

INVESTIGATION COMMITTEE
of the
SASKATCHEWAN REGISTERED NURSES' ASSOCIATION

- and -

Gregory W. Pittman
Saskatchewan RN # 34554
Saskatoon, Saskatchewan

DECISION
of the
DISCIPLINE COMMITTEE
of the
SASKATCHEWAN REGISTERED NURSES' ASSOCIATION

Appearance for the Investigation Committee:	Mr. Roger Lepage
Appearance for Gregory Pittman:	None
Appearance for the Discipline Committee:	Ms. Darcia Schirr, Q.C.
Chairperson for the Discipline Committee:	Ms. Linda Brothwell

Date of Hearing: May 30 and 31, 2011
Ramada Hotel & Convention Center
1818 Victoria Avenue
Regina, Saskatchewan

Date of Decision: SEPTEMBER 20, 2011

INTRODUCTION

The Discipline Committee of the Saskatchewan Registered Nurses' Association (SRNA) convened to hear and determine a complaint of professional misconduct against Registered Nurse #34554, Gregory W. Pittman on May 30, 2011.

The charges against Mr. Pittman arose from an investigation by the Investigation Committee which was initiated by a letter received from the SRNA on May 31, 2010 from Jenny Bartsch, Director, Surgery Services, Royal University Hospital. The letter informed the SRNA that as a result of concerns about Mr. Pittman's professional behaviour while employed at the Saskatoon City Hospital, he was dismissed for cause from employment with the Saskatoon Health Region effective May 20, 2010.

The Discipline Committee is constituted under Section 29 of *The Registered Nurses Act, 1988* (the Act). The allegations against Mr. Pittman were outlined in a Notice of Hearing dated March 21, 2011, charging him with professional misconduct, contrary to Section 26(1) and 26(2)(1) of the Act.

The Notice of Hearing was marked as Exhibit P-2 and the relevant portions are as follows:

Charge Number 1

You, Gregory Pittman, are alleged to be guilty of professional misconduct contrary to section 26(1) and 26(2)(1) of *The Registered Nurses Act, 1988*:

The relevant provisions of professional misconduct are described, as follows, in The Act:

26(1) For the purposes of this Act, professional misconduct is a question of fact but any matter, conduct or thing, whether or not disgraceful or dishonorable, that is contrary to the best interests of the public or nurses or tends to harm the standing of the profession of nursing is professional misconduct within the meaning of this Act.

26(2) Without restricting the generality of subsection (1), the discipline committee may find a nurse guilty of professional misconduct if the nurse has:

(I) failed to comply with the code of ethics of the association.

Particulars of the professional misconduct alleged are that:

- 1. While at work you asked a co-worker if she “sold anything for erections”, indicating to her that you have had problems in this area and had not had sex with your wife for six years.**
- 2. While at work you hugged and touched co-workers in ways that made them uncomfortable.**
- 3. While at work you used sexually explicit language directed towards co-workers.**
- 4. You attended a co-worker’s place of employment (tanning spa) and while there stood naked in front of this co-worker and masturbated. You asked the co-worker if she “liked what she saw” and indicated that you “shaved down there” for her, pointing to your penis area. You also grabbed the co-worker’s hand and pulled it towards your mid-section at which point she pulled away and left the room. Following the co-worker leaving the room, you ejaculated on the tanning bed, which she was required to clean.**
- 5. While at work you were observed by a co-worker touching the breasts of a patient while assisting this patient getting out of bed.**
- 6. While at work you informed a female co-worker that her “butt looked good in her pants”.**
- 7. While at work you asked a female co-worker if she was “having unprotected sex with her boyfriend” and asked if her boyfriend “was circumcised”.**
- 8. While at work you provided a co-worker with your cell number and invited her to watch you get “waxed”.**
- 9. While at work you massaged a co-workers back and neck without asking permission, to which the co-worker pushed your hands away.**
- 10. While at work you came up behind a co-worker and pushed your chest and body up against her back.**
- 11. While at work you stood in doorways and using your body prevented co-workers from leaving the room when they attempted to do so.**
- 12. While at work you touched a co-worker in the crotch area over his clothing.**

13. While at work you walked up behind a co-worker, reached around her waist with your left hand and brushed your hand down along her inner thigh and crotch area.
14. While at work you brushed a co-worker's arms and attempted to touch her breasts.
15. While at work you walked up behind a co-worker, wrapped your arms around her breast area and began to grope her while pulling her towards you.

The Notice alleges that various provisions of the SRNA Standards and Competencies and the Canadian Nurses Association Code of Ethics have been breached.

PRELIMINARY MATTERS

Mr. Pittman did not appear at the hearing commencing May 30 nor did any counsel appear for him. On Friday, May 27, the Discipline Committee convened a conference call with counsel for the Investigation Committee and Josephine de Whytell, a student-at-law with the firm of Semaganis Worme in Saskatoon. The purpose of the conference call was to consider an adjournment request by Ms. de Whytell. On May 26, the SRNA had received a faxed letter from Ms. de Whytell requesting an adjournment.

After hearing the submissions of counsel, the Discipline Committee denied the request for an adjournment and ordered that the hearing would proceed as scheduled on May 30. These are the reasons for that decision.

Adjournment Application:

The Discipline Committee has the discretion to grant or refuse an adjournment application and recognizes that its discretion must be exercised in a judicial manner (Casey, *The Regulation of Professions in Canada*, page 8-12).

Mr. Pittman was personally served with the Notice of Discipline Hearing on March 25, 2011. The Notice he was served with indicated the hearing would begin May 30, 2011. In his

submissions to the Discipline Committee, counsel for the Investigation Committee outlined the contact the Investigation Committee had with Mr. Pittman both before the Notice was served and after. As the Committee understands it, Mr. Pittman had legal assistance when the complaint first came to the SRNA but it became clear early on that legal assistance would be focused on termination of his employment and not the discipline hearing. Mr. Pittman then corresponded with counsel for the Investigation Committee, suggesting he required an adjournment and that he wanted the hearing moved from Regina to Saskatoon.

As Mr. Pittman's intentions were not clear, a conference call with a member of the Discipline Committee was set for May 9 at 4:00 p.m. Mr. Pittman was advised as to the date, time and purpose of the conference call and provided with the call in codes. Mr. Pittman did not telephone on May 9 at 4:00 p.m. or at all. The next contact from Mr. Pittman either directly or indirectly was on May 26, being a letter from Mr. Worme in which he advised that he had been retained and that an adjournment was being sought.

