



Ontario College  
of Pharmacists

# 2015 ANNUAL REPORT



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## CONTENTS

Registrar's Message . . . . .	4
President's Message . . . . .	5
College Council . . . . .	6
Special Feature: Strategic Framework 2015-2018. . . . .	8
College Committees . . . . .	10
<b>Picture of the Profession . . . . .</b>	<b>12</b>
<b>Registering Qualified Practitioners . . . . .</b>	<b>14</b>
Special Feature: Continued Commitment to Transparency . . . . .	20
<b>Ensuring Competent Practitioners . . . . .</b>	<b>22</b>
Special Feature: Practice Assessments . . . . .	29
Special Feature: Code of Ethics . . . . .	30
<b>Supporting Pharmacy Practice. . . . .</b>	<b>32</b>
<b>Assessing Pharmacies . . . . .</b>	<b>36</b>
Special Feature: Hospital Pharmacy Baseline Assessments . . . . .	42
<b>Investigating and Resolving Complaints . . . . .</b>	<b>44</b>
<b>Discipline and Health Monitoring . . . . .</b>	<b>50</b>
Special Feature: Communicating with Patients and Practitioners . . . . .	56
<b>Remaining Fiscally Responsible . . . . .</b>	<b>60</b>
Appendix A: Discipline Case Summaries . . . . .	66



Ontario College  
of Pharmacists

Putting patients first since 1871



# ABOUT THE COLLEGE

## About us

The Ontario College of Pharmacists is the regulator for the profession of pharmacy in Ontario. We serve and protect the public and hold Ontario's pharmacy professionals accountable to the established [Standards of Practice](#), [Code of Ethics](#), [legislation](#), [policies](#) and [guidelines](#) that are relevant to pharmacy practice. We also ensure that pharmacies within the province meet the required standards for operation.



### OUR MISSION

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

### OUR VISION

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

### OUR VALUES

- o Transparency
- o Accountability
- o Excellence

## 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](#).



# REGISTRAR'S MESSAGE

Each spring, the College produces an annual report highlighting our work and trends from the previous calendar year. This year, as I looked over the report in preparation to write my annual message, I couldn't help but take note of the number of important initiatives the College has been engaged in that support our commitment to our mandate of serving and protecting the public interest.

Inside this report you will find information about many of these initiatives. The objective behind our work is clear and consistent with the Ministry's *Patients First: Action Plan for Healthcare* – “put people and patients first by improving their healthcare experience and their health outcome”.

As integral members of a patient's healthcare team, pharmacists and pharmacy technicians have a responsibility to deliver quality care with an objective of mitigating harm while striving to make patients better. The Standards of Practice and new Code of Ethics clearly outline the minimum expectations of practice and conduct necessary to deliver quality care.

Throughout 2015, the College focused on coaching and mentoring pharmacists and pharmacy technicians to better understand and consistently practice to these standards. The new community practice assessment and the baseline assessments of hospital pharmacies provided great coaching opportunities for our practice advisors.

As part of this shift to coaching and mentoring, enhancements have been made to both the development and access to practice resources, particularly in areas of emerging practice, to

support pharmacy professionals' commitment to continuous professional development.

Just as the College holds individual practitioners accountable to continuous quality improvement, we do the same for ourselves. As an example, we recently analyzed the process for how the public files a complaint with us, and we've made changes that have significantly improved the simplicity and timeliness of this process.

Maintaining the public's trust in the safe, effective and ethical delivery of pharmacy services by pharmacists and pharmacy technicians is central to our role as regulator for the profession of pharmacy in Ontario.

Please continue to read on in this report to learn more about how the College protects the public, how we put patients first, and what other key initiatives we focused on in 2015.

Thanks for reading!

**Marshall Moleschi**  
CEO & Registrar



Marshall Moleschi, CEO and Registrar (left) with  
Esmail Merani, Council President 2015 – 2016



# PRESIDENT'S MESSAGE

**A**s President, I am privileged and fortunate to spend one year at the helm of Council, particularly during a time when there is so much important work going on in practice. Today more than ever, patients rely on their healthcare professionals – including pharmacists and pharmacy technicians – to work together to optimize their health outcomes.

Using our Strategic Framework for 2015 – 2018 as a guide, Council worked diligently throughout 2015 to lead a number of key initiatives designed to enhance the safe, effective and ethical delivery of pharmacy services to Ontarians.

The College continued our commitment to transparency — a core value identified by Council — with a number of valuable initiatives aimed at providing the public with more information about the people and places we oversee. An update on the transparency work and some important information about the launch of the new “Find a Pharmacy or Pharmacy Professional” tool on the OCP website — expected in spring 2016 — can be found on page 20 of this report.

Engaging and educating the public on our role and responsibilities as the regulator for the profession of pharmacy in Ontario is an important part of the work the College does. This past year, we introduced a new video, “Trust in the Care Your Pharmacist Provides”. The video was designed to make the public aware of the services pharmacists and pharmacy technicians are

qualified and authorized to deliver, and to encourage patients to be more confident and comfortable with the care they receive from pharmacy professionals

Additional enhancements, particularly in the growth of our social media channels – Twitter, Facebook, YouTube and LinkedIn – were made to increase our engagement efforts with the public, and pharmacists and pharmacy technicians throughout Ontario. More on this can be found on page 56.

Also this year, Council led the development and establishment of a new Code of Ethics for the profession. This is a particularly significant accomplishment as the Code is the foundational document for any profession, which clearly outlines the expectations of conduct and behaviour in practice. The process for developing the new Code of Ethics offered us a moment to pause and consider what it truly means to be a healthcare professional, why we choose this special vocation, and the importance of the role and commitment we have all made, to put the best interests of patients, first and foremost. More details on the Code of Ethics are on page 30.

As we look to the year ahead, I would like to take this opportunity to thank my fellow Council members and College staff for their efforts and support over the past year. I appreciate your ongoing commitment to serve and protect the public interest.

Thanks for taking the time to read this year's annual report. All the best in 2016!

**Esmail Merani**

Council President 2015 – 2016



# COLLEGE COUNCIL

The College is overseen by a Council of 15 elected pharmacists (two from hospital), two elected pharmacy technicians (one from hospital), between nine 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.



# Council Members 2015-2016 – As of Dec. 31, 2015

## ELECTED PRACTITIONERS



Esmail Merani  
(President) – District K



Regis Vaillancourt  
(Vice-President) – District H



Gerry Cook  
District N



Christine Donaldson  
District H



Michelle Filo  
District T



Jillian Grocholsky  
District L



Fayez Kosa  
District M



Christopher Leung  
District N



Jon MacDonald  
District P



Michael Nashat  
District L



Don Organ  
District M



Goran Petrovic  
District TH



Karen Riley  
District N



Mark F. Scanlon  
District K



Douglas Stewart  
District P



Farid Wassef  
District L



Laura Weyland  
District M

## PHARMACY SCHOOLS



University of Toronto:  
Heather Boon



University of Waterloo:  
David Edwards

## APPOINTED PUBLIC MEMBERS



Kathy Al-Zand



Linda Bracken



Ronald Farrell



Javaid Khan



John Laframboise



Lew Lederman



Aladdin Mohaghegh



Sylvia Moustacalis



Shahid Rashdi



Joy Sommerfreund

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



## SPECIAL FEATURE:

# STRATEGIC FRAMEWORK 2015-2018

Every three years, Council undertakes a review of the College's strategic priorities, mission, vision and core values to ensure they are still timely, accurate and appropriate for the direction of the College. This regularly scheduled review took place in March 2015 and resulted in a new Strategic Framework for the College — pictured to the right.

The Framework was developed during a facilitated session where Council discussed the College's priorities and direction, and how they fit with the government's healthcare strategy. A significant focus of the session was on the governance principle that Council leads and directs the College to achieve its public interest mandate, and the Registrar is given the authority and responsibility to operationalize Council's public interest mandate and strategic plan.

While the previously set strategic directions (2012-2015) were considered to still be valid and appropriate, there was consensus that each direction should be reviewed with a patients first lens to ensure that patients continue to remain front-and-centre in all of the College's activities.

Part of this focus on patients first came from the Ministry of Health and Long-Term Care's *Patients First: Action Plan for Healthcare*. The action plan outlines the government's next phase and promise to transform Ontario's healthcare system, and provides details on their

commitment to putting people and patients first by improving their healthcare experience. Council felt that formally aligning the College's strategic directions with the government's Patients First initiative was appropriate and well-timed.

A new Strategic Framework for 2015-2018 was endorsed by Council at their June meeting. The Framework includes the College's mission statement, vision and core values. It also outlines the three strategic priorities and the outcomes and key performance indicators under each.

The first strategic priority — core programs and fulfillment of mandate — includes outcomes and key performance indicators such as the College's assessment process for pharmacies and pharmacy professionals, a decision-making framework that is consistently applied across the organization, and a defined professional development framework that incorporates coaching, remediation and monitoring.

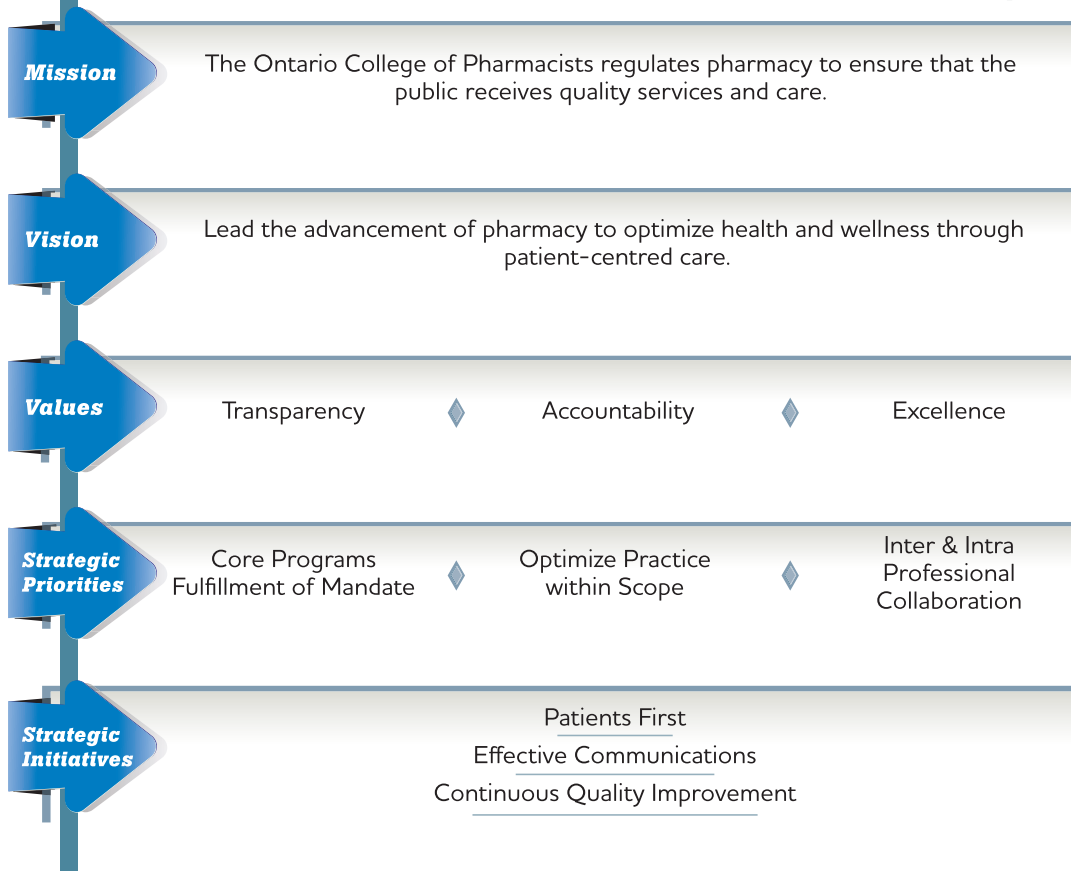
The second strategic priority — optimizing practice within scope — includes outcomes and key performance indicators such as pharmacists and pharmacy technicians consistently practising to the established expectations in the Standards of Practice and Code of Ethics, pharmacies meeting the Standards of Operation and consistently providing an environment to



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Putting patients first since 1871

# Strategic Framework

2015-2018



support pharmacy professionals in their practice, and the pharmacy profession integrating technology and innovative approaches to improving the quality and safety of patient care.

The third strategic priority — inter- and intra-professional collaboration — includes outcomes and key performance indicators for both the pharmacy team and the healthcare team. For the pharmacy team, pharmacy services should be organized to empower pharmacists and pharmacy technicians to practice to their full scope, and pharmacy professionals should maximize their respective roles. For the healthcare team, pharmacy professionals should exercise their responsibility within the patient's professional team.

Under each strategic priority, the plan outlines the activities that the College will undertake to achieve each outcome and key performance indicator. The plan also includes a proposed timeline and identifies the degree to which the strategic initiatives — patients first, effective communications, and continuous quality improvement — are considered for each item.

The Strategic Framework and Operational Plan were built to lead the work of the College. More information on the Strategic Framework and progress on the Operational Plan is presented by the Registrar at each Council meeting and is available in the Council Materials on the College website.



# COLLEGE **COMMITTEES**

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

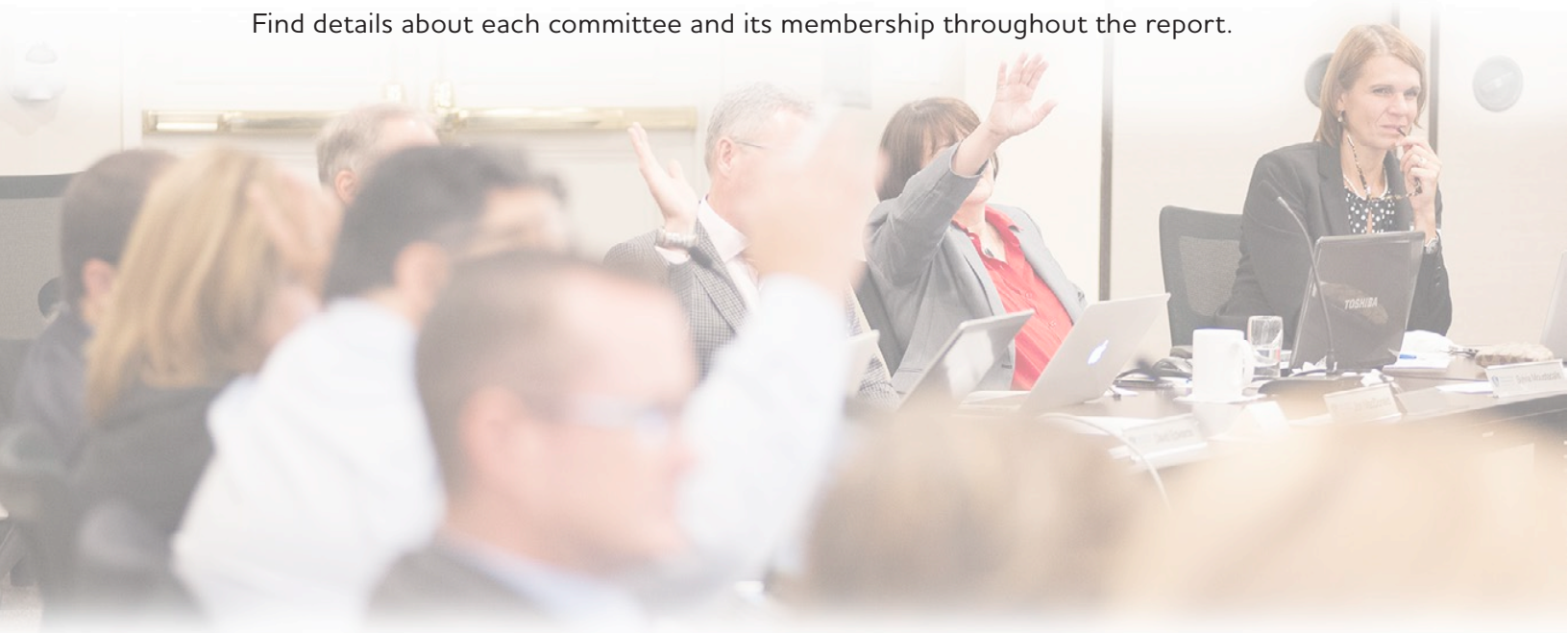
Statutory committees are required through legislation, and include the:

- 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:

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

Find details about each committee and its membership throughout the report.





## STATUTORY COMMITTEE

### The Executive Committee – As of Dec. 31, 2015

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 PRACTITIONERS:**

- Esmail Merani – President & Chair
- Regis Vaillancourt – Vice President
- Mark Scanlon – Past President
- Christine Donaldson

#### **APPOINTED PUBLIC MEMBERS:**

- Linda Bracken
- Sylvia Moustacalis
- Joy Sommerfreund

#### **STAFF RESOURCE:**

- Marshall Moleschi

## STANDING COMMITTEE

### The Elections Committee – As of Dec. 31, 2015

The Elections Committee is responsible for overseeing the process for elections of members to Council.

#### **ELECTED PRACTITIONERS:**

- Mark Scanlon
- Esmail Merani

#### **APPOINTED PUBLIC MEMBERS:**

- Joy Sommerfreund


#### **STAFF RESOURCE:**

- Marshall Moleschi

# PICTURE OF THE PROFESSION



## BY THE NUMBERS

As of Dec. 31, 2015

**15,113** pharmacists practising in Ontario  
 **5% increase** since 2014


**58%** of pharmacists in Ontario are female  
→ **Steady** since 2012 


**44** average age of a pharmacist in the province  
 **Down from 45** in 2014 

**37%** of Ontario's pharmacists were educated internationally  
 **1% increase** since 2014 

**14%** of pharmacists are 60+ and approaching retirement age

**60%** of pharmacists are registered to administer injections 

**3,835** pharmacy technicians practising in Ontario  
 **31% increase** since 2014

**6%** of pharmacy technicians in Ontario are male  
→ **Steady** since 2014 

**40** average age of a pharmacy technician in the province  
→ **Steady** since 2014 

**79%** of pharmacy technicians took the bridging program to become registered  
 **Down 4%** since 2014 

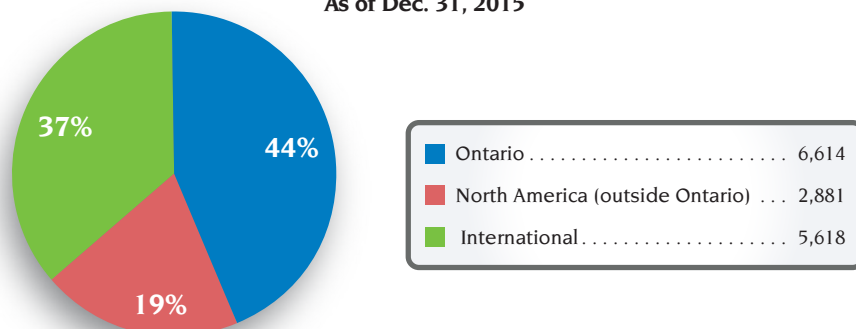
**1%** of pharmacy technicians are 60+

**36%** of pharmacists graduated more than 25 years ago  
 **1% higher** than 2014 

## PICTURE OF THE PROFESSION

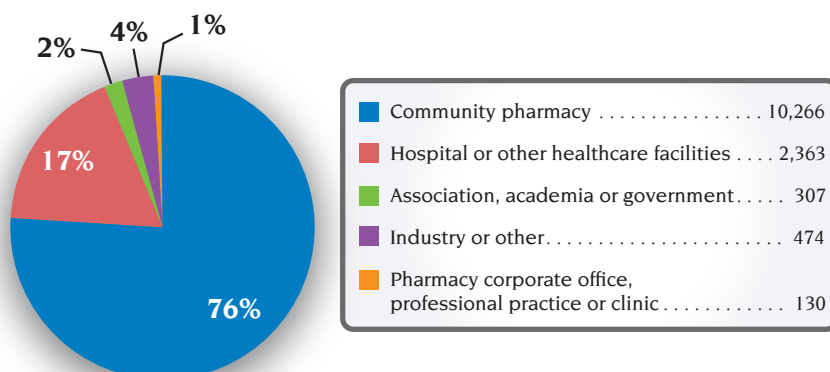
### Pharmacists: Place of Education

As of Dec. 31, 2015



### Pharmacists by Practice Type

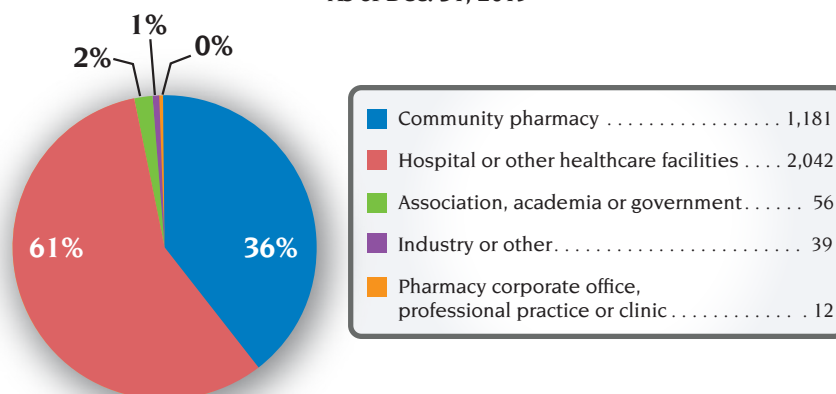
As of Dec. 31, 2015



76% of pharmacists work in community practice.

### Pharmacy Technicians by Practice Type

As of Dec. 31, 2015



61% of pharmacy technicians work in hospitals or other healthcare facilities.

These graphs do not include practitioners who failed to record a place of practice.



# REGISTERING QUALIFIED **PRACTITIONERS**



## REGISTERING QUALIFIED PRACTITIONERS

All pharmacists and pharmacy technicians in Ontario must be registered with the Ontario College of Pharmacists. To become registered, applicants must demonstrate that they are qualified and possess the required knowledge, skills and abilities to practise pharmacy in the province.

One of the primary ways that we protect the public is by ensuring that only those applicants who have successfully met the registration requirements are granted the right to practise in Ontario. We review each applicant's education and training history, relevant practice experience, standardized testing results and evidence of good character before granting registration.

