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

Indexed as: Ontario College of Social Workers and Social Service Workers v Gerlinde Goodwin, 2024 ONCSWSSW 11

Date: 20260922

BETWEEN:

THE ONTARIO COLLEGE OF SOCIAL WORKERS
AND SOCIAL SERVICE WORKERS

- and -

GERLINDE GOODWIN

PANEL:	Chisanga Chekwe	Chair, Public Member
	Geneviève Côté	Professional Member
	Kimberley Westfall-Connor	Non-Council Community Member

Appearances: Debra McKenna, counsel for the College
Kyle Dow, counsel for the Registrant
Fredrick Schumann, Independent Legal Counsel to the Panel

Heard: August 31, 2026

DECISION AND REASONS FOR DECISION

[1] This matter came on for hearing before a panel of the Discipline Committee (the "**Panel**") on August 31, 2026, at the Ontario College of Social Workers and Social Service Workers (the "**College**"), by way of videoconference. The Panel announced its decision on the misconduct allegations, penalty and costs orally at the hearing. These are our reasons for decision.

The allegations

[2] In the Notice of Hearing dated November 18, 2021, Gerlinde Goodwin (the "**Registrant**") is alleged to be guilty of professional misconduct pursuant to the *Social Work and Social Service Work Act*, 1998, SO 1998, c 31 (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**").

[3] The Notice of Hearing's allegations of professional misconduct, and the particulars of those allegations, are reproduced in Schedule "A" to these reasons.

Registrant's position

[4] The Registrant admitted four of the allegations set out in the Notice of Hearing. The Panel conducted an oral plea inquiry and was satisfied that the Registrant's admission was voluntary, informed and unequivocal

The evidence

[5] The evidence was tendered by way of an Agreed Statement of Facts ("**ASF**"). The admissions in the Agreed Statement of Facts are reproduced in Schedule "B" to these reasons.

Decision of the panel

[6] Having considered the admissions of the Registrant, the evidence in the ASF, and the submissions of counsel, the Panel found that the Registrant committed the acts of professional misconduct listed in the ASF.

Reasons for decision

[7] The first type of professional misconduct listed in the ASF is failing to establish and maintain clear and appropriate boundaries for the protection of the Client. The facts and admissions contained in the ASF, together with the submissions of the parties, clearly demonstrate that the Registrant failed to establish clear and appropriate boundaries with this Client. Although initially hesitant, the Client reached out for therapy. Over time, the Client began to feel more comfortable and began to trust the Registrant. During the course of their professional relationship from 2016 to 2019, there were multiple incidents which demonstrated that the Client did not understand or was confused by the boundaries of their professional relationship. The Panel noted multiple instances where boundaries blurred: the Client offered the Registrant marijuana for stress relief despite being repeatedly told to stop, offered assistance with the Registrant's sick mother, and expressed feelings of "sisterly love" toward the Registrant.

[8] The Registrant admits that disclosing details about her own personal life to the Client likely contributed to the Client's confusion about the professional boundaries and increased the risk of attachment. It is always the Registrant's responsibility to establish and maintain clear boundaries in order to protect the Client. In this case, the Registrant failed to seek consultation or to take timely steps to mitigate the risk to the Client. She should have taken earlier steps to address the Client's feelings of transference . In our view, in this way, the Registrant failed to adequately prioritize the safety and best interests of her Client.

[9] The second type of professional misconduct listed in the ASF relates to the termination of services. The facts and admissions contained in the ASF, together with the submissions of the

parties, demonstrate that the Registrant failed to ensure that replacement counselling services were in place and to clearly communicate these arrangements to the Client prior to terminating services. The Client suggesting that they "be friends", and their ongoing attempts to contact the Registrant after May 2019 demonstrate that they had become attached and did not understand the reasons for termination. The Registrant admitted that she communicated with the Client in a manner that was abrupt and did not fully take into consideration the vulnerability and the mental health of this Client. The Panel recognizes that with the benefit of hindsight, the Registrant now regrets making the comment to the Client that her behaviour was "kinda creepy" and understands that it was not appropriate. The Panel also recognizes the Registrant was disturbed and frightened by this encounter with the Client, and that this led her to communicate with the Client in a manner that was abrupt and, on reflection, inappropriate. Nevertheless, the Registrant did not adequately discharge her duties with respect to the termination of services, and this appeared to escalate the Client's feelings of anxiety, abandonment, and threats of suicide stemming from their PTSD diagnosis.

