

**DISCIPLINE COMMITTEE OF THE ONTARIO COLLEGE OF SOCIAL WORKERS
AND SOCIAL SERVICE WORKERS**

PANEL:	Rita Wiltsie	Chair, Professional Member
	Angele Desormeau	Professional Member
	Lisa Foster	Public Member

BETWEEN:

ONTARIO COLLEGE OF SOCIAL WORKERS AND SOCIAL SERVICE WORKERS)
) M. Jill Dougherty for Ontario
) College of Social Workers
) and Social Service Workers
-and-)
)
)
SHANA BARNIM) Jennifer Chapman for
) Shana Barnim
)
)
)
) Johanna Braden,
) Independent Legal Counsel

Heard: June 6, 2017

DECISION AND REASONS FOR DECISION

This matter came on for hearing before a panel of the Discipline Committee (the “Panel”) on June 6, 2017 at the Ontario College of Social Workers and Social Service Workers (the “College”).

The Allegations

In the Notice of Hearing dated December 20, 2016, Shana Barnim (the “Member”) is alleged to be guilty of professional misconduct pursuant to subsection 26(2) of the *Social Work and Social Service Work Act* (the “Act”) in that she is alleged to have engaged in conduct that contravenes the Act, Ontario Regulation 384/00 (the “Professional Misconduct Regulation”), Schedule “A” to By-law No. 66 of the Ontario College of Social Workers and Social Service Workers, being the Ontario College of Social Workers and Social Service Workers Code of Ethics (the “Code of Ethics”), and Schedule “B” to By-law No. 66 of the Ontario College of Social Workers and

Social Service Workers, being the Ontario College of Social Workers and Social Service Workers Standards of Practice Handbook (the “Handbook”).

The particulars of the allegations made against the Member are as follows.

1. At all relevant times, you were registered as a social worker with the Ontario College of Social Workers and Social Service Workers (the “College”);
2. From on or about September 9, 2014 to on or about March 10, 2015, you were employed at the [Agency] in [City], Ontario as an academic placement/ practicum through the [name of university], where you were pursuing a Masters degree in social work;
3. Between on or about September 9, 2014 until on or about March 10, 2014, you accessed and/or reviewed the electronic medical records of 143 patients of the [Agency] for whom you were not involved in providing care, without patient consent or authorization to do so and/or in a manner that was not permitted under the relevant policies of the [Agency] and/or the policies of the [name of university].
4. On or about March 10, 2014, your employment and academic placement at the [Agency] was terminated after an audit conducted by the [Agency] disclosed the unauthorized access to patient medical records referenced in paragraph 3 above.

It is alleged that by reason of engaging in some or all of the conduct outlined above, you are guilty of professional misconduct as set out in section 26(2)(a) and (c) of the *Act*:

- (a) In that you violated Section 2.2 of the Professional Misconduct Regulation and Principle IV of the Handbook (commented on in Interpretations 4.2.1 and 4.3.1) by failing to manage client records in a manner that protects client privacy and in accordance with applicable privacy legislation, failing to comply with the requirements regarding access to client information in a record as set out in applicable privacy and other legislation and by failing to acquire and maintain an understanding of the organization’s policies regarding access to information in a record;
- (b) In that you violated Section 2.2 of the Professional Misconduct Regulation and Principle V of the Handbook (commented on in Interpretations 5.1 and 5.2) by failing to respect the privacy of clients by complying with applicable privacy and other legislation, failing to obtain consent to the use of client information and failing to acquire and maintain a thorough understanding of the organization policies and practices relating to the management of client information;
- (c) In that you violated Section 2.29 of the Professional Misconduct Regulation by contravening a federal, provincial or territorial law or a

municipal by-law (namely, the *Personal Health Information Protection Act, 2004*) where

- (i) the purpose of the law or by-law is to protect public health, or
 - (ii) the contravention is relevant to the member's suitability to practice;
- (d) In that you violated Section 2.36 of the Professional Misconduct Regulation by engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional.

