



Ontario College
of Pharmacists

Putting patients first since 1871



2016 ANNUAL REPORT



2016 ANNUAL REPORT

Contents

Registrar's Message	4
President's Message	5
College Council	6
Strategic Framework	8
College Committees	9
Picture of the Profession	12
Registering Qualified Pharmacy Professionals	14
Special Feature: Increasing Transparency	20
Advancing Quality Assurance	22
Special Feature: Compounding	27
Evolving Pharmacy Practice	28
Special Feature: Code of Ethics	32
Assessing Pharmacies	34
Hospital Assessments	40
Investigating and Resolving Concerns	42
Discipline	48
Health Inquiries	52
OCP's Communications Channels	56
Remaining Fiscally Responsible	58
2016 Summary Financial Statements	60



**Ontario College
of Pharmacists**

Putting patients first since 1871



ABOUT THE COLLEGE

About us

The Ontario College of Pharmacists is the regulator of 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 assess pharmacies within the province to verify that they 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



While I only joined the College in January 2017, it is my pleasure to take this opportunity to reflect on the work of College staff, committees and Council in 2016. I would also like to take this opportunity to thank Anne Resnick, our

Interim Acting Registrar in 2016, for her guidance over the last year. This Annual Report highlights our work in 2016, identifies trends from the data we collect, and discusses some of the ways our work will expand and develop in 2017.

Public protection and maintaining the public's trust in the safe, effective and ethical delivery of pharmacy services is our priority as a regulator. Throughout 2016, a number of key initiatives illustrate this role. As part of our commitment to public transparency, we expanded the information we share about pharmacy professionals on our public register to help people decide where they want to seek pharmaceutical services. The Complaints process information on our website was also updated and a video added to make it easier for the public to understand and navigate the process.

Introduction of the *Safeguarding Health Care Integrity Act, 2014* in December 2014 gave the College the authority to license and inspect hospital pharmacies, but it was only with the required amendments to the *Drug and Pharmacies Regulation Act (DPRA)* regulation in August, 2016 that this authority came into effect. Baseline assessments of the hospitals began in 2015 and continued into 2016. This relationship will continue to evolve over the next year, particularly as we work to implement new compounding standards.

The College also continued with the implementation of the new practice assessments to prioritize the

most important components of patient care and move the profession forward in alignment with the new Code of Ethics and Standards of Practice.

One of the College's integral roles is to confirm the competency of pharmacy professionals upon entry into the profession and throughout the life of their practice. As part of this, we have worked to assess and redesign our structured practical training program and our quality assurance program. These initiatives will continue to evolve in 2017 as we strive to meet the objectives of the College, and the expectations of the public.

While we cannot predict the future, we do know that there are emerging areas where the College will have a role in protecting the public through enforcement of new legislation and providing guidance to pharmacy professionals in areas such as opioid use, mandatory medication error reporting, optimizing the role of pharmacy professionals to practice to scope, medical assistance in dying, and new medication options. The College will also continue to embrace transparency and seek out ways to prevent the sexual abuse of patients by healthcare professionals.

The role of pharmacy professionals has grown significantly over the last few years. As the healthcare system continues to transform, and the province moves forward with Patients First, the College will continue to play a critical role in protecting the public through oversight of the profession. Ultimately, how we choose to govern ourselves and practice our profession will chart the course for years to come.

I encourage you to read through this year's Annual Report to understand where the College has come from and where we are headed.

Thanks for reading!

Nancy Lum-Wilson
Registrar

PRESIDENT'S MESSAGE



It's an honour to serve as President of the College for the 2016-2017 year. I'm pleased that this Annual Report provides all of us an opportunity to reflect on the achievements of the past year and anticipate the work to come in 2017.

We continue to push our Strategic Framework 2015-2018 forward – including our values of transparency, accountability and excellence. As an organization dedicated to Continuous Quality Improvement, the College, and Council, continually looks for opportunities to improve the ways in which we seek to serve and protect the public.

Healthcare is in a state of transformation within Ontario, led by the government's *Patients First* initiative. The College has echoed this emphasis on putting patients, and their healthcare experiences, first within our strategic framework. Whether through providing guidance to pharmacy professionals on their expanding scope, encouraging increased inter-professional relationships, or reminding pharmacists and pharmacy technicians of their responsibilities, the College aims to enhance patient care for Ontarians.

In August, the College officially gained the authority to accredit hospital pharmacies. This was a new role and a large undertaking for the College, and required the collaboration of many different groups. I'd like to thank those who worked with us to develop the systems and standards that will lead to improved patient safety and care in all of Ontario's pharmacies.

Our Find a Pharmacy or Pharmacy Professional tool, launched this year, was designed with the public

in mind. The tool gives patients the opportunity to quickly and easily find their pharmacist or pharmacy technician, and make informed choices about their healthcare provider. More about this tool can be found on page 20.

Pharmacy professionals must be accountable for their practice, and provide their patients with effective and ethical care. The new Code of Ethics was approved by Council in December 2015, and in 2016 the College released helpful e-Learning modules and video practice examples to help pharmacists and pharmacy technicians understand their obligations to the Code and how they relate to everyday practice (more on page 32). Upon renewal in 2017, all members of the College were required to make a Declaration of Commitment, indicating that they have read and understood the Code.

As we look to the year ahead, we know that it will be a busy one, with many opportunities for the College and pharmacy professionals alike to continue to develop and earn the public trust. I'd like to thank my fellow Council members and College staff for their efforts and support over the past year.

All the best in 2017!

Regis Vaillancourt

Council President, 2016-2017

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 2016-2017 – As of Dec. 31, 2016

ELECTED MEMBERS



Regis Vaillancourt
(President) – District H



Christine Donaldson
(Vice President) – District H



Billy Cheung
District L



Gerry Cook
District N



Michelle Filo
District T



Fayez Kosa
District M



Christopher Leung
District N



Jon MacDonald
District P



Esmail Merani
District K



James Morrison
District L



Don Organ
District M



Goran Petrovic
District TH



Tracey Phillips
District K



Sony Poulse
District L



Karen Riley
District N



Douglas Stewart
District P



Laura Weyland
District M

PHARMACY SCHOOLS



University of Toronto:
Heather Boon



University of Waterloo:
David Edwards

PUBLIC MEMBERS



Kathy Al-Zand



Linda Bracken



Carol-Ann Cushnie



Naj Hassam



Javaid Khan



James MacLaggan



Sylvia Moustacalis



Shahid Rashdi



Joy Sommerfreund



Ravil Veli



Wes Vickers

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

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. The last scheduled review took place in March 2015 and resulted in the Strategic Framework 2015-2018.

Each strategic priority has identified outcomes and key performance indicators. At the quarterly Council meeting, the Registrar presents a progress update on the strategic priorities identified as part of the framework.



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.



The **Executive** Committee – As of Dec. 31, 2016

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:

- Regis Vaillancourt – President & Chair
- Christine Donaldson – Vice President
- Esmail Merani – Past President
- Laura Weyland

APPOINTED PUBLIC MEMBERS:

- Kathy Al-Zand
- Sylvia Moustacalis
- Joy Sommerfreund

STAFF RESOURCE:

- Anne Resnick

The **Elections** Committee – As of Dec. 31, 2016

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:

- Anne Resnick



STATUTORY COMMITTEE

The **Patient Relations** Committee – As of Dec. 31, 2016

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

ELECTED PRACTITIONERS:

- Goran Petrovic
- Doug Stewart

APPOINTED PUBLIC MEMBERS:

- Joy Sommerfreund (Chair)
- Linda Bracken
- Sylvia Moustacalis

NON-COUNCIL COMMITTEE MEMBERS::

- Fel dePadua

STAFF RESOURCE:

