



In The Matter of: The Regulated Health Professions Act, S.M.2009, c. 15

And in The Matter of: Brittany Gamache, a member of the College of Registered Nurses of Manitoba (CRNM# 148247)

To: Brittany Gamache

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

- On October 5, 2024, you agreed to conduct a patient transport when called by the **patient’s family at home.**  
You then transported an 8-day old infant from Dauphin Regional Health Centre (DRHC) to **Children’s Hospital in Winnipeg, in a Handivan.**

On July 10, 2025, in accordance with section 102(1)(d) of *The Regulated Health Professions Act (the “RHPA”)*, **the Committee decided to censure you as a record of its disapproval of the deficiencies in your 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.

I. The Relevant Facts Are:

On October 5, 2024, the 8-day old infant patient identified as CP, presented to DRHC Emergency Department (ED), and subsequently required transport to Children's Hospital in Winnipeg for further assessment.

Manitoba Transportation Coordination Centre (MTCC) was contacted to arrange transport, and the initial choice of transport was via air ambulance; however, due to ongoing poor weather conditions, air ambulances were unable to fly.

MTCC followed standard processes and determined CP was stable and would be transported when ground ambulance could be arranged.

**On October 5, 2024, at 1700 hours, CP's parents no longer wanted to wait for the ground ambulance and expressed their desire to leave DRHC ED against medical advice (AMA). CP's parents indicated they would conduct the transport themselves.**

The Program Services Manager (PSM) onsite arranged for a Handivan to transport CP to **Children's Hospital** instead of ground ambulance. The investigation noted that the use of Handivan to transport an 8-day old infant was not supported by DRHC or Prairie Mountain Health (PMH) policy.

You were **contacted at home by CP's mother and asked to do the transport.** After the call, you discussed **CP's situation** with your husband. You were then contacted by DRHC Staffing and asked to conduct the transport to which you agreed.

You arrived at DRHC ED at approximately 1945 hours and documented leaving the facility at 2045 hours. During this time:

- i. You gathered some supplies for the transport.
- ii. You obtained report from the DRHC ED nurse.
- iii. Upon obtaining report, you stated that you felt that the report was not consistent with **CP's** current clinical presentation. You **felt CP's condition was worse** than the report suggested.

Between 1945 and 2045 hours, you did not:

- i. **Review CP's health record.**
- ii. Assess CP.
- iii. Review or conduct any emergency or contingency safety planning for the transport.

Between 2045 and 0035 hours, you conducted the transport via Handivan. The investigation revealed:

- i. You conducted hourly oxygen saturation and pulse rates.
- ii. No other vital signs were documented.
- iii. CP experienced a desaturation and cardiac deceleration during feeding. No vital signs or reassessment was documented.

## II. Practice Directions and Code of Ethics

The Committee is reasonably satisfied that the facts support that you did not meet the following standards of practice for Registered Nurses:

### Professional Practice

Registered nurses are accountable and responsible to demonstrate professional behaviours, attributes and values that uphold trust in the profession of registered nursing. As an RN, you must:

2. Promote a practice environment that supports responsibility, accountability, professional development, and respect for others by:
  - c. Identifying issues which could have an injurious effect on clients or others.

### Competent Practice

Registered nurses are accountable and responsible to demonstrate competence in registered nursing practice. As an RN, you must:

3. Apply the entry-level competencies for registered nurses in your practice.
5. Demonstrate critical thinking and use of current evidence from nursing science, other disciplines and other pertinent peer-reviewed, evidence-informed sources.
6. Demonstrate critical inquiry in planning for client care needs and evaluating care provided.

### Professional Communication

Registered nurses are accountable and responsible to effectively communicate with the client, other health care providers, and the public, integrating the nursing perspective into professional communication. As an RN, you must:

11. Communicate effectively in complex and changing situations to promote care continuity and delivery of safe, competent and ethical care. Demonstrate willingness to answer clients' questions about their health care.
12. Take steps to manage communication barriers including the modification of your communication so that it is understood by clients of varying needs, abilities, cultures and socioeconomic backgrounds.
13. Demonstrate skill in written and/or electronic communication that promotes quality documentation and communication between team members.