### BY THE NUMBERS

**999** new pharmacists registered in 2015



**15% increase**

compared to 2014



**939** new pharmacy technicians registered in 2015



**16% decrease**

compared to 2014



**50%** of new pharmacists were educated internationally

→ **The same** as in 2014



**1,664** pharmacy students and interns were training in Ontario in 2015



**41%** of new pharmacists were educated in Ontario



**1% increase** since 2014



**299** requests considered by panels of the Registration Committee in 2015



**56 more** than in 2014

**317** applicants registered in Ontario by way of the Agreement on Internal Trade (AIT) program, after first becoming licensed in another Canadian province

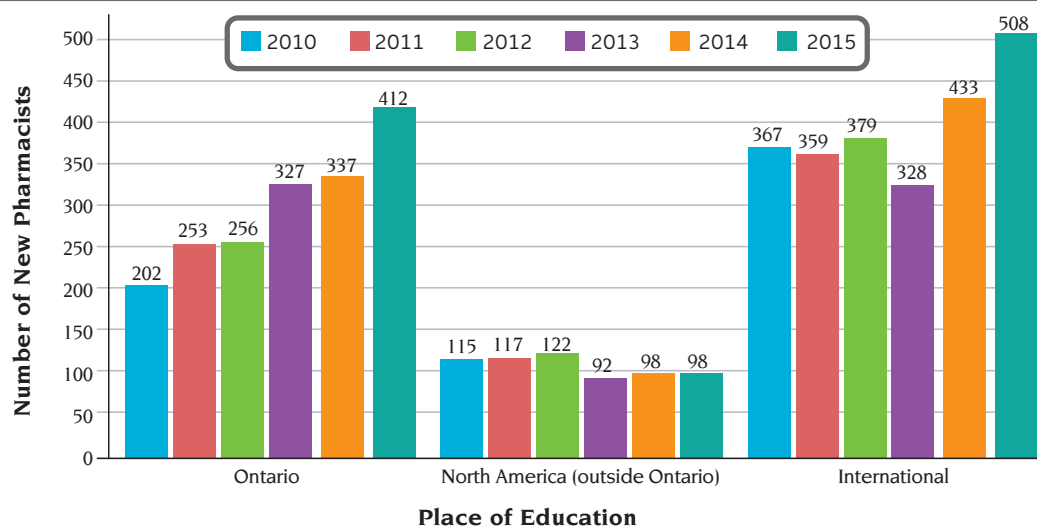


**23% higher** than 2014



## REGISTERING QUALIFIED PRACTITIONERS

New Pharmacists by Place of Education



50% of new pharmacists registered in 2015 were educated internationally.

This graph also includes pharmacists who re-registered with the College.

### STATUTORY COMMITTEE

## The Registration Committee – As of Dec. 31, 2015

The Registration Committee provides guidance to Council on matters concerning registration, examinations and in-service training required prior to registration.

#### ELECTED PRACTITIONERS:

- Christine Donaldson (Chair)
- Michelle Filo
- Jillian Grocholsky

#### APPOINTED PUBLIC MEMBERS:

- Linda Bracken
- John Laframboise
- Aladdin Mohaghegh

#### NON-COUNCIL COMMITTEE MEMBERS:

- Deep Patel

#### PHARMACY SCHOOL REPRESENTATIVES:

- David Edwards

#### ONTARIO PHARMACY TECHNICIAN PROGRAM REPRESENTATIVE:

- Sharon Lee

#### STAFF RESOURCE:

- Vince Bowman



### Bridging Education Program

In 2010, the government passed legislation that officially made pharmacy technicians regulated healthcare professionals. This meant that anyone wishing to work as a pharmacy technician had to demonstrate their knowledge, skills and abilities, and register with the College.

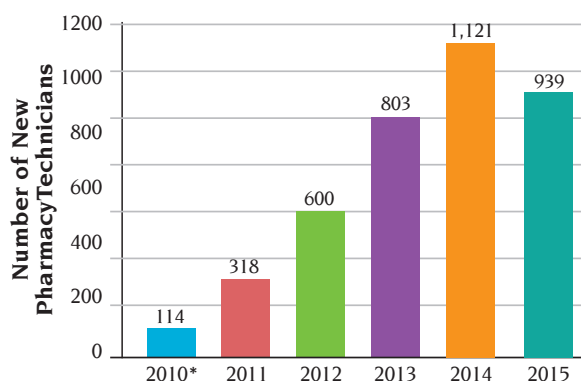
Applicants who were already “in the profession” were given the opportunity to register through a special pathway — it included an entry exam, a bridging education program, the Jurisprudence Exam, and an exam administered by the Pharmacy Examining Board of Canada (PEBC).

To date, 79% of pharmacy technicians have taken the “bridging program” route to registration. The deadline to complete the bridging education program portion of the registration requirement for this pathway was January 1, 2015. This deadline — and others set by employers of pharmacy technicians — is a leading reason for the decline in the number of new pharmacy technicians registered with the College this year. It is expected that the number of new pharmacy technicians will level off in the coming years.

### Panels of the Registration Committee

While all applicants must meet the same set of requirements to register with the College, if an applicant does not directly meet a requirement, their application is referred to a panel of the Registration Committee to give their application individual consideration.

New Pharmacy Technicians by Year



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

Panels review applications for exemptions for particular requirements, appeals of results for requirements that are set and administered by the College, or consideration for alternative means to demonstrate a requirement.

This past year, panels of the Registration Committee considered 299 requests.

### A 23% increase in requests since 2014.

- Fully granted. . . . . 131
- Partially granted. . . 160
- Denied. . . . . 4
- Deferred . . . . . 4
- Withdrawn . . . . . 0

### Health Professions Appeal and Review Board

There were also two appeals to the Health Professions Appeal and Review Board (HPARB), an independent adjudicative agency. On request, HPARB conducts reviews and hearings of orders of the registration committees of Ontario’s health regulatory colleges. Both appeals filed in 2015 were withdrawn.

# A LOOK BACK AT 2015

### Final Two Jurisprudence Modules Published

The College began developing [e-learning modules](#) that support practitioners' understanding of the various regulations that govern pharmacy in 2014. This year, the final two modules were published. The modules were created to support applicants preparing to write the entry-to-practice Jurisprudence Exam and as a useful tool for practitioners to refresh their knowledge of legislation.

- Regulated Health Professions Act (RHPA) and Pharmacy Act Module
- Food and Drugs Act (FDA) Module
- Drug and Pharmacies Regulation Act (DPRA) Module
- Controlled Drugs and Substances Act (CDSA) and Narcotics Safety and Awareness Act (NSAA) Module
- Ontario Drug Benefit Act (ODBA) Module
- Drug Interchangeability and Dispensing Fee Act (DIDFA) Module

### Structured Practical Training Program Re-design

In June 2014, Council approved a re-design of the College's Structured Practical Training (SPT) program. As one of the registration requirements to become a pharmacist or pharmacy technician in Ontario, experiential training allows pharmacy students, interns and pharmacy technician applicants to develop and demonstrate their competence for entry-to-practice. All applicants must complete some structured practical training — either through the College's program or through other experiential rotations approved by College Council.

Throughout 2015, College staff conducted an evaluation of the current SPT program and planned a new approach to assess applicants' readiness for practice — the Practice Assessment of Competence at Entry (PACE).

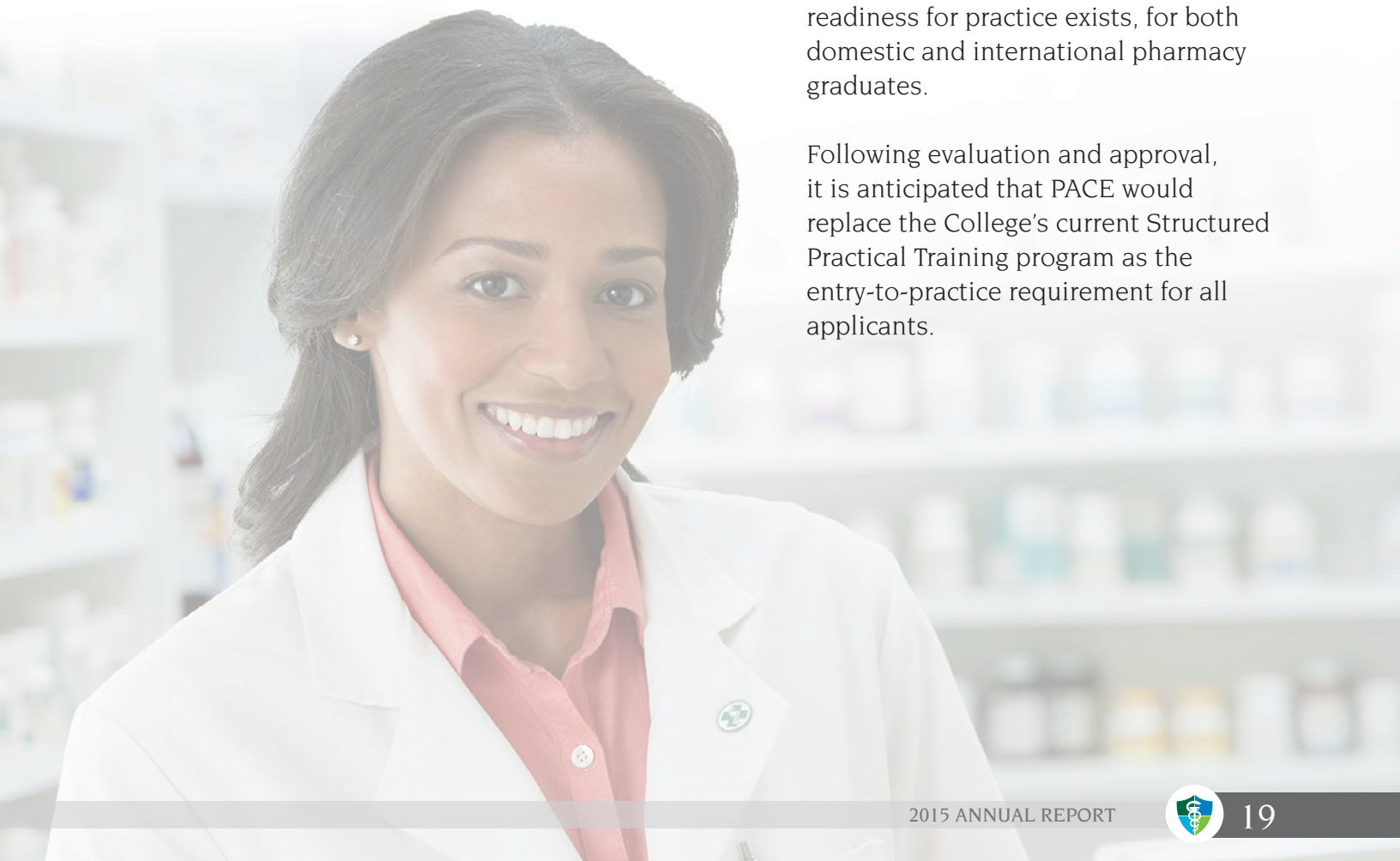
# A LOOK AHEAD AT 2016

## Practice Assessment of Competence at Entry

In 2016, the College will be piloting a new approach to assessing applicants' readiness for practice. PACE — being tested with pharmacists only — is designed to meet the structured practical training registration requirement outlined in legislation.

Given that graduates of the entry-level PharmD program at the universities of Toronto and Waterloo meet this requirement within their programs, the College has been working closely with key stakeholders on the development and validation of PACE for candidates requiring assessment outside these programs. The goal has been to ensure a consistent approach for assessing if readiness for practice exists, for both domestic and international pharmacy graduates.

Following evaluation and approval, it is anticipated that PACE would replace the College's current Structured Practical Training program as the entry-to-practice requirement for all applicants.



# SPECIAL FEATURE:

## CONTINUED COMMITMENT TO TRANSPARENCY

Transparency has been a core value of the Ontario College of Pharmacists and an integral part of Council's Strategic Plan since 2012. Throughout 2015, the College continued to make changes that increase transparency, boost public confidence and provide information that helps patients make more informed healthcare decisions. We believe that transparency is not just about making additional information available to the public, it is also about making the information we do share clear, accessible and easy-to-understand.

Our long-standing work with the colleges that govern doctors, dentists, nurses, physiotherapists and opticians continued in 2015, as together we implemented changes to enhance consistency and assist patients in accessing and understanding relevant information about their healthcare providers. In 2014, this group — the Advisory Group for Regulatory Excellence (AGRE) — made a number of recommendations to make more information about regulated healthcare professionals and regulatory processes available to the public. In 2015,

the focus was on implementing and communicating our changes. We also worked to improve the transparency of the regulatory processes and decision-making that occurs at the College.

This "Special Feature" in our Annual Report highlights some of the more significant changes we made or implemented in 2015.

### [Additional Information Now Public](#)

In late 2014 and early 2015, Council passed by-laws that allow for more information about pharmacy professionals to be available. Here's a quick summary of the new information we disclose:

**Criminal charges:** A summary of any federal or provincial charges against a member, made after April 1, 2015, if the College knows about them, and the Registrar believes that they are relevant to the member's suitability to practise.

**Findings of guilt:** A summary of any federal or provincial findings of guilt against a member, made after April 1, 2015, if the College knows about them, and the

Registrar believes that they are relevant to the member's suitability to practise.

**Bail, custody or release conditions:** A summary of current custody or release conditions in provincial or federal offence processes that the College knows about, and the Registrar believes are relevant to the member's suitability to practise.

**Licenses in other jurisdictions:** A notation of current pharmacy licenses held in other jurisdictions where the College is aware.

**Applications for re-instatement:** A summary if a former practitioner who previously had their license revoked applies to the Discipline Committee for re-instatement.

**Notices of hearing:** A notice of hearing for any discipline hearing regarding professional or proprietary misconduct where the matter has not yet been resolved. If the hearing is awaiting scheduling, the College will post a statement of that fact. If the hearing is completed and awaiting a decision, the College will post a statement of that fact.



**Oral cautions:** A summary of any oral caution ordered by the Inquiries, Complaints and Reports Committee (ICRC) for complaints or reports filed after April 1, 2015. An oral caution is ordered when the ICRC has a significant concern about conduct or practice that can have a direct impact on patient care, safety or the public interest if it is not addressed. An oral caution is a face-to-face discussion between the practitioner and the Committee, to review their practice and the changes the practitioner will make to help avoid a similar incident from occurring in the future. (It will be noted if the decision has been appealed or varied and, if the decision is overturned it will be removed.)

#### **Specified continuing education or remediation programs**

**(SCERPs):** A summary of any education or remediation requirements that were ordered by the ICRC for complaints or reports filed after April 1, 2015. A SCERP is ordered when a serious care or conduct concern that requires a pharmacist or pharmacy technician to upgrade his or her skills has been identified. The ICRC orders SCERPs when they believe that remediation is necessary. (It will be noted if the decision has been appealed or varied and, if

the decision is overturned it will be removed.)

**Undertakings:** Undertakings are binding and enforceable promises from a practitioner to the College. A pharmacist may enter into an undertaking to practise differently — or not practise at all — when there is an identified concern about practice. For example, a pharmacist might agree not to act as a Designated Manager or dispense narcotics.

#### **Improving Transparency of Regulatory Processes**

One important area of focus in 2015 was improving the transparency of regulatory processes and decision-making that occurs at the College. One example of this is the assessment process for determining if a person's conduct is relevant to their suitability to register as a member of the College, practise pharmacy or operate a pharmacy.

The College published an article in the Fall 2015 issue of *Pharmacy Connection* thoroughly explaining this process. The article outlines the criteria for assessment and clearly explains the process for how the College reviews the conduct or behaviour. It also explains how the College conducts a risk analysis to determine appropriate action (i.e. posting information publicly, referring an operator to the Accreditation Committee, etc.).

#### **What's Ahead**

Throughout 2016 and beyond, the College will continue to identify and implement measures to enhance transparency, and ensure the public has access to the information they need to make informed choices about their healthcare.

Also in 2016, the College will launch a new "Find a Pharmacy or Pharmacy Professional" tool on the OCP website (sometimes referred to as the public register). The new tool will make accessing and understanding information easier, with simpler navigation and straightforward language. One of the most useful features on the new tool will be the many search options available to users.

Basic search fields will allow for simple searches of pharmacy professionals (pharmacists, pharmacy technicians, students and interns) and places the College oversees (community pharmacies, drug preparation premises and remote dispensing locations) by name, type or location.

Advanced search fields will allow for more in-depth searches using options such as practice status, registration or accreditation number, discipline history and more. Each pharmacy professional and pharmacy will have their own profile of detailed information.

For more, visit the [Transparency Key Initiative](#) on the College website.

# ENSURING COMPETENT **PRACTITIONERS**





Once a pharmacist or pharmacy technician is registered, the College has the responsibility to make sure they remain competent throughout their career. One of the ways we protect the public is to ensure that all practitioners retain their skills and competence, and maintain the ethical and practice standards of the profession throughout their careers.


The Quality Assurance program assesses the continuing competency of practicing pharmacists and thereby protects the public. Currently, the program consists of three components:

1. The learning portfolio
2. The self-assessment
3. The Peer Review

### BY THE NUMBERS

**14,225** pharmacists in Part A of the register\* 

**888** pharmacists in Part B of the register\* 

**90%** of Peer Review participants were successful over the last 5 years 

**232** randomly selected candidates participated in one of four Peer Review sessions 

\* Pharmacists in Part A of the register must have worked a minimum of 600 hours providing patient care over the previous three years. Pharmacists in 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.

STATUTORY COMMITTEE

## The Quality Assurance Committee – As of Dec. 31, 2015

The Quality Assurance Committee develops and maintains the Quality Assurance program, which includes a two-part register, continuing education, minimum practice requirements and a practice review process. It supports continued competence and encourages continuing professional development of practitioners.

**ELECTED PRACTITIONERS:**

- Jon MacDonald (Chair)
- Fayez Kosa
- Regis Vaillancourt

**APPOINTED PUBLIC MEMBERS:**

- Linda Bracken
- Ronald Farrell
- Sylvia Moustacalis
- Shahid Rashdi

**NON-COUNCIL COMMITTEE MEMBERS:**

- Tina Boudreau
- Aleksandra Paszczenko
- Puja Shanghavi

**STAFF RESOURCE:**

- Sandra Winkelbauer



## THE QUALITY ASSURANCE PROGRAM

### The Learning Portfolio

To ensure they maintain their competence and skills, all pharmacy professionals in Ontario are encouraged to engage in professional development. Pharmacists are required by legislation to participate in and keep a record of their continuing education and professional development. The College offers an online tool — the learning portfolio — that assists practitioners with planning and documenting their learning activities.

### The Self-Assessment

Practitioners are encouraged to complete the self-assessment annually. The self-assessment is a tool that assists practitioners in identifying their learning needs and creating a plan for learning. Every pharmacist in Part A of the register and all pharmacy technicians are required to submit the self-assessment approximately once every five years, upon random selection.

### Peer Review

Peer Review is a practice assessment focusing on clinical knowledge and communication with patients. Pharmacists in Part A of the register are randomly chosen to participate. 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:

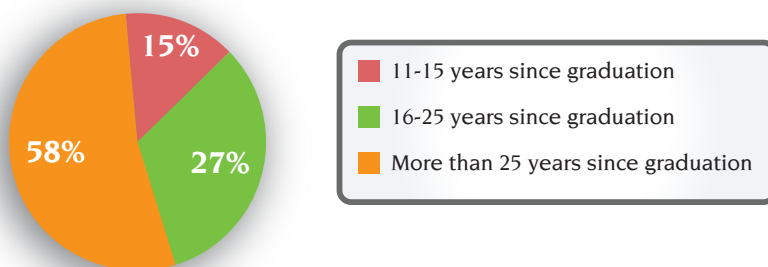
- Clinical knowledge
- Gathering information
- Patient management and follow-up
- Communication skills

Over the past five years, approximately 90 per cent of pharmacists who completed the Peer Review were successful on their first assessment, requiring only self-directed professional development.

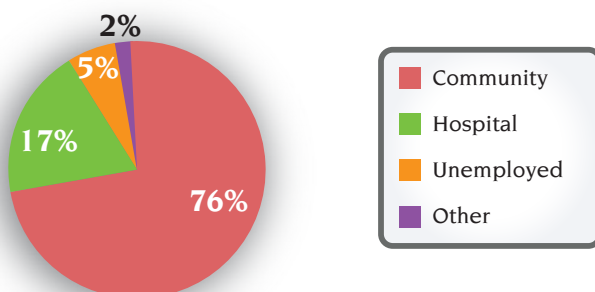
## PEER REVIEW

The following pie charts show the breakdown of the 232 randomly selected candidates that participated in the 2015 Peer Review.

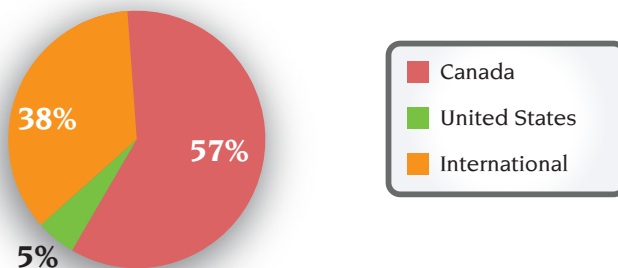
**Participants by Graduation Date**



**Participants by Place of Practice**



**Participants by Location of Graduation**



There were 232 pharmacists randomly selected for Peer Review in 2015.

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

#### Outcome by Graduation Date:

Years since graduation	Number of pharmacists	Number who entered peer-guided learning	The percentage of age group's total who entered peer-guided learning
11-15	34	0	0%
16-25	64	2	3.1%
More than 25	134	10	7.5%

#### Outcome by Place of Practice:

Place of practice	Number of pharmacists	Number who entered peer-guided learning	The percentage of age group's total who entered peer-guided learning
Community	176	11	6.3%
Hospital	41	0	0%
Unemployed	11	1	9.1%
Other	4	0	0%

#### Outcome by Location of Graduation:

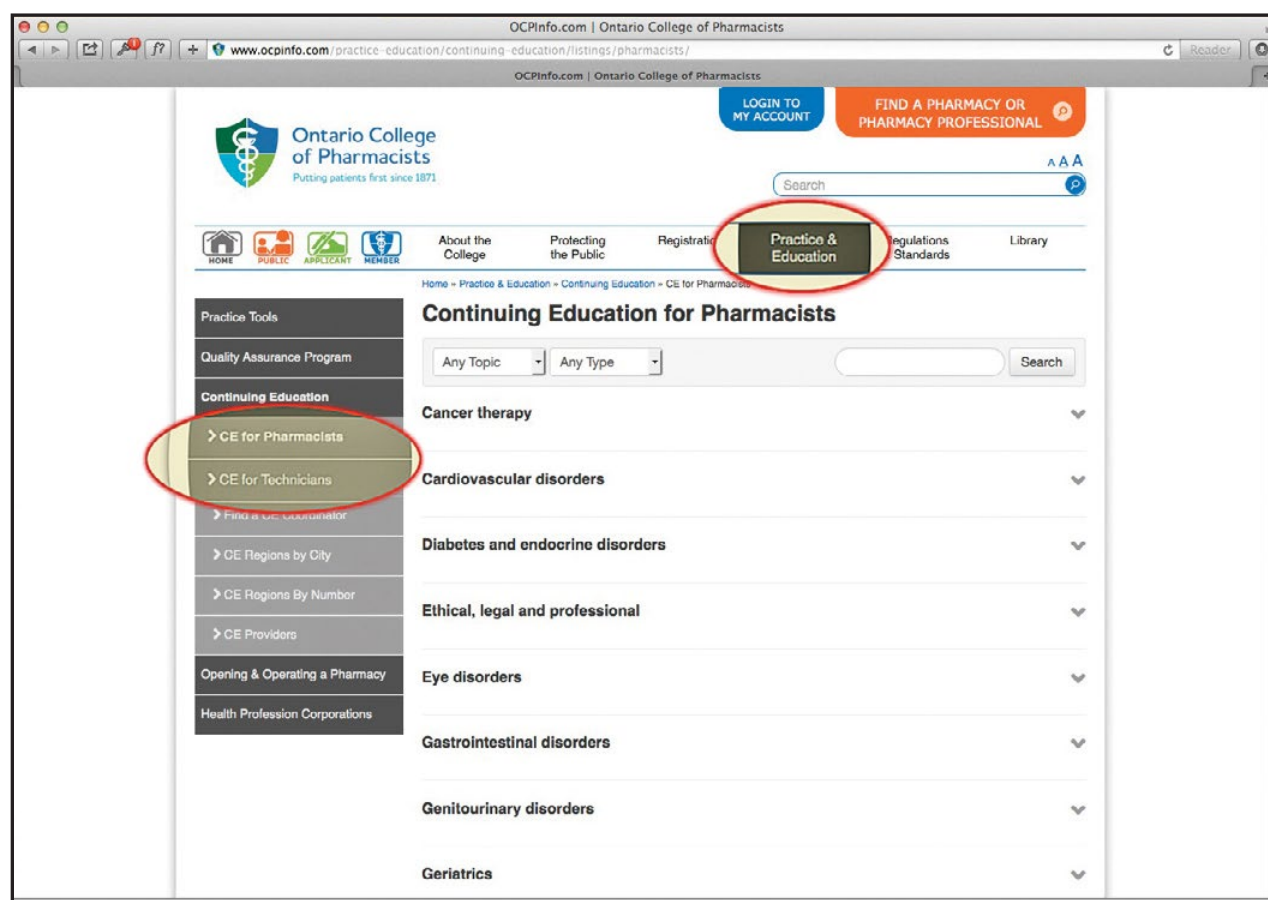
Location of graduation	Number of pharmacists	Number who entered peer-guided learning	The percentage of age group's total who entered peer-guided learning
Canada	131	5	3.8%
USA	12	0	0%
International	89	7	7.9%

# A LOOK BACK AT 2015

## New CE Tool on Website

As regulated healthcare professionals, pharmacists and pharmacy technicians are required to keep their knowledge and skills current throughout their careers. To help with this, the College launched a new online tool that makes finding continuing education activities quick and

easy. The new tool organizes hundreds of potential professional development activities for pharmacists and pharmacy technicians. The activities can be found by topic, type, location or date, and there is a convenient search tool to help find activities about something specific.





