

ONTARIO COLLEGE OF PHARMACISTS

COUNCIL MEETING AGENDA

MONDAY, MARCH 23, 2020 – 9:00 A.M.

Dial-in Number 416-962-4861 x 8000

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***Please note this agenda has been streamlined given the remote format and all standard meeting components such as the land acknowledgement and patient story will resume for future meetings.**

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- 2. Declaration of Conflict**
- 3. Approval of Agenda**
- 4. Approval of Minutes of Previous Meeting**
 - 4.1 Minutes of November 2019 Council MeetingAppendix 4.1
 - 4.2 Minutes of December 2019 Council MeetingAppendix 4.2
- 5. For Decision**
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 - 5.2 Briefing Note – Registrar – Scope of Practice Minor Ailments..... Appendix 5.2
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 - 5.4 Briefing Note – Finance and Audit Committee – 2019 Financial Audit..... Appendix 5.3
 - 5.5 Briefing Note – Executive Committee – Bylaw No.6 Appendix 5.4
 - By-law Consultation Feedback
 - Ratification of By-Law No. 6
 - Approval of Remuneration Resolution – March to September 2020
 - 5.6 Briefing Note – Executive Committee – Remuneration and Expenses Policy Appendix 5.5
 - 5.7 Briefing Note – Executive Committee – Appointment of the Governance and Screening Committees Appendix 5.6
- 6. For Information**
 - 6.1 Briefing Note – Community Pharmacy Practice Environment Initiative Appendix 6.1
 - 6.2 Briefing Note – President’s Report to March 2020 Council Appendix 6.2
 - 6.3 Briefing Note – Registrar’s Report to March 2020 Council Appendix 6.3
- 7. Motion of Adjournment**



**Ontario College
of Pharmacists**

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MINUTES OF MEETING

OF COUNCIL

NOVEMBER 21, 2019

DRAFT

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THURSDAY, NOVEMBER 21, 2019 – 9:00 A.M.

COUNCIL CHAMBERS, ONTARIO COLLEGE OF PHARMACISTS

Elected Members

District H Dr. Régis Vaillancourt, Ottawa
District H Ms. Nadia Facca, London (attended via teleconference)
District K Mr. Mark Scanlon, Peterborough
District K Ms. Tracey Phillips, Westport
District L Mr. Billy Cheung, Markham
District L Mr. James Morrison, Burlington
District L Mr. Siva Sivapalan, Burlington
District M Mr. Mike Hannalah, Toronto (attended via teleconference)
District M Mr. Kyro Maseh, Toronto (attended via teleconference)
District M Ms. Laura Weyland, Toronto
District N Mr. Tom Kontio, London (attended via teleconference)
District N Ms. Leigh Smith, Cambridge
District N Dr. Karen Riley, Sarnia
District P Ms. Rachelle Rocha, Sudbury (attended via teleconference)
District T Ms. Connie Beck, Petrolia
District TH Mr. Goran Petrovic, Kitchener – **Regrets**

Dr. Lisa Dolovich, Interim Dean, Leslie Dan Faculty of Pharmacy,
University of Toronto (attended via teleconference)

Dr. David Edwards, Hallman Director, School of Pharmacy,
University of Waterloo - **Regrets**

Members Appointed by the Lieutenant-Governor-in-Council

Ms. Kathleen Al-Zand, Ottawa – **Regrets**
Mr. David Breukelman, Burlington (attended via teleconference)
Ms. Christine Henderson, Toronto (attended via teleconference)
Mr. Azeem Khan, Pickering (attended via teleconference)
Ms. Elnora Magboo, Brampton (attended via teleconference)
Ms. Sylvia Moustacalis, Toronto
Ms. Tammy Cotie, Brockville (attended via teleconference)
Mr. Dan Stapleton, Toronto (attended via teleconference)
Mr. Gene Szabo, Kanata (attended via teleconference)

Staff present

Ms. Nancy Lum-Wilson, CEO/Registrar
Ms. Anne Resnick, Deputy Registrar/Director, Conduct
Ms. Connie Campbell, Director, Corporate Services
Ms. Susan James, Director, Quality
Ms. Sarah MacDougall, Council & Committee Liaison
Ms. Stephenie Summerhill, Executive Assistant to the C.E.O. and Registrar

1. Noting Members Present

Member attendance was noted for those in attendance and via roll call for those participating via teleconference.

2. Declaration of Conflict

There were no conflicts declared.

3. Approval of Agenda

A motion to approve the Agenda was moved and seconded. The motion CARRIED.

4. For Decision

4.1 Briefing Note – Approval to submit *General Regulation 202/94 of the Pharmacy Act with amendments to Part VII.3 (controlled acts) to expand scope of practice.*

President Weyland welcomed everyone to the special Council meeting and expressed her gratitude for the members making themselves available for this meeting. Ms. Weyland reviewed the process to be used for the meeting to ensure those calling in would have the opportunity to ask questions and participate in the discussion.

Ms. Nancy Lum-Wilson, CEO and Registrar, provided a brief introduction on the topic outlined in the briefing note sent to Council. Ms. Lum-Wilson explained that in a letter received on May 30, 2019 the Minister of Health asked the College to submit regulations to enable an expanded scope of practice for pharmacists.

The letter from the Minister of Health requested that the College make regulations that would enable pharmacists to:

1. Administer the flu vaccine to children as young as two years old;
2. Renew prescriptions in quantities of up to a 12-month supply;
3. Administer certain substances by injection and/or inhalation for purposes that are in addition to patient education and demonstration; and
4. Prescribe drugs for certain minor ailments.

The Minister asked for the first three items to be submitted by November 30, 2019 and the regulatory amendments to enable minor ailments prescribing to be submitted by June 30, 2020.

Ms. Susan James, Director of Quality, provided a summary of the work to date and explained that the public consultation on the proposed regulatory changes for the first submission to government opened August 26, 2019 and closed October 26, 2019. The College website, publications as well as social media channels were used to actively promote the consultation and the resulting engagement was high in comparison to past public consultations. The College received 201 comments through the online consultation which included feedback received from six associations, including the Ontario Pharmacist Association (OPA), the Ontario Medical Association and the Ontario Nurses Association, among others. The ability to reply to comments posted on the website resulted in multiple (44) responses posted by a few individuals, with the potential of skewing the consultation feedback and therefore, the College intends to turn off this feature in future consultations. During the 60 day consultation the proposed changes were

also considered as part of a series of online and in-person public focus groups facilitated by an independent third party to gain further input from pharmacy patients. The College also continued to work closely with the Ministry of Health to address policy considerations needed to support these changes to scope while ensuring that patient safety and quality care is not compromised.

The feedback identified three key themes:

- Staffing, workload and environment pressures;
- Access to lab test results and health records; and
- Collaboration with primary care professionals.

Ms. James provided a high level response to the common themes as listed in the briefing note and highlighted the changes that were made to the regulations as a result of the consultation and administrative review.

In response to a question, Ms. James confirmed that the Laboratory and Specimen Collection Centre Licensing Act currently prevents the administration of point of care tests in pharmacies.. Specimen collection is therefore not permitted until that Act is changed to permit pharmacists and technicians to collect the specimens needed for these tests.

Members of Council discussed the suitability and procedure for providing the flu vaccine to children between the ages of two and five years of age by a pharmacist. Council was satisfied that the process for administration of the flu shots for children at this age would not vary from the guidelines recommended for children aged five and above. Council was in support of voluntary education programs that would equip pharmacists with techniques and strategies for the administration of flu vaccinations to this younger age group. Council was informed that the proposed regulatory changes for the flu vaccination will not apply to other vaccines for children between the ages of two and five.

Council discussed the workload and environment concerns brought forward in the consultation. Ms. James and Ms. Lum-Wilson provided additional information on this issue and the actions that the College has taken to date to engage with corporate pharmacy leaders and professional organizations to address these concerns. The College will continue to gather more information regarding the impact of work flow on practice to ensure the proposed scope changes are implemented with patient safety as a priority. Council asked to continue to be informed of the work of the College to further understand and collaborate with industry partners to address work flow and patient safety.

Council members were in support of the changes and commended the College and the Ministry in enabling the profession to optimize their knowledge and experience and take on a greater role to improve health outcomes for patients.

Following discussion, the **motion** that Council approve the following:

1. A voluntary education approach to enable administering of flu vaccinations for children aged two to five years old;
2. Replacement of the existing drug lists with drug categories referenced in the American Hospital Formulary Service to identify the authorized substances that can be administered by injection and or inhalation; and
3. The proposed amendments to Regulation 202/94 (as attached in Appendix 1) for submission to the Ministry of Health, was called to a vote.

Council members voted unanimously in favour of the motion. **The motion CARRIED.**

14. Motion of Adjournment

There being no further business, **at 10:32 a.m., a motion to adjourn the meeting was moved and seconded. The motion CARRIED.**

**Sarah MacDougall
Council & Committee Liaison**

**Laura Weyland
President**



**Ontario College
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MINUTES OF MEETING

OF COUNCIL

DECEMBER 9, 2019

DRAFT

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MONDAY, DECEMBER 9, 2019 – 9:00 A.M.
COUNCIL CHAMBERS, ONTARIO COLLEGE OF PHARMACISTS

Elected Members

District H Dr. Régis Vaillancourt, Ottawa
District H Ms. Nadia Facca, London
District K Mr. Mark Scanlon, Peterborough
District K Ms. Tracey Phillips, Westport
District L Mr. Billy Cheung, Markham
District L Mr. James Morrison, Burlington
District L Mr. Siva Sivapalan, Burlington
District M Mr. Mike Hannalah, Toronto
District M Mr. Kyro Maseh, Toronto
District M Ms. Laura Weyland, Toronto
District N Mr. Tom Kontio, London
District N Ms. Leigh Smith, Cambridge
District N Dr. Karen Riley, Sarnia
District P Ms. Rachelle Rocha, Sudbury
District P Mr. Douglas Stewart, Sudbury
District T Ms. Connie Beck, Petrolia
District TH Mr. Goran Petrovic, Kitchener – **Regrets**

Dr. Lisa Dolovich, Interim Dean, Leslie Dan Faculty of Pharmacy, University of Toronto
– via teleconference

Dr. David Edwards, Hallman Director, School of Pharmacy, University of Waterloo

Members Appointed by the Lieutenant-Governor-in-Council

Ms. Kathleen Al-Zand, Ottawa – **Regrets**
Mr. David Breukelman, Burlington – via teleconference
Ms. Christine Henderson, Toronto
Mr. Azeem Khan, Pickering
Ms. Elnora Magboo, Brampton
Ms. Sylvia Moustacalis, Toronto
Ms. Joy Sommerfreund, London
Mr. Dan Stapleton, Toronto
Mr. Gene Szabo, Kanata

Staff present

Ms. Nancy Lum-Wilson, CEO/Registrar
Ms. Anne Resnick, Deputy Registrar/Director, Conduct
Ms. Connie Campbell, Director, Corporate Services
Ms. Susan James, Director, Quality
Ms. Sarah MacDougall, Council & Committee Liaison
Ms. Stephenie Summerhill, Executive Assistant to the CEO/Registrar

Invited Guests

Angela Bates, Incoming Director of Conduct

1. Land Acknowledgement

President Weyland conducted the College's first land acknowledgement as part of the College's Indigenous Cultural Competency Initiative which is guided by the Truth and Reconciliation Commission's Calls to Action. Council acknowledged that the land the meeting is being held on is the traditional territory of many nations including the Mississaugas of the Credit, the Anishinabeg, the Chippewa, the Haudenosaunee, the Wendat peoples and is now home to many diverse First Nations, Inuit and Métis peoples. It was also acknowledged that Toronto is covered by Treaty 13 with the Mississaugas of the Credit.

2. Noting Members Present

Member attendance was noted.

3. Declaration of Conflict

There were no conflicts declared.

4. Approval of Agenda

A motion to approve the Agenda was moved and seconded. The motion CARRIED.

5. President's Opening Remarks

President Weyland welcomed members to the meeting and took the opportunity to acknowledge Ms. Anne Resnick and her significant contribution to the profession of pharmacy. This was Ms. Resnick's final Council meeting as Deputy Registrar and Director of Conduct prior to her retirement in January 2020. Ms. Resnick addressed Council and expressed her gratitude for her time with the College. She began as an elected member of Council in 1985 and has been a staff member for the last fifteen years.

Ms. Weyland then welcomed Ms. Angela Bates the incoming Director of Conduct. Ms. Bates provided Council with information on her background and expressed her excitement to begin working at the College in the New Year.

Council was informed of the addition of Non-Council Committee members Chintan Patel and Nadia Filippetto to the Accreditation and Drug Preparation Premises Committees. These additional members were added so that the committees could operate in panels of four.

Ms. Weyland then drew Council's attention to the addition of a paragraph to the briefing notes coming forward to Council in which the staff and/or committees are asked to provide a "public interest rationale" to the matter coming forward. This was added as part of the College's established strategic priorities to strengthen trust and confidence in the College's role and value as a patients-first regulator. The rationale is used to highlight how the initiative coming forward speaks to (or furthers) the mandate of the College to protect and serve the public of Ontario.

5.1 Reflections from a Patient

Council was shown a video of Sherry Davis, a patient with multiple sclerosis who contacted the College to share her positive experiences with Stan D'Sousa, the designated manager at her local pharmacy, Drugstore Pharmacy, in Barrie, Ontario.

5.2 Briefing Note – President's Report to December 2019 Council

Ms. Weyland referred to her report, which contains a summary of her activities since the previous Council meeting. These included attending various committee meetings at the College as well as meetings with the Registrar and the Vice President.

In response to the feedback from the September Council meeting, Ms. Weyland provided a high-level review of the meeting proceedings and emphasized that in fulfilling their fiduciary duties the members should ensure that the agenda items are considered by the Council and decisions are actively debated with the merit of the proposed motion thoroughly considered prior to voting.

The briefing note was received for information by Council.

6. Approval of Minutes of Previous Meeting

6.1 Minutes of September 2019 Council Meeting

It was moved and seconded that the Minutes of the September 2019 Council meeting be approved. The motion CARRIED.

7. Notice of Motions Intended to be Introduced

There were none.

8. Motions, Notice of Which Had Previously Been Given

There were none.

9. Inquiries

There were none.

10. Matters Arising from Previous Meetings

There were none.

11. For Decision

11.1 Briefing Note – Executive Committee – Governance Draft By-Law No. 6

President Weyland provided an introduction to the draft by-laws coming forward to Council. She praised the progressive changes that have been incorporated and the courage of the Council to proactively evolve the oversight structure. She noted that the College can and will respond to the changing landscape of regulation and act in the best interest of the public that it serves.

Mr. Billy Cheung provided an overview of the briefing note and the proposed changes to the by-laws and highlighted that one decision Council had discussed and approved in a previous meeting has been excluded from the draft. The proposed eligibility to restrict candidates based on the number of and/or nature of findings made by the Investigations, Complaints and Reports Committee (ICRC) was deemed to be too subjective and the decision was made to not incorporate it into the draft by-laws.

Due to the administrative complexity in rolling out the new remuneration per diem framework, Mr. Cheung informed Council that a resolution was circulated with the meeting materials to have the current format of expense reimbursement retained until the start of the September 2020 Council year. The draft by-laws also contains the amendments to put in place the annual cost of living fee increases to be introduced in January 2021.

The College will post these by-law changes for open consultation for a period of 60 days, after which Council will receive a report on the input received through the consultation for consideration at the next Council meeting in March 2020.

Council discussed the potential impact of the changes on the 2020 election and the College's plans to implement the changes. The structure of the elections can be modified to ensure that representation is maintained of the identified patient populations and various skill levels.

The motion: That Council approve the circulation of College By-Law No. 6 for consultation was called to a vote.

The motion was moved and seconded. The motion CARRIED.

11.2 Briefing Note - Finance and Audit Committee – 2020 Budget

Ms. Weyland invited Mr. Stapleton, Chair of the Finance and Audit Committee, to introduce the briefing note.

Mr. Stapleton reminded Council that in 2019 there was an approved deficit budget approved due to the decision to defer the second 12.5% of the increased registrant fees until January of 2020. The original amount of the deficit was projected at \$1.2M but now is planned to be closer to \$1.6M by year end due to a number of complex discipline cases and delayed cost savings as the recently hired internal legal team matures.

The presented budget for 2020 is break-even with the incoming revenue equal to the planned operating and capital expenditures. The by-laws approved for circulation have the proposed implementation of adding Consumer Price Index (CPI) driven Cost Of Living Adjustments (COLA) annually.

Mr. Stapleton also informed Council that the current amount in the reserves is \$8.1M or approximately four months of operating expenses. Ms. Campbell presented an overview of the status of the 2019 budget and the projections for 2020.

Ms. Campbell explained that the high bank fees are the result of credit card transaction fees to renew the annual memberships of over 22,000 registrants, however the College will review options to lower the costs. Discipline Cost Recovery was also discussed and that while not all costs are recoverable Counsel for the College has been endeavouring to seek a more accurate reflection of the costs incurred, and the amounts are steadily increasing.

Following discussion, **the motion was called to a vote.**

The motion was moved and seconded. The motion CARRIED.

11.3 Briefing Note – Registration Committee – Resolution on bridging education for international pharmacy technicians

Ms. Weyland invited Ms. Moustacalis, Chair of the Registration Committee, to introduce the briefing note.

Ms. Moustacalis informed Council that in November the Registration Committee discussed the need for an interim strategy for the College and the Committee because as of December 2019, the National Association of Pharmacy Regulatory Authorities (NAPRA) Pharmacy Technician Bridging Program is being discontinued. Established in 2013, this program was initially developed to support the transition registration pathway as the regulation of technicians was established. Currently the program is used as bridging education for International Pharmacy Technician Graduates (IPTG) who are required to complete a bridging program, unless they successfully complete the Pharmacy Examining Board of Canada (PEBC) Qualifying exam on their first attempt.

Several regulators who also use the program for IPTG applicants, attempted to maintain the program for the long term but have since determined that there are insufficient applicants to make it sustainable. NAPRA, along with these organizations, will continue to pursue an alternative bridging program for IPTG applicants. In the interim, Council is asked to approve that the Registration Committee will review these applications on an individual basis to determine which education courses are necessary for them to complete in order to demonstrate that they possess the knowledge, skills and judgment equivalent to graduates from accredited pharmacy technician programs in Canada.

Following discussion, **the motion was called to a vote.**

The motion was moved and seconded. The motion CARRIED.

12. For Information

12.1 Briefing Note – Scope of Practice – Minor Ailments Update

Ms. Weyland invited Ms. Lum-Wilson to introduce the briefing note. In response to the Minister of Health's [request](#), Ms. Lum-Wilson provided Council with an update on the development of regulations that would enable pharmacists to prescribe drugs for certain minor ailments. These proposed regulations are due to the Minister on June 30, 2020.

Ms. James informed Council that in addition to continuing to work closely with the Ministry, the Minor Ailments Advisory Group (MAAG) has been established. The group comprises patient advisors as well as experts in medicine, public health, health systems research, and pharmacy in order to provide input and guidance on how the changes will improve patient health outcomes. Broad preliminary feedback is also being solicited and includes meeting with pharmacy associations, administering a survey to registrants, and through public focus groups to help build a strong, evidence-informed foundation for deciding which minor ailment conditions to include. The Ministry has indicated that the focus of the minor ailments under consideration should be tailored to those that result in unnecessary emergency department visits to decrease the burden on patients and the health care system.

Council reviewed the preliminary list of 18 minor ailments for consideration and was informed that the Ministry has asked that the list be further refined to between 10 - 12 minor ailments.

Council discussed the ailments proposed and a motion was made from the floor to add post exposure prophylaxis for Lyme disease to the list of minor ailments, given the importance of timely treatment and the growing risk areas in Ontario.

Following discussion, **the motion was called to a vote.**

The motion was moved and seconded. The motion CARRIED.

Council discussed the impact to pharmacy practice and if the considerations had been made on other drugs and vaccinations. Ms. Shiamptanis, Policy Advisor working with the MAAG team was given the floor to help shed light on the focus of the ailments listed. Ms. Shiamptanis confirmed that at this time the focus of the ailments continues to be targeted on reducing emergency room visits across the province.

12.2 Briefing Note – Registrar's Report to December 2019 Council

Ms. Weyland invited the Registrar, Ms. Lum-Wilson, to address Council.

The report, included with the materials for the meeting, outlined key activities of the College since the last Council meeting. Of note, Ms. Lum-Wilson provided Council with an update on various governance changes being considered in British Columbia in the wake of the Cayton report on the College of Dental Surgeons of British Columbia and the *Health Professions Act*. Council was presented with the Registrar's 2020 goals related to year two of the strategic plan.

Council discussed NAPRA's decision to remove the Natural Health Products (NHP) from the schedule. The recently released Auditor General's report states that the medication management in Hospitals should be reviewed and that many Hospitals are not meeting the criteria for sterile compounding. The College will continue to work with hospitals to address these issues.

The briefing note was received for information by Council.

13. Other Matters

14. Unfinished Business

Ms. Weyland reminded Council members to complete the evaluation of today's meeting, adding that the feedback will serve to ensure efficiency and enhance Council members' participation at these meetings.

14.1 Motion respecting Circulation of Minutes

A motion to approve the circulation of the draft minutes of this Council Meeting to Council members was moved and seconded. The motion CARRIED.

15. Motion of Adjournment

There being no further business, at 2:28 p.m., a motion to adjourn the meeting was moved and seconded. The motion CARRIED.

**Sarah MacDougall
Council & Committee Liaison**

**Laura Weyland
President**



COUNCIL BRIEFING NOTE MEETING DATE: MARCH 2020

FOR DECISION

X

FOR INFORMATION

- INITIATED BY:** Nancy Lum-Wilson, CEO and Registrar
- TOPIC:** Subsection 56(1) Class Exemption for Controlled Drugs and Substances
- ISSUE:** Approval of regulatory changes to *General Regulation 202/94* under the *Pharmacy Act*, to enable implementation of the *Subsection 56(1) Class Exemption for Patients, Practitioners and Pharmacists Prescribing and Providing Controlled Substances in Canada During the Coronavirus Pandemic*

PUBLIC INTEREST RATIONALE: Pharmacy professionals are playing an increasingly important role to support an effective province-wide response to the coronavirus pandemic. Providing the regulatory authority to permit pharmacists to renew, adapt, transfer and deliver controlled substances ensures continuity of care for patients that require these medications and helps minimize public risk as the province implements measures to mitigate the spread of the COVID-19 pandemic.

BACKGROUND:

- There are several different federal and provincial laws, which are linked and serve to govern the practice of pharmacy and management of drugs.
- The *Controlled Drugs and Substances Act, CDSA* (Canada) is administered by Health Canada and regulates, among other things, the possession, distribution, sale and delivery of controlled substances (primarily narcotics).
- On March 19, under the *CDSA*, Health Canada issued a *Subsection 56(1) Class Exemption for Patients, Practitioners and Pharmacists Prescribing and Providing Controlled Substances in Canada During the Coronavirus Pandemic* (Exemption). (see Attachment 1)
- The Exemption was issued in order to maintain Canadians' access to controlled substances for medical treatments while they adhere to social distancing guidance from public health officials, or if they need to self-isolate.
- The Exemption, if permitted within applicable provincial legislation and scope of practice, permits pharmacists to extend prescriptions, transfer prescriptions to other pharmacists, accept verbal orders to renew or extend prescriptions from prescribers and permit pharmacy employees to deliver prescriptions of controlled substances to patients homes or other locations where they may be (i.e. self-isolation).
- In Ontario, Section 36 (2) of *General Regulation 202/94* under the *Pharmacy Act* prohibits pharmacists from renewing and adapting prescriptions for a controlled substance, as defined in the *CDSA* and therefore prevents pharmacists from implementing these components of the Exemption.
- Proposed regulatory changes to *General Regulation 202/94* that would enable pharmacists to renew and adapt prescriptions for controlled substances as authorized in the Exemption, are outlined in Attachment 2 (draft regulation) and Attachment 3 (blackline comparison) .

ANALYSIS:

- On March 11, 2020, the World Health Organization declared COVID-19, caused by the SARS-CoV2 coronavirus, a pandemic.
- As of March 19, world-wide there were over 250,000 confirmed cases of COVID-19 and over 10,000 deaths. In Canada there were over 800 cases with 12 deaths.
- On March 17, Premier Doug Ford declared a state of emergency until March 31 as a measure to prevent the spread of COVID-19 and the threat of coronavirus overwhelming the health care system. Ontarians are required to abide by restrictions on travel and gatherings of greater than 50 people, school and business closures and are advised to practice social distancing and self-isolation to mitigate risk to themselves and the community.
- As part of the provincial response to the pandemic, the College has been working with the Ministry of Health to expedite the removal of regulatory barriers to access medicines, including the approval of regulatory changes to *General Regulation 202/94* that would enable pharmacists to implement the full scope of authority to renew, adapt, transfer and transport controlled substances, as defined in the Health Canada Exemption issued on March 19.
- On March 20, the Chief Medical Officer of Health further issued a directive (Attachment 4) that all non-essential and elective services cease, with some exceptions, until further notice.
- The College is also preparing practice guidance to support the safe implementation of the activities authorized by the Exemption.

NEXT STEPS:

- If approved by Council, the College will submit the proposed amendments to the Ministry under Section 13 (1) (c) of the *Pharmacy Act, 1991* and request expedited approval in order to allow pharmacists to implement the activities defined in the Exemption as quickly as possible. Notification of regulatory approval, along with practice guidance will be communicated to all stakeholders immediately thereafter.
- Given the urgency of the matter, the usual College practice of holding a 60-day public consultation prior to submission is waived.

RECOMMENDATION: That Council approve the proposed amendments (attached in Attachment 2) to *General Regulation 202/94* of the *Pharmacy Act, 1991*, Part VII.3 (Controlled Acts) for the purpose of submission to the Ministry of Health, to enable implementation of the *Subsection 56(1) Class Exemption for Patients, Practitioners and Pharmacists Prescribing and Providing Controlled Substances in Canada During the Coronavirus Pandemic*, issued by Health Canada on March 19, 2020.

March 19, 2020

To maintain Canadians' access to controlled substances for medical treatments (e.g., treatment of substance use disorders and chronic pain), while they adhere to social distancing guidance from public health officials or if they need to self-isolate, Health Canada has issued the attached exemptions for prescriptions of controlled substances under the *Controlled Drugs and Substances Act* (CDSA) and its Regulations. If permitted within the applicable provincial/territorial scopes of practice, the exemptions:

- permit pharmacists to extend prescriptions;
- permit pharmacists to transfer prescriptions to other pharmacists;
- permit prescribers to issue verbal orders (i.e., over the phone) to extend or refill a prescription; and
- permit pharmacy employees to deliver prescriptions of controlled substances to patient's homes or other locations where they may be (i.e self isolating).

We strongly encourage all partners to work to implement these exemptions in their jurisdictions and welcome any additional suggestions you may have to maintain Canadians' access to controlled substances for medical reasons during the pandemic.

Further, Health Canada is clarifying, with the attached guidance document, activities that are currently permitted under the CDSA and its Regulations.

We strongly urge Ministries and regulators to conduct a thorough assessment of any barriers to access to medicines that could contravene public health advice for social distancing and self-isolation, when appropriate. This could include, for example, temporarily lifting restrictions on take-home doses ("carries") of opioid agonist treatments, and allowing those with chronic conditions to obtain enough medication to last through a period of self-isolation.

We also recognize that local pandemic precautions may impact the operations of Supervised Consumption Sites (SCS), and are committed to work directly with SCS Operators to assess each individual situation and develop appropriate modifications to their protocols and practices. Operators are encouraged to contact the Office of Controlled Substances' Exemptions Section at hc.exemption.sc@canada.ca.

If you have any questions, please contact Health Canada's Office of Controlled Substances, at: hc.ocs-bsc.sc@canada.ca.

Best Regards,



Michelle Boudreau
Director General
Controlled Substances Directorate
Health Canada

SUBSECTION 56(1) CLASS EXEMPTION FOR PATIENTS, PRACTITIONERS AND PHARMACISTS PRESCRIBING AND PROVIDING CONTROLLED SUBSTANCES IN CANADA DURING THE CORONAVIRUS PANDEMIC

Pursuant to subsection 56(1) of the *Controlled Drugs and Substances Act* (CDSA), and subject to the terms and conditions herein, practitioners and pharmacists, authorized within their scope of practice, are hereby exempted from the following provisions of the CDSA and its regulations when prescribing, selling, or providing a controlled substance to a patient or transferring a prescription for a controlled substance to a pharmacist in Canada:

- Section 5 of the CDSA;
- Subsection 31(1), and section 37 of the Narcotic Control Regulations (NCR);
- Sections G.03.002 and G.03.006 of Part G of the Food and Drug Regulations (FDR);
- Paragraphs 52 (c) and (d), subsection 54(1) of the Benzodiazepines and Other Targeted Substances Regulations (BOTSR).

Individuals delivering a controlled substance on behalf of a pharmacist are exempt from section 5 of the CDSA.

Patients who receive a controlled substance from a pharmacist pursuant to this exemption, are exempt from subsection 4(1) of the CDSA with respect to that controlled substance.

Except as provided below, the terms used in this exemption have the same meaning as those provided in the CDSA and its regulations:

Patient means:

- a) A person who is a client of a pharmacist;
- b) A person who was prescribed a controlled substance; and
- c) A person:
 - i. to whom a pharmacist may prescribe a controlled substance under this exemption; or,
 - ii. to whom a practitioner may verbally prescribe a controlled substance under this exemption.

Pharmacist means a person:

- a) who is entitled under the laws of a province or territory of Canada to practise as a pharmacist;
- b) who has not been named in a notice under s. 48(1) of the NCR, G.03.017.2 of the FDR or section 79 of the BOTSR unless a notice of retraction has been issued under the respective regulations; and,
- c) whose scope of practice of pharmacy includes prescribing of drugs including controlled substances as authorized under this exemption and, in a manner consistent with any applicable provincial or territorial pharmacy legislation and any applicable policies of a provincial or territorial licensing authority.



Practitioner means a person who:

- a) is registered and entitled under the laws of a province to practise in that province the profession of medicine, dentistry or veterinary medicine, and includes any other person or class of persons described as a practitioner;
- b) has not been named in a notice under ss. 59(1) of the NCR, G.04.004.2(1) of the FDR, or 79 of the BOTSr unless a notice of retraction has been issued under the respective regulations; and,
- c) whose scope of practice of medicine, dentistry, or veterinary medicine includes prescribing drugs, including controlled substances as authorized under the relevant provincial or territorial pharmacy legislation and consistent with any applicable policies of any provincial or territorial body responsible for the regulation of practitioners.

Transfer of prescription means the sending a prescription by a pharmacist to another pharmacy within the same province or territory, for the purpose of having that prescription filled and picked up by the patient at that pharmacy.

This exemption provides practitioners with the authority to issue a verbal prescription for controlled substances.

This exemption provides pharmacists with the authority to transfer a prescription for a controlled substance, and to prescribe, sell or provide a controlled substance to patients subject to the terms and conditions of this exemption.

The exemption is only applicable if the following conditions are met.

(A) Pharmacists acting under the authority of this exemption must:

1. Only prescribe, sell, provide or transfer the controlled substance to a patient while that patient is under their professional treatment at a pharmacy;
2. Only prescribe, sell, provide or transfer a controlled substance to a patient in order to extend or renew an existing prescription;
3. Only prescribe a controlled substance to a patient in accordance with any policies and/or guidelines established by the provincial or territorial government and by any relevant provincial or territorial licensing authorities;
4. Comply with a record keeping obligations established by the provincial or territorial government and any relevant provincial or territorial licensing authority regarding all transactions involving controlled substances;
5. If not already required pursuant to item 4, keep records of the following:
 - a. the name and address of any patient who is prescribed, sold, or provided a controlled substance under this exemption;
 - b. the name, quantity and form of the controlled substance prescribed;
 - c. the name or initials of the pharmacist who prescribed, sold or provided the controlled substance;
 - d. the date on which the controlled substance was prescribed, sold or provided; and
 - e. the number assigned to the prescription.



6. With respect to the transfer of a prescription, keep records of the following:
 - a. a copy of the prescription written by the practitioner or the record made in accordance with the practitioner's verbal prescription;
 - b. the name and business address of the transferring pharmacist;
 - c. the name and business address of the pharmacist receiving the prescription transfer;
 - d. the number of authorized refills remaining and, if applicable, the specified interval between refills; and
 - e. the date of the last refill.
7. All records should be kept in the pharmacy for a period of two years from the date that each record is made.

(B) Practitioners must:

1. Only prescribe (including verbally prescribe), sell, or provide the controlled substance to a patient while that patient is under their professional treatment;
2. Only prescribe (including verbally prescribe), a controlled substance to a patient in accordance with any policies or guidelines established by the provincial or territorial government or any relevant provincial or territorial licensing authority;
3. Comply with record keeping obligations established by the provincial or territorial government and relevant provincial or territorial licensing authorities regarding all transactions involving controlled substances;

(C) Any individual who delivers a controlled substance on behalf of a pharmacist must

1. Deliver the controlled substance to the individual identified in the prescription (or to a person responsible for that individual's care);
2. Obtain in writing a note from the pharmacist identifying the name of the individual effecting the delivery, the name and quantity of the controlled substance to be delivered, and the place of delivery; and,
3. Have the above note as well as a copy of this exemption while effecting the delivery.

(D) Any controlled substance prescribed, sold, provided or transferred under the authority of this exemption must be for the purpose of facilitating continuation of treatment that the patient was already receiving.

This exemption expires on the earliest of the following dates:

- September 30, 2020;
- The date that it is replaced by another exemption; or
- The date on which it is revoked.

Failure to comply with the terms and conditions of this exemption may, among other things, result in immediate suspension of this exemption, and ultimately, in its revocation.



This exemption may be suspended without prior notice if the Minister deems that such suspension is necessary to protect public health, safety or security. If necessary, the Minister may change the terms and conditions of this exemption. Should this be the case, you will be informed in writing and reasons for the changes will be provided.

Notwithstanding the conditions above on the ability to suspend, the Minister may suspend or revoke the exemption if she believes that it is no longer necessary.

Signed for and on the behalf of the Minister of Health,

A handwritten signature in blue ink, appearing to read "M. Boudreau".

Michelle Boudreau
Director General
Controlled Substances Directorate
Controlled Substances and Cannabis Branch

Effective Date: March 19, 2020



Prescription management by pharmacists with controlled substances under the *Controlled Drugs and Substances Act* and its regulations

CONTEXT

Pharmacists are medication experts and play a significant role in monitoring patients and medication to ensure safe and optimal use while contributing to outcome-focused patient care. With the goal of supporting better medication management and protecting the health and safety of Canadians, Health Canada has developed the following related to prescribing activities with substances regulated under the *Narcotic Control Regulations* (NCR), the *Benzodiazepines and Other Targeted Substances Regulations* (BOTSR) and the *Food and Drug Regulations – Part G* (FDR - Part G).

SCOPE¹

Information in this document applies to pharmacists who are registered and entitled to practice pharmacy under the laws of their province or territory and are entitled to conduct activities with controlled substances.

While this document does not constitute legal advice as to the scope of the *Controlled Drugs and Substances Act* (CDSA) and its regulations, it is Health Canada's interpretation of the legislation and regulations through which guidance is provided to pharmacists and provincial regulators.

ACTIVITIES PERMITTED

Regulations under the CDSA state that a pharmacist is authorized to sell or provide a controlled substance to a person if they have received a prescription or a written order from a practitioner.

While these regulations do not permit pharmacists to prescribe, other related activities that are included in the meaning of *sell or provide* are permitted as long as the quantity dispensed does not exceed the amount originally authorized. These activities include, but are not limited to:

- **Adjusting the formulation:** adjusting the dosage form in which the drug is prescribed;
 - e.g., change from pill to liquid formulations;

-

¹ This policy does not include substances regulated under the *Cannabis Act* and its regulations.

- **Adjusting the dose and regimen:** a structured plan that specifies the frequency in which a dose of medication should be ingested;
 - e.g., change from 20mg per day for 5 weeks to 10mg per day for 10 weeks
- **De-prescribing:** the planned and supervised process of reducing or stopping a medication;
- **Part-filling:** dispensing a quantity of a medication which is less than the total amount of the drug specified by a practitioner;
 - For greater clarity, this includes part-fills requested by a patient, when a pharmacy is dealing with an inventory shortage or other situations where the nature of the part fill is a matter of discussion between the pharmacist and patient.

This information is intended to clarify prescribing-related activities pharmacists are permitted to conduct under the CDSA and its regulations.

Pharmacists conducting any of these activities must ensure that their actions do not restrict patients' access to their needed prescriptions and that they continue to work closely with the prescribing practitioner with a view to optimizing patients' health care.

ADDITIONAL REQUIREMENTS

Please note that there may be additional federal, provincial/territorial and municipal laws, regulations, and scope of practice considerations that must be complied with in addition to those under the CDSA and its regulations.

For any questions, please do not hesitate to contact hc.ocs_regulatorypolicy-bsc_politiquereglementaire.sc@canada.ca.

**Pharmacy Act, 1991
Loi de 1991 sur les pharmaciens**

**ONTARIO REGULATION 202/94
GENERAL**

Consolidation Period: From December 15, 2016 to the [e-Laws currency date](#).

Last amendment: 452/16.

Legislative History: 750/94, 539/95, 280/96, 121/97, 98/98, 642/98, 548/99, 270/04, 451/10, 59/11, 302/12, 154/13, 225/13, 452/16.

This Regulation is made in English only.

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PART I INTERPRETATION

DEFINITIONS

1. In this Regulation,

“direct supervision” means supervision that is provided by a person who is physically present on the premises where the practice that is being supervised is being carried out;

“non-restricted registration” means the holding of a licence, permit, certificate or registration as a pharmacist from an authority responsible for the regulation of pharmacists in one of the states of the United States of America, or in another non-Canadian jurisdiction that has been approved by the Council, where that licence, permit, certificate or registration is not subject to any restrictions, terms, conditions or limitations, including terms, conditions or limitations that,

- (a) relate to the holder’s ability to practise independently,
- (b) require the holder to practise under supervision or direction,
- (c) require the holder to maintain a position or appointment as a condition of continued registration,
- (d) require the holder to practise only in a part of the geographical area over which the authority has jurisdiction,
- (e) restrict the holder to temporary or time-limited registration or practice,
- (f) were imposed by that authority or any committee or panel of that authority as a result of a disciplinary, registration, fitness to practise or similar proceeding, or
- (g) were placed on the holder’s registration by agreement between the holder and that authority;

“pharmacy” has the same meaning as in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*;

“remote dispensing location” has the same meaning as in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*.
O. Reg. 451/10, ss. 1, 6 (1).

PART II GENERAL PROVISIONS RE CERTIFICATES OF REGISTRATION

CLASSES OF CERTIFICATES OF REGISTRATION

2. (1) The following are prescribed as classes of certificates of registration:

1. Pharmacist.
2. Registered pharmacy student.
3. Intern.
4. Pharmacy technician. O. Reg. 451/10, s. 1.

(2) Every certificate of registration that was in existence immediately before December 3, 2010 is continued as the equivalent certificate of registration with the same status under this Regulation until such time as it otherwise ceases to be effective. O. Reg. 451/10, s. 1.

(3) Where an application for a certificate of registration had been made but not finally dealt with before December 3, 2010, the application shall be dealt with in accordance with this Regulation as amended by Ontario Regulation 451/10. O. Reg. 451/10, s. 1.

APPLICATION FOR CERTIFICATE OF REGISTRATION

3. A person may apply for a certificate of registration by submitting a completed application in the form provided by the Registrar together with any supporting documentation requested by the Registrar and the applicable fees. O. Reg. 451/10, s. 1.

REQUIREMENTS FOR ISSUANCE OF CERTIFICATE OF REGISTRATION, ANY CLASS

4. (1) The following are requirements for the issuance of a certificate of registration of any class:
1. The applicant must possess sufficient language proficiency, in either English or French, to be able to communicate and comprehend effectively, both orally and in writing.
 2. The applicant must not have been found guilty of any offence in any jurisdiction.
 3. The applicant must not be the subject of a current proceeding in respect of any offence in any jurisdiction.
 4. The applicant must not have been the subject of a finding of professional misconduct, incompetence or incapacity or any like finding in Ontario or any other jurisdiction in relation to pharmacy or any other profession or occupation and must not be the subject of any current 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.
 5. The applicant must be a Canadian citizen or permanent resident of Canada or must hold the appropriate authorization under the *Immigration and Refugee Protection Act* (Canada) to permit the applicant to engage in the practice of pharmacy in Ontario as a pharmacist, registered pharmacy student, intern or pharmacy technician in the manner permitted by the certificate of registration for which he or she has applied.
 6. The applicant's past and present conduct must afford reasonable grounds for the belief that the applicant,
 - i. will practise pharmacy with decency, honesty and integrity, and in accordance with the law,
 - ii. does not suffer from any physical or mental condition or disorder that could affect his or her ability to practise pharmacy in a safe manner,
 - iii. has sufficient knowledge, skill and judgment to competently engage in the practice of pharmacy authorized by the certificate of registration, and
 - iv. will display an appropriately professional attitude.
 7. The applicant must provide evidence satisfactory to the Registrar that the applicant will have professional liability insurance in the amount and in the form as required by the by-laws as of the anticipated date for the issuance of his or her certificate of registration.
 8. The applicant must have paid any fees required under the by-laws for the issuance of the certificate of registration for which the applicant applied. O. Reg. 451/10, s. 1.
- (2) The requirement under paragraph 8 of subsection (1) is non-exemptible. O. Reg. 451/10, s. 1.
- (3) An applicant must meet all of the requirements for registration within one year following the filing his or her application, but this does not prevent the applicant from filing a new application. O. Reg. 451/10, s. 1.
- (4) An applicant shall be deemed not to have satisfied the requirements for the issuance of a certificate of registration if the applicant makes a false or misleading statement or representation in his or her application or supporting documentation. O. Reg. 451/10, s. 1.

TERMS, ETC., OF EVERY CERTIFICATE

5. Every certificate of registration is subject to the following terms, conditions and limitations:
1. The member shall provide to the Registrar the details of any of the following that relate to the member and that occur or arise after the registration of the member:
 - i. a finding of guilt arising in any jurisdiction relating to any offence,
 - ii. a charge arising in any jurisdiction relating to any offence,
 - iii. a finding of professional misconduct, incompetence or incapacity or any like finding in any jurisdiction in relation to pharmacy or any other profession or occupation,
 - iv. a proceeding for professional misconduct, incompetence or incapacity or any like proceeding in any jurisdiction in relation to pharmacy or any other profession or occupation.
 2. The member shall not engage in the practice of pharmacy unless the member is a Canadian citizen or permanent resident of Canada or has authorization under the *Immigration and Refugee Protection Act* (Canada) permitting the member to engage in the practice of pharmacy in Ontario in the manner permitted by the certificate of registration.
 3. The member shall immediately advise the Registrar in writing in the event the member ceases to be a Canadian citizen or permanent resident of Canada or to have authorization under the *Immigration and Refugee Protection Act* (Canada) permitting the member to engage in the practice of pharmacy in Ontario in the manner permitted by the certificate of registration.
 4. If a member to whom paragraph 3 applies subsequently obtains Canadian citizenship or becomes a permanent resident of Canada or attains authorization under the *Immigration and Refugee Protection Act* (Canada) permitting the member

to engage in the practice of pharmacy in Ontario permitted by the certificate of registration, the member shall immediately advise the Registrar in writing of that fact.

5. The member shall maintain professional liability insurance in the amount and in the form as required by the by-laws.
6. A member who fails to meet the condition in paragraph 5 shall immediately advise the Registrar in writing of that fact and immediately cease to engage in the practice of pharmacy until such time as the member obtains professional liability insurance as required in paragraph 5.
7. Where a member to whom paragraph 6 applies subsequently obtains professional liability insurance, the member shall notify the Registrar in writing of that fact and, if requested by the Registrar, shall provide details of that coverage. O. Reg. 451/10, s. 1.

PART III REGISTRATION — PHARMACISTS

ADDITIONAL REQUIREMENTS

6. (1) The following are additional requirements for the issuance of a certificate of registration as a pharmacist:
 1. The applicant must,
 - i. have a minimum of a baccalaureate degree in pharmacy evidencing the successful completion of a program designed to educate and train persons to be practising pharmacists which was,
 - A. awarded on or before December 31, 1993 by a constituent faculty of the Association of Faculties of Pharmacy of Canada, or
 - B. awarded by a university as a result of successful completion of a program which was, at the time of the award, accredited by the Canadian Council for Accreditation of Pharmacy Programs or by another accrediting body approved by the Council for that purpose, or
 - ii. have a university degree in pharmacy that does not meet the requirements of subparagraph i but that evidences the successful completion of a program designed to educate and train persons to be practising pharmacists, and,
 - A. have successfully completed a program that, at the time the applicant commenced it, was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B, or
 - B. have successfully completed the examination provided for in paragraph 4 on the applicant's first attempt and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B.
 2. The applicant must have successfully completed an examination in pharmaceutical jurisprudence approved by the Council for applicants for a certificate of registration as a pharmacist.
 3. Subject to subsection (5), the applicant must have successfully completed a structured practical training program approved by the Council, while holding a certificate of registration as an intern and while under the supervision of a preceptor approved by the Registration Committee.
 4. The applicant must have successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacists at a time when the examination was approved by the Council or have successfully completed another examination that has been approved by the Council for that purpose. O. Reg. 451/10, s. 1.
- (2) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 3 of subsection (1) may be completed as part of a program referred to in paragraph 1 of subsection (1), even if the applicant did not hold a certificate of registration as an intern at the time. O. Reg. 451/10, s. 1.
- (3) The requirement in paragraph 1 of subsection (1) must be met within two years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist unless the applicant,
 - (a) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in Canada, the United States of America or another jurisdiction approved by the Council;
 - (b) undergoes a review of his or her practice conducted in a manner approved by the Registration Committee, meets any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pays the required fees; or

- (c) successfully completes the examination referred to in paragraph 4 of subsection (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacist. O. Reg. 451/10, s. 1.
- (4) The requirement in paragraph 2 of subsection (1) shall not be considered to be met unless the applicant is issued a certificate of registration as a pharmacist within three years of meeting that requirement. O. Reg. 451/10, s. 1.
- (5) An applicant is deemed to have met the requirement in paragraph 3 of subsection (1) if, at the time of application, the applicant,
- (a) has successfully completed a structured practical training program which is, in the opinion of the Registration Committee at least equivalent to the program mentioned in paragraph 3 of subsection (1); or
 - (b) has other education, training or experience that is, in the opinion of a panel of the Registration Committee at least equivalent to the program mentioned in paragraph 3 of subsection (1). O. Reg. 451/10, s. 1.
- (6) The requirement in paragraph 3 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as a pharmacist within two years of meeting the requirement or within such greater time as is specified by a panel of the Registration Committee. O. Reg. 451/10, s. 1.
- (7) Subject to subsection (8), the requirement in paragraph 4 of subsection (1) is not considered to have been met unless the applicant,
- (a) successfully completed the examination within three attempts; or
 - (b) successfully completed the examination on the applicant's fourth attempt having first successfully completed the further education or training or combination of education and training required by the examining body responsible for the administration of the examination or, if no further education or training was required by that body, the further education or training or combination of education and training, if any, specified by a panel of the Registration Committee. O. Reg. 451/10, s. 1.
- (8) Where, by virtue of subsection (7), an applicant is not considered to have met the requirement in paragraph 4 of subsection (1), the applicant may not attempt the examination again until the applicant obtains a new degree mentioned in subparagraph 1 i of subsection (1). O. Reg. 451/10, s. 1.
- (9) An applicant is only eligible to take the examination referred to in paragraph 2 of subsection (1) three times in any 24-month period. O. Reg. 451/10, s. 1.
- (10) The requirements in paragraphs 1, 3 and 4 of subsection (1) are deemed to have been met by an applicant,
- (a) who previously held a certificate of registration as a pharmacist in Ontario; and
 - (b) who,
 - (i) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in Canada, the United States of America or another jurisdiction approved by the Council, or
 - (ii) undergoes a review of his or her practice conducted in a manner approved by the Registration Committee, meets any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pays the required fees. O. Reg. 451/10, s. 1.
- (11) An applicant who has a university degree in pharmacy mentioned in subparagraph 1 ii of subsection (1), and who successfully completes any further education or training or combination of education and training specified by a panel of the Registration Committee shall be deemed to have met the requirement in paragraph 1 of subsection (1) if the applicant,
- (a) was registered as an intern on December 3, 2010; or
 - (b) becomes registered as an intern after December 3, 2010 but before December 3, 2011. O. Reg. 451/10, s. 1.
- (12) Subject to subsections (2), (5), (10) and (11) and sections 7 and 8, the requirements in subsection (1) are non-exemptible. O. Reg. 451/10, s. 1.
- (13) A reference in this section or section 7 to "all of the other requirements for the issuance of a certificate of registration" includes, without being limited to, a requirement set out in subsection 4 (1) or subsection (1) of this section. O. Reg. 451/10, s. 1.

MOBILITY FROM OUTSIDE CANADA

7. An applicant is deemed to have met the requirements in paragraph 1 of subsection 6 (1) if the applicant meets all the following non-exemptible requirements:

1. The applicant must,

- i. hold a non-restricted registration in at least one jurisdiction at the time of application and have held that registration continuously for at least two years, and
 - ii. satisfy the Registrar or a panel of the Registration Committee that the applicant engaged in the full scope of practice as a pharmacist in that jurisdiction for at least 600 hours.
2. The applicant must,
- i. satisfy the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in one or more of the jurisdictions where he or she held the non-restricted registration,
 - ii. undergo a review of his or her practice conducted in a manner approved by the Registration Committee, meet any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pay the required fees, or
 - iii. successfully complete the examination referred to in paragraph 4 of subsection 6 (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacist. O. Reg. 451/10, s. 1.

MOBILITY WITHIN CANADA

8. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of paragraphs 1, 3 and 4 of subsection 6 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacist in that jurisdiction. O. Reg. 451/10, s. 1.

(2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,

- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
- (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as a pharmacist. O. Reg. 451/10, s. 1.

(3) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 451/10, s. 1.

(4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 451/10, s. 1.

TERMS, CONDITIONS AND LIMITATIONS, PART B PHARMACIST

9. (1) Every certificate of registration of a pharmacist listed in Part B of the register is subject to the following terms, conditions and limitations:

1. The member shall not provide any care to a patient, whether direct or indirect.
2. The member shall not dispense, sell or compound drugs.
3. The member shall not supervise that part of the pharmacy where drugs are kept.
4. The member shall not be the designated manager of a pharmacy within the meaning of the *Drug and Pharmacies Regulation Act*.
5. The member shall not supervise the practice of pharmacy of an intern, registered pharmacy student or pharmacy technician.
6. The member shall, when working in a pharmacy or any other environment where patient care is being provided, clearly identify him or herself as a non-practising pharmacist. O. Reg. 451/10, s. 1.

(2) With the prior written approval of the Registrar, and despite paragraphs 1 and 2 of subsection (1), a pharmacist listed in Part B of the register may dispense, sell or compound a drug and provide care to a patient under the direct supervision of a pharmacist who is registered in Part A of the register where the sole purpose is to assist the member in preparing to meet the requirements specified in subsection 46 (3) to transfer a member holding a certificate of registration as a pharmacist who is registered in Part B of the register to Part A of the register. O. Reg. 451/10, s. 1.

(3) Where a member wishes to seek the approval of the Registrar under subsection (2), the member shall provide to the Registrar, in writing, the name of the pharmacist or pharmacists who will be providing the required supervision, the name and address of the pharmacy or pharmacies at which the member proposes to practise under that supervision and the proposed date upon which the member wishes to commence practice. O. Reg. 451/10, s. 1.

- (4) Any approval provided by the Registrar under subsection (2) must specify,
 - (a) the name of the pharmacist or pharmacists who will be required to supervise the member;
 - (b) the name and address of the pharmacy or pharmacies where the member will be practising; and
 - (c) the term of the approval, which must not exceed six months. O. Reg. 451/10, s. 1.
- (5) Where the Registrar is satisfied that it is appropriate to do so the Registrar may extend the term of the approval provided under subsection (2) but in no case may the combined term exceed one year unless a panel of the Quality Assurance Committee approves of a further extension. O. Reg. 451/10, s. 1.

