

# **ANNUAL REPORT** 2011 & 2012





# PORT 2011 & 2012

#### **FOREWORD**

Thank you for reading the Ontario College of Pharmacists' (OCP) 2011 & 2012 Annual Report. This year's edition is slightly different from the College's previous reports. As you will see in the coming pages, this report includes Audited Financials, and Member and Pharmacy Statistics from both the 2011 and 2012 calendar years. Program Statistics – previously reported on the Council calendar of September to August - have shifted to the conventional calendar year and are therefore presented from September 1, 2011 – December 31, 2011 and January 1, 2012 – December 31, 2012. Going forward, OCP will publish its Annual Report each March with financial information and relevant statistics from the previous calendar year.



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# **ABOUT THE** ONTARIO COLLEGE OF PHARMACISTS

The Ontario College of Pharmacists was originally incorporated in 1871 and is set up under the Pharmacy Act – one of many health profession specific acts established under the Regulated Health Professions Act (RHPA) of Ontario. The RHPA is the umbrella legislation of the provincial government. It bestows, to the Minister of Health and Long-Term Care, the duty to ensure that health professions are regulated in the public interest.

## **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 coordinated patient-centred care and promote health and wellness.
- **4**. Build and enhance relationships with key stakeholders, including the public, the government, members, and other health care professionals.
- **5**. Apply continuous quality improvement and fiscal responsibility in the fulfilment of the mission.

## **SELF-REGULATION**

The College is a self-regulatory body. Self-regulation means that the government has delegated its regulatory functions to the profession and those who have the specialized knowledge necessary to do the job.

OCP's goal is to help ensure that Ontario pharmacists and pharmacy technicians are practicing to the highest standards in the best interest of the public.

The College sets the requirements for entering the profession, develops and maintains standards of practice, and accredits pharmacies.

OCP operates in an open and accountable manner, which means that it communicates with the public about what it does and the important role it plays in protecting patient interests.



## **COLLEGE COUNCIL**

The College is overseen by a Council of 15 elected pharmacists, two elected pharmacy technicians, up to 16 government appointed members of the public and the Deans of the province's two pharmacy faculties. Council's primary role is to ensure that the interests of patients are protected and maintained. The Council of the College 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

The Health Professions Procedural Code and the Pharmacy Act require Council to establish and appoint seven statutory committees: Executive, Inquiries Complaints and Reports, Discipline, Fitness to Practice, Patient Relations, Quality Assurance, and Registration. The Pharmacy Act also requires the College to establish an Accreditation Committee, with the unique mandate of considering matters relating to the operation of pharmacies in Ontario, including operational requirements, ownership, supervision and the distribution of drugs in the pharmacy. In addition, under a bylaw that allows Council to establish additional committees as it deems appropriate, Council established the Professional Practice, Finance and Communications Committees, among others.

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

# MESSAGE FROM REGISTRAR AND **PRESIDENTS**

On behalf of the Council and staff of the Ontario College of Pharmacists, it is our pleasure to present the 2011 & 2012 Annual Report.

As mentioned in the Foreword, this special edition of OCP's Annual Report has financials and statistics from both 2011 and 2012. Going forward, OCP will publish its Annual Report each March with relevant information from the previous calendar year only. We hope this shift in reporting will provide readers with a more timely representation of the College's progress and accomplishments.

The past two years were tremendously exciting for pharmacy in Ontario, culminating with government's October 2012 announcement of an expanded scope of practice for pharmacists. Our members have been working diligently to hone their skills and complete any required training as they begin practicing to their full scope. Under the new regulation, pharmacists in Ontario can now, under certain circumstances, provide the flu shot vaccination, prescribe smoking cessation medications, and renew or adapt existing prescriptions.

We are also pleased to report the continued success of integrating pharmacy technicians into pharmacy practice. Since their regulation in December 2010, pharmacy technicians have played an important role in freeing up pharmacists for the delivery of clinical services such as MedsChecks and, now, expanded scope activities. Two years after the initial regulation of technicians in Ontario - the first province to formally recognize the profession in Canada – the College registered Ontario's 1,000th pharmacy technician.

These are just two of the College's significant achievements during 2011 and 2012. We, the Registrar and Presidents, are extremely proud of these successes and would like to personally thank the Council and staff for their hard work and dedication in helping to achieve these important milestones. We look forward to continuing to collaborate with pharmacists, pharmacy technicians, other health care professionals, and our many other stakeholders in the coming year.

Thank you for taking the time to read this report. We hope you enjoy reviewing the accomplishments of the College from 2011 and 2012.

Sincerely, Marshall Moleschi, Registrar Sherif Guorgui, Council President (2011 – 2012) Christopher Leung, Council President (2012 – 2013)





Sherif Guorqui



Christopher Leung

On behalf of the

Council and staff at

the Ontario College of

Pharmacists, it is our

pleasure to present

the 2011 & 2012

Annual Report.

# MEMBERS OF COUNCIL

SEPTEMBER 2012 - AUGUST 2013



## **ELECTED MEMBERS**



District P, Rachelle Rocha Espanola



District P. Jon MacDonald Sault Ste. Marie







District H, Christine Donaldson Windsor



District H, Regis Vaillancourt Ottawa



District L, Tracy Wiersema Barrie





District N, Chris Leung President Windsor



District N, Bonnie Hauser Dunnville



District N, Ken Potvin Waterloo



District M, Sherif Guorqui Toronto

# MEMBERS OF COUNCIL

SEPTEMBER 2012 - AUGUST 2013

## **PHARMACY TECHNICIANS**



District T, Amber Walker St.Catharines



District TH, Tracy Wills Windsor

## **PUBLIC MEMBERS**



District K, Mark Scanlon Peterborough



District K, Esmail Merani Carleton Place



District L, Farid Wassef Stouffville



District L, Saheed Rashid Hamilton



District M, Tracey Phillips Vice President Toronto



District M, Don Organ Toronto

Corazon dela Cruz Toronto



**Jim Fyfe** Niagara Falls



Javaid Khan Markham



William Cornet Ottawa



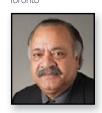
**David Hoff** Oakville



Lew Lederman Ottawa



Gitu Parikh Toronto



Shahid Rashdi Mississauga



Babek Ebrahimzadeh Woodbridge



Margaret Irwin Sault Ste. Marie



Aladdin Mohaghegh



Lynn Peterson Toronto



Joy Sommerfreund

## **FACULTY OF PHARMACY**



Henry Mann, Dean Leslie Dan Faculty of Pharmacy University of Toronto



David Edwards, Hallman Director School of Pharmacy University of Waterloo

## **COUNCIL MEMBERS WHO SERVED BETWEEN SEPTEMBER 2011 AND AUGUST 2012:**



Public Member, **Thomas Baulke** Collingwood



District N, Peter Gdyczynski Brantford



District H, Doris Nessim Mississauga

## COMMITTEES OF THE COLLEGE

## SEPTEMBER 2012 - AUGUST 2013

## **EXECUTIVE\***

The Executive Committee deals with matters requiring immediate attention between meetings of Council. The Executive Committee also has a significant coordination function. It receives and studies reports from Committees before forwarding them to Council for action.

#### **Elected Members:**

Christopher Leung – President & Chair Tracey Phillips - Vice President Sherif Guorqui - Past President Mark Scanlon

## **Public Members:**

David Hoff Lew Lederman Aladdin Mohaghegh

#### Staff Resource:

Marshall Moleschi

Thank you to Bonnie Hauser and Tom Baulke who served on the Executive Committee from September 2011 to August 2012.

## **ACCREDITATION\***

The Accreditation Committee considers matters relating to the operation of 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 Ken Potvin Regis Vaillancourt Tracy Wiersema

#### **Public Members:**

David Hoff (Chair) Margaret Irwin Joy Sommerfreund

#### NCCM:

Timothy Brady Lap Chan

#### Staff Resource:

Tina Perlman

Thank you to Esmail Merani, Tracev Phillips, Amber Walker. Cora dela Cruz and Zita Semeniuk who served on the Accreditation Committee from September 2011 to August 2012.