## SPECIAL FEATURE:

# PRACTICE ASSESSMENTS

As part of our commitment to continuous quality improvement, the College introduced enhancements to the routine community pharmacy inspection process in early 2015. Now called practice assessments, these visits include an assessment of pharmacy operations and processes, and an evaluation of an individual practitioner's performance in their practice site.

The new practice assessments are designed to increase adherence to both pharmacy operations and individual practice standards, with the goal of providing support through coaching and mentoring to improve processes and procedures to deliver greater health outcomes for patients.

### Shift to Coaching and Mentoring

Although the addition of an individual practitioner assessment as part of every practice assessment is a substantial change to the College's quality assurance activities, perhaps the more significant change is the College's shift in focus from an emphasis on compliance to an emphasis on coaching and

mentoring. Traditionally, inspections of pharmacies focused on a check-list of the pharmacy's adherence to legislation, policies and standards relevant to pharmacy operations. Less attention was placed on the processes and procedures that shape and support a pharmacist's practice and clinical decision-making – expectations that are more directly outlined in the Standards of Practice and Code of Ethics.

For the individual practitioner component of the assessment, practice advisors focus on four key areas:

- Patient assessment
- Decision-making
- Documentation
- Communication / Education

For each focus area, specific standards – which describe the minimum practice requirement for all practitioners – are identified. Through a combination of observation and retrospective review of documentation (chart stimulated recall) practice advisors evaluate the processes in place for each of these areas with respect to new and refill

prescriptions, adaptations/renewals, comprehensive medication reviews and OTC counseling.

The new practice assessments and shift in the College's focus support the role of pharmacists as medication experts and clinical decision-makers, and are consistent with assessments of other primary healthcare practitioners such as physicians and nurses.

### Assessment Criteria

In 2015, the College established specific assessment criteria for both the [pharmacy operations](#) and the [pharmacist components](#) of the assessment. Criteria for pharmacy technician assessments will be available in 2016. Focusing on practice areas that have the greatest impact on patient and public safety, the assessment criteria was pulled from Standards of Practice, Code of Ethics, legislation and policies. The criteria documents are available on the OCP website.

### Next Steps

Given the initial success of the new practice assessments, the College will continue with the pilot into 2016. Visit the [Practice Assessments Key Initiative](#) on the College website for more information.

## SPECIAL FEATURE:

# CODE OF ETHICS



In September 2014, College Council announced the establishment of a task force to review and update the College's Code of Ethics so that it more appropriately addresses current practice and clearly establishes the standards of ethical conduct for pharmacists and pharmacy technicians.

The new Code was created using the expertise of an ethicist and by gathering feedback from key stakeholders. The College also conducted a review of codes from relevant health regulatory professions across Canada, the United States, Australia and the United Kingdom, as well as from current literature of healthcare ethics.

The Code is a comprehensive document that outlines the core ethical principles that dictate a healthcare professional's ethical duty to patients and society. The document supports these

principles with standards that indicate how a practitioner is expected to fulfill their ethical responsibilities.

### **Consultation & Approval**

Council reviewed a draft of the Code at their September 2015 meeting and approved it for a 45-day public consultation period. The consultation — which ended on November 7, 2015 — brought in feedback from practitioners, organizations, members of the public and other stakeholders. The majority of the responses were in support of the proposed Code, noting that it was comprehensive and provided clarity in outlining the expectations for pharmacists and pharmacy technicians.

Following consideration of feedback received during the consultation, Council approved the revised Code of Ethics at their December 2015 meeting. The new Code came into effect



on December 7, 2015. Practice expectations for all pharmacy professionals are unchanged in the new Code.

### Founded on Ethical Principles of Healthcare

The new Code, which is applicable to all pharmacists and pharmacy technicians in Ontario, regardless of where they practice or work, and brings together concepts from the previous Code, the Standards of Practice, the Principles of Professional Responsibility, and relevant legislation.

The new Code provides pharmacy professionals with a solid framework to understand their ethical obligations as it aligns with core principles of healthcare ethics, which all healthcare professionals are bound. All pharmacists and pharmacy technicians must use these principles — not their own beliefs or values — to

inform their behaviour and conduct, and these principles serve as a compass for their actions and decision-making in practice. The four core principles of healthcare ethics that the new Code is founded on are:

1. Beneficence
2. Non-maleficence
3. Respect for persons/justice
4. Accountability (fidelity)

Abiding by these principles is not optional. In fact, understanding and committing to them is part of a pharmacy professionals' overriding role and responsibility as a healthcare professional.

Throughout 2015, the College ran a series of four articles about the Code of Ethics in *Pharmacy Connection*. Each article discusses a different facet of the Code's development process. They provide

information and rationale, and explain the foundational principles of healthcare ethics in detail. Access all four articles, and find more information about the Code of Ethics, on the [Code of Ethics Key Initiative](#) on the College website.

### Next Steps

The College is currently developing a number of e-learning modules to support pharmacists and pharmacy technicians in understanding and applying the new Code of Ethics. The modules will cover key concepts and principles from the Code, and will use video case studies to illustrate the application of the Code in practice. The first of these modules is expected to be available in late spring 2016, with the full series complete by the fall. More details will be available in *Pharmacy Connection* and e-Connect in 2016.

# SUPPORTING PHARMACY PRACTICE





## BY THE NUMBERS

**8,580** pharmacists registered to administer injections  
**60%** of all eligible pharmacists



**21** online practice tools provide quick access to policies, guidelines, fact sheets, articles, practice videos and FAQs organized by subject



**6** jurisprudence e-learning modules for practitioners to refresh their knowledge of legislation

**2** practice consultants answering questions by phone and email

**9%** of calls and emails were questions related to narcotics



**8%** of calls and emails were questions related to opioid dependence (methadone and buprenorphine)

**3,881** calls and emails related to practice matters



The College serves and protects the public and holds Ontario's pharmacists and pharmacy technicians accountable to the established [Standards of Practice](#), [Code of Ethics](#), [legislation](#), [policies and guidelines](#) that are relevant to pharmacy practice.

While practitioners are expected to use their professional judgment to make decisions, the College also provides support for practitioners in their adherence to standards and legislation.

The College develops policies, guidelines and fact sheets that are meant to guide practitioners in their decision-making. College practice advisors are also available to respond to general practice questions, assist practitioners with meeting the standards and provide advice, guidance and clarification to support decision-making.

## STANDING COMMITTEE

## The Professional Practice Committee – As of Dec. 31, 2015

The Professional Practice Committee provides direction and guidance on matters pertaining to professional practice. It is responsible for the development and ongoing review of standards of practice for the profession.

**ELECTED PRACTITIONERS:**

- Chris Leung (Co-Chair)
- Michael Nashat (Co-Chair)
- Heather Boon
- Don Organ
- Goran Petrovic

**NON-COUNCIL COMMITTEE MEMBERS:**

- Kathryn Djordjevic
- Ritu Kumra

**STAFF RESOURCE:**

- Tina Perlman

**APPOINTED PUBLIC MEMBERS:**

- Javaid Khan
- Lew Lederman

## STATUTORY COMMITTEE

## The Patient Relations Committee – As of Dec. 31, 2015

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

In 2015, the Communications Committee merged into the Patient Relations Committee.

**ELECTED PRACTITIONERS:**

- Gerry Cook
- Doug Stewart

**APPOINTED PUBLIC MEMBERS:**

- Kathy Al-Zand
- Sylvia Moustacalis
- Joy Sommerfreund (Chair)

**NON-COUNCIL COMMITTEE MEMBERS:**

- Fel de Padua

**STAFF RESOURCE:**

- Anne Resnick

# A LOOK BACK AT 2015

### Optimizing Patient Care Modules

Several years ago, the College and the Leslie Dan Faculty of Pharmacy at the University of Toronto established a program to support pharmacists practising to their full scope. The program — called “Optimizing Patient Care” — entered its third year in 2015. It is part of a five-year research initiative by the university and is funded by the College. In 2015, the university developed the first six in the series of educational learning modules. The goal of the modules was to help practitioners break through the barriers that may be challenging them from practising to their full scope.

### Fax Transmission of Prescriptions

In June 2015, Council reviewed and approved revisions to the policy on Fax Transmission of Prescriptions, which incorporates updates and clarifies various provisions related to facsimile transmission of prescriptions.

### Twitter Practice Tips

The College tweets helpful regulatory news and updates, new practice tools, important member reminders, and much more. In late 2015, we launched an initiative to provide a weekly practice tip for practitioners (followed by the hashtag #OCPPracticeTip). Tips are developed from actual observations and encounters in practice and include record keeping and documentation, methadone dispensing, narcotics reconciliation, clinical decision-making, patient counselling, and more.

# A LOOK AHEAD AT 2016

### Professional Misconduct Regulations to be Enacted

In 2013 the College initiated a revision of the professional misconduct regulations to stay current with changes in pharmacy practice. The regulations were circulated for public consultation and then submitted to the Ministry of Health and Long-Term Care for approval. We have been engaged in discussions with the Ministry over the past year to clarify the intent and impact of the regulations on member practice. The regulations will be in effect after they are approved by Cabinet, filed with the Registrar of Regulations and published on the Government of Ontario’s e-Laws website.

### Physician-Assisted Death Guidance

In early 2016, the Supreme Court ordered that all provinces and territories in Canada must ensure patients have access to physician-assisted death. In the absence of federal or provincial legislation on this topic, the College produced a preliminary guidance document for pharmacists and pharmacy technicians in Ontario. The document serves as interim guidance to support the profession when serving patients who have qualified and consented to physician-assisted death. It is intended to help pharmacy professionals comply with the Code of Ethics and Standards of Practice in a manner that is consistent with the Supreme Court of Canada’s decision. More information including policies, legislation and regulations about physician-assisted death will be forthcoming in 2016.

# ASSESSING **PHARMACIES**




The College assesses and accredits all community pharmacies and drug preparation premises (DPPs) in Ontario. We ensure that all facilities are operating safely and the public is protected. Only those pharmacies and DPPs that have been assessed and have met the accreditation criteria are authorized to operate in the province. We routinely visit these facilities to ensure compliance with established standards and legislation.

In 2015, in anticipation of regulatory oversight of hospital pharmacies, the College conducted baseline assessments on pharmacies within Ontario's 224 hospitals. For more information on the baseline assessments of hospitals see page 42.


### BY THE NUMBERS

**4,012** accredited community pharmacies

 Consistent **4% growth** in 2013 and 2014



**49%** of Ontario community pharmacies are independently owned

 **Up 2%** since 2014



**25%** of Ontario community pharmacies are small or large chains

**1,719** community pharmacy assessments

 **17% increase** since 2014



**95%** of community pharmacies received a pass on their first assessment



**439** community pharmacies provided methadone maintenance treatment in 2015

**197** community pharmacies provided compounding services in 2015

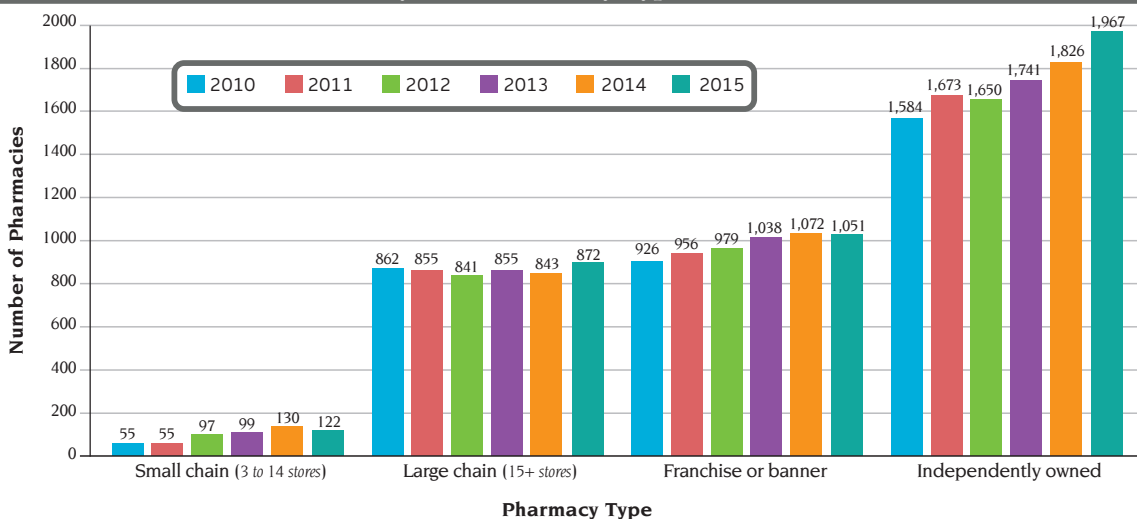


**6** drug preparation premises



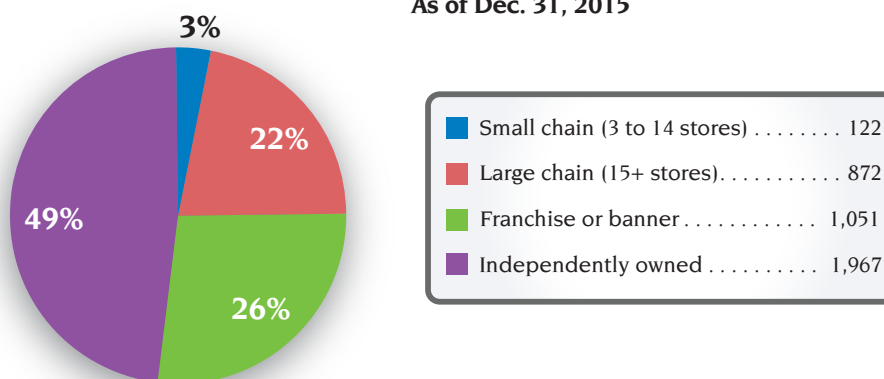
In 2015, independently owned pharmacies accounted for 49 per cent of Ontario's 4,012 community pharmacies. This number is three per cent higher than the number of independently owned pharmacies in 2013, and two per cent higher than in 2014.

## Community Pharmacies by Type — Trends



## Community Pharmacies by Type — Snapshot

As of Dec. 31, 2015

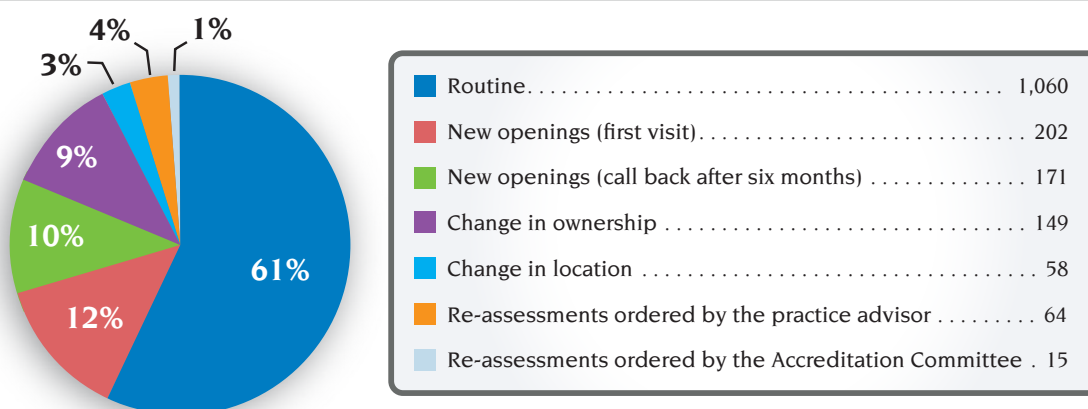


### Community Pharmacy Assessments

When a community practice advisor visits a pharmacy to perform an assessment, they ensure that the pharmacy is operating safely and is meeting all relevant legislation and standards of operation. We conduct several types of assessments to ensure that the public is protected and facilities are operating safely.

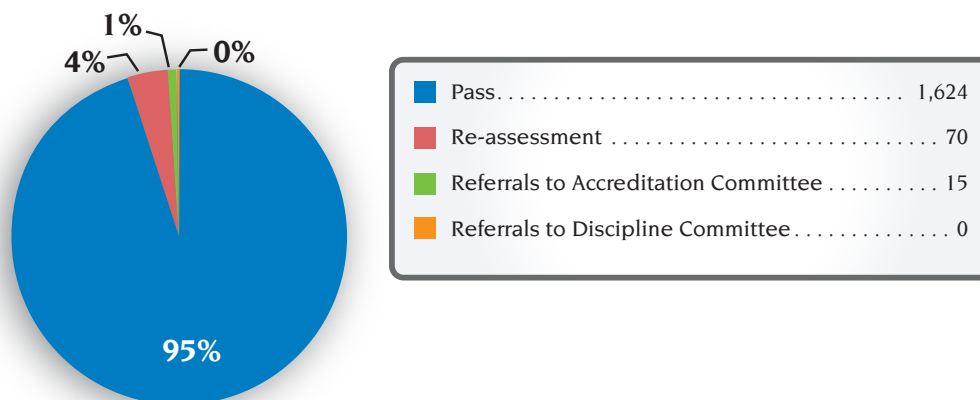
The College is currently piloting an assessment of individual practitioners in their practice site. See page 29 for more information on the practice assessment.

**Types of Community Pharmacy Assessments in 2015**

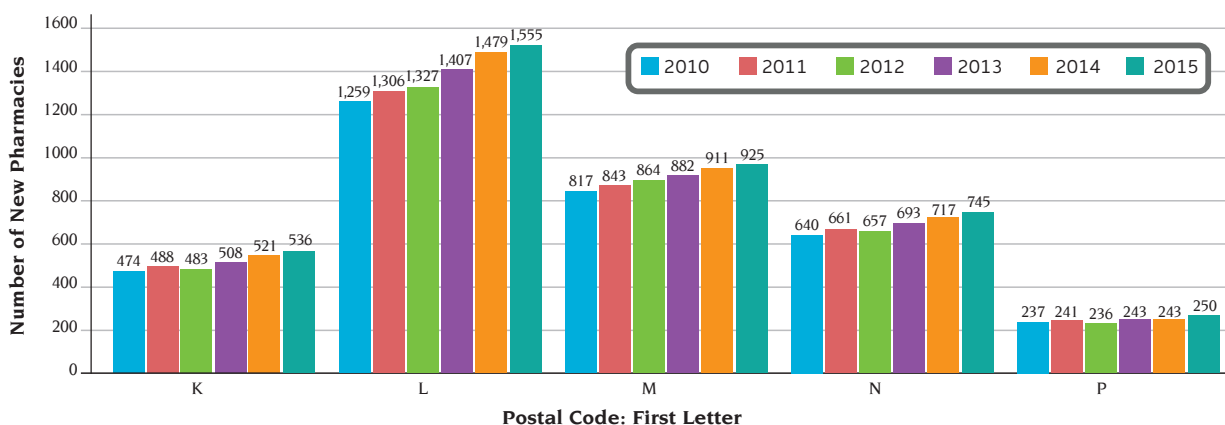


The status and/or outcome of all community pharmacy assessments conducted after July 1, 2013 are posted on the ["Find a Pharmacy or Pharmacy Professional"](#) tool on our website.

**Community Pharmacy Assessment Outcomes in 2015**



## Community Pharmacies by Postal Code



## STATUTORY COMMITTEE

### The Accreditation Committee – As of Dec. 31, 2015

The Accreditation Committee considers matters related to the operation of community pharmacies in Ontario. The Committee oversees the issuance and renewal of pharmacy licenses (certificates of accreditation) that are required in order to operate a pharmacy in the province. It also reviews issues relating to pharmacy assessments conducted by College community practice advisors where the pharmacy has failed to comply with the requirements.

#### ELECTED PRACTITIONERS:

- Regis Vaillancourt (Chair)
- Michelle Filo
- Michael Nashat

#### APPOINTED PUBLIC MEMBERS:

- Aladdin Mohaghegh
- Joy Sommerfreund

#### NON-COUNCIL COMMITTEE MEMBERS:

- Tim Brady
- Tracy Wiersema

#### STAFF RESOURCE:

- Tina Perlman

## DRUG PREPARATION PREMISES

The College received the authority to oversee drug preparation premises (DPPs) where pharmacists and pharmacy technicians engage in or supervise drug preparation activities on May 15, 2013.

As of Dec. 31, 2015, there were six DPPs. The status and/or outcome of DPP assessments are posted on the ["Find a Pharmacy or Pharmacy Professional"](#) tool on our website.

### STANDING COMMITTEE

## The Drug Preparation Premises Committee

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

– As of Dec. 31, 2015

#### ELECTED PRACTITIONERS:

- Regis Vaillancourt (Chair)
- Michelle Filo
- Michael Nashat

#### APPOINTED PUBLIC MEMBERS:

- Aladdin Mohaghegh
- Joy Sommerfreund

#### NON-COUNCIL COMMITTEE MEMBERS:

- Tim Brady
- Tracy Wiersema

#### STAFF RESOURCE:

- Judy Chong

## SPECIAL FEATURE:

# HOSPITAL PHARMACY BASELINE ASSESSMENTS

In late 2014, the government introduced legislation that will ultimately provide the College with the authority to license and inspect hospital pharmacies throughout Ontario. Specifically Bill 21: *Safeguarding Health Care Integrity Act*, 2014:

- Provides the Ontario College of Pharmacists with the authority to license and inspect pharmacies within public and private hospitals, in the same manner it currently licenses and inspects community pharmacies
- Provides the College with the ability to enforce licensing requirements with regard to hospital pharmacies
- Allows the College to make regulations to establish the requirements and standards for licensing, operation and inspection of hospital pharmacies
- Provides government with the ability to extend the College's oversight to other institutional pharmacy locations in the future, as appropriate

Bill 21 was passed in the legislature in 2015, but provisions related to the College's oversight of hospital

pharmacies will not come into effect until the required amendments to the *Drug and Pharmacies Regulation Act* (DPRA) regulation are approved by government.