**PART IV
REGISTRATION — REGISTERED PHARMACY STUDENTS**

ADDITIONAL REQUIREMENT

- 10.** (1) It is an additional requirement for the issuance of a certificate of registration as a registered pharmacy student that the applicant must,
- (a) have been accepted as a student in a university program referred to in subparagraph 1 i of subsection 6 (1) or in an approved program referred to in sub-subparagraph 1 ii A of that subsection;
 - (b) be engaged in attaining any education or training referred to in sub-subparagraph 1 ii B of subsection 6 (1); or
 - (c) be engaged in attaining any education or training specified by a panel of the Registration Committee as a condition for the issuance of another certificate of registration, other than a certificate of registration as a pharmacy technician. O. Reg. 451/10, s. 2.
- (2) Subject to section 11, the requirement in subsection (1) is non-exemptible. O. Reg. 451/10, s. 2.

MOBILITY WITHIN CANADA

- 11.** (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of subsection 10 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacy student in that jurisdiction. O. Reg. 451/10, s. 2.
- (2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,
- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
 - (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as a registered pharmacy student. O. Reg. 451/10, s. 2.
- (3) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 451/10, s. 2.
- (4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 451/10, s. 2.

TERMS, CONDITIONS AND LIMITATIONS

- 12.** (1) Every certificate of registration as a registered pharmacy student is subject to the following terms, conditions and limitations:
- 1. The member,
 - i. in the case of a member to whom subsection 11 (1) does not apply, shall only engage in the practice of pharmacy while enrolled in and actively participating in a program provided for in subsection 10 (1) or while actively engaged in any education or training specified in that subsection, and
 - ii. in the case of a member to whom subsection 11 (1) applies, shall only engage in the practice of pharmacy while enrolled in and actively participating in an educational program that is a requirement for the issuance of an applicable out-of-province certificate authorizing practice as an intern or pharmacist.
 - 2. The member may only engage in the practice of pharmacy,
 - i. while under the direct supervision of a member who holds a certificate of registration as a pharmacist, or
 - ii. where a program or any education or training provided for in subsection 10 (1) includes a clinical component in a premises that is not a pharmacy but at which drugs may be prescribed or dispensed, while under the direct

supervision of a member of a College within the meaning of the *Regulated Health Professions Act, 1991* who has been approved for this purpose by the faculty that provides the program, education or training.

3. Despite subparagraph 2 ii, the member shall not dispense, compound or sell a drug unless under the direct supervision of a member holding a certificate of registration as a pharmacist.
 4. Despite subparagraph 2 ii, the member may not supervise that part of the pharmacy where drugs are kept.
 5. The member may neither delegate a controlled act nor accept the delegation of a controlled act. O. Reg. 451/10, s. 2.
- (2) A certificate of registration as a registered pharmacy student automatically expires when the member is issued a certificate of registration as a pharmacist or an intern. O. Reg. 451/10, s. 2.
- (3) A certificate of registration as a registered pharmacy student automatically expires,
- (a) in the case of a member engaged in a program referred to in subparagraph 1 i of subsection 6 (1), when the member is refused readmission to the program, ceases to be enrolled in the program or ceases to actively participate in the program;
 - (b) in the case of a member engaged in an approved program referred to in sub-subparagraph 1 ii A of subsection 6 (1), two years after registration as a registered pharmacy student unless that period of time is extended by a panel of the Registration Committee;
 - (c) in the case of a member engaged in attaining any education or training or combination of education and training referred to in sub-subparagraph 1 ii B of subsection 6 (1) or in attaining any education or training or combination of education and training required by a panel of the Registration Committee as a condition for the issuance of another class of certificate of registration, on the date specified by the panel in its decision or, if no date was specified, one year from that decision, unless extended by a panel of the Registration Committee; and
 - (d) in the case of a member whose application for a certificate of registration as a registered pharmacy student was considered under subsection 11 (1), on the date on which the member ceases to hold an out-of-province certificate that is equivalent to a certificate of registration as a registered pharmacy student. O. Reg. 451/10, s. 2.

PART V REGISTRATION — INTERNS

ADDITIONAL REQUIREMENTS

- 13.** (1) The following are additional requirements for the issuance of a certificate of registration as an intern:
1. The applicant must,
 - i. have a minimum of a baccalaureate degree in pharmacy evidencing the successful completion of a program designed to educate and train persons to be practising pharmacists which was,
 - A. awarded on or before December 31, 1993 by a constituent faculty of the Association of Faculties of Pharmacy of Canada, or
 - B. awarded by a university as a result of successful completion of a program which was, at the time of the award, accredited by the Canadian Council for Accreditation of Pharmacy Programs or by another accrediting body approved by the Council for that purpose, or
 - ii. have a university degree in pharmacy that does not meet the requirements of subparagraph i but that evidences the successful completion of a program designed to educate and train persons to be practising pharmacists, and,
 - A. have successfully completed a program that, at the time the applicant commenced it, was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B, or
 - B. have successfully completed the examination provided for in paragraph 4 of subsection 6 (1) on the applicant's first attempt and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B.
 2. Subject to subsections (3) and (4), the applicant must have successfully completed a structured practical training program approved by the Council while holding a certificate of registration as a registered pharmacy student and while under the direct supervision of a preceptor approved by the Registration Committee. O. Reg. 451/10, s. 3.
- (2) Subject to subsections (3) and (4) and section 14, the requirements in subsection (1) are non-exemptible. O. Reg. 451/10, s. 3.
- (3) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 2 of subsection (1) may be completed as part of a program referred to in paragraph 1 of subsection (1), even if the applicant did not hold a certificate of registration as a registered pharmacy student at the time. O. Reg. 451/10, s. 3.

(4) An applicant shall be deemed to have met the requirement in paragraph 2 of subsection (1) if, at the time of application, the applicant holds a non-restricted registration as a pharmacist, has held that registration for at least two years and the applicant,

- (a) satisfies the Registrar or a panel of the Registration Committee that the applicant engaged in the full scope of practice as a pharmacist in that jurisdiction for at least 600 hours;
- (b) successfully completed a structured practical training program which is, in the opinion of a panel of the Registration Committee at least equivalent to a program mentioned in paragraph 2 of subsection (1), or has other education, training or experience that, in the opinion of a panel of the Registration Committee is at least equivalent to the program mentioned in paragraph 2 of subsection (1); or
- (c) successfully completed the education and obtained the additional training or experience that a panel of the Registration Committee has specified. O. Reg. 451/10, s. 3.

(5) The requirement of paragraph 2 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as an intern within one year of meeting that requirement or within such greater time as is specified by a panel of the Registration Committee. O. Reg. 451/10, s. 3.

(6) An applicant who has a university degree in pharmacy mentioned in subparagraph 1 ii of subsection (1), and who successfully completes any further education or training or combination of education and training specified by a panel of the Registration Committee shall be deemed to have met the requirement in paragraph 1 of subsection (1) if the applicant,

- (a) was registered as a registered pharmacy student on December 3, 2010; or
- (b) becomes registered as a registered pharmacy student after December 3, 2010 but before December 3, 2011. O. Reg. 451/10, s. 3.

MOBILITY WITHIN CANADA

14. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of subsection 13 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as an intern in that jurisdiction. O. Reg. 451/10, s. 3.

(2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,

- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
- (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as an intern. O. Reg. 451/10, s. 3.

(3) An applicant referred to in subsection (1) is deemed to meet the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 451/10, s. 3.

(4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 451/10, s. 3.

TERMS, CONDITIONS AND LIMITATIONS

15. (1) Every certificate of registration as an intern is subject to the following terms, conditions and limitations:

1. The member shall only engage in the practice of pharmacy,
 - i. when practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies, while under the direct supervision of a member holding a certificate of registration as a pharmacist, or
 - ii. in all other cases, while under the supervision of a member holding a certificate of registration as a pharmacist.
2. The member shall not supervise that part of the pharmacy where drugs are kept.
3. The member shall not delegate a controlled act. O. Reg. 451/10, s. 3.

- (2) A certificate of registration as an intern automatically expires,
 - (a) when the member is issued a certificate of registration as a pharmacist; or
 - (b) one year from the date on which it was issued unless a panel of the Registration Committee specifies otherwise. O. Reg. 451/10, s. 3.

PART VI
REGISTRATION — PHARMACY TECHNICIANS

ADDITIONAL REQUIREMENTS

16. (1) The following are additional requirements for the issuance of a certificate of registration as a pharmacy technician:
1. The applicant must,
 - i. have successfully completed a pharmacy technician program designed to educate and train persons to be pharmacy technicians which was, at the time the applicant graduated, accredited by the Canadian Council for Accreditation of Pharmacy Programs or such other accrediting body approved by the Council for that purpose,
 - ii. have successfully completed a pharmacy technician program designed to educate and train persons to be pharmacy technicians other than one referred to in subparagraph i or have a university degree or university diploma in pharmacy and, in either case,
 - A. must have successfully completed a program that, at the time the applicant commenced was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i, or
 - B. must have successfully completed the examination referred to in paragraph 4 on the applicant's first attempt, and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i,
 - iii. have successfully completed a program before January 1, 2015 that, at the time the applicant commenced was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i, or
 - iv. have met the requirements of paragraph 1 of subsection 6 (1).
 2. The applicant must have successfully completed an examination in pharmaceutical jurisprudence approved by the Council for applicants for a certificate of registration as a pharmacy technician.
 3. The applicant must have successfully completed a structured practical training program approved by the Council and must have done so under the direct supervision of a preceptor approved by the Registration Committee.
 4. The applicant must have successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacy technicians or successfully completed another examination that has been approved by the Council for that purpose. O. Reg. 451/10, s. 4.
- (2) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 3 of subsection (1) may be completed as part of a program referred to in subparagraph 1i of subsection (1) or sub-subparagraph 1 ii A of subsection (1). O. Reg. 451/10, s. 4.
- (3) The requirement in paragraph 1 of subsection (1) must be met within two years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacy technician unless the applicant,
- (a) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act under the supervision or direction of a pharmacist for at least 600 hours during the three years before the date on which the applicant met all the other requirements for the issuance of a certificate of registration as a pharmacy technician and did so while practising as a pharmacy technician in Canada or in another jurisdiction approved by the Council;
 - (b) meets any requirements regarding any further education or training or a combination of education or training, if any, set by a panel of the Registration Committee within the time set by the panel; or
 - (c) successfully completes the examination referred to in paragraph 4 of subsection (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacy technician. O. Reg. 451/10, s. 4.
- (4) The requirement of paragraph 2 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as a pharmacy technician within three years of meeting that requirement. O. Reg. 451/10, s. 4.
- (5) An applicant is only eligible to take the examination referred to in paragraph 2 of subsection (1) three times in any 24-month period. O. Reg. 451/10, s. 4.
- (6) The requirement in paragraph 3 of subsection (1) shall not be considered to have been met unless the applicant,
- (a) is issued a certificate of registration as a pharmacy technician within two years of meeting that requirement;

- (b) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act under the supervision or direction of a pharmacist for at least 600 hours during the three years before the date on which the applicant met all the other requirements for the issuance of a certificate of registration as a pharmacy technician and did so while practising as a pharmacy technician in Canada or in another jurisdiction approved by the Council; or
- (c) meets any requirements regarding any further education or training or a combination of education or training, if any, set by a panel of the Registration Committee within the time set by the panel. O. Reg. 451/10, s. 4.
- (7) Subject to subsection (8), paragraph 4 of subsection (1) is not considered to have been met unless the applicant,
 - (a) successfully completed the examination within three attempts; or
 - (b) successfully completed the examination on the applicant's fourth attempt having first successfully completed the further education or training or combination of education and training required by the examining body responsible for the administration of the examination or, if no further education or training was required by that body, the further education or training or combination of education and training, if any, that was specified by a panel of the Registration Committee. O. Reg. 451/10, s. 4.
- (8) Where, by virtue of subsection (7), an applicant is not considered to have met the requirement in paragraph 4 of subsection (1), the applicant may not attempt the examination again until the applicant successfully completes a new program mentioned in subparagraph 1 i of subsection (1). O. Reg. 451/10, s. 4.
- (9) An applicant shall be deemed not to have met the requirement of subparagraph 1 iii of subsection (1) unless, before January 1, 2012 and before commencing the program referred to in that subparagraph, the applicant successfully completed,
 - (a) the College's Pharmacy Technician Certification Examination;
 - (b) the Pharmacy Technician Evaluating Examination of the Pharmacy Examining Board of Canada; or
 - (c) another examination approved by the Council. O. Reg. 451/10, s. 4.
- (10) Subject to subsection (2) and section 17, the requirements in subsection (1) are non-exemptible. O. Reg. 451/10, s. 4.
- (11) A reference in this section to "all of the other requirements for the issuance of a certificate of registration" includes, without being limited to, a requirement set out in subsection 4 (1) or subsection (1) of this section. O. Reg. 451/10, s. 4.

MOBILITY WITHIN CANADA

- 17. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of paragraphs 1, 3 and 4 of subsection 16 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacy technician in that jurisdiction. O. Reg. 451/10, s. 4.
 - (2) Without in any way limiting the generality of subsection (1), "good standing" shall include the fact that,
 - (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
 - (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority in that issued the applicant that out-of-province certificate as a pharmacy technician. O. Reg. 451/10, s. 4.
 - (3) An applicant referred to in subsection (1) is deemed to meet the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant's out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 451/10, s. 4.
 - (4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 451/10, s. 4.

TERMS, CONDITIONS AND LIMITATIONS

- 18. Every certificate of registration as a pharmacy technician is subject to the following terms, conditions and limitations:
 - 1. The member shall only engage in the practice of pharmacy,
 - i. when practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies, other than a remote dispensing location, while under the direct supervision of a member holding a certificate of registration as a pharmacist, or
 - ii. in all other cases, while under the supervision or direction of a member holding a certificate of registration as a pharmacist.
 - 2. When practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies the member shall not supervise that part of a pharmacy where drugs are kept.
 - 3. The member shall not delegate a controlled act.

4. The member shall not provide information or education relating to drug use, either to or for a patient, where the provision of the information requires therapeutic knowledge, clinical analysis or clinical assessment. O. Reg. 451/10, ss. 4, 6 (2).

PART VII SUSPENSIONS, RESIGNATIONS, REINSTATEMENTS, ETC.

ADMINISTRATIVE SUSPENSIONS

19. (1) If a member fails to provide information about the member in the manner and in the form as required under the by-laws, the Registrar may give the member notice of intention to suspend the member and may suspend the member's certificate of registration for failure to provide the information 60 days after notice is given. O. Reg. 451/10, s. 5.

(2) Where the Registrar suspends a member's certificate of registration under subsection (1), the Registrar shall lift the suspension upon being satisfied that the required information has been filed with the College and that any fees required for the lifting of that suspension has been paid. O. Reg. 451/10, s. 5.

20. (1) If, pursuant to the by-laws, the College requests evidence that the member holds professional liability insurance in the amount and in the form as required by the by-laws and the member fails to provide that evidence within 14 days of having been requested to do so, the Registrar shall immediately give the member notice of intention to suspend the member and may suspend the member's certificate of registration for failure to provide the evidence 30 days after notice is given. O. Reg. 451/10, s. 5.

(2) Where the Registrar suspends the member's certificate of registration under subsection (1), the Registrar shall lift that suspension upon being satisfied that the member holds professional liability insurance in the amount and in the form required by the by-laws and that any fee required for the lifting of that suspension has been paid. O. Reg. 451/10, s. 5.

21. Where the Registrar suspends a member's certificate of registration under section 24 of the Health Professions Procedural Code for failure to pay a fee, the Registrar shall lift the suspension upon being satisfied that the member,

- (a) has paid all amounts owed to the College;
- (b) holds professional liability insurance in the amount and in the form required by the by-laws; and
- (c) pays any fees required for the lifting of that suspension. O. Reg. 451/10, s. 5.

DEEMED RESIGNATIONS

22. (1) A member shall be deemed to have resigned where,

- (a) the member's certificate of registration was suspended for failure to pay a fee that the member was required to pay in accordance with the regulations or by-laws and that suspension continued for 120 days; or
- (b) the member's certificate of registration was suspended pursuant to subsection 19 (1) or subsection 20 (1) and the suspension continued for 60 days. O. Reg. 451/10, s. 5.

(2) The resignation is effective,

- (a) in the case of a resignation under clause (1) (a), on the 121st day following the commencement of that suspension;
- (b) in the case of a suspension under clause (1) (b), on the 61st day following the commencement of the suspension. O. Reg. 451/10, s. 5.

RETURN OF CERTIFICATE, ETC.

23. A member who resigns, or whose certificate of registration is suspended or revoked shall, if so requested, immediately return to the College,

- (a) his or her certificate of registration; and
- (b) any card or other form of identification issued to him or her by the College for the purpose of identifying him or her as a member of the College. O. Reg. 451/10, s. 5.

REINSTATEMENT

24. (1) A former member who held a certificate of registration as a pharmacist or pharmacy technician and who resigned as a member of the College may apply for the reinstatement of his or her certificate of registration by submitting a completed application to the Registrar in the form provided by the Registrar. O. Reg. 451/10, s. 5.

(2) Subject to subsections (3), (4) and (6), the Registrar may reinstate the former member's certificate of registration if,

- (a) the former member has paid,
 - (i) the required reinstatement fee,
 - (ii) the annual fee for the year in which the certificate of registration is to be reinstated, if not previously paid,

- (iii) the annual fee for the year in which the former member resigned or was deemed to have resigned, if not previously paid unless the Registrar is satisfied that the former member did not engage in the practice of pharmacy in Ontario during that year, and
 - (iv) any other money owed by the former member to the College at the date the application for reinstatement is submitted, including, without being limited to, any penalty fees that were due at the time that he or she ceased to be a member and any costs or expenses ordered to be paid under section 53.1 of the Health Professions Procedural Code, any costs awarded to the College by a Court and any amount owing to the College under a by-law or former regulation made under the Act;
- (b) the application for reinstatement was submitted to the Registrar within three years of the date on which the former member resigned or in the case of a former member who was deemed to have resigned under subsection 22 (1), three years from the date on which the former member was suspended where that suspension resulted in a deemed resignation; and
- (c) the application meets the requirement set out in paragraph 7 of subsection 4 (1) with necessary modifications. O. Reg. 451/10, s. 5.
- (3) A former member is ineligible for reinstatement under subsection (2) if he or she,
- (a) is the subject of a proceeding for professional misconduct, incompetence or incapacity in Ontario or any like proceeding in any other jurisdiction in relation to the practice of pharmacy or another profession, or was the subject of such a proceeding, other than a proceeding that was completed on its merits;
 - (b) was, at the time he or she ceased to be a member or at any time since, the subject of a proceeding in respect of,
 - (i) any criminal offence in any jurisdiction,
 - (ii) any offence relating to the use, possession or sale of drugs in any jurisdiction,
 - (iii) any offence arising in any jurisdiction relating to the practice of pharmacy or any other profession or occupation, or
 - (iv) any offence under the *Controlled Drugs and Substances Act* (Canada);
 - (c) was, after he or she ceased to be a member, found guilty of,
 - (i) any criminal offence in any jurisdiction,
 - (ii) any offence relating to the use, possession or sale of drugs in any jurisdiction,
 - (iii) any offence arising in any jurisdiction relating to the practice of pharmacy or any other profession or occupation, or
 - (iv) any offence under the *Controlled Drugs and Substances Act* (Canada);
 - (d) is the subject of an inquiry or investigation by the Registrar, a committee, a panel of a committee or a board of inquiry of the College, or was the subject of such an inquiry or investigation, that was not completed on its merits or which resulted in the member's resignation;
 - (e) was, at the time he or she ceased to be a member, the subject of an outstanding order or requirement of a committee, a panel of a committee, or a board of inquiry of the College;
 - (f) was, at the time he or she ceased to be a member, in breach of an order or requirement of a committee, a panel of a committee, or a board of inquiry of the College;
 - (g) was, at the time he or she ceased to be a member, in violation of a decision of a panel of the Inquiries, Complaints and Reports Committee or of any predecessor committee, including a decision requiring the member to attend to be cautioned;
 - (h) was, at the time he or she ceased to be a member, in breach of any written agreement with or undertaking provided to the College; or
 - (i) had, at the time he or she ceased to be a member, terms, conditions or limitations on his or her certificate of registration, other than those applicable to all members of the class of certificate of registration he or she previously held. O. Reg. 451/10, s. 5.
- (4) A former member must meet all of the requirements set out in subsection (2) within one year of submitting his or her application for reinstatement. O. Reg. 451/10, s. 5.
- (5) Nothing in this section prevents a former member from making any number of applications for reinstatement or from making an application for a new certificate of registration. O. Reg. 451/10, s. 5.
- (6) A former member who is seeking reinstatement of a certificate of registration as a pharmacist and who is otherwise eligible for the reinstatement shall be reinstated into Part B of the register unless the former member satisfies the Registrar that,

- (a) the former member did not resign at a time when the member had been selected for but had not successfully completed a practice review under the College's Quality Assurance Program; and
- (b) the member had performed at least 600 hours of patient care in Canada, the United States of America or another jurisdiction approved by the Council during the period of three years commencing immediately before the date of the member's resignation. O. Reg. 451/10, s. 5.

REINSTATEMENT, PURSUANT TO ORDER

25. If a former member's certificate of registration is ordered to be reinstated by a panel of the Discipline Committee or of the Fitness to Practise Committee, the Registrar shall reinstate the certificate of registration upon payment of,

- (a) the required reinstatement fee; and
- (b) the annual fee for the year in which the certificate of registration is to be reinstated, if not previously paid. O. Reg. 451/10, s. 5.

PART VII.1 NOTICES OF MEETINGS AND HEARINGS

NOTICE OF MEETINGS

26. (1) The Registrar shall ensure that notice of every Council meeting that is required to be open to the public under the Act is given in accordance with this section. O. Reg. 451/10, s. 5.

(2) The notice must be published at least 14 days before the date of the meeting in a daily newspaper of general circulation throughout Ontario. O. Reg. 451/10, s. 5.

(3) The notice must be in English and French. O. Reg. 451/10, s. 5.

(4) The notice must contain the following information:

- 1. The date, time and place of the meeting.
- 2. A statement of the purpose of the meeting. O. Reg. 451/10, s. 5.

(5) The Registrar shall provide the information contained in the notice to every person who requests it by telephone. O. Reg. 451/10, s. 5.

NOTICE OF HEARINGS

27. (1) The Registrar shall ensure that the information concerning an impending hearing by a panel of the Discipline Committee to deal with allegations of professional misconduct or incompetence made against a member is given, in accordance with this section, to a person who requests the information. O. Reg. 451/10, s. 5.

(2) The information shall be given,

- (a) at least 14 days before the date of the hearing, if the request is received 14 days before the date of the hearing; or
- (b) as soon as possible after the request is made, if the request is received after that time but before the date of the hearing. O. Reg. 451/10, s. 5.

(3) The information given shall be as follows:

- 1. The name of the member against whom the allegations have been made.
- 2. The member's principal place of practice.
- 3. The date, time and place of the hearing.
- 4. A statement of the purpose of the hearing. O. Reg. 451/10, s. 5.

(4) The Registrar shall provide the information in French to a person who requests that the information be provided in French, wherever reasonably possible. O. Reg. 451/10, s. 5.

PART VII.2 ADVERTISING

ADVERTISING

28. (1) In this section,

"advertisement" includes an announcement, directory listing or other form of communication similar to an advertisement;

"drug services" means one or more of the compounding, dispensing or sale by retail of drugs or the provision of information or advice with respect to drugs. O. Reg. 451/10, s. 5; O. Reg. 59/11, s. 1 (1, 2).

(2) A member shall not, through any medium, publish, display, distribute or use, or permit, directly or indirectly, the publication, display, distribution or use through any medium of, an advertisement relating to drug services that,

- (a) is false, misleading or deceptive, whether as a result of the inclusion of information or the omission of information;
- (b) is not readily comprehensible to the persons to whom it is directed;
- (c) is not dignified and in good taste;
- (d) contains anything that cannot be verified;
- (e) contains testimonials, comparative statements or endorsements;
- (f) contains a reference to a member's area of practice or to a procedure or treatment available from a member practising in the pharmacy, unless the advertisement discloses whether or not the member has an area of expertise and, if the member does have such an area of expertise, the particular expertise;
- (g) contains references to a particular brand of equipment used to assist in providing drug services;
- (h) contains information that is not relevant to the choice of a pharmacist; or
- (i) contains any representations as to the safety or effectiveness or an indication for use of any drug referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*.
- (j) REVOKED: O. Reg. 59/11, s. 1 (4).

O. Reg. 451/10, s. 5; O. Reg. 59/11, s. 1 (3, 4).

(3) An advertisement by a member that includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act* shall include the price information for at least 15 different drugs, 10 of which each belong to a different one of the following drug classifications:

- 1. Anti-infective agents.
- 2. Antineoplastic agents.
- 3. Autonomic agents.
- 4. Blood formation and coagulation drugs.
- 5. Cardiovascular drugs.
- 6. Central nervous system drugs.
- 7. Diagnostic agents.
- 8. Electrolytic, caloric and water balance drugs.
- 9. Cough preparations.
- 10. Eye, ear, nose and throat preparations.
- 11. Gastrointestinal drugs.
- 12. Gold compounds.
- 13. Heavy metal antagonists.
- 14. Hormones and substitutes.
- 15. Oxytocics.
- 16. Skin and mucous membrane preparations.
- 17. Spasmolytics.
- 18. Unclassified therapeutic agents.
- 19. Vitamins. O. Reg. 451/10, s. 5; O. Reg. 59/11, s. 1 (5).

(4) Where an advertisement by a member includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*, the advertisement shall include at a minimum the following information with respect to each drug:

- 1. The quantity of the drug being advertised at the advertised price.
- 2. The total cost for the drug to the purchaser including any dispensing fee.
- 3. The time period during which the advertised price will be available. O. Reg. 59/11, s. 1 (6).

(5) An advertisement by a member that includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act* shall include, in addition to the price information referred to in subsection (4), the following information with respect to each advertised drug:

- 1. The strength of the drug.

2. The brand name of the drug.
3. The dosage form of the drug. O. Reg. 59/11, s. 1 (6).

(6) Where an advertisement by a member includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*, equal prominence shall be given to each drug and, for each of those drugs, equal prominence shall be given to all the information required under subsections (4) and (5). O. Reg. 59/11, s. 1 (6).

(7), (8) REVOKED: O. Reg. 59/11, s. 1 (6).

PROFESSIONAL MISCONDUCT RE ADVERTISING

29. It is professional misconduct for the purposes of clause 51 (1) (c) of the Health Professions Procedural Code for a member who advertises price information with respect to a drug referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act* to charge any purchaser, including the executive officer under the *Ontario Drug Benefit Act* more for the drug than the member has advertised, pursuant to paragraph 2 of subsection 28 (4), as the total cost for the drug to the purchaser including any dispensing fee. O. Reg. 59/11, s. 2.

CLARIFICATION RE APPLICATION OF PART

30. Nothing in this Part prohibits a member from publishing, displaying, distributing or using, or permitting directly or indirectly the publication, display, distribution or use of, an advertisement that relates solely to the co-payment or dispensing fee charged by the member for supplying a drug that is a listed drug product under the *Ontario Drug Benefit Act* to an eligible person under that Act. O. Reg. 451/10, s. 5.

PART VII.3 CONTROLLED ACTS

INTERPRETATION

31. (1) Subject to subsection (2), in this Part,

“adapt” means to change a patient’s prescription respecting,

- (a) the dose of the prescribed drug,
- (b) the dosage form of the prescribed drug,
- (c) the directions for use of the prescribed drug, or
- (d) the route of administration for taking the prescribed drug,

but does not include therapeutic substitution;

“Part A pharmacist” means a member who holds a certificate of registration as a pharmacist and who is listed in Part A of the register;

“prescriber” means a person who is authorized under the laws of a province or territory of Canada to give a prescription within the scope of his or her practice of a health profession;

“prescription” means a direction from a prescriber directing the dispensing of a drug or mixture of drugs for a specific patient;

“renew” means to provide a patient with a prescription that repeats a prescription previously provided to that patient;

“therapeutic substitution” means the substitution of a drug that contains chemically different active ingredients that are considered to be therapeutically equivalent. O. Reg. 302/12, s. 1.

(2) As the term is used in subsection 36(2.1) “adapt” means to change a patient’s prescription respecting,

- (a) the dose and regime of the prescribed drug,
- (b) the dosage form of the prescribed drug,
- (c) the de-prescribing of the prescribed drug, or
- (d) the part-filling of the prescription,

but does not include therapeutic substitution.

32. (1) Where the provisions of this Part are inconsistent with a law of Canada respecting prescriptions, including those related to a targeted substance, the law of Canada shall prevail and the provisions of this Part to the extent they are inconsistent with that law shall not apply. O. Reg. 302/12, s. 1.

(2) Where the provisions of this Part are inconsistent with the provisions of the *Narcotics Safety and Awareness Act, 2010*, the provisions of that Act shall prevail and the provisions of this Part, to the extent they are inconsistent with that Act, shall not apply. O. Reg. 302/12, s. 1.

CONTROLLED ACTS

33. A member shall not perform a controlled act under paragraph 2, 3, 4 or 5 of subsection 4 (1) of the Act except in accordance with this Part. O. Reg. 302/12, s. 1.

34. (1) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) who meets all the requirements in subsection (3) is authorized to perform the following acts:

1. Administering a substance specified in Schedule 1 by injection to a patient.
2. Administering a substance specified in Schedule 2 by inhalation to a patient. O. Reg. 452/16, s. 1 (1).

(2) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform an act provided for in subsections (1), (4) and (5), subject to the terms, conditions and limitations imposed on his or her certificate of registration. O. Reg. 302/12, s. 1; O. Reg. 452/16, s. 1 (2).

(3) A member may only perform an act provided for in subsection (1) if he or she complies with the following:

1. The member may only perform the act for the purpose of patient education and demonstration, and before performing the act,
 - i. must explain that purpose to the patient or his or her authorized agent, and
 - ii. must receive an informed consent from the patient or his or her authorized agent.
2. The member shall ensure that he or she only performs the act in an environment that is clean, safe, private and comfortable for the patient.
3. The member shall ensure that appropriate infection control procedures are in place.
4. The member must possess sufficient knowledge, skill and judgment respecting the substance to be administered, and sufficient understanding of the condition of the patient, to be able to administer the substance safely.
5. The member must consider whether administering a substance by injection or inhalation to the patient is appropriate, given the known risks and benefits to the patient and the safeguards and resources available to safely manage the outcome after administration and any other relevant circumstances.
6. The member must maintain a patient record that includes,
 - i. the name and address of the patient,
 - ii. the name and address of the member,
 - iii. the date the act was performed,
 - iv. the name, strength (where applicable) and quantity of the substance that the member administered to the patient,
 - v. the circumstances relating to the administration of the substance to the patient and any adverse reaction experienced by the patient, and
 - vi. confirmation that an informed consent was given by the patient or his or her authorized agent. O. Reg. 302/12, s. 1.

(4) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) is authorized to administer influenza vaccine by injection to a patient who is five years of age or older, if the member,

- (a) administers the vaccine in accordance with Ontario's Universal Influenza Immunization Program as described on the Ministry's website;
- (b) receives an informed consent from the patient or his or her authorized agent; and
- (c) meets all the requirements in paragraphs 2 to 6 of subsection (3). O. Reg. 302/12, s. 1; O. Reg. 452/16, s. 1 (3).

(5) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) is authorized to administer a vaccine from one of the vaccines specified in Schedule 3 by injection to a patient who is five years of age or older, if the member,

- (a) receives an informed consent from the patient or his or her authorized agent;
- (b) meets all the requirements in paragraphs 2 to 6 of subsection (3); and
- (c) notifies the patient's primary care provider (if any) within a reasonable time that the member administered a vaccine to the patient and provides details respecting the administration. O. Reg. 452/16, s. 1 (4).

35. (1) For the purposes of paragraph 3 of subsection 4 (1) of the Act, a member referred to in subsection (3) who complies with the other requirements of this section is authorized to prescribe the following specified drugs:

1. Varenicline Tartrate.
2. Bupropion Hydrochloride. O. Reg. 302/12, s. 1.

(2) A drug mentioned in subsection (1) may only be prescribed by a member for the sole purpose of smoking cessation. O. Reg. 302/12, s. 1.

(3) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform the act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration. O. Reg. 302/12, s. 1.

(4) A member may only prescribe a drug under this section if he or she,

- (a) possesses sufficient knowledge, skill and judgment respecting the drug and the patient's condition to prescribe the drug for the patient;
- (b) has considered whether prescribing the drug for the patient is appropriate, given the known risks and benefits of prescribing the drug for the patient and other relevant factors respecting the patient;
- (c) gives the prescription to the patient or his or her authorized agent;
- (d) advises the patient or his or her authorized agent, at the time of giving the prescription, that he or she may elect to take it to a pharmacy of his or her choosing for dispensing;
- (e) notifies the patient's primary care provider (if any) within a reasonable time, that the member prescribed a drug for the patient and provides details respecting the prescription; and
- (f) complies with the additional requirements under sections 37 and 38. O. Reg. 302/12, s. 1.

36. (1) For the purposes of paragraph 4 of subsection 4 (1) of the Act, a member referred to in subsection (3) who complies with the other provisions of this section is authorized to perform the following acts:

1. Adapting a patient's prescription.
2. Renewing a patient's prescription for the purpose of continuity of care. O. Reg. 302/12, s. 1.

(2) Subject to subsection (2.1), subsection (1) does not authorize a member referred to in subsection (3) to adapt or renew a prescription for a controlled substance as defined in the *Controlled Drugs and Substances Act* (Canada) or a drug designated as a monitored drug by the regulations under the *Narcotics Safety and Awareness Act, 2010*. O. Reg. 302/12, s. 1.

(2.1) Subsection (2) does not apply to adapting or renewing a patient's prescription during the period of time in which the "Subsection 56(1) Class Exemption for Patients, Practitioners and Pharmacists Prescribing and Providing Controlled Substances in Canada During the Coronavirus Pandemic" issued by Health Canada on March 19, 2020 (the "Health Canada Exemption") is in effect.

(3) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform an act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration. O. Reg. 302/12, s. 1.

(4) A member may only perform an act provided for in subsection (1) if he or she complies with the following:

1. The member must either possess the patient's prescription to be adapted or renewed or,
 - i. receive a copy of the prescription directly from the pharmacy where the prescription was dispensed to the patient,
 - ii. be satisfied based on verbal confirmation from a pharmacist at the pharmacy where the prescription was dispensed to the patient as to the existence and details of the prescription,
 - iii. have access to the medical record that contains information about the prescription, or
 - iii.i during the period of time in which the Health Canada Exemption is in effect, where the conditions in subparagraphs i, ii, and iii cannot be met, be satisfied as to the existence and details of the prescription from an alternative source, including, but not limited to, the prescription label, the prescription receipt with medication history, a photograph of the prescription, or a facsimile of the prescription.
2. If the member is renewing a prescription, he or she must not prescribe a quantity of the drug that exceeds the lesser of,
 - i. the quantity that was originally prescribed, including any refills that were authorized by the prescriber, and
 - ii. a six months' supply.
3. The member must, within a reasonable time, notify the prescriber identified on the prescription adapted or renewed by the member, as well as the patient's primary care provider if the member knows that the patient has such a care provider other than the prescriber, providing details about the patient's prescription, when the member,
 - i. renews a patient's prescription, or
 - ii. adapts a patient's prescription, if, in the member's opinion,
 - A. adapting the prescription is clinically significant in relation to the patient, or
 - B. the notification is necessary to support the patient's care.

4. At the time that the member adapts or renews the patient's prescription, the member must advise the patient or his or her authorized agent,
 - i. that he or she is entitled to the prescription, and
 - ii. that he or she may take the prescription to a pharmacy of his or her choosing for dispensing.
5. The member must comply with the additional requirements under sections 37 and 38. O. Reg. 302/12, s. 1.
- 37.** A member who performs an act provided for in section 35 or 36 must ensure that the following information is recorded on the prescription:
 1. The name and address of the patient for whom the drug is prescribed.
 2. The name, strength (where applicable) and quantity of the prescribed drug.
 3. Directions for the use of the drug, including its dose, frequency, route of administration and any special instructions.
 4. The name, address, telephone number and College registration number of the member issuing the prescription.
 5. The date the prescription was issued by the member.
 6. If applicable, reference to the prescription that the member adapted or renewed, including the name and contact details of the original prescriber.
 7. The number of refills that the member authorized, if applicable.
 8. Any other information required by law. O. Reg. 302/12, s. 1.
- 38.** A member who performs an act under section 35 or 36 must maintain a patient record that includes details of the member's rationale for his or her decision to act under section 35 or 36 and the following information, if applicable:
 1. Reference to, or a copy of, the patient's prescription that the member renewed or adapted, including the name and contact information of the prescriber.
 2. A copy of the prescription that the member gave to the patient or his or her authorized agent under clause 35 (4) (c) or that the member gave to the patient or his or her authorized agent to take to a pharmacy of their choosing under paragraph 4 of subsection 36 (4).
 3. A record of the results of laboratory or other tests that the member considered in making the decision to act under section 35 or 36.
 4. The date on which the member notified the following persons, as applicable, and the method by which the notification occurred:
 - i. The patient's primary care provider notified under clause 35 (4) (e) or paragraph 3 of subsection 36 (4).
 - ii. The patient's prescriber notified under paragraph 3 of subsection 36 (4). O. Reg. 302/12, s. 1.
- 39.** (1) For the purposes of paragraph 5 of subsection 4 (1) of the Act, a member referred to in subsection (2) who meets all the requirements in subsection (4) is authorized to perform the act of piercing a patient's dermis with a lancet-type device to obtain blood. O. Reg. 302/12, s. 1.
 - (2) A member who is a Part A pharmacist, an intern, a registered pharmacy student or a pharmacy technician is authorized to perform the act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration. O. Reg. 302/12, s. 1.
 - (3) A pharmacy technician shall not perform the act provided for in subsection (1) unless,
 - (a) a Part A pharmacist is physically present on the premises at the time when the pharmacy technician performs the act; and
 - (b) the pharmacy technician is under the direction of a Part A pharmacist at the time when the pharmacy technician performs the act. O. Reg. 302/12, s. 1.
 - (4) A member may only perform the act provided for in subsection (1) if he or she complies with the following:
 1. The member may only perform the act for the purpose of demonstrating the appropriate use of lancet-type devices for the patient's self care and education or for the patient's self monitoring of his or her chronic disease, and before performing the act,
 - i. shall explain that purpose to the patient or his or her authorized agent, and
 - ii. shall receive an informed consent from the patient or his or her authorized agent.
 2. The member shall ensure that he or she only performs the act in an environment that is clean, safe, private and comfortable for the patient.
 3. The member shall ensure that appropriate infection control procedures are in place.

4. The member must possess the knowledge, skill and judgment respecting the performance of the act and understand the condition of the patient, to perform it safely and effectively.
 5. The member must consider whether performing the act on the patient is appropriate, given the known risks and benefits to the patient and the safeguards and resources available to safely manage the outcome and any other relevant circumstances.
 6. The member must maintain a patient record that includes,
 - i. the name and address of the patient and the member,
 - ii. the date the act was performed, and
 - iii. confirmation that an informed consent was given by the patient or his or her authorized agent. O. Reg. 302/12, s. 1.
- 40. REVOKED:** O. Reg. 451/10, s. 5.

PART VIII QUALITY ASSURANCE

GENERAL

- 41.** In this Part,
“assessor” means an assessor appointed under section 81 of the Health Professions Procedural Code;
“Committee” means the Quality Assurance Committee. O. Reg. 98/98, s. 2.

- 42.** The Committee shall administer the quality assurance program, which shall include the following components:
1. Maintenance of a portfolio of continuous learning.
 2. Maintenance of a two-part register for pharmacist members.
 3. Practice review and remediation.
 4. Remediation of behaviour and remarks of a sexual nature. O. Reg. 98/98, s. 2.

CONTINUOUS LEARNING PORTFOLIO

- 43.** (1) A pharmacist shall maintain a portfolio of continuous learning activities in accordance with guidelines on such activities published by the College and distributed to the members.
(2) A pharmacist shall submit the portfolio to the College on request. O. Reg. 98/98, s. 2.

TWO-PART REGISTER FOR PHARMACISTS

- 44.** (1) The part of the College’s register that lists pharmacists shall have a Part A (patient care) and a Part B (no patient care). O. Reg. 451/10, s. 7.
(2) Every pharmacist shall be listed in either Part A or Part B. O. Reg. 451/10, s. 7.
- 45.** (1) Upon being issued a certificate of registration as a pharmacist for the first time, the member shall ask to be listed in Part A or Part B of the register by completing and submitting the form provided by the Registrar. O. Reg. 451/10, s. 7.
(2) Every year at the time of paying the annual membership fee, a pharmacist shall ask for a renewal of his or her listing in Part A or Part B or for a transfer to the other Part. O. Reg. 451/10, s. 7.
(3) A member who asks for a renewal of a listing in Part A after the third anniversary of being issued a certificate of registration as a pharmacist for the first time shall not be listed in that Part unless he or she has dispensed, sold or compounded drugs, provided non-prescription drugs, health care aids and devices or information related to drug use for at least 600 hours during the preceding three years in the course of providing patient care while practising the profession in Canada. O. Reg. 451/10, s. 7.
- 46.** (1) A pharmacist may ask for a transfer from Part A of the register to Part B or from Part B to Part A at any time. O. Reg. 451/10, s. 7.
(2) If a member listed in Part A asks for a transfer to Part B, the member shall be transferred to Part B. O. Reg. 451/10, s. 7.
(3) If a member listed in Part B asks for a transfer to Part A, the member shall be transferred to Part A if he or she,
 - (a) undergoes a practice review in accordance with section 47; and
 - (b) satisfies the educational and practice requirements that may be specified by the Quality Assurance Committee. O. Reg. 451/10, s. 7.

(4) If the Registrar proposes to reject a request for a transfer to Part A, the request shall be referred to a panel of the Quality Assurance Committee. O. Reg. 451/10, s. 7.

(5) The member shall be given a reasonable opportunity to make written submissions to the panel before it makes a decision. O. Reg. 451/10, s. 7.

(6) A member whose request to be listed in Part A is rejected by the panel may appeal to another panel of the Quality Assurance Committee. O. Reg. 451/10, s. 7.

(7) No member of a panel that rejects a request to be listed in Part A shall sit on a panel hearing an appeal of that decision. O. Reg. 451/10, s. 7.

(8) On an appeal, the member shall be given a reasonable opportunity to make written submissions to the panel before it makes a decision. O. Reg. 451/10, s. 7.

PRACTICE REVIEW AND REMEDIATION

47. (1) Each year the College shall select at random the names of pharmacists required to undergo a practice review.

(2) A pharmacist listed in Part A is required to undergo a practice review if his or her name is selected at random or the member is referred to the Committee by the Complaints Committee or Executive Committee.

(3) If a pharmacist listed in Part A fails to undergo a required practice review, the Committee may transfer the pharmacist to Part B after giving him or her a reasonable opportunity to make written submissions.

(4) A pharmacist listed in Part B is required to undergo a practice review if he or she is referred to the Committee by the Complaints Committee or Executive Committee or if the pharmacist has asked to be listed in Part A under subsection 46 (3).

(5) The Committee shall appoint an assessor to conduct a practice review.

(6) The assessor shall prepare a written report on the review and submit it to the Committee.

(7) After considering the report, the Committee may decide,

(a) that no further action is required;

(b) that the pharmacist is required to undertake the remediation specified by the Committee to correct any deficiency in his or knowledge, skills or judgment identified by the review; or

(c) that the pharmacist is to be listed in Part A where the review took place pursuant to a request to be listed in Part A.

(8) If the Committee proposes to require a pharmacist to undertake remediation under clause (7) (b), it shall not do so unless,

(a) the pharmacist has been given a report of the results of the review;

(b) the pharmacist has been given written notice of the Committee's intention to require him or her to undertake remediation;

(c) the pharmacist has been given at least 14 days from receipt of the notice to make written submissions to the Committee; and

(d) the Committee has considered any such submissions.

(9) After the pharmacist undertakes the specified remediation, the Committee may require him or her to undergo another practice review by an assessor, and subsections (6), (7) and (8) apply to that review. O. Reg. 98/98, s. 2.

48. (1) If the Committee requires a pharmacist to undertake remediation under section 47 and the pharmacist either fails to do so or fails to successfully complete the remediation, the Committee may direct the Registrar to impose terms, conditions or limitations on the pharmacist's certificate of registration for a specified period not exceeding six months.

(2) If the Committee proposes to make a direction under subsection (1), it shall not do so unless,

(a) the pharmacist has been given written notice of its intention;

(b) the pharmacist has been given at least 14 days from receipt of the notice to make written submissions to the Committee or to request an appearance before the Committee in order to make oral submissions; and

(c) the Committee has considered any such submissions.

(3) A pharmacist who requests an appearance under clause (2) (b) shall be given a reasonable opportunity to appear but the Committee may dispose of the matter if he or she has been given a reasonable opportunity to appear and does not.

(4) If the period specified under subsection (1) expires and the pharmacist still has not undertaken or successfully completed the remediation, the Committee may report him or her to the Executive Committee and provide it with such information as it considers appropriate, except information that may not be disclosed under section 83 of the Health Professions Procedural Code.

(5) If the Registrar imposes terms, conditions or limitations on a pharmacist's certificate of registration for a specified period pursuant to a direction given by the Committee under subsection (1), the Committee may direct the Registrar to remove the terms, conditions or limitations before the end of the specified period if the Committee is satisfied that they are no longer needed.

(6) After directing the imposition of terms, conditions or limitations on a pharmacist's certificate of registration for a specified period not exceeding six months under subsection (1), the Committee may direct the imposition of terms, conditions or limitation on the pharmacist's certificate of registration for a second specified period not exceeding six months under subsection (1) but, after having done so, the Committee shall not direct the imposition of terms, conditions or limitations on the pharmacist's certificate of registration for any further specified period.

(7) If the Committee directs a second imposition of terms, conditions or limitations on the pharmacist's certificate, subsections (2), (3), (4) and (5) apply with respect to the second imposition. O. Reg. 98/98, s. 2.

REMEDIATION OF BEHAVIOUR AND REMARKS OF A SEXUAL NATURE

49. (1) This section applies to matters referred to the Committee by,

- (a) a panel of the Complaints Committee under subsection 26 (3) of the Health Professions Procedural Code; and
- (b) the Executive Committee under section 79.1 of the Code.

(2) The chair of the Committee shall establish a panel from among the members of the Committee for the purpose of considering a matter referred to in subsection (1).

(3) The chair of the Committee shall appoint a mediator to attempt to resolve the matter.

(4) If the mediator is unable to resolve the matter within 90 days after being appointed, the mediator shall report the failure to the chair without delay and provide the chair with a written report on the mediation.

(5) The chair shall give the member complained against a copy of the mediator's report and a notice advising him or her of the right to make written submissions to the panel.

(6) The member shall be given at least 14 days after receipt of the mediator's report and recommendations to make written submissions to the panel or to request an appearance before the panel to make oral submissions, or to do both.

(7) A member who requests an appearance shall be given a reasonable opportunity to make an appearance, but the panel may dispose of the matter without such appearance if the member has been given a reasonable opportunity to appear.

(8) If the mediation concerns a matter referred by the Complaints Committee, the chair shall give the complainant a copy of the mediator's report.

(9) A mediator's proposed resolution of a matter referred to the Committee by the Complaints Committee must be acceptable to the complainant, the member complained against and the panel.

(10) A mediator's proposed resolution of a matter referred to the Committee by the Executive Committee must be acceptable to the member complained against and the panel.

(11) After considering the mediator's report and any written or oral submissions, the panel may require the member to undergo an assessment for the purpose of establishing if he or she requires education with respect to sexual abuse.

(12) The assessment shall be carried out by an assessor appointed by the Committee.

(13) The assessor shall provide a written report to the panel and shall make such recommendations as the assessor considers appropriate about the member's need for education with respect to sexual abuse.

(14) A copy of the report and recommendations, and a notice informing him or her of the right to make submissions in accordance with subsections (6) and (7), shall be provided to the member.

(15) After considering the assessor's report and recommendations and the member's submissions, if any, the panel may require the member to attend or participate in a sexual abuse education program.

(16) If the panel proposes to take action under subsection (15), the member has the right to make submissions in accordance with subsections (6) and (7). O. Reg. 98/98, s. 2.

50. (1) If a member refuses to undergo an assessment under subsection 49 (11) or to attend or participate in a program under subsection 49 (15), the panel may direct the Registrar to impose terms, conditions or limitations on the member's certificate of registration for a specified period not exceeding six months.

(2) If the panel proposes to take action under subsection (1), the member has the right to make submissions in accordance with subsections 49 (6) and (7).

(3) If the panel is satisfied that the terms, conditions and limitations imposed on a member's certificate or registration are no longer needed, it shall direct the Registrar to remove them before the end of the specified period.

(4) If, at the end of the specified period, the member continues to refuse to undergo the required assessment or to attend or participate in the program, the panel shall refer the matter to the Executive Committee. O. Reg. 98/98, s. 2.

PANEL REQUIREMENTS

- 51.** (1) The Committee may sit as a panel to consider a report on a practice review or any matter arising out of a practice review, a matter relating to the imposition of terms, conditions or limitations on a member's registration under section 48 or a matter under section 49.
- (2) A panel shall have at least three members appointed by the chair of the Committee from among the Committee members; at least one member of the panel shall be a member appointed to the Committee by the Lieutenant Governor in Council.
- (3) Three members of a panel constitute a quorum. O. Reg. 98/98, s. 2.

PART IX INSPECTION OF DRUG PREPARATION PREMISES

TEMPORAL APPLICATION

- 52.** This Part applies to the College and members as of the day that it comes into force, except that,
- (a) sections 54, 55, 56, 59 and 60 apply as of 90 days from the day that this Part comes into force; and
 - (b) the requirements in subsection 57 (1) and section 58 apply as of 30 days from the day that this Part comes into force. O. Reg. 154/13, s. 1.

INTERPRETATION

- 53.** (1) In this Part,
- “designated member” means,
- (a) the member designated for a drug preparation premises in accordance with section 58, or
 - (b) where only one member engages in or supervises drug preparation activities at or in connection with a drug preparation premises, that member;
- “drug” means a substance or a preparation containing a substance referred to in clauses (a) to (d) of the definition of “drug” in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*, but does not include,
- (a) a substance or preparation referred to in those clauses that is manufactured, sold or represented for use in animals or fowl, or
 - (b) a substance or preparation referred to in clause (e), (f), (g), (h) or (i) of that definition;
- “drug preparation activities” means reconstituting, diluting 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;
- “drug preparation premises” means any place where a member engages in drug preparation activities, or where drug preparation activities take place that a member supervises, but does not include,
- (a) a pharmacy in respect of which a valid certificate of accreditation has been issued under the *Drug and Pharmacies Regulation Act*,
 - (b) a premises in respect of which a valid establishment licence has been issued under the *Food and Drugs Act* (Canada), or
 - (c) a hospital or a health or custodial institution approved or licensed under any general or special Act;
- “inspector” means a person appointed by the College to carry out an inspection on behalf of the College;
- “supervise” means to supervise either directly or indirectly. O. Reg. 154/13, s. 1.
- (2) Anything that may be done by the College under this Part may be done by the Council or by a committee established under clause 94 (1) (i) of the Health Professions Procedural Code. O. Reg. 154/13, s. 1.

INSPECTION

- 54.** (1) All drug preparation premises are subject to inspection by the College in accordance with this Part. O. Reg. 154/13, s. 1.
- (2) In carrying out an inspection of a drug preparation premises under subsection (1), the College may also require any or all of the following:
1. Inspection, examination or testing regarding any equipment, instrument, materials or any other thing that may be used in the drug preparation premises.

2. Examination and copying of books, accounts, reports, records or similar documents that are, in the opinion of the College, relevant to the member's practice with respect to the drug preparation activities at or in connection with the drug preparation premises.
3. Inquiries or questions to be answered by the member that are relevant to the member's practice with respect to the drug preparation activities at or in connection with the drug preparation premises.
4. Direct observation of a member in his or her practice with respect to drug preparation activities at or in connection with the drug preparation premises. O. Reg. 154/13, s. 1.