[10] The third type of professional misconduct listed in the ASF is failing to keep records as required. The facts and admissions contained in the ASF, together with the submissions of the parties, demonstrate that the Registrant failed to keep adequate records. The Registrant admitted that her record keeping practices were not in compliance with the College's standards during 2017-2019. The Registrant was required to keep systematic, dated, and legible records for each client. This would include maintaining reports (handwritten, typed, or electronic), progress notes, correspondence, minutes, and/or progress logs. Other than limited records that were created during the time the Registrant was working at the Clinic (until approximately March 2017), the Registrant did not make any notes of her counseling sessions with the Client. These deficiencies in her record keeping practice, prevented the College from conducting an objective, documentary review of the appropriateness of the services that were provided to the Client.

[11] The fourth type of professional misconduct listed in the ASF is conduct relevant to the practice of the profession that members would reasonably regard as disgraceful, dishonourable, or unprofessional. This standard requires the Registrant avoid conduct that would reasonably be perceived by members of the profession, as reflecting negatively on the profession of social work. It is assessed on an objective standard and does therefore not require expert evidence.

[12] In the Panel's view the totality of the Registrant's misconduct would reasonably be regarded by members of the profession as being dishonourable and unprofessional. The Registrant's conduct fell below the expected standards of the profession and included failing to maintain clear boundaries; failing to take steps to address the feelings of transference that the Client developed; failing to conduct a termination meeting, and failing to clearly communicate expectations, or facilitate the arrangements and supports for the Client and failing to maintain records as required. The Registrant's failures resulted in the termination of the professional relationship negatively impacting the Client and contributing to the escalation of their anxiety, feelings of abandonment, and threats of suicide stemming from their PTSD. This behaviour demonstrated a serious disregard for the Registrant's professional responsibilities towards her Client and reflects negatively on the profession of social work.

Penalty submissions

[13] The parties agreed on the issue of penalty. They presented to the Panel a Joint Submissions as to Penalty ("**Joint Submission**") asking this Panel make an order as follows:

> 1. An order that the Registrant shall be reprimanded by the Discipline Committee, via electronic hearing;
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> 2. An order suspending the Registrant's certificate of registration for a period of three months (3) months, commencing on December 1, 2026, two (2) months of which will be remitted upon the Registrant successfully completing the remedial work outlined in paragraphs 4(a) and 4(b).
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> 3. For clarity, the Registrant is required to comply with the requirements set out in paragraphs 4(a) and 4(b) regardless of whether part of the suspension is remitted. In addition, if the Registrant fails to satisfy the requirements in paragraphs 4(a), 4(b), and/or 4(c) below, the Registrant agrees, and it is a term of this Joint Submission on Penalty and Costs, that the Registrant's certificate of registration will be suspended until such time as the Registrant fully complies with the terms, conditions, and limitations set out in paragraphs 4(a), 4(b), and 4(c).
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> 4. An order directing the Registrar to impose terms, conditions, and limitations on the Registrant's certificate of registration requiring the following:
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> (a) Prior to returning to practice, the Registrant shall successfully complete the PROBE course (www.cpepdoc.org/cpep-courses/probe-ethics-boundariesprogram-canada) at her own expense and provide documentary evidence of her successful completion of the program to the satisfaction of the Registrar;
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> (b) To facilitate the Registrant's attendance and completion of the PROBE course, the Registrant agrees, and it is a term of the Joint Submission on Penalty and Costs, that the Registrant sign a release to allow CPEP to provide the College with the Registrant's course materials and final report and authorize CPEP to receive all relevant information, including the Notice of Hearing, the Agreed Statement of Facts, and the Joint Submission on Penalty and Costs, which will allow CPEP to customize the course and address the conduct by the Registrant;
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> (c) Within six months of her return to practice, the Registrant will be required to attend, at her own expense, two (2) sessions with a mentor to be appointed by the College. In conducting the mentorship (which can be conducted remotely if directed by the mentor), the mentor shall discuss and review record-keeping expectations and compliance with the standards with the Registrant. The mentor shall determine the date and the length for each session and provide a report to the Registrar following the second session to confirm the Registrant's attendance at the sessions and review of the standards.
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> (d) In the event that the Registrant obtains employment to provide social work services in the twelve (12) months following the date that the Registrant is able to return to practise after her suspension, the Registrant shall:

