DISCIPLINE COMMITTEE
OF THE COLLEGE OF NURSES OF ONTARIO

PANEL:
Nancy Sears, RN Chairperson
Cheryl Beemer, RN Member
April Plumton, RPN Member
Joan King Public Member
Debra Mattina Public Member

BETWEEN:

COLLEGE OF NURSES OF ONTARIO ) MEGAN SHORTREED for
- and - ) College of Nurses of Ontario
 PAUL WOOD ) ELIZABETH MCINTYRE for
 Registration No. 9884651 ) Paul Wood
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 ) Heard: December 6, 2012

DECISION AND REASONS

This matter came on for hearing before a panel of the Discipline Committee on December 6, 2012 at the College of Nurses of Ontario (“the College”) at Toronto.

Preliminary Motion

Counsel for the College sought an order, under Section 45(3) of the Health Professions Procedural Code (the “Code”) banning publication of the identity of the [Client] and/or any identifying information about [the Client]. Counsel submitted that grounds for this Motion were that disclosure of such information is personal and may unnecessarily expose the [ ] health care history of the [Client], who is a vulnerable person. Further, Counsel stated that the [Client] has expressed concerns for [the Client’s] safety.

Counsel for the Member had no objections to this Motion.

Decision on the Preliminary Motion

The panel decided to grant the relief sought by the College, and ordered a ban on the publication of the identity of [the Client] and/or any identifying information about the [Client].
The Allegations

The allegations against Paul Wood (the “Member”) as stated in the Notice of Hearing dated September 19, 2012, [ ] are as follows.

IT IS ALLEGED THAT:

1. You have committed an act of professional misconduct as provided by subsection 51(1)(c) of the Health Professions Procedural Code of the Nursing Act, 1991, S.O. 1991, c. 32, as amended, and defined in subsection 1(1) of Ontario Regulation 799/93, in that while working as a Registered Nurse for [the Hospital], you contravened a standard or practice of the profession or failed to meet the standards of practice of the profession as follows:
   a. between 2006 and 2009, you failed to maintain the boundaries of the nurse-client relationship in respect of [the Client]; and/or

2. You have committed an act of professional misconduct as provided by subsection 51(1)(b.1) of the Health Professions Procedural Code of the Nursing Act, 1991, S.O. 1991, c. 32, as amended, in that while working as a Registered Nurse for [the Hospital], you sexually abused a client, as follows:
   a. between September 2008 and November 2009, you engaged in sexual intercourse, oral sex or other forms of physical sexual relations or touching of a sexual nature with [the Client]; and/or

3. You have committed an act of professional misconduct as provided by subsection 51(1)(c) of the Health Professions Procedural Code of the Nursing Act, 1991, S.O. 1991, c. 32, as amended, and defined in subsection 1(37) of Ontario Regulation 799/93, in that while employed as a Registered Nurse for [the Hospital], you engaged in conduct or performed an act, relevant to the practice of nursing, that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional, as follows:
   a. between 2006 and 2009, you failed to maintain the boundaries of the nurse-client relationship in respect of [the Client]; and/or
   b. between September 2008 and November 2009, you engaged in sexual intercourse, oral sex or other forms of physical sexual relations or touching of a sexual nature with [the Client].

Counsel for the College advised the panel that the College was not calling any evidence with respect to the allegations set out in paragraphs 2(a) and 3(b) of the Notice of Hearing.
Member’s Plea

Paul Wood admitted the allegations set out in paragraphs numbered 1(a) and 3(a) and denied the allegations set out in the paragraphs numbered 2(a) and 3(b) in the Notice of Hearing. The panel received a written plea inquiry which was signed by the Member. The panel also conducted an oral plea inquiry and was satisfied that the Member’s admissions were voluntary, informed and unequivocal.

