

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 NATASHA JANZEN

Discipline Committee:

Don Robinson, Jaime Carlson (Acting Chair), Arlene Patron and Kathy Bradford

Counsel:

Chris Lavier for Ms. Natasha Janzen
Darcia Schirr, Q.C., for the Counselling and Investigation Committee
Lynsey Gaudin for the Discipline Committee

WRITTEN REASONS

INTRODUCTION:

On May 23, 2019, the Discipline Committee of the Saskatchewan Association of Licensed Practical Nurses (the "**Discipline Committee**") held a hearing in Regina, Saskatchewan, concerning allegations of professional misconduct against former Licensed Practical Nurse, Natasha Janzen. It was confirmed at the outset of the hearing that the Discipline Committee was properly constituted to hear the matter. A continuation of the hearing took place on June 5, 2019, to allow the Discipline Committee to address the issues of suspension and costs.

Ms. Janzen was registered to practice as a practical nurse with the Saskatchewan Association of Licensed Practical Nurses from June 23, 2010 to July 18, 2017. She has not held a license to practice in Saskatchewan since July 18, 2017.

The particulars of the misconduct alleged against Ms. Janzen are outlined at Appendix A to the Notice of Hearing filed in these proceedings as Exhibit P-1. Specifically, it is alleged that Ms. Janzen is guilty of professional misconduct, the particulars of which include as follows:

1. While you were employed as a home care nurse with the Saskatoon Health Region:
 - a. On or about March 26, 2017, you removed and diverted to yourself ten (10) vials of Sufentanil from patient J.P.
 - b. Between the period June 26 and June 28, 2017, you removed and diverted to yourself eight (8) vials of Sufentanil from patient J.P.
 - c. You failed to make appropriate entries on the medication flow sheet, progress notes and daily sheets for patient J.P. on May 3, May 12, May 24 and May 29, 2017.

- d. On various occasions, you failed to follow appropriate procedures in securing and returning J.P.'s chart to the manager of Home Care.
- e. On May 29, 2017, you advised the manager of Home Care that you were sick. A subsequent investigation revealed that you attended at the home of J.P. on that date.
- f. On June 15, 2017, the Health Region suspended your employment and you were directed not to provide care or visit any Home Care patient. Notwithstanding that direction, you contacted or visited the patient J.P. on June 26, June 27, July 2 and July 3, 2017.
- g. You failed to develop and maintain an appropriate professional relationship with the patient J.P.

The allegation contained in 1(b), above, was withdrawn by the Counselling and Investigation Committee ("**C&I Committee**"). The remainder of the allegations of professional misconduct are said to constitute a breach by Ms. Janzen of ss. 24 and 49 of *The Licensed Practical Nurses Act, 2000*, SS 2000, c L-14.2 (the "**Act**"); ss. 19 and 20 of the SALPN Regulatory Bylaws; Principles 1, 2, 3 and 5 of the SALPN Code of Ethics and Standards of Practices; and Standards 1 and 4 of the SALPN Standards of Practice.

At the outset of the hearing, Ms. Janzen entered a plea of guilty to the allegations as set out in Appendix A of Exhibit P-1. Counsel for Ms. Janzen, Chris Lavier, and counsel for the C&I Committee, Darcia Schirr, Q.C., thereafter filed an Agreed Statement of Facts with the Discipline Committee.

It was initially indicated that a penalty submission would be jointly filed. However, counsel for the C&I Committee took the position that the joint submission required revision following submissions by counsel for Ms. Janzen, as well as some additional questions from the Discipline Committee. By correspondence dated May 29, 2019, the Discipline Committee received the revised Joint Penalty Submission filed by the parties. There was no joint submission as to the matter of suspension and costs.

The Discipline Committee accepts both the guilty plea of Ms. Janzen and the Joint Penalty Submission filed by the parties. The Discipline Committee must decide on the matter of suspension and costs applicable herein, and order accordingly, as set out below.

EVIDENCE:

The following Agreed Statement of Facts was filed as Exhibit P-2 with the Discipline Committee:¹

1. Natasha Janzen resides in the City of Saskatoon in the Province of Saskatchewan. At the times material to these proceedings, Ms. Janzen was employed as a licensed practical nurse with the Saskatoon Health Region, Home Care branch.