### Ethical Practice

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

14. Practise in accordance with the values outlined in the Code of Ethics.

#### \*Client-centered Practice

The practice of registered nursing encompasses several domains such as clinical practice, education, administration, and research. Your client may be an individual, a family, a group of people, a community, or a population. Depending on your domain(s) of practice, a client may be a patient, a nursing student, a research participant, another member or other health-care provider. As an RN:

22. You must acknowledge your limitations in skill, knowledge and judgment and must ensure that you practice registered nursing within those limitations.
23. When engaging in the practice of registered nursing, you must apply, as a framework, the nursing process, which is the systematic approach to the practice that encompasses all steps taken by RNs in planning for the needs of your client, including assessment, diagnosis or determination, planning, implementation and evaluation.
25. When engaging in the practice of registered nursing in a clinical practice setting, you must provide nursing care that includes:
  - a. an assessment to determine the needs and circumstances of the client;
  - b. a care or treatment plan with the client or their representative and any other person who the client wishes to involve, which takes into account the client's needs, circumstances, preferences, values, abilities and culture;
  - c. an evaluation of the outcomes of the care or treatment plan and the modification or discontinuance of the care or treatment plan as required and as discussed with the client or their representative;
  - d. sufficient and timely communication with the client or their representative that takes into account the client's needs, circumstances, understanding and use of health information and enables the client or their representative to make informed decisions about their health care; and
  - e. a referral of the client to another RN or healthcare professional when appropriate.

#### \*Collaborative care

As an RN, you must:

26. When involved in providing for the health care of a client:
  - a. Work collaboratively and cooperatively with clients, families and other health-care providers in providing for the health care of the client and communicate effectively and appropriately with them; and
  - d. Comply with any collaborative care decision tool in place at the practice setting where you and other health-care providers are providing for the health care of the client.
27. Document on the client's record the nursing care you provided with enough information for another health-care professional to be sufficiently informed of the care provided.

\*Client records

31. As an RN, you must appropriately document the nursing care you provided in a record specific to each client as the nursing care is provided or as soon as possible after the care is provided.

The Committee is reasonably satisfied that the facts support that you did not meet the following values from the Code of Ethics for Registered Nurses:

#### Part I. Nursing Values and Ethical Responsibilities

Nurses in all contexts and domains of practice and at all levels of decision-making bear the ethical responsibilities identified under each of the seven primary nursing values. These responsibilities apply to nurses' interactions with all persons who have health-care needs or are receiving care as well as with students, colleagues and other health-care providers. The responsibilities are intended to guide nurses in applying the Code to their practice. They also serve to articulate nursing values to employers, other health-care providers and the public. Nurses help their colleagues implement the Code and they ensure that nursing students are acquainted with it.

##### A. Providing Safe, Compassionate, Competent and Ethical Care

Nurses provide safe, compassionate, competent and ethical care.

Ethical responsibilities:

4. Nurses question, intervene, report and address unsafe, non-compassionate, unethical or incompetent practice or conditions that interfere with their ability to provide safe, compassionate, competent and ethical care; and they support those who do the same.
5. Nurses are honest and take all necessary actions to prevent or minimize patient safety incidents. They learn from near misses and work with others to reduce the potential for future risks and preventable harms.
6. Nurses practise "within their own level of competence and seek [appropriate] direction and guidance ... when aspects of the care required are beyond their individual competence" (Licensed Practical Nurses Association of Prince Edward Island [LPNAPEI], Association of Registered Nurses of Prince Edward Island, & Prince Edward Island Health Sector Council, 2014, p. 3).
7. When resources are not available to provide appropriate or safe care, nurses collaborate with others to adjust priorities and minimize harm. Nurses keep persons receiving care informed about potential and actual plans regarding the delivery of care. They inform employers about potential threats to the safety and quality of health care.

14. When differences among members of the health-care team affect care, nurses seek constructive and collaborative approaches to resolving them and commit to conflict resolution and a person-centred approach to care.

#### B. Promoting Health and Well-Being

Nurses work with persons who have health-care needs or are receiving care to enable them to attain their highest possible level of health and well-being.

Ethical responsibilities:

4. Nurses collaborate with other health-care providers and others to maximize health benefits to persons receiving care and with health-care needs and concerns, recognizing and respecting the knowledge, skills and perspectives of all.

