



In compliance with Council Policy- GP-11, some details of the matter have been removed or edited to maintain the privacy of personal information of some of the persons involved.

In The Matter of: **The Regulated Health Professions Act, S.M.2009, c. 15**

And in The Matter of: Brenda Kline, a member of the College of Registered Nurses of Manitoba

To: Brenda Kline CRNM #131802

TAKE NOTICE that the Complaints Investigation Committee (the “Committee”) of the College of Registered Nurses of Manitoba resolves and hereby censures the Registrant with respect to:

- 1. Failing to report that an RN was unfit to practice.**
- 2. Failing to promptly report that an RN had been suspended.**
- 3. Failing to intervene when it was reported to her that an RN was practicing while impaired.**

On November 16, 2023, in accordance with section 102(1)(d) of *The Regulated Health Professions Act* (the “RHPA”), the Committee decided to Censure the Registrant as a record of its disapproval of the serious deficiencies in her conduct.

Censure creates a disciplinary record which may be considered in the future by the Committee or an Inquiry Committee when determining the action to be taken following an investigation or hearing.

I. The Relevant Facts Are:

On January 5, 2022, an RN who works where the Registrant is a member of the leadership, left a voicemail message for the Registrant in which they stated they are an “alcoholic”. That RN then took a leave of absence.

When the RN returned to work in July 2022, there was no follow up by the Registrant or the employer regarding the self-disclosure. The Registrant had no discussion with the RN regarding the self-disclosure, nor were there any restrictions or monitoring of the RN’s practice.

The Registrant did not report the self-disclosure to the College.

On February 27, 2023, a staff member reported to the Registrant that the RN smelled like alcohol and seemed to be stumbling. The Registrant went to the unit where the RN was working and left the unit without speaking to or assessing the RN. The Registrant did not meet with the RN until the end of their shift.

The RN subsequently went off on a leave of absence and returned to work in May 2023. At that time, the RN disclosed to the Registrant that they were impaired while at work on February 27, 2023.

On May 5, 2023, the RN was issued a one-day unpaid suspension as a result of this incident. The Registrant did not report the suspension to the College until June 14, 2023.

II. Standards of Practice, Practice Directions and Code of Ethics

The Committee is reasonably satisfied that the facts support that the Registrant did not meet the following Standards of Practice for Registered Nurses:

Practice Direction Practice Expectations for RNs 2022

Professional Practice

Registered nurses are accountable and responsible to demonstrate professional behaviours, attributes and values that uphold trust in the profession of registered nursing. As an RN, you must:

1. Demonstrate understanding of legislation governing registered nursing practice and your practice of registered nursing including but not limited to the Regulated Health Professions Act (RHPA), the College's General Regulations, Practice of Nursing Regulation, and any/all other applicable legislation (e.g. The Personal Health Information Act).
2. Promote a practice environment that supports responsibility, accountability, professional development, and respect for others by:
 - c. Identifying issues which could have an injurious effect on clients or others.
 - e. Demonstrating an understanding of and adherence to your duty to report, including reporting of unsafe practice, professional incompetence, professional misconduct and incapacity or unfitness to practice.

Ethical Practice

Registered nurses recognize, promote, and uphold the ethical standards of the nursing profession. As an RN, you must:

14. Practise in accordance with the values outlined in the Code of Ethics.

CNA CODE OF ETHICS 2017

Part I. Nursing Values and Ethical Responsibilities

Nurses in all contexts and domains of practice and at all levels of decision-making bear the ethical responsibilities identified under each of the seven primary nursing values. These responsibilities apply to nurses' interactions with all persons who have healthcare needs or are receiving care as well as with students, colleagues and other healthcare providers. The responsibilities are intended to guide nurses in applying the Code to their practice. They also serve to articulate nursing values to employers, other health-care providers and the public. Nurses help their colleagues implement the Code and they ensure that nursing students are acquainted with it.

A. Providing Safe, Compassionate, Competent and Ethical Care

Nurses provide safe, compassionate, competent and ethical care.

