



Ontario College
of Pharmacists

Putting patients first since 1871



2013 ANNUAL REPORT

Thank you for reading the Ontario College of Pharmacists' (OCP) 2013 Annual Report. As you will see in the coming pages, this report includes audited financial information and statistics on pharmacists, pharmacy technicians, pharmacies and OCP programs for the 2013 calendar year. The College publishes its annual report each March.

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ABOUT THE ONTARIO COLLEGE OF PHARMACISTS

The Ontario College of Pharmacists, incorporated in 1871, is the registering and regulating body for the profession of pharmacy in Ontario. The College's mandate is to serve and protect the public and hold Ontario's pharmacists and pharmacy technicians accountable to the established legislation, standards of practice, code of ethics, and policies and guidelines relevant to pharmacy practice. The College also ensures that pharmacies within the province meet required standards for operation and are accredited.

MISSION STATEMENT:

The Ontario College of Pharmacists regulates pharmacy to ensure that the public receives quality services and care.

VISION:

Lead the advancement of pharmacy to optimize health and wellness through patient-centred care.

VALUES:

- Transparency
- Accountability
- Excellence



STRATEGIC DIRECTIONS 2012 – 2015:

1. Optimize the evolving scope of practice of members for the purpose of achieving positive health outcomes.
2. Promote the use and integration of technology and innovation to improve the quality and safety of patient care, and to achieve operational efficiency.
3. Foster professional collaboration to achieve co-ordinated patient-centred care and promote health and wellness.
4. Build and enhance relationships with key stakeholders, including the public, the government, members, and other healthcare professionals.
5. Apply continuous quality improvement and fiscal responsibility in the fulfilment of the mission.

LEGAL POWERS & AUTHORITY

As a regulated healthcare profession, pharmacy is governed through a number of provincial and federal pieces of legislation. The legal powers and duties of the College are set out in the *Regulated Health Professions Act*, the *Health Professions Procedural Code*, the *Pharmacy Act* and the *Drug and Pharmacies Regulation Act*.



COLLEGE COUNCIL

The College is overseen by a Council of 15 elected pharmacists (two from hospital), two elected pharmacy technicians (one from hospital), between 9 and 16 government-appointed members of the public, and the Deans of the province's two schools of pharmacy. Council's primary goal is to ensure that the interests of the public are protected and maintained. Council is the policy-making group and functions as a board of directors to provide leadership and guidance for the profession in delivering pharmacy services to the public.

COMMITTEES

Statutory and standing committees support the work of the College Council. The committees are made up of elected and government-appointed members from Council and non-council committee members.

Statutory committees are required through legislation and include the:

- Accreditation Committee
- Discipline Committee
- Executive Committee
- Fitness to Practise Committee
- Inquiries, Complaints & Reports Committee
- Patient Relations Committee
- Quality Assurance Committee
- Registration Committee

Standing committees are created by Council through by-laws and include the:

- Communications Committee
- Drug Preparation Premises Committee
- Finance and Audit Committee
- Professional Practice Committee

Council's primary goal is to ensure that the interests of the public are protected and maintained.

MESSAGE FROM REGISTRAR AND PRESIDENT

On behalf of the Ontario College of Pharmacists' Council and staff, it is our pleasure to present the 2013 Annual Report. This report provides highlights of achievements, and celebrates the milestones and work of the College in 2013.

The work of the College was largely influenced by events in the early spring of 2013 as we responded to an incident of alleged under-dosing of chemotherapy medications to patients in four hospitals in Ontario and one in New Brunswick. The College collaborated with the Ministry of Health and Long-Term Care, Health Canada, Cancer Care Ontario, the Ontario Hospital Association and other stakeholders to respond to the incident and take steps toward addressing the identified gap in regulatory oversight. We worked quickly with the ministry to draft regulations and enabling by-laws that gave us the regulatory authority to inspect Drug Preparation Premises (DPP) where pharmacists and pharmacy technicians practice — a major milestone toward the safe and effective delivery of drugs in Ontario.

As we look ahead into 2014, the College will continue to focus on initiatives and activities informed by the alleged under-dosing incident. Dr. Jake Theissen's independent review of the incident provided a number of recommendations for the College and the National Association of Pharmacy Regulatory Authorities (NAPRA) — including for the College to have regulatory oversight of hospital pharmacies in Ontario. In advance of this, we have begun working on establishing the framework necessary — including the development of hospital pharmacy inspection criteria — to take on this additional authority.

Another significant initiative at the College — the transparency project — examines information-sharing practices of the health regulatory colleges in Ontario. The project will determine how regulators might make more information available to help members of the public make informed decisions about choosing a regulated health professional. The initiative will also help enhance accountability and better inform any evaluation of the

performance of self-regulation. The transparency project will continue to grow and evolve over the coming year and we look forward to finding ways to help the public make the best healthcare decisions possible.

We are also tremendously proud of the excellent increase in the number of pharmacies that participated in the Universal Influenza Immunization Program (UIIP) for the 2013/2014 flu season. Pharmacists received the authority to administer injections under the UIIP as part of their expanded scope of practice last year. The number of pharmacies participating in the program rose significantly in 2013 with nearly 60 per cent of community pharmacists having successfully completed and registered their required training with the College. By the end of 2013, Ontario pharmacists in approximately 2,000 participating pharmacies administered nearly 750,000 doses of the influenza vaccine — well done!

This has been an eventful year for the College and could not have been accomplished without the effort and support of Council and staff. We thank each of you for your commitment to improving pharmacy practice in Ontario and look forward to continued collaboration with pharmacists, pharmacy technicians, other healthcare professionals, and our many other stakeholders in the coming year.

Thank you for taking the time to read this year's Annual Report. We hope you enjoy!

Sincerely,



Marshall Moleschi
Registrar



Tracey Phillips
President (2013 – 2014)

MEMBERS OF COUNCIL

SEPTEMBER 2013 - AUGUST 2014



Members of Council

SEPTEMBER 2013 - AUGUST 2014



- H** Hospital

- T** Pharmacy Technician

- TH** Hospital Pharmacy Technician

Districts are based on the first letter of the postal code.

Public Members



Cora dela Cruz
Toronto



Babek Ebrahimzadeh
Woodbridge



David Hoff
Oakville



Javid Khan
Markham



Lew Lederman
Ottawa



William Cornet
Ottawa
Term expired Jan. 3, 2014



Norman MacDonald
Toronto



Aladdin Mohaghegh
Toronto



Gitu Parikh
Toronto



Shahid Rashdi
Mississauga



Joy Sommerfreund
London



Elected Members

District **H**



Christine Donaldson
Windsor



Regis Vaillancourt
Ottawa

District **K**



Mark Scanlon
VICE-PRESIDENT
Peterborough



Esmail Merani
Carleton Place

District **L**



Jillian Grocholsky
Fonthill



Farid Wassef
Stouffville



Michael Nashat
Brampton

District **M**



Laura Weyland
Toronto



Tracey Phillips
PRESIDENT
Toronto



Don Organ
Toronto

District **N**



Chris Leung
Windsor



Bonnie Hauser
Dunville



Ken Potvin
Waterloo

District **P**



Rachelle Rocha
Espanola



Jon MacDonald
Sault Ste. Marie

District **TH/T**



Goran Petrovic (TH)
Kitchener



Tracy Wills (T)
Windsor

Faculty of Pharmacy



Heather Boon, Interim Dean
Leslie Dan Faculty of Pharmacy
University of Toronto



David Edwards, Hallman Director
School of Pharmacy
University of Waterloo

COMMITTEES OF THE COLLEGE

AS OF DEC. 31, 2013

EXECUTIVE*

The Executive Committee deals with matters requiring immediate attention between Council meetings, has a significant co-ordination function and receives and studies reports from committees before forwarding them to Council for action.

Elected Members:

Tracey Phillips – President & Chair
Mark Scanlon – Vice-President
Chris Leung – Past President
Esmail Merani

Public Members:

David Hoff
Aladdin Mohaghegh
Joy Sommerfreund

Staff Resource:

Marshall Moleschi

ACCREDITATION*

The Accreditation Committee considers matters relating to the operation of community pharmacies in Ontario. These matters include operational requirements, ownership, supervision and the distribution of drugs in the pharmacy. The Committee also reviews issues relating to pharmacy inspections conducted by field staff where the pharmacy has failed to comply with the requirements.

Elected Members:

Bonnie Hauser
Michael Nashat
Regis Vaillancourt

Public Members:

David Hoff (Chair)
Joy Sommerfreund

NCCM:

Timothy Brady
Tracy Wiersema

Staff Resource:

Tina Perlman

COMMUNICATIONS

The Communications Committee provides direction and guidance to Council, through the Executive Committee, on all matters supporting public education and outreach.

Elected Members:

Jon MacDonald
Goran Petrovic
Ken Potvin

Public Members:

Javaid Khan
Joy Sommerfreund (Chair)

NCCM:

Gerry Cook

Staff Resource:

Lori DeCou

DISCIPLINE*

The Discipline Committee, through selected panels, hears allegations of professional misconduct and proprietary misconduct as referred by the Inquiries, Complaints and Reports Committee (ICRC). Upon finding a member guilty of professional or proprietary misconduct, the panel has the authority to revoke, suspend or limit a member's registration, impose a fine or reprimand the member.

Elected Members:

Heather Boon
Jillian Grocholsky
Chris Leung

Don Organ
Goran Petrovic
Rachelle Rocha
Mark Scanlon
Farid Wassef
Laura Weyland

Public Members:

Bob Ebrahimzadeh (Chair)
Javaid Khan
Lew Lederman

Norman MacDonald
Aladdin Mohaghegh
Gitu Parikh
Shahid Rashdi

NCCM:

Cheryl Bielicz
Larry Boggio
Erik Botines
Steve Clement
Debbie Fung

Jim Gay

Andrew Hanna
Mike Hannalah
Tony Huynh

Doris Nessim
Akhil Pandit Pautra
Jeannette Schindler
Connie Sellors

Dan Stringer
Tatjana Sunjic
David Windross
Babek Zandi

Staff Resource:

Maryann Gemus

DRUG PREPARATION PREMISES

The Drug Preparation Premises Committee considers matters relating to the operation of drug preparation premises in Ontario.

Elected Members:

Bonnie Hauser
Michael Nashat

Regis Vaillancourt

Public Members:

David Hoff (Chair)
Joy Sommerfreund

NCCM:

Timothy Brady
Tracy Wiersema

Staff Resource:

Judy Chong

FINANCE & AUDIT

The Finance Committee oversees the financial and physical assets of the College. It sets and recommends to Council the annual operating and capital budget.

Elected Members:

Bonnie Hauser (Chair)
Esmail Merani
Mark Scanlon

Public Members:

David Hoff
Gitu Parikh

Staff Resource:

Connie Campbell

FITNESS TO PRACTICE*

The Fitness to Practise Committee considers incapacity matters referred by the Inquiries, Complaints and Reports Committee.

Elected Members:

Chris Leung (Chair)
Regis Vaillancourt

Public Members:

Cora dela Cruz
Shahid Rashdi
Joy Sommerfreund

NCCM:

Barb DeAngelis

Staff Resource:

Maryann Gemus

INQUIRIES, COMPLAINTS AND REPORTS (ICRC)*

ICRC is the screening committee that deals with all complaints and all member-specific concerns that arise from mandatory reports and other sources relating to professional misconduct, incompetence and incapacity.

Elected Members:

Heather Boon
Michael Nashat
Don Organ
Ken Potvin
Rachelle Rocha
Mark Scanlon
Farid Wassef
Laura Weyland
Tracy Wills (Chair)

Public Members:

William Cornet
(term exp. Jan 3, 2014)
David Hoff
Javaid Khan
Lew Lederman
Aladdin Mohaghegh
Gitu Parikh
Shahid Rashid
Joy Sommerfreund

NCCM:

Elaine Akers
Kalyna Bezchlibnyk-Butler
Gerry Cook
Mike Hannalah
Gurjit Husson
Eva Janecek-Rucker
Elizabeth Kozyra
Saheed Rashid
Satinder Sanghera
Beth Sproule
Amber Walker
Tracy Wiersema

Staff Resource:

Maryan Gemus

PATIENT RELATIONS*

The Patient Relations Committee advises Council with respect to the patient relations program which enhances relations between members and patients. It also deals with preventing and handling matters relating to sexual abuse of patients by members.

Elected Members:

Bonnie Hauser (Chair)
Michael Nashat

Public Members:

Cora dela Cruz
Javaid Khan
Lew Lederman

NCCM:

Karen Skubnik

Staff Resource:

Anne Resnick

PROFESSIONAL PRACTICE

The Professional Practice Committee provides direction and guidance on matters pertaining to professional practice. Through a sub-group, it is responsible for the development and ongoing review of standards of practice for the profession.

Elected Members:

Esmail Merani (Chair)
Don Organ
Farid Wassef

Public Members:

David Hoff
Joy Sommerfreund

NCCM:

Heba Abdel Aal
Andrea Ball
Lap Chan
Mina Tadrous

Staff Resource:

Tina Perlman

QUALITY ASSURANCE*

The Quality Assurance Committee is responsible for developing and maintaining the College's Quality Assurance Program, which includes a two-part Register, continuing education, minimum practice requirements and a practice review process. The goal of the Quality Assurance Program is to support continued competence and to encourage continuing professional development of members.