#### C. Promoting and Respecting Informed Decision-Making

Nurses recognize, respect and promote a person's right to be informed and make decisions.

Ethical responsibilities:

5. Nurses advocate for persons receiving care if they believe the health of those persons is being compromised by factors beyond their control, including the decision-making of others.

#### D. Honouring Dignity

Nurses recognize and respect the intrinsic worth of each person.

Ethical responsibilities:

6. Nurses utilize practice standards, best practice guidelines, policies and research to minimize risk and maximize safety, well-being and/or dignity for persons receiving care.
7. Nurses maintain appropriate professional boundaries and ensure their relationships are always for the benefit of the person. They recognize the potential vulnerability of persons receiving care and do not exploit their trust and dependency in a way that might compromise the therapeutic relationship. They do not abuse their relationship for personal or financial gain and do not enter into personal relationships (romantic, sexual or other) with persons receiving care.

#### F. Promoting Justice

Nurses uphold principles of justice by safe guarding human rights, equity and fairness and by promoting the public good.

Ethical responsibilities:

6. Nurses make fair decisions about the allocation of resources under their control based on the needs of persons receiving care. They advocate for fair treatment and fair distribution of resources.
7. Nurses advocate for evidence-informed decision-making in their practice including, for example, evidence for best practices in staffing and assignment, best care for particular health conditions and best approaches to health promotion.

#### G. Being Accountable

Nurses are accountable for their actions and answerable for their practice.

Ethical responsibilities:

3. Nurses practise within the limits of their competence. When aspects of care are beyond their level of competence, they seek additional information or knowledge, report to their supervisor or a competent practitioner and/or request a different work assignment. In the meantime, nurses remain with the person receiving care until another nurse is available.
4. Nurses are accountable for their practice and work together as part of teams. When the acuity, complexity or variability of a person's health condition increases, nurses assist each other (LPNAPEI et al., 2014).

The Committee is reasonably satisfied that you did not meet the Entry Level Competencies for a registered nurse.

#### 1. Clinician

Registered nurses are clinicians who provide safe, competent, ethical, compassionate, and evidence-informed care across the lifespan in response to client needs. Registered nurses integrate knowledge, skills, judgment and professional values from nursing and other diverse sources into their practice.

- 1.2\* Conducts a holistic nursing assessment to collect comprehensive information on client health status. Assessment may include but is not limited to: observation, interview, history taking, interpretation of laboratory data, mental health assessment, physical assessment, including inspection, palpation, auscultation, and percussion.
- 1.4\* Analyzes and interprets data obtained in client assessment to inform ongoing decision-making about client health status and make a diagnosis when appropriate.
- 1.5\* Develops a plan of care using critical inquiry to support professional judgment and reasoned decision-making.
- 1.6\* Evaluates effectiveness of the plan of care and modifies accordingly.
- 1.7\* Anticipates actual and potential health risks and possible unintended outcomes
- 1.8\* Recognizes and responds immediately when client safety is affected.
- 1.9\* Recognizes and responds immediately when client's condition is deteriorating.**

1.13\* Implements therapeutic nursing interventions that contribute to the care and needs of the client.

1.23\* Uses knowledge of the impact of evidence-informed registered nursing practice on client health outcomes.

Registered nurses are professionals who are committed to the health and well-being of clients. **Registered nurses uphold the profession's practice standards and ethics and are accountable to the public and the profession.**

2.3\* Exercises professional judgment when using agency policies and procedures, or when practising in their absence.

2.6\* Establishes and maintains professional boundaries with clients and the health care team.

2.7 Identifies and addresses ethical (moral) issues using ethical reasoning, seeking support when necessary.

### 3. Communicator

Registered nurses are communicators who use a variety of strategies and relevant technologies to create and maintain professional relationships, share information, and foster therapeutic environments.

3.7\* Communicates effectively in complex and rapidly changing situations.

### 4. Collaborator

Registered nurses are collaborators who play an integral role in the health care team partnership.

4.2 Initiates collaboration to support care planning and safe, continuous transitions from one health care facility to another, or to residential, community or home and self-care.

4.3 Determines their own professional and interprofessional role within the team by considering the roles, responsibilities, and the scope of practice of others.