## **COMMUNICATIONS**

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

## **Elected Members:**

Christine Donaldson Sherif Guoraui Bonnie Hauser Saheed Rashid (Chair)

## **Public Members:**

David Hoff Javaid Khan Joy Sommerfreund

## NCCM:

Gerry Cook

## Staff Resource:

Lori DeCou

Thank you to Rachelle Rocha, Farid Wassef. Tom Baulke. Cora dela Cruz, and Lew Lederman who served on the Communications Committee from September 2011 to August 2012

## **DISCIPLINE\***

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

## **Elected Members:**

David Edwards Sherif Guorqui Henry Mann Don Organ Rachelle Rocha Mark Scanlon Farid Wassef Amber Walker Tracy Wills

## **Public Members:**

William Cornet Cora dela Cruz Bob Ebrahimzadeh (Chair) Jim Fyfe Javaid Khan Lew Lederman Aladdin Mohaghegh Gitu Parikh Lynn Peterson Shahid Rashdi

## NCCM:

Larry Boggio Erik Botines Steve Clement Jim Gay Tony Huynh Saniiv Maindiratta Toni Nieuwhof Goran Petrovic Jeannette Schindler Dan Stringer

Tatjana Sunjic Laura Wevland David Windross

## Staff Resource:

Maryan Gemus

Thank you to Peter Gdyczynski, Christopher Leung, Saheed Rashid. Tom Baulke. Doris Nessim. Joy Sommerfreund and Erik Thibault who served on the Communications Committee from September 2011 to August 2012.

## **FINANCE**

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 Tracey Phillips Mark Scanlon

## **Public Members:**

David Hoff Gitu Parikh

## Staff Resource:

Connie Campbell

Thank you to Peter Gdyczynski who served on the Finance Committee from September 2011 to August 2012.

## **FITNESS TO PRACTICE\***

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

## **Elected Members:**

Regis Vaillancourt Tracy Wills (Chair)

**Public Members:** 

Cora dela Cruz Shahid Rashdi

#### NCCM:

Xu Duan

#### Staff Resource:

Marvan Gemus

Thank you to Christopher Leung, Farid Wassef, Margaret Irwin, Janie Bowles-Jordan and Ken Potvin who served on the Fitness to Practice Committee from September 2011 to August 2012.

## 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:**

Sherif Guorqui Ken Potvin Saheed Rashid Rachelle Rocha Mark Scanlon Tracy Wiersema (Chair) Tracy Wills

## **Public Members:**

William Cornet Marg Irwin Aladdin Mohaghegh Gitu Parikh Lynn Peterson Shahid Rashdi

#### NCCM:

Elaine Akers Kalyna Bezchlibnyk-Butler Gerry Cook Mike Hannalah Guriit Husson Eva Janecek-Rucker Elizabeth Kozvra Satinder Sanghera

## Beth Sproule Staff Resource:

Maryan Gemus

Thank you to Jon MacDonald, Esmail Merani. Amber Walker. Jim Fyfe, Javaid Khan, Joy

Sommerfreund Christine Donaldson and Andrea Ball who served on the ICRC from September 2011 to August 2012.

## **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) Ken Potvin Regis Vaillancourt

#### **Public Members:**

Jim Fyfe Javaid Khan Lew Lederman

#### NCCM-

lana Ivanova Karen Skubnik

#### Staff Resource:

Anne Resnick

Thank you to Doris Nessim, Tom Baulke, William Cornet, Shahid Rashdi and Lynn Halliday who served on the Patient Relations Committee from September 2011 to August 2012.

## **PROFESSIONAL PRACTICE**

The Professional Practice Committee provides direction and guidance on all 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:**

Christine Donaldson David Edwards Esmail Merani (Chair) Don Organ Tracev Phillips Rachelle Rocha Amber Walker

#### **Public Members:**

David Hoff Lynn Peterson

#### NCCM:

Andrea Ball Sherry Peister Mina Tadrous

#### Staff Resource:

Tina Perlman

Thank you to Peter Gdyczynski, Doris Nessim. Saheed Rashid and Mike Hannalah who served on the Professional Practice Committee from September 2011 to August 2012.

## **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**

Jon MacDonald Sherif Guorqui (Chair) Amber Walker Farid Wassef

## **Public Members:**

Cora dela Cruz Mara Irwin Joy Sommerfreund

#### NCCM:

Steve Clement Puja Shanghavi Zita Semeniuk

## Staff Resource:

Sandra Winkelbauer

Thank you to Don Organ, Tracey Phillips, Tracy Wiersema, Javaid Khan, Aladdin Mohaghegh, Delia Littlejohn and Shelley McKinney who served on the Quality Assurance Committee from September 2011 to August 2012.

## **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) Bonnie Hauser Jon MacDonald Tracy Wills **Public Members:** 

Bob Ebrahimzadeh Jim Fyfe

Aladdin Mohaghegh

## NCCM:

James Buttoo Doris Nessim

#### Dean:

Henry Mann

## Staff Resource:

Susan James

Thank you to Christopher Leung, Mark Scanlon, Lew Lederman, Lynn Peterson, Joy Sommerfreund and Michele Wilson who served on the Registration Committee from September 2011 to August 2012.

**NCCM =** Non-Council Committee Member

\* STATUTORY COMMITTEE

## **Expanded Scope Activities**

- · Initiating Therapy (Smoking Cessation)
- · Renewing a Prescription
- · Adapting a Prescription
- Performing a Procedure on Tissue below the Dermis
- Administration of Inhalation for Demonstration
- · Administration of Injection for Demonstration

2011 & 2012

# MILESTONES

This section of OCP's Annual Report includes milestones from September 2011 to December 2012.

The milestones that follow were extrapolated from Council Reports previously published in the College's quarterly publication, Pharmacy Connection.

They appear in no particular order.

# COUNCIL WELCOMES NEW REGISTRAR

Council welcomed the new Registrar, Marshall Moleschi in September 2011. Marshall joined OCP from the College of Pharmacists of British Columbia, where he had served as Registrar since 2005. Marshall holds a Bachelor of Science in Pharmacy and a Master's of Health Administration. While in British Columbia, Marshall led the organization through a number of strategic initiatives, including the regulation of pharmacy technicians and an increased scope of practice for pharmacists, including the adaptation of prescriptions and the authorization to provide immunizations.

EXPANDED SCOPE OF PRACTICE

On October 9, 2012 the Minister of Health and Long-Term Care announced the much anticipated expanded scope of practice for pharmacists in Ontario. The new regulation outlined the parameters under which pharmacists are authorized to perform the following services for patients:

- Prescribed specified drug products for the purpose of smoking cessation
- Renew and adapt (alter dose, dosage form, regimen, or route of administration) prescriptions
- Perform a procedure on tissue below the dermis to support patient selfcare and chronic disease monitoring
- Administer, by injection or inhalation, the substances listed in the regulation for the purpose of education and demonstration
- Administer the publicly-funded influenza vaccine within the context of the Universal Influenza Immunization Program

Given the significance of the expanded scope, the College published a manual for pharmacists that outlines the

standards and requirements of the newly authorized acts. OCP also organized a series of orientation sessions for its membership. As well, the College released a public information brochure that outlines the new regulation and aims to assist pharmacists in explaining their expanded role to



patients. As part of the new expanded scope of practice, pharmacists participated in the UIIP and, by the end of 2012, had administered nearly 200,000 flu shots to Ontarians.

# SUPPORTING PRACTICE CHANGE

The Leslie Dan Faculty of Pharmacy at the University of Toronto established a program to support pharmacists' expanded scope of practice through an investment of \$200,000 per year over five years. The program includes a series of live and online workshops for members and a research component that will provide data to measure outcomes. Dr. Zubin Austin. Research Professor in Pharmacy Practice, at the University of Toronto, is leading the research program. Austin's preliminary results indicated that focused continuing education programs will help pharmacists develop some of the skills necessary to implement the expanded scope. To this end, the university established a project advisory group to determine further steps for research and education in 2013.

