

**Disability service provider's management of a relationship between a caregiver and client  
(11HDC01045, 26 June 2013)**

*Health care assistant ~ Caregiver ~ Hospital ~ Home care ~ Health and Disability Services Standard 8134:2008 ~ Professional boundaries ~ Supervision and training ~ Rights 4(2), 4(4)*

This case relates to the standard of disability services provided to a 58-year-old man who had tetraplegia. In 2006, he was admitted to a hospital providing residential care because he was experiencing complications of his tetraplegia. The hospital is operated by a trust (the Trust).

The following year the man moved back home, as his condition had improved. A health care assistant from the hospital became the man's caregiver in his home and moved into his house with her two daughters. She remained employed by the Trust.

Until 2008, nurses visited the man once a week to care for a wound (pressure sore). In addition, during 2007, another caregiver from the hospital visited either monthly or fortnightly and, following that caregiver's retirement in 2009, an enrolled nurse visited the man occasionally.

Prior to March 2010 there was no care plan for the man nor did the hospital have any policy about maintaining professional boundaries. The caregiver took no leave, had no respite from caring, and worked "24/7" constantly, even if she was sick. Although payment for annual leave was added to her wages, no arrangements were made to enable her to take leave.

The man and the caregiver developed personal feelings for one another and commenced a relationship in 2009. By March 2010, staff at the hospital knew about the relationship. In 2011, the man died. After his death his sister complained about the care the caregiver had provided and alleged that the man had been coerced and exploited.

It was held that there was no evidence that the caregiver failed to provide adequate disability services to the man or that she exploited or coerced him. While in many cases it would be ethically inappropriate for such a relationship to exist between a consumer and paid caregiver, in the circumstances of this case, it was found that the caregiver did not breach the Code.

The Trust failed to supervise the caregiver adequately, failed to provide her with sufficient orientation and training, and did not discuss ethical issues and professional responsibilities with her when it became aware of her relationship with the man. The Trust took insufficient steps to minimise the risk of harm to the man and, accordingly, breached Right 4(4).

The Health and Disability Services Standard 8134:2008 requires that providers ensure that consumers are not at risk of abuse and/or neglect. Services must have policies and procedures to ensure that consumers are not subjected to exploitation, and services must identify, document and communicate potential risks. The Trust did not comply with those standards because it did not have such policies and procedures, and it

failed to identify and document the potential risks to the man and communicate these to him and the caregiver. The Trust failed to comply with professional standards, and so breached Right 4(2) of the Code.