At the conference call, Ms. de Whytell indicated that one of the reasons for the adjournment was that disclosure was required. Counsel for the Investigation Committee advised that he had provided Mr. Pittman with disclosure weeks earlier with that disclosure consisting of witness statements, a witness list and a report from an investigator. Despite that, Mr. Pittman appears to have provided Ms. de Whytell with only limited correspondence between himself and the SRNA. Ms. de Whytell indicated to the Committee that "We don't have any disclosure on this matter whatsoever". That may be true insofar as Ms. de Whytell was concerned but certainly disclosure was directly provided to Mr. Pittman weeks before the scheduled hearing.

The other basis for the adjournment was that Mr. Pittman would have legal representation at the hearing. However, it became clear that Mr. Pittman's legal representation was far from certain or solid. Ms. de Whytell advised the Committee that she had been retained "only marginally" and only to seek the adjournment. Counsel suggested that the hearing might be adjourned to the fall but it became clear to the Committee that there was no certainty as to whether a hearing would proceed in the fall nor was there any certainty as to whether Mr. Pittman would be represented by counsel. These comments by Ms. de Whytell were illustrative:

If I was - - if we were granted an adjournment over to perhaps the fall at some point, then we could certainly prepare. He could probably try and come up with some more retainer for us to be able to be in a position we could attend in Regina. And hopefully, at that stage, then maybe perhaps he could be able to attend in Regina as well.

Finally there was some suggestion that the hearing should be held in Saskatoon. The SRNA Bylaws provide:

BYLAW IX - COUNCIL COMMITTEES

SECTION 4. DISCIPLINE COMMITTEE

(3) The committee shall hold all hearings in Regina unless otherwise directed by the executive director.

The location of the discipline hearing is a matter for the executive director not the Discipline Committee. Mr. Lepage indicated that Karen Eisler had earlier corresponded with Mr. Pittman advising that the hearing would remain in Regina. Karen Eisler is the executive director.

Mr. Pittman was personally served with the Notice of Hearing two months before the scheduled hearing date. A conference call for May 9 was arranged in order for Mr. Pittman to make his intentions clear regarding an adjournment. Mr. Pittman chose not to participate in that conference call. Three days before the scheduled hearing, a lawyer engaged on behalf of Mr. Pittman requested an adjournment. It became clear that even if the matter was adjourned, Mr. Pittman may or may not have legal assistance. Further, one of the grounds for the adjournment was that no disclosure had been provided. Mr. Pittman was provided with disclosure directly but it appears he chose not to provide that to his counsel. The Investigation Committee was ready and prepared to proceed with numerous witnesses who had been subpoenaed.

Given all of the circumstances, the Discipline Committee concluded that Mr. Pittman was attempting to deliberately delay the proceedings and was not acting in good faith.

Proceeding in the Absence of Mr. Pittman:

As indicated, Mr. Pittman did not appear on May 30 nor did any counsel appear on his behalf. The Discipline Committee has the discretion to order that a hearing proceed in the absence of the nurse if it is satisfied that Notice has been provided (See section 30(9) of the Act). As indicated Mr. Pittman was personally served with the Notice of Hearing on March 25, 2011.

The Committee ordered the hearing would proceed in Mr. Pittman's absence.

Publication Ban Re: Identity of Certain Witnesses:

In his opening remarks, counsel for the Investigation Committee requested that the Committee's decision identify certain witnesses by initials only. Counsel also asked that the Discipline Committee direct the media present to identify those witnesses by initials only in any media report.

SRNA discipline proceedings are public. However and depending on the allegations of the case, the Discipline Committee is sensitive to the privacy rights of complainants and witnesses. Identifying complainants or witnesses by initials does not offend the principle of open and accessible hearings. The Discipline Committee will identify certain witnesses by initials in this decision.

SUMMARY OF THE EVIDENCE

Mr. Pittman was employed as a registered nurse with the Orthopedic In-Patient Unit initially at St. Paul's Hospital. The Orthopedic Unit was transferred to Saskatoon City Hospital in September, 2007 and Mr. Pittman was part of the transfer and amalgamation.

Mr. Pittman's employment at Saskatoon City Hospital was terminated on May 20, 2010 by letter dated May 27, 2010 (Exhibit P-4). The employer reported the termination of Mr. Pittman to the SRNA. Section 43(3) of the Act requires a report where a nurse's employment is terminated for alleged professional incompetence or professional misconduct. Section 43(3) is as follows:

43(3) Any employer who terminates the employment of a nurse on the grounds of alleged professional incompetence or professional misconduct shall report in writing to the association:

- (a) the termination of the nurse; and**
- (b) the grounds of the alleged professional incompetence or professional misconduct.**

Exhibit P-4 alleged that Mr. Pittman engaged in “inappropriate sexual behaviour” with co-workers and a nursing student and that this occurred both within the workplace and outside the workplace.

The Investigation Committee called eight witnesses. The following is a summary of their evidence:

1. Dean Nahachawsky

Dean Nahachawsky is a registered nurse and the manager at the Orthopedic Unit at Saskatoon City Hospital. He had been the manager at the unit at St. Paul’s Hospital from December, 2006 until its amalgamation with the Orthopedic Unit at Saskatoon City Hospital on September 24, 2007. He was appointed manager of the amalgamated units at that time and remains the unit manager.

The unit at City Hospital is large with 48 beds in total including a 6-bed surgical observation unit. The unit is broken up into 6 active pods. Two clerks work a 12-hour day shift and move between the pods. The total staff complement is between 120 to 135 full, part time and casual positions. The unit regularly hosts student nurses from four nursing programs.

Mr. Pittman was part of the staff at St. Paul’s Hospital. When the St. Paul’s Orthopedic Unit was consolidated with City Hospital in September, 2007, Mr. Pittman transferred to City Hospital.

In the winter of 2007, Mr. Nahachawsky received a complaint regarding Mr. Pittman. The complaint concerned Mr. Pittman's refusal to take a patient transfer. Mr. Pittman questioned the transfer as well as the competency of the supervisor. Mr. Nahachawsky discussed this with Mr. Pittman, suggesting that Mr. Pittman improve his professionalism.

In July, 2008, Mr. Pittman received a written warning regarding his behaviour. Mr. Nahachawsky provided no details regarding the warning or the behaviour other than to refer to "inappropriate touching".

In February, 2009, Mr. Nahachawsky was dealing with Mr. Pittman's professionalism again. According to Mr. Nahachawsky, Mr. Pittman was questioning the approach of management. Few if any details were provided but it did not appear this related to inappropriate behaviours with co-workers. Once again Mr. Nahachawsky discussed professionalism with Mr. Pittman and appropriate lines of communication.

SH was a senior unit assistant at City Hospital. Beginning in January, 2010, Mr. Nahachawsky began to have concerns about SH's job performance. He had a discussion with her and she provided little explanation other than saying she was not sleeping well and that she would work harder. Mr. Nahachawsky was surprised that SH was having performance difficulties as he described her as always being prepared, organized and requiring little coaching or direction.