For the first time, pharmacists participated in the Universal Influenza Immunization Program (UIIP) and, by the end of 2012, had administered nearly 200,000 flushots to Ontarians.

Both physicians and pharmacists have important roles to play in optimizing medication management and educating patients.

## OCP PROFESSORSHIP IN PHARMACY INNOVATION **ESTABLISHED IN WATERLOO**

Dr. Nancy Waite was appointed as the new Professor in Pharmacy Innovation at the University of Waterloo. The new position will help support OCP's mandate and initiatives including changes to interdisciplinary practice and technology. Similar to the Pharmacy Practice Professorship at UofT in 2003, the position at uWaterloo includes research that directly supports the College's mandate and initiatives. Council felt that it was important for the College to support both Faculties of Pharmacy in the province in an equitable manner. Council supported the establishment of the professorship with a one-time gift of \$600,000 and a term of 20 years, with the expectation that there will be regular reports to College Council.

## **COLLABORATING WITH** CPSO, OMA AND OPA

As part of ongoing collaboration relating to pharmacists' expanded scope regulation, OCP - together with the College of Physicians and Surgeons of

Ontario (CPSO), the Ontario Pharmacists' Association (OPA) and the Ontario Medical Association (OMA) – developed a joint letter to all doctors and pharmacists in Ontario. The letter clarified certain aspects of the expanded scope regulation and stated that both physicians and pharmacists have important roles to play in optimizing medication management and educating patients on the importance of managing and maintaining their continuity

## **ENDOWMENT AWARD** IN HONOUR OF **DEANNA WILLIAMS**

In recognition of OCP's former Registrar Deanna Williams' contributions to the profession, Council approved the "Deanna Williams Award" in September 2011. The award, valued at \$1,000 per year, is granted to a fourth-year student in the University of Toronto's Leslie Dan Faculty of Pharmacy who demonstrates leadership and a commitment to continuous learning. Congratulations to the first recipient, Nadeem Remtulla.

## **COUNCIL ENDORSES RESPONSE TO DRUG** SUPPLY SHORTAGE

In response to drug supply shortages, the College has participated in regular stakeholder teleconferences conducted by the Emergency Management Branch of the Ministry of Health and Long-Term Care aimed at providing patients in Ontario with expedited access to medically necessary drugs while addressing patients' health and safety needs. Council agreed that the



College should emphasize the need for a coordinated response to minimize the effect of drug supply shortages on patients, and accordingly, endorsed the following recommendations\*:

- Federal, provincial and territorial collaboration for a national vision and action plan
- 2. Greater provincial oversight and coordination
- More incentives to guarantee supplies, and penalties for supply disruptions
- 4. Better inventory management practices by manufacturers
- More flexibility by distributors to share drugs in a shortage and redistribute medically necessary drugs for the benefit of patients requiring ongoing treatment
- Responsible practices by pharmacists including working in collaboration with physicians to identify priority patients and to share drugs that are in short supply

\*These recommendations were originally proposed by the Working Committee on Drug Shortages, a coalition of Quebec organizations, and endorsed by the National Association of Pharmacy Regulatory Authorities in spring 2012.

MODEL STANDARDS
OF PRACTICE
FOR CANADIAN
PHARMACY TECHNICIANS ADOPTED

College Council approved the adoption of the Model Standards of Practice for Pharmacy Technicians as developed through the National Association of Pharmacy Regulatory Authorities (NAPRA). The format adopted for these standards was drawn from that of the model standards developed for Canadian pharmacists but adjusted to reflect the technician's competencies.

## BRIDGING PROGRAM FOR INTERNATIONAL PHARMACY TECHNICIAN APPLICANTS APPROVED

An international pharmacy technician applicant who does not meet the transition pathway requirements (i.e. did not complete the Pharmacy Examining Board of Canada Evaluating Exam before January 1, 2012) must meet certain education requirements under the Registration Regulation (i.e. must have successfully completed a program that, at the time the applicant commenced it was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equivalent to a current graduate of a program accredited by the Canadian Council for Accreditation of Pharmacy Programs) in order to become registered. This is a non-exemptible requirement and accordingly, Council approved a bridging program for international applicants who are now beginning to explore registration

through this route.

Until a more comprehensive international bridging program is developed, the proposed program includes the existing four continuing education courses in the transition bridging

program, with the addition of the Orientation to the Canadian Health Care System course. These courses will provide international applicants with some additional education to support their transition to practice in Ontario. In addition to completing the bridging program, international applicants will be required to complete the full Structured Practical Training program, requiring a minimum of 12 weeks practice under the supervision of an approved preceptor, with completion of structured activities which include the independent double check exercise (for 500 prescriptions/ orders).

## APPROVAL OF TECHNOLOGY FOR USE AT A REMOTE DISPENSING LOCATION

In keeping with Council's position that the Ontario College of Pharmacists must retain the right of approval for all technology that enables the transmission of paper-based prescriptions through an automated pharmacy system located in a remote dispensing location, and based on the results of extensive testing conducted by a technology expert, Council passed a motion approving technology that is currently acceptable in meeting the expectations set out in sections 40 (4) and 29(d) of the regulations to the Drug and Pharmacies Regulation Act. Certificates of Accreditation that permit the operation of a remote dispensing location by an accredited pharmacy in Ontario will only be issued where the College is satisfied that the technology employed has been approved by Council and that all other standards have been met.



## **COUNCIL APPROVES** UNIVERSITY OF TORONTO COMBINED DEGREE **PROGRAM TRAINING** FOR INTERNSHIP

In December 2012, Council approved the combined BScPhm-PharmD program at the Leslie Dan Faculty of Pharmacy at the University of Toronto as meeting the requirement for internship training. The program allows pharmacy students in the BScPhm degree program the opportunity to continue their education and gain greater experience through the concurrent completion of a Doctor of Pharmacy degree. Established for a three-year time period, the program is restricted to those students who were already on track to complete their BScPhm. Students will complete one extra year of training in order to fulfill the requirements for both degrees. These students will have completed a total of 44 weeks of experiential training, compared to the 16 weeks of training completed by students in the current undergraduate BScPhm degree program.

## **COUNCIL APPROVES REVISED RULES OF** PROCEDURE FOR THE DISCIPLINE COMMITTEE

Following a comprehensive review of the College's Discipline Committee's current rules, the Committee recommended additions and amendments to the rules which will:

 Afford the Committee greater procedural flexibility, transparency and efficiency

- Provide greater procedural fairness to the parties (i.e. members and the College)
- Allow for smoother contested proceedings
- Provide procedural mechanisms with respect to reinstatement and s. 23(11) of the Health Professions Procedural Code ("Code") applications
- Provide protection to witnesses

The Revised Rules were approved by Council and will bring the College into closer alignment with some of the other health regulatory colleges (including the College of Physicians and Surgeons of Ontario and the College of Nurses of Ontario).

## **COLLEGE OPERATIONS**

In March 2012, Council developed and approved a new Strategic Plan for the College. The plan included a revised Mission Statement and Strategic Directions, and newly created Vision and Values. Council focused on the overriding mandate of the College - to protect the interests of the public.

Mission: 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:

1. Optimize the evolving scope of practice of our 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 coordinated patient-centred care and promote health and wellness.
- 4. Build and enhance relationships with key stakeholders, including the public, the government, our members, and other health care professionals.
- 5. Apply continuous quality improvement and fiscal responsibility in the fulfilment of our mission.

Following the March Council meeting, staff worked to develop a new Operational Plan with: short-term, intermediate and long-term outcomes for each strategic direction, KPI's (Key Performance Indicators) and financial resources for various activities. By the end of 2012, staff reported steady progress toward meeting the goals and objectives set out in the Strategic Plan.

## **POLICIES & GUIDELINES**

All policies and guidelines listed below can be found on the College's website.

