

Navigating Boundaries in VHA Peer Support Services

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# Learning Objectives

- Discuss three components of boundaries in peer support relationships in the Veterans Health Administration (VHA).
- Identify differences between boundary crossings and boundary violations.
- Discuss a decision-making framework for navigating boundary issues in peer support relationships in VHA.

# What is meant by boundaries?

- Boundaries are principles and rules that guide VHA peer specialists' relationships with others:
  - Peer specialist & peer specialist
  - Peer specialist & group member/individual Veteran receiving services
  - Peer specialist & Veteran's family member(s)
  - Peer specialist & VHA clinical staff
- Boundaries are influenced by where you are, who you are with, and the cultural backgrounds of yourself and others.

# Why are boundaries important?

- Demonstrates respect for others
- Promotes honesty
- Fosters trust between individuals
- Maintains safety of everyone involved
- Clarifies roles & expectations

## What do boundaries include?

Boundaries are involved in peer support relationships in the following areas:

- 1. Confidentiality
- 2. Language use
- 3. Actions

# Confidentiality Defined

Confidentiality involves keeping others' personal information private.\*\*

- Verbal: Health care professionals who are providing services to a Veteran should be the only individuals who know information about the Veteran's health status and personal information that the Veteran has disclosed to his/her treatment providers. As a peer specialist, you should never share private information about a Veteran with anyone who is not part of the Veteran's health care team unless the Veteran provides written authorization for you to share the information (ex. providing information to a family member and/or provider outside of VHA). This also means that you should not share information about the Veteran with colleagues who are not directly involved in providing the Veteran's health care services. In addition, you should not share information that you learn in health care team discussions unless the team knows and agrees in advance that the information should be shared outside of the team with others (ex. sharing the information with Veterans receiving services).
  - \*\*There are exceptions where you <u>must</u> share private information with other health care professionals and possibly also report to appropriate state agencies (ex. an individual's threat of suicide; threat of homicide; suspected abuse of children and/or elderly).\*\*
- Written: Any personal identifying information that you write about a Veteran needs to be kept in a secure place (ex. progress note in a Veteran's electronic medical record). As a peer specialist, you should inform the Veterans with whom you work that you will document information about your work together in progress notes in their medical records which they and their other treatment providers can access.

# Language Use Defined

- Language is the way we communicate and what we say to others.
- The words we choose are important because they can be used to promote respect, trust, and safety.
- Respectful language fosters positive relationships with others.
- Disrespectful language (i.e., racial slurs, sexist comments, swear words) can damage relationships and compromise individuals' sense of safety.

## Actions Defined and Examples

Actions are how we behave and what we do in our daily lives. The actions we choose to take are important because they can be used to promote respect, trust, and safety in professional relationships.

#### **DO Examples**

- Clarify your role in every setting where you work as a VHA peer specialist.
- Do seek out supervision.
- Refrain from any financial transaction with Veterans you are helping (Ex. Do not buy/sell cigarettes for Veterans.).

#### **DON'T Examples**

- Provide peer support services to any of your family members.
- Date or have sex with anyone for whom you are providing or formerly provided peer support services (no intimate personal relationship).
- Discuss a Veteran with your family, friends, other Veterans, or anyone else who is not directly involved with the Veteran's health care. \*\*If you are asked to provide information about a Veteran to the Veteran's family, first you must ensure the appropriate release of information forms have been signed.\*\*

## Related VHA Peer Support Staff Competencies

Here are expected knowledge and skills for VHA peer specialists that are related to interpersonal boundaries.

#### **Peer Support Practices Domain**

 Demonstrates capability in determining when and how much of one's personal recovery story to share and with whom to make the self-disclosure in order to be helpful and not triggering for a Veteran.

### Whole Health Approach to Services Domain

 Actively resists re-traumatization of others by being mindful of what the peer specialist shares about his/her personal experiences, working to create a safe environment, and collaborating with others in a honest and trustworthy manner.

#### Workplace Skills Domain

- Recognizes and adheres to rules of confidentiality.
- Maintains appropriate professional boundaries with Veterans, Veterans' families, and colleagues.
- Consults with a supervisor and/or another member of the interdisciplinary team regarding potential boundary issues and appropriate actions to take.

#### **Communication Domain**

 Recognizes when to ask questions or share personal experiences and when to listen.

## Boundary Crossing vs. Boundary Violation

## **Boundary Crossing**

- Often ambiguous
- Occurs whenever your actions deviate from your established role as a peer specialist in VHA
- Dependent on where you are, who you are with, and the cultural backgrounds of all involved parties
- Decision-making process can be complex

## **Boundary Violation**

- Often clear-cut
- Crossing which creates a reasonable risk of harm or exploitation of a person or people
- Boundary rules apply regardless of where you are, who you are with, or the cultural backgrounds of anyone involved
- Decision-making process can be difficult but is usually straightforward regarding what you should do

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## **Boundary Crossing & Violation Examples**

## **Boundary Crossing**

- Hugging
- Giving a Veteran for whom you are providing services your personal cell phone number and/or home address
- Self-disclosure about political affiliation, sexual orientation, and/or religious affiliation
- Accepting gifts from Veterans you are assisting

## **Boundary Violation**

- Sexual advances (i.e., flirting)
- Sexual contact
- Verbal and/or physical aggression
- Financial transactions (i.e., borrowing/lending money)

# Boundary Crossing Warning Signs

Here are some warning signs that a boundary crossing may have occurred:

- Peer specialist only feels appreciated at work.
- Peer specialist spends off-duty personal time with a Veteran for whom the peer specialist is providing peer support services.
- Peer specialist keeps secrets with a Veteran from other health care team members regarding information that could impact the Veteran's health care services and/or recovery progress.
- Peer specialist tends to report only negative or positive aspect's of a Veteran's behavior in progress notes and health care team discussions.
- Peer specialist appears defensive when someone questions the peer specialist's interaction or relationship with a Veteran.
- Peer specialist responds to requests for his/her services differently with different Veterans.

## **Decision-Making Framework**

When thinking through how to act in a situation, here are important questions to ask yourself:

- Are there any policies/rules/codes of conduct about the issue? What do they say? If rules exist, follow them.
  - ☐ VHA has several policies to guide staff behavior. Be sure to learn what the policies are at the site where you are working.
- What is my supervisor's advice? Consult your supervisor whenever possible.
- What do my gut instincts tell me to do?

# **Decision Making Tree**

Is this behavior consistent with the Veteran's plan of care?

If no, abstain from the behavior.

If yes, proceed to next step.

Is this behavior consistent with my role as a peer specialist?

If no, abstain from the behavior.

If yes, proceed to next step.

Is this a behavior that I want other people to know about?

If no, abstain from the behavior.

If yes, proceed to next step.

Proceed with the behavior and document the actions.

# Boundaries Vignettes for Discussion

Please refer to the handout entitled, "Navigating Boundaries in VHA Peer Support Services Vignettes," which accompanies this PowerPoint. Read each vignette and discuss responses to each question.



## Golden Rule about Ethical Decision-Making

## When in doubt...CONSULT!:

- Talk with your supervisor(s).
- Talk with the director of the program (if different than your supervisor) where you are working as a peer specialist.



## References

Reamer, F. G. (2001). *Tangled relationships: Managing boundary issues in the human services*. New York: Columbia University Press.

Vaughn, C. (2013, August 22). *Ethics, boundaries, and confidentiality within peer support services*. Plenary presented at the 2013 VHA Peer Support: Bridging the Gap—Defining Skills for the Future Conference in Minneapolis, Minnesota.

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