Agreed Statement of Facts

Counsel for the College advised the panel that agreement had been reached on the facts and introduced an Agreed Statement of Facts [ ] which provided as follows;

THE MEMBER

1. Paul Wood (the “Member”) was registered with the College of Nurses of Ontario (the “College”) as a Registered Nurse (“RN”) on July 23, 1998. He has a Registered Nurses Diploma [ ] (1998) and a Health Science Foundation Certificate (1994).

2. The Member has worked in psychiatric and mental health nursing since 1998.

3. In 2005, he began working as an RN at [the Hospital], both as an RN [ ] and as a Crisis Worker [ ].

4. The Member has no prior history of discipline with the College.

THE HOSPITAL

5. The Hospital is located in [ ] Ontario. It is a full-service community hospital which provides regional programs as well as surgical and medical services.

6. The Hospital’s Mental Health Services provides assessment, treatment and ongoing support to clients 16 years of age and older with addictions and mental health problems. The components of the Hospital’s Mental Health Services include:

   • a locked In-Patient Unit [ ],
   • [ ] (phone line staffed 24 hours per day),
   • Acute Out-Patient Services and Day Hospital, and
   • Community Mental Health [ ] counselling services.

THE CLIENT

7. [ ].
8. Prior to [ ] admissions at the Hospital, from [the] teenage years, [the Client] had a long history of mental health issues, [ ]. [The Client] was emotionally and physically abused by [ ] adoptive parents, the Children’s Aid Society was involved, and [the Client] lived in a number of foster homes. [The Client] was sexually molested [ ] and was the victim of a brutal rape [at the age of] 17 [ ]. [The Client’s] first psychiatric hospitalization was in [the Client’s] late teens.

9. [The Client] was a vulnerable mental health [client] who relied on the Hospital’s Mental Health programs for [ ] care.

10. [The Client] was first admitted to the Hospital in [ ] 2006 as a voluntary [client and] diagnosed [ ] as having Obsessive Compulsive Disorder and Bipolar Disorder at that time.

11. Between 2006 and 2010, [the Client] was a client of the Hospital’s Mental Health Services [ ].

12. [ ].

13. [There was] overlap of [the Client]’s admissions and the Member’s shifts at the Hospital [ ].

14. The only record of direct [client] care provided by the Member to [the Client] was charted in [the Client]’s health record on August 11, 2008, and January 8, 2009. [ ]

15. The Member admits that he was aware of [the Client]’s long-standing relationship with the Hospital’s Mental Health programs, and the likelihood of [the Client’s] continuing need to access those programs in the future.

INCIDENTS RELEVANT TO ALLEGATIONS OF PROFESSIONAL MISCONDUCT

16. The Member engaged in an inappropriate personal and social relationship with [the Client], commencing in the Fall of 2008. This was within weeks of the Member’s Crisis Assessment of [the Client] [in] August [ ] 2008 [ ]

17. The Member’s social contact with [the Client] included:
   a. giving [ ] his personal cell phone number, and calling [the Client’s] on [ ] personal cell phone and home phone numbers;
   b. repeated contact by telephone, in person and by text messages;
   c. text message exchanges in August and September 2009, [with reference to a nickname];
d. meeting [the Client] at parties and bars between 2008 and 2010, an intensification of their relationship, and at least two encounters where the Member was in [the Client]'s home;

e. the Member tried to set [the Client] up with his friends; and

f. providing information to [the Client] about the Member’s personal details, including his marriage, his family, his friends, his cars, his investments, and his health history.

18. The Member did not disclose that he was having an ongoing personal relationship with [the Client] between 2008 and 2010 to the health care team at the Hospital.

19. The Member accessed [the Client]'s electronic health records on [three occasions in] September [] 2008 when he had no therapeutic reason to do so.

20. [The Client] perceived the relationship as both a private counselling and as a romantic relationship.

21. When the relationship ended in 2010, [the Client]'s mental health was affected, and [the Client] felt that [the Client] could not seek ongoing therapy at the Hospital because [the Client] could not disclose the relationship with Mr. Wood or its breakdown to [the] health care team at that hospital. [The Client] moved [ ] to seek treatment [ ]. The change of health care providers was detrimental to [the Client’s] treatment progress.