- notify any current or new employers of the Discipline Committee's final decision;
- ensure the Registrar is notified of the name, address, and telephone number of all employer(s) within fifteen (15) days of commencing employment;
- provide her employer(s) with a copy of:
    - the Discipline Panel's decision and reasons;
    - the Notice of Hearing;
    - the Agreed Statement of Facts;
    - the Joint Submission on Penalty; and
    - have her employer forward a report to the Registrar within fifteen (15) days of commencing employment to confirm that the employer has received the documents noted above and agrees to notify the Registrar immediately upon receipt of any information that the Registrant is not complying with the College's standards;

5. An order directing the finding and the order of the Discipline Committee, including the fact and content of the reprimand, be published, in detail or in summary with the Registrant's name, online and/or in print, including, but not limited to, in the official publication of the College, on the College's website, on the College's public register, and on CanLII.

6. An order directing the Registrant to pay costs to the College in the amount of $5,000.00, paid on the following timetable:

• $1,250.00 on the date of the hearing;

• $1,250.00 on November 30, 2026;

• $1,250.00 on February 28, 2027; and

• $1,250.00 on May 31, 2027.

7. The College and the Registrant agree that if the Discipline Committee accepts this Joint Submission on Penalty and Costs, there will be no appeal or judicial review of the decision to any forum.

Penalty decision

[14] Having considered the findings of professional misconduct, the evidence and the submissions of the parties, the Panel accepted the Joint Submission and made an order in its terms. The Panel's order was made orally on the record at the hearing.

Reasons for penalty decision

[15] A penalty order should maintain high professional standards, preserve public confidence in the ability of the College to regulate its Registrants, 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 Registrant's practice. The Panel found the *College of Physicians and Surgeons of Ontario v Peirovy* decision of assistance in setting out the principles of penalties.

[16] A joint submission on penalty should "not be rejected lightly" unless it is contrary to the public interest or would bring the administration of justice into disrepute. The Panel is satisfied that the proposed penalty order is appropriate, proportional, and above all informed by the College's paramount duty to protect the public interest. The very high threshold for departing from a joint submission is not met in this case.

[17] There were mitigating factors present in this case that included the Registrant candidly admitting her misconduct and cooperating with the College in order to submit an Agreed Statement of Facts and a Joint Submission on Penalty. This saved resources for the College and demonstrated that the Registrant has accepted responsibility for her actions. We also note that the Registrant has been registered with the College for more than twenty years, and she has no prior complaints or discipline history.

[18] The Reprimand is appropriate given the circumstances of this case and allows the Panel to convey its concerns directly to the Registrant.

[19] A suspension for three months, two months of which will be remitted upon completion of rehabilitative steps, is proportional and appropriate in this matter and will help ensure specific deterrence. The suspension will allow the Registrant to further reflect on and remediate her behaviour, and to ensure that she understands her professional obligations to her clients when she returns to practice.

[20] The proposed terms, conditions, and limitations requiring completion of the Probe course and two sessions with a practice mentor are important steps to rehabilitate and deter future misconduct.