### Supporting By-Law Changes

The proposed changes to the DPRA required several complementary changes to College By-laws. Mainly, these changes were related to fees for the issuance and renewal of Certificates of Accreditation for hospital pharmacies.

### DPRA Changes

In addition to adding provisions for hospital pharmacies, the proposed changes also introduce a shift to an outcomes-based approach to regulation. The overall goal is to move specific expectations from the regulation into standards, policies, guidelines or processes. This will help the regulation to stay current with changes in practice for a longer period of time.

The proposed changes were circulated for a [60-day consultation](#) between March 10 and May 10, 2015.

Currently, the proposed regulation changes are being considered by government, and are expected to be proclaimed in 2016. Upon proclamation, practice expectations will not have changed.

Read more about the proposed changes to the DPRA on the [DPRA Key Initiative](#) on the OCP website.



The proposed by-laws were circulated for a 60-day public consultation between September 21 and November 20, 2015. The majority of feedback received during the consultation expressed disagreement with the proposed fee structure for hospital pharmacy accreditation. Before approving the new by-laws at their December 2015 meeting, Council recommended a reduction to fees for hospital pharmacies.

The new by-laws relating to hospital pharmacy fees (included in College By-law No. 4) will come into effect upon the proclamation of the amended DPRA regulation.

### Baseline Assessments

In anticipation of receiving legislative oversight, the College completed baseline assessments on all of Ontario's 224 hospital pharmacies in 2015. The assessments revealed opportunities for hospital pharmacies, and findings around policies and procedures, traceability, compounding and professional responsibilities are available in an article from the [Winter 2016 issue of \*Pharmacy Connection\*](#).

To conduct the baseline assessments, the College developed draft hospital pharmacy assessment criteria through a comprehensive collaborative process involving the review of relevant practice standards and accreditation processes (provincially, nationally and internationally) with ongoing input from practicing hospital pharmacists and pharmacy technicians. The criteria complements and

enhances existing criteria from other organizations such as Accreditation Canada, the Canadian Society for Hospital Pharmacists (CSHP) and the International Pharmaceutical Federation (FIP).

There are three main types of assessment criteria — standards which already exist, standards that are emerging and organizational standards. Pharmacies are evaluated as either meeting the standards, partially meeting the standards, not meeting the standards, or not applicable.

### Next Steps

It is expected that the DPRA regulation amendments will be approved in 2016, setting into motion the College's official oversight of hospital pharmacies.

In preparation for this, the College will be reviewing feedback collected throughout the year to evolve the assessment criteria to ensure it accurately supports hospital practice. The College will also finalize the process for accreditation and develop a schedule for ongoing assessments.

Eventually, hospital pharmacy assessments will incorporate an assessment of the individual practitioner working in the hospital pharmacies, similar to the new practice assessment program currently being piloted in community pharmacies. Find more about practice assessments on page 29.

# INVESTIGATING AND RESOLVING **COMPLAINTS**



## INVESTIGATING AND RESOLVING COMPLAINTS

One of the primary ways we protect the public is through our investigation process. When we receive information that raises concerns about the care or behaviour of a pharmacist, pharmacy technician, student or intern, we will investigate.

Any member of the public who is dissatisfied with the care or services provided by a practitioner or pharmacy may file a formal complaint or report the information to the College. We investigate and resolve every complaint we receive to ensure practitioners are providing appropriate, safe and ethical care.

There are a number of other ways we might be informed about a potential issue with a practitioner or practice site. For example, employers, facility owners or other regulated healthcare professionals have a mandatory obligation to report certain concerns, including information about sexual abuse of a patient, misconduct, incapacity or incompetence.

Additionally, practitioners are required to report themselves if they have been found guilty of an offense or are the subject of a non-College investigation. Regardless of how information comes to us, we always take potential issues seriously and take action to resolve them in the public's interest.

### BY THE NUMBERS

**266** complaints received in 2015

 **30% increase** since 2014

**88** reports received in 2015

 **26 more** than 2014

**1%** of practitioners were under investigation as of Dec. 31, 2015

**17** complaints have been resolved through the Alternative Dispute Resolution process since it was introduced



**38%** of complaints received in 2015 were related to dispensing errors

**19%** of reports were related to issues with narcotics, forgery and/or fraud

**31** practitioners were referred to the Discipline Committee as a result of a complaint or report



**51** practitioners were issued an oral caution as a result of a complaint or report

## The Inquiries, Complaints and Reports (ICRC) Committee – As of Dec. 31, 2015

The Inquiries, Complaints and Reports Committee (ICRC) oversees all investigations into a practitioner's conduct, competence and capacity (this includes pharmacists, pharmacy technicians, students or interns). The Committee oversees all complaint investigations, Registrar's investigations and health inquiries. Meeting in small groups or panels, they consider the facts of each case, review submissions from both the complainant and practitioner, and consider the records and documents related to the case.

### ELECTED PRACTITIONERS:

- Laura Weyland (Chair)
- Heather Boon
- Gerry Cook
- Christine Donaldson
- Michelle Filo
- Chris Leung
- Jon MacDonald
- Michael Nashat
- Goran Petrovic
- Farid Wassef

### APPOINTED PUBLIC MEMBERS:

- Kathy Al-Zand
- Ronald Farrell
- John Laframboise
- Aladdin Mohaghegh
- Shahid Rashdi
- Joy Sommerfreund

### NON-COUNCIL COMMITTEE MEMBERS:

- Lavinia Adam
- Elaine Akers
- Kalyna Bezchlibnyk-Butler
- Bonnie Hauser
- Eva Janecek
- Elizabeth Kozyra
- Dean Miller
- Akhil Pandit Pautra
- Hitesh Pandya
- Saheed Rashid
- Satinder Sanghera
- Dan Stringer
- Asif Tashfin
- Tracy Wiersema

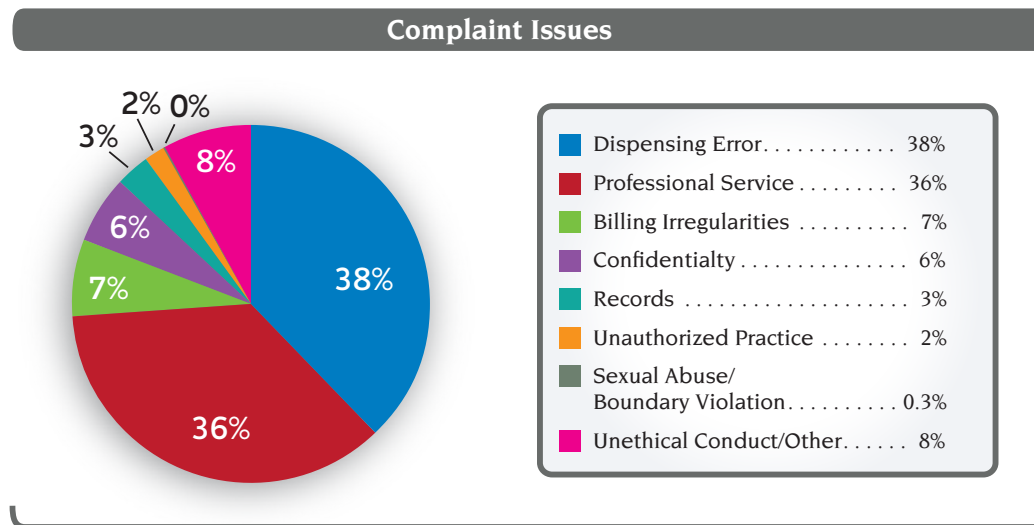
### STAFF RESOURCE:

- Maryan Gemus

## INVESTIGATING AND RESOLVING COMPLAINTS

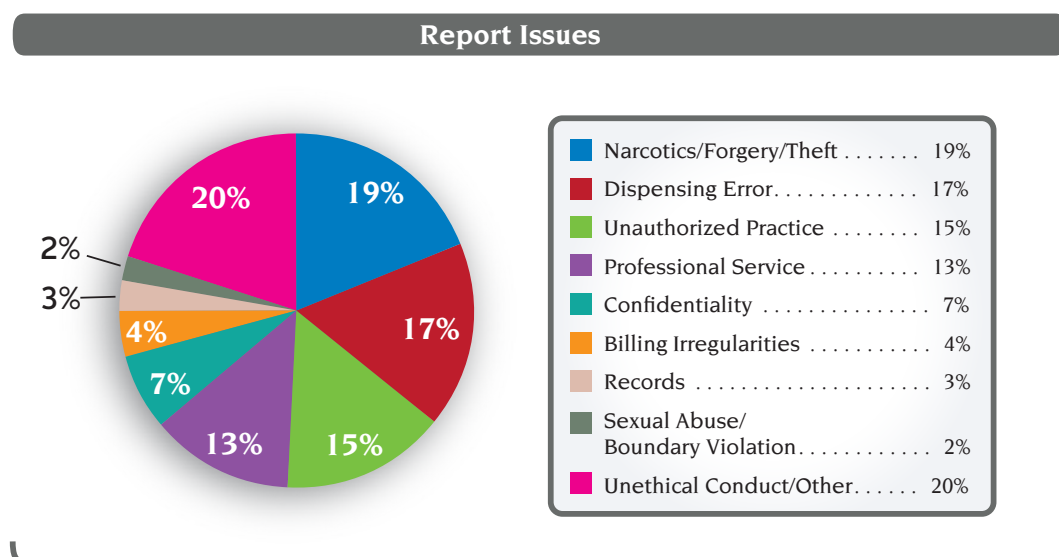
### Complaint Issues

This graph shows the breakdown of issues for the complaints reviewed by the ICRC in 2015. 38% of the complaints reviewed in 2015 were related to dispensing errors while 36% were related to professional service problems (including problems with communications or issues concerning counselling a patient, performing MedsChecks, or ending the pharmacist-patient relationship.) The “other” category includes various problems such as unethical conduct, improper supervision, forgery or theft and unauthorized practice.



### Report Issues

This graph shows the breakdown of issues for the reports reviewed by the ICRC in 2015. 19% of the reports reviewed in 2015 were related to narcotics, forgery and/or theft. The “other” category includes various problems such as practitioners behaving unethically, failing to fulfill a College requirement, charges or findings of guilt and improper supervision.



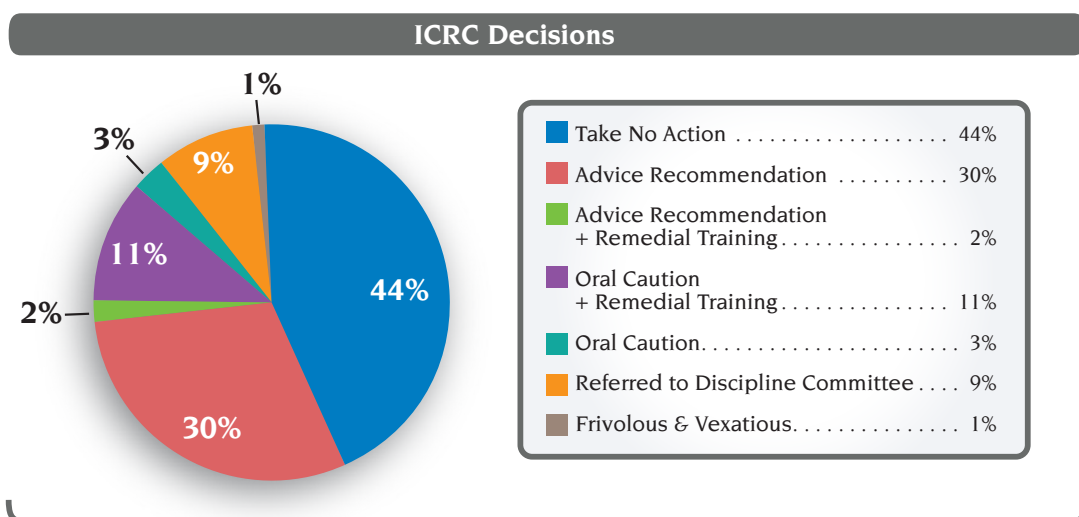


## INVESTIGATING AND RESOLVING COMPLAINTS

### ICRC Decisions

The ICRC strives to be consistent, transparent and reliable in its decisions. The Committee uses a number of tools to guide the decision-making process, such as clearly outlined definitions and risk-assessment frameworks.

The ICRC has a number of options when resolving a complaint or report. It can refer a practitioner to the Discipline or Fitness to Practise committees, require them to complete remedial training (also known as specified continuing education or remediation program (SCERPs)), issue an oral caution, or take no action. Additionally, the practitioner may voluntarily enter into an agreement or undertaking with the College.



The summary and date of any oral caution and/or remedial training ordered by the ICRC for complaints or reports filed after April 1, 2015 can be found on the “Find a Pharmacy or Pharmacy Professional” tool on the OCP website. As well, find details about any practitioner who was referred to the Discipline or Fitness to Practise committees.

### 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 and reports committees of the self-regulating health professional colleges in Ontario. The following list displays the issues brought forward to HPARB regarding this College in 2015.

- 27 new requests for review in 2015
  - 9 requests by a practitioner
  - 18 requests by a complainant
- 24 reviews pending (from 2015 and subsequent years)
- 25 decisions received in 2015
  - 12 decisions upheld
  - 4 referred back to ICRC
  - 9 withdrawn

# A LOOK BACK AT 2015

### Transparency Initiatives: Posting Oral Cautions and Remedial Training Decisions

In 2015, Council passed by-laws that allow for more information to be available about pharmacy professionals. Two significant changes in this area are in the posting of oral cautions and orders to complete remedial training (also known as specified continuing education or remedial programs (SCERPs)). This applies to all complaints filed after April 1, 2015. As such, the College posted the summary and date for the 14 members who received cautions and remedial training orders in 2015. Twelve of these were for serious dispensing errors involving high risk or red flag patient populations (such as pediatric or elderly patients), high risk drugs (such as methadone) and situations requiring extra care (such as the preparation of compliance packs). The remaining two matters were related to inappropriate advertising and theft.

### Alternative Dispute Resolution

In 2014, the College initiated a pilot project to test Alternative Dispute Resolution (ADR) as an option to resolve certain types of complaints. 2015 was the first full-year where ADR was an official option for resolving a complaint.

ADR is a voluntary, confidential process with the goal of resolving the complaint using the assistance of an independent mediator. The mediator works with those involved to help them reach a resolution, which must be approved by the ICRC.


ADR offers complainants and practitioners an opportunity to discuss their concerns openly. It is less formal than a College investigation, and offers an opportunity for greater participation and input in resolving the complaint. It is also valuable in cases where the complainant and practitioner will continue to have contact after the complaint has been resolved.

To date, 17 complaints have been resolved through ADR. There are currently three complaints that are in the process of being mediated through ADR.



# DISCIPLINE AND HEALTH MONITORING

### BY THE NUMBERS

**33** discipline hearings held in 2015  
 **16 more** than in 2014



**100%** of findings related to failure to meet the Standards of Practice

**38%** of decisions related to issuing false or misleading accounts

**8** discipline hearings were contested

**27** practitioners monitored while fulfilling orders from the Discipline Committee

 **50% increase** since 2014

**12** active health inquiries

 **1 more** than 2014

**1** practitioner found to be incapacitated

If there are concerns that a pharmacist, pharmacy technician, student or intern has demonstrated a deliberate disregard for a patient's welfare, engaged in dishonourable behaviour or demonstrated extreme substandard care, then that practitioner is referred to the College's Discipline Committee.

The Discipline Committee receives referrals from:

#### [Inquiries, Complaints and Reports Committee](#)

The ICRC may decide to refer allegations of professional misconduct or incompetence to the Discipline Committee if it has concerns that the practitioner was dishonest, breached trust, appeared to show a willful disregard for professional values, and/or appeared to be unable to practice to the standards.

#### [Accreditation Committee](#)

The Accreditation Committee will refer a pharmacy, including the Designated Manager, Director or corporation to the Discipline Committee if the pharmacy has failed to meet the requirements of the *Drug and Pharmacies Regulation Act*.

### Discipline Committee Findings

The Discipline Committee held 33 hearings in 2015.

- Findings were made with respect to 26 members
  - 100% failure to meet the Standards of Practice
  - 20% failure to keep appropriate records
  - 38% issuing false or misleading accounts
  - 8% proprietary misconduct
  - 4% misconduct in another jurisdiction
  - 4% boundary violation
  - 0% sexual abuse
- 1 hearing had no finding
- 5 hearings will continue into 2016
- 1 hearing was for a re-instatement

Eight of the 33 hearings in 2015 were contested.

### STATUTORY COMMITTEE

## The Discipline Committee – As of Dec. 31, 2015

Panels of the Discipline Committee hear allegations of professional or proprietary misconduct. Upon making a finding of professional or proprietary misconduct the panel has the authority to revoke, suspend, reprimand, fine or impose terms or restrictions on a practitioner's practice.

#### ELECTED PRACTITIONERS:

- Doug Stewart (Chair)
- Christine Donaldson
- Jillian Grocholsky
- Chris Leung
- Don Organ
- Karen Riley
- Mark Scanlon
- Farid Wassef
- Laura Weyland

#### APPOINTED PUBLIC MEMBERS:

- Kathy Al-Zand
- Linda Bracken
- Ronald Farrell
- Javaid Khan
- John Laframboise
- Lew Lederman
- Sylvia Moustacalis
- Shahid Rashdi

#### NON-COUNCIL COMMITTEE MEMBERS:

- Jennifer Antunes
- Cheryl Bielicz
- Dina Dichek
- Debbie Fung
- Jim Gay
- Mike Hannalah
- Helen Lovick
- Cara Millson
- Debra Moy
- Doris Nessim
- Akhil Pandit Pautra
- Hitesh Pandya
- Jeannette Schindler
- Connie Sellors
- Adam Silvertown
- David Windross

#### STAFF RESOURCE:

- Maryan Gemus



## DISCIPLINE CASE SUMMARIES

The Discipline Committee made decisions regarding the following practitioners. Summaries for each case below are available in Appendix A on page 66.

- Marilyn Adamo and Lifestyle Pharmacy & Candy Bar I.D.A.
- Luke Agada
- Ovietobore (Felix) Ayigbe
- Leisa Barrett
- Ashraf Bebauey
- Robert Button
- Armia Fahmy
- Flora Farsad-Abarjy
- Sameh Guirguis
- Paul Hellier
- Brian Hemens
- Martin Keeping
- Bhavesh Kothari
- Phillip Ku
- G.M.
- Vartan Manoukian
- Gopi Menon
- Marian Michael
- Harvey Organ
- Vaughn Osgan
- Khan Qaisar
- Mustafa Salem
- Sherif Samwaiel
- Essam Siha
- Elizabeth Toth
- Svetlana Tracey
- Zbigniew Wasilewski and Wasilewski Drugs Ltd.
- Lawrence Zachidniak

The full text for each of these hearings is available on [www.canlii.org](http://www.canlii.org)

The College will discipline a pharmacist, pharmacy technician, student or intern if they are found to have deliberately disregarded the welfare of a patient, behaved dishonourably or provided care that was below the standard.

### Health Monitoring and Fitness to Practise

Sometimes the College learns about a practitioner who is reported to be incapacitated in some way. This could mean the practitioner is currently suffering from a substance use disorder, mental health disorder, or another physical or mental condition. When we receive this information — often through a mandatory report from an employer or facility operator, or from a practitioner who reports themselves — we will conduct an inquiry.

This can include asking the practitioner about their current health status and having them supply information from their doctor or other healthcare providers. The results of this inquiry are compiled into a report and sent to a panel of the ICRC for review. This panel could ask for more information or might ask the practitioner to undergo an independent medical examination.

The panel will review the information and may refer the practitioner to the Fitness to Practise Committee. This Committee will consider the matter and has the power to make a finding of incapacity. This could include holding a formal hearing or requiring the practitioner to enter the Ontario Pharmacy Support Program, administered by the Centre for Addiction and Mental Health (CAMH), which offers intervention, assessment and monitoring.

If a practitioner is found to be incapacitated, the College can revoke their certificate of registration, suspend the practitioner and/or impose specified terms or restrictions on their practice. Information about a practitioner's incapacity is available on the [“Find a Pharmacy or Pharmacy Professional”](#) tool on our website. However, unlike the disciplinary process, Fitness to Practise proceedings are not public.

### Health Inquiry Statistics — 2015

There were 12 active health inquiries overseen by a health inquiry panel of the ICRC. Of those, nine practitioners continue to be investigated. Three practitioners are no longer being investigated because they are no longer practising pharmacy. One of the 12 inquiries was initiated in 2015, and there were no referrals to the Fitness to Practise Committee.

### Fitness to Practice Statistics — 2015

There was one finding of incapacity in 2015

### Compliance Monitoring

The College monitors practitioners who are required to fulfill orders imposed by the Discipline or Fitness to Practise committees. We also monitor practitioners 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 pharmacy professionals were monitored during the 2015 calendar year:

- 5 monitored while fulfilling orders from the Fitness to Practise Committee
- 27 monitored while fulfilling orders from the Discipline Committee
- 110 monitored while fulfilling remedial training (also known as a SCERP)

#### STATUTORY COMMITTEE

### The Fitness to Practise Committee

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

– As of Dec. 31, 2015

#### ELECTED PRACTITIONERS:

- Mark Scanlon (Chair)
- Fayez Kosa
- Karen Riley

#### APPOINTED PUBLIC MEMBERS:

- Kathy Al-Zand
- Joy Sommerfreund

#### NON-COUNCIL COMMITTEE MEMBERS:

- Dina Dichek

#### STAFF RESOURCE:

- Maryan Gemus

## SPECIAL FEATURE:

# COMMUNICATING WITH PATIENTS AND PRACTITIONERS

In 2015 the College communicated with both patients and practitioners primarily through the following channels: our website, e-Connect, social media, *Pharmacy Connection*, and video.

### Website

Since our website redesign in 2014, which created a tailored experience for our three different user groups – public, applicants, and pharmacy professionals – feedback has been very positive.

In 2015 we continued to update and add to our growing library of [practice tools](#). As well, we launched a [continuing education \(CE\) feature](#) on the site to help practitioners find their next CE activity quickly and easily. The new tool organizes hundreds of potential CE activities for pharmacists and pharmacy technicians. Pharmacy professionals can browse CE by topic, type, location or date, or use the search function to find something that's interesting and relevant to them.

In the Library area of our website we added a [Social Media section](#), which features our four social media channels as well as a social media infographic illustrating the College's social media journey (see page 58).

### e-Connect

The College's bi-weekly e-Newsletter, e-Connect, is the primary way which we communicate important information to practitioners. Each issue features short, easy-to-read articles packed with information on regulatory and practice topics, as well as tips to assist pharmacists and pharmacy technicians in practicing to the standards. e-Connect currently has more than 23,000 subscribers and this number is continuously growing. Archived issues of e-Connect are available on the [College's website](#).

