

COLLEGE OF LICENSED PRACTICAL NURSES OF ALBERTA

**IN THE MATTER OF
A HEARING UNDER THE *HEALTH PROFESSIONS ACT*,**

**AND IN THE MATTER OF A HEARING REGARDING
THE CONDUCT OF SUSAN BAXTER**

**DECISION OF THE HEARING TRIBUNAL
OF THE
COLLEGE OF LICENSED PRACTICAL NURSES OF ALBERTA**

**IN THE MATTER OF A HEARING UNDER THE *HEALTH PROFESSIONS ACT* REGARDING THE
CONDUCT OF SUSAN BAXTER, LPN #11761, WHILE A MEMBER OF THE COLLEGE OF LICENSED
PRACTICAL NURSES OF ALBERTA (“CLPNA”)**

DECISION OF THE HEARING TRIBUNAL

(1) Hearing

The hearing was conducted at the offices of the Best Western Port O'Call Hotel in Calgary, Alberta on November 20, 2019 with the following individuals present:

Hearing Tribunal:

Michelle Stolz, Licensed Practical Nurse (“LPN”) Chairperson
Jan Schaller, LPN
Juane Priest, Public Member

Staff:

Evie Thorne, Legal Counsel for the Complaints Director, CLPNA
Sandy Davis, Complaints Director, CLPNA

Investigated Member:

Susan Baxter, LPN (“Ms. Baxter or “Investigated Member”)
Darren McLean, Agent for Ms. Baxter

(2) Preliminary Matters

The hearing was open to the public.

When the hearing began, the Chairperson of the Hearing Tribunal advised the Investigated Member she had the right to legal counsel under section 72(1) of the *Health Professions Act* (the “Act”). The Investigated Member confirmed she wished to proceed with the hearing without legal counsel.

There were no objections to the members of the Hearing Tribunal hearing the matter, and no Hearing Tribunal member identified a conflict. There were no objections to the jurisdiction of the Hearing Tribunal.

The Hearing was conducted by way of an Agreed Statement of Facts and Acknowledgement of Unprofessional Conduct and a Joint Submission on Penalty.

(3) Background

Ms. Baxter was an LPN within the meaning of the Act at all material times, and more particularly, was registered with CLPNA as an LPN at the time of the complaint. Ms. Baxter was initially licensed as an LPN in Alberta on January 1, 1985.

By letter dated March 2, 2019, the College of Licensed Practical Nurses of Alberta (“CLPNA”) received a complaint (the “Complaint”) from JR, pursuant to s. 54 of the Act. The Complaint stated that Ms. Baxter, LPN, had disclosed JR’s personal and health information without her verbal or written consent.

On March 7, 2019, JR emailed Ms. Sandy Davis, Complaints Director for the CLPNA (the “Complaints Director”), advising that HL, JR’s mother, would be a co-complainant regarding the Complaint.

In accordance with s. 55(2)(d) of the Act, the Complaints Director appointed Judith Palyga, Investigator for the CLPNA (the “Investigator”), to conduct an investigation into the Complaint. Ms. Baxter received notice of the Complaint, investigation and appointment of the Investigator by letter dated March 8, 2019.

On April 16, 2019, the Investigator concluded the investigation and submitted the Investigation Report to the CLPNA.

Following receipt of the Investigation Report, the Complaints Director determined there was sufficient evidence that the matter should be referred to the Hearings Director in accordance with s. 66(3)(a) of the Act. Ms. Baxter received notice that the matter was referred to a hearing as well as a copy of the Investigation Report and Statement of Allegations under cover of letter dated July 2, 2019.

A Notice of Hearing, Notice to Attend and Notice to Produce was served upon Ms. Baxter under cover of letter dated October 21, 2019.

(4) Allegations

The Allegations in the Statement of Allegations (the “Allegations”) are:

“It is alleged that Susan Baxter, LPN, while practicing as a Licensed Practical Nurse engaged in unprofessional conduct by:

1. On or about February 14, 2019, Ms. Baxter breached confidentiality by sharing personal health information relating to client JR, including one or more of the following:
 - a. Ms. Baxter could no longer provide services to client JR due to the demands of the position as providing care for client JR “was a grind”;
 - b. The complexity of client JR’s needs made the contract unsustainable; and
 - c. Client JR required mental health assistance.”

(5) Admission of Unprofessional Conduct

Section 70 of the Act permits an investigated member to make an admission of unprofessional conduct. An admission under s. 70 of the Act must be acceptable in whole or in part to the Hearing Tribunal.

