



Dr. Medhi HORRI

Council Decision to Restore Licence

Date of Application	June 16, 2018
Date of Decision:	June 16, 2018
Decision:	Restoration

On June 22, 2018 the College restored Dr. Horri's licence to practise following his successful completion of the conditions imposed for reinstatement in the Council decision of June 16, 2017.

Council's resolution was:

Council directs that Dr. Mehdi Horri's licence to practice medicine in the province of Saskatchewan be restored with immediate effect pending Dr. Horri signing an undertaking that is satisfactory to the Registrar which contains the following elements:

- 1) Dr. Horri will have a chaperone present for any clinical attendances with female patients and post appropriate notice(s) to that effect;
- 2) Dr. Horri will practise only in his clinic seeing patients by appointment or on a walk-in basis;
- 3) He will make contact and maintain contact with the Physician Health Program.

The undertaking signed by Dr. Horri stated the following:

I, Dr. Mehdi Horri, undertake to the College of Physicians and Surgeons of Saskatchewan as follows:

- 1) I will not have any in-person professional encounters with female patients in my office practice, except in the presence of a female chaperone;
- 2) I will post a clearly visible sign in my waiting room and each of my examination rooms in my clinic that states that I will not see female patients without the presence of a female chaperone;
- 3) I will limit my medical practice in Saskatchewan to practice in a medical clinic seeing patients by appointment or on a walk-in basis;
- 4) I agree that I will actively participate with the Physician Health Program of the Saskatchewan Medical Association and will follow the recommendations of the Physician Health Program;

- 5) This undertaking shall remain in effect for as long as I remain in practice in the province of Saskatchewan. The terms of this undertaking can only be amended with the consent of the Registrar or the Council.
- 6) I acknowledge that a breach of this undertaking may constitute unbecoming, improper, unprofessional or discreditable conduct.

Council's Reasons are provided below.

IN THE MATTER OF *THE MEDICAL PROFESSION ACT, 1981*, RSS 1980-81, c. M-10.1

AND DR. MEHDI HORRI

APPLICATION FOR RESTORATION OF LICENSE

MEETING OF THE COUNCIL

OF THE COLLEGE OF PHYSICIANS AND SURGEONS OF SASKATCHEWAN

Michelle Ouellette, Q.C. appearing for Dr. Mehdi Horri

Bryan Salte, Q.C. appearing for the College of Physicians and Surgeons of Saskatchewan

June 16, 2018 Saskatoon, Saskatchewan

Position of the Registrar's Office

[1]Dr. Horri lost his license due to a sexual relationship with a patient. The Registrar's Office states that at this time it is not in the public interest to return his license to him. Can we be sure that the public is protected from his previous unprofessional behavior? Is this likely to happen again? The sexual relationship was with a very vulnerable patient. If our goal is public protection then we must not restore his license. Also, we must not take his personal issues in to account when deciding to restore his license, namely the pending divorce and the need for money to help support his children. We must look only at his professional issues over the last year.

[2]Dr. Horri has not been out of practice for at least 9 months as the penalty stated. He has been working in Ontario. His suspension in Ontario was suspended and he was able to return to practice there, after the loss of his license in Saskatchewan. We must consider this in our decision. Penalties have specific and general deterrence. He deserved punishment, but was not punished because he worked in Ontario. Legally he had that right, but was this ethically acceptable? He should still be punished for his behavior and serve a proper 9 month suspension of his license.

[3]We must maintain public confidence in the regulation of our members. The risk of future misconduct is present. There are outstanding issues with regard to his clinical care that are presently under scrutiny. These care issues were brought to our attention by his then Senior Medical Officer, Dr. Louvish. These issues must be considered in his application for restoration.

Arguments for Dr. Horri

[4]His license was revoked 1 year ago. The penalty had conditions that he has met. Loss of license for at least 9 months, obtain a mental health assessment and understanding of his breach of ethics. Our decision should only be based on this. Has he done his part? Yes

[5]We have opinions from both the boundaries course and the independent psychologist Dr. Collins. They both state that there is understanding by Dr Horri with regard to his actions and his risk of repeating this behavior is very low.