Member's Position

The Member admitted allegations (a), (b), (c) and (d) of the Notice of Hearing. The Panel conducted an oral plea inquiry and was satisfied that the Member's admissions were voluntary, informed and unequivocal.

The Evidence

The evidence was tendered by way of an Agreed Statement of Facts, which set out as follows.

Background

1. Now and at all times relevant to the allegations, Shana Barnim (the "Member") was a registered social work member of the Ontario College of Social Workers and Social Service Workers (the "College"). At all material times, she held a Bachelor of Social Work degree and was registered in the Masters of Social Work program at the [name of University].
2. From September 9, 2014 up to and including March 10, 2015, the Member was engaged at the [Agency] in an academic placement/practicum through the [name of university]. Her duties during her placement were to provide professional social work services to patients assigned to her by the [Agency].

The Electronic Medical Record System

3. At all relevant times, the [Agency] maintained an electronic medical record ("EMR") system containing each patient's entire medical record. The [Agency's] EMR system also contained personal health information of patients who received treatment at the [name of hospital].

4. The Member was permitted to access the information in the EMR if she needed access to that information to do her job (for example, to review her patients' files and to make notes about the counselling she provided to patients). During her placement, the Member was assigned to provide social work services to 47 patients. She was not permitted to access the personal health information of any individual to whom she was not providing care or if it was not necessary to access the information to perform her duties.
5. The Member received training in the use of the EMR when she joined the [Agency]. The Executive Director of the [Agency] provided the Member with some initial training on the EMR, as well as a binder containing information to assist the Member in learning how to use the EMR system. The Executive Director states that she told the Member that she was not to access the personal health information of any patients to whom the Member was not providing care, or to access the charts of the Member's own family members. Due to an oversight, the Member did not sign a confidentiality agreement with the [Agency].
6. At all material times, the [Agency] was a health information custodian under the *Personal Health Information Protection Act, 2004*, S.O. 2004, c. 3, Sched. A ("PHIPA"). The Member was the [Agency's] agent for the purposes of using, disclosing, and collecting personal health information under PHIPA. As an agent of a health information custodian, pursuant to s. 17(2) of PHIPA, the Member was prohibited from collecting, using, disclosing, retaining, or disposing of personal health information on the [Agency's] behalf unless she was using it in the course of her duties and the [Agency] permitted her as its agent to do so.
7. When she joined the [Agency], the Member was assigned a unique username for the EMR system, and she selected a password that was known only by her. Because of the manner in which the EMR was set up, when the Member logged onto her [Agency] computer using her username and password, she had the ability to access all of the information contained in the EMR system. Any accesses to the information in the EMR system were electronically tracked by the EMR system and could be audited and reviewed by printing a transaction log report. The report would identify the patient whose information was accessed, the time of the access, the system user who accessed it, and the IP address of the computer from which the record was accessed, among other information.

The Member's Unauthorized Accessing of Personal Health Information

8. On February 25, 2015, the Executive Director of the [Agency] learned that a patient had expressed concerns that staff seemed to know more about the patient's medical condition than they should, given that the patient had only provided this information to his/her physician. In response to this concern, the Executive Director conducted an electronic audit of the patient's medical records in the EMR system to determine who had accessed the patient's records. The audit revealed that four [Agency] employees had accessed the patient's record. The Executive Director subsequently determined that the Member was the only person who had accessed the patient's EMR without a reason associated with her job duties as a social worker.

