



18 May 2011

Medical Board of Australia
GPO Box 9958
MELBOURNE VIC 3001

Dear Sir/Madam

Comments on *Sexual boundaries: A guide for doctors and patients*

The Consumers Health Forum of Australia (CHF) welcomes the opportunity to comment on the Medical Board of Australia's (the Board) *Sexual boundaries: A guide for doctors and patients* Consultation Paper.

CHF is the national peak body representing the interests of Australian healthcare consumers. CHF works to achieve safe, quality, timely healthcare for all Australians, supported by accessible health information and systems.

CHF and our members recognise the value of codifying what constitutes 'appropriate' and 'inappropriate' dynamics in the doctor-patient relationship. Effective management of an individual's health requires mutual trust and respect between consumer and doctor. If this dynamic is compromised then the consumer's ability to productively work in a partnership with a practitioner to improve personal health outcomes will likewise be compromised.

CHF is unable to provide a detailed submission on the Consultation Paper, but some brief comments are provided below.

Effective communication

CHF considers that a separate document communicating the Guidelines in a format designed specifically for consumers would be valuable. The Guidelines highlight the power imbalance in the doctor-patient relationship. This power imbalance is attributed to many factors, including potential differences in education level and health literacy. Because of the different education and health literacy levels of health consumers, guidelines communicated in language appropriate for health practitioners will not always be appropriate for consumers.

CHF notes that the Consultation Paper refers to instances where patients have mistaken necessary exams for inappropriate behaviour, due to lack of communication. Empowering consumers with information on the doctor-patient relationship and its boundaries, in language tailored to consumers, could assist consumers to better assess their own and their doctors' behaviour, and thus result in fewer misunderstandings and unfounded reporting. Such a resource could include questions a patient should ask if they are uncertain about an examination, so that inappropriate situations can be avoided or accurately identified should they arise. Consumer consultation is required to understand what information consumers need and how that information can best be communicated to them.

In addition to releasing consumer-centred Guidelines, steps should be taken to inform consumers about the Guidelines. This will help consumers to be active participants in regulating their relationship with their doctors to ensure no boundaries are crossed, and if boundaries are crossed, appropriate steps are taken. Consumers should be consulted about how they would prefer to receive this information and how it can be disseminated most effectively.

Penalties for inappropriate behaviour

The Consultation Paper makes no reference to what penalties may apply to doctors who cross personal boundaries with patients. While penalties may be applied on a case-by-case basis, a reference to what range of penalties may be applied may serve as a deterrent for doctors at risk of entering an inappropriate relationship, and thus act as a protective barrier around the doctor-patient relationship.

Social media

Innovations in social media have opened up new channels through which relationships can develop, providing a new space where boundaries can be crossed. The Guidelines currently make no reference to the place and appropriateness of social media in the doctor-patient relationship. Given the rapid uptake of online communication tools such as Twitter and Facebook, and the ease of communication provided by these tools, CHF considers that the Guidelines should articulate boundaries to be observed by both consumers and doctors in relation to these online tools.


Conclusion

CHF feels that consumers should be at the centre of care, and thus should be empowered to act as partners *with* their doctors. To help consumers take on an active and productive role in their healthcare, consumers should be informed about how to best conduct their healthcare relationships and how to manage problematic situations should they arise.

CHF would like to see further work to provide consumers with information about the Guidelines, including the development and communication of a consumer-specific resource. The content and strategies to progress these steps should be developed and implemented in consultation with consumers, to ensure that the information is both adequate and accessible. CHF would also like to see the development of Guidelines that outline the boundaries to be observed by both doctors and patients when using social media.

We appreciate the opportunity to comment on the Consultation Paper and we would be interested in participating in future consultations on this issue. If you have any questions or would like to discuss this further, please contact CHF Project Officer, Ms Genevieve Tait,

Yours sincerely



Carol Bennett
CHIEF EXECUTIVE OFFICER