

**General
Pharmaceutical
Council**

**In practice:
Guidance on
maintaining clear
sexual boundaries**

**Revised
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About this guidance

The General Pharmaceutical Council is the regulator for pharmacists, pharmacy technicians and registered pharmacies in England, Scotland and Wales. As part of our role, we set the standards that pharmacy professionals have to meet throughout their careers.

This guidance explains to pharmacy professionals (pharmacists and pharmacy technicians) the importance of maintaining clear sexual boundaries, and their relevant responsibilities. Pharmacy professionals should use their professional judgement in applying this guidance.

Pharmacy professionals must satisfy themselves that all members of their team are aware of this guidance and are appropriately trained in all areas relevant to their duties.

If a pharmacy professional is not sure about what they should do in a specific situation, they should always ask for advice from their employer, professional indemnity insurance provider, union, professional body or other pharmacy organisation, or get independent legal advice.

This guidance should be read alongside the **standards for pharmacy professionals** which all pharmacy professionals must meet. This guidance covers standard 6 of the standards for pharmacy professionals, which says:



Pharmacy professionals must behave in a professional manner

Applying the standard

People expect pharmacy professionals to behave professionally. This is essential to maintaining trust and confidence in pharmacy. Behaving professionally is not limited to the working day, or face-to-face interactions. The privilege of being a pharmacist or pharmacy technician, and the importance of maintaining confidence in the professions, call for appropriate behaviour at all times. There are a number of ways to meet this standard and below are examples of the attitudes and behaviours expected.

People receive safe and effective care when pharmacy professionals:

- are polite and considerate
- are trustworthy and act with honesty and integrity
- show empathy and compassion
- treat people with respect and safeguard their dignity
- maintain appropriate personal and professional boundaries with the people they provide care to and with others

We have a **range of guidance** on our website to help pharmacy professionals apply our standards.

Guidance on maintaining clear sexual boundaries

1. The importance of maintaining clear sexual boundaries

- 1.1. When healthcare professionals cross personal and professional boundaries the result for people under their care can be serious and can cause harm. Crossing these boundaries can damage public trust and confidence in the pharmacy profession and other healthcare professions.
- 1.2. People receiving care must be able to trust that pharmacy professionals will act in their best interests. If pharmacy professionals are sexually, or inappropriately involved with a person under their care their professional judgement can be affected. This involvement may affect the decisions that they make about a person's healthcare.

2. Power imbalance

- 2.1 People receiving care are in a vulnerable position. In the relationship between a healthcare professional and a person under their care, there is often a power imbalance. This may be because personal information is shared with the pharmacy professional or because they have information and resources (such as medicines) that are needed. The person receiving care may not know what is appropriate professional behaviour. They may not be able to judge whether the relationship, or what happens to them, is appropriate. It is the pharmacy professional's responsibility to be aware of the imbalance of power and to maintain clear personal and professional boundaries at all times.
- 2.2 Pharmacy professionals should always be clear with the person receiving care about the reason for an examination or why they want them to come into the consultation room. The person receiving care should be given all the information they need and the opportunity to ask questions, and they should give their consent before the pharmacy professional goes with them into a consultation room.



3. Sexualised behaviour and breaches of sexual boundaries

- 3.1 The Professional Standards Authority (PSA) provides its own guidance on the responsibilities that healthcare professionals have on maintaining clear sexual boundaries between healthcare professionals and patients. The PSA document defines sexualised behaviour as 'acts, words or behaviour designed to arouse or gratify sexual impulses or desires'.
- 3.2 A breach of sexual boundaries is not limited to criminal acts, such as rape or sexual assault. For example, carrying out an unnecessary physical examination or asking for details of sexual orientation when it is not necessary or relevant, would both be a breach.

