

COLLEGE OF PHYSICIANS & SURGEONS OF ALBERTA

IN THE MATTER OF
A HEARING UNDER THE *HEALTH PROFESSIONS ACT*,
RSA 2000, c H-7

AND IN THE MATTER OF A HEARING REGARDING
THE CONDUCT OF DR. NEIL SKJODT

**DECISION OF THE HEARING TRIBUNAL OF
THE COLLEGE OF PHYSICIANS
& SURGEONS OF ALBERTA
MARCH 24, 2025**

I. INTRODUCTION

1. The Hearing Tribunal held a hearing into the conduct of Dr. Neil Skjodt on February 20, 2025. The members of the Hearing Tribunal were:

Ms. Sarita Dighe-Bramwell as Chair (and public member);
Dr. Don Yee;
Dr. John Pasternak;
Ms. Barbara Rocchio (public member).

Also present were:

Mr. Craig Boyer, legal counsel for the Complaints Director;
Dr. Neil Skjodt;
Mr. James Heelan, legal counsel for Dr. Skjodt.

Ms. Mary Marshall acted as independent legal counsel for the Hearing Tribunal.

II. PRELIMINARY MATTERS

2. This is a continuation of a hearing that commenced on April 7, 2022. Neither party objected to the composition of the Hearing Tribunal or its jurisdiction to proceed with the hearing. There were no matters of a preliminary nature.
3. The hearing was open to the public pursuant to section 78 of the *Health Professions Act*, RSA 2000, c. H-7 ("HPA"). There was no application to close the hearing. Counsel for the Complaints Director suggested that the complainants be referred to by their initials, and the hearing proceeded on that basis.

III. CHARGES

4. The Amended Amended Notice of Hearing dated January 2024 ("Notice of Hearing") listed the following allegations (the "Allegations"):
 1. You did demonstrate a lack of skill or judgment in the provision of professional services to your patient, ■■■, on May 13 and November 4, 2015 in that you did fail to provide adequate information to explain and justify to your patient prior to offering screening which would include a PAP test and the manner in which you touched your patient's inner thigh so that your patient was left feeling vulnerable and her dignity and autonomy was not respected.
 2. You did demonstrate a lack of skill or judgment in the provision of professional services to your patient, ■■■, on February 28, 2012 in that you did fail to provide adequate information to explain and justify to

your patient prior to you undertaking a breast, pelvic and rectal examination so that your patient was left feeling vulnerable and her dignity and autonomy was not respected.

3. You did demonstrate a lack of skill or judgment in the provision of professional services to your patient, ■■■, on March 9, 2010 in that you did fail to provide adequate information to explain and justify to your patient prior to you undertaking an exposed chest and exposed flank examination so that your patient was left feeling vulnerable and her dignity and autonomy was not respected.

IV. EVIDENCE

5. The following Exhibits were entered into evidence during the hearing:

Exhibit 2: Agreed Exhibit Book

Tab 1: Amended Notice of Hearing referred to Hearings Director on December 19, 2023

Tab 2: Amended Amended Notice of Hearing dated January 2024

■■■ COMPLAINT

Tab 3: Complaint by ■■■ dated December 3, 2015

Tab 4: Response by Dr. Neil Skjodt dated January 6, 2016

Tab 5: Dr. Skjodt's chart for ■■■

Tab 6: Expert opinion from Dr. ■■■ dated July 4, 2017

Tab 7: Expert opinion from Dr. ■■■ dated July 18, 2017

Tab 8: Addendum report from Dr. ■■■ dated August 28, 2017

Tab 9: Second Addendum from Dr. ■■■ dated September 25, 2017

■■■ COMPLAINT

Tab 10: Complaint by ■■■ dated March 11, 2018

Tab 11: Response by Dr. Skjodt dated May 30, 2018

Tab 12: Dr. Skjodt's Chart for ■■■

Tab 13: Expert opinion from Dr. ■■■ (undated) received in January 2019

Tab 14: Addendum report from Dr. ■■■ (undated) received in March 2019

■■■ COMPLAINT

- Tab 15:** Complaint by [REDACTED] dated July 11, 2018
- Tab 16:** Response by Dr. Skjodt to [REDACTED] complaint dated December 3, 2018
- Tab 17:** Further response by Dr. Skjodt dated January 4, 2019
- Tab 18:** Dr. Skjodt's Chart for [REDACTED]
- Tab 19:** Expert Opinion from Dr. [REDACTED] dated June 10, 2019