[21] Publication of the Panel's decision will send a clear message to the public and the profession that this type of professional misconduct will not be tolerated. Publication ensures transparency and helps maintain the public's confidence in the integrity of the discipline process.

[22] The Panel has the jurisdiction to order costs where appropriate. This helps to ensure that the Registrant bears some of the financial burden for her misconduct. In determining the appropriate quantum of costs, the Panel has broad discretion. In this Joint Submission the parties have agreed upon the amount of $5,000.00 payable on an agreed schedule.

[23] The Panel makes an order in accordance with the Joint Submission on Penalty and Costs.

I, Chisanga Chekwe, sign this decision as chairperson of the Panel and on behalf of the Panel members listed below.

Date: September 22, 2026

Signed: _____

Chisanga Chekwe, Chair
Geneviève Côté
Kimberley Westfall-Connor

SCHEDULE "A" – ALLEGATIONS OF PROFESSIONAL MISCONDUCT

1. You are, and were at all times relevant to these allegations, a registered social worker with the Ontario College of Social Workers and Social Service Workers (the "College").

2. At all material times, you were engaged in practice at the Assiginack Family Health Team in Manitowaning, Ontario (the "Clinic") and later established a private practice in Little Current, Ontario.

3. In or about December 2016, you were engaged by [C1] to provide social work services, including counselling. [C1] was a vulnerable client who had been referred to you and sought assistance to deal with a variety of mental health issues.

4. As you were aware, [C1] was initially afraid of going to therapy and did not think they would be able to trust a therapist. However, over time, [C1] began to feel comfortable and trusted you.

5. During the initial period, you saw [C1] once a week. Later, the appointments were less frequent – once every two or three weeks.

6. Other than limited records while working at the Clinic, you failed to make notes of your counseling sessions with [C1] and/or adequate records with respect to the services provided to [C1]

7. As the counselling sessions progressed, [C1] began to experience feelings for you and they expressed those feelings to you.

8. In addition, you also shared personal information about your life with [C1] During your appointments with [C1], you discussed your mother and husband – in fact, on some occasions, the entire session with [C1] was spent discussing your family circumstances.

9. As a result of the personal relationship that you had developed with [C1], [C1] began offering and giving you marijuana. This occurred approximately six to eight times.

10. Over time, the feelings that [C1] had for you continued to develop to the point that they expressed to you that they loved you "like a sister". Based on your response, [C1] felt that those feelings and your personal relationship with them were appropriate.

11. During the session at which [C1] had expressed their affection for you, you asked [C1] for a hug. Based on this, [C1] understood that everything was fine.

12. As you were aware, [C1]'s mental health difficulties escalated over time.

13. Nonetheless, in March 2019, you made plans for an extended vacation, during which time you failed to provide and/or explain to [C1] a plan for counseling while you were away. It was a difficult time for [C1]

14. In May 2019, four days before your first appointment with [C1] upon your return from vacation, you texted [C1] and advised that your relationship with them was over. You abruptly terminated your social work services.

15. Your text to [C1] caused them to become distressed. They had been without a therapist for approximately eight to ten weeks and now had no therapist. When contacted by [C1], you refused to speak with them – simply replying that you were no longer in their circle of care.

16. As a result of the situation, [C1]'s mental health severely deteriorated and they became suicidal.

17. When [C1] texted and emailed you to talk, you never responded. As a result, [C1] attended at your workplace. Upon seeing [C1] in the parking lot, you stated words to the effect: "kind of creepy don't you think.", which caused [C1] further upset and distress.

