

**DISCIPLINE COMMITTEE
OF THE COLLEGE OF NURSES OF ONTARIO**

PANEL:	Carly Gilchrist, RPN	Chairperson
	Jay Armitage	Public Member
	Donna May, RPN	Member
	Sherry Szucsko-Bedard, RN	Member

BETWEEN:

COLLEGE OF NURSES OF ONTARIO)	<u>NICK COLEMAN</u> for
)	College of Nurses of Ontario
- and -)	
)	
GLORIA GUZMAN PADILLO)	<u>PHILIP ABBINK</u> for
Registration No. 9103185)	Gloria Guzman Padillo
)	
)	<u>CHRISTOPHER WIRTH</u>
)	Independent Legal Counsel
)	
)	Heard: June 27, 2022

DECISION AND REASONS

This matter came on for hearing before a panel of the Discipline Committee (the “Panel”) of the College of Nurses of Ontario (the “College”) on June 27, 2022, via videoconference.

The Allegations

The allegations against Gloria Guzman Padillo (the “Member”) as stated in the Notice of Hearing dated April 22, 2022 are as follows:

IT IS ALLEGED THAT:

1. You have committed an act of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code* of the *Nursing Act, 1991*, S.O. 1991, c. 32, as amended, and defined in subsection 1(1) of *Ontario Regulation 799/93*, in that while working as a Registered Nurse at St. Michael’s Hospital in Toronto, Ontario (the “Facility”), you contravened a standard of practice of the profession or failed to meet the standards of practice of the

profession, and in particular, in or around 2014-2015, you submitted false claims under the Facility's employee group benefit plan (the "Benefit Plan").

2. You have committed an act of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code of the Nursing Act, 1991*, S.O. 1991, c. 32, as amended, and defined in subsection 1(8) of *Ontario Regulation 799/93*, in that while working as a Registered Nurse at the Facility, you misappropriated property from a client or workplace, and in particular, in or around 2014-2015, you submitted false claims under the Benefit Plan.
3. You committed an act of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code of the Nursing Act, 1991*, S.O. 1991, c. 32, as amended, and defined in subsection 1(14) of *Ontario Regulation 799/93*, in that while working as a Registered Nurse at the Facility, you falsified a record relating to your practice, and in particular, in or around 2014-2015, you submitted false claims under the Benefit Plan.
4. You committed an act of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code of the Nursing Act, 1991*, S.O. 1991, c. 32, as amended, and defined in subsection 1(15) of *Ontario Regulation 799/93*, in that while working as a Registered Nurse at the Facility, you signed or issued, in your professional capacity, a document that you knew or ought to have known contained a false or misleading statement, and in particular, in or around 2014-2015, you submitted false claims under the Benefit Plan.
5. You have committed an act of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code of the Nursing Act, 1991*, S.O. 1991, c. 32, as amended, and defined in subsection 1(37) of *Ontario Regulation 799/93*, in that while working as a Registered Nurse at the Facility, you engaged in conduct or performed an act, relevant to the practice of nursing, that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional, and in particular, in or around 2014-2015, you submitted false claims under the Benefit Plan.

Member's Plea

The Member admitted the allegations set out in paragraphs 1, 2, 3, 4 and 5 in the Notice of Hearing. The Panel received a written plea inquiry which was signed by the Member. The Panel also conducted an oral plea inquiry and was satisfied that the Member's admission was voluntary, informed and unequivocal.

Agreed Statement of Facts

College Counsel and the Member's Counsel advised the Panel that agreement had been reached on the facts and introduced an Agreed Statement of Facts, which reads, unedited, as follows:

THE MEMBER

1. Gloria Guzman Padillo (the “Member”) obtained a degree in nursing from the Philippines in 1980.
2. The Member registered with the College of Nurses of Ontario (“CNO”) as a Registered Nurse (“RN”) on August 8, 1990.
3. Between March 7, 1988 and February 13, 2017, the Member was employed as a full-time staff nurse at St. Michael’s Hospital in Toronto (the “Facility”). Her employment was terminated as a result of the incidents described below.