55. An inspector may, on the production of information identifying him or her as an inspector, enter and have access to any drug preparation premises at reasonable times and may inspect the drug preparation premises and do any of the things mentioned in subsection 54 (2) on behalf of the College. O. Reg. 154/13, s. 1.

56. (1) It is the duty of every member engaging in or supervising drug preparation activities at or in connection with drug preparation premises that are subject to an inspection to,

- (a) submit to an inspection of the drug preparation premises in accordance with this Part;
- (b) promptly answer a question or comply with a requirement of the inspector that is relevant to an inspection under this Part; and
- (c) co-operate fully with the College and the inspector who is conducting an inspection of a drug preparation premises in accordance with this Part. O. Reg. 154/13, s. 1.

(2) A member shall not engage in or supervise drug preparation activities at or in connection with a drug preparation premises where an inspector has been denied entry or access. O. Reg. 154/13, s. 1.

57. (1) No member shall commence engaging in or supervising drug preparation activities at or in connection with drug preparation premises unless the member has previously given notice in writing to the College in accordance with subsection (5) of the member's intention to do so. O. Reg. 154/13, s. 1.

(2) Where a member has provided notice in writing to the College in accordance with subsection (1) and the drug preparation premises have not passed an inspection or passed an inspection with conditions within the previous five years, the College shall ensure that an inspection of the drug preparation premises is performed within 60 days from the day that the College receives the member's notice or 150 days from the day this Part comes into force, whichever is later. O. Reg. 154/13, s. 1.

(3) A member who engages in or supervises drug preparation activities at or in connection with a drug preparation premises as of the day that is 30 days from the day this Part comes into force shall give notice in writing to the College in accordance with subsection (5) within 90 days from the day this Part comes into force. O. Reg. 154/13, s. 1.

(4) The College shall ensure that an inspection of the drug preparation premises with respect to which a member gives notice under subsection (3) is performed within 150 days from the day this Part comes into force. O. Reg. 154/13, s. 1.

(5) The notice required in subsections (1) and (3) shall include the following information, submitted in the form and manner required by the College:

1. The full name of the member giving the notice and the full name of the individual or corporation who is the owner or occupier of the drug preparation premises, if he or she is not the member who is required to give notice under this section.
2. The full address of the drug preparation premises.
3. The date when the member first began engaging in or supervising drug preparation activities at or in connection with the drug preparation premises or the proposed date when the member intends to begin engaging in or supervising drug preparation activities at or in connection with the drug preparation premises.
4. Any other information the College requires that is relevant to an inspection of the drug preparation premises conducted under this Part. O. Reg. 154/13, s. 1.

58. Where two or more members engage in or supervise drug preparation activities at or in connection with a drug preparation premises, the members shall designate a member as the designated member for the drug preparation premises, and shall immediately notify the College of the designated member's identity. O. Reg. 154/13, s. 1.

59. All drug preparation premises are subject to an inspection by the College once every five years after the initial inspection of the premises or more often if, in the opinion of the College, it is necessary or advisable to do so. O. Reg. 154/13, s. 1.

60. (1) After an inspection of a drug preparation premises, the College shall determine, in accordance with the accepted standards of practice, whether the drug preparation premises pass, pass with conditions or fail. O. Reg. 154/13, s. 1.

(2) In determining whether drug preparation premises pass, pass with conditions or fail an inspection, the College may consider,

- (a) the inspection results provided to the College by the inspector;

- (b) information provided by one or more members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises respecting the inspection, including the answers given by them in response to inquiries or questions asked by the inspector;
- (c) the information contained in a notice given by a member under subsection 57 (1) or (3);
- (d) any submissions made by the member or members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises that are relevant to the inspection; and
- (e) any other information that is directly relevant to the inspection of the drug preparation premises conducted under this Part. O. Reg. 154/13, s. 1.

(3) The College shall deliver a report, in writing and in accordance with section 39 of the *Regulated Health Professions Act, 1991*, to the individual or corporation that is the owner or occupier of the drug preparation premises and to the designated member for the drug preparation premises, within a reasonable time after the inspection is completed. O. Reg. 154/13, s. 1.

(4) Any report made by the College respecting an inspection of drug preparation premises where a member is engaging in or in respect of which the member is supervising drug preparation activities shall make a finding that the drug preparation premises passed, passed with conditions or failed the inspection and shall provide reasons where the drug preparation premises passed with conditions or failed the inspection. O. Reg. 154/13, s. 1.

(5) Any report made by the College that finds that drug preparation premises failed an inspection or passed with conditions is effective on the day that it is received, in accordance with section 39 of the *Regulated Health Professions Act, 1991*, by the designated member for the drug preparation premises. O. Reg. 154/13, s. 1.

(6) The designated member who receives a report made by the College that finds that a drug preparation premises failed an inspection or passed with conditions shall promptly provide copies of the report to all members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises. O. Reg. 154/13, s. 1.

(7) A member shall not engage in or supervise drug preparation activities at or in connection with a drug preparation premises that fail an inspection until,

- (a) the College delivers a report indicating that the drug preparation premises passed a subsequent inspection, or passed with conditions; or
- (b) after considering submissions under subsection (9), the College substitutes a finding that the drug preparation premises pass or pass with conditions. O. Reg. 154/13, s. 1.

(8) A member shall not engage in or supervise drug preparation activities at or in connection with drug preparation premises that pass an inspection with conditions except in accordance with the conditions set out in the report until,

- (a) the College delivers a report indicating that the drug preparation premises passed a subsequent inspection; or
- (b) after considering submissions under subsection (9), the College substitutes a finding that the drug preparation premises pass. O. Reg. 154/13, s. 1.

(9) A member may make submissions in writing to the College within 14 days from the date on which a report made by the College that finds that the drug preparation premises passed with conditions or failed the inspection becomes effective in accordance with subsection (5). O. Reg. 154/13, s. 1.

(10) The College may or may not elect to reinspect the drug preparation premises after receiving a member's submissions, but no more than 60 days after a member provides his or her submissions, the College shall do one or more of the following:

- 1. Confirm its finding that the drug preparation premises failed the inspection or passed with conditions.
- 2. Make a report and find that the drug preparation premises passed with conditions.
- 3. Make a report and find that the drug preparation premises passed the inspection. O. Reg. 154/13, s. 1.

(11) Drug preparation premises that fail an inspection or pass with conditions may be subject to one or more further inspections within a reasonable time after the College delivers its report, at the request of a member, any other person to whom the College gave the report, or at any time at the discretion of the College. O. Reg. 154/13, s. 1.

(12) Where, as a result of an inspection carried out under this Part, a report made by the College finds that a member's knowledge, skill or judgment is unsatisfactory, the College may direct the Registrar to refer the report to the Quality Assurance Committee. O. Reg. 154/13, s. 1.

(13) Where, as a result of an inspection carried out under this Part, a report made by the College finds that a member may have committed an act of professional misconduct or may be incompetent or incapacitated, the College may direct the Registrar to refer the report to the Inquiries, Complaints and Reports Committee. O. Reg. 154/13, s. 1.

PART X FUNDING FOR THERAPY AND COUNSELLING

61. In this Part,

“member” includes a former member. O. Reg. 225/13, s. 1.

62. (1) The alternative requirements that must be satisfied in order for a person to be eligible for funding under clause 85.7 (4) (b) of the Health Professions Procedural Code are prescribed in this section. O. Reg. 225/13, s. 1.

- (2) A person is eligible for funding for therapy or counselling if,
 - (a) there is an admission made by a member in a statement to the College or in an agreement with the College that he or she sexually abused the person while the person was a patient of the member;
 - (b) a member has been found guilty under the *Criminal Code* (Canada) of sexually assaulting the person while the person was a patient of the member;
 - (c) there is a statement, contained in the written reasons of a committee of the College given after a hearing, that the person, while a patient, was sexually abused by a member; or
 - (d) there is sufficient evidence presented to the Patient Relations Committee to support a reasonable belief that the person, while a patient, was sexually abused by a member. O. Reg. 225/13, s. 1.
- (3) For the purposes of clause (2) (d), and without limiting the generality of that clause, the following kinds of evidence may support a reasonable belief that a person, while a patient, was sexually abused by a member:
 1. Evidence of reports made with respect to the member under subsection 85.1 (1) or 85.2 (1) of the Health Professions Procedural Code.
 2. Evidence that corroborates the person’s allegations of sexual abuse by the member. O. Reg. 225/13, s. 1.
- (4) A person is not eligible under subsection (2) unless, at the time the sexual abuse occurred, the person was a patient of the member and the member was practising in Ontario. O. Reg. 225/13, s. 1.
- (5) Despite subsections (2), (3) and (4), a person is eligible for funding for therapy or counselling under this Part only if,
 - (a) the person submits an application for funding to the Patient Relations Committee in the form provided by the College and, in the application, the person names the member who is alleged to have sexually abused the person;
 - (b) the person adheres to the procedures followed by the Patient Relations Committee when determining whether the person has satisfied the requirements for eligibility for funding; and
 - (c) the person provides such other information as is required by the Patient Relations Committee. O. Reg. 225/13, s. 1.
- (6) A decision by the Patient Relations Committee that a person is eligible for funding for therapy or counselling does not constitute a finding against the member and shall not be considered by any other committee of the College dealing with the member. O. Reg. 225/13, s. 1.

TABLES 1, 2 REVOKED: O. Reg. 452/16, s. 2.

SCHEDULE 1 INJECTED SUBSTANCES

(Arranged by American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification)

1. 8:00 Anti-infective Agents
 - i. 8:18 Antivirals
 - A. 8:18.08.04 HIV Entry and Fusion Inhibitors
 1. Enfuvirtide
 - B. 8:18.20 Interferons
 1. Interferon Alfa-2b
 2. Peginterferon alfa-2a
 3. Peginterferon alfa-2b
2. 10:00 Antineoplastic Agents
 1. Goserelin
 2. Leuprolide
 3. Methotrexate
3. 12:00 Autonomic Drugs
 - i. 12:12 Sympathomimetic (Adrenergic) Agents

- A. 12:12.12 Alpha- and Beta-Adrenergic Agonists
 - 1. Scopolamine
 - 2. Hyoscine
 - 3. Glycopyrrolate
 - 4. Epinephrine
- 4. 20:00 Blood Formation and Coagulation
 - i. 20:04 Antianemia Drugs
 - A. 20:04.04 Iron Preparations
 - 1. Iron
 - ii. 20:12 Coagulants and Anticoagulants
 - A. 20:12.04 Anticoagulants
 - 1. Dalteparin
 - 2. Danaparoid
 - 3. Enoxaparin
 - 4. Fondaparinux
 - 5. Heparin
 - 6. Nadroparin
 - 7. Tinazaparin
 - iii. 20:16 Hematopoietic Agents
 - 1. Ancestim
 - 2. Darbepoetin alfa
 - 3. Epoetin alfa
 - 4. Filgrastim
 - 5. Pegfilgrastim
 - 6. Romiplostim
- 5. 28:00 Central Nervous System Agents
 - i. 28:08 Analgesics and Antipyretics
 - A. 28:08.08 Opiate Agonists
 - 1. Codeine
 - 2. Hydromorphone
 - 3. Meperidine
 - 4. Morphine
 - B. 28:08.12 Opiate Partial Agonists
 - 1. Nalbuphine
 - 2. Pentazocine
 - ii. 28:16 Psychotherapeutic Agents
 - A. 28:16.08 Antipsychotics
 - 1. Haloperidol
 - 2. Methotrimeprazine
 - iii. 28:32 Antimigraine Agents
 - A. 28:32.28 Selective Serotonin Agonists
 - 1. Sumatriptan

6. 40:00 Electrolytic, Caloric, and Water Balance
 - i. 40:12 Replacement Preparations
 1. Normal saline
7. 48:00 Respiratory Tract Agents
 - i. 48:92 Respiratory Tract Agents, Miscellaneous
 1. Omalizumab
8. 56:00 Gastrointestinal Drugs
 - i. 56:22 Antiemetics
 - A. 56:22.08 Antihistamines
 1. Dimenhydrinate
 2. Prochlorperazine
 - ii. 56:32 Prokinetic Agents
 1. Metoclopropamide
 - iii. 56:92 GI Drugs, Miscellaneous
 1. Certolizumab Pegol
 2. Methylnaltrexone
9. 64:00 Heavy Metal Antagonists
 1. Deferoxamine
10. 68:00 Hormones and Synthetic Substitutes
 - i. 68:18 Gonadotropins
 1. Follitropin-alpha
 2. Follitropin-beta
 3. Gonadotropin-chorionic
 4. Gonadotropin-chorionic-alfa
 5. Gonadotropin-human
 6. Lutropin-alfa
 7. Menotropins
 8. Urofollitropin
 - ii. 68:20 Antidiabetic Agents
 1. Exenatide
 2. Insulins
 3. Liraglutide
 - iii. 68:22 Antihypoglycemic Agents
 - A. 68:22:12 Glycogenolytic Agents
 1. Glucagon
 - iv. 68:24 Parathyroid
 1. Calcitonin Salmon
 2. Teriparatide
 - v. 68:28 Pituitary
 1. Desmopressin
 2. Vasopressin
 - vi. 68:30 Somatotropin Agonists and Antagonists

- A. 68:30.04 Somatotropin Agonists
 - 1. Somatotropin
- B. 68:30.08 Somatotropin Antagonists
 - 1. Pegvisomant
- vii. 68:32 Progestins
 - 1. Medroxyprogesterone
- 11. 88:00 Vitamins
 - i. 88:08 Vitamin B Complex
 - 1. Cyanocobalamin
 - 2. Folic Acid
 - 3. Methylcobalamin
 - 4. Pyridoxine
 - 5. Thiamine
 - ii. 88:12 Vitamin C
 - 1. Ascorbic Acid
 - iii. 88:24 Vitamin K Activity
 - 1. Vitamin K
- 12. 92:00 Miscellaneous Therapeutic Agents
 - i. 92:12 Antidotes
 - 1. Leucovorin
 - ii. 92:20 Biologic Response Modifiers
 - 1. Denosumab
 - 2. Glatiramer
 - 3. Interferon-Beta-1A
 - 4. Interferon-Beta-1B
 - 5. Natalizumab
 - iii. 92:36 Disease-modifying Antirheumatic Drugs
 - 1. Abatacept
 - 2. Adalimumab
 - 3. Anakinra
 - 4. Etanercept
 - 5. Gold Sodium Thiomalate
 - 6. Golimumab
 - 7. Ustekinumab
 - iv. 92:40 Gonadotropin-releasing Hormone Antagonists
 - 1. Cetrorelix
 - 2. Ganirelix
 - v. 92:92 Other Miscellaneous Therapeutic Agents
 - 1. Octreotide
- 13. Miscellaneous
 - 1. Sterile Water for Injection (Diluent)

SCHEDULE 2
INHALED SUBSTANCES

(Arranged by American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification)

1. 8:00 Anti-infective Agents
 - i. 8:18 Antivirals
 - A. 8:18.28 Neuraminidase Inhibitors
 1. Zanamivir
 - ii. 8:12 Antibacterials
 - A. 8:12.07.16 Monobactams
 1. Tobramycin
 2. Aztreonam
2. 12:00 Autonomic Drugs
 - i. 12:08 Anticholinergic Agents
 - A. 12:12.08 Antimuscarinics/Antispasmodics
 1. Ipratropium
 2. Tiotropium
 - ii. 12:12 Sympathomimetic (Adrenergic) Agents
 - A. 12:12.08.12 Selective Beta2- Adrenergic Agonists
 1. Fenoterol
 2. Formoterol
 3. Salbutamol
 4. Salmeterol
 5. Terbutaline
 - iii. 12:16 Sympatholytic (Adrenergic Blocking) Agents
 - A. 12:16.04.04 Non-Selective alpha-Adrenergic Blocking Agents
 1. Dihydroergotamine
 - iv. 12:92 Autonomic Drugs, Miscellaneous
 1. Nicotine
3. 28:00 Central Nervous System Agents
 - i. 28:08 Analgesics and Antipyretics
 - A. 28:08.12 Opiate Partial Agonists
 1. Butorphanol
 - ii. 28:32 Antimigraine Agents
 - A. 28:32.28 Selective Serotonin Agonists
 1. Sumatriptan
 2. Zolmitriptan
4. 40:00 Electrolytic, Caloric, and Water Balance
 - i. 40:12 Replacement Preparations
 1. Sodium chloride
5. 48:00 Respiratory Tract Agents
 - i. 48:24 Mucolytic Agents
 1. Dornase alfa

6. 52:00 Eye, Ear, Nose and Throat (EENT) Preparations
 - i. 52:02 Antiallergic Agents
 1. Sodium Cromoglycate
 2. Levocabastine
 - ii. 52:08 Anti-inflammatory Agents
 - A. 52:08.08 Corticosteroids
 1. Beclomethasone
 2. Budesonide
 3. Ciclesonide
 4. Flunisolide
 5. Fluticasone
 6. Mometasone
 7. Triamcinolone
 - iii. 52:32 Vasoconstrictors
 1. Oxymetazoline
 2. Phenylephrine
 3. Xylometazoline
7. 68:00 Hormones and Synthetic Substitutes
 - i. 68:18 Gonadotropins
 1. Buserelin
 2. Nafarelin
 - ii. 68:24 Parathyroid
 1. Calcitonin Salmon
 - iii. 68:28 Pituitary
 1. Desmopressin
 2. Vasopressin
8. 92:00 Miscellaneous Therapeutic Agents
 - i. 92:12 Antidotes
 1. Acetylcysteine

O. Reg. 452/16, s. 3.

SCHEDULE 3
VACCINES

1. Bacille Calmette-Guerin (BCG) Vaccines
2. Haemophilus Influenzae type b (Hib) Vaccines
3. Meningococcal Vaccines
4. Pneumococcal Vaccines
5. Typhoid Vaccines
6. Combined Typhoid and Hepatitis A Vaccines
7. Hepatitis A Vaccines
8. Hepatitis B Vaccines
9. Hepatitis A and B combined Vaccines
10. Herpes Zoster Vaccines

11. Human Papillomavirus (HPV) Vaccines
12. Japanese Encephalitis Vaccines
13. Rabies Vaccines
14. Varicella Vaccines
15. Yellow Fever Vaccines

O. Reg. 452/16, s. 3.

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Pharmacy Act, 1991
Loi de 1991 sur les pharmaciens

ONTARIO REGULATION 202/94
GENERAL

Consolidation Period: From December 15, 2016 to the [e-Laws currency date](#).

Last amendment: 452/16.

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This Regulation is made in English only.

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PART I INTERPRETATION

DEFINITIONS

1. In this Regulation,

“direct supervision” means supervision that is provided by a person who is physically present on the premises where the practice that is being supervised is being carried out;

“non-restricted registration” means the holding of a licence, permit, certificate or registration as a pharmacist from an authority responsible for the regulation of pharmacists in one of the states of the United States of America, or in another non-Canadian jurisdiction that has been approved by the Council, where that licence, permit, certificate or registration is not subject to any restrictions, terms, conditions or limitations, including terms, conditions or limitations that,

- (a) relate to the holder’s ability to practise independently,
- (b) require the holder to practise under supervision or direction,
- (c) require the holder to maintain a position or appointment as a condition of continued registration,
- (d) require the holder to practise only in a part of the geographical area over which the authority has jurisdiction,
- (e) restrict the holder to temporary or time-limited registration or practice,
- (f) were imposed by that authority or any committee or panel of that authority as a result of a disciplinary, registration, fitness to practise or similar proceeding, or
- (g) were placed on the holder’s registration by agreement between the holder and that authority;

“pharmacy” has the same meaning as in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*;

“remote dispensing location” has the same meaning as in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*. O. Reg. 451/10, ss. 1, 6 (1).

PART II GENERAL PROVISIONS RE CERTIFICATES OF REGISTRATION

CLASSES OF CERTIFICATES OF REGISTRATION

2. (1) The following are prescribed as classes of certificates of registration:

1. Pharmacist.
2. Registered pharmacy student.
3. Intern.
4. Pharmacy technician. O. Reg. 451/10, s. 1.

(2) Every certificate of registration that was in existence immediately before December 3, 2010 is continued as the equivalent certificate of registration with the same status under this Regulation until such time as it otherwise ceases to be effective. O. Reg. 451/10, s. 1.

(3) Where an application for a certificate of registration had been made but not finally dealt with before December 3, 2010, the application shall be dealt with in accordance with this Regulation as amended by Ontario Regulation 451/10. O. Reg. 451/10, s. 1.

APPLICATION FOR CERTIFICATE OF REGISTRATION

3. A person may apply for a certificate of registration by submitting a completed application in the form provided by the Registrar together with any supporting documentation requested by the Registrar and the applicable fees. O. Reg. 451/10, s. 1.

REQUIREMENTS FOR ISSUANCE OF CERTIFICATE OF REGISTRATION, ANY CLASS

4. (1) The following are requirements for the issuance of a certificate of registration of any class:
 1. The applicant must possess sufficient language proficiency, in either English or French, to be able to communicate and comprehend effectively, both orally and in writing.
 2. The applicant must not have been found guilty of any offence in any jurisdiction.
 3. The applicant must not be the subject of a current proceeding in respect of any offence in any jurisdiction.
 4. The applicant must not have been the subject of a finding of professional misconduct, incompetence or incapacity or any like finding in Ontario or any other jurisdiction in relation to pharmacy or any other profession or occupation and must not be the subject of any current 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.
 5. The applicant must be a Canadian citizen or permanent resident of Canada or must hold the appropriate authorization under the *Immigration and Refugee Protection Act (Canada)* to permit the applicant to engage in the practice of pharmacy in Ontario as a pharmacist, registered pharmacy student, intern or pharmacy technician in the manner permitted by the certificate of registration for which he or she has applied.
 6. The applicant's past and present conduct must afford reasonable grounds for the belief that the applicant,
 - i. will practise pharmacy with decency, honesty and integrity, and in accordance with the law,
 - ii. does not suffer from any physical or mental condition or disorder that could affect his or her ability to practise pharmacy in a safe manner,
 - iii. has sufficient knowledge, skill and judgment to competently engage in the practice of pharmacy authorized by the certificate of registration, and
 - iv. will display an appropriately professional attitude.
 7. The applicant must provide evidence satisfactory to the Registrar that the applicant will have professional liability insurance in the amount and in the form as required by the by-laws as of the anticipated date for the issuance of his or her certificate of registration.
 8. The applicant must have paid any fees required under the by-laws for the issuance of the certificate of registration for which the applicant applied. O. Reg. 451/10, s. 1.
- (2) The requirement under paragraph 8 of subsection (1) is non-exemptible. O. Reg. 451/10, s. 1.
- (3) An applicant must meet all of the requirements for registration within one year following the filing his or her application, but this does not prevent the applicant from filing a new application. O. Reg. 451/10, s. 1.
- (4) An applicant shall be deemed not to have satisfied the requirements for the issuance of a certificate of registration if the applicant makes a false or misleading statement or representation in his or her application or supporting documentation. O. Reg. 451/10, s. 1.

TERMS, ETC., OF EVERY CERTIFICATE

5. Every certificate of registration is subject to the following terms, conditions and limitations:
 1. The member shall provide to the Registrar the details of any of the following that relate to the member and that occur or arise after the registration of the member:
 - i. a finding of guilt arising in any jurisdiction relating to any offence,
 - ii. a charge arising in any jurisdiction relating to any offence,
 - iii. a finding of professional misconduct, incompetence or incapacity or any like finding in any jurisdiction in relation to pharmacy or any other profession or occupation,
 - iv. a proceeding for professional misconduct, incompetence or incapacity or any like proceeding in any jurisdiction in relation to pharmacy or any other profession or occupation.
 2. The member shall not engage in the practice of pharmacy unless the member is a Canadian citizen or permanent resident of Canada or has authorization under the *Immigration and Refugee Protection Act (Canada)* permitting the member to engage in the practice of pharmacy in Ontario in the manner permitted by the certificate of registration.
 3. The member shall immediately advise the Registrar in writing in the event the member ceases to be a Canadian citizen or permanent resident of Canada or to have authorization under the *Immigration and Refugee Protection Act (Canada)* permitting the member to engage in the practice of pharmacy in Ontario in the manner permitted by the certificate of registration.

4. If a member to whom paragraph 3 applies subsequently obtains Canadian citizenship or becomes a permanent resident of Canada or attains authorization under the *Immigration and Refugee Protection Act* (Canada) permitting the member to engage in the practice of pharmacy in Ontario permitted by the certificate of registration, the member shall immediately advise the Registrar in writing of that fact.
5. The member shall maintain professional liability insurance in the amount and in the form as required by the by-laws.
6. A member who fails to meet the condition in paragraph 5 shall immediately advise the Registrar in writing of that fact and immediately cease to engage in the practice of pharmacy until such time as the member obtains professional liability insurance as required in paragraph 5.
7. Where a member to whom paragraph 6 applies subsequently obtains professional liability insurance, the member shall notify the Registrar in writing of that fact and, if requested by the Registrar, shall provide details of that coverage. O. Reg. 451/10, s. 1.

PART III REGISTRATION — PHARMACISTS

ADDITIONAL REQUIREMENTS

6. (1) The following are additional requirements for the issuance of a certificate of registration as a pharmacist:
 1. The applicant must,
 - i. have a minimum of a baccalaureate degree in pharmacy evidencing the successful completion of a program designed to educate and train persons to be practising pharmacists which was,
 - A. awarded on or before December 31, 1993 by a constituent faculty of the Association of Faculties of Pharmacy of Canada, or
 - B. awarded by a university as a result of successful completion of a program which was, at the time of the award, accredited by the Canadian Council for Accreditation of Pharmacy Programs or by another accrediting body approved by the Council for that purpose, or
 - ii. have a university degree in pharmacy that does not meet the requirements of subparagraph i but that evidences the successful completion of a program designed to educate and train persons to be practising pharmacists, and,
 - A. have successfully completed a program that, at the time the applicant commenced it, was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B, or
 - B. have successfully completed the examination provided for in paragraph 4 on the applicant's first attempt and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B.
 2. The applicant must have successfully completed an examination in pharmaceutical jurisprudence approved by the Council for applicants for a certificate of registration as a pharmacist.
 3. Subject to subsection (5), the applicant must have successfully completed a structured practical training program approved by the Council, while holding a certificate of registration as an intern and while under the supervision of a preceptor approved by the Registration Committee.
 4. The applicant must have successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacists at a time when the examination was approved by the Council or have successfully completed another examination that has been approved by the Council for that purpose. O. Reg. 451/10, s. 1.
- (2) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 3 of subsection (1) may be completed as part of a program referred to in paragraph 1 of subsection (1), even if the applicant did not hold a certificate of registration as an intern at the time. O. Reg. 451/10, s. 1.
- (3) The requirement in paragraph 1 of subsection (1) must be met within two years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist unless the applicant,
 - (a) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in Canada, the United States of America or another jurisdiction approved by the Council;

- (b) undergoes a review of his or her practice conducted in a manner approved by the Registration Committee, meets any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pays the required fees; or
- (c) successfully completes the examination referred to in paragraph 4 of subsection (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacist. O. Reg. 451/10, s. 1.
- (4) The requirement in paragraph 2 of subsection (1) shall not be considered to be met unless the applicant is issued a certificate of registration as a pharmacist within three years of meeting that requirement. O. Reg. 451/10, s. 1.
- (5) An applicant is deemed to have met the requirement in paragraph 3 of subsection (1) if, at the time of application, the applicant,
 - (a) has successfully completed a structured practical training program which is, in the opinion of the Registration Committee at least equivalent to the program mentioned in paragraph 3 of subsection (1); or
 - (b) has other education, training or experience that is, in the opinion of a panel of the Registration Committee at least equivalent to the program mentioned in paragraph 3 of subsection (1). O. Reg. 451/10, s. 1.
- (6) The requirement in paragraph 3 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as a pharmacist within two years of meeting the requirement or within such greater time as is specified by a panel of the Registration Committee. O. Reg. 451/10, s. 1.
- (7) Subject to subsection (8), the requirement in paragraph 4 of subsection (1) is not considered to have been met unless the applicant,
 - (a) successfully completed the examination within three attempts; or
 - (b) successfully completed the examination on the applicant's fourth attempt having first successfully completed the further education or training or combination of education and training required by the examining body responsible for the administration of the examination or, if no further education or training was required by that body, the further education or training or combination of education and training, if any, specified by a panel of the Registration Committee. O. Reg. 451/10, s. 1.
- (8) Where, by virtue of subsection (7), an applicant is not considered to have met the requirement in paragraph 4 of subsection (1), the applicant may not attempt the examination again until the applicant obtains a new degree mentioned in subparagraph 1 i of subsection (1). O. Reg. 451/10, s. 1.
- (9) An applicant is only eligible to take the examination referred to in paragraph 2 of subsection (1) three times in any 24-month period. O. Reg. 451/10, s. 1.
- (10) The requirements in paragraphs 1, 3 and 4 of subsection (1) are deemed to have been met by an applicant,
 - (a) who previously held a certificate of registration as a pharmacist in Ontario; and
 - (b) who,
 - (i) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in Canada, the United States of America or another jurisdiction approved by the Council, or
 - (ii) undergoes a review of his or her practice conducted in a manner approved by the Registration Committee, meets any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pays the required fees. O. Reg. 451/10, s. 1.
- (11) An applicant who has a university degree in pharmacy mentioned in subparagraph 1 ii of subsection (1), and who successfully completes any further education or training or combination of education and training specified by a panel of the Registration Committee shall be deemed to have met the requirement in paragraph 1 of subsection (1) if the applicant,
 - (a) was registered as an intern on December 3, 2010; or
 - (b) becomes registered as an intern after December 3, 2010 but before December 3, 2011. O. Reg. 451/10, s. 1.
- (12) Subject to subsections (2), (5), (10) and (11) and sections 7 and 8, the requirements in subsection (1) are non-exemptible. O. Reg. 451/10, s. 1.
- (13) A reference in this section or section 7 to "all of the other requirements for the issuance of a certificate of registration" includes, without being limited to, a requirement set out in subsection 4 (1) or subsection (1) of this section. O. Reg. 451/10, s. 1.

MOBILITY FROM OUTSIDE CANADA

7. An applicant is deemed to have met the requirements in paragraph 1 of subsection 6 (1) if the applicant meets all the following non-exemptible requirements:

1. The applicant must,
 - i. hold a non-restricted registration in at least one jurisdiction at the time of application and have held that registration continuously for at least two years, and
 - ii. satisfy the Registrar or a panel of the Registration Committee that the applicant engaged in the full scope of practice as a pharmacist in that jurisdiction for at least 600 hours.
2. The applicant must,
 - i. satisfy the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in one or more of the jurisdictions where he or she held the non-restricted registration,
 - ii. undergo a review of his or her practice conducted in a manner approved by the Registration Committee, meet any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pay the required fees, or
 - iii. successfully complete the examination referred to in paragraph 4 of subsection 6 (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacist. O. Reg. 451/10, s. 1.

MOBILITY WITHIN CANADA

8. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of paragraphs 1, 3 and 4 of subsection 6 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacist in that jurisdiction. O. Reg. 451/10, s. 1.

(2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,

- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
- (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as a pharmacist. O. Reg. 451/10, s. 1.

(3) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 451/10, s. 1.

(4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 451/10, s. 1.

TERMS, CONDITIONS AND LIMITATIONS, PART B PHARMACIST

9. (1) Every certificate of registration of a pharmacist listed in Part B of the register is subject to the following terms, conditions and limitations:

1. The member shall not provide any care to a patient, whether direct or indirect.
2. The member shall not dispense, sell or compound drugs.
3. The member shall not supervise that part of the pharmacy where drugs are kept.
4. The member shall not be the designated manager of a pharmacy within the meaning of the *Drug and Pharmacies Regulation Act*.
5. The member shall not supervise the practice of pharmacy of an intern, registered pharmacy student or pharmacy technician.
6. The member shall, when working in a pharmacy or any other environment where patient care is being provided, clearly identify him or herself as a non-practising pharmacist. O. Reg. 451/10, s. 1.

(2) With the prior written approval of the Registrar, and despite paragraphs 1 and 2 of subsection (1), a pharmacist listed in Part B of the register may dispense, sell or compound a drug and provide care to a patient under the direct supervision of a pharmacist who is registered in Part A of the register where the sole purpose is to assist the member in preparing to meet the

requirements specified in subsection 46 (3) to transfer a member holding a certificate of registration as a pharmacist who is registered in Part B of the register to Part A of the register. O. Reg. 451/10, s. 1.

(3) Where a member wishes to seek the approval of the Registrar under subsection (2), the member shall provide to the Registrar, in writing, the name of the pharmacist or pharmacists who will be providing the required supervision, the name and address of the pharmacy or pharmacies at which the member proposes to practise under that supervision and the proposed date upon which the member wishes to commence practice. O. Reg. 451/10, s. 1.

(4) Any approval provided by the Registrar under subsection (2) must specify,

- (a) the name of the pharmacist or pharmacists who will be required to supervise the member;
- (b) the name and address of the pharmacy or pharmacies where the member will be practising; and
- (c) the term of the approval, which must not exceed six months. O. Reg. 451/10, s. 1.

(5) Where the Registrar is satisfied that it is appropriate to do so the Registrar may extend the term of the approval provided under subsection (2) but in no case may the combined term exceed one year unless a panel of the Quality Assurance Committee approves of a further extension. O. Reg. 451/10, s. 1.

PART IV REGISTRATION — REGISTERED PHARMACY STUDENTS

ADDITIONAL REQUIREMENT

10. (1) It is an additional requirement for the issuance of a certificate of registration as a registered pharmacy student that the applicant must,

- (a) have been accepted as a student in a university program referred to in subparagraph 1 i of subsection 6 (1) or in an approved program referred to in sub-subparagraph 1 ii A of that subsection;
- (b) be engaged in attaining any education or training referred to in sub-subparagraph 1 ii B of subsection 6 (1); or
- (c) be engaged in attaining any education or training specified by a panel of the Registration Committee as a condition for the issuance of another certificate of registration, other than a certificate of registration as a pharmacy technician. O. Reg. 451/10, s. 2.

(2) Subject to section 11, the requirement in subsection (1) is non-exemptible. O. Reg. 451/10, s. 2.

MOBILITY WITHIN CANADA

11. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of subsection 10 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacy student in that jurisdiction. O. Reg. 451/10, s. 2.

(2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,

- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
- (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as a registered pharmacy student. O. Reg. 451/10, s. 2.

(3) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 451/10, s. 2.

(4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 451/10, s. 2.

TERMS, CONDITIONS AND LIMITATIONS

12. (1) Every certificate of registration as a registered pharmacy student is subject to the following terms, conditions and limitations:

1. The member,

- i. in the case of a member to whom subsection 11 (1) does not apply, shall only engage in the practice of pharmacy while enrolled in and actively participating in a program provided for in subsection 10 (1) or while actively engaged in any education or training specified in that subsection, and

- ii. in the case of a member to whom subsection 11 (1) applies, shall only engage in the practice of pharmacy while enrolled in and actively participating in an educational program that is a requirement for the issuance of an applicable out-of-province certificate authorizing practice as an intern or pharmacist.
2. The member may only engage in the practice of pharmacy,
 - i. while under the direct supervision of a member who holds a certificate of registration as a pharmacist, or
 - ii. where a program or any education or training provided for in subsection 10 (1) includes a clinical component in a premises that is not a pharmacy but at which drugs may be prescribed or dispensed, while under the direct supervision of a member of a College within the meaning of the *Regulated Health Professions Act, 1991* who has been approved for this purpose by the faculty that provides the program, education or training.
3. Despite subparagraph 2 ii, the member shall not dispense, compound or sell a drug unless under the direct supervision of a member holding a certificate of registration as a pharmacist.
4. Despite subparagraph 2 ii, the member may not supervise that part of the pharmacy where drugs are kept.
5. The member may neither delegate a controlled act nor accept the delegation of a controlled act. O. Reg. 451/10, s. 2.
- (2) A certificate of registration as a registered pharmacy student automatically expires when the member is issued a certificate of registration as a pharmacist or an intern. O. Reg. 451/10, s. 2.
- (3) A certificate of registration as a registered pharmacy student automatically expires,
 - (a) in the case of a member engaged in a program referred to in subparagraph 1 i of subsection 6 (1), when the member is refused readmission to the program, ceases to be enrolled in the program or ceases to actively participate in the program;
 - (b) in the case of a member engaged in an approved program referred to in sub-subparagraph 1 ii A of subsection 6 (1), two years after registration as a registered pharmacy student unless that period of time is extended by a panel of the Registration Committee;
 - (c) in the case of a member engaged in attaining any education or training or combination of education and training referred to in sub-subparagraph 1 ii B of subsection 6 (1) or in attaining any education or training or combination of education and training required by a panel of the Registration Committee as a condition for the issuance of another class of certificate of registration, on the date specified by the panel in its decision or, if no date was specified, one year from that decision, unless extended by a panel of the Registration Committee; and
 - (d) in the case of a member whose application for a certificate of registration as a registered pharmacy student was considered under subsection 11 (1), on the date on which the member ceases to hold an out-of-province certificate that is equivalent to a certificate of registration as a registered pharmacy student. O. Reg. 451/10, s. 2.

**PART V
REGISTRATION — INTERNS**

ADDITIONAL REQUIREMENTS

13. (1) The following are additional requirements for the issuance of a certificate of registration as an intern:
 1. The applicant must,
 - i. have a minimum of a baccalaureate degree in pharmacy evidencing the successful completion of a program designed to educate and train persons to be practising pharmacists which was,
 - A. awarded on or before December 31, 1993 by a constituent faculty of the Association of Faculties of Pharmacy of Canada, or
 - B. awarded by a university as a result of successful completion of a program which was, at the time of the award, accredited by the Canadian Council for Accreditation of Pharmacy Programs or by another accrediting body approved by the Council for that purpose, or
 - ii. have a university degree in pharmacy that does not meet the requirements of subparagraph i but that evidences the successful completion of a program designed to educate and train persons to be practising pharmacists, and,
 - A. have successfully completed a program that, at the time the applicant commenced it, was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B, or
 - B. have successfully completed the examination provided for in paragraph 4 of subsection 6 (1) on the applicant's first attempt and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B.

2. Subject to subsections (3) and (4), the applicant must have successfully completed a structured practical training program approved by the Council while holding a certificate of registration as a registered pharmacy student and while under the direct supervision of a preceptor approved by the Registration Committee. O. Reg. 451/10, s. 3.
- (2) Subject to subsections (3) and (4) and section 14, the requirements in subsection (1) are non-exemptible. O. Reg. 451/10, s. 3.
 - (3) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 2 of subsection (1) may be completed as part of a program referred to in paragraph 1 of subsection (1), even if the applicant did not hold a certificate of registration as a registered pharmacy student at the time. O. Reg. 451/10, s. 3.
 - (4) An applicant shall be deemed to have met the requirement in paragraph 2 of subsection (1) if, at the time of application, the applicant holds a non-restricted registration as a pharmacist, has held that registration for at least two years and the applicant,
 - (a) satisfies the Registrar or a panel of the Registration Committee that the applicant engaged in the full scope of practice as a pharmacist in that jurisdiction for at least 600 hours;
 - (b) successfully completed a structured practical training program which is, in the opinion of a panel of the Registration Committee at least equivalent to a program mentioned in paragraph 2 of subsection (1), or has other education, training or experience that, in the opinion of a panel of the Registration Committee is at least equivalent to the program mentioned in paragraph 2 of subsection (1); or
 - (c) successfully completed the education and obtained the additional training or experience that a panel of the Registration Committee has specified. O. Reg. 451/10, s. 3.
 - (5) The requirement of paragraph 2 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as an intern within one year of meeting that requirement or within such greater time as is specified by a panel of the Registration Committee. O. Reg. 451/10, s. 3.
 - (6) An applicant who has a university degree in pharmacy mentioned in subparagraph 1 ii of subsection (1), and who successfully completes any further education or training or combination of education and training specified by a panel of the Registration Committee shall be deemed to have met the requirement in paragraph 1 of subsection (1) if the applicant,
 - (a) was registered as a registered pharmacy student on December 3, 2010; or
 - (b) becomes registered as a registered pharmacy student after December 3, 2010 but before December 3, 2011. O. Reg. 451/10, s. 3.

MOBILITY WITHIN CANADA

14. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of subsection 13 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as an intern in that jurisdiction. O. Reg. 451/10, s. 3.
 - (2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,
 - (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
 - (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as an intern. O. Reg. 451/10, s. 3.
 - (3) An applicant referred to in subsection (1) is deemed to meet the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 451/10, s. 3.
 - (4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 451/10, s. 3.

TERMS, CONDITIONS AND LIMITATIONS

15. (1) Every certificate of registration as an intern is subject to the following terms, conditions and limitations:
 1. The member shall only engage in the practice of pharmacy,
 - i. when practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies, while under the direct supervision of a member holding a certificate of registration as a pharmacist, or
 - ii. in all other cases, while under the supervision of a member holding a certificate of registration as a pharmacist.
 2. The member shall not supervise that part of the pharmacy where drugs are kept.
 3. The member shall not delegate a controlled act. O. Reg. 451/10, s. 3.

- (2) A certificate of registration as an intern automatically expires,
 - (a) when the member is issued a certificate of registration as a pharmacist; or
 - (b) one year from the date on which it was issued unless a panel of the Registration Committee specifies otherwise. O. Reg. 451/10, s. 3.

PART VI
REGISTRATION — PHARMACY TECHNICIANS

ADDITIONAL REQUIREMENTS

16. (1) The following are additional requirements for the issuance of a certificate of registration as a pharmacy technician:
- 1. The applicant must,
 - i. have successfully completed a pharmacy technician program designed to educate and train persons to be pharmacy technicians which was, at the time the applicant graduated, accredited by the Canadian Council for Accreditation of Pharmacy Programs or such other accrediting body approved by the Council for that purpose,
 - ii. have successfully completed a pharmacy technician program designed to educate and train persons to be pharmacy technicians other than one referred to in subparagraph i or have a university degree or university diploma in pharmacy and, in either case,
 - A. must have successfully completed a program that, at the time the applicant commenced was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i, or
 - B. must have successfully completed the examination referred to in paragraph 4 on the applicant's first attempt, and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i,
 - iii. have successfully completed a program before January 1, 2015 that, at the time the applicant commenced was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i, or
 - iv. have met the requirements of paragraph 1 of subsection 6 (1).
 - 2. The applicant must have successfully completed an examination in pharmaceutical jurisprudence approved by the Council for applicants for a certificate of registration as a pharmacy technician.
 - 3. The applicant must have successfully completed a structured practical training program approved by the Council and must have done so under the direct supervision of a preceptor approved by the Registration Committee.
 - 4. The applicant must have successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacy technicians or successfully completed another examination that has been approved by the Council for that purpose. O. Reg. 451/10, s. 4.
- (2) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 3 of subsection (1) may be completed as part of a program referred to in subparagraph 1i of subsection (1) or sub-subparagraph 1 ii A of subsection (1). O. Reg. 451/10, s. 4.
- (3) The requirement in paragraph 1 of subsection (1) must be met within two years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacy technician unless the applicant,
- (a) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act under the supervision or direction of a pharmacist for at least 600 hours during the three years before the date on which the applicant met all the other requirements for the issuance of a certificate of registration as a pharmacy technician and did so while practising as a pharmacy technician in Canada or in another jurisdiction approved by the Council;
 - (b) meets any requirements regarding any further education or training or a combination of education or training, if any, set by a panel of the Registration Committee within the time set by the panel; or
 - (c) successfully completes the examination referred to in paragraph 4 of subsection (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacy technician. O. Reg. 451/10, s. 4.
- (4) The requirement of paragraph 2 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as a pharmacy technician within three years of meeting that requirement. O. Reg. 451/10, s. 4.

- (5) An applicant is only eligible to take the examination referred to in paragraph 2 of subsection (1) three times in any 24-month period. O. Reg. 451/10, s. 4.
- (6) The requirement in paragraph 3 of subsection (1) shall not be considered to have been met unless the applicant,
- is issued a certificate of registration as a pharmacy technician within two years of meeting that requirement;
 - satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act under the supervision or direction of a pharmacist for at least 600 hours during the three years before the date on which the applicant met all the other requirements for the issuance of a certificate of registration as a pharmacy technician and did so while practising as a pharmacy technician in Canada or in another jurisdiction approved by the Council; or
 - meets any requirements regarding any further education or training or a combination of education or training, if any, set by a panel of the Registration Committee within the time set by the panel. O. Reg. 451/10, s. 4.
- (7) Subject to subsection (8), paragraph 4 of subsection (1) is not considered to have been met unless the applicant,
- successfully completed the examination within three attempts; or
 - successfully completed the examination on the applicant's fourth attempt having first successfully completed the further education or training or combination of education and training required by the examining body responsible for the administration of the examination or, if no further education or training was required by that body, the further education or training or combination of education and training, if any, that was specified by a panel of the Registration Committee. O. Reg. 451/10, s. 4.
- (8) Where, by virtue of subsection (7), an applicant is not considered to have met the requirement in paragraph 4 of subsection (1), the applicant may not attempt the examination again until the applicant successfully completes a new program mentioned in subparagraph 1 i of subsection (1). O. Reg. 451/10, s. 4.
- (9) An applicant shall be deemed not to have met the requirement of subparagraph 1 iii of subsection (1) unless, before January 1, 2012 and before commencing the program referred to in that subparagraph, the applicant successfully completed,
- the College's Pharmacy Technician Certification Examination;
 - the Pharmacy Technician Evaluating Examination of the Pharmacy Examining Board of Canada; or
 - another examination approved by the Council. O. Reg. 451/10, s. 4.
- (10) Subject to subsection (2) and section 17, the requirements in subsection (1) are non-exemptible. O. Reg. 451/10, s. 4.
- (11) A reference in this section to "all of the other requirements for the issuance of a certificate of registration" includes, without being limited to, a requirement set out in subsection 4 (1) or subsection (1) of this section. O. Reg. 451/10, s. 4.

MOBILITY WITHIN CANADA

17. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of paragraphs 1, 3 and 4 of subsection 16 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacy technician in that jurisdiction. O. Reg. 451/10, s. 4.
- (2) Without in any way limiting the generality of subsection (1), "good standing" shall include the fact that,
- the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
 - the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority in that issued the applicant that out-of-province certificate as a pharmacy technician. O. Reg. 451/10, s. 4.
- (3) An applicant referred to in subsection (1) is deemed to meet the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant's out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 451/10, s. 4.
- (4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 451/10, s. 4.

TERMS, CONDITIONS AND LIMITATIONS

18. Every certificate of registration as a pharmacy technician is subject to the following terms, conditions and limitations:
- The member shall only engage in the practice of pharmacy,
 - when practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies, other than a remote dispensing location, while under the direct supervision of a member holding a certificate of registration as a pharmacist, or

- ii. in all other cases, while under the supervision or direction of a member holding a certificate of registration as a pharmacist.
2. When practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies the member shall not supervise that part of a pharmacy where drugs are kept.
3. The member shall not delegate a controlled act.
4. The member shall not provide information or education relating to drug use, either to or for a patient, where the provision of the information requires therapeutic knowledge, clinical analysis or clinical assessment. O. Reg. 451/10, ss. 4, 6 (2).

PART VII SUSPENSIONS, RESIGNATIONS, REINSTATEMENTS, ETC.

ADMINISTRATIVE SUSPENSIONS

19. (1) If a member fails to provide information about the member in the manner and in the form as required under the by-laws, the Registrar may give the member notice of intention to suspend the member and may suspend the member's certificate of registration for failure to provide the information 60 days after notice is given. O. Reg. 451/10, s. 5.

(2) Where the Registrar suspends a member's certificate of registration under subsection (1), the Registrar shall lift the suspension upon being satisfied that the required information has been filed with the College and that any fees required for the lifting of that suspension has been paid. O. Reg. 451/10, s. 5.

20. (1) If, pursuant to the by-laws, the College requests evidence that the member holds professional liability insurance in the amount and in the form as required by the by-laws and the member fails to provide that evidence within 14 days of having been requested to do so, the Registrar shall immediately give the member notice of intention to suspend the member and may suspend the member's certificate of registration for failure to provide the evidence 30 days after notice is given. O. Reg. 451/10, s. 5.

(2) Where the Registrar suspends the member's certificate of registration under subsection (1), the Registrar shall lift that suspension upon being satisfied that the member holds professional liability insurance in the amount and in the form required by the by-laws and that any fee required for the lifting of that suspension has been paid. O. Reg. 451/10, s. 5.

21. Where the Registrar suspends a member's certificate of registration under section 24 of the Health Professions Procedural Code for failure to pay a fee, the Registrar shall lift the suspension upon being satisfied that the member,

- (a) has paid all amounts owed to the College;
- (b) holds professional liability insurance in the amount and in the form required by the by-laws; and
- (c) pays any fees required for the lifting of that suspension. O. Reg. 451/10, s. 5.

DEEMED RESIGNATIONS

22. (1) A member shall be deemed to have resigned where,

- (a) the member's certificate of registration was suspended for failure to pay a fee that the member was required to pay in accordance with the regulations or by-laws and that suspension continued for 120 days; or
- (b) the member's certificate of registration was suspended pursuant to subsection 19 (1) or subsection 20 (1) and the suspension continued for 60 days. O. Reg. 451/10, s. 5.

(2) The resignation is effective,

- (a) in the case of a resignation under clause (1) (a), on the 121st day following the commencement of that suspension;
- (b) in the case of a suspension under clause (1) (b), on the 61st day following the commencement of the suspension. O. Reg. 451/10, s. 5.

RETURN OF CERTIFICATE, ETC.

23. A member who resigns, or whose certificate of registration is suspended or revoked shall, if so requested, immediately return to the College,

- (a) his or her certificate of registration; and
- (b) any card or other form of identification issued to him or her by the College for the purpose of identifying him or her as a member of the College. O. Reg. 451/10, s. 5.

REINSTATEMENT

24. (1) A former member who held a certificate of registration as a pharmacist or pharmacy technician and who resigned as a member of the College may apply for the reinstatement of his or her certificate of registration by submitting a completed application to the Registrar in the form provided by the Registrar. O. Reg. 451/10, s. 5.

- (2) Subject to subsections (3), (4) and (6), the Registrar may reinstate the former member's certificate of registration if,
- (a) the former member has paid,
 - (i) the required reinstatement fee,
 - (ii) the annual fee for the year in which the certificate of registration is to be reinstated, if not previously paid,
 - (iii) the annual fee for the year in which the former member resigned or was deemed to have resigned, if not previously paid unless the Registrar is satisfied that the former member did not engage in the practice of pharmacy in Ontario during that year, and
 - (iv) any other money owed by the former member to the College at the date the application for reinstatement is submitted, including, without being limited to, any penalty fees that were due at the time that he or she ceased to be a member and any costs or expenses ordered to be paid under section 53.1 of the Health Professions Procedural Code, any costs awarded to the College by a Court and any amount owing to the College under a by-law or former regulation made under the Act;
 - (b) the application for reinstatement was submitted to the Registrar within three years of the date on which the former member resigned or in the case of a former member who was deemed to have resigned under subsection 22 (1), three years from the date on which the former member was suspended where that suspension resulted in a deemed resignation; and
 - (c) the application meets the requirement set out in paragraph 7 of subsection 4 (1) with necessary modifications. O. Reg. 451/10, s. 5.
- (3) A former member is ineligible for reinstatement under subsection (2) if he or she,
- (a) is the subject of a proceeding for professional misconduct, incompetence or incapacity in Ontario or any like proceeding in any other jurisdiction in relation to the practice of pharmacy or another profession, or was the subject of such a proceeding, other than a proceeding that was completed on its merits;
 - (b) was, at the time he or she ceased to be a member or at any time since, the subject of a proceeding in respect of,
 - (i) any criminal offence in any jurisdiction,
 - (ii) any offence relating to the use, possession or sale of drugs in any jurisdiction,
 - (iii) any offence arising in any jurisdiction relating to the practice of pharmacy or any other profession or occupation, or
 - (iv) any offence under the *Controlled Drugs and Substances Act* (Canada);
 - (c) was, after he or she ceased to be a member, found guilty of,
 - (i) any criminal offence in any jurisdiction,
 - (ii) any offence relating to the use, possession or sale of drugs in any jurisdiction,
 - (iii) any offence arising in any jurisdiction relating to the practice of pharmacy or any other profession or occupation, or
 - (iv) any offence under the *Controlled Drugs and Substances Act* (Canada);
 - (d) is the subject of an inquiry or investigation by the Registrar, a committee, a panel of a committee or a board of inquiry of the College, or was the subject of such an inquiry or investigation, that was not completed on its merits or which resulted in the member's resignation;
 - (e) was, at the time he or she ceased to be a member, the subject of an outstanding order or requirement of a committee, a panel of a committee, or a board of inquiry of the College;
 - (f) was, at the time he or she ceased to be a member, in breach of an order or requirement of a committee, a panel of a committee, or a board of inquiry of the College;
 - (g) was, at the time he or she ceased to be a member, in violation of a decision of a panel of the Inquiries, Complaints and Reports Committee or of any predecessor committee, including a decision requiring the member to attend to be cautioned;
 - (h) was, at the time he or she ceased to be a member, in breach of any written agreement with or undertaking provided to the College; or
 - (i) had, at the time he or she ceased to be a member, terms, conditions or limitations on his or her certificate of registration, other than those applicable to all members of the class of certificate of registration he or she previously held. O. Reg. 451/10, s. 5.
- (4) A former member must meet all of the requirements set out in subsection (2) within one year of submitting his or her application for reinstatement. O. Reg. 451/10, s. 5.