## Policy on Protecting the Cold-Chain

An increasing number of medications require cold-chain protection and it is expected that the number of pharmaceuticals and biologics that require cold-chain monitoring will continue to increase over the next several years. Products that have not been maintained at the appropriate temperature and under the appropriate conditions are considered to be unsafe for use. The College developed a policy on Protecting the Cold-Chain that provides members with guidance on their obligations. The policy protects patient safety by ensuring that drugs and biological products that require temperature protection are received, stored and dispensed safely.

#### **Documentation Guidelines**

In order to provide members with clarity on the requirement to document

clinical care, the Professional Practice Committee made recommendations to update the Documentation Guidelines. The guideline takes into consideration the recent expanded scope of practice as well as members' obligations regarding scanning of written prescriptions.

## Record Retention, Disclosure and Disposal Guideline

As personal health information custodians, pharmacists are required to collect, use and disclose personal health information as required by by-law and to implement safeguards to protect the information they collect. The guideline, which is similar to those in place at other professional health colleges in Ontario, pertains specifically to the requirements established in the Personal Health Information Protection Act, 2004 (PHIPA).

## Guideline on Maintaining Appropriate Boundaries and Preventing Sexual Abuse and Harassment

The guideline was created to provide members with clear direction regarding what constitutes sexual abuse and harassment. As regulated health professionals, members are prohibited from initiating sexual relationships with patients and are required to maintain professional boundaries. Sexual abuse is considered to be an act of professional misconduct for which the penalty is mandatory license revocation for five years. The definition for sexual abuse, as found in the Health Professions Procedural Code. is as follows: (a) sexual intercourse or other forms of physical sexual relations between the member and the patient, (b) touching, of a sexual nature, of the patient by the member, or (c) behaviour or remarks of a sexual nature by the member towards the patient. Further provisions regarding the treatment of spouses by health care professionals under the Regulated Health Professions Act, 1991 (RHPA) will likely be made in the coming year.

## Guideline on Dispensing Components Included in the Usual and Customary Fee

As the function of the pharmacist moves beyond the traditional role of compounding and dispensing medication, pharmacists will be able to charge a fee for services that are not directly linked to dispensing a prescription. The College previously passed a policy on "Fees for Professional Pharmacy Services" and has now defined the services that are directly linked to dispensing a prescription.





# **2011 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, 2011, the summary statement of operations and summary statement of changes in 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, 2011. We expressed an unmodified audit opinion on those financial statements in our report dated March 4, 2012.

The summary financial statements do not contain all the disclosures required by Canadian generally accepted accounting principles. 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 generally accepted accounting principles.

#### 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, 2011 are a fair summary of those financial statements, in accordance with Canadian generally accepted accounting principles.

Toronto, Ontario March 4, 2012

Clarke Derming LLP CHARTERED ACCOUNTANTS Licensed Public Accountants

## **SUMMARY BALANCE SHEET**

## AS AT DECEMBER 31, 2011

	2011	2010
ASSETS		
Current assets		
Cash and cash equivalents	\$ 5,741,127	\$ 5,297,698
Accounts receivable and cost recoveries	46,282	53,867
Prepaid expenses	130,007	80,299
	5,917,416	5,431,864
Capital assets	4,402,613	4,662,266
	10,320,029	10,094,130
<b>LIABILITIES</b> Current liabilities Accounts payable and accrued liabilities	1,361,407	1,833,598
NET ASSETS  Net assets invested in capital assets  Unrestricted net assets	4,402,613	4,662,267
Onrestricted net assets	4,556,009	3,598,265
	8,958,622	8,260,532
	\$ 10,320,029	\$ 10,094,130



## SUMMARY STATEMENT OF OPERATIONS

## YEAR ENDED DECEMBER 31, 2011

	Budget 2011	2011	2010
	(Unaudited)		
Revenues			
Member fees - Pharmacists	\$ 7,252,000	\$ 7,462,843	\$ 7,192,382
Member fees - Pharmacy Technicians	180,000	105,600	52,400
Pharmacy fees	3,128,650	3,360,790	3,261,005
Registration fees and income	1,401,750	1,552,302	1,250,127
Investment income	15,000	90,144	45,268
	11,977,400	12,571,679	11,801,182
Expenses			
Council and committees	2,807,995	2,328,398	2,259,055
Administration	8,664,642	8,950,652	7,914,112
Property	120,210	160,018	241,161
	11,592,847	11,439,068	10,414,328
Excess of revenues over expenses from operations			
for the year before depreciation	384,553	1,132,611	1,386,854
Depreciation	-	434,521	507,825
Excess of revenues over expenses for the year	\$ 384,553	\$ 698,090	\$ 879,029

## SUMMARY STATEMENT OF CHANGES IN NET ASSETS

## YEAR ENDED DECEMBER 31, 2011

	Invested in Capital Assets	Unrestricted	2011	2010
Balance - at beginning of year	\$ 4,662,267	\$ 3,598,265	\$ 8,260,532	\$ 7,381,503
Excess (deficiency) of revenues over expenses for the year	(434,521)	1,132,611	698,090	879,029
Inter fund transfers representing: Purchase of capital assets	174,867	(174,867)	-	-
Balance at end of year	\$ 4,402,613	\$ 4,556,009	\$ 8,958,622	\$ 8,260,532

Full financial reports are available upon request.



# **2012** 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 (the "College"), which comprise the summary balance sheet as at December 31, 2012 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, 2012. We expressed an unmodified audit opinion on those financial statements in our report dated March 18, 2013.

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, 2012 are a fair summary of those financial statements, in accordance with Canadian accounting standards for not for profit organizations.

Toronto, Ontario March 18, 2013

Clarke Derning LLP CHARTERED ACCOUNTANTS Licensed Public Accountants

## **SUMMARY BALANCE SHEET**

## AS AT DECEMBER 31, 2012

	2012	2011
ASSETS		
Current assets		
Cash and short-term investments	\$ 2,984,095	\$ 5,741,127
Accounts receivable and cost recoveries	120,569	46,280
Prepaid expenses	119,594	130,007
	3,224,258	5,917,414
Long term investments	4,000,000	-
Property and equipment	4,522,294	4,402,613
	11,746,552	10,320,027
Current liabilities  Accounts payable and accrued liabilities	964,506	906,477
NET ASSETS		
Net assets invested in property and equipment Internally restricted	4,522,294	4,402,613
Investigations and hearings reserve fund	1,500,000	-
Contingency reserve fund	3,000,000	-
Fee stabilization fund	600,000	-
Unrestricted	1,159,752	5,010,937
	10,782,046	9,413,550
	\$ 11,746,552	\$ 10,320,027

## SUMMARY STATEMENT OF OPERATIONS AND NET ASSETS

## YEAR ENDED DECEMBER 31, 2012

	2012	2011
Revenues		
Member fees Pharmacists	\$ 7,779,683	\$ 7,462,843
Member fees Pharmacy Technicians	381,650	105,600
Pharmacy fees	3,431,294	3,360,790
Registration fees and income	1,498,805	1,552,302
Investment and other income	222,369	90,144
	13,313,801	12,571,679
Expenses		
Council and committees	2,292,893	2,551,854
Administration	9,216,029	8,950,652
Property	117,303	160,018
	11,626,225	11,662,524
Excess of revenues over expenses from operations for		
the year before depreciation	1,687,576	909,155
Depreciation	319,080	434,521
Excess of revenues over expenses for the year	1,368,496	474,634
Net assets at beginning of year	9,413,550	8,938,916
Net assets at end of year	\$ 10,782,046	\$ 9,413,550

Full financial reports are available upon request.