¹ Note: Information referenced in "Tabs" omitted.

2. Natasha Janzen first registered with Saskatchewan Association of Licensed Practical Nurses (SALPN) on June 23, 2010 and she remained a practicing member until July 18, 2017 when she surrendered her license. Ms. Janzen has not held a practicing license since July 18, 2017.

Introduction

3. On July 19, 2017, SALPN received an online complaint from Mary Ann Denton, the manager of Home Care with the Saskatoon Health Region (the "Health Region").
4. The concerns set out in the complaint letter were investigated by the Counselling and Investigation Committee (the Investigation Committee). Upon completion of the investigation, the Investigation Committee recommended, pursuant to section 26(2)(a) of the Act, that the Discipline Committee hear and determine the complaint. The charges are set out in Appendix A to a Notice of Discipline Hearing dated June 28, 2018.
5. The discipline hearing was originally set to commence on September 4, 2018. At Ms. Janzen's request, the hearing was adjourned to November 30, 2018. The hearing set for November 30, 2018 was again adjourned at Ms. Janzen's request. After case management conference calls with the chair of the Discipline Committee and legal counsel for the Investigation Committee, Ms. Janzen and the Discipline Committee, the hearing date of May 23, 2019 was set.
6. Natasha Janzen admits the allegations described in charge 1(a) and (c) through (g) inclusive and admits that the conduct described in those charges constitutes professional incompetence and professional misconduct as those terms are defined in the *Licensed Practical Nurses Act, 2000* (the Act) and a breach of the Regulatory Bylaws, Code of Ethics and Standards of Practice particularized in Appendix A to the Notice of Discipline Hearing.
7. The Investigation Committee withdraws charge 1(b).

Background to the charges

8. In 2007, Natasha Janzen began her employment with the Saskatoon Health Region in as a continuing care aide. In November 2012, Ms. Janzen was hired as a licensed practical nurse with the Home Care Branch of the Health Region. She was hired in a temporary position. In March 2017, Ms. Janzen's status changed to a permanent employee with Home Care.
9. Ms. Janzen was on medical leave from October 2016 until March 2017 when she returned to work on a return to work plan doing light duties with Home Care.
10. The Home Care Branch in Saskatoon provides home care services to qualified patients, 7-days a week and 24 hours a day. The Branch is staffed with approximately 147 nurses consisting of registered nurses and licensed practical nurses. The registered nurses conduct the admission and initial assessment documents. On a periodic basis, the registered nurses on staff would review the charts to ensure that charting was complete and timely. The licensed practical nurses provide nursing services in the home of the patients.

11. The shifts scheduled for licensed practical nurses are the day shift (0730 to 1630), the evening shift (1600 to 2330) and a modified shift (0730 to 1100).
12. At the start of each day, the licensed practical nurses would attend the Home Care office to receive their assignments for the shift, pick up the charts for their patients and attend at the patient's home. At the end of the shift, the nurses were responsible to ensure that all charting was complete and then return the patient charts to the office for use by the nurse on the next shift. Given the shift schedules and the needs of the patients, a patient would often be seen by different nurses.
13. The Home Care nurses were directed by the manager and supervisors of the Home Care Branch that they were not to pick up prescription medications for patients from pharmacies.
14. The patient J.P. was first admitted as a home care patient to the Health Region in April 2007. As of September 2013, J.P. has been a regular and continuous patient of Home Care.
15. At the times material to these charges, J.P. was a palliative care patient with multiple health care problems. As a result of a diabetes condition, she was missing a number of fingers which affected her manual dexterity. She also had vision problems. Home Care nurses attended J.P.'s home every Monday, Wednesday, and Friday during the day shift. J.P. was prescribed sufentanil and the nursing services provided by the Home Care nurses was to preload oral syringes with sufentanil.
16. Attached at Appendix "A" is the physician's order for sufentanil. J.P. was allowed to administer the sufentanil to herself on an as needed basis.
17. Sufentanil is a synthetic opioid analgesic that is significantly more potent than its parent drug fentanyl and morphine.
18. Natasha Janzen provided nursing services to J.P. over the course of approximately two years. Her first attendance at J.P.'s home was on April 9, 2015. The last attendance Ms. Janzen documented at J.P.'s home was on May 24, 2017. In that period, Natasha Janzen documented 54 visits at J.P.'s home.

