

IN THE MATTER OF: *The Registered Nurses Act, 1988*, and Mary (Lorraine) Wilson, RN #30244.

NOTICE OF HEARING OF COMPLAINT

TO: Mary (Lorraine) Wilson

TAKE NOTICE that the Investigations Committee of the Saskatchewan Registered Nurses' Association ["SRNA"] (operating as the College of Registered Nurses of Saskatchewan) is recommending pursuant to section 28(3)(a) of *The Registered Nurses Act, 1988*, SS c R-12.2 [the "*Act*"] that the Discipline Committee hear and determine the complaint that you are guilty of professional incompetence and/or professional misconduct which occurred while you were on the Register and a member of the SRNA and held a license from the SRNA to practice registered nursing in Saskatchewan. The Discipline Committee, established in accordance with the *Act* and Bylaws will meet on May 27, 2022 at 9 a.m. to conduct a virtual hearing [the "Hearing"].

The particulars of your alleged professional incompetence and/or professional misconduct are set out in Appendix A which is attached to and forms part of this Notice of Hearing of Complaint.

AND FURTHER TAKE NOTICE THAT where the Discipline Committee finds you guilty of professional misconduct or professional incompetence, pursuant to section 31(1) of the *Act*, the Discipline Committee may:

- (a) order that the nurse be expelled from the association and that the nurse's name be struck from the register;**
- (b) order that the nurse be suspended from the association for a specified period;**
- (c) order that the nurse may continue to practise only under conditions specified in the order which may include, but are not restricted to, an order that the nurse:**
 - (i) not do specified types of work;**
 - (ii) successfully complete specified classes or courses of instruction;**
 - (iii) obtain treatment, counselling or both;**

- (d) reprimand the nurse; or
- (e) make any other order that to it seems just.

AND pursuant to section 31(2) of the *Act*, in addition to any order made pursuant to (1), the Discipline Committee may order:

- (a) that the nurse pay to the association within a fixed period:
 - (i) a fine in a specified amount;
 - (ii) the costs of the inquiry and hearing into the nurse's conduct and related costs, including the expenses of the investigation committee and the discipline committee; or
 - (iii) both of the things mentioned in subclauses (i) and (ii); and
- (b) where a nurse fails to make payment in accordance with an order pursuant to clause (a), that the nurse be suspended from the association.

AND FURTHER TAKE NOTICE THAT pursuant to section 31(3) of the *Act*, the Discipline Committee will be sending a copy of an order made pursuant 31(1) and 31(2) to you and to the person who made the report against you.

AND FURTHER TAKE NOTICE THAT at your own expense, you may choose to be represented by counsel or an agent at the Hearing before the Discipline Committee and have the right to call evidence and examine or cross-examine witnesses pursuant to section 30(5) and (7) of the *Act*.

AND FURTHER TAKE NOTICE THAT if you fail to attend the Hearing, the Discipline Committee may, on proof of service of this Notice on you and/or your legal counsel, proceed with the Hearing in your absence pursuant to section 30(9) of the *Act*.

If you wish to admit the allegations contained in this Notice of Hearing, you and your legal counsel should contact legal counsel for the Investigation Committee of the SRNA at the earliest opportunity in order to implement appropriate procedure.

DATED at Regina, Saskatchewan, this 6th day of April, 2022.



Cindy Smith, RN, Executive Director
Saskatchewan Registered Nurses
Association (operating as the "College of
Registered Nurses of Saskatchewan")

APPENDIX A
Charges & Particulars

It is alleged that:

1. Between January 1st, 2015 and September 30th, 2019, while you held the elected position of Local President of the Saskatchewan Union of Nurses Local 151, you did commit the criminal offence of fraud exceeding \$5,000.00 pursuant to section 380(1)(a) of the *Criminal Code of Canada* by defrauding the Saskatchewan Union of Nurses Local 151 of \$21,899.60 and were convicted of this charge before a provincial court Judge on October 5, 2021. You are therefore guilty of professional misconduct as follows:
 - (1) pursuant to section 26(1) of *The Registered Nurses Act*, 1988, SS c R-12.2 SS in that you engaged in conduct that is contrary to the best interests of the public or nurses or tends to harm the standing of the profession;
 - (2) pursuant to section 26(2)(c) of *The Registered Nurses Act*, 1988, R-12.2 SS c R-12.2, by inappropriately using your nurse's professional status for personal gain;
 - (3) pursuant to section 26(2)(l) of *The Registered Nurses Act*, 1988, R-12.2 SS c R-12.2, by failing to comply with the *Code of Ethics for Registered Nurses*;
 - (4) pursuant to section 26(2)(q) of *The Registered Nurses Act*, 1988, R-12.2 SS c R-12.2 for contravening SRNA Bylaws.