(5) Nothing in this section prevents a former member from making any number of applications for reinstatement or from making an application for a new certificate of registration. O. Reg. 451/10, s. 5.

(6) A former member who is seeking reinstatement of a certificate of registration as a pharmacist and who is otherwise eligible for the reinstatement shall be reinstated into Part B of the register unless the former member satisfies the Registrar that,

- (a) the former member did not resign at a time when the member had been selected for but had not successfully completed a practice review under the College's Quality Assurance Program; and
- (b) the member had performed at least 600 hours of patient care in Canada, the United States of America or another jurisdiction approved by the Council during the period of three years commencing immediately before the date of the member's resignation. O. Reg. 451/10, s. 5.

REINSTATEMENT, PURSUANT TO ORDER

25. If a former member's certificate of registration is ordered to be reinstated by a panel of the Discipline Committee or of the Fitness to Practise Committee, the Registrar shall reinstate the certificate of registration upon payment of,

- (a) the required reinstatement fee; and
- (b) the annual fee for the year in which the certificate of registration is to be reinstated, if not previously paid. O. Reg. 451/10, s. 5.

PART VII.1 NOTICES OF MEETINGS AND HEARINGS

NOTICE OF MEETINGS

26. (1) The Registrar shall ensure that notice of every Council meeting that is required to be open to the public under the Act is given in accordance with this section. O. Reg. 451/10, s. 5.

(2) The notice must be published at least 14 days before the date of the meeting in a daily newspaper of general circulation throughout Ontario. O. Reg. 451/10, s. 5.

(3) The notice must be in English and French. O. Reg. 451/10, s. 5.

(4) The notice must contain the following information:

1. The date, time and place of the meeting.
2. A statement of the purpose of the meeting. O. Reg. 451/10, s. 5.

(5) The Registrar shall provide the information contained in the notice to every person who requests it by telephone. O. Reg. 451/10, s. 5.

NOTICE OF HEARINGS

27. (1) The Registrar shall ensure that the information concerning an impending hearing by a panel of the Discipline Committee to deal with allegations of professional misconduct or incompetence made against a member is given, in accordance with this section, to a person who requests the information. O. Reg. 451/10, s. 5.

(2) The information shall be given,

- (a) at least 14 days before the date of the hearing, if the request is received 14 days before the date of the hearing; or
- (b) as soon as possible after the request is made, if the request is received after that time but before the date of the hearing. O. Reg. 451/10, s. 5.

(3) The information given shall be as follows:

1. The name of the member against whom the allegations have been made.
2. The member's principal place of practice.
3. The date, time and place of the hearing.
4. A statement of the purpose of the hearing. O. Reg. 451/10, s. 5.

(4) The Registrar shall provide the information in French to a person who requests that the information be provided in French, wherever reasonably possible. O. Reg. 451/10, s. 5.

PART VII.2 ADVERTISING

ADVERTISING

28. (1) In this section,

“advertisement” includes an announcement, directory listing or other form of communication similar to an advertisement;

“drug services” means one or more of the compounding, dispensing or sale by retail of drugs or the provision of information or advice with respect to drugs. O. Reg. 451/10, s. 5; O. Reg. 59/11, s. 1 (1, 2).

(2) A member shall not, through any medium, publish, display, distribute or use, or permit, directly or indirectly, the publication, display, distribution or use through any medium of, an advertisement relating to drug services that,

- (a) is false, misleading or deceptive, whether as a result of the inclusion of information or the omission of information;
- (b) is not readily comprehensible to the persons to whom it is directed;
- (c) is not dignified and in good taste;
- (d) contains anything that cannot be verified;
- (e) contains testimonials, comparative statements or endorsements;
- (f) contains a reference to a member’s area of practice or to a procedure or treatment available from a member practising in the pharmacy, unless the advertisement discloses whether or not the member has an area of expertise and, if the member does have such an area of expertise, the particular expertise;
- (g) contains references to a particular brand of equipment used to assist in providing drug services;
- (h) contains information that is not relevant to the choice of a pharmacist; or
- (i) contains any representations as to the safety or effectiveness or an indication for use of any drug referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*.
- (j) REVOKED: O. Reg. 59/11, s. 1 (4).

O. Reg. 451/10, s. 5; O. Reg. 59/11, s. 1 (3, 4).

(3) An advertisement by a member that includes price information relating to drugs referred to in Schedule I established by the regulations under the Drug and Pharmacies Regulation Act shall include the price information for at least 15 different drugs, 10 of which each belong to a different one of the following drug classifications:

1. Anti-infective agents.
2. Antineoplastic agents.
3. Autonomic agents.
4. Blood formation and coagulation drugs.
5. Cardiovascular drugs.
6. Central nervous system drugs.
7. Diagnostic agents.
8. Electrolytic, caloric and water balance drugs.
9. Cough preparations.
10. Eye, ear, nose and throat preparations.
11. Gastrointestinal drugs.
12. Gold compounds.
13. Heavy metal antagonists.
14. Hormones and substitutes.
15. Oxytocics.
16. Skin and mucous membrane preparations.
17. Spasmolytics.
18. Unclassified therapeutic agents.
19. Vitamins. O. Reg. 451/10, s. 5; O. Reg. 59/11, s. 1 (5).

(4) Where an advertisement by a member includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*, the advertisement shall include at a minimum the following information with respect to each drug:

1. The quantity of the drug being advertised at the advertised price.

2. The total cost for the drug to the purchaser including any dispensing fee.
3. The time period during which the advertised price will be available. O. Reg. 59/11, s. 1 (6).

(5) An advertisement by a member that includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act* shall include, in addition to the price information referred to in subsection (4), the following information with respect to each advertised drug:

1. The strength of the drug.
2. The brand name of the drug.
3. The dosage form of the drug. O. Reg. 59/11, s. 1 (6).

(6) Where an advertisement by a member includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*, equal prominence shall be given to each drug and, for each of those drugs, equal prominence shall be given to all the information required under subsections (4) and (5). O. Reg. 59/11, s. 1 (6).

(7), (8) REVOKED: O. Reg. 59/11, s. 1 (6).

PROFESSIONAL MISCONDUCT RE ADVERTISING

29. It is professional misconduct for the purposes of clause 51 (1) (c) of the Health Professions Procedural Code for a member who advertises price information with respect to a drug referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act* to charge any purchaser, including the executive officer under the *Ontario Drug Benefit Act* more for the drug than the member has advertised, pursuant to paragraph 2 of subsection 28 (4), as the total cost for the drug to the purchaser including any dispensing fee. O. Reg. 59/11, s. 2.

CLARIFICATION RE APPLICATION OF PART

30. Nothing in this Part prohibits a member from publishing, displaying, distributing or using, or permitting directly or indirectly the publication, display, distribution or use of, an advertisement that relates solely to the co-payment or dispensing fee charged by the member for supplying a drug that is a listed drug product under the *Ontario Drug Benefit Act* to an eligible person under that Act. O. Reg. 451/10, s. 5.

PART VII.3 CONTROLLED ACTS

INTERPRETATION

31. ~~§(1)~~ Subject to subsection (2), in this Part,

“adapt” means to change a patient’s prescription respecting,

- (a) the dose of the prescribed drug,
- (b) the dosage form of the prescribed drug,
- (c) the directions for use of the prescribed drug, or
- (d) the route of administration for taking the prescribed drug,

but does not include therapeutic substitution;

“Part A pharmacist” means a member who holds a certificate of registration as a pharmacist and who is listed in Part A of the register;

“prescriber” means a person who is authorized under the laws of a province or territory of Canada to give a prescription within the scope of his or her practice of a health profession;

“prescription” means a direction from a prescriber directing the dispensing of a drug or mixture of drugs for a specific patient;

“renew” means to provide a patient with a prescription that repeats a prescription previously provided to that patient;

“therapeutic substitution” means the substitution of a drug that contains chemically different active ingredients that are considered to be therapeutically equivalent. O. Reg. 302/12, s. 1.

(2) As the term is used in subsection 36(2.1) “adapt” means to change a patient’s prescription respecting,

(a) the dose and regime of the prescribed drug,

– (b) the dosage form of the prescribed drug,

(c) the de-prescribing of the prescribed drug, or

– (d) the part-filling of the prescription.

[but does not include therapeutic substitution.](#)

32. (1) Where the provisions of this Part are inconsistent with a law of Canada respecting prescriptions, including those related to a targeted substance, the law of Canada shall prevail and the provisions of this Part to the extent they are inconsistent with that law shall not apply. O. Reg. 302/12, s. 1.

(2) Where the provisions of this Part are inconsistent with the provisions of the *Narcotics Safety and Awareness Act, 2010*, the provisions of that Act shall prevail and the provisions of this Part, to the extent they are inconsistent with that Act, shall not apply. O. Reg. 302/12, s. 1.

CONTROLLED ACTS

33. A member shall not perform a controlled act under paragraph 2, 3, 4 or 5 of subsection 4 (1) of the Act except in accordance with this Part. O. Reg. 302/12, s. 1.

34. (1) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) who meets all the requirements in subsection (3) is authorized to perform the following acts:

1. Administering a substance specified in Schedule 1 by injection to a patient.
2. Administering a substance specified in Schedule 2 by inhalation to a patient. O. Reg. 452/16, s. 1 (1).

(2) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform an act provided for in subsections (1), (4) and (5), subject to the terms, conditions and limitations imposed on his or her certificate of registration. O. Reg. 302/12, s. 1; O. Reg. 452/16, s. 1 (2).

(3) A member may only perform an act provided for in subsection (1) if he or she complies with the following:

1. The member may only perform the act for the purpose of patient education and demonstration, and before performing the act,
 - i. must explain that purpose to the patient or his or her authorized agent, and
 - ii. must receive an informed consent from the patient or his or her authorized agent.
2. The member shall ensure that he or she only performs the act in an environment that is clean, safe, private and comfortable for the patient.
3. The member shall ensure that appropriate infection control procedures are in place.
4. The member must possess sufficient knowledge, skill and judgment respecting the substance to be administered, and sufficient understanding of the condition of the patient, to be able to administer the substance safely.
5. The member must consider whether administering a substance by injection or inhalation to the patient is appropriate, given the known risks and benefits to the patient and the safeguards and resources available to safely manage the outcome after administration and any other relevant circumstances.
6. The member must maintain a patient record that includes,
 - i. the name and address of the patient,
 - ii. the name and address of the member,
 - iii. the date the act was performed,
 - iv. the name, strength (where applicable) and quantity of the substance that the member administered to the patient,
 - v. the circumstances relating to the administration of the substance to the patient and any adverse reaction experienced by the patient, and
 - vi. confirmation that an informed consent was given by the patient or his or her authorized agent. O. Reg. 302/12, s. 1.

(4) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) is authorized to administer influenza vaccine by injection to a patient who is five years of age or older, if the member,

- (a) administers the vaccine in accordance with Ontario's Universal Influenza Immunization Program as described on the Ministry's website;
- (b) receives an informed consent from the patient or his or her authorized agent; and
- (c) meets all the requirements in paragraphs 2 to 6 of subsection (3). O. Reg. 302/12, s. 1; O. Reg. 452/16, s. 1 (3).

(5) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) is authorized to administer a vaccine from one of the vaccines specified in Schedule 3 by injection to a patient who is five years of age or older, if the member,

- (a) receives an informed consent from the patient or his or her authorized agent;

- (b) meets all the requirements in paragraphs 2 to 6 of subsection (3); and
- (c) notifies the patient's primary care provider (if any) within a reasonable time that the member administered a vaccine to the patient and provides details respecting the administration. O. Reg. 452/16, s. 1 (4).

35. (1) For the purposes of paragraph 3 of subsection 4 (1) of the Act, a member referred to in subsection (3) who complies with the other requirements of this section is authorized to prescribe the following specified drugs:

- 1. Varenicline Tartrate.
- 2. Bupropion Hydrochloride. O. Reg. 302/12, s. 1.

(2) A drug mentioned in subsection (1) may only be prescribed by a member for the sole purpose of smoking cessation. O. Reg. 302/12, s. 1.

(3) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform the act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration. O. Reg. 302/12, s. 1.

- (4) A member may only prescribe a drug under this section if he or she,
 - (a) possesses sufficient knowledge, skill and judgment respecting the drug and the patient's condition to prescribe the drug for the patient;
 - (b) has considered whether prescribing the drug for the patient is appropriate, given the known risks and benefits of prescribing the drug for the patient and other relevant factors respecting the patient;
 - (c) gives the prescription to the patient or his or her authorized agent;
 - (d) advises the patient or his or her authorized agent, at the time of giving the prescription, that he or she may elect to take it to a pharmacy of his or her choosing for dispensing;
 - (e) notifies the patient's primary care provider (if any) within a reasonable time, that the member prescribed a drug for the patient and provides details respecting the prescription; and
 - (f) complies with the additional requirements under sections 37 and 38. O. Reg. 302/12, s. 1.

36. (1) For the purposes of paragraph 4 of subsection 4 (1) of the Act, a member referred to in subsection (3) who complies with the other provisions of this section is authorized to perform the following acts:

- 1. Adapting a patient's prescription.
- 2. Renewing a patient's prescription for the purpose of continuity of care. O. Reg. 302/12, s. 1.

(2) ~~Subsection~~Subject to subsection (2.1), subsection (1) does not authorize a member referred to in subsection (3) to adapt or renew a prescription for a controlled substance as defined in the *Controlled Drugs and Substances Act* (Canada) or a drug designated as a monitored drug by the regulations under the *Narcotics Safety and Awareness Act, 2010*. O. Reg. 302/12, s. 1.

(2.1) Subsection (2) does not apply to adapting or renewing a patient's prescription during the period of time in which the "Subsection 56(1) Class Exemption for Patients, Practitioners and Pharmacists Prescribing and Providing Controlled Substances in Canada During the Coronavirus Pandemic" issued by Health Canada on March 19, 2020 (the "Health Canada Exemption") is in effect.

(3) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform an act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration. O. Reg. 302/12, s. 1.

(4) A member may only perform an act provided for in subsection (1) if he or she complies with the following:

- 1. The member must either possess the patient's prescription to be adapted or renewed or,
 - i. receive a copy of the prescription directly from the pharmacy where the prescription was dispensed to the patient,
 - ii. be satisfied based on verbal confirmation from a pharmacist at the pharmacy where the prescription was dispensed to the patient as to the existence and details of the prescription, ~~or~~
 - iii. have access to the medical record that contains information about the prescription, or
- iii.i during the period of time in which the Health Canada Exemption is in effect, where the conditions in subparagraphs i, ii, and iii cannot be met, be satisfied as to the existence and details of the prescription from an alternative source, including, but not limited to, the prescription label, the prescription receipt with medication history, a photograph of the prescription, or a facsimile of the prescription.

- 2. If the member is renewing a prescription, he or she must not prescribe a quantity of the drug that exceeds the lesser of,
 - i. the quantity that was originally prescribed, including any refills that were authorized by the prescriber, and

- ii. a six months' supply.
3. The member must, within a reasonable time, notify the prescriber identified on the prescription adapted or renewed by the member, as well as the patient's primary care provider if the member knows that the patient has such a care provider other than the prescriber, providing details about the patient's prescription, when the member,
 - i. renews a patient's prescription, or
 - ii. adapts a patient's prescription, if, in the member's opinion,
 - A. adapting the prescription is clinically significant in relation to the patient, or
 - B. the notification is necessary to support the patient's care.
4. At the time that the member adapts or renews the patient's prescription, the member must advise the patient or his or her authorized agent,
 - i. that he or she is entitled to the prescription, and
 - ii. that he or she may take the prescription to a pharmacy of his or her choosing for dispensing.
5. The member must comply with the additional requirements under sections 37 and 38. O. Reg. 302/12, s. 1.
- 37.** A member who performs an act provided for in section 35 or 36 must ensure that the following information is recorded on the prescription:
 1. The name and address of the patient for whom the drug is prescribed.
 2. The name, strength (where applicable) and quantity of the prescribed drug.
 3. Directions for the use of the drug, including its dose, frequency, route of administration and any special instructions.
 4. The name, address, telephone number and College registration number of the member issuing the prescription.
 5. The date the prescription was issued by the member.
 6. If applicable, reference to the prescription that the member adapted or renewed, including the name and contact details of the original prescriber.
 7. The number of refills that the member authorized, if applicable.
 8. Any other information required by law. O. Reg. 302/12, s. 1.
- 38.** A member who performs an act under section 35 or 36 must maintain a patient record that includes details of the member's rationale for his or her decision to act under section 35 or 36 and the following information, if applicable:
 1. Reference to, or a copy of, the patient's prescription that the member renewed or adapted, including the name and contact information of the prescriber.
 2. A copy of the prescription that the member gave to the patient or his or her authorized agent under clause 35 (4) (c) or that the member gave to the patient or his or her authorized agent to take to a pharmacy of their choosing under paragraph 4 of subsection 36 (4).
 3. A record of the results of laboratory or other tests that the member considered in making the decision to act under section 35 or 36.
 4. The date on which the member notified the following persons, as applicable, and the method by which the notification occurred:
 - i. The patient's primary care provider notified under clause 35 (4) (e) or paragraph 3 of subsection 36 (4).
 - ii. The patient's prescriber notified under paragraph 3 of subsection 36 (4). O. Reg. 302/12, s. 1.
- 39.** (1) For the purposes of paragraph 5 of subsection 4 (1) of the Act, a member referred to in subsection (2) who meets all the requirements in subsection (4) is authorized to perform the act of piercing a patient's dermis with a lancet-type device to obtain blood. O. Reg. 302/12, s. 1.
 - (2) A member who is a Part A pharmacist, an intern, a registered pharmacy student or a pharmacy technician is authorized to perform the act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration. O. Reg. 302/12, s. 1.
 - (3) A pharmacy technician shall not perform the act provided for in subsection (1) unless,
 - (a) a Part A pharmacist is physically present on the premises at the time when the pharmacy technician performs the act; and
 - (b) the pharmacy technician is under the direction of a Part A pharmacist at the time when the pharmacy technician performs the act. O. Reg. 302/12, s. 1.

- (4) A member may only perform the act provided for in subsection (1) if he or she complies with the following:
1. The member may only perform the act for the purpose of demonstrating the appropriate use of lancet-type devices for the patient's self care and education or for the patient's self monitoring of his or her chronic disease, and before performing the act,
 - i. shall explain that purpose to the patient or his or her authorized agent, and
 - ii. shall receive an informed consent from the patient or his or her authorized agent.
 2. The member shall ensure that he or she only performs the act in an environment that is clean, safe, private and comfortable for the patient.
 3. The member shall ensure that appropriate infection control procedures are in place.
 4. The member must possess the knowledge, skill and judgment respecting the performance of the act and understand the condition of the patient, to perform it safely and effectively.
 5. The member must consider whether performing the act on the patient is appropriate, given the known risks and benefits to the patient and the safeguards and resources available to safely manage the outcome and any other relevant circumstances.
 6. The member must maintain a patient record that includes,
 - i. the name and address of the patient and the member,
 - ii. the date the act was performed, and
 - iii. confirmation that an informed consent was given by the patient or his or her authorized agent. O. Reg. 302/12, s. 1.

40. REVOKED: O. Reg. 451/10, s. 5.

PART VIII QUALITY ASSURANCE

GENERAL

41. In this Part,

“assessor” means an assessor appointed under section 81 of the Health Professions Procedural Code;

“Committee” means the Quality Assurance Committee. O. Reg. 98/98, s. 2.

42. The Committee shall administer the quality assurance program, which shall include the following components:

1. Maintenance of a portfolio of continuous learning.
2. Maintenance of a two-part register for pharmacist members.
3. Practice review and remediation.
4. Remediation of behaviour and remarks of a sexual nature. O. Reg. 98/98, s. 2.

CONTINUOUS LEARNING PORTFOLIO

43. (1) A pharmacist shall maintain a portfolio of continuous learning activities in accordance with guidelines on such activities published by the College and distributed to the members.

(2) A pharmacist shall submit the portfolio to the College on request. O. Reg. 98/98, s. 2.

TWO-PART REGISTER FOR PHARMACISTS

44. (1) The part of the College's register that lists pharmacists shall have a Part A (patient care) and a Part B (no patient care). O. Reg. 451/10, s. 7.

(2) Every pharmacist shall be listed in either Part A or Part B. O. Reg. 451/10, s. 7.

45. (1) Upon being issued a certificate of registration as a pharmacist for the first time, the member shall ask to be listed in Part A or Part B of the register by completing and submitting the form provided by the Registrar. O. Reg. 451/10, s. 7.

(2) Every year at the time of paying the annual membership fee, a pharmacist shall ask for a renewal of his or her listing in Part A or Part B or for a transfer to the other Part. O. Reg. 451/10, s. 7.

(3) A member who asks for a renewal of a listing in Part A after the third anniversary of being issued a certificate of registration as a pharmacist for the first time shall not be listed in that Part unless he or she has dispensed, sold or compounded drugs, provided non-prescription drugs, health care aids and devices or information related to drug use for at least 600 hours during the preceding three years in the course of providing patient care while practising the profession in Canada. O. Reg. 451/10, s. 7.

46. (1) A pharmacist may ask for a transfer from Part A of the register to Part B or from Part B to Part A at any time. O. Reg. 451/10, s. 7.
- (2) If a member listed in Part A asks for a transfer to Part B, the member shall be transferred to Part B. O. Reg. 451/10, s. 7.
- (3) If a member listed in Part B asks for a transfer to Part A, the member shall be transferred to Part A if he or she,
- (a) undergoes a practice review in accordance with section 47; and
 - (b) satisfies the educational and practice requirements that may be specified by the Quality Assurance Committee. O. Reg. 451/10, s. 7.
- (4) If the Registrar proposes to reject a request for a transfer to Part A, the request shall be referred to a panel of the Quality Assurance Committee. O. Reg. 451/10, s. 7.
- (5) The member shall be given a reasonable opportunity to make written submissions to the panel before it makes a decision. O. Reg. 451/10, s. 7.
- (6) A member whose request to be listed in Part A is rejected by the panel may appeal to another panel of the Quality Assurance Committee. O. Reg. 451/10, s. 7.
- (7) No member of a panel that rejects a request to be listed in Part A shall sit on a panel hearing an appeal of that decision. O. Reg. 451/10, s. 7.
- (8) On an appeal, the member shall be given a reasonable opportunity to make written submissions to the panel before it makes a decision. O. Reg. 451/10, s. 7.

PRACTICE REVIEW AND REMEDIATION

47. (1) Each year the College shall select at random the names of pharmacists required to undergo a practice review.
- (2) A pharmacist listed in Part A is required to undergo a practice review if his or her name is selected at random or the member is referred to the Committee by the Complaints Committee or Executive Committee.
- (3) If a pharmacist listed in Part A fails to undergo a required practice review, the Committee may transfer the pharmacist to Part B after giving him or her a reasonable opportunity to make written submissions.
- (4) A pharmacist listed in Part B is required to undergo a practice review if he or she is referred to the Committee by the Complaints Committee or Executive Committee or if the pharmacist has asked to be listed in Part A under subsection 46 (3).
- (5) The Committee shall appoint an assessor to conduct a practice review.
- (6) The assessor shall prepare a written report on the review and submit it to the Committee.
- (7) After considering the report, the Committee may decide,
- (a) that no further action is required;
 - (b) that the pharmacist is required to undertake the remediation specified by the Committee to correct any deficiency in his or knowledge, skills or judgment identified by the review; or
 - (c) that the pharmacist is to be listed in Part A where the review took place pursuant to a request to be listed in Part A.
- (8) If the Committee proposes to require a pharmacist to undertake remediation under clause (7) (b), it shall not do so unless,
- (a) the pharmacist has been given a report of the results of the review;
 - (b) the pharmacist has been given written notice of the Committee's intention to require him or her to undertake remediation;
 - (c) the pharmacist has been given at least 14 days from receipt of the notice to make written submissions to the Committee; and
 - (d) the Committee has considered any such submissions.
- (9) After the pharmacist undertakes the specified remediation, the Committee may require him or her to undergo another practice review by an assessor, and subsections (6), (7) and (8) apply to that review. O. Reg. 98/98, s. 2.
48. (1) If the Committee requires a pharmacist to undertake remediation under section 47 and the pharmacist either fails to do so or fails to successfully complete the remediation, the Committee may direct the Registrar to impose terms, conditions or limitations on the pharmacist's certificate of registration for a specified period not exceeding six months.
- (2) If the Committee proposes to make a direction under subsection (1), it shall not do so unless,
- (a) the pharmacist has been given written notice of its intention;

- (b) the pharmacist has been given at least 14 days from receipt of the notice to make written submissions to the Committee or to request an appearance before the Committee in order to make oral submissions; and
 - (c) the Committee has considered any such submissions.
- (3) A pharmacist who requests an appearance under clause (2) (b) shall be given a reasonable opportunity to appear but the Committee may dispose of the matter if he or she has been given a reasonable opportunity to appear and does not.
- (4) If the period specified under subsection (1) expires and the pharmacist still has not undertaken or successfully completed the remediation, the Committee may report him or her to the Executive Committee and provide it with such information as it considers appropriate, except information that may not be disclosed under section 83 of the Health Professions Procedural Code.
- (5) If the Registrar imposes terms, conditions or limitations on a pharmacist's certificate of registration for a specified period pursuant to a direction given by the Committee under subsection (1), the Committee may direct the Registrar to remove the terms, conditions or limitations before the end of the specified period if the Committee is satisfied that they are no longer needed.
- (6) After directing the imposition of terms, conditions or limitations on a pharmacist's certificate of registration for a specified period not exceeding six months under subsection (1), the Committee may direct the imposition of terms, conditions or limitation on the pharmacist's certificate of registration for a second specified period not exceeding six months under subsection (1) but, after having done so, the Committee shall not direct the imposition of terms, conditions or limitations on the pharmacist's certificate of registration for any further specified period.
- (7) If the Committee directs a second imposition of terms, conditions or limitations on the pharmacist's certificate, subsections (2), (3), (4) and (5) apply with respect to the second imposition. O. Reg. 98/98, s. 2.

REMEDICATION OF BEHAVIOUR AND REMARKS OF A SEXUAL NATURE

49. (1) This section applies to matters referred to the Committee by,
- (a) a panel of the Complaints Committee under subsection 26 (3) of the Health Professions Procedural Code; and
 - (b) the Executive Committee under section 79.1 of the Code.
- (2) The chair of the Committee shall establish a panel from among the members of the Committee for the purpose of considering a matter referred to in subsection (1).
- (3) The chair of the Committee shall appoint a mediator to attempt to resolve the matter.
- (4) If the mediator is unable to resolve the matter within 90 days after being appointed, the mediator shall report the failure to the chair without delay and provide the chair with a written report on the mediation.
- (5) The chair shall give the member complained against a copy of the mediator's report and a notice advising him or her of the right to make written submissions to the panel.
- (6) The member shall be given at least 14 days after receipt of the mediator's report and recommendations to make written submissions to the panel or to request an appearance before the panel to make oral submissions, or to do both.
- (7) A member who requests an appearance shall be given a reasonable opportunity to make an appearance, but the panel may dispose of the matter without such appearance if the member has been given a reasonable opportunity to appear.
- (8) If the mediation concerns a matter referred by the Complaints Committee, the chair shall give the complainant a copy of the mediator's report.
- (9) A mediator's proposed resolution of a matter referred to the Committee by the Complaints Committee must be acceptable to the complainant, the member complained against and the panel.
- (10) A mediator's proposed resolution of a matter referred to the Committee by the Executive Committee must be acceptable to the member complained against and the panel.
- (11) After considering the mediator's report and any written or oral submissions, the panel may require the member to undergo an assessment for the purpose of establishing if he or she requires education with respect to sexual abuse.
- (12) The assessment shall be carried out by an assessor appointed by the Committee.
- (13) The assessor shall provide a written report to the panel and shall make such recommendations as the assessor considers appropriate about the member's need for education with respect to sexual abuse.
- (14) A copy of the report and recommendations, and a notice informing him or her of the right to make submissions in accordance with subsections (6) and (7), shall be provided to the member.
- (15) After considering the assessor's report and recommendations and the member's submissions, if any, the panel may require the member to attend or participate in a sexual abuse education program.
- (16) If the panel proposes to take action under subsection (15), the member has the right to make submissions in accordance with subsections (6) and (7). O. Reg. 98/98, s. 2.

50. (1) If a member refuses to undergo an assessment under subsection 49 (11) or to attend or participate in a program under subsection 49 (15), the panel may direct the Registrar to impose terms, conditions or limitations on the member's certificate of registration for a specified period not exceeding six months.

(2) If the panel proposes to take action under subsection (1), the member has the right to make submissions in accordance with subsections 49 (6) and (7).

(3) If the panel is satisfied that the terms, conditions and limitations imposed on a member's certificate or registration are no longer needed, it shall direct the Registrar to remove them before the end of the specified period.

(4) If, at the end of the specified period, the member continues to refuse to undergo the required assessment or to attend or participate in the program, the panel shall refer the matter to the Executive Committee. O. Reg. 98/98, s. 2.

PANEL REQUIREMENTS

51. (1) The Committee may sit as a panel to consider a report on a practice review or any matter arising out of a practice review, a matter relating to the imposition of terms, conditions or limitations on a member's registration under section 48 or a matter under section 49.

(2) A panel shall have at least three members appointed by the chair of the Committee from among the Committee members; at least one member of the panel shall be a member appointed to the Committee by the Lieutenant Governor in Council.

(3) Three members of a panel constitute a quorum. O. Reg. 98/98, s. 2.

PART IX INSPECTION OF DRUG PREPARATION PREMISES

TEMPORAL APPLICATION

52. This Part applies to the College and members as of the day that it comes into force, except that,

(a) sections 54, 55, 56, 59 and 60 apply as of 90 days from the day that this Part comes into force; and

(b) the requirements in subsection 57 (1) and section 58 apply as of 30 days from the day that this Part comes into force. O. Reg. 154/13, s. 1.

INTERPRETATION

53. (1) In this Part,

"designated member" means,

(a) the member designated for a drug preparation premises in accordance with section 58, or

(b) where only one member engages in or supervises drug preparation activities at or in connection with a drug preparation premises, that member;

"drug" means a substance or a preparation containing a substance referred to in clauses (a) to (d) of the definition of "drug" in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*, but does not include,

(a) a substance or preparation referred to in those clauses that is manufactured, sold or represented for use in animals or fowl, or

(b) a substance or preparation referred to in clause (e), (f), (g), (h) or (i) of that definition;

"drug preparation activities" means reconstituting, diluting 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;

"drug preparation premises" means any place where a member engages in drug preparation activities, or where drug preparation activities take place that a member supervises, but does not include,

(a) a pharmacy in respect of which a valid certificate of accreditation has been issued under the *Drug and Pharmacies Regulation Act*,

(b) a premises in respect of which a valid establishment licence has been issued under the *Food and Drugs Act* (Canada), or

(c) a hospital or a health or custodial institution approved or licensed under any general or special Act;

"inspector" means a person appointed by the College to carry out an inspection on behalf of the College;

"supervise" means to supervise either directly or indirectly. O. Reg. 154/13, s. 1.

(2) Anything that may be done by the College under this Part may be done by the Council or by a committee established under clause 94 (1) (i) of the Health Professions Procedural Code. O. Reg. 154/13, s. 1.

INSPECTION

54. (1) All drug preparation premises are subject to inspection by the College in accordance with this Part. O. Reg. 154/13, s. 1.

(2) In carrying out an inspection of a drug preparation premises under subsection (1), the College may also require any or all of the following:

1. Inspection, examination or testing regarding any equipment, instrument, materials or any other thing that may be used in the drug preparation premises.
2. Examination and copying of books, accounts, reports, records or similar documents that are, in the opinion of the College, relevant to the member's practice with respect to the drug preparation activities at or in connection with the drug preparation premises.
3. Inquiries or questions to be answered by the member that are relevant to the member's practice with respect to the drug preparation activities at or in connection with the drug preparation premises.
4. Direct observation of a member in his or her practice with respect to drug preparation activities at or in connection with the drug preparation premises. O. Reg. 154/13, s. 1.

55. An inspector may, on the production of information identifying him or her as an inspector, enter and have access to any drug preparation premises at reasonable times and may inspect the drug preparation premises and do any of the things mentioned in subsection 54 (2) on behalf of the College. O. Reg. 154/13, s. 1.

56. (1) It is the duty of every member engaging in or supervising drug preparation activities at or in connection with drug preparation premises that are subject to an inspection to,

- (a) submit to an inspection of the drug preparation premises in accordance with this Part;
- (b) promptly answer a question or comply with a requirement of the inspector that is relevant to an inspection under this Part; and
- (c) co-operate fully with the College and the inspector who is conducting an inspection of a drug preparation premises in accordance with this Part. O. Reg. 154/13, s. 1.

(2) A member shall not engage in or supervise drug preparation activities at or in connection with a drug preparation premises where an inspector has been denied entry or access. O. Reg. 154/13, s. 1.

57. (1) No member shall commence engaging in or supervising drug preparation activities at or in connection with drug preparation premises unless the member has previously given notice in writing to the College in accordance with subsection (5) of the member's intention to do so. O. Reg. 154/13, s. 1.

(2) Where a member has provided notice in writing to the College in accordance with subsection (1) and the drug preparation premises have not passed an inspection or passed an inspection with conditions within the previous five years, the College shall ensure that an inspection of the drug preparation premises is performed within 60 days from the day that the College receives the member's notice or 150 days from the day this Part comes into force, whichever is later. O. Reg. 154/13, s. 1.

(3) A member who engages in or supervises drug preparation activities at or in connection with a drug preparation premises as of the day that is 30 days from the day this Part comes into force shall give notice in writing to the College in accordance with subsection (5) within 90 days from the day this Part comes into force. O. Reg. 154/13, s. 1.

(4) The College shall ensure that an inspection of the drug preparation premises with respect to which a member gives notice under subsection (3) is performed within 150 days from the day this Part comes into force. O. Reg. 154/13, s. 1.

(5) The notice required in subsections (1) and (3) shall include the following information, submitted in the form and manner required by the College:

1. The full name of the member giving the notice and the full name of the individual or corporation who is the owner or occupier of the drug preparation premises, if he or she is not the member who is required to give notice under this section.
2. The full address of the drug preparation premises.
3. The date when the member first began engaging in or supervising drug preparation activities at or in connection with the drug preparation premises or the proposed date when the member intends to begin engaging in or supervising drug preparation activities at or in connection with the drug preparation premises.
4. Any other information the College requires that is relevant to an inspection of the drug preparation premises conducted under this Part. O. Reg. 154/13, s. 1.

58. Where two or more members engage in or supervise drug preparation activities at or in connection with a drug preparation premises, the members shall designate a member as the designated member for the drug preparation premises, and shall immediately notify the College of the designated member's identity. O. Reg. 154/13, s. 1.

59. All drug preparation premises are subject to an inspection by the College once every five years after the initial inspection of the premises or more often if, in the opinion of the College, it is necessary or advisable to do so. O. Reg. 154/13, s. 1.

60. (1) After an inspection of a drug preparation premises, the College shall determine, in accordance with the accepted standards of practice, whether the drug preparation premises pass, pass with conditions or fail. O. Reg. 154/13, s. 1.

(2) In determining whether drug preparation premises pass, pass with conditions or fail an inspection, the College may consider,

- (a) the inspection results provided to the College by the inspector;
- (b) information provided by one or more members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises respecting the inspection, including the answers given by them in response to inquiries or questions asked by the inspector;
- (c) the information contained in a notice given by a member under subsection 57 (1) or (3);
- (d) any submissions made by the member or members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises that are relevant to the inspection; and
- (e) any other information that is directly relevant to the inspection of the drug preparation premises conducted under this Part. O. Reg. 154/13, s. 1.

(3) The College shall deliver a report, in writing and in accordance with section 39 of the *Regulated Health Professions Act, 1991*, to the individual or corporation that is the owner or occupier of the drug preparation premises and to the designated member for the drug preparation premises, within a reasonable time after the inspection is completed. O. Reg. 154/13, s. 1.

(4) Any report made by the College respecting an inspection of drug preparation premises where a member is engaging in or in respect of which the member is supervising drug preparation activities shall make a finding that the drug preparation premises passed, passed with conditions or failed the inspection and shall provide reasons where the drug preparation premises passed with conditions or failed the inspection. O. Reg. 154/13, s. 1.

(5) Any report made by the College that finds that drug preparation premises failed an inspection or passed with conditions is effective on the day that it is received, in accordance with section 39 of the *Regulated Health Professions Act, 1991*, by the designated member for the drug preparation premises. O. Reg. 154/13, s. 1.

(6) The designated member who receives a report made by the College that finds that a drug preparation premises failed an inspection or passed with conditions shall promptly provide copies of the report to all members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises. O. Reg. 154/13, s. 1.

(7) A member shall not engage in or supervise drug preparation activities at or in connection with a drug preparation premises that fail an inspection until,

- (a) the College delivers a report indicating that the drug preparation premises passed a subsequent inspection, or passed with conditions; or
- (b) after considering submissions under subsection (9), the College substitutes a finding that the drug preparation premises pass or pass with conditions. O. Reg. 154/13, s. 1.

(8) A member shall not engage in or supervise drug preparation activities at or in connection with drug preparation premises that pass an inspection with conditions except in accordance with the conditions set out in the report until,

- (a) the College delivers a report indicating that the drug preparation premises passed a subsequent inspection; or
- (b) after considering submissions under subsection (9), the College substitutes a finding that the drug preparation premises pass. O. Reg. 154/13, s. 1.

(9) A member may make submissions in writing to the College within 14 days from the date on which a report made by the College that finds that the drug preparation premises passed with conditions or failed the inspection becomes effective in accordance with subsection (5). O. Reg. 154/13, s. 1.

(10) The College may or may not elect to reinspect the drug preparation premises after receiving a member's submissions, but no more than 60 days after a member provides his or her submissions, the College shall do one or more of the following:

1. Confirm its finding that the drug preparation premises failed the inspection or passed with conditions.
2. Make a report and find that the drug preparation premises passed with conditions.
3. Make a report and find that the drug preparation premises passed the inspection. O. Reg. 154/13, s. 1.

(11) Drug preparation premises that fail an inspection or pass with conditions may be subject to one or more further inspections within a reasonable time after the College delivers its report, at the request of a member, any other person to whom the College gave the report, or at any time at the discretion of the College. O. Reg. 154/13, s. 1.

(12) Where, as a result of an inspection carried out under this Part, a report made by the College finds that a member's knowledge, skill or judgment is unsatisfactory, the College may direct the Registrar to refer the report to the Quality Assurance Committee. O. Reg. 154/13, s. 1.

(13) Where, as a result of an inspection carried out under this Part, a report made by the College finds that a member may have committed an act of professional misconduct or may be incompetent or incapacitated, the College may direct the Registrar to refer the report to the Inquiries, Complaints and Reports Committee. O. Reg. 154/13, s. 1.

PART X FUNDING FOR THERAPY AND COUNSELLING

61. In this Part,

“member” includes a former member. O. Reg. 225/13, s. 1.

62. (1) The alternative requirements that must be satisfied in order for a person to be eligible for funding under clause 85.7 (4) (b) of the Health Professions Procedural Code are prescribed in this section. O. Reg. 225/13, s. 1.

(2) A person is eligible for funding for therapy or counselling if,

(a) there is an admission made by a member in a statement to the College or in an agreement with the College that he or she sexually abused the person while the person was a patient of the member;

(b) a member has been found guilty under the *Criminal Code* (Canada) of sexually assaulting the person while the person was a patient of the member;

(c) there is a statement, contained in the written reasons of a committee of the College given after a hearing, that the person, while a patient, was sexually abused by a member; or

(d) there is sufficient evidence presented to the Patient Relations Committee to support a reasonable belief that the person, while a patient, was sexually abused by a member. O. Reg. 225/13, s. 1.

(3) For the purposes of clause (2) (d), and without limiting the generality of that clause, the following kinds of evidence may support a reasonable belief that a person, while a patient, was sexually abused by a member:

1. Evidence of reports made with respect to the member under subsection 85.1 (1) or 85.2 (1) of the Health Professions Procedural Code.

2. Evidence that corroborates the person's allegations of sexual abuse by the member. O. Reg. 225/13, s. 1.

(4) A person is not eligible under subsection (2) unless, at the time the sexual abuse occurred, the person was a patient of the member and the member was practising in Ontario. O. Reg. 225/13, s. 1.

(5) Despite subsections (2), (3) and (4), a person is eligible for funding for therapy or counselling under this Part only if,

(a) the person submits an application for funding to the Patient Relations Committee in the form provided by the College and, in the application, the person names the member who is alleged to have sexually abused the person;

(b) the person adheres to the procedures followed by the Patient Relations Committee when determining whether the person has satisfied the requirements for eligibility for funding; and

(c) the person provides such other information as is required by the Patient Relations Committee. O. Reg. 225/13, s. 1.

(6) A decision by the Patient Relations Committee that a person is eligible for funding for therapy or counselling does not constitute a finding against the member and shall not be considered by any other committee of the College dealing with the member. O. Reg. 225/13, s. 1.

TABLES 1, 2 REVOKED: O. Reg. 452/16, s. 2.

SCHEDULE 1 INJECTED SUBSTANCES

(Arranged by American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification)

1. 8:00 Anti-infective Agents

i. 8:18 Antivirals

A. 8:18.08.04 HIV Entry and Fusion Inhibitors

1. Enfuvirtide

B. 8:18.20 Interferons

1. Interferon Alfa-2b

2. Peginterferon alfa-2a

3. Peginterferon alfa-2b
2. 10:00 Antineoplastic Agents
 1. Goserelin
 2. Leuprolide
 3. Methotrexate
3. 12:00 Autonomic Drugs
 - i. 12:12 Sympathomimetic (Adrenergic) Agents
 - A. 12:12.12 Alpha- and Beta-Adrenergic Agonists
 1. Scopolamine
 2. Hyoscine
 3. Glycopyrrolate
 4. Epinephrine
4. 20:00 Blood Formation and Coagulation
 - i. 20:04 Antianemia Drugs
 - A. 20:04.04 Iron Preparations
 1. Iron
 - ii. 20:12 Coagulants and Anticoagulants
 - A. 20:12.04 Anticoagulants
 1. Dalteparin
 2. Danaparoid
 3. Enoxaparin
 4. Fondaparinux
 5. Heparin
 6. Nadroparin
 7. Tinzaparin
 - iii. 20:16 Hematopoietic Agents
 1. Ancestim
 2. Darbepoetin alfa
 3. Epoetin alfa
 4. Filgrastim
 5. Pegfilgrastim
 6. Romiplostim
5. 28:00 Central Nervous System Agents
 - i. 28:08 Analgesics and Antipyretics
 - A. 28:08.08 Opiate Agonists
 1. Codeine
 2. Hydromorphone
 3. Meperidine
 4. Morphine
 - B. 28:08.12 Opiate Partial Agonists
 1. Nalbuphine
 2. Pentazocine

- ii. 28:16 Psychotherapeutic Agents
 - A. 28:16.08 Antipsychotics
 - 1. Haloperidol
 - 2. Methotrimeprazine
- iii. 28:32 Antimigraine Agents
 - A. 28:32.28 Selective Serotonin Agonists
 - 1. Sumatriptan
- 6. 40:00 Electrolytic, Caloric, and Water Balance
 - i. 40:12 Replacement Preparations
 - 1. Normal saline
- 7. 48:00 Respiratory Tract Agents
 - i. 48:92 Respiratory Tract Agents, Miscellaneous
 - 1. Omalizumab
- 8. 56:00 Gastrointestinal Drugs
 - i. 56:22 Antiemetics
 - A. 56:22.08 Antihistamines
 - 1. Dimenhydrinate
 - 2. Prochlorperazine
 - ii. 56:32 Prokinetic Agents
 - 1. Metoclopropamide
 - iii. 56:92 GI Drugs, Miscellaneous
 - 1. Certolizumab Pegol
 - 2. Methylnaltrexone
- 9. 64:00 Heavy Metal Antagonists
 - 1. Deferoxamine
- 10. 68:00 Hormones and Synthetic Substitutes
 - i. 68:18 Gonadotropins
 - 1. Follitropin-alpha
 - 2. Follitropin-beta
 - 3. Gonadotropin-chorionic
 - 4. Gonadotropin-chorionic-alfa
 - 5. Gonadotropin-human
 - 6. Lutropin-alfa
 - 7. Menotropins
 - 8. Urofollitropin
 - ii. 68:20 Antidiabetic Agents
 - 1. Exenatide
 - 2. Insulins
 - 3. Liraglutide
 - iii. 68:22 Antihypoglycemic Agents
 - A. 68:22:12 Glycogenolytic Agents
 - 1. Glucagon

- iv. 68:24 Parathyroid
 - 1. Calcitonin Salmon
 - 2. Teriparatide
- v. 68:28 Pituitary
 - 1. Desmopressin
 - 2. Vasopressin
- vi. 68:30 Somatotropin Agonists and Antagonists
 - A. 68:30.04 Somatotropin Agonists
 - 1. Somatropin
 - B. 68:30.08 Somatotropin Antagonists
 - 1. Pegvisomant
- vii. 68:32 Progestins
 - 1. Medroxyprogesterone
- 11. 88:00 Vitamins
 - i. 88:08 Vitamin B Complex
 - 1. Cyanocobalamin
 - 2. Folic Acid
 - 3. Methylcobalamin
 - 4. Pyridoxine
 - 5. Thiamine
 - ii. 88:12 Vitamin C
 - 1. Ascorbic Acid
 - iii. 88:24 Vitamin K Activity
 - 1. Vitamin K
- 12. 92:00 Miscellaneous Therapeutic Agents
 - i. 92:12 Antidotes
 - 1. Leucovorin
 - ii. 92:20 Biologic Response Modifiers
 - 1. Denosumab
 - 2. Glatiramer
 - 3. Interferon-Beta-1A
 - 4. Interferon-Beta-1B
 - 5. Natalizumab
 - iii. 92:36 Disease-modifying Antirheumatic Drugs
 - 1. Abatacept
 - 2. Adalimumab
 - 3. Anakinra
 - 4. Etanercept
 - 5. Gold Sodium Thiomalate
 - 6. Golimumab
 - 7. Ustekinumab
 - iv. 92:40 Gonadotropin-releasing Hormone Antagonists

1. Cetrorelix
 2. Ganirelix
 - v. 92:92 Other Miscellaneous Therapeutic Agents
 1. Octreotide
13. Miscellaneous
1. Sterile Water for Injection (Diluent)

O. Reg. 452/16, s. 3.

SCHEDULE 2
INHALED SUBSTANCES

(Arranged by American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification)

1. 8:00 Anti-infective Agents
 - i. 8:18 Antivirals
 - A. 8:18.28 Neuraminidase Inhibitors
 1. Zanamivir
 - ii. 8:12 Antibacterials
 - A. 8:12.07.16 Monobactams
 1. Tobramycin
 2. Aztreonam
2. 12:00 Autonomic Drugs
 - i. 12:08 Anticholinergic Agents
 - A. 12:12.08 Antimuscarinics/Antispasmodics
 1. Ipratropium
 2. Tiotropium
 - ii. 12:12 Sympathomimetic (Adrenergic) Agents
 - A. 12:12.08.12 Selective Beta2- Adrenergic Agonists
 1. Fenoterol
 2. Formoterol
 3. Salbutamol
 4. Salmeterol
 5. Terbutaline
 - iii. 12:16 Sympatholytic (Adrenergic Blocking) Agents
 - A. 12:16.04.04 Non-Selective alpha-Adrenergic Blocking Agents
 1. Dihydroergotamine
 - iv. 12:92 Autonomic Drugs, Miscellaneous
 1. Nicotine
3. 28:00 Central Nervous System Agents
 - i. 28:08 Analgesics and Antipyretics
 - A. 28:08.12 Opiate Partial Agonists
 1. Butorphanol
 - ii. 28:32 Antimigraine Agents
 - A. 28:32.28 Selective Serotonin Agonists
 1. Sumatriptan

2. Zolmitriptan
4. 40:00 Electrolytic, Caloric, and Water Balance
 - i. 40:12 Replacement Preparations
 1. Sodium chloride
5. 48:00 Respiratory Tract Agents
 - i. 48:24 Mucolytic Agents
 1. Dornase alfa
6. 52:00 Eye, Ear, Nose and Throat (EENT) Preparations
 - i. 52:02 Antiallergic Agents
 1. Sodium Cromoglycate
 2. Levocabastine
 - ii. 52:08 Anti-inflammatory Agents
 - A. 52:08.08 Corticosteroids
 1. Beclomethasone
 2. Budesonide
 3. Ciclesonide
 4. Flunisolide
 5. Fluticasone
 6. Mometasone
 7. Triamcinolone
 - iii. 52:32 Vasoconstrictors
 1. Oxymetazoline
 2. Phenylephrine
 3. Xylometazoline
 7. 68:00 Hormones and Synthetic Substitutes
 - i. 68:18 Gonadotropins
 1. Buserelin
 2. Nafarelin
 - ii. 68:24 Parathyroid
 1. Calcitonin Salmon
 - iii. 68:28 Pituitary
 1. Desmopressin
 2. Vasopressin
 8. 92:00 Miscellaneous Therapeutic Agents
 - i. 92:12 Antidotes
 1. Acetylcysteine

O. Reg. 452/16, s. 3.

SCHEDULE 3
VACCINES

1. Bacille Calmette-Guerin (BCG) Vaccines
2. Haemophilus Influenzae type b (Hib) Vaccines
3. Meningococcal Vaccines

4. Pneumococcal Vaccines
5. Typhoid Vaccines
6. Combined Typhoid and Hepatitis A Vaccines
7. Hepatitis A Vaccines
8. Hepatitis B Vaccines
9. Hepatitis A and B combined Vaccines
10. Herpes Zoster Vaccines
11. Human Papillomavirus (HPV) Vaccines
12. Japanese Encephalitis Vaccines
13. Rabies Vaccines
14. Varicella Vaccines
15. Yellow Fever Vaccines

O. Reg. 452/16, s. 3.

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Document comparison by Workshare Compare on March-20-20 5:22:21 PM

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Document 2 ID	interwovenSite://WS_EAST/CANADA_EAST/107552713/4
Description	#107552713v4<CANADA_EAST> - O. Reg. 202/94
Rendering set	Standard

Legend:	
Insertion	
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Style change	
Format change	
Moved deletion	
Inserted cell	
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Moved cell	
Split/Merged cell	
Padding cell	

Statistics:	
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Deletions	3
Moved from	0
Moved to	0
Style change	0
Format changed	0
Total changes	14

COVID-19

Directive #2 for Health Care Providers (Regulated Health Professionals or Persons who operate a Group Practice of Regulated Health Professionals)

Issued under Section 77.7 of the Health Protection and Promotion Act (HPPA), R.S.O. 1990, c. H.7

WHEREAS under section 77.7(1) of the HPPA, if the Chief Medical Officer of Health (CMOH) is of the opinion that there exists or there may exist an immediate risk to the health of persons anywhere in Ontario, he or she may issue a directive to any health care provider or health care entity respecting precautions and procedures to be followed to protect the health of persons anywhere in Ontario;

AND WHEREAS, On March 17th, 2020 an emergency was declared in Ontario due to the outbreak of COVID-19, pursuant to Order-in-Council 518/2020 under the *Emergency Management and Civil Protection Act*;

AND HAVING REGARD TO the emerging evidence about the ways this virus transmits between people as well as the potential severity of illness it causes in addition to the declaration by the World Health Organization (WHO) on March 11, 2020 that COVID-19 is a pandemic virus and the spread of COVID-19 in Ontario;

AND HAVING REGARD TO the potential impact of COVID-19 on the work of regulated health professionals, to protect regulated health professionals in their workplaces, and the need to prioritize patients who have or may have COVID-19 in the work that regulated health professionals undertake;

AND HAVING REGARD TO the need to ramp down elective surgeries and non-emergent activities in order to preserve system capacity to deal effectively with COVID-19;

I AM THEREFORE OF THE OPINION that there exists or may exist an immediate risk to the health of persons anywhere in Ontario from COVID-19;

AND DIRECT pursuant to the provisions of section 77.7 of the HPPA that:

COVID-19 #2 for Health Care Providers (Regulated Health Professionals or Persons who operate a Group Practice of Regulated Health Professionals)

Date of Issuance: March 19, 2020

Effective Date of Implementation: March 19, 2020

Issued To: Health Care Providers (Regulated Health Professionals or persons who operate a Group Practice of Regulated Health Professionals, defined in section 77.7(6), paragraph 1 of the *Health Protection and Promotion Act*)

* Health Care Organizations must provide a copy of this directive to the co-chairs of the Joint Health & Safety Committee or the Health & Safety Representative (if any).