THE BENEFIT PLAN

4. The Facility’s employee benefit plan (the “Benefit Plan”) is a group insurance policy which provides coverage for extended health care, dental, and other insurance benefits. The Facility is the Plan Sponsor for the Benefit Plan and funds the cost of claims paid out under the plan. SunLife Insurance (“SunLife”) administers the Benefit Plan on behalf of the Facility.
5. The Member, as an RN at the Facility represented by the Ontario Nurses’ Association (“ONA”), was a member of the Benefit Plan through the collective agreement between ONA and the Facility. The Member’s spouse also had coverage under the Benefit Plan.
6. In relation to extended health care, the Benefit Plan provided the Member and her family with coverage for medical equipment and supplies, among other things. In particular, the Benefit Plan provided 100% reimbursement for up to 4 pairs of support stockings annually (per person).
7. Claims for equipment and supplies under the Benefit Plan, including support stockings, were to be submitted using a paper claim form with the receipt and prescription attached. The claim form included the following declaration to be signed by the employee submitting a claim:

Authorization and Signature

I certify that all goods and services being claimed have been received by me and/or my spouse or dependents, if applicable. **I certify that the information in this form is true and complete** and does not contain a claim for any expense previously paid for by this or any other plan. [emphasis added]

[...]

In the event there is suspicion and/or evidence of fraud and/or Plan abuse concerning this claim, I acknowledge and agree that Sun Life may investigate and that information about me, my spouse and/or dependents pertaining to this claim may be used and disclosed to any relevant organization including

regulatory bodies, government organizations, medical suppliers and other insurers, and where applicable my Plan Sponsor, for the purpose of investigation and prevention of fraud and/or Plan abuse.

INCIDENTS RELEVANT TO ALLEGATIONS OF PROFESSIONAL MISCONDUCT

8. Between 2014 and 2015, Member submitted false claims under the Benefit Plan and received \$4,000 in relation to the false claims.
9. In or around early 2017, the Facility and SunLife uncovered a scheme whereby employees of the Facility were submitting false benefit claims, including in relation to support stockings. The joint investigation conducted by the Facility and Sunlife (the "Facility's Investigation") identified a porter at the Facility, Gener Valle, as the central figure in the scheme. The Facility's Investigation concluded that Valle coordinated with other Facility employees to submit false claims to SunLife for products and services that were never purchased. Valle and the employee would then split the reimbursed funds.
10. Through the Facility's Investigation, it identified the Member as having submitted claims that required review. In particular, the Member submitted claims in 2014 and 2015 for support stockings.
11. As a result, the Facility and SunLife interviewed the Member on February 2, 2017 and reviewed these claims. The Member admitted to submitting false claims to SunLife for reimbursement under the Benefit Plan with Valle. Specifically, the Member admitted that neither she nor her family members purchased the support stockings listed in the receipts submitted with the claims, nor did they obtain the prescriptions submitted in support of the claim.
12. The Member claimed that Valle would tell her the amount to claim on the benefit claim form. She would then partially fill out the form, sign it, and provide it to Valle, who completed the form. Valle then attached false receipts and prescriptions and submitted the claim form to SunLife. The Member also claimed that, once she received payment for the claims from SunLife, she gave all the funds to Valle and he gave her support hose product in return.
13. The Member admits that Valle submitted false documentation to SunLife on her behalf for reimbursement under Benefit Plan. The Member was aware when she submitted the claims for the support hose in question that authentic prescriptions, measurements for size and receipts had to be provided to the Benefit Plan with the claims. She knew the prescriptions, measurements and receipts for support stockings that were submitted with the claims in her name, which she signed off as accurate, were all false. However, if she were to testify, the Member would claim that, when she received reimbursement for the claims from SunLife, she gave all the funds to Valle and received support stocking product from him in return.

