

IN THE MATTER OF A DISCIPLINE HEARING BY A DISCIPLINE COMMITTEE,  
ESTABLISHED PURSUANT TO *THE LICENSED PRACTICAL NURSES ACT, 2000* AND  
BYLAWS TO INQUIRE INTO THE CONDUCT OF LICENSED PRACTICAL NURSE  
ELIZABETH EMEKA-OKERE

**REASONS FOR DECISION BY:**

**SASKATCHEWAN ASSOCIATION OF LICENSED PRACTICAL NURSES  
DISCIPLINE COMMITTEE**

**Discipline Committee:**

D. Robinson (Chair), E. Cherney, A. Patron, K. Bradford, T. Feucht

**Legal Counsel:**

Darcia Schirr, Q.C. (Counselling and Investigation Committee)

Matthew Klinger (Discipline Committee)

**INTRODUCTION:**

On January 17, 2020 the Discipline Committee of the Saskatchewan Association of Licensed Practical Nurses (the "**Discipline Committee**") issued a decision finding the Respondent, Licensed Practical Nurse, Elizabeth Emeka-Okere guilty of professional misconduct and professional incompetence with respect to certain charges filed by SALPN's Counselling and Investigation Committee (the "**Investigation Committee**").

A further hearing was held on July 10, 2020 to hear submissions regarding what sanctions ought to be imposed by the Discipline Committee in light of its decision, and pursuant to section 30 of *The Licensed Practical Nurses Act, 2000* (the "**Act**"). Ms. Darcia Schirr, Q.C., appeared as legal counsel for the Investigation Committee. Ms. Emeka-Okere appeared on her own behalf.

**FACTS:**

On May 14, 2008, Ms. Emeka-Okere became a registered member with SALPN and commenced working at Wascana Rehabilitation Centre ("**Wascana**") as a licensed practical nurse. In her employment at Wascana, Ms. Emeka-Okere provided care to elderly patients with dementia, or who otherwise required assistance with daily living activities. Many patients required palliative care. Ms. Emeka-Okere worked at Wascana until her retirement from Wascana at the end of 2018. Ms. Emeka-Okere renewed her license in 2019 as a non-practicing member.

Ms. Emeka-Okere faced a number of allegations of professional misconduct or professional incompetence stemming from her treatment of a number of patients at Wascana between July 26, 2017 and May 22, 2018. Of the 13 charges advanced by the Investigation Committee, the Discipline Committee found Ms. Emeka-Okere guilty of professional misconduct or professional incompetence with respect to 11 of those charges. The factual background regarding each charge is fully set out in the Discipline Committee's decision issued January 27, 2020. For the purposes of this decision, a summary of the relevant facts relating to each charge which was proven against Ms. Emeka-Okere is set out below.

### ***Charges 1(a)-(b)***

On July 26 and 27, 2017, Ms. Emeka-Okere was responsible for providing care to resident S.H. As part of this care, she was required to assess S.H.'s health multiple times during each shift, to take vital signs, and to chart the results of her assessments and the treatment administered.

S.H. required the use of a catheter to drain his urine. S.H. was known to have a high volume of urine output each night. However, on the night of July 26-27, 2017, S.H. produced significantly less urine than would have been expected, indicating he was retaining urine. However, Ms. Emeka-Okere failed to assess S.H.'s condition and vital signs. If she had properly assessed S.H., it would have been apparent that a bladder scan was required. However, Ms. Emeka-Okere failed to direct that S.H. receive a bladder scan. The Discipline Committee found that these actions amounted to professional incompetence.

During the course of the same shift, Ms. Emeka-Okere administered Tylenol to S.H. While she recorded administering Tylenol in Interdisciplinary Progress Notes, she failed to record that information in the Medication Administration Record (the "MAR"). Recording the administration of all medication in the MAR was a required standard practice, because the MAR is the record used by other healthcare professionals when administering medication, in order to determine what medication has been previously provided to a patient, and whether it is safe to provide further medication. The Discipline Committee found that these actions amounted to professional misconduct.

