

COLLEGE OF LICENSED PRACTICAL NURSES OF ALBERTA

**IN THE MATTER OF
A HEARING UNDER *THE HEALTH PROFESSIONS ACT*,**

**AND IN THE MATTER OF A HEARING REGARDING
THE CONDUCT OF MOHAMMED RASHED**

**DECISION OF THE HEARING TRIBUNAL
OF THE
COLLEGE OF LICENSED PRACTICAL NURSES OF ALBERTA**

**IN THE MATTER OF A HEARING UNDER THE *HEALTH PROFESSIONS ACT* REGARDING THE
CONDUCT OF MOHAMMAD RASHED, LPN #35389, WHILE A MEMBER OF THE COLLEGE OF
LICENSED PRACTICAL NURSES OF ALBERTA (“CLPNA”)**

DECISION OF THE HEARING TRIBUNAL

(1) Hearing

The hearing was conducted via videoconference on October 29, 2024, with the following individuals present:

Hearing Tribunal:

Kelly Annesty, Licensed Practical Nurse (“LPN”) Chairperson
Allan Castillo, LPN
Don Wilson, Public Member
Andrea James, Public Member

Staff:

Daisy Feehan, Legal Counsel for the Complaints Officer, CLPNA
Stephanie Karkutly, Complaints Officer, CLPNA

Investigated Member:

Mohammad Rashed, LPN (“Mr. Rashed” or “Investigated Member”)
Jeremy Inscho, AUPE Representative for the Investigated Member

(2) Preliminary Matters

The hearing was open to the public.

There were no objections to the members of the Hearing Tribunal hearing the matter, and no Hearing Tribunal member identified a conflict. There were no objections to the jurisdiction of the Hearing Tribunal.

The Hearing was conducted by way of an Agreed Statement of Facts and Acknowledgement of Unprofessional Conduct and a Joint Submission on Penalty.

(3) Background

Mr. Rashed was an LPN within the meaning of the Act at all material times, and more particularly, was registered with CLPNA as an LPN at the time of the complaint. Mr. Rashed was initially licensed as an LPN in Alberta on July 27, 2012.

The CLPNA received a written complaint dated February 8, 2024 (the “Complaint”), from Madhavi Chevli, Unit Manager with Alberta Health Services, at Peter Lougheed Centre (“the Facility”) in Calgary, Alberta, pursuant to s. 57 of the *Health Professions Act* (the “Act”). The complaint advised that Mr. Rashed received a fifteen (15) day unpaid suspension after it was determined he submitted 152 false benefit claims for reimbursement to Alberta Blue Cross between May 2021 and July 10, 2023, resulting in an overpayment of \$9,470.29.

By letter dated February 20, 2024, the former Complaints Director of the CLPNA, Sanah Sidhu (the “Complaints Director”), provided Mr. Rashed with notice of the Complaint. In accordance with s. 20(1) of the Act, the Complaints Director notified Mr. Rashed she was delegating her authority to Stephanie Karkutly, Complaints Officer (the “Complaints Officer”) to handle the Complaint and that Neal York (the “Investigator”) was appointed to conduct an investigation into the Complaint.

On May 9, 2024, the Investigator concluded the investigation and provided the Complaints Officer with an Investigation Report.

The Complaints Officer determined there was sufficient evidence that the matter should be referred to the Hearings Director in accordance with s. 66(3)(a) of the Act. Mr. Rashed was advised of this referral, as well as the allegations against him, by letter of July 31, 2024. A Notice of Hearing, Notice to Attend and Notice to Produce was served upon Mr. Rashed under cover of letter dated August 19, 2024.

(4) Allegations

The Allegations in the Statement of Allegations (the “Allegations”) are:

“It is alleged that **MOHAMMAD RASHED**, LPN, while practicing as a Licensed Practical Nurse engaged in unprofessional conduct by:

1. On or between January 5, 2018 and July 7, 2023, submitted 105 benefit claims to Alberta Blue Cross for products and/or services not received, resulting in an overpayment of \$10,027.51.