II. 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, as follows:

(a) violation of Sections 2.2 and 2.28 of the Professional Misconduct Regulation and Principle I of the Handbook (commented on in Interpretations 1.1, 1.2, 1.5 and 1.6) by failing to participate together with your client to set and evaluate goals; by failing to observe, clarify and inquire about information presented to you by clients; by failing to maintain awareness of your own values, attitudes and needs and how these impact on your professional relationship with the client; and by failing to distinguish your needs and interests from those of your client to ensure that the client's needs and interests remain paramount;

(b) violation of Sections 2.2, 2.6, and 2.10 of the Professional Misconduct Regulation and Principle II of the Handbook (commented on in Interpretations 2.1, 2.2.1, 2.2.3. and 2.2.8) by failing to establish and maintain clear and appropriate boundaries in your professional relationships for the protection of the client; by failing to engage in the process of self-review and evaluation of your practice and seek consultation when appropriate; by engaging in professional relationships that constitute a conflict of interest or in situations in which you ought reasonably to have known that the client would be at risk; and by failing to avoid conduct which could reasonably be perceived as reflecting negatively on the profession of social service work;

(c) violation of Sections 2.2 and 2.8 of the Professional Misconduct Regulation and Principle III of the Handbook (commented on in Interpretations 3.6, 3.7, 3.9, and 3.10) by failing to inform the client of the foreseeable risks associated with the provision of professional services; by failing to assume full responsibility for demonstrating that the client has not been exploited, coerced or manipulated intentionally or unintentionally where a personal relationship occurs with the client; by discontinuing professional services that were needed;

(d) violation of Sections 2.2 and 2.20 of the Professional Misconduct Regulation and Principle IV of the Handbook (commented on in Interpretations 4.1.1, 4.1.3, 4.l.5, and 4.1.6.) by failing to ensure that recorded information conformed with accepted service or intervention standards and protocols within the profession of social work, relevant to the services provided, and in a format that facilitates the monitoring and evaluation of the effects of the service/intervention; by failing to keep systematic, dated, and legible records for each client served; by failing to document your own actions; and by failing to ensure that information was recorded when the event occurred or as soon as possible thereafter;

(e) violation of 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.

SCHEDULE "B" – ADMISSIONS IN AGREED STATEMENT OF FACTS

A. Background

1. At all times relevant to the allegations in the Notice of Hearing dated November 19, 2021, the Registrant was a social worker – first registered with the College on or about January 24, 2005.

2. Prior to this matter, the Registrant had no prior complaints or discipline history with the College.

3. During the relevant period, the Registrant practised at the Assiginack Family Health Team in Manitowaning, Ontario (the "Clinic") in a part-time role once a week to offer additional social work availability in the area. The Registrant also worked with the Manitoulin Family Health Team in Mindemoya and had a longstanding private practice in Little Current, Ontario.

4. During the relevant period, the Registrant worked seven days a week, including evenings, in order to provide services throughout Manitoulin Island and its communities.

B. Professional Relationship with the Client

5. The Registrant was engaged by [C1] ("Client") in or about December 2016 to provide them with social work services, including counselling, through the Clinic. The Client had been referred to the Registrant by the Client's physician at the Clinic.

6. The Client was a vulnerable client who, at the material time, was in their [age] and struggling with a physical injury related to work in emergency services, along with anxiety.

7. On or about January 10, 2020, the College received a complaint from the Client with respect to the Registrant (the "Complaint"). As indicated in the Complaint, the Client was concerned about the manner in which the professional relationship with the Registrant was terminated, and other issues that arose during the professional relationship.

8. The Registrant acknowledges that, in providing social work services to the Client, she failed to maintain the professional standards expected by registrants of the College and committed acts of professional misconduct as outlined in the following paragraphs.

C. Record-Keeping Obligations

9. The Registrant provided social work services to the Client during the period from 2016 to 2019. During the initial period, the Registrant saw the Client once a week through the Clinic. When the Registrant left her role at the Clinic to care for a family member, the Client connected with her at her private practice for further services. These appointments were less frequent – approximately once every two or three weeks.

10. Other than limited records that were created while working at the Clinic (until approximately March 2017) and issuing receipts to the Client (which the Registrant did not retain), the Registrant did not make any notes of her counseling sessions with the Client or make any records documenting the services and communications with the Client.

11. The Registrant admits that, from 2017 to 2019, her record-keeping practices were not compliant with the College's standards, as reflected in Principle IV.