- Anne Resnick

PICTURE OF THE PROFESSION

BY THE NUMBERS

As of Dec. 31, 2016

15,715 pharmacists registered in Ontario

 **4% increase** since 2015

58% of pharmacists in Ontario are female



44 average age of a pharmacist in the province



38% of Ontario's pharmacists were educated internationally

 **1% increase** since 2015



14% of pharmacists are 60+

59% of pharmacists are registered to administer injections



4,286 pharmacy technicians registered in Ontario

 **11% increase** since 2015

9% of pharmacy technicians in Ontario are male



39

average age of a pharmacy technician in the province



2% of pharmacy technicians are 60+

37% of pharmacists graduated more than 25 years ago

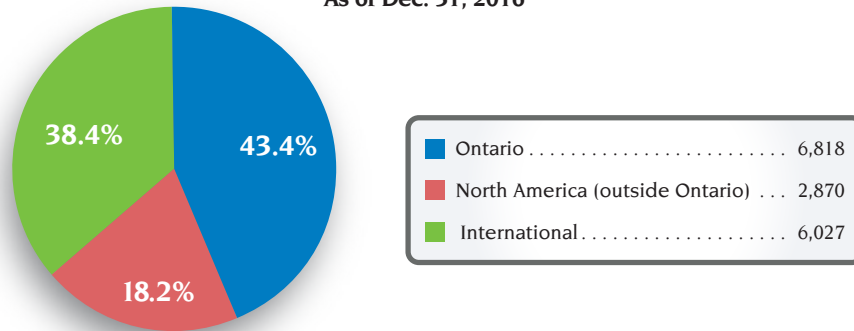
 **1% higher** than 2015



PICTURE OF THE PROFESSION

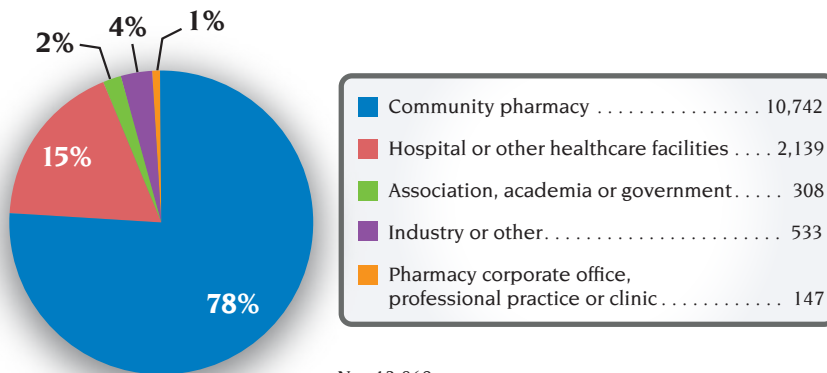
Pharmacists: Place of Education

As of Dec. 31, 2016



Pharmacists by Practice Type

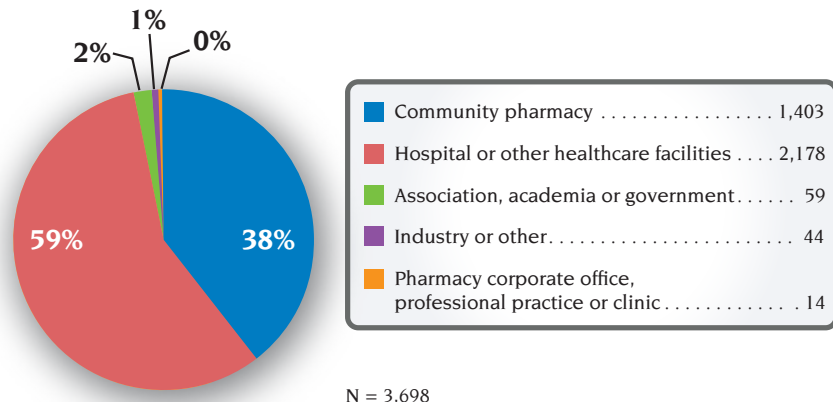
As of Dec. 31, 2016



78%
of pharmacists
are in
community
practice.

Pharmacy Technicians by Practice Type

As of Dec. 31, 2016



59%
of pharmacy
technicians are
in hospitals or
other healthcare
facilities.

These practice type graphs do not include practitioners who did not record a place of practice.

REGISTERING QUALIFIED PHARMACY PROFESSIONALS



REGISTERING QUALIFIED PHARMACY PROFESSIONALS

All pharmacists and pharmacy technicians in Ontario must be registered with the Ontario College of Pharmacists. To become registered, applicants must demonstrate that they 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 verifying that only those applicants who have successfully met the registration requirements are granted the right to practise in Ontario.

BY THE NUMBERS

962 new pharmacists registered in 2016



4% decrease

compared to 2015



52% of new pharmacists were educated internationally



2% increase

compared to 2015



39% of new pharmacists were educated in Ontario



2% decrease

compared to 2015



487 new pharmacy technicians registered in 2016



48% decrease

compared to 2015



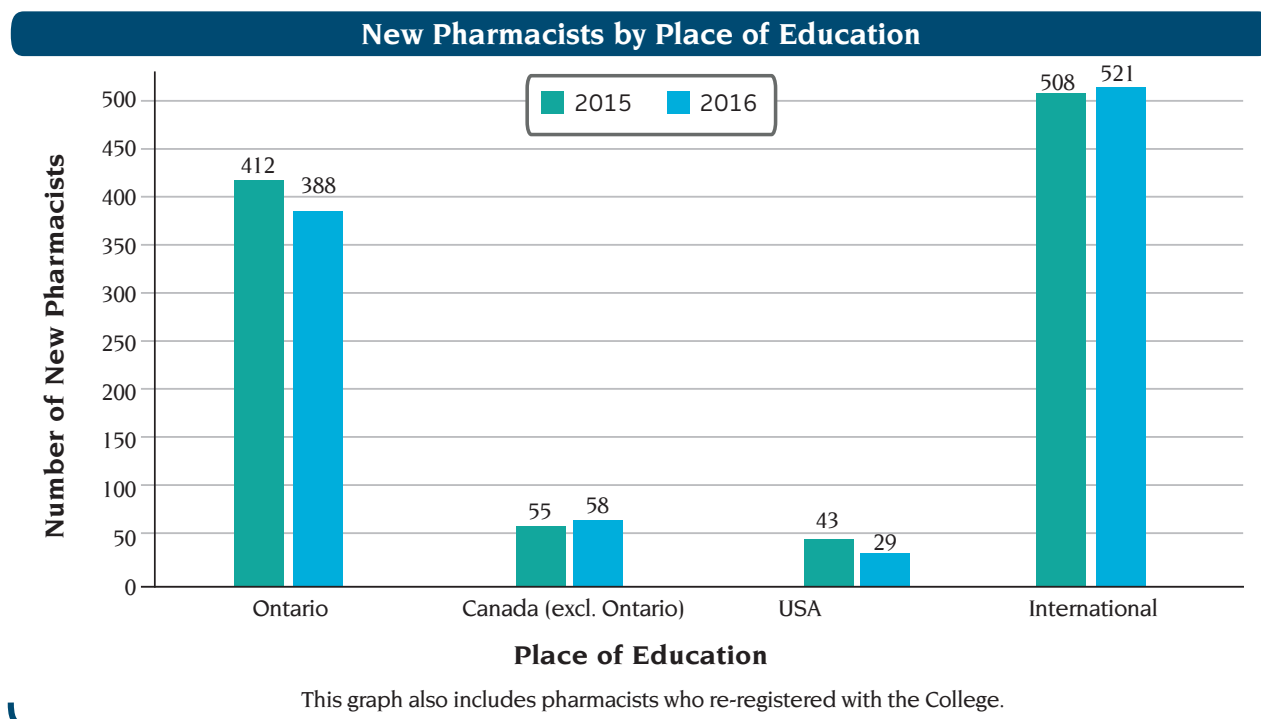
1,658 pharmacy students and interns were training in Ontario in 2016



182 applications considered by panels of the Registration Committee in 2016

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





STATUTORY COMMITTEE

The **Registration** Committee – As of Dec. 31, 2016

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

ELECTED PRACTITIONERS:

- Christine Donaldson (Chair)
- Michelle Filo

APPOINTED PUBLIC MEMBERS:

- Carol-Ann Cushnie
- Ravil Veli
- Wes Vickers

NON-COUNCIL COMMITTEE MEMBERS:

- Jillian Grocholsky
- Deep Patel

PHARMACY SCHOOL REPRESENTATIVE:

- Heather Boon

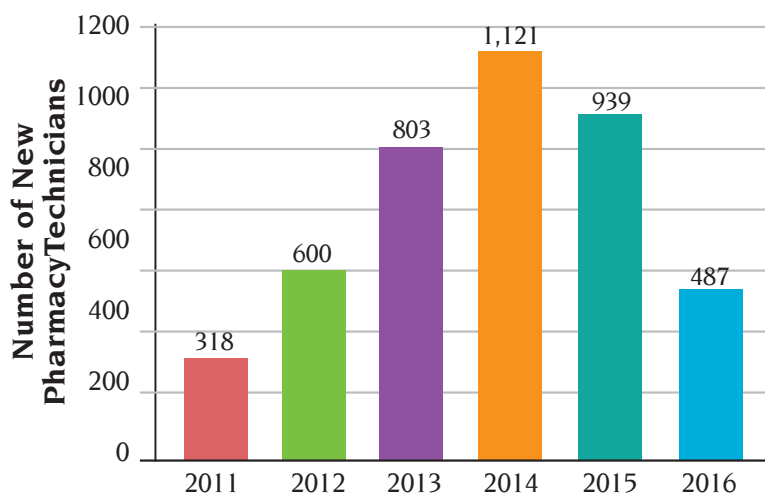
ONTARIO PHARM TECH PROGRAM REP:

- Sharon Lee

STAFF RESOURCE:

- Vince Bowman

New Pharmacy Technicians by Year



The first year of registration for pharmacy technicians was 2010.