In March, 2010, Mr. Nahachawsky received a voice mail message from a SIAST nursing instructor who indicated she had concerns about Mr. Pittman's inappropriate behaviours directed towards JK, a nursing student on the unit.

On April 22, 2010, another employee, DB approached Mr. Nahachawsky and suggested that he speak with SH. Mr. Nahachawsky did that and their discussion lasted 45 minutes to an hour. Through the meeting, SH was very emotional as she was crying and shaking and told Mr. Nahachawsky that she had experienced "something horrific" (to use Mr. Nahachawsky's words) which she indicated occurred outside of work but was initiated at work. Mr. Nahachawsky did not provide details to the Committee as to what SH told him other than to say it involved Greg

Pittman. Given SH's emotional state, Mr. Nahachawsky suggested she take the rest of the day off and to report the matter to the harassment officer. He then left voice messages for the Health Region harassment officer and the labour relations department.

Mr. Nahachawsky testified that other staff members began coming forward. The Health Region then engaged an external investigator named Frank Ortman. While the investigation was ongoing, Mr. Nahachawsky advised Mr. Pittman that he would be suspended with pay. Mr. Pittman's response was to deny doing anything inappropriate.

After Mr. Ortman's report was completed and submitted, there was a meeting involving SUN, Mr. Pittman, Mr. Nahachawsky and possibly others. The Ortman report was reviewed. After the meeting it was determined that Mr. Pittman's employment would be terminated. The termination letter was not tendered with the Committee. Mr. Pittman was terminated on May 20, 2010.

Mr. Nahachawsky was asked about the environment on the unit at City Hospital. He testified that he had never heard sexual talk among the staff. He spoke about the Health Region's "respecting dignity policy" and the fact that all staff are educated on that.

2. SH

SH is a unit clerk at City Hospital. She is currently off work and the Committee understands her absence from work is related to these matters. SH was a permanent full time unit clerk at the Orthopedic Unit at City Hospital and she testified she had held that position for 4 or 5 years. She worked the day shift.

SH testified she first met Mr. Pittman at City Hospital after he had moved to that facility from St. Paul's. According to SH, Mr. Pittman was at first friendly with her but soon became "overly friendly". She explained what she meant by that. He seemed to be around her a lot, would sit beside her and roll his chair close enough to her that their legs touched. He would rub

his leg against hers and put his hand on her leg a few times. SH testified that she “felt really uncomfortable around him”.

SH testified that Mr. Pittman would “talk dirty” to her giving various examples. He asked questions concerning the last time she had sex or whether she was with anyone. He provided details about his own sex life, advising that he had not had sex with his wife for six or seven years. He talked about “jerking off in the shower”. He offered that anytime she wanted to have sex with him, she should call. SH alleged that Mr. Pittman would approach her, grab her and ask “How about a hug?” SH testified that she tried to get away from those situations. She tried to ignore him. She did not tell him how he made her feel although she told him to “get away”.

In addition to working at the hospital, SH worked at a vitamin store. She testified that Mr. Pittman began asking her about products at the vitamin store and specifically asked if the store sold anything so that he could get a “hard on”. When she advised him that there were products available, she stated his response was “I will have to find a partner”. After these discussions and a few days later, Mr. Pittman showed SH the product he had purchased. SH testified that she looked at the product and expressed her concerns to Mr. Pittman about it given the strength of it. He responded that he was waking up every morning with a “hard on” and he then asked SH if she “would like to get together”.

The vitamin store apparently contained a tanning bed. In October, 2009, SH arrived to open up the store and saw Mr. Pittman sitting in his car in front of the store. She asked him what he was doing there and he responded that he came for a tan. She unlocked the door and Mr. Pittman followed her, requesting that she lock the door behind them. She refused. She showed Mr. Pittman where the tanning bed was located and gave him instructions, advising that he needed to push a buzzer when he was ready. She left him in the tanning room but stated shortly after, she heard Mr. Pittman calling her name. She entered the tanning room and saw that Mr. Pittman was naked and that he was “jerking off”. She could see that his penis was hard and he asked her if she liked what she saw. SH also alleged that Mr. Pittman stated he had “shaved down there” for her and that they could “do it” on the tanning bed. SH alleges that Mr. Pittman

grabbed her hand, stating he wanted her to touch his penis. SH ran out of the room and she testified she was shocked by what she had seen.

According to SH, Mr. Pittman remained in the tanning room for a few minutes and then hurriedly left the store without saying anything to her. She went into the tanning room and could see that Mr. Pittman had “jerked off all over the tanning bed” and SH was left to clean this up. In describing this incident to the Committee, SH was very emotional.

A few days later, SH saw Mr. Pittman at work. She testified that he asked her if “she was okay with what had happened” and he also said that she should not tell anyone about this. She advised him she would not tell anyone about it but that she wanted him to stay away from her. Despite this, she felt that Mr. Pittman was following her and finding excuses to be near her. He would sit beside her at the dining table and would rub against her. Wherever she went, he was there.

After the tanning bed incident, SH had problems at work. She could not focus or get her work done. SH testified that in her 28 years of work, she had worked with firefighters, police officers and medical residents and had never experienced anything like this. She has seen a doctor and has been prescribed medication. She describes herself now as weak, forgetful, unhappy and tearful. She states she does not sleep and suffers from panic attacks. She stated she has been diagnosed with “PTSD” which the Committee understands means post traumatic stress disorder.

She disclosed the tanning bed incident to her colleague, DB, and an unidentified special care aide. Ultimately and in April, 2010 she met with Dean Nahachawsky. She testified she was reluctant to report this, feeling that she would not be listened to and she did not know who to go to. She described Mr. Nahachawsky as supportive.

SH spoke about her fear of Mr. Pittman. When asked about that, she testified that she took his statements that she should not tell anybody as a threat. She stated she is afraid to walk to her car at night. According to her, she is “living in fear”. She has installed an alarm system and

obtained a big dog “because I am psycho now”. She stated that she went to the police but she did not provide details as to what she told the police or what came of any complaint. SH became very emotional, expressing fear that Mr. Pittman knew where she lived. She knew that Mr. Pittman had a yard care business on the side. Her evidence was not clear but as the Committee understood it, one day she received a telephone call from her son who advised that a man was at her home stating he was there to blow out the lawn sprinklers. SH implied that this man was Greg Pittman and that she had not asked for any such service.