It is further alleged that this conduct constitutes “unprofessional conduct” as defined in s. 1(1)(pp)(i), (ii) and (xi) of the Health Professions Act, RSA 2000 c H-7 (the “HPA”) and in particular this conduct breaches one or more of the following:

1. *Code of Ethics for Licensed Practical Nurses in Canada*, Principle 1: Responsibility to the Public, Indicator 1.1.;
2. *Code of Ethics for Licensed Practical Nurses in Canada*, Principle 3: Responsibility to the Profession, Indicator 3.1.;
3. *Code of Ethics for Licensed Practical Nurses in Canada*, Principle 5: Responsibility to Self, Indicator 5.1.;

4. *Standards of Practice for Licensed Practical Nurses in Canada* (2013), Standard 1: Professional Accountability and Responsibility, Indicators 1.1.;
5. *Standards of Practice for Licensed Practical Nurses in Canada* (2013), Standard 3: Service to the Public and Self-Regulation, Indicator 3.6.;
6. *Standards of Practice for Licensed Practical Nurses in Canada* (2013), Standard 4: Ethical Practice, Indicators 4.1., 4.4., and 4.10.;
7. *Standards of Practice for Licensed Practical Nurses in Canada* (2020), Standard 1: Professional Accountability and Responsibility, Indicator 1.1.;
8. *Standards of Practice for Licensed Practical Nurses in Canada* (2020), Standard 3: Protection of the Public Through Self-Regulation, Indicator 3.5.;
9. *Standards of Practice for Licensed Practical Nurses in Canada* (2020), Standard 4: Professional and Ethical Practice, Indicators 4.4. and 4.6.”

(5) Admission of Unprofessional Conduct

Section 70 of the Act permits an investigated member to make an admission of unprofessional conduct. An admission under s. 70 of the Act must be acceptable in whole or in part to the Hearing Tribunal.

Mr. Rashed acknowledged unprofessional conduct to all the allegations as evidenced by his signature on the Agreed Statement of Facts and Acknowledgement of Unprofessional Conduct and verbally admitted unprofessional conduct to all the allegations set out in the Statement of Allegations during the hearing.

Legal Counsel for the Complaints Officer submitted that where there is an admission of unprofessional conduct, the Hearing Tribunal should accept the admission absent exceptional circumstances.

(6) Exhibits

The following exhibits were entered at the hearing:

- Exhibit #1: Statement of Allegations
- Exhibit #2: Agreed Statement of Facts and Acknowledgement of Unprofessional Conduct (“Agreed Statement of Facts”)
- Exhibit #3: Joint Submission on Penalty

(7) Evidence

The evidence was adduced by way of Agreed Statement of Facts, and no witnesses were called to give *viva voce* testimony. The Hearing Tribunal accepts the evidence set out in the Agreed Statement of Facts which was admitted as Exhibit #2.

(8) Decision of the Hearing Tribunal and Reasons

The Hearing Tribunal is aware it is faced with a two-part task in considering whether a regulated member is guilty of unprofessional conduct. First, the Hearing Tribunal must make factual findings as to whether the alleged conduct occurred. If the alleged conduct occurred, it must then proceed to determine whether that conduct rises to the threshold of unprofessional conduct in the circumstances.

The Hearing Tribunal has reviewed the documents included in Exhibit #2 and finds as facts the events as set out in the Agreed Statement of Facts.

The Hearing Tribunal also accepts Mr. Rashed's admission of unprofessional conduct as set out in the Agreed Statement of Facts as described above. Based on the evidence and submissions before it, the Hearing Tribunal did not identify exceptional circumstances that would justify not accepting the admission of unprofessional conduct from Mr. Rashed.

Allegation 1

Mr. Rashed admitted that on or between January 5, 2018, and July 7, 2023, he submitted 105 benefit claims to Alberta Blue Cross for products and/or services not received, resulting in an overpayment of \$10,027.51.

As part of Mr. Rashed's employment, he and his family members were entitled to receive benefits from Alberta Blue Cross. Alberta Blue Cross began an investigation into Mr. Rashed's benefit claims after his account was flagged for review, by their automated system, on September 15, 2023, due to frequency of claims submitted.