[6]He legally practiced in Ontario. He was financially punished by not having a license in Saskatchewan. Our decision was to revoke his license in Saskatchewan, not to say he could not practice in any other jurisdiction. The Council only has jurisdiction in this province.

[7]Any clinical concerns raised by the SMO are in the early stages of investigation. He was under a lot of stress at the time of these cases, but these issues should not be used to prejudice him. The SMO, Dr. Louvish, is welcoming Dr. Horri back to Estevan. At present there is a need for physicians in Estevan. Dr. Horri is agreeable to sign an undertaking restricting him to a lower stress practice out of anesthesia, and limit him to practice in family medicine. By restoring his license today with an undertaking we can protect the public and be fair to Dr. Horri.

Discussion

[8]The penalty that was laid on June 16, 2017 is as follows:

*After considering the information presented to the Council, the Council orders that pursuant to sections 54.01 and 54(1)(a) of **The Medical Profession Act, 1981**, the name of Dr. Mehdi Horri is struck from the Register of the College of Physicians and Surgeons, effective June 16, 2017.*

Dr. Mehdi Horri may not apply to have his name restored to the Register until the following conditions have been met:

- a) a period of nine months has elapsed from the effective date of revocation of his licence; and*
- b) the Council receives a satisfactory report from a professional person, persons or organization chosen by the Council which attests that Dr. Mehdi Horri has undertaken counseling at his expense for boundary breach, has gained insight into the matter and has achieved a measure of rehabilitation which protects the public from risk of future harm from Dr. Mehdi Horri. Such a report may be provided by such other*

persons or organizations that are acceptable to the Registrar of the College of Physicians and Surgeons of Saskatchewan.
c) *Dr. Mehdi Horri may apply to have his name restored any time after condition b) is met, provided that the restoration will take effect only after the expiry of the nine month period referenced in condition a).*

[9]The Council asked itself three questions;

- i) Did Dr. Horri fulfill the conditions that were required of him to apply for restoration of his license?
- ii) How would we deal with his application if there were no outstanding issues?
- iii) Is the public protected?

[10]Dr. Horri's license was revoked for a minimum period of 9 months. He did not apply to have it restored until one year had passed. The Council is concerned that Dr. Horri continued clinical practice in Ontario after his suspension in Saskatchewan. There was much discussion and displeasure regarding Dr. Horri not honoring the "spirit" of the suspension levied on him in Saskatchewan, by working in Ontario. However, we do not have jurisdiction over his Ontario license. Factually, Dr. Horri did not have a license in Saskatchewan for 12 full months and therefore did not work in Saskatchewan for that time period. The Council agrees with Dr. Horri that technically he did fulfill this part of the penalty, but also agrees with the Registrar's Office that he did not fulfill the "spirit and intent" of this part of the penalty.

[11]Dr. Horri attended the Alliance Assessment Center in Houston, Texas, where he was evaluated from November 7 to 9, 2017. This institution is acceptable to the Registrar. Their assessment stated;

“Regarding his risk for future boundary violations with patients, we would place Dr. Horri in the low risk category. While we can never say an individual is at no risk for future concerns, we think Dr. Horri is currently low risk because of his intellectual understanding and belief in the responsibility to maintain boundaries and clearly knowing the reasons why boundaries are of paramount importance to safe patient care. Dr. Horri did not behave in a predatory manner with this individual, and we are not aware of concerns for an enduring pattern of behaviors that disregard boundaries. In addition, Dr. Horri is adequately mortified by this experience which is a powerful deterrent for individuals who are overall rule bound in their psychology. As will be outlined below, his risk can be further reduced by instituting external

accountability and ongoing education regarding boundaries to keep these principles center stage in his mind.” [emphasis added]

[12]Dr. Horri did complete the “Understanding Boundaries and Managing Risks Inherent in the Doctor-Patient Relationship” Course offered by Schulich School of Medicine & Dentistry (Western University) in October 2015, before his license was revoked by Council on June 16, 2017.