Introduction:

Coronaviruses (CoV) are a large family of viruses that cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS-CoV), Severe Acute Respiratory Syndrome (SARS-CoV), and COVID-19. A novel coronavirus is a new strain that has not been previously identified in humans.

On December 31, 2019, the World Health Organization (WHO) [was informed](#) of cases of pneumonia of unknown etiology in Wuhan City, Hubei Province in China. A novel coronavirus (COVID-19) [was identified](#) as the causative agent by Chinese authorities on January 7, 2020.

On March 11, 2020 the WHO announced that COVID-19 is classified as a [pandemic](#) virus. This is the first pandemic caused by a coronavirus.

On March 17th, 2020 the Premier declared an emergency in Ontario under the *Emergency Management and Civil Protection Act* due to the outbreak of COVID-19 in Ontario and Cabinet made emergency orders to implement my recommendations of March 16th, 2020.

Symptoms of COVID-19

Symptoms range from mild – like the flu and other common respiratory infections – to severe, and can include:

1. fever
2. cough
3. difficulty breathing

Complications from COVID-19 can include serious conditions, like pneumonia or kidney failure, and in some cases, death.

There are no specific treatments for COVID-19, and there is no vaccine that protects against coronaviruses. Most people with COVID-19 illnesses will recover on their own.

Requirements for Health Care Providers (Regulated Health Professionals or Persons who operate a Group Practice of Regulated Health Professionals)

The following steps are required immediately:

1. All non-essential and elective services should be ceased or reduced to minimal levels, subject to allowable exceptions, until further notice. Allowable exceptions can be made for time sensitive circumstances to avert or avoid negative patient outcomes or to avert or avoid a situation that would have a direct impact on the safety of patients.
2. Clinicians are in the best position to determine what is essential in their specific health practice. In making decisions regarding the reduction or elimination of non-essential and elective services, regulated health professionals should be guided by their regulatory College, and the following principles:
 1. Proportionality. Decision to eliminate non-essential services should be proportionate to the real or anticipated limitations in capacity to provide those services.
 2. Minimizing Harm to Patients. Decisions should attempt to limit harm to patients wherever possible. This requires considering the differential benefits and burdens to patients and patient populations as well as available alternatives to relieve pain and suffering.
 3. Equity. Equity requires that all persons in the same category (i.e. at different levels of urgency) be treated in the same way unless relevant differences exist. This requires considering time on wait lists and experience with prior cancellations.
 4. Reciprocity. Certain patients and patient populations will be particularly burdened as a result of cancelling non-essential services. Patients should have the ability to have their health monitored, receive appropriate care, and be re-evaluated for emergent activities should it be required.

Decisions regarding the reduction or elimination of non-essential and elective services should be made using processes that are fair to all patients.

As this outbreak evolves, there will be continual review of emerging evidence to understand the most appropriate measures to take to protect health care providers and patients. This will continue to be done in collaboration with health system partners and technical experts from Public Health Ontario and with the health system.

Questions

Hospitals and HCWs may contact the ministry's Health Care Provider Hotline at 1-866-212-2272 or by email at emergencymanagement.moh@ontario.ca with questions or concerns about this Directive.

Hospitals and HCWs are also required to comply with applicable provisions of the [Occupational Health and Safety Act](#) and its Regulations.



David C. Williams, MD, MHSc, FRCPC
Acting Chief Medical Officer of Health



COUNCIL BRIEFING NOTE MEETING DATE: MARCH 2020

FOR DECISION	X	FOR INFORMATION
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INITIATED BY:	Nancy Lum-Wilson, CEO and Registrar
TOPIC:	Regulation amendments to enable expanded scope of practice for pharmacists
ISSUE:	Approval to post the proposed amendments to <i>General Regulation 202/94</i> of the <i>Pharmacy Act</i> , Part VII.3 (Controlled Acts) for the purpose of public consultation.

PUBLIC INTEREST RATIONALE:

The Minister of Health has asked the College to submit regulations to enable an expanded scope of practice for pharmacists to help ease the burden on the health care system, support streamlined care pathways, improve access to routine and minor care in the community and support better patient outcomes. In developing the regulatory changes needed to enable the new scope, the College needs to define the appropriate parameters that optimize the knowledge and skill of pharmacists in an integrated care model while also ensuring the delivery of safe, high quality patient care.

BACKGROUND:

On May 30, 2019, the College received a letter from the Minister of Health (see Attachment 1) requesting that the Council of the College make regulations that would enable pharmacists to do the following:

1. Administer the flu vaccine to children as young as two years old;
2. Renew prescriptions in quantities of up to a 12-month supply;
3. Administer certain substances by injection and/or inhalation for purposes that are in addition to patient education and demonstration; and
4. Prescribe drugs for certain minor ailments.

Following Council's approval at the November 21, 2019 meeting, the College submitted the draft regulation, addressing the first three requests, on November 30, 2019. The next step in the regulatory approval process will be posting on the government's regulatory registry for 45 days. The government will then consider the feedback and engage with the College if there are further changes. A regulation must be approved by Cabinet and is not in effect until it is filed with the Registrar of Regulations and published on the Government of Ontario's *e-Laws* website and in the print version of *The Ontario Gazette*. For information on the regulation development process, please refer to this [Pharmacy Connection article](#). The Minister of Health has asked for the minor ailments regulation to be submitted by June 30, 2020.

The Minister also requested that the College continue to work with Ministry staff to enable pharmacists to perform certain point of care tests (POCT) for the purposes of chronic disease management to support pharmacists' role in medication management and treatment of patients. The Ministry continues to progress this work.

The College has been working closely with the Ministry of Health to develop policy that will support the changes to scope while maintaining patient safety and quality of care.

As reported during the [last Council meeting on December 9, 2019](#), the [Minor Ailments Advisory Group \(MAAG\)](#) has been engaged in regular discussions to provide an evidence-informed

foundation for the policy changes and provide recommendations to the College to consider when drafting the regulatory submission.

During the last Council meeting, recommendations from the MAAG were shared with Council members including: a list of 18 minor ailments recommended for implementation, the considerations and criteria used to select these minor ailments, and a proposed description of minor ailments. The preliminary list was also shared with other stakeholders for further feedback and discussion.

While reviewing the preliminary list of 18 minor ailments for consideration, a motion was made and passed by Council at the December 2019 meeting, to add post exposure prophylaxis for Lyme disease to the list of minor ailments, given the importance of timely treatment and the [risk areas in Ontario](#).

Since the last Council meeting, MAAG has provided a recommendation on medication categories, utilizing the American Hospital Formulary Service (AHFS) classification model, for each of the recommended minor ailments that pharmacists would be authorized to prescribe. Categories allow for continued currency of medications and the ability of pharmacists to recommend and prescribe the most appropriate option based on the individualized patient assessment.

Over the last few months, the College has engaged and consulted broadly with stakeholders, including pharmacy associations, provincial pharmacy regulators, other health regulators, the public through third party facilitated focus groups and the [Citizens Advisory Group](#) (a collaborative partnership which brings together patients and caregivers to provide feedback related to health regulation in Ontario), and registrants through an online survey (see summary of stakeholder feedback in Attachment 2). The online survey gathered preliminary feedback from pharmacy professionals on the list of minor ailments and recommended supports for implementation. It was available for 44 days and 818 responses were received during this time. The feedback has and will continue to inform the College's work to develop the regulatory amendments and tools needed to implement the scope changes.

The College is also engaging with other stakeholders to obtain diverse feedback from multiple perspectives including professional associations representing pharmacy, other health professionals and different practice settings.

This briefing note addresses the regulation amendments to *General Regulation 202/94* to enable pharmacist prescribing for certain minor ailments. The proposed regulatory amendments to Part VII.3 (Controlled Acts) of the *General Regulation 202/94* of the *Pharmacy Act* are outlined in Attachment 3.

The rationale for each of these amendments is also presented in a clause-by-clause comparison chart in Attachment 4 and a blackline version of the regulation in Attachment 5.

ANALYSIS:

Current State:

Pharmacists are equipped with the knowledge and skills to initiate, manage and optimize drug therapy to improve health outcomes of patients; expanding the scope of practice for pharmacists to prescribe minor ailments will improve access to routine care in the community. This opportunity to improve patient outcomes is aligned with the goals outlined in the [2nd Report from the Premier's Council on Improving Healthcare and Ending Hallway Medicine](#).

In developing the regulatory changes needed to enable the new scope, the College considered the appropriate parameters that optimize the knowledge and skills of pharmacists in an integrated care model while also ensuring the delivery of safe, high quality patient care.

Under the [current Standards of Practice](#), pharmacists can prescribe medications based on the pharmacist's assessment of the patient, having collected and interpreted relevant patient

information. Currently, pharmacists are authorized to prescribe specific medication for smoking cessation. Regulatory amendments to enable this practice were made to the *Pharmacy Act, 1991* in 2012.

Throughout Canada, seven provinces have authorized pharmacists to prescribe for minor ailments, with Alberta being the first province to implement the expanded scope in 2007.

Regulatory amendments – list of minor ailments:

Early consultations over the last few months have provided insights to inform current policy work and regulation development, including which minor ailments to include in the draft regulations.

While a preliminary list of 19 minor ailments was shared with multiple stakeholders for input, Ministry staff have requested that the College align early efforts with the direction provided by the Minister of Health to further refine the list to 12 minor ailments. The preliminary list for consideration by the Minister is as follows:

- Urinary tract infections (uncomplicated)
- Dermatitis (atopic, eczema, allergic and contact)
- Insect bites and urticaria (hives)
- Conjunctivitis (bacterial, allergic and viral)
- Allergic rhinitis
- Candidal stomatitis (oral thrush)
- Herpes labialis (cold sores)
- Haemorrhoids
- Gastroesophageal reflux disease (GERD)
- Dysmenorrhea
- Musculoskeletal sprains and strains
- Impetigo

The preliminary list was refined as a result of multiple sources of evidence and feedback (see Attachment 2), including:

- Data on less-urgent and/or non-urgent emergency department visits
- Results from a survey completed by registrants
- Feedback from the Citizen Advisory Group and third-party facilitated public focus groups

Regulatory amendments – medication categories:

The College has worked with experts from MAAG to determine the medication categories that pharmacists would be authorized to prescribe for the minor ailments. Considerations such as recent evidence, clinical practice guidelines, best practices and antimicrobial stewardship guided the selection of the medication categories.

Medications are referenced by categories for each minor ailment. This will ensure that pharmacists have the flexibility to prescribe up-to-date medications, improving access to care and avoiding the need to make regulatory changes when new medications are approved. The College has taken a similar approach when identifying medications for pharmacists' administration by injection or inhalation. Other health regulators have also taken a similar approach to referencing medication categories in regulations.

Medication categories are included for each minor ailment to help provide clarity around which categories are intended for each condition.

Regulatory amendments – training and education:

Feedback from multiple stakeholders including registrants, the public and MAAG indicated that education is a top priority in supporting pharmacists to acquire the skills, training and confidence

to prescribe medications. Six of the seven provinces with minor ailments prescribing have a mandatory education component.

An education requirement has been added to the draft regulation to confirm completion of education focused on the standards and expectations prior to performing the new prescribing activity, which will be subject to Council approval.

The College will work with stakeholders to identify any other education requirements.

Regulatory amendments – conditions for prescribing:

There are existing requirements for pharmacist prescribing in the *Pharmacy Act, 1991*, that will also apply to prescribing for minor ailments. This includes documenting and sharing information with the patient's primary care provider and supporting continuity of care and inter-professional collaboration. Early consultations emphasized that communication between health care professionals was important for patient safety and overall quality of care.

Pharmacists are expected to be responsible, accountable and act in the best interest of the patient as outlined in the *Professional Misconduct and Conflict of Interest regulation* under the *Pharmacy Act, 1991*. Existing provisions in the *General regulation* also require the pharmacist to provide the patient with the prescription and inform of the right to fill at another pharmacy. These current conflict of interest safeguards support the delivery of quality, safe and ethical care. Of note, College data indicates that the majority of pharmacists (approximately 80%) are employees and do not own pharmacies.

The regulatory changes for minor ailment prescribing must support the pharmacist in assessing and selecting the most appropriate treatment for the patient, which may involve a prescription or non-prescription option or referral. The draft regulations reflect the expectation for assessment and therapeutic decision making, which aligns with early stakeholder feedback.

Early feedback – implementation and evaluation:

The early feedback collected from stakeholders will also help to inform and guide implementation including development of necessary guidance and resource tools to support the scope change.

Addressing many of the considerations identified such as practice environment and access to an integrated electronic medical record to facilitate information sharing, will involve collaboration with other stakeholders.

In addition, the College is working with MAAG to develop an evaluation plan that will include assessing the impact of the policy changes on system and patient outcomes.

Part of this work will involve working with the ministry of health to explore opportunities for capturing data, which will allow for a more robust evaluation. Access to or expansion of a tool, similar to the Narcotic Monitoring System (NMS), which would track all medications for all patients, was suggested as a necessary improvement on the current system which only allows access to data for patients funded by government.

NEXT STEPS:

Following approval of Council, the proposed regulations will be posted on the College's consultation page for the mandated 60-day period for public review and feedback.

A consultation report, including a summary of feedback and any recommended changes to the proposed amendments, will be presented to Council for consideration at the Council meeting on June 15, 2020, with the intent to submit the final regulation amendments to the Minister by June 30, 2020, as requested.

The Ministry of Health will also post the proposed regulatory changes on the Public Registry for public consultation for a 45-day period.

The College will continue to engage and collaborate with patients, registrants, pharmacy stakeholders and other health system partners and professionals to plan for and implement expanded scope in a manner that supports patient safety. A full implementation and communication plan will be developed in collaboration with stakeholders. An evaluation plan to monitor and assess the impact of these changes will also be developed with the support of the MAAG and other stakeholders. An update will be shared at the next Council meeting.

RECOMMENDATION: That Council approve the proposed amendments (attached in Attachment 3) to *General Regulation 202/94 of the Pharmacy Act, Part VII.3 (Controlled Acts)* for the purpose of public consultation, in preparation for submission of regulatory amendments to the Minister of Health by June 30, 2020.

**Ministry of Health
and Long-Term Care**

Office of the Deputy Premier
and Minister of Health and
Long-Term Care

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May 30, 2019

HLTC2968IT-2019-57

Ms. Laura Weyland
President
Ontario College of Pharmacists
483 Huron Street
Toronto ON M5R 2R4

Dear Ms. Weyland:

As was articulated in the 2019 Ontario Budget, we are committed to enabling health professions to use their education and training more effectively by expanding the scope of practice for certain regulated health professionals.

One way that we can achieve our vision, is to ensure that patients have streamlined care pathways that make connections easier in the system and that there is access to minor and routine care in the community. Recognizing the integral role that pharmacists play in helping us to achieve these commitments, I would like the Council of the Ontario College of Pharmacists (College) to make regulations that would enable pharmacists to do the following:

1. Administer the flu vaccine to children as young as two years old;
2. Renew prescriptions in quantities of up to a year's supply;
3. Administer certain substances by injection and/or inhalation for purposes that are in addition to patient education and demonstration; and
4. Prescribe drugs for certain minor ailments.

With respect to the first three items listed above, I would like the College to submit a regulation to the ministry for my review no later than November 30, 2019. With respect to prescribing for minor ailments, I would like the College to submit a regulation to the ministry for my review no later than June 30, 2020.

Additionally, in recognition of the need for pharmacists to have access to information to assist with medication management and the treatment of patients, I have asked ministry staff to work with the College to authorize pharmacists to perform certain point of care tests for certain chronic conditions. I have asked that this be implemented as soon as possible, once a broad consultation occurs.

- 2 -

Ms. Laura Weyland

To ensure that the work of the College considers all possible perspectives, I am expecting the College to actively consult with system partners in the development of its own regulations and that this work be undertaken as soon as possible. I understand that as a result of these consultations and through the College's own work, that there may be the need to place parameters on these new authorities. This may include the College requiring pharmacists to demonstrate that they are competent and can provide safe, high-quality care when performing these activities.

I would like to thank the College for its continued contributions to the healthcare system in Ontario, and I look forward to your continued partnership on these initiatives.

Sincerely,



Christine Elliott
Deputy Premier and Minister of Health and Long-Term Care

- c: Helen Angus, Deputy Minister, Ministry of Health and Long-Term Care
- Patrick Dicerni, Assistant Deputy Minister, Strategic Policy and Planning Division
- Allison Henry, Director, Health Workforce Regulatory Oversight Branch
- Nancy Lum-Wilson, Registrar and Chief Executive Officer, Ontario College of Pharmacists
- Justin Bates, Chief Executive Officer, Neighbourhood Pharmacy Association of Canada
- Bill Wilson, Interim Chief Executive Officer, Ontario Pharmacists Association

Summary of Stakeholder Feedback: Regulation amendments to enable pharmacist prescribing of minor ailments

Early consultation with a variety of audiences has been ongoing since the Minister directed the College to draft regulations to enable expanded scope of practice in May 2019. Consultations offered insight related to current policy work and regulation development. In particular, feedback was sought on the preliminary list of minor ailments with a view to understanding perspectives of various audiences and further supporting prioritization. Data on the most prevalent minor ailments that resulted in an emergency department visit provided insight on the impact pharmacist prescribing may have if this type of routine care were moved into the community pharmacy setting. Key highlights are provided in the table below.

Engagement	Findings
Minor Ailments Advisory Group – several meetings starting in June 2019	<p>This group has provided advice and input on various aspects of planning and development, including: draft regulations, proposed minor ailments and medication categories, and practice support tools. This group will continue to meet and provide input on an evaluation plan and considerations for implementation from a system perspective.</p>
A survey of pharmacy professionals (N=818) in December 2019 – January 2020 circulated through e-Connect	<p>There were 818 responses (85% were pharmacists, 8% pharmacy technicians, 5% pharmacy students and 2% other). Feedback received will help to inform implementation of the scope changes. Many respondents felt that the following were important to consider in implementing the changes:</p> <ul style="list-style-type: none"> • Education/training – to support the expanded scope activities, • Practice environment and funding model – providing appropriate staffing in the workplace and creating a funding model that supports the expanded scope activities, • Electronic medical records – for pharmacists to review labs, relevant medical history and communicate electronically with prescribers, and • Collaboration with other healthcare providers – through communication, documentation and integration. <p>Feedback was sought on the preliminary list of 19 minor ailments. Respondents were asked to select the minor ailments they felt would be of most benefit to patients. The minor ailments are ranked below from highest priority to lowest priority based on respondent feedback:</p> <ol style="list-style-type: none"> 1. Urinary tract infection (uncomplicated) 2. Herpes labialis (cold sores) 3. Dermatitis (Atopic-mild/moderate eczema, allergic contact and irritant contact)* 4. Allergic rhinitis* 5. Gastroesophageal reflux disease (GERD)

	<ol style="list-style-type: none"> 6. Conjunctivitis (bacterial, viral and allergic) 7. Acne (mild to moderate)* 8. Vulvovaginal candidiasis (yeast infection) 9. Musculoskeletal sprains and strains 10. Hemorrhoids* 11. Candidal stomatitis (oral thrush)* 12. Insect bites / urticaria 13. Dysmenorrhea* 14. Diaper dermatitis 15. Nausea and vomiting of pregnancy 16. Lyme disease, post exposure prophylaxis 17. Oral aphthae (canker sores)* 18. Pinworms and threadworms 19. Impetigo <p>*approved in 7/7 provinces</p> <p>Feedback was also sought on types of guidance of practice tools that would best support pharmacists in the provision of care for minor ailments. Common supports selected were treatment flowcharts (88%), e-learning modules (77%), guidance on meeting regulatory requirements (71%) and follow-up/monitoring tools (53%).</p>
<p>Four third-party facilitated public focus groups held in October 2019</p>	<p>The group provided input on important safety considerations. Many will require collaboration with multiple stakeholders.</p> <p>Feedback highlighted the importance of the following:</p> <ul style="list-style-type: none"> • Privacy when communicating with a pharmacist in a practice setting, • Avoidance of creating inequality in the healthcare system by requiring patients to pay out-of-pocket for services publicly funded in other settings, • The ability for pharmacies to have dedicated time and staff support in a busy setting, • Ensuring pharmacists have appropriate training and that this is communicated to patients, • Pharmacist access to health records, and • Communication between pharmacists and primary care providers.
<p>Citizen's Advisory Group in February 2020</p>	<p>This group provided feedback on the preliminary list of 19 minor ailments and on potential safeguards. The group emphasized the importance of selecting minor ailments for which there would be lower risk that the symptoms could be masking another underlying more serious condition. Minor ailments that were noted as being of concern included gastroesophageal reflux disease, pinworms and threadworms, and nausea and vomiting of pregnancy.</p>

	<p>The group highlighted the importance of ensuring proper training and resources are in place. There was recognition of the potential challenges posed by busy practice environments and the importance of ensuring there are adequate numbers of staff to provide quality, safe care.</p>
<p>Data on less and/or non-urgent emergency department (ED) visits from 2014-2019</p>	<p>ED visit data from the Institute for Clinical Evaluative Sciences (ICES) was analyzed to understand the impact pharmacist prescribing for minor ailments may have if this type of routine care were moved into the community pharmacy setting.</p> <p>Of the preliminary list of 19 minor ailments, below are the ten with the most number of ED visits from 2014 to 2019:</p> <ol style="list-style-type: none">1. Urinary tract infection (uncomplicated)2. Conjunctivitis (bacterial, viral, allergic)3. Insect bites/urticarial4. Musculoskeletal sprains and strains5. Dermatitis (atopic-mild/moderate eczema, allergic contact and irritant contact)6. Impetigo7. Candidal stomatitis (oral thrush)8. Hemorrhoids9. Gastroesophageal reflux disease (GERD)10. Vulvovaginal candidiasis (yeast infections)

Pharmacy Act, 1991
Loi de 1991 sur les pharmaciens

ONTARIO REGULATION 202/94
GENERAL

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This Regulation is made in English only.

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PART I INTERPRETATION

DEFINITIONS

1. In this Regulation,

“direct supervision” means supervision that is provided by a person who is physically present on the premises where the practice that is being supervised is being carried out;

“non-restricted registration” means the holding of a licence, permit, certificate or registration as a pharmacist from an authority responsible for the regulation of pharmacists in one of the states of the United States of America, or in another non-Canadian jurisdiction that has been approved by the Council, where that licence, permit, certificate or registration is not subject to any restrictions, terms, conditions or limitations, including terms, conditions or limitations that,

- (a) relate to the holder’s ability to practise independently,
- (b) require the holder to practise under supervision or direction,
- (c) require the holder to maintain a position or appointment as a condition of continued registration,
- (d) require the holder to practise only in a part of the geographical area over which the authority has jurisdiction,
- (e) restrict the holder to temporary or time-limited registration or practice,
- (f) were imposed by that authority or any committee or panel of that authority as a result of a disciplinary, registration, fitness to practise or similar proceeding, or
- (g) were placed on the holder’s registration by agreement between the holder and that authority;

“pharmacy” has the same meaning as in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*;

“remote dispensing location” has the same meaning as in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*.

PART II GENERAL PROVISIONS RE CERTIFICATES OF REGISTRATION

CLASSES OF CERTIFICATES OF REGISTRATION

2. (1) The following are prescribed as classes of certificates of registration:

1. Pharmacist.
2. Registered pharmacy student.
3. Intern.
4. Pharmacy technician.

(2) Every certificate of registration that was in existence immediately before December 3, 2010 is continued as the equivalent certificate of registration with the same status under this Regulation until such time as it otherwise ceases to be effective.

(3) Where an application for a certificate of registration had been made but not finally dealt with before December 3, 2010, the application shall be dealt with in accordance with this Regulation as amended by Ontario Regulation 451/10.

APPLICATION FOR CERTIFICATE OF REGISTRATION

3. A person may apply for a certificate of registration by submitting a completed application in the form provided by the Registrar together with any supporting documentation requested by the Registrar and the applicable fees.

REQUIREMENTS FOR ISSUANCE OF CERTIFICATE OF REGISTRATION, ANY CLASS

4. (1) The following are requirements for the issuance of a certificate of registration of any class:

1. The applicant must possess sufficient language proficiency, in either English or French, to be able to communicate and comprehend effectively, both orally and in writing.
 2. The applicant must not have been found guilty of any offence in any jurisdiction.
 3. The applicant must not be the subject of a current proceeding in respect of any offence in any jurisdiction.
 4. The applicant must not have been the subject of a finding of professional misconduct, incompetence or incapacity or any like finding in Ontario or any other jurisdiction in relation to pharmacy or any other profession or occupation and must not be the subject of any current 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.
 5. The applicant must be a Canadian citizen or permanent resident of Canada or must hold the appropriate authorization under the *Immigration and Refugee Protection Act* (Canada) to permit the applicant to engage in the practice of pharmacy in Ontario as a pharmacist, registered pharmacy student, intern or pharmacy technician in the manner permitted by the certificate of registration for which he or she has applied.
 6. The applicant's past and present conduct must afford reasonable grounds for the belief that the applicant,
 - i. will practise pharmacy with decency, honesty and integrity, and in accordance with the law,
 - ii. does not suffer from any physical or mental condition or disorder that could affect his or her ability to practise pharmacy in a safe manner,
 - iii. has sufficient knowledge, skill and judgment to competently engage in the practice of pharmacy authorized by the certificate of registration, and
 - iv. will display an appropriately professional attitude.
 7. The applicant must provide evidence satisfactory to the Registrar that the applicant will have professional liability insurance in the amount and in the form as required by the by-laws as of the anticipated date for the issuance of his or her certificate of registration.
 8. The applicant must have paid any fees required under the by-laws for the issuance of the certificate of registration for which the applicant applied.
- (2) The requirement under paragraph 8 of subsection (1) is non-exemptible.
- (3) An applicant must meet all of the requirements for registration within one year following the filing his or her application, but this does not prevent the applicant from filing a new application.
- (4) An applicant shall be deemed not to have satisfied the requirements for the issuance of a certificate of registration if the applicant makes a false or misleading statement or representation in his or her application or supporting documentation.

TERMS, ETC., OF EVERY CERTIFICATE

5. Every certificate of registration is subject to the following terms, conditions and limitations:
1. The member shall provide to the Registrar the details of any of the following that relate to the member and that occur or arise after the registration of the member:
 - i. a finding of guilt arising in any jurisdiction relating to any offence,
 - ii. a charge arising in any jurisdiction relating to any offence,
 - iii. a finding of professional misconduct, incompetence or incapacity or any like finding in any jurisdiction in relation to pharmacy or any other profession or occupation,
 - iv. a proceeding for professional misconduct, incompetence or incapacity or any like proceeding in any jurisdiction in relation to pharmacy or any other profession or occupation.
 2. The member shall not engage in the practice of pharmacy unless the member is a Canadian citizen or permanent resident of Canada or has authorization under the *Immigration and Refugee Protection Act* (Canada) permitting the member to engage in the practice of pharmacy in Ontario in the manner permitted by the certificate of registration.
 3. The member shall immediately advise the Registrar in writing in the event the member ceases to be a Canadian citizen or permanent resident of Canada or to have authorization under the *Immigration and Refugee Protection Act* (Canada) permitting the member to engage in the practice of pharmacy in Ontario in the manner permitted by the certificate of registration.
 4. If a member to whom paragraph 3 applies subsequently obtains Canadian citizenship or becomes a permanent resident of Canada or attains authorization under the *Immigration and Refugee Protection Act* (Canada) permitting the member to engage in the practice of pharmacy in Ontario permitted by the certificate of registration, the member shall immediately advise the Registrar in writing of that fact.
 5. The member shall maintain professional liability insurance in the amount and in the form as required by the by-laws.

6. A member who fails to meet the condition in paragraph 5 shall immediately advise the Registrar in writing of that fact and immediately cease to engage in the practice of pharmacy until such time as the member obtains professional liability insurance as required in paragraph 5.
7. Where a member to whom paragraph 6 applies subsequently obtains professional liability insurance, the member shall notify the Registrar in writing of that fact and, if requested by the Registrar, shall provide details of that coverage.

**PART III
REGISTRATION — PHARMACISTS**

ADDITIONAL REQUIREMENTS

6. (1) The following are additional requirements for the issuance of a certificate of registration as a pharmacist:
 1. The applicant must,
 - i. have a minimum of a baccalaureate degree in pharmacy evidencing the successful completion of a program designed to educate and train persons to be practising pharmacists which was,
 - A. awarded on or before December 31, 1993 by a constituent faculty of the Association of Faculties of Pharmacy of Canada, or
 - B. awarded by a university as a result of successful completion of a program which was, at the time of the award, accredited by the Canadian Council for Accreditation of Pharmacy Programs or by another accrediting body approved by the Council for that purpose, or
 - ii. have a university degree in pharmacy that does not meet the requirements of subparagraph i but that evidences the successful completion of a program designed to educate and train persons to be practising pharmacists, and,
 - A. have successfully completed a program that, at the time the applicant commenced it, was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B, or
 - B. have successfully completed the examination provided for in paragraph 4 on the applicant's first attempt and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B.
 2. The applicant must have successfully completed an examination in pharmaceutical jurisprudence approved by the Council for applicants for a certificate of registration as a pharmacist.
 3. Subject to subsection (5), the applicant must have successfully completed a structured practical training program approved by the Council, while holding a certificate of registration as an intern and while under the supervision of a preceptor approved by the Registration Committee.
 4. The applicant must have successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacists at a time when the examination was approved by the Council or have successfully completed another examination that has been approved by the Council for that purpose.
- (2) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 3 of subsection (1) may be completed as part of a program referred to in paragraph 1 of subsection (1), even if the applicant did not hold a certificate of registration as an intern at the time.
- (3) The requirement in paragraph 1 of subsection (1) must be met within two years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist unless the applicant,
 - (a) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in Canada, the United States of America or another jurisdiction approved by the Council;
 - (b) undergoes a review of his or her practice conducted in a manner approved by the Registration Committee, meets any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pays the required fees; or
 - (c) successfully completes the examination referred to in paragraph 4 of subsection (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacist.
- (4) The requirement in paragraph 2 of subsection (1) shall not be considered to be met unless the applicant is issued a certificate of registration as a pharmacist within three years of meeting that requirement.

- (5) An applicant is deemed to have met the requirement in paragraph 3 of subsection (1) if, at the time of application, the applicant,
- (a) has successfully completed a structured practical training program which is, in the opinion of the Registration Committee at least equivalent to the program mentioned in paragraph 3 of subsection (1); or
 - (b) has other education, training or experience that is, in the opinion of a panel of the Registration Committee at least equivalent to the program mentioned in paragraph 3 of subsection (1).
- (6) The requirement in paragraph 3 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as a pharmacist within two years of meeting the requirement or within such greater time as is specified by a panel of the Registration Committee.
- (7) Subject to subsection (8), the requirement in paragraph 4 of subsection (1) is not considered to have been met unless the applicant,
- (a) successfully completed the examination within three attempts; or
 - (b) successfully completed the examination on the applicant's fourth attempt having first successfully completed the further education or training or combination of education and training required by the examining body responsible for the administration of the examination or, if no further education or training was required by that body, the further education or training or combination of education and training, if any, specified by a panel of the Registration Committee.
- (8) Where, by virtue of subsection (7), an applicant is not considered to have met the requirement in paragraph 4 of subsection (1), the applicant may not attempt the examination again until the applicant obtains a new degree mentioned in subparagraph 1 i of subsection (1).
- (9) An applicant is only eligible to take the examination referred to in paragraph 2 of subsection (1) three times in any 24-month period.
- (10) The requirements in paragraphs 1, 3 and 4 of subsection (1) are deemed to have been met by an applicant,
- (a) who previously held a certificate of registration as a pharmacist in Ontario; and
 - (b) who,
 - (i) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in Canada, the United States of America or another jurisdiction approved by the Council, or
 - (ii) undergoes a review of his or her practice conducted in a manner approved by the Registration Committee, meets any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pays the required fees.
- (11) An applicant who has a university degree in pharmacy mentioned in subparagraph 1 ii of subsection (1), and who successfully completes any further education or training or combination of education and training specified by a panel of the Registration Committee shall be deemed to have met the requirement in paragraph 1 of subsection (1) if the applicant,
- (a) was registered as an intern on December 3, 2010; or
 - (b) becomes registered as an intern after December 3, 2010 but before December 3, 2011.
- (12) Subject to subsections (2), (5), (10) and (11) and sections 7 and 8, the requirements in subsection (1) are non-exemptible.
- (13) A reference in this section or section 7 to "all of the other requirements for the issuance of a certificate of registration" includes, without being limited to, a requirement set out in subsection 4 (1) or subsection (1) of this section.

MOBILITY FROM OUTSIDE CANADA

7. An applicant is deemed to have met the requirements in paragraph 1 of subsection 6 (1) if the applicant meets all the following non-exemptible requirements:

1. The applicant must,
 - i. hold a non-restricted registration in at least one jurisdiction at the time of application and have held that registration continuously for at least two years, and
 - ii. satisfy the Registrar or a panel of the Registration Committee that the applicant engaged in the full scope of practice as a pharmacist in that jurisdiction for at least 600 hours.
2. The applicant must,

- i. satisfy the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in one or more of the jurisdictions where he or she held the non-restricted registration,
- ii. undergo a review of his or her practice conducted in a manner approved by the Registration Committee, meet any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pay the required fees, or
- iii. successfully complete the examination referred to in paragraph 4 of subsection 6 (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacist.

MOBILITY WITHIN CANADA

8. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of paragraphs 1, 3 and 4 of subsection 6 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacist in that jurisdiction.

(2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,

- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
- (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as a pharmacist.

(3) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.

(4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.

TERMS, CONDITIONS AND LIMITATIONS, PART B PHARMACIST

9. (1) Every certificate of registration of a pharmacist listed in Part B of the register is subject to the following terms, conditions and limitations:

1. The member shall not provide any care to a patient, whether direct or indirect.
2. The member shall not dispense, sell or compound drugs.
3. The member shall not supervise that part of the pharmacy where drugs are kept.
4. The member shall not be the designated manager of a pharmacy within the meaning of the *Drug and Pharmacies Regulation Act*.
5. The member shall not supervise the practice of pharmacy of an intern, registered pharmacy student or pharmacy technician.
6. The member shall, when working in a pharmacy or any other environment where patient care is being provided, clearly identify him or herself as a non-practising pharmacist.

(2) With the prior written approval of the Registrar, and despite paragraphs 1 and 2 of subsection (1), a pharmacist listed in Part B of the register may dispense, sell or compound a drug and provide care to a patient under the direct supervision of a pharmacist who is registered in Part A of the register where the sole purpose is to assist the member in preparing to meet the requirements specified in subsection 46 (3) to transfer a member holding a certificate of registration as a pharmacist who is registered in Part B of the register to Part A of the register.

(3) Where a member wishes to seek the approval of the Registrar under subsection (2), the member shall provide to the Registrar, in writing, the name of the pharmacist or pharmacists who will be providing the required supervision, the name and address of the pharmacy or pharmacies at which the member proposes to practise under that supervision and the proposed date upon which the member wishes to commence practice.

(4) Any approval provided by the Registrar under subsection (2) must specify,

- (a) the name of the pharmacist or pharmacists who will be required to supervise the member;
- (b) the name and address of the pharmacy or pharmacies where the member will be practising; and
- (c) the term of the approval, which must not exceed six months.

(5) Where the Registrar is satisfied that it is appropriate to do so the Registrar may extend the term of the approval provided under subsection (2) but in no case may the combined term exceed one year unless a panel of the Quality Assurance Committee approves of a further extension.

PART IV REGISTRATION — REGISTERED PHARMACY STUDENTS

ADDITIONAL REQUIREMENT

- 10.** (1) It is an additional requirement for the issuance of a certificate of registration as a registered pharmacy student that the applicant must,
- (a) have been accepted as a student in a university program referred to in subparagraph 1 i of subsection 6 (1) or in an approved program referred to in sub-subparagraph 1 ii A of that subsection;
 - (b) be engaged in attaining any education or training referred to in sub-subparagraph 1 ii B of subsection 6 (1); or
 - (c) be engaged in attaining any education or training specified by a panel of the Registration Committee as a condition for the issuance of another certificate of registration, other than a certificate of registration as a pharmacy technician.
- (2) Subject to section 11, the requirement in subsection (1) is non-exemptible.

MOBILITY WITHIN CANADA

11. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of subsection 10 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacy student in that jurisdiction.

(2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,

- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
- (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as a registered pharmacy student.

(3) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.

(4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.

TERMS, CONDITIONS AND LIMITATIONS

12. (1) Every certificate of registration as a registered pharmacy student is subject to the following terms, conditions and limitations:

1. The member,

- i. in the case of a member to whom subsection 11 (1) does not apply, shall only engage in the practice of pharmacy while enrolled in and actively participating in a program provided for in subsection 10 (1) or while actively engaged in any education or training specified in that subsection, and
- ii. in the case of a member to whom subsection 11 (1) applies, shall only engage in the practice of pharmacy while enrolled in and actively participating in an educational program that is a requirement for the issuance of an applicable out-of-province certificate authorizing practice as an intern or pharmacist.

2. The member may only engage in the practice of pharmacy,

- i. while under the direct supervision of a member who holds a certificate of registration as a pharmacist, or
- ii. where a program or any education or training provided for in subsection 10 (1) includes a clinical component in a premises that is not a pharmacy but at which drugs may be prescribed or dispensed, while under the direct supervision of a member of a College within the meaning of the *Regulated Health Professions Act, 1991* who has been approved for this purpose by the faculty that provides the program, education or training.

3. Despite subparagraph 2 ii, the member shall not dispense, compound or sell a drug unless under the direct supervision of a member holding a certificate of registration as a pharmacist.

4. Despite subparagraph 2 ii, the member may not supervise that part of the pharmacy where drugs are kept.

5. The member may neither delegate a controlled act nor accept the delegation of a controlled act.

(2) A certificate of registration as a registered pharmacy student automatically expires when the member is issued a certificate of registration as a pharmacist or an intern.

- (3) A certificate of registration as a registered pharmacy student automatically expires,
 - (a) in the case of a member engaged in a program referred to in subparagraph 1 i of subsection 6 (1), when the member is refused readmission to the program, ceases to be enrolled in the program or ceases to actively participate in the program;
 - (b) in the case of a member engaged in an approved program referred to in sub-subparagraph 1 ii A of subsection 6 (1), two years after registration as a registered pharmacy student unless that period of time is extended by a panel of the Registration Committee;
 - (c) in the case of a member engaged in attaining any education or training or combination of education and training referred to in sub-subparagraph 1 ii B of subsection 6 (1) or in attaining any education or training or combination of education and training required by a panel of the Registration Committee as a condition for the issuance of another class of certificate of registration, on the date specified by the panel in its decision or, if no date was specified, one year from that decision, unless extended by a panel of the Registration Committee; and
 - (d) in the case of a member whose application for a certificate of registration as a registered pharmacy student was considered under subsection 11 (1), on the date on which the member ceases to hold an out-of-province certificate that is equivalent to a certificate of registration as a registered pharmacy student.

PART V
REGISTRATION — INTERNS

ADDITIONAL REQUIREMENTS

13. (1) The following are additional requirements for the issuance of a certificate of registration as an intern:
 1. The applicant must,
 - i. have a minimum of a baccalaureate degree in pharmacy evidencing the successful completion of a program designed to educate and train persons to be practising pharmacists which was,
 - A. awarded on or before December 31, 1993 by a constituent faculty of the Association of Faculties of Pharmacy of Canada, or
 - B. awarded by a university as a result of successful completion of a program which was, at the time of the award, accredited by the Canadian Council for Accreditation of Pharmacy Programs or by another accrediting body approved by the Council for that purpose, or
 - ii. have a university degree in pharmacy that does not meet the requirements of subparagraph i but that evidences the successful completion of a program designed to educate and train persons to be practising pharmacists, and,
 - A. have successfully completed a program that, at the time the applicant commenced it, was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B, or
 - B. have successfully completed the examination provided for in paragraph 4 of subsection 6 (1) on the applicant's first attempt and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B.
 2. Subject to subsections (3) and (4), the applicant must have successfully completed a structured practical training program approved by the Council while holding a certificate of registration as a registered pharmacy student and while under the direct supervision of a preceptor approved by the Registration Committee.
- (2) Subject to subsections (3) and (4) and section 14, the requirements in subsection (1) are non-exemptible.
- (3) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 2 of subsection (1) may be completed as part of a program referred to in paragraph 1 of subsection (1), even if the applicant did not hold a certificate of registration as a registered pharmacy student at the time.
- (4) An applicant shall be deemed to have met the requirement in paragraph 2 of subsection (1) if, at the time of application, the applicant holds a non-restricted registration as a pharmacist, has held that registration for at least two years and the applicant,
 - (a) satisfies the Registrar or a panel of the Registration Committee that the applicant engaged in the full scope of practice as a pharmacist in that jurisdiction for at least 600 hours;
 - (b) successfully completed a structured practical training program which is, in the opinion of a panel of the Registration Committee at least equivalent to a program mentioned in paragraph 2 of subsection (1), or has other education, training or experience that, in the opinion of a panel of the Registration Committee is at least equivalent to the program mentioned in paragraph 2 of subsection (1); or

(c) successfully completed the education and obtained the additional training or experience that a panel of the Registration Committee has specified.

(5) The requirement of paragraph 2 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as an intern within one year of meeting that requirement or within such greater time as is specified by a panel of the Registration Committee.

(6) An applicant who has a university degree in pharmacy mentioned in subparagraph 1 ii of subsection (1), and who successfully completes any further education or training or combination of education and training specified by a panel of the Registration Committee shall be deemed to have met the requirement in paragraph 1 of subsection (1) if the applicant,

(a) was registered as a registered pharmacy student on December 3, 2010; or

(b) becomes registered as a registered pharmacy student after December 3, 2010 but before December 3, 2011.

MOBILITY WITHIN CANADA

14. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of subsection 13 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as an intern in that jurisdiction.

(2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,

(a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and

(b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as an intern.

(3) An applicant referred to in subsection (1) is deemed to meet the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.

(4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.

TERMS, CONDITIONS AND LIMITATIONS

15. (1) Every certificate of registration as an intern is subject to the following terms, conditions and limitations:

1. The member shall only engage in the practice of pharmacy,

i. when practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies, while under the direct supervision of a member holding a certificate of registration as a pharmacist, or

ii. in all other cases, while under the supervision of a member holding a certificate of registration as a pharmacist.

2. The member shall not supervise that part of the pharmacy where drugs are kept.

3. The member shall not delegate a controlled act.

(2) A certificate of registration as an intern automatically expires,

(a) when the member is issued a certificate of registration as a pharmacist; or

(b) one year from the date on which it was issued unless a panel of the Registration Committee specifies otherwise.

PART VI REGISTRATION — PHARMACY TECHNICIANS

ADDITIONAL REQUIREMENTS

16. (1) The following are additional requirements for the issuance of a certificate of registration as a pharmacy technician:

1. The applicant must,

i. have successfully completed a pharmacy technician program designed to educate and train persons to be pharmacy technicians which was, at the time the applicant graduated, accredited by the Canadian Council for Accreditation of Pharmacy Programs or such other accrediting body approved by the Council for that purpose,

ii. have successfully completed a pharmacy technician program designed to educate and train persons to be pharmacy technicians other than one referred to in subparagraph i or have a university degree or university diploma in pharmacy and, in either case,

A. must have successfully completed a program that, at the time the applicant commenced was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i, or

- B. must have successfully completed the examination referred to in paragraph 4 on the applicant's first attempt, and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i,
 - iii. have successfully completed a program before January 1, 2015 that, at the time the applicant commenced was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i, or
 - iv. have met the requirements of paragraph 1 of subsection 6 (1).
2. The applicant must have successfully completed an examination in pharmaceutical jurisprudence approved by the Council for applicants for a certificate of registration as a pharmacy technician.
 3. The applicant must have successfully completed a structured practical training program approved by the Council and must have done so under the direct supervision of a preceptor approved by the Registration Committee.
 4. The applicant must have successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacy technicians or successfully completed another examination that has been approved by the Council for that purpose.
- (2) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 3 of subsection (1) may be completed as part of a program referred to in subparagraph 1i of subsection (1) or sub-subparagraph 1 ii A of subsection (1).
- (3) The requirement in paragraph 1 of subsection (1) must be met within two years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacy technician unless the applicant,
- (a) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act under the supervision or direction of a pharmacist for at least 600 hours during the three years before the date on which the applicant met all the other requirements for the issuance of a certificate of registration as a pharmacy technician and did so while practising as a pharmacy technician in Canada or in another jurisdiction approved by the Council;
 - (b) meets any requirements regarding any further education or training or a combination of education or training, if any, set by a panel of the Registration Committee within the time set by the panel; or
 - (c) successfully completes the examination referred to in paragraph 4 of subsection (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacy technician.
- (4) The requirement of paragraph 2 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as a pharmacy technician within three years of meeting that requirement.
- (5) An applicant is only eligible to take the examination referred to in paragraph 2 of subsection (1) three times in any 24-month period.
- (6) The requirement in paragraph 3 of subsection (1) shall not be considered to have been met unless the applicant,
- (a) is issued a certificate of registration as a pharmacy technician within two years of meeting that requirement;
 - (b) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act under the supervision or direction of a pharmacist for at least 600 hours during the three years before the date on which the applicant met all the other requirements for the issuance of a certificate of registration as a pharmacy technician and did so while practising as a pharmacy technician in Canada or in another jurisdiction approved by the Council; or
 - (c) meets any requirements regarding any further education or training or a combination of education or training, if any, set by a panel of the Registration Committee within the time set by the panel.
- (7) Subject to subsection (8), paragraph 4 of subsection (1) is not considered to have been met unless the applicant,
- (a) successfully completed the examination within three attempts; or
 - (b) successfully completed the examination on the applicant's fourth attempt having first successfully completed the further education or training or combination of education and training required by the examining body responsible for the administration of the examination or, if no further education or training was required by that body, the further education or training or combination of education and training, if any, that was specified by a panel of the Registration Committee.
- (8) Where, by virtue of subsection (7), an applicant is not considered to have met the requirement in paragraph 4 of subsection (1), the applicant may not attempt the examination again until the applicant successfully completes a new program mentioned in subparagraph 1 i of subsection (1).

- (9) An applicant shall be deemed not to have met the requirement of subparagraph 1 iii of subsection (1) unless, before January 1, 2012 and before commencing the program referred to in that subparagraph, the applicant successfully completed,
- (a) the College's Pharmacy Technician Certification Examination;
 - (b) the Pharmacy Technician Evaluating Examination of the Pharmacy Examining Board of Canada; or
 - (c) another examination approved by the Council.
- (10) Subject to subsection (2) and section 17, the requirements in subsection (1) are non-exemptible.
- (11) A reference in this section to "all of the other requirements for the issuance of a certificate of registration" includes, without being limited to, a requirement set out in subsection 4 (1) or subsection (1) of this section.

MOBILITY WITHIN CANADA

17. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of paragraphs 1, 3 and 4 of subsection 16 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacy technician in that jurisdiction.
- (2) Without in any way limiting the generality of subsection (1), "good standing" shall include the fact that,
- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
 - (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority in that issued the applicant that out-of-province certificate as a pharmacy technician.
- (3) An applicant referred to in subsection (1) is deemed to meet the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant's out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.
- (4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.

TERMS, CONDITIONS AND LIMITATIONS

18. Every certificate of registration as a pharmacy technician is subject to the following terms, conditions and limitations:
- 1. The member shall only engage in the practice of pharmacy,
 - i. when practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies, other than a remote dispensing location, while under the direct supervision of a member holding a certificate of registration as a pharmacist, or
 - ii. in all other cases, while under the supervision or direction of a member holding a certificate of registration as a pharmacist.
 - 2. When practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies the member shall not supervise that part of a pharmacy where drugs are kept.
 - 3. The member shall not delegate a controlled act.
 - 4. The member shall not provide information or education relating to drug use, either to or for a patient, where the provision of the information requires therapeutic knowledge, clinical analysis or clinical assessment.

PART VII SUSPENSIONS, RESIGNATIONS, REINSTATEMENTS, ETC.

ADMINISTRATIVE SUSPENSIONS

19. (1) If a member fails to provide information about the member in the manner and in the form as required under the by-laws, the Registrar may give the member notice of intention to suspend the member and may suspend the member's certificate of registration for failure to provide the information 60 days after notice is given.
- (2) Where the Registrar suspends a member's certificate of registration under subsection (1), the Registrar shall lift the suspension upon being satisfied that the required information has been filed with the College and that any fees required for the lifting of that suspension has been paid.
20. (1) If, pursuant to the by-laws, the College requests evidence that the member holds professional liability insurance in the amount and in the form as required by the by-laws and the member fails to provide that evidence within 14 days of having been requested to do so, the Registrar shall immediately give the member notice of intention to suspend the member and may suspend the member's certificate of registration for failure to provide the evidence 30 days after notice is given.

(2) Where the Registrar suspends the member's certificate of registration under subsection (1), the Registrar shall lift that suspension upon being satisfied that the member holds professional liability insurance in the amount and in the form required by the by-laws and that any fee required for the lifting of that suspension has been paid.

21. Where the Registrar suspends a member's certificate of registration under section 24 of the Health Professions Procedural Code for failure to pay a fee, the Registrar shall lift the suspension upon being satisfied that the member,

- (a) has paid all amounts owed to the College;
- (b) holds professional liability insurance in the amount and in the form required by the by-laws; and
- (c) pays any fees required for the lifting of that suspension.

DEEMED RESIGNATIONS

22. (1) A member shall be deemed to have resigned where,

- (a) the member's certificate of registration was suspended for failure to pay a fee that the member was required to pay in accordance with the regulations or by-laws and that suspension continued for 120 days; or
- (b) the member's certificate of registration was suspended pursuant to subsection 19 (1) or subsection 20 (1) and the suspension continued for 60 days.

(2) The resignation is effective,

- (a) in the case of a resignation under clause (1) (a), on the 121st day following the commencement of that suspension;
- (b) in the case of a suspension under clause (1) (b), on the 61st day following the commencement of the suspension.

RETURN OF CERTIFICATE, ETC.

23. A member who resigns, or whose certificate of registration is suspended or revoked shall, if so requested, immediately return to the College,

- (a) his or her certificate of registration; and
- (b) any card or other form of identification issued to him or her by the College for the purpose of identifying him or her as a member of the College.

REINSTATEMENT

24. (1) A former member who held a certificate of registration as a pharmacist or pharmacy technician and who resigned as a member of the College may apply for the reinstatement of his or her certificate of registration by submitting a completed application to the Registrar in the form provided by the Registrar.

