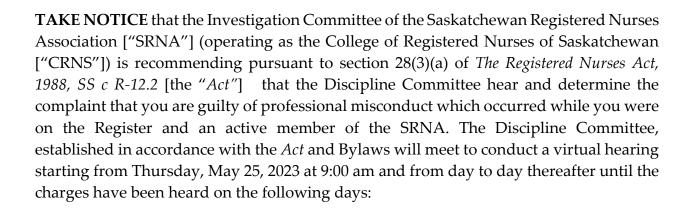


IN THE MATTER OF: The Registered Nurses Act, 1988, and McInnes, Leah, RN #0042301

#### **NOTICE OF HEARING**

TO: Leah McInnes



May 25-26, 2023 May 29-31, 2023

[the "Hearing"].

The particulars of your alleged professional misconduct are set out in Appendix A which is attached to and forms part of this Notice of Hearing of Complaint.

**AND FURTHER TAKE NOTICE THAT** where the Discipline Committee finds you guilty of professional misconduct, pursuant to section 31(1) of the *Act*, the Discipline Committee may:

- (a) order that the nurse be expelled from the association and that the nurse's name be struck from the register;
- (b) order that the nurse be suspended from the association for a specified period;

- (c) order that the nurse may continue to practise only under conditions specified in the order which may include, but are not restricted to, an order that the nurse:
  - (i) not do specified types of work;
  - (ii) successfully complete specified classes or courses of instruction;
  - (iii) obtain treatment, counselling or both;
- (d) reprimand the nurse; or
- (e) make any other order that to it seems just.

AND pursuant to section 31(2) of the *Act*, in addition to any order made pursuant to (1), the discipline committee may order:

- (a) that the nurse pay to the association within a fixed period:
  - (i) a fine in a specified amount;
  - (ii) the costs of the inquiry and hearing into the nurse's conduct and related costs, including the expenses of the investigation committee and the discipline committee; or
  - (iii) both of the things mentioned in subclauses (i) and (ii); and
- (b) where a nurse fails to make payment in accordance with an order pursuant to clause (a), that the nurse be suspended from the association.

**AND FURTHER TAKE NOTICE THAT** pursuant to section 31(3) of the *Act*, the Discipline Committee will be sending a copy of an order made pursuant to section 31(1) and 31(2) to you and to the person who made the report against you.

**AND FURTHER TAKE NOTICE THAT** at your own expense, you may choose to be represented by counsel or an agent at the Hearing before the Discipline Committee and have the right to call evidence and examine or cross-examine witnesses pursuant to section 30(5) and (7) of the *Act*.

**AND FURTHER TAKE NOTICE THAT** if you fail to attend the Hearing, the Discipline Committee may, on proof of service of this Notice on you and/or your legal counsel, proceed with the Hearing in your absence pursuant to section 30(9) of the *Act*.

If you wish to admit the allegations contained in this Notice of Hearing, you and/or your legal counsel should contact legal counsel for the Investigation Committee of the SRNA at the earliest opportunity in order to implement the appropriate procedure.

**DATED** at Regina, Saskatchewan, this <u>28th</u> day of March, 2023

Cindy Smith, RN, Executive Director

Brith

Saskatchewan Registered Nurses Association (operating as the "College of Registered Nurses of Saskatchewan")

# APPENDIX A Charges & Particulars

#### It is alleged that:

- 1. You have committed an act of professional misconduct as per section 26(2)(l) and (q) of *The Registered Nurses Act*, 1988, in that you identified yourself as a Registered Nurse (RN) on social media while posting disinformation and/or misleading information surrounding vaccine mandates and vaccine passports, and therefore failed to comply with the Code of Ethics of the Association, and contravened provisions of *The Registered Nurses Act*, 1988, and the SRNA bylaws.
  - (a) On September 1, 2021, you participated in an anti-vaccine mandate and anti-vaccine passport protest outside a public hospital in Northern Saskatchewan. You carried a sign that said, "RN against Mandates and Vax Passports". A photograph was shared on your social media pages and on the Global Media Facebook page.
  - (b) On multiple occasions, you posted and re-posted others' posts on your social media pages against COVID-19 vaccination mandates, and posted and re-posted anti-vaccination messages while publicly promoting yourself as an RN. You admitted to the postings and re-postings.
    - a. Some of your posts stated:
      - i. "People are seeing the damage already happening far and wide from medical coercion."
      - ii. "I will continue to advocate for the removal of these insanely unjust mandates and invasion of private medical information papers, and the division it is causing."
      - iii. "I often wonder if our country had had a different approach than what it's had over the past 19 months, if we could have perhaps avoided all the collateral damage and death that has occurred due to the non scientifically proven measures this country has implemented."
      - iv. "If your boss tells you that you must submit to them and be penetrated in a number of ways in their authoritative way,, coerced through threat, manipulation, ultimatum, shaming etc, what do we normally call this?"
      - v. "Yesterday, contrary to what the local news put out in their paper and on social media, a peaceful rally took place because citizens are not wanting C V's mandated nor having C