SH was asked about her observations of Mr. Pittman’s patient care. She described one particular incident without details as to the date or time frame. On this occasion, she went into an elderly patient’s room, looking for Mr. Pittman. She testified she saw Mr. Pittman holding up the patient and he appeared to be helping her get out of bed. She stated she saw Mr. Pittman in front of the patient, that he was holding her up and “I could see he was feeling her up”. As the Committee understood SH’s evidence, Mr. Pittman then escorted the patient into the bathroom. According to SH, Mr. Pittman was in the bathroom with the patient for “a good hour”. SH testified that she was in a state of shock and she could not believe what she had seen. She was asked whether she did anything about this and she responded “No. I did not tell anyone”. As to the patient, SH stated she did not know her history but she then volunteered that the patient was “drugged up”. She also stated that the patient was unstable and needed help getting out of bed.

3. JK

JK is a nursing student and she will graduate in November, 2011. Prior to enrolling in the nursing program, JK worked as a youth care worker for ten years. JK encountered Greg Pittman once – on March 30, 2010 at City Hospital in Saskatoon.

One of her clinical placements took her to City Hospital where she was assigned to a 19 year old patient in the orthopedic unit who had a complicated medical problem. She worked only two days at the unit at City Hospital - March 30 and March 31, 2010.

On March 30, 2010 she arrived on the unit early and just before morning report. She introduced herself to the entire staff with a firm handshake and eye contact. Mr. Pittman was part of the group of staff she met and this was the first time she had met him. She shook his hand and he held it "too long". She testified Mr. Pittman said "That's the affect I have on women". She withdrew her hand and said she felt uncomfortable.

She had several encounters with Mr. Pittman that day. While she was giving her patient morning care, Mr. Pittman poked his head in unannounced and asked her to come help him. She thought it was an emergency so she interrupted her care and went with him. He was doing an uncomplicated dressing change and from JK's perspective, he did not need her help. She asked to return to her patient. JK admitted that Mr. Pittman did not say or do anything inappropriate.

Her next encounter that day was the most difficult and the most significant one. She was in the medication room, reading and doing the calculations for hydromorphone. She described the medication room as a closed off box with high counters and high walls with Plexiglas from chest height upwards. Mr. Pittman came into the room and stood behind her such that his left shoulder touched her right shoulder. She testified that Mr. Pittman reached around with his left hand and grabbed at her name tag which she had affixed to the hem of her scrubs. In doing so, she stated that Mr. Pittman touched her vagina and the inside of her leg. While he was doing this, Mr. Pittman repeated her name as he was looking at her name tag. JK stated that she removed her name tag and showed it to him, stating that if he wanted to see it he need only ask. JK testified that she would have hit Mr. Pittman if this had occurred in a non-professional role. She stated that she felt violated and disgusted by this. As she put it, she was disgusted that Mr. Pittman was carrying the initials she was working so hard to gain.

Shortly after that, JK was seated at a counter where she was charting and reading a newspaper while she waited for her mentor. Mr. Pittman was on a stool on wheels and he rolled over to her until he was shoulder to shoulder with her and began reading the paper over her shoulder. He reached over her shoulder to the newspaper and grazed her breast. She immediately stated to him "I am quite certain personal space is 3 feet".

Her shift ended at 2:30 p.m. and she located her clinical instructor, Cindy Alexson, and told her what had happened with Mr. Pittman through the day. She also asked that she have no other placements in the same area as Mr. Pittman. She did work the next day on May 31 but Mr. Pittman was not working that day.

JK was asked how her contact with Mr. Pittman affected her. She stated that when Mr. Pittman was repeating her name as he looked at her name tag, she felt terrified. She did not sleep well and she "felt dirty". She is now "hyper vigilant" with other male colleagues.

4. DB

DB has a BA and a 2-year LPN diploma from SIIT. She has been working as a licensed practical nurse on the unit at City Hospital since spring 2007. She first met Mr. Pittman in the fall of 2007 when the units amalgamated. She did not work directly with him.

Within a few weeks of meeting Mr. Pittman, she was in the staff room reading the directions for something she was about to put into the microwave. Mr. Pittman came up behind her, pressed his body against her, put his hands around her and under her arms and touched her breasts. She swore at him saying, "back the fuck up." His response was "What did you say?" and she replied, "You heard what I said." He backed away and left her alone. He never bothered her again.

Their schedules never coincided again other than one shift on Pod 3. However DB did note that he was always coming to work very early in the morning and that he would sit close to people. He was very "touchy feely" and always seemed to have his hands on someone by massaging their necks or shoulders. DB testified "He was always in people's personal space".

DB knows SH and admitted they were friends. She could see that something was bothering SH but she did not know what. She knew SH had some personal difficulties and she assumed that might be the cause. Ultimately SH confided in her about the tanning bed incident with Mr.

Pittman. It was at that point that DB approached Dean Nahachawsky and suggested he speak with SH.

5. SJ

SJ is a male special care aide. He began working at St. Paul's in December, 1999. In June, 2008, he began working at the unit at City Hospital and he remained there until April, 2010. He continues to work at City Hospital although not on the orthopedic unit.

SJ worked with Mr. Pittman at St. Paul's and then worked with him again as of June, 2008 at City Hospital. SJ testified about a specific incident involving him and Greg Pittman that occurred at City Hospital.

SJ could not specify the date other than to indicate that "sometime in 2009", he entered a conference room and saw Mr. Pittman in the room. Mr. Pittman was holding a banana and Mr. Pittman made a comment to SJ regarding the size of the banana. Mr. Pittman then approached SJ and touched or tapped SJ's crotch area. SJ batted Mr. Pittman's hand away and asked, "What the hell are you doing?" SJ walked out of the room. No one else was present. This was the extent of the details SJ could provide. SJ recounted another incident where he was eating a hot dog. Mr. Pittman made a comment about the size of the hot dog. No other details were provided.

SJ also stated that at least four or five times through the time they worked together at City Hospital, Mr. Pittman came up behind him and started to massage his neck and shoulders. SJ claimed he did not ask for these massages as they made him uncomfortable. SJ did not testify as to whether he said anything to Mr. Pittman. He also observed Mr. Pittman giving massages to other people who would either move away from him or push him back.

SJ outlined another situation which he said stuck in his mind. He stated he had seen another nurse on the telephone. Mr. Pittman rolled his chair over to the nurse and moved his knee between her thighs, put his arm around her and said "I can do better than your husband."

SJ admitted he did not complain to anyone about these behaviours although he thought they were inappropriate and completely unacceptable.

6. CP

CP is a licensed practical nurse who started working at the unit at St. Paul's in October, 2005. In September, 2007 she moved to City Hospital as part of the amalgamation.

CP testified she first met Mr. Pittman at St. Paul's. She was often paired with him. She recounted a discussion the two of them had in Satellite 3 at St. Paul's. She could not precisely indicate when this discussion was other than to say late 2005 or early 2006. She knew it was shortly after she had started there. Mr. Pittman began asking questions about her marital status such as whether she was in a relationship and whether she was dating. She responded that she had a boyfriend which led him to ask whether she was "satisfied". She took that to mean in a sexual way and she was suspicious of him because of warnings she had received from others. She simply responded "I am happy".

