

**Indexed as: Dobrowolski (Re)**

**THE DISCIPLINE COMMITTEE OF THE COLLEGE  
OF PHYSICIANS AND SURGEONS OF ONTARIO**

**IN THE MATTER OF** a Hearing directed  
by the Complaints Committee of  
the College of Physicians and Surgeons  
of Ontario, pursuant to Sections 38 to 56  
of the Health Professions Procedural Code  
of the Regulated Health Professions Act 1991,  
S.O. 1991, c. 18, as amended.

**BETWEEN:**

THE COLLEGE OF PHYSICIANS AND SURGEONS OF ONTARIO

- and -

DR. STANLEY T. DOBROWOLSKI

**PANEL MEMBERS:** DR. J. WATTS (CHAIR)  
DR. A. KENSHOLE  
DR. Y. DEBUDA  
H. MAEOTS  
J. FREDERICK

**Hearing Date:** October 7, 1999

**Decision Released Date:** October 7, 1999

**PUBLICATION BAN**

## **DECISION AND REASONS FOR DECISION**

This matter was heard on October 7, 1999, at the College of Physicians and Surgeons, at Toronto.

Dr. Dobrowolski was charged in the Amended Notice of Hearing with, amongst other things, professional misconduct under clause 51(1)(a) of the *Health Professions Procedural Code* (the “Code”), which is Schedule 2 to the Regulated Health Professions Act, 1991, in that

1. he failed to maintain the standard of practice of the profession contrary to paragraph 27.21 of Ontario Regulation 448, R.R.O, 1980, as amended;
2. he engaged in sexual impropriety with a patient contrary to paragraph 27.29 of Ontario Regulation 448, R.R.O, 1980, as amended;
3. he engaged in conduct or an act relevant to the practice of medicine that having regard to all the circumstances would reasonably be regarded by members as disgraceful, dishonourable or unprofessional, contrary to paragraph 27.32 of Ontario Regulation 448 R.R.O, 1980, as amended.

The College withdrew all allegations other than that of unprofessional conduct under paragraph 27.32 of Ontario Regulation 448, R.R.O, 1980, as stated in paragraph 3 above.

## **PUBLICATION BAN**

At the opening of the hearing an Order was made preventing publication of the names of complainants and witnesses.

## **PLEA**

Dr. Dobrowolski entered a plea of guilty to the single allegation of unprofessional conduct.

## **EVIDENCE**

The following material was presented to the Discipline Committee:

1. A statement containing Admissions of Fact;

2. The Decision and Reasons for Decision in the matter between the College of Physicians and Surgeons of Ontario and Dr. Dobrowolski, April 24, 1995;
3. The Penalty and Reasons for Penalty in the matter between the College of Physicians and Surgeons of Ontario and Dr. Dobrowolski, September 19, 1995;
4. The Penalty and Reasons for Penalty in the matter between the College of Physicians and Surgeons of Ontario and Dr. Dobrowolski, September 17, 1996;
5. A Book of Documents which included copies of reports of Dr. C.H.C., and Dr. E.W.M., together with testimonial letters from current and former patients of Dr. Dobrowolski.
6. A statement containing the Requested Penalty;

The “Admissions of Fact” contained details of Dr. Dobrowolski’s interactions with four student patients at a University between 1987 and 1991, summarized as follows:

1. Complainant #1 was a patient between September 1987 and August 1989. During counselling appointments Dr. Dobrowolski would on occasion touch the patient on the knees, squeeze her hand reassuringly or give her a hug at the end of an emotional session. He made inappropriate comments to her including comments about her appearance. He talked to her about his personal history and made self-disclosures about his family life, which he now recognizes were ill-advised. On one occasion towards the end of the therapeutic relationship he took the patient to a restaurant for a drink, and at the end of the evening he kissed the patient. The complaint was lodged by the patient in January, 1995.
2. Complainant #2 was a patient between September 1988 and September 1990. During the course of the patient’s counselling appointments, Dr. Dobrowolski held her hand or gave her a hug on occasions, and on at least one occasion kissed her cheek or forehead. He made what he now understands were inappropriate comments about her appearance and self-disclosures about his personal life. In August 1989 he brought the patient garden flowers at her home, saw her later in the day at a scheduled appointment, and later in the evening had a drink with her at a pub followed by dinner at a restaurant, during which he held her hand and talked to her about his family. Later that same day he invited her to his home where he showed her around the house and took her for a walk through a nearby park. He subsequently drove the patient home, but declined to go into the home when invited. He kissed the patient on the lips and left. This complaint was lodged in January, 1995.

