

THE THERAPEUTIC NURSE-CLIENT RELATIONSHIP

A therapeutic nurse-client relationship is built on trust and mutual respect between the nurse and client. It is based on a nurse's ethical and legal duty to protect the client's well-being.

The relationship begins when a client receives care from a nurse and continues until the nursing care has ended. A therapeutic relationship is not a personal relationship.

Five Common Qualities in a Therapeutic Nurse-Client Relationship

TRUST

Nurses are trusted to act in the best interest of clients to provide safe, competent, compassionate and ethical care.

RESPECT

Nurses are required to value all people and treat them with respect.

ACT IN CLIENT'S BEST INTEREST

Nurses are required to act honestly, in good faith and strictly in the best interest of the client. Nurses must be aware of their own behaviour, values and emotional needs as well as how their needs are separate from those of their clients. The client's needs always come first.

PROFESSIONAL INTIMACY

Nurses are required to maintain professional intimacy, which is separate from personal intimacy. Professional intimacy is therapeutic, time-limited and focused on the client's interest.

POWER

There is a power imbalance in the therapeutic nurse client relationship because the nurse has specialized knowledge and the client is dependant on the nurse to provide nursing services. Nurses are responsible to recognize the power imbalance that exists in the therapeutic relationship and be aware of the potential for clients to feel intimidated or dependent.

A therapeutic nurse-client relationship never includes any form of sexual behaviour.

Nurses in Nova Scotia are required to meet the following expectations with clients:



Nurses must never engage in sexual behaviour with a current or vulnerable former client.



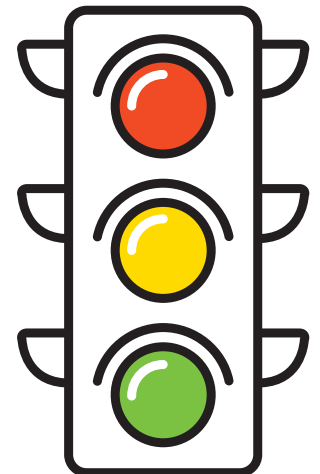
Nurses cannot use consent from a current or vulnerable former client as a defence to an allegation of sexual misconduct.



Nurses considering engaging in sexual behaviour with a former client must determine whether it is appropriate to do so based on their standards of practice.



Conduct, behaviour and comments from a nurse that are clinically appropriate do not constitute as sexual misconduct.



Use this tool in conjunction with the **Sexual Misconduct Standard of Practice for Registrants** and the information available on the NSCN website.