### ***Charges 2(a)-(b)***

On March 4, 2018, Ms. Emeka-Okere was responsible for administering a medication to a resident of Wascana, J.C. in accordance with a physician's order. The physician's order prescribed that the patient receive 300 mg of Dilantin. As the medication came in a 60 ml bottle containing 25mg/ml, Ms. Emeka-Okere was required to provide J.C. with 12 ml of the medication.

However, when Ms. Emeka-Okere went to provide the medication to J.C., she failed to check the MAR to verify the name of the patient, the frequency with which the medication was to be administered and the dosage to be administered. The failure to check the MAR was itself

professional incompetence and misconduct because it was a failure to follow acceptable nursing practices and displayed a lack of professional judgment.

The seriousness of failing to check the MAR was illustrated by the near miss which occurred in this case. Having failed to verify information regarding medication on the MAR, Ms. Emeka-Okere emptied the full 60 ml bottle of medication into a cup to be administered. Fortunately, one of Ms. Emeka-Okere's colleagues stopped her from administering the drug to J.C. If J.C. had taken the dosage prepared by Ms. Emeka-Okere, which was 5 times the prescribed dose, J.C. may have become seriously ill and could have died.

In reaching its decision on these charges, the Discipline Committee noted that Ms. Emeka-Okere made excuses during her testimony trying to justify her behavior, and failed to recognize the seriousness of her failure to properly perform her professional duties. The Discipline Committee found that Ms. Emeka-Okere's actions in administering medication to J.C. amounted to professional incompetence and professional misconduct.

***Charges 3(a), (c), (d), (e) and (g)***

While working at Wascana, Ms. Emeka-Okere was responsible for providing care to L.W., as well as L.W.'s husband. L.W. was receiving palliative care, which included the provision of hydromorphone to manage pain.

On May 22, 2018, Ms. Emeka-Okere was working an afternoon and evening shift, and her duties included attending to the care of L.W. and her husband. One aspect of this duty was to periodically assess the level of pain L.W. was experiencing, and to record that assessment on L.W.'s chart. However, the Discipline Committee found that during that shift Ms. Emeka-Okere failed to conduct these pain assessments and failed to note the results of those assessments, falling below the standard of care required for Licensed Practical Nurses.

Ms. Emeka-Okere recorded some comments by L.W.'s daughter, indicating L.W. was comfortable. However, the accuracy of those notes is doubtful, as the Discipline Committee heard credible testimony from L.W.'s daughter that she had observed her mother becoming agitated on May 22, 2018, and had specifically asked Ms. Emeka-Okere to assess L.W.'s pain. Ms. Emeka-Okere failed to include these comments in her chart, resulting in the chart providing a misleading impression of L.W.'s level of pain. In any event, while comments from family members may be relevant to nursing care and can be included on a patient's chart, it is the professional responsibility of nurses to conduct their own assessments of a patient's status, and to accurately chart the results of those assessments.

Despite not having conducted pain assessments for L.W. on May 22, 2018, as required by professional nursing standards of care, Ms. Emeka-Okere administered 1 mg of hydromorphone at both 17:43 and 22:34. However, contrary to professional standards of nursing care, Ms. Emeka-

Okere either did not conduct follow-up assessments to determine whether this medication had been effective, or failed to chart the results of those assessments.

The Discipline Committee concluded that Ms. Emeka-Okere's conduct described above constituted professional incompetence.

***Charge 3(b)***

As a palliative care patient, a focus of L.W.'s care was on managing her pain. To that end, L.W. had been prescribed hydromorphone. The prescription information contained in the MAR indicated that 0.5 mg to 1 mg of hydromorphone was to be administered to L.W. every hour, or as needed.

During the course of an eight hour shift on May 22, 2018, Ms. Emeka-Okere only administered two doses of 1 mg of hydromorphone. The evidence before the Discipline Committee was that this was less than L.W. would ordinarily receive, and would have left L.W. in pain. If Ms. Emeka-Okere had reviewed and followed the instructions on the MAR, either more medication would have been administered to manage L.W.'s pain, or the decision not to administer that medication based on pain assessments of L.W. should have been charted.