3. Complainant #3 was a patient between January 1991 and March 1991. During the initial appointment with this patient Dr. Dobrowolski performed a limited general physical examination (after having offered to have another physician perform this physical examination). During the course of this examination the patient revealed that she perceived one of the sources of her depression to be her fear of intimacy arising out of surgical scars in the area of her breasts. Dr. Dobrowolski asked the patient's permission to evaluate the scars to see if they were disfiguring. After some hesitation on the part of the patient Dr. Dobrowolski made a visual examination only and made what he thought were reassuring comments regarding the scars. He believed he had a therapeutic purpose in viewing the scars but in retrospect and in light of the patient's past history of sexual abuse, which was not known to Dr. Dobrowolski at the time of the examination, he now believes that his persistence was inappropriate. This complaint was lodged in November, 1994.
4. Complainant #4 was a patient between June 1988 and December 1989. She consulted Dr. Dobrowolski about depression and at the initial appointment he performed a physical examination which included a breast examination although the patient had informed him that she performed regular self examinations. During the course of the breast examination he commented that she would find it easy to do her own examination because there was so little breast tissue. This was a factual observation not intended to cause discomfort and Dr. Dobrowolski now regrets having made the comment. On one occasion he telephoned this patient at home regarding the results of a blood test and as the patient was not there, he spoke with the mother and unintentionally disclosed to her that her daughter was a patient. This complaint was lodged in or about July, 1996.

Dr. Dobrowolski now recognizes that the conduct described above with respect to each of the four complainants would reasonably be regarded by members as unprofessional and constituting professional misconduct under paragraph 27.32 of Ontario Regulation 448, R.R.O, 1980, as amended.

**SUMMARY OF PREVIOUS HEARINGS OF THE DISCIPLINE COMMITTEE RE:  
DR. DOBROWOLSKI**

**NOVEMBER, 1994**

In November, 1994, Dr. Dobrowolski pleaded guilty to allegations of failing to maintain the standards of practice of the profession and of disgraceful, dishonourable or unprofessional conduct. He pleaded not guilty to a charge of engaging in sexual impropriety and of failing to maintain records. He also pleaded not guilty to an allegation of incompetence.

These charges related to a woman who was a patient of Dr. Dobrowolski in 1987. Dr. Dobrowolski admitted to having had sexual intercourse with her on several occasions between May and August 1988.

## **FINDING**

The Committee found Dr. Dobrowolski guilty of disgraceful, dishonourable and unprofessional conduct and of conduct that fell below the standard of practice of the profession. It did not make a finding of professional misconduct for sexual impropriety because it ruled that the complainant was no longer a patient when the most serious incidents took place. The Committee noted that Dr. Dobrowolski did plead guilty to some of the allegations, appeared contrite, acknowledged his errors and sought psychiatric help.

## **PENALTY**

The penalty imposed in that case was a recorded reprimand, together with suspension of Dr. Dobrowolski's certificate of registration for twelve months with the latter nine months of the twelve month period of suspension being itself suspended provided:

- (a) Dr. Dobrowolski continued to see his treating psychiatrist at least once each month for the twelve month period;
- (b) the treating psychiatrist submit reports satisfactory to the Registrar;
- (c) Dr. Dobrowolski submit himself to nine months of weekly supervision of his practice at his own expense;
- (d) the supervisor submit reports satisfactory to the Registrar every two months.

## **JUNE, 1995**

In June, 1995, Dr. Dobrowolski was charged with professional misconduct for having failed to maintain the standard of practice of the profession, and having engaged in sexual impropriety

with a patient and with conduct that would be regarded as unprofessional. These charges related to four patients, all of whom were students at the University. Dr. Dobrowolski was charged with having made inappropriate comments regarding the patients' personal appearance, with hugging the patients, with having done an inappropriate breast examination and with discussion about his personal history.

The Committee's decision was that the inappropriate breast examination would reasonably be regarded by members of the profession as unprofessional conduct and he was therefore found guilty on this charge. The Committee did not find Dr. Dobrowolski guilty of the other charges but noted that Dr. Dobrowolski showed very poor judgement with regard to some of his comments and that there was a pattern of indiscretion with regard to the setting of appropriate boundaries. However, the Committee concluded that such behaviour (other than the breast examination) did not fall below the standard and did not amount to unprofessional conduct.