### Social Media

With the launch of our official Facebook and LinkedIn pages in 2015, the College is now on [Twitter](#), [Facebook](#), [LinkedIn](#), and [YouTube](#). We encourage both practitioners and the public to connect with us on these social channels where we share the latest College news, helpful tips, updates, and important reminders.

In 2015, our YouTube channel was re-designed, and all of our videos were organized into playlists. Each playlist has a number of relevant videos under it. Playlists include overview videos, key messages from the College, practice tools, and more.

On **Twitter**, we “tweet” multiple times per day and launched our #OCPracticeTip initiative, where every week we share a brand new practice tip. Tips are developed from actual observations and encounters in practice and include topics such as record keeping and documentation, methadone dispensing, narcotics reconciliation, clinical decision-making, patient counselling, and much more.

The College’s new **Facebook** page has also been very popular with practitioners and the public. In addition to viewing our weekly Facebook updates, those following us can watch videos, access practice tools, subscribe to e-Connect, view photos, and more, right from our Facebook page.

The College is on **LinkedIn** too, sharing weekly updates for practitioners. Currently, we have over 1,300 people following us on LinkedIn, and this number continues to rise.

The same content is never posted on more than one of our social media channels at the same time, so those connected with us on all of our channels can benefit from different content and no overlap.

### Pharmacy Connection

*Pharmacy Connection*, the College’s quarterly magazine, is one of the best ways for practitioners to get helpful, in-depth articles on issues that affect the profession and are relevant to practice. Our “Focus on Error Prevention” and “Close-Up on Complaints” columns are featured in every issue, and are particularly popular among practitioners as they bring to light real-life cases or scenarios

and important lessons that can help inform everyday practice. Archived issues of the magazine are available on the [College’s website](#).

### Video

The College produced and shared a variety of videos in 2015, all of which have been uploaded to OCP’s [YouTube channel](#). Some of these videos are featured below:

**“Integrating Pharmacy Technicians into Community Practice”**, explains ways to integrate pharmacy technicians into the workflow of a community pharmacy. As the video demonstrates, when effectively integrated and working to their full scope, pharmacy technicians can free up more time for pharmacists to focus on the delivery of clinical services.

**“Trust in the Care Your Pharmacist Provides”** video gives the public an overview of the many services pharmacists and pharmacy technicians are qualified and authorized to deliver. This video is designed to make the public aware of the services pharmacy professionals can provide, but also to feel confident and comfortable with the care they receive.

As well, the University of Toronto and OCP published a series of videos as part of the **“Optimizing Patient Care”** initiative, a program designed to help pharmacists and pharmacy technicians enhance the quality of care and service provided to patients. Topics include clinical decision-making, what pharmacists can do for patients, and managing relationships with patients.



# OCP's Social Media Journey



# How are we doing?

## OCP's Social Media Journey



### Fan growth & interactions since 2015 launch\*:

End of Jul 2015:	End of Aug 2015:	End of Oct 2015:
<b>338</b> likes	<b>649</b> likes	<b>2,136</b> likes
<b>114</b> interactions	<b>368</b> interactions	<b>2,701</b> interactions

An average of **596** new Facebook fans per month\*

### YouTube videos & views since 2009 launch:

End of Aug 2011:	End of Aug 2013:	End of Aug 2015:
<b>7</b> videos	<b>15</b> videos	<b>37</b> videos
<b>381</b> views	<b>15,609</b> views	<b>50,965</b> views



### Since launching Twitter in 2009:

<b>650+</b> interactions per month	<b>43</b> new followers per month
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### Since launching LinkedIn in 2015:

<b>60+</b> interactions per month	<b>36</b> new followers per month
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\* Since the College launched its Facebook page, we ran a paid advertising campaign. "Interactions" refer to comments, likes, clicks, and shares/retweets. Any one of these actions count as an interaction. Averages were calculated over the three month period between August and October 2015.

# REMAINING **FISCALLY** RESPONSIBLE



## The Finance & Audit Committee

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

– As of Dec. 31, 2015

**ELECTED PRACTITIONERS:**

- Jon MacDonald
- Mark Scanlon
- Doug Stewart

**APPOINTED PUBLIC MEMBERS:**

- Javaid Khan (Chair)
- Lew Lederman

**STAFF RESOURCE:**

- Connie Campbell



# 2015 SUMMARY 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, 2015 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, 2015. We expressed an unmodified audit opinion on those financial statements in our report dated March 29, 2016.

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, 2015 are a fair summary of those financial statements, in accordance with Canadian accounting standards for not-for-profit organizations.

Toronto, Ontario  
March 29, 2016

*Clarke Derming LLP*  
CHARTERED ACCOUNTANTS  
Licensed Public Accountants



## SUMMARY BALANCE SHEET

AS AT DECEMBER 31, 2015

	2015	2014
<b>ASSETS</b>		
Current assets		
Cash and short term investments	\$ 500,614	\$ 601,077
Accounts receivable and cost recoveries	163,871	208,841
Prepaid expenses	115,487	223,870
	<b>779,972</b>	1,033,788
Long-term investments	<b>8,242,634</b>	8,586,257
Property and equipment	<b>4,333,685</b>	4,342,026
	<b>13,356,291</b>	13,962,071
<b>LIABILITIES</b>		
Current liabilities		
Accounts payable and accrued liabilities	<b>1,515,775</b>	1,706,248
Deferred revenue	<b>59,887</b>	101,137
	<b>1,575,662</b>	1,807,385
<b>NET ASSETS</b>		
Net assets invested in property and equipment	<b>4,333,685</b>	4,342,026
Internally restricted		
Investigations and hearings reserve fund	<b>2,000,000</b>	2,200,000
Contingency reserve fund	<b>4,250,000</b>	4,250,000
Fee stabilization fund	<b>875,000</b>	1,250,000
Unrestricted	<b>321,944</b>	112,660
	<b>11,780,629</b>	12,154,686
	<b>\$ 13,356,291</b>	\$ 13,962,071

## SUMMARY STATEMENT OF OPERATIONS AND NET ASSETS

YEAR ENDED DECEMBER 31, 2015

	2015	2014
Revenues		
Member fees - Pharmacists	\$ 8,825,392	\$ 8,395,099
Member fees - Pharmacy Technicians	1,501,194	1,104,000
Pharmacy fees	3,856,597	3,654,320
Registration fees and income	1,603,841	1,755,625
Investment and other income	246,042	344,286
	<b>16,033,066</b>	15,253,330
Expenses		
Council and committees	2,563,076	2,404,154
Administration	13,340,636	12,279,142
Property	137,703	110,549
	<b>16,041,415</b>	14,793,845
Excess (deficiency) of revenues over expenses from operations for the year before depreciation	<b>(8,349)</b>	459,485
Depreciation	<b>365,708</b>	422,346
Excess (deficiency) of revenues over expenses for the year	<b>(374,057)</b>	37,139
Net assets - at beginning of year	<b>12,154,686</b>	12,117,547
Net assets - at end of year	<b>\$ 11,780,629</b>	\$ 12,154,686



# APPENDIX A

## DISCIPLINE CASE SUMMARIES

**Member:** Bhavesh Kothari, R.Ph. (OCP #217389)

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After a hearing held on November 25-28, 2014, December 5, 2014, and March 20, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Kothari on March 31, 2015, with respect to the following incidents:

- that the Member submitted accounts or charges for services that he knew were false or misleading to the Ontario Drug Benefit program for one or more drugs and/or products;
- that the Member falsified pharmacy records relating to his practice in relation to claims made to the Ontario Drug Benefit program for one or more drugs and/or products.

In particular, the Panel found that Mr. Kothari:

- failed to maintain a standard of practice of the profession;
- falsified records relating to his practice;
- submitted accounts or charges for services that he knew to be false or misleading;
- contravened a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular, sections 5 and 15(1)(b) of the Ontario Drug Benefit Act, R.S.O. 1990, c. O.10, as amended, and/or Ontario Regulation 201/96 made thereunder;
- engaged in conduct or performed an act or acts 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.

After submissions heard on June 16, 2015, the Panel issued the following Order:

1. A reprimand
2. That the Registrar suspend the Member's certificate of registration for a period of eighteen (18) months with one (1) month of the suspension to be remitted on condition that the Member complete the remedial training specified below;
3. Directing the Registrar to impose specified terms, conditions or limitations on the Member's certificate of registration as follows:
  - i. The Member must successfully complete, at his own expense and within twelve (12) months of the date the Order is imposed, the ProBE Program on professional problem-based ethics for health care professionals offered by the Centre for Personalized Education for Physicians;
  - ii. The Member shall be prohibited from having any proprietary interest in a pharmacy of any kind and/or receiving remuneration for his work as a pharmacist other than remuneration based on hourly, or weekly rates only, provided that this term, condition and limitation may be removed by an Order of a panel of the Discipline Committee, upon application by the Member, such application not to be made sooner than five (5) years from the date the Order is imposed;
  - iii. For a period of five (5) years from the date

the Order is imposed, the Member shall be prohibited from acting as a Designated Manager in any pharmacy;

- iv. For a period of five (5) years from the date the Order is imposed, the Member shall be required to notify the College in writing of the names(s), address(s) and telephone numbers(s) of all employer(s) within fourteen (14) days of commencing employment in a pharmacy;
- v. For a period of five (5) years from the date the Order is imposed, the Member shall provide his pharmacy employer with a copy of the Discipline Committee Panel's decision in this matter and its Order; and
- vi. For a period of five (5) years from the date the Order is imposed, the Member shall only engage in the practice of pharmacy for an employer who agrees to write to the College within fourteen (14) days of the Member's commencing employment, confirming that it has received a copy of the required documents identified above, and confirming the nature of the Member's remuneration.

#### 4. Costs to the College in the amount of \$180,000.

In its reprimand, the Panel noted that the Member is a pharmacist and is part of a highly respected profession within the healthcare system and the community at large. The Panel pointed out that pharmacists' relationships with third party payors are based on honesty and integrity, and that claims are submitted and accepted in good faith.

The Panel pointed to the frequency and volume of the member's fraudulent activities and noted that it considered these actions as being unprofessional, dishonourable and disgraceful, as well as unbecoming of a pharmacist. The Panel related that the Member showed complete disregard for the responsibility he accepted as Designated Manager and Owner.

The Panel noted that the funds the Member took from the public purse came from a system that has many fiscal challenges, and that considerable resources were used by both to investigate and prosecute this matter.

The Panel expressed its hope that the Member has learned from this experience and that he will work to improve his conduct as a pharmacist, in order to regain the public trust.

#### Member: Phillip Ku

---

After a hearing held on December 16 – 17, 2014, and April 1 and 9, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Ku with respect to the following incidents:

- that between about September 27, 2013, and February 5, 2014, the member failed to maintain current contact information with the College and/or failed to respond in a timely way to communications from the College and/or evaded attempts by the College to contact him;
- that on or about September 13, 2013, the member misappropriated drugs from Peoples Choice Remedy's Rx pharmacy in Toronto, Ontario;

In particular, the Panel found that Mr. Ku:

- failed to maintain a standard of practice of the profession;
- 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.

The Panel imposed an Order which included as follows:

1. That the Member appear before the Panel to be reprimanded on or before July 9, 2015;
2. That the Registrar immediately revoke the Member's certificate of registration;
3. Costs to the College in the amount of \$25,000.00 payable within 30 days of the date of the Order.

#### Member: Leisa Barrett, R.Ph.

---

At a hearing held on January 12, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Ms. Barrett in that:

- in or about the period from June 30, 2010, to June 27, 2013, she failed to maintain the professional boundaries of the pharmacist-patient relationship when she developed a non-professional, personal relationship with a patient, J.S.;
- in or about the period from January 1, 2010,



- to March 31, 2014, she failed to keep records as required by the Medication Procurement and Inventory Management Policy with respect to the inventory of narcotics and controlled drugs;
- in or about the period from January 1, 2010, to March 31, 2014, she allowed an individual, J.S., whom she knew to be addicted to narcotics and whom she suspected of stealing narcotics from the pharmacy, to have a key to the pharmacy and access to the dispensary area and/or drug vault;

In particular, the Panel found that Ms. Barrett

- failed to maintain a standard of practice of the profession;
- failed to keep records as required respecting her patients;
- contravened, while engaged in the practice of pharmacy, any federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular, section 43 of the Narcotics Control Regulations, C.R.C., c. 104;
- 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.

The Panel imposed an Order which included as follows:

1. A reprimand;
2. Directing the Registrar to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular, that the Member complete successfully with an unconditional pass, at her own expense and within 12 months of the date of the Order, the ProBE Program on Professional/Problem Based Ethics for Healthcare Professionals;
3. A suspension of 5 months with 2 months of the suspension remitted on condition that the Member complete the remedial training cited above. The suspension commenced on the date of the Order i.e. January 12, 2015;
4. Costs to the College in the amount of \$5,000.00.

In its reprimand to the Member, the Panel reminded the Member that integrity, trust and professional conduct are at the core of the practice of Pharmacy and the delivery of care to the public. Furthermore,

the Panel highlighted that pharmacy, as a self-regulated profession, bears the responsibility to ensure the trust of the members of the profession and the public. The Panel stated that it was of the view that the Order imposed on the Member was fair and reasonable, and that the Member's actions were dishonourable, disgraceful and unprofessional.

#### **Member:** Lawrence Zachidniak, R.Ph.

At a hearing held on January 13, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Zachidniak with respect to the following incidents:

- discrepancies in the inventory of narcotics and other controlled drugs, as recorded in the inventory counts conducted between September 2012 and May 2013, and in particular:
  - (i) failing to maintain security of narcotics and other controlled drugs;
  - (ii) failing to maintain accurate records of purchases, sales and remaining inventory for narcotics and other controlled drugs; and/or
  - (iii) failing to make timely reports of losses of narcotics and other controlled drugs to Health Canada; and/or
- discrepancies in methadone administration practices, and in particular:
  - (i) failing to record properly new prescriptions for dosage changes for methadone, including Rx 9398600/Rx 9400957 for the patient, D.C., and/or Rx 9399672/Rx 9400965 for the patient T.Q., on or about May 14-15 2013; and/or
  - (ii) failing to ensure a pharmacist witnessed doses of methadone taken at the pharmacy in or about March-May 2013.

In particular, the Panel found that Mr. Zachidniak

- failed to maintain a standard of practice of the profession;
- failed to keep records as required respecting his patients;
- contravened the Pharmacy Act, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991 or the regulations under those Acts, and in particular, the Drug and Pharmacies Regulation Act, R.S.O. 1990, c.H.4, s. 156;

- contravened a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, including the Narcotic Control Regulations, sections 30, 40, 42 and/or 43, under the Controlled Drugs and Substances Act, S.C. 1996, c. 19, and/or the Food and Drug Regulations, sections G.03.001, G.03.004, G.03.007, G.03.010, G.03.012, G.03.013 and/or G.03.015, under the Food and Drugs Act, R.S.C. 1985 c.F-27, as well as the Narcotic Safety and Awareness Act, 2010, S.O. 2010, Chapter 22, section 11;
- 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.

The Panel imposed an Order which included as follows:

1. A reprimand;
2. Directing the Registrar to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular, that the Member complete successfully the following courses, programs, and instruction, including any evaluations, at his own expense and within 12 months of the date of the Order:
  - a. the CAMH Opioid Dependence Treatment Core Course;
  - b. Module 5: Practice and Pharmacy Management II (including JP #7-Controlled Drugs and Substances Act) from the Canadian Pharmacy Skills Program II;
  - c. instruction by an experienced pharmacist acceptable to the College regarding comprehensive reconciliation reports for narcotics and other controlled drugs, following review by the Member of written materials to be identified by the College; and,
  - d. session with Gail Siskind, expert in ethical issues for regulated health care professionals, or other expert acceptable to the College, regarding the risk to the public posed by controlled substances, including narcotics and targeted substances, that are missing or cannot otherwise be accounted for in a pharmacy, before which session the Member will review published materials to be identified by the College, and provide copies of the Reasons for Decision and the publications to the expert at least one week in advance of the session.
3. Directing the Registrar to impose additional specified terms, conditions or limitations on the Member's Certificate of Registration requiring the Member to demonstrate following the instruction in paragraph 2 (c) that he has understood and put into practice the requirements for comprehensive reconciliation reports by providing at least four examples of such reports acceptable to the College that have been prepared by him during the 12-month period following the date of the instruction.
4. Directing the Registrar to impose additional specified terms, conditions or limitations on the Member's Certificate of Registration restricting the Member from having ownership interest in any pharmacy, or being the Designated Manager of any pharmacy, for a period of three years from the date of this Order, with one year of the restrictions to be remitted on condition that the Member complete the courses, programs and instruction set out in paragraphs 2 and 3 above as specified.
5. A suspension of 3 months with 1 month of the suspension to be remitted on condition that the Member complete the remedial training cited in paragraph 2 above. The suspension commences on January 14, 2015;
6. Costs to the College in the amount of \$3,000.00.

In its reprimand, the Panel reminded the Member that integrity and trust is paramount in the profession of pharmacy. The Panel stated its disappointment in the Member, noting that the Panel was quite shocked by the lack of control over narcotics for which the Member was responsible, suggesting that the Member had acted in a cavalier manner. The Panel stated its expectation that the Member would complete the remedial actions in the agreed upon time frame and use the opportunity to improve his professional conduct.

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**Member:** Sameh Guirguis, R.Ph.

---

At a hearing held on March 3, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Guirguis with respect to the following incidents:

- That on or about the dates identified below, he dispensed methadone to the patients identified

below without obtaining and/or documenting confirmation of their prior doses:

- i. C.E., December 20, 2013;
  - ii. M.H., December 20, 2013;
  - iii. R.R., December 20, 2013;
  - iv. D.W., December 20, 2013;
  - v. L.D., December 24, 2013;
- That on or about the dates identified below, he dispensed methadone to the patients identified below without obtaining and/or documenting a valid prescription for those instances of dispensing:
    - i. C.E., December 20, 2013;
    - ii. M.H., December 20, 2013;
    - iii. R.R., December 20, 2013;
    - iv. D.W., December 20, 2013.

In particular, the Panel found that Mr. Guirguis

- failed to maintain a standard of practice of the profession;
- contravened the Act, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991, or the regulations under those Acts, namely, s. 155 and/or s. 156 of the Drug and Pharmacies Regulation Act, R.S.O. 1990, c. H-4;
- contravened, while engaged in the practice of pharmacy, a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, namely, s. 31 of the Narcotic Control Regulations, C.R.C. c. 1041, made under the Controlled Drugs and Substances Act, S.C. 1996, c. 19;
- 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 as disgraceful, dishonourable or unprofessional.

The Panel imposed an Order which included as follows:

1. A reprimand;
2. Directing the Registrar to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular:
  - (a) that the Member complete successfully, at his own expense, within 12 months of the date of this Order, the following course and evaluation:
    - (i) Opioid Dependence Treatment Core Course, offered by the Centre for Addiction and

Mental Health; if the College so directs, the Member may successfully complete the Methadone, Buprenorphine and the Community course offered by the Ontario Pharmacists Association in lieu of the Opioid Dependence Treatment Core Course;

- (b) that the Member shall be prohibited from acting as a Designated Manager in any pharmacy until the date the College is notified that the Member has successfully completed the course and evaluation set out in paragraph 2(a)(i) above;

3. Directing the Registrar to suspend the Member's Certificate of Registration for a period of 3 months, with 2 months of the suspension to be remitted on condition that the Member complete the remedial training specified in subparagraph 2(a) above. The suspension shall commence on March 3, 2015;

4. Costs to the College in the amount of \$2,000.00.

In its reprimand, the Panel pointed out that the practice of pharmacy is a privilege which carries significant obligations to the public, the profession, and oneself. The Panel indicated that the Member failed in his obligation to adhere to the standards of practice when dispensing methadone. The Panel stated that methadone is highly regulated due to its pharmacological actions and the risk to the public if it is misused. The Panel agreed that the Member's actions were disgraceful, dishonourable, and unprofessional. The Panel expressed its expectation that the Order will motivate the Member to modify his behavior and professional practice.

**Member:** Armia Fahmy, R.Ph.

At a hearing on March 16, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Fahmy with respect to the following incidents:

- between about December 17, 2013, and December 20, 2013, he failed to take reasonable steps to ensure continuity of care for patients of the Pharmacy while the Pharmacy was unexpectedly closed for 2 days; and
- between about April 11, 2011, and February 5, 2014, he failed to maintain appropriate care and control of narcotic, controlled substances, and/or targeted

substances inventory at the Pharmacy, and/or failed to report a loss or theft of narcotics, controlled substances, and/or targeted substances as required.

In particular, the Panel found that Mr. Fahmy:

- failed to maintain a standard of practice of the profession;
- contravened, while engaged in the practice of pharmacy, a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, namely, s. 7(1) of the Benzodiazepines and Other Targeted Substances Regulations, SOR/2000-217, and ss. 42 and 43 of the Narcotic Control Regulations, C.R.C. c. 1041, both made under the Controlled Drugs and Substances Act, S.C. 1996, c. 19;
- 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 as disgraceful, dishonourable or unprofessional.

The Panel imposed an Order which included as follows:

1. A reprimand
2. Directing the Registrar to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular:
  - a. that the Member:
    - i. retain, at the Member's expense, a practice mentor acceptable to the College, on or before May 16, 2015;
    - ii. meet at least twice with the practice mentor for the purpose of reviewing the Member's practice and identifying areas in the Member's practice that require remediation; to this end, the Member shall provide the practice mentor with the following documents related to this proceeding:
      1. a copy of the Notice of Hearing;
      2. a copy of the Agreed Statement of Facts;
      3. a copy of the Joint Submission on Order;
      4. a copy of the Decision and Reasons, when available; and
      5. a copy of the Order, if applicable and when available;
    - iii. develop a learning plan to address the areas requiring remediation;

- iv. demonstrate to the practice mentor that the Member has achieved progress in meeting the goals established in the learning plan;
    - v. require the practice mentor to report the results of the mentorship meetings to the Manager, Investigations and Resolutions at the College, after their completion, which shall be no later than March 16, 2016;

- b. that the Member shall be prohibited from acting as a Designated Manager in any pharmacy until the later of:
    - i. May 14, 2016, and
    - ii. the date the College is notified that the Member has successfully completed the mentoring program set out in paragraph 2(a) above;

3. Directing the Registrar to suspend the Member's Certificate of Registration for a period of 2 months. The suspension shall commence on March 16, 2015; and

4. Costs to the College in the amount of \$2,000.00.

In its reprimand, the Panel expressed concern that this was the second time that the Member had appeared before a panel of the Discipline Committee within 12 months. The Panel noted that integrity and trust are paramount to the profession of pharmacy and expressed disappointment with the Member's actions. The Panel identified the potential impact of the member's actions on public safety as disturbing and his lack of control of the narcotics in his responsibility as shocking. The Panel suggested that the consistent lack of appropriate record keeping demonstrated disturbing and cavalier behaviour, which was unprofessional. The Panel indicated that the Member showed a complete lack of professionalism and commitment in carrying out the duties of a pharmacist, and showed a lack of commitment to patients, other members of this college, and other health care professionals in general. The Panel expressed its expectation that all health care professionals are to conduct themselves in a manner that maintains public confidence and safety.