If fact, Ms. Emeka-Okere had not checked the MAR to determine the appropriate dosage and frequency of hydromorphone to provide to L.W. During her testimony was asked about checking the MAR. In response, Ms. Emeka-Okere asked why she would have checked the MAR. The response is concerning, as the requirement to check the MAR prior to administering medication is a violation of the core standards of practice for Licensed Practical Nurses. The Discipline Committee concluded that Ms. Emeka-Okere's failure to check the MAR constituted professional incompetence.

***Charge 3(i)***

Ms. Emeka-Okere was also charged with failing to provide ethical nursing care to L.W., and failing to take accountability or responsibility for her actions or inactions.

The Discipline Committee concluded that Ms. Emeka-Okere's failure to provide medications to L.W. in line with her needs, resulted in unnecessary suffering. The failure to undertake appropriate pain assessments, to administer appropriate medication, and to chart the care provided demonstrated a lack of knowledge or skill, and a failure to maintain appropriate standards of professional competence and conduct in providing care to a member of the public. Ms. Emeka-Okere failed to use evidence and judgment to guide nursing decisions, and to identify and minimize the risks to a patient.

Of particular concern to the Discipline Committee was Ms. Emeka-Okere's failure to take responsibility for her actions and inactions from the time concerns were raised at Wascana through her testimony at the Discipline Hearing. During her testimony Ms. Emeka-Okere consistently

failed to acknowledge how her acts or omissions negatively affected patients. She sought to deflect blame to other health care professionals instead of focusing on her own personal obligations as a health care professional. Ms. Emeka-Okere's continued failure to take responsibility for her actions demonstrates a lack of understanding that her conduct did not meet the standards of the profession. The Discipline Committee concluded that Ms. Emeka-Okere had committed professional misconduct as set out in charge 3(i).

## **SUBMISSIONS:**

### *Submissions of the Investigation Committee*

Counsel for the Investigation Committee provided the Discipline Committee with a proposed penalty, including multiple components which the Investigation Committee submitted were appropriate in order to address concerns including rehabilitation and improving Ms. Emeka-Okere's competence as a Licensed Practical Nurse, specific deterrence, general deterrence to other Licensed Practical Nurses, and maintaining public confidence in the profession and the regulatory body.

In support of its position regarding sanctions, the Investigation Committee highlighted what it considered to be three important themes. First, Ms. Emeka-Okere had failed on multiple occasions to demonstrate basic nursing standards, such as monitoring and charting assessments, as well as administration and charting of medication. Second, the Discipline Committee had found that Ms. Emeka-Okere was less than forthright in her testimony at the hearing. Third, Ms. Emeka-Okere had repeatedly failed to take personal responsibility, and instead sought to blame others or to suggest that other healthcare workers may have also failed to follow appropriate standards. The Investigation Committee submitted that Ms. Emeka-Okere had demonstrated a lack of understanding of her personal obligations as a professional.

The Investigation Committee noted that Ms. Emeka-Okere is currently a non-practicing member. The Investigation Committee recommended that Ms. Emeka-Okere be suspended until she had taken certain courses to improve her skills and knowledge in areas where her conduct had fallen short of professional standards. In order to facilitate Ms. Emeka-Okere's return to work, the Investigation Committee submitted that Ms. Emeka-Okere should be required to complete some courses prior to being permitted to return to practicing status, and that other courses could be completed by Ms. Emeka-Okere after she would be able to apply for reinstatement of a practicing license.

The Investigation Committee submitted that Ms. Emeka-Okere ought to be reprimanded, and that conditions be imposed requiring her to inform any nursing employer of the Discipline Committee's decision for a period of two years. The Investigation Committee also sought orders that the decision be provided to Ms. Emeka-Okere's former employer, Wascana, and that the decision be publicly posted in accordance with SALPN's usual practice.