9. After conducting the electronic audit, the Executive Director sent an email to all [Agency] employees notifying them that a patient's record had been inappropriately accessed by staff who were not within the patient's circle of care.
10. On March 5, 2015, the Member and her placement supervisor discussed the Executive Director's email. In the course of that conversation, the placement supervisor informed the Member that further audits of patient files on the EMR system would be conducted, and that the placement supervisor's EMR would be the next one audited. In response, the Member became upset, and revealed that she had accessed the placement supervisor's EMR, her own EMR, and the EMRs of her husband and her children.
11. The same day, the Executive Director conducted an electronic audit of all of the Member's accesses to the EMR system from September 9, 2014, up to and including March 5, 2015. The audit showed that during that timeframe, the Member had used the EMR system to access the personal health information of 139 individuals who were not her patients, and whose information she had no authority to access. The Member accessed the personal health information of some of these individuals on various dates, including one individual whose personal health information she accessed on 13 separate dates. The Member was not permitted by the [Agency] to access the personal health information of these 139 individuals.
12. On March 10, 2015, the Executive Director, the Member's placement supervisor, and a [Agency] physician met with the Member to discuss why she had accessed the personal health information of these 139 individuals without authority. The Member indicated that she had thought she was able to access any patient information in the EMR system for learning and to conduct research for a cancer course she was taking at [name of university]. When the Member was questioned about why she had accessed the personal health information of particular individuals, including friends, her family members, high profile members of the community, emergency patients at the local hospital who had not been seen at the [Agency], co-workers at the [Agency], and family members of her patients, the Member offered no response.
13. On March 10, 2015, the Member's employment and academic placement at the [Agency] was terminated. She was subsequently suspended from [name of university].

The Provincial Offences Act Proceedings

14. On March 11, 2015, the Executive Director reported the audit findings relating to the Member's accesses to the Information and Privacy Commissioner of Ontario (the "IPC"). The IPC subsequently referred the matter to the Attorney General for Ontario. The Ontario Provincial Police (the "OPP") investigated the allegations. Charges under PHIPA were ultimately laid against the Member.
15. At the time charges were laid against the Member, a six-month limitation period applied for the laying of charges under PHIPA. Accordingly, the Member could only be charged for offences under PHIPA that occurred during the period of January 29, 2015 up to and

including March 5, 2015. Many of the Member's unauthorized accesses to personal health information occurred outside of that time frame.

16. During the time period that was covered by the charges, the Member wilfully used the personal health information of 36 individuals by accessing their EMR records without authorization. The Member's unauthorized accessing, viewing, and reading of patient information constituted a "use" of that personal health information under PHIPA.
17. The Member pleaded guilty to one charge under the PHIPA in respect of her unauthorized access to 5 individuals whose information she accessed without authorization on February 24, 2015., The remaining seven charges were withdrawn. As part of that guilty plea, the Member entered into an Agreed Statement of Facts in which she admitted to accessing the personal health information of 139 individuals without having the authority of the [Agency] to do so, starting on the first day of her placement on September 9, 2014. A copy of that Agreed Statement of Facts (which sets out in greater detail the improper access to personal health information admitted herein and forms part of this Agreed Statement of Facts) is attached as Appendix "A".
18. At the Member's sentencing hearing, several individuals whose records were improperly accessed by the Member filed victim impact statements. They described feeling violated and betrayed, losing trust in their health care community, and fearing misuse of the information. The Member was sentenced to a \$20,000 fine. A copy of the transcript of proceedings on the Member's guilty plea and sentencing hearing is attached as Appendix "B".
19. There is no evidence indicating that the Member did anything further with the personal health information she accessed. However, the Member acknowledges that she was not authorized to access the personal health information of the 139 individuals in question and that it was an offence under PHIPA to do so. She also acknowledges that she was not permitted to access these records under the [Agency's] policies and practices, or under the policies and practices applicable to her academic placement/practicum through the [name of university].