Alberta Blue Cross's investigation included review of any and all claims made by Mr. Rashed from January 5, 2018, to December 31, 2023. As part of the investigation, Alberta Blue Cross contacted some of the service providers to determine whether the claims were legitimate and requested receipts from Mr. Rashed to support the claims.

As a result of the investigation, it was determined that between January 5, 2018, to July 7, 2023, Mr. Rashed submitted 105 benefit claims for himself and his family members where no services had been provided (55 claims), there was an ineligible provider (5 claims), and receipts or supporting documentation could not be provided (45 claims). As a result of these ineligible claims, \$10,027.51 was paid to Mr. Rashed when it should not have been paid.

Mr. Rashed submitted these claims through Alberta Blue Cross due to financial hardship.

The Hearing Tribunal considered the facts included in the Agreed Statement of Facts and Mr. Rashed's Acknowledgement of Unprofessional Conduct. The Hearing Tribunal found that the facts and documents included in Exhibit #2 prove that the conduct for Allegation 1 did in fact occur.

The Hearing Tribunal finds that the conduct admitted to amounts to unprofessional conduct as defined in s. 1(1)(pp) of the Act, in particular, the Hearing Tribunal found the following definitions of unprofessional conduct have been met:

- i. Contravention of the Act, a code of ethics or standards of practice; and
- xii. Conduct that harms the integrity of the regulated profession.

Mr. Rashed did not abide by the Code of Ethics for Licensed Practical Nurses in Canada, adopted by the CLPNA on June 3, 2013 (“CLPNA Code of Ethics”), the Standards of Practice for Licensed Practical Nurses in Canada adopted by the CLPNA on June 3, 2013 (“2013 CLPNA Standards of Practice”) and the Standards of Practice for Licensed Nurses in Canada adopted by the CLPNA on June 14, 2022 (“2022 CLPNA Standards”), as acknowledged by Mr. Rashed in the Agreed Statement of Facts and Acknowledgement of Unprofessional Conduct.

The Hearing Tribunal finds that Mr. Rashed’s conduct breached the CLPNA Code of Ethics and the CLPNA Standards of Practice, as set out in more detail below, and that such breaches are sufficiently serious to constitute unprofessional conduct. Mr. Rashed submitted 105 benefit claims to Alberta Blue Cross for services not received. This is not appropriate or expected behavior of an LPN. It does not demonstrate honesty, integrity, or trustworthiness in Mr. Rashed’s interactions to have conducted himself in this manner.

CLPNA Code of Ethics:

Mr. Rashed acknowledged that his conduct breached the following requirements in the CLPNA Code of Ethics, which states as follows:

- a. **Principle 1:** Responsibility to the Public - Licensed Practical Nurses, as self-regulating professionals, commit to provide safe, effective, compassionate and ethical care to members of the public. Principle 1 specifically provides that LPNs:
 - o 1.1 Maintain standards of practice, professional competence and conduct.
- b. **Principle 3:** Responsibility to the Profession – LPNs have a commitment to their profession and foster the respect and trust of their clients, health care colleagues and the public. Principle 3 specifically provides that LPNs:
 - o 3.1 Maintain the standards of the profession and conduct themselves in a manner that upholds the integrity of the profession.
- c. **Principle 5:** Responsibility to Self – LPNs recognize and function within their personal and professional competence and value systems. Principle 5 specifically provides that LPNs:
 - o 5.1 Demonstrate honesty, integrity and trustworthiness in all interactions.

2013 CLPNA Standards of Practice:

Mr. Rashed acknowledged that his conduct breached the following 2013 CLPNA Standards of Practice:

- a. **Standard 1:** Professional Accountability and Responsibility – LPNs are accountable for their practice and responsible for ensuring that their practice and conduct meet both the standards of the profession and legislative requirements. Standard 1 specifically provides that LPNs:
 - o 1.1 Practice to their full range of competence within applicable legislation, regulations, by-laws and employer policies.
- b. **Standard 3:** Service to the Public and Self-Regulation – LPNs practice nursing in collaboration with clients and other members of the health care team to provide and improve health care services in the best interests of the public. Standard 3 specifically provides that LPNs:
 - o 3.6. Demonstrate an understanding of self-regulation by following the standards of practice, the code of ethics and other regulatory requirements.
- c. **Standard 4:** Ethical Practice – LPNs uphold, promote and adhere to the values and beliefs as described in the Canadian Council for Practical Nurse regulators (CCPNR) Code of Ethics. Standard 4 specifically provides that LPNs:
 - o 4.1 Practice in a manner consistent with the ethical values and obligations of the Code of Ethics for LPNs; and
 - o 4.4 Develop ethical decision-making capacity and take responsible action toward resolution; and
 - o 4.10 Practice with honesty and integrity to maintain the values and reputation of the profession.

2022 CLPNA Standards of Practice

Mr. Rashed acknowledged that his conduct breached the following 2022 CLPNA Standards of Practice:

- a. **Standard 1:** Professional Accountability and Responsibility – LPNs are accountable and responsible for their practice and conduct to meet the standards of the profession and legislative requirements. Standard 1 specifically provides that LPNs:
 - o 1.1 Practice within applicable legislation, regulations, by-laws, and employer policies; and
 - o 1.8 Are accountable and responsible for their own practice, conduct and ethical decision-making.

- b. **Standard 3:** Protection of the public through self-regulation – LPNs collaborate with clients and other members of the healthcare team to provide safe care and improve health outcomes. Standard 3 specifically provides that LPNs:
 - o 3.5 Understand and accept the responsibility of self-regulation by following the standards of practice, the code of ethics, and other regulatory requirements.
- c. **Standard 4:** Professional and Ethical Practice – LPNs adhere to the ethical values and responsibilities described in the Canadian Council for Practical Nurse Regulators (CCPNR) Code of Ethics. Standard 4 specifically provides that LPNs:
 - o 4.2 Identify ethical issues and respond in the interest of the public; and
 - o 4.6 Demonstrate practice that upholds the integrity of the profession.

Mr. Rashed’s conduct harms the integrity of the regulated profession in that Mr. Rashed did not act in a way that is expected of another LPN in a similar situation. LPNs are expected to adhere to guidelines of submitting benefit claims to both their employer and their benefit provider, which in this case was Alberta Blue Cross, and to act with honesty and integrity with respect to their actions.

(9) Joint Submission on Penalty

The Complaints Officer and Mr. Rashed jointly proposed to the Hearing Tribunal a Joint Submission on Penalty, which was entered as Exhibit #3. The Joint Submission on Penalty proposed the following sanctions to the Hearing Tribunal for consideration:

1. The Hearing Tribunal’s written decision (the “Decision”) shall serve as a reprimand.
2. Mr. Rashed shall pay a fine of \$500.00 within **12 months** of service of the Decision.
3. Mr. Rashed shall pay 25% of the costs of the investigation and hearing to a maximum of \$2000.00, to be paid over a period of **24 months** of service of the Decision.
 - a) A letter advising of the final costs will be forwarded when final costs have been confirmed.
4. Mr. Rashed shall read and reflect on how the following CLPNA documents will impact their nursing practice. These documents are available on CLPNA’s website and will be provided. Mr. Rashed shall provide a signed written declaration to the Complaints Officer within 30 days of service of the Decision, attesting that they have reviewed the documents:
 - a) Code of Ethics for Licensed Practical Nurses in Canada;
 - b) Standards of Practice for Licensed Practical Nurses in Canada;
 - c) CLPNA Practice Policy: Professional Responsibility & Accountability.

If such documents become unavailable, they may be substituted by equivalent documents approved in advance in writing by the Complaints Officer.

5. Mr. Rashed shall complete the remedial education course **Righting a Wrong – Ethics & Professionalism in Nursing**, available online at www.icrsncsbn.org and provide a certificate confirming its successful completion to the Complaints Officer within **30 days** of service of the Decision.

If such course becomes unavailable an alternative course may be substituted where approved in advance in writing by the Complaints Officer.

