

**IN THE MATTER OF:**            *The Regulated Health Professions Act*  
**CCSM c R117**

**AND IN THE MATTER OF:** **An Inquiry Committee Panel into the Conduct of**  
**ANDREA MAENDEL, CRNM #147532**

---

## **DECISION AND REASONS**

---



Centre for Professional Regulatory Collaboration  
210 Commerce Drive  
Winnipeg MB R3P 2W1  
Telephone: 204-774-3477  
Fax: 204-775-6052



## **Introduction and Preliminary Issues**

1. On Wednesday, July 16, 2025, an Inquiry Committee Panel (the “Panel”) of the College of Registered Nurses of Manitoba (the “College”) held a hearing into charges against a registrant of the College, Andrea Maendel (the “Registrant”).
2. The initial return date for the hearing was May 22, 2025, and it was adjourned on May 1, 2025, based on the Registrant’s signed waiver.
3. At the commencement of the hearing, it was established that the Notice of Hearing dated April 2, 2025, (the “Notice”), had been properly served and the jurisdictional requirements set forth in subsections 102(3), 116(2), and 116(4) of The Regulated Health Professions Act (the “RHPA”) had been met.
4. No objections were raised to the composition of the Panel.
5. The Registrant indicated their intention to enter a plea of guilty to the charges contained in the Notice. At the direction of the Chair, counsel to the Panel conducted a plea inquiry. The Panel was satisfied that the Registrant: was voluntarily pleading guilty; understood that by pleading guilty: they gave up the right to contest the factual accuracy of the allegations made against them: acknowledged the breaches alleged in the Notice and that they constituted professional misconduct; and that even though a joint recommendation may be made with respect to the appropriate sanction, the Panel – subject to the law applying to joint recommendations – is not bound to follow the joint recommendation, and that the Panel will determine the appropriate penalty after considering the evidence and the submissions of counsel.
6. The Registrant entered a plea of guilty to both the counts in the Notice, namely that:
  - (a) Between February 2022 and September 2023, they submitted at least 25 inappropriate expense claims to their employer for reimbursement totaling \$2,500 knowing the expense claims were not valid work-

related expenses and included personal gas receipts, duplicate expense claims, expenses incurred by a former coworker and boyfriend, and expenses for home care clients.

(b) They undertook foot care, including debridement, which was outside of their scope of practice.

7. The Registrant admitted that their conduct described above constituted professional misconduct.
8. The Panel heard submissions from CIC counsel describing the background facts giving rise to the matter raised in the Notice.
9. The parties made a joint recommendation as to disposition of the matter and suggested a two-week suspension, a \$3,750.00 contribution to costs, a fine of \$3,500.00 and a reprimand (the "Joint Recommendation").
10. After hearing those submissions, the Panel briefly adjourned to consider the joint recommendation and then advised it was prepared to accept the Joint Recommendation with written reasons to follow. These are those reasons.

### **Facts**

11. The Registrant was practicing as a Registered Nurse for the Dakota Wicozani Tipi Health & Wellness Centre (the "Employer") in Portage la Prairie, Manitoba.
12. Up to and including May 2023, the Registrant submitted gas receipts for reimbursement. The Employer identified that they were submitting an unusually large number of gas receipts and questioned their legitimacy.
13. On October 10, 2023, the Employer conducted an audit of the Registrant's reimbursement requests from February 2022 to September 2023 identifying at least

25 instances of inappropriate expense requests. Concerns identified with the expenses included:

- (a) Insufficient information being provided on the receipts;
- (b) An unusually large number of reimbursement requests;
- (c) Several duplicate requests; and,
- (d) The days and times of the purchases not aligning with regular business hours.

14. On October 11, 2023, the Employer met with the Registrant with respect to their reimbursement requests. At that time, the Respondent could not recall all the receipts but maintained they had submitted them appropriately.
15. On further inquiry, the Registrant admitted that they regularly submit personal gas receipts and claim them as work-related expenses.
16. The Registrant justified their actions with the explanation that they do not feel they get paid what they deserve, and that nurses at other employers make \$5.00/hour more than they do.
17. The Registrant submitted multiple receipts, obtained from a former co-worker and boyfriend, in an attempt to secure financial repayment for themselves.
18. On October 13, 2023, the Registrant asked to meet with their Employer and during that meeting the Registrant admitted that they had a history of stealing, indicating they had stolen since they were a young person and that they had been submitting inappropriate reimbursement requests that they knew they were not entitled to submit.
19. During the investigation, the Registrant advised the investigator that they do not feel that nurses get paid what they deserve and other nurses working for other employers

are earning \$5.00 more per hour. Submitting the receipts made them feel like they are getting paid what they are owed.