Admissions of Professional Misconduct

20. The Member admits that by reason of engaging in the conduct outlined in this Agreed Statement of Facts (including the Appendices hereto), she is guilty of professional misconduct as set out in section 26(2)(a) and (c) of the *Social Work and Social Service Work Act*:
 - a. In that she violated Section 2.2 of the Professional Misconduct Regulation and Principle IV of the Handbook (commented on in Interpretations 4.2.1 and 4.3.1) by failing to manage client records in a manner that protects client privacy and in accordance with applicable privacy legislation, failing to comply with the requirements regarding access to client information in a record as set out in applicable privacy and other

legislation and by failing to acquire and maintain an understanding of the organization's policies regarding access to information in a record;

- b. In that she violated Section 2.2 of the Professional Misconduct Regulation and Principle V of the Handbook (commented on in Interpretations 5.1 and 5.2) by failing to respect the privacy of clients by complying with applicable privacy and other legislation, failing to obtain consent to the use of client information and failing to acquire and maintain a thorough understanding of the organization policies and practices relating to the management of client information;
- c. In that she violated Section 2.29 of the Professional Misconduct Regulation by contravening a federal, provincial or territorial law or a municipal by-law (namely, the *Personal Health Information Protection Act, 2004*) where
 - i. the purpose of the law or by-law is to protect public health, or
 - ii. the contravention is relevant to her suitability to practice; and
- d. In that she violated Section 2.36 of the Professional Misconduct Regulation by engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional.

Decision

Having considered the admissions of the Member, the evidence contained in the Agreed Statement of Fact and the submissions of counsel, the Panel finds that the Member committed professional misconduct as alleged in paragraphs (a), (b), (c) and (d) of the Notice of Hearing.

Reasons for Decision

The evidence was clear that the Member breached the privacy of clients, using her status as a social worker to do so. This constitutes professional misconduct in multiple ways. Not only did the Member break the law, she also undermined the trust the public has in social workers and other health care providers. The Member breached the most basic standards of practice, and contravened a law that is in place to protect public health and relevant to her suitability to practice. The Member brought disgrace to the profession by creating mistrust in the health care community. The Member also impacted the lives of 139 individuals by violating their privacy which was demonstrated through the impact statements made by those individuals affected. This would reasonably be regarded by members as disgraceful, dishonourable or unprofessional.

Penalty Submission

The parties were in agreement on the issue of penalty, and jointly proposed that this Panel make an order as follows:

1. The Member shall be reprimanded in person by the Discipline Committee and the fact and nature of the reprimand shall be recorded on the College's Register.

2. The Registrar shall be directed to suspend the Member's Certificate of Registration for a period of six (6) months, the first four (4) months of which shall be served commencing on the date of the Discipline Committee's Order herein. Upon completion of those first four (4) months of the suspension, the remaining two (2) months of the suspension shall be suspended for a period of two (2) years, commencing on the date of the Discipline Committee's Order herein. The remaining two (2) months of the suspension shall be remitted on the expiry of that two year period if (on or before the second anniversary of the Discipline Committee's Order herein) the Member provides evidence, satisfactory to the Registrar of the College, of compliance with the terms and conditions imposed under paragraphs 3, 4, and 5 below. For greater clarity, the terms and conditions imposed under paragraphs 3, 4, and 5 below will be binding on the Member regardless of the length of suspension served and the Member may not elect to serve the full suspension in place of performing those terms and conditions. If the Member fails to comply with the terms and conditions, the Registrar may refer the matter to the Executive Committee of the College. The Executive Committee, pursuant to its authority, may take such action as it deems appropriate, which may include referring to the Discipline Committee allegations of professional misconduct arising from any failure to comply with the terms and conditions.

3. The Registrar shall be directed to impose a term, condition and limitation on the Member's Certificate of Registration, to be recorded on the Register, requiring the Member to, at her own expense, participate in and successfully complete a ethics course, as prescribed by and acceptable to the College, and provide proof of such completion to the Registrar within four (4) months from the date of the Order.

