



NEW ZEALAND  
**CHIROPRACTIC BOARD**  
TE POARI KAIKOROHITI O AOTEAROA

# PROFESSIONAL BOUNDARIES

July 2026

## Associated documents

- Competency standards
- Code of Ethics Standards

## Revision schedule

| Version | Date Approved |
|---------|---------------|
| 1       | 2026          |
|         |               |
|         |               |
|         |               |

# Te Poari Kaikorohiti | the Chiropractic Board: Professional Boundaries Standards

## Preamble

### 1. Purpose

- 1.1 The role of Te Poari Kaikorohiti o Aotearoa | the Chiropractic Board (the Board) is to protect public health and safety and to oversee professional and ethical standards in the Chiropractic profession. The Board ensures chiropractors meet and maintain professional standards of education, conduct and performance, ensuring chiropractors deliver high quality healthcare to the public.
- 1.2 Maintaining professional boundaries, including sexual boundaries, is critical to ensuring patient safety. Appropriate professional boundaries foster safe, effective therapeutic relationships between chiropractors and their patients, colleagues, and the broader community. Clear understanding and adherence to professional boundaries is also necessary to safeguard public trust and confidence in the chiropractic profession.
- 1.3 The Professional Boundaries Standards are set by the Board under s 118 of the Health Practitioners Competence Assurance (HPCA) Act 2003. All chiropractors are required to comply with standards of professional and ethical conduct. The Board will hold chiropractors to account if their conduct falls short of these standards. The Professional Boundaries Standards may be used by the public, the Board, and other agencies to assess the expected professional behaviour of chiropractors.<sup>1</sup>

## Professional Boundaries

### 2. Maintaining Professional Boundaries

- 2.1 As a chiropractor you must always maintain professional boundaries with patients, colleagues, and others within the professional environment, regardless of the setting, medium,<sup>2</sup> or location.<sup>3</sup> The responsibility for upholding these boundaries lies solely with the chiropractor.
- 2.2 Practitioners are permitted to treat whānau/family where this is culturally appropriate (excluding ACC funded care). They must ensure the treatment remains professional, clinically justified, and does not compromise objectivity or professional judgement.

### 3. Recognising When Boundaries Are Challenged

- 3.1 Certain behaviours may indicate that professional boundaries are becoming blurred, including:
- a. Seeing a patient at an unusual hour or location without clinical justification.
  - b. Preferring a specific patient for the last appointment of the day without justification.

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<sup>1</sup> Including the Health and Disability Commissioner and the Health Practitioners Disciplinary Tribunal.

<sup>2</sup> This includes, but is not limited to, digital interactions (e.g. online or telehealth) and social media.

<sup>3</sup> This can include outside of the professional environment.

- c. Providing personal contact information to a patient without clinical necessity.
- d. Accessing patient records without a valid reason.
- e. Accepting excessive gifts or favours that may compromise professional judgement.
- f. Developing an inappropriate attachment to a patient.

3.2 When a chiropractor recognises that professional boundaries are being challenged, they must take immediate and proactive steps to address the situation. This may include:

- a. Seeking advice from a trusted colleague or professional body.
- b. Discussing concerns with the patient in a professional manner to reinforce boundaries.
- c. Referring the patient to another practitioner if necessary to maintain professional boundaries.

#### **4. Sexual Relationships with Patients**

4.1 A sexual relationship with a current patient is never acceptable. This includes any sexualised behaviour, physical contact, or communication that could be perceived as inappropriate, regardless of patient harm. A breach of sexual boundaries is considered an abuse of the chiropractor-patient relationship.

4.2 The Board has a zero-tolerance policy on sexual relationships with current patients, as the power imbalance makes true consent impossible. You must not initiate, encourage, or engage in any form of sexualised behaviour or communication with a patient. This includes but is not limited to:

- a. Making sexualised or suggestive comments.
- b. Unnecessary physical contact.
- c. Discussing personal sexual matters with a patient.
- d. Any act of sexual misconduct, including sexual impropriety, sexual transgression, or sexual violation.