The Investigation Committee submitted that Ms. Emeka-Okere should be required to pay a minimum of \$35,000 towards the cost of the investigation and hearing. The Investigation Committee provided a breakdown of costs to date for the investigation and hearing, noting that before costs incurred relating to the sanction hearing, those costs already exceeded \$130,000. The Investigation Committee submitted that it was appropriate for Ms. Emeka-Okere to make a significant contribution towards the costs of the hearing. The Investigation Committee noted that Ms. Emeka-Okere had been found guilty of 11 of 13 charges, including the most serious charges involving failure to appropriately administer medication. The Investigation Committee submitted that costs were particularly high in this case because Ms. Emeka-Okere had sought a late adjournment of the hearing, and pursued irrelevant issues, resulting in delays as the hearing was extended to allow Ms. Emeka-Okere to subpoena documents which proved to be completely irrelevant to the issues in this case. The Investigation Committee suggested that the costs may have been higher because Ms. Emeka-Okere was self-represented.

To assist in determining the appropriate sanctions for Ms. Emeka-Okere, particularly in relation to the financial penalty, the Investigation Committee referred to the principles set out in the Court of Appeal's decision in *Abrametz v Law Society of Saskatchewan*, 2018 SKCA 37. In addition to submitting that its proposed sanction was consistent with the principles set out in *Abrametz*, the Investigation Committee noted that if Ms. Emeka-Okere intended to claim financial hardship, the burden was on her to demonstrate that the costs award would represent an undue hardship. The Investigation Committee also referred to a recent sanctions decision issued by the Discipline Committee relating to Pamela Quintin, in which a member was ordered to pay costs of \$35,000.

#### ***Submissions of Ms. Emeka-Okere***

Ms. Emeka-Okere began her submissions by discussing what she believes to be errors in the Discipline Committee's liability decision. The Discipline Committee did not consider these arguments, and reminded Ms. Emeka-Okere that, as discussed prior to the sanctions hearing, while she has a right to appeal the Discipline Committee's decisions, the Discipline Committee itself cannot consider an appeal from its own decision.

Ms. Emeka-Okere submitted that the investigation process was lengthy and difficult for her. She submitted that she had difficulty finding nursing employment because employers wanted references from Wascana, and after she provided contact information for her former managers, she had not heard back from applications. She indicated that at some point since the investigation she had started attending some courses at SIAST in a field not related to nursing, but that she had stopped attending because she decided she would prefer to continue with the nursing profession instead of starting over.

Ms. Emeka-Okere submitted that it would be financially difficult for her to take the courses that the Investigation Committee had suggested. She indicated that she had not been working for the last two years. She claimed that, after taking early retirement from Wascana, she had no income.

She also indicated that she had been living off her credit card, and that while she owned real estate, the properties were mortgaged, and she did not know if she could pay her mortgage. She claimed she had no savings or assets to draw upon. Ms. Emeka-Okere did indicate she had some pension income although she did not specify the amount of her pension income.

In response to the suggestions that she be required to take certain courses and make certain payments by specific dates (as set out in the draft order filed by the Investigation Committee), Ms. Emeka-Okere expressed concerns that she did not know when she would return to nursing. She noted that she was uncertain what would occur as a result of the appeal process she had started. She also expressed interest in visiting her mother overseas prior to returning to nursing. She noted that fixed dates could present an obstacle to those plans.

In response to the requests for costs, Ms. Emeka-Okere submitted she was unable to pay the costs proposed costs given her financial situation. She indicated it would be difficult to pay for the proposed courses, let alone the costs requested by the Investigation Committee.

#### ***Reply Submissions Regarding Ability to Pay***

In response to Ms. Emeka-Okere's submissions that she was unable to pay for any courses or costs of the hearing without undue hardship, the Investigation Committee provided documents from the land titles registry indicating that Ms. Emeka-Okere is the registered owner of two properties, each of which is subject to a mortgage. The Investigation Committee submitted that Ms. Emeka-Okere could use her ownership interest in the properties as a basis to obtain funding to pay for training and costs if she intended to return to nursing.