Events Leading up to Ms. Janzen's termination of employment

19. On Friday May 26, 2017, Ms. Janzen attended at J.P.'s home. She did not return the chart at the end of her shift to the Home Care office.
20. On Monday May 29, 2017, Ms. Janzen called in sick. J.P. needed to be seen on May 29 and her chart could not be found. Ms. Denton left voicemail messages for Ms. Janzen on May 29 and May 30, 2017, looking for the chart. Receiving no response, Ms. Denton telephoned J.P. on Tuesday May 30. J.P. confirmed that Ms. Janzen attended at her home on Friday, May 26 and Monday, May 29 and on both occasions preloaded the syringes with sufentanil.

21. Upon concluding that call, Ms. Denton learned that Natasha Janzen had left a message at the Home Care office on Sunday May 28 advising that J.P. did not need to be seen on Monday May 29.
22. On May 31, 2017, Ms. Denton met with Natasha Janzen. Ms. Janzen provided an explanation that she had J.P.'s chart and that she realized she was mistaken in thinking that J.P. did not need to be seen on May 29 so she attended at J.P.'s home even though she had called in sick.
23. In the days that followed, the registered nurse on staff was reviewing J.P.'s chart and particularly the charting made by Natasha Janzen on the medication records and progress notes. Ms. Denton and the registered nurses saw discrepancies and irregularities in Ms. Janzen's entries on J.P.'s chart. Further, and if called to testify Ms. Denton would state that Natasha Janzen often arrived at the Home Care office early and was the first to volunteer to see J.P. that day.
24. On June 15, 2017, Ms. Janzen met [sic] was advised by telephone that she was suspended without pay. A short time later, Ms. Janzen received a letter advising her that she was suspended without pay. Attached at Appendix "B" is letter dated June 15, 2017 directed to Ms. Janzen.
25. The Health Region continued to investigate Ms. Janzen's conduct by reviewing J.P.'s chart, contacting the pharmacy that dispensed J.P.'s medication and by interviewing J.P. The investigation concluded with the termination of Ms. Janzen's employment effective July 17, 2017.
26. Ms. Denton's termination letter to Natasha Janzen dated July 17, 2017 was submitted by the Health Region to SALPN as an online complaint received July 19, 2017.

Charges

1(a) On or about May 26, 2017, you removed and diverted to yourself ten (10) vials of sufentanil from patient J.P.

27. J.P. has been a long standing customer of Shoppers Drug Mart Grosvenor Park in Saskatoon. Cherie Rutherford is the pharmacy manager and J.P. is well known to Ms. Rutherford. Ms. Rutherford would describe J.P. as a patient who is responsible with her medication.
28. Grosvenor Park Shoppers Drug Mart does not stock a significant quantity of sufentanil because it is expensive. Further, it is a drug that is highly divertible.
29. A box of sufentanil contains 10 vials or ampoules and each vial contains 5ml. The pharmacy usually dispensed 5 boxes at a time to J.P. The Home Care nurses preloaded a syringe with 1 ml of sufentanil for J.P. and she took the sufentanil orally.

30. On May 26, 2017, J.P.'s mother attended at Grosvenor Park Shoppers Drug Mart at 11:00 a.m. and picked up 2 vials of sufentanil for J.P. as a full box was not available. While Ms. Janzen does not have direct knowledge of this herself, she does not dispute its accuracy.
31. At 12:15 p.m. on May 26, Natasha Janzen arrived at Grosvenor Park Shoppers Drug Mart and identified herself as J.P.'s Home Care nurse. Ms. Janzen requested the remaining 48 vials of sufentanil. Ms. Rutherford telephoned J.P. to confirm that the 48 vials could be released to her. Receiving that authorization, the 48 vials were dispensed to Natasha Janzen. While she does not dispute the timeline or details herein, to the best of Ms. Janzen's recollection, she requested 50 vials of sufentanil, not 48.
32. The Home Care nurses must document medication on a Medication Flow Sheet. For the month of May 2017, the only nurse who attended at J.P.'s home and preloaded the syringes was Natasha Janzen. Ms. Janzen used the incorrect form as she completed an Insulin Flow Sheet. The Insulin Flow Sheet is attached at Appendix "C". For May 26, Ms. Janzen entered 40 vials picked up when in fact the total was 50.
33. Natasha Janzen acknowledges that she diverted 10 vials of sufentanil to herself. If called to testify, Ms. Janzen would state that she was in a significant amount of pain at the time, was taking prescribed medication (hydromorphone) for this pain, and cannot account for the whereabouts of these vials. She would further testify that she did not, at any time, consume the 10 vials of sufentanil nor sell or give away the sufentanil.