[13]Dr. Horri is currently receiving psychotherapy and counselling from Dr. David Smith of Hamilton, Ontario. Dr. Horri also had an earlier assessment by Dr. Collins. Dr. Peter Collins is a forensic psychiatrist whom the Council has used in the past as a reliable source. He states *“In my professional opinion Dr. Horri has achieved the insight that will ensure he will not repeat the behavior that led to this complaint to the College of Physicians and Surgeons of Ontario.”* The Council reserves the right to make our own determination of risk which may not be congruent with Dr. Collins or the Alliance Assessment Center.

[14]Council struggled with the fact that Dr. Horri was still working in Ontario during his suspension in Saskatchewan. The Council agreed that Dr. Horri did in fact meet the obligations of the penalty prior to application for re-instatement.

[15]The Registrar’s office has pointed out there is an ongoing investigation into clinical issues brought to their attention by Dr. Louvish. Council is concerned about the outstanding clinical issues that have been referred to a preliminary inquiry committee. These outstanding issues were brought forward by both counsels. The College claims these should be of enough concern that we should not approve his application for restoration. Dr. Horri’s counsel is asking us not to judge him at this time as there is an ongoing investigation. Again there was much discussion over the clinical concerns raised. There may be some serious clinical issues that arise that the Council will have to deal with, however, at this time we just do not have the information required to afford weight to these potential issues as a risk to the public.

[16]The patient care issues deal with complex hospitalized patients that Dr. Horri was involved with. These issues have still not been dealt with by the College. As there is no outcome or resolution with regard to these issues the Council felt it would prejudice Dr. Horri if these were taken into consideration when considering license restoration. However, the outstanding issues are a concern and the Council felt that the risk to the public can be minimized by applying conditions to Dr. Horri’s license, should it be restored. He admits that these concerns took place when he was under a lot of personal and professional stress. Council considered his hospital practice, including anesthesia, to be of high stress. Council feels that the best way to support Dr. Horri in return to practice would be to limit the clinical

stress he is exposed to. Council will consider limiting his practice to office family medicine. Dr. Horri is also agreeable to this solution. The Council agreed that in the absence of other outstanding issues, a restoration of licensure would be appropriate.

Decision

[17] Council is satisfied that Dr. Horri is a very low risk to repeat this behavior. Council is satisfied, albeit reluctantly, that Dr. Horri has fulfilled all the conditions to apply for license restoration. Council is satisfied that conditions applied to any restoration will minimize risk to the public until further issues regarding Dr. Horri's clinical care are resolved. The decision to accept the application for license restoration was not taken lightly. There was considerable discussion over the sexual misconduct and the clinical issues now under investigation. However, Council feels that the public is protected and has directed that Dr. Horri's license be restored with the following undertaking. The Council agreed that the answer to question iii) is, yes.

Dr Mehdi Horri voluntarily agreed to the following undertaking:

I, Dr. Mehdi Horri, undertake to the College of Physicians and Surgeons of Saskatchewan as follows:

- 1) I will not have any in-person professional encounters with female patients in my office practice, except in the presence of a female chaperone;*
- 2) I will post a clearly visible sign in my waiting room and each of my examination rooms in my clinic that states that I will not see female patients without the presence of a female chaperone;*
- 3) I will limit my medical practice in Saskatchewan to practice in a medical clinic seeing patients by appointment or on a walk-in basis;*
- 4) I agree that I will actively participate with the Physician Health Program of the Saskatchewan Medical Association and will follow the recommendations of the Physician Health Program;*
- 5) This undertaking shall remain in effect for as long as I remain in practice in the province of Saskatchewan. The terms of this undertaking can only be amended with the consent of the Registrar or the Council.*
- 6) I acknowledge that a breach of this undertaking may constitute unbecoming, improper, unprofessional or discreditable conduct.*

Accepted by The Council of The College of Physicians and Surgeons of Saskatchewan: 1 December, 2018

