 and its guidance was amended to provide clarity for practitioners regarding treating someone with whom they have a pre-existing sexual relationship, for example their spouse or partner. This is not considered a breach of sexual boundaries. In these circumstances practitioners are reminded about their obligations with regard to pre-existing relationships, similar to those described above.

Decision

It is anticipated that the changes made to the practice standard will address submitters concerns, therefore the Council finalised the Professional boundaries practice standard at its 3 July 2017 meeting. The final version is attached.

The updated Professional boundaries practice standard will come into effect on **21 August 2017**, replacing the current *Sexual boundaries* practice standard. Please familiarise yourself with the updated document before the implementation date.

If you have any further comments or questions, please do not hesitate to email us at inquiries@dcnz.org.nz.

Yours sincerely



Mark Rodgers

Acting Chief Executive