6. The sanctions set out above at paragraphs 2 - 5 will appear as conditions on Mr. Rashed's practice permit and the Public Registry subject to the following:
 - a) The requirement to pay the fine and costs, will appear as "Conduct Cost/Fines" on Mr. Rashed's practice permit and the Public Registry until all fines and costs have been paid as set out above at paragraphs 2-3.
 - b) The requirement to complete the remedial education and readings outlined at paragraphs 4 - 5 will appear as "CLPNA Monitoring Orders (Conduct)", on Mr. Rashed's practice permit and the Public Registry until the below sanctions have been satisfactorily completed:
 - i. Educational Readings; and
 - ii. Righting a Wrong – Ethics & Professionalism in Nursing.
7. The conditions on Mr. Rashed's practice permit and on the Public Registry will be removed upon completion of each of the requirements set out above at paragraph 2 – 5.
8. Mr. Rashed shall provide the CLPNA with their contact information, including home mailing address, home and cellular telephone numbers, current e-mail address and current employment information, and keep their contact information current with the CLPNA on an ongoing basis.
9. Should Mr. Rashed be unable to comply with any of the deadlines for completion of the penalty orders identified above, the deadlines may, upon written request, be extended for a reasonable period of time with the written consent of the Complaints Officer.
10. Should Mr. Rashed fail or be unable to comply with any of the above orders for penalty, or if any dispute arises regarding the implementation of these orders, the Complaints Officer may do any or all of the following:

- (a) Refer the matter back to a Hearing Tribunal, which shall retain jurisdiction with respect to penalty;

- (b) Treat Mr. Rashed's non-compliance as information for a complaint under s. 56 of the *Health Professions Act*; or
- (c) In the case of non-payment of the costs described in paragraph 3 above, suspend Mr. Rashed's practice permit until such costs are paid in full or the Complaints Officer is satisfied that such costs are being paid in accordance with a schedule of payment agreed to by the Complaints Officer.

Legal Counsel for the Complaints Officer submitted the primary purpose of orders from the Hearing Tribunal is to protect the public. The Hearing Tribunal is aware that s. 82 of the Act sets out the available orders the Hearing Tribunal is able to make if unprofessional conduct is found.

The Hearing Tribunal is aware that when the parties have agreed on a joint submission as to penalty, the Hearing Tribunal is not bound by that submission. Nonetheless, as the decision-maker, the Hearing Tribunal should give deference to a joint submission unless the proposed sanction is unfit, unreasonable or contrary to public interest. Joint submissions make for a better process and engage the member in considering the outcome. A rejection of a carefully crafted agreement would undermine the goal of fostering cooperation through joint submissions and may significantly impair the ability of the Complaints Director to enter into such agreements. If the Hearing Tribunal had concerns with the proposed sanctions, the proper process is to notify the parties, articulate the reasons for concern, and give the parties an opportunity to address the concerns through further submissions to the Hearing Tribunal.

The Hearing Tribunal therefore carefully considered the Joint Submission on Penalty proposed by Mr. Rashed and the Complaints Officer.

(10) Decision on Penalty and Conclusions of the Hearing Tribunal

The Hearing Tribunal recognizes its orders with respect to penalty must be fair, reasonable and proportionate, taking into account the facts of this case.

The orders imposed by the Hearing Tribunal must protect the public from the type of conduct that Mohammad Rashed has engaged in. In making its decision on penalty, the Hearing Tribunal considered a number of factors identified in *Jaswal v Newfoundland Medical Board* [1986] NJ No 50 (NLSC-TD), specifically the following:

- The nature and gravity of the proven allegations
- The age and experience of the investigated member
- The previous character of the investigated member and in particular the presence or absence of any prior complaints or convictions
- The age and mental condition of the victim, if any
- The number of times the offending conduct was proven to have occurred
- The role of the investigated member in acknowledging what occurred
- Whether the investigated member has already suffered other serious financial or other penalties as a result of the allegations having been made

- The impact of the incident(s) on the victim, and/or
- The presence or absence of any mitigating circumstances
- The need to promote specific and general deterrence and, thereby to protect the public and ensure the safe and proper practice
- The need to maintain the public's confidence in the integrity of the profession
- The range of sentence in other similar cases

The nature and gravity of the proven allegations: The conduct does not involve patient care; however, it is still very serious. This is related to Mr. Rashed's position as an LPN and how he used his position for his own benefit by improperly receiving payments from Alberta Blue Cross. The conduct demonstrates a lack of integrity, honesty and trustworthiness and reflects poorly on the LPN profession. This is an aggravating factor.

