

SUMMARY

DR. ANNETTE RICHARD (CPSO# 69310)

1. Disposition

On May 2, 2018, the Inquiries, Complaints and Reports Committee (the Committee) required Family Medicine physician Dr. Richard to appear before a panel of the Committee to be cautioned with respect to professional communications and maintaining appropriate boundaries with patients.

The Committee also ordered Dr. Richard to complete a specified continuing education and remediation program (SCERP). The SCERP requires Dr. Richard to:

- Attend the next available session of the PROBE: Ethics & Boundaries course
- Receive one-to-one coaching in communications and professionalism
- Reflect on her professional communications and boundaries issues, the flaws identified by the College, the steps she has taken to improve her professional communications and boundaries, and the further steps she needs to take to ensure she maintains professional communications and boundaries.

2. Introduction

A family member of the patient complained to the College that Dr. Richard abruptly switched the patient's psychiatric medication, disclosed information about her own mental health, told the patient that they should be prepared that their spouse would be permanently changed by cancer, told the patient, within earshot of the patient's spouse and another patient in the waiting room, not to buy rope or look up at ceiling beams, and asked the patient's spouse if they felt resentful towards the patient, and whether their relationship was worth it.

Dr. Richard responded that the patient did not feel they were getting any benefit from their psychiatric medication, so she switched the patient to another medication. However, she

switched the patient back to the former medication after they complained that the new medication was disturbing their sleep.

Dr. Richard indicated that she only had a vague recollection of the patient, and could not remember what comments she made. She stated that she did recall something to address the patient's fears of being placed on a Form under the *Mental Health Act*, and that if she mentioned her own previous difficulties, it was to empathize with the patient and help them understand that their position could improve. She stated it was not her typical practice to share personal information with patients, and that she would not share this type of personal information again.

3. Committee Process

A General Panel of the Committee, consisting of public and physician members, met to review the relevant records and documents related to the complaint. The Committee always has before it applicable legislation and regulations, along with policies that the College has developed, which reflect the College's professional expectations for physicians practising in Ontario. Current versions of these documents are available on the College's website at www.cpso.on.ca, under the heading "Policies & Publications."

4. Committee's Analysis

The Committee found that the medical record supported Dr. Richard's decision to change the patient's psychiatric medication. However, the Committee was troubled that Dr. Richard disclosed her own mental health condition to a patient during their relationship, and finds this decision entirely inappropriate. Further, the patient did attempt suicide at some point after these comments were made, after which it appears that Dr. Richard further inappropriately told the patient not to buy rope or look up at ceiling beams. Although Dr. Richard does not recall this conversation, the patient's spouse witnessed it.

In regards to the other remarks attributed to Dr. Richard, she claims that she would not make remarks of that nature. There was no independent information before the Committee to determine whether these remarks occurred. However, given the other remarks made by Dr. Richard, the Committee felt that it was necessary for Dr. Richard to have re-education in regards to her professional communications and boundaries.