Registration of Pharmacy Technicians

When pharmacy technicians became regulated healthcare professionals in 2010, pharmacy assistants were given the opportunity to register with the College through a transition pathway that included successful completion of an entry exam by January 1, 2012, and a bridging education program by January 1, 2015. The passing of these deadlines are a leading reason for the decline in the number of new pharmacy technicians registered with the College in 2016. It is expected that the number of new pharmacy technicians will stabilize 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 certain requirements, their application is referred to a panel of the Registration Committee to give their application individual consideration. A panel can choose to grant, partially grant, or deny a request for a certificate of registration, or defer a decision, based on the evidence provided.

In 2016, panels of the Registration Committee considered 182 applications. This was a 39% decrease in applications compared to 2015.

- Fully granted168
- Partially granted11
- Denied1
- Deferred.....2
- Withdrawn0

Health Professions Appeal and Review Board

Applicants who are not satisfied with a decision by a panel of the Registration Committee may appeal the decision to the Health Professions Appeal and Review Board (HPARB), an independent adjudicative agency that conducts reviews and hearings of decisions of the Registration committees of Ontario's health regulatory colleges. There was one appeal to HPARB in 2016. That appeal was withdrawn.

A LOOK BACK AT 2016

Preparation for PACE

In 2016, the College developed Practice Assessment of Competence at Entry (PACE) as the practice-based registration requirement which will replace Structured Practical Training (SPT) as the College shifts its focus from training to assessment.

In PACE, a candidate's ability to demonstrate entry-to-practice competence in a practice setting is assessed by an assessor appointed by the College. Following assessment, guidance is offered to candidates with identified practice performance gaps to support appropriate individualized development prior to re-assessment. The practice-based registration requirement is met when a candidate demonstrates entry-to-practice competence to the validated standard.

The College collaborated closely with the Faculties of Pharmacy at the University of Toronto and the University of Waterloo to create consistent practice-based assessment standards among the Ontario PharmD programs and PACE. Graduates of these programs meet the practice-based registration requirement through their educational programs. The College also worked with the University of Toronto International Pharmacy Graduate Program to prepare their students for PACE assessment.

THE PACE PROCESS

STEP
1

ORIENTATION (ONE WEEK)

The candidate has an orientation to the practice site and gets familiar with the workflow and processes before engaging in the assessment.



STEP
2

ASSESSMENT (TWO OR THREE WEEKS)

The candidate engages in the scope of practice of the profession over 70 hours on either a two-week full time or three-week part-time basis to demonstrate their competence. The PACE Assessor observes their practice and assesses it against the PACE Assessment Criteria. The candidate will also document examples and situations of their practice experience in an online portal.



STEP
3

OUTCOME (UP TO TWO WEEKS)

The candidate is notified of the outcome of the assessment: Competence Demonstrated or Development Required.



STEP
4

FEEDBACK & PLAN DEVELOPMENT

The candidate creates a self-directed learning action plan to address gaps in their competence. College staff provide support to the candidate in the development of their learning action plan. The candidate works with a coaching pharmacist to implement their plan.

A LOOK AHEAD AT 2017

Implementation and Expansion of PACE

On January 18, 2017, PACE was implemented for all graduates of international pharmacy programs who were beginning the registration process in Ontario. PACE will be implemented for graduates of Canadian-accredited pharmacy degree education programs outside of Ontario, and graduates of American-accredited pharmacy degree education programs outside of Canada before the end of 2017. We anticipate that the College will implement PACE for pharmacy technician applicants in 2018.

Update to the Registration Regulation

The College is in the process of updating its registration regulation to support practice evolution and change. The amendments will reflect an outcomes-based approach to regulation and introduce important changes to registration requirements.

The value of this approach is that the expected outcomes will have the weight of legislation, while providing the College with the flexibility to update standards as needed in policies and guidelines to better reflect the current practice environment. Once the amendments

to the regulations are drafted, and Council has approved them for public consultation, stakeholders of the College will be provided an opportunity to review and comment on the draft regulations.

Priorities for the update of the regulation include:

- Implementation of a single provisional class of registration for Pharmacists and Pharmacy Technicians (i.e., combining the Student and Intern classes for Pharmacists; creating a provisional class of registration for Pharmacy Technician applicants);
- Extending the two-part Register to all members; and
- Adding a requirement that members maintain their language proficiency in English or French within ongoing terms, conditions, and limitations on all certificates.

Once feedback is collected on the proposed amendments, they will be revised and approved by Council for submission to government. This is expected to happen later in 2017.

SPECIAL FEATURE:

FIND A PHARMACY OR
PHARMACY PROFESSIONAL



INCREASING TRANSPARENCY

In July 2016, the College launched our updated Find a Pharmacy or Pharmacy Professional tool. The tool or “public register” allows users to access useful information about a pharmacy or pharmacy professional.

Find a Pharmacy or Pharmacy Professional was designed with the public in mind, with a focus on making things easy to find, simple to understand, mobile-friendly, and transparent. We’ve tried to minimize jargon and provide supporting information and context to explain regulatory processes wherever possible.

Building on our Commitment to Transparency

The College has a strong commitment to transparency, identifying it as a core value in the College’s strategic plan. Over the past few years, we have made changes to the way we share information about pharmacies, pharmacy professionals, and our own policies and processes, including more information about complaints and their outcomes, discipline hearings,


and criminal charges. Beyond just sharing information though, we have made a commitment to doing so in an accessible and clear manner.


While we have been a leader in advancing transparency among health regulatory bodies, transparency is not something that is simply achieved. It is, instead, a value that the College will continue to uphold and apply in all aspects of its work. We are committed to working with government, other

regulatory bodies, and external stakeholders to identify and implement measures to enhance the ability of patients to make informed healthcare decisions.

Information Available on Pharmacies

Users can find a pharmacy by searching their name, address, or accreditation number. They can also search for pharmacies by type, operating status or concerns that the College has about the pharmacy.

 Find a Pharmacy

 Find a Pharmacy Professional

Fill in the information you know:


What is the pharmacy's name?

Where is it located?

Address, city or postal code (first 3 digits). Do not include "Ontario".

[▶ More Search Options](#)

SEARCH







About the
College

Protecting
the Public

Registration

Practice &
Education

Regulations
& Standards

Library

[Find a person](#)

GENERAL

REGISTRATION HISTORY

ACADEMIC & TRAINING
HISTORY

CONCERNS

Each pharmacy profile lists their address, their accreditation number and date of issue, their operating status, a list of pharmacy staff with each staff member's name linking to their own profile, the date and result of their past assessments by the College and any concerns identified by the College regarding the pharmacy.

Information Available on Pharmacy Professionals

Pharmacy professionals can be searched by their name, place of work, registration number, type of registration (e.g. pharmacist, pharmacy technician, student), whether they are a designated manager, any concerns the College has about them, and practice status.

A pharmacy professional's profile will contain the following:

- **General information:** Their name, their type of registration number, whether they are in Part A or Part B of the register, their gender, their workplace(s), whether they are a designated

manager, and any corporations where they are a director.

- **Registration History:** A history of when they were first registered and any changes in their registration status.
- **Academic and Training History:** Their place and date of graduation.
- **Concerns:** Information about concerns that are relevant to a pharmacy professional's suitability to practice. A list of possible concerns is available on the [OCP website](#).

Making Concerns More Transparent



A yellow circle with an exclamation mark inside will appear next to any pharmacy or pharmacy professional that the College has or had concerns about. On the Concerns tab, each concern will be listed, as well as the applicable details of the concern.

The College has also made practice status more visible

by showing it on each tab of a pharmacy or pharmacy professional's profile. It is clear whether the professional is able to provide patient care and whether any conditions have been placed on that ability.

Further Developments in 2017

The College is continuously working to enhance the *Find a Pharmacy or Pharmacy Professional* tool to make available to patients the information they need to make choices regarding their healthcare.

In 2017, we are adding new information. The public will be able to see whether their pharmacy professional has self-reported registration in any other jurisdictions outside of Ontario. They will also be able to search for pharmacy professionals that have indicated they are able to provide care in a particular language. Additionally, the College is working to provide more clarity regarding pharmacy ownership.



ADVANCING QUALITY ASSURANCE



Once a pharmacist or pharmacy technician is registered, the College has the responsibility to make sure they remain competent throughout their career. We validate that all pharmacy professionals retain their skills and competence, and maintain the ethical and practice standards of the profession.

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 (under review)

BY THE NUMBERS

14,824

pharmacists in Part A
of the register*



891

pharmacists in Part B
of the register*



* 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.

The **Quality Assurance** Committee – As of Dec. 31, 2016

The Quality Assurance Committee develops and maintains the Quality Assurance program. It supports continued competence and encourages continuing professional development of pharmacy professionals.

