



# CONDUCT COUNTS!

## Boundaries & Professionalism

### SCENARIO

“Joe, RRT” is one of those affable guys, always joking around. Most describe him as having a “great sense of humour”...most other guys, that is. To Joe, no subject is off limits and his humour often crosses over into the provocative, “Did you hear the one about the stripper...?” Joe will even drop masks on the floor in front of female staff or students so that they will bend over in front of him, resulting in jeers and guffaws from Joe. The other RRTs at the hospital where Joe is employed have almost all worked with him for a number of years. When there are new hires, they are often surprised at Joe’s brashness and will comment to a colleague, who in turn says, “Oh, that’s just Joe.” But when Joe came up behind Kelli (who had only been at the hospital a couple of months) and blew on the back of her neck, Kelli reported him to HR for sexual harassment.

### RESULTS

After completing the investigation, (which included: interviewing Joe, Kelli and colleagues; obtaining documentation from the hospital such as policies and Joe’s HR file; and reviewing standards, guidelines and policies of the profession) a panel of the Inquiries, Complaints and Reports Committee required Joe to complete a course on professionalism and boundaries, and appear before them to be cautioned.

### EXPECTATION

There were some people interviewed by the investigator who thought that Kelli was being too sensitive, or who didn’t understand why the CRTO would investigate something that wasn’t directly related to patient care. There were also many people who felt it was about time that Joe got called out on his behaviour – “What if a patient saw him acting that way?” said one RN.

No one - not patients, peers or colleagues - should have to work in an environment where they are made uncomfortable by an RT’s behaviour. If asked, no one would say it was okay for Joe to tell a racist joke, but somehow it had become acceptable for him to tell sexually suggestive jokes.

What Joe likely didn’t consider is that 1 in 4 women and 1 in 5 men have been sexually abused at some point in their lives and his actions could act as a trigger. Whether or not that was Kelli’s experience isn’t the point. The point is that Joe, who had admitted to his behaviour, made Kelli feel unsafe. When this happens, patient care is put at risk because of the potential impact on collaborative care.

### BOTTOM LINE

Don’t say or do anything to a colleague that you wouldn’t say or do to a patient.  
Don’t be that guy (or girl)!

### RESOURCES

[Standards of Practice](#)

[Commitment to Ethical Practice](#)

[Responsibilities of Members as Educators PPG](#)

[Abuse Prevention and Awareness PPG](#)



### PROFESSIONALISM

“Professionalism” or professional conduct is a term often used to describe the behaviours that are expected of individuals who hold a certain role in society. A “professional” is typically someone who has obtained skills that are recognized as requiring specific, intensive training and who applies those skills in a position impacting others (e.g., engineer, lawyer, RT, PT, MD, etc.). Professionals are often held to moral, ethical and legal standards because of this potential impact.