(2) Subject to subsections (3), (4) and (6), the Registrar may reinstate the former member's certificate of registration if,

- (a) the former member has paid,
 - (i) the required reinstatement fee,
 - (ii) the annual fee for the year in which the certificate of registration is to be reinstated, if not previously paid,
 - (iii) the annual fee for the year in which the former member resigned or was deemed to have resigned, if not previously paid unless the Registrar is satisfied that the former member did not engage in the practice of pharmacy in Ontario during that year, and
 - (iv) any other money owed by the former member to the College at the date the application for reinstatement is submitted, including, without being limited to, any penalty fees that were due at the time that he or she ceased to be a member and any costs or expenses ordered to be paid under section 53.1 of the Health Professions Procedural Code, any costs awarded to the College by a Court and any amount owing to the College under a by-law or former regulation made under the Act;
- (b) the application for reinstatement was submitted to the Registrar within three years of the date on which the former member resigned or in the case of a former member who was deemed to have resigned under subsection 22 (1), three years from the date on which the former member was suspended where that suspension resulted in a deemed resignation; and
- (c) the application meets the requirement set out in paragraph 7 of subsection 4 (1) with necessary modifications.

(3) A former member is ineligible for reinstatement under subsection (2) if he or she,

- (a) is the subject of a proceeding for professional misconduct, incompetence or incapacity in Ontario or any like proceeding in any other jurisdiction in relation to the practice of pharmacy or another profession, or was the subject of such a proceeding, other than a proceeding that was completed on its merits;
- (b) was, at the time he or she ceased to be a member or at any time since, the subject of a proceeding in respect of,

- (i) any criminal offence in any jurisdiction,
 - (ii) any offence relating to the use, possession or sale of drugs in any jurisdiction,
 - (iii) any offence arising in any jurisdiction relating to the practice of pharmacy or any other profession or occupation, or
 - (iv) any offence under the *Controlled Drugs and Substances Act* (Canada);
- (c) was, after he or she ceased to be a member, found guilty of,
- (i) any criminal offence in any jurisdiction,
 - (ii) any offence relating to the use, possession or sale of drugs in any jurisdiction,
 - (iii) any offence arising in any jurisdiction relating to the practice of pharmacy or any other profession or occupation, or
 - (iv) any offence under the *Controlled Drugs and Substances Act* (Canada);
- (d) is the subject of an inquiry or investigation by the Registrar, a committee, a panel of a committee or a board of inquiry of the College, or was the subject of such an inquiry or investigation, that was not completed on its merits or which resulted in the member's resignation;
- (e) was, at the time he or she ceased to be a member, the subject of an outstanding order or requirement of a committee, a panel of a committee, or a board of inquiry of the College;
- (f) was, at the time he or she ceased to be a member, in breach of an order or requirement of a committee, a panel of a committee, or a board of inquiry of the College;
- (g) was, at the time he or she ceased to be a member, in violation of a decision of a panel of the Inquiries, Complaints and Reports Committee or of any predecessor committee, including a decision requiring the member to attend to be cautioned;
- (h) was, at the time he or she ceased to be a member, in breach of any written agreement with or undertaking provided to the College; or
- (i) had, at the time he or she ceased to be a member, terms, conditions or limitations on his or her certificate of registration, other than those applicable to all members of the class of certificate of registration he or she previously held.
- (4) A former member must meet all of the requirements set out in subsection (2) within one year of submitting his or her application for reinstatement.
- (5) Nothing in this section prevents a former member from making any number of applications for reinstatement or from making an application for a new certificate of registration.
- (6) A former member who is seeking reinstatement of a certificate of registration as a pharmacist and who is otherwise eligible for the reinstatement shall be reinstated into Part B of the register unless the former member satisfies the Registrar that,
- (a) the former member did not resign at a time when the member had been selected for but had not successfully completed a practice review under the College's Quality Assurance Program; and
 - (b) the member had performed at least 600 hours of patient care in Canada, the United States of America or another jurisdiction approved by the Council during the period of three years commencing immediately before the date of the member's resignation.

REINSTATEMENT, PURSUANT TO ORDER

25. If a former member's certificate of registration is ordered to be reinstated by a panel of the Discipline Committee or of the Fitness to Practise Committee, the Registrar shall reinstate the certificate of registration upon payment of,

- (a) the required reinstatement fee; and
- (b) the annual fee for the year in which the certificate of registration is to be reinstated, if not previously paid.

PART VII.1 NOTICES OF MEETINGS AND HEARINGS

NOTICE OF MEETINGS

26. (1) The Registrar shall ensure that notice of every Council meeting that is required to be open to the public under the Act is given in accordance with this section.

(2) The notice must be published at least 14 days before the date of the meeting in a daily newspaper of general circulation throughout Ontario.

- (3) The notice must be in English and French.
- (4) The notice must contain the following information:
 1. The date, time and place of the meeting.
 2. A statement of the purpose of the meeting.
- (5) The Registrar shall provide the information contained in the notice to every person who requests it by telephone.

NOTICE OF HEARINGS

27. (1) The Registrar shall ensure that the information concerning an impending hearing by a panel of the Discipline Committee to deal with allegations of professional misconduct or incompetence made against a member is given, in accordance with this section, to a person who requests the information.

- (2) The information shall be given,
 - (a) at least 14 days before the date of the hearing, if the request is received 14 days before the date of the hearing; or
 - (b) as soon as possible after the request is made, if the request is received after that time but before the date of the hearing.
- (3) The information given shall be as follows:
 1. The name of the member against whom the allegations have been made.
 2. The member's principal place of practice.
 3. The date, time and place of the hearing.
 4. A statement of the purpose of the hearing.
- (4) The Registrar shall provide the information in French to a person who requests that the information be provided in French, wherever reasonably possible.

PART VII.2 ADVERTISING

ADVERTISING

- 28.** (1) In this section,
“advertisement” includes an announcement, directory listing or other form of communication similar to an advertisement;
“drug services” means one or more of the compounding, dispensing or sale by retail of drugs or the provision of information or advice with respect to drugs.
- (2) A member shall not, through any medium, publish, display, distribute or use, or permit, directly or indirectly, the publication, display, distribution or use through any medium of, an advertisement relating to drug services that,
 - (a) is false, misleading or deceptive, whether as a result of the inclusion of information or the omission of information;
 - (b) is not readily comprehensible to the persons to whom it is directed;
 - (c) is not dignified and in good taste;
 - (d) contains anything that cannot be verified;
 - (e) contains testimonials, comparative statements or endorsements;
 - (f) contains a reference to a member's area of practice or to a procedure or treatment available from a member practising in the pharmacy, unless the advertisement discloses whether or not the member has an area of expertise and, if the member does have such an area of expertise, the particular expertise;
 - (g) contains references to a particular brand of equipment used to assist in providing drug services;
 - (h) contains information that is not relevant to the choice of a pharmacist; or
 - (i) contains any representations as to the safety or effectiveness or an indication for use of any drug referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*.
 - (j) REVOKED: O. Reg. 59/11, s. 1 (4).
 - (3) An advertisement by a member that includes price information relating to drugs referred to in Schedule I established by the regulations under the Drug and Pharmacies Regulation Act shall include the price information for at least 15 different drugs, 10 of which each belong to a different one of the following drug classifications:
 1. Anti-infective agents.
 2. Antineoplastic agents.

3. Autonomic agents.
4. Blood formation and coagulation drugs.
5. Cardiovascular drugs.
6. Central nervous system drugs.
7. Diagnostic agents.
8. Electrolytic, caloric and water balance drugs.
9. Cough preparations.
10. Eye, ear, nose and throat preparations.
11. Gastrointestinal drugs.
12. Gold compounds.
13. Heavy metal antagonists.
14. Hormones and substitutes.
15. Oxytocics.
16. Skin and mucous membrane preparations.
17. Spasmolytics.
18. Unclassified therapeutic agents.
19. Vitamins.

(4) Where an advertisement by a member includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*, the advertisement shall include at a minimum the following information with respect to each drug:

1. The quantity of the drug being advertised at the advertised price.
2. The total cost for the drug to the purchaser including any dispensing fee.
3. The time period during which the advertised price will be available.

(5) An advertisement by a member that includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act* shall include, in addition to the price information referred to in subsection (4), the following information with respect to each advertised drug:

1. The strength of the drug.
2. The brand name of the drug.
3. The dosage form of the drug.

(6) Where an advertisement by a member includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*, equal prominence shall be given to each drug and, for each of those drugs, equal prominence shall be given to all the information required under subsections (4) and (5).

(7), (8) REVOKED: O. Reg. 59/11, s. 1 (6).

PROFESSIONAL MISCONDUCT RE ADVERTISING

29. It is professional misconduct for the purposes of clause 51 (1) (c) of the Health Professions Procedural Code for a member who advertises price information with respect to a drug referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act* to charge any purchaser, including the executive officer under the *Ontario Drug Benefit Act* more for the drug than the member has advertised, pursuant to paragraph 2 of subsection 28 (4), as the total cost for the drug to the purchaser including any dispensing fee.

CLARIFICATION RE APPLICATION OF PART

30. Nothing in this Part prohibits a member from publishing, displaying, distributing or using, or permitting directly or indirectly the publication, display, distribution or use of, an advertisement that relates solely to the co-payment or dispensing fee charged by the member for supplying a drug that is a listed drug product under the *Ontario Drug Benefit Act* to an eligible person under that Act.

PART VII.3 CONTROLLED ACTS

INTERPRETATION

31. In this Part,

“adapt” means to change a patient’s prescription respecting,

- (a) the dose of the prescribed drug,
- (b) the dosage form of the prescribed drug,
- (c) the directions for use of the prescribed drug, or
- (d) the route of administration for taking the prescribed drug,

but does not include therapeutic substitution;

“Part A pharmacist” means a member who holds a certificate of registration as a pharmacist and who is listed in Part A of the register;

“prescriber” means a person who is authorized under the laws of a province or territory of Canada to give a prescription within the scope of his or her practice of a health profession;

“prescription” means a direction from a prescriber directing the dispensing of a drug or mixture of drugs for a specific patient;

“renew” means to provide a patient with a prescription that repeats a prescription previously provided to that patient;

“therapeutic substitution” means the substitution of a drug that contains chemically different active ingredients that are considered to be therapeutically equivalent.

32. (1) Where the provisions of this Part are inconsistent with a law of Canada respecting prescriptions, including those related to a targeted substance, the law of Canada shall prevail and the provisions of this Part to the extent they are inconsistent with that law shall not apply.

(2) Where the provisions of this Part are inconsistent with the provisions of the *Narcotics Safety and Awareness Act, 2010*, the provisions of that Act shall prevail and the provisions of this Part, to the extent they are inconsistent with that Act, shall not apply.

CONTROLLED ACTS

33. A member shall not perform a controlled act under paragraph 2, 3, 4 or 5 of subsection 4 (1) of the Act except in accordance with this Part.

34. (1) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) who meets all the requirements in subsection (3) is authorized to perform the following acts:

1. Administering a substance specified in Schedule 1 by injection to a patient.
2. Administering a substance specified in Schedule 2 by inhalation to a patient.

(2) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform an act provided for in subsections (1), (4) and (5), subject to the terms, conditions and limitations imposed on his or her certificate of registration.

(3) A member may only perform an act provided for in subsection (1) if he or she complies with the following:

1. The member may only perform the act for the purpose of patient education and demonstration, and before performing the act,
 - i. must explain that purpose to the patient or his or her authorized agent, and
 - ii. must receive an informed consent from the patient or his or her authorized agent.
2. The member shall ensure that he or she only performs the act in an environment that is clean, safe, private and comfortable for the patient.
3. The member shall ensure that appropriate infection control procedures are in place.
4. The member must possess sufficient knowledge, skill and judgment respecting the substance to be administered, and sufficient understanding of the condition of the patient, to be able to administer the substance safely.
5. The member must consider whether administering a substance by injection or inhalation to the patient is appropriate, given the known risks and benefits to the patient and the safeguards and resources available to safely manage the outcome after administration and any other relevant circumstances.
6. The member must maintain a patient record that includes,

- i. the name and address of the patient,
- ii. the name and address of the member,
- iii. the date the act was performed,
- iv. the name, strength (where applicable) and quantity of the substance that the member administered to the patient,
- v. the circumstances relating to the administration of the substance to the patient and any adverse reaction experienced by the patient, and
- vi. confirmation that an informed consent was given by the patient or his or her authorized agent.

(4) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) is authorized to administer influenza vaccine by injection to a patient who is five years of age or older, if the member,

- (a) administers the vaccine in accordance with Ontario's Universal Influenza Immunization Program as described on the Ministry's website;
- (b) receives an informed consent from the patient or his or her authorized agent; and
- (c) meets all the requirements in paragraphs 2 to 6 of subsection (3).

(5) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) is authorized to administer a vaccine from one of the vaccines specified in Schedule 3 by injection to a patient who is five years of age or older, if the member,

- (a) receives an informed consent from the patient or his or her authorized agent;
- (b) meets all the requirements in paragraphs 2 to 6 of subsection (3); and
- (c) notifies the patient's primary care provider (if any) within a reasonable time that the member administered a vaccine to the patient and provides details respecting the administration.

35. (1) For the purposes of paragraph 3 of subsection 4 (1) of the Act, a member referred to in subsection (3) who complies with the other requirements of this section is authorized to prescribe:

1. The following specified drugs:
 - i. Varenicline Tartrate, and
 - ii. Bupropion Hydrochloride.
2. A drug in the categories listed in Schedule 4 for the corresponding conditions listed therein.

(2) A drug mentioned in paragraph 1 of subsection (1) may only be prescribed by a member for the sole purpose of smoking cessation.

(3) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform the act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration.

- (4) A member may only prescribe a drug under this section if he or she,
- (a) possesses sufficient knowledge, skill and judgment respecting the drug and the patient's condition to prescribe the drug for the patient;
 - (b) has considered whether prescribing the drug for the patient is appropriate, given the known risks and benefits of prescribing the drug for the patient and other relevant factors respecting the patient;
 - (c) gives the prescription to the patient or his or her authorized agent;
 - (d) advises the patient or his or her authorized agent, at the time of giving the prescription, that he or she may elect to take it to a pharmacy of his or her choosing for dispensing;
 - (e) notifies the patient's primary care provider (if any) within a reasonable time, that the member prescribed a drug for the patient and provides details respecting the prescription;
 - (f) complies with the additional requirements under sections 37 and 38; and
 - (g) in the case of a drug referred to in paragraph 2 of subsection (1),
 - i. has successfully completed such educational requirements as have been specified by Council, and
 - ii. has determined that prescribing the drug is the most appropriate treatment for the patient's condition.

36. (1) For the purposes of paragraph 4 of subsection 4 (1) of the Act, a member referred to in subsection (3) who complies with the other provisions of this section is authorized to perform the following acts:

1. Adapting a patient's prescription.
2. Renewing a patient's prescription for the purpose of continuity of care.

(2) Subsection (1) does not authorize a member referred to in subsection (3) to adapt or renew a prescription for a controlled substance as defined in the *Controlled Drugs and Substances Act* (Canada) or a drug designated as a monitored drug by the regulations under the *Narcotics Safety and Awareness Act, 2010*.

(3) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform an act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration.

(4) A member may only perform an act provided for in subsection (1) if he or she complies with the following:

1. The member must either possess the patient's prescription to be adapted or renewed or,
 - i. receive a copy of the prescription directly from the pharmacy where the prescription was dispensed to the patient,
 - ii. be satisfied based on verbal confirmation from a pharmacist at the pharmacy where the prescription was dispensed to the patient as to the existence and details of the prescription, or
 - iii. have access to the medical record that contains information about the prescription.
 2. If the member is renewing a prescription, he or she must not prescribe a quantity of the drug that exceeds the lesser of,
 - i. the quantity that was originally prescribed, including any refills that were authorized by the prescriber, and
 - ii. a six months' supply.
 3. The member must, within a reasonable time, notify the prescriber identified on the prescription adapted or renewed by the member, as well as the patient's primary care provider if the member knows that the patient has such a care provider other than the prescriber, providing details about the patient's prescription, when the member,
 - i. renews a patient's prescription, or
 - ii. adapts a patient's prescription, if, in the member's opinion,
 - A. adapting the prescription is clinically significant in relation to the patient, or
 - B. the notification is necessary to support the patient's care.
 4. At the time that the member adapts or renews the patient's prescription, the member must advise the patient or his or her authorized agent,
 - i. that he or she is entitled to the prescription, and
 - ii. that he or she may take the prescription to a pharmacy of his or her choosing for dispensing.
 5. The member must comply with the additional requirements under sections 37 and 38.
- 37.** A member who performs an act provided for in section 35 or 36 must ensure that the following information is recorded on the prescription:
1. The name and address of the patient for whom the drug is prescribed.
 2. The name, strength (where applicable) and quantity of the prescribed drug.
 3. Directions for the use of the drug, including its dose, frequency, route of administration and any special instructions.
 4. The name, address, telephone number and College registration number of the member issuing the prescription.
 5. The date the prescription was issued by the member.
 6. If applicable, reference to the prescription that the member adapted or renewed, including the name and contact details of the original prescriber.
 7. The number of refills that the member authorized, if applicable.
 8. Any other information required by law.
- 38.** A member who performs an act under section 35 or 36 must maintain a patient record that includes details of the member's rationale for his or her decision to act under section 35 or 36 and the following information, if applicable:
1. Reference to, or a copy of, the patient's prescription that the member renewed or adapted, including the name and contact information of the prescriber.
 2. A copy of the prescription that the member gave to the patient or his or her authorized agent under clause 35 (4) (c) or that the member gave to the patient or his or her authorized agent to take to a pharmacy of their choosing under clause 35 (4) (d) or paragraph 4 of subsection 36 (4).
 3. A record of the results of laboratory or other tests that the member considered in making the decision to act under section 35 or 36.
 4. The date on which the member notified the following persons, as applicable, and the method by which the notification occurred:

- i. The patient's primary care provider notified under clause 35 (4) (e) or paragraph 3 of subsection 36 (4).
- ii. The patient's prescriber notified under paragraph 3 of subsection 36 (4).

39. (1) For the purposes of paragraph 5 of subsection 4 (1) of the Act, a member referred to in subsection (2) who meets all the requirements in subsection (4) is authorized to perform the act of piercing a patient's dermis with a lancet-type device to obtain blood.

(2) A member who is a Part A pharmacist, an intern, a registered pharmacy student or a pharmacy technician is authorized to perform the act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration.

(3) A pharmacy technician shall not perform the act provided for in subsection (1) unless,

- (a) a Part A pharmacist is physically present on the premises at the time when the pharmacy technician performs the act; and
- (b) the pharmacy technician is under the direction of a Part A pharmacist at the time when the pharmacy technician performs the act.

(4) A member may only perform the act provided for in subsection (1) if he or she complies with the following:

1. The member may only perform the act for the purpose of demonstrating the appropriate use of lancet-type devices for the patient's self care and education or for the patient's self monitoring of his or her chronic disease, and before performing the act,
 - i. shall explain that purpose to the patient or his or her authorized agent, and
 - ii. shall receive an informed consent from the patient or his or her authorized agent.
2. The member shall ensure that he or she only performs the act in an environment that is clean, safe, private and comfortable for the patient.
3. The member shall ensure that appropriate infection control procedures are in place.
4. The member must possess the knowledge, skill and judgment respecting the performance of the act and understand the condition of the patient, to perform it safely and effectively.
5. The member must consider whether performing the act on the patient is appropriate, given the known risks and benefits to the patient and the safeguards and resources available to safely manage the outcome and any other relevant circumstances.
6. The member must maintain a patient record that includes,
 - i. the name and address of the patient and the member,
 - ii. the date the act was performed, and
 - iii. confirmation that an informed consent was given by the patient or his or her authorized agent.

40. REVOKED: O. Reg. 451/10, s. 5.

PART VIII QUALITY ASSURANCE

GENERAL

41. In this Part,

"assessor" means an assessor appointed under section 81 of the Health Professions Procedural Code;

"Committee" means the Quality Assurance Committee.

42. The Committee shall administer the quality assurance program, which shall include the following components:

1. Maintenance of a portfolio of continuous learning.
2. Maintenance of a two-part register for pharmacist members.
3. Practice review and remediation.
4. Remediation of behaviour and remarks of a sexual nature.

CONTINUOUS LEARNING PORTFOLIO

43. (1) A pharmacist shall maintain a portfolio of continuous learning activities in accordance with guidelines on such activities published by the College and distributed to the members.

(2) A pharmacist shall submit the portfolio to the College on request.

TWO-PART REGISTER FOR PHARMACISTS

44. (1) The part of the College's register that lists pharmacists shall have a Part A (patient care) and a Part B (no patient care).

(2) Every pharmacist shall be listed in either Part A or Part B.

45. (1) Upon being issued a certificate of registration as a pharmacist for the first time, the member shall ask to be listed in Part A or Part B of the register by completing and submitting the form provided by the Registrar.

(2) Every year at the time of paying the annual membership fee, a pharmacist shall ask for a renewal of his or her listing in Part A or Part B or for a transfer to the other Part.

(3) A member who asks for a renewal of a listing in Part A after the third anniversary of being issued a certificate of registration as a pharmacist for the first time shall not be listed in that Part unless he or she has dispensed, sold or compounded drugs, provided non-prescription drugs, health care aids and devices or information related to drug use for at least 600 hours during the preceding three years in the course of providing patient care while practising the profession in Canada.

46. (1) A pharmacist may ask for a transfer from Part A of the register to Part B or from Part B to Part A at any time.

(2) If a member listed in Part A asks for a transfer to Part B, the member shall be transferred to Part B.

(3) If a member listed in Part B asks for a transfer to Part A, the member shall be transferred to Part A if he or she,

(a) undergoes a practice review in accordance with section 47; and

(b) satisfies the educational and practice requirements that may be specified by the Quality Assurance Committee.

(4) If the Registrar proposes to reject a request for a transfer to Part A, the request shall be referred to a panel of the Quality Assurance Committee.

(5) The member shall be given a reasonable opportunity to make written submissions to the panel before it makes a decision.

(6) A member whose request to be listed in Part A is rejected by the panel may appeal to another panel of the Quality Assurance Committee.

(7) No member of a panel that rejects a request to be listed in Part A shall sit on a panel hearing an appeal of that decision.

(8) On an appeal, the member shall be given a reasonable opportunity to make written submissions to the panel before it makes a decision.

PRACTICE REVIEW AND REMEDIATION

47. (1) Each year the College shall select at random the names of pharmacists required to undergo a practice review.

(2) A pharmacist listed in Part A is required to undergo a practice review if his or her name is selected at random or the member is referred to the Committee by the Complaints Committee or Executive Committee.

(3) If a pharmacist listed in Part A fails to undergo a required practice review, the Committee may transfer the pharmacist to Part B after giving him or her a reasonable opportunity to make written submissions.

(4) A pharmacist listed in Part B is required to undergo a practice review if he or she is referred to the Committee by the Complaints Committee or Executive Committee or if the pharmacist has asked to be listed in Part A under subsection 46 (3).

(5) The Committee shall appoint an assessor to conduct a practice review.

(6) The assessor shall prepare a written report on the review and submit it to the Committee.

(7) After considering the report, the Committee may decide,

(a) that no further action is required;

(b) that the pharmacist is required to undertake the remediation specified by the Committee to correct any deficiency in his or knowledge, skills or judgment identified by the review; or

(c) that the pharmacist is to be listed in Part A where the review took place pursuant to a request to be listed in Part A.

(8) If the Committee proposes to require a pharmacist to undertake remediation under clause (7) (b), it shall not do so unless,

(a) the pharmacist has been given a report of the results of the review;

(b) the pharmacist has been given written notice of the Committee's intention to require him or her to undertake remediation;

(c) the pharmacist has been given at least 14 days from receipt of the notice to make written submissions to the Committee; and

(d) the Committee has considered any such submissions.

(9) After the pharmacist undertakes the specified remediation, the Committee may require him or her to undergo another practice review by an assessor, and subsections (6), (7) and (8) apply to that review.

48. (1) If the Committee requires a pharmacist to undertake remediation under section 47 and the pharmacist either fails to do so or fails to successfully complete the remediation, the Committee may direct the Registrar to impose terms, conditions or limitations on the pharmacist's certificate of registration for a specified period not exceeding six months.

(2) If the Committee proposes to make a direction under subsection (1), it shall not do so unless,

(a) the pharmacist has been given written notice of its intention;

(b) the pharmacist has been given at least 14 days from receipt of the notice to make written submissions to the Committee or to request an appearance before the Committee in order to make oral submissions; and

(c) the Committee has considered any such submissions.

(3) A pharmacist who requests an appearance under clause (2) (b) shall be given a reasonable opportunity to appear but the Committee may dispose of the matter if he or she has been given a reasonable opportunity to appear and does not.

(4) If the period specified under subsection (1) expires and the pharmacist still has not undertaken or successfully completed the remediation, the Committee may report him or her to the Executive Committee and provide it with such information as it considers appropriate, except information that may not be disclosed under section 83 of the Health Professions Procedural Code.

(5) If the Registrar imposes terms, conditions or limitations on a pharmacist's certificate of registration for a specified period pursuant to a direction given by the Committee under subsection (1), the Committee may direct the Registrar to remove the terms, conditions or limitations before the end of the specified period if the Committee is satisfied that they are no longer needed.

(6) After directing the imposition of terms, conditions or limitations on a pharmacist's certificate of registration for a specified period not exceeding six months under subsection (1), the Committee may direct the imposition of terms, conditions or limitation on the pharmacist's certificate of registration for a second specified period not exceeding six months under subsection (1) but, after having done so, the Committee shall not direct the imposition of terms, conditions or limitations on the pharmacist's certificate of registration for any further specified period.

(7) If the Committee directs a second imposition of terms, conditions or limitations on the pharmacist's certificate, subsections (2), (3), (4) and (5) apply with respect to the second imposition.

REMEDIATION OF BEHAVIOUR AND REMARKS OF A SEXUAL NATURE

49. (1) This section applies to matters referred to the Committee by,

(a) a panel of the Complaints Committee under subsection 26 (3) of the Health Professions Procedural Code; and

(b) the Executive Committee under section 79.1 of the Code.

(2) The chair of the Committee shall establish a panel from among the members of the Committee for the purpose of considering a matter referred to in subsection (1).

(3) The chair of the Committee shall appoint a mediator to attempt to resolve the matter.

(4) If the mediator is unable to resolve the matter within 90 days after being appointed, the mediator shall report the failure to the chair without delay and provide the chair with a written report on the mediation.

(5) The chair shall give the member complained against a copy of the mediator's report and a notice advising him or her of the right to make written submissions to the panel.

(6) The member shall be given at least 14 days after receipt of the mediator's report and recommendations to make written submissions to the panel or to request an appearance before the panel to make oral submissions, or to do both.

(7) A member who requests an appearance shall be given a reasonable opportunity to make an appearance, but the panel may dispose of the matter without such appearance if the member has been given a reasonable opportunity to appear.

(8) If the mediation concerns a matter referred by the Complaints Committee, the chair shall give the complainant a copy of the mediator's report.

(9) A mediator's proposed resolution of a matter referred to the Committee by the Complaints Committee must be acceptable to the complainant, the member complained against and the panel.

(10) A mediator's proposed resolution of a matter referred to the Committee by the Executive Committee must be acceptable to the member complained against and the panel.

(11) After considering the mediator's report and any written or oral submissions, the panel may require the member to undergo an assessment for the purpose of establishing if he or she requires education with respect to sexual abuse.

(12) The assessment shall be carried out by an assessor appointed by the Committee.

(13) The assessor shall provide a written report to the panel and shall make such recommendations as the assessor considers appropriate about the member's need for education with respect to sexual abuse.

(14) A copy of the report and recommendations, and a notice informing him or her of the right to make submissions in accordance with subsections (6) and (7), shall be provided to the member.

(15) After considering the assessor's report and recommendations and the member's submissions, if any, the panel may require the member to attend or participate in a sexual abuse education program.

(16) If the panel proposes to take action under subsection (15), the member has the right to make submissions in accordance with subsections (6) and (7).

50. (1) If a member refuses to undergo an assessment under subsection 49 (11) or to attend or participate in a program under subsection 49 (15), the panel may direct the Registrar to impose terms, conditions or limitations on the member's certificate of registration for a specified period not exceeding six months.

(2) If the panel proposes to take action under subsection (1), the member has the right to make submissions in accordance with subsections 49 (6) and (7).

(3) If the panel is satisfied that the terms, conditions and limitations imposed on a member's certificate or registration are no longer needed, it shall direct the Registrar to remove them before the end of the specified period.

(4) If, at the end of the specified period, the member continues to refuse to undergo the required assessment or to attend or participate in the program, the panel shall refer the matter to the Executive Committee.

PANEL REQUIREMENTS

51. (1) The Committee may sit as a panel to consider a report on a practice review or any matter arising out of a practice review, a matter relating to the imposition of terms, conditions or limitations on a member's registration under section 48 or a matter under section 49.

(2) A panel shall have at least three members appointed by the chair of the Committee from among the Committee members; at least one member of the panel shall be a member appointed to the Committee by the Lieutenant Governor in Council.

(3) Three members of a panel constitute a quorum.

PART IX INSPECTION OF DRUG PREPARATION PREMISES

TEMPORAL APPLICATION

52. This Part applies to the College and members as of the day that it comes into force, except that,

(a) sections 54, 55, 56, 59 and 60 apply as of 90 days from the day that this Part comes into force; and

(b) the requirements in subsection 57 (1) and section 58 apply as of 30 days from the day that this Part comes into force.

INTERPRETATION

53. (1) In this Part,

"designated member" means,

(a) the member designated for a drug preparation premises in accordance with section 58, or

(b) where only one member engages in or supervises drug preparation activities at or in connection with a drug preparation premises, that member;

"drug" means a substance or a preparation containing a substance referred to in clauses (a) to (d) of the definition of "drug" in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*, but does not include,

(a) a substance or preparation referred to in those clauses that is manufactured, sold or represented for use in animals or fowl, or

(b) a substance or preparation referred to in clause (e), (f), (g), (h) or (i) of that definition;

"drug preparation activities" means reconstituting, diluting 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;

"drug preparation premises" means any place where a member engages in drug preparation activities, or where drug preparation activities take place that a member supervises, but does not include,

(a) a pharmacy in respect of which a valid certificate of accreditation has been issued under the *Drug and Pharmacies Regulation Act*,

- (b) a premises in respect of which a valid establishment licence has been issued under the *Food and Drugs Act* (Canada),
or
- (c) a hospital or a health or custodial institution approved or licensed under any general or special Act;

“inspector” means a person appointed by the College to carry out an inspection on behalf of the College;

“supervise” means to supervise either directly or indirectly.

(2) Anything that may be done by the College under this Part may be done by the Council or by a committee established under clause 94 (1) (i) of the Health Professions Procedural Code.

INSPECTION

54. (1) All drug preparation premises are subject to inspection by the College in accordance with this Part.

(2) In carrying out an inspection of a drug preparation premises under subsection (1), the College may also require any or all of the following:

1. Inspection, examination or testing regarding any equipment, instrument, materials or any other thing that may be used in the drug preparation premises.
2. Examination and copying of books, accounts, reports, records or similar documents that are, in the opinion of the College, relevant to the member’s practice with respect to the drug preparation activities at or in connection with the drug preparation premises.
3. Inquiries or questions to be answered by the member that are relevant to the member’s practice with respect to the drug preparation activities at or in connection with the drug preparation premises.
4. Direct observation of a member in his or her practice with respect to drug preparation activities at or in connection with the drug preparation premises.

55. An inspector may, on the production of information identifying him or her as an inspector, enter and have access to any drug preparation premises at reasonable times and may inspect the drug preparation premises and do any of the things mentioned in subsection 54 (2) on behalf of the College.

56. (1) It is the duty of every member engaging in or supervising drug preparation activities at or in connection with drug preparation premises that are subject to an inspection to,

- (a) submit to an inspection of the drug preparation premises in accordance with this Part;
- (b) promptly answer a question or comply with a requirement of the inspector that is relevant to an inspection under this Part; and
- (c) co-operate fully with the College and the inspector who is conducting an inspection of a drug preparation premises in accordance with this Part.

(2) A member shall not engage in or supervise drug preparation activities at or in connection with a drug preparation premises where an inspector has been denied entry or access.

57. (1) No member shall commence engaging in or supervising drug preparation activities at or in connection with drug preparation premises unless the member has previously given notice in writing to the College in accordance with subsection (5) of the member’s intention to do so.

(2) Where a member has provided notice in writing to the College in accordance with subsection (1) and the drug preparation premises have not passed an inspection or passed an inspection with conditions within the previous five years, the College shall ensure that an inspection of the drug preparation premises is performed within 60 days from the day that the College receives the member’s notice or 150 days from the day this Part comes into force, whichever is later.

(3) A member who engages in or supervises drug preparation activities at or in connection with a drug preparation premises as of the day that is 30 days from the day this Part comes into force shall give notice in writing to the College in accordance with subsection (5) within 90 days from the day this Part comes into force.

(4) The College shall ensure that an inspection of the drug preparation premises with respect to which a member gives notice under subsection (3) is performed within 150 days from the day this Part comes into force.

(5) The notice required in subsections (1) and (3) shall include the following information, submitted in the form and manner required by the College:

1. The full name of the member giving the notice and the full name of the individual or corporation who is the owner or occupier of the drug preparation premises, if he or she is not the member who is required to give notice under this section.
2. The full address of the drug preparation premises.

3. The date when the member first began engaging in or supervising drug preparation activities at or in connection with the drug preparation premises or the proposed date when the member intends to begin engaging in or supervising drug preparation activities at or in connection with the drug preparation premises.
4. Any other information the College requires that is relevant to an inspection of the drug preparation premises conducted under this Part.

58. Where two or more members engage in or supervise drug preparation activities at or in connection with a drug preparation premises, the members shall designate a member as the designated member for the drug preparation premises, and shall immediately notify the College of the designated member's identity.

59. All drug preparation premises are subject to an inspection by the College once every five years after the initial inspection of the premises or more often if, in the opinion of the College, it is necessary or advisable to do so.

60. (1) After an inspection of a drug preparation premises, the College shall determine, in accordance with the accepted standards of practice, whether the drug preparation premises pass, pass with conditions or fail.

(2) In determining whether drug preparation premises pass, pass with conditions or fail an inspection, the College may consider,

- (a) the inspection results provided to the College by the inspector;
- (b) information provided by one or more members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises respecting the inspection, including the answers given by them in response to inquiries or questions asked by the inspector;
- (c) the information contained in a notice given by a member under subsection 57 (1) or (3);
- (d) any submissions made by the member or members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises that are relevant to the inspection; and
- (e) any other information that is directly relevant to the inspection of the drug preparation premises conducted under this Part.

(3) The College shall deliver a report, in writing and in accordance with section 39 of the *Regulated Health Professions Act, 1991*, to the individual or corporation that is the owner or occupier of the drug preparation premises and to the designated member for the drug preparation premises, within a reasonable time after the inspection is completed.

(4) Any report made by the College respecting an inspection of drug preparation premises where a member is engaging in or in respect of which the member is supervising drug preparation activities shall make a finding that the drug preparation premises passed, passed with conditions or failed the inspection and shall provide reasons where the drug preparation premises passed with conditions or failed the inspection.

(5) Any report made by the College that finds that drug preparation premises failed an inspection or passed with conditions is effective on the day that it is received, in accordance with section 39 of the *Regulated Health Professions Act, 1991*, by the designated member for the drug preparation premises.

(6) The designated member who receives a report made by the College that finds that a drug preparation premises failed an inspection or passed with conditions shall promptly provide copies of the report to all members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises.

(7) A member shall not engage in or supervise drug preparation activities at or in connection with a drug preparation premises that fail an inspection until,

- (a) the College delivers a report indicating that the drug preparation premises passed a subsequent inspection, or passed with conditions; or
- (b) after considering submissions under subsection (9), the College substitutes a finding that the drug preparation premises pass or pass with conditions.

(8) A member shall not engage in or supervise drug preparation activities at or in connection with drug preparation premises that pass an inspection with conditions except in accordance with the conditions set out in the report until,

- (a) the College delivers a report indicating that the drug preparation premises passed a subsequent inspection; or
- (b) after considering submissions under subsection (9), the College substitutes a finding that the drug preparation premises pass.

(9) A member may make submissions in writing to the College within 14 days from the date on which a report made by the College that finds that the drug preparation premises passed with conditions or failed the inspection becomes effective in accordance with subsection (5).

(10) The College may or may not elect to reinspect the drug preparation premises after receiving a member's submissions, but no more than 60 days after a member provides his or her submissions, the College shall do one or more of the following:

1. Confirm its finding that the drug preparation premises failed the inspection or passed with conditions.

2. Make a report and find that the drug preparation premises passed with conditions.
3. Make a report and find that the drug preparation premises passed the inspection.

(11) Drug preparation premises that fail an inspection or pass with conditions may be subject to one or more further inspections within a reasonable time after the College delivers its report, at the request of a member, any other person to whom the College gave the report, or at any time at the discretion of the College.

(12) Where, as a result of an inspection carried out under this Part, a report made by the College finds that a member's knowledge, skill or judgment is unsatisfactory, the College may direct the Registrar to refer the report to the Quality Assurance Committee.

(13) Where, as a result of an inspection carried out under this Part, a report made by the College finds that a member may have committed an act of professional misconduct or may be incompetent or incapacitated, the College may direct the Registrar to refer the report to the Inquiries, Complaints and Reports Committee.

PART X FUNDING FOR THERAPY AND COUNSELLING

61. In this Part,

“member” includes a former member.

62. (1) The alternative requirements that must be satisfied in order for a person to be eligible for funding under clause 85.7 (4) (b) of the Health Professions Procedural Code are prescribed in this section.

(2) A person is eligible for funding for therapy or counselling if,

- (a) there is an admission made by a member in a statement to the College or in an agreement with the College that he or she sexually abused the person while the person was a patient of the member;
- (b) a member has been found guilty under the *Criminal Code* (Canada) of sexually assaulting the person while the person was a patient of the member;
- (c) there is a statement, contained in the written reasons of a committee of the College given after a hearing, that the person, while a patient, was sexually abused by a member; or
- (d) there is sufficient evidence presented to the Patient Relations Committee to support a reasonable belief that the person, while a patient, was sexually abused by a member.

(3) For the purposes of clause (2) (d), and without limiting the generality of that clause, the following kinds of evidence may support a reasonable belief that a person, while a patient, was sexually abused by a member:

1. Evidence of reports made with respect to the member under subsection 85.1 (1) or 85.2 (1) of the Health Professions Procedural Code.
2. Evidence that corroborates the person's allegations of sexual abuse by the member.

(4) A person is not eligible under subsection (2) unless, at the time the sexual abuse occurred, the person was a patient of the member and the member was practising in Ontario.

(5) Despite subsections (2), (3) and (4), a person is eligible for funding for therapy or counselling under this Part only if,

- (a) the person submits an application for funding to the Patient Relations Committee in the form provided by the College and, in the application, the person names the member who is alleged to have sexually abused the person;
- (b) the person adheres to the procedures followed by the Patient Relations Committee when determining whether the person has satisfied the requirements for eligibility for funding; and
- (c) the person provides such other information as is required by the Patient Relations Committee.

(6) A decision by the Patient Relations Committee that a person is eligible for funding for therapy or counselling does not constitute a finding against the member and shall not be considered by any other committee of the College dealing with the member.

TABLES 1, 2 REVOKED: O. Reg. 452/16, s. 2.

SCHEDULE 1 INJECTED SUBSTANCES

(Arranged by American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification)

1. 8:00 Anti-infective Agents
 - i. 8:18 Antivirals
 - A. 8:18.08.04 HIV Entry and Fusion Inhibitors

1. Enfuvirtide
- B. 8:18.20 Interferons
 1. Interferon Alfa-2b
 2. Peginterferon alfa-2a
 3. Peginterferon alfa-2b
2. 10:00 Antineoplastic Agents
 1. Goserelin
 2. Leuprolide
 3. Methotrexate
3. 12:00 Autonomic Drugs
 - i. 12:12 Sympathomimetic (Adrenergic) Agents
 - A. 12:12.12 Alpha- and Beta-Adrenergic Agonists
 1. Scopolamine
 2. Hyoscine
 3. Glycopyrrolate
 4. Epinephrine
4. 20:00 Blood Formation and Coagulation
 - i. 20:04 Antianemia Drugs
 - A. 20:04.04 Iron Preparations
 1. Iron
 - ii. 20:12 Coagulants and Anticoagulants
 - A. 20:12.04 Anticoagulants
 1. Dalteparin
 2. Danaparoid
 3. Enoxaparin
 4. Fondaparinux
 5. Heparin
 6. Nadroparin
 7. Tinazaparin
 - iii. 20:16 Hematopoietic Agents
 1. Ancestim
 2. Darbepoetin alfa
 3. Epoetin alfa
 4. Filgrastim
 5. Pegfilgrastim
 6. Romiplostim
5. 28:00 Central Nervous System Agents
 - i. 28:08 Analgesics and Antipyretics
 - A. 28:08.08 Opiate Agonists
 1. Codeine
 2. Hydromorphone
 3. Meperidine

- 4. Morphine
- B. 28:08.12 Opiate Partial Agonists
 - 1. Nalbuphine
 - 2. Pentazocine
- ii. 28:16 Psychotherapeutic Agents
 - A. 28:16.08 Antipsychotics
 - 1. Haloperidol
 - 2. Methotrimeprazine
- iii. 28:32 Antimigraine Agents
 - A. 28:32.28 Selective Serotonin Agonists
 - 1. Sumatriptan
- 6. 40:00 Electrolytic, Caloric, and Water Balance
 - i. 40:12 Replacement Preparations
 - 1. Normal saline
- 7. 48:00 Respiratory Tract Agents
 - i. 48:92 Respiratory Tract Agents, Miscellaneous
 - 1. Omalizumab
- 8. 56:00 Gastrointestinal Drugs
 - i. 56:22 Antiemetics
 - A. 56:22.08 Antihistamines
 - 1. Dimenhydrinate
 - 2. Prochlorperazine
 - ii. 56:32 Prokinetic Agents
 - 1. Metoclopropamide
 - iii. 56:92 GI Drugs, Miscellaneous
 - 1. Certolizumab Pegol
 - 2. Methylnaltrexone
- 9. 64:00 Heavy Metal Antagonists
 - 1. Deferoxamine
- 10. 68:00 Hormones and Synthetic Substitutes
 - i. 68:18 Gonadotropins
 - 1. Follitropin-alpha
 - 2. Follitropin-beta
 - 3. Gonadotropin-chorionic
 - 4. Gonadotropin-chorionic-alfa
 - 5. Gonadotropin-human
 - 6. Lutropin-alfa
 - 7. Menotropins
 - 8. Urofollitropin
 - ii. 68:20 Antidiabetic Agents
 - 1. Exenatide
 - 2. Insulins

- 3. Liraglutide
- iii. 68:22 Antihypoglycemic Agents
 - A. 68:22:12 Glycogenolytic Agents
 - 1. Glucagon
- iv. 68:24 Parathyroid
 - 1. Calcitonin Salmon
 - 2. Teriparatide
- v. 68:28 Pituitary
 - 1. Desmopressin
 - 2. Vasopressin
- vi. 68:30 Somatotropin Agonists and Antagonists
 - A. 68:30.04 Somatotropin Agonists
 - 1. Somatropin
 - B. 68:30.08 Somatotropin Antagonists
 - 1. Pegvisomant
- vii. 68:32 Progestins
 - 1. Medroxyprogesterone
- 11. 88:00 Vitamins
 - i. 88:08 Vitamin B Complex
 - 1. Cyanocobalamin
 - 2. Folic Acid
 - 3. Methylcobalamin
 - 4. Pyridoxine
 - 5. Thiamine
 - ii. 88:12 Vitamin C
 - 1. Ascorbic Acid
 - iii. 88:24 Vitamin K Activity
 - 1. Vitamin K
- 12. 92:00 Miscellaneous Therapeutic Agents
 - i. 92:12 Antidotes
 - 1. Leucovorin
 - ii. 92:20 Biologic Response Modifiers
 - 1. Denosumab
 - 2. Glatiramer
 - 3. Interferon-Beta-1A
 - 4. Interferon-Beta-1B
 - 5. Natalizumab
 - iii. 92:36 Disease-modifying Antirheumatic Drugs
 - 1. Abatacept
 - 2. Adalimumab
 - 3. Anakinra
 - 4. Etanercept

- 5. Gold Sodium Thiomalate
- 6. Golimumab
- 7. Ustekinumab
- iv. 92:40 Gonadotropin- releasing Hormone Antagonists
 - 1. Cetrorelix
 - 2. Ganirelix
- v. 92:92 Other Miscellaneous Therapeutic Agents
 - 1. Octreotide
- 13. Miscellaneous
 - 1. Sterile Water for Injection (Diluent)

SCHEDULE 2
INHALED SUBSTANCES

(Arranged by American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification)

- 1. 8:00 Anti-infective Agents
 - i. 8:18 Antivirals
 - A. 8:18.28 Neuraminidase Inhibitors
 - 1. Zanamivir
 - ii. 8:12 Antibacterials
 - A. 8:12.07.16 Monobactams
 - 1. Tobramycin
 - 2. Aztreonam
- 2. 12:00 Autonomic Drugs
 - i. 12:08 Anticholinergic Agents
 - A. 12:12.08 Antimuscarinics/Antispasmodics
 - 1. Ipratropium
 - 2. Tiotropium
 - ii. 12:12 Sympathomimetic (Adrenergic) Agents
 - A. 12:12.08.12 Selective Beta2- Adrenergic Agonists
 - 1. Fenoterol
 - 2. Formoterol
 - 3. Salbutamol
 - 4. Salmeterol
 - 5. Terbutaline
 - iii. 12:16 Sympatholytic (Adrenergic Blocking) Agents
 - A. 12:16.04.04 Non-Selective alpha-Adrenergic Blocking Agents
 - 1. Dihydroergotamine
 - iv. 12:92 Autonomic Drugs, Miscellaneous
 - 1. Nicotine
- 3. 28:00 Central Nervous System Agents
 - i. 28:08 Analgesics and Antipyretics
 - A. 28:08.12 Opiate Partial Agonists

1. Butorphanol
- ii. 28:32 Antimigraine Agents
 - A. 28:32.28 Selective Serotonin Agonists
 1. Sumatriptan
 2. Zolmitriptan
4. 40:00 Electrolytic, Caloric, and Water Balance
 - i. 40:12 Replacement Preparations
 1. Sodium chloride
5. 48:00 Respiratory Tract Agents
 - i. 48:24 Mucolytic Agents
 1. Dornase alfa
6. 52:00 Eye, Ear, Nose and Throat (EENT) Preparations
 - i. 52:02 Antiallergic Agents
 1. Sodium Cromoglycate
 2. Levocabastine
 - ii. 52:08 Anti-inflammatory Agents
 - A. 52:08.08 Corticosteroids
 1. Beclomethasone
 2. Budesonide
 3. Ciclesonide
 4. Flunisolide
 5. Fluticasone
 6. Mometasone
 7. Triamcinolone
 - iii. 52:32 Vasoconstrictors
 1. Oxymetazoline
 2. Phenylephrine
 3. Xylometazoline
 7. 68:00 Hormones and Synthetic Substitutes
 - i. 68:18 Gonadotropins
 1. Buserelin
 2. Nafarelin
 - ii. 68:24 Parathyroid
 1. Calcitonin Salmon
 - iii. 68:28 Pituitary
 1. Desmopressin
 2. Vasopressin
 8. 92:00 Miscellaneous Therapeutic Agents
 - i. 92:12 Antidotes
 1. Acetylcysteine

SCHEDULE 3
VACCINES

1. Bacille Calmette-Guerin (BCG) Vaccines
2. Haemophilus Influenzae type b (Hib) Vaccines
3. Meningococcal Vaccines
4. Pneumococcal Vaccines
5. Typhoid Vaccines
6. Combined Typhoid and Hepatitis A Vaccines
7. Hepatitis A Vaccines
8. Hepatitis B Vaccines
9. Hepatitis A and B combined Vaccines
10. Herpes Zoster Vaccines
11. Human Papillomavirus (HPV) Vaccines
12. Japanese Encephalitis Vaccines
13. Rabies Vaccines
14. Varicella Vaccines
15. Yellow Fever Vaccines

SCHEDULE 4
LIST OF MINOR AILMENTS AND CORRESPONDING DRUG CATEGORIES

(Arranged by American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification)

CONDITION	AHFS CLASSIFICATION
1. Urinary tract infection (uncomplicated)	<ul style="list-style-type: none"> • Anti-infective Agents: Antibacterials. Sulfonamides (8:12.20) • Anti-infective Agents: Urinary Anti-infectives (8:36)
2. Dermatitis (atopic/eczema, allergic and contact)	<ul style="list-style-type: none"> • Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08)
3. Insect bites and urticaria	<ul style="list-style-type: none"> • Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08) • Antibiotic Tetracyclines (8:12:24)
4. Conjunctivitis (bacterial, allergic, viral)	<ul style="list-style-type: none"> • Eye, Ear, Nose, and Throat Preparations: Anti-infectives. Antibacterials (52:04.04) • Eye, Ear, Nose, and Throat Preparations: Antiallergic Agents (52:02)
5. Allergic rhinitis	<ul style="list-style-type: none"> • Eye, Ear, Nose and Throat Preparations: Anti-inflammatory Agents. Corticosteroids (52:08.08) • Eye, Ear, Nose and Throat Preparations: Antiallergic Agents (52:02)
6. Candidal stomatitis	<ul style="list-style-type: none"> • Skin and Mucous Membrane Agents: Anti-infectives. Antifungals. Polyenes (84:04.08.28)
7. Herpes labialis	<ul style="list-style-type: none"> • Anti-infective Agents: Antivirals. Nucleosides and Nucleotides (8:18.32) • Skin and Mucous Membrane Agents: Anti-infectives. Antivirals (84:04.06) • Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08)
8. Hemorrhoids	<ul style="list-style-type: none"> • Skin and Mucous Membrane Agents: Anti-inflammatory Agents.