1(c) You failed to make appropriate entries on the medication flow sheet, progress notes and daily data sheets for patient J.P. on May 3, May 12, May 24 and May 29, 2017.

34. Home Care nurses are expected to complete Daily Data Sheets outlining the services provided to the patient by identifying the date and time spent with the patient. Ms. Janzen did not complete Daily Data Sheets for attendances for J.P. on May 12 and May 22, 2017. She has provided no explanation for this either to the Health Region or the Investigation Committee.
35. Natasha Janzen made entries for May 3, 2017 on both the Medication Flow Sheet and the Insulin Flow Sheet. The Insulin Flow Sheet is not the correct document to be used. The Medication Flow Sheet is the correct document but the entries on both sheets do not correspond. Attached at Appendix "D" is the Medication Flow Sheet.
36. The Insulin Flow Sheet completed by Ms. Janzen for May 2017 is replete with discrepancy. For May 10, Ms. Janzen charted that there were 28 vials of sufentanil remaining. For May 12, Ms. Janzen charted that 25 syringes were preloaded which would mean 5 vials were used leaving 23 vials. Ms. Janzen charted 24. On the Insulin Flow Sheet, Ms. Janzen charted she preloaded 20 syringes which would mean 4 vials. On May 26, Ms. Janzen charted that 25 vials were preloaded which ought to have meant 31 were remaining not 30. Ms. Janzen's explanation for these discrepancies is that she had spilled a liquid on the sheets so she "rewrote" some of the numbers but she could not read them all so she was trying to add up what she had used.

37. On June 5, June 7 and June 9, 2017, a nurse named Tracy Hancock attended at J.P.'s home to preload the syringes. On June 5, Ms. Hancock observed that 8 vials did not have caps on them and the caps were in a separate box. The vials appeared to be full and intact. Ms. Hancock asked J.P. about this and J.P. advised that another nurse had dropped the box and the caps fell off. In the Health Region investigation, Ms. Janzen was identified as the nurse that dropped the box.
38. Natasha Janzen did not document that she had dropped the box of sufentanil. If called to testify, Natasha Janzen would admit that she dropped the box of medication on the floor, and when she opened the box, she could see that 3 or 4 caps had come off the vials. She has no explanation as to why she did not chart this.

1(d) On various occasions, you failed to follow appropriate procedures in securing and returning J.P.'s chart to the manager of Home Care.

39. Home Care nurses were expected to return the patient's chart at the end of the shift. Ms. Janzen admits that she did not always do that with J.P.'s chart.

1(e) On May 29, 2017, you advised the manager of Home Care that you were sick. A subsequent investigation revealed that you attended at the home of J.P. on that date.

40. Ms. Janzen did not chart her attendance at J.P.'s home on May 29, 2017 on the Daily Data Sheet or on the Nursing Progress Notes.

1(f) On June 15, 2017, the Health Region suspended your employment and you were directed not to provide care or visit any Home Care patient. Notwithstanding that direction, you contacted or visited the patient J.P. on June 26, June 27, July 2 and July 3, 2017.

1(g) You failed to develop and maintain an appropriate professional relationship with patient J.P.

41. J.P. provided a series of text messages between herself and Natasha Janzen to the Health Region as part of its investigation. Attached at Appendix "E" are the text messages. The text messages cover the period June 10, 2017 through July 3, 2017 inclusive.
42. On July 11, 2017, the Health Region interviewed J.P. In her interview, she described Natasha Janzen as a friend who helped J.P. with her dog and ran errands for her.