14. Despite the Member's claims to have received support stocking product from Valle and to have given all the claims funds to him, which CNO does not accept, the Member nonetheless acknowledges that she submitted false claim forms and other false documents relating to these claims to the Benefit Plan.
15. The total amount paid to the Member for the claims in 2014 and 2015 was \$4,000.
16. The Facility terminated the Member's employment on February 13, 2017 as a result of this conduct.
17. The Member paid restitution to the Benefit Plan in the full amount of \$4,000 on March 31, 2022.

BENEFIT FRAUD CASES

18. To date, a total of 52 benefits fraud cases relating to substantially similar schemes as the one identified in this case, involving either cash or products not covered by the benefit plan, have been referred to the Discipline Committee. The dollar amounts of the false claims involved range from under \$500 to over \$45,000.

CNO STANDARDS

Professional Standards

19. CNO's *Professional Standards* provides an overall framework for the practice of nursing and a link with other standards, guidelines and competencies developed by CNO. It includes seven broad standard statements pertaining to accountability, continuing competence, ethics, knowledge, knowledge application, leadership and relationships.
20. CNO's *Professional Standards* provides, in relation to the accountability standard, that nurses are accountable to the public and responsible for ensuring their practice and conduct meets the legislative requirements and the standard of the profession. Nurses are responsible for their actions and the consequences of those actions as well as for conducting themselves in ways that promote respect for the profession. Nurses demonstrate this standard by actions such as ensuring their practice is consistent with CNO's standards of practice and guidelines as well as legislation.
21. CNO's *Professional Standards* provides, in relation to the leadership standard, that leadership requires self-knowledge (understanding one's beliefs and values and being aware of how one's behaviour affects others), respect, trust, integrity, shared vision, learning, participation, good communication techniques and the ability to be a change facilitator. The leadership expectation is not limited to nurses in formal leadership positions and all nurses, regardless of their position, have opportunities for leadership. Nurses demonstrate this standard by actions such as role-modelling professional values, beliefs and attributes.

Ethics

22. CNO's *Ethics Standard* describes ethical values that are important to the nursing profession in Ontario including patient well-being, patient choice, privacy and confidentiality, respect for life, maintaining commitments, truthfulness and fairness.
23. CNO's *Ethics Standard* provides, in relation to maintaining commitments, that nurses have a commitment to the nursing profession and being a member of the profession brings with it the respect and trust of the public. To continue to deserve this respect, nurses have a duty to uphold the standards of the profession, conduct themselves in a manner that reflects well on the profession, and to participate in and promote the growth of the profession.
24. CNO's *Ethics Standard* also provides, in relation to truthfulness, that truthfulness means speaking and acting without intending to deceive.
25. The Member admits and acknowledges that she contravened CNO's *Professional Standards* and *Ethics Standard* when she submitted false claims under the Benefit Plan between 2014 and 2015.

ADMISSIONS OF PROFESSIONAL MISCONDUCT

26. The Member admits that she committed the acts of professional misconduct as alleged in paragraph 1 of the Notice of Hearing in that she contravened a standard of practice of the profession or failed to meet the standards of practice of the profession, as described in paragraphs 9 to 17 and 19 to 25 above.
27. The Member admits that she committed the acts of professional misconduct as alleged in paragraph 2 of the Notice of Hearing in that she misappropriated property from a workplace, as described in paragraphs 9 to 17 above.
28. The Member admits that she committed the acts of professional misconduct as alleged in paragraph 3 of the Notice of Hearing in that she falsified a record relating to her practice, as described in paragraphs 9 to 17 above.
29. The Member admits that she committed the acts of professional misconduct as alleged in paragraph 4 of the Notice of Hearing in that she signed or issued, in her professional capacity, a document that she knew or ought to have known contained a false or misleading statement, as described in paragraphs 9 to 17 above.
30. The Member admits that she committed the acts of professional misconduct as alleged in paragraph 5 of the Notice of Hearing, and in particular her conduct was dishonourable and unprofessional, as described in paragraphs 9 to 17 and 19 to 25 above.