ELECTED PRACTITIONERS:

- Jon MacDonald (Chair)
- Tracey Phillips
- Sony Poulose

APPOINTED PUBLIC MEMBERS:

- Linda Bracken
- John Laframboise
- Sylvia Moustacalis

NON-COUNCIL COMMITTEE MEMBERS:

- Tina Boudreau
- Mary Joy
- Sarah Woodworth-Giroux

STAFF RESOURCE:

- Sandra Winkelbauer

DEVELOPING A NEW APPROACH TO QUALITY ASSURANCE

For many years, the College's quality assurance program included a peer review assessment which consisted of a standardized clinical knowledge assessment and standardized patient interview assessment. This program was effective in enhancing clinical knowledge and communication skills across the profession. Building on the success of this program and the groundwork laid, the time was right to evolve the program into one where actual practice was assessed (rather than simulated situations) and a greater number of pharmacists could be assessed. As a result, Council directed a review and re-design of current quality assurance activities by the Quality Assurance Committee.

The Quality Assurance Committee and its working group, the Quality Assurance Re-design Advisory Committee, are now engaged in a process to develop a new model of quality assurance, which will also include activities to assess continuing competency of pharmacy technicians.

The Meaning of Competency

Competency can be thought of as “can do” and “does do”. Does the pharmacy professional have the knowledge, skills and attitudes to be able to engage in practice? Does the pharmacy professional engage in the appropriate processes in practice? The Quality Assurance Committee will be working within this framework to develop a model that identifies how competency can be achieved and how it can be measured.

Competency: A Balance of Can Do and Does Do

	CAN DO Knowledge, skills and attitudes	DOES DO Engages in the right processes
How can pharmacy professionals' achieve?	Education and practical training prior to entry to practice Keeping up to date throughout practice with a commitment to continuous professional development	Engage in the right processes, aligning with the four domains of the individual practice assessment
How can the College measure?	Licensure requirements at entry to practice Through quality assurance activities throughout practice (e.g. audit of learning portfolio, clinical knowledge assessment)	Through practice assessments at place of practice and other quality assurance activities

Part of a Broader Shift in Focus

The College has already started on measurement of the “does do” side of this balance. In 2015, the College began phasing in community pharmacist individual practice assessments in conjunction with a pharmacy’s operational assessment. The individual practice assessment focuses on the processes that a pharmacist engages in on a daily basis: patient assessment, decision making, communication/education and documentation.

These practice assessments were designed to advance practice, with the goal of providing guidance through coaching to improve processes for all pharmacy professionals and ultimately to deliver greater health outcomes for patients.

The new quality assurance program will align with and complement this shift in approach and expectations from the College.

More Work to Come in 2017

Work on this model will continue into 2017. The College is also developing regulatory amendments under the *Pharmacy Act* that will enable important changes to the current quality assurance activities. Once reviewed by Council, the draft will be shared for public consultation before being approved for submission to government.

SPECIAL FEATURE:

COMPOUNDING STANDARDS

Sterile Compounding

In September 2016, College Council approved the [Model Standards of Practice for Pharmacy Compounding of Non-hazardous Sterile Preparations](#) (NAPRA, 2016) and the [Model Standards for Pharmacy Compounding of Hazardous Sterile Preparations](#) (NAPRA, 2016) for implementation by January 1, 2019. This approval was made following consideration of feedback received through a public consultation period.

While the existing expectations around the preparation of sterile compounding did incorporate many patient safety requirements, the new standards contain additional requirements, including an onsite quality assurance program, increased oversight, beyond-use-dates and recall procedures.

The standards will apply in all premises where sterile compounding is done, including drug preparation premises, community pharmacies and hospital pharmacies.

Community and hospital practice advisers have developed a plan to align expectations for implementation, building on the baseline reviews of hospital pharmacies completed over the last year and the identification of community pharmacies whose practice includes sterile preparations.

It is expected that pharmacies where sterile compounding is done will have started the process of conducting a gap analysis comparing the Model Standards against the pharmacy's own policies, procedures and facilities. Based on this analysis, a plan should be developed to reach compliance before the implementation date.

Throughout 2017 and 2018, the College will be working with pharmacies and pharmacy professionals who are engaged in sterile compounding to meet these important standards.

Non-Sterile Compounding

In fall 2016, the College sought feedback on the *Model Standards for Pharmacy Compounding of Non-Sterile Preparation* developed by the National Association of Pharmacy Regulatory Authorities (NAPRA). These draft standards are intended to provide those who compound non-sterile preparations with the standards necessary to evaluate practice, develop procedures, and implement quality control measures, thereby improving quality and safety for both staff and patients.

The College submitted a report to NAPRA summarizing the feedback received. It is expected that updated standards will be released later in 2017. Once released, College Council will consider their adoption as well as timing of implementation.

EVOLVING PHARMACY PRACTICE



BY THE NUMBERS

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



3,900

calls and emails related to practice matters



88% of calls and emails were related to community practice

2 top topics for questions were Opioids and Scope of Practice

6

new e-Learning modules and 3 new video practice examples to support pharmacy professionals in understanding the new Code of Ethics

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 pharmacists and pharmacy technicians are expected to use their professional judgment to make decisions, the College also provides guidance for pharmacy professionals in their application of standards and legislation.

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

The **Professional Practice** Committee – As of Dec. 31, 2016

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 (Chair)
- Fayez Kosa
- Don Organ
- Karen Riley

APPOINTED PUBLIC MEMBERS:

- Shahid Rashdi
- Ravil Veli

NON-COUNCIL COMMITTEE MEMBERS::

- Mike Hannalah
- Mark Scanlon

STAFF RESOURCE:

- Tina Perlman

A Shift to Expert Working Groups

The College is currently experimenting with an approach that shifts much of the work of examining and developing new policies and guidelines to expert working groups. This approach allows for a more timely response to emerging issues, supports the College to draw on professionals with specific expertise and provides an opportunity to involve members of the public or patients, as appropriate.



A LOOK BACK AT 2016

Medical Assistance in Dying

In 2016, the federal and provincial governments brought forward legislation to permit limited medical assistance in dying (MAiD). To guide pharmacy professionals who are part of an interdisciplinary team providing MAiD, the College prepared a guidance document and FAQs outlining their responsibilities and obligations in accordance with legislation, Standards of Practice and the Code of Ethics.

Opioids

Governments at all levels are taking action to reduce and prevent an increasing number of overdose deaths related to opioids like fentanyl. Pharmacists and pharmacy technicians have an important role to play in helping to prevent the abuse of opioids by patients. The College has continued to work to share guidance, education and resources with pharmacy professionals, including guidance on dispensing and/or selling naloxone and dispensing fentanyl in accordance with the provincial Patch for Patch program, so that they can more effectively understand their responsibilities when providing care or guidance to patients who are using opioids.

In light of the Opioid Summit that was held in November 2016 and the release of the Joint Statement of Action to Address the Opioid Crisis, the College is examining the role we can play in these and other initiatives.

Administering Vaccines

In October 2016, pharmacists, and pharmacy interns and students under supervision, were authorized to administer vaccines to any patient five years or older for 13 vaccine preventable diseases. This was in addition to previous authorization for administering the influenza vaccine.

The College produced guidelines for pharmacists who are administering a substance by injection or inhalation, and has provided other resources to enable the safe and effective delivery of vaccines. The *Find a Pharmacy or Pharmacy Professional* tool on our website also indicates whether a pharmacist is trained to administer injections.

A LOOK AHEAD AT 2017

Continuing the Implementation of Practice Assessments

Practice assessments continue for community pharmacies and individual pharmacists. To maximize the impact of the pharmacy assessments, the College will be adding additional resources to our website and practice tools. These resources will address the four domains of the new individual practice assessments: patient assessment, decision making, documentation, and communication/education.

Pharmacy 5in5

The College has committed \$400,000 in support of the University of Waterloo's School of Pharmacy's Pharmacy5in5 online education tool. The tool is designed to help pharmacists and pharmacy technicians develop their skills and acquire a deeper understanding of a variety of clinical and professional topics.

Pharmacy 5in5 includes short videos, infographics and flash cards and can be used on computers, tablets and smartphones. Users are able to test their knowledge on a topic by answering 5 questions in 5 minutes. When a gap is identified, they can quickly and easily use one or more of the learning resources to build their knowledge and identify topics that require deeper self-study. New modules will be added throughout 2017.

SPECIAL FEATURE:

CODE of ETHICS

In December 2015, College Council approved a new Code of Ethics for pharmacy professionals.

The Code is a comprehensive document that outlines the core ethical principles – Beneficence, Non Maleficence, Respect for Persons/Justice, and Accountability (Fidelity) – that dictate a healthcare professional's ethical duty to patients and society. The Code supports these principles with standards that indicate how a pharmacy professional is expected to fulfill their ethical responsibilities.

Although practice expectations in the new Code are unchanged, it was updated to more appropriately address current practice and clearly establish the standards of ethical conduct for pharmacy professionals.