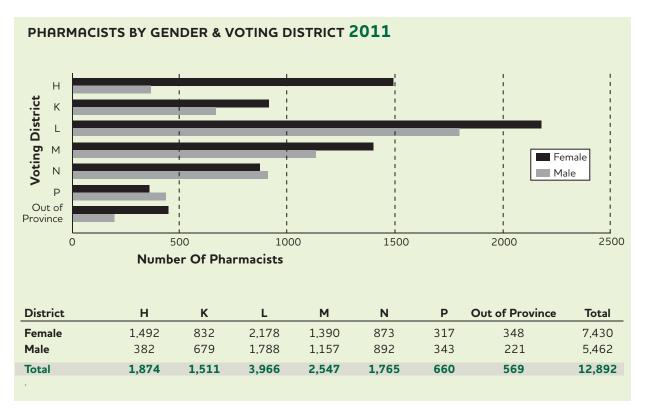


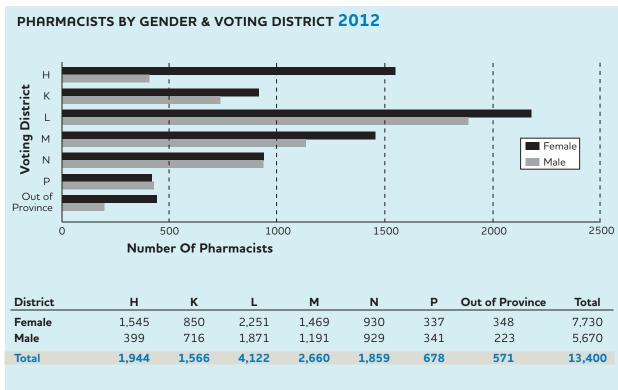


and January 1, 2012 - December 31, 2012

This special edition of OCP's Annual Report includes Member Statistics from both the 2011 (shown in green) and 2012 (shown in blue) calendar years.

## PHARMACISTS BY GENDER & VOTING DISTRICT





2011: Part A of the Register: 12,088
Part B of the Register: 804
12,892

2012: Part A of the Register: 12,592
Part B of the Register: 808
13,400

## PHARMACY TECHNICIANS BY GENDER & VOTING DISTRICT

# PHARMACY TECHNICIANS BY GENDER & VOTING DISTRICT **2011**

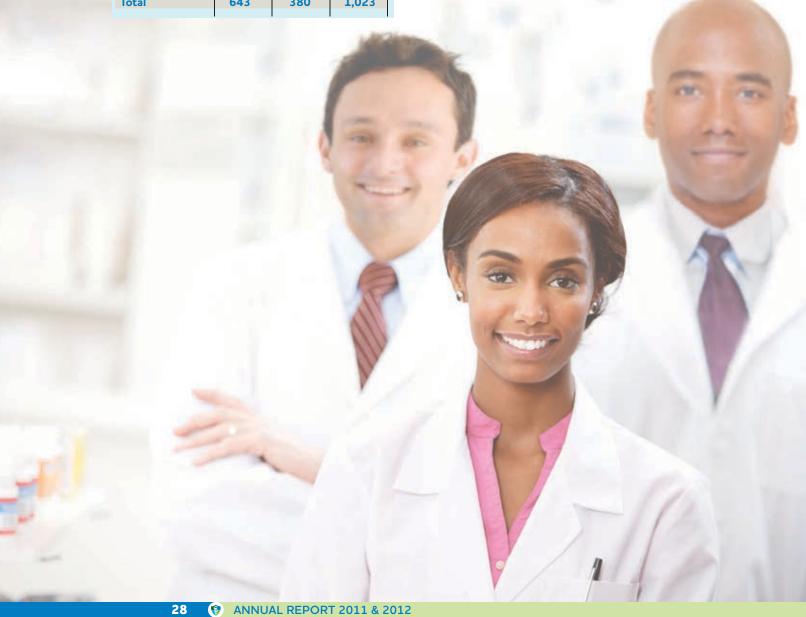
District	Т	TH	Total
Female	261	146	407
Male	11	7	18
Total	272 153		425 <sup>,</sup>

# PHARMACY TECHNICIANS BY GENDER & VOTING DISTRICT 2012

District	Т	TH	Total
Female	612	363	975
Male	31	17	48
Total	643	380	1,023

T = Registered Pharmacy Technician

TH = Registered Pharmacy Technician
Practicing at a Hospital



## ADDITIONS TO THE REGISTER

## **PHARMACISTS**

	Female		Female Male		Totals	
	2011	2012	2011	2012	2011 Total	2012 Total
Ontario	159	155	94	101	253	256
Other Provinces	53	50	17	21	70	71
Total in Canada	212	205	111	122	232	327
United States	27	25	20	26	47	51
Other Countries	206	205	153	174	359	379
Total Out of Country	233	230	173	200	406	430
Re-Registered	2	0	0	0	2	0
Total New Additions	447	435	284	322	731	757

## **PHARMACY TECHNICIANS**

	Female		Ma	le	Total	s
	2011	2012	2011	2012	2011 Total	2012 Total
Ontario	305	570	13	30	318	600
Other Provinces	0	0	0	0	0	0
Total in Canada	305	570	13	30	318	600

## **DELETIONS FROM THE REGISTER**

## **PHARMACISTS**

	Female		Female Male		Totals	
	2011	2012	2011	2012	2011 Total	2012 Total
Cancellations	15	12	11	14	26	26
Deceased	4	8	10	4	14	12
Resignations	107	114	83	102	190	216
Revoked	0	0	0	0	0	0
Suspended	0	0	1	0	1	0
Total Deletions	126	134	105	120	231	254

## **PHARMACY TECHNICIANS**

	Female		Female Male		Tota	ls
	2011	2012	2011	2012	2011 Total	2012 Total
Cancellations	0	2	0	0	0	2
Deceased	0	0	0	0	0	0
Resignations	0	1	0	0	0	1
Revoked	0	0	0	0	0	0
Suspended	0	3	0	0	0	3
Total Deletions	0	6	0	0	0	6

## PHARMACISTS BY EMPLOYMENT TYPE

PHARMACISTS 2011							
Employment Type	Community Pharmacy	Hospital and Other Health Care Facility	Association/ Academia/ Government	Industry/ Other	Pharmacy Corp Office/ Professional Practice/ Clinic	Retired/ Unemployed	Total
Community Practice in Ontario	8,573	99	219	241	90	1,227	10,449
Hospital Practice in Ontario	7	1,866	1	0	0	0	1,874
Total in Ontario	8,580	1,965	220	241	90	1,227	12,323
In Other Provinces	74	18	11	24	1	95	233
In the United States	55	41	14	37	2	84	233
In Other Countries	21	22	8	21	1	40	113
Total Outside Ontario	150	81	33	82	4	219	569
Grand Total	8,730	2,046	253	323	94	1,446	12,892

PHARMACISTS 2012							
Employment Type	Community Pharmacy	Hospital and Other Health Care Facility	Association/ Academia/ Government	Industry/ Other	Pharmacy Corp Office/ Professional Practice/ Clinic	Retired/ Unemployed	Total
Community Practice in Ontario	8,771	99	222	266	95	1,432	10,885
Hospital Practice in Ontario	13	1,926	3	1	1	0	1,944
Total in Ontario	8,784	2,025	225	267	96	1,432	12,829
In Other Provinces	61	22	8	21	1	104	216
In the United States	51	37	15	40	2	81	226
In Other Countries	31	22	12	17	1	45	129
Total Outside Ontario	143	81	35	78	4	230	571
Grand Total	8,927	2,106	260	345	100	1,662	13,400



## PHARMACY TECHNICIANS BY EMPLOYMENT TYPE

PHARMACY TECHNICIANS	HARMACY TECHNICIANS 2011									
Employment Type	Community Pharmacy	Hospital and Other Health Care Facility	Association/ Academia/ Government	Industry/	Pharmacy Corp Office/ Professional Practice/ Clinic	Retired/ Unemployed	Total			
Community Practice in Ontario	255	0	12	1	2	19	289			
Hospital Practice in Ontario	0	136	0	0	0	0	136			
Total in Ontario	255	136	12	1	2	19	425			

PHARMACY TECHNICIANS	PHARMACY TECHNICIANS 2012								
Employment Type	Community Pharmacy	Hospital and Other Health Care Facility	Association/ Academia/ Government	Industry/ Other	Pharmacy Corp Office/ Professional Practice/ Clinic	Retired/ Unemployed	Total		
Community Practice in Ontario	549	3	19	7	1	64	643		
Hospital Practice in Ontario	2	377	0	0	0	1	380		
Total in Ontario	551	380	19	7	1	65	1,023		