Elected Members

Christine Donaldson
Jon MacDonald (Chair)
Mark Scanlon

Public Members:

David Hoff
Aladdin Mohaghegh
Lew Lederman

NCCM:

Catherine Payne
Zita Semeniuk
Puja Shanghavi

Staff Resource:

Sandra Winkelbauer

REGISTRATION*

The Registration Committee provides guidance to Council on matters concerning registration, examinations and in-service training required prior to registration. The committee maintains familiarity with the curricula of all pharmacy and pharmacy technician programs that have been accredited by the Canadian Council for Accreditation of Pharmacy Programs or such other accrediting body approved by Council. Registration panels review all

applications of individuals who do not meet the registration requirements to determine if any further education, training or examination is necessary prior to registration.

Elected Members:

Christine Donaldson (Chair)
Jillian Grocholsky
Chris Leung
Tracy Wills

Public Members:

William Cornet
(term exp. Jan 3, 2014)
Norman MacDonald
Aladdin Mohaghegh

NCCM:

James Buttoo

Dean:

David Edwards

Ontario Pharmacy Technician

Program Representative:

Sharon Lee

Staff Resource:

Susan James

NCCM = Non-Council
Committee Member

* STATUTORY COMMITTEE



MILESTONES

YEAR IN REVIEW: Milestones from January to December 2013.

The following milestones were previously highlighted in Council Reports and articles published in the College's quarterly publication, Pharmacy Connection. They appear in no particular order.

RESPONSE TO INCIDENT OF ALLEGED UNDER-DOSING OF CHEMOTHERAPY DRUGS

In response to the March 2013 incident of alleged under-dosing of chemotherapy drugs in four hospitals in Ontario and one in New Brunswick, the College engaged in a number of activities to address the identified gap in regulatory oversight and strengthen the safety of the drug supply in Ontario.

ESTABLISHED REGULATORY OVERSIGHT FOR DRUG PREPARATION PREMISES

Immediately following the incident, the College worked with the Ministry of Health and Long-Term Care to draft regulations and enabling by-laws that gave the College the regulatory authority to inspect Drug Preparation Premises (DPPs) where pharmacists and pharmacy technicians practice.

Members employed in DPPs are required to identify themselves to the College. The College inspects these premises to evaluate their compliance with the standards of practice necessary for the safe and effective delivery of drug preparation activities, with the status and/or outcome of inspections posted on the Public Register on the College website.

THIESSEN REPORT RECOMMENDATIONS

At the request of government, Dr. Jake Thiessen was commissioned to do an independent review and produce a report — *A Review of the Oncology Under-Dosing Incident* — which was released to the public by the Minister of Health and Long-Term Care on Aug. 7, 2013. The report provided recommendations intended to prevent future chemotherapy incidents and mitigate identifiable risks. A number of these recommendations look to the College and/or National Association of Pharmacy Regulatory Authorities (NAPRA) to initiate changes to address the concerns raised.

The Ministry of Health and Long-Term Care accepted all of the recommendations provided in the Thiessen Report. On Sept. 12, 2013, the Ministry established an Implementation Task Force, which the College sits on, along with a variety of health and government sector partners including the Ontario Hospital Association and Health Canada. The Task Force meets regularly and action plans are in place to address each of the recommendations outlined in Thiessen's report.

INTRODUCTION OF DRAFT LEGISLATION TO PROVIDE THE COLLEGE WITH OVERSIGHT OF HOSPITAL PHARMACIES

In response to one of the recommendations in Dr. Thiessen's Report, the Government of Ontario introduced Bill 117 *Enhancing Patient Care and Pharmacy Safety Act* on Oct. 10, 2013. The draft legislation, if passed, will give the College the authority to regulate hospital pharmacies. In anticipation of this, the College has initiated dialogue with key stakeholder groups and taken initial steps toward the development of inspection criteria that will evaluate hospital pharmacies' adherence to appropriate standards of operation.

COUNCIL ESTABLISHED TASK FORCE ON PROFESSIONAL RESPONSIBILITY IN PRACTICE

As an additional step toward ensuring that appropriate learnings from the alleged chemotherapy drug under-dosing incident are being identified and shared, Council approved the establishment of a Task Force on Professional Responsibility in Practice at their December meeting. The mandate of this Task Force will be to review pharmacists' and pharmacy technicians' professional responsibilities in practice and make recommendations to raise awareness of these responsibilities to members and other stakeholder groups, with a focus on enhancing safe and effective care for patients throughout Ontario.

Draft regulations and enabling by-laws gave the College the regulatory authority to inspect Drug Preparation Premises (DPP) where pharmacists and pharmacy technicians practice.

The transparency project is a multi-staged initiative to examine information-sharing practices and determine how regulators might make more information available about decisions and processes.

TRANSPARENCY PROJECT EXAMINES INFORMATION-SHARING PRACTICES

This College, as part of a small group of health professional regulators (AGRE – Advisory Group of Regulatory Excellence) which consists of representatives from medicine, nursing, dentistry, pharmacy, optometry and physiotherapy – has been working on a multi-staged initiative to examine information-sharing practices and determine how regulators might make more information available about decisions and processes.

The approach recognizes that access to more information may assist the public in choosing a regulated health professional, enhance accountability and better inform any evaluation of the performance of self-regulation of the profession.

The first step in this initiative has been the development of transparency principles designed to guide regulatory colleges' future decisions about making more information available to the public. These principles were approved by Council and published in the fall 2013 issue of *Pharmacy Connection*.

As next steps, the Working Group — under the direction of AGRE — is comparing the processes and data

collection among regulatory colleges and has engaged a public consultation firm to conduct a survey to better understand the type of information the public would find useful when making decisions related to their healthcare.

MEMBERS ACKNOWLEDGE AWARENESS AND UNDERSTANDING OF THEIR EXPANDED SCOPE REGULATION

As part of members' annual renewal in March 2013, pharmacists and pharmacy technicians self-declared that they had read and understood both the regulation and the information in the Expanded Scope of Practice Orientation Manual.

This was part of the College's efforts to support members' awareness and understanding of their expanded scope of practice, which came into effect in fall 2012. Pharmacists' scope of practice now includes renewing and adapting prescriptions, initiating therapy for smoking cessation and administering injections for demonstration and education or immunizations within the context of the Universal Influenza Immunization Program (UIIP) for those pharmacists who have completed and registered the required injection training.

The expanded scope of practice regulation and corresponding support materials have been shared with educational institutions throughout Ontario and incorporated into entry-to-practice curriculums.

PHARMACISTS' ADMINISTRATION OF FLU SHOTS INCREASED SIGNIFICANTLY IN YEAR TWO

Pharmacists were given the authority to administer injections under the Universal Influenza Immunization Program (UIIP) as part of their Expanded Scope regulation that came into effect in 2012. In the first year, close to 600 pharmacies participated in the UIIP, with approximately 250,000 flu shots administered to Ontarians by pharmacists.

The participation of pharmacies rose significantly in 2013. With nearly 60 per cent of community pharmacists having successfully completed and registered their required training, an increased number of pharmacies were in a position to participate in the UIIP. As a result, the number of participating pharmacies in 2013 rose by more than three times the previous year, to approximately 2,000. By the end of 2013, pharmacists had administered nearly 750,000 doses of influenza vaccine.

CONTINUED SUPPORT FOR PRACTICE CHANGE

To further support pharmacists' expanded scope of practice, the College and the Leslie Dan Faculty of Pharmacy at the University of Toronto (U of T) established a five-year program in 2012 – the *Ontario College of Pharmacists Enhancing the Scope of Practice Program*. Led by Dr. Zubin Austin, research professor in Pharmacy Practice at U of T, the program includes a research component and live and online workshops that will help pharmacists develop some of the necessary skills to implement their expanded scope.

In its second year, the program reviewed pharmacists' response to the evolving scope of practice to determine if expectations for change are aligned with skill sets, temperament and readiness to change, and conducted a comparison of current practice vs. future and anticipated practice.

To date, research results show that workload and workflow issues exist, in particular with the integration of pharmacy technicians. Future

research will evaluate conflict aversion in relationships between pharmacists and physicians and pharmacists and their patients, as well as workplace design as a barrier to change.

Note: The College also funds a program at the University of Waterloo led by Dr. Nancy Waite.

ENTRY-TO-PRACTICE DEGREE FOR NEW GRADUATES WILL SOON BE A PHARM D

The Government of Ontario approved the entry-to-practice Doctor of Pharmacy (PharmD) programs at both the University of Toronto's Leslie Dan Faculty of Pharmacy and at the School of Pharmacy at the University of Waterloo.

With both Ontario universities aligned, the new entry-to-practice degree for graduates in Ontario will soon be a Doctor of Pharmacy. Both universities have established bridging programs for current students to provide them with the option of graduating with the PharmD designation.

ESTABLISHMENT OF A TASK FORCE ON GOVERNANCE

Early this year, Council approved the establishment of a Task Force on Governance to conduct a review of the College's governance model and develop new comprehensive governance documents that will guide the work of Council.

It is anticipated that draft governance documents will be available for Council review and approval in 2014.

... as indications are that the College will be called upon to regulate hospital pharmacy practice, the approved budget reflected resources to be allocated to the development of a Hospital Accreditation Program area within the College.

2014 OPERATING BUDGET APPROVED

Council reviewed and approved the College's operating budget for 2014 that supports the 2012-2015 Strategic Plan. Funding was allocated for special committees to advise on evolving initiatives including: prescribing for minor ailments, hospital pharmacy accreditation and continuation of the governance review through the Task Force on Governance.

In addition, as indications are that the College will be called upon to regulate hospital pharmacy practice, the approved budget reflected resources to be allocated to the development of a hospital accreditation program area within the College. This approach is similar to that taken with registered pharmacy technicians where the program was created and the elements of registration developed in anticipation of regulatory authority.

RE-DESIGNED WEBSITE DELIVERS QUICK AND EASY ACCESS TO RELEVANT INFORMATION

Throughout 2013, the College was engaged in an initiative to re-design the website to provide users with quick and easy access to services and information. A new design with completely revamped navigation now delivers a tailored experience for each of the different user groups (public, applicants and members), significantly improving their online experience.

The re-designed website launched in early 2014 and is intuitive, transparent and completely functional on all types of mobile devices. The website is also accessible by assistive technologies such as screen readers for the visually impaired.



REGULATIONS AND BY-LAWS

All regulations (that have been enacted by government) and by-laws (approved by Council) listed below can be found on the College website.

DRUG PREPARATION PREMISES REGULATION AND BY-LAW AMENDMENTS

In March 2013, Council approved the draft regulation (Part IX of *Ontario Regulation 202/94* made under the *Pharmacy Act*, Inspection of Drug Preparation Premises) and enabling by-laws designed to provide the College with the authority to inspect Drug Preparation Premises where pharmacists and pharmacy technicians were employed. The regulation — circulated on an abridged 10-day consultation period — was enacted by government on May 15, 2013.

PUBLIC REGISTER OF PHARMACIES BY-LAW AMENDMENTS APPROVED BY COUNCIL

In May 2013, Council approved by-law amendments that permit the College to formalize the creation of a Register of Pharmacies (section 23(2) 14 of the *Health Professions Procedural Code*). The approved by-law amendments included the requirement for the College, effective July 1, 2013, to post on the Public Register the outcome and/or status of pharmacy inspections.

DRAFT PROFESSIONAL MISCONDUCT REGULATION APPROVED BY COUNCIL

In June 2013, Council approved for circulation a draft amended regulation to the *Pharmacy Act* addressing professional misconduct. The regulation, which was circulated to members and stakeholders for consultation and feedback, required updates to reflect changes in legislation and evolving practice including the addition of pharmacy technicians, the expanded scope of practice, and the expectation that members exercise professional judgment in choosing to deliver services and/or referring patients to another healthcare professional as needed.

At the December 2013 Council meeting, following consideration of the feedback which resulted in only minor revisions to the circulated draft amended regulation, Council unanimously (with one noted abstention) voted in favour of approving the amendments to Ontario Regulation 681/93 to the *Pharmacy Act* which has been submitted to government for final approval and enactment.

The regulation, in addition to giving members further clarity regarding ethical practice and professional boundaries,

provides Council, committees and staff with a valuable screening mechanism to support and guide decisions when considering potential professional misconduct.

REVISED OPERATING BY-LAW NO.3 APPROVED BY COUNCIL

In September 2013, following extensive evaluation and consultation conducted by a special committee of Council established to conduct an overall review of the College's operating by-law, Council approved the revised by-law No. 3. The revisions resulted in clarification of language, intent and process and eliminated redundancy where appropriate.

DRAFT BILL 117 INTRODUCED BY GOVERNMENT

On Oct. 10, 2013, the Ministry of Health and Long-Term Care introduced Bill 117 *Enhancing Patient Care and Pharmacy Safety Act*. If passed, Bill 117 includes changes to the *Drugs and Pharmacies Regulation Act* which would provide the College with the authority to regulate hospital pharmacies in Ontario. As of December 2013, Bill 117 was in second reading in the legislature.

POLICIES AND GUIDELINES

REVISED GUIDELINE ON MULTI-MEDICATION COMPLIANCE AIDS APPROVED

Council approved a revised guideline for the use of multi-medication compliance aids that provides additional guidance to members who dispense medications in compliance packaging.

It focuses on areas where it is expected that a pharmacist will use professional judgment, including evaluating whether a medication is suitable for compliance

packaging, choosing the packaging materials and considering best practices for drug administration when packaging medications together.

The guideline also addresses safety issues for both members and patients and provides a summary of the information to be shared between the pharmacist, patient, family member, caregiver and prescriber when choosing this dispensing option.

POLICY CHANGE FOR THE PEER REVIEW – RANDOM SELECTION PROCESS

Council approved changes for the random selection process for the Peer Review for pharmacists. The changes allow for additional exemptions for pharmacists who are selected for peer review multiple times.

Council's approval was predicated on their conclusion that the change maximizes efficiency and creates greater opportunity for participation in the peer review by first-time participants.