Voluntary Surrender of Practicing License

43. On July 18, 2017, Ms. Janzen called SALPN and spoke with Cara Brewster, the Registrar. Ms. Janzen advised that she had been using hydromorphone for some time and felt she was unfit to practice. Ms. Janzen inquired about the process to voluntarily surrender her license.
44. After this telephone conversation, Ms. Brewster sent an email to Natasha Janzen. Attached at Appendix "F" is email exchange dated July 18, 2017.

45. Upon receipt of Ms. Janzen's email of July 18, 2017 at 1:00 p.m., Ms. Brewster made entries in SALPN's records to reflect Ms. Janzen's status as voluntarily surrendered.
46. Natasha Janzen was interviewed by Della Bartzen, the Investigation Committee investigator on November 13, 2017. Ms. Janzen advised that she had wrist surgery on October 25, 2016 and was prescribed hydromorphone. Ms. Janzen further advised that she first began taking hydromorphone in 2009 after a motor vehicle accident and that she had taken hydromorphone "on and off since 2009". Ms. Janzen admitted that she had an addiction to hydromorphone.
47. On November 1, 2017, Ms. Janzen faxed a note to Cara Brewster attaching a letter from her general physician. Attached at Appendix "G" is the fax cover sheet along with letter dated October 25, 2017 from Dr. Jennifer Johnstone.
48. In light of the information provided by Ms. Janzen, the Investigation Committee requested records from the Ministry of Health Drug Plan regarding Natasha Janzen. This request was made pursuant to section 27(2)(h) and 27(5)(c) of the *Health Information Protection Act*. Attached at Appendix "H" are the following records received from the Drug Plan:
 - a. Benefit prescriptions processed from October 1, 2016 to July 1, 2017;
 - b. Non-benefit prescriptions processed from October 1, 2016 to July 1, 2017;
 - c. Summary of hydromorphone prescription quantities for the years 2019 through 2016 inclusive;
 - d. PIP profile from January 1, 2019 to present.

Previous Discipline History

49. Natasha Janzen has not been the subject of a prior complaint to SALPN.

ANALYSIS:

Upon hearing and considering the evidence submitted by both parties, the Discipline Committee accepts Ms. Janzen's plea and finds her guilty of professional misconduct as defined pursuant to the Act, the SALPN Regulatory Bylaws, the SALPN Code of Ethics and Standards of Practice, and the SALPN Standards of Licensed Practical Nurses in Canada.

Having accepted that Ms. Jansen is guilty of professional misconduct, the Discipline Committee turns to an assessment of the appropriate penalty in the circumstances.

Joint Submission

At the outset of the hearing, it was indicated by the parties that a joint submission on penalty would be filed. However, following representations made by counsel for Ms. Janzen, counsel for the C&I Committee took the position that the penalty submission required revision. More particularly, in submissions, Mr. Lavier represented to the Discipline Committee that Ms. Janzen had voluntarily

entered the "Brief and Social Detox (Larson House)" for drug rehabilitative treatment in June 2016. It was also represented that Ms. Janzen had been seeing an addictions counsellor, is currently on the methadone program, and has been seeing a professional regarding her mental health since 2010. This constituted new information otherwise not contained in the Agreed Statement of Facts.

Following questions as to the impact of Ms. Janzen's ongoing challenges with mental health, Ms. Schirr and Mr. Lavier proposed to file a revised Joint Penalty Submission at a later date to address this new information and the questions of the Discipline Committee. The Discipline Committee allowed this course of action.

By correspondence dated May 29, 2019, the Discipline Committee received the revised Joint Penalty Submission filed by the parties.

The Discipline Committee reconvened on June 5, 2019 to consider the revised Joint Penalty Submission. The Joint Penalty Submission was as follows:

1. Pursuant to section 30(1)(b) of *The Licensed Practical Nurses Act, 2000* (the "Act"), Natasha Janzen's license shall be suspended for a period of 8 to 10 months.
2. Before the expiry of the suspension and in the event Ms. Janzen seeks a return to the practice of nursing, she shall provide:
 - a. A report to the Registrar from her treating physician outlining her treatment for her mental health and addictions problems, her compliance with treatment and providing an opinion regarding her ability to safely practice nursing. The costs of any such report shall be borne by Ms. Janzen.
 - b. A report to the Registrar from an addiction counsellor outlining her treatment for her addictions problems, her compliance with treatment and providing an opinion regarding her ability to safely practice nursing. The costs of any such report shall be borne by Ms. Janzen.
 - c. A report to the Registrar from her mental health professional outlining her treatment for her mental health problems, her compliance with treatment and providing an opinion regarding her ability to safely practice nursing. The costs of any such report shall be borne by Ms. Janzen.
 - d. Three consecutive months of drug screen test results showing negative results.
3. Pursuant to section 30(1)(d) of the Act, Natasha Janzen's license to practice shall be subject to the following conditions:
 - a. Within 6 months of her reinstatement, she shall successfully complete and provide verification of successful completion to the Registrar of the Saskatchewan Polytechnic course *Roles Responsibilities and Ethics* (NURS-1667). Ms. Janzen shall bear all costs of the course.

- b. Within 6 months of her reinstatement, she shall successfully complete and provide verification of successful completion to the Registrar of the National Council of State Boards of Nursing (NCSBN) course *Professional Boundaries in Nursing*. Ms. Janzen shall bear all costs of the course.
 - c. Within 6 months of her reinstatement, she shall prepare and provide the Registrar with a self-reflective essay outlining the risk management strategies she will develop and use to ensure professional boundaries are maintained in her nurse/patient relationships.
 - d. For so long as Ms. Janzen holds a practicing license, she shall immediately advise the Registrar if she is the subject of any discipline sanctions taken by her nursing employer.
 - e. For so long as Ms. Janzen holds a practicing license, she shall advise the Registrar if she changes her nursing employer and do so within 7 days of the date of the change.
 - f. For so long as Ms. Janzen holds a practicing license, Ms. Janzen shall provide random drug screens to the Registrar upon the Registrar's request.
 - g. For so long as Ms. Janzen holds a practicing license, Ms. Janzen shall work in nursing environments where she has no access, directly or indirectly to narcotics, benzodiazepines, opiates and controlled substances. Ms. Janzen may apply to the Discipline Committee to vary or remove this restriction by giving 14 days written notice to legal counsel for the Discipline Committee and legal counsel for the Counselling and Investigation Committee.
4. Pursuant to section 30(2)(a)(ii) of the Act, Natasha Janzen shall pay the costs of the investigation and hearing which costs shall be fixed in the amount of \$_____.² The costs shall be paid on or before _____.³ Failing payment in full by that date, Natasha Janzen's license shall be suspended until payment is made pursuant to section 30(2)(b) of the Act.
 5. Pursuant to section 30(1)(f) of the Act, Natasha Janzen shall be required to provide a written copy of the decision of the Discipline Committee to future nursing employers for a two year period from the date of this Order. Ms. Janzen shall ensure that each nursing employer provide written confirmation to the Registrar that the decision of the Discipline Committee has been received.
 6. Pursuant to section 30(5) of the Act, a copy of the Order and the written reasons of the Discipline Committee shall be sent to the Home Care department of the Saskatchewan Health Authority in Saskatoon Attention: Marcia Mac Nevin.

² Note: Intentionally left blank by parties to the Joint Penalty Submission.

³ Note: Intentionally left blank by parties to the Joint Penalty Submission.

In considering an appropriate penalty to be imposed, the Discipline Committee acknowledges the following factors set out in the case of *Camgoz v College of Physicians and Surgeons of Saskatchewan*, (1993) 114 Sask R 161, as relevant to the imposition of disciplinary sanctions:

- The nature and gravity of the proven allegation;
- The age of the offending physician;
- The age of the offended patient;
- Evidence of the frequency of the commission of the particular acts of misconduct within particularly, and without generally, the Province;
- The presence or absence of mitigating circumstances, if any;
- The presence or absence of aggravating circumstances, if any;
- Specific deterrence;
- General deterrence;
- Previous record, if any, for the same, or similar misconduct; the length of time that has elapsed between the dates of any previous misconduct and conviction thereon; and, the members conduct since that time;
- The need to maintain the public's confidence in the integrity of the College's ability to properly supervise the professional misconduct of its members;
- Ensuring that the penalty imposed is not inconsistent with penalties previously imposed in this jurisdiction, particularly, and in other jurisdictions in general, for the same, or similar acts of misconduct.