CP described discussions in the staff conference room at St. Paul's, explaining many of the staff would gather there for their breaks. Mr. Pittman had a lawn care business outside of his nursing job. CP testified that he spoke often about seeing naked or half-naked women in their back yards when he was doing lawn care work. He also spoke often about his wife and his relationship with her which he characterized as "open".

CP was asked whether Mr. Pittman ever touched her. She replied that Mr. Pittman would put his arm around her, pull her close and give her hugs which she described as a sideways hug or "face to face". Mr. Pittman often massaged her shoulders, telling her that she was doing a good job and that she was a good nurse. She testified this made her feel very uncomfortable and that she would pull away. However, she never confronted Mr. Pittman about it.

CP testified that she could see Mr. Pittman spending time with female nursing students and she would see them leave the unit for lunch and returning "giggling and smiling". She assumed

Mr. Pittman was using the same sexually inappropriate language to the students that she heard in the conference room. She stated she was afraid for the students so she reported her concerns to her manager at St. Paul's. She met with an individual from the harassment department who simply advised her to inform the young women that if they felt uncomfortable with Mr. Pittman, they should bring their concerns forward.

She testified that when she and Mr. Pittman moved to City Hospital in September, 2007, the two of them were paired together frequently and he continued to hug her which she did not want or appreciate. She recounted that her birthday is on February 13 and she recalled Mr. Pittman approaching her, stating "Happy Birthday – Give me a hug" and that he then put his arms around her and hugged her, without waiting for her reply.

Within days of the move to City Hospital, she was paired with DB (witness #4). CP felt she needed to tell DB about Mr. Pittman. She told her that Mr. Pittman was a "pervert". She asked DB to help her alert other young women. It was not clear to the Committee but either within minutes of this conversation or shortly after, CP entered the lunchroom to see Mr. Pittman coming up behind DB who was preparing her meal at the microwave. CP saw Mr. Pittman come up behind DB, press his body against her and wrap his arms around her. In her testimony, DB did not refer to CP being present. CP testified that she saw DB turn and heard her say something rude to Mr. Pittman. She characterized this as a disturbing incident but she testified she did not discuss it with DB.

7. LL

LL has been a special care aide since 2001. In 2005 she began a casual position at City Hospital. She floats between units and has worked at the orthopedic unit at City Hospital. This is where she first met Greg Pittman.

She testified that at first, the two of them discussed sports as her children were involved in sporting activities. According to LL, Mr. Pittman began using inappropriate language which she "sloughed off". She did not provide details as to the nature of the inappropriate language.

LL testified that Mr. Pittman began appearing at her son's soccer matches during the winter 2009 season. She asked him what he was doing there and he responded that he "came here to watch the game with you". He sat beside her and talked throughout the game. He spoke about how he hugged various people and that sometimes people thought it was more than just a hug. LL reported that he seemed proud of this. While he was describing something to her, Mr. Pittman put his hands on LL's waist to demonstrate. He spoke about the different girls he had hugged and how strong the hug was and who had seen the hugs.

Mr. Pittman continued to attend these soccer games and LL testified she did not tell Mr. Pittman about the dates for the games. LL asked whether Mr. Pittman's son was playing soccer and Mr. Pittman responded "No. My kids aren't here". LL began to become nervous when she would see Mr. Pittman at the soccer game. She would take out her cell phone and either text or pretend to make a call. She began to ensure that she never sat alone or she ensured there was no space beside her at the soccer matches.

LL estimated that Mr. Pittman appeared at five or six soccer and football games and this led her to ask Dean Nahachawsky to change her work schedule. She told him she did not want to be in the same pod as Mr. Pittman.

LL did not provide details but testified that at work, Mr. Pittman would steer the conversation into sexual talk - "If a conversation could go in a perverted way, he did it". She stated that everyone kind of laughed it off or rolled their eyes. She testified that he spoke like that publically and with people present in the report room. LL was asked whether managers were present and she responded that the talk occurred in the report room when managers were not present. LL did give one example where a female staff member had returned from a beach holiday. In the report room with perhaps ten people present, she heard Mr. Pittman speaking with the employee, referring to her tan, her bra and inquiring whether she had sex on the beach.

LL stated she was scared of Mr. Pittman. She provided an example. She stated she was washing ice packs in the utility room. Mr. Pittman arrived and stood in the door and spoke with

her. She did not indicate what Mr. Pittman said. She testified she stayed in the room until he decided to leave. After he did leave, she remained in the room for at least 5 minutes. She stated she was scared “because of the previous stuff” without detail. She admitted she did not ask him to step aside, claiming that she did not think he would do that.

LL also testified that she was not taking as many shifts as she could on the orthopedic unit, claiming she “on edge” about Mr. Pittman.

LL was asked about Mr. Pittman’s competency as a nurse. She admitted that she had worked at the bedside with him, calling him a competent nurse and indicating she did not see any errors.

8. DW

DW is a licensed practical nurse who started her career at St. Paul’s Hospital in the orthopedic unit. She remained at St. Paul’s after the transfer of the orthopedic unit to City Hospital. In February, 2008 DW began working at City Hospital.

When DW started at St. Paul’s Hospital, she had just moved to Saskatoon from rural Saskatchewan. She testified about one of her first encounters with Mr. Pittman at St. Paul’s Hospital. She was in the staff room talking to another female LPN. The discussion turned to personal care and specifically DW asked the other nurse about salons for waxing. Mr. Pittman then arrived and joined the conversation, providing information as to a salon he attended for waxing.

A few days later, DW received a phone call at home from Mr. Pittman. She did not know how Mr. Pittman obtained her phone number. He told her that he had an appointment for a “Brazilian wax” and asked if she wanted come along to watch so that she could see that it did not hurt. She was taken aback and made excuses to get off the phone as quickly as possible. The conversation lasted about 4 minutes.

On another occasion, DW attended at the lab in the Emergency Department fearing she was suffering from a bladder infection. When she returned, Mr. Pittman was at the nursing desk and asked why she had gone to Emergency. DW replied that she felt she might have a bladder infection. Mr. Pittman then made a number of personal comments to DW. He asked if DW was having unprotected sex or if her boyfriend was circumcised. Mr. Pittman explained that unprotected sex and sex with a man who was not circumcised can lead to bladder infections. DW was taken aback. She did not respond to his questions and told the Committee this is information she would not share with her best friend or her parents.

DW testified that Mr. Pittman turned a simple conversation into a sexual one. He would ask DW if she had sex if he found out she was dating or if she slept with her date on the first date. He would state that she “must like having a lot of guys.” He also told her that she should have sex with someone before she got serious “to find out if he is any good”. Mr. Pittman would tell DW that if he were younger he would date her. DW testified that Mr. Pittman often made comments about his wife and his sex life with her, referring to never “getting any”.