**Member:** Vaughn Osgan, R.Ph.

At a hearing on March 27, 2015, a Panel of the Discipline Committee made findings of professional

misconduct against Mr. Vaughn Osgan with respect to the following incidents:

- The Member was found guilty on October 2, 2013, of criminal offences relevant to his suitability to practise; namely, conspiracy to traffic a controlled substance and conspiracy to produce a controlled substance (anabolic steroids) contrary to section 465(1)(c) of the Criminal Code of Canada; and
- The Member used a controlled drug (anabolic steroids) and failed to notify his Addiction Medicine Physician, PHP Monitor and PHP Case Manager or the Medical Director, in contravention of Terms 13 and 18 of his Professionals Health Program (PHP) contract dated June 18, 2009.

In particular, it is alleged that he

- was found guilty of criminal offences relevant to his suitability to practice;
- contravened a term, condition or limitation imposed on his certificate of registration; and
- 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.

The Panel imposed an Order which included as follows:

1. A Reprimand
2. Directing the Registrar to suspend the Member's Certificate of Registration for a period of six months, commencing July 1, 2015.
3. That the Member be prohibited, until the terms of suspension prescribed in (2), above, is served in its entirety:
  - (i) from acting as a Designated Manager for any pharmacy; and
  - (ii) from having any proprietary interest in a pharmacy as a sole proprietor or partner, or director or shareholder in a corporation that owns a pharmacy (excepting only that he may be permitted to own shares in a publicly traded corporation that has an interest in a pharmacy), or in any other capacity, or receiving any remuneration for his work as a pharmacist, or related in any way to the operation of a pharmacy, other than remuneration based on hourly or weekly rates or salary and in particular, not on the basis of any incentive or bonus for prescription sales.
4. The Member is required to comply with the following treatment plan for 24 months from the date of this Order:
  - (a) remain under the care of physician Dr. K. (or his designate approved in writing by the College);
  - (b) attend for a follow-up visit with Dr. K. or his designate at least once every six months or more frequently if so directed by Dr. K. or his designate;
  - (c) comply with all treatment recommendations of Dr. K. or his designate;
  - (d) attend for a follow-up visit with psychiatrist Dr. U. (or his designate approved in writing by the College) within 12 months of the date of this order, and again within 24 months from the date of this order;
  - (e) continue to take all medication as prescribed by Dr. U. or his designate;
  - (f) comply with all treatment recommendations of Dr. U. or his designate.
5. The Member is to provide a written authorization and direction to Dr. K. or his designate to:
  - (a) immediately advise the College if the member is not compliant with any portion of his treatment program;
  - (b) provide a written report to the College 12 months after this order, and 24 months after this order, reporting on the member's mental health and compliance with his treatment program.
6. The Member is to provide written authorizations to the College and Dr. K. (or his designate) that authorizes Dr. K. (or his designate) to speak with the College about all aspects of the member's health and treatment program.
7. The Member is to provide written authorizations to the College and Dr. U. (or his designate) that authorizes Dr. U. (or his designate) to speak with the College about all aspects of the member's health and treatment program.
8. The Member is to continue attending counselling sessions at Community Addiction Services of Niagara at a rate of at least once every six weeks and provide proof thereof to the College upon request.



9. For a period of two years from the date of this order, the Member shall only work for an employer who confirms to the College in writing that the employer has been provided with a copy of:

- (i) the Notice of Hearing in this matter;
- (ii) this Order; and
- (iii) the panel's reasons for decision in this matter, if available.

10. Costs to the College in the amount of \$5000.

In its reprimand, the Panel pointed out that the member is part of an honourable profession and that integrity, trust, and professional conduct are at the core of the practice of pharmacy. The Panel noted that the Member admitted responsibility for his action and agreed that his conduct was disgraceful, dishonourable, and unprofessional. The Panel indicated that the Member's actions were unacceptable and expressed the expectation that he will not appear before the Discipline Committee of the Ontario College of Pharmacists again.

#### **Member:** Vartan Manoukian

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Mr. Vartan Manoukian applied to the Discipline Committee for reinstatement of his Certificate of Registration. At a hearing on April 14 and 15, 2015, a Panel of the Discipline Committee heard this application. By way of a decision dated January 25, 2016, the application was dismissed.

#### **Member:** Martin Keeping, R.Ph. (OCP #93378)

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At a hearing on April 24, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Keeping with respect to the following:

- that the Member failed to maintain pharmacy records relating to his practice in accordance with legislative requirements;
- that the Member dispensed drugs and/or products for which prescriptions are legislatively required without an authorized prescriber's authorization;
- that the Member sold drugs and/or products in the absence of a prescription authorized by a prescriber in contravention of C.01.041 of the Food and Drug Regulations;

- that the Member backdated documentation on hardcopies; and
- that the Member falsified prescribers' authorizations.

In particular, the Panel found that he

- failed to maintain a standard of practice of the profession;
- failed to maintain records as required with respect to his patients;
- falsified records relating to his practice;
- contravened the Pharmacy Act, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991, or the regulations under those Acts;
- contravened, while engaged in the practice of pharmacy, a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs;
- 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.

The Panel imposed an Order which included as follows:

1. A reprimand
2. That the Registrar impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular, that the Member complete successfully with an unconditional pass, at his own expense and within 12 months of the date of this Order, the ProBE Program on Professional/Problem Based Ethics for Healthcare Professionals.
3. That the Registrar impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular, that the Member complete successfully, at his own expense and within 12 months of the date of this Order, the Ontario College of Pharmacists' Jurisprudence Exam.
4. That the Registrar suspend the Member's Certificate of Registration for a period of two months, with one month of the suspension to be remitted on condition that the Member complete the remedial training as specified above.
5. That the Member's practice will be monitored by the College for a period of two years from the date the Order is imposed by means of inspections by a

representative of the College at such times as the College may determine. The monitoring inspections may be in addition to any of the routine inspections conducted by the College pursuant to the authority of section 148 of the Drug and Pharmacies Regulation Act. The Member shall cooperate fully with the College during the inspections, and, further, shall pay to the College in respect of such monitoring the amount of \$600.00 per inspection, such amount to be paid immediately after each inspection, with the total number of inspections not to exceed three in any 12 month period.

6. Costs to the College in the amount of \$1,500.00.

In its reprimand, the Panel indicated that the Member engaged in conduct that was disgraceful, dishonorable and unprofessional. It pointed out that the Member failed to meet his obligation to adhere to the standards of the profession and in so doing let down the public and the profession. The Panel explained that this conduct can harm patient care can cause the public to lose confidence in the profession. The Panel affirmed that pharmacists must practise to a very high standard.

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**Member:** Svetlana Tracey, R.Ph. (OCP#607716)

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At a hearing on May 5, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Ms. Tracey with respect to the following incidents:

- That, while employed as a pharmacist at the Drugstore Pharmacy in Brockville, Ontario, she misappropriated from the Pharmacy narcotics and other controlled and prescription drugs that had not been prescribed for her in or about December 2013-March 2014.

In particular, the Panel found that she

- failed to maintain a standard of practice of the profession;
- dispensed or sold drugs for an improper purpose;
- contravened the Pharmacy Act, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991, or the regulations under those Acts, and in particular, section 155 of the Drug and Pharmacies Regulation Act, R.S.O. 1990, c. H.4, as amended;

- contravened a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular, sections C.01.041 and/or G.03.002 of the Food and Drug Regulations, C.R.C., c. 870, as amended; section 4 of the Controlled Drugs and Substances Act, S.C. 1996, c. 19, as amended; section 31 of the Narcotic Control Regulations, C.R.C., c.1041, as amended; and/or section 51 of the Benzodiazepines and Other Targeted Substances Regulations, S.O.R./2000-217, as amended;
- 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 as disgraceful, dishonourable or unprofessional.

The Panel imposed an Order which included as follows:

1. A reprimand;
2. Directing the Registrar to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular:
  - a) that the Member shall complete successfully, at her own expense and within twelve (12) months of the date of this Order, the ProBE Program on Professional/Problem Based Ethics for Healthcare Professionals, with an unconditional pass;
  - b) that the Member shall be prohibited, for a period of sixty (60) months from the date of this Order, from acting as a Designated Manager or narcotic signer at any pharmacy;
  - c) for a period of twelve (12) months from the date the Member returns to active practice as a pharmacist in Ontario:
    - i. the Member shall notify the College in writing of any employment in a pharmacy, which notification shall include the name and address of the employer and the date on which the Member began or is to begin employment, within seven (7) days of commencing such employment, and
    - ii. the Member shall only work for an employer in a pharmacy who provides confirmation in writing from the Designated Manager of the pharmacy to the College, within seven (7) days of the Member commencing employment at the pharmacy, that the Designated Manager received and reviewed a copy of the panel's

decision and reasons in this matter before the Member commenced employment.

3. Directing the Registrar to suspend the Member's Certificate of Registration for a period of five (5) months, with one (1) month of the suspension to be remitted on condition that the Member complete the remedial training exercises set out in subparagraph 2(a) above, as specified.

4. Costs to the College in the amount of \$2,500.00.

In its reprimand, the Panel explained that integrity, trust, and professional conduct are core to the practise of pharmacy. The Panel pointed out that the practise of pharmacy is a privilege that carries significant obligations. The Panel agreed that the Member's conduct was disgraceful, dishonourable, and unprofessional. The Panel expressed its expectation that the Member will not be before a panel of the Discipline Committee again.

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**Member: Zbigniew Wasilewski, R.Ph. (OCP#73784) and Wasilewski Drugs Ltd.**

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At a hearing on May 8, 2015, a Panel of the Discipline Committee made findings of proprietary misconduct against Mr. Wasilewski, as Director of Wasilewski Drugs Ltd., c.o.b. as Dixie Village Pharmacy, and/or as Designated Manager of Dixie Village Pharmacy in Mississauga, Ontario, and that Wasilewski Drugs Ltd. as holder of Certificate of Accreditation #34100 for Dixie Village Pharmacy in Mississauga, that he committed an act or acts of proprietary misconduct, in about 2009-2014, with respect to the following incidents:

- purchased narcotics and other controlled drugs without authorization, and without keeping records as required;
- sold drugs and natural health products not approved for sale in Canada and not labelled as required;
- sold prescription drugs without a prescription or other authorization, and without keeping records as required;
- sold narcotics and other prescription/Schedule I drugs without keeping records as required;
- sold narcotics and other controlled drugs without a prescription or other authorization, and without keeping records as required;

- failed to record prescription information in relation to the sale of narcotics and other controlled drugs.

In particular, the Panel found that Mr. Wasilewski

- failed to keep records required to be kept by the pharmacy respecting the patients and the practice of the pharmacy;
- contravened the Drug and Pharmacies Regulation Act or the regulations made under the Act, and in particular, sections 155, 156 and/or 160 of the Drug and Pharmacies Regulation Act, and/or sections 40, 54 and/or 55 of O.Reg. 58/11;
- contravened any law of Canada or Ontario or any municipal by-law with respect to the distribution, purchase, sale or dispensing of any drugs or product in a pharmacy, and in particular
  - section 9 of the Food and Drugs Act, R.S.C., 1985, c. F-27, as amended; sections C.01.003 and/or G.01.003 of the Food and Drug Regulations, C.R.C., c.870, as amended; and/or sections 4 and/or 86 of the Natural Health Products Regulations, S.O.R./2003-196, as amended;
  - section C.01.041 of the Food and Drugs Regulations, C.R.C., c.870, as amended;
  - sections G.01.006, G.02.001, G.03.001, G.03.002, G.03.004, G.03.007, G.03.008, G.03.009 and/or G.03.010 of the Food and Drugs Regulations, C.R.C., c.870, as amended;
  - sections 4 and/or 5 of the Controlled Drugs and Substances Act, S.C. 1996, c. 19, as amended, and/or sections 8, 30, 31, 38, 39 and/or 40 of the Narcotic Control Regulations, C.R.C. c.1041, as amended; and/or
  - section 11 of the Narcotics Safety and Awareness Act, 2010, S.O., c.22, as amended; and
- engaged in conduct or performed an act relevant to the business of a pharmacy that would reasonably be regarded by members as disgraceful or dishonourable. And in particular that Wasilewski Drugs Ltd:
  - failed to keep records required to be kept by the pharmacy respecting the patients and the practice of the pharmacy;
  - contravened the Drug and Pharmacies Regulation Act and regulations thereunder, and in particular, sections 155, 156 and/or 160 of the Act and/or sections 40, 54 and/or 55 of O.Reg. 58/11;
  - contravened a law of Canada or Ontario or any municipal by-law with respect to the distribution, purchase, sale or dispensing of any drugs or product in a pharmacy, and in particular
    - section 9 of the Food and Drugs Act, R.S.C.,

- 1985, c. F-27, as amended; sections C.01.003 and/or G.01.003 of the Food and Drug Regulations, C.R.C., c.870, as amended; and/or sections 4 and/or 86 of the Natural Health Products Regulations, S.O.R./2003-196, as amended;
- section C.01.041 of the Food and Drugs Regulations, C.R.C., c.870, as amended;
- sections G.01.006, G.02.001, G.03.001, G.03.002, G.03.004, G.03.007, G.03.008, G.03.009 and/or G.03.010 of the Food and Drugs Regulations, C.R.C., c.870, as amended;
- sections 4 and/or 5 of the Controlled Drugs and Substances Act, S.C. 1996, c. 19, as amended, and/or sections 8, 30, 31, 38, 39 and/or 40 of the Narcotic Control Regulations, C.R.C. c.1041, as amended; and/or
- section 11 of the Narcotics Safety and Awareness Act, 2010, S.O., c.22, as amended; and
- engaged in conduct or performed an act relevant to the business of a pharmacy that would reasonably be regarded by members as disgraceful or dishonourable.

The Panel imposed an Order which included as follows:

1. A reprimand
2. Directing the Registrar to impose specified terms, conditions or limitations on Mr. Wasilewski's Certificate of Registration, and in particular, that Mr. Wasilewski complete successfully the following courses, programs, and instruction, including any evaluations, at his own expense and within 12 months of the date of this Order:
  - a) the College's Jurisprudence e-learning module and examination; and
  - b) the ProBE Program on Professional/Problem Based Ethics for Healthcare Professionals, with an unconditional pass.
3. Directing the Registrar to impose additional specified terms, conditions or limitations on Mr. Wasilewski's Certificate of Registration restricting Mr. Wasilewski from being the Designated Manager or narcotics signer at any pharmacy for a period of two years from the date of this Order.
4. Directing the Registrar to suspend Mr. Wasilewski's Certificate of Registration for a period of seven (7) months, with two (2) months of the suspension to be remitted on condition that Mr. Wasilewski

complete the courses, programs and instruction set out in paragraph 2 above as specified.

5. Directing Mr. Wasilewski and Wasilewski Drugs Ltd., jointly and severally, to pay a fine in the amount of \$70,000 to the Minister of Finance.
6. Costs to the College in the amount of \$5,000.

In its reprimand, the Panel expressed disappointment that the Member, who is a senior member of the profession, was before them. It indicated that the Member's conduct showed a pattern that was contrary to the rules and regulations, and was dangerous and irresponsible. The Panel suggested that the Member's actions brought discredit to the profession and harmed the public interest.

#### **Member:** [Harvey Organ \(OCP#37311\)](#)

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At a hearing on May 11, 2015 a Panel of the Discipline Committee made findings of professional misconduct against Mr. Organ as a pharmacist, Designated Manager of Kohler's Drug Store in Hamilton, Ontario, and/or director or shareholder of Kohler's Drug Store Ltd. and/or 1508767 Ont. Inc. The Panel found that Mr. Organ committed professional misconduct in relation to CanadaRx, PetPharm and/or Kohler's Drug Store being operated as an internet pharmacy business in or about 2009-2013, with respect to the following activities:

- operating a pharmacy for which a certificate of accreditation had not been issued by the College;
- using the protected designations "drug" or "drugs" in connection with a retail business that was not an accredited pharmacy;
- selling prescription drugs by retail to customers in the U.S. without prescriptions or other authorization recognized by law in Ontario;
- operating a pharmacy internet site in contravention of the Policy for Ontario Pharmacies Operating Internet Sites issued by the College in June 2001 and/or the Policy for Prescriptions - Out of Country issued by the College in January/February 2003; and/or
- failing to comply with his Undertaking & Acknowledgement to the College dated September 28, 2007 with respect to removing from Ontario the entire CanadaRx export business for the sale of prescription drugs in the absence of prescriptions

recognized as valid in Ontario and not returning the CanadaRx or any similar export business to Ontario in the future.

In particular, the Panel found that Mr. Organ:

- failed to maintain a standard of practice of the profession;
- contravened the Pharmacy Act, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991, or the regulations under those Acts, and in particular, sections 139, 147, 155 and/or 156 of the Drug and Pharmacies Regulation Act, R.S.O. 1990, c. H.4, as amended, and/or sections 4, 40 and/or 43 of O.Reg. 58/11, as amended;
- contravened, while engaged in the practice of pharmacy, any federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular, sections C.01.041 and/or C.01.042 of the Food and Drug Regulations, C.R.C., c. 870, as amended;
- knowingly permitted the premises in which a pharmacy is located to be used for unlawful purposes;
- permitted, consented to or approved, either expressly or by implication, the commission of an offence against any Act relating to the practice of pharmacy or to the sale of drugs by a corporation of which he was a director;
- 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.

The Panel imposed an Order which included as follows:

1. A reprimand;
2. Requiring the Registrar to revoke the Member's certificate of registration; and
3. Costs to the College in the amount of \$15,000.00.

In its reprimand, the Panel reported that it found the Member's conduct to be shameful, as well as disgraceful, dishonourable, and unprofessional. It opined that the severity of the Order was appropriate and that the Member has proven to be ungovernable. The Panel indicated that the Member showed a lack of respect for the profession and complete disregard for the lack of public safety.

**Member:** Ashraf Bebauey (OCP #213897)

At a hearing on May 28, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Bebauey, while a director and shareholder of the corporation that owned Rowntree Gate Drug Mart, with respect to the following incidents:

- That between about May 31, 2010 and April 10, 2011, he introduced into active inventory, and/or permitted to be introduced into active inventory, and/or permitted to be sold in the Pharmacy, drugs not approved for sale in Canada, namely, counterfeit Viagra.

In particular, the Panel found that he:

- failed to maintain a standard of practice of the profession;
- contravened the Pharmacy Act, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991 or the regulations under those Acts, namely, s. 150 of the Drug and Pharmacies Regulation Act, R.S.O. 1990, c. H.4;
- contravened, while engaged in the practice of pharmacy, a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, namely, s. 9 of the Food and Drugs Act, R.S.C. 1985, c. F-27, and C.01.003, C.01.004, C.01.005, and C.08.002 of the Food and Drug Regulations made under that Act;
- knowingly permitted the premises in which a pharmacy was located to be used for unlawful purposes;
- 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 as disgraceful, dishonourable or unprofessional.

The Panel imposed an Order which included as follows:

1. A reprimand
2. Directing the Registrar to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular:
  - a. that the Member complete successfully with an unconditional pass, at his own expense, within 12 months of the date of this Order, the ProBE course and any related evaluations offered by the Centre for Personalized Education for Physicians,



or provide evidence satisfactory to the College that he has completed this course and any related evaluations within the 12 months prior to the date of this Order;

- b. that the Member shall be prohibited from acting as a Designated Manager in any pharmacy until the date the College is notified that the Member has successfully completed with an unconditional pass the course and evaluation set out in paragraph 2(a) above;

3. Directing the Registrar to suspend the Member's Certificate of Registration for a period of 4 months, with 2 months of the suspension to be remitted on condition that the Member complete the remedial training as specified in subparagraph 2(a) above.

4. Costs to the College in the amount of \$5,000.

In its reprimand, the Panel noted that integrity, trust, and professional conduct are at the core of the practise of Pharmacy. The Panel pointed out that the practise of pharmacy is a privilege that carries with it significant obligations to the public, the profession, and to oneself. The Panel expressed its view that the Member's conduct was totally unacceptable to his fellow pharmacists and to the public.

**Member:** Marilyn Adamo (OCP #203872)  
and Lifestyle Pharmacy & Candy Bar I.D.A.

At a hearing on June 2, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Ms. Adamo with respect to the following:

- That she dispensed and/or allowed the pharmacy to dispense narcotics and/or controlled drugs to her spouse in breach of an undertaking entered into on January 7, 2013, from on or about February 1, 2013 to on or about December 31, 2013.
- That she failed to keep records as required of narcotic prescriptions, from on or about May 1, 2011 to on or about December 31, 2011, contrary to s. 40 of the Narcotic Control Regulations, C.R.C., c. 1041, as amended.

In particular, the Discipline Committee found that she

- failed to maintain a standard of practice of the

profession;

- failed to keep records as required respecting her patients;
- contravened, while engaged in the practice of pharmacy, a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular s. 40 of the Narcotic Control Regulations, C.R.C., c. 1041, as amended;
- engaged in conduct or performed an act or acts 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.

At the same hearing, the Panel also made findings of proprietary misconduct against Lifestyle Pharmacy and Candy Bar IDA and Ms. Adamo, as the sole director and shareholder of 2250556 Ontario Inc., the corporation that owns Lifestyle Pharmacy and Candy Bar IDA and the holder of Certificate of Accreditation #302189, with respect to the following:

- That they failed to take all reasonable steps that were necessary to protect narcotics, controlled drugs and targeted substances on the premises of the pharmacy or under their control against loss or theft or to take steps necessary to ensure their security, including failure to count and reconcile narcotics, controlled drugs and targeted substances at least every six months from on or about February 18, 2013 to on or about January 29, 2014;
- That they dispensed and/or allowing the pharmacy to dispense narcotics and/or controlled drugs to Ms. Adamo's spouse in breach of an undertaking entered into on January 7, 2013, from on or about December 1, 2013 to on or about January 28, 2014.

In particular, the Panel found that they

- contravened a law of Canada or Ontario or any municipal by-law with respect to the distribution, purchase, sale or dispensing of any drugs or product in a pharmacy, and in particular s. 43 of the Narcotic Control Regulations, C.R.C., c. 1041, as amended, under the Controlled Drugs and Substances Act, S.C. 1996, c. 19, as amended, and/or s. G.03.012 of the Food and Drug Regulations, C.R.C., c. 870, as amended, to the Food and Drugs Act, R.S.C. 1985, c. F-27, as amended, and/or s. 7(1)(a) of the Benzodiazepines and Other Targeted Substances Regulations, S.O.R./2000-271 under the Controlled Drugs



- and Substances Act, S.C. 1996, c. 19, as amended;
- engaged in conduct or performed an act relevant to the business of a pharmacy that would reasonably be regarded by members as disgraceful or dishonourable.

The Panel imposed an Order which included as follows:

1. A reprimand
2. An Order directing the Registrar to suspend the Member's certificate of registration for a period of four (4) months, one (1) month of which shall be remitted if the Member complies with subparagraphs (c)(i) and (ii) of this Order by June 6, 2016.
3. an Order directing the Registrar to impose the following terms, conditions and limitations on the Member's certificate of registration:
  - (i) the Member is to successfully complete the Professional Problem Based Ethics (ProBE) Program offered by the Center for Personalized Education for Physicians, with an unconditional pass, at the Member's own expense;
  - (ii) the Member shall, at her own expense, attend at least two (2) mentoring sessions with a practice mentor selected by the College's Manager of Investigations and Resolutions ("Mentor") at the Mentor's primary place of practice, following the Member's own return to the practice of pharmacy. Prior to the mentoring sessions, the Member must provide the Mentor with the following:
    - (a) a copy of both Notices of Hearing dated July 16, 2014 and August 5, 2014;
    - (b) a copy of the Agreed Statement of Facts dated June 2, 2015;
    - (c) a copy of the Joint submission on Order dated June 2, 2015;
    - (d) a copy of the Discipline Committee's Decision and Reasons, when available; and
    - (e) a copy of the Order of the Discipline Committee, when available.

