College of Medical Laboratory Technologists of Ontario

Professional Practice Learning Program

# Abuse prevention module

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## Introduction

This resource describes the knowledge and skill Medical Laboratory Technologists (MLTs) required to create safe and respectful environment for their patients. The module provides a comprehensive overview of sexual abuse prevention, including the identification of risk factors, the implementation of protective measures, and the establishment of ethical and professional boundaries.

### What is abuse?

Abuse presents in many forms and can include:

- Physical – unwanted physical contact intended to cause physical harm.
- Sexual – words, gestures, and behaviour of a sexual nature, touching of a sexual nature and sexual intercourse.
- Psychological abuse - where a consistent pattern of coercive or controlling actions or repeated threats.
- Neglect – where a caregiver fails to provide the basic needs to the person in their care[1].

People are individuals with their own unique sets of experiences and as a result, it is difficult to define exactly what is, and is not, abuse as that will depend on the circumstances and the individuals involved. As health care professionals, MLTs must be aware of the diverse cultures, backgrounds, and experiences of their patients and be sensitive to those perspectives to avoid unintentional abuse.

**Patient Scenario:**

A patient who has survived childhood sexual abuse may be highly sensitive to unexpected touch or overly familiar conversation. An MLT will have no way of knowing what each patient's previous experience has been and therefore must maintain appropriate professional boundaries and always adhere to the principles of appropriate communication and touch.

### What is sexual abuse?

The CMLTO's mandate is public protection. As such, the CMLTO has adopted a philosophy of zero tolerance for sexual abuse. To read more about this, please refer to the Practice Guidelines for the Prevention of Sexual Abuse. Sexual abuse is defined in the *Regulated Health Professions Act, 1991* (RHPA) to include sexual intercourse or other forms of sexual relations, touching of a sexual nature and


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behaviour and remarks of a sexual nature. It's important to note the RHPA states that "sexual nature" does not include touching, behaviour or remarks of a clinical nature appropriate to the service provided.[2]

MLTs must understand that it is **never appropriate** for a health professional to have a sexual relationship with a patient and that a patient can never consent to sexual contact. This is a reflection of the real and perceived power imbalances that exist between health professionals and their patients.

## Who is at risk of abuse?

Anyone can be a victim of abuse. Abuse crosses all genders, cultural and socio-economic boundaries. There are several segments of the population who are more vulnerable to abuse, including:

- Children
- being younger and of a sexual orientation other than heterosexual[3]
- individuals who are not fluent in English,
- Indigenous women, and women who are homeless or underhoused[4]
- the elderly,
- individuals with physical or mental disabilities,
- individuals with communicative disorders
- survivors of abuse

Patients who are more vulnerable to abuse, particularly unintentional abuse, are not always readily identifiable. Therefore, MLTs must maintain appropriate professional boundaries and adhere to standards related to appropriate communication and touch to prevent unintentional abuse.

## Where can abuse occur?

Abuse can occur in any environment at any time. MLTs are responsible for ensuring they do not expose patients to risk of abuse in their practice. Some steps to take to practice abuse prevention:

- Ensure your workplace and any publicly accessible areas are free from any form of abusive text or imagery.
- Always communicate with colleagues and patients in a respectful and professional manner.
- Touch patients only when necessary and only after informing them of


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where you need to touch them and why.

- Do not request or accept to be connected to patients on social media.

## What are professional boundaries?

There is a potential for abuse whenever boundaries are crossed. MLTs must be aware of how to set and maintain appropriate professional boundaries and be aware of potential boundary crossing risks to prevent abuse. Potential boundary crossing risks exist in many areas including:

- Communication styles including words, tone, body language, jokes, etc.
- Display of potentially offensive material
- Style of dress

MLTs need to be sensitive to the values, culture, and personal experiences of their colleagues and patients in create an environment where every patient experiences a sense of inclusion and feels safe. By learning as much as possible about the people they work with and serve, MLTs will ensure that they respect the boundaries of others and avoid unintentional abuse and foster a more inclusive environment. MLTs should focus on therapeutic communications skills, which is defined as "*strategies such as establishing rapport, active listening, and adapting communication style to accommodate individual needs, such as literacy level or cognitive status*"[6]. MLTs should always keep the following principles in mind:

- talk before you touch
- obtain the patient's consent and remember patients can change their minds
- touch only when necessary
- show respect for the patient
- maintain the patient's dignity
- embrace diversity and develop communication competencies and self-awareness[7]
- create a safe environment
- maintain confidentiality

Following these principles will not only help with the prevention of sexual abuse, but also in avoiding unintentionally re-traumatizing or triggering the patient[8]. When speaking to a patient, the MLT should use words the patient can understand, emphasize appropriate vocabulary, use professional terminology, demonstrate sensitivity, and know when to call for an interpreter. For patients experiencing challenges in understanding what MLTs are saying they should consider alternate


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channels of communication including pictures, diagrams, and charts.

Since the goal of communication is mutual understanding, listening is just as important as speaking. MLTs should actively listen and observe patients, while being aware of cultural differences. By listening effectively, MLTs can also learn to modify their speech to match the patient's needs. MLTs are encouraged to observe a patient's non-verbal cues and confirm a patient's comprehension by rephrasing or asking for clarification[9].

In a patient/MLT relationship, the power always resides with the MLT. This imbalance of power creates a risk for abuse. If a patient crosses boundaries, MLTs should restate and re-establish the professional boundary with the patient and document the boundary crossing including the date, time, location, and other details using the incident reporting process established by the facility.

## Reporting abuse

The RHPA requires registrants to file a written report if they have reasonable grounds, obtained in the course of their practice, that a patient has been sexually abused by another regulated health professional. Failure to comply with these reporting obligations carries a potential $50,000.00 fine and may also result in charges of professional misconduct.

Reasonable grounds considers the source and credibility of the information. If you have reasonable grounds, obtained in the course of your practice that a patient has been sexually abused by another health professional, you must:

- Submit a written report within 30 days to the Registrar of the College where the alleged abuser is registered.
- Submit the report immediately if you have reason to believe that the abuse will continue, or abuse of other patients will occur.
- Include the name of the patient **only** if you have their written consent.
- Include the name of the health professional who is alleged to have committed the abuse (if known).
- Use your best efforts to advise the patient of the reporting requirement before filing the report.

**Keep in mind that the RHPA provides protection to a person who files a report in good faith.**


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In the case of suspected child abuse, you must file a report immediately and directly to the local Children's Aid Society. The *Child, Youth and Family Services Act, 2017* also provides protection to individuals who file reports in good faith. Failure to report is an offense that carries a potential penalty of $5,000.00. If an MLT is in doubt about their reporting obligations, they may contact the CMLTO or the Children's Aid Society for guidance. Find the Children's Aid Society in your area through the Ontario Association of Children's Aid Societies' website.

If an MLT witnesses conduct that has the potential to be abusive, they have an ethical responsibility to take some action to ensure that conduct is addressed. MLTs should become familiar with their facility policies and procedures as they relate to abuse prevention and reporting requirements. Additionally, MLTs should be aware of how to report this conduct to the CMLTO which includes completing a Mandatory Reporting form.

## Conclusion

This resource is intended to equip MLTs with a comprehensive understanding of essential concepts such as zero tolerance, forms of abuse, maintaining professional boundaries, ethical considerations, and effective communication skills. Throughout this resource, the importance of creating a safe and secure environment in all professional settings, where abuse is not only condemned but also proactively prevented, was emphasized.

If you require further guidance or assistance, please contact CMLTO's Registrant Relations department by email at professionalconduct**@cmlto.com**.


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