Maintaining professional roles and safeguarding in an inclusive society – introducing the *Boundaries Clock*

Overview

‘If people are less isolated and have support to participate in their community, this may provide some protection from abuse.’¹

Socially isolated and excluded people have a worse quality of life than others and are at greater risk of abuse, and so promoting inclusion is a policy imperative²,³. Unfortunately, some local services are interpreting the guidance on safeguarding that they receive from professional and regulatory agencies in a manner that is hindering socially inclusive practice. We want to see organisations find more effective ways of meeting their duty to safeguard vulnerable adults whilst protecting professional boundaries and delivering support for inclusive lives.

NDTi has begun a lengthy process of developing resources to support local services safeguard their inclusion work, and exclusion-proof their safeguarding work.

The problem

Safeguarding vulnerable people and promoting their social inclusion form twin obligations of health and social care services, but these goals are commonly experienced by frontline staff as in conflict with one another. As stated by the Department of Health, socially inclusive practice demands a *new* approach to professional boundaries⁴. Therefore local services, professional bodies and inspection agencies all share a responsibility to support the safeguarding agenda whilst also promoting social inclusion.

There is increasing anecdotal evidence that the current statements and requirements of both professional and regulatory bodies are being interpreted locally in a manner that has the unintended effect of inhibiting efforts to promote inclusion - rather than guiding staff through the complexities to a place where both goals can be met.

Without action, there is a risk that this trend will continue, thus undermining a significant aspect of policy intent

Examples from the field

- After 20 years as an activist in the mental health service user movement, Dave got a job in the mental health trust. During induction he read a policy document that insisted he abandon all his existing friendships, as staff were required to have no informal social contact with people who used the service.
- A worker informed a number of service users that a dance was taking place. As he was attending with his partner, he received a warning letter that this action breached GSCC guidance on professional boundaries.
- Off duty staff were advised to leave a pub immediately should a service user enter the premises.

These examples show how, in local services, some interpretations of professional boundaries can have the perverse effect of reducing opportunities for inclusion. As public services change to meet the expectations of the personalisation, social inclusion and shrinking resources, three dynamics will increasingly occur.

- First, staff will be expected to support people in a range of community opportunities that extend beyond those traditionally seen as the remit of social care and support staff.
- Second, people who use public services will find themselves engaging in community activities that are also likely to involve other community citizens who are employees in services that support them.
- Third, as the personalisation agenda advances and helps create a new social contract between the citizen and the state, so health and social care agencies will need to have a carefully thought-out approach to safeguarding that shifts the balance of power to the citizen without abdicating responsibilities themselves. This approach is missing in many organisations, leading to organisational drag that is slowing down the transformation of services.

Public services are asking for assistance so that they can respond to these situations, especially as some of the traditional approaches form a barrier to inclusion. They wish to address these issues whilst improving the quality of care and boosting independence and inclusion which will also create efficiencies over the long term.

Progress to date

1. A review of some of the relevant literature has been completed, that underlines the findings of the recent University of Sheffield review of professional boundaries in social work that was commissioned by the General Social Care Council. In summary, these reviews confirm the need for this project. Interestingly, the Sheffield work highlighted the need for case-study based discussions but did not recognise the need for some conceptual analysis that would help people structure their discussions or search for a shared solution.
2. Positive links between NDTi and the five professional bodies that are active in mental health work (nursing, psychiatry, psychology, social work and occupational therapy) were established for the creation of the Department of Health’s 2007 publication *Capabilities for Inclusive Practice*. This strengthened the professional bodies’ commitment to social inclusion and opens the door for this further development.

3. The context for ethical decision-making has been conceptualised as the NDTi *Boundaries Clock* and this has been described in a book chapter published in June 2010. This work does not provide detailed operational guidance, but covers the essential values and themes that should appear in policy and practice. The *Boundaries Clock* has been tested with a small number of groups and presentations have been warmly received at conferences and training events.