SUMMARIZED

FINANCIAL

STATEMENTS

2013 SUMMARIZED FINANCIAL STATEMENTS

INDEPENDENT AUDITOR'S REPORT ON SUMMARY FINANCIAL INFORMATION

TO THE MEMBERS OF COUNCIL ONTARIO COLLEGE OF PHARMACISTS

The accompanying summary financial statements of the Ontario College of Pharmacists, which comprise the summary balance sheet as at December 31, 2013 and the summary statement of operations and net assets for the year then ended, are derived from the audited financial statements of the Ontario College of Pharmacists for the year ended December 31, 2013. We expressed an unmodified audit opinion on those financial statements in our report dated March 17, 2014.

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not for profit organizations. Reading the summary financial statements therefore, is not a substitute for reading the audited financial statements of the College.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of a summary of the audited financial statements in accordance with Canadian accounting standards for not for profit organizations.

Auditor's Responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, "Engagements to Report on Summary Financial Statements".

Opinion

In our opinion, the summary financial statements derived from the audited financial statements of Ontario College of Pharmacists for the year ended December 31, 2013 are a fair summary of those financial statements, in accordance with Canadian accounting standards for not for profit organizations.

Toronto, Ontario
March 17, 2014



CHARTERED ACCOUNTANTS
Licensed Public Accountants

SUMMARY BALANCE SHEET

AS AT DECEMBER 31, 2013

	2013	2012
ASSETS		
Current assets		
Cash and short term investments	\$ 2,519,048	\$ 3,040,779
Accounts receivable and cost recoveries	140,288	120,570
Prepaid expenses	147,722	119,594
	2,807,058	3,280,943
Long term investments	6,500,000	4,000,000
Property and equipment	4,581,319	4,522,293
	13,888,377	11,803,236
LIABILITIES		
Current liabilities		
Accounts payable and accrued liabilities	1,555,666	840,007
Deferred revenue	215,164	181,183
	1,770,830	1,021,190
NET ASSETS		
Net assets invested in property and equipment	4,581,319	4,522,293
Internally restricted		
Investigations and hearings reserve fund	1,650,000	1,500,000
Contingency reserve fund	3,800,000	3,000,000
Fee stabilization fund	1,250,000	600,000
Unrestricted	836,228	1,159,753
	12,117,547	10,782,046
	\$ 13,888,377	\$ 11,803,236

SUMMARY STATEMENT OF OPERATIONS AND NET ASSETS

YEAR ENDED DECEMBER 31, 2013

	2013	2012
Revenues		
Member fees - Pharmacists	\$ 8,080,291	\$ 7,779,683
Member fees - Pharmacy Technicians	695,650	381,650
Pharmacy fees	3,529,400	3,431,294
Registration fees and income	1,544,077	1,498,805
Investment and other income	246,984	222,369
	14,096,402	13,313,801
Expenses		
Council and committees	2,314,788	2,292,893
Administration	9,928,622	9,216,029
Property	133,342	117,303
	12,376,752	11,626,225
Excess of revenues over expenses from operations for the year before depreciation	1,719,650	1,687,576
Depreciation	384,149	319,080
Excess of revenues over expenses for the year	1,335,501	1,368,496
Net assets - at beginning of year	10,782,046	9,413,550
Net assets - at end of year	\$ 12,117,547	\$ 10,782,046

Full financial reports are available upon request.



Ontario College
of Pharmacists

Putting patients first since 1871

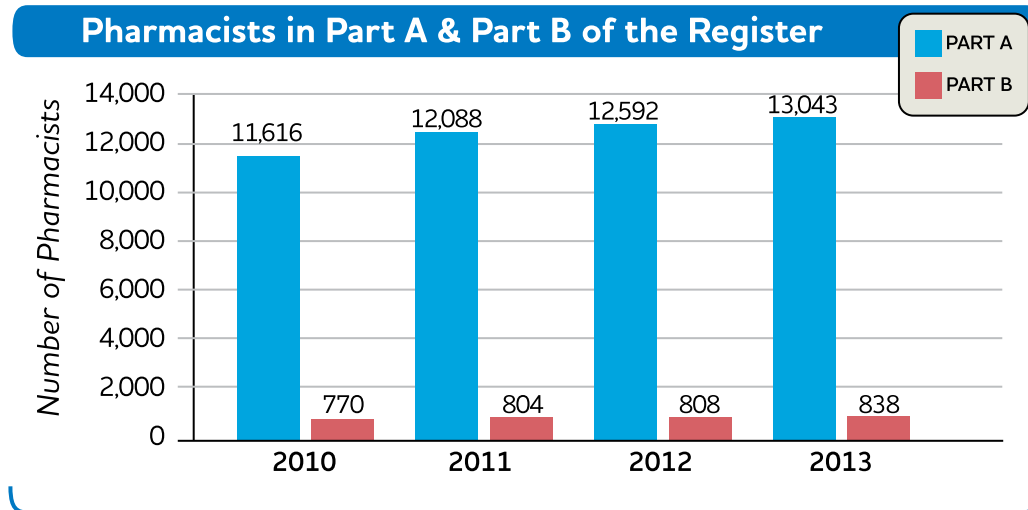
2013 MEMBER & PHARMACY STATISTICS

The Ontario College of Pharmacists regulates the profession of pharmacy to ensure that the public receives quality pharmacy services and care. As part of fulfilling its mandate to protect the public, the College ensures that all applicants wishing to enter the profession meet the registration requirements at entry-to-practice and are qualified to work in Ontario. The College also ensures that all registered pharmacists and pharmacy technicians maintain the ethical and practice standards for the profession throughout their careers.

The following pages show statistics about the pharmacists and pharmacy technicians who are currently practicing in the province of Ontario.

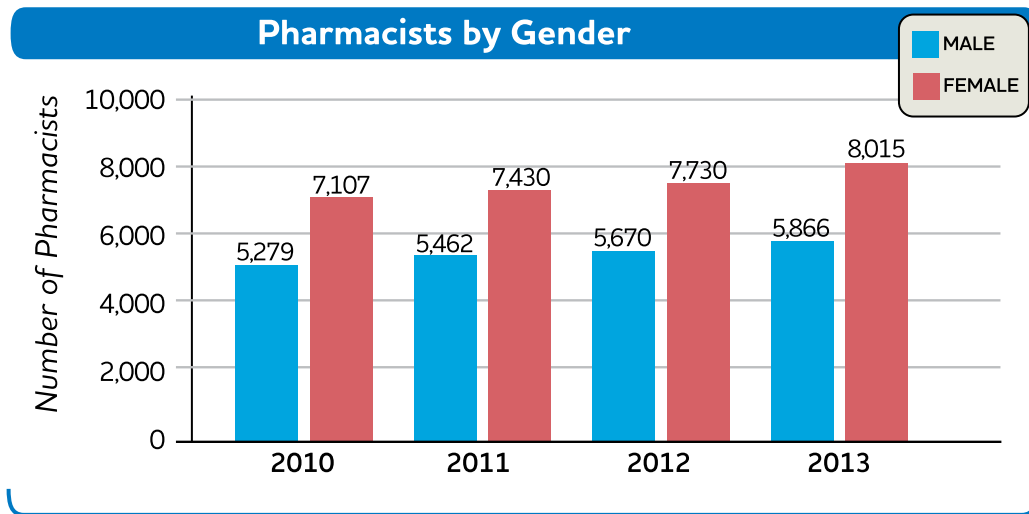


PHARMACIST STATISTICS



Each year upon completing their annual renewal, pharmacists confirm their status as either Part A or Part B of the College Register. Pharmacists in Part A of the Register provide patient care and must have worked a minimum of 600 hours providing patient care over the previous three years. Pharmacists declaring into Part B of the Register are not permitted to provide patient care or perform any of the controlled acts that are associated with providing pharmacy services to the public. All pharmacists in Ontario must maintain the ethical and practice standards of the profession.

The average age of an Ontario pharmacist is 45 years old.



While the number of both male and female pharmacists in the province is steadily rising, the graph shows that the number of female pharmacists is growing at a slightly faster rate.

PHARMACISTS BY GENDER & VOTING DISTRICT

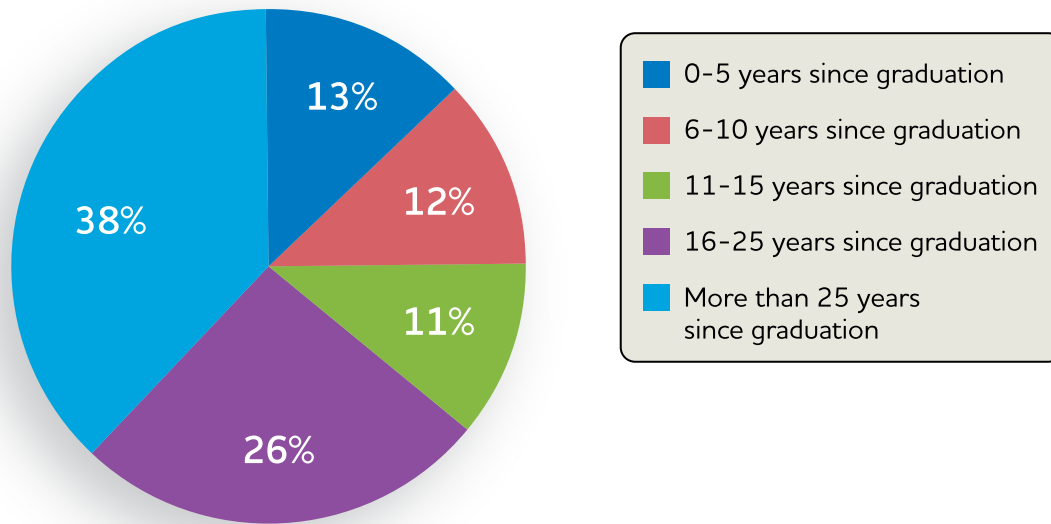
As of Dec. 31, 2013

Voting districts are based on the first letter of the postal code of each member's place of practice. All pharmacists working in a hospital or other healthcare setting vote in district H. A map of voting districts is available on page 8 of this report.

Voting District	H (Hospital)	K	L	M	N	P	Out-of-Province	TOTAL
Male	426	746	1,955	1,223	953	343	220	5,866
Female	1,587	856	2,361	1,548	975	344	344	8,015
TOTAL	2,013	1,602	4,316	2,771	1,928	687	564	13,881

Pharmacists by Years Since Graduation

As of Dec. 31, 2013



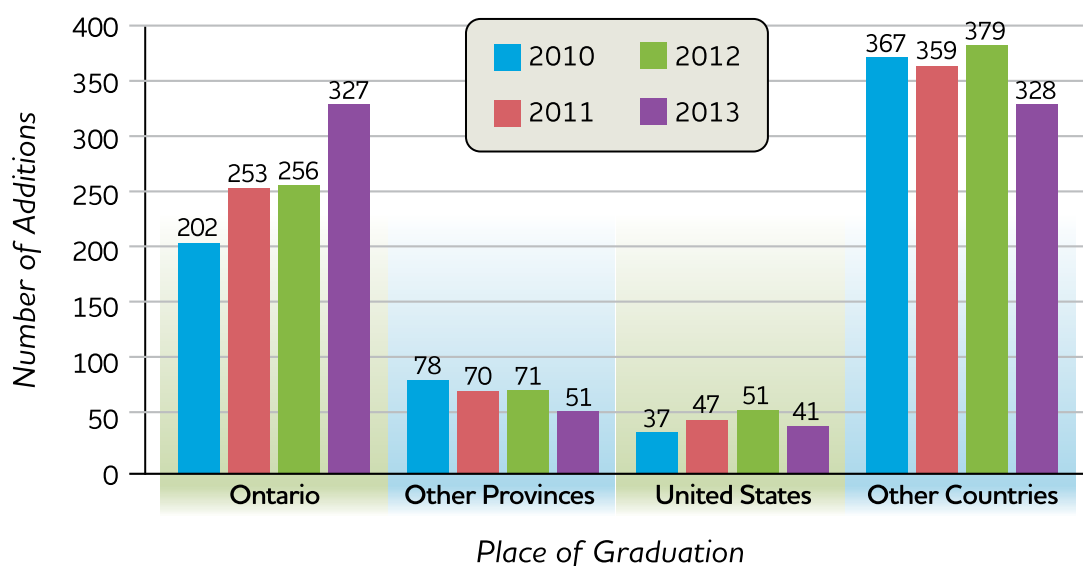
38 per cent of current pharmacists graduated from pharmacy school more than 25 years ago. Therefore, a considerable number of Ontario's pharmacists are approaching retirement age.

PHARMACISTS BY GENDER & YEARS SINCE GRADUATION

As of Dec. 31, 2013

Years Since Graduation	Male	Female	TOTAL
0-5	698	1,076	1,774
6-10	525	1,153	1,678
11-15	618	981	1,599
16-25	1,562	2,058	3,620
More than 25	2,463	2,747	5,210
TOTAL	5,866	8,015	13,881

Pharmacist Additions to the Register



This graph does not include pharmacists who re-registered with the College.

The increase in additions from 2012 to 2013 from the province of Ontario may be due in part to the first graduates from the University of Waterloo's School of Pharmacy entering the workforce.

