

## **Monitoring and support of woman with Huntington's Disease (11HDC00647, 10 June 2013)**

*General practitioner ~ Psychiatrist ~ Huntington's disease ~ Competence ~ Doctor/patient relationship ~ Rights 4(1), 4(2)*

This case concerns the care provided by a general practitioner (GP) to a woman with Huntington's Disease. In 2002, the GP discussed the woman's future care with her. The woman was adamant she wished to remain living in her own home and the GP promised to ensure that she would be able to do so. It was agreed that the GP would visit the woman regularly. Once or twice a year, the GP discussed the case with a psychiatrist. The psychiatrist last saw the woman in 1999.

The woman became increasingly reclusive, refusing home help and other support. From 2005 she refused to allow the GP into the home and, thereafter, most of their documented contact was by telephone. The GP said there were also face-to-face contacts on the balcony of the flat that were not recorded. The woman's daughter repeatedly expressed concerns to the GP about her mother's living conditions.

In 2006, the woman had an overnight admission to hospital. The GP advised the clinicians that support and cares were in place and took her home. No competence assessment was undertaken. During the four years that followed, the GP had limited face-to-face contact with the woman although, on one occasion, had an hour-long conversation with her through a curtain, but was able to see only her feet. The GP monitored the woman by visiting the flat to check for signs of life, such as whether the television was on, and whether there were flies or smells.

In 2008, the woman's landlord contacted the GP to say that there was a leak coming from the bathroom into the garage below. The woman told the GP that she had fixed the toilet and no repairs were necessary. The woman had just turned off the water supply to the toilet so it was not able to be flushed, although she continued to use it.

From 2000 until 2010 the GP prescribed a nutritional supplement without taking adequate steps to assess the woman's weight or nutritional status. When the woman needed a repeat prescription or delivery she would telephone the GP or her practice.

In 2010, after it was discovered that the woman was living in conditions of extreme squalor, the GP certified that the woman was incompetent with regard to decisions about her personal care and welfare.

It was held that the GP failed to assess the woman's competence. In addition, the GP assumed responsibility for the woman but failed to ensure the provision of adequate care and support. Accordingly, the GP failed to provide services of reasonable care and skill, and breached Right 4(1). By prescribing for a patient she had not reviewed for an extended period, and forming a relationship that went well beyond the normal doctor-patient relationship and involved her acting as the gate-keeper for any contact by support services, the GP did not comply with professional standards and breached Right 4(2). By failing to keep adequate records, the GP also breached Right 4(2).

Adverse comment was made about the psychiatrist providing support for the GP's decisions when he had not seen the woman since 1999.