



College of
Registered Nurses
of Manitoba

Denise Purpur
CRNM #132523

Notice of Censure

In the matter of: **The Regulated Health Professions Act**

And in the matter of: Denise Purpur, a member of the College of Registered Nurses of Manitoba

To: Denise Purpur

On November 20, 2019 in accordance with section 102(1)(d) of *The Regulated Health Professions Act* (RHPA), the Complaints Investigation Committee (the “committee”) decided to censure the Member as a record of its disapproval of her conduct.

Censure creates a disciplinary record, which may be considered in the future by the committee or an Inquiry Committee when determining the action to be taken following an investigation or hearing.

TAKE NOTICE that the Complaints Investigation Committee of the College of Registered Nurses of Manitoba (the “College”) resolves and hereby censures the Member with respect to:

- Inappropriately accessing patient health information when she had no legitimate need to know.

I. The Relevant Facts are:

The Member had been employed by a clinic whereby she was provided authorization to access a specific database that contained patients’ personal health information.

The Member resigned from this clinic in late June 2019. In response, her employer sent correspondence advising of her obligation to maintain confidentiality.

The Member acknowledged the email from the former employer and confirmed that she received and understood the information in the email. Additionally, the Member was also aware of her employer’s policy and procedure related to confidentiality.

The Member’s last day of employment was July 9, 2019.

In late July 2019, the Member was offered employment with a new registered nursing employer.

In August 2019, the Member attended a staff meeting for her new employer.

The Member advised the College’s investigation that she felt the other nurses at this meeting had ‘something to contribute to the team and that she also wanted to contribute to the team’.

The Member decided to reach out to a number of former patients known to her from her former employer to let them know she had a new employer and how to contact her at her new place of employment.

Through the Member's position at her former employer, she had been provided access to a database that included, among other things, the email addresses of patients.

On August 23, 2019 the Member accessed the above mentioned database using her former employer's account login and password. By accessing this specific database, the Member obtained the email addresses of 36 patients known to the Member as a result of her RN position with her former employer.

One of the patients forwarded a copy of the email to the Member's former employer.

The Member's former employer reported the Member's conduct to the College.

The Member advised the College's investigation that:

- a. She was remorseful for her actions and apologized for her error in judgement.
- b. She completed an online Personal Health Information Act course.
- c. She completed course "Righting a Wrong" offered by the National Council for State Boards of Nursing.

The following is the analysis applied by the committee:

The Personal Health Information Act sets the legal expectation that patients' personal health information will be protected and safeguarded.

According to the Government of Manitoba website, personal health information includes general information about a person (such as name, address, gender and date of birth) if that information is collected during the provision of a health service or used to administer payment for a health service.

Confidential information should not be accessed by individuals no longer involved in the care of a patient. Confidential information should be shared only with the patient's informed consent, when legally required, or where failure to disclose information could result in significant harm.

If patients are concerned that their personal health information will be inappropriately accessed disseminated to those who do not have a legitimate reason to know it, they will be hesitant to disclose personal information that may be important to their care. Further, any breach of this trust, even if inadvertent, damages the therapeutic relationship between a registered nurse and a patient and can impact the general trustworthiness of the registered nursing profession.

In this particular matter, the Member did not have informed consent from the patients whose information she accessed after leaving the first employer. There was no legitimate reason to access it or disclose it.

While there is no information before the committee that there was specific patient harm, there is potential for harm to the profession as a whole and the confidence of the public in the failure to maintain confidentiality and privacy of all patients.

The wrong thinking and wrongdoing occurred when the Member chose to access the database at her former place of employment to obtain personal health information in the form of email addresses using a confidential login and password provided by her former employer. It was further exacerbated when the email addresses were used to communicate with her former patients for her own purposes.

The committee accepts that the Member has acknowledged that she realizes her error as a demonstration of accountability. Additionally, the Member has enrolled in remedial course work that addresses wrong thinking and wrong doing, which the committee considers a demonstration of responsibility.

II. Standards of Practice, Practice Directions and Code of Ethics

Professional Practice

Registered nurses are accountable and responsible for nursing practice that is informed by evidence and demonstrates competence. As an RN, you must:

2. Demonstrate professional behaviours, attributes and values.
12. Develop and maintain competence in managing technology in health-care systems.
13. Demonstrate professional responsibility in protecting personal health information.

Ethical Practice

Registered nurses recognize, promote and uphold the ethical standards of the nursing profession. As an RN, you must:

19. Practise in accordance with the values outlined in the Code of Ethics.
20. Distinguish digital technology/applications that enhance nursing practice from those that breach practice expectations, practice directions or the Code of Ethics in order to only appropriately use technology/ applications (e.g. social media).

CNA CODE OF ETHICS 2017

E. Maintaining Privacy and Confidentiality

Nurses recognize the importance of privacy and confidentiality and safeguard personal, family and community information obtained in the context of a professional relationship.

Ethical responsibilities:

1. Nurses respect the interests of persons receiving care in the lawful collection, use, access and disclosure of personal information.
3. Nurses collect, use and disclose health information on a need-to-know basis with the highest degree of anonymity possible in the circumstances and in accordance with privacy laws.
7. Nurses respect policies that protect and preserve the privacy of persons receiving care, including security safeguards in information technology.
8. Nurses do not abuse their access to information by accessing health-care records, including those of a family member or any other person, for purposes inconsistent with their professional obligations. When using photo, video or other technology for assessment, diagnosis, planning, implementation and evaluation of persons receiving care, nurses obtain their consent and do not intrude into their privacy. They handle photos or videos with care to maintain the confidentiality of the persons involved, including colleagues and students.
11. In all areas of practice, nurses safeguard the impact new and emerging technologies can have on patient privacy and confidentiality, professional boundaries, and the professional image of individual nurses and the organizations in which they work (CNA, 2012). They are also sensitive to

ethical conduct in their use of electronic records, ensuring accurate data entry and avoiding the falsification or alteration of documentation.

III. On these facts the Complaints Investigation Committee records its disapproval of the Member's conduct:

The committee concludes that the Member inappropriately accessed patient health information for personal gain, when she had no legitimate need to.

Registered nursing is a self-regulated profession in Manitoba. RNs must recognize that self-regulation is a privilege and that each RN has a continuing responsibility to meet the *Standards of Practice, Reserved Acts, Practice Expectations for RNs and the Code of Ethics for Registered Nurses*.

On these facts, the committee records its disapproval of the Member's lack of professionalism in failing to adhere to the ethical values and practice expectations.

Although the conduct is sufficiently serious to consider referral to the Inquiry Committee, the committee considered the fact that the Member does not have a disciplinary record.

On these facts the committee believes that the censure should be published as it is to act as a specific deterrence for the Member and as a general deterrence for other registered nurses.

On these facts, the committee orders the Member to pay costs of \$1000.