PHARMACIST ADDITIONS TO THE REGISTER

Jan. 1 – Dec. 31, 2013

Place of Graduation	Male	Female	TOTAL
Ontario	125	202	327
Other provinces	16	35	51
Total in Canada	141	237	378
United States	19	22	41
Other countries	155	173	328
Total out-of-country	174	195	369
Re-registered	1	0	1
TOTAL	316	432	748

PHARMACIST DELETIONS FROM THE REGISTER

Jan. 1 – Dec. 31, 2013

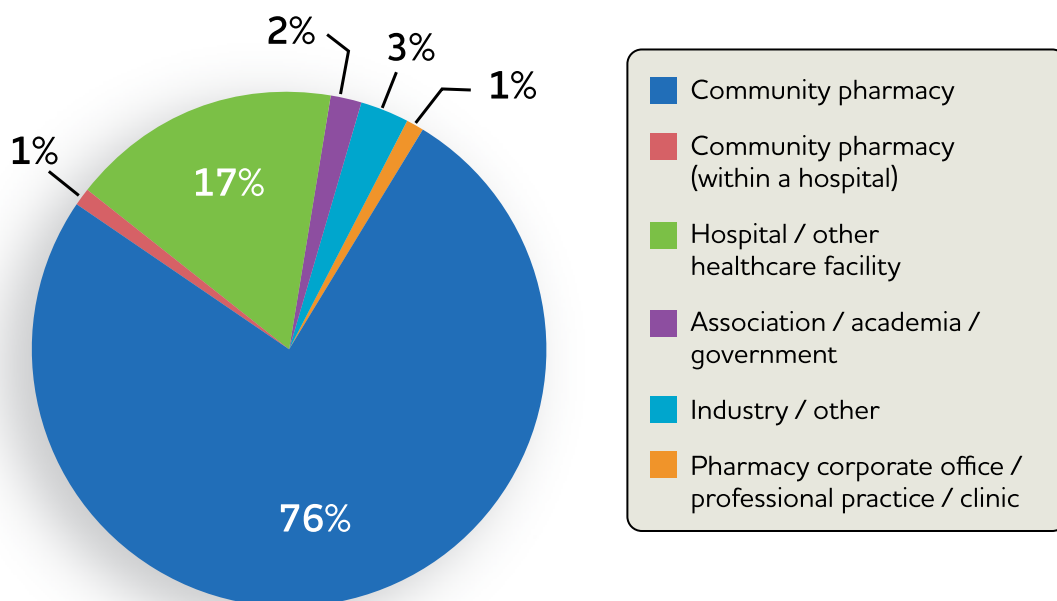
Members are considered to have "cancelled" their registration if they do not pay the annual fee. Those who officially notify the College of their wish to leave the Register are considered to have resigned.

Status	Male	Female	TOTAL
Cancelled	10	15	25
Deceased	7	8	15
Resigned	98	125	223
Revoked	0	0	0
Suspended	4	0	4
TOTAL	119	148	267

All practitioners are required to notify the College of their primary place of employment each year. The graph below illustrates that a large majority of pharmacists have declared that they work in community pharmacies. More statistics about pharmacies are available on page 33 of this report.

Pharmacists by Employment Type

As of Dec. 31, 2013



Note: Chart excludes pharmacists who did not record a workplace

PHARMACISTS BY EMPLOYMENT TYPE

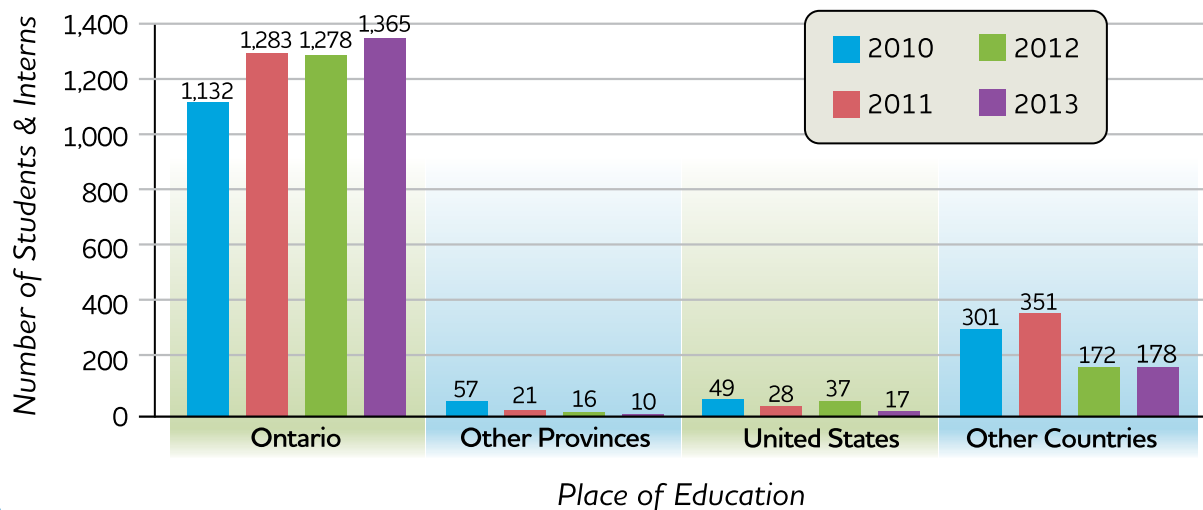
As of Dec. 31, 2013

Location of place of employment	Community pharmacy	Community pharmacy (within a hospital)	Hospital / other health-care facility	Association / academia / government	Industry / other	Pharmacy corp. office / professional practice / clinic	No workplace recorded	TOTAL
Ontario	9,125	111	2,013	220	293	94	1,461	13,317
Other Provinces	57	0	21	8	22	1	116	225
United States	51	0	43	14	39	2	75	224
Other Countries	25	0	16	10	16	1	47	115
TOTAL	9,258	111	2,093	252	370	98	1,699	13,881

REGISTERED PHARMACY STUDENTS AND INTERNS

As part of its mandate to protect the public, the College ensures that all applicants wishing to enter the profession meet the registration requirements for entry-to-practice and are qualified to work in Ontario. Before an applicant is able to register as a pharmacist he or she must demonstrate their knowledge and competency while working as a registered pharmacy student and intern, or have practiced as a pharmacist in another province.

Registered Pharmacy Students & Interns



REGISTERED PHARMACY STUDENTS & INTERNS

As of Dec. 31, 2013

Place of Education	Male	Female	TOTAL
Students from Ontario	481	757	1,238
Interns from Ontario	52	75	127
Total from Ontario	533	832	1,365
Students from other provinces	0	4	4
Interns from other provinces	1	5	6
Total from other provinces	1	9	10
Canada Total	534	841	1,375
Students from other countries	49	68	117
Interns from other countries	27	34	61
Total from other countries	76	102	178
Students from United States	1	0	1
Interns from United States	8	8	16
Total from United States	9	8	17
Total international	85	110	195
GRAND TOTAL	619	951	1,570

REGISTRATION PANEL STATISTICS

Jan. 1 – Dec. 31, 2013

A panel of the Registration Committee reviews all applications of individuals who do not directly meet the registration requirements to determine if further education, training or examinations are necessary prior to registration.

Requests considered by panels of the Registration Committee	164
Granted registration either partially or completely	150
Denied registration	14
Deferred	0
Withdrawn	0
Appeals to HPARB	1

The Health Professions Appeal and Review Board (HPARB) is an independent adjudicative agency. On request, it conducts reviews and hearings of orders of the registration committees of Ontario's health regulatory colleges.



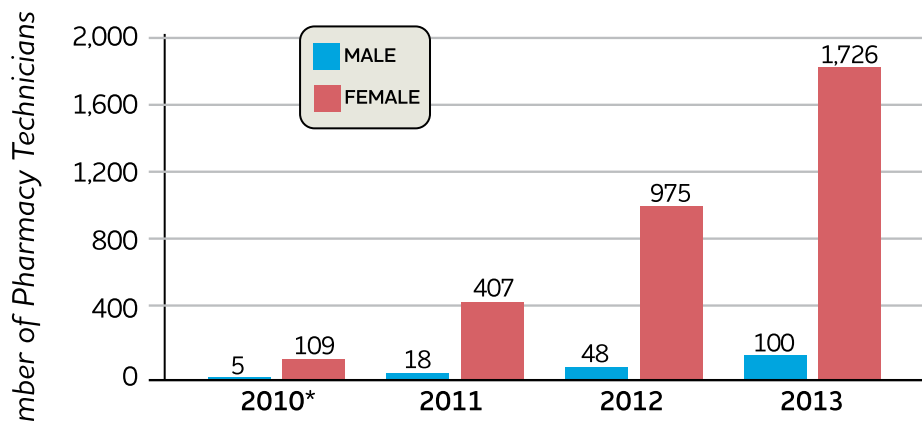


PHARMACY TECHNICIAN STATISTICS

Ontario began regulating pharmacy technicians on Dec. 3, 2010.

The following pages show a number of statistics from the first four years in the regulation of pharmacy technicians in Ontario.

Pharmacy Technicians by Gender



*2010 was the first year for regulation of pharmacy technicians. Registration began on Dec. 3, 2010.

There are a significantly higher number of female pharmacy technicians compared to male.

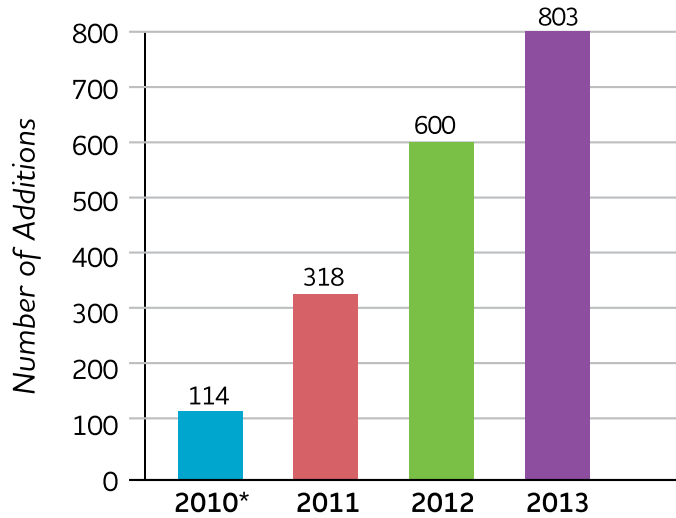
PHARMACY TECHNICIANS BY GENDER & VOTING DISTRICT

As of Dec. 31, 2013

Pharmacy technicians who work in a hospital vote in district TH. All others vote in district T.

Voting District	T	TH (Hospital)	TOTAL
Male	63	37	100
Female	1,157	569	1,726
TOTAL	1,220	606	1,826

Pharmacy Technician Additions to the Register



*2010 was the first year for regulation of pharmacy technicians.
Registration began on Dec. 3, 2010.

All pharmacy technician additions to the Register were from Ontario.

82 per cent of the 803 pharmacy technicians additions to the Register in 2013 completed bridging education program.

BRIDGING EDUCATION PROGRAM

As part of the process to regulate pharmacy technicians in Ontario, a bridging education program was offered to allow individuals already working in the role of pharmacy technician to upgrade their skills and become regulated without returning to school to complete a full-time training program. In Ontario, individuals enrolled in this route to registration must complete all bridging education components by Jan. 1, 2015. College records indicate that there are approximately 2,600 applicants engaged in the process to register through this route and therefore we expect a steep increase in the number of pharmacy technician additions to the Register in the coming years.

The average age of an Ontario pharmacy technician is 39 years old.

PHARMACY TECHNICIAN ADDITIONS TO THE REGISTER

Jan. 1 – Dec. 31, 2013

Male	Female	TOTAL
52	751	803

All pharmacy technician additions to the Register were from Ontario.

PHARMACY TECHNICIAN DELETIONS FROM THE REGISTER

Jan. 1 – Dec. 31, 2013

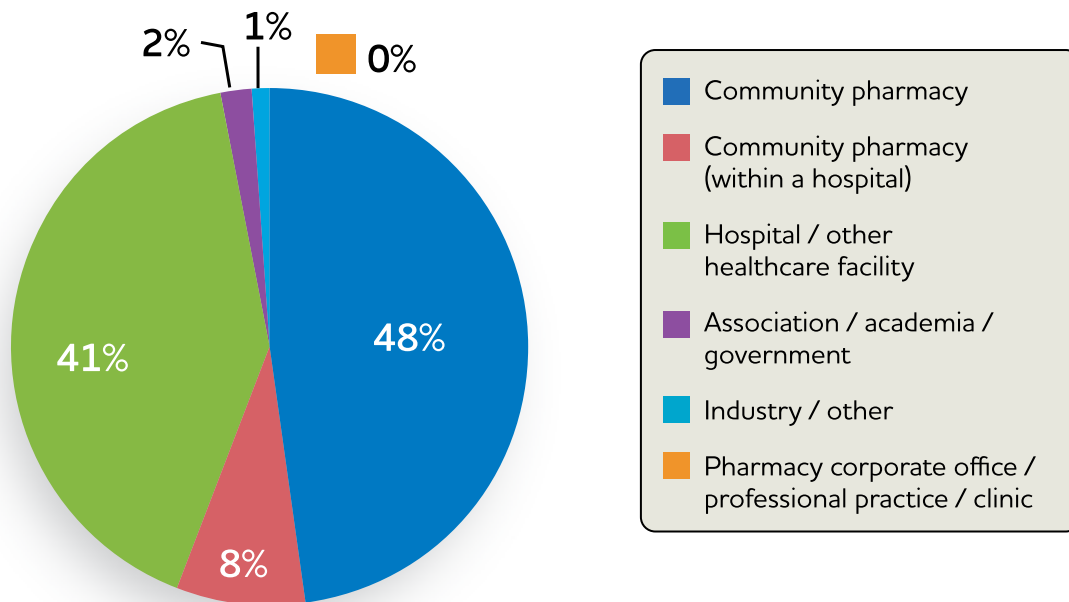
Members are considered to have “cancelled” their membership if they do not pay the annual fee. Those who officially notify the College of their wish to leave the Register are considered to have resigned.

