



# *Nova Scotia College of Chiropractors*

## *Guideline for Prevention of Sexual Abuse of Patients*

*Approved by  
the Board of  
the NSCC*

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4*

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

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### **INTENT**

To advise members of the NSCC's commitment to zero tolerance of sexual abuse of patients, as defined below. The Board of the NSCC has in place supportive standards of practice, policies, procedures, practices, and educational programs to accomplish this goal.

### **OBJECTIVES**

A member should be able to:

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

### **DESCRIPTION OF GUIDELINE**

#### **Principles for Members**

All members 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 member.

#### **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**

A member should pay attention to the way he/she conveys information and to the words he/she selects 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**

Many patients may have language or conceptual difficulties. A member shall be aware that the use of charts and diagrams enhances the communication process.

Because how a member says something is as important as the choice of vocabulary, he/she needs to:

- use tact and consideration when explaining procedures to patients to avoid causing anxiety;
- not talk about him/herself or his/her 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 chiropractic scope of 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 it.

Benefits associated with these principles of communication include:

- confidence in the member as a professional;
- relaxed and cooperative patients who will make the member'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 the use of physical gestures; and
- respecting the patient's personal sense of space.

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

By learning to listen effectively, a member 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**

A member shall:

- 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; and
- in the case of touching sexual areas, understand that the use of gloves decreases intimacy that might be interpreted as sexual.

## **Consent to Touch**

A member shall 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;
- if a sensitive area is involved (e.g., breast, gluteal and inner thigh), a member must recognize that the patient controls consent and when appropriate, palpate carefully with the patient's guidance, participation and consent;
- special situations must be identified and possible options anticipated; and
- patient concerns must be addressed first.

## **Privacy**

A member shall:

- make the patient, 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
- request the patient's permission for students or staff to observe.

## **Communication Skills Relating to Touch**

To avoid perceptions of sexual abuse, a member must 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 the patient are open to misinterpretation.

Ensuring that the patient understands 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.

### **Penalties**

Penalty for the sexual violation of a patient would include any or a combination of the following:

- Reprimand;
- Apology;
- Fine;
- Costs;
- Conditions on practice;
- Psychological counseling; and
- Suspension or cancellation of registration.