

Setting and Maintaining Boundaries



Camden Coalition
of Healthcare Providers

Therapeutic Use of Self: *Setting Boundaries*

Level of engagement

- How much do we share? How much do we give?
- How much do we do for a patient? How much do we do with a patient?
- How much time do we spend with a patient?

Boundaries help both the patient and provider

- Informs what to expect from each other
- Roles become clearer

Therapeutic Use of Self involves communicating appropriate boundaries in different ways

❖ Let's talk about Mike...



Assisting Care Team in Setting Boundaries

- What is the sense of urgency?
- Refers to how the care team responds to a patient's request or presentation
- Response of care team?
 - Patient who calls reporting to have no food
 - Patient who call reporting they feel suicidal
 - Patient who requests a bus pass to be able to attend a medical appointment
- Determine the level of urgency, and then respond in a manner that benefits the patient for the short and long term
- ❖ Lets talk about Joe... Lets talk about us...



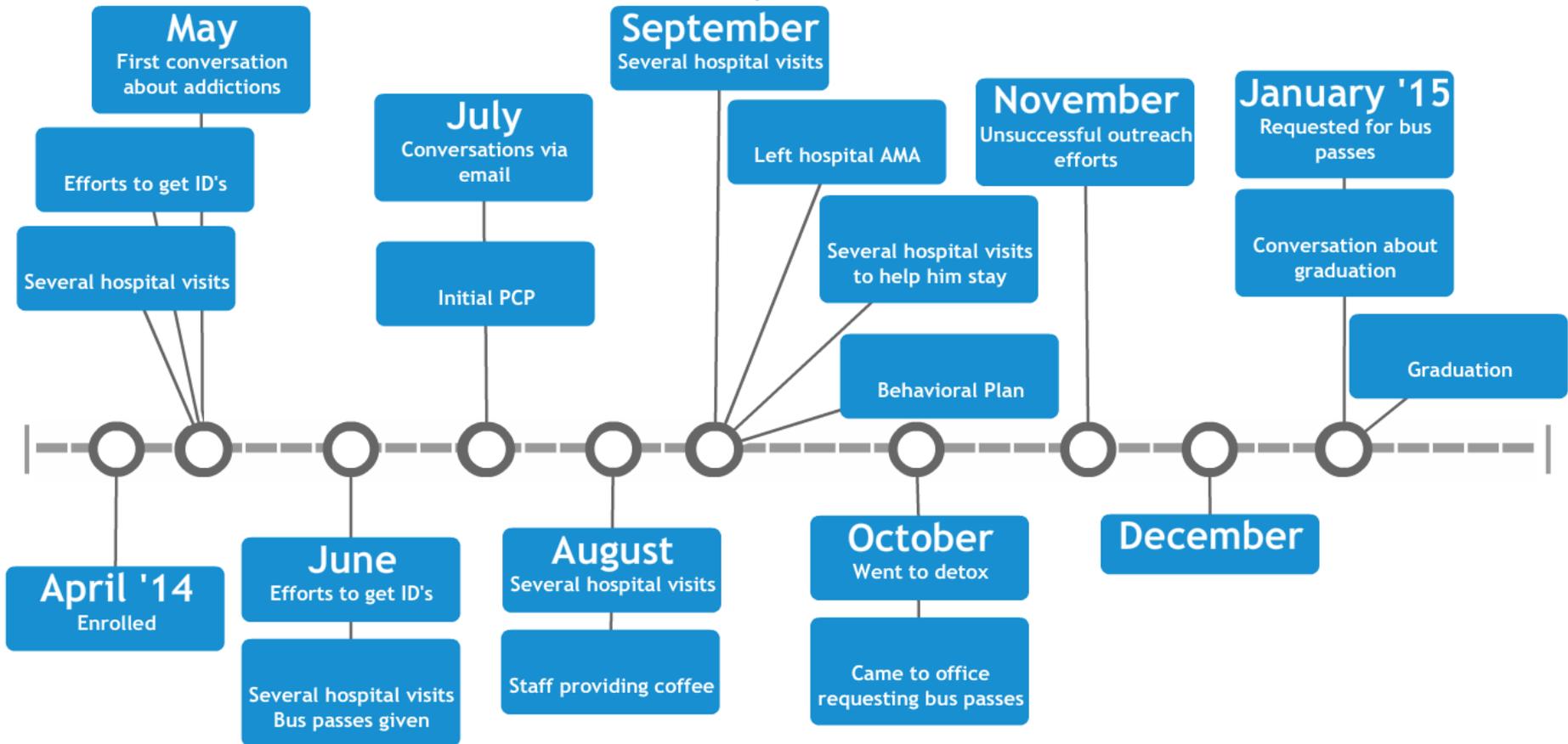
Mike

Mike, a 27 year old male, who carries a significant history of trauma. He is the oldest of 3 children. His father overdosed with heroin when he was 15 y/o, was neglected and physically abused by his mother and was sexually abused before turning 16. He describes his mother as “pot head” who favored his youngest brother.

As an adult he has limited interactions with his family, becomes upset when talking about his father and has a 7 y/o daughter who he sees very infrequently. He is diagnosed with Opioid Dependence and numerous ED visits & hospital admissions. Records reflect several instances of leaving the hospital against medical advice, homelessness, legal issues and “chronic non-compliance”.



Our Interactions with Mike



Mike

Care team:

- Spending significant amount of time, frustrated, genuinely caring for him, witnessing his suffering, seeing him as a victim of trauma (and he was), wanting to save him...
- This was translated into several interventions: providing bus passes and coffee, many hospital visits, doing things for him (e.g. ID's), chasing him, several staff involved

Consultant:

- Took a step back... 27 y/o, homeless, consistent pattern of coming to the hospital on Mondays and leaving for the weekend, he knew how to navigate the system, very smart... all of these were known to the care team.
- Whenever discussing the case, everyone would bring something new about him and everyone felt that they were the one that had a special connection with him, almost a power struggle among care team members.



Mike: Intervention & Therapeutic Use of Self

- No bus passes or bringing coffee
- Emphasized his strengths (capable of advocating for his needs)
- Clear communication of expectations
- Power back (responsibility) to him by asking what wants to do in the immediate future & offering assistance in achieving his goals
- Allowing him to vent his feelings
- Bringing him to the here & now
- Not getting caught in the emotional aspect
- Awareness of him triggering our response of wanting to save him immediately 