**In the matter of a Hearing before the Council of the College of Physicians and
Surgeons of Saskatchewan and Dr. Mehdi Horri
September 26, 2020**

Summary of the Decision

Dr. Horri appeared before the Council on September 26, 2020. He requested two changes to the undertaking that he signed on June 19, 2018 as a condition of his licence being restored:

- 1) To remove the requirement that he post a clearly visible sign in his waiting room and each of his examination rooms in his clinic that states that he will not see female patients without the presence of a female chaperone.
- 2) To remove the requirement that he limit his medical practice in Saskatchewan to practice in a medical clinic seeing patients by appointment or on a walk-in basis.

Dr. Horri and his legal counsel, Ms. Michelle Ouellette, Q.C. appeared by telephone. Mr. Bryan Salte presented the position of the Registrar's Office.

After hearing the position of both legal counsel, and Dr. Horri, the Council adopted the following motion:

Council declines Dr. Horri's application to amend the terms of the undertaking.

The Position of the Registrar's Office

The position of the Registrar's Office was:

- 1) The Registrar's Office opposed Dr. Horri's request to remove the requirement that signs be posted advising patients that Dr. Horri is required to have a chaperone present when examining female patients. That requirement was imposed by Council to provide protection for patients. Dr. Horri's discomfort with patients being reminded of this requirement is not a justification to remove the requirement of the sign. That is intended to ensure patients are aware of the chaperone requirement and is a public protection measure. The College has disciplined physicians in the past for breaches of an undertaking to have a chaperone present for interactions with female patients. Recently

an Alberta physician was removed from practice for breaching an undertaking given to the Alberta College of Physicians and Surgeons to have a chaperone present for encounters with female patients.

- 2) The Registrar's Office neither supported nor opposed Dr. Horri's request to remove the requirement that he limit his medical practice in Saskatchewan to practice in a medical clinic seeing patients by appointment or on a walk-in basis. The Registrar's office left it to Council's discretion to decide whether that change was appropriate.
- 3) The Registrar's Office submitted that Council should consider the entirety of the information related to Dr. Horri's past unprofessional conduct, and more recent issues of concern when it determined whether the circumstances had sufficiently changed to justify a different decision than the one Council made when it restored Dr. Horri's license to practice medicine in Saskatchewan. That information included:
 - a) Dr. Horri very recently admitted to serious allegations of unprofessional conduct related to his in-hospital practice. In March, 2020 these admissions resulted in a four-month suspension and a reprimand expressing serious concerns about his conduct, his poor judgment, lack of competence, lack of insight and contravention of medical standards.
 - b) There is an ongoing preliminary inquiry committee investigation into possible unprofessional conduct by Dr. Horri. The events are alleged to have occurred in August, 2019. If the information in the complaint is accurate, it casts serious doubt on Dr. Horri's assertion of a change in behaviour, and on his honesty and willingness to abide by the ethical expectations of Saskatchewan physicians.
 - c) Concerns related to Dr. Horri's prescribing, and his unwillingness to cooperate with pharmacists when concerns about his prescribing were drawn to his attention were evidenced by correspondence attached to the Registrar's Office's submission.

Dr. Horri's Position

- 1) Dr. Horri will continue to have female chaperones present for any in-person professional encounters with female patients in his office practice. Dr. Horri stated that the following factors supported removing the requirement of a sign:
 - a) Some patients have complained that the presence of chaperone is intrusive.