20. On October 20, 2023, the Employer again met with the Registrant and suspended them for one week to be served from October 20 to 26th, 2023, and required them to pay back \$2,500.00.
21. In May 2022, the Registrant debrided a callous on the foot of a diabetic client (the "Reserved Act").
22. The Registrant was aware of the reserved acts under the College of Registered Nurses of Manitoba General Regulation, Reserved Act 3.4.3-4(a) which states that a Registered Nurse may perform a procedure on tissue below the dermis for the purpose of sharp wound debridement only if they have completed additional education to perform this procedure.
23. The Registrant did not have the additional training required to perform the Reserved Act and practiced out of scope for Registered Nurses.
24. The Registrant admitted their conduct was misguided and they knew they ought not to have performed the act but wanted to save the client's toe and his foot, as he was non-compliant.
25. While debriding the callous on the foot of the diabetic client, the Registrant cut the patient's foot and failed to document or report that this had occurred. Subsequently, the patient developed an infection and lost his great toe. It is unclear the extent to which the debridement contributed to the loss of the patient's great toe, as the patient had an existing chronic wound prior to the debridement.

26. The Registrant advised that they had practiced out of scope and inappropriately performed the Reserved Act on diabetic and non-diabetic patients approximately three other times.

### **Submission of the CIC**

27. The Notice sets out a list of the breaches which the Registrant's admitted professional misconduct engaged.

28. Counsel for the CIC pointed out that, with respect to both categories of conduct, the Registrant was governed by section 86 of the RHPA, which provides that they must comply with the RHPA, the regulations, by-laws, standards of practice, code of ethics and practice directions for their health profession.

29. At the hearing, Counsel for the CIC highlighted the following with respect to the Registrant's inappropriate billing:

#### *(a) The Code of Ethics for Registered Nurses*

- (i) Primary Nursing Value A. – Providing Safe, Compassionate, Competent and Ethical Care

Nurses provide safe, compassionate, competent and ethical care.

Ethical Responsibilities 1 and 5

1. Nurses have a responsibility to conduct themselves according to the ethical responsibilities outlined in this document and in practice standards in what they do and how they interact with persons receiving care and other members of the health-care team.

5. Nurses are honest...

- (ii) Primary Nursing Value F. – Promoting Justice

Nurses uphold principles of justice by safeguarding human rights, equity and fairness and by promoting the public good.

Ethical Responsibility 4

8. Nurses do not engage in any form of lying...

(iii) Primary Nursing Value G. – Being Accountable

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

Ethical Responsibilities 1 and 2

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.
2. Nurses are honest and practise with integrity in all of their professional interactions...

*(b) CRNM's Practice Direction: Practice Expectations for RNs*

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 Ethical Conduct.

*(c) CRNM Entry Level Competencies (ELCs) for the Practice of Registered Nurses (2019)*

- (i) 2. Professional – Registered nurses are professionals who are committed to the health and well-being of clients. Registered nurses uphold the profession's practice standards and ethics and are accountable to the public and the profession.

2.2 Demonstrates a professional presence, and confidence, honesty, integrity, and respect in all interactions.

30. At the hearing, Counsel for the CIC highlighted the following with respect to the Registrant's scope of practice:

(a) *The Code of Ethics for Registered Nurses*

Primary Nursing Value A. – Providing Safe, Compassionate, Competent and Ethical Care

Nurses provide safe, compassionate, competent and ethical care.

Ethical Responsibilities 1, 3, 5 and 6

1. Nurses have a responsibility to conduct themselves according to the ethical responsibilities outlined in this document and in practice standards in what they do and how they interact with persons receiving care and other members of the health-care team.
3. Nurses build trustworthy relationships with persons receiving care as the foundation of meaningful communication, recognizing that building these relationships involves a conscious effort. Such relationships are critical to understanding people's needs and concerns.
5. Nurses are honest...
6. Nurses practise "within their own level of competence and seek [appropriate] direction and guidance... when aspects of the care required are beyond their individual competence"...