Ethical responsibilities:

4. Nurses question, intervene, report and address unsafe, non-compassionate, unethical or incompetent practice or conditions that interfere with their ability to provide safe, compassionate, competent and ethical care; and they support those who do the same.
12. Nurses foster a safe, quality practice environment (CNA & Canadian Federation of Nurses Unions [CFNIJI, 2015]).

G. Being Accountable

Nurses are accountable for their actions and answerable for their practice.

Ethical responsibilities:

1. Nurses, as members of a self-regulating profession, practise according to the values and responsibilities in the Code and in keeping with the professional standards, laws and regulations supporting ethical practice.
6. Nurses are attentive to signs that a colleague is unable, for whatever reason, to perform their duties. In such a case, nurses will take the necessary steps to protect the safety of persons receiving care.

III. On these facts of the Complaints Investigation Committee records its disapproval of the Registrant's conduct.

RNs have an ethical and legal obligation to report to the College if they have information that another RN is unfit to practice.

The RHPA, Section 138(1) states:

“A member who reasonably believes that another member of the same regulated health profession

- (a) is unfit to practise, incompetent or unethical; or*
- (b) suffers from a mental or physical disorder or illness that may affect his or her fitness to practise, and continues to practise despite having been counselled not to;*

must disclose that belief to the registrar, along with the name of the other member and particulars of the suspected disorder, illness, lack of fitness to practise, incompetency or unethical behaviour.

The Registrant failed to meet these requirements. Furthermore, when this RN disclosed being an “alcoholic”, by way of a voicemail message, it appears the Registrant did not take any meaningful action, including that she did not speak to the RN about the disclosure. By choosing not to acknowledge this disclosure, the Registrant failed to meet her professional obligations, and she failed her employee.

Employers who suspend or terminate an RN for professional incompetence or professional misconduct are required to promptly report that information to the College.

The RHPA, Section 168(2) states:

“If a hospital or regional health authority

- (a) employs or engages a member as a member of its professional or medical staff; and*
- (b) suspends or terminates the employment or engagement of the member, or withdraws the member's privileges, for misconduct, incompetence or incapacity;*

then the hospital or regional health authority must promptly report the suspension, termination or withdrawal to the council of the member's college and give the member a copy of the report.”

The Registrant failed to meet these requirements.

The Registrant was made aware that an RN may have been practicing while impaired. While this allegation should have been extremely concerning to her, the Registrant chose not to assess the RN, speak to the RN, nor investigate in any meaningful way. The Registrant permitted the Registered Nurse to continue providing care to patients for the remainder of their shift without any meaningful action of any kind. Every patient that RN cared for was at risk of harm. The Registrant could have intervened but chose not to. This failure to act is further aggravated by the fact that this same RN made a previous disclosure to the Registrant regarding their use of alcohol, which the Registrant clearly failed to consider.

This staggering lapse in judgement failed her employees, their patients, and placed her employer at serious risk. With the Registrant's more than 30 years of combined nursing and leadership experience, there is absolutely no excuse for her failing to protect the public.

Registered nursing is a self-regulated profession in Manitoba. RNs must recognize that self-regulation is a privilege, and that each RN has a continuing responsibility to meet the *Standards of Practice for Registered Nurses* and the *Code of Ethics for Registered Nurses*.

As an RN in a leadership position, the Registrant must ensure she is complying with her legal obligations and professional responsibilities. A reasonable and prudent registered nurse ought to have:

1. Followed up after receiving information that another RN was unfit to practice, including reporting this information to the College.
2. Immediately and thoroughly investigated after receiving information that an RN may be practicing while impaired and intervened accordingly.
3. Promptly reported to the College after the employer issued the suspension.

On these facts, the Committee records its disapproval of the lack of professionalism in failing to adhere to the ethical values, standards of practice, and the RHPA.

Although the conduct is sufficiently serious to refer to the Inquiry Committee, the Committee is mindful of the fact that the Registrant does not have a disciplinary record.

The Censure will adequately protect the public's concern regarding an RN's duty to report impairment and incapacity to practice.

On these facts the Committee believes that the Censure should be published as it is to act as a specific deterrence for the Registrant, and as a general deterrence for other registered nurses.

On these facts, the Committee ordered the Registrant to pay costs of \$1000.