Susan Baxter acknowledged unprofessional conduct to all the allegations as evidenced by her signature on the Agreed Statement of Facts and Acknowledgement of Unprofessional Conduct and verbally admitted unprofessional conduct to all the allegations set out in the Statement of Allegations during the hearing.

Legal Counsel for the Complaints Director submitted, where there is an admission of unprofessional conduct, the Hearing Tribunal should accept the admission absent exceptional circumstances.

(6) Exhibits

The following exhibits were entered at the hearing:

- Exhibit #1: Statement of Allegations
- Exhibit #2: Agreed Statement of Facts and Acknowledgement of Unprofessional Conduct
- Exhibit #3: Joint Submission on Penalty

(7) Evidence

The evidence was adduced by way of Agreed Statement of Facts, and no witnesses were called to give *viva voce* testimony. The Hearing Tribunal accepts the evidence set out in the Agreed Statement of Facts which was admitted as Exhibit #2.

(8) Decision of the Hearing Tribunal and Reasons

The Hearing Tribunal is aware it is faced with a two part task in considering whether a regulated member is guilty of unprofessional conduct. First, the Hearing Tribunal must make factual findings as to whether the alleged conduct occurred. If the alleged conduct occurred, it must then proceed to determine whether that conduct rises to the threshold of unprofessional conduct in the circumstances.

The Hearing Tribunal has reviewed the documents included in Exhibit #2, and finds as facts the events as set out in the Agreed Statement of Facts.

The Hearing Tribunal also accepts Ms. Baxter's admission of unprofessional conduct as set out in the Agreed Statement of Facts as described above. Based on the evidence and submissions before it, the Hearing Tribunal did not identify exceptional circumstances that would justify not accepting the admission of unprofessional conduct from Ms. Baxter.

Allegation 1

Ms. Baxter admitted on or about February 14, 2019, she breached confidentiality by sharing personal health information relating to client JR, including one or more of the following:

- a. Ms. Baxter could no longer provide services to client JR due to the demands of the position as providing care for client JR “was a grind”;
- b. The complexity of client JR’s needs made the contract unsustainable; and
- c. Client JR required mental health assistance.

HL was seeking private health care assistance for her daughter, JR. JR requires constant support and physical assistance as a result of the progression of Amyotrophic Lateral Sclerosis (“ALS”).

On or around November 4, 2018, HL’s family friend, GC contacted Susan Baxter, LPN regarding her company “Just a Little Help” and inquired about care for JR. The Hearing Tribunal was provided with a screenshot from Facebook Messenger from November 4, 2018 at Exhibit #2, TAB 6.

On February 1, 2019, Ms. Baxter met with HL and JR at their home in Calgary, Alberta.

JR and Just a Little Help entered into a contract whereby Ms. Baxter, through her company, would provide home care services for JR. The Hearing Tribunal was provided with a copy of the Home Care Services Agreement (the "Contract") signed on February 1, 2019 at Exhibit #2, TAB 7. GC was not part of the contract.

As per the Contract, Ms. Baxter developed a care plan for JR's care and needs. The Hearing Tribunal was provided a copy of the care plan Ms. Baxter developed for JR at Exhibit #2, TAB 8.

On or around February 14, 2019 at approximately 4:00 – 5:00 p.m., Ms. Baxter telephoned GC. Despite having no authorization to do so, during the phone call Ms. Baxter disclosed JR's personal health information to GC, stating:

- a. She had cancelled the Contract with JR because providing care for her "was a grind";
- b. The complexity of JR's needs made the Contract unsustainable; and
- c. Suggested JR needed mental health assistance.

On or around February 15, 2019, the parties mutually terminated the Contract. The Hearing Tribunal was provided with a letter which Ms. Baxter sent to JR confirming the same at Exhibit #2, TAB 9.

On or around February 23, 2019, GC informed HL, via email, that Ms. Baxter had disclosed JR's personal health information via a phone call on or around February 14, 2019. The Hearing Tribunal was provided a copy of the email which GC sent to HL at Exhibit #2, TAB 10.

Confidentiality of a person's health information must be safeguarded at all times. Sharing such information to someone other than the person whose information it is, absent consent, constitutes a breach of this confidentiality. Breaching this confidentiality as was done in this case demonstrates a lack of judgment on the part of the Investigated Member. Further, it is a clear breach of the *Health Information Act* which applies to LPNs. It also harms the integrity of the profession as the public expects that their health information will be safeguarded by members of the profession who provide their care. This conduct also constitutes a breach of the Code of Ethics and Standards of Practice as set out below.