The Member's sessions with the Mentor shall address:

- (A) the Member's conduct as described in the Agreed Statement of Facts;
- (B) proper record keeping of narcotics, controlled drugs and targeted substances; and,

- (C) protection, including counting and reconciliation, of a pharmacy's inventory of narcotics, controlled drugs and targeted substances.

At the conclusion of the mentoring sessions, the Member must provide a written direction to the Mentor to forward his or her report to the Registrar within thirty (30) days from the date of the last mentoring session. The Member's written direction to the Mentor shall specify that the Mentor's Report ("Report") shall:

- (i) confirm the dates of all sessions attended by the Member;
  - (ii) confirm that the topics identified in subparagraphs (c)(ii)(A), (B) and (C) were covered with the Member; and,
  - (iii) include an assessment as to whether the Member has the requisite skills and knowledge to complete regular counts and reconciliations of narcotics, controlled drugs and targeted substances inventory on her own.
- (iii) the Member shall not:
- (1) act as a Designated Manager in any pharmacy; or,
  - (2) practise independently in the community; until the terms, conditions and limitations at paragraph (c)(i) and (ii) above are removed, as provided for in subparagraph (c)(vi) below;
- (iv) neither the Member nor the Pharmacy shall dispense narcotics, controlled drugs or targeted substances to the Member herself or her family members, including the Member's spouse;
- (v) the Member's practice is to be monitored by way of a maximum of four (4) unannounced inspections by a representative of the College during a twenty-four (24) month period commencing on July 6, 2016, at the Member's expense. The Member shall fully cooperate with these inspections and shall reimburse the College \$600 for each inspection, to be paid immediately after each inspection. These monitoring inspections are in addition to any routine inspections conducted by the College pursuant to s. 148 of the Drug and Pharmacies Regulation Act, R.S.O. 1990 c. H.4, as amended;
- (vi) the terms, conditions and limitations referred to in subparagraphs (i), (ii) and (iii):

- (1) are in addition to, and apply irrespective of any other Order made by this Committee or any other Committee of the College; and,
- (2) shall be removed when the Registrar receives both satisfactory confirmation of the Member's successful completion of the ProBE Program and a satisfactory Report confirming that the Member has the requisite skills and knowledge to complete regular counts and reconciliations of narcotics, controlled drugs and targeted substances inventory on her own.

(vii) The term, condition and limitation referred to in subparagraph (v) shall be automatically removed on July 6, 2018;

4. an Order requiring the Member to pay the College's costs fixed in the amount of \$5,000.

The Panel reprimanded the Member as follows:

The province of Ontario is one of the few remaining jurisdictions where we have the privilege of being self regulated, and thus with this comes significant obligations to the public, the profession and to oneself. Through the Member's conduct, she failed in her obligations to adhere to the standards of practice.

It is necessary for the Panel to impress upon the Member the seriousness of her misconduct. The Panel also notes that she has acknowledged her professional and proprietary misconduct.

The Panel wished to make clear to the Member that, although the Order imposed is appropriate in relation to the findings, a more significant Order will likely be imposed by another Discipline panel in the event that she is ever found to have engaged in further professional misconduct.

Moving forward, it is the Panel's expectation that the remediation imposed by this Order as well as the consequences the Member has already incurred will be sufficient motivation to modify her behaviour and professional practise. And as such they do not expect to see her before another Discipline Panel of the College.

## **Member: Brian Hemens (OCP #603517)**

At a hearing on June 17, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Hemens with respect to the following incidents:

- He was found guilty of knowingly using a forged prescription as though it were genuine, contrary to the Criminal Code, section 368(1)(a), on September 10, 2013; and
- He forged a prescription for 1,080 oxycodone 10mg IR tablets, altered patient records to support the forged prescription, and/or attempted to obtain narcotics for himself without a valid prescription in or about March 20-22, 2012.

In particular, the Panel found that he:

- was found guilty of an offence that is relevant to his suitability to practice;
- failed to maintain a standard of practice of the profession;
- falsified a record relating to his practice;
- signed or issued, in his professional capacity, a document that he knew contained a false or misleading statement; and
- 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.

The Panel imposed an Order which included as follows:

1. A reprimand;
2. Directing the Registrar to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular:
  - that the Member complete successfully with an unconditional pass, at his own expense and within 12 months of the date of this Order, the ProBE Program on Professional/Problem Based Ethics for Healthcare Professionals;
  - that the Member remain in Part B of the College registry until other specified proceedings have been concluded;
3. Directing the Registrar to suspend the Member's

Certificate of Registration for a period of six (6) months, with one(1) month of the suspension to be remitted on condition that the Member complete the remedial training as specified above; and

4.Costs to the College in the amount of \$7,500.

In its reprimand, the Panel related that the Member, through his conduct, failed in his obligations to uphold the standards of the practice and threatened the public confidence in the profession. The Panel pointed out that the Member's actions drew in other individuals. The Panel indicated that compliance with standards of practice and protection of the public is of paramount concern. The Panel expressed its expectation that the remediation imposed by this Order and the consequences already incurred will be sufficient motivation to modify the Member's behaviour and professional practise.

#### **Member:** Marian Michael

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Following a hearing held on July 6, 2015, a Panel of the Discipline Committee found that Ms. Michael committed professional misconduct, while engaged in the practice of pharmacy as director, shareholder, Designated Manager and/or dispensing pharmacist at Procure Pharmacy, with respect to:

- submitting accounts or charges for services that she knew or reasonably ought to have known were false or misleading to the Ontario Drug Benefit program for one or more drugs and/or products; and/or
- falsifying pharmacy records relating to her practice in relation to claims made to the Ontario Drug Benefit program for one or more drugs and/or products.

In particular, the Panel found that

- she failed to maintain a standard of practice of the profession;
- records relating to her practice were falsified;
- she submitted accounts or charges for services that she knew or reasonably ought to have known were false or misleading;
- she contravened a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular sections 5 and 15(1)(b) of the Ontario Drug Benefits Act, R.S.O. 1990, c. O.10, as amended, and/

or Ontario Regulation 201/96 made thereunder;

- she engaged in conduct or performed an act or acts 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 a decision dated February 8, 2016, the Panel imposed an Order which included as follows:

1. A reprimand before a Panel of the Discipline Committee, such reprimand to be administered in person, on a date not later than 16 months from the date the Order is imposed
2. A ten-month suspension of the Member's certificate of registration, commencing if and when the Member returns to practice in Ontario
3. An Order directing the Registrar to impose specified terms, conditions or limitations on the Member's certificate of registration as follows:
  - a. the Member must successfully complete with an unconditional pass, at her own expense and within 16 months of the date the Order is imposed, the ProBE Program on Professional / Problem- Based Ethics for health care professionals offered by the Centre for Personalized Education for Physicians
  - b. for a period of three years from the date the Member returns to practice in Ontario, the Member shall be prohibited from
    - i. having any proprietary interest in a pharmacy of any kind;
    - ii. acting as a Designated Manager in any pharmacy; and,
    - iii. receiving any remuneration for her work as a pharmacist other than remuneration based on hourly or weekly rates only;
  - c. for a period of three years from the date the Member returns to practice in Ontario, the member shall be required to notify the College in writing of the name(s), address(es) and telephone number(s) of all employer(s) within fourteen days of commencing employment in a pharmacy;
  - d. for a period of three years from the date the Member returns to practice in Ontario , the member shall provide her employer with a copy of the Discipline Committee Panel's decision in this matter and its Order;
  - e. for a period of three years from the date the Member returns to practice in Ontario, the member shall

only engage in the practice of pharmacy for an employer who agrees to write to the College within fourteen days of the member's commencing employment, confirming that it has received a copy of the required documents identified above, and confirming the nature of the member's remuneration;

4. Costs to the College in the amount of \$10,000.

The reprimand in this matter is outstanding pending scheduling.

**Member:** Robert Button, R.Ph. (OCP #212276)

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At a hearing on July 13, 2015 a Panel of the Discipline Committee made findings of professional misconduct against Mr. Robert Button with respect to the following incidents:

- That he dispensed narcotics and other prescription drugs misappropriated from the Pharmacy, including morphine, Oxycontin, Tramadol, clonidine, clonazepam and/or temazepam, to patients and other persons, including H.K. (H.T.), T.M., E.S. and/or T.S., without authorization or record, in or about 2010-2012.

In particular, the Panel found that he

- failed to maintain a standard of practice of the profession
- failed to keep records as required respecting his patients
- contravened the Act, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991, or the regulations under those Acts, and in particular, sections 155 and/or 156 of the Drug and Pharmacies Regulation Act, R.S.O. 1990, c. H-4, as amended
- contravened, while engaged in the practice of pharmacy, a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular, sections 4 and/or 5 of the Controlled Drugs and Substances Act, S.C. 1996, c. 19, as amended, sections 31, 37, 38 and/or 40 of the Narcotic Control Regulations, C.R.C., c. 1041, as amended, sections 51, 52 and/or 53 of the Benzodiazepines and Other Targeted Substances Regulations, S.O.R./2000-271, and/or section 11 of

the Narcotic Safety and Awareness Act, 2010, S.O. 2010 C.22

- knowingly permitted the premises in which a pharmacy was located to be used for unlawful purposes
- 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 as disgraceful, dishonourable or unprofessional.

The Panel imposed an Order which included as follows:

1. A reprimand
2. Directing the Registrar to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular:
  - a) that the Member shall complete successfully, at his own expense and within twelve (12) months of the date of this Order, the ProBE Program on Professional/Problem Based Ethics for Healthcare Professionals, with an unconditional pass;
  - b) that the Member shall be prohibited, for a period of thirty six (36) months from the date of this Order, from having a proprietary interest in any pharmacy, or from acting as Designated Manager or narcotic signer at any pharmacy;
  - c) for a period of thirty six (36) months from the date of this Order:
    - i. the Member shall notify the College in writing of any employment in a pharmacy, which notification shall include the name and address of the employer and the date on which the Member began or is to begin employment, within seven (7) days of commencing such employment, and
    - ii. the Member shall only work for an employer in a pharmacy who provides confirmation in writing from the Designated Manager of the pharmacy to the College, within seven (7) days of the Member commencing employment at the pharmacy, that the Designated Manager received and reviewed a copy of the panel's decision and reasons in this matter before the Member commenced employment.
3. Directing the Registrar to suspend the Member's Certificate of Registration for a period of seven months with two months of the suspension to be remitted on condition that the Member complete the remedial training exercises set out

in subparagraph 2(a) above, as specified. The suspension shall commence on July 13, 2015 and run without interruption until December 13, 2015, inclusive. If the balance of the suspension is required to be served by the Member because he fails to complete the remedial training exercises as specified in paragraph 2(a) above, the suspension shall continue from July 13, 2016 to September 13, 2016, inclusive.

#### 4. Costs to the College in the amount of \$3,500.00.

In its reprimand, the Panel pointed out that regardless of intent, there remain professional boundaries that simply cannot be crossed. The Panel related that the practice of medicine and pharmacy remain distinct, each with their own expertise and purpose. The Panel expressed its trust that the member has learned from the experience and will use this learning to better his practise.

#### **Member:** Mustafa Salem (OCP #604014)

At a hearing on July 14, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Mustafa Salem with respect to the following incident:

- That, on or about November 30, 2013, while working as a pharmacist at the Shoppers Drug Mart in Alliston, Ontario ("Pharmacy"), he misappropriated from the Pharmacy one or more controlled and/or prescription drugs.

In particular, the Panel found that he

- failed to maintain a standard of practice of the profession;
- contravened the Pharmacy Act, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991, or the regulations under those Acts, and in particular, section 155 of the Drug and Pharmacies Regulation Act, R.S.O. 1990, c. H.4, as amended;
- contravened a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular, sections C.01.041 and/or G.03.002 of the Food and Drug Regulations, C.R.C., c. 870, as amended; section 4 of the Controlled Drugs and Substances Act, S.C. 1996, c. 19, as amended;

section 31 of the Narcotic Control Regulations, C.R.C., c.1041, as amended; and/or section 51 of the Benzodiazepines and Other Targeted Substances Regulations, S.O.R./2000- 217, as amended;

- 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 as disgraceful, dishonourable or unprofessional.

(Note: Mr. Salem resigned his membership with the College on December 9, 2013.)

The Panel imposed an Order which included as follows:

1. A reprimand
2. Directing the Registrar to impose the following terms, conditions or limitation on Mr. Salem's Certificate of Registration if he successfully applies for registration with the College:
  - a) Mr. Salem must complete successfully, with an unconditional pass, at his own expense and within 12 months of obtaining a Certificate of Registration, the ProBE Program on Ethics for Healthcare Professionals;
  - b) Mr. Salem must complete successfully pass, at his own expense and within 24 months of obtaining a Certificate of Registration, the ProBE Plus Program on Ethics for Healthcare Professionals;
  - c) Mr. Salem shall be prohibited for a period of five years from acting as a designated manager of any pharmacy;
  - d) For a period of 12 months from the date Mr. Salem returns to active practice as a pharmacist in Ontario:
    - i. he shall notify the College in writing of any employment in a pharmacy, which notification shall include the name and address of the employer and the date on which he began or is to begin employment, within seven days of commencing such employment, and
    - ii. he shall only work for an employer in a pharmacy who provides confirmation in writing from the Designated Manager of the pharmacy to the College, within seven days of him commencing employment at the pharmacy, that the Designated Manager received and reviewed a copy of the panel's decision and reasons in this matter before Mr. Salem commenced employment.



3. The Registrar to suspend Mr. Salem's Certificate of Registration for a period of five months, with one month of the suspension to be suspended on condition that the Member complete the remedial training as specified in paragraphs 2(a) and 2(b), above. The suspension shall commence immediately on the date that Mr. Salem successfully applies for registration with the College and shall run without interruption for four months. If Mr. Salem is required to serve the one month remitted portion of the suspension because he fails to complete the remedial training as specified in paragraphs 2(a) and 2(b), the suspension shall continue for one month from the date the College is notified that Mr. Salem has not completed the remedial training specified in paragraphs 2(a) and 2(b).

4. Costs to the College in the amount of \$2,500.00.

In its reprimand, the Panel observed that integrity and trust are paramount to the profession of pharmacy. The Panel expressed its disappointment in Mr. Salem's conduct. The Panel pointed out that pharmacy is a self-regulated profession and the practice of pharmacy is a privilege that carries with it significant obligations to the public, the profession and to oneself. The Panel indicated its expectation that the remediation imposed in the Order will assist to modify Mr. Salem's behaviour and future professional practise.

#### **Member:** Essam Siha, R.Ph. (OCP #603717)

At a hearing on July 20, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Siha with respect to the following incidents:

- Submitting accounts or charges for services that he knew were false or misleading to the Ontario Drug Benefit program for one or more drugs and/or products; and/or
- Falsifying pharmacy records relating to his practice in relation to claims made to the Ontario Drug Benefit program for one or more drugs and/or products.

In particular, the Panel found that:

- he failed to maintain a standard of practice of the profession;

- records relating to his practice were falsified;
- he submitted accounts or charges for services that he knew or reasonably ought to have known were false or misleading;
- he contravened a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular sections 5 and 15(1)(b) of the Ontario Drug Benefits Act, R.S.O. 1990, c. O.10, as amended, and/or Ontario Regulation 201/96 made thereunder;
- he engaged in conduct or performed an act or acts 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.

The Panel imposed an Order which included as follows:

1. A reprimand
2. A suspension of 6 months with 1 month to be remitted provided the member completes the remediation set out below. The suspension is to commence on August 4, 2015, and continue until January 4, 2016, inclusive. If the remitted portion of the suspension is required because the Member fails to complete the remediation set out below, the balance of the suspension shall commence on July 20, 2016, and continue until August 20, 2016.
3. Directing the Registrar to impose terms, conditions or limitations on the Member's certificate of registration as follows:
  - a. the Member must successfully complete with an unconditional pass, at his own expense and within 12 months of the date the Order is imposed, the ProBE Program on professional / problem-based ethics for health care professionals offered by the Centre for Personalized Education for Physicians
  - b. for a period of three years from the date the Order is imposed, the Member shall be prohibited from:
    - i. acting as a Designated Manager in any pharmacy; and
    - ii. receiving any remuneration for his work as a pharmacist other than remuneration based on hourly or weekly rates only, or remuneration in respect of earnings by way of bonus or dividend as a result of holding an ownership interest in a pharmacy corporation;
  - c. for a period of three years from the date the

Order is imposed, the Member shall be required to notify the College in writing of the name(s), address(es) and telephone number(s) of all employer(s) within fourteen days of commencing employment in a pharmacy;

- d. for a period of three years from the date the Order is imposed, the Member shall provide his employer with a copy of the Discipline Committee Panel's decision in this matter and its Order;
- e. for a period of three years from the date the Order is imposed, the Member shall only engage in the practice of pharmacy for an employer who agrees to write to the College within fourteen days of the member's commencing employment, confirming that it has received a copy of the required documents identified above, and confirming the nature of the member's remuneration

#### 4. Costs to the College in the amount of \$7000.

In its reprimand, the Panel noted that integrity and trust are paramount to the profession of pharmacy. The Panel related that it was necessary to impress upon the Member the seriousness of his misconduct and expressed its disappointment. The Panel pointed out that the practice of Pharmacy is a privilege that carries significant obligations to the public, the profession, and oneself. The Panel suggested that the Member's actions eroded trust and cast a shadow over his own integrity. The Panel expressed its hope that this hearing gave the opportunity to pause for reflection.

#### **Member:** Khan Qaisar (OCP #215265)

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At a hearing on July 29, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Qaisar with respect to the following incidents:

- As set out in reasons dated June 20, 2014, the Hearing Tribunal of the Alberta College of Pharmacists found that he committed an act of unprofessional conduct, in that:
  - i. On March 14, 2011, while on duty as a pharmacist at a pharmacy he touched the groin area of a three-year-old boy over top of the boy's clothing as shown in the pharmacy surveillance video; and
  - ii. His touching of a very young member of the public

in the groin area was inappropriate and was a very serious boundary violation;

- In written and/or electronic material he submitted to the College during the renewal of his certificate of registration in or about January 2012 and February 2013, he indicated to the College that he was not the subject of any current proceeding in respect of any offence in any jurisdiction, whereas he ought to have known this information was false or misleading, in that he was the subject of charges under the Criminal Code of Canada, as set out in an information sworn on or about December 8, 2011;
- In written and/or electronic material he submitted to the College during the renewal of his certificate of registration in or about March 2014, he indicated to the College that he was not currently the subject of professional misconduct, incompetence or incapacity proceeding or any like proceeding, in Ontario or any other jurisdiction in relation to pharmacy or any other profession or occupation, whereas he ought to have known this information was false or misleading, in that he was the subject of allegations of unprofessional conduct before the Hearing Tribunal of the Alberta College of Pharmacists, as set out in a Notice of Hearing dated on or about June 27, 2013; and
- He contravened a term, condition or limitation imposed on his certification of registration, and specifically the terms set out in s. 5, paragraph 1(ii) and paragraph 1(iv) of Ontario Regulation 202/94, in that:
  - i. he failed to provide to the Registrar the details of charges against him under the Criminal Code of Canada, as set out in an information sworn on or about December 8, 2011; and
  - ii. He failed to provide to the Registrar the details of allegations against him of unprofessional conduct before the Hearing Tribunal of the Alberta College of Pharmacists, as set out in a Notice of Hearing dated on or about June 27, 2013.

In particular, the Panel found that that

- the governing body of a health profession in a jurisdiction other than Ontario found that he committed an act of professional misconduct that would be an act of professional misconduct as defined in the regulations under the Pharmacy Act, 1991, S.O. 1991, c. 36, as amended, and in particular, as defined in s. 1, paragraph 30 of Ontario Regulation 681/93, namely conduct relevant to the practice of pharmacy that, having regard to all of the circumstances, would reasonably be regarded by members of the profession as disgraceful, dishonourable and/or unprofessional;

- he contravened a term, condition or limitation imposed on his certification of registration, and specifically the terms set out in s. 5, paragraph 1(ii) and paragraph 1(iv) of Ontario Regulation 202/94;
- he engaged in conduct relevant to the practice of pharmacy that, having regard to all of the circumstances, would reasonably be regarded by members of the profession as disgraceful, dishonourable and/or unprofessional.

The Panel imposed an Order which included as follows:

1. A Reprimand

2. That the Registrar be directed to suspend the Member's certificate of registration for one (1) month, to be fully remitted if the member satisfies the condition set out in paragraph 3. If the Member does not satisfy the condition set out in paragraph 3, the suspension shall commence on August 2, 2016, and run without interruption until September 1, 2016, inclusive;

3. That the Registrar be directed to impose a condition on the Member's certificate of registration that he successfully complete, within 12 months of the date of the order, a course with Gail E. Siskind Consulting Services, or another professional ethics consultant chosen by the College, to be designed by the consultant, but with the general aim of addressing the objectives of professional regulation and the importance to the public interest of complying with a practitioner's regulatory obligations, including complying with reporting requirements to the College. The following terms shall apply to the course:

- a. The number of sessions shall be at the discretion of the consultant.
- b. The manner of attendance at the session(s) (e.g. in person, via Skype, etc.) is a matter to be discussed in advance between the Member and the consultant, but shall ultimately be at the discretion of the consultant.
- c. The Member shall be responsible for the cost of the course.
- d. Successful completion of the course will include completion of an essay, acceptable to the Registrar, addressing the objectives of professional regulation and the importance to the public interest of complying with a practitioner's

regulatory obligations, including complying with reporting requirements to the College.

- e. The essay shall be at least 1000 words in length. The Member shall be responsible for the cost of review by the consultant to assist the Registrar to determine whether the essay is acceptable, up to a maximum of \$500.

4. Costs to the College in the amount of \$2,000.

5. That the Member provide evidence satisfactory to the Registrar within 45 days from the date that the Member receives the written Decision and Order of the Discipline Committee Panel demonstrating that he has provided the Alberta College of Pharmacists, or any other regulatory body of which he is a member, with a copy of this Panel's Decision, Reasons and Order.

In its reprimand, the Panel observed that the practice of pharmacy is a privilege and carries obligations, and that the Member did not uphold these obligations and compromised the integrity of the profession. The Panel pointed out that the College reporting system relies on the honour system, and the Member's violation of this premise is of significant concern to both the College and the public.

The Panel explained that the nature of the allegations of the professional misconduct against the Member in another jurisdiction is exactly the type of conduct that this College needs to know. The Panel indicated that the fact that the Member was not aware that is type of misconduct would warrant reporting to this college caused deep concern.

The Panel expressed its expectation that the Member's involvement in these discipline proceedings has impressed the seriousness of his actions upon him, and that he will not be before another panel of the discipline committee again.