4. The Registrar shall be directed to impose a term, condition and limitation on the Member's Certificate of Registration, to be recorded on the Register, requiring the Member to, at her own expense, meet with the Registrar and a regulatory expert designated by the Registrar within six (6) months from the date of the Order. Prior to the meeting, the Member shall review sections 1-3 of the College's Privacy Toolkit for Social Workers and Social Service Workers. The subject of the meeting with the Registrar and regulatory expert will include:

- (a) the Acts or omissions for which the Member was found to have committed professional misconduct;
- (b) the potential consequences of the misconduct to the Member's clients, colleagues, the profession, and herself;
- (c) strategies for preventing the misconduct from recurring; and

- (d) the development of a learning plan.

5. The Registrar shall be directed to impose a term, condition and limitation on the Member's Certificate of Registration, to be recorded on the Register, requiring the Member to, for a period of 12 months from the date the Member returns to the practice of social work:

- (a) notify any current or new employers of the Discipline Committee decision, and:

- (i) ensure the Registrar is notified of the name, address, and telephone number of all employer(s) within fifteen (15) days of commencing or resuming employment in any social work or social service work position;

- (ii) provide her employer(s) with a copy of:

1. the Discipline Committee's Order;
2. the Notice of Hearing;
3. the Agreed Statement of Facts;
4. this Joint Submission on Penalty; and
5. a copy of the Discipline Committee's Decisions and Reasons, once available;

- (iii) subject to paragraph 5(b), below, only practice social work or social service work for an employer who agrees to, and does, forward a report to the Registrar within fifteen (15) days of the commencement or resumption of the Member's employment in any social work or social service work position, confirming:

1. that they received a copy of the required documents;
2. that they agree to notify the Registrar immediately upon receipt of any information the Member has breached the Code of Ethics and Standards of Practice of the profession; and
3. that they agree to perform three random audits of the Member's accesses to personal health information;

- (b) In the event that the Member operates a private practice, the Member must, at her own expense, receive supervision of her social work practice from an approved member of a Regulated Health Profession for a period of two (2) years from the date at which the Member returns to practice from the mandatory four (4) month suspension. The Member must additionally provide to the approved supervisor (and any other approved supervisor) the Notice of Hearing and the

final decision of the Discipline Committee and must provide written confirmation, signed by the supervisor, of receipt of the documents to the Registrar within fifteen (15) days of returning to practice under supervision (and within 15 days of the approval of any subsequent supervisor). The Member must seek consent from prospective clients to share personal health information with her supervisor in order to allow the supervisor to review client files and engage in review.¹ The substance of the supervision with the approved supervisor shall include a review of the safeguards, protocols and practices the Member has implemented in her private practice with respect to the protection of confidentiality. The supervisor shall provide a report to the Registrar at twelve (12) months and at twenty-four (24) months confirming that the supervision took place and the nature of the supervision.²

6. The Member shall pay costs to the College in the amount of \$5,000 to be paid in accordance with the following schedule:

- (a) \$1500 to be paid within 60 days of the completion of the mandatory four (4) month period of suspension;
- (b) \$1500 to be paid within 120 days of the completion of the mandatory four (4) month period of suspension;
- (c) \$1000 to be paid within 180 days of the completion of the mandatory four (4) month period of suspension;
- (d) \$1000 to be paid within 240 days of the completion of the mandatory four (4) month period of suspension.

In the event that either of the first two payments are not made in accordance with the schedule, the entire amount outstanding becomes immediately due.

7. The Discipline Committee's finding and Order (or a summary thereof) shall be published, with identifying information concerning the Member included, in the College's official publication and on the College's website, and the results of the hearing shall be recorded on the Register and in any other media related format that is provided to the public and is deemed appropriate by the College.

The parties agreed that the aggravating factors in this case included the following.

¹ For greater clarity, while a client may refuse to sign a consent for the release of personal health information, the Member must maintain documentation, signed by the client, indicating that the request for consent was made and refused, for review by the supervisor.

² For clarity, all expenses relating to supervision, including the obligation to review College materials and to communicate with the College where necessary, are at the expense of the Member.