Clarification was sought in regards to the Member's hire date (March 7, 1988) at the Facility and the date of registration (August 8, 1990) with the College and it was identified that the Member started at the Facility as a Graduate Nurse initially before becoming a full-time staff nurse.

Decision

The College bears the onus of proving the allegations in accordance with the standard of proof, that being the balance of probabilities based upon clear, cogent and convincing evidence.

Having considered the evidence and the onus and standard of proof, the Panel finds that the Member committed acts of professional misconduct as alleged in paragraphs 1, 2, 3, 4 and 5 of the Notice of Hearing. As to allegation #5, the Panel finds that the Member engaged in conduct that would reasonably be regarded by members of the profession to be unprofessional and dishonourable.

Reasons for Decision

The Panel considered the Agreed Statement of Facts and the Member's plea and finds that this evidence supports findings of professional misconduct as alleged in the Notice of Hearing.

Allegation #1 in the Notice of Hearing is supported by paragraphs 9-17 and 19-26 in the Agreed Statement of Facts. The Member submitted false claims under the St. Michael's Hospital's (the "Facility") employee group benefit plan (the "Benefit Plan") between 2014 and 2015 and received benefits that totalled \$4,000.00 in return. The Member admitted that neither she nor her family members purchased the support stockings listed in the receipts submitted with the claims, nor did they obtain the prescriptions submitted in support of the claims. The College's *Professional Standards* documents that the leadership standard applies to all nurses regardless of their position and indicates that integrity is a key component in demonstrating this standard. The Member showed little, if any, integrity and breached the *Professional Standards* when she purposely submitted false claims for her own benefit. The Member also failed to meet the College's *Ethics Standard* when she purposely deceived her employer's benefit plan when she submitted false claims.

Allegation #2 in the Notice of Hearing is supported by paragraphs 9-17 and 27 in the Agreed Statement of Facts. When the Facility conducted an interview with the Member on February 2, 2017 to review claims submitted, the Member admitted to submitting false claims. The Member would submit false claims to SunLife Insurance ("SunLife") for products and services that were never purchased, and in return she would be financially reimbursed. By submitting false claims and being financially reimbursed for them, the Member misappropriated property from the Facility's Benefit Plan in the amount of \$4,000.00 between 2014-2015.

Allegations #3 and #4 in the Notice of Hearing are supported by paragraphs 9-17, 28 and 29 in the Agreed Statement of Facts. The Member committed professional misconduct when she falsified records relating to her practice and signed in her professional capacity, documents that she knew or ought to have known contained false information. The Member submitted claims, and in doing so she had to sign a claim form with a written declaration that stated "I certify that the information

in this form is true and complete”. The Member admitted to submitting false claims and so she knew the forms contained false information before she signed them. The Panel relies on the conclusions of the *CNO v. Verde-Balayo* (Discipline Committee, 2021) case as precedent and finds that when the Member falsified records and signed the benefit claim submission document that she knew or ought to have known contained false or misleading statements, she committed professional misconduct as these actions involved records relating to her practice and were signed in her professional capacity.

Allegation #5 in the Notice of Hearing is supported by paragraphs 9-17 19-25 and 30 in the Agreed Statement of Facts. The Panel finds that the Member’s conduct was clearly relevant to the practice of nursing. A nurse is expected to uphold respect, trust and integrity. Submitting false claims multiple times over a couple of years, was unprofessional as it demonstrated a serious disregard for her professional obligations. The Panel also finds that the Member’s conduct was dishonourable. It demonstrated an element of dishonesty and deceit through falsifying records and making fraudulent submissions to the employee Benefit Plan. The Member also knew or ought to have known that her behaviour was unacceptable and fell below the standards of a professional.