**Member: Flora Farsad-Abarjy, R.Ph. (OCP #215689)**

At a hearing on September 28, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Ms. Farsad-Abarjy with respect to the following:

- That she falsified pharmacy records relating to her

practice in connection with claims made for drugs and/or other products;

- That she signed or issued, in her professional capacity, a document that she knew contained a false or misleading statement in connection with claims made for drugs and/or other products;
- That she submitted an account or charge for services that she knew was false or misleading in connection with claims made for drugs and/or other products.
- That she falsified pharmacy records relating to her practice, in her professional capacity, prescription #216102, that she knew contained a false or misleading statement in connection with an audit being conducted by the Ministry of Health and Long-Term Care between March 29, 2012 and April 12, 2012.

In particular, the Panel found that she:

- Failed to maintain the standards of practice of the profession;
- Signed or issued, in her professional capacity, a document that she knew contained a false or misleading statement;
- Submitted an account or charge for services that she knew was false or misleading;
- Contravened, while engaged in the practice of pharmacy, a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular, sections 5, and 15(1) of the Ontario Drug Benefit Act, R.S.O. 1990, c. O.10, as amended;
- 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.

The Panel imposed an Order which included as follows:

1. A reprimand

2. That the Registrar is directed to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular:

- a. that the Member complete successfully with an unconditional pass, at her own expense, and within 12 months of the date the Order is imposed, the ProBE Program on Professional / Problem-based Ethics for Health Care Professionals offered by the Center for Personalized Education for Physicians; and,
- b. that the Member shall be prohibited, for a period

of three years from the date the Order is imposed, from acting as a Designated Manager in any pharmacy;

- c. that the Member be prohibited, for a period of three years from the date the Order is imposed, from having any proprietary interest in a pharmacy as a sole proprietor or partner, or director or shareholder in a corporation that owns a pharmacy, or in any other capacity, or receiving any remuneration for her work as a pharmacist, or related in any way to the operation of a pharmacy, other than remuneration based on hourly or weekly rates or salary and in particular, not on the basis of any incentive or bonus for prescription sales.

3. That the Registrar suspend the Member's Certificate of Registration for a period of 12 months, with one month of the suspension to be remitted on condition that the Member complete the remedial training as specified in paragraph 2(a). The suspension shall commence on October 26, 2015, and shall continue until September 25, 2016, inclusive. If the remitted portion of the suspension is required to be served by the Member because she fails to complete the remedial training as specified in paragraph 2(a), that portion of the suspension shall commence on September 29, 2016, and shall continue until October 28, 2016, inclusive.

4. Costs to the College in the amount of \$10,000.

In its reprimand, the Panel observed that integrity and trust are paramount to the profession of pharmacy. The Panel voiced its disappointment with the Member's actions and her disregard for the trust that has been placed on the profession of pharmacy to exercise good judgment when delivering patient care. The Panel related that the Member's conduct was unbecoming of a pharmacist. The Panel expressed its expectation that the Member has learned from this process and will not appear before a panel of the Discipline Committee again.

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**Member:** Luke Agada (OCP #612540)

At a hearing on October 7, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Agada with respect to the following:

- That he dispensed prescription and/or targeted substances without a prescription and/or proper authorization from on or about December 31, 2011 to about April 9, 2013;
- That he recorded authorizations for prescriptions and/or refills of prescriptions where no such authorization was given, and/or altered one or more written prescriptions without proper authorization.

In particular, the Panel found that Mr. Agada:

- Failed to maintain a standard of practice of the profession;
- Falsified records relating to his practice;
- Signed or issued, in his professional capacity, a document that he knew contained a false or misleading statement;
- Contravened the Pharmacy Act, 1991, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991, or the regulations under those Acts, and in particular s. 155 of the Drug and Pharmacies Regulation Act, R.S.O. 1990, c. H-4, as amended, and/or s. 40 of Ontario Regulation 58/11 made thereunder;
- Contravened, while engaged in the practice of pharmacy, a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular section G.03.002 of the Food and Drug Regulations C.R.C., c. 870, as amended, to the Food and Drugs Act, R.S.C. 1985, c. F-27, as amended, and/or s. 51 of the Benzodiazepines and Other Targeted Substances Regulations, S.O.R./2000-271 under the Controlled Drugs and Substances Act, S.C. 1996, c. 19, as amended;
- Engaged in conduct or performed an act or acts 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.

The Panel imposed an Order which included as follows:

1. A reprimand
2. That the Registrar is directed to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular:
  - a. that the Member complete successfully with an unconditional pass, at his own expense, within 12 months of the date of this Order, the ProBE

course and any related evaluations offered by the Centre for Personalized Education for Physicians, or provide evidence satisfactory to the College that he has completed this course and any related evaluations within the 12 months prior to the date of this Order;

- b. That the Member, within 60 days of the date the Order is imposed, provide the College with proof that he has reimbursed his drug plan insurer the amount of \$631.60

3. That the Registrar suspend the Member's Certificate of Registration for a period of 4 months, with two months of the suspension to be remitted on condition that the Member complete the remedial training as specified in paragraph 2(a). The suspension shall commence on October 8, 2015, and shall continue until December 7, 2015, inclusive.

4. Costs to the College in the amount of \$3,500.

In its reprimand, the Panel observed that the Member engaged in conduct that was disgraceful, dishonorable and unprofessional. The Panel noted that he failed in his obligations to adhere to the standards of practice with respect to dispensing without proper authorization, and falsified records. The Panel pointed out that this conduct can cause the public to mistrust and lose confidence in the profession. The Panel related that the Member breached the public trust and let down the profession of pharmacy. The Panel expressed its hope that the Member has learned from this experience and will not appear before a panel of the Discipline Committee again.

#### **Member: G.M.**

At a hearing on October 13-16, 2015, a Panel of the Discipline Committee heard allegations of professional misconduct made against G.M. (the "Member"). It was alleged that the Member had engaged in sexual intercourse and/or other forms of physical sexual relations, and/or touching of a sexual nature, and/or behavior or remarks of a sexual nature with patient [Patient] from about 2007 to about 2013.

In particular, it was alleged that the Member had

1. Sexually abused a patient;



2. Failed to maintain a standard of practice of the profession; and
3. 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

The Member denied the allegations as set out in the Notice of Hearing.

In its reasons for decision, the Panel noted the following:

- The onus on the College was to prove the allegations on a balance of probabilities
- The Patient denied that the sexual intercourse with the Member occurred at a time when she was a patient
- Information differentiating between a patient of a pharmacist versus a patient of the pharmacy would be critical to making findings of sexual abuse, and very little such evidence was provided in this matter
- The Panel found the patient and the Member to be credible witnesses; conversely, the Panel identified concerns regarding evidence provided by other witnesses called in support of the College
- A sexual relationship was admitted, but sexual intercourse or other acts of a sexual nature, concurrent with the pharmacist-patient relationship, was not proven

After reviewing all of the evidence and submissions presented at the hearing, and considering the onus and the standard of proof, the Panel determined that it was unable to make findings against the Member with respect to the allegations set out in the Notice of Hearing. The Panel decided that the College failed to prove the allegations on a balance of probabilities with clear, cogent and convincing evidence, and in particular, failed to prove the concurrence of the sexual relationship with a Pharmacist-Patient relationship.

Accordingly, the Panel dismissed the allegations made against the Member.

#### **Member:** Paul Hellier (OCP #212100)

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At a hearing on October 21, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Hellier with respect to the following:

- That he uttered a forged document contrary to section 368(1)(b) of the Criminal Code of Canada
  - That he dispensed drugs and/or products for which prescriptions are legislatively required without an authorized prescriber's authorization
  - That he misappropriated drugs and/or products
  - That he participated in the forging or falsification of prescriptions and pharmacy records
  - That he failed to maintain the professional boundaries of the pharmacist-patient relationship when he developed a professional relationship with his spouse
- In particular, the Panel found that he
- Was found guilty of an offence that is relevant to his suitability to practice
  - Failed to maintain a standard of practice of the profession
  - Dispensed drugs for an improper purpose
  - Falsified records relating to his practice
  - Signed or issued in his professional capacity a document that he knew to contain a false or misleading statement
  - Submitted an account or charge for services that he knew was false or misleading
  - Contravened the Act, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991 or the regulations under those Acts, in particular s. 40 of Ontario Regulation 58/11 under the Drug and Pharmacies Regulation Act and ss. 155 and 156 of that act
  - Contravened, while engaged in the practice of pharmacy, a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, in particular, s. 31 of the Narcotic Control Regulations, C.01.041 of the Food and Drug Regulations, and G.03.002 of the Food and Drug Regulations
  - 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

The Panel imposed an Order which included as follows:

1. A reprimand

2. That the Registrar suspend the Member's Certificate of Registration for a period of 15 months, with two months of the suspension to be remitted on condition that the Member complete the remedial training as specified in paragraph 3(a). The period of suspension shall commence on February 24, 2016, and shall continue until March 23, 2017, inclusive. If the remitted portion of the suspension is required to be served by the Member because he fails to complete the remedial training as specified in paragraph 3(a), that portion of the suspension shall commence on March 24, 2017, and shall continue until May 23, 2017, inclusive;

3. That the Registrar shall impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular:
- (a) that the Member complete successfully with an unconditional pass, at his own expense and within 12 months of the date of this Order, the ProBE Program on Professional/Problem Based Ethics for Healthcare Professionals;
  - (b) that the Member shall be prohibited, for a period of 2 years from the date on which the Member returns to Part A of the College Register after the suspension referred to in paragraph 2 is completed, from:
    - i. Acting as a Designated Manager in any pharmacy;
    - ii. Acting as a Narcotic Signer at any pharmacy.

In its reprimand, the Panel noted that trust and integrity are integral to the profession of Pharmacy and the Panel expressed its disappointment with the Member's actions. The Panel related that the frequency and nature of these unacceptable activities over an extended period of time further exacerbate the egregiousness of the Member's behavior. The Panel was of the view that the Member's behaviour demonstrated disregard for the trust that is placed in the profession of Pharmacy to self-regulate and exercise good judgment with respect to delivering optimal patient care. The Panel expressed its expectation that the Member has learned from this experience and will not appear before a Panel of the Discipline Committee again.

**Member:** Ovietobore (Felix) Ayigbe (OCP #204476)

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At a hearing on November 18, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Ayigbe with respect to the following:

- That he submitted false claims to the Ontario Drug Benefit Program totalling approximately \$44,000 for drugs and other health products that were not actually dispensed to patients, in or about March-October 2010;
- That he submitted false claims to insurers other than the Ontario Drug Benefit Program totalling approximately \$18,000 for drugs and other health products that were not actually dispensed to patients, in or about March-October 2010;
- That he created false records of dispensing and/or billing transactions in relation to the false claims submitted to the Ontario Drug Benefit Program and/or other insurers in relation to the false claims described above; and/or
- That he provided false information and documentation to the Ministry of Health and Long-Term Care regarding drug purchases for Sunshine Pharmacy from Main Drug Mart in the course of the Ministry's audit, in or about November-December 2010.

In particular, the Panel found that he

- Failed to maintain a standard of practice of the profession;
- Falsified a record relating to his practice;
- Signed or issued, in his professional capacity, a document that he knew contained a false or misleading statement;
- Submitted an account or charge for services that he knew was false or misleading;
- Contravened a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular, the Ontario Drug Benefit Act, sections 5, 6 and/or 15(1);
- 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.

The Panel imposed an Order which included as follows:

1. A reprimand
2. Requiring the Registrar to revoke the Member's certificate of registration
3. Costs to the College in the amount of \$5,000

In its reprimand, the Panel described the Member's conduct as disgraceful, dishonourable, and unprofessional. The Panel expressed its view that the Member betrayed the people of Ontario and is a thief. The Panel suggested that the people of Ontario and the profession are well served by the revocation of the Member's certificate of registration.

#### **Member:** Elizabeth Toth (OCP #204196)

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At a hearing on November 25, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Ms. Toth with respect to the following:

- That she submitted accounts or charges for services that she knew were false or misleading to the Ontario Drug Benefit program for one or more drugs and/or products; and/or
- That she falsified pharmacy records relating to her practice in relation to claims made to the Ontario Drug Benefit program for one or more drugs and/or products.

In particular, the Panel found that she:

- Failed to maintain a standard of practice of the profession;
- Falsified records relating to her practice;
- Submitted accounts or charges for services that she knew to be false or misleading;
- Contravened a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular sections 5 and 15(1)(b) of the Ontario Drug Benefit Act, R.S.O. 1990, c. O.10, as amended, and/or Ontario Regulation 201/96 made thereunder;
- Engaged in conduct or performed an act or acts 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.

The Panel imposed an Order which included as follows:

- i. A reprimand
- ii. An Order directing the Registrar to suspend the Member's certificate of registration for a period of eight months, with one month of the suspension to be remitted on condition that the Member complete the remedial training specified in paragraph (iii)(A) below;
- iii. an Order directing the Registrar to impose specified terms, conditions or limitations on the Member's certificate of registration as follows:
  - (A) the Member must successfully complete with an unconditional pass, at her own expense and within twelve (12) months of the date the Order is imposed, the ProBE Program on professional / problem-based ethics for health care professionals offered by the Centre for Personalized Education for Physicians;
  - (B) for a period of three (3) years from the date the Order is imposed, the Member shall be prohibited from:
    - (1) having any proprietary interest in a pharmacy of any kind;
    - (2) acting as a Designated Manager in any pharmacy; and,
    - (3) receiving any remuneration for her work as a pharmacist other than remuneration based on hourly or weekly rates only;
  - (C) for a period of three (3) years from the date the Order is imposed, the Member shall be required to notify the College in writing of the name(s), address(es) and telephone number(s) of all pharmacy employer(s) ("employers") within fourteen (14) days of commencing employment in a pharmacy;
  - (D) for a period of three (3) years from the date the Order is imposed, the Member shall provide her employer with a copy of the Discipline Committee Panel's decision in this matter and its Order; and
  - (E) for a period of three (3) years from the date the Order is imposed, the Member shall only engage in the practice of pharmacy for an employer who agrees to write to the College within fourteen (14) days of the Member's commencing employment, confirming that it has received a copy of the required documents identified above, and confirming the nature of the Member's remuneration
- iv. Costs to the College in the amount of \$7,000.

In its reprimand, the Panel observed that integrity and trust are paramount to the profession, as pharmacists provide care to the public and in return are held in high regard. The Panel expressed its disappointment with the Member's failure to maintain a standard of practice with respect to falsifying records and submitting false claims. The Panel related its expectation that the Member will learn from this process and work to regain the trust that was diminished through her actions.

#### **Member:** Sherif Samwaiel (OCP #218729)

At a hearing on December 1, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Samwaiel with respect to allegations of professional misconduct set out in two notices of hearing.

With respect to the allegations set out in the first notice of hearing, the Panel found that

Mr. Samwaiel, while engaged in the practice of pharmacy as director, shareholder, Designated Manager and/or dispensing pharmacist at Total Health Pharmacy, Bloor Street location and Sheppard Avenue East location, in Toronto, Ontario, committed professional misconduct in that he

- falsified pharmacy records relating to his practice in connection with:
  - o claims made for various drugs in 2008-2010;
  - o various invoices purporting to be from Canadian Pharmaceutical Supply in 2009-2010;
  - o the Statement of Accounts payable at November 30, 2010 for [Individual 1]
- signed or issued, in his professional capacity, a document that he knew contained a false or misleading statement in connection with claims made for various drugs in 2008-2010

In particular, the Panel found that he

- failed to maintain a standard of practice of the profession;
- falsified a record relating to his practice;
- signed or issued, in his professional capacity, a document that he knew contained a false or misleading statement;

- submitted an account or charge for services that he knew was false or misleading;
- contravened the Act, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991, or the regulations under those Acts, and in particular, sections 155 and 156 of the Drug and Pharmacies Regulation Act, R.S.O. 1990, c. H-4, as amended;
- contravened a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular, sections 5, 6 and 15(1) of the Ontario Drug Benefits Act, R.S.O. 1990, c O.10, and section 25 of Regulation 201/96 under the Ontario Drug Benefits Act;
- 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.

With respect to the allegations set out in the second notice of hearing, the Panel found that

Mr. Samwaiel, while engaged in the practice of pharmacy as director, shareholder, Designated Manager and/or dispensing pharmacist at Northcliffe Pharmacy in Toronto, Ontario, committed professional misconduct in that he

- falsified pharmacy records relating to his practice in connection with one or more claims made for drugs and other products in 2010 and 2011;
- signed or issued, in his professional capacity, a document that he knew contained a false or misleading statement in connection with one or more claims made for drugs and other products in 2010 and 2011;
- submitted an account or charge for services that he knew was false or misleading in connection with one or more claims made for drugs and other products in 2010 and 2011;
- failed to ensure that the Pharmacy complied with all legal requirements, including but not limited to, requirements regarding record keeping, documentation, and billing the Ontario Drug Benefit Program; and/or
- failed to actively and effectively participate in the day-to-day management of the pharmacy, including, but not limited to drug procurement and inventory management, record keeping and documentation, and billing.

In particular, the Panel found that he

- failed to maintain a standard of practice of the profession;
- falsified a record relating to his practice;
- signed or issued, in his professional capacity, a document that he knew contained a false or misleading statement;
- submitted an account or charge for services that he knew was false or misleading;
- contravened the Act, the Drug and Pharmacies Regulation Act, the Regulated Health Professions Act, 1991, or the regulations under those Acts, and in particular, sections 155 and 156 of the Drug and Pharmacies Regulation Act, R.S.O. 1990, c. H-4, as amended;
- contravened a federal or provincial law or municipal by-law with respect to the distribution, sale or dispensing of any drug or mixture of drugs, and in particular, sections 5, 6 and 15(1) of the Ontario Drug Benefit Act, R.S.O. 1990, c. O.10, and sections 25 and 27 of Regulation 201/96 under the Ontario Drug Benefit Act;
- 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.

The Panel imposed an Order which included as follows:

1. A reprimand.
2. Directing the Registrar to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular:
  - (a) The Member must successfully complete with an unconditional pass, at his own expense and within twelve (12) months of the date the Order is imposed, the ProBE program on Professional Problem-Based Ethics for Health Care Professionals offered by the Centre for Personalized Education for Physicians;
  - (b) The Member shall be prohibited from having any proprietary interest in a pharmacy of any kind and/or receiving remuneration for his work as a pharmacist other than remuneration based on hourly or weekly rates only, provided that this term, condition and limitation may be removed by an Order of a panel of the Discipline Committee upon application by the Member,

- such application not to be made sooner than five (5) years from the date the Order is imposed;
- (c) For a period of five (5) years from the date the Order is imposed, the Member shall be required to notify the College in writing of the names, addresses, and telephone numbers of all employers within fourteen (14) days of commencing employment in a pharmacy;
- (d) For a period of five (5) years from the date the Order is imposed, the Member shall provide his pharmacy employer with a copy of the Discipline Committee Panel's decision in this matter and its Order;
- (e) For a period of five (5) years from the date the Order is imposed, the Member shall only engage in the practice of pharmacy for an employer who agrees to write to the College within fourteen (14) days of the Member's commencing employment, confirming that it has received a copy of the required documents identified above, and confirming the nature of the Member's remuneration.
- (f) For a period of five (5) years from the date the Order is imposed, the Member shall not work at nor be employed by any pharmacy in which a family member has a proprietary interest.

3. Directing the Registrar to suspend the Member's Certificate of Registration for a period of twenty four (24) months with one (1) month of the suspension to be remitted on condition that the Member complete the remedial training specified in subparagraph 2(a) above. The suspension shall commence on December 1, 2015 and shall continue until October 31, 2017, inclusive. If the balance of the suspension is required to be served by the Member because he fails to complete the remedial training specified in subparagraph 2(a) above, the balance of the suspension shall commence on November 1, 2017, and continue until November 30, 2017, inclusive.
4. That the Member pay a fine in the amount of \$35,000.00, payable within twelve (12) months from the date of this Order.
5. Costs to the College in the amount of \$20,000.

In its reprimand, the Panel observed that the Member stole from the people of Ontario, betrayed his profession, and undercut the public's confidence in it. The Panel noted that the Member's actions exemplified disgraceful,



dishonorable and unprofessional conduct. The Panel related that the Member brought shame to himself and his family and indicated that it did not wish to see the Member before the Discipline Committee again.

**Member:** Gopi Menon (OCP #202656)

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At a hearing on December 15, 2015, a Panel of the Discipline Committee made findings of professional misconduct against Mr. Menon with respect to the following incidents:

- That he sexually harassed colleague and patient [Colleague 1] in or about April 2012 by:
  - a) inappropriately removing a pen from a pocket of [Colleague 1]'s clothes near her breasts; and/or
  - b) inappropriately commenting on and/or touching [Colleague 1]'s hair;
- That he sexually harassed colleague and patient [Colleague 2] in or about April 2012 by:
  - a) inappropriately commenting on and/or touching [Colleague 2]'s hair

In particular, the Panel found that he:

- Failed to maintain a standard of practice of the profession;
- 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.

The Panel imposed an Order which included as follows:

1. A reprimand
2. Directing the Registrar to impose specified terms, conditions or limitations on the Member's Certificate of Registration, and in particular:
  - a) that the Member complete successfully with an unconditional pass, at his own expense, within 12 months of the date of this Order, the ProBE course and any related evaluations offered by the Centre for Personalized Education for Physicians
  - b) that the Member successfully complete, within 12 months of the date that he successfully completes the ProBE course identified above in paragraph

2(a), a course with Gail E. Siskind Consulting Services, or another professional ethics consultant acceptable to the College, to be designed by the consultant, with the purpose of addressing the professional misconduct issues raised in this case; the following terms shall apply to the course:

- i. the number of sessions shall be at the discretion of the consultant, but shall be a minimum of 3;
  - ii. the manner of attendance at the session(s) (e.g. in person, via Skype, etc.) is a matter to be discussed in advance between the Member and the consultant, but shall ultimately be at the discretion of the consultant;
  - iii. the Member shall provide to the consultant his evaluation from the ProBE course, and any essay he completed as part of that course, and discuss with the consultant the issues arising from that course;
  - iv. the Member shall be responsible for the cost of the course;
  - v. the consultant shall agree to confirm to the College once the Member has completed the course to the satisfaction of the consultant
3. Directing the Registrar to suspend the Member's Certificate of Registration for a period of 1 month, which period of suspension shall be remitted upon the Member successfully completing the remedial training as specified in subparagraphs 2(a) and 2(b) above. If the suspension is required to be served by the Member because he fails to complete the remedial training specified in subparagraphs 2(a) and 2(b) above, the suspension shall commence on December 16, 2017, and continue until January 15, 2018, inclusive.

4. Costs to the College in the amount of \$5,000

In its reprimand, the Panel noted that members of the public and the profession hold pharmacists in high regard, and as a pharmacist the Member has a moral obligation to conduct himself in a manner that is professional and maintains public confidence. The Panel indicated that pharmacists are expected to demonstrate personal and professional integrity and to maintain professional boundaries at all times, and that these boundaries are based on trust, respect, and the appropriate use of power. The Panel expressed its expectation that the remediation ordered will served as an opportunity to remediate the member's practice and that he will not appear before a panel of the Discipline Committee again.





## Ontario College of Pharmacists

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