ACCOUNTABLE TO THE CODE

All members of the College are required to make an annual declaration of commitment to the Code of Ethics, starting with renewal in 2017. By making this commitment, they have declared that they have read and understood the Code, and how they are accountable to it.

All pharmacists and pharmacy technicians must apply these ethical principles to inform their behaviour and conduct. Actions and decision-making in practice should reflect these principles and demonstrate commitment to serving and protecting patients and society.

BRINGING THE CODE OF ETHICS TO LIFE

In 2016, the College launched a series of e-Learning modules and video practice examples to assist current and future pharmacy professionals in understanding and applying the Code of Ethics in everyday practice.

CODE OF ETHICS

**Ontario College of Pharmacists**
Putting patients first since 1871

Declaration of Commitment

I commit to serve and protect my patients and society

In keeping this promise:

- I will put my patients first.
- I will "do good" and benefit my patients and society.
- I will "do no harm" and, whenever possible, prevent harm from occurring.
- I will protect my patients' vulnerability and respect their rights as autonomous persons.
- I will act as a responsible and accountable fiduciary of the public trust.
- I will act with integrity and will honour the ideals, values and commitments of my profession.
- I will faithfully abide by my profession's Code of Ethics.

I make this commitment as a healthcare professional to my patients, society, my profession and to myself.

E-LEARNING MODULES

e-Learning modules feature a variety of learning techniques including true and false questions, whiteboard video and case studies with reflective discussion. The modules are designed to provide pharmacy professionals with an overview of each principle of the Code. There are six e-Learning modules:

- An Introduction to the Code of Ethics
- Principle of Beneficence (to benefit)
- Principle of Non Maleficence (do no harm)
- Principle of Respect for Persons/Justice
- Principle of Accountability (Fidelity)
- Professional Boundaries



The Introduction to the Code of Ethics e-Learning Module explores the role and purpose of the Code of Ethics and provides an overview of the core ethical principles of healthcare that must guide everyday practice.

VIDEO PRACTICE EXAMPLES

The video practice examples provide pharmacy professionals with the opportunity to participate in an interactive learning tool that focuses on a specific ethical dilemma that may be encountered in practice. There are three video practice examples:

- Confidentiality
- Continuity of Care
- Applying Professional Judgment





The Continuity of Care video practice example provides a scenario where a pharmacist faces a dilemma regarding a patient who was recently discharged from hospital. The video offers four possible courses of action, with one of them being the most ethical choice.


ASSESSING **PHARMACIES**



The College assesses and accredits all community pharmacies and hospital pharmacies in Ontario. We check that all facilities are operating safely. Only those pharmacies that have been assessed and have met the accreditation criteria are authorized to operate in the province. We routinely visit these facilities to assess compliance with established standards and legislation.



BY THE NUMBERS


4,150 accredited community pharmacies
 An increase of **3%** since 2015


81% of community pharmacies received a pass (no action plan required) on their first assessment



226 accredited hospital pharmacies

59 routine hospital pharmacy assessments performed*

2,350 community pharmacy assessments performed
 **36% increase** since 2015


1,063 community pharmacies provided methadone maintenance treatment in 2016


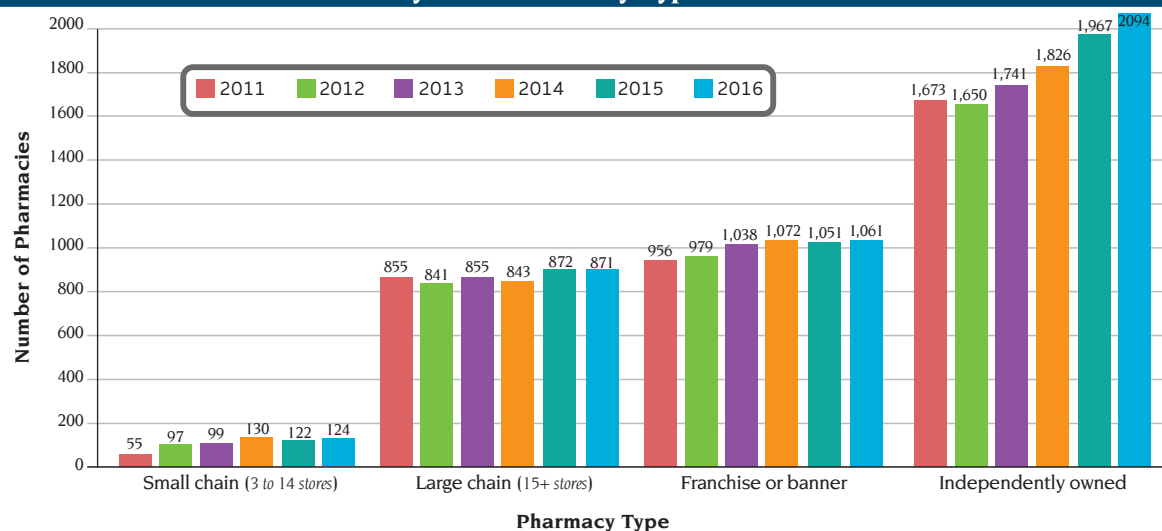
435 community pharmacies provided compounding services in 2016

138 hospital pharmacies provided high risk services (e.g. chemotherapy, sterile compounding)


*Since August 1, 2016, when the College gained the authority to accredit and assess hospital pharmacies

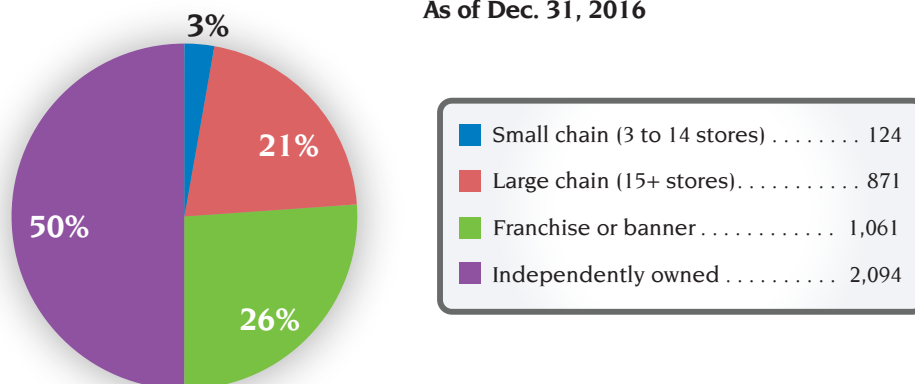
In 2016, 50% of Ontario's 4,150 community pharmacies were independently owned. This is one percent higher than in 2015. The number of community pharmacies has grown at a fairly steady rate since 2012 – with the growth most pronounced among independently owned pharmacies

Community Pharmacies by Type — Trends



Community Pharmacies by Type — Snapshot

As of Dec. 31, 2016



N= 4,150

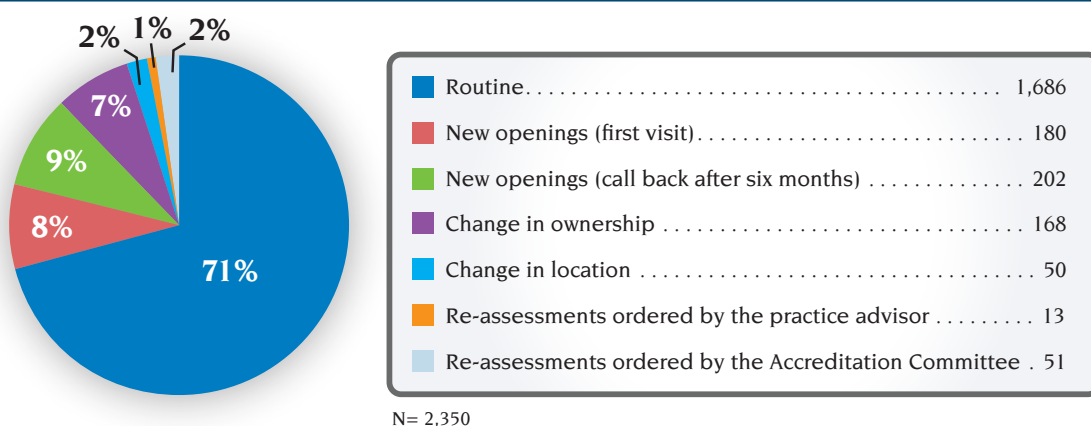
ASSESSING PHARMACIES

Community Pharmacy Assessments

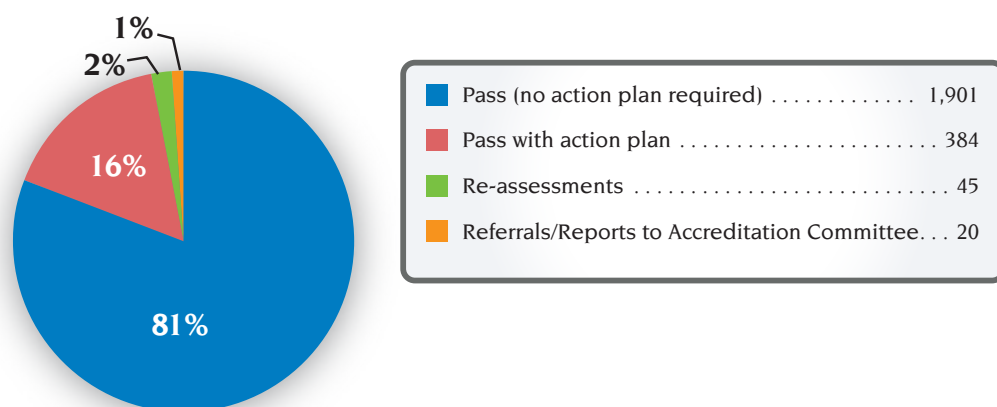
When a community practice advisor visits a pharmacy to perform an assessment, they check that the pharmacy is operating safely and is meeting all relevant legislation and standards of operation. This is one of the ways that we protect the public.