Penalty

College Counsel and the Member’s Counsel advised the Panel that a Joint Submission on Order had been agreed upon. The Joint Submission on Order requests that this Panel make an order as follows:

1. Requiring the Member to appear before the Panel to be reprimanded within 3 months of the date that this Order becomes final.
2. Directing the Executive Director to suspend the Member’s certificate of registration for 3 months. This suspension shall take effect from the date that this Order becomes final and shall continue to run without interruption as long as the Member remains in a practicing class.
3. Directing the Executive Director to impose the following terms, conditions, and limitations on the Member’s certificate of registration:
 - a) The Member will attend 2 meetings with a Regulatory Expert (the “Expert”), at her own expense and within 6 months from the date that this Order becomes final. To comply, the Member is required to ensure that:
 - i. The Expert has expertise in nursing regulation and has been approved by CNO in advance of the meetings;
 - ii. At least 5 days before the first meeting, or within another timeframe approved by the Expert, the Member provides the Expert with a copy of:
 1. the Panel’s Order,

2. the Notice of Hearing,
 3. the Agreed Statement of Facts,
 4. this Joint Submission on Order, and
 5. if available, a copy of the Panel's Decision and Reasons;
- iii. Before the first meeting, the Member reviews the following CNO publications and completes the associated Reflective Questionnaires, online learning modules and decision tools (where applicable):
 1. *Code of Conduct*,
 2. *Professional Standards*, and
 3. *Ethics*;
- iv. At least 5 days before the first meeting, or within another timeframe approved by the Expert, the Member provides the Expert with a copy of the completed Reflective Questionnaires;
- v. The subject of the sessions with the Expert will include:
 1. the acts or omissions for which the Member was found to have committed professional misconduct,
 2. the potential consequences of the misconduct to the Member's patients, colleagues, profession and self,
 3. strategies for preventing the misconduct from recurring,
 4. the publications, questionnaires and modules set out above, and
 5. the development of a learning plan in collaboration with the Expert;
- vi. Within 30 days after the Member has completed the last session, the Member will confirm that the Expert forwards their report to CNO, in which the Expert will confirm:
 1. the dates the Member attended the sessions,
 2. that the Expert received the required documents from the Member,
 3. that the Expert reviewed the required documents and subjects with the Member, and
 4. the Expert's assessment of the Member's insight into her behaviour;
- vii. If the Member does not comply with any one or more of the requirements above, the Expert may cancel any session scheduled, even if that results in the Member breaching a term, condition or limitation on her certificate of registration;

- b) For a period of 12 months from the date the Member returns to the practice of nursing, the Member will notify her employer(s) of the decision. To comply, the Member is required to:
- i. Ensure that CNO is notified of the name, address, and telephone number of all employer(s) within 14 days of commencing or resuming employment in any nursing position;
 - ii. Provide her employer(s) with a copy of:
 1. the Panel's Order,
 2. the Notice of Hearing,
 3. the Agreed Statement of Facts,
 4. this Joint Submission on Order, and
 5. a copy of the Panel's Decision and Reasons, once available;
 - iii. Ensure that within 14 days of the commencement or resumption of the Member's employment in any nursing position, the employer(s) forward(s) a report to CNO, in which it will confirm:
 1. that they received a copy of the required documents, and
 2. that they agree to notify CNO immediately upon receipt of any information that the Member has breached the standards of practice of the profession.
4. All documents delivered by the Member to CNO, the Expert, or her employer(s) will be delivered by verifiable method, the proof of which the Member will retain.

Penalty Submissions

Submissions were made by College Counsel.

The aggravating factors in this case were:

- The Member made multiple false benefit claims over a couple of years;
- The value of the false claims the Member made was significant at \$4,000.00; and
- The Member was involved in a claims scheme with a co-worker.

The mitigating factors in this case were:

- The Member accepted full responsibility for her conduct by admitting to all the allegations and entering into an Agreed Statement of Facts and a Joint Submission on Order with the College;
- The Member attended and participated in the hearing; and
- The Member admitted to the misconduct when interviewed by the Facility.