The Committee, in its decision on penalty, stated that although Dr. Dobrowolski demonstrated an extremely worrisome pattern of behaviour it was very cognizant of the fact that in its own deliberations it made a finding of only one incident of unprofessional conduct. Furthermore, given the fact that the time for any suspension had already been served, the Committee decided not to impose a suspension and imposed the minimum penalty of a recorded reprimand. In addition, the Committee recommended that Dr. Dobrowolski write a letter of apology to the patient concerned and seek out the guidance of the Associate Director (Education) of the College regarding the availability of an appropriate gender sensitivity course.

## **JOINT SUBMISSION REGARDING PENALTY IN THIS CASE**

The College and counsel for the doctor submitted the following joint proposal for penalty:

1. Dr. Dobrowolski should be reprimanded with the reprimand recorded on the Register;
2. Dr. Dobrowolski should submit to a five-month period of supervision of his practice by Dr. C., with a report being submitted to the Registrar following the five-month period;
3. Dr. Dobrowolski should submit to a peer-assessment by Dr. C. twelve months after the date of disposition;
4. Dr. Dobrowolski should provide written apologies to the complainants; and
5. a questionnaire should be made available to patients of Dr. Dobrowolski's office (for a period of twelve months following disposition) so that patients could anonymously comment on the treatment they received from Dr. Dobrowolski.

In oral submissions, counsel for the College pointed out that the offences in this case occurred prior to the matters that had already come before the Discipline Committee and that they did not represent repeat offences. Counsel also pointed out that Dr. Dobrowolski had already shown positive response to the supervisory and counselling programs previously imposed and that he had continued these programs beyond the period required by the College.

Prosecution counsel also submitted that the joint submission was consistent with a recent decision of the College in the case of *Dr. Doré*.

Counsel for the defence submitted that the offences in this case represented boundary violations which were less egregious than some of the offences that had previously come before the Committee.

Counsel also pointed out that Dr. Dobrowolski had lost his employment at the University he was employed with and was subject to massive publicity at the time of the first suspension in 1995. Since his return to practice, the Committee was told that Dr. Dobrowolski has built up a practice of 50 - 60 patients mainly middle aged men. Approximately half his practice is of Polish descent, and he is one of the few psychiatrists who can converse with those patients in their own language. He now limits his practice to the management of anxiety disorder and depression and excludes severely psychotic patients. He uses a mixture of supportive and cognitive psychotherapy. He refuses to take adolescent patients.

Counsel pointed out that Dr. Dobrowolski had more than complied with the conditions of the first penalty imposed. In the second penalty an apology, which was recommended but not ordered, was indeed rendered. The recommendation of a gender sensitivity course could not be followed since no such course existed. Dr. Dobrowolski has voluntarily continued to be under supervision, and in addition, undertook a period of psychotherapy under Dr. M. until the latter moved to Ottawa this year. Backup for continuing psychotherapy has been arranged.

Counsel referred to the number of impressive testimonials received from patients who generally represented an articulate and educated group of people.

## **DECISION**

Considering the submissions of counsel, the Committee took into account both the severity of the offences and the fact that there was a generalized pattern of indiscretion with respect to the setting of boundaries. They also recognized that Dr. Dobrowolski had already been penalized for previous offences (which had occurred concurrently) and they recognized the successful progress he had made in his rehabilitation. The Committee therefore accepted Dr. Dobrowolski's plea of guilty, and imposed the following penalty.

## **PENALTY**

1. Dr. Dobrowolski is to be reprimanded and the fact of the reprimand is to be recorded on the Register;
2. During the five-month period immediately following the disposition of this hearing, Dr. Dobrowolski shall submit himself to supervision of his practice at his expense, with Dr. C. This supervision should include, but shall not be limited to, the use of tapes and videotapes of patient interviews, chart reviews and attention to issues of transference, counter-transference and boundary violations. Dr. C. shall submit a report to the Registrar following the five-month period confirming that supervision of Dr. Dobrowolski's practice has been carried out in accordance with the foregoing and that Dr. Dobrowolski's psychiatric care is appropriate and ethical;
3. Dr. Dobrowolski shall submit to a peer assessment by Dr. C. twelve months after completion of the five-month period of supervision, and Dr. C. shall submit a report on his assessment to the Registrar;
4. Dr. Dobrowolski shall provide written apologies to the complainants to be sent to the College for forwarding to the complainants and ;
5. A questionnaire attached as Schedule A is to be made available to patients at Dr. Dobrowolski's office for a period of twelve months from the date of disposition.

The Committee further recommended that in furtherance of his ongoing rehabilitation Dr. Dobrowolski continue to receive psychiatric counselling from a therapist of his choice.

Dr. Dobrowolski waived his right of appeal and the reprimand was administered.