Next steps

1. It is possible to use the *Boundaries Clock* to review the policy of local services. Conducting such an audit will (a) provide feedback to local services on whether their policies are adequate; (b) disseminate local solutions to some of the challenges that arise in operationalising the balance between boundaries, safeguarding and inclusion, and (c) test and refine the audit tool.

2. Create a suite of papers in which the *Boundaries Clock* forms the common framework for analysing how safeguarding, inclusion and professional boundaries issues are brought together into local practice. Together, this will show the general utility of the model, create a virtual learning community for peer support that will improve the quality of analysis at a local level, and create a consensus to influence regulatory and professional bodies. The papers are being developed in partnership with key agencies in the field, as shown in the following table:

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**Setting** | **Discussions have begun with the following potential partners**
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Timebanks | Timebanks UK – Philippe Granger, Martin Simon
Mentoring | Mentoring and Befriending Foundation - Richard Andrew
Befriending Schemes | Imagine – Kevin Lesbirel Jones
Mini-teams where several staff work to support just one person | Places for People – Lorraine McGrath
L’Arche | L’Arche – Anthony Kramers
People who volunteer in the same setting where they have received a service | Richmond Fellowship – Beverley Clay
Community Circle | Inclusive Solutions – Colin Newton
Community Choir run by NHS Foundation Trust | East London Mental Health Foundation Trust – Eileen Dickinson
Adult Placement | NAAPS - Alex Fox
Chaplaincy | St John’s theological college – Ian Paul
Other possible settings are welcome | Contact Peter Bates at NDTi

3. Offer training to staff involved in making these complex judgements on a daily basis. Early iterations of the training materials have been well received, and facilitation techniques appropriate to the material and audiences concerned are being refined.

4. Define transparent ethical principles that will assist staff in making judgements on appropriate professional boundaries when working in partnership with community organisations and informal community relationships.

5. Publish the work in order to assist staff in the field to develop their ethical decision-making, as well as assist policy makers, regulators, professional bodies and employers to meet their twin objectives of social inclusion and safeguarding.

In order to accomplish these tasks, NDTi is seeking partners and funding. Contact us if you would like to explore the application of these approaches in your organisation or practice.

**Contact**

Peter Bates at peter.bates@ndti.org.uk or on 07710 439 677 to discuss.
Appendix – the *Boundaries Clock*

Six pairs of competing priorities are set in opposition to one another to form the twelve-point *Boundary Clock*. Individual case studies can then be placed on the ‘clockface’ and the twelve vantage points used in turn to generate ideas for shaping practice in an individual situation. As each of the twelve is merely an entry point to the clockface area, the issues that arise inevitably overlap here and there, but the twelve points frame a systematic discussion.

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The *Boundaries Clock*

- **Natural & multiple**
- **Help or Harm**
- **Person-centred**
- **Community**
- **Artificial & single**
- **Privacy**
- **Worker**
- **Duty of care**

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- **Consider the actual or potential benefit to, or abuse of, the person in the here and now**
- **Adapt your conduct to the people involved and their context**
- **Make the most of the person’s informal community relationships**
- **Focus on the person and their unique resources, relationships and needs**
- **Support the person’s right to run their own life, participate in the community and build a home free from surveillance or interference**
- **Keep the relationship between the worker and the person distinctive by following special rules and inhibiting other contact.**

**Watch out for setting a precedent and keep a consistent sense of what counts as an appropriate working relationship**

- **Apply law and regulation to all people and all relationships at all times to keep things fair**
- **Make the most of the relationship between the worker and the person**
- **Value the worker and their unique resources, relationships and needs**
- **Take action, and sometimes even over-ride the person’s preferences in order to keep everyone safe**
- **Use the worker’s ordinary humanity, citizenship and experience of life to engage with the person.**

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7 All metaphors have limited value and can carry unwanted freight. This clock has no hands, no power source, no machinery – it is simply a face with 12 observation points. The image of a 12-person jury might work just as well, although it suggests crime and punishment.