- The Member's breach of privacy was not an isolated incident, in fact this violation affected 139 individuals whose records were accessed without authorization.
- The Member breached the privacy of these individuals over a long period of time, dating from September 2014 – March 2015.
- The Member's conduct resulted in a conviction for a provincial offence. .
- The Member's conduct generated significant negative publicity and resulted in the Member's termination of employment and suspension from the University.
- The Member's conduct was not accidental or made in error, the Member accessed these files willfully.

The mitigating factors in this case include the following.

- The Member has no previous discipline record.
- The Member entered a plea of guilty and agreed with the penalty, demonstrating some insight into her actions and remorse for the harm she has caused.
- The agreements between the Member and the College avoid having to conduct a formal contested hearing.

The parties submitted that the proposed penalty met all the goals of penalty orders, providing for specific deterrence and general deterrence as well as rehabilitation and remediation of the Member. They submitted that the proposed penalty was well within the range of appropriate outcomes, and so should be accepted by the Panel.

Penalty Decision

Having considered the findings of professional misconduct, the evidence and the submissions of the parties, the Panel orders as follows.

1. The Member shall be reprimanded in person by the Discipline Committee and the fact and nature of the reprimand shall be recorded on the College's Register.
2. The Registrar is directed to suspend the Member's Certificate of Registration for a period of six (6) months, the first four (4) months of which shall be served commencing on the date of the Discipline Committee's Order herein. Upon completion of those first four (4) months of the suspension, the remaining two (2) months of the suspension shall be suspended for a period of two (2) years, commencing on the date of the Discipline Committee's Order herein. The remaining two (2) months of the suspension shall be remitted on the expiry of that two year period if (on or before the second anniversary of the Discipline Committee's Order herein) the Member provides evidence, satisfactory to the Registrar of the College, of compliance with the terms and conditions imposed under paragraphs 3, 4, and 5 below. For greater clarity, the terms and conditions imposed under paragraphs 3, 4, and 5 below will be binding on the Member regardless of the length of suspension served and the Member may not elect to serve the full suspension in place of performing those terms and conditions. If the Member fails to comply with the terms and conditions, the Registrar may refer the matter to the Executive Committee of the College. The Executive Committee, pursuant to its authority, may take such action as it

deems appropriate, which may include referring to the Discipline Committee allegations of professional misconduct arising from any failure to comply with the terms and conditions.

3. The Registrar is directed to impose a term, condition and limitation on the Member's Certificate of Registration, to be recorded on the Register, requiring the Member to, at her own expense, participate in and successfully complete a ethics course, as prescribed by and acceptable to the College, and provide proof of such completion to the Registrar within four (4) months from the date of the Order.

4. The Registrar is directed to impose a term, condition and limitation on the Member's Certificate of Registration, to be recorded on the Register, requiring the Member to, at her own expense, meet with the Registrar and a regulatory expert designated by the Registrar within six (6) months from the date of the Order. Prior to the meeting, the Member shall review sections 1-3 of the College's Privacy Toolkit for Social Workers and Social Service Workers. The subject of the meeting with the Registrar and regulatory expert will include:

- (a) the Acts or omissions for which the Member was found to have committed professional misconduct;
- (b) the potential consequences of the misconduct to the Member's clients, colleagues, the profession, and herself;
- (c) strategies for preventing the misconduct from recurring; and
- (d) the development of a learning plan.

5. The Registrar is directed to impose a term, condition and limitation on the Member's Certificate of Registration, to be recorded on the Register, requiring the Member to, for a period of 12 months from the date the Member returns to the practice of social work:

- (a) notify any current or new employers of the Discipline Committee decision, and:
 - (i) ensure the Registrar is notified of the name, address, and telephone number of all employer(s) within fifteen (15) days of commencing or resuming employment in any social work or social service work position;
 - (ii) provide her employer(s) with a copy of:
 - 1. the Discipline Committee's Order;
 - 2. the Notice of Hearing;
 - 3. the Agreed Statement of Facts;
 - 4. this Joint Submission on Penalty; and
 - 5. a copy of the Discipline Committee's Decisions and Reasons, once available;