Status	Male	Female	TOTAL
Cancelled	0	1	1
Resigned	0	1	1
TOTAL	0	2	2



Pharmacy Technicians by Employment Type

As of Dec. 31, 2013



Note: Chart excludes pharmacy technicians who did not record a workplace

PHARMACY TECHNICIANS BY EMPLOYMENT TYPE

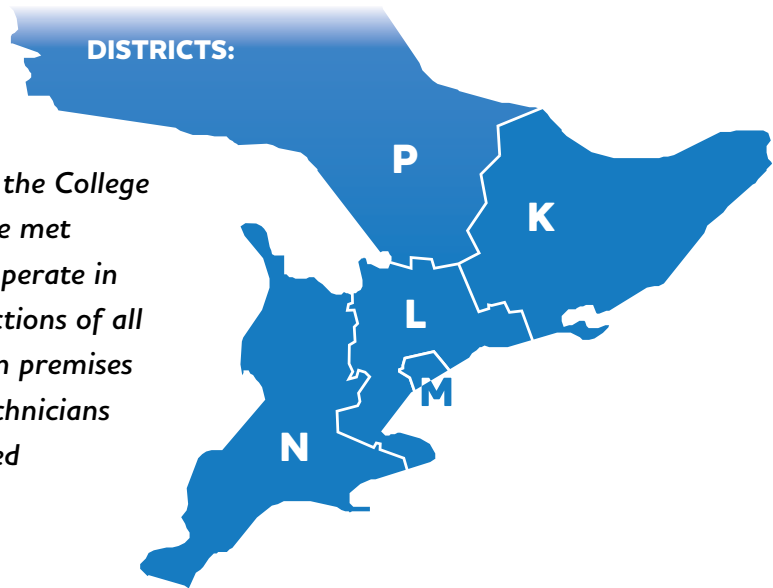
As of Dec. 31, 2013

Community pharmacy	Community pharmacy (within a hospital)	Hospital / other healthcare facility	Association / academia / government	Industry / other	Pharmacy corp. office / professional practice / clinic	No workplace recorded	TOTAL
712	11	606	26	10	4	457	1,826

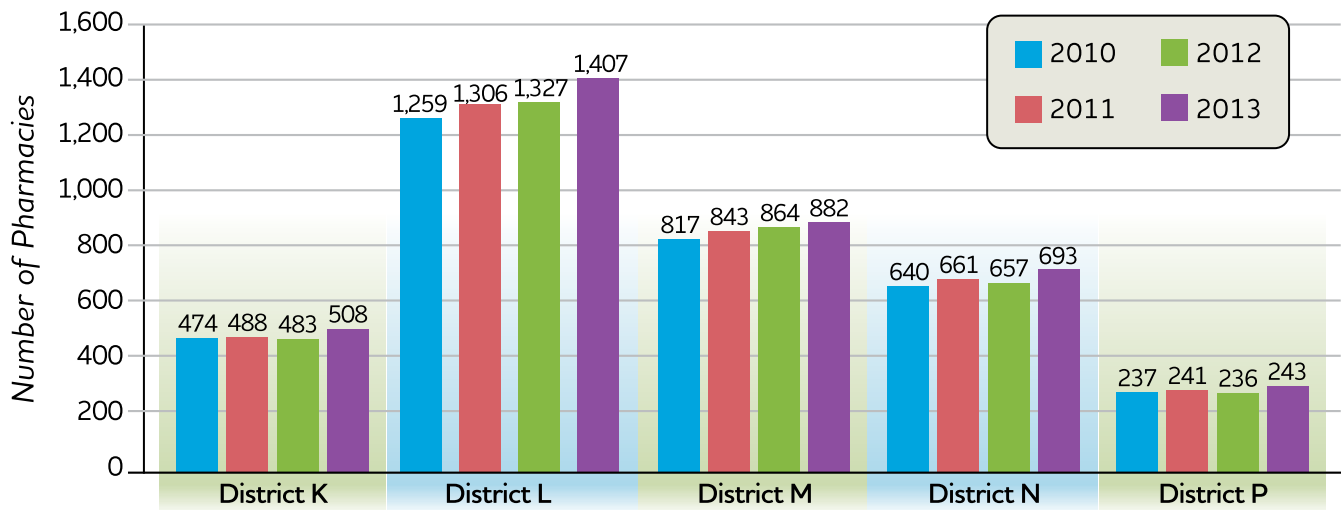
All pharmacy technicians registered with the College are located in Ontario.

PHARMACY STATISTICS

As part of its mandate to protect the public, the College ensures that only those pharmacies that have met the accreditation criteria are authorized to operate in Ontario. The College conducts routine inspections of all community pharmacies and drug preparation premises (DPPs) where pharmacists and pharmacy technicians practise to ensure compliance with established standards and support continuous quality improvement.



Pharmacies by District

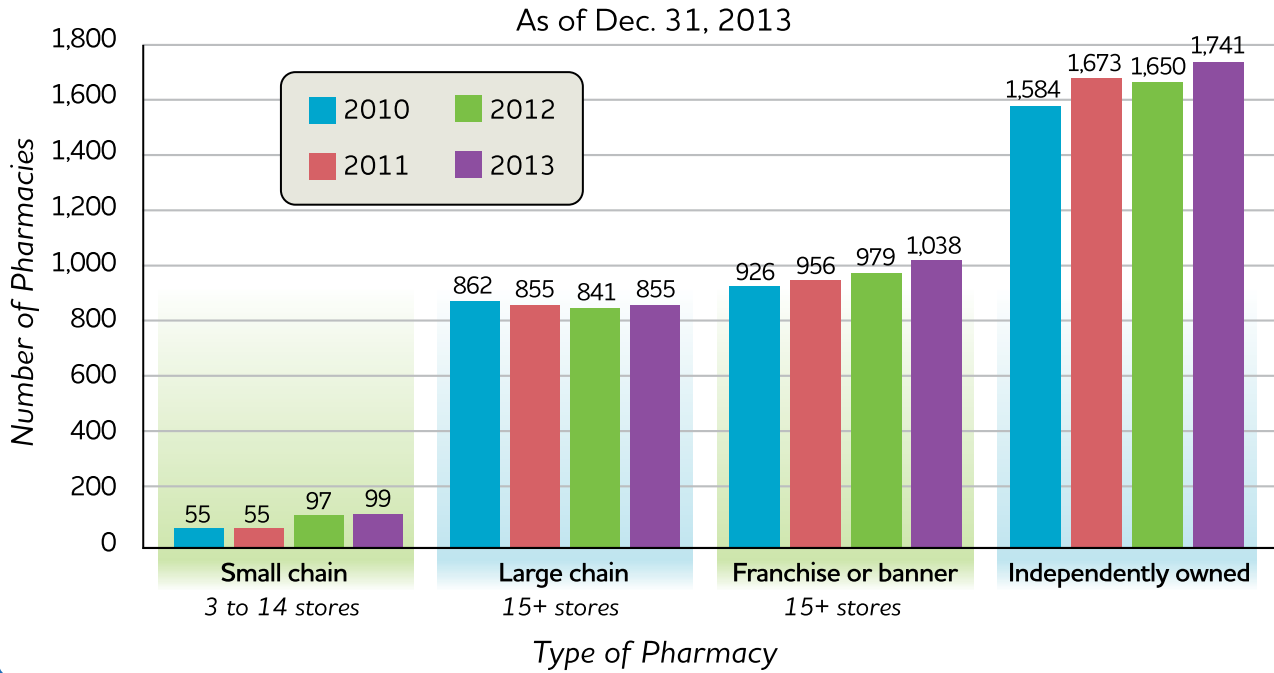


Districts are based on the first letter of the pharmacy's postal code.

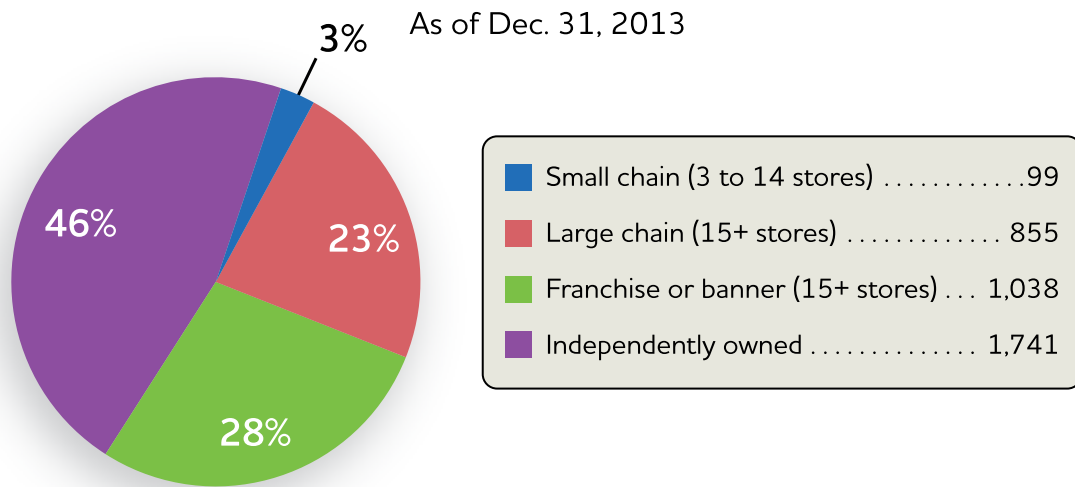
The graph above shows that district L has the fastest growth over the past four years. Cities in district L include Barrie, Ajax, Mississauga, Brampton, Oakville, Hamilton, Niagara Falls, etc.

As of Dec. 31, 2013 there were 3,733 accredited community pharmacies in Ontario.

Accredited Community Pharmacies by Type



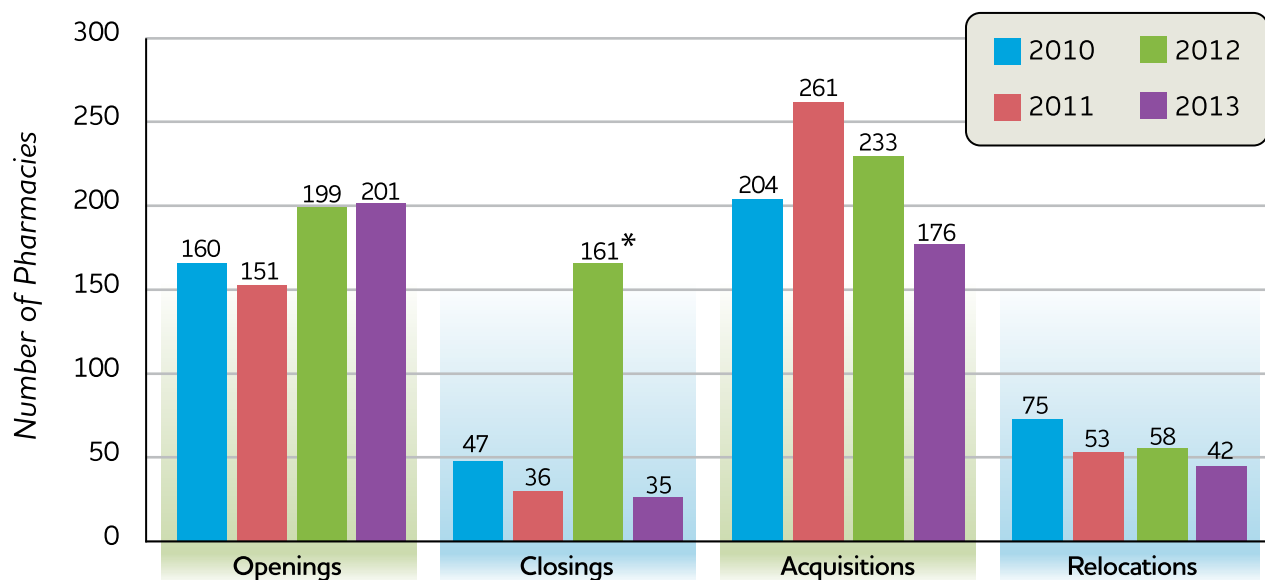
Independent & Chain Pharmacies by Type



Independently owned pharmacies account for 46 per cent of Ontario's 3,733 active accredited pharmacies. This percentage has been fairly consistent over the past four years. Franchise or banner pharmacies and chain stores account for the remaining 54 per cent of pharmacies in the province.

The College conducts inspections of community pharmacies before they open and when they are acquired or relocated. Inspections of new pharmacies are done before they are open to the public and inspections of acquired or relocated inspections are done within six months of the acquisition or move. The inspection ensures that the pharmacy meets the criteria for accreditation and is compliant with the established standards for operation.

Openings, Closings, Acquisitions & Relocations



*The number of closings in 2012 is higher than usual due to the closings of Zellers stores and pharmacies in Canada. The College expects that the number of new pharmacies in Target stores opening between 2013 and 2014 will offset the high number of closings in 2012.

DRUG PREPARATION PREMISES

On May 15, 2013 the Ministry of Health and Long-Term Care announced a regulation authorizing the College to inspect Drug Preparation Premises (DPPs) where pharmacists and pharmacy technicians engage in or supervise drug preparation activities.

As of Dec. 31, 2013, four DPPs have been identified and inspected by the College. The status and/or outcome of these inspections is posted on the College's website.

2013 PROGRAM

STATISTICS

The following pages show statistics about College programs including Inquiries, Complaints and Reports, Discipline, Fitness to Practise, Quality Assurance, and Accreditation/ Inspections of pharmacies.