- b) The signage throughout the clinic tends to make patients uncomfortable.
 - c) Dr. Horri has complied diligently with each aspect of the undertaking and Council has no reason to doubt that he will continue to do so in the absence of the signage referred to in the Undertaking.
 - d) The signage requirement emanates from a boundary violation in 2010, ten years ago, involving a former patient. Dr. Horri has not committed a boundary violation before or since that time.
 - e) Dr. Horri's license was revoked for a year as a result of that misconduct and he has faced significant personal and professional hardship as a result of his misconduct.
 - f) Dr. Horri has demonstrated that he is at a low risk to reoffend and has not offended in this manner in the intervening years, even in the face of significant personal and professional stressors.
 - g) Dr. Horri has made significant rehabilitation efforts in the area of boundary violations including an assessment, counselling and instruction in professionalism and medical ethics.
 - h) The multidisciplinary assessment demonstrates that he is at low risk to reoffend. If the sign requirement was removed, public protection would be provided by the fact that the undertaking would be available on the College website and Dr. Horri's office staff would be aware of the chaperone requirement.
 - i) The continued requirement of a sign is punitive and reinforces a stigma about Dr. Horri, rather than protecting the public.
- 2) There have been several important changes in the circumstances since Council made its decision requiring Dr. Horri to sign an undertaking limiting his practice to a clinic-based practice:
- a) When Council made its decision, it did so in the context of complaints about Dr. Horri's hospital-based practice that had not been fully investigated. The College elected to only proceed on the four charges to which Dr. Horri admitted guilt. Three of those charges emanated from the spring of 2017. The fourth related to a concern that he inappropriately administered propofol in his clinic. Dr. Horri admitted that

- error immediately and has advised that it was a result of his misunderstanding that he was able to administer propofol given his training in anesthesia.
- b) When the hospital conduct occurred, Dr. Horri was in the midst of difficult custody proceedings which have since been resolved.
 - c) Dr. Sheikh and Dr. Visbal support his return to practice. They identified no concerns about his in-hospital practice.
 - d) Dr. Horri has undertaken education to improve the manner in which he practices, particularly in the team setting. On his own initiative he attended the SAEGIS course entitled Effective Team Interactions as well as the PBI Elevating Civility and Communication in Health Care – Extended Edition, with twelve weeks of follow-up sessions on this topic.
 - e) Continuing the restriction limiting Dr. Horri’s practice to a clinic-based practice would be overly punitive and would not protect the public. Rather it would place an unjustified limit on services available to the public at the Estevan Hospital.
 - f) Dr. Horri has made significant progress since the Council decision limiting his practice. He has complied with all terms of the Undertaking since it was put in place. His professional advisors report that he is remorseful and has insight and understanding into his previous boundary violation. With respect to the 2017 complaints, he has taken steps to educate himself regarding the critical importance of working as a member of a team. He now has a thoughtful approach that will allow him to ensure his behaviour remains appropriate in the future. He has supports in place on which he may rely in the future and has been significantly deterred by his experiences with this College and the Ontario College. All of this represents a significant change in circumstances that supports a variation in Dr. Horri’s conditions.

Points in Issue

A. SIGNAGE REQUIREMENT

Dr. Horri says that he will continue to have female chaperones present for any in-person professional encounters with female patients in his office practice. However, Dr. Horri says some patients have complained that the presence of chaperone is intrusive. He says the signage throughout the clinic tends to make patients uncomfortable.

Council acknowledges that signage and the mandatory chaperone for female patients may make some patients uncomfortable. However that fact, if true, is not the issue. The issue is public protection. Council accepts that without proper safeguards, physicians have broken the signed undertakings of the College in both Saskatchewan and other provinces. Council, in light of other complaints and concerns about Dr. Horri's care, needs this constant reminder to protect the public.

Dr. Horri says that he has complied diligently with each aspect of the undertaking and Council should have no reason to doubt that he will continue to do so in the absence of the signage referred to in the Undertaking.

Council acknowledge that Dr. Horri has complied with this aspect of the undertaking. However, Council accepts the Registrar's Office's argument that Dr. Horri has not demonstrated to the Council that he has reached a threshold change in behaviour to convince Council that he will not reoffend.

Dr. Horri says that the signage requirement emanates from a boundary violation in 2010, ten years ago, involving a former patient. Dr. Horri has not committed a boundary violation before or since that time.

The College is not aware of any allegations of boundary violations since 2010, his recent suspension and reprimand, the current investigation, and the response to the Registrar and pharmacists shown in the correspondence attached to the Registrar's Office's submission, gives Council concern about his current ability to respond appropriately when under stress. Council therefore believes it remains in the public interest to maintain the restriction.