## **REGISTERED STUDENTS AND INTERNS**

## **REGISTERED STUDENT AND INTERN (PHARMACISTS)**

1	Fer	male	M	Male		
	2011	2012	2011	2012	2011 Total	2012 Total
Ontario Students	724	690	469	464	1193	1,154
Ontario Interns	53	88	37	36	90	124
Total in Ontario	777	778	506	500	1,283	1,278
Other Province Students	8	5	3	1	11	6
Other Province Interns	7	8	3	2	10	10
Total in Other Provinces	15	13	6	3	21	16
Canada Total	792	791	512	503	1,304	1,294
International Students	157	54	106	48	263	102
International Interns	49	45	39	25	88	70
Total International	206	99	145	73	351	172*
USA Students	0	6	3	6	3	12
USA Interns	14	13	11	12	25	25
Total USA	14	19	14	18	28	37
Other Countries Total	220	118	159	91	379	209
Grand Total	1,012	909	671	594	1,683	1,503

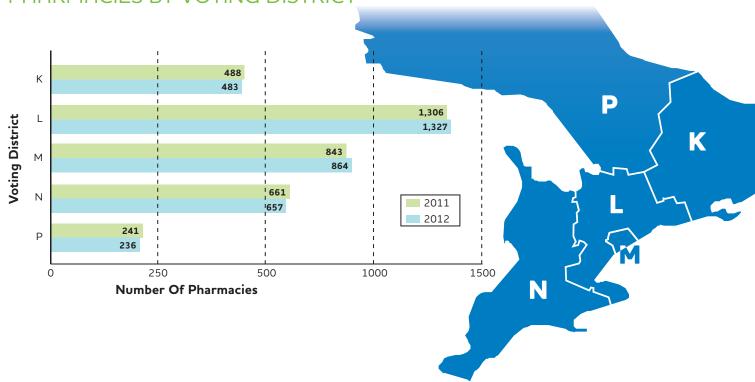
<sup>\*</sup> The decrease in international students and interns may be due to recent changes in OCP's entry to practice regulations and/or implementation of labour mobility provisions.

# PHARMACY

January 1, 2011 - December 31, 2011 and January 1, 2012 - December 31, 2012

This special edition of OCP's Annual Report includes Pharmacy Statistics from both the 2011 (shown in green) and 2012 (shown in blue) calendar years.

## PHARMACIES BY VOTING DISTRICT



District	K			L	N	4		N		P	2011 Total	2012 Total
	2011	2012	2011	2012	2011	2012	2011	2012	2011	2012		
	488	483	1,306	1,327	843	864	661	657	241	236	3,539	3,567

## **ACCREDITED PHARMACIES**

## **INDEPENDENT AND CHAIN PHARMACIES**

As of December 31, 2011 = 3,539 As of December 31, 2012 = 3,567

	ı	
	2011	2012
Small Chain (3 - 14 stores)	55 (2%)	97 (3%)
Large Chain (15+ stores)	855 (24%)	841 (24%)
Franchise or Banner (15+ stores)	956 (27%)	979 (27%)
Independently Owned	1,673 (47%)	1,650 (46%)
	ı	

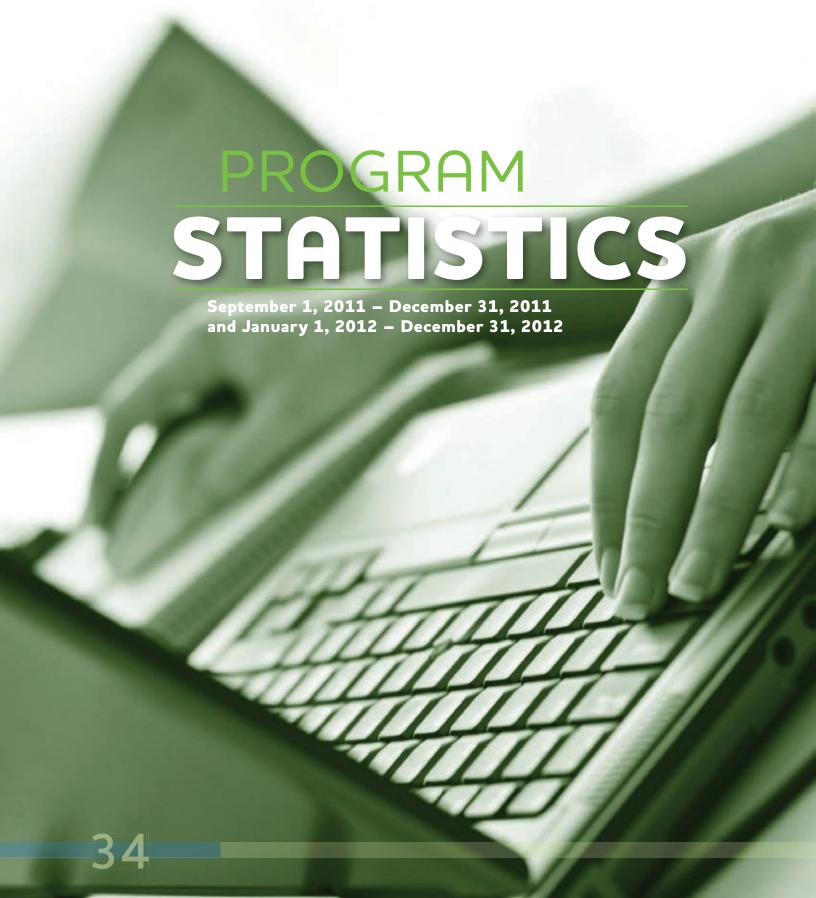
## **PHARMACY STATISTICS**

2011	2012
151	199
36	161*
261	233
53	58
8	8
	151 36 261

<sup>\*</sup> The number of closings in 2012 is higher than usual due to the closings of Zellers stores in Canada. We expect that the number of new pharmacies in Target stores in 2013 will offset the high number of closings in 2012.



This special edition of OCP's Annual Report includes Program Statistics for all of 2012 and part of 2011 (September to December). The College's future Annual Reports will include Program Statistics from the previous calendar year only.



## DISCIPLINE CASE SUMMARIES

## September 1, 2011 - December 31, 2012

## **DISCIPLINE HEARINGS**

September 1, 2011 - December 31, 2011

- 13 discipline hearings outstanding from prior years (as at December 31, 2011)
- 4 referrals to the Discipline Committee
- 4 discipline hearings concluded

January 1, 2012 - December 31, 2012

- 15 discipline hearings outstanding from prior years (as at December 31, 2012)
- 15 referrals to the Discipline Committee
- 10 discipline hearings concluded
- 15 discipline hearings in progress as of January 1, 2013

## DISCIPLINE CASE SUMMARIES

The following is a summary of the discipline hearings held between September 2011 and December 2012. In total there were 15 hearings held before panels of the Discipline Committee. Eleven hearings proceeded by way of an Agreed Statement of Facts and Joint Submission on Penalty. Four hearings proceeded without an Agreed Statement of Facts and Joint Submission on Penalty or in the absence of the member or legal representation. The penalty ordered always includes a "reprimand" which is administered in public, but only after the final decision and full reasons have been issued.

## September 1, 2011 - December 31, 2011

Hearing date: Member name: Referring committee: Russell Foster **ICRC** September 8, 2011

Remediation ordered: ProBE Program

**Suspension ordered:** 3 months (1 remitted)

Costs ordered: \$3,500 to the College

Summary: The Member was found guilty of professional misconduct related to the misappropriation of drug products, including prescription drug products, from the pharmacy, as well as placing drug products, including prescription drug products, that had previously been prescribed and/or dispensed, into pharmacy stock.