The age and experience of the offending LPN: Mr. Rashed had been practicing as an LPN for approximately 12 years when Alberta Blue Cross started their investigation. He was initially registered with the CLPNA in 2012. The allegation relates to honesty, integrity and decision making, and Mr. Rashed should have been aware of his obligations in that regard, particularly given his longstanding registration with the CLPNA.

The previous character of the investigated member and in particular the presence or absence of any prior complaints or convictions: There was no information provided on this factor.

The number of times the offending conduct was proven to have occurred: There were 105 benefit claims submitted to Alberta Blue Cross between January 5, 2018 and July 7, 2023, suggesting this was not a one-off mistake, but rather a pattern of problematic behaviour. This was an aggravating factor.

The role of the investigated member in acknowledging what occurred: This is a mitigating factor as Mr. Rashed has acknowledged his conduct and has admitted his conduct. Mr. Rashed has been cooperative throughout the investigation and in doing so he has demonstrated accountability and willingness to take responsibility for his actions.

Whether the investigated member has already suffered other serious financial or other penalties as a result of the allegations having been made: Mr. Rashed had received a fifteen day unpaid suspension after it was determined that he submitted the false benefit claims for reimbursement to Alberta Blue Cross. Mr. Rashed has also paid back all of the monies owing to Alberta Blue Cross.

The impact of the incident(s) on the victim: There were no patients that were impacted as a result of these allegations being made. There was limited impact on Alberta Blue Cross as they received their payments back from Mr. Rashed and this was completed very quickly.

The presence or absence of any mitigating circumstances: The repayment to Alberta Blue Cross was a mitigating factor and the Hearing Tribunal does acknowledge that there were financial circumstances present for Mr. Rashed at the time of the allegations.

The need to promote specific and general deterrence and, thereby, to protect the public and ensure the safe and proper practice: These are important as specific deterrence is to deter Mr. Rashed from repeating this conduct in the future. General deterrence is to deter other members of the profession from engaging in similar behaviour by sending a message that the behaviour will not be tolerated. Deterrence is important in maintaining public confidence in the LPN profession. The sanction must be significant enough to deter both Mr. Rashed, and other members of the profession from engaging in similar conduct.

The need to maintain the public's confidence in the integrity of the profession: The CLPNA deals with the actions of its members when they engage in unprofessional conduct. The CLPNA will deal with any breaches of the CLPNA Code of Ethics and the 2013 and 2022 CLPNA Standards of Practice in a way that reflects the seriousness of the conduct and for the purpose of protecting the public.

The range of sentence in other similar cases: There are three decisions that had similar conduct; Lagadan (2021), Toller (2022), Timbang (2023), which had very similar sanctions to those proposed by the CLPNA in this case.

It is important to the profession of LPNs to maintain the CLPNA Code of Ethics and the 2013 and 2022 Standards of Practice, and in doing so to promote specific and general deterrence and, thereby, to protect the public. The Hearing Tribunal has considered this in the deliberation of this matter, and again considered the seriousness of the Investigated Member's actions. The penalties ordered in this case are intended, in part, to demonstrate to the profession and the public that actions and unprofessional conduct such as this is not tolerated and it is intended that these orders will, in part, act as a deterrent to others.

After considering the proposed orders for penalty, the Hearing Tribunal finds the Joint Submission on Penalty is appropriate, reasonable and serves the public interest and therefore accepts the parties' proposed penalties.