Specific criteria and resources related to the practice assessments are available in the [Practice Assessments Key Initiative](#) on the College's website.

Types of Community Pharmacy Assessments in 2016



Community Pharmacy Assessment Outcomes in 2016



The **Accreditation** Committee – As of Dec. 31, 2016

The Accreditation Committee considers matters related to the operation of community and hospital 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 practice advisors where the pharmacy has failed to comply with the requirements.

ELECTED PRACTITIONERS:

- Tracey Phillips (Chair)
- Billy Cheung
- Michelle Filo
- James Morrison

APPOINTED PUBLIC MEMBERS:

- John Laframboise
- Joy Sommerfreund

NON-COUNCIL COMMITTEE MEMBERS::

- Lavinia Adam
- Tracy Wiersema

STAFF RESOURCE:

- Tina Perlman



DRUG PREPARATION PREMISES

The College received the authority in 2013 to oversee drug preparation premises (DPPs) where pharmacists and pharmacy technicians engage in or supervise drug preparation activities. DPPs do not include:

- A pharmacy in respect of which a valid certificate of accreditation has been issued under the Drug and Pharmacies Regulation Act;
- A premises in respect of which a valid establishment licence has been issued under the Food and Drugs Act (Canada); or
- A hospital or a health custodial institution approved or licenced under any general or special Act.

Drug preparation activities means reconstituting or otherwise preparing a drug or combining, admixing or mixing together two or more substances, at least one of which is a drug, to create a final product for the purposes of the sale or provision to another person, other than pursuant to or in anticipation of a prescription.

DPPs are not open to the public; however, the College assesses these facilities annually.

As of Dec. 31, 2016, there were five 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 – As of Dec. 31, 2016

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

ELECTED PRACTITIONERS:

- Tracey Phillips (Chair)
- Billy Cheung
- Michelle Filo
- James Morrison

APPOINTED PUBLIC MEMBERS:

- John Laframboise
- Joy Sommerfreund

NON-COUNCIL COMMITTEE MEMBERS::

- Lavinia Adam
- Tracy Wiersema

STAFF RESOURCE:

- Judy Chong



INTERN
DANTY

HOSPITAL ASSESSMENTS

New regulations to the Drug and Pharmacies Regulation Act (DPRA) were proclaimed and came into effect as of August 1, 2016. The College now has the authority to accredit and assess hospital pharmacies. Expectations of practice for pharmacy professionals are unchanged in the new regulations.

Ontario hospital pharmacies, having successfully completed a baseline assessment by the College in 2015 and 2016, were issued a certificate of accreditation when the regulations came into effect, which must be renewed on an annual basis.

Eventually, hospital pharmacy assessments will incorporate an assessment of the individual practitioner working in the pharmacy, similar to the new community pharmacies practice assessment program currently being phased in.

Accredited Hospital Pharmacies by Local Health Integration Network

Erie St Clair	8
South West	31
Waterloo Wellington	10
Hamilton Niagara Haldimand Brant	21
Central West	3
Mississauga Halton	6
Toronto Central	26
Central	10
Central East	16
South East	14
Champlain	24
North Simcoe Muskoka	8
North East	33
North West	16

INVESTIGATING AND RESOLVING CONCERNS



INVESTIGATING AND RESOLVING CONCERNS

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


Any member of the public who is dissatisfied with the care or services provided by a pharmacy professional or pharmacy may file a formal complaint or report the information to the College. We investigate and resolve every complaint we receive.


There are other ways we might be informed about a potential issue with a pharmacy professional or pharmacy. For example, employers, facility owners or

other regulated health professionals have a mandatory obligation to report certain concerns, including information about sexual abuse of a patient, misconduct, incapacity, or incompetence.


Additionally, pharmacy professionals are required to inform the College if they have been charged with or found guilty of an offense, or are the subject of a proceeding in Ontario or any other jurisdiction within Canada. Regardless of how information comes to the College, the seriousness of the allegations are assessed in relation to the potential for harm to the public and appropriate action is taken to address them in the interest of serving and protecting the public.

BY THE NUMBERS

276 complaints opened in 2016
 **4% increase** since 2015

94 reports opened in 2016
 **7% increase** since 2015




12 complaints resolved through the alternative dispute resolution process in 2016 

63 pharmacy professionals required to complete a specified continuing education or remediation program (SCERP) in 2016

38% of complaints dealt with in 2016 were related to dispensing issues

15% of reports dealt with in 2016 were related to billing issues

41 pharmacy professionals had allegations of professional misconduct referred to the Discipline Committee in 2016 

54 pharmacy professionals issued an oral caution in 2016

The **Inquiries, Complaints and Reports (ICRC) Committee** – As of Dec. 31, 2016

The Inquiries, Complaints and Reports Committee (ICRC) directs all investigations into a pharmacy professional's conduct, competence and capacity, including Registrar's investigations arising from a report to the College, and health inquiries. Meeting as panels, the ICRC reviews the investigation materials and submissions from all parties, and decides how to dispose of the investigation.

ELECTED PRACTITIONERS:

- Laura Weyland (Chair)
- Billy Cheung
- Gerry Cook
- Christine Donaldson
- Michelle Filo
- Chris Leung
- Jon MacDonald
- James Morrison
- Sony Poulouse
- Goran Petrovic

APPOINTED PUBLIC MEMBERS:

- Kathy Al-Zand
- Linda Bracken
- Carol Cushnie
- Naj Hassam
- Javaid Khan
- John Laframboise
- James MacLaggan
- Sylvia Moustacalis
- Shahid Rashdi
- Joy Sommerfreund
- Ravil Veli
- Wes Vickers

NON-COUNCIL COMMITTEE MEMBERS::

- Elaine Akers
- Kalyna Bezchlibnyk-Butler
- Andrea Fernandes
- Sherif Guorgui
- Frank Hack
- Bonnie Hauser
- Mary Joy
- Elizabeth Kozyra
- Curtis Latimer
- Dean Miller
- Akhil Pandit Pautra
- Kelly Pogue
- Saheed Rashid
- Satinder Sanghera
- Richard Sigismund
- Dan Stringer
- Asif Tashfin
- Tracy Wiersema
- Debra Willcox

STAFF RESOURCE:

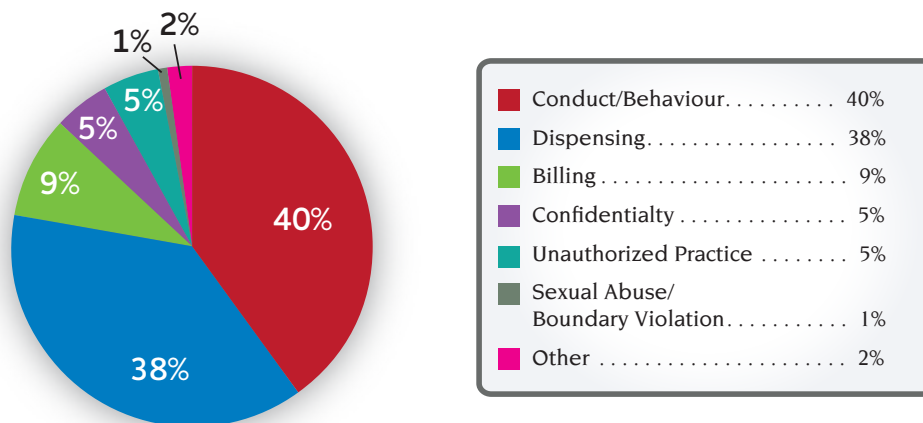
- Maryan Gemus

INVESTIGATING AND RESOLVING CONCERNS

Complaints

This graph shows the breakdown of issues for the complaints reviewed by the Inquiries, Complaints and Reports Committee (ICRC) in 2016. Forty percent of the complaints reviewed in 2016 were related to conduct/behaviour (including communicating with patients and inter-professional relationships), while 38% were related to dispensing issues.

