

**SUMMARY of the Decision of the Inquiries, Complaints and Reports Committee
(the Committee)**
(Information is available about the complaints process [here](#) and about the Committee [here](#))

**Dr. Sharadindu Rai (CPSO #84749)
(the Respondent)**

INTRODUCTION

The Complainant attended the walk-in clinic (the Clinic) with symptoms of burning weepy eyes, sneezing and a runny nose. The Respondent (Family Medicine) was present in the Clinic and had some interaction with the Complainant and her husband while they were waiting to be seen. The Complainant left the Clinic without being assessed. The Complainant contacted the College of Physicians and Surgeons of Ontario (the College) to express concern about the Respondent's conduct.

The Complainant is concerned about the Respondent's unprofessional behavior at the Clinic when she attended for a possible allergic reaction/flu. In particular, the Complainant is concerned that the Respondent:

- **screamed at her and slammed the door shut when she opened the examination door; and**
- **may have billed OHIP for services not rendered.**

COMMITTEE'S DECISION

A Family Practice Panel of the Committee considered this matter at its meeting of November 5, 2020. The Committee required the Respondent to attend at the College to be cautioned in person with respect to professional communications; and to complete a specified continuing remediation and education program (SCERP) consisting of individualized instruction in communication and professionalism.

COMMITTEE'S ANALYSIS

The Committee noted that it was clear from the record before it that the Respondent did not bill OHIP for the visit in issue.

The Committee was concerned by the Complainant and her husband's description of the Respondent's attitude and demeanour towards the Complainant, which the Respondent disputed. The Committee stated that it was difficult to know with certainty what occurred. However, it was struck by the Complainant's very negative description of the Respondent's behaviour (behaviour (which she said resulted in her leaving the Clinic without obtaining medical care), particularly given the Respondent's long history of similar complaints.

The Committee noted that since he began practising in 2008, the Respondent has acquired an extensive and concerning history with the College, which includes a SCERP and caution in person in March 2017, a remedial agreement in December 2018, and two further SCERPS and cautions in person in July 2019.

The Committee had significant concerns regarding the Respondent's communications and professionalism, particularly given that the complaints about his communication difficulties are repetitive and long-standing and appear to persist even after he has completed attempts at remediation. It noted that despite having completed a SCERP and a caution in person in 2018, and having received the Committee's two further SCERP decisions from July 2019, which expressed deep concerns regarding his communications, the Respondent continued to be the subject of similar complaints to the College.

The Committee was of the opinion that the Respondent requires a caution in person as set out above, along with further remediation to assist him in communicating with patients in a manner that is respectful and professional, and to help improve his patients' experiences. The Committee acknowledged that the Respondent is already subject to a SCERP (as recently upheld by the Health Professions Appeal and Review Board), which requires him to complete remediation that is similar to the education the Committee would have wanted to see in resolution of this matter. However, the Committee was of the opinion that a further SCERP that is focused on individual instruction in communications, is required in this case, as it will provide the Respondent with an important opportunity to obtain individualized support, and an opportunity to make significant changes in his approach to communications with patients.