ADMISSIONS OF PROFESSIONAL MISCONDUCT

22. The Member admits that he breached the standards of practice of the profession with respect to the therapeutic nurse-client relationship, as set out in the opinion of [an expert], but not in respect of any alleged sexual relationship.

23. The Member further admits that he engaged in disgraceful, dishonourable and unprofessional conduct.

24. The Member admits that he committed the acts of professional misconduct as alleged in paragraphs 1(a) and 3(a) of the Notice of Hearing, and in particular that he failed to meet the standards of practice of the profession, and that his conduct was disgraceful, dishonourable and unprofessional.

25. The College leads no evidence and seeks no findings in respect of Allegations 2(a) and 3(b) of the Notice of Hearing.

26. If [the Client] were to testify, [the Client] would say that [the Client] and the Member had a sexual relationship between September 2008 and November 2009. If the Member were to testify, he would deny any sexual relationship. The parties are not asking the Panel to determine this issue.
27. The Member has agreed to reimburse the College in the amount of $5000 for incurred expenses in preparation for this hearing, including those incurred in preparing the joint book of documents, obtaining medical records at the request of the defence, and obtaining the expert report [ ].

Decision

The panel considered the Agreed Statement of Facts and finds that the facts and the Member’s plea support findings of professional misconduct and, in particular, finds that the Member committed an act of professional misconduct as alleged in paragraphs 1(a) and 3(a) of the Notice of Hearing in that, between 2006 and 2009, he failed to maintain the boundaries of the nurse-client relationship in respect of [the Client].

As to allegations 2(a) and 3(b), the College did not call any evidence in respect of them. Accordingly, the panel dismisses allegations 2(a) and 3(b) in the Notice of Hearing.

Reasons for Decision

The Agreed Statement of Facts was clear, supported by the Member’s plea, and accepted by the panel.

With regards to the allegation of disgraceful, dishonourable and unprofessional conduct, the panel accepted the Member’s plea that he engaged in conduct relevant to the practice of nursing, that having regard to all the circumstances, would reasonably be regarded by members of the profession as disgraceful, dishonourable and unprofessional.

Penalty

Counsel for the College advised the panel that a Joint Submission as to Order had been agreed upon. The Joint Submission as to Order provides as follows:

1. Requiring the Member to appear before the Panel to be reprimanded within three (3) months of the date of this Order.

Penalty Submissions

Counsel for the College submitted that the Member has entered into an Undertaking with the College. The effect of this Undertaking is that the Member will permanently resign as a member of the College and will not contact the [Client] or [the Client’s] family.

She further submitted that the Joint Submission on Order addresses the need to protect the public interest. Therefore, no other sanctions are required. General deterrence is achieved through publication of this decision and the general membership’s reflections on the Undertaking which will be published in the College’s register.
Counsel for the Member submitted that the Member agrees with the proposed order and encouraged the panel to accept it. She described it as a deeply considered decision with the appropriate result.

**Penalty Decision**

The panel accepts the Joint Submission as to Order and accordingly orders the Member to appear before the Panel to be reprimanded within three (3) months of the date of this Order.

**Reasons for Penalty Decision**

The panel concluded that the proposed penalty is reasonable and in the public interest. The Member has cooperated with the College and, by agreeing to the facts and a proposed penalty, has accepted responsibility for his actions.

Given that the Member resigned his certificate of registration dated today, the panel finds that sanctions addressing remediation and specific deterrence are not required.

General deterrence will be met by means of the reprimand and by the effect of the Undertaking.

I, Nancy Sears RN sign this decision and reasons for the decision as Chairperson of this Discipline panel and on behalf of the members of the Discipline panel as listed below:

____________________________  _______________________
Chairperson                  Date

Panel Members:

Cheryl Beemer, RN
April Plumton, RPN
Joan King
Debra Mattina