Inappropriate relationship with patient (12HDC00027, 12 December 2013)

Registered nurse ~ Mental health unit ~ District health board ~ Professional boundaries ~ Sexual exploitation ~ Rights 2, 4(2)

A 19-year-old woman was admitted to a public hospital's mental health inpatient unit. She had a history of depression and anxiety, with episodes of self-harm and suicidal ideation. During her two-month admission, she was nursed on a number of occasions by a male nurse in his mid-30s.

A week prior to the young woman's discharge, she and the nurse began communicating by text. In the fortnight following her discharge, they met up on at least two occasions. The young woman returned to the city in which she had been living prior to her hospital admission. She and the nurse maintained regular communication by text. The texts became increasingly personal and sexual in nature. The nurse and the young woman visited one another and the relationship became physically intimate. They had sexual intercourse for the first time less than six weeks after the young woman's discharge from hospital.

Six months later, the young woman told her mental health key worker that her boyfriend had been her nurse.

It was held that the nature of the nurse's communications with the young woman while she was still an inpatient was inappropriate. He contacted her and met up with her within days of her discharge, and entered into a sexual relationship with her less than six weeks after her discharge from hospital, which was also inappropriate. The nurse failed to comply with professional and ethical standards, and his behaviour was sexually exploitative. Accordingly, the nurse breached Rights 2 and 4(2). The nurse was referred to the Director of Proceedings. The Director of Proceedings laid a charge before the Health Practitioners Disciplinary Tribunal. Professional misconduct was made out and the provider's registration was cancelled.

The district health board was not vicariously liable for the nurse's breaches of the Code. However, it was concerning that, after the nurse had disclosed concerns about his own mental well-being, a more formal process was not followed to respond to those concerns.