In response to these submissions Ms. Emeka-Okere indicated that one property was registered in her name but was actually her daughter's house. She explained that she had paid the downpayment and placed the mortgage in her name, but that her daughter made mortgage payments and treated the house as her own. With respect to the second property, which she owns jointly with her husband, Ms. Emeka-Okere indicated she owed approximately \$200,000 out of the original mortgage value of more than \$300,000.

#### **DECISION:**

The decision before the Discipline Committee is what sanctions are appropriate as a result of the acts of professional misconduct and professional incompetence which it has previously found Ms. Emeka-Okere to have committed. *The Licensed Practical Nurses Act, 2000*, SS 2000, c. L-14.2 sets out the remedial authority of the Discipline Committee in section 30:

30(1) Where the discipline committee finds a member guilty of professional misconduct or professional incompetence, it may make one or more of the following orders:

- (a) an order that the member be expelled from the association and that the member's name be struck from the register;
- (b) an order that the member's licence be suspended for a specified period;

- (c) an order that the member's licence be suspended pending the satisfaction and completion of any conditions specified in the order;
  - (d) an order that the member may continue to practise, but only under conditions specified in the order, which may include, but are not restricted to, an order that the member:
    - (i) not do specified types of work;
    - (ii) successfully complete specified classes or courses of instruction;
    - (iii) obtain medical or other treatment or counselling or both;
  - (e) an order reprimanding the member;
  - (f) any other order that the discipline committee considers just.
- (2) In addition to any order made pursuant to subsection (1), the discipline committee may order:
- (a) that the member pay to the association, within a fixed period:
    - (i) a fine in a specified amount not exceeding \$5,000; and
    - (ii) the costs of the investigation and hearing into the member's conduct and related costs, including the expenses of the counselling and investigation committee and the discipline committee and costs of legal services and witnesses; and
  - (b) where a member fails to make payment in accordance with an order pursuant to clause (a), that the member's licence be suspended.

In *Camgoz v College of Physicians and Surgeons (Sask)* (1993), 114 Sask R 161 (QB), the Court of Queen's Bench set out a number of factors which may be relevant in evaluating an appropriate sanction in professional discipline proceedings regarding medical professionals, holding at paras 49-50:

[49] In my respectful view, in determining an appropriate sentence to be imposed on a member of the medical profession found guilty of unbecoming, improper, unprofessional and discreditable conduct, the factors which the respondent ought to take into account include:

1. The nature and gravity of the proven allegations;
2. The age of the offending physician;
3. The age of the offended patient;
4. Evidence of the frequency of the commission of the particular acts of misconduct within particularly, and without generally, the Province;
5. The presence or absence of mitigating circumstances, if any.
6. Specific deterrence;
7. General deterrence;
8. Previous record, if any, for the same, or similar, misconduct; the length of time that has elapsed between the date of any previous misconduct and conviction thereon; and, the member's (properly considered) conduct since that time;



9. Ensuring that the penalty imposed will, as mandated by s. 69.1 of the Act, protect the public and ensure the safe and proper practice of medicine;

10. The need to maintain the public's confidence in the integrity of the respondent's ability to properly supervise the professional conduct of its members;

11. Ensuring that the penalty imposed is not disparate with penalties previously imposed in this jurisdiction, particularly, and in other jurisdictions in general, for the same, or similar acts of misconduct.

[50] The above factors are not to be considered as being an exhaustive list of the factors to be considered by the respondent in its future considerations of like matters. Nor are the factors identified by me listed in order of their importance. The noted factors identified by me are those which I consider to be generally applicable to the consideration of a proper penalty to be imposed following conviction of a member for unbecoming, improper, unprofessional and discreditable conduct. The factors to be considered in a particular case will of course vary, as will their particular relevance, in each case under consideration.