12. The Registrant further acknowledges that, in accordance with Principle IV, she was required to keep systematic, dated, and legible records for each client. Among other records, this included maintaining reports (handwritten, typed, or electronic), progress notes, correspondence, minutes, and/or progress logs.

13. The Registrant admits that the deficiencies in her record-keeping preclude a documentary review of the appropriateness of the services that were provided to the Client, thereby frustrating the College's oversight role in conducting an objective, document-based review of client management.

C. Professional Boundaries

14. As indicated in the Complaint, the Client was initially afraid to attend therapy. They had never seen a therapist or gone to counselling previously, and did not think that they would be able to trust a therapist. But they were encouraged to do so by family and their family physician. Over time, the Client began to feel comfortable with the Registrant and trusted her.

15. As counselling with the Client progressed, the Client began to experience platonic feelings for the Registrant and expressed those feelings to the Registrant. This included comments to the effect that the Client loved the Registrant "like a sister".

16. If the Registrant were to testify, she would indicate she does not recall the Client making any comments about loving the Registrant like a sister. The Registrant would also indicate she reinforced the boundaries required in a therapist-client relationship throughout the sessions, including informing the Client that if she did not respect boundaries, therapy would be terminated.

17. The Registrant admits that, during the professional relationship with the Client from 2016 to 2019, there were incidents in which the Registrant knew or ought to have known demonstrated that the Client did not understand or was confused by the boundaries of a professional relationship. Among other circumstances, the incidents reported by the Client included:

> (a) The Client offering marijuana to the Registrant on more than one occasion for the Registrant to use to cope with her stress, despite repeated direction from the Registrant to stop;
>
> (b) The Client offering to help the Registrant care for her ill mother; and
>
> (c) The Client expressing feelings of "sisterly love" to the Registrant.

18. With the benefit of hindsight and reflection about the Complaint, the Registrant admits that self-disclosing details about her personal life to the Client – specifically, discussing her family circumstances – likely contributed to the Client's confusion about boundaries and the risk of attachment.

19. As set out in Principle II of the Standards, the Registrant acknowledges that it was her responsibility to establish and maintain clear boundaries to protect the Client. To do this, she was required to engage in a process of self-review and evaluation of her practice and seek consultation to avoid situations in which the Registrant knew or ought to have known the Client would be put at risk.

20. The Registrant admits that, notwithstanding the facts outlined in paragraphs 15 to 20, and the Client's growing attachment, the Registrant did not seek consultation with the College or another registrant of the College, or otherwise take timely steps to address this risk to the Client as was required.

21. The Registrant acknowledges that she determined the therapy sessions did not appear to be accomplishing any goals in about March of 2019. In the Registrant's opinion, the Client appeared to be treating sessions as a social engagement and was not completing the required work. The Registrant notified the Client's physician and requested the Client be transferred. She then terminated services with the Client and referred the Client back to her family physician, leaving the Client without access to social work services for a period of time.

22. If the Registrant were to testify, she would indicate the Client was connected with another social worker by the summer of 2019. The Registrant would also testify that she understood the Client's physician was pursuing referral options during the time the Registrant was away from her practice.

23. The Registrant acknowledges that, in the circumstances, the Registrant should have taken earlier steps to address the feelings of transference in the best interests of and safety of the Client.

D. Termination of the Professional Relationship

24. The Client was diagnosed in March 2019 with PTSD.

25. If the Registrant were to testify, it would be her evidence that, in advance of the Registrant's extended six-week vacation in March 2019, she informed the Client that going forward she would no longer be the Client's therapist.

26. The Registrant admits that it was not the Client's choice to terminate counselling.

27. If the Registrant were to testify it would be her evidence that, at the time, she understood others involved with the Client's circle of care (including her physician) would make such arrangements.

28. However, the Registrant acknowledges that she did not confirm that replacement counselling services were put in place (and they had not been) or communicate the arrangements to the Client prior to terminating services.

29. The Registrant admits that the Client contacted her, by text, in May 2019 and asked to speak with her, which was a surprise to the Registrant. The Registrant reiterated to the Client that she was no longer the Client's therapist.