The Discipline Committee acknowledges that any penalty ordered should protect the public and enhance public confidence in the ability of SALPN to regulate licensed practical nurses. This is achieved through a penalty that not only maintains the public's confidence but also addresses specific and general deterrence.

The Joint Penalty Submission was also considered in light of the principle that joint submissions should not be interfered with lightly. This principle was affirmed by the Supreme Court of Canada in *R v Anthony-Cook*, 2016 SCC 43 at para 34, wherein Justice Moldaver remarked:

34 [...] [A] joint submission should not be rejected lightly [...] Rejection denotes a submission so unhinged from the circumstances of the offence and the offender that its acceptance would leave reasonable and informed persons, aware of all relevant circumstances, including the importance of promoting certainty in resolution

discussions, to believe that the proper functioning of the justice systems had broken down. This is undeniably high threshold [...]

The Discipline Committee concludes that the Joint Penalty Submission is reasonable and in the public interest. Ms. Janzen has cooperated with the SALPN and, by agreeing to the Agreed Statement of Facts and a Joint Penalty Submission, has accepted responsibility for her acts of professional misconduct. The specific restrictions placed on Ms. Janzen's ability to practice along with the requirement to provide this decision to future employers will serve as protection of the public, as well as a specific and a general deterrent to other members of the profession. The requirement for drug and alcohol testing with addictions counseling will serve as an opportunity for rehabilitation. Further, Ms. Janzen voluntarily gave up her license to practice in 2018 and is actively seeking treatment to address both her addiction and mental health challenges.

Suspension and Costs

The remaining issues to be determined by the Discipline Committee concern the length of Ms. Janzen's suspension from practice and the costs to be paid by Ms. Janzen as a result of the misconduct. There was no joint submission on this point.

Counsel for the C&I Committee submitted that an 8 to 10 month suspension from practice would be appropriate in the circumstances. Ms. Schirr directed the Discipline Committee to its previous decision respecting Ashley Storrey dated September 6, 2017, wherein the member was suspended for 6 months despite not having worked the prior 14 months due to a voluntary undertaking not to practice. The circumstances of Ms. Janzen's misconduct are represented as being more serious as she admitted to diverting the substance to herself and also occupied a heightened position of trust as a homecare nurse.

In respect of costs, the C&I Committee proposed that Ms. Janzen pay \$15,000, but suggested reasonable time to pay could be arranged given that the member has not been employed for some time.

Mr. Lavier submitted that an 8 to 10 month suspension is too punitive given the length of time Ms. Janzen has been out of the workplace, citing her desire to return to work as a nurse, and instead proposed a suspension of 30 to 90 days. Ms. Janzen offered to pay \$100 on a monthly basis towards a costs award. Her counsel advised that as she is currently unemployed this was all she could afford.

After extensive deliberation and consideration of the submissions of both counsel and other discipline previously implemented by this body for similar offences, the Discipline Committee concludes that an 8 month suspension from practice is appropriate in the circumstances.

The Discipline Committee finds that this suspension period balances the applicable mitigating and aggravating factors. Specifically, the relevant mitigating factors considered include that Ms. Janzen has no prior record of discipline; she voluntarily gave up her license; as well as her relative youth and commitment to rehabilitating herself. Conversely, the relevant aggravating factors considered include that Ms. Janzen's acts occurred while in a private home and with no direct

supervision. This meant there was a greater amount of trust placed on her, which she abused in the circumstances. She also engaged in actions specifically prohibited, including picking up patient medications from the pharmacy and visiting the patient after being specifically prohibited from doing so.

A suspension of 8 months from practice thus meets the desired balance between general and specific deterrence and maintains public confidence that even patients treated in their homes can expect nurses to adhere to the standards of the profession.

In respect of costs, the Discipline Committee notes that the delay involved in bringing this proceeding to a hearing was partly due to Ms. Janzen. The Committee acknowledges her limited ability to pay a costs award given her current unemployment and that it will be some time before she is able to work in her profession again according to the terms of the Order. Balancing the appropriateness of a costs award with Ms. Janzen's ability to pay, the Discipline Committee finds that costs should be set at \$12,000 and that the appropriate length of time to pay is 24 months.