GENERAL DOCUMENTS

- Tab 20:** Undertaking by Dr. Skjodt to see only male patients dated February 19, 2016
- Tab 21:** Canadian Medical Association Code of Ethics - 2003
- Exhibit 3:** Fully Signed Admission and Joint Submission Agreement dated October 4, 2024
- Exhibit 4:** Victim Impact Statement of [REDACTED]

6. Counsel for the Complaints Director also filed the following materials:
- a. Brief of Law Regarding Joint Submissions dated February 19, 2025;
 - b. Case Law:
 - i. *Krog (Re)*, 2022 CanLII 83358 (AB CPSDC);
 - ii. *Malik (Re)*, 2022 CanLII 72069 (AB CPSDC);
 - iii. *Ovueni (Re)*, 2022 CanLII 16852 (AB CPSDC);
 - iv. *Silverman (Re)*, 2021 CanLII 73128 (AB CPSDC);
 - v. *Bradley v. Ontario College of Teachers*, 2021 ONSC 2303;
 - vi. *Imtiaz (Re)*, 2020 CanLII 65430 (AB CPSDC);
 - vii. *Ontario (College of Physicians and Surgeons of Ontario) v Bélanger*, 2018 ONCPSD 18;
 - viii. *Alshawabkeh (Re)*, 2017 CanLII 85387 (AB CPSDC);
 - ix. *Ontario (College of Physicians and Surgeons of Ontario) v Zadra*, 2017 ONCPSD 24;
 - x. *Ontario (College of Physicians and Surgeons of Ontario) v. MacNeil*, 2017 ONCPSD 3;
 - xi. *R. v. Anthony-Cook*, 2016 SCC 43;
 - xii. *Jaswal v. Newfoundland Medical Board*, [1996] N.J. No. 50; and

- xiii. *Prasad v. Canada (Minister of Employment and Immigration)*,
[1989] 1 S.C.R. 560.

V. SUBMISSIONS REGARDING THE ALLEGATIONS

Submissions on Behalf of the Complaints Director

7. Counsel for the Complaints Director thanked counsel for Dr. Skjodt for his work on reaching an agreement. This matter involves a number of allegations by different patients against Dr. Skjodt. An application was brought to dismiss the allegations for delay in April 2022. The application was dismissed by the Hearing Tribunal, and then Dr. Skjodt appealed to Council. Council upheld the dismissal, and the decision was appealed to the Court of Appeal. The Court of Appeal dismissed the appeal in June 2023, and this matter was then scheduled for a hearing.
8. The agreement that was reached was an admission of a general allegation in relation to each patient that Dr. Skjodt had failed to provide adequate information to explain and justify to the patient why he was offering a certain screen or to the manner of his physical examination of the patient so that the patients were left feeling vulnerable and that their dignity and autonomy had not been respected.
9. Mr. Boyer reviewed the documents in the Exhibit Book and submitted that the applicable provisions are sections 1, 2 and 22 of the CMA Code of Ethics that was in force from about 2004 to 2018. All of the patient encounters were prior to 2018.

Submissions by Counsel for Dr. Skjodt

10. Counsel for Dr. Skjodt submitted that it is clear that Dr. Skjodt's examinations were appropriate, and that he failed to provide adequate information to explain and justify the exams that were offered and undertaken by him. Mr. Heelan reviewed the expert reports prepared by Dr. [REDACTED], Dr. [REDACTED], and Dr. [REDACTED], and submitted that appropriate clinical examinations were done in each of these cases. However, this is also a situation where three women were left feeling vulnerable and that their dignity and autonomy were not respected.