Complaint Issues

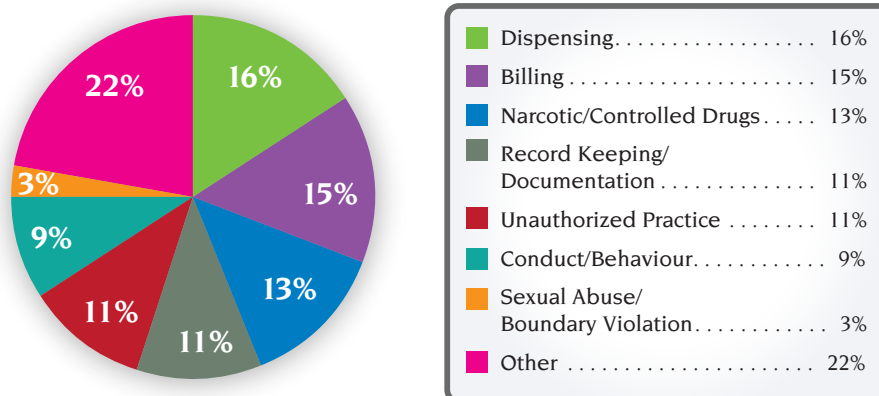


The ICRC reviewed 326 unique complaint files in 2016. Some complaints fall under multiple categories.

Reports

This graph shows the breakdown of the issues for the reports reviewed by the ICRC in 2016. Sixteen percent of the reports were related to dispensing, with other top issues being billing, narcotics/controlled drugs, and documentation. The “other” category includes failing to fulfill a College requirement, charges or findings of guilt, and confidentiality.

Report Issues

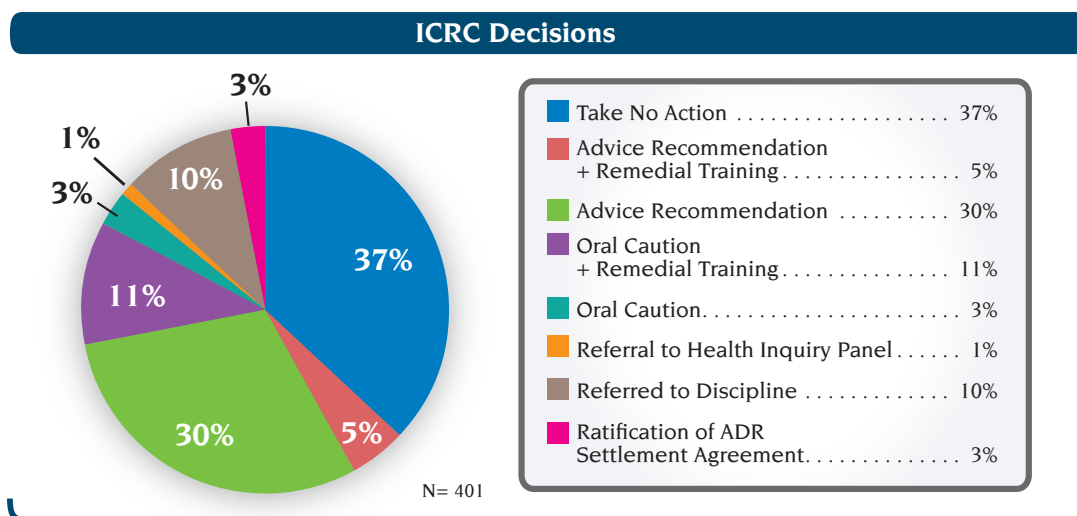


The ICRC reviewed 170 unique report files in 2016. Some reports fall under multiple categories.

Inquiries, Complaints and Reports Committee (ICRC) Decisions

The ICRC strives to be consistent, transparent, and objective in its decisions. The Committee uses a Risk Assessment Tool to guide the decision making process.

The ICRC has a number of options when deciding on the outcome of a complaint or report. It can refer allegations of professional misconduct against a pharmacy professional to the Discipline Committee; refer a pharmacy professional to the Fitness to Practise Committee; require a pharmacy professional to complete remedial training (also known as specified continuing education or remediation program (SCERPs)); issue an oral caution; provide advice/recommendations; or take no action. Occasionally, in appropriate circumstances, a pharmacy professional may voluntarily enter into an agreement or undertaking to the College, such as agreeing to limit their scope of practice.



Where the ICRC requires a pharmacy professional to receive an oral caution and/or SCERP, a summary of the ICRC's decision and reasons is posted on the College's public register for all complaints or reports filed after April 1, 2015. Additionally, when allegations of misconduct are referred to the Discipline Committee, or a pharmacy professional is referred to the Fitness to Practise Committee, a notation of the referral is posted on the public register.

Health Professions Appeal and Review Board

The Health Professions Appeal and Review Board (HPARB) is an independent adjudicative tribunal that, upon receiving an application from a party to a complaint, reviews the ICRC's decisions. In 2016, there were:

- 16 new requests for review
 - 7 requests by a pharmacy professional
 - 9 requests by a complainant
- 13 reviews pending (from 2016 and previous years)
- 29 decisions received
 - 17 decisions upheld
 - 3 referred back to ICRC
 - 7 withdrawn
 - 2 appeals denied

A LOOK BACK AT 2016

Alternative Dispute Resolution (ADR)

The College continued to develop its ADR program this year and increased the educational resources available to the public on its website. The materials include more robust written information about the ADR process and an ADR video. Not all complaints meet the criteria for ADR. The process is limited to complaints which do not involve allegations of dishonesty or serious ethical breaches and boundary violations.

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 pharmacy professionals 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 pharmacy professional will continue to have contact after the complaint has been resolved.

This year, 12 complaints were resolved through ADR.

How to File a Complaint

In 2016, the College created a video to help patients and members of the public understand the complaints process. It walks viewers through the College's role, the complaints process and the information that is needed for a patient to file a complaint. It also discusses the role of the ICRC and the possible outcomes of the complaint



DISCIPLINE



DISCIPLINE

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 allegations of professional and/or proprietary misconduct are 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 against a pharmacy professional to the Discipline Committee if it has concerns that the pharmacy professional's conduct was dishonest, breached trust, placed the public at risk of harm, showed a willful disregard for professional values, and/or fell below the Standards of Practice.

[Accreditation Committee](#)

The Accreditation Committee may refer allegations of proprietary misconduct against a pharmacy, including the Designated Manager, Director, or the corporation operating the pharmacy to the Discipline Committee if the pharmacy has failed to meet the Standards of Accreditation.

BY THE NUMBERS

23 discipline hearings held in 2016
 **10 less** than in 2015



33 discipline hearing days in 2016

65% of findings related to failure to meet the Standards of Practice

41 pharmacy professionals referred to the Discipline Committee

The **Discipline Committee** Committee – As of Dec. 31, 2016

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 or suspend a pharmacy professional's Certificate of Registration, issue a reprimand, require the payment of a fine, or impose terms or restrictions on a pharmacy professional's Certificate of Registration or a pharmacy's Certificate of Accreditation.

ELECTED PRACTITIONERS:

- Doug Stewart (Chair)
- Gerry Cook
- Christine Donaldson
- Fayez Kosa
- Chris Leung
- Jon MacDonald
- Esmail Merani
- Don Organ
- Sony Poulose
- Goran Petrovic
- Karen Riley
- Regis Vaillancourt

APPOINTED PUBLIC MEMBERS:

- Kathy Al-Zand
- Linda Bracken
- Carol Cushnie
- Naj Hassam
- Javaid Khan
- James MacLaggan
- Sylvia Moustacalis
- Shahid Rashdi
- Ravil Veli
- Wes Vickers

PHARMACY SCHOOLS:

- Heather Boon
- Dave Edwards

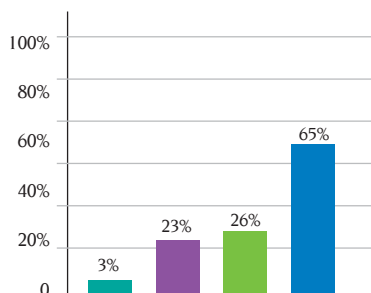
NON-COUNCIL COMMITTEE MEMBERS::

- Chris Aljawhiri
- Jennifer Antunes
- Ramy Banoub
- Jocelyn Cane
- Charles Chan
- Fel dePadua
- Dina Dichek
- Debbie Fung
- Jim Gay
- Jillian Grocholsky
- Sherif Guorgui
- Andrew Hanna
- Rachel Koehler
- Andreea Laschuk
- Jaime McDonald
- Cara Millson
- Akhil Pandit Pautra
- Chintan Patel
- Kelly Pogue
- Mark Scanlon
- Jeannette Schindler
- Connie Sellors
- David Windross

STAFF RESOURCE:

- Maryan Gemus

Discipline Committee Findings



The Discipline Committee held 23 hearings in 2016.

Findings were made with respect to 31 members including cases that were outstanding from 2015.

