

Guideline G-001
Patient Relations Committee
Approved by Council: February 18, 1995
Amended: October 14, 2000
Re-affirmed by Council: February 19, 2009

Note to Readers: In the event of any inconsistency between this document and the legislation that affects chiropractic practice, the legislation governs.

Intent

To advise members of CCO's commitment to the philosophy of zero tolerance of sexual abuse of patients, as defined below. CCO is developing supportive policies, procedures, practices and educational programs to accomplish this goal.

Objectives

Chiropractors should be able to:

- describe the philosophy and principles of zero tolerance; and
- define sexual abuse, including abusive verbal and physical behaviours.

Philosophy of Zero Tolerance

No act of sexual abuse, as defined by the *Regulated Health Professions Act (RHPA)*, is acceptable. Sexual abuse must never be tolerated. According to section 85.1 (1) of the *Regulated Health Professions (Code)*, members of regulated health professions must report a member of their own or a different regulated profession if they believe that person has sexually abused a patient.

The concept of zero tolerance recognizes the seriousness and extent of injury sexual abuse causes the victim and others related to the victim. Zero tolerance does not preclude professional behaviours, such as physical contact, that is helpful and, therefore, acceptable to the patient. A chiropractor must provide a satisfactory explanation of a procedure to a patient prior to conducting any examination or treatment procedure that could reasonably be misinterpreted by the patient as being sexually abusive.

Principles for Chiropractors

All registrants should:

- seek opportunities to learn about appropriate attitudes and behaviours so sexual abuse does not occur out of ignorance;

- encourage health care recipients to report allegations of sexual abuse to the appropriate health regulatory college;
- support sexual abuse victims by encouraging them to seek appropriate professional help;
- recognize that words can be as demeaning as actions to a sexual abuse victim;
- understand that behaviour that causes other discomfort of a sexual nature will not be tolerated; and
- understand that the above principles underlie all professional tasks undertaken by a chiropractor.

Guidelines for Talking with Patients

Remarks of a sexual nature are a common form of sexual abuse of patients. Always speak in words that patients can understand.

Words

Pay attention to the way you convey information and to the words you select when speaking to patients by:

- employing the correct vocabulary for body parts and procedures;
- being particularly sensitive to words that could cause misunderstandings; and
- knowing when to call an interpreter.

Dealing with Language or Conceptual Difficulties

2

Many patients may have language or conceptual difficulties. Realize that the use of charts and diagrams enhances the communication process. Because how chiropractors say something is as important as the choice of vocabulary, they need to:

- use tact and consideration when explaining procedures to patients to avoid causing anxiety;
- not talk about themselves or their problems to patients, this being considered unprofessional;

- be honest and straightforward, and demonstrate respect and concern for patients;
- legitimize patients' fear and embarrassment, which are natural emotions when submitting to chiropractic procedures;
- reassure patients by demonstrating respect and empathy;
- provide patients with an opportunity to ask questions;
- provide patients with answers within the scope of chiropractic practice;
- talk directly to patients when working with interpreters or members of their support networks; and
- verify understanding of the intended message by rephrasing the message and, if necessary, asking patients to repeat.

Benefits associated with these principles of communication include:

- confidence in the chiropractor as a professional;
- relaxed and cooperative patients who will make the chiropractor's role easier;
- patients who are unlikely to become angry or abusive;
- a greater understanding of patients' reactions to procedures; and
- informed patients who are able to make informed decisions.

Body Language

Body language, the non-verbal component of language, will convey as much or more to patients as words. Patients may distrust the message if body language contradicts what is being said. Always remember the importance of:

- maintaining appropriate eye contact;
- adopting an appropriate facial expression to convey concern and proficiency;
- being careful in your use of physical gestures; and
- respecting your patient's personal sense of space.

Careful use of body language can greatly enhance communication, leading to better understanding and trust between doctor and patient. Since the main goal of communication is mutual understanding, listening is just as important as speaking. You must learn to communicate with your entire being, to listen and carefully observe patients.

By learning to listen effectively, you can learn to modify your speech to match the needs of the patient. The benefits of listening and observing include enriched communication and patients who are dignified partners in their own care.

Principles of Communication Relating to Touching

- Obtain the patient's consent.
- Acknowledge that patients have the right to change their minds about consenting to procedures.
- Avoid causing unnecessary distress or embarrassment to the patient by inappropriate touching.
- Show respect by maintaining the patient's dignity.
- Respect, as much as possible, the patient's personal sense of space.
- Use firm and gentle pressure when touching the patient to give reassurance and produce a relaxed response.
- Avoid hesitant movements by being deliberate and efficient.
- Understand when to use gloves for reasons relating to quality assurance.
- 4 • In the case of touching sexual areas, understand that the use of gloves decreases intimacy that might be interpreted as sexual.

Consent to Touch

Chiropractors must recognize the patient controls consent and:

- the patient is entitled to know why, where and when he/she is to be touched;
- consent may be withdrawn at any time during a procedure;

- agreement, acquired verbally or non-verbally, is required before a patient may be touched;
- special situations must be identified and possible options anticipated; and
- patient concerns can never be ignored and should be dealt with first.

Privacy

- Make patients, who must necessarily be partially unclothed, as comfortable as possible.
- Give patients clear instructions about how to wear the gown.
- Allow patients independence, and enough time and privacy while disrobing.
- Touch only those areas needed to facilitate removal of clothing when providing assistance to disrobe, and preferably, if the patient is female, have a female assistant attend to the matter.
- Request the patient's permission for students or staff to observe.

Communication Skills Relating to Touch

To avoid perceptions of sexual abuse, make touching an acceptable encounter by:

- providing reassurance and explanations throughout the procedure;
- involving patients in some aspects of procedures, such as moving themselves in response to clear instructions;
- encouraging patients to identify affected areas or landmarks when possible; and
- constantly checking for the level of understanding and consent by the patient.

Procedures requiring touching of patients are open to misinterpretation. Ensuring that patients understand at all times what is being done and why will greatly reduce the risk of offense. Considerate touching will encourage the patient to relax and cooperate in ways that will save time and produce better results.