The proposed penalty provides for specific deterrence through:

- The oral reprimand; and
- The 3 month suspension of the Member's certificate of registration.

The proposed penalty provides for general deterrence through:

- The 3 month suspension of the Member's certificate of registration.

General deterrence is significant in this case as it sends a message to the other members of the profession that misconduct involving benefit fraud will not be tolerated.

College Counsel submitted a College of Physicians and Surgeons of Ontario case to the Panel to demonstrate the importance of general deterrence.

CPSO v. Moore (Divisional Court, 2003): This case involved OHIP fraud up to \$75,000.00 over a three year period. The member pleaded guilty to defrauding OHIP of \$75,000.00 over three years and was criminally convicted. His certificate of registration was suspended for twelve months and he also had to pay a \$5,000.00 fine plus costs in the amount of \$2,500.00.

The proposed penalty provides for remediation and rehabilitation through:

- The 2 meetings with a Regulatory Expert; and
- Development of a learning plan which will deepen the Member's understanding of the *Ethics Standard* and the *Professional Standards*.

Overall, the public is protected by the 12 month employer notification as this will ensure the Member's employer is aware of the misconduct even if the Member changes employers. The employer will be afforded an opportunity to be diligent in monitoring the Member's practice on her return to the profession.

College Counsel submitted the following cases to the Panel to demonstrate that the proposed penalty fell within the range of similar cases from this Discipline Committee:

CNO v. Verde-Balayo (Discipline Committee, 2021): In this case, the member participated in the hearing but denied two of the allegations set out against her. The Discipline Committee that heard this matter made findings of professional misconduct on all the allegations set out by the College. The member committed acts of professional misconduct when she was involved in similar benefit fraud that took place over several years and allowed the member to receive at least \$7,982.50 in false claims. The member was terminated from the facility and did not make any restitution. The penalty included an oral reprimand, a 4 month suspension of the member's certificate of registration, 2 meetings with a Regulatory Expert and 12 months of employer notification.

CNO v. Velasquez (Discipline Committee, 2021): This case proceeded by way of an Agreed Statement of Facts and a Joint Submission on Order. In this case, the member committed acts of professional misconduct when she was involved in similar benefit fraud that took place over several years and

allowed the member to receive at least \$11,080.00 in false claims. The member remained employed with the facility, but entered into a payment agreement with the facility whereby the member paid back the amount received. The penalty included an oral reprimand, a 3 month suspension of the member's certificate of registration, 2 meetings with a Regulatory Expert and 12 months of employer notification.

Submissions were made by the Member's Counsel.

The Member's Counsel submitted that he agreed with the two cases submitted by College Counsel and the penalty laid out in the Joint Submission on Order is consistent with them.

An additional mitigating factor submitted by the Member's Counsel was that the Member paid restitution.

The Member's Counsel submitted that there is a high likelihood of rehabilitation when a member accepts that they have done something wrong.

Penalty Decision

The Panel accepts the Joint Submission on Order and accordingly orders.

1. The Member is required to appear before the Panel to be reprimanded within 3 months of the date that this Order becomes final.
2. The Executive Director is directed to suspend the Member's certificate of registration for 3 months. This suspension shall take effect from the date that this Order becomes final and shall continue to run without interruption as long as the Member remains in a practicing class.
3. The Executive Director is directed to impose the following terms, conditions, and limitations on the Member's certificate of registration:
 - a) The Member will attend 2 meetings with a Regulatory Expert (the "Expert"), at her own expense and within 6 months from the date that this Order becomes final. To comply, the Member is required to ensure that:
 - i. The Expert has expertise in nursing regulation and has been approved by CNO in advance of the meetings;
 - ii. At least 5 days before the first meeting, or within another timeframe approved by the Expert, the Member provides the Expert with a copy of:
 1. the Panel's Order,
 2. the Notice of Hearing,
 3. the Agreed Statement of Facts,