The Hearing Tribunal finds that the conduct admitted to amounts to unprofessional conduct as defined in s. 1(1)(pp) of the Act, in particular, the Hearing Tribunal found the following definitions of unprofessional conduct have been met:

- a) Displaying a lack of knowledge of or lack of skill or judgment in the provision of professional services;
- b) Contravention of the Act, a code of ethics or standards of practice;
- c) Contravention of another enactment that applies to the profession, and
- d) Conduct that harms the integrity of the regulated profession.

The conduct breached the following principles and standards set out in CLPNA's Code of Ethics ("CLPNA Code of Ethics" and CLPNA's Standards of Practice for Licensed Practical Nurses in Canada ("CLPNA Standards of Practice")):

CLPNA Code of Ethics

Ms. Baxter acknowledges that her conduct breached one or more of the following requirements in the Code of Ethics for Licensed Practical Nurses in Canada adopted by the CLPNA on June 3, 2013, which states as follows:

- a. Principle 1: Responsibility to the Public - LPNs, as self-regulating professionals, commit to provide safe, effective, compassionate and ethical care to members of the public. Principle 1 specifically provides that LPNs:
 - 1.1 Maintain standards of practice, professional competence and conduct; and
 - 1.4 Respect the rights of all individuals regardless of their diverse values, beliefs and cultures.
- b. Principle 2: Responsibility to Clients – LPNs have a commitment to provide safe and competent care for their clients. Principle 2 specifically provides that LPNs:
 - 2.3 Respect and protect client privacy and hold in confidence information disclosed except in certain narrowly defined exceptions.
 - 2.3.2 Report any situation where private or confidential information is accessed or disclosed without appropriate consent or legal authority, whether deliberately or through error.
 - 2.3.3 Ensure that any discussion/communication (verbal, written or electronic) is respectful and does not identify the client unless appropriate.
 - 2.8 Use evidence and judgment to guide nursing decisions.
- c. Principle 3: Responsibility to the Profession – LPNs have a commitment to their profession and foster the respect and trust of their clients, health care colleagues and the public. Principle 3 specifically provides that LPNS:
 - 3.1 Maintain the standards of the profession and conduct themselves in a manner that upholds the integrity of the profession; and
 - 3.3 Practice in a manner that is consistent with the privilege and responsibility of self-regulation.
- d. Principle 5: Responsibility to Self – LPNs recognize and function within their personal and professional competence and value systems. Principle 5 specifically provides that LPNs:
 - 5.1 Demonstrate honesty, integrity and trustworthiness in all interactions; and
 - 5.3 Accept responsibility for knowing and acting consistently with principles, practice standards, laws and regulations under which they are accountable.

A copy of the Code of Ethics for Licensed Practical Nurses in Canada adopted by the CLPNA on June 3, 2013 is in Exhibit #1.

The Hearing Tribunal finds that the Investigated Member breached the Code of Ethics as confidential information must always be safeguarded; this is fundamental to the practice of an LPN and integral to the Code of Ethics. By disclosing JR's health information to GC without consent, the Investigated Member breached the Code of Ethics which prohibits such disclosure. In committing this breach, the Investigated Member also showed a lack of judgment in making nursing decisions. This conduct also fails to uphold the standards of the profession and is inconsistent with the privilege and responsibility of self-regulation. Finally, this conduct undermines the responsibility to self which every LPN must uphold by demonstrating a lack of integrity and professionalism and constitutes a breach of the *Health Information Act*.

CLPNA Standards of Practice:

Ms. Baxter acknowledges that her conduct breached one or more of the following Standards of Practice for Licensed Practical Nurses in Canada adopted by the CLPNA on June 3, 2013, which states as follows:

- a. Standard 1: Professional Accountability and Responsibility – LPNs are accountable for their practice and responsible for ensuring that their practice and conduct meet both the standards of the profession and legislative requirements. Standard 1 specifically provides that LPNs:
 - 1.1 Practice to their full range of competence within applicable legislation, regulations, by-laws and employer policies;
 - 1.4 Recognize their own practice limitations and consult as necessary;
 - 1.6 Take action to avoid and/or minimize harm in situations in which client safety and well-being are compromised; and
 - 1.9 Practice in a manner consistent with ethical values and obligations of the Code of Ethics for Licensed Practical Nurses.
- b. Standard 3: Service to the Public and Self-Regulation – LPNs practice nursing in collaboration with clients and other members of the health care team to provide and improve health care services in the best interests of the public. Standard 3 specifically provides that LPNS:
 - 3.3 Support and contribute to an environment that promotes and supports safe, effective and ethical practice;
 - 3.6 Demonstrate an understanding of self-regulation by following the standards of practice, the code of ethics and other regulatory requirements; and
 - 3.8 Practice within the relevant laws governing privacy and confidentiality of personal health information.
- c. Standard 4: Ethical Practice – LPNs uphold, promote and adhere to the values and beliefs as described in the Canadian Council for Practical Nurse Regulators (CCPNR) Code of Ethics. Standard 4 specifically provides that LPNs:

- 4.1 Practice in a manner consistent with ethical values and obligations of the Code of Ethics for LPNs;
- 4.6 Maintain professional boundaries in the nurse/client therapeutic relationship at all times; and
- 4.10 Practice with honesty and integrity to maintain the values and reputation of the profession.

A copy of the Standards of Practice of Licensed Practical Nurses in Canada adopted by the CLPNA on June 3, 2013 is in Exhibit #1.

The Hearing Tribunal also finds that the Investigated Member's conduct breached the Standards of Practice of an LPN in that the conduct did not accord with professional accountability and responsibility or in a manner which was to recognize practice limitations and minimizing harm. The conduct failed to be in service to the public and the profession by not creating a proper environment for practice, did not demonstrate an understanding of self-regulation and breached governing laws around the confidentiality of personal health information. Finally, it was not ethical practice and did not adhere to the Code, for the reasons already discussed.

(9) Joint Submission on Penalty

The Complaints Director and Ms. Baxter made a joint submission with respect to penalty, which was entered as Exhibit #3. The parties jointly submitted the following proposal to the Hearing Tribunal for consideration:

1. The Hearing Tribunal's written decision (the "Decision") shall serve as a reprimand.
2. Ms. Baxter shall pay 25% of the cost of the hearing, to be paid over a period of 24 months from the service of the Decision.
3. Ms. Baxter shall pay, in full, a fine of \$1,500.00 within 24 months of service of the Decision.
4. Ms. Baxter shall, within 30 days of the service of the Decision, read and reflect on the following CLPNA documents. These documents are located on the CLPNA's website <http://www.clpna.com/> under "Governance" tab and will be provided. Ms. Baxter shall provide a signed written declaration to the Complaints Director, within 30 days of service of the Decision, attesting she has reviewed CLPNA's documents:
 - a. Code of Ethics for Licensed Practical Nurses in Canada;
 - b. Standards of Practice for Licensed Practical Nurses in Canada;
 - c. CLPNA Practice Policy: Professional Responsibility & Accountability;
 - d. CLPNA Competency Profile E1: Critical Thinking and Critical Inquiry;
 - e. CLPNA Competency Profile E2: Clinical Judgment and Decision Making;

- f. CLPNA Competency Profile W: Professionalism;
- g. CLPNA Interpretive Document: Privacy Legislation in Alberta; and
- h. CLPNA Practice Guideline: Confidentiality.

If such documents become unavailable, they may be substituted by equivalent documents approved in advance in writing by the Complaints Director.

5. Within 30 days of service of the Decision, Ms. Baxter shall complete:
- a. The LPN Ethics Course available online at <http://www.learninglpn.ca/index.php/courses>. Ms. Baxter shall provide the Complaints Director with a certificate confirming successful completion of the course; and
 - b. The HIA Awareness offered by Alberta Health Services available online at <https://www.albertahealthservices.ca/info/Page3962.aspx>. Ms. Baxter shall provide the Complaints Director with a certificate confirming successful completion of the course.

If such courses become unavailable, an equivalent course may be substituted where approved in advance in writing by the Complaints Director.

6. Ms. Baxter shall provide the CLPNA with her contact information, including her home mailing address, home and cellular telephone numbers, current e-mail address and her current employment information. Ms. Baxter will keep her contact information current with the CLPNA on an ongoing basis while she is registered as a member of the CLPNA.