## REMEDIATION LEGEND

Offered by the International Pharmacy Graduate Program at the Leslie Dan Faculty of Pharmacy, **University of Toronto:** 

APPL Advanced Professional Practice

**BPPL** Basic Professional Practice Labs

LL 2, 4, 7 Law Lessons

Offered by the Ontario College of Pharmacists:

JP Jurisprudence Seminar and Exam

Offered by the Centered for Personalized **Education for Physicians:** 

**ProBE** Professional/Problem Based Ethics

Offered by the Institute for Safe **Medical Practices:** 

**RCA** Root Cause Analysis Seminar

Other:

Ethics:

a course in ethics for professionals acceptable to the Registrar

Mentorship:

regular meetings with a practice mentor acceptable to the College

Inspections:

regular monitoring inspections of the member's practice

Hearing date: Member name: Referring committee:

November 22, 2011 Gary Chin **ICRC** 

Remediation ordered: N/A

Suspension ordered: The Panel ordered revocation of Mr. Chin's Certificate of Registration, effective

November 22, 2011.

Costs ordered: N/A

Summary: The Member was found guilty of professional misconduct. The allegations of professional misconduct against Mr. Chin arose as a result of his failure to comply with a prior Order of the Discipline Committee dated June 15, 2009. The hearing proceeded in the absence of the Member. The Panel accepted that, from a policy perspective, it is important that members of the profession facing disciplinary proceedings appreciate that they cannot simply resign in an effort to avoid the consequence of their actions, which would seriously undermine public confidence in the profession.

Hearing date: Member name: Referring committee:

November 29, 2011 Samia Botros **ICRC** 

Remediation ordered: Root Cause Analysis seminar (including any evaluation)

**Suspension ordered:** 3 months (1 remitted)

Costs ordered: \$2,500 to the College

Summary: The Member was found guilty of professional misconduct related to failure to appoint a Designated Manager to manage the pharmacy as well as to provide complete and accurate directions for use of drugs.

Hearing date: Member name: Referring committee:

December 20, 2011 Trevor Wrightman\* **ICRC** 

Remediation ordered: N/A

Suspension ordered: Resigned permanently as a member of the College, irrevocably surrendered his certificate of registration and does not now own or at any time in the future will acquire any ownership interest in any pharmacy in the Province of Ontario.

Costs ordered: \$12,500.00 as an ex gratia payment to the Minister of Finance and \$3,000.00 to the College for costs.

Summary: The Member failed to meet the conditions of the Meds Check program when billing for services in relation to the program and falsifying program forms.

#### January 1, 2012 – December 31, 2012

Hearing date: Member name: Referring committee:

February 27, 2012 Jerry Malkin\* **ICRC** 

Remediation ordered: N/A

Suspension ordered: Resigned permanently as a member of the College, irrevocably surrendered his certificate of registration and will not have, keep or acquire, now or at any time in the future, any ownership interest, direct or indirect, controlling or otherwise, in any pharmacy in the Province of Ontario.

**Costs ordered:** \$7,000 to the College.

Summary: The Member dispensed Schedule 1 and/or Schedule F drugs, controlled drugs, narcotics, and/or targeted substances without a prescription and/or proper authorization.

Hearing date: Member name: Referring committee:

March 2, 2012 Peter Jarcew\* ICRO

Remediation ordered: N/A

**Suspension ordered:** Resigned permanently as a member of the College, irrevocably surrendered his certificate of registration and will not have, keep or acquire, now or in the future, any ownership interest, direct or indirect, controlling or otherwise, in any pharmacy in the Province of Ontario.

Costs ordered: N/A

**Summary:** The Member was found guilty of an offence relevant to the Member's suitability to practise, in particular sexual assault contrary to section 271 of the Criminal Code of Canada.

Hearing date: Member name: Referring committee:

March 22, 2012 Sammy Agudoawu ICRC

Remediation ordered: N/A
Suspension ordered: N/A

Costs ordered: N/A

**Summary:** This individual applied to the Discipline Committee for reinstatement of his certificate of registration. The application was heard and was dismissed.

Hearing date: Member name: Referring committee:

March 29, 2012 Ihab Ibrahim and Ashraf Hanna ICRC

Remediation ordered: Mr. Ibrahim: The ISMP Root Cause Analysis course; OPA Workshop on Confronting

Medication Incidents; ProBE; College's Jurisprudence seminar and evaluation

Suspension ordered: Mr. Ibrahim: 5 months (1 remitted)

Costs ordered: Mr. Ibrahim \$25,000

**Summary:** The allegations of professional misconduct against Mr. Hanna were withdrawn. A Panel of the Discipline Committee found Mr. Ibrahim guilty of professional misconduct. The allegations of professional misconduct against Mr. Ibrahim related to a dispensing error and falsification of a record.

Hearing date: Member name: Referring committee:

April 11, 2012 Gregory Melville ICRC

Remediation ordered: N/A

Suspension ordered: Direction given to the Registrar to immediately revoke the Member's Certificate of

Registration

Costs ordered: \$15,000

**Summary:** A Panel of the Discipline Committee found the Member guilty of professional misconduct. The Member dispensed and sold narcotics for an improper purpose, and was criminally convicted of trafficking a narcotic.

<sup>\*</sup>Motion - a request made to the Discipline Committee to make an order in a particular proceeding

Referring committee: Hearing date: Member name:

June 6, 2012 Yasmin Virji **ICRC** 

Remediation ordered: ProBE

Suspension ordered: 7 months (1 remitted)

Costs ordered: \$7,500

Summary: A Panel of the Discipline Committee found the Member guilty of professional misconduct. The Member engaged in long-term unauthorized dispensing in the form of fraudulent prescriptions that she submitted for reimbursement but did not actually dispense, as well as engaging in other unauthorized dispensing practices, including dispensing drugs to self-prescribing physicians and their family members.

Hearing date: Member name: Referring committee:

June 14, 15, 20 and 21, 2012 Mohamed Hanif **ICRC** 

Remediation ordered: ProBE

Suspension ordered: Directing the Registrar to revoke the Member's Certificate of Registration; the penalty order for the revocation is suspended in effect, or stayed, pending the disposition of the application regarding the Member's constitutional challenge.

Costs ordered: N/A

Summary: A Panel of the Discipline Committee found the Member quilty of professional misconduct. The allegations of professional misconduct against the Member related to sexual abuse of a patient and failing to maintain the professional boundaries of the pharmacist-patient relationship.

Hearing date: Member name: Referring committee:

November 9, 2012 Marianne Songgadan **ICRC** 

Remediation ordered: ProBE

Suspension ordered: N/A

Costs ordered: N/A

Summary: A Panel of the Discipline Committee found the Member guilty of professional misconduct. The member was found guilty of use and/or disclosure of health information.

Hearing date: Member name: Referring committee:

November 15, 2012 Samuel Shek\* **ICRC** 

Remediation ordered: N/A

Suspension ordered: The Member 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.

Costs ordered: N/A

Summary: The Member submitted insurance claims for drugs and other products as though those drugs and other products had been prescribed when no prescriptions had been provided, he dispensed Schedule I/ Schedule F drugs without authorization, and failed to keep records.

Hearing date:

Member name:

Referring committee:

November 29, 2012

Mohamed Hanif\*

**ICRC** 

Remediation ordered: N/A

Suspension ordered: N/A

Costs ordered: N/A

**Summary:** The Attorney General for the province of Ontario (AG) sought reconsideration of the Discipline Committee's June 21, 2012 decision. At a motion held on November 29, 2012, a Panel of the Discipline Committee determined that the AG had standing and the Discipline Committee had jurisdiction to hear the reconsideration motion. Therefore, the reconsideration motion was scheduled to be heard December 12, 2012.

Hearing date:

Member name:

Referring committee:

December 12, 2012

Mohamed Hanif\*

**ICRC** 

Remediation ordered:

Suspension ordered:

Costs ordered:

Summary: The panel reserved making its final decision.

\*Motion - a request made to the Discipline Committee to make an order in a particular proceeding

The full text of these decisions is available at www.canlii.org
CanLii is a non-profit organization managed by the Federation of Law Societies of Canada.
CanLii's goal is to make Canadian law accessible for free on the Internet.



# INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

**September 1, 2011 - December 31, 2011** and January 1, 2012 - December 31, 2012

## **DISPOSITION AND OUTCOMES**

	Sept 1, 2011 – Dec 31, 2011	Jan 1, 2012 – Dec 31, 2012
Referral to discipline	4	15
Oral caution	6	31
Written caution	4	25
Reminder	14	46
Take no action	30	96
Frivolous and vexatious	0	1
Referral to Fitness to Practice Committee	0	2
Specified Continuing Education		
and Remedial Program	2	21
Undertaking	4	9
Extension denied	0	2
Withdrawn	3	2
Referral to Health Inquiry Panel	2	0

## **ISSUES**

	Sept 1, 2011 – Dec 31, 2011	Jan 1, 2012 – Dec 31, 2012
Billing	14	18
Confidentiality	0	6
Dispensing Error	16	57
Health	2	8
Standards of Practice	5	36
Communication	14	64
Records Keeping	2	5
Criminal	0	0
75(a) all other	6	57

## **ACTIVE INVESTIGATIONS**

	Sept 1, 2011 – Dec 31, 2011	Jan 1, 2012 – Dec 31, 2012
Complaints filed with the College	41	335
Registrar's Inquiries	5	85
Health Inquiries	0	6



## **COMPLIANCE MONITORING**

This represents the number of members who were actively monitored by the I&R Department during the specified periods.

	Sept 1, 2011 – Dec 31, 2011	Jan 1, 2012 – Dec 31, 2012
Order of the Discipline Committee Undertaking to the College Specified Continuing Education and Remedial Program (SCERP) Order of the Fitness to Practice Committee	20 1 2 0	16 9 21 2

## HEALTH PROFESSIONS APPEAL AND REVIEW BOARD (HPARB)\*

	Sept 1, 2011 – Dec 31, 2011	Jan 1, 2012 – Dec 31, 2012
Reviews Pending	1	5
Requests for Review During Reporting Period		
By Member	1	3
By Complainant	2	3
Matters reviewed by HPARB during reporting period	5	5
Decisions pending from current year	3 (Sept 1 – Dec 31, 2011)	3 (Jan 1 – Dec 31, 2012)
Decisions pending from previous years	7 (Jan 1- Aug 31, 2011)	5 (Jan 1 - Dec 31, 2011)
Decisions received	4	6
Appeal granted	0	0
Decision upheld	4	5
Referred back to panel	0	0
Decision withdrawn	0	1

<sup>\*</sup> The Health Professions Appeal and Review Board (HPARB) is an independent adjudicative agency.

- it conducts reviews and hearings of orders of the Registration Committees of the Colleges; and
- it holds hearings concerning physicians' hospital privileges under the Public Hospitals Act.

On request, • it reviews decisions made by the Complaints Committees of the self-regulating health professions Colleges in Ontario

# **QUALITY ASSURANCE**

September 1, 2011 - December 31, 2011 and January 1, 2012 - December 31, 2012

## PEER REVIEW 2011

## **OUTCOME BY GRADUATION DATE FOR THE** 117 NEW RANDOMLY SELECTED CANDIDATES

Years since graduation	Number of pharmacists	Number entered peer-guided learning	Percentage who entered peer- guided of age group's total
6-15	20	0	0
16-25	36	0	0
More than 25	61	9	14.8

## **OUTCOME BY PLACE OF PRACTICE FOR THE 117 NEW RANDOMLY SELECTED CANDIDATES**

Place of practice		Number entered peer-guided learning	Percentage who entered peer- guided of place of practice total
Community	84	9	10.7
Hospital	21	0	0
Unemployed	6	0	0
Other	6	0	0

## **OUTCOME BY LOCATION OF GRADUATION FOR THE 117 NEW RANDOMLY SELECTED CANDIDATES**

Location	Number of pharmacists		Percentage who entered peer-guided of location of graduation total
Canada	71	3	4.2
U.S.A.	9	1	11.1
International	37	5	13.5

Each year approximately two to three per cent of Part A pharmacists are randomly selected to participate in Phase II of the Practice Review, the Peer Review. In addition, pharmacists referred from Registration 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 Follow Up and Communication Skills. Over the last five years, 90 per cent of pharmacists were successful, requiring only self-directed professional development on their first assessment.

## PEER REVIEW 2012

## OUTCOME BY GRADUATION DATE FOR THE **253 NEW RANDOMLY SELECTED CANDIDATES**

Years since graduation	Number of pharmacists	Number entered peer-guided learning	Percentage who entered peer- guided of age group's total
6-15	38	0	0
16-25	85	1	1.2
More than 25	130	19	14.6

## **OUTCOME BY PLACE OF PRACTICE FOR THE 253 NEW RANDOMLY SELECTED CANDIDATES**

Place of practice		Number entered peer-guided learning	Percentage who entered peer- guided of place of practice total
Community	201	18	9.0
Hospital	34	1	2.9
Unemployed	8	0	0
Other	10	1	10

## **OUTCOME BY LOCATION OF GRADUATION FOR THE 253** NEW RANDOMLY SELECTED CANDIDATES

Location	Number of pharmacists	Number entered peer-guided learning	Percentage who entered peer-guided of location of graduation total
Canada U.S.A.	157 19	6 1	3.8 5.3
International	77	13	16.9

# INSPECTION/ACCREDITATION **COMMITTEE SUMMARY**

September 1, 2011 - December 31, 2011 and January 1, 2012 - December 31, 2012

## INSPECTIONS SUMMARY

Inspection Type	Sept 1, 2011 -	Jan 1, 2012 -
	Dec 31, 2011	Dec 31, 2012
Level 0		
New Openings	47	202
Total Level 0	47	202
Level I		
Acquisitions	63	212
Relocations	11	58
Call Backs	45	184
Practice Reviews	128	661
Complaints Order		
Discipline Order		
Total Level I	247	1,115
Level II		
Re-inspections-Inspector	52	87
Total Level II	52	87
Level III and above		
Re-inspections-Accreditation	7	9
Total Level III and above	7	9
Grand Total Inspection Type	353	1,413

## **INSPECTION RESULTS**

	Sept 1, 2011 - Dec 31, 2011	Jan 1, 2012 - Dec 31, 2012
Satisfactory Issues Identified	11 300	114 1, 189
Total	311	1,303
Level II Re-inspection ordered by Inspector Referred to Accreditation Committee Report to Accreditation Committee Re-inspection Replaced	29 7 1 1	92 9 9 0
Total Further Action Required	42	110
Grand Total Inspection Results	353	1,413

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 (and above) inspections ordered by 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. Options that are available to the inspector at the conclusion of the inspection are:

- Satisfactory inspection concluded
- Issues identified action plan required, inspection not concluded
- o Level II Re-inspection ordered by Inspector - action plan required, inspection not concluded
- Referred to Accreditation Committee action plan required, Committee decision
- Report to Accreditation Committee action plan required, Committee decision
- Re-inspection Replaced cancelled due to closure or sale

## ACCREDITATION COMMITTEE: SUMMARY OF FILES REVIEWED

There were a total of 18 pharmacy files reviewed between January 2012 and December 2012. A pharmacy file might be reviewed more than once in a year.

		Sept 1, 2011 -	Jan 1, 2012 -
		Dec 31, 2011	Dec 31, 2012
Decisions			
	Concluded	2	14
	Total Concluded	2	14
Re-inspections			
	Level V	0	0
	Level IV	0	2
	Level III	1	6
	Total Re-inspections	1	8
Referrals			
	To Discipline	0	0
	To Executive	0	0
	Referral Withdrawn	0	0
	Total Referrals	0	0
Other			
Deferred/Fi	urther Information Required	0	1
	Follow up required	0	1
	Total Other	0	2

# REGISTRATION PANEL STATISTICS

## September 1, 2011 - December 31, 2011 and January 1, 2012 - December 31, 2012

	Sept 1, 2011 - Dec 31, 2011	Jan 1, 2012 - Dec 31, 2012
Requests considered by Panels of the Registration Committee	90	135
Granted registration either partially or completely	73	121
Denied	12	11
Deferred	2	3
Withdrawn	3	0
Appeals to the Health Professions Appeal and Review Board	2*	2

\*One appeal was withdrawn and one appeal is ongoing.



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.



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