(b) *The College of Nurses General Regulation 114/2017*

- (i) Section 3.3 – A member may perform a reserved act only if the member is legally permitted and competent to perform it and it is safe and appropriate for the procedure being performed.
- (ii) Section 4(a) – If a registered nurse has completed additional education, the registered nurse may perform a procedure on tissue below the dermis for the following purposes: (a) sharp wound debridement...

(c) *The College's Practice Direction: Scope of Practice for RNs - Reserved Act 3 [as above]* setting out criteria on the requirement for additional necessary education.

31. The CIC urged the Panel to accept the Joint Recommendation and directed the Panel to consider previous Inquiry Committee Panel Decisions of the College including the

Nguse (January 30, 2023), *Marius* (February 14, 2024), *Kist* (May 28, 2024), and *Andrew* (August 1, 2024) decisions which he maintained supported the range of penalty in the proposed Joint Recommendation.

32. Mr. Swayze noted there were also mitigating factors which the Panel ought to consider including: the Registrant's ultimate confession to her employer; their acceptance of responsibility for their actions; and, their cooperation with the CIC and the College with respect to this prosecution and hearing.
33. Counsel for the CIC emphasized that the Joint Recommendation and the negotiating process leading up to it was an effective means for the parties to achieve a resolution, subject to the oversight of the Panel. Mr. Swayze referred to the applicable authorities on joint recommendations including the Anthony-Cook and Pillay decisions (referred to later in these Reasons).
34. It was submitted that the Joint Recommendation does not offend the public interest and ought to be accepted.

### **Submission of the Registrant**

35. Counsel for the Registrant reiterated the mitigating factors noted above and provided some additional background on the Registrant.
36. Ms. Duncan submitted that the Registrant admits and acknowledges their wrongdoing and is apologetic and genuinely remorseful to their employer, their colleagues, and their patients.
37. The Registrant has received a five-day unpaid suspension from their employer and, in November 2023, repaid \$2,500 to their employer. Ms. Duncan made specific note of the fact that the Registrant's employer did not terminate their employment and has provided the Registrant with the opportunity to regain trust.

38. With respect to the practice out of scope, Ms. Duncan described her client as “well-intentioned” and having a “big, caring heart”, and that they try to advocate and “go the extra mile to a fault” for their patients.
39. It was submitted that the Registrant fully understands that their admitted misconduct impacts the trusted reputation of registered nurses as a profession and that the Registrant has taken active steps to change and improve their practice, including taking a professional boundaries course, again reading the Code of Ethics, writing a self-reflective essay, and meeting with their charge nurse to discuss ethics and come up with an actionable plan for improvement going forward.
40. Ms. Duncan asked the Panel to consider the Registrant’s honesty and integrity, despite their shame, in admitting to their misconduct. She noted that the Registrant was well-liked by their patients.
41. In asking the Panel to accept the Joint Recommendation, Ms. Duncan noted the Registrant has experienced a significant financial impact, and that it is an appropriate punishment which will act as a specific deterrent to the Registrant and a general deterrent to the profession as a whole.

### **Analysis and Decision**

42. The Panel finds that the facts submitted establish that the Registrant is guilty of professional misconduct as alleged in the Notice. The Registrant acknowledged and admitted that their conduct amounted to professional misconduct.
43. Registered nurses are in a position of trust. Honesty and integrity, and recognizing professional limits are cornerstones of nursing practice, core ethical requirements, and basic practice standards.

44. Registered nurses are to demonstrate understanding of all applicable legislation governing registered nursing practice and must practise in accordance with the values outlined in the Code of Ethics and demonstrate accountability and responsibility.
45. Subsection 124(1) of the RHPA authorizes the Panel to make any finding permitted under subsection 124(2) which includes that an investigated member has breached the Code of Ethics or practice directions or is guilty of professional misconduct.
46. The authority of a Panel to make sentencing orders, and orders related to costs are found in sections 126 and 127 of the RHPA.
47. In reaching its decision, the Panel acknowledges the submissions of counsel to the CIC and counsel for the Registrant and was mindful of the objectives of such orders which have been articulated by various authorities.
48. In *The Regulation of Professions in Canada*, Carswell 2021, James T. Casey describes the purpose of sentencing in professional discipline cases, citing *McKee v. College of Psychologists (British Columbia)*, [1994] 9 W.W.R. 374 (at page 376):

[W]here the legislature has entrusted the disciplinary process to a self-governing professional body, the legislative purpose is regulation of the profession in the public interest. The emphasis must clearly be upon the protection of the public interest...