BYLAWS, CODE OF ETHICS, PRACTICE STANDARDS & COMPETENCIES CONTRAVENED:

SRNA BYLAWS (2014) (2016) (2017) (2018)

BYLAW XIV, SECTION 1(1) - adoption of Code of Ethics of the Association

BYLAW XV, SECTION 1(1) - adoption of Standards and Competencies of the Association

BYLAW IV, SECTION 2(3)(a) and (b) - obligations of practicing member to adhere to Code of Ethics, Standards and Competencies.

SRNA BYLAWS (2019)

BYLAW XIV, SECTION 1(1) (adoption of Code of Ethics of the Association)

BYLAW IV, SECTION 2(3)(a) (obligations of practicing member to adhere to Code of Ethics)

CODE OF ETHICS FOR REGISTERED NURSES (2008)

A. Providing Safe, Compassionate, Competent and Ethical Care

Nurses provide safe, compassionate, competent and ethical care.

Ethical responsibilities:

1. Nurses have a responsibility to conduct themselves according to the ethical responsibilities outlined in this document and in practice standards in what they do and how they interact with persons receiving care as well as with families, communities, groups, populations and other members of the health-care team.
3. Nurses build trustworthy relationships as the foundation of meaningful communication, recognizing that building these relationships involves a conscious effort. Such relationships are critical to understanding people's needs and concerns.

F. Promoting Justice

Nurses uphold principles of justice by safeguarding human rights, equity and fairness and by promoting the public good.

Ethical Responsibilities:

5. Nurses support a climate of trust that sponsors openness, encourages questioning the status quo and supports those who speak out to address concerns in good faith (e.g., **whistle-blowing**).

G. Being Accountable

Nurses are accountable for their actions and answerable for their practice.

Ethical responsibilities:

1. Nurses, as members of a self-regulating profession, practise according to the values and responsibilities in the *Code Of Ethics for Registered Nurses* and in keeping with the professional standards, laws and regulations supporting ethical practice.

2. Nurses are honest and practise with integrity in all of their professional interactions.

CODE OF ETHICS FOR REGISTERED NURSES (2017) – *effective September 14, 2018.*

F. Promoting Justice

Nurses uphold principles of justice by safeguarding human rights, equity and fairness and by promoting the public good.

Ethical Responsibilities:

8. Nurses work collaboratively to develop a moral community. As part of this community, all nurses acknowledge their responsibility to contribute to positive and healthy practice environments. Nurses support a climate of trust that sponsors openness, encourages the act of questioning the status quo and supports those who speak out in good faith to address concerns (e.g., whistle-blowing). Nurses protect whistle-blowers who have provided reasonable grounds for their concerns.

G. Being Accountable

Nurses are accountable for their actions and answerable for their practice.

Ethical responsibilities:

1. Nurses, as members of a self-regulating profession, practise according to the values and responsibilities in the *Code* and in keeping with the professional standards, laws and regulations supporting ethical practice.
2. Nurses are honest and practise with integrity in all of their professional interactions. Nurses represent themselves clearly with respect to name, title and role.

SRNA STANDARDS AND FOUNDATION COMPETENCIES FOR THE PRACTICE OF REGISTERED NURSES (2013) – *effective until October 30, 2019*

Standard I – Professional Responsibility and Accountability

The registered nurse consistently demonstrates professional conduct and competence while practicing in accordance with the SRNA standards for registered nursing practice and CNA's *Code of Ethics for Registered Nurses*. Further, the registered nurse demonstrates that the primary duty is to the client to ensure safe, competent, ethical registered nursing care.

Foundation Competencies

The registered nurse:

1. Is accountable and accepts responsibility for own actions and decisions.
4. Demonstrates professional presence and models professional behavior.
25. Demonstrates professional leadership by:
 - a. building relationships and trust;
 - b. creating an empowering environment;
 - [...]
 - e. balancing competing values and priorities.

Standard III – Ethical Practice

The registered nurse demonstrates competence in professional judgment and practice decisions by applying the principles in the current CNA *Code of Ethics for Registered Nurses*. The registered nurse engages in critical inquiry to inform clinical decision-making, establishes therapeutic, caring, and culturally safe relationships with clients and the health care team.

Foundation Competencies

The registered nurse:

62. Practises in accordance with the current CNA *Code of Ethics for Registered Nurses* and the accompanying responsibility statements.
70. Uses an ethical and reasoned decision-making process to address situations of ethical distress and dilemmas.