	<ul style="list-style-type: none"> Corticosteroids (84:06.08) • Skin and Mucous Membrane Agents: Antipruritics and Local Anesthetics (84:08) • Skin and Mucous Membrane Agents: Miscellaneous Skin and Mucous Membrane Agents (84:36)
9. Gastroesophageal reflex disease (GERD)	<ul style="list-style-type: none"> • Gastrointestinal Drugs: Antiulcer Agents and Acid Suppressants. Histamine H2-Antagonists (56:28.12)
10. Dysmenorrhea	<ul style="list-style-type: none"> • Central Nervous System Agents: Analgesics and Antipyretics. Nonsteroidal Anti-inflammatory Agents. Other Nonsteroidal Anti-inflammatory Agents (28:08.04.92)
11. Musculoskeletal sprains and strains	<ul style="list-style-type: none"> • Central Nervous System agents: Analgesics and Antipyretics. Nonsteroidal Anti-inflammatory Agents. COX-2 inhibitors (28:08.04.08) • Central Nervous System agents: Analgesics and Antipyretics. Nonsteroidal Anti-inflammatory Agents. Other Nonsteroidal Anti-inflammatory Agents (28:08.04.92)
12. Impetigo	<ul style="list-style-type: none"> • Skin and Mucous Membrane Agents: Anti-infectives. Antibacterials (84:04.04) • Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08)

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DRAFT General Regulation 202/94 of the *Pharmacy Act* Clause by Clause Comparison of Proposed Amendments

Existing Clause	Proposed New Clause	Rationale
VII.3 (CONTROLLED ACTS)		
<p>35. (1) For the purposes of paragraph 3 of subsection 4 (1) of the Act, a member referred to in subsection (3) who complies with the other requirements of this section is authorized to prescribe the following specified drugs:</p> <ol style="list-style-type: none"> 1. Varenicline Tartrate. 2. Bupropion Hydrochloride. <p>(2) A drug mentioned in subsection (1) may only be prescribed by a member for the sole purpose of smoking cessation. O. Reg. 302/12, s. 1.</p> <p>(3) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform the act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration. O. Reg. 302/12, s. 1.</p> <p>(4) A member may only prescribe a drug under this section if he or she,</p> <ol style="list-style-type: none"> (a) possesses sufficient knowledge, skill and judgment respecting the drug and the patient’s condition to prescribe the drug for the patient; (b) has considered whether prescribing the drug for the patient is appropriate, given the known risks and benefits of prescribing the drug for the patient and other relevant factors respecting the patient; (c) gives the prescription to the patient or his or her authorized agent; (d) advises the patient or his or her authorized agent, at the time of giving the prescription, that he or she may elect to take it to a pharmacy of his or her choosing for dispensing; 	<p>35. (1) For the purposes of paragraph 3 of subsection 4 (1) of the Act, a member referred to in subsection (3) who complies with the other requirements of this section is authorized to prescribe: the</p> <ol style="list-style-type: none"> <u>1. The</u> following specified drugs: <ol style="list-style-type: none"> 1. i. Varenicline Tartrate., <u>and</u> 2. ii. Bupropion Hydrochloride. <u>2. The drugs listed in Schedule 4 for the corresponding conditions listed therein.</u> <p>(2) A drug mentioned in <u>paragraph 1 of</u> subsection (1) may only be prescribed by a member for the sole purpose of smoking cessation.</p> <p>(3) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform the act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration.</p> <p>(4) A member may only prescribe a drug under this section if he or she</p> <ol style="list-style-type: none"> (a) possesses sufficient knowledge, skill and judgment respecting the drug and the patient’s condition to prescribe the drug for the patient; (b) has considered whether prescribing the drug for the patient is appropriate, given the known risks and benefits of prescribing the drug for the patient and other relevant factors respecting the patient; (c) gives the prescription to the patient or his or her authorized agent; (d) advises the patient or his or her authorized agent, at the time of giving the prescription, that he or she may elect to take it to a pharmacy of his or her choosing for dispensing; 	<p>The current regulation gives pharmacists the authority to prescribe two smoking cessation medications. The proposed regulation adds the list of minor ailments and medication categories, which gives pharmacists the authority to prescribe medications for the select minor ailments. Schedule 4, which contains the list of minor ailments and corresponding medication categories, is added to subsection 35(1).</p> <p>Additional lanugage added to subsection 35(2) references the two listed medications in paragraph 1 of subsection 35(1) to be prescribed for smoking cessation only.</p>

Existing Clause	Proposed New Clause	Rationale
<p>(e) notifies the patient's primary care provider (if any) within a reasonable time, that the member prescribed a drug for the patient and provides details respecting the prescription; and (f) complies with the additional requirements under sections 37 and 38.</p>	<p>(e) notifies the patient's primary care provider (if any) within a reasonable time, that the member prescribed a drug for the patient and provides details respecting the prescription; and (f) complies with the additional requirements under sections 37 and 38; and (g) <u>in the case of a drug referred to in paragraph 2 of subsection (1),</u> <u>i. has successfully completed such educational requirements as have been specified by Council, and</u> <u>ii. has determined that prescribing the drug is the most appropriate treatment for the patient's condition.</u></p>	<p>The current regulation does not require the completion of educational requirements before prescribing smoking cessation medications. The proposed regulation would include the requirement to complete education, as specified by Council, in order to prescribe medications for minor ailments in Schedule 4.</p> <p>With the additional authority to prescribe medications in Schedule 4 for the identified minor ailments, additional wording that reflects the standards of practice and expectation that pharmacists complete an assessment to determine the most appropriate therapeutic option was included.</p>
<p>38. A member who performs an act under section 35 or 36 must maintain a patient record that includes details of the member's rationale for his or her decision to act under section 35 or 36 and the following information, if applicable: 1. Reference to, or a copy of, the patient's prescription that the member renewed or adapted, including the name and contact information of the prescriber. 2. A copy of the prescription that the member gave to the patient or his or her authorized agent under clause 35 (4) (c) or that the member gave to the patient or his or her authorized agent to take to a pharmacy of their choosing under paragraph 4 of subsection 36 (4). 3. A record of the results of laboratory or other tests that the member considered in making the decision to act under section 35 or 36. 4. The date on which the member notified the following persons, as applicable, and the method by which the notification occurred: i. The patient's primary care provider notified under clause 35 (4) (e) or paragraph 3 of subsection 36 (4). ii. The patient's prescriber notified under paragraph 3 of subsection 36 (4).</p>	<p>38. A member who performs an act under section 35 or 36 must maintain a patient record that includes details of the member's rationale for his or her decision to act under section 35 or 36 and the following information, if applicable: 1. Reference to, or a copy of, the patient's prescription that the member renewed or adapted, including the name and contact information of the prescriber. 2. A copy of the prescription that the member gave to the patient or his or her authorized agent under clause 35 (4) (c) or that the member gave to the patient or his or her authorized agent to take to a pharmacy of their choosing under <u>clause 35 (4) (d) or</u> paragraph 4 of subsection 36 (4). 3. A record of the results of laboratory or other tests that the member considered in making the decision to act under section 35 or 36. 4. The date on which the member notified the following persons, as applicable, and the method by which the notification occurred: i. The patient's primary care provider notified under clause 35 (4) (e) or paragraph 3 of subsection 36 (4). ii. The patient's prescriber notified under paragraph 3 of subsection 36 (4).</p>	<p>This addition would require pharmacists to include a copy of the prescription in the patient record no matter where the patient or his or her authorized agent decided to have the prescription dispensed.</p>

Rationale for Inclusion of Schedule 4

Proposed New Clause	Rationale
<p style="text-align: center;">SCHEDULE 4</p> <p><u>LIST OF MINOR AILMENTS AND CORRESPONDING DRUG CATEGORIES</u> (Arranged by American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification)</p> <p><u>CONDITION & AHFS CLASSIFICATION</u></p> <ol style="list-style-type: none"> 1. <u>Urinary tract infection (uncomplicated)</u> <ul style="list-style-type: none"> • <u>Anti-infective Agents: Antibacterials. Sulfonamides (8:12.20)</u> • <u>Anti-infective Agents: Urinary Anti-infectives (8:36)</u> 2. <u>Dermatitis (atopic/eczema, allergic and contact)</u> <ul style="list-style-type: none"> • <u>Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08)</u> 3. <u>Insect bites and urticaria</u> <ul style="list-style-type: none"> • <u>Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08)</u> • <u>Antibiotic Tetracyclines (8:12:24)</u> 4. <u>Conjunctivitis (bacterial, allergic, viral)</u> <ul style="list-style-type: none"> • <u>Eye, Ear, Nose, and Throat Preparations: Anti-infectives. Antibacterials (52:04.04)</u> • <u>Eye, Ear, Nose, and Throat Preparations: Antiallergic Agents (52:02)</u> 5. <u>Allergic rhinitis</u> <ul style="list-style-type: none"> • <u>Eye, Ear, Nose and Throat Preparations: Anti-inflammatory Agents. Corticosteroids (52:08.08)</u> • <u>Eye, Ear, Nose and Throat Preparations: Antiallergic Agents (52:02)</u> 6. <u>Candidal stomatitis</u> <ul style="list-style-type: none"> • <u>Skin and Mucous Membrane Agents: Anti-infectives. Antifungals. Polyenes (84:04.08.28)</u> 7. <u>Herpes labialis</u> <ul style="list-style-type: none"> • <u>Anti-infective Agents: Antivirals. Nucleosides and Nucleotides (8:18.32)</u> • <u>Skin and Mucous Membrane Agents: Anti-infectives. Antivirals (84:04.06)</u> • <u>Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08)</u> 8. <u>Hemorrhoids</u> <ul style="list-style-type: none"> • <u>Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08)</u> • <u>Skin and Mucous Membrane Agents: Antipruritics and Local Anesthetics (84:08)</u> 	<p>Schedule 4 includes the minor ailments and associated medication categories that pharmacists will be authorized to prescribe. The list of minor ailments conditions was determined through expert analysis, stakeholder engagement, feedback from registrants and the public. In addition, emergency department visit data from the Institute for Clinical Evaluative Sciences (ICES) was analyzed to understand the impact pharmacist prescribing for minor ailments may have if this type of routine care were moved into the community pharmacy setting.</p> <p>The medication categories were developed with guidance from an expert group, the <u>Minor Ailments Advisory Group</u>. Considerations such as recent evidence, clinical practice guidelines, best practices and antimicrobial stewardship guided the selection of the medication categories. Medications are referenced by categories for each minor ailment to ensure that pharmacists have the flexibility to prescribe up-to-date medications, improving access to care. Medication categories are included for each minor ailment to help provide clarity around which categories are intended for each condition.</p>

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| <ul style="list-style-type: none">• Skin and Mucous Membrane Agents: Miscellaneous Skin and Mucous Membrane Agents (84:36) <p>9. Gastroesophageal reflux disease (GERD)</p> <ul style="list-style-type: none">• Gastrointestinal Drugs: Antiulcer Agents and Acid Suppressants. Histamine H2-Antagonists (56:28:12) <p>10. Dysmenorrhea</p> <ul style="list-style-type: none">• Central Nervous System Agents: Analgesics and Antipyretics. Nonsteroidal Anti-inflammatory Agents. Other Nonsteroidal Anti-inflammatory Agents (28:08.04.92) <p>11. Musculoskeletal sprains and strains</p> <ul style="list-style-type: none">• Central Nervous System agents: Analgesics and Antipyretics. Nonsteroidal Anti-inflammatory Agents. COX-2 inhibitors (28:08.04.08)• Central Nervous System agents: Analgesics and Antipyretics. Nonsteroidal Anti-inflammatory Agents. Other Nonsteroidal Anti-inflammatory Agents (28:08.04.92) <p>12. Impetigo</p> <ul style="list-style-type: none">• Skin and Mucous Membrane Agents: Anti-infectives. Antibacterials (84:04.04)• Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08) | |
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**Pharmacy Act, 1991
Loi de 1991 sur les pharmaciens**

**ONTARIO REGULATION 202/94
GENERAL**

Consolidation Period: From December 15, 2016 to the [e-Laws currency date](#).

Last amendment: 452/16.

Legislative History: 750/94, 539/95, 280/96, 121/97, 98/98, 642/98, 548/99, 270/04, 451/10, 59/11, 302/12, 154/13, 225/13, 452/16.

This Regulation is made in English only.

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PART I INTERPRETATION

DEFINITIONS

1. In this Regulation,

“direct supervision” means supervision that is provided by a person who is physically present on the premises where the practice that is being supervised is being carried out;

“non-restricted registration” means the holding of a licence, permit, certificate or registration as a pharmacist from an authority responsible for the regulation of pharmacists in one of the states of the United States of America, or in another non-Canadian jurisdiction that has been approved by the Council, where that licence, permit, certificate or registration is not subject to any restrictions, terms, conditions or limitations, including terms, conditions or limitations that,

- (a) relate to the holder’s ability to practise independently,
- (b) require the holder to practise under supervision or direction,
- (c) require the holder to maintain a position or appointment as a condition of continued registration,
- (d) require the holder to practise only in a part of the geographical area over which the authority has jurisdiction,
- (e) restrict the holder to temporary or time-limited registration or practice,
- (f) were imposed by that authority or any committee or panel of that authority as a result of a disciplinary, registration, fitness to practise or similar proceeding, or
- (g) were placed on the holder’s registration by agreement between the holder and that authority;

“pharmacy” has the same meaning as in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*;

“remote dispensing location” has the same meaning as in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*.

PART II GENERAL PROVISIONS RE CERTIFICATES OF REGISTRATION

CLASSES OF CERTIFICATES OF REGISTRATION

2. (1) The following are prescribed as classes of certificates of registration:

1. Pharmacist.
2. Registered pharmacy student.
3. Intern.
4. Pharmacy technician.

(2) Every certificate of registration that was in existence immediately before December 3, 2010 is continued as the equivalent certificate of registration with the same status under this Regulation until such time as it otherwise ceases to be effective.

(3) Where an application for a certificate of registration had been made but not finally dealt with before December 3, 2010, the application shall be dealt with in accordance with this Regulation as amended by Ontario Regulation 451/10.

APPLICATION FOR CERTIFICATE OF REGISTRATION

3. A person may apply for a certificate of registration by submitting a completed application in the form provided by the Registrar together with any supporting documentation requested by the Registrar and the applicable fees.

REQUIREMENTS FOR ISSUANCE OF CERTIFICATE OF REGISTRATION, ANY CLASS

4. (1) The following are requirements for the issuance of a certificate of registration of any class:

1. The applicant must possess sufficient language proficiency, in either English or French, to be able to communicate and comprehend effectively, both orally and in writing.
 2. The applicant must not have been found guilty of any offence in any jurisdiction.
 3. The applicant must not be the subject of a current proceeding in respect of any offence in any jurisdiction.
 4. The applicant must not have been the subject of a finding of professional misconduct, incompetence or incapacity or any like finding in Ontario or any other jurisdiction in relation to pharmacy or any other profession or occupation and must not be the subject of any current 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.
 5. The applicant must be a Canadian citizen or permanent resident of Canada or must hold the appropriate authorization under the *Immigration and Refugee Protection Act* (Canada) to permit the applicant to engage in the practice of pharmacy in Ontario as a pharmacist, registered pharmacy student, intern or pharmacy technician in the manner permitted by the certificate of registration for which he or she has applied.
 6. The applicant's past and present conduct must afford reasonable grounds for the belief that the applicant,
 - i. will practise pharmacy with decency, honesty and integrity, and in accordance with the law,
 - ii. does not suffer from any physical or mental condition or disorder that could affect his or her ability to practise pharmacy in a safe manner,
 - iii. has sufficient knowledge, skill and judgment to competently engage in the practice of pharmacy authorized by the certificate of registration, and
 - iv. will display an appropriately professional attitude.
 7. The applicant must provide evidence satisfactory to the Registrar that the applicant will have professional liability insurance in the amount and in the form as required by the by-laws as of the anticipated date for the issuance of his or her certificate of registration.
 8. The applicant must have paid any fees required under the by-laws for the issuance of the certificate of registration for which the applicant applied.
- (2) The requirement under paragraph 8 of subsection (1) is non-exemptible.
- (3) An applicant must meet all of the requirements for registration within one year following the filing his or her application, but this does not prevent the applicant from filing a new application.
- (4) An applicant shall be deemed not to have satisfied the requirements for the issuance of a certificate of registration if the applicant makes a false or misleading statement or representation in his or her application or supporting documentation.

TERMS, ETC., OF EVERY CERTIFICATE

5. Every certificate of registration is subject to the following terms, conditions and limitations:
1. The member shall provide to the Registrar the details of any of the following that relate to the member and that occur or arise after the registration of the member:
 - i. a finding of guilt arising in any jurisdiction relating to any offence,
 - ii. a charge arising in any jurisdiction relating to any offence,
 - iii. a finding of professional misconduct, incompetence or incapacity or any like finding in any jurisdiction in relation to pharmacy or any other profession or occupation,
 - iv. a proceeding for professional misconduct, incompetence or incapacity or any like proceeding in any jurisdiction in relation to pharmacy or any other profession or occupation.
 2. The member shall not engage in the practice of pharmacy unless the member is a Canadian citizen or permanent resident of Canada or has authorization under the *Immigration and Refugee Protection Act* (Canada) permitting the member to engage in the practice of pharmacy in Ontario in the manner permitted by the certificate of registration.
 3. The member shall immediately advise the Registrar in writing in the event the member ceases to be a Canadian citizen or permanent resident of Canada or to have authorization under the *Immigration and Refugee Protection Act* (Canada) permitting the member to engage in the practice of pharmacy in Ontario in the manner permitted by the certificate of registration.
 4. If a member to whom paragraph 3 applies subsequently obtains Canadian citizenship or becomes a permanent resident of Canada or attains authorization under the *Immigration and Refugee Protection Act* (Canada) permitting the member to engage in the practice of pharmacy in Ontario permitted by the certificate of registration, the member shall immediately advise the Registrar in writing of that fact.
 5. The member shall maintain professional liability insurance in the amount and in the form as required by the by-laws.

6. A member who fails to meet the condition in paragraph 5 shall immediately advise the Registrar in writing of that fact and immediately cease to engage in the practice of pharmacy until such time as the member obtains professional liability insurance as required in paragraph 5.
7. Where a member to whom paragraph 6 applies subsequently obtains professional liability insurance, the member shall notify the Registrar in writing of that fact and, if requested by the Registrar, shall provide details of that coverage.

**PART III
REGISTRATION — PHARMACISTS**

ADDITIONAL REQUIREMENTS

6. (1) The following are additional requirements for the issuance of a certificate of registration as a pharmacist:

1. The applicant must,
 - i. have a minimum of a baccalaureate degree in pharmacy evidencing the successful completion of a program designed to educate and train persons to be practising pharmacists which was,
 - A. awarded on or before December 31, 1993 by a constituent faculty of the Association of Faculties of Pharmacy of Canada, or
 - B. awarded by a university as a result of successful completion of a program which was, at the time of the award, accredited by the Canadian Council for Accreditation of Pharmacy Programs or by another accrediting body approved by the Council for that purpose, or
 - ii. have a university degree in pharmacy that does not meet the requirements of subparagraph i but that evidences the successful completion of a program designed to educate and train persons to be practising pharmacists, and,
 - A. have successfully completed a program that, at the time the applicant commenced it, was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B, or
 - B. have successfully completed the examination provided for in paragraph 4 on the applicant's first attempt and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B.
2. The applicant must have successfully completed an examination in pharmaceutical jurisprudence approved by the Council for applicants for a certificate of registration as a pharmacist.
3. Subject to subsection (5), the applicant must have successfully completed a structured practical training program approved by the Council, while holding a certificate of registration as an intern and while under the supervision of a preceptor approved by the Registration Committee.
4. The applicant must have successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacists at a time when the examination was approved by the Council or have successfully completed another examination that has been approved by the Council for that purpose.

(2) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 3 of subsection (1) may be completed as part of a program referred to in paragraph 1 of subsection (1), even if the applicant did not hold a certificate of registration as an intern at the time.

(3) The requirement in paragraph 1 of subsection (1) must be met within two years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist unless the applicant,

- (a) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in Canada, the United States of America or another jurisdiction approved by the Council;
 - (b) undergoes a review of his or her practice conducted in a manner approved by the Registration Committee, meets any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pays the required fees; or
 - (c) successfully completes the examination referred to in paragraph 4 of subsection (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacist.
- (4) The requirement in paragraph 2 of subsection (1) shall not be considered to be met unless the applicant is issued a certificate of registration as a pharmacist within three years of meeting that requirement.

- (5) An applicant is deemed to have met the requirement in paragraph 3 of subsection (1) if, at the time of application, the applicant,
- (a) has successfully completed a structured practical training program which is, in the opinion of the Registration Committee at least equivalent to the program mentioned in paragraph 3 of subsection (1); or
 - (b) has other education, training or experience that is, in the opinion of a panel of the Registration Committee at least equivalent to the program mentioned in paragraph 3 of subsection (1).
- (6) The requirement in paragraph 3 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as a pharmacist within two years of meeting the requirement or within such greater time as is specified by a panel of the Registration Committee.
- (7) Subject to subsection (8), the requirement in paragraph 4 of subsection (1) is not considered to have been met unless the applicant,
- (a) successfully completed the examination within three attempts; or
 - (b) successfully completed the examination on the applicant's fourth attempt having first successfully completed the further education or training or combination of education and training required by the examining body responsible for the administration of the examination or, if no further education or training was required by that body, the further education or training or combination of education and training, if any, specified by a panel of the Registration Committee.
- (8) Where, by virtue of subsection (7), an applicant is not considered to have met the requirement in paragraph 4 of subsection (1), the applicant may not attempt the examination again until the applicant obtains a new degree mentioned in subparagraph 1 i of subsection (1).
- (9) An applicant is only eligible to take the examination referred to in paragraph 2 of subsection (1) three times in any 24-month period.
- (10) The requirements in paragraphs 1, 3 and 4 of subsection (1) are deemed to have been met by an applicant,
- (a) who previously held a certificate of registration as a pharmacist in Ontario; and
 - (b) who,
 - (i) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in Canada, the United States of America or another jurisdiction approved by the Council, or
 - (ii) undergoes a review of his or her practice conducted in a manner approved by the Registration Committee, meets any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pays the required fees.
- (11) An applicant who has a university degree in pharmacy mentioned in subparagraph 1 ii of subsection (1), and who successfully completes any further education or training or combination of education and training specified by a panel of the Registration Committee shall be deemed to have met the requirement in paragraph 1 of subsection (1) if the applicant,
- (a) was registered as an intern on December 3, 2010; or
 - (b) becomes registered as an intern after December 3, 2010 but before December 3, 2011.
- (12) Subject to subsections (2), (5), (10) and (11) and sections 7 and 8, the requirements in subsection (1) are non-exemptible.
- (13) A reference in this section or section 7 to "all of the other requirements for the issuance of a certificate of registration" includes, without being limited to, a requirement set out in subsection 4 (1) or subsection (1) of this section.

MOBILITY FROM OUTSIDE CANADA

7. An applicant is deemed to have met the requirements in paragraph 1 of subsection 6 (1) if the applicant meets all the following non-exemptible requirements:
1. The applicant must,
 - i. hold a non-restricted registration in at least one jurisdiction at the time of application and have held that registration continuously for at least two years, and
 - ii. satisfy the Registrar or a panel of the Registration Committee that the applicant engaged in the full scope of practice as a pharmacist in that jurisdiction for at least 600 hours.
 2. The applicant must,

- i. satisfy the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act for at least 600 hours during the three years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacist in the course of providing patient care while practising as a pharmacist in one or more of the jurisdictions where he or she held the non-restricted registration,
- ii. undergo a review of his or her practice conducted in a manner approved by the Registration Committee, meet any requirements regarding continuing education or remediation set by a panel of the Registration Committee within the time set by the panel, and pay the required fees, or
- iii. successfully complete the examination referred to in paragraph 4 of subsection 6 (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacist.

MOBILITY WITHIN CANADA

8. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of paragraphs 1, 3 and 4 of subsection 6 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacist in that jurisdiction.

(2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,

- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
- (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as a pharmacist.

(3) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.

(4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.

TERMS, CONDITIONS AND LIMITATIONS, PART B PHARMACIST

9. (1) Every certificate of registration of a pharmacist listed in Part B of the register is subject to the following terms, conditions and limitations:

1. The member shall not provide any care to a patient, whether direct or indirect.
2. The member shall not dispense, sell or compound drugs.
3. The member shall not supervise that part of the pharmacy where drugs are kept.
4. The member shall not be the designated manager of a pharmacy within the meaning of the *Drug and Pharmacies Regulation Act*.
5. The member shall not supervise the practice of pharmacy of an intern, registered pharmacy student or pharmacy technician.
6. The member shall, when working in a pharmacy or any other environment where patient care is being provided, clearly identify him or herself as a non-practising pharmacist.

(2) With the prior written approval of the Registrar, and despite paragraphs 1 and 2 of subsection (1), a pharmacist listed in Part B of the register may dispense, sell or compound a drug and provide care to a patient under the direct supervision of a pharmacist who is registered in Part A of the register where the sole purpose is to assist the member in preparing to meet the requirements specified in subsection 46 (3) to transfer a member holding a certificate of registration as a pharmacist who is registered in Part B of the register to Part A of the register.

(3) Where a member wishes to seek the approval of the Registrar under subsection (2), the member shall provide to the Registrar, in writing, the name of the pharmacist or pharmacists who will be providing the required supervision, the name and address of the pharmacy or pharmacies at which the member proposes to practise under that supervision and the proposed date upon which the member wishes to commence practice.

(4) Any approval provided by the Registrar under subsection (2) must specify,

- (a) the name of the pharmacist or pharmacists who will be required to supervise the member;
- (b) the name and address of the pharmacy or pharmacies where the member will be practising; and
- (c) the term of the approval, which must not exceed six months.

(5) Where the Registrar is satisfied that it is appropriate to do so the Registrar may extend the term of the approval provided under subsection (2) but in no case may the combined term exceed one year unless a panel of the Quality Assurance Committee approves of a further extension.

PART IV REGISTRATION — REGISTERED PHARMACY STUDENTS

ADDITIONAL REQUIREMENT

- 10.** (1) It is an additional requirement for the issuance of a certificate of registration as a registered pharmacy student that the applicant must,
- (a) have been accepted as a student in a university program referred to in subparagraph 1 i of subsection 6 (1) or in an approved program referred to in sub-subparagraph 1 ii A of that subsection;
 - (b) be engaged in attaining any education or training referred to in sub-subparagraph 1 ii B of subsection 6 (1); or
 - (c) be engaged in attaining any education or training specified by a panel of the Registration Committee as a condition for the issuance of another certificate of registration, other than a certificate of registration as a pharmacy technician.
- (2) Subject to section 11, the requirement in subsection (1) is non-exemptible.

MOBILITY WITHIN CANADA

- 11.** (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of subsection 10 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacy student in that jurisdiction.
- (2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,
- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
 - (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as a registered pharmacy student.
- (3) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.
- (4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.

TERMS, CONDITIONS AND LIMITATIONS

- 12.** (1) Every certificate of registration as a registered pharmacy student is subject to the following terms, conditions and limitations:
1. The member,
 - i. in the case of a member to whom subsection 11 (1) does not apply, shall only engage in the practice of pharmacy while enrolled in and actively participating in a program provided for in subsection 10 (1) or while actively engaged in any education or training specified in that subsection, and
 - ii. in the case of a member to whom subsection 11 (1) applies, shall only engage in the practice of pharmacy while enrolled in and actively participating in an educational program that is a requirement for the issuance of an applicable out-of-province certificate authorizing practice as an intern or pharmacist.
 2. The member may only engage in the practice of pharmacy,
 - i. while under the direct supervision of a member who holds a certificate of registration as a pharmacist, or
 - ii. where a program or any education or training provided for in subsection 10 (1) includes a clinical component in a premises that is not a pharmacy but at which drugs may be prescribed or dispensed, while under the direct supervision of a member of a College within the meaning of the *Regulated Health Professions Act, 1991* who has been approved for this purpose by the faculty that provides the program, education or training.
 3. Despite subparagraph 2 ii, the member shall not dispense, compound or sell a drug unless under the direct supervision of a member holding a certificate of registration as a pharmacist.
 4. Despite subparagraph 2 ii, the member may not supervise that part of the pharmacy where drugs are kept.
 5. The member may neither delegate a controlled act nor accept the delegation of a controlled act.

- (2) A certificate of registration as a registered pharmacy student automatically expires when the member is issued a certificate of registration as a pharmacist or an intern.
- (3) A certificate of registration as a registered pharmacy student automatically expires,
- (a) in the case of a member engaged in a program referred to in subparagraph 1 i of subsection 6 (1), when the member is refused readmission to the program, ceases to be enrolled in the program or ceases to actively participate in the program;
 - (b) in the case of a member engaged in an approved program referred to in sub-subparagraph 1 ii A of subsection 6 (1), two years after registration as a registered pharmacy student unless that period of time is extended by a panel of the Registration Committee;
 - (c) in the case of a member engaged in attaining any education or training or combination of education and training referred to in sub-subparagraph 1 ii B of subsection 6 (1) or in attaining any education or training or combination of education and training required by a panel of the Registration Committee as a condition for the issuance of another class of certificate of registration, on the date specified by the panel in its decision or, if no date was specified, one year from that decision, unless extended by a panel of the Registration Committee; and
 - (d) in the case of a member whose application for a certificate of registration as a registered pharmacy student was considered under subsection 11 (1), on the date on which the member ceases to hold an out-of-province certificate that is equivalent to a certificate of registration as a registered pharmacy student.

PART V
REGISTRATION — INTERNS

ADDITIONAL REQUIREMENTS

13. (1) The following are additional requirements for the issuance of a certificate of registration as an intern:

1. The applicant must,
 - i. have a minimum of a baccalaureate degree in pharmacy evidencing the successful completion of a program designed to educate and train persons to be practising pharmacists which was,
 - A. awarded on or before December 31, 1993 by a constituent faculty of the Association of Faculties of Pharmacy of Canada, or
 - B. awarded by a university as a result of successful completion of a program which was, at the time of the award, accredited by the Canadian Council for Accreditation of Pharmacy Programs or by another accrediting body approved by the Council for that purpose, or
 - ii. have a university degree in pharmacy that does not meet the requirements of subparagraph i but that evidences the successful completion of a program designed to educate and train persons to be practising pharmacists, and,
 - A. have successfully completed a program that, at the time the applicant commenced it, was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B, or
 - B. have successfully completed the examination provided for in paragraph 4 of subsection 6 (1) on the applicant's first attempt and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equal to those of current graduates of a program mentioned in sub-subparagraph i B.
 2. Subject to subsections (3) and (4), the applicant must have successfully completed a structured practical training program approved by the Council while holding a certificate of registration as a registered pharmacy student and while under the direct supervision of a preceptor approved by the Registration Committee.
- (2) Subject to subsections (3) and (4) and section 14, the requirements in subsection (1) are non-exemptible.
- (3) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 2 of subsection (1) may be completed as part of a program referred to in paragraph 1 of subsection (1), even if the applicant did not hold a certificate of registration as a registered pharmacy student at the time.
- (4) An applicant shall be deemed to have met the requirement in paragraph 2 of subsection (1) if, at the time of application, the applicant holds a non-restricted registration as a pharmacist, has held that registration for at least two years and the applicant,
- (a) satisfies the Registrar or a panel of the Registration Committee that the applicant engaged in the full scope of practice as a pharmacist in that jurisdiction for at least 600 hours;
 - (b) successfully completed a structured practical training program which is, in the opinion of a panel of the Registration Committee at least equivalent to a program mentioned in paragraph 2 of subsection (1), or has other education, training

or experience that, in the opinion of a panel of the Registration Committee is at least equivalent to the program mentioned in paragraph 2 of subsection (1); or

- (c) successfully completed the education and obtained the additional training or experience that a panel of the Registration Committee has specified.

(5) The requirement of paragraph 2 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as an intern within one year of meeting that requirement or within such greater time as is specified by a panel of the Registration Committee.

(6) An applicant who has a university degree in pharmacy mentioned in subparagraph 1 ii of subsection (1), and who successfully completes any further education or training or combination of education and training specified by a panel of the Registration Committee shall be deemed to have met the requirement in paragraph 1 of subsection (1) if the applicant,

- (a) was registered as a registered pharmacy student on December 3, 2010; or
- (b) becomes registered as a registered pharmacy student after December 3, 2010 but before December 3, 2011.

MOBILITY WITHIN CANADA

14. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of subsection 13 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as an intern in that jurisdiction.

(2) Without in any way limiting the generality of subsection (1), “good standing” shall include the fact that,

- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
- (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority that issued the applicant that out-of-province certificate as an intern.

(3) An applicant referred to in subsection (1) is deemed to meet the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.

(4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.

TERMS, CONDITIONS AND LIMITATIONS

15. (1) Every certificate of registration as an intern is subject to the following terms, conditions and limitations:

- 1. The member shall only engage in the practice of pharmacy,
 - i. when practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies, while under the direct supervision of a member holding a certificate of registration as a pharmacist, or
 - ii. in all other cases, while under the supervision of a member holding a certificate of registration as a pharmacist.
 - 2. The member shall not supervise that part of the pharmacy where drugs are kept.
 - 3. The member shall not delegate a controlled act.
- (2) A certificate of registration as an intern automatically expires,
- (a) when the member is issued a certificate of registration as a pharmacist; or
 - (b) one year from the date on which it was issued unless a panel of the Registration Committee specifies otherwise.

PART VI REGISTRATION — PHARMACY TECHNICIANS

ADDITIONAL REQUIREMENTS

16. (1) The following are additional requirements for the issuance of a certificate of registration as a pharmacy technician:

- 1. The applicant must,
 - i. have successfully completed a pharmacy technician program designed to educate and train persons to be pharmacy technicians which was, at the time the applicant graduated, accredited by the Canadian Council on Accreditation of Pharmacy Programs or such other accrediting body approved by the Council for that purpose,
 - ii. have successfully completed a pharmacy technician program designed to educate and train persons to be pharmacy technicians other than one referred to in subparagraph i or have a university degree or university diploma in pharmacy and, in either case,

- A. must have successfully completed a program that, at the time the applicant commenced was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i, or
 - B. must have successfully completed the examination referred to in paragraph 4 on the applicant's first attempt, and have successfully completed any further education or training or combination of education and training that was specified by a panel of the Registration Committee to evidence that the applicant possesses knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i,
- iii. have successfully completed a program before January 1, 2015 that, at the time the applicant commenced was approved by the Council as one whose graduates should possess knowledge, skill and judgment at least equivalent to a current graduate of a program referred to in subparagraph i, or
 - iv. have met the requirements of paragraph 1 of subsection 6 (1).
- 2. The applicant must have successfully completed an examination in pharmaceutical jurisprudence approved by the Council for applicants for a certificate of registration as a pharmacy technician.
 - 3. The applicant must have successfully completed a structured practical training program approved by the Council and must have done so under the direct supervision of a preceptor approved by the Registration Committee.
 - 4. The applicant must have successfully completed the qualifying examination of the Pharmacy Examining Board of Canada for pharmacy technicians or successfully completed another examination that has been approved by the Council for that purpose.
- (2) With the approval of the Council, all or any part of a structured practical training program referred to in paragraph 3 of subsection (1) may be completed as part of a program referred to in subparagraph 1i of subsection (1) or sub-subparagraph 1 ii A of subsection (1).
- (3) The requirement in paragraph 1 of subsection (1) must be met within two years before the date on which the applicant met all of the other requirements for the issuance of a certificate of registration as a pharmacy technician unless the applicant,
- (a) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act under the supervision or direction of a pharmacist for at least 600 hours during the three years before the date on which the applicant met all the other requirements for the issuance of a certificate of registration as a pharmacy technician and did so while practising as a pharmacy technician in Canada or in another jurisdiction approved by the Council;
 - (b) meets any requirements regarding any further education or training or a combination of education or training, if any, set by a panel of the Registration Committee within the time set by the panel; or
 - (c) successfully completes the examination referred to in paragraph 4 of subsection (1) within three years of the date on which he or she meets all of the other requirements for the issuance of a certificate of registration as a pharmacy technician.
- (4) The requirement of paragraph 2 of subsection (1) shall not be considered to have been met unless the applicant is issued a certificate of registration as a pharmacy technician within three years of meeting that requirement.
- (5) An applicant is only eligible to take the examination referred to in paragraph 2 of subsection (1) three times in any 24-month period.
- (6) The requirement in paragraph 3 of subsection (1) shall not be considered to have been met unless the applicant,
- (a) is issued a certificate of registration as a pharmacy technician within two years of meeting that requirement;
 - (b) satisfies the Registrar or a panel of the Registration Committee that the applicant has practised pharmacy within the scope of practice of the profession as set out in section 3 of the Act under the supervision or direction of a pharmacist for at least 600 hours during the three years before the date on which the applicant met all the other requirements for the issuance of a certificate of registration as a pharmacy technician and did so while practising as a pharmacy technician in Canada or in another jurisdiction approved by the Council; or
 - (c) meets any requirements regarding any further education or training or a combination of education or training, if any, set by a panel of the Registration Committee within the time set by the panel.
- (7) Subject to subsection (8), paragraph 4 of subsection (1) is not considered to have been met unless the applicant,
- (a) successfully completed the examination within three attempts; or
 - (b) successfully completed the examination on the applicant's fourth attempt having first successfully completed the further education or training or combination of education and training required by the examining body responsible for the administration of the examination or, if no further education or training was required by that body, the further education or training or combination of education and training, if any, that was specified by a panel of the Registration Committee.

(8) Where, by virtue of subsection (7), an applicant is not considered to have met the requirement in paragraph 4 of subsection (1), the applicant may not attempt the examination again until the applicant successfully completes a new program mentioned in subparagraph 1 i of subsection (1).

(9) An applicant shall be deemed not to have met the requirement of subparagraph 1 iii of subsection (1) unless, before January 1, 2012 and before commencing the program referred to in that subparagraph, the applicant successfully completed,

- (a) the College's Pharmacy Technician Certification Examination;
- (b) the Pharmacy Technician Evaluating Examination of the Pharmacy Examining Board of Canada; or
- (c) another examination approved by the Council.

(10) Subject to subsection (2) and section 17, the requirements in subsection (1) are non-exemptible.

(11) A reference in this section to "all of the other requirements for the issuance of a certificate of registration" includes, without being limited to, a requirement set out in subsection 4 (1) or subsection (1) of this section.

MOBILITY WITHIN CANADA

17. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant the requirements of paragraphs 1, 3 and 4 of subsection 16 (1) are deemed to have been met by the applicant if he or she provides, for each jurisdiction where the applicant holds an out-of-province certificate, a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a pharmacy technician in that jurisdiction.

(2) Without in any way limiting the generality of subsection (1), "good standing" shall include the fact that,

- (a) the applicant is not the subject of any discipline or fitness to practise order or of any proceeding or ongoing investigation or of any interim order or agreement as a result of a complaint, investigation or proceeding; and
- (b) the applicant has complied with the continuing competency and quality assurance requirements of the regulatory authority in that issued the applicant that out-of-province certificate as a pharmacy technician.

(3) An applicant referred to in subsection (1) is deemed to meet the requirements of paragraph 1 of subsection 4 (1) where the requirements for the issuance of the applicant's out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph.

(4) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code.

TERMS, CONDITIONS AND LIMITATIONS

18. Every certificate of registration as a pharmacy technician is subject to the following terms, conditions and limitations:

1. The member shall only engage in the practice of pharmacy,
 - i. when practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies, other than a remote dispensing location, while under the direct supervision of a member holding a certificate of registration as a pharmacist, or
 - ii. in all other cases, while under the supervision or direction of a member holding a certificate of registration as a pharmacist.
2. When practising in a pharmacy to which the *Drug and Pharmacies Regulation Act* applies the member shall not supervise that part of a pharmacy where drugs are kept.
3. The member shall not delegate a controlled act.
4. The member shall not provide information or education relating to drug use, either to or for a patient, where the provision of the information requires therapeutic knowledge, clinical analysis or clinical assessment.

PART VII SUSPENSIONS, RESIGNATIONS, REINSTATEMENTS, ETC.

ADMINISTRATIVE SUSPENSIONS

19. (1) If a member fails to provide information about the member in the manner and in the form as required under the by-laws, the Registrar may give the member notice of intention to suspend the member and may suspend the member's certificate of registration for failure to provide the information 60 days after notice is given.

(2) Where the Registrar suspends a member's certificate of registration under subsection (1), the Registrar shall lift the suspension upon being satisfied that the required information has been filed with the College and that any fees required for the lifting of that suspension has been paid.

20. (1) If, pursuant to the by-laws, the College requests evidence that the member holds professional liability insurance in the amount and in the form as required by the by-laws and the member fails to provide that evidence within 14 days of having been requested to do so, the Registrar shall immediately give the member notice of intention to suspend the member and may suspend the member's certificate of registration for failure to provide the evidence 30 days after notice is given.

(2) Where the Registrar suspends the member's certificate of registration under subsection (1), the Registrar shall lift that suspension upon being satisfied that the member holds professional liability insurance in the amount and in the form required by the by-laws and that any fee required for the lifting of that suspension has been paid.

21. Where the Registrar suspends a member's certificate of registration under section 24 of the Health Professions Procedural Code for failure to pay a fee, the Registrar shall lift the suspension upon being satisfied that the member,

- (a) has paid all amounts owed to the College;
- (b) holds professional liability insurance in the amount and in the form required by the by-laws; and
- (c) pays any fees required for the lifting of that suspension.

DEEMED RESIGNATIONS

22. (1) A member shall be deemed to have resigned where,

- (a) the member's certificate of registration was suspended for failure to pay a fee that the member was required to pay in accordance with the regulations or by-laws and that suspension continued for 120 days; or
- (b) the member's certificate of registration was suspended pursuant to subsection 19 (1) or subsection 20 (1) and the suspension continued for 60 days.

(2) The resignation is effective,

- (a) in the case of a resignation under clause (1) (a), on the 121st day following the commencement of that suspension;
- (b) in the case of a suspension under clause (1) (b), on the 61st day following the commencement of the suspension.

RETURN OF CERTIFICATE, ETC.

23. A member who resigns, or whose certificate of registration is suspended or revoked shall, if so requested, immediately return to the College,

- (a) his or her certificate of registration; and
- (b) any card or other form of identification issued to him or her by the College for the purpose of identifying him or her as a member of the College.

REINSTATEMENT

24. (1) A former member who held a certificate of registration as a pharmacist or pharmacy technician and who resigned as a member of the College may apply for the reinstatement of his or her certificate of registration by submitting a completed application to the Registrar in the form provided by the Registrar.

(2) Subject to subsections (3), (4) and (6), the Registrar may reinstate the former member's certificate of registration if,

- (a) the former member has paid,
 - (i) the required reinstatement fee,
 - (ii) the annual fee for the year in which the certificate of registration is to be reinstated, if not previously paid,
 - (iii) the annual fee for the year in which the former member resigned or was deemed to have resigned, if not previously paid unless the Registrar is satisfied that the former member did not engage in the practice of pharmacy in Ontario during that year, and
 - (iv) any other money owed by the former member to the College at the date the application for reinstatement is submitted, including, without being limited to, any penalty fees that were due at the time that he or she ceased to be a member and any costs or expenses ordered to be paid under section 53.1 of the Health Professions Procedural Code, any costs awarded to the College by a Court and any amount owing to the College under a by-law or former regulation made under the Act;
- (b) the application for reinstatement was submitted to the Registrar within three years of the date on which the former member resigned or in the case of a former member who was deemed to have resigned under subsection 22 (1), three years from the date on which the former member was suspended where that suspension resulted in a deemed resignation; and
- (c) the application meets the requirement set out in paragraph 7 of subsection 4 (1) with necessary modifications.

(3) A former member is ineligible for reinstatement under subsection (2) if he or she,

- (a) is the subject of a proceeding for professional misconduct, incompetence or incapacity in Ontario or any like proceeding in any other jurisdiction in relation to the practice of pharmacy or another profession, or was the subject of such a proceeding, other than a proceeding that was completed on its merits;
 - (b) was, at the time he or she ceased to be a member or at any time since, the subject of a proceeding in respect of,
 - (i) any criminal offence in any jurisdiction,
 - (ii) any offence relating to the use, possession or sale of drugs in any jurisdiction,
 - (iii) any offence arising in any jurisdiction relating to the practice of pharmacy or any other profession or occupation, or
 - (iv) any offence under the *Controlled Drugs and Substances Act* (Canada);
 - (c) was, after he or she ceased to be a member, found guilty of,
 - (i) any criminal offence in any jurisdiction,
 - (ii) any offence relating to the use, possession or sale of drugs in any jurisdiction,
 - (iii) any offence arising in any jurisdiction relating to the practice of pharmacy or any other profession or occupation, or
 - (iv) any offence under the *Controlled Drugs and Substances Act* (Canada);
 - (d) is the subject of an inquiry or investigation by the Registrar, a committee, a panel of a committee or a board of inquiry of the College, or was the subject of such an inquiry or investigation, that was not completed on its merits or which resulted in the member's resignation;
 - (e) was, at the time he or she ceased to be a member, the subject of an outstanding order or requirement of a committee, a panel of a committee, or a board of inquiry of the College;
 - (f) was, at the time he or she ceased to be a member, in breach of an order or requirement of a committee, a panel of a committee, or a board of inquiry of the College;
 - (g) was, at the time he or she ceased to be a member, in violation of a decision of a panel of the Inquiries, Complaints and Reports Committee or of any predecessor committee, including a decision requiring the member to attend to be cautioned;
 - (h) was, at the time he or she ceased to be a member, in breach of any written agreement with or undertaking provided to the College; or
 - (i) had, at the time he or she ceased to be a member, terms, conditions or limitations on his or her certificate of registration, other than those applicable to all members of the class of certificate of registration he or she previously held.
- (4) A former member must meet all of the requirements set out in subsection (2) within one year of submitting his or her application for reinstatement.
- (5) Nothing in this section prevents a former member from making any number of applications for reinstatement or from making an application for a new certificate of registration.
- (6) A former member who is seeking reinstatement of a certificate of registration as a pharmacist and who is otherwise eligible for the reinstatement shall be reinstated into Part B of the register unless the former member satisfies the Registrar that,
- (a) the former member did not resign at a time when the member had been selected for but had not successfully completed a practice review under the College's Quality Assurance Program; and
 - (b) the member had performed at least 600 hours of patient care in Canada, the United States of America or another jurisdiction approved by the Council during the period of three years commencing immediately before the date of the member's resignation.

REINSTATEMENT, PURSUANT TO ORDER

- 25.** If a former member's certificate of registration is ordered to be reinstated by a panel of the Discipline Committee or of the Fitness to Practise Committee, the Registrar shall reinstate the certificate of registration upon payment of,
- (a) the required reinstatement fee; and
 - (b) the annual fee for the year in which the certificate of registration is to be reinstated, if not previously paid.

**PART VII.1
NOTICES OF MEETINGS AND HEARINGS**

NOTICE OF MEETINGS

26. (1) The Registrar shall ensure that notice of every Council meeting that is required to be open to the public under the Act is given in accordance with this section.

(2) The notice must be published at least 14 days before the date of the meeting in a daily newspaper of general circulation throughout Ontario.

(3) The notice must be in English and French.

(4) The notice must contain the following information:

1. The date, time and place of the meeting.

2. A statement of the purpose of the meeting.

(5) The Registrar shall provide the information contained in the notice to every person who requests it by telephone.

NOTICE OF HEARINGS

27. (1) The Registrar shall ensure that the information concerning an impending hearing by a panel of the Discipline Committee to deal with allegations of professional misconduct or incompetence made against a member is given, in accordance with this section, to a person who requests the information.

(2) The information shall be given,

(a) at least 14 days before the date of the hearing, if the request is received 14 days before the date of the hearing; or

(b) as soon as possible after the request is made, if the request is received after that time but before the date of the hearing.

(3) The information given shall be as follows:

1. The name of the member against whom the allegations have been made.

2. The member's principal place of practice.

3. The date, time and place of the hearing.

4. A statement of the purpose of the hearing.

(4) The Registrar shall provide the information in French to a person who requests that the information be provided in French, wherever reasonably possible.

**PART VII.2
ADVERTISING**

ADVERTISING

28. (1) In this section,

“advertisement” includes an announcement, directory listing or other form of communication similar to an advertisement;

“drug services” means one or more of the compounding, dispensing or sale by retail of drugs or the provision of information or advice with respect to drugs.

(2) A member shall not, through any medium, publish, display, distribute or use, or permit, directly or indirectly, the publication, display, distribution or use through any medium of, an advertisement relating to drug services that,

(a) is false, misleading or deceptive, whether as a result of the inclusion of information or the omission of information;

(b) is not readily comprehensible to the persons to whom it is directed;

(c) is not dignified and in good taste;

(d) contains anything that cannot be verified;

(e) contains testimonials, comparative statements or endorsements;

(f) contains a reference to a member's area of practice or to a procedure or treatment available from a member practising in the pharmacy, unless the advertisement discloses whether or not the member has an area of expertise and, if the member does have such an area of expertise, the particular expertise;

(g) contains references to a particular brand of equipment used to assist in providing drug services;

(h) contains information that is not relevant to the choice of a pharmacist; or

- (i) contains any representations as to the safety or effectiveness or an indication for use of any drug referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*.
- (j) REVOKED: O. Reg. 59/11, s. 1 (4).
- (3) An advertisement by a member that includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act* shall include the price information for at least 15 different drugs, 10 of which each belong to a different one of the following drug classifications:
1. Anti-infective agents.
 2. Antineoplastic agents.
 3. Autonomic agents.
 4. Blood formation and coagulation drugs.
 5. Cardiovascular drugs.
 6. Central nervous system drugs.
 7. Diagnostic agents.
 8. Electrolytic, caloric and water balance drugs.
 9. Cough preparations.
 10. Eye, ear, nose and throat preparations.
 11. Gastrointestinal drugs.
 12. Gold compounds.
 13. Heavy metal antagonists.
 14. Hormones and substitutes.
 15. Oxytocics.
 16. Skin and mucous membrane preparations.
 17. Spasmolytics.
 18. Unclassified therapeutic agents.
 19. Vitamins.
- (4) Where an advertisement by a member includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*, the advertisement shall include at a minimum the following information with respect to each drug:
1. The quantity of the drug being advertised at the advertised price.
 2. The total cost for the drug to the purchaser including any dispensing fee.
 3. The time period during which the advertised price will be available.
- (5) An advertisement by a member that includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act* shall include, in addition to the price information referred to in subsection (4), the following information with respect to each advertised drug:
1. The strength of the drug.
 2. The brand name of the drug.
 3. The dosage form of the drug.
- (6) Where an advertisement by a member includes price information relating to drugs referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act*, equal prominence shall be given to each drug and, for each of those drugs, equal prominence shall be given to all the information required under subsections (4) and (5).
- (7), (8) REVOKED: O. Reg. 59/11, s. 1 (6).

PROFESSIONAL MISCONDUCT RE ADVERTISING

29. It is professional misconduct for the purposes of clause 51 (1) (c) of the Health Professions Procedural Code for a member who advertises price information with respect to a drug referred to in Schedule I established by the regulations under the *Drug and Pharmacies Regulation Act* to charge any purchaser, including the executive officer under the *Ontario Drug Benefit Act* more for the drug than the member has advertised, pursuant to paragraph 2 of subsection 28 (4), as the total cost for the drug to the purchaser including any dispensing fee.

CLARIFICATION RE APPLICATION OF PART

30. Nothing in this Part prohibits a member from publishing, displaying, distributing or using, or permitting directly or indirectly the publication, display, distribution or use of, an advertisement that relates solely to the co-payment or dispensing fee charged by the member for supplying a drug that is a listed drug product under the *Ontario Drug Benefit Act* to an eligible person under that Act.

PART VII.3 CONTROLLED ACTS

INTERPRETATION

31. In this Part,

“adapt” means to change a patient’s prescription respecting,

- (a) the dose of the prescribed drug,
- (b) the dosage form of the prescribed drug,
- (c) the directions for use of the prescribed drug, or
- (d) the route of administration for taking the prescribed drug,

but does not include therapeutic substitution;

“Part A pharmacist” means a member who holds a certificate of registration as a pharmacist and who is listed in Part A of the register;

“prescriber” means a person who is authorized under the laws of a province or territory of Canada to give a prescription within the scope of his or her practice of a health profession;

“prescription” means a direction from a prescriber directing the dispensing of a drug or mixture of drugs for a specific patient;

“renew” means to provide a patient with a prescription that repeats a prescription previously provided to that patient;

“therapeutic substitution” means the substitution of a drug that contains chemically different active ingredients that are considered to be therapeutically equivalent.

32. (1) Where the provisions of this Part are inconsistent with a law of Canada respecting prescriptions, including those related to a targeted substance, the law of Canada shall prevail and the provisions of this Part to the extent they are inconsistent with that law shall not apply.

(2) Where the provisions of this Part are inconsistent with the provisions of the *Narcotics Safety and Awareness Act, 2010*, the provisions of that Act shall prevail and the provisions of this Part, to the extent they are inconsistent with that Act, shall not apply.

CONTROLLED ACTS

33. A member shall not perform a controlled act under paragraph 2, 3, 4 or 5 of subsection 4 (1) of the Act except in accordance with this Part.

34. (1) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) who meets all the requirements in subsection (3) is authorized to perform the following acts:

1. Administering a substance specified in Schedule 1 by injection to a patient.
2. Administering a substance specified in Schedule 2 by inhalation to a patient.

(2) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform an act provided for in subsections (1), (4) and (5), subject to the terms, conditions and limitations imposed on his or her certificate of registration.

(3) A member may only perform an act provided for in subsection (1) if he or she complies with the following:

1. The member may only perform the act for the purpose of patient education and demonstration, and before performing the act,
 - i. must explain that purpose to the patient or his or her authorized agent, and
 - ii. must receive an informed consent from the patient or his or her authorized agent.
2. The member shall ensure that he or she only performs the act in an environment that is clean, safe, private and comfortable for the patient.
3. The member shall ensure that appropriate infection control procedures are in place.
4. The member must possess sufficient knowledge, skill and judgment respecting the substance to be administered, and sufficient understanding of the condition of the patient, to be able to administer the substance safely.

5. The member must consider whether administering a substance by injection or inhalation to the patient is appropriate, given the known risks and benefits to the patient and the safeguards and resources available to safely manage the outcome after administration and any other relevant circumstances.
6. The member must maintain a patient record that includes,
 - i. the name and address of the patient,
 - ii. the name and address of the member,
 - iii. the date the act was performed,
 - iv. the name, strength (where applicable) and quantity of the substance that the member administered to the patient,
 - v. the circumstances relating to the administration of the substance to the patient and any adverse reaction experienced by the patient, and
 - vi. confirmation that an informed consent was given by the patient or his or her authorized agent.