In *Abrametz*, the Court of Appeal specifically addressed principles applicable to costs awards in the context of professional discipline hearings. The court held at paras 44-45 that the purpose of awarding costs in professional discipline proceedings is not ensure that a member bears part of the cost of disciplinary proceedings and that those costs are not borne solely by their fellow members. Such cost orders must not be so prohibitive as to prevent a member from defending their right to practice in their profession or to dispute misconduct charges. The court endorsed the following principles regarding costs decisions at paras 47-48:

- a. The balance between the effect of a cost award on the Appellant and the need for the Provincial Dental Board to be able to effectively administer the disciplinary process;
- b. The respective degrees of success of the parties;
- c. Costs awards ought not to be punitive;
- d. The other sanctions imposed and the expenses associated therewith;
- e. The relative time and expense of the investigation and hearing associated with each of the charges and in particular those on which guilt were entered and those where the Appellant was found not guilty.

The sanction imposed upon Ms. Emeka-Okere must fulfill several objectives. It must promote specific deterrence. Ms. Emeka-Okere has yet to demonstrate any insight into why her behaviors were harmful to patients, and has not demonstrated that she has accepted responsibility for her actions and inactions in caring for patients during the incidents which were the subject of this hearing. It is also important for any sanction to seek to rehabilitate Ms. Emeka-Okere. Ms. Emeka-Okere has expressed a desire to return to nursing. It is important that she does so with a greater understanding of issues including medical documentation, the administration of medication, and providing ethical nursing care to patients.

General deterrence is also a factor in these proceedings. It is important to signal to other Licensed Practical Nurses that it is vital they provide care to patients which meets professional standards. Every Licensed Practical Nurse has a professional obligation to follow nursing standards which are intended to protect the health of patients.

Ms. Emeka-Okere should be reprimanded. In the ordinary course the decisions relating to Ms. Emeka-Okere should be posted on SALPN's website. A copy of the decision should also be sent to the Wascana Rehabilitation Centre. In order to ensure Ms. Emeka-Okere's future nursing employers are aware of the circumstances which led to Ms. Emeka-Okere being disciplined, she shall provide a copy of the decision to any nursing employer for a period of two years following the date of the order. This will help ensure those employers appropriately manage Ms. Emeka-Okere to ensure she is practicing in a safe and professional manner.

The Discipline Committee has concluded that Ms. Emeka-Okere made numerous errors in relation to basic nursing standards. She failed to perform pain assessments, failed to document treatment given to patients, and failed to follow proper procedures for the administration of medication. These failures either harmed the health and well-being of patients or created a significant risk of this harm. In order to ensure Ms. Emeka-Okere practices safely in the future, it is necessary for her to upgrade her knowledge and skills in these areas.

The Discipline Committee agrees with the submission of the Investigation Committee, that Ms. Emeka-Okere should be required to take courses prior to being entitled to apply for a license to practice. In order to avoid effectively suspending Ms. Emeka-Okere from practice for an extended period, while still protecting the public, certain courses may be taken after Ms. Emeka-Okere returns to practice. This will also assist Ms. Emeka-Okere in funding her participation in the courses (although the Discipline Committee finds that participation in the courses would not represent an undue financial hardship, and notes Ms. Emeka-Okere has participated in other SIAST courses without apparent financial difficulty since she retired from Wascana).

Ms. Emeka-Okere must complete the CLPNA *Nursing Documentation 101* online course, as well as the Saskatchewan Polytechnic *Health Assessment for LPNS* (NURS-227CE) course prior to being entitled to apply for a license to practice. After returning to practice Ms. Emeka-Okere must complete the Saskatchewan Polytechnic *Roles/Responsibilities/Ethics* (NURS-1677) course, as well as the Saskatchewan Polytechnic *Health Record Documentation* (NURS-1685) course.