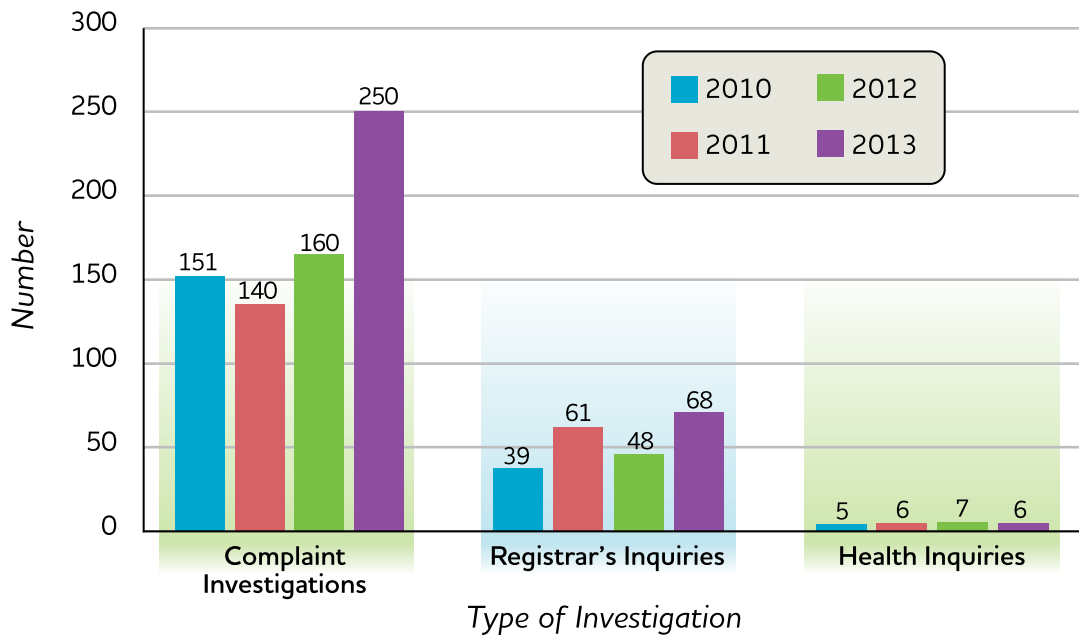


INQUIRIES, COMPLAINTS & REPORTS

As the regulatory body for the profession of pharmacy, the College is responsible for investigating all member-specific issues. The Inquiries, Complaints & Reports Committee (ICRC) conducts investigations into the conduct of pharmacists, pharmacy technicians, registered pharmacy students or interns for reasons related to allegations of professional misconduct, incompetence and/or incapacity.

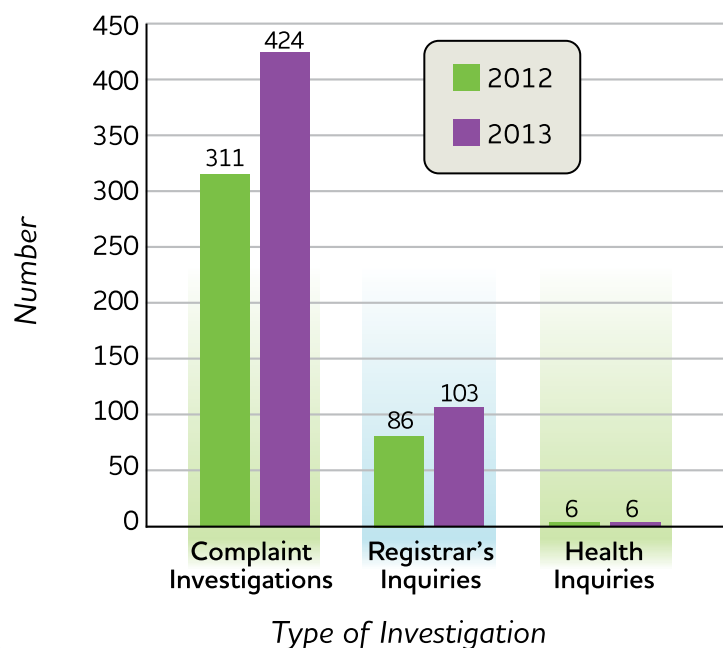
More information about the investigations and resolutions process is available on the College website.

New Investigations



The New Investigations graph represents investigations that were received within the calendar year.

Active Investigations



The Active Investigations graph represents investigations that were initiated in 2013 and those carried over from previous years.

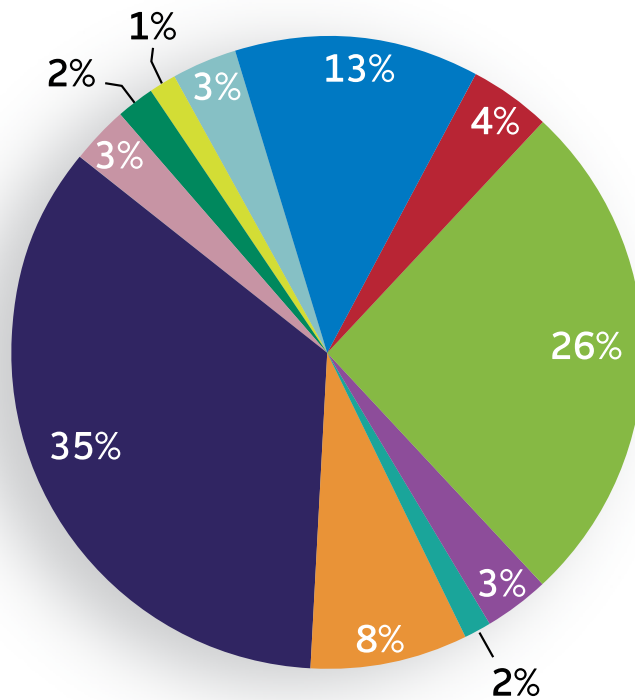
ISSUES

The pie chart below shows the breakdown of complaints disposed of in 2013. The chart excludes Registrar’s Inquiries and health inquiries.

Of the complaint issues seen by the ICRC this year, 36 per cent were related to professional service problems. This included problems with communication or issues concerning counseling a patient, performing MedsChecks, or ending the pharmacist–patient relationship.

Complaint Issues

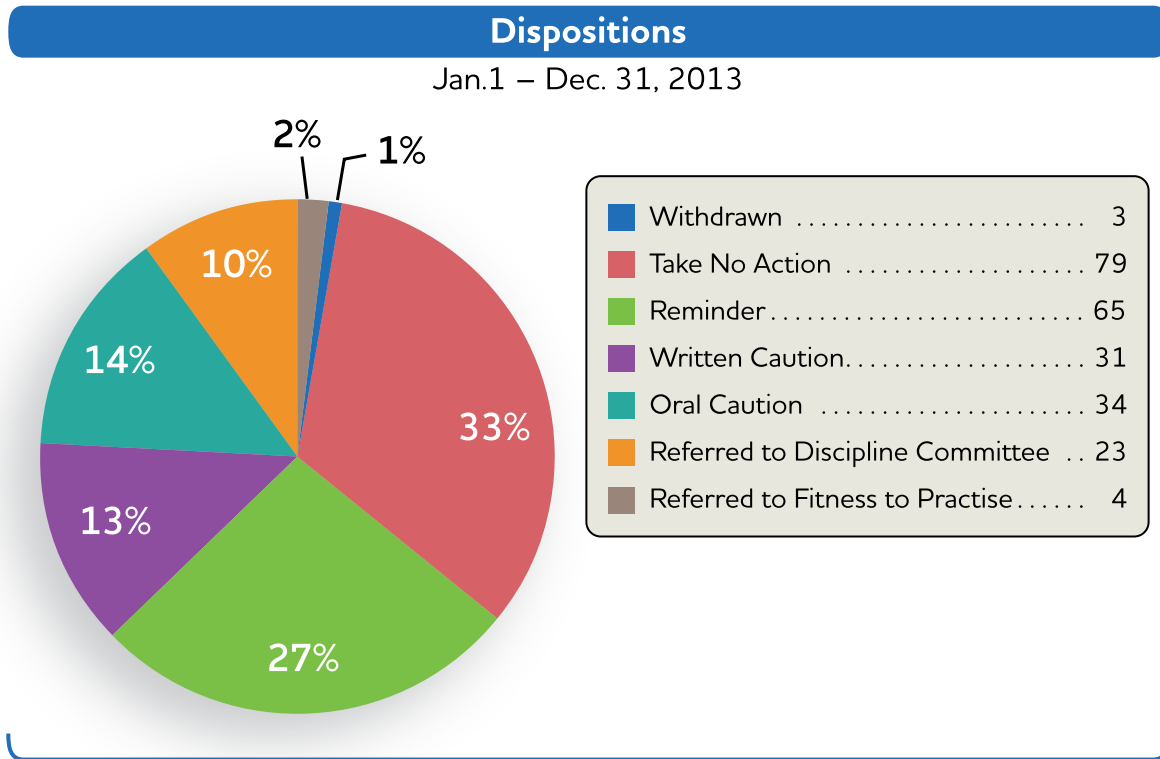
Jan.1 – Dec. 31, 2013



Billing Irregularities	27	Professional Service	75
Confidentiality	9	Records	6
Dispensing Error	56	Reduction of Quantity	4
Expired Product	7	Restriction of Choice	3
Labelling Error	3	Unauthorised Prescriptions	7
Miscellaneous	17		

DISPOSITIONS

Each matter under the jurisdiction of the ICRC is investigated and reviewed by a panel of the committee. After investigating a complaint or considering a report — including considering the submissions of the member and making reasonable efforts to consider all records and documents available — a number of options are available to the panel regarding how to dispose of the matter. The pie chart below shows the 239 dispositions from the 2013 calendar year and how the panel dealt with each one. The ICRC also directed 39 members to complete a Specified Continuing Education and Remedial Program (SCERP) and six members voluntarily entered into an undertaking with the College.



DISCIPLINE

In appropriate cases, the ICRC may choose to refer specified allegations of professional misconduct and/or incompetence to the Discipline Committee. The Accreditation Committee may also choose to refer allegations of proprietary misconduct to the Discipline Committee. Allegations of proprietary misconduct are related to a registrant — as the Designated Manager, director or shareholder of a corporation — failing to operate a pharmacy in accordance with the applicable laws and regulations governing the operation of a pharmacy. More information on the discipline process and upcoming hearings is available on the College’s website.

DISCIPLINE COMMITTEE

The Discipline Committee heard 15 matters involving allegations in 2013:

- 15 (100%) involved allegations of disgraceful, dishonourable or unprofessional conduct
- 0 (0%) findings related to allegations of proprietary misconduct
- 12 (80%) findings related to failure to meet the standards of practice
- 3 (20%) findings related to failure to keep appropriate records
- 9 (60%) findings related to issuing false or misleading accounts
- 0 (0%) findings of sexual abuse
- 0 (0%) findings of misconduct in another jurisdiction

Note: there may be multiple allegations relating to each matter

DISCIPLINE CASE SUMMARIES

The following is a summary of each discipline proceeding including hearings and motions held between January and December 2013. The list also includes one outstanding matter from 2012. Full decisions are posted on www.canlii.org

HEARINGS:

Samuel Lai	Jan. 8, 2013
Uncontested Discipline Hearing	Referring committee: ICRC
Remediation ordered:	ProBE
Suspension ordered:	5 months (2 remitted)
Costs ordered:	\$3,500
Summary:	A Panel of the Discipline Committee found Mr. Lai guilty of professional misconduct. The allegations of professional misconduct against Mr. Lai related to the Member’s dispensing of narcotic and nonnarcotic medications.

Godwin Ogowa	April 4, 2013
Discipline Hearing	Referring committee: ICRC
Remediation ordered:	Jurisprudence Exam
Suspension ordered:	Revocation
Costs ordered:	N/A
Summary:	A Panel of the Discipline Committee found Mr. Ogowa guilty of professional misconduct. The allegations of professional misconduct against Mr. Ogowa arose as a result of his failure to comply with a prior Order of the Discipline Committee dated June 9, 2008 and failing to comply with the terms of an Acknowledgement and Undertaking the Member entered into with the College dated January 26, 2011. The hearing proceeded in the absence of Mr. Ogowa. The Panel ordered that the Member's Certificate of Registration be suspended immediately, until September 30, 2013. The Panel further ordered that if the Member has not successfully completed the College's Jurisprudence Examination by September 30, 2013, the Registrar shall revoke the Member's Certificate of Registration.

To Ha	April 25, 2013
Uncontested Discipline Hearing	Referring committee: ICRC
Remediation ordered:	ProBE
Suspension ordered:	10 months (1 remitted)
Costs ordered:	\$12,000
Summary:	A Panel of the Discipline Committee found Mr. Ha guilty of professional misconduct. The allegations of professional misconduct against Mr. Ha related to the falsification of pharmacy records regarding claims made in 2009 to the Ontario Public Drug Program for nine prescription drug products.

Amanpreet Phull	May 2, 2013
Uncontested Discipline Hearing	Referring committee: ICRC
Remediation ordered:	ProBE, CPS II Module 5
Suspension ordered:	18 months (3 remitted)
Costs ordered:	\$15,000
Summary:	A Panel of the Discipline Committee found Mr. Phull guilty of professional misconduct. The allegations of professional misconduct against Mr. Phull included falsifying prescriptions, falsifying pharmacy records, dispensing drugs for an improper purpose, submitting accounts and charges for services that he knew were false or misleading, amongst other allegations.

Ehab Dimitry	May 15, 2013
Uncontested Discipline Hearing	Referring committee: ICRC
Remediation ordered:	ProBE, Session with Expert (ethics and self-regulation)
Suspension ordered:	2 months (1 remitted)
Costs ordered:	\$2,500
Summary:	A Panel of the Discipline Committee found Mr. Dimitry guilty of professional misconduct. The allegations of professional misconduct against Mr. Dimitry related to dispensing and/or selling a drug, operating a pharmacy, using the title "pharmacist", and holding himself out as a person who was qualified to practise in Ontario as a pharmacist, all while his Certificate of Registration was suspended.