4. this Joint Submission on Order, and
 5. if available, a copy of the Panel's Decision and Reasons;
 - iii. Before the first meeting, the Member reviews the following CNO publications and completes the associated Reflective Questionnaires, online learning modules and decision tools (where applicable):
 1. *Code of Conduct*,
 2. *Professional Standards*, and
 3. *Ethics*;
 - iv. At least 5 days before the first meeting, or within another timeframe approved by the Expert, the Member provides the Expert with a copy of the completed Reflective Questionnaires;
 - v. The subject of the sessions with the Expert will include:
 1. the acts or omissions for which the Member was found to have committed professional misconduct,
 2. the potential consequences of the misconduct to the Member's patients, colleagues, profession and self,
 3. strategies for preventing the misconduct from recurring,
 4. the publications, questionnaires and modules set out above, and
 5. the development of a learning plan in collaboration with the Expert;
 - vi. Within 30 days after the Member has completed the last session, the Member will confirm that the Expert forwards their report to CNO, in which the Expert will confirm:
 1. the dates the Member attended the sessions,
 2. that the Expert received the required documents from the Member,
 3. that the Expert reviewed the required documents and subjects with the Member, and
 4. the Expert's assessment of the Member's insight into her behaviour;
 - vii. If the Member does not comply with any one or more of the requirements above, the Expert may cancel any session scheduled, even if that results in the Member breaching a term, condition or limitation on her certificate of registration;
- b) For a period of 12 months from the date the Member returns to the practice of nursing, the Member will notify her employer(s) of the decision. To comply, the Member is required to:

- i. Ensure that CNO is notified of the name, address, and telephone number of all employer(s) within 14 days of commencing or resuming employment in any nursing position;
 - ii. Provide her employer(s) with a copy of:
 1. the Panel's Order,
 2. the Notice of Hearing,
 3. the Agreed Statement of Facts,
 4. this Joint Submission on Order, and
 5. a copy of the Panel's Decision and Reasons, once available;
 - iii. Ensure that within 14 days of the commencement or resumption of the Member's employment in any nursing position, the employer(s) forward(s) a report to CNO, in which it will confirm:
 1. that they received a copy of the required documents, and
 2. that they agree to notify CNO immediately upon receipt of any information that the Member has breached the standards of practice of the profession.
4. All documents delivered by the Member to CNO, the Expert, or her employer(s) will be delivered by verifiable method, the proof of which the Member will retain.

Reasons for Penalty Decision

The Panel understands that the penalty ordered should protect the public and enhance public confidence in the ability of the College to regulate nurses. This is achieved through a penalty that addresses specific deterrence, general deterrence and, where appropriate, rehabilitation and remediation. The Panel also considered the penalty in light of the principle that joint submissions should not be interfered with lightly.

The Panel concluded that the proposed penalty is reasonable and in the public interest. The Member has co-operated with the College and, by agreeing to the facts and a proposed penalty, has accepted responsibility.

The Panel finds that the penalty satisfies the principles of specific and general deterrence, rehabilitation and remediation, and public protection. Specific deterrence is achieved through the oral reprimand and a 3 month suspension of the Member's certificate of registration that will send a clear message to the Member that employee benefit fraud will not be tolerated. General deterrence is addressed by the 3 month suspension of the Member's certificate of registration, which will send a clear message to the profession that employee benefit fraud will not be tolerated. Rehabilitation and remediation will be achieved through the 2 meetings with a Regulatory Expert and learning activities. The public will be protected through the 12 months of employer notification which will make the

employer aware of the misconduct so that the employer can appropriately monitor the Member on her return to practice. The public needs to be reassured that it can trust the nursing profession and the care they will receive. This penalty allows the Member the opportunity to reflect on their actions and strengthen their practice as a regulated healthcare professional.

The penalty is also in line with what has been ordered in previous cases in similar circumstances.

I, Carly Gilchrist, RPN, sign this decision and reasons for the decision as Chairperson of this Discipline Panel and on behalf of the members of the Discipline Panel.