VI. DECISION AND REASONS REGARDING ALLEGATIONS

11. The Hearing Tribunal considered Dr. Skjodt's admission under section 70 of the HPA. An admission of unprofessional conduct on the part of the physician may only be acted upon if it is acceptable to the Hearing Tribunal. The admission was supported by material in the Exhibit Book, and the admission was acceptable to the Hearing Tribunal.
12. The Hearing Tribunal found that the proven Allegations constituted unprofessional conduct under section 1(1)(pp)(ii) of the HPA as follows:

1(1) *In this Act,*

(pp) *"unprofessional conduct" means one or more of the following, whether or not it is disgraceful or dishonourable:*

- (i) displaying a lack of knowledge of or lack of skill or judgment in the provision of professional services;*
- (ii) contravention of this Act, a code of ethics or standards of practice; and*

13. Dr. Skjodt admitted the Allegations and that he demonstrated a lack of skill or judgment in the provision of professional services. The Hearing Tribunal also found that Dr. Skjodt's conduct contravened sections 1, 2 and 22 of the Canadian Medical Association Code of Ethics as follows:

- 1. Consider first the well-being of the patient.*
- 2. Practise the profession of medicine in a manner that treats the patient with dignity and as a person worthy of respect.*
- 22. Make every reasonable effort to communicate with your patients in such a way that information exchanged is understood.*

14. When Dr. Skjodt failed to provide adequate information, explanations and justifications, he failed to treat his patients with dignity and as persons worthy of respect. He also failed to communicate in such a way that information exchanged was understood.

15. Given this finding, the Hearing Tribunal invited the parties to make submissions on sanction.

VII. SUBMISSIONS ON SANCTION

16. Counsel for the Complaints Director raised a preliminary issue regarding ■■■'s Impact Statement. ■■■ requested that she be allowed to read her Impact Statement to the Hearing Tribunal. Counsel for Dr. Skjodt had no objection to the written statement going to the Hearing Tribunal, but he did object to it being read by the patient. This is a procedural issue, and there is nothing in the HPA that deals with impact statements and this type of conduct. The Hearing Tribunal is the master of its own procedure, and section 79(5) states that the Hearing Tribunal is not bound by the rules of evidence when conducting a hearing. If the Hearing Tribunal allows ■■■ to read her statement, then the hearing should go in camera so that her anonymity is maintained.

17. Counsel for Dr. Skjodt submitted that victim impact statements are used in criminal law to assist the panel in determining penalty. In the situation before this Hearing Tribunal, there is an agreement between the parties as to

penalty, and ■■■'s Impact Statement will have very little utility. It is being read by ■■■ without the benefit of Dr. Skjodt being able to cross-examine on that, and there is the concern that more will be said.

18. Following consideration of submissions, the Hearing Tribunal directed that ■■■ would be permitted to read her written Impact Statement in camera.

Submissions on Behalf of the Complaints Director

19. Counsel for the Complaints Director highlighted a few of the *Jaswal* factors and submitted that there is credit due to Dr. Skjodt for making the admissions and coming to an agreement. Conservatively there would have been between 10 and 15 witnesses if this had been a contested hearing, and it would have taken a week. As indicated by ■■■ in her Impact Statement, this has been a stressful experience for her, and cross-examination in a contested hearing would have added to that. The patients did not have to go through the additional stress of testifying and being cross-examined, and that is a mitigating factor.
20. Dr. Skjodt is a senior physician, and that is an aggravating factor. This is conduct that should have been apparent to him, being a seasoned and experienced physician. The complaints and ■■■'s Impact Statement show how Dr. Skjodt's conduct has affected his patients. The profession and society as a whole is growing in its knowledge and understanding of trauma, and how physicians need to be more trauma-informed and trauma aware when they are dealing with patients. A clinically appropriate examination may be upsetting and traumatizing to a patient if the physician does not have that awareness.
21. Counsel for the Complaints Director referred to the following six CPSA discipline cases that provide some guidance for the Hearing Tribunal. The decision involving Dr. Alshawabkeh concerned findings of unprofessional conduct for poor charting, and poor prescribing. The Hearing Tribunal ordered remedial courses and payment of some of the costs. The decision involving Dr. Imtiaz dealt with inappropriate comments to patients and a failure to have a chaperone present, along with poor recordkeeping. There was a period of four months' suspension to be served out of a total of six ordered and the requirement to pay a portion of the costs. Dr. Silverman, a matter from 2021, had inappropriate access to Netcare and interfered with and criticized the care of a treating physician. There was a suspension of three months reduced to one if the physician provided an apology, and there was also a requirement to complete and pass the CPEP PROBE course and to pay 75 percent of the costs. Dr. Krog, a decision from 2022, involved inappropriate text-messaging with a patient. There was a suspension of three months, of which two were to be served, a requirement to take counselling and to be monitored by the physician health monitoring program of the CPSA, and the requirement to pay two-thirds of the costs. The decision concerning Dr. Malik involved inappropriate sexual language with four female

health care professionals. He was suspended for a period of six months and required to pay two-thirds of the costs. Dr. Ovueni, a decision from 2022, involved a hug and an air kiss of a medical office assistant without consent. The order included a three-month suspension, of which two months was to be served, and two and a half held in abeyance. Dr. Ovueni was also ordered to complete and pass the CPEP PROBE course, pay a fine, and pay costs of the hearing.