Lou Ann Blahey	June 14, 2013
Uncontested Discipline Hearing	Referring committee: ICRC
Remediation ordered:	ProBE
Suspension ordered:	4 months (2 remitted)
Costs ordered:	\$5,000
Summary:	A Panel of the Discipline Committee found Ms. Blahey guilty of professional misconduct insofar as she dispensed a Schedule 1 and/or Schedule F drugs, controlled drugs, narcotics, and/or targeted substances without a prescription and/or proper authorization; recorded authorizations for prescriptions and/or refills of prescriptions where no such authorization was given, and/or altering one or more written prescriptions without proper authorization; and submitted false claims to third-party payers including Ontario Blue Cross and ESI.

Maheshkumar Patel	June 27, 2013
Discipline Hearing	Referring committee: ICRC
Remediation ordered:	N/A
Suspension ordered:	Revocation
Costs ordered:	N/A
Summary:	A Panel of the Discipline Committee found Mr. Patel guilty of professional misconduct in that he misappropriated narcotics and/or other drugs from a pharmacy on or about 10 occasions in or about June–November 2011. Neither Mr. Patel nor any representative of him attended the hearing. The Discipline Committee made a penalty order directing the Registrar to revoke Mr. Patel’s Certificate of Registration, effective June 27, 2013.

Sherif Abdel Messih	July 29, 2013
Uncontested Discipline Hearing	Referring committee: ICRC
Remediation ordered:	ProBE
Suspension ordered:	3 months (2 remitted)
Costs ordered:	\$3,500
Summary:	A Panel of the Discipline Committee found Mr. Abdel Messih guilty of professional misconduct in that, hardcopies were not signed by the dispensing pharmacist; patient counselling and other information were not documented; he signed hardcopies and completed other documentation after the date of dispensing, when he had not dispensed the drugs or provided the counselling; authorizations were not attached to hardcopies; on July 18, 2012, he failed to ensure that a pharmacist was physically present in Main Drug Mart; on one or more occasions during the period 2005 –November 5, 2009, pharmacy assistant S.S. provided counselling to a patient known as “D.L” regarding her medications; and on or about July 18, 2012, pharmacy assistant S.S. provided counselling regarding Tylenol #1 and/or sold Tylenol #1 to a customer.

George Oduro	July 23, 2013
Uncontested Discipline Hearing	Referring committee: ICRC
Remediation ordered:	ProBE
Suspension ordered:	3 months (2 remitted)
Costs ordered:	\$3,000
Summary:	A Panel of the Discipline Committee found Mr. Oduro guilty of professional misconduct in that, during the period 2010 - 2011, as the owner and/or operator of the Medical Ergonomics Clinic in Mississauga, Ontario, he engaged in conduct or performed an act relevant to the practice of pharmacy that, having regard to all the circumstances, would reasonably be regarded by members of the profession as disgraceful, dishonourable or unprofessional in that he and/or an employee or employees of Medical Ergonomics Clinic issued invoices or claims for health care services which he knew or ought to have known were false or misleading.

Majid Haditaghi	Oct. 15, 2013
Uncontested Discipline Hearing	Referring committee: ICRC
Remediation ordered:	RCA, CPS I Module 5, CPS II Module 5
Suspension ordered:	5 months (2 remitted)
Costs ordered:	\$7,500
Summary:	A Panel of the Discipline Committee found Mr. Haditaghi guilty of professional misconduct in that he failed to maintain records as required, improperly stored drugs, dispensed reduced quantities without written authorization, and incompletely transcribed verbal authorizations.

Andrij Chabursky	Nov. 13, 2013
Uncontested Discipline Hearing	Referring committee: ICRC
Remediation ordered:	ProBE
Suspension ordered:	15 months (1 remitted)
Costs ordered:	\$30,000
Summary:	<p>A Panel of the Discipline Committee found Mr. Chabursky guilty of professional misconduct in that, while engaged in the practice of pharmacy as director and shareholder of AOC Company Ltd., 1391478 Ontario Inc., Best Drug Mart, Markland Wood Pharmacy Ltd. and/or Symington Drugs, and/or designated manager of Best Drug Mart and Symington Drugs in Toronto, Ontario, he requested and/or accepted rebates totaling approximately \$3.2 million from generic drug manufacturers contrary to the Ontario Drug Benefit Act, section 11.5 and/or the Drug Interchangeability and Dispensing Fee Act, section 12.1, as then in effect, with respect to the following activities, in or about January 2007–December 2008:</p> <ul style="list-style-type: none"> (a) accepting rebates characterized as professional allowances in excess of the 20% limit for the manufacturer's drug products reimbursed under the Ontario Drug Benefit Act, as specified in O.Reg. 201/96, section 1(9); (b) accepting rebates characterized as professional allowances for activities other than the activities permitted for professional allowances, under the Ontario Drug Benefit Act, as listed in O.Reg. 201/96, section 1(8) or otherwise in accordance with the Code of Conduct in O.Reg. 201/96, Schedule 3; and/or (c) accepting rebates characterized as professional allowances for activities other than the activities permitted for professional allowances, under the Drug Interchangeability and Dispensing Fee Act, as listed in Regulation 935, section 2(1) or otherwise in accordance with the Code of Conduct in Regulation 935, Schedule 1.

Herman Ma	Nov. 18, 2013
Uncontested Discipline Hearing	Referring committee: ICRC
Remediation ordered:	ProBE
Suspension ordered:	10 months (1 remitted)
Costs ordered:	\$12,000
Summary:	A Panel of the Discipline Committee found Mr. Ma guilty of professional misconduct in that, while engaged in the practice of pharmacy as director, shareholder, Designated Manager and/or dispensing pharmacist at Leone Pharmacy in Toronto, Ontario, he falsified pharmacy records relating to his practice in connection with claims made for drugs in 2009, signed or issued, in his professional capacity, a document that he knew contained a false or misleading statement in connection with claims made for drugs in 2009, submitted an account or charge for services that he knew was false or misleading in connection with claims made for drugs in 2009.

Herman Reich	Dec. 11, 2013
Uncontested Discipline Hearing	Referring committee: ICRC
Remediation ordered:	ProBE
Suspension ordered:	16 months (2 remitted)
Costs ordered:	\$15,000
Summary:	A Panel of the Discipline Committee found Mr. Reich guilty of professional misconduct with respect to the management of inventory of narcotics, controlled drugs and targeted substances under his control to prevent loss or theft, including failure to count and reconcile narcotics, controlled drugs and targeted substances at least every six months from on or about September 1, 2009 to on or about April 10, 2012; and/or the management of inventory of narcotics under his control to prevent loss or theft, including failure to include methadone in counting and reconciliation of narcotics from on or about June 25, 2011 to on or about April 10, 2012; and the management of inventory of narcotics and controlled drugs under his control to prevent loss or theft, including failure to report destruction of narcotics and controlled drugs to the Office of Controlled Substances from on or about April 30, 2010 to on or about April 10, 2012.

MOTIONS:

Thi Pham Buu	Feb. 12, 2013
Motion to Stay the Allegations	Referring committee: ICRC
Remediation ordered:	N/A
Suspension ordered:	Resigned (Undertaking)
Costs ordered:	N/A
Summary:	A Panel of the Discipline Committee issued an Order staying the allegations of professional misconduct against Ms. Buu, which concerned falsifying records relating to her practice, signing or issuing documents that she knew contained false and misleading statements, and submitting accounts or charges for services that she knew were false and misleading, as well as failing to exercise appropriate professional judgment in dispensing duplicate drugs. This order was made on the basis of the Undertaking, Agreement and Acknowledgment Ms. Buu entered into with the College whereby she resigned permanently as a member of the College, irrevocably surrendered her Certificate of Registration, and will no longer work or be employed in a pharmacy, in any capacity whatsoever, in Ontario.

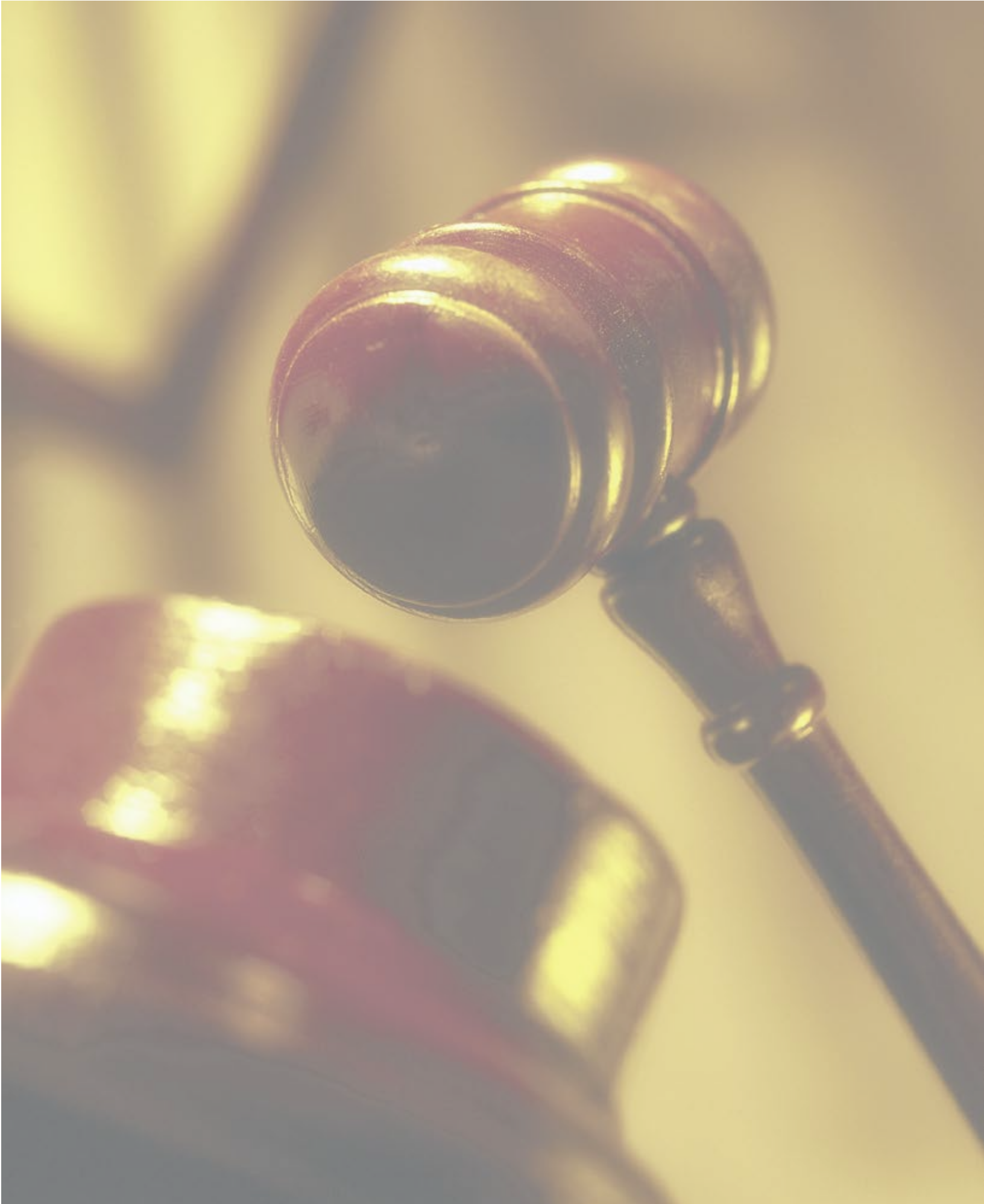
Majid Haditaghi	April 2, 2013
Set Date and Cross Motion	Referring committee: ICRC
Remediation ordered:	N/A
Suspension ordered:	N/A
Costs ordered:	N/A
Summary:	A Panel of the Discipline Committee issued an Order that the date for the hearing for this matter will proceed on October 15, 2013 and that the disclosure by the College requested by Mr. Haditaghi occur no later than June 28, 2013.

Maheshkumar Patel	April 4, 2013
Set Date Motion	Referring committee: ICRC
Remediation ordered:	N/A
Suspension ordered:	N/A
Costs ordered:	N/A
Summary:	A Panel of the Discipline Committee issued an Order that the hearing into the allegations of professional misconduct against Mr. Patel will be held on June 27, 2013. On reading the Notice of Motion dated March 14, 2013; the Notice of Hearing dated August 30, 2012, and on hearing the submissions of counsel for the Ontario College of Pharmacists (the 'College'), Mr. Patel, not appearing in person nor by a representative, and being satisfied as to the jurisdiction to proceed in Mr. Patel's absence and notwithstanding his resignation from the College.

Ahmed Al-Tamimi	May 24, 2013
Motion to Stay the Allegations	Referring committee: ICRC
Remediation ordered:	N/A
Suspension ordered:	Resigned (Undertaking)
Costs ordered:	N/A
Summary:	A Panel of the Discipline Committee issued an Order staying the allegations of professional misconduct against Mr. Al-Tamimi; which involved falsifying records, signing or issuing documents that he knew contained false and misleading statements, and submitting accounts or charges for services that he knew were false and misleading, all with respect to claims made to the Ministry of Health and Long-Term Care. This order was made on the basis of the Undertaking, Agreement and Acknowledgment the Member entered into with the College whereby he resigned permanently as a member of the College, irrevocably surrendered his Certificate of Registration, and will no longer work or be employed in a pharmacy, in any capacity whatsoever, in Ontario.