49. Citing *McKee* and a number of other authorities, Casey goes on to list the factors in determining how the public is protected including:

... specific deterrence of the member from engaging in further misconduct, general deterrence of other members of the profession, rehabilitation of the member, punishment of the offender, ..., the denunciation by society of the conduct, the need to maintain the public's confidence in the integrity of the

profession's ability to properly supervise the conduct of its members and ensuring that the penalty imposed is not disparate with penalties in other cases.

50. When determining an appropriate penalty, in accordance with *Jaswal v. Medical Board* (Nfld.) 1996 CanLII 11630 (NLSC), the Panel considered the following factors:

- (a) the nature and gravity of the proven allegations;
- (b) the absence of any prior discipline history;
- (c) the role of the Registrant in acknowledging what had occurred;
- (d) the presence or absence of any mitigating circumstances;
- (e) the need to promote specific and general deterrence and, thereby, to protect the public;
- (f) the need to maintain the public's confidence in the integrity of the profession; and,
- (g) the degree to which the offensive conduct that was found to have occurred was clearly regarded, by consensus, as being the type of conduct that would fall outside the range of permitted conduct; and
- (h) the range of sentence in other similar cases.

51. The Panel noted the following aggravating factors:

- (a) the Registrant was dishonest in submitting falsified expense claims which is an extremely serious breach of trust and breach of integrity; and
- (b) the Registrant's out-of-scope conduct was ill-considered and caused significant harm to the patient.

52. The Panel accepted both counsel's submissions on mitigating factors, noting that the Registrant:

- (a) has no previous discipline/complaints history;
- (b) voluntarily came forward to disclose their misconduct and admit their dishonesty;

- (c) accepted responsibility for their actions and apologized for their conduct;
- (d) cooperated with the College's investigation;
- (e) pled guilty to both charges thereby saving the time and expense of a protracted disciplinary hearing; and
- (f) apologized and has taken accountability for their misconduct and is genuinely remorseful.

53. The Panel accepted that the sanction being jointly recommended is consistent with those previously imposed on registered nurses.

54. In *Anthony Cook v Her Majesty the Queen*, 2016 SCC 43 (“Anthony-Cook”), the Supreme Court of Canada confirmed that an adjudicator may reject and depart from a joint recommendation on penalty only where the proposed disposition would bring the administration of justice into disrepute or would otherwise be contrary to the public interest.

55. At paragraph 34 of that decision, the Court described this as an “undeniably high threshold”, writing:

[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 lead reasonable and informed persons, aware of all the relevant circumstances, including the importance of promoting certainty in resolution discussions, to believe that the proper functioning of the justice system had broken down.

*R v Anthony-Cook*, 2016 SCC 43 at para 34

56. Though the principles in *Anthony-Cook* were articulated in the context of a criminal prosecution, the “public interest test” has been adopted by healthcare regulators and regulators of other self-governing professions in Manitoba.

*Re Pillay*, 2018 Carswell Man 223 at para 48

57. The Panel accepted that the Registrant's need for specific deterrence was significantly lessened in light of their acknowledgment, apology, and remorse.
58. The Panel is of the view that the penalty it is imposing properly addresses and protects the public interest, and achieves the purpose of:
- (a) providing general deterrence to all registered nurses that this type of conduct will be investigated, reviewed, and punished; and
  - (b) reassuring the public that the College is working to maintain standards and ensure continued trust in registered nurses.
59. The Panel has therefore accepted the guilty plea and makes the following Order:
- (a) The Registrant is hereby suspended from practice for a period of two weeks;
  - (b) The Registrant is hereby fined in the amount of \$3,500.00;
  - (c) The Registrant is to pay costs to the College in the amount of \$3,750.00;
  - (d) The Registrant is hereby issued a reprimand with respect to both counts; and,
  - (e) There will be publication of the Decision and Reasons.

DATED at Winnipeg, Manitoba, the 5th day of September, 2025.

---

LYDIA HARRIS, RN, Member and Chair of the Panel *has authorized the use of electronic signature*

---

TRICIA TYERMAN, RN, Member *has authorized the use of electronic signature*

---

JOSEPH LOVELACE, Public Representative, *has authorized the use of electronic signature*

---

DONALD SOLAR, Public Representative, *has authorized the use of electronic signature*

---

BRENDA SULLIVAN, RN, Member, *has authorized the use of electronic signature*