During its submission, the Investigation Committee also indicated that it had planned to request Ms. Emeka-Okere to take the Saskatchewan Polytechnic *Safe Medication Administration* (PHAR-1608) course, but had not done so because the ongoing COVID-19 pandemic had caused the cancellation of this course which involves an in-person laboratory component. Among the most serious findings against Ms. Emeka-Okere, is that she failed to properly administer medication to

a patient. The proper administration of medication is vital to patient safety. Therefore, in the interests of protecting the public, and promoting the return of Ms. Emeka-Okere to safe practice, the Discipline Committee has concluded that she also ought to take the *Safe Medication Administration* course. Given the current unavailability of the course, and the uncertainty caused by the COVID-19 pandemic, the course can be completed after Ms. Emeka-Okere returns to practice, but must be completed promptly once the course is offered again.

In our view it is appropriate that Ms. Emeka-Okere also be required to contribute towards the costs of these disciplinary proceedings. In this case the costs incurred were high. This resulted in part from the number of charges. Ms. Emeka-Okere contested all of the charges advanced by the Investigation Committee. She had a right to do so but having been found to have been guilty of those charges, it is appropriate that she contributes to the costs of the disciplinary process.

Ms. Emeka-Okere was found not guilty of two charges, and the Investigation Committee did not proceed on a third charge which was set out in the formal complaint. However, she was found guilty of eleven charges. While this indicates mixed success, a review of the nature of the charges which were substantiated compared to those which were not substantiated indicates that the vast majority of the allegations against Ms. Emeka-Okere were proven. In these circumstances, it is still appropriate for Ms. Emeka-Okere to make a significant contribution towards the costs of the discipline proceedings against her.

In the present case the hearing and investigation costs were higher than normal. A contributing factor to these increased costs was Ms. Emeka-Okere's conduct during the hearing process. The fact Ms. Emeka-Okere exercised her right to represent herself is irrelevant to determining a costs award. It can be expected that a self-represented member may require some additional explanation and may be provided some leeway on procedural matters in order to ensure a fair hearing. However, Ms. Emeka-Okere is responsible for her actions in unnecessarily extending proceedings, going beyond what would be expected of a self-represented member. Numerous case management calls were required to address procedural issues, including revisiting issues which had previously been discussed. Ms. Emeka-Okere obtained a late adjournment of proceedings two days before the hearing was scheduled to start. During the course of the hearings Ms. Emeka-Okere called witnesses who had no relevant evidence to offer, and a further hearing day was required to permit her an opportunity to subpoena documents which also proved to be irrelevant to the proceedings. It is appropriate that Ms. Emeka-Okere pay a portion of the costs incurred as a result of the manner in which she conducted the hearing.

In this case the costs of the investigation and hearing, prior to the sanctions hearing, exceeded \$130,000. Considering the nature of Ms. Emeka-Okere's misconduct, her failure to accept responsibility, her actions which unnecessarily increased the complexity of the hearing, and the

need for significant specific and general deterrence is appropriate for Ms. Emeka-Okere to pay approximately one-third of the costs incurred in the investigation and hearing procedure.

Ms. Emeka-Okere asserted that she has no ability to pay a significant costs award, indicating that she has not been working since retiring from Wascana. Nevertheless, Ms. Emeka-Okere is in receipt of some pension income (although she did not disclose the amount). Contrary to her initial submissions indicating she had no meaningful assets, Ms. Emeka-Okere owns real property. While we accept that one of the properties registered in Ms. Emeka-Okere's name may actually be beneficially owned by her daughter, she is a registered owner of a second property in which she has at least \$100,000 in equity. We do not accept that Ms. Emeka-Okere has established that paying a costs award would impose an undue hardship, particularly if the payment of the costs order is divided into multiple installments. By permitting Ms. Emeka-Okere to pay by installments, she may pay part of the costs order from her earnings when she returns to providing nursing care.

In the draft order prepared by the Investigation Committee, deadlines to complete courses and make payments were linked to specific calendar dates. Given the uncertainty over whether Ms. Emeka-Okere will immediately seek to return to practice, or if she may not attempt to return for several months, the deadlines imposed will, unless otherwise noted, be fixed based on the date Ms. Emeka-Okere obtains a practicing license.