DW also claimed Mr. Pittman often came up behind her while she was sitting at a desk and comment on how tense she looked. He would begin to massage her shoulders. On one occasion she pulled away but he began to massage her back and the sides of her torso in such a way that his hands could feel the sides of her breasts. In recounting this to the Discipline Committee, DW became very emotional and upset.

She stated from that point forward she tried hard to ignore him and to make sure she was never in a room alone with him. She thought and hoped ignoring him would not add “fuel to the fire” and that he would eventually go away.

In the spring of 2010, DW was on maternity leave although she returned to the unit for an education day. She saw Mr. Pittman at the desk, said hello and began to speak to someone else at the desk. She had her baby in a stroller and was in street clothes. DW was speaking with another licensed practical nurse and she stated the two of them were laughing about how “civvies” make

people look like they have a shape as opposed to scrubs. Mr. Pittman was standing nearby and stated "You're right, you have an ass in those jeans – You look really good in those jeans".

DW testified that these comments greatly disturbed her. It is not clear to the Committee whether they disturbed her at the time. In her testimony, she testified that at that time, she was 50 pounds heavier, had no self-confidence and was depressed because of health difficulties of her baby. DW did not indicate to the Discipline Committee how she responded to Mr. Pittman's comments.

DW admitted she did not report her concerns about Mr. Pittman's language to anyone in authority because she thought he was in a position of power. She also stated she was new to the job and she did not want to cause trouble. From her perspective, she never saw Mr. Pittman speak inappropriately with or towards someone "at his own level" but rather his comments were directed to licensed practical nurses, care aides and ward clerks.

DW testified passionately and emotionally about her need to tell nursing students they should never be alone with Mr. Pittman. She provided few details or context other than saying she "always thought something was going to happen" so that she would interrupt Mr. Pittman if he was with a female student and tell him that he was needed somewhere else. DW called Mr. Pittman "professionally knowledgeable" but she stated she thought the female students were at risk with him. It appears DW went so far as to warn female students that they should be careful with any of their male colleagues.

DW testified about one particular incident of professional friction between her and Mr. Pittman. She testified that she had telephoned a doctor on one occasion and Mr. Pittman reacted to that, advising her that she should not be telephoning doctors. According to DW, Mr. Pittman stated "You're just an LPN". That led to words between the two of them. After this, DW claimed that Mr. Pittman made her feel on "pins and needles" when they worked together.

DW was asked how she felt about going to work – presumably after this argument with Mr. Pittman. She responded that she is not a quiet or fearful person by nature but that she is scared of

Mr. Pittman. As she testified, DW became increasingly agitated and upset, expressing fears that Mr. Pittman would find out where she lived and she went so far as to say she was having nightmares about him coming to the hospital with a gun. After she gained her composure, she was asked whether she had seen him recently. She responded that a week before this hearing, she was driving near City Hospital when she saw a van at the stop sign. She recognized the van as being Mr. Pittman's. She stated that Mr. Pittman drove by her slowly and stared at her. In giving this evidence, she became very upset stating that Mr. Pittman had "no right to be there".

One of the Committee members asked DW when she went from being uncomfortable with Mr. Pittman to being afraid for her own safety. DW responded it was after she made the call to the doctor and she had the argument with Mr. Pittman. She characterized this as the "straw that broke the camel's back" and that she would not allow Mr. Pittman to use his position to control her.

DW concluded her testimony by indicating she had not worked for the past two weeks because she was extremely stressed about the discipline hearing and having to testify.

ISSUES

The Discipline Committee must determine if the Investigation Committee has proven the charge against Mr. Pittman as outlined in the Notice of Hearing. The Discipline Committee must apply the following analysis:

1. Ascertain the facts pertaining to each charge.
2. Determine if the facts, as found, constitute proof of the charge(s).
3. Determine if the charge(s) as proven constitute professional misconduct.

Before engaging in that analysis, the Discipline Committee wishes to address a number of challenges and issues with this case. Mr. Pittman chose not to appear at the hearing. None of the witnesses were subject to cross-examination in which alternative explanations or further context might have been provided. Further and given the nature of the allegations, the Discipline

Committee was alive to a number of possible concerns including witnesses' motivations and possible collusion. Not surprisingly, many of the witnesses were very emotional when they testified but some displayed an apparent "irrational fear" of Mr. Pittman.

The Discipline Committee has scrutinized the evidence of each witness individually and the evidence as a whole carefully and completely. In assessing the credibility of the witnesses, the Discipline Committee considered a number of factors including demeanour, ability to recall, internal and external consistency and motivation. The Committee recognizes that appearance or demeanour alone is not determinative. An array of personalities was presented to the Committee from confident and forthright to hesitant and extremely emotional.

It is difficult to assess motivation in any case, not only in this case where the witnesses were not cross-examined. However, and from the view of the Committee, the witnesses did not appear motivated by some single minded condemnation of Mr. Pittman. As is clear, many of them tried to ignore him or simply hoped he would go away. LL for example testified that she "didn't want him to zero in on me – I just wanted him to go away".

Given the nature of the allegations, collusion could be a legitimate concern. Many of the witnesses worked together and it would not be surprising if they spoke about Mr. Pittman, his behaviour and the testimony they might be giving. However, the Discipline Committee observes that many of the incidents described by the witnesses are unique and different as opposed to a string of similar allegations with similar facts where it might be concluded that witnesses were trying to align their stories. For example, it is significant that the nursing student JK encountered Mr. Pittman on only one occasion when she worked one shift on March 30, 2010. She reported what had happened to her in the medication room and did so without the intervention or encouragement of others.

The lack of context for many of the incidents is a concern to the Discipline Committee. Sexualized talk, hugging and massages and personal questions and discussions may have been the accepted norm over a period of time in the unit at City Hospital. The unit had a large staff component of 120 to 130 positions. The Discipline Committee heard from the manager and six

staff members at City Hospital. Mr. Pittman's inappropriate talk, hugs and massaging occurred in open and public areas and appeared to be either tolerated or ignored which may illustrate a workplace culture with ill defined personal boundaries. However, the incidents involving JK and SH are in an entirely different category and go beyond any concern the Committee may have about the culture of the unit.

Some of the witnesses portrayed profound and almost irrational fears about Mr. Pittman. DW's evidence was an example. These profound fears and concerns appear to persist even after the termination of Mr. Pittman's employment a year ago. There was no evidence or suggestion that Mr. Pittman was harassing any of the witnesses, threatening them or seeking them out in the community since his employment had been terminated. It is difficult to know what to make of these fears. It is also difficult to know whether those emotions come from the witnesses sharing their recollections with each other, with investigators and now before the Committee. While these fears may be genuine, the Discipline Committee has a concern that emotions have coloured perceptions and recollections.