4. Avoiding breaches of sexual boundaries

- 4.1 There are a number of behaviours that may be signs of showing sexualised behaviour towards people receiving care or carers. These include:
- When the healthcare professional reveals intimate personal details about themselves to a person under their care during a consultation
 - When the reason behind the following actions is sexual:
 - giving or accepting social invitations (dates and meetings)
 - visiting a home of a person under their care without an appointment
 - meeting people under their care outside of normal practice, for example arranging appointments for a time when no other staff are in the pharmacy, or
 - asking questions unrelated to a person's health.
- 4.2 If a pharmacy professional finds themselves in a situation where they are attracted to a person under their care, they must not act on these feelings. If they have concerns that this may affect their professional judgement, or if they are not sure whether they are abusing their professional position, they may find it helpful to discuss this with someone else.
- They might discuss this with an impartial colleague, a pharmacy organisation that represents them, a professional leadership body or their professional indemnity insurance provider.
- 4.3 If pharmacy professionals cannot continue to care for the person and be objective, they should find other care for the person. They must make sure there is a proper handover to another pharmacy professional and that the person receiving care does not feel that they are in the wrong as a result of these actions.
- 4.4 There may be situations when people receiving care or their carers are attracted to a pharmacy professional. If a person receiving care shows sexualised behaviour towards a pharmacy professional, the pharmacy professional should think about whether they should discuss the person's feelings in a constructive way and try to re-establish a professional relationship. If this is not possible, they should transfer the person's care to another pharmacy professional. A pharmacy professional may find it helpful to discuss the matter with a colleague, a pharmacy organisation that represents them, a professional leadership body or their professional indemnity insurance provider.



5. Cultural and other differences

- 5.1 Cultural differences can affect a person's view of their personal boundaries and what is appropriate. Pharmacy professionals need to be sensitive to this, and always treat people receiving care as individuals in a way that respects their views and maintains their dignity. For example, an individual may prefer to talk to or be examined by a pharmacy professional of the same gender, or have another person present. (See 6 Chaperones)

6. Chaperones

- 6.1 A chaperone is a person (usually the same sex as the patient) who is present as a safeguard for the person receiving care and the healthcare professional. They are also a witness to the person's continuing consent for the procedure. Their role may vary depending on the needs of the person, the pharmacy professional and the examination or procedure being carried out.
- 6.2 The pharmacy professional should ask the person receiving care whether they would like a chaperone to be with them in the consultation room, and for any examination that they might consider to be intimate. The pharmacy professional should discuss the need for a chaperone with the person receiving care and should not guess what their wishes are.
- 6.3 Pharmacy professionals should record any discussion that they have with a person receiving care about chaperones, including when they do not want to have a chaperone present.
- 6.4 If no chaperone is available, the pharmacy professional should offer to delay and re-arrange the consultation or examination until one is available (unless a delay is not making the care of the person their first priority).

7. People who have previously received care

7.1 The same principles apply to carers or people who have received care from pharmacy professionals in the past. The previous professional relationship may also have involved an imbalance of power, and so would affect any personal relationship. If this type of relationship develops, the consequences should be considered and any harm this may cause to the person. The impact on the professional standing of the pharmacy professional should also be considered. We advise pharmacy professionals to consider the following:

- how long the professional relationship lasted and when it ended
- the nature of the previous professional relationship and whether it involved a significant imbalance of power
- whether the former person under their care or carer was, or is, vulnerable
- whether the knowledge or influence that was gained through the professional relationship is being used to develop or continue the personal relationship, and
- whether they are already treating, or are likely to treat, any other members of the former person under their care or carer's family.

7.2 It is the pharmacy professional's responsibility to act appropriately and professionally, even if the relationship is agreed by everyone involved. They must consider all the issues above and, if necessary, get appropriate advice.

8. Raising concerns

- 8.1 Pharmacy professionals have a professional duty to raise concerns if they believe the actions of other individuals are putting patients at risk. This would include when they are concerned that clear sexual boundaries have not been maintained by colleagues or other healthcare professionals. They must also take appropriate action if others report concerns to them.
- 8.2 See our ***In practice: Guidance on raising concerns*** for more information.



Other sources of information

- Clear sexual boundaries between healthcare professionals and patients: responsibilities of healthcare professionals, PSA:
www.professionalstandards.org.uk
- Chaperone Framework, PSNC:
www.psnc.org.uk

If you have questions or comments about the content of this guidance, please contact our Policy and Standards Team:

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We have also produced guidance on other topics that you may find useful:

www.pharmacyregulation.org/standards/guidance



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