Further, the parties agreed that in the event Ms. Baxter fails to comply or is unable to comply with any of the orders for penalty, or if any dispute arises regarding the implementation of the orders, the Complaints Director may do any or all of the following:

- a. Refer the matter back to a Hearing Tribunal, which shall retain jurisdiction with respect to penalty;
- b. Treat Ms. Baxter's non-compliance as information for a complaint under s. 56 of the Act; or
- c. In the case of non-payment of costs described above, suspend Ms. Baxter's practice permit until such costs are paid in full or the Complaints Director is satisfied that such costs are being paid in accordance with a schedule of payment agreed to by the Complaints Director.

Legal Counsel for the Complaints Director submitted the primary purpose of orders from the Hearing Tribunal is to protect the public. The Hearing Tribunal is aware that s. 82 of the Act sets out the available orders the Hearing Tribunal is able to make if unprofessional conduct is found.

The Hearing Tribunal is aware, while the parties have agreed on a joint submission as to penalty, the Hearing Tribunal is not bound by that submission. Nonetheless, as the decision-maker, the Hearing Tribunal should defer to a joint submission unless the proposed sanction is unfit, unreasonable or contrary to public interest. Joint submissions make for a better process and engage the member in considering the outcome. A rejection of a carefully crafted agreement would undermine the goal of fostering cooperation through joint submissions, and may significantly impair the ability of the Complaints Director to enter into such agreements. If the Hearing Tribunal had concerns with the proposed sanctions, the proper process

is to notify the parties, articulate the reasons for concern, and give the parties an opportunity to address the concerns.

The Hearing Tribunal therefore carefully considered the Joint Submission on Penalty proposed by Ms. Baxter and the Complaints Director

(10) Decision on Penalty and Conclusions of the Hearing Tribunal

The Hearing Tribunal recognizes its orders with respect to penalty must be fair, reasonable and proportionate, taking into account the facts of this case.

The orders imposed by the Hearing Tribunal must protect the public from the type of conduct that Ms. Baxter has engaged in. In making its decision on penalty, the Hearing Tribunal considered a number of factors identified in *Jaswal v Newfoundland Medical Board* [1986] NJ No 50 (NLSC-TD), specifically the following:

- The nature and gravity of the proven allegations
- The age and experience of the investigated member
- The previous character of the investigated member and in particular the presence or absence of any prior complaints or convictions
- The age and mental condition of the victim, if any
- The number of times the offending conduct was proven to have occurred
- The role of the investigated member in acknowledging what occurred
- Whether the investigated member has already suffered other serious financial or other penalties as a result of the allegations having been made
- The impact of the incident(s) on the victim, and/or
- The presence or absence of any mitigating circumstances
- The need to promote specific and general deterrence and, thereby to protect the public and ensure the safe and proper practice
- The need to maintain the public's confidence in the integrity of the profession
- The range of sentence in other similar cases

1. **The nature and gravity of the proven allegations:** As admitted, there was a significant breach of privacy involving the client. This impacts the integrity of the profession, responsibility to the public, as well as, a lack of judgement.
2. **The age and experience of the investigated member:** Ms. Baxter registered as an LPN January 1, 1985 and has been registered consistently since.
3. **The previous character of the investigated member and in particular the presence or absence of any prior complaints or convictions:** Ms. Baxter has faced no previous complaints or reprimands to the Hearing Tribunal's knowledge.
4. **The number of times the offending conduct was proven to have occurred:** The offending conduct was only committed once.

5. **The role of the investigated member in acknowledging what occurred:** Ms. Baxter acknowledged she did breach confidentiality by sharing personal information relating to client JR.
6. **Whether the investigated member has already suffered other serious financial or other penalties as a result of the allegations having been made:** The Hearing Tribunal was not made aware of any serious financial or other penalties directly related to the allegations.
7. **The impact of the incident(s) on the victim:** The Hearing Tribunal was not made aware of how the incident impacted the victim.
8. **The presence or absence of any mitigating circumstances:** There were no mitigating circumstances in this incident.
9. **The need to promote specific and general deterrence and, thereby to protect the public and ensure the safe and proper practice:** It is imperative that the public is protected by ensuring the public is guaranteed their privacy will not be breached.
10. **The range of sentence in other similar cases:** The Hearing Tribunal was not made aware of sentences in other similar cases.

It is important to the profession of LPNs to maintain the Code of Ethics and Standards of Practice, and in doing so to promote specific and general deterrence and, thereby, to protect the public. The Hearing Tribunal has considered this in the deliberation of this matter, and again considered the seriousness of the Investigated Member's actions. The penalties ordered in this case are intended, in part, to demonstrate to the profession and the public that actions and unprofessional conduct such as this is not tolerated and it is intended that these orders will, in part, act as a deterrent to others.