ANALYSIS

The Investigation Committee has the onus to prove discipline charges on a balance of probabilities. This is the case whether the member appears at a hearing or not.

The Discipline Committee recognizes that many of the allegations against Mr. Pittman are serious but that does not change the standard of proof which is balance of probabilities. The Committee takes guidance from this passage from Casey on *The Regulation of Professions in Canada* at page 11-6.1:

In 2008 the Supreme Court of Canada directly addressed the issue of the standard of proof in civil cases where the allegations against an individual are particularly grave. The Court expressly rejected various approaches to the standard of proof including the following: the criminal standard where the allegations are particularly serious; an intermediate standard between the criminal and civil standard; the 'clear, convincing and cogent' approach often utilized in professional discipline cases; scrutinizing the evidence with greater care where the allegations are serious; and requiring stronger

evidence where the event is improbable. The Court held that it was time to say, once and for all, that in Canada there is only one civil standard and that is proof on a balance of probabilities. The only practical way to reach a factual determination in a civil case is to decide whether it is more likely than not that the event occurred. Evidence must always be scrutinized with care by a trier of fact and evidence must always be sufficiently clear, convincing and cogent to satisfy the balance of probabilities test but there is no need for a different standard of proof where the allegations are particularly serious.

The Notice of Hearing consists of one charge of professional misconduct with the essence of it being that Mr. Pittman engaged in “sexually inappropriate conduct, verbally and physically, towards a number of (your) co-workers both at the workplace and outside the work environment”. There are 15 examples or particulars of that and the Discipline Committee sees it appropriate to treat each particular as a count or aspect of the charge requiring proof.

1. **While at work you asked a co-worker if she “sold anything for erections”, indicating to her that you have had problems in this area and had not had sex with your wife for six years.**

The Committee accepts the evidence of SH. SH’s testimony on this point was indirectly corroborated by other witnesses such as DW and CP who testified that Mr. Pittman often discussed his sex life with his wife.

2. **While at work you hugged and touched co-workers in ways that made them uncomfortable.**

This was a constant theme through the testimony of all of the witnesses – with the exception of Dean Nahachawsky who did not work directly and on the floor with Mr. Pittman. The Committee accepts the uncontradicted evidence it heard.

3. **While at work you used sexually explicit language directed towards co-workers.**

This was also a constant theme in the evidence with the witnesses outlining how Mr. Pittman would turn casual comments into sexual innuendo or sexualize them. Numerous

examples were given and are accepted.

4. **You attended a co-worker's place of employment (tanning spa) and while there stood naked in front of this co-worker and masturbated. You asked the co-worker if she "liked what she saw" and indicated that you "shaved down there" for her, pointing to your penis area. You also grabbed the co-worker's hand and pulled it towards your mid-section at which point she pulled away and left the room. Following the co-worker leaving the room, you ejaculated on the tanning bed, which she was required to clean.**

The Committee accepts the evidence of SH. Her description was detailed and logical and she described this incident essentially as the end result of a series of escalating encounters with Mr. Pittman.

5. **While at work you were observed by a co-worker touching the breasts of a patient while assisting this patient getting out of bed.**

SH testified about this allegation. There were no other witnesses to this nor did other witnesses testify about similar such incidents involving patients. The Discipline Committee does not find the evidence "sufficiently clear, convincing and cogent" as SH may have mistaken an appropriate assist as a purposeful attempt to touch the patient's breasts. Further the Committee had some concerns about SH's recollection of this as the suggestion that Mr. Pittman was in the washroom with the patient for "a good hour" appears to stretch credulity. Further the Committee has concluded this may be an example where an otherwise innocent event has taken on a different interpretation. This allegation is unsubstantiated.

6. **While at work you informed a female co-worker that her "butt looked good in her pants".**

DW testified about this statement and the statements surrounding it. The Discipline Committee has concerns about DW's testimony. Some of these concerns are already set out at pages 21 and 22 of this Decision. Even if this statement was made by Mr. Pittman to

DW, the Discipline Committee finds that it does not amount to professional misconduct.

7. **While at work you asked a female co-worker if she was “having unprotected sex with her boyfriend” and asked if her boyfriend “was circumcised”.**

This concerns the evidence of DW and the Discipline Committee accepts her evidence.

8. **While at work you provided a co-worker with your cell number and invited her to watch you get “waxed”.**

Similarly, this evidence was given by DW and the Committee accepts her evidence on this.

9. **While at work you massaged a co-workers back and neck without asking permission, to which the co-worker pushed your hands away.**

Some of the witnesses testified that Mr. Pittman would massage their backs and necks when these individuals had not asked for this. However, DB also fairly testified that she had also seen staff members asking Mr. Pittman for these types of massages. However, there was no evidence on this particular from any specific witness. This allegation is unsubstantiated.

10. **While at work you came up behind a co-worker and pushed your chest and body up against her back.**

There were two examples in the evidence of this conduct. DB described her encounter with Mr. Pittman in the lunchroom near the microwave. DB provided her description in a forthright manner without embellishment and the Discipline Committee accepts her evidence without hesitation.

This allegation also relates to the evidence of JK, the nursing student. JK provided detailed and forthright evidence about the incident and the Discipline Committee accepts her evidence.

11. **While at work you stood in doorways and using your body prevented co-workers from leaving the room when they attempted to do so.**

Both LL and JK described situations where they were in a room alone while Mr. Pittman stood in or near the doorway. In both cases, there was no testimony from either witness that Mr. Pittman verbally or physically prevented them from leaving the room. Neither LL nor JK testified that they asked Mr. Pittman to step aside. There was no evidence that Mr. Pittman prevented them from leaving the room when they attempted to do so. This allegation is unsubstantiated.

12. **While at work you touched a co-worker in the crotch area over his clothing.**

SJ described this incident and the Committee accepts his evidence. It is consistent with other evidence given about Mr. Pittman's sexualized comments and behaviours.

13. **While at work you walked up behind a co-worker, reached around her waist with your left hand and brushed your hand down along her inner thigh and crotch area.**

The Discipline Committee accepts the evidence given by JK, the nursing student.

14. **While at work you brushed a co-worker's arms and attempted to touch her breasts.**

This allegation also relates to JK, the nursing student, and the Committee accepts her evidence.

15. **While at work you walked up behind a co-worker, wrapped your arms around her breast area and began to grope her while pulling her towards you.**

This incident was described by DB and as previously indicated, the Discipline Committee accepts her evidence as to this incident.

Do These Proven Facts Constitute Professional Misconduct?

