

**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. Javad Peirovy (CPSO #84832)
(the Respondent)**

INTRODUCTION

In 2010 and 2011 the College received complaints from six female patients that they had been subject to inappropriate touching by the Respondent during examinations at walk-in clinics. The Respondent was also charged criminally with six counts of sexual assault in regards to the same individuals. He pleaded guilty to simple assault against two of the patients.

On June 26, 2013, the Committee referred allegations of professional misconduct to the Discipline Committee. On July 23, 2013, the Respondent signed an Undertaking in which he agreed, among other things, not to engage in any professional encounters with female patients of any age unless in the presence of a female regulated health professional approved by the College, and to post signs in the waiting room and examination rooms of all practice locations.

In June 2015, the Discipline Committee found the Respondent to have engaged in sexual abuse of four of the patients, disgraceful, dishonourable or unprofessional conduct in regards to a fifth patient, and of professional misconduct with regards to the criminal finding as relevant to his suitability to practise medicine. The Respondent was suspended for six months and required to engage in clinical education and continue to have a practice monitor for all female patient encounters. Appeals were initiated by both the College and the Respondent and the final decision is pending.

The Respondent signed a Supplemental Undertaking dated August 30, 2017. He had a Practice Monitor, Ms X, who was approved by the College to act as Practice Monitor upon his return to practice following his suspension (as per the Discipline Committee order)

In October 2017, the Committee approved the Registrar's appointment of investigators under Section 75(1)(a) of the Code to examine the Respondent's practice .

COMMITTEE'S DECISION

The Committee considered this matter at its meeting of May 8, 2019. The Committee required the Respondent to attend at the College to be cautioned in person with respect to being vigilant to ensure complete compliance with the terms of his undertaking and his subsequent Discipline Committee order.

COMMITTEE'S ANALYSIS

In October 2017, College staff conducted an unannounced compliance visit at the Respondent's office. During this visit, Compliance Case Managers observed the Respondent's practice monitor leave a female patient alone in an examination room with the Respondent and attend at the front desk of the clinic. As such, the Respondent was observed to be alone with a female patient briefly, contrary to the terms of his restrictions. The Respondent does not deny that this occurred, but claims that this arose by way of a misunderstanding. While the Committee appreciated that misunderstandings can occur, they stated their view that a prudent physician would have immediately left the room once it became evident that there was no practice monitor present.

The College investigator also noted that the mandatory sign the Respondent was required to post in his clinic was obscured and difficult to read, which is not acceptable. While the Committee appreciated that the Respondent complied with the requirement that he post a sign, they noted that signs should be clear and visible so that patients are able to understand their meaning. The patient who College staff observed to be alone with the Respondent later advised that she was not aware of any conditions on the Respondent's practice, and did not notice any signage to this effect on the walls in the waiting room.

The Committee also had information that the Respondent did not bring his mandatory signage with him when performing house calls on female patients. The Respondent claimed that this was a misunderstanding of the term "practice location." The Committee was not satisfied with the Respondent's explanation in this regard, and was of the view that a prudent physician would have understood that the same terms and conditions that applied to his clinic would have applied to home visits. The Committee was concerned that the Respondent failure to bring his mandatory signage to the home visit despite the restrictions he had in place suggested that he does not fully appreciate the seriousness of the restrictions or their intended purpose. The Committee was also concerned that the Respondent provided excuses for his behaviour and breaches, which the Committee felt was problematic and spoke to the Respondent's lack of governability.

Based on the above, the Committee felt a caution, as outlined, was warranted.