After considering the proposed orders for penalty, the Hearing Tribunal finds the Joint Submission on Penalty is appropriate, reasonable and serves the public interest and therefore accepts the parties' proposed penalties.

(11) Orders of the Hearing Tribunal

The Hearing Tribunal is authorized under s. 82(1) of the Act to make orders in response to findings of unprofessional conduct. The Hearing Tribunal makes the following orders pursuant to s. 82 of the Act:

1. The Hearing Tribunal's written decision (the "Decision") shall serve as a reprimand.
2. Ms. Baxter shall pay 25% of the cost of the hearing, to be paid over a period of 24 months from the service of the Decision.
3. Ms. Baxter shall pay, in full, a fine of \$1,500.00 within 24 months of service of the Decision.
4. Ms. Baxter shall, within 30 days of the service of the Decision, read and reflect on the following CLPNA documents. These documents are located on the CLPNA's website <http://www.clpna.com/> under "Governance" tab and will be provided. Ms. Baxter shall provide a signed written declaration to the Complaints Director, within 30 days of service of the Decision, attesting she has reviewed CLPNA's documents:

- a. Code of Ethics for Licensed Practical Nurses in Canada;
- b. Standards of Practice for Licensed Practical Nurses in Canada;
- c. CLPNA Practice Policy: Professional Responsibility & Accountability;
- d. CLPNA Competency Profile E1: Critical Thinking and Critical Inquiry;
- e. CLPNA Competency Profile E2: Clinical Judgment and Decision Making;
- f. CLPNA Competency Profile W: Professionalism;
- g. CLPNA Interpretive Document: Privacy Legislation in Alberta; and
- h. CLPNA Practice Guideline: Confidentiality.

If such documents become unavailable, they may be substituted by equivalent documents approved in advance in writing by the Complaints Director.

5. Within 30 days of service of the Decision, Ms. Baxter shall complete:
 - a. The LPN Ethics Course available online at <http://www.learninglpn.ca/index.php/courses>. Ms. Baxter shall provide the Complaints Director with a certificate confirming successful completion of the course; and
 - b. The HIA Awareness offered by Alberta Health Services available online at <https://www.albertahealthservices.ca/info/Page3962.aspx>. Ms. Baxter shall provide the Complaints Director with a certificate confirming successful completion of the course.

If such courses become unavailable, an equivalent course may be substituted where approved in advance in writing by the Complaints Director.

6. Ms. Baxter shall provide the CLPNA with her contact information, including her home mailing address, home and cellular telephone numbers, current email address and her current employment information. Ms. Baxter will keep her contact information current with the CLPNA on an ongoing basis while she is registered as a member of the CLPNA.

In the event Ms. Baxter fails to comply or is unable to comply with any of the orders for penalty, or if any dispute arises regarding the implementation of the orders, the Complaints Director may do any or all of the following:

- a. Refer the matter back to a Hearing Tribunal, which shall retain jurisdiction with respect to penalty;
- b. Treat Ms. Baxter's non-compliance as information for a complaint under s. 56 of the Act; or
- c. In the case of non-payment of costs described in paragraph 2 of the orders made above, suspend Ms. Baxter's practice permit until such costs are paid in full or the Complaints Director is satisfied that such costs are being paid in accordance with a schedule of payment agreed to by the Complaints Director.

The Hearing Tribunal believes these orders adequately balances the factors referred to in Section 10 above, and are consistent with the overarching mandate of the Hearing Tribunal, which is to ensure that the public is protected.

Under Part 4, s. 87(1)(a),(b) and 87(2) of the Act, the Investigated Member has the right to appeal:

“87(1) An investigated person or the complaints director, on behalf of the college, may commence an appeal to the council of the decision of the hearing tribunal by a written notice of appeal that

- (a) Identifies the appealed decision, and
- (b) States the reasons for the appeal.

(2) A notice of appeal must be given to the hearings director within 30 days after the date on which the decision of the hearing tribunal is given to the investigated person.”

DATED THE 7th DAY OF JANUARY 2020 IN CALGARY, ALBERTA.

THE COLLEGE OF LICENSED PRACTICAL NURSES OF ALBERTA



Michelle Stolz, LPN
Chair, Hearing Tribunal