#### **CONCLUSION:**

For the foregoing reasons, the following Order of the Discipline Committee shall issue in respect of Ms. Emeka-Okere's professional incompetence and professional misconduct:

1. Pursuant to section 30(1)(e) of *The Licensed Practical Nurses Act* (the "Act"), Elizabeth Emeka-Okere is hereby reprimanded.
2. Pursuant to section 30(1)(f) of the Act, Elizabeth Emeka-Okere shall not be entitled to apply for a license to practice until such time as the following conditions are met:
  - a. She successfully completes the *CLPNA Nursing Documentation 101* online course at her own cost and provides verification of completion to the Registrar; and
  - b. She successfully completes the Saskatchewan Polytechnic *Health Assessment for LPNs* (NURS-227CE) course at her own cost and provides verification of completion to the Registrar;

For greater certainty, the conditions identified above are in addition to the usual eligibility requirements which must be met before a practicing license is issued.

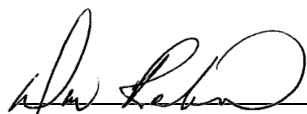
3. Pursuant to section 30(1)(d)(ii) of the Act, Elizabeth Emeka-Okere's continued practice shall be subject to the following conditions:
  - a. Within six months after being reinstated as a practicing member, successful completion of the Saskatchewan Polytechnic *Roles/Responsibilities/Ethics* (NURS-1677) course at her own cost, with verification of completion provided to the Registrar;
  - b. Within six months after being reinstated as a practicing member, successful completion of the Saskatchewan Polytechnic *Health Record Documentation* (NURS-1685) course at her own cost, with verification of completion provided to the Registrar;
  - c. Within the later of six months after being reinstated as a practicing member, or six months after the course is available, successful completion of the Saskatchewan Polytechnic *Safe Medication Administration* (PHAR-1608) course at her own cost, with verification of completion provided to the Registrar.
4. In the event that the courses Elizabeth Emeka-Okere has been ordered to take pursuant to paragraphs 2 and 3 of this order are not offered, she may apply by letter directed to the chairperson of the Discipline Committee to have this order varied.
5. Pursuant to section 30(2)(a)(ii) of the Act, Elizabeth Emeka-Okere shall pay the costs of the investigation and hearing, which costs shall be fixed in the total amount of \$42,000.00. The costs shall be paid as follows:
  - (a) Within 6 months after being reinstated as a practicing member, the sum of \$7,000.00;
  - (b) Within 12 months after being reinstated as a practicing member, the sum of \$7,000.00;
  - (c) Within 18 months after being reinstated as a practicing member, the sum of \$7,000.00;

- (d) Within 24 months after being reinstated as a practicing member, the sum of \$7,000.00;
- (e) Within 30 months after being reinstated as a practicing member, the sum of \$7,000.00;
- (f) Within 36 months after being reinstated as a practicing member, the sum of \$7,000.00;

If an installment is not made on the due date or within 7 days of the due date, Elizabeth Emeka-Okere's license shall be suspended until payment is made pursuant to section 30(2)(b) of the Act.

- 6. Pursuant to section 30(3) of the Act, a copy of the Discipline Committee's decision and order dated January 17, 2020, as well as this decision and order shall be provided to the Wascana Rehabilitation Centre, Saskatchewan Health Authority.
- 7. Pursuant to section 30(1)(f) of the Act and for a period of two years from the date of this order, Elizabeth Emeka-Okere shall provide a copy of the Discipline Committee's decision and order dated January 17, 2020, as well as this decision and order to her nursing employer. Further, Elizabeth Emeka-Okere shall request that each any such nursing employer to provide written confirmation to the Registrar that the decisions and orders have been received.
- 8. A copy of the Discipline Committee's decision and order dated January 17, 2020, as well as this decision and order shall be published on the SALPN website.

DATED at Regina, Saskatchewan, this 28th day of September, 2020.



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D. Robinson, Chairperson, Discipline Committee of  
the Saskatchewan Association of Licensed Practical  
Nurses on behalf of the Discipline Committee  
consisting of E. Cherney, A. Patron, K. Bradford, and  
T. Feucht