30. Later the same day, the Registrant left her workplace and noticed a single other vehicle in the parking lot, parked directly behind her car. The Client exited this vehicle and approached the Registrant in the parking lot. The Client acknowledged she had been in the parking lot waiting for several hours. The Registrant was aware, at that point, that the Client did not yet have a therapist and reminded the Client that a therapist would be assigned to assist her.

31. The Registrant acknowledges that, during this encounter with the Client, she was disturbed and frightened by the Client's attendance. As a result, she communicated with the Client in a manner

that was abrupt and did not fully take into consideration the vulnerability and mental health of the Client, including that the Client did not have a therapist.

32. In particular, the Registrant admits that she made a comment using words to the effect that the Client's behaviour was "kinda creepy". The Registrant regrets making that comment, understands it was not appropriate, and would have been confusing and hurtful to the Client.

33. If the Registrant were to testify, she would indicate that she was alone in the parking lot with an individual who was much larger and stronger than her, and she was fearful. She would also testify that in previous communications, the Client used threatening language to discuss others in her circle of care. The Registrant would testify that the comment was an attempt to make the encounter lighthearted, while making it clear to the Client that her behaviour was inappropriate and not welcome.

34. The Registrant also does not contest that, with the benefit of hindsight, the Client appeared not to fully understand the Registrant's intention to end their professional relationship. The Registrant acknowledges that having a termination meeting, as contemplated by Principle III of the Standards, would have assisted in clearly communicating expectations, as well as facilitating appropriate arrangements and supports for the Client.

35. In addition, the Registrant acknowledges that the Client had become attached and did not understand the reasons for termination – as evidenced by her suggestion that they "be friends" and her ongoing attempts to contact the Registrant after May 2019 (such that the Registrant ultimately blocked the Client's number).

36. The Registrant acknowledges and regrets that the termination of the professional relationship negatively impacted the Client and appeared to escalate the Client's feelings of anxiety, abandonment, and threats of suicide stemming from her PTSD.

E. Summary

37. The Registrant admits that the following are standards of the profession, as set out in the Code of Ethics and Standards of Practice Handbook (the "Handbook"):

(a) Principle II addresses competence and integrity;

(b) Principle III addresses responsibility to clients;

(c) Principle IV addresses records obligations;

38. The Registrant admits that she committed acts of professional misconduct, as described in paragraphs 1 to 36 above, within the meaning of section 26(2)(a) and (c) of the Act, in that:

(i) she violated Sections 2.2 of the Professional Misconduct Regulation and Principle II of the Handbook (commented on in Interpretations 2.1, 2.2.1, 2.2.3. and 2.2.8) by failing to establish and maintain clear and appropriate boundaries for the protection of the client; by failing to engage in the process of self-review and evaluation of her practice and seek consultation when appropriate; by engaging in professional relationships that constitute a conflict of interest or in situations in which you ought reasonably to have known that the

client would be at risk; and by failing to avoid conduct which could reasonably be perceived as reflecting negatively on the profession of social service work;

(ii) she violated Sections 2.2 and 2.8 of the Professional Misconduct Regulation and Principle III of the Handbook (commented on in Interpretations 3.6, 3.7, 3.9, and 3.10) by failing to inform the client of the foreseeable risks associated with the provision of professional services; by discontinuing professional services that were needed;

(iii) she violated Sections 2.2 and 2.20 of the Professional Misconduct Regulation and Principle IV of the Handbook (commented on in Interpretations 4.1.1, 4.1.3, 4.l.5, and 4.1.6.) by failing to ensure that recorded information conformed with accepted service or intervention standards and protocols within the profession of social work, relevant to the services provided, and in a format that facilitates the monitoring and evaluation of the effects of the service/intervention; by failing to keep systematic, dated, and legible records for each client served; by failing to document your own actions; and by failing to ensure that information was recorded when the event occurred or as soon as possible thereafter;

(iv) 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.