#### **5. Sexual Relationships with Former Patients**

5.1 In some situations, a relationship with a former patient may not be considered inappropriate, but you must carefully evaluate factors such as:

- a. The nature, duration, and intensity of the previous professional relationship.
- b. The degree of dependency and vulnerability of the patient.
- c. The time elapsed since the termination of care.
- d. The potential for abuse of the power imbalance.

5.2 If uncertainty exists, seek professional advice before engaging in any such relationship.

#### **6. Relationships with those Closely Connected to Patients**

6.1 A sexual or emotional relationship with someone closely connected to a patient (such as a carer, family member, or guardian) is inappropriate if:

- a. It exploits the power imbalance inherent in the chiropractor-patient relationship.

- b. It compromises, or is perceived to compromise, the chiropractor's professional judgement.

## **7. Electronic Communication and Social Media**

7.1 Ensure professional boundaries are upheld in all digital and social media interactions. You should:

- a. Consider separating personal and professional social media profiles.
- b. Not engage in inappropriate or overly familiar online interactions with patients.
- c. Ensure electronic communication remains professional and clinically relevant.

## **8. Gifts and Financial Dealings**

- 8.1 Do not accept bequests, loans, gifts, money, or favours that could be seen as influencing professional judgement. Token or culturally appropriate gifts (such as food) may be accepted if they do not create an actual or perceived conflict of interest.
- 8.2 Do not enter financial arrangements with patients that extend beyond agreed service fees. It is unethical to encourage patients to provide bequests, financial support, or personal loans.

## **9. Reporting Boundary Breaches**

- 9.1 You have an obligation to report any concerns regarding possible professional boundary breaches, whether your own or those of a colleague, to the Board or other appropriate authority. This includes breaches involving inappropriate sexual behaviour, emotional entanglement, financial exploitation, or other ethical violations.
- 9.2 You have a professional duty to intervene if you witness or become aware of a colleague engaging in inappropriate sexual behaviours with a patient. This may include:
- a. Addressing concerns directly with the colleague (if safe and appropriate).
  - b. Reporting immediately to an employer, the HDC, or the Board.
  - c. Seeking legal or professional guidance if unsure.

## **10. Addressing Concerns Raised by Patients**

- 10.1 If a patient raises concerns about boundary violations, respond professionally, ensuring the patient understands their rights and the avenues available for lodging complaints (for example the HDC, the Board, Police).

## **Disciplinary Action**

- 11.1 Breaches of professional boundaries may result in formal action by the Board, including but not limited to:
- a. Referral to the Health and Disability Commissioner.
  - b. Referral to a Professional Conduct Committee (PCC) for investigation, which could lead to disciplinary charge before the Health Practitioners Disciplinary Tribunal.
  - c. Interim Orders for example suspension or conditions on practice (e.g. supervision).

- d. Formal warnings or reprimands.
  - e. Mandatory training.
- 11.2 For more information on the Board's complaints process, please refer to the Board's website: <https://chiropracticboard.org.nz/>

## Definitions

- **Chiropractic Care:** The assessment, diagnosis, management, and prevention of musculoskeletal conditions, particularly related to the spine.
- **Emotional Relationship:** Any form of close emotional connection, including but not limited to emotional intimacy and romantic expressions.
- **Exploitation:** Using emotional manipulation, intimidation, threats, or coercion to take advantage of another individual.
- **Gifts and Koha:** Items or financial contributions received from patients or their families, requiring ethical consideration before acceptance.
- **Informed Consent:** The process of providing patients with sufficient information to make an informed decision about their care, including risks, benefits, and alternatives.
- **Personal Relationship:** Any non-professional relationship between a chiropractor and a patient, colleague, or other individual that could influence professional judgement.
- **Power Imbalance:** The natural influence chiropractors have over patients because of their knowledge, training, and professional role. This influence, combined with the trust patients place in them, can make it difficult for patients to say no or make fully informed and free choices, especially about personal, sexual or emotional matters.
- **Professional Boundaries:** The limits that ensure safe, objective, and effective professional relationships while protecting patients from potential exploitation or harm.
- **Social Media Engagement:** Any interaction through digital platforms, including social networking sites, messaging apps, or professional forums.