(11) Orders of the Hearing Tribunal

The Hearing Tribunal is authorized under s. 82(1) of the Act to make orders in response to findings of unprofessional conduct. The Hearing Tribunal makes the following orders pursuant to s. 82 of the Act:

1. The Hearing Tribunal's written decision (the "Decision") shall serve as a reprimand.

2. Mr. Rashed shall pay a fine of \$500.00 within **12 months** of service of the Decision.
3. Mr. Rashed shall pay 25% of the costs of the investigation and hearing to a maximum of \$2000.00, to be paid over a period of **24 months** of service of the Decision.
 - a) A letter advising of the final costs will be forwarded when final costs have been confirmed.
4. Mr. Rashed shall read and reflect on how the following CLPNA documents will impact their nursing practice. These documents are available on CLPNA's website and will be provided. Mr. Rashed shall provide a signed written declaration to the Complaints Officer within 30 days of service of the Decision, attesting that they have reviewed the documents:
 - a) Code of Ethics for Licensed Practical Nurses in Canada;
 - b) Standards of Practice for Licensed Practical Nurses in Canada;
 - c) CLPNA Practice Policy: Professional Responsibility & Accountability.

If such documents become unavailable, they may be substituted by equivalent documents approved in advance in writing by the Complaints Officer.

5. Mr. Rashed shall complete the remedial education course **Righting a Wrong – Ethics & Professionalism in Nursing**, available online at www.icrsncsbn.org and provide a certificate confirming its successful completion to the Complaints Officer within **30 days** of service of the Decision.

If such course becomes unavailable an alternative course may be substituted where approved in advance in writing by the Complaints Officer.

6. The sanctions set out above at paragraphs 2 - 5 will appear as conditions on Mr. Rashed's practice permit and the Public Registry subject to the following:
 - a) The requirement to pay the fine and costs, will appear as "Conduct Cost/Fines" on Mr. Rashed's practice permit and the Public Registry until all fines and costs have been paid as set out above at paragraphs 2-3.
 - b) The requirement to complete the remedial education and readings outlined at paragraphs 4 - 5 will appear as "CLPNA Monitoring Orders (Conduct)", on Mr. Rashed's practice permit and the Public Registry until the below sanctions have been satisfactorily completed:
 - i. Educational Readings; and
 - ii. Righting a Wrong – Ethics & Professionalism in Nursing.

7. The conditions on Mr. Rashed's practice permit and on the Public Registry will be removed upon completion of each of the requirements set out above at paragraph 2 – 5.
8. Mr. Rashed shall provide the CLPNA with their contact information, including home mailing address, home and cellular telephone numbers, current e-mail address and current employment information, and keep their contact information current with the CLPNA on an ongoing basis.
9. Should Mr. Rashed be unable to comply with any of the deadlines for completion of the penalty orders identified above, the deadlines may, upon written request, be extended for a reasonable period of time with the written consent of the Complaints Officer.
10. Should Mr. Rashed fail or be unable to comply with any of the above orders for penalty, or if any dispute arises regarding the implementation of these orders, the Complaints Officer may do any or all of the following:
 - (a) Refer the matter back to a Hearing Tribunal, which shall retain jurisdiction with respect to penalty;
 - (b) Treat Mr. Rashed's non-compliance as information for a complaint under s. 56 of the *Health Professions Act*; or
 - (c) In the case of non-payment of the costs described in paragraph 3 above, suspend Mr. Rashed's practice permit until such costs are paid in full or the Complaints Officer is satisfied that such costs are being paid in accordance with a schedule of payment agreed to by the Complaints Officer.

The Hearing Tribunal believes these orders adequately balances the factors referred to in Section 10 above and are consistent with the overarching mandate of the Hearing Tribunal, which is to ensure that the public is protected.

Under Part 4, s. 87(1)(a),(b) and 87(2) of the Act, the Investigated Member has the right to appeal:

"87(1) An investigated person or the complaints director, on behalf of the college, may commence an appeal to the council of the decision of the hearing tribunal by a written notice of appeal that

- (a) identifies the appealed decision, and
- (b) states the reasons for the appeal.

(2) A notice of appeal must be given to the hearings director within 30 days after the date on which the decision of the hearing tribunal is given to the investigated person."

DATED THE 25th DAY OF NOVEMBER 2024 IN THE CITY OF EDMONTON, ALBERTA.

THE COLLEGE OF LICENSED PRACTICAL NURSES OF ALBERTA

A handwritten signature in black ink that reads "Kelly Anesty". The signature is written in a cursive, flowing style.

Kelly Anesty, LPN
Chair, Hearing Tribunal