As indicated, the Discipline Committee has found the particulars identified as 1 through 4 inclusive, 6 through 10 inclusive and 12 through 15 inclusive as being substantiated based on the evidence.

Particulars numbered 5 and 11 have not been substantiated based on the evidence.

As to particular number 6:

6. While at work you informed a female co-worker that her 'butt looked good in her pants'

While Mr. Pittman may have stated this to DW, the Committee does not find that such a statement and the circumstances surrounding it amount to professional misconduct. This appears to be a rather innocuous conversation exchanged in the work place. It is clear DW has very strong feelings about Mr. Pittman which is illustrated in her almost irrational fear about him. Unfortunately, it would seem that now looking back, DW has characterized every encounter with Mr. Pittman as sexually charged, inappropriate and extremely upsetting to her. Accepting that Mr. Pittman made the statement he did, it may show poor taste or poor social skills but not professional misconduct.

The Notice of Hearing references section 26(1) and (2)(1) which is the definition of professional misconduct in the Act. It is set out at page 2 of this decision. The evidence establishes that Mr. Pittman's conduct is contrary to the best interests of the public and nurses and it also harms the standing of the profession of nursing.

The Committee accepts the evidence which shows Mr. Pittman engaged in a course of conduct that began with "sexualizing" ordinary conversations, asking inappropriate and highly personal questions, invading personal space, uninvited personal contact and escalating to the incident described by SH at the vitamin store and the incident described by JK, the nursing student, on March 30, 201. The Committee accepts the characterization of the Investigation Committee that taken alone, many of the particulars may be seen as insignificant but taken as a whole, amount to professional misconduct requiring a sanction.

The incident involving SH at the vitamin store occurred outside the workplace. However, the Committee agrees with the Investigation Committee that this incident was not disconnected to

the workplace as rather it was the end result of a course of inappropriate conduct that began with SH at the workplace.

The Notice of Hearing references various provisions of the Standards and Foundation Competencies of the SRNA and the Code of Ethics. As indicated at page 13-3 of Casey *The Regulation of Professions in Canada*, Standards are implicit in the concept of a profession. They are the benchmark for the practice.

The Discipline Committee finds that the following Standards and Foundation Competencies are relevant and given the evidence, these provisions have been breached and the breach amounts to professional misconduct:

STANDARD I – PROFESSIONAL RESPONSIBILITY AND ACCOUNTABILITY

The registered nurse:

1. Is accountable and accepts responsibility for his/her own actions and decisions.
13. Promotes healthy, culturally safe environments.
27. Demonstrates professional leadership by:
 - a. building relationships and trust;
 - b. creating an empowering environment;

STANDARD III – ETHICAL PRACTICE

66. Practices in accordance with the values of the current CNA code of ethics for registered nurses and the accompanying responsibility statements, as amended from time to time.

68. Establishes and maintains professional relationships and boundaries with clients and other team members.

STANDARD IV – SERVICE TO THE PUBLIC

84. Collaborates with all members of the health care team to facilitate:

c. maintenance of professional boundaries and accountabilities;

85. Participates and contributes to nursing and health care team development by:

b. recognizing that values, assumptions and positional power affects team interactions;

Similarly, the Notice outlines various provisions of the Canadian Nurses Association Code of Ethics. The Discipline Committee sees the following provisions as relevant and finds that the evidence establishes these provisions have been breached:

A. PROVIDING SAFE, COMPASSIONATE, COMPETENT AND ETHICAL CARE

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 as well as with families, communities, groups, populations and other members of the health-care team.
3. Nurses build trustworthy relationships 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.

D. PRESERVING DIGNITY

1. Nurses, in their personal capacity, relate to all persons with respect.
10. Nurses treat each other, colleagues, students and other health-care workers in a respectful manner, recognizing the power differentials among those in formal leadership positions, staff and students. They work with others to resolve differences in a constructive way.

F. PROMOTING JUSTICE

2. Nurses refrain from judging, labeling, demeaning, stigmatizing and humiliating behaviours toward persons receiving care, other health-care professionals and each other.

3. Nurses do not engage in any form of lying, punishment or torture or any form of unusual treatment or action that is inhumane or degrading. They refuse to be complicit in such behaviours. They intervene, and they report such behaviours.

G. BEING ACCOUNTABLE

1. Nurses, as members of a self-regulating profession, practice according to the values and responsibilities in the *Code of Ethics for Registered Nurses* and in keeping with the professional standards, laws and regulations supporting ethical practice.

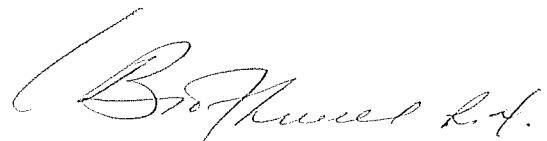
In the end result, the Discipline Committee finds that particulars numbers 1 through 4, particulars 7 through 10 and particulars 12 through 15 are substantiated and amount to professional misconduct. Particulars numbered 5, 6, 9, 10 and 11 are dismissed.

SECOND STAGE HEARING

The Discipline Committee will reconvene to hear submissions regarding proposed penalty. The Committee directs the Investigation Committee to serve Mr. Pittman with a Notice as to the date, time and place of the penalty hearing and the Notice should also set out the proposed Order the Investigation Committee is seeking pursuant to section 31 of the Act. Mr. Pittman should be given at least 14 days' notice of the penalty hearing.

Date: _____

September 20, 2011



Linda Brothwell, RN, Chairperson
*on behalf of Members of the
Discipline Committee*
Brenda Bumphrey, RN
Doreen Pretzlaw, RN
Neal Sylvestre, RN
Cyril Kesten, Public Representative

CORRIGENDUM

The following corrections are required to the decision of the Discipline Committee dated September 20, 2011:

1. At page 15, first paragraph, last sentence the date is shown as “May 31” but it should be “March 31”. The sentence will therefore read:

She did work the next day on March 31 but Mr. Pittman was not working that day.

2. At page 20, last paragraph, third sentence the word “to” is missing. The sentence should read:

He told her that he had an appointment for a ‘Brazilian wax’ and asked if she wanted to come along to watch so that she could see that it did not hurt.

3. At page 29, last paragraph, the sentence should read:

As indicated, the Discipline Committee has found the particulars identified as 1 through 4 inclusive, 6, 7, 8, 10 and 12 through 15 inclusive as being substantiated based on the evidence.

4. At page 33, the paragraph should read:

In the end result, the Discipline Committee finds that particulars numbered 1 through 4, 7, 8 and 10 and particulars 12 through 15 are substantiated and amount to professional misconduct. Particulars numbered 5, 6, 9 and 11 are dismissed.

This Corrigendum shall form part of the Discipline Committee Decision dated September 20, 2011.