CONCLUSION:

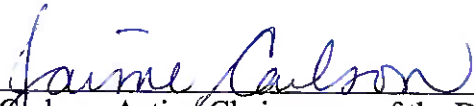
The following Order of the Discipline Committee shall issue in respect of Ms. Janzen's professional misconduct:

1. Pursuant to s. 30(1)(b) of the Act, Natasha Janzen's license shall be suspended for a period of 8 months.
2. Before the expiry of the suspension and in the event Ms. Janzen seeks a return to the practice of nursing, she shall provide:
 - a. A report to the Registrar from her treating physician outlining her treatment for her mental health and addictions problems, her compliance with treatment and providing an opinion regarding her ability to safely practice nursing. The costs of any such report shall be borne by Ms. Janzen.
 - b. A report to the Registrar from an addiction counsellor outlining her treatment for her addictions problems, her compliance with treatment and providing an opinion regarding her ability to safely practice nursing. The costs of any such report shall be borne by Ms. Janzen.
 - c. A report to the Registrar from her mental health professional outlining her treatment for her mental health problems, her compliance with treatment and providing an opinion regarding her ability to safely practice nursing. The costs of any such report shall be borne by Ms. Janzen.
 - d. Three consecutive months of drug screen test results showing negative results.

3. Pursuant to s. 30(1)(d) of the Act, Natasha Janzen's license to practice shall be subject to the following conditions:
 - a. Within 6 months of her reinstatement, she shall successfully complete and provide verification of successful completion to the Registrar of the Saskatchewan Polytechnic course *Roles Responsibilities and Ethics* (NURS-1667). Ms. Janzen shall bear all costs of the course.
 - b. Within 6 months of her reinstatement, she shall successfully complete and provide verification of successful completion to the Registrar of the National Council of State Boards of Nursing (NCSBN) course *Professional Boundaries in Nursing*. Ms. Janzen shall bear all costs of the course.
 - c. Within 6 months of her reinstatement, she shall prepare and provide the Registrar with a self-reflective essay outlining the risk management strategies she will develop and use to ensure professional boundaries are maintained in her nurse/patient relationships.
 - d. For so long as Ms. Janzen holds a practicing license, she shall immediately advise the Registrar if she is the subject of any discipline sanctions taken by her nursing employer.
 - e. For so long as Ms. Janzen holds a practicing license, she shall advise the Registrar if she changes her nursing employer and do so within 7 days of the date of the change.
 - f. For so long as Ms. Janzen holds a practicing license, Ms. Janzen shall provide random drug screens to the Registrar upon the Registrar's request.
 - g. For so long as Ms. Janzen holds a practicing license, Ms. Janzen shall work in nursing environments where she has no access, directly or indirectly to narcotics, benzodiazepines, opiates and controlled substances. Ms. Janzen may apply to the Discipline Committee to vary or remove this restriction by giving 14 days written notice to legal counsel for the Discipline Committee and legal counsel for the Counselling and Investigation Committee.
4. Pursuant to s. 30(2)(a)(ii) of the Act, Natasha Janzen shall pay the costs of the investigation and hearing which costs shall be fixed in the amount of \$12,000. The costs shall be paid on or before July 23, 2021, being 24 months from the date of this Order. Failing payment in full by that date, Natasha Janzen's license shall be suspended until payment is made pursuant to s. 30(2)(b) of the Act.
5. Pursuant to s. 30(1)(f) of the Act, Natasha Janzen shall be required to provide a written copy of the decision of the Discipline Committee to future nursing employers for a two year period from the date of this Order. Ms. Janzen shall ensure that each nursing employer provide written confirmation to the Registrar that the decision of the Discipline Committee has been received.

6. Pursuant to s. 30(5) of the Act, a copy of the Order and the written reasons of the Discipline Committee shall be sent to the Home Care department of the Saskatchewan Health Authority in Saskatoon, attention: Marcia Mac Nevin.

DATED at Regina, Saskatchewan, this 22nd day of July, 2019.



J. Carlson, Acting Chairperson of the Discipline
Committee of the Saskatchewan Association of
Licensed Practical Nurses