### 5. Coordinator

Registered nurses coordinate point-of-care health service delivery with clients, the health care team, and other sectors to ensure continuous, safe care.

5.1\* Consults with clients and health care team members to make ongoing adjustments required by changes in the availability of services or client health status.

5.2\* Monitors client care to help ensure needed services happen at the right time and in the correct sequence.

5.7 Prepares clients for transitions in care.

## 6. Leader

Registered nurses are leaders who influence and inspire others to achieve optimal health outcomes for all.

6.7 Takes action to support culturally safe practice environments.

6.8 Uses and allocates resources wisely.

6.10 Demonstrates knowledge of the health care system and its impact on client care and professional practice.

6.11\* Adapts practice to meet client care needs within a continually changing health care system.

## 7. Advocate

Registered nurses are advocates who support clients to voice their needs to achieve optimal health outcomes. Registered nurses also support clients who cannot advocate for themselves.

7.6\* Advocates for safe, competent, compassionate and ethical care for clients.

## 9. Scholar

Registered nurses are scholars who demonstrate a lifelong commitment to excellence in practice through critical inquiry, continuous learning, application of evidence to practice, and support of research activities

9.1\* Uses best evidence to make informed decisions.

9.2 Translates knowledge from relevant sources into professional practice.

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

You overwhelmingly failed to meet your professional obligations as an RN when conducting a patient transport of an 8-day old infant from DRHC ED to **Children's** Hospital in Winnipeg.

You were an experienced RN who had recently accepted a position as a Clinical Nurse Educator. This is a position of leadership and influence in which the expectation is that you demonstrate excellent assessment and documentation skills.

A reasonable and prudent registered nurse ought to have:

- a. Exercised appropriate professional boundaries when called at home by a patient's family and asked to conduct a transport;
- b. Ensured the well-established patient transportation protocols were followed;
- c. Assessed the patient yourself prior to conducting an interfacility transport;

- d. Ensured contingency planning and proper safety was maintained when conducting the transport; and
- e. Completed regular reassessment of the patient and reassessed the patient thoroughly after any change in **the patient's health** status.

You were the health care provider responsible to care for what you felt was an unstable infant. Despite this, you conducted minimal assessments and vital signs prior to and during the transportation of the infant. **It is the Committee's position that you overwhelmingly failed the patient and did not meet the expected standards of a Registered Nurse.**

This conduct is a blatant disregard for public safety. The information available to the Committee is that you placed the patient in an unsafe situation. The Committee would expect any registered nurse in this situation to recognize the need to conduct a comprehensive assessment and analysis of the situation prior to accepting transport.

Your actions had the potential to seriously harm the patient as well as the profession. The public expects that RNs critically evaluate their decision making, documentation, communication and assessments. The public also expects RNs to advocate for their patients when they are unable to do so. You disclosed to the Investigator that you felt the patient was clinically unstable for the transport, yet you did not intervene or advocate for the patient. Your inappropriate conduct and inaction undermines the **public's** trust and confidence in the profession. Any breach of this trust damages the general trustworthiness of the profession of nursing.

You have been a registered nurse for over 10 years, with a background in maternal health. A registered nurse with this level of experience and knowledge ought to have known that the decision to transport an 8-day old infant without performing a head-to-toe assessment, minimal monitoring, with limited resources, and no contingency planning created a profound risk to the infant and was grossly unsafe.

Registered nursing is a self-regulated profession governed by the RHPA. In accordance with the RHPA, registered nurses must comply with Practice Directions established for their profession. As such, registered nurses are required to comply with the *Practice Directions: Practice Expectations for RNs* and the *Code of Ethics for Registered Nurses* (2017).

Although this conduct is sufficiently serious to refer to the Inquiry Committee, the Committee is mindful of the fact the Registrant does not have a disciplinary record.

The censure will provide the sufficient regulator force necessary to convey the **Committee's significant dissatisfaction with the Registrant's lack of professional conduct.**

Based on these facts, the Committee directs that the censure be published to serve as a specific deterrence to you, the Registrant, and as a general deterrence for other Registered Nurses.

On these facts, the Committee has ordered the Registrant to pay costs in the amount of \$1000.