(iii) subject to paragraph 5(b), below, only practice social work or social service work for an employer who agrees to, and does, forward a report to the Registrar within fifteen (15) days of the commencement or resumption of the Member's employment in any social work or social service work position, confirming:

1. that they received a copy of the required documents;
2. that they agree to notify the Registrar immediately upon receipt of any information the Member has breached the Code of Ethics and Standards of Practice of the profession; and
3. that they agree to perform three random audits of the Member's accesses to personal health information;

(b) In the event that the Member operates a private practice, the Member must, at her own expense, receive supervision of her social work practice from an approved member of a Regulated Health Profession for a period of two (2) years from the date at which the Member returns to practice from the mandatory four (4) month suspension. The Member must additionally provide to the approved supervisor (and any other approved supervisor) the Notice of Hearing and the final decision of the Discipline Committee and must provide written confirmation, signed by the supervisor, of receipt of the documents to the Registrar within fifteen (15) days of returning to practice under supervision (and within 15 days of the approval of any subsequent supervisor). The Member must seek consent from prospective clients to share personal health information with her supervisor in order to allow the supervisor to review client files and engage in review.³ The substance of the supervision with the approved supervisor shall include a review of the safeguards, protocols and practices the Member has implemented in her private practice with respect to the protection of confidentiality. The supervisor shall provide a report to the Registrar at twelve (12) months and at twenty-four (24) months confirming that the supervision took place and the nature of the supervision.⁴

6. The Member shall pay costs to the College in the amount of \$5,000 to be paid in accordance with the following schedule:

- (a) \$1500 to be paid within 60 days of the completion of the mandatory four (4) month period of suspension;
- (b) \$1500 to be paid within 120 days of the completion of the mandatory four (4) month period of suspension;

³ For greater clarity, while a client may refuse to sign a consent for the release of personal health information, the Member must maintain documentation, signed by the client, indicating that the request for consent was made and refused, for review by the supervisor.

⁴ For clarity, all expenses relating to supervision, including the obligation to review College materials and to communicate with the College where necessary, are at the expense of the Member.

(c) \$1000 to be paid within 180 days of the completion of the mandatory four (4) month period of suspension;

(d) \$1000 to be paid within 240 days of the completion of the mandatory four (4) month period of suspension.

In the event that either of the first two payments are not made in accordance with the schedule, the entire amount outstanding becomes immediately due.

7. The Discipline Committee's finding and Order (or a summary thereof) shall be published, with identifying information concerning the Member included, in the College's official publication and on the College's website, and the results of the hearing shall be recorded on the Register and in any other media related format that is provided to the public and is deemed appropriate by the College.

Reasons for Penalty Decision

The Panel recognized that the penalty should maintain high professional standards, preserve public confidence in the ability of the College to regulate its members, and, above all, protect the public. This is achieved through a penalty that considers the principles of general deterrence, specific deterrence and, where appropriate, rehabilitation and remediation of the Member's practice. The Panel also considered the principle that the Panel should accept the joint submission on penalty unless it was contrary to the public interest and would bring the administration of justice into disrepute.

In summary the Panel accepted the joint submission on penalty based on the following reasons.

The penalty preserves public confidence in the College's ability to regulate the members of the College and to protect the public.

The penalty acts as a deterrent to the Member and to other members of the College.

The penalty allows for rehabilitation of the Member to assist the Member in developing the ability to practice and work in accordance with the College's Standards of Practice.

The penalty aligns with what has been ordered for privacy violations in other regulated professions, and is within the range of reasonable outcomes.

I, Rita Wiltsie, sign this Decision as Chairperson of the panel and on behalf of the panel members listed below.

Date: _____

Signed: _____

Rita Wiltsie
Angele Desormeau
Lisa Foster