OUTSTANDING MATTER FROM 2012:

Mohamed Hanif	Dec. 12, 2012
Reconsideration of a previous decision of the Discipline Committee	Referring committee: ICRC
Remediation ordered:	N/A
Suspension ordered:	N/A
Costs ordered:	N/A
Summary:	<p>At a motion held on December 12, 2012, the Attorney General of Ontario (“AG”) sought reconsideration of a previous decision of the Discipline Committee (“2012 Decision”) respecting Mr. Mohamed Hanif (see <i>Ontario College of Pharmacists v. Hanif</i>, 2012 ONCPDC 9 (CanLII)). In the 2012 Decision, Mr. Hanif was found guilty of sexual abuse of a patient and the mandatory revocation of his Certificate of Registration was suspended pending the outcome of his application to the Ontario Superior Court of Justice challenging the mandatory revocation provisions of the Health Professions Procedural Code (“Code”).</p> <p>Specifically, the AG was seeking reconsideration of the original panel’s order (“Penalty Order”) as set out in paragraph 82 of its written reasons dated July 4, 2012, and an order setting aside point 3 of the Penalty Order.</p> <p>A preliminary motion was heard on November 26, 2012 respecting the issues of standing of the AG and the jurisdiction of a panel of the Discipline Committee to hear a motion of reconsideration of the 2012 Decision. The panel of the Discipline Committee determined that the AG had standing and that the panel had jurisdiction to hear the AG’s reconsideration motion.</p> <p>In response to the AG’s reconsideration motion, Mr. Hanif brought a cross-motion arguing that, in the event the panel found that the Discipline Committee lacked the jurisdiction to suspend the revocation of the Member’s Certificate of Registration, the entire matter must be set aside, not merely point three of the Penalty Order. Mr. Hanif’s cross-motion was also heard on December 12, 2012.</p> <p>For reasons articulated in a decision dated July 10, 2013, the panel of the Discipline Committee which heard both the AG’s reconsideration motion and Mr. Hanif’s cross-motion, dismissed the AG’s motion, and in that regard, did not make a determination regarding the Member’s cross-motion. The panel noted that while the parties agreed in submissions as to the gravity of cases involving sexual abuse, the dispute centred around whether the mandatory penalty to be imposed in cases of sexual abuse can be suspended by a panel of the Discipline Committee. The panel ultimately determined that panels of the Discipline Committee have the jurisdiction and statutory authority under subsection 51(4) of the Code to suspend an order made pursuant to subsection 51(2) of the Code in matters involving sexual abuse.</p>



FITNESS TO PRACTISE COMMITTEE

The Fitness to Practise Committee considers matters relating to allegations concerning a member's capacity to practise pharmacy that are referred by a health inquiry panel of the ICRC. If the Fitness to Practise Committee finds that the member is incapacitated, it can make an order directing the Registrar to revoke a member's certificate of registration, suspend the member's certificate of registration and/or impose specified terms, conditions or limitations on the member's certificate of registration.

In the 2013 calendar year, there were:

Investigations by a health inquiry panel of the ICRC	9
Matters still being investigated by a health inquiry panel of the ICRC	3
Matters referred to the Fitness to Practise Committee	4
Matters not referred to the Fitness to Practise Committee	1
Finding of Incapacity	2

COMPLIANCE MONITORING & SUPERVISION

The College monitors members who are required to fulfill orders set by the Discipline or Fitness to Practise committees. It also monitors members who were directed by the ICRC to complete a Specified Continuing Education and Remedial Program (SCERP) or who voluntarily entered into an undertaking with the College.

The following number of members were monitored during the 2013 calendar year:

Monitored while fulfilling orders from the Discipline Committee	24
Monitored while fulfilling an undertaking	12
Monitored for SCERP	39
Monitored while fulfilling orders from the Fitness to Practise Committee	3

HEALTH PROFESSIONS APPEAL AND REVIEW BOARD

The Health Professions Appeal and Review Board (HPARB) is an independent adjudicative agency. On request it reviews decisions made by the inquiries, complaints and reports committees of the self-regulating health profession Colleges in Ontario. The following chart relates to issues brought forward regarding the Ontario College of Pharmacists.

Requests for review in 2013	10
o Requests by member	5
o Requests by complainant	5
Reviews pending (from 2013 and subsequent years)	8
Decisions received	8
o Decisions upheld	6
o Referred to ICRC	0
o Withdrawn	2
Requests for Review under S.28 of the Code	4



QUALITY ASSURANCE

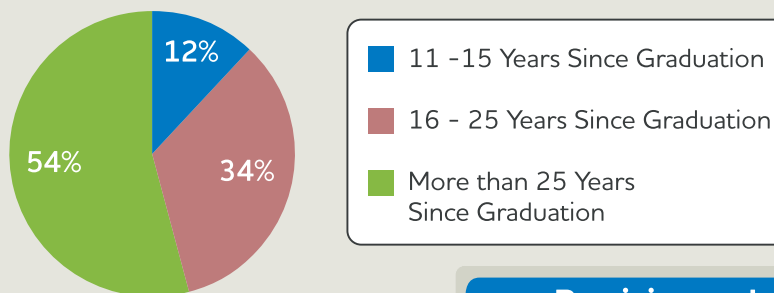
The College's quality assurance program assesses the continuing competency of practicing pharmacists, and thereby protects the public. The program consists of three components: the learning portfolio, the self-assessment and peer review. The following pages show several statistics about the 237 pharmacists that were selected for peer review in 2013. More information about the College's Quality Assurance Program is available on the College's website.

PEER REVIEW 2013

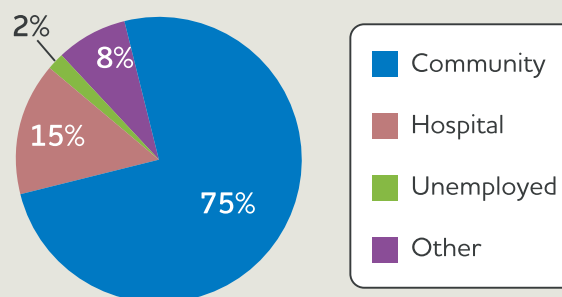
Peer Review is a clinical knowledge and practice-based assessment. Pharmacists in Part A of the Register are randomly chosen to participate in the program. In addition, pharmacists referred from the Registration Committee or those wishing to move from Part B to Part A of the Register also take part in the Peer Review. The four areas assessed are: clinical knowledge, gathering information, patient management and followup, and communication skills. Over the past five years, approximately 90 per cent of pharmacists who completed the Peer Review were successful, requiring only self-directed professional development after their first assessment.

The following pie charts show the breakdown of the 237 randomly selected candidates that participated in the 2013 Peer Review.

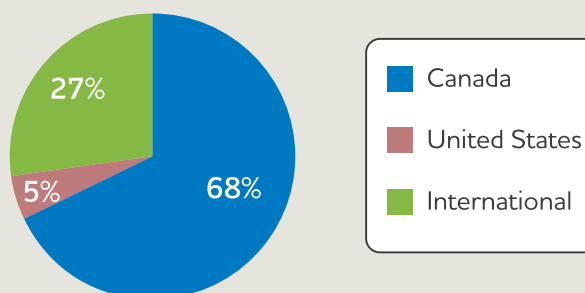
Participants by Graduation Date



Participants by Place of Practice



Participants by Location of Graduation



There were 237 pharmacists selected for Peer Review in 2013

The following charts show the breakdown of pharmacists who were unsuccessful in meeting the standards on their first attempt at Peer Review (approximately 10 per cent) and therefore were required to enter peer-guided learning (remediation).

OUTCOME BY GRADUATION DATE:

Years since graduation	Number of pharmacists	Number of peer-guided learning	Percentage who entered peer-guided learning of group's total
11-15	28	0	0%
16-25	80	1	1.3%
More than 25	129	13	10.1%

OUTCOME BY PLACE OF PRACTICE:

Place of practice	Number of pharmacists	Number of peer-guided learning	Percentage who entered peer-guided learning of group's total
Community	177	12	6.8%
Hospital	36	1	2.8%
Unemployed	6	1	16.7%
Other	18	0	0%

OUTCOME BY LOCATION OF GRADUATION:

Location of graduation	Number of pharmacists	Number of peer-guided learning	Percentage who entered peer-guided learning of group's total
Canada	162	4	2.5%
United States	12	2	16.7%
International	63	8	12.7%

INSPECTION SUMMARY

The College ensures that all accredited pharmacies in Ontario meet the legislated standards of accreditation and operation. The status and/or outcome of all pharmacy inspections as of July 1, 2013 are posted on the College's Public Register.

INSPECTIONS SUMMARY

LEVEL 0

New Openings198

LEVEL I

Acquisitions138

Relocations..... 44

Call Backs174

Practice Reviews.....668

TOTAL LEVEL I 1,024

LEVEL II

Re-inspections (inspector).....79

LEVEL III & ABOVE

Re-inspections (accreditation).....11

ALL INSPECTIONS GRAND TOTAL 1,312

INSPECTIONS OUTCOME

Satisfactory299

Issues identified.....932

Re-inspection57

Report to Accreditation Committee11

Referral to Accreditation Committee13

GRAND TOTAL INSPECTION RESULTS 1,312

Inspections are identified by the categories and levels:

- Level 0 — opening inspection
- Level I — call back, regular practice review, acquisition or relocation
- Level II — re-inspection ordered by inspector
- Level III — re-inspection ordered by the Accreditation Committee

The inspection process focuses on the operational requirements of the pharmacy and is a form of practice review to ensure that the operation is safe and the public is protected.

Inspections are intended to be educational to assist members to comply with legislative requirements, in order to meet and maintain professional and operational standards of practice. Regular inspections are cyclical, usually occurring within a four to five year period. Cycle times may vary depending on the strategic plan of the College.

Options that are available to the inspector at the conclusion of the inspection are:

- **Satisfactory** — inspection concluded, no issues identified
- **Issues identified** — action plan required
- **Level II Re-inspection ordered by Inspector** — action plan required
- **Referred to Accreditation Committee** — action plan required, Committee decision
- **Report to Accreditation Committee** — action plan required, Committee decision

ACCREDITATION COMMITTEE SUMMARY

Accreditation Committee Summary

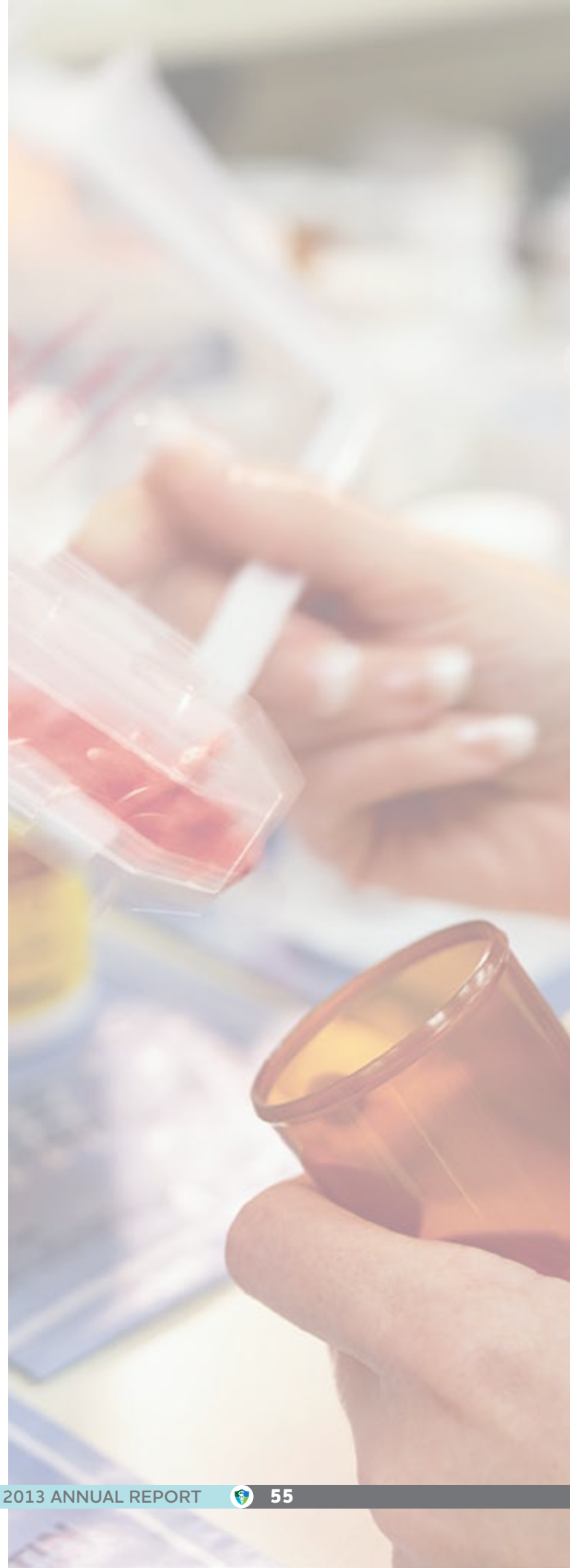
In total, there were 21* pharmacy files reviewed by the Accreditation Committee in 2013.

- 15 re-inspections ordered
 - 11 completed in 2013 (9 level III and 2 level IV)
 - 4 to be completed in 2014
- 1 referral to the Discipline Committee
- 8 accreditation cases concluded

*a pharmacy file might be reviewed more than once in a year.

DRUG PREPARATION PREMISES COMMITTEE SUMMARY

Effective May 15, 2013 the College received the authority to inspect drug preparation premises where pharmacists and pharmacy technicians engage in or supervise drug preparation activities. Since then, a total of 4 drug preparation premises have been inspected and accredited by the College. The status and/or outcome of all drug preparation premises inspections are posted on the College's Public Register.





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