- passports (note that I have to short hand the words so I don't get censored)."
- vi. "For those against covid vaccine mandates or covid vaccine passports, come stand with us."
- vii. "There are many many nurses across this beautiful country who are standing up against having a jab mandated to continue with life as we know it. We are Standing up for freedom to chose what goes into the body or what one doesn't want in their body. Not just for ourselves, but to advocate for our patients to have choice for their medical freedom and bodily autonomy without facing coercion no matter the circumstance."
- viii. "We must have choice without coercion. Coercion of any medication or treatment goes against the Nuremburg Code among other things."
  - ix. "It doesn't matter whether you've had a jab or not, you all have a voice and the freedom to chose what's best for you [sic] health."
- b. Some of the posts reposted and shared by you on social media are:
  - i. A social media post making the following statements *inter alia* (in sharing the post, you prefaced it with the words "This. All of this"):
    - (a) "For those oppose [*sic*] to vaccination mandates and vaccine passports I implore you to write to your MLAs."
    - (b) "Vaccinated or unvaccinated we all know deep down this is wrong and coercive."
  - (c) "Vaccinated or unvaccinated both are showing to carry equal viral loads and as such can both easily transmit virus (I can provide references for same per request). So this idea of "protecting others" and the vulnerable people we care for from transmission by getting vaccinated as argument for mandates simply does not logically or scientifically make sense".
    - ii. An article with the headline "Freedom prevails: COVID data shows 'public health' mandates only harm people"

# BYLAWS, CODE OF ETHICS, PRACTICE STANDARDS & COMPETENCIES CONTRAVENED:

### The SRNA Bylaws (2021)

Bylaw IV, Section 2(3)(a) and (b): Practicing Membership Bylaw XIV Section 1: Code of Ethics of the Association Bylaw XV Section 1(1) and (2): Standards and Competencies

### <u>Code of Ethics for Registered Nurses (2017)</u>

### A. Promoting Safe, Compassionate, Competent and Ethical Care

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

### Ethical Responsibilities:

9. During a natural or human-made disaster, including a communicable disease outbreak, nurses provide care using appropriate safety precautions in accordance with legislation, regulations and guidelines provided by government, regulatory bodies, employers, unions and professional associations.

## C. Promoting and Respecting Informed Decision Making

Nurses recognize, respect and promote a person's right to be informed and make decisions.

# Ethical Responsibilities:

4. Nurses are sensitive to the inherent power differentials between care providers and persons receiving care. They do not misuse that power to influence decision-making.

## G. Being Accountable

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

## Ethical Responsibilities:

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

#### SRNA Registered Nurse Practice Standards (2019)

## Standard 1: Professional Responsibility and Accountability

The registered nurse is responsible for practicing safely, competently and ethically, and is accountable to the client, public, employer and profession.

The registered nurse upholds this standard by:

1. Being accountable and accepting responsibility for their own actions and decisions.

#### **Standard 3: Ethical Practice**

The registered nurse applies the principles in the current *CNA Code of Ethics for Registered Nurses* when making practice decisions and using professional judgment. The registered nurse engages in critical inquiry to inform clinical decision-making and establishes therapeutic caring and culturally-safe relationships with clients and the health care team.

The registered nurse upholds this standard by:

26. Practicing in accordance with the current *CNA Code of Ethics for Registered Nurses*.

#### Standard 4: Service to the Public

The registered nurse demonstrates leadership in quality and ethical nursing practice, delivery of health care services and establishing professional relationships. The registered nurse upholds this standard by:

- 35. Demonstrating professional presence and modelling professional behavior.
- 44. Supporting professional efforts in registered nursing to promote health and prevent disease to achieve a healthier society.

# **Standard 5: Self-Regulation**

The registered nurse demonstrates an accountability to regulate themselves in accordance with their legislated scope of practice.

The registered nurse upholds this standard by:

49. Practicing in accordance with *The Registered Nurses Act, 1988*, other current relevant legislation, bylaws, scope of practice, standards, entry-level competencies, guidelines and employer policies.

## SRNA Registered Nurse Entry-Level Competencies (2019)

#### 2. Professional

Registered nurses are professionals who are committed to the health and well-being of clients. Registered nurses uphold the profession's practice standards and ethics and are

accountable to the public and the profession. Registered nurses demonstrate accountability, accept responsibility and seek assistance as necessary for decisions and actions within the legislated scope of practice.

- 2.1 Demonstrates accountability, accepts responsibility and seeks assistance as necessary for decisions and actions within the legislated scope of practice.
- 2.2 Demonstrates a professional presence, and confidence, honesty, integrity and respect in all interactions.

Professional presence is the demonstration of respect, confidence, integrity, optimism, passion and empathy in accordance with professional standards, guidelines and codes of ethics. It includes a nurse's verbal and nonverbal communications and the ability to articulate a positive role and professional image, including the use of full name and title. The demonstration of professional presence leads to trusting relationships with clients, families, communities and other health care team members. (College of Nurses of Nova Scotia, 2018, p. 2)

- 2.5 Identifies the influence of personal values, beliefs and positional power on clients and the health care team and acts to reduce bias and influences.
- 2.8 Demonstrates professional judgment to ensure social media and information and communication technologies (ICTs) are used in a way that maintains public trust in the profession.

Information and communication technologies "Encompasses all those digital and analogue technologies that facilitate the capturing, processing, storage, and exchange of information via electronic communication" (Canadian Association of Schools of Nursing, Canada Health Infoway, 2012, p. 13).