22. Counsel for the Complaints Director submitted that there is a need to send a message to the profession about the importance of respecting the dignity and autonomy of patients and ensuring that they understand the nature and extent of examinations, especially if they are sensitive examinations, and how patients can be offended and traumatized when that is not done. Mr. Boyer reviewed the proposed sanctions in the Joint Submission and submitted that the proposed sanction is a balance of both deterrence and remediation.

Submissions on Behalf of Dr. Skjodt

23. Counsel for Dr. Skjodt submitted that the benefit of a Joint Submission is certainty for the parties. It allows the College to avoid a protracted hearing process. The Hearing Tribunal needs to be careful when considering the Impact Statement because it has not been tested through cross-examination. However, Dr. Skjodt has found a course that is being offered by Alberta Health Services called the Trauma Training Initiative, and he plans to complete that coursework. Dr. Skjodt's admission relates to informed consent. It is not the case of an improperly sexualized exam, an improper exam, or inappropriate touching like some of the cases referenced by counsel for the Complaints Director. There is no admission of sexualized language used by Dr. Skjodt. There is a failure of informed consent, which left patients feeling vulnerable.
24. Mr. Heelan addressed *Jaswal* factor number seven, which is whether the physician has already suffered serious financial or other penalties as a result of the allegations having been made. Dr. Skjodt has been operating under an undertaking since 2016 that restricts his practice to seeing male patients. Mr. Heelan reviewed the terms of the proposed order and noted that the dates, as provided in the Joint Submission, need to be updated.

Reply on Behalf of the Complaints Director

25. Counsel for the Complaints Director submitted that there is agreement that there should be a year for Dr. Skjodt to take and pass the CPEP PROBE Course. If he fails to pass, he can start with Dr. [REDACTED] by March 1, 2026, and finish by the end of June 2026.

Questions from the Hearing Tribunal

26. In response to questions from the Hearing Tribunal, the parties clarified the terms of the proposed sanction, including the revised dates. Mr. Heelan submitted that Dr. Skjodt's undertaking will be lifted when he passes the CPEP PROBE Course, or when he completes his work with Dr. [REDACTED]. Once the undertaking is lifted, Dr. Skjodt would not be obliged by way of an undertaking or practice condition to have a chaperone. However, his practice would be to have a chaperone. Currently Dr. Skjodt's practice is entirely virtual.
27. Mr. Heelan submitted that this is not a case of a sexualized exam, and that there is no obligation that should be imposed upon Dr. Skjodt for a chaperone or further monitoring if he resumes seeing female patients. This is a case of a failure to obtain appropriate and complete informed consent in conducting an exam where patients were left feeling vulnerable.
28. Mr. Boyer submitted that his understanding is that it is not possible to retry the CPEP PROBE Course. Regarding the undertaking being lifted, if Dr. Skjodt passes the CPEP PROBE course, or completes the one-on-one with Dr. [REDACTED] and Dr. [REDACTED] is satisfied that Dr. Skjodt is okay to practice without a chaperone, then that would be for the Complaints Director and Dr. Skjodt to discuss. If there is no agreement, the Hearing Tribunal retains jurisdiction to deal with the issue. It would not be appropriate to add a condition that there would be monitoring or there would be a chaperone because we do not have the outcome from the process that is in the order.
29. The costs to date are approximately \$120,000.