Six hearings will continue into 2017

Note that this does not add up to 100% as some findings have overlapping categories.

Discipline Case Summaries List

List of discipline case summaries for 2016. Case summaries can be accessed in [Appendix A](#).

- Ghobrial, Gina
- Chitnis, Sunil
- Viravong, Vanthany
- Jain, Dilip
- Matsumoto-O'Brien, Anne
- Agudoawu, Sammy
- Ramzy, Nashat
- Yung, Daniel
- Ramsammy, Joshua
- Mukherjee, Khallol
- Attalla, Said
- Bebawey, Ashraf
- Patel, Shamik
- Yacoub, Mona
- Abd el Maseh, Joseph
- Henderson, Eric
- Fabello, Martha
- Abanzukwe, Joy/Bathurst-Dundas Pharmacy
- Brown, Robert
- Szeto, Herman
- Awad, Robert
- Wasef, Ayman

A notation and summary of the discipline finding is available on the pharmacy professional's profile on the Find a Pharmacy or Pharmacy Professional tool on the College's website. Once complete, the full written decision for each hearing is available on www.canlii.org.

Compliance Monitoring

The College monitors pharmacy professionals who are required to fulfill orders imposed by the Discipline Committee, and pharmacy professionals who are directed by the ICRC to complete a specified continuing education and remedial program (SCERP) or who voluntarily entered into an undertaking to the College.

The following number of pharmacy professionals were monitored during the 2016 calendar year:

- 30 monitored while fulfilling orders from the Discipline Committee
- 114 monitored while fulfilling remedial training (also known as a SCERP)

HEALTH **INQUIRIES**



Health Inquiries and Fitness to Practise

When the College becomes aware that a pharmacy professional may be incapacitated, health inquiries are initiated. A pharmacy professional is incapacitated when he or she is currently suffering from a substance use disorder or a mental or psychiatric disorder, which requires that restrictions be placed on their practice or that they must be removed from practice. The College often receives information about a pharmacy professional through a mandatory report from an employer or facility operator, or from a self-report by the practitioner.

Health inquiries are limited to obtaining information about a pharmacy professional's current health; the focus is not on their competence or practice. The results of health inquiries are compiled into a report and reviewed by a health inquiry panel (HIP) of the ICRC. The HIP may ask for more information or might ask the pharmacy professional to undergo an independent medical examination if it believes a practitioner is incapacitated.

The HIP may refer the pharmacy professional to the Fitness to Practise Committee. This Committee can make a finding of incapacity. This could include holding a formal hearing or requiring the pharmacy professional to enter into a monitoring program, such as the program offered through the Ontario Pharmacy Support Program (OPSP) administered by the Centre for Addiction and Mental Health (CAMH), which offers intervention, assessment and monitoring.

The Ontario Pharmacy Support Program

The [Ontario Pharmacy Support Program](#) (OPSP) is a confidential assistance program that supports members of the College (pharmacists, pharmacy technicians, and pharmacy students/interns) who are experiencing work/life stress, concerns about their mental health, or substance use problems.

The OPSP is provided through the Centre for Addiction and Mental Health (CAMH), and offers education, assessment, monitoring and/or referral to appropriate community services. Members of the College can access the service directly and anonymously at any time.

Health Inquiry Statistics

There were 23 active health inquiries overseen by a health inquiry panel of the ICRC. Of those, 20 pharmacy professionals continue to be investigated. Three pharmacy professionals are no longer being investigated because they are no longer practicing pharmacy. Of the 23 inquiries, 15 were initiated in 2016. There was one referral to the Fitness to Practise Committee.

Fitness to Practise Statistics

There were no findings of incapacity in 2016.

Health Monitoring

The College monitors pharmacy professionals who are required to fulfill orders imposed by the Fitness to Practise. In 2016, the College monitored six pharmacy professionals.

STATUTORY COMMITTEE

The **Fitness to Practise** Committee – *As of Dec. 31, 2016*

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

ELECTED PRACTITIONERS:

- James Morrison
- Goran Petrovic

APPOINTED PUBLIC MEMBERS:

- Kathy Al-Zand (Chair)
- Carol Cushnie

NON-COUNCIL COMMITTEE MEMBERS:

- Jocelyn Cane
- Mark Scanlon

STAFF RESOURCE:

- Maryan Gemus

OCP'S COMMUNICATIONS CHANNELS – FACTS & FIGURES



E-CONNECT

32 issues



sent to over 22,000
pharmacists,
pharmacy
technicians, and
other stakeholders

70%



of pharmacy professionals who receive
e-Connect say that it's extremely or
very useful in educating them about
professional requirements and important
regulatory information



Top topics in 2016:

Vaccinations, Code of Ethics, Medical Assistance
in Dying, Patch for Patch and more!



PHARMACY CONNECTION

**224
total pages**



of helpful articles and information
affecting pharmacy practice in Ontario



80%

of pharmacy professionals say that
Pharmacy Connection provides information
that helps enhance their practice


Over 9,000 visitors

to the [Pharmacy Connection page](#)
on our website





SOCIAL MEDIA

 **1,757,755**
total views to our content

2,952 
new followers/subscribers



An average of three tweets per day, four Facebook posts per week, and four LinkedIn updates per week



25,343
visitors to our website directly from social media

Tip: Social media is the best way to stay up-to-date with the College on a daily or weekly basis.



VIDEOS



7 new videos

for pharmacy professionals and the public with a total of

7,604 views 
of those videos and

109,085 total YouTube video views to-date

Videos include "Decision Making & Documentation," "Motivating Patients to Promote Adherence," "How to File a Complaint," and more.



WEBSITE



354,574
total website visitors

68
news stories



3
open consultations



Access to practice tools, continuing education listings, all issues of our publications, helpful videos, e-Learning modules and more! Patients can learn about how to file a complaint, find a pharmacy or pharmacy professional and access helpful patient resources.

REMAINING **FISCALLY** RESPONSIBLE



The **Finance & Audit** Committee – *As of Dec. 31, 2016*

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.

ELECTED PRACTITIONERS:

- Gerry Cook
- Esmail Merani
- Doug Stewart

APPOINTED PUBLIC MEMBERS:

- Javaid Khan (Chair)
- Linda Bracken

STAFF RESOURCE:

- Connie Campbell

2016 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, 2016 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, 2016. We expressed an unmodified audit opinion on those financial statements in our report dated March 20, 2017.

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, 2016 are a fair summary of those financial statements, in accordance with Canadian accounting standards for not-for-profit organizations.

Toronto, Ontario
March 20, 2017

Clarke Derming LLP
CHARTERED ACCOUNTANTS
Licensed Public Accountants

SUMMARY BALANCE SHEET

AS AT DECEMBER 31, 2016

	2016	2015
ASSETS		
Current assets		
Cash and short term investments	\$ 1,752,197	\$ 500,614
Accounts receivable and cost recoveries	206,892	163,871
Prepaid expenses	312,764	115,487
	2,271,853	779,972
Long-term investments	7,731,305	8,242,634
Property and equipment	4,149,710	4,333,685
	14,152,868	13,356,291
LIABILITIES		
Current liabilities		
Accounts payable and accrued liabilities	1,204,528	1,515,775
Deferred revenue	61,550	59,887
	1,266,078	1,575,662
NET ASSETS		
Net assets invested in property and equipment	4,149,710	4,333,685
Internally restricted		
Investigations and hearings reserve fund	2,280,000	2,000,000
Contingency reserve fund	4,670,000	4,250,000
Fee stabilization fund	1,530,000	875,000
Unrestricted	257,080	321,994
	12,886,790	11,780,629
	\$ 14,152,868	\$ 13,356,291

SUMMARY STATEMENT OF OPERATIONS AND NET ASSETS

YEAR ENDED DECEMBER 31, 2016

	2016	2015
Revenues		
Member fees - Pharmacists	\$ 9,175,702	\$ 8,825,392
Member fees - Pharmacy Technicians	1,713,306	1,501,194
Community Pharmacy fees	4,417,290	3,856,597
Hospital Pharmacy fees	908,000	—
Registration fees and income	792,555	1,603,841
Investment and other income	245,374	246,042
	17,252,227	16,033,066
Expenses		
Council and committees	2,138,929	2,563,076
Administration	13,530,066	13,340,636
Property	125,841	137,703
	15,794,836	16,041,415
Excess of revenues over expenses from operations for the year before depreciation	1,457,391	(8,349)
Depreciation	351,230	365,708
Excess of revenues over expenses for the year	1,106,161	(374,057)
Net assets - at beginning of year	11,780,629	12,154,686
Net assets - at end of year	\$ 12,886,790	\$ 11,780,629





Ontario College of Pharmacists

Putting patients first since 1871

483 Huron Street
Toronto, ON
M5R 2R4

T 416-962-4861
1-800-220-1921
F 416-847-8200

www.ocpinfo.com