Dr. Horri points out that his license was revoked for a year as a result of the misconduct that resulted in the Undertaking and says he has faced significant personal and professional hardship as a result of his misconduct.

Dr. Horri says he has demonstrated that he is at a low risk to reoffend and has not offended in this manner in the intervening years, even in the face of significant personal and professional stressors.

He says he has made significant rehabilitation efforts in the area of boundary violations including an assessment, counselling and instruction in professionalism and medical ethics.

In view of recent concerns about lack of insight, refusal to comply with guideline of a consultant. Council was not confident that Dr. Horri has demonstrated a low risk to reoffend and by maintaining the signage this will reinforce to him the need to continue to comply with the direction on appropriate boundaries.

Dr. Horri says the multidisciplinary assessment demonstrates that he is at low risk to reoffend. If the sign requirement was removed, public protection would be provided by the fact that the undertaking would be available on the College website and Dr. Horri's office staff would be aware of the chaperone requirement.

He says the continued requirement of a sign is punitive and reinforces a stigma about Dr. Horri, rather than protecting the public.

Council is not convinced that Dr. Horri is at a low risk to reoffend in view of current concerns and evidence of his negative interaction with the pharmacist and deputy registrar. Again, the signage is a measure for public protection and should not be construed as punitive.

B. CLINIC PRACTICE REQUIREMENT

Dr. Horri says there have been several important changes in the circumstances since Council made its decision requiring Dr. Horri to sign an undertaking limiting his practice to a clinic-based practice:

- a) When Council made its decision, it did so in the context of complaints about Dr. Horri's hospital-based practice that had not been fully investigated. The College elected to only proceed on the four charges to which Dr. Horri admitted guilt. Three of those charges emanated from the spring of 2017. The fourth related to a concern that he inappropriately administered propofol in his clinic. Dr. Horri admitted that error immediately and has advised that it was a result of his misunderstanding that he was able to administer propofol given his training in anesthesia.
- b) When the hospital conduct occurred, Dr. Horri was in the midst of difficult custody proceedings which have since been resolved.

- c) Dr. Sheikh and Dr. Visbal support his return to practice. They identified no concerns about his in-hospital practice.
- d) Dr. Horri has undertaken education to improve the manner in which he practices, particularly in the team setting. On his own initiative he attended the SAEGIS course entitled Effective Team Interactions as well as the PBI Elevating Civility and Communication in Health Care – Extended Edition, with twelve weeks of follow-up sessions on this topic.
- e) Continuing the restriction limiting Dr. Horri’s practice to a clinic-based practice would be overly punitive and would not protect the public. Rather it would place an unjustified limit on services available to the public at the Estevan hospital.
- f) Dr. Horri has made significant progress since the Council decision limiting his practice. He has complied with all terms of the Undertaking since it was put in place. His professional advisors report that he is remorseful and has insight and understanding into his previous boundary violation. With respect to the 2017 complaints, he has taken steps to educate himself regarding the critical importance of working as a member of a team. He now has a thoughtful approach that will allow him to ensure his behaviour remains appropriate in the future. He has supports in place on which he may rely in the future and has been significantly deterred by his experiences with this College and the Ontario College. All of this represents a significant change in circumstances that supports a variation in Dr. Horri’s conditions.

The decision to limit practice to the clinic is not punitive, rather it is for public protection. The Council took some consideration about this request. The onus is on Dr. Horri to demonstrate a change of circumstances sufficient to lift the restriction.

In the opinion of the Council, Dr. Horri has not demonstrated a threshold change in practice to convince the Council that he will be safe to practice in the Hospital setting. Again, the recent discipline issues and documentation provided by the Registrar’s Office cause the Council to have considerable doubt that there has been a threshold change in behaviour and professionalism.

**Accepted by the Council of the College of Physicians & Surgeons of Saskatchewan:
20 November, 2020**