VIII. DECISION AND REASONS REGARDING SANCTION

30. After adjourning to consider the submissions from the parties and the answers to its questions, the Hearing Tribunal determined that the proposed sanction order was appropriate considering the relevant factors in *Jaswal*. The Hearing Tribunal was also mindful that significant deference should be given to joint submissions. The Hearing Tribunal accepted the proposed penalty set out in the Joint Submission as clarified and amended by the parties.
31. The Hearing Tribunal agrees with submissions on behalf of Dr. Skjodt that some of the cases referenced for comparison purposes by counsel for the Complaints Director can be distinguished on the basis that the Allegations at issue here do not deal with an improperly sexualized exam, an improper exam, or inappropriate touching. Instead, the Allegations deal with a failure to obtain informed consent. The Hearing Tribunal accepted the Joint Submission as appropriate and was satisfied that the proposed sanctions are in proportion to Dr. Skjodt's admitted conduct. They will also serve as a deterrent to Dr. Skjodt and the profession at large, and protect the public interest. The proposed sanctions also provide for rehabilitation and

remediation through the CPEP PROBE course, or an ethical remediation course with Dr. [REDACTED].

32. In reviewing the proposed sanction, the Hearing Tribunal considered the need to promote deterrence by imposing a penalty that reflects the seriousness of the unprofessional conduct. A four-month suspension with two months held in abeyance is a severe sanction and sign to both Albertans and the medical profession that similar behavior will not be tolerated.
33. One of the *Jaswal* factors that is considered by the Hearing Tribunal when assessing the penalty is the impact on the patient. While counsel for the Complaints Director notes that Dr. Skjodt's admission to the Allegations helped to avoid a full and potentially lengthy hearing and that this was a mitigating factor, his unprofessional conduct brought significant harm to the complainants. [REDACTED]'s Impact Statement described the lasting effects of the lack of trust and trauma. The Hearing Tribunal finds that the Impact Statement was helpful when considering the *Jaswal* factors and appreciates that [REDACTED] provided the Impact Statement. There was a significant impact on [REDACTED], and it is important for practitioners to be trauma-informed when caring for patients. Dr. Skjodt recognized this and is participating in a course on trauma-informed care.
34. It is appropriate that Dr. Skjodt be responsible for a portion of the costs, which will be over \$120,000. The Joint Submission states that he will be responsible for less than 50% of the costs, and this amount is reasonable as it accounts for the mitigating factors.

IX. ORDERS

35. The Hearing Tribunal hereby orders pursuant to section 82 of the HPA:
 - a. Dr. Skjodt's practice permit shall be suspended for four months, of which two months shall be considered served recognizing the Undertaking to see male patients having been in effect since 2016, and the remaining two months shall be served starting on a date acceptable to the Complaints Director but being no later than 60 days after the date of the Hearing Tribunal's written decision.
 - b. Dr. Skjodt shall, at his own expense, undertake and unconditionally pass the CPEP PROBE course (<https://www.cpepdoc.org/cpep-courses/probe-ethics-boundaries-program-canada/>) by February 28, 2026.
 - c. If Dr. Skjodt obtains an unconditional pass from the CPEP PROBE course, the February 19, 2016, Undertaking shall be lifted, and Dr. Skjodt may again see female patients.
 - d. If Dr. Skjodt fails to obtain an unconditional pass on the CPEP PROBE course, he shall then undertake, at his own expense, a one-on-one ethical remediation course with Dr. [REDACTED], medical ethicist,

which shall commence no later than March 1, 2026, and be completed no later than June 30, 2026. If Dr. [REDACTED] cannot accommodate these deadlines, then the commencement and completion dates are to be satisfactory to the Complaints Director.

- e. Dr. [REDACTED] shall be provided with a copy of the Hearing Tribunal decision in this matter, the final report from CPEP and the Exhibits in this matter.
- f. The Complaints Director shall be given a final report by Dr. [REDACTED] regarding the ethical remediation undertaken by Dr. Skjodt, and the Complaints Director may determine whether Dr. Skjodt is relieved of his February 19, 2016, Undertaking.
- g. The Hearing Tribunal shall retain jurisdiction to determine any issues arising from its Order, including the nature, scope or duration of any practice condition.
- h. Dr. Skjodt shall be responsible for a portion of the costs of the investigations and the hearing set at \$50,000.00 payable by equal monthly installments over 24 months to start two months after the completion of the two months of suspension to be served.

Signed on behalf of the Hearing Tribunal:

X 

Ms. Sarita Dighe-Bramwell

Chair

Signed by: sdigheb

Dated this 24th day of March, 2025.