(4) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) is authorized to administer influenza vaccine by injection to a patient who is five years of age or older, if the member,

- (a) administers the vaccine in accordance with Ontario's Universal Influenza Immunization Program as described on the Ministry's website;
- (b) receives an informed consent from the patient or his or her authorized agent; and
- (c) meets all the requirements in paragraphs 2 to 6 of subsection (3).

(5) For the purposes of paragraph 2 of subsection 4 (1) of the Act, a member referred to in subsection (2) is authorized to administer a vaccine from one of the vaccines specified in Schedule 3 by injection to a patient who is five years of age or older, if the member,

- (a) receives an informed consent from the patient or his or her authorized agent;
- (b) meets all the requirements in paragraphs 2 to 6 of subsection (3); and
- (c) notifies the patient's primary care provider (if any) within a reasonable time that the member administered a vaccine to the patient and provides details respecting the administration.

35. (1) For the purposes of paragraph 3 of subsection 4 (1) of the Act, a member referred to in subsection (3) who complies with the other requirements of this section is authorized to prescribe: ~~the~~

1. The following specified drugs:

~~1.i.~~ Varenicline Tartrate, and

~~2.ii.~~ Bupropion Hydrochloride.

2. A drug in the categories listed in Schedule 4 for the corresponding conditions listed therein.

(2) A drug mentioned in paragraph 1 of subsection (1) may only be prescribed by a member for the sole purpose of smoking cessation.

(3) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform the act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration.

(4) A member may only prescribe a drug under this section if he or she,

- (a) possesses sufficient knowledge, skill and judgment respecting the drug and the patient's condition to prescribe the drug for the patient;
- (b) has considered whether prescribing the drug for the patient is appropriate, given the known risks and benefits of prescribing the drug for the patient and other relevant factors respecting the patient;
- (c) gives the prescription to the patient or his or her authorized agent;
- (d) advises the patient or his or her authorized agent, at the time of giving the prescription, that he or she may elect to take it to a pharmacy of his or her choosing for dispensing;

(e) notifies the patient's primary care provider (if any) within a reasonable time, that the member prescribed a drug for the patient and provides details respecting the prescription; ~~and~~

(f) complies with the additional requirements under sections 37 and ~~38-38~~; and

(g) in the case of a drug referred to in paragraph 2 of subsection (1),

i. has successfully completed such educational requirements as have been specified by Council, and

ii. has determined that prescribing the drug is the most appropriate treatment for the patient's condition.

36. (1) For the purposes of paragraph 4 of subsection 4 (1) of the Act, a member referred to in subsection (3) who complies with the other provisions of this section is authorized to perform the following acts:

1. Adapting a patient's prescription.
2. Renewing a patient's prescription for the purpose of continuity of care.

(2) Subsection (1) does not authorize a member referred to in subsection (3) to adapt or renew a prescription for a controlled substance as defined in the *Controlled Drugs and Substances Act* (Canada) or a drug designated as a monitored drug by the regulations under the *Narcotics Safety and Awareness Act, 2010*.

(3) A Part A pharmacist, an intern or a registered pharmacy student is authorized to perform an act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration.

(4) A member may only perform an act provided for in subsection (1) if he or she complies with the following:

1. The member must either possess the patient's prescription to be adapted or renewed or,
 - i. receive a copy of the prescription directly from the pharmacy where the prescription was dispensed to the patient,
 - ii. be satisfied based on verbal confirmation from a pharmacist at the pharmacy where the prescription was dispensed to the patient as to the existence and details of the prescription, or
 - iii. have access to the medical record that contains information about the prescription.
2. If the member is renewing a prescription, he or she must not prescribe a quantity of the drug that exceeds the lesser of,
 - i. the quantity that was originally prescribed, including any refills that were authorized by the prescriber, and
 - ii. a six months' supply.
3. The member must, within a reasonable time, notify the prescriber identified on the prescription adapted or renewed by the member, as well as the patient's primary care provider if the member knows that the patient has such a care provider other than the prescriber, providing details about the patient's prescription, when the member,
 - i. renews a patient's prescription, or
 - ii. adapts a patient's prescription, if, in the member's opinion,
 - A. adapting the prescription is clinically significant in relation to the patient, or
 - B. the notification is necessary to support the patient's care.
4. At the time that the member adapts or renews the patient's prescription, the member must advise the patient or his or her authorized agent,
 - i. that he or she is entitled to the prescription, and
 - ii. that he or she may take the prescription to a pharmacy of his or her choosing for dispensing.
5. The member must comply with the additional requirements under sections 37 and 38.

37. A member who performs an act provided for in section 35 or 36 must ensure that the following information is recorded on the prescription:

1. The name and address of the patient for whom the drug is prescribed.
2. The name, strength (where applicable) and quantity of the prescribed drug.
3. Directions for the use of the drug, including its dose, frequency, route of administration and any special instructions.
4. The name, address, telephone number and College registration number of the member issuing the prescription.
5. The date the prescription was issued by the member.
6. If applicable, reference to the prescription that the member adapted or renewed, including the name and contact details of the original prescriber.
7. The number of refills that the member authorized, if applicable.
8. Any other information required by law.

38. A member who performs an act under section 35 or 36 must maintain a patient record that includes details of the member's rationale for his or her decision to act under section 35 or 36 and the following information, if applicable:

1. Reference to, or a copy of, the patient's prescription that the member renewed or adapted, including the name and contact information of the prescriber.

2. A copy of the prescription that the member gave to the patient or his or her authorized agent under clause 35 (4) (c) or that the member gave to the patient or his or her authorized agent to take to a pharmacy of their choosing under [clause 35 \(4\) \(d\) or](#) paragraph 4 of subsection 36 (4).
3. A record of the results of laboratory or other tests that the member considered in making the decision to act under section 35 or 36.
4. The date on which the member notified the following persons, as applicable, and the method by which the notification occurred:
 - i. The patient's primary care provider notified under clause 35 (4) (e) or paragraph 3 of subsection 36 (4).
 - ii. The patient's prescriber notified under paragraph 3 of subsection 36 (4).

39. (1) For the purposes of paragraph 5 of subsection 4 (1) of the Act, a member referred to in subsection (2) who meets all the requirements in subsection (4) is authorized to perform the act of piercing a patient's dermis with a lancet-type device to obtain blood.

(2) A member who is a Part A pharmacist, an intern, a registered pharmacy student or a pharmacy technician is authorized to perform the act provided for in subsection (1), subject to the terms, conditions and limitations imposed on his or her certificate of registration.

(3) A pharmacy technician shall not perform the act provided for in subsection (1) unless,

- (a) a Part A pharmacist is physically present on the premises at the time when the pharmacy technician performs the act; and
- (b) the pharmacy technician is under the direction of a Part A pharmacist at the time when the pharmacy technician performs the act.

(4) A member may only perform the act provided for in subsection (1) if he or she complies with the following:

1. The member may only perform the act for the purpose of demonstrating the appropriate use of lancet-type devices for the patient's self care and education or for the patient's self monitoring of his or her chronic disease, and before performing the act,
 - i. shall explain that purpose to the patient or his or her authorized agent, and
 - ii. shall receive an informed consent from the patient or his or her authorized agent.
2. The member shall ensure that he or she only performs the act in an environment that is clean, safe, private and comfortable for the patient.
3. The member shall ensure that appropriate infection control procedures are in place.
4. The member must possess the knowledge, skill and judgment respecting the performance of the act and understand the condition of the patient, to perform it safely and effectively.
5. The member must consider whether performing the act on the patient is appropriate, given the known risks and benefits to the patient and the safeguards and resources available to safely manage the outcome and any other relevant circumstances.
6. The member must maintain a patient record that includes,
 - i. the name and address of the patient and the member,
 - ii. the date the act was performed, and
 - iii. confirmation that an informed consent was given by the patient or his or her authorized agent.

40. REVOKED: O. Reg. 451/10, s. 5.

PART VIII QUALITY ASSURANCE

GENERAL

41. In this Part,

“assessor” means an assessor appointed under section 81 of the Health Professions Procedural Code;

“Committee” means the Quality Assurance Committee.

42. The Committee shall administer the quality assurance program, which shall include the following components:

1. Maintenance of a portfolio of continuous learning.
2. Maintenance of a two-part register for pharmacist members.

3. Practice review and remediation.
4. Remediation of behaviour and remarks of a sexual nature.

CONTINUOUS LEARNING PORTFOLIO

- 43.** (1) A pharmacist shall maintain a portfolio of continuous learning activities in accordance with guidelines on such activities published by the College and distributed to the members.
- (2) A pharmacist shall submit the portfolio to the College on request.

TWO-PART REGISTER FOR PHARMACISTS

- 44.** (1) The part of the College's register that lists pharmacists shall have a Part A (patient care) and a Part B (no patient care).

- (2) Every pharmacist shall be listed in either Part A or Part B.

- 45.** (1) Upon being issued a certificate of registration as a pharmacist for the first time, the member shall ask to be listed in Part A or Part B of the register by completing and submitting the form provided by the Registrar.

- (2) Every year at the time of paying the annual membership fee, a pharmacist shall ask for a renewal of his or her listing in Part A or Part B or for a transfer to the other Part.

- (3) A member who asks for a renewal of a listing in Part A after the third anniversary of being issued a certificate of registration as a pharmacist for the first time shall not be listed in that Part unless he or she has dispensed, sold or compounded drugs, provided non-prescription drugs, health care aids and devices or information related to drug use for at least 600 hours during the preceding three years in the course of providing patient care while practising the profession in Canada.

- 46.** (1) A pharmacist may ask for a transfer from Part A of the register to Part B or from Part B to Part A at any time.

- (2) If a member listed in Part A asks for a transfer to Part B, the member shall be transferred to Part B.

- (3) If a member listed in Part B asks for a transfer to Part A, the member shall be transferred to Part A if he or she,

- (a) undergoes a practice review in accordance with section 47; and

- (b) satisfies the educational and practice requirements that may be specified by the Quality Assurance Committee.

- (4) If the Registrar proposes to reject a request for a transfer to Part A, the request shall be referred to a panel of the Quality Assurance Committee.

- (5) The member shall be given a reasonable opportunity to make written submissions to the panel before it makes a decision.

- (6) A member whose request to be listed in Part A is rejected by the panel may appeal to another panel of the Quality Assurance Committee.

- (7) No member of a panel that rejects a request to be listed in Part A shall sit on a panel hearing an appeal of that decision.

- (8) On an appeal, the member shall be given a reasonable opportunity to make written submissions to the panel before it makes a decision.

PRACTICE REVIEW AND REMEDIATION

- 47.** (1) Each year the College shall select at random the names of pharmacists required to undergo a practice review.

- (2) A pharmacist listed in Part A is required to undergo a practice review if his or her name is selected at random or the member is referred to the Committee by the Complaints Committee or Executive Committee.

- (3) If a pharmacist listed in Part A fails to undergo a required practice review, the Committee may transfer the pharmacist to Part B after giving him or her a reasonable opportunity to make written submissions.

- (4) A pharmacist listed in Part B is required to undergo a practice review if he or she is referred to the Committee by the Complaints Committee or Executive Committee or if the pharmacist has asked to be listed in Part A under subsection 46 (3).

- (5) The Committee shall appoint an assessor to conduct a practice review.

- (6) The assessor shall prepare a written report on the review and submit it to the Committee.

- (7) After considering the report, the Committee may decide,

- (a) that no further action is required;

- (b) that the pharmacist is required to undertake the remediation specified by the Committee to correct any deficiency in his or knowledge, skills or judgment identified by the review; or

- (c) that the pharmacist is to be listed in Part A where the review took place pursuant to a request to be listed in Part A.

(8) If the Committee proposes to require a pharmacist to undertake remediation under clause (7) (b), it shall not do so unless,

- (a) the pharmacist has been given a report of the results of the review;
- (b) the pharmacist has been given written notice of the Committee's intention to require him or her to undertake remediation;
- (c) the pharmacist has been given at least 14 days from receipt of the notice to make written submissions to the Committee; and
- (d) the Committee has considered any such submissions.

(9) After the pharmacist undertakes the specified remediation, the Committee may require him or her to undergo another practice review by an assessor, and subsections (6), (7) and (8) apply to that review.

48. (1) If the Committee requires a pharmacist to undertake remediation under section 47 and the pharmacist either fails to do so or fails to successfully complete the remediation, the Committee may direct the Registrar to impose terms, conditions or limitations on the pharmacist's certificate of registration for a specified period not exceeding six months.

(2) If the Committee proposes to make a direction under subsection (1), it shall not do so unless,

- (a) the pharmacist has been given written notice of its intention;
- (b) the pharmacist has been given at least 14 days from receipt of the notice to make written submissions to the Committee or to request an appearance before the Committee in order to make oral submissions; and
- (c) the Committee has considered any such submissions.

(3) A pharmacist who requests an appearance under clause (2) (b) shall be given a reasonable opportunity to appear but the Committee may dispose of the matter if he or she has been given a reasonable opportunity to appear and does not.

(4) If the period specified under subsection (1) expires and the pharmacist still has not undertaken or successfully completed the remediation, the Committee may report him or her to the Executive Committee and provide it with such information as it considers appropriate, except information that may not be disclosed under section 83 of the Health Professions Procedural Code.

(5) If the Registrar imposes terms, conditions or limitations on a pharmacist's certificate of registration for a specified period pursuant to a direction given by the Committee under subsection (1), the Committee may direct the Registrar to remove the terms, conditions or limitations before the end of the specified period if the Committee is satisfied that they are no longer needed.

(6) After directing the imposition of terms, conditions or limitations on a pharmacist's certificate of registration for a specified period not exceeding six months under subsection (1), the Committee may direct the imposition of terms, conditions or limitation on the pharmacist's certificate of registration for a second specified period not exceeding six months under subsection (1) but, after having done so, the Committee shall not direct the imposition of terms, conditions or limitations on the pharmacist's certificate of registration for any further specified period.

(7) If the Committee directs a second imposition of terms, conditions or limitations on the pharmacist's certificate, subsections (2), (3), (4) and (5) apply with respect to the second imposition.

REMEDIATION OF BEHAVIOUR AND REMARKS OF A SEXUAL NATURE

49. (1) This section applies to matters referred to the Committee by,

- (a) a panel of the Complaints Committee under subsection 26 (3) of the Health Professions Procedural Code; and
- (b) the Executive Committee under section 79.1 of the Code.

(2) The chair of the Committee shall establish a panel from among the members of the Committee for the purpose of considering a matter referred to in subsection (1).

(3) The chair of the Committee shall appoint a mediator to attempt to resolve the matter.

(4) If the mediator is unable to resolve the matter within 90 days after being appointed, the mediator shall report the failure to the chair without delay and provide the chair with a written report on the mediation.

(5) The chair shall give the member complained against a copy of the mediator's report and a notice advising him or her of the right to make written submissions to the panel.

(6) The member shall be given at least 14 days after receipt of the mediator's report and recommendations to make written submissions to the panel or to request an appearance before the panel to make oral submissions, or to do both.

(7) A member who requests an appearance shall be given a reasonable opportunity to make an appearance, but the panel may dispose of the matter without such appearance if the member has been given a reasonable opportunity to appear.

(8) If the mediation concerns a matter referred by the Complaints Committee, the chair shall give the complainant a copy of the mediator's report.

(9) A mediator's proposed resolution of a matter referred to the Committee by the Complaints Committee must be acceptable to the complainant, the member complained against and the panel.

(10) A mediator's proposed resolution of a matter referred to the Committee by the Executive Committee must be acceptable to the member complained against and the panel.

(11) After considering the mediator's report and any written or oral submissions, the panel may require the member to undergo an assessment for the purpose of establishing if he or she requires education with respect to sexual abuse.

(12) The assessment shall be carried out by an assessor appointed by the Committee.

(13) The assessor shall provide a written report to the panel and shall make such recommendations as the assessor considers appropriate about the member's need for education with respect to sexual abuse.

(14) A copy of the report and recommendations, and a notice informing him or her of the right to make submissions in accordance with subsections (6) and (7), shall be provided to the member.

(15) After considering the assessor's report and recommendations and the member's submissions, if any, the panel may require the member to attend or participate in a sexual abuse education program.

(16) If the panel proposes to take action under subsection (15), the member has the right to make submissions in accordance with subsections (6) and (7).

50. (1) If a member refuses to undergo an assessment under subsection 49 (11) or to attend or participate in a program under subsection 49 (15), the panel may direct the Registrar to impose terms, conditions or limitations on the member's certificate of registration for a specified period not exceeding six months.

(2) If the panel proposes to take action under subsection (1), the member has the right to make submissions in accordance with subsections 49 (6) and (7).

(3) If the panel is satisfied that the terms, conditions and limitations imposed on a member's certificate or registration are no longer needed, it shall direct the Registrar to remove them before the end of the specified period.

(4) If, at the end of the specified period, the member continues to refuse to undergo the required assessment or to attend or participate in the program, the panel shall refer the matter to the Executive Committee.

PANEL REQUIREMENTS

51. (1) The Committee may sit as a panel to consider a report on a practice review or any matter arising out of a practice review, a matter relating to the imposition of terms, conditions or limitations on a member's registration under section 48 or a matter under section 49.

(2) A panel shall have at least three members appointed by the chair of the Committee from among the Committee members; at least one member of the panel shall be a member appointed to the Committee by the Lieutenant Governor in Council.

(3) Three members of a panel constitute a quorum.

PART IX INSPECTION OF DRUG PREPARATION PREMISES

TEMPORAL APPLICATION

52. This Part applies to the College and members as of the day that it comes into force, except that,

(a) sections 54, 55, 56, 59 and 60 apply as of 90 days from the day that this Part comes into force; and

(b) the requirements in subsection 57 (1) and section 58 apply as of 30 days from the day that this Part comes into force.

INTERPRETATION

53. (1) In this Part,

“designated member” means,

(a) the member designated for a drug preparation premises in accordance with section 58, or

(b) where only one member engages in or supervises drug preparation activities at or in connection with a drug preparation premises, that member;

“drug” means a substance or a preparation containing a substance referred to in clauses (a) to (d) of the definition of “drug” in subsection 1 (1) of the *Drug and Pharmacies Regulation Act*, but does not include,

(a) a substance or preparation referred to in those clauses that is manufactured, sold or represented for use in animals or fowl, or

(b) a substance or preparation referred to in clause (e), (f), (g), (h) or (i) of that definition;

“drug preparation activities” means reconstituting, diluting 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;

“drug preparation premises” means any place where a member engages in drug preparation activities, or where drug preparation activities take place that a member supervises, but does not include,

(a) a pharmacy in respect of which a valid certificate of accreditation has been issued under the *Drug and Pharmacies Regulation Act*,

(b) a premises in respect of which a valid establishment licence has been issued under the *Food and Drugs Act (Canada)*, or

(c) a hospital or a health or custodial institution approved or licensed under any general or special Act;

“inspector” means a person appointed by the College to carry out an inspection on behalf of the College;

“supervise” means to supervise either directly or indirectly.

(2) Anything that may be done by the College under this Part may be done by the Council or by a committee established under clause 94 (1) (i) of the Health Professions Procedural Code.

INSPECTION

54. (1) All drug preparation premises are subject to inspection by the College in accordance with this Part.

(2) In carrying out an inspection of a drug preparation premises under subsection (1), the College may also require any or all of the following:

1. Inspection, examination or testing regarding any equipment, instrument, materials or any other thing that may be used in the drug preparation premises.
2. Examination and copying of books, accounts, reports, records or similar documents that are, in the opinion of the College, relevant to the member’s practice with respect to the drug preparation activities at or in connection with the drug preparation premises.
3. Inquiries or questions to be answered by the member that are relevant to the member’s practice with respect to the drug preparation activities at or in connection with the drug preparation premises.
4. Direct observation of a member in his or her practice with respect to drug preparation activities at or in connection with the drug preparation premises.

55. An inspector may, on the production of information identifying him or her as an inspector, enter and have access to any drug preparation premises at reasonable times and may inspect the drug preparation premises and do any of the things mentioned in subsection 54 (2) on behalf of the College.

56. (1) It is the duty of every member engaging in or supervising drug preparation activities at or in connection with drug preparation premises that are subject to an inspection to,

- (a) submit to an inspection of the drug preparation premises in accordance with this Part;
- (b) promptly answer a question or comply with a requirement of the inspector that is relevant to an inspection under this Part; and
- (c) co-operate fully with the College and the inspector who is conducting an inspection of a drug preparation premises in accordance with this Part.

(2) A member shall not engage in or supervise drug preparation activities at or in connection with a drug preparation premises where an inspector has been denied entry or access.

57. (1) No member shall commence engaging in or supervising drug preparation activities at or in connection with drug preparation premises unless the member has previously given notice in writing to the College in accordance with subsection (5) of the member’s intention to do so.

(2) Where a member has provided notice in writing to the College in accordance with subsection (1) and the drug preparation premises have not passed an inspection or passed an inspection with conditions within the previous five years, the College shall ensure that an inspection of the drug preparation premises is performed within 60 days from the day that the College receives the member’s notice or 150 days from the day this Part comes into force, whichever is later.

(3) A member who engages in or supervises drug preparation activities at or in connection with a drug preparation premises as of the day that is 30 days from the day this Part comes into force shall give notice in writing to the College in accordance with subsection (5) within 90 days from the day this Part comes into force.

(4) The College shall ensure that an inspection of the drug preparation premises with respect to which a member gives notice under subsection (3) is performed within 150 days from the day this Part comes into force.

(5) The notice required in subsections (1) and (3) shall include the following information, submitted in the form and manner required by the College:

1. The full name of the member giving the notice and the full name of the individual or corporation who is the owner or occupier of the drug preparation premises, if he or she is not the member who is required to give notice under this section.
2. The full address of the drug preparation premises.
3. The date when the member first began engaging in or supervising drug preparation activities at or in connection with the drug preparation premises or the proposed date when the member intends to begin engaging in or supervising drug preparation activities at or in connection with the drug preparation premises.
4. Any other information the College requires that is relevant to an inspection of the drug preparation premises conducted under this Part.

58. Where two or more members engage in or supervise drug preparation activities at or in connection with a drug preparation premises, the members shall designate a member as the designated member for the drug preparation premises, and shall immediately notify the College of the designated member's identity.

59. All drug preparation premises are subject to an inspection by the College once every five years after the initial inspection of the premises or more often if, in the opinion of the College, it is necessary or advisable to do so.

60. (1) After an inspection of a drug preparation premises, the College shall determine, in accordance with the accepted standards of practice, whether the drug preparation premises pass, pass with conditions or fail.

(2) In determining whether drug preparation premises pass, pass with conditions or fail an inspection, the College may consider,

- (a) the inspection results provided to the College by the inspector;
- (b) information provided by one or more members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises respecting the inspection, including the answers given by them in response to inquiries or questions asked by the inspector;
- (c) the information contained in a notice given by a member under subsection 57 (1) or (3);
- (d) any submissions made by the member or members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises that are relevant to the inspection; and
- (e) any other information that is directly relevant to the inspection of the drug preparation premises conducted under this Part.

(3) The College shall deliver a report, in writing and in accordance with section 39 of the *Regulated Health Professions Act, 1991*, to the individual or corporation that is the owner or occupier of the drug preparation premises and to the designated member for the drug preparation premises, within a reasonable time after the inspection is completed.

(4) Any report made by the College respecting an inspection of drug preparation premises where a member is engaging in or in respect of which the member is supervising drug preparation activities shall make a finding that the drug preparation premises passed, passed with conditions or failed the inspection and shall provide reasons where the drug preparation premises passed with conditions or failed the inspection.

(5) Any report made by the College that finds that drug preparation premises failed an inspection or passed with conditions is effective on the day that it is received, in accordance with section 39 of the *Regulated Health Professions Act, 1991*, by the designated member for the drug preparation premises.

(6) The designated member who receives a report made by the College that finds that a drug preparation premises failed an inspection or passed with conditions shall promptly provide copies of the report to all members engaging in or supervising drug preparation activities at or in connection with the drug preparation premises.

(7) A member shall not engage in or supervise drug preparation activities at or in connection with a drug preparation premises that fail an inspection until,

- (a) the College delivers a report indicating that the drug preparation premises passed a subsequent inspection, or passed with conditions; or
- (b) after considering submissions under subsection (9), the College substitutes a finding that the drug preparation premises pass or pass with conditions.

(8) A member shall not engage in or supervise drug preparation activities at or in connection with drug preparation premises that pass an inspection with conditions except in accordance with the conditions set out in the report until,

- (a) the College delivers a report indicating that the drug preparation premises passed a subsequent inspection; or
- (b) after considering submissions under subsection (9), the College substitutes a finding that the drug preparation premises pass.

(9) A member may make submissions in writing to the College within 14 days from the date on which a report made by the College that finds that the drug preparation premises passed with conditions or failed the inspection becomes effective in accordance with subsection (5).

(10) The College may or may not elect to reinspect the drug preparation premises after receiving a member's submissions, but no more than 60 days after a member provides his or her submissions, the College shall do one or more of the following:

1. Confirm its finding that the drug preparation premises failed the inspection or passed with conditions.
2. Make a report and find that the drug preparation premises passed with conditions.
3. Make a report and find that the drug preparation premises passed the inspection.

(11) Drug preparation premises that fail an inspection or pass with conditions may be subject to one or more further inspections within a reasonable time after the College delivers its report, at the request of a member, any other person to whom the College gave the report, or at any time at the discretion of the College.

(12) Where, as a result of an inspection carried out under this Part, a report made by the College finds that a member's knowledge, skill or judgment is unsatisfactory, the College may direct the Registrar to refer the report to the Quality Assurance Committee.

(13) Where, as a result of an inspection carried out under this Part, a report made by the College finds that a member may have committed an act of professional misconduct or may be incompetent or incapacitated, the College may direct the Registrar to refer the report to the Inquiries, Complaints and Reports Committee.

PART X FUNDING FOR THERAPY AND COUNSELLING

61. In this Part,

"member" includes a former member.

62. (1) The alternative requirements that must be satisfied in order for a person to be eligible for funding under clause 85.7 (4) (b) of the Health Professions Procedural Code are prescribed in this section.

(2) A person is eligible for funding for therapy or counselling if,

- (a) there is an admission made by a member in a statement to the College or in an agreement with the College that he or she sexually abused the person while the person was a patient of the member;
- (b) a member has been found guilty under the *Criminal Code* (Canada) of sexually assaulting the person while the person was a patient of the member;
- (c) there is a statement, contained in the written reasons of a committee of the College given after a hearing, that the person, while a patient, was sexually abused by a member; or
- (d) there is sufficient evidence presented to the Patient Relations Committee to support a reasonable belief that the person, while a patient, was sexually abused by a member.

(3) For the purposes of clause (2) (d), and without limiting the generality of that clause, the following kinds of evidence may support a reasonable belief that a person, while a patient, was sexually abused by a member:

1. Evidence of reports made with respect to the member under subsection 85.1 (1) or 85.2 (1) of the Health Professions Procedural Code.
2. Evidence that corroborates the person's allegations of sexual abuse by the member.

(4) A person is not eligible under subsection (2) unless, at the time the sexual abuse occurred, the person was a patient of the member and the member was practising in Ontario.

(5) Despite subsections (2), (3) and (4), a person is eligible for funding for therapy or counselling under this Part only if,

- (a) the person submits an application for funding to the Patient Relations Committee in the form provided by the College and, in the application, the person names the member who is alleged to have sexually abused the person;
- (b) the person adheres to the procedures followed by the Patient Relations Committee when determining whether the person has satisfied the requirements for eligibility for funding; and
- (c) the person provides such other information as is required by the Patient Relations Committee.

(6) A decision by the Patient Relations Committee that a person is eligible for funding for therapy or counselling does not constitute a finding against the member and shall not be considered by any other committee of the College dealing with the member.

TABLES 1, 2 REVOKED: O. Reg. 452/16, s. 2.

SCHEDULE 1
INJECTED SUBSTANCES

(Arranged by American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification)

1. 8:00 Anti-infective Agents
 - i. 8:18 Antivirals
 - A. 8:18.08.04 HIV Entry and Fusion Inhibitors
 1. Enfuvirtide
 - B. 8:18.20 Interferons
 1. Interferon Alfa-2b
 2. Peginterferon alfa-2a
 3. Peginterferon alfa-2b
2. 10:00 Antineoplastic Agents
 1. Goserelin
 2. Leuprolide
 3. Methotrexate
3. 12:00 Autonomic Drugs
 - i. 12:12 Sympathomimetic (Adrenergic) Agents
 - A. 12:12.12 Alpha- and Beta-Adrenergic Agonists
 1. Scopolamine
 2. Hyoscine
 3. Glycopyrrolate
 4. Epinephrine
4. 20:00 Blood Formation and Coagulation
 - i. 20:04 Antianemia Drugs
 - A. 20:04.04 Iron Preparations
 1. Iron
 - ii. 20:12 Coagulants and Anticoagulants
 - A. 20:12.04 Anticoagulants
 1. Dalteparin
 2. Danaparoid
 3. Enoxaparin
 4. Fondaparinux
 5. Heparin
 6. Nadroparin
 7. Tinazaparin
 - iii. 20:16 Hematopoietic Agents
 1. Ancestim
 2. Darbepoetin alfa

3. Epoetin alfa
4. Filgrastim
5. Pegfilgrastim
6. Romiplostim
5. 28:00 Central Nervous System Agents
 - i. 28:08 Analgesics and Antipyretics
 - A. 28:08.08 Opiate Agonists
 1. Codeine
 2. Hydromorphone
 3. Meperidine
 4. Morphine
 - B. 28:08.12 Opiate Partial Agonists
 1. Nalbuphine
 2. Pentazocine
 - ii. 28:16 Psychotherapeutic Agents
 - A. 28:16.08 Antipsychotics
 1. Haloperidol
 2. Methotrimeprazine
 - iii. 28:32 Antimigraine Agents
 - A. 28:32.28 Selective Serotonin Agonists
 1. Sumatriptan
6. 40:00 Electrolytic, Caloric, and Water Balance
 - i. 40:12 Replacement Preparations
 1. Normal saline
7. 48:00 Respiratory Tract Agents
 - i. 48:92 Respiratory Tract Agents, Miscellaneous
 1. Omalizumab
8. 56:00 Gastrointestinal Drugs
 - i. 56:22 Antiemetics
 - A. 56:22.08 Antihistamines
 1. Dimenhydrinate
 2. Prochlorperazine
 - ii. 56:32 Prokinetic Agents
 1. Metoclopropamide
 - iii. 56:92 GI Drugs, Miscellaneous
 1. Certolizumab Pegol
 2. Methylnaltrexone
9. 64:00 Heavy Metal Antagonists
 1. Deferoxamine
10. 68:00 Hormones and Synthetic Substitutes
 - i. 68:18 Gonadotropins
 1. Follitropin-alpha

2. Follitropin-beta
3. Gonadotropin-chorionic
4. Gonadotropin-chorionic-alfa
5. Gonadotropin-human
6. Lutropin-alfa
7. Menotropins
8. Urofollitropin
- ii. 68:20 Antidiabetic Agents
 1. Exenatide
 2. Insulins
 3. Liraglutide
- iii. 68:22 Antihypoglycemic Agents
 - A. 68:22:12 Glycogenolytic Agents
 1. Glucagon
- iv. 68:24 Parathyroid
 1. Calcitonin Salmon
 2. Teriparatide
- v. 68:28 Pituitary
 1. Desmopressin
 2. Vasopressin
- vi. 68:30 Somatotropin Agonists and Antagonists
 - A. 68:30.04 Somatotropin Agonists
 1. Somatropin
 - B. 68:30.08 Somatotropin Antagonists
 1. Pegvisomant
- vii. 68:32 Progestins
 1. Medroxyprogesterone
11. 88:00 Vitamins
 - i. 88:08 Vitamin B Complex
 1. Cyanocobalamin
 2. Folic Acid
 3. Methylcobalamin
 4. Pyridoxine
 5. Thiamine
 - ii. 88:12 Vitamin C
 1. Ascorbic Acid
 - iii. 88:24 Vitamin K Activity
 1. Vitamin K
12. 92:00 Miscellaneous Therapeutic Agents
 - i. 92:12 Antidotes
 1. Leucovorin
 - ii. 92:20 Biologic Response Modifiers

1. Denosumab
 2. Glatiramer
 3. Interferon-Beta-1A
 4. Interferon-Beta-1B
 5. Natalizumab
 - iii. 92:36 Disease-modifying Antirheumatic Drugs
 1. Abatacept
 2. Adalimumab
 3. Anakinra
 4. Etanercept
 5. Gold Sodium Thiomalate
 6. Golimumab
 7. Ustekinumab
 - iv. 92:40 Gonadotropin- releasing Hormone Antagonists
 1. Cetrorelix
 2. Ganirelix
 - v. 92:92 Other Miscellaneous Therapeutic Agents
 1. Octreotide
13. Miscellaneous
1. Sterile Water for Injection (Diluent)

SCHEDULE 2
INHALED SUBSTANCES

(Arranged by American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification)

1. 8:00 Anti-infective Agents
 - i. 8:18 Antivirals
 - A. 8:18.28 Neuraminidase Inhibitors
 1. Zanamivir
 - ii. 8:12 Antibacterials
 - A. 8:12.07.16 Monobactams
 1. Tobramycin
 2. Aztreonam
2. 12:00 Autonomic Drugs
 - i. 12:08 Anticholinergic Agents
 - A. 12:12.08 Antimuscarinics/Antispasmodics
 1. Ipratropium
 2. Tiotropium
 - ii. 12:12 Sympathomimetic (Adrenergic) Agents
 - A. 12:12.08.12 Selective Beta2- Adrenergic Agonists
 1. Fenoterol
 2. Formoterol
 3. Salbutamol

4. Salmeterol
5. Terbutaline
- iii. 12:16 Sympatholytic (Adrenergic Blocking) Agents
 - A. 12:16.04.04 Non-Selective alpha-Adrenergic Blocking Agents
 1. Dihydroergotamine
- iv. 12:92 Autonomic Drugs, Miscellaneous
 1. Nicotine
3. 28:00 Central Nervous System Agents
 - i. 28:08 Analgesics and Antipyretics
 - A. 28:08.12 Opiate Partial Agonists
 1. Butorphanol
 - ii. 28:32 Antimigraine Agents
 - A. 28:32.28 Selective Serotonin Agonists
 1. Sumatriptan
 2. Zolmitriptan
4. 40:00 Electrolytic, Caloric, and Water Balance
 - i. 40:12 Replacement Preparations
 1. Sodium chloride
5. 48:00 Respiratory Tract Agents
 - i. 48:24 Mucolytic Agents
 1. Dornase alfa
6. 52:00 Eye, Ear, Nose and Throat (EENT) Preparations
 - i. 52:02 Antiallergic Agents
 1. Sodium Cromoglycate
 2. Levocabastine
 - ii. 52:08 Anti-inflammatory Agents
 - A. 52:08.08 Corticosteroids
 1. Beclomethasone
 2. Budesonide
 3. Ciclesonide
 4. Flunisolide
 5. Fluticasone
 6. Mometasone
 7. Triamcinolone
 - iii. 52:32 Vasoconstrictors
 1. Oxymetazoline
 2. Phenylephrine
 3. Xylometazoline
7. 68:00 Hormones and Synthetic Substitutes
 - i. 68:18 Gonadotropins
 1. Buserelin
 2. Nafarelin

- ii. 68:24 Parathyroid
 - 1. Calcitonin Salmon
- iii. 68:28 Pituitary
 - 1. Desmopressin
 - 2. Vasopressin
- 8. 92:00 Miscellaneous Therapeutic Agents
 - i. 92:12 Antidotes
 - 1. Acetylcysteine

SCHEDULE 3
VACCINES

1. Bacille Calmette-Guerin (BCG) Vaccines
2. Haemophilus Influenzae type b (Hib) Vaccines
3. Meningococcal Vaccines
4. Pneumococcal Vaccines
5. Typhoid Vaccines
6. Combined Typhoid and Hepatitis A Vaccines
7. Hepatitis A Vaccines
8. Hepatitis B Vaccines
9. Hepatitis A and B combined Vaccines
10. Herpes Zoster Vaccines
11. Human Papillomavirus (HPV) Vaccines
12. Japanese Encephalitis Vaccines
13. Rabies Vaccines
14. Varicella Vaccines
15. Yellow Fever Vaccines

SCHEDULE 4
LIST OF MINOR AILMENTS AND CORRESPONDING DRUG CATEGORIES

(Arranged by American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification)

<u>CONDITION</u>	<u>AHFS CLASSIFICATION</u>
<u>1. Urinary tract infection (uncomplicated)</u>	<u>• Anti-infective Agents: Antibacterials, Sulfonamides (8:12.20)</u> <u>• Anti-infective Agents: Urinary Anti-infectives (8:36)</u>
<u>2. Dermatitis (atopic/eczema, allergic and contact)</u>	<u>• Skin and Mucous Membrane Agents: Anti-inflammatory Agents, Corticosteroids (84:06.08)</u>
<u>3. Insect bites and urticaria</u>	<u>• Skin and Mucous Membrane Agents: Anti-inflammatory Agents, Corticosteroids (84:06.08)</u> <u>• Antibiotic Tetracyclines (8:12:24)</u>
<u>4. Conjunctivitis (bacterial, allergic, viral)</u>	<u>• Eye, Ear, Nose, and Throat Preparations: Anti-infectives, Antibacterials (52:04.04)</u> <u>• Eye, Ear, Nose, and Throat Preparations: Antiallergic Agents (52:02)</u>
<u>5. Allergic rhinitis</u>	<u>• Eye, Ear, Nose and Throat Preparations: Anti-inflammatory Agents, Corticosteroids (52:08.08)</u>

	<ul style="list-style-type: none"> • Eye, Ear, Nose and Throat Preparations: Antiallergic Agents (52:02)
6. Candidal stomatitis	<ul style="list-style-type: none"> • Skin and Mucous Membrane Agents: Anti-infectives. Antifungals. Polyenes (84:04.08.28)
7. Herpes labialis	<ul style="list-style-type: none"> • Anti-infective Agents: Antivirals. Nucleosides and Nucleotides (8:18.32) • Skin and Mucous Membrane Agents: Anti-infectives. Antivirals (84:04.06) • Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08)
8. Hemorrhoids	<ul style="list-style-type: none"> • Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08) • Skin and Mucous Membrane Agents: Antipruritics and Local Anesthetics (84:08) • Skin and Mucous Membrane Agents: Miscellaneous Skin and Mucous Membrane Agents (84:36)
9. Gastroesophageal reflux disease (GERD)	<ul style="list-style-type: none"> • Gastrointestinal Drugs: Antiulcer Agents and Acid Suppressants. Histamine H2-Antagonists (56:28.12)
10. Dysmenorrhea	<ul style="list-style-type: none"> • Central Nervous System Agents: Analgesics and Antipyretics. Nonsteroidal Anti-inflammatory Agents. Other Nonsteroidal Anti-inflammatory Agents (28:08.04.92)
11. Musculoskeletal sprains and strains	<ul style="list-style-type: none"> • Central Nervous System agents: Analgesics and Antipyretics. Nonsteroidal Anti-inflammatory Agents. COX-2 inhibitors (28:08.04.08) • Central Nervous System agents: Analgesics and Antipyretics. Nonsteroidal Anti-inflammatory Agents. Other Nonsteroidal Anti-inflammatory Agents (28:08.04.92)
12. Impetigo	<ul style="list-style-type: none"> • Skin and Mucous Membrane Agents: Anti-infectives. Antibacterials (84:04.04) • Skin and Mucous Membrane Agents: Anti-inflammatory Agents. Corticosteroids (84:06.08)

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COUNCIL BRIEFING NOTE

MEETING DATE: MARCH 2020

FOR DECISION

X

FOR INFORMATION

INITIATED BY: Nancy Lum-Wilson, CEO and Registrar

TOPIC: Deadline for Pharmacy Non-Sterile Compounding Standards

ISSUE: Extension of deadline to meet Model Standards for Pharmacy Compounding of Non-Sterile Preparations

PUBLIC INTEREST RATIONALE: Pharmacists are front-line health care providers. Extension of the deadline to meet the standards for compounding of non-sterile preparations will allow pharmacists to focus on the COVID-19 pandemic response to ensure continuity of care and minimize public risk as the province implements measures to mitigate spread.

BACKGROUND:

- In December, 2017 Council approved the adoption of the [Model Standards for Pharmacy Compounding of Non-Sterile Preparations](#).
- In late March, 2018, NAPRA posted The Model Standards for Pharmacy Compounding of Non-sterile Preparations and accompanying [Guidance Document](#).
- In December, 2018 Council approved a three-phased approach to implementation of the NAPRA Model Standards for Pharmacy Non-Sterile Compounding with the following timelines:

Phase 1 – Assessing Risks and Gaps	Date: January 1, 2020
Phase 2 – Personnel Training and Quality Assurance	Date: July 1, 2020
Phase 3 – Facilities and Equipment	Date: January 1, 2021

ANALYSIS:

- On March 11, 2020, the World Health Organization declared COVID-19, caused by the SARS-CoV2 coronavirus, a pandemic.
- As of March 13, COVID-19 has now spread to 117 countries, with over 137,000 cases confirmed. As of March 12, there were 72 cases in Canada with one death
- On March 12, the Ontario Chief Medical Officer of Health advised Ontarians to take additional measures to mitigate risk to themselves and the community, including avoiding non-essential travel, suspension of gatherings of greater than 250 people and social distancing.
- The College is working jointly with the Ontario Pharmacists Association, The Canadian Society of Hospital Pharmacists, and the Canadian Pharmacists' Association to develop actions to mitigate registrant and community risk.
- All schools in Ontario will be closed from March 14 to April 5. A number of universities have suspended classes for one week and will move to online classes thereafter until further notice.

- The healthcare field, including hospitals, primary care and pharmacy, are developing their own organizational plans in response to the pandemic
- Four to five months after the first COVID-19 case was reported in Wuhan, Hubei province in China has still not fully recovered from the impact.
- The College must understand and be responsive to the evolution of the COVID-19 situation for front-line providers and adjust expectations accordingly.

RECOMMENDATION: That Council approve an extension of the deadline to implement Phases 2 and 3 of the NAPRA Model Standards for Pharmacy Non-Sterile Compounding to July 1, 2021 and January 1, 2022 respectively.



COUNCIL BRIEFING NOTE
MEETING DATE: MARCH 2020

FOR DECISION

X

FOR INFORMATION

INITIATED BY: Finance and Audit Committee

TOPIC: Audited Financial Statements

ISSUE: Approval of 2019 Audited Financial Statements

PUBLIC INTEREST RATIONALE: The Finance and Audit Committee engages external auditors to assess and test the College's internally produced financial statements, significant accounting policies, management judgements and estimates and the internal control environment to obtain reasonable assurance about whether the financial statements are free from material misstatement.

BACKGROUND:

The audit was conducted by a team of auditors from Tinkham LLP Chartered Professional Accountants. Prepared as a result of the audit, the Audited Financial Statements comprise the College's statement of financial position as of December 31, 2019 including the statement of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements including a summary of significant accounting policies.

The statements reflect the values for reserve funds agreed to by the Finance and Audit Committee.

ANALYSIS:

The Finance and Audit Committee reviewed the Auditor's Report and internal controls and met with the auditors in in-camera sessions both before and after the audit, and is satisfied that the financial reporting risks outlined in the audit planning letter are being appropriately addressed.

The opinion of the auditor is that the financial statements present fairly, in all material respects, the financial position of the College as of December 31, 2019 and its results of operations and its cash flows for the year then ended in accordance with Canadian Accounting Standards for not-for-profit organizations.

RECOMMENDATION:

That Council approve the attached Audited Financial Statements for the operations of the Ontario College of Pharmacists for 2019 as prepared by management and audited by Tinkham LLP Chartered Professional Accountants.

ONTARIO COLLEGE OF PHARMACISTS

Financial Statements

December 31, 2019

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INDEPENDENT AUDITOR'S REPORT

To the Members of
Ontario College of Pharmacists

Opinion

We have audited the financial statements of the Ontario College of Pharmacists (the "College"), which comprise the statement of financial position as at December 31, 2019, and the statements of operations, changes in net assets, and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the College as at December 31, 2019, and its results of operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the College in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the College's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the College or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the College's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast doubt on the College's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

TORONTO, Ontario
March 23, 2020

Licensed Public Accountants

ONTARIO COLLEGE OF PHARMACISTS
Statement of Financial Position

As at December 31	2019	2018
Assets		
Current		
Cash	\$ 982,629	\$ 623,162
Investments (note 4)	9,100,000	9,743,177
Accounts receivable and cost recoveries (note 3)	416,384	361,763
Prepaid expenses	306,258	287,320
	10,805,271	11,015,422
Property and equipment (note 5)	4,135,099	4,178,504
	\$ 14,940,370	\$ 15,193,926
Liabilities		
Current		
Accounts payable and accrued liabilities	\$ 1,693,464	\$ 1,525,517
Deferred revenue	4,863,588	3,999,634
	6,557,052	5,525,151
Net assets		
Internally restricted (note 6)	8,350,000	9,300,000
Unrestricted	33,318	368,775
	8,383,318	9,668,775
	\$ 14,940,370	\$ 15,193,926

Commitments (note 7)

Approved on behalf of the Council

ONTARIO COLLEGE OF PHARMACISTS
Statement of Operations

Year ended December 31	2019	2018 (note 10)
Revenues		
Member fees - Pharmacists	\$ 10,927,420	\$ 9,661,716
- Pharmacy technicians	2,211,758	1,919,159
Community pharmacy fees	5,487,893	4,598,083
Hospital pharmacy fees	954,894	813,223
Registration fees and income	782,700	677,570
Investment income	330,836	303,049
Discipline cost recoveries	183,694	304,150
	20,879,195	18,276,950
Expenses		
Council and committee expenses (schedule I)	775,889	735,030
Personnel (schedule II)	14,773,637	12,824,726
Regulatory programs (schedule III)	4,403,070	2,613,725
Operations (schedule IV)	1,879,035	1,716,855
	21,831,631	17,890,336
Excess of revenues over expenses (expenses over revenues) from operations for the year before amortization	(952,436)	386,614
Amortization	333,021	355,617
Excess of revenues over expenses (expenses over revenues) for the year	\$ (1,285,457)	\$ 30,997

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ONTARIO COLLEGE OF PHARMACISTS
Statement of Changes in Net Assets

Year ended December 31

	Internally Restricted	Unrestricted	2019 Total	2018 Total
Balance, beginning of year	\$ 9,300,000	\$ 368,775	\$ 9,668,775	\$ 9,637,778
Excess of revenues over expenses (expenses over revenues) for the year	-	(1,285,457)	(1,285,457)	30,997
Inter-fund transfers representing:	9,300,000	(916,682)	8,383,318	9,668,775
Fee stabilization fund:				
Transfer to unrestricted net assets	(950,000)	950,000	-	-
Inter-fund transfer	(300,000)	-	(300,000)	-
Investigations and hearings reserve fund:				
Inter-fund transfer	300,000	-	300,000	-
Balance, end of year	\$ 8,350,000	\$ 33,318	\$ 8,383,318	\$ 9,668,775

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ONTARIO COLLEGE OF PHARMACISTS

Statement of Cash Flows

Year ended December 31	2019	2018
Cash flows provided from (used in) operating activities		
Excess of revenues over expenses (expenses over revenues) for the year	\$ (1,285,457)	\$ 30,997
Item not requiring a cash outlay		
Amortization	333,021	355,617
	(952,436)	386,614
Changes in non-cash working capital balances:		
Accounts receivable and cost recoveries	(54,621)	(123,675)
Prepaid expenses	(18,938)	(120,234)
Accounts payable and accrued liabilities	167,947	195,784
Deferred revenue	863,954	134,770
	5,906	473,259
Cash provided from (used in) investing activities		
Redemption (purchase) of investments (net)	643,177	(357,842)
Purchase of equipment	(246,550)	(190,817)
Building renovations	(43,066)	(121,346)
	353,561	(670,005)
Change in cash during the year	359,467	(196,746)
Cash, beginning of year	623,162	819,908
Cash, end of year	\$ 982,629	\$ 623,162

See accompanying notes to the financial statements.

ONTARIO COLLEGE OF PHARMACISTS

Notes to the Financial Statements
December 31, 2019

1 Organization

The Ontario College of Pharmacists (the "College") regulates pharmacy to ensure that the public receives quality services and care. The vision of the College is to lead the advancement of pharmacy to optimize health and wellness through patient centered care.

The College is the registering and regulating body for pharmacy in Ontario. All persons within Ontario who wish to dispense prescriptions and sell products defined as drugs to the public must first have met the professional qualifications set by the College, and be registered as a pharmacist or pharmacy technician. Likewise, all pharmacies must meet certain standards for operations and be accredited by the College. In addition to setting initial standards, the College ensures ongoing adherence to the professional and operational standards.

The College is a not-for-profit organization, incorporated as a non-share corporation in 1871 under the laws of Ontario and, as such, is exempt from income taxes.

2 Significant accounting policies

These financial statements have been prepared by management in accordance with Canadian accounting standards for not-for-profit organizations.

a) Financial instruments

The College initially measures its financial assets and financial liabilities at fair value. The College subsequently measures all financial assets and financial liabilities at amortized cost.

Financial assets and liabilities include cash, short term and long term investments, accounts receivable and cost recoveries and accounts payable and accrued liabilities.

b) Property and equipment

Property and equipment are recorded at cost. Amortization is provided over the estimated useful lives of the assets at the following annual rates:

Buildings	4% declining balance
Furniture and equipment	15% declining balance
Computer equipment	straight line over 3 years
Computer software	straight line over 2 years

The above rates are reviewed annually to ensure they are appropriate. Any changes are adjusted for on a prospective basis. If there is an indication that the assets may be impaired, an impairment test is performed that compares carrying amount to net recoverable amount. There were no impairment indicators in 2019.

c) Revenue recognition

i) Fees

The College's principal source of revenue is membership and pharmacy fees which are recognized as revenue in the period to which these fees relate. Membership and pharmacy fees received in the current year, applicable to a subsequent year are recorded as deferred revenue on the statement of financial position and will be accounted for in income in the year to which they pertain.

ii) Investment income

Investment income consists of interest and is recognized as earned.

iii) Other revenues

All other revenues being registration and other fees, rental income and other miscellaneous income are recognized as revenue when services are provided or as earned.

ONTARIO COLLEGE OF PHARMACISTS

Notes to the Financial Statements
December 31, 2019

2 Significant accounting policies continued

d) Management estimates

The preparation of the College's financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the year.

Key areas where management has made difficult, complex or subjective judgments, often as a result of matters that are uncertain, include, among others, accounts receivable valuation, useful lives for amortization of property and equipment and other assets and liabilities valuation. Actual results could differ from these and other estimates, the impact of which would be recorded in future periods. Estimates and underlying assumptions are reviewed on an ongoing basis.

3 Accounts receivable

As at December 31, 2019, the allowance for impaired receivables totaled \$284,478 (2018 - \$205,338). The accounts receivable are presented net of the allowance.

4 Investments

As at December 31	2019	2018
Guaranteed investment certificates - BMO Bank of Montreal		
2.20%, maturing March 9, 2020	\$ 3,100,000	\$ -
2.20%, maturing April 27, 2020	6,000,000	-
1.60%, matured March 13, 2019	-	1,700,000
2.36%, matured April 27, 2019	-	1,491,562
2.55%, matured April 29, 2019	-	4,423,873
2.30%, matured October 18, 2019	-	2,127,742
	\$ 9,100,000	\$ 9,743,177

5 Property and equipment

As at December 31	2019		2018	
	Cost	Accumulated Amortization	Cost	Accumulated Amortization
Land	\$ 363,134	\$ -	\$ 363,134	\$ -
Buildings	6,554,584	3,194,696	6,511,518	3,055,598
Furniture and equipment	1,452,712	1,180,400	1,494,608	1,266,598
Computer hardware	420,611	308,804	462,707	354,057
Computer software	422,483	394,525	618,786	595,996
	\$ 9,213,524	\$ 5,078,425	\$ 9,450,753	\$ 5,272,249
Net book value		\$ 4,135,099		\$ 4,178,504

ONTARIO COLLEGE OF PHARMACISTS

Notes to the Financial Statements

December 31, 2019

6 Net assets - internally restricted

The Council of the College has internally restricted net assets to be used for specific purposes. These funds are not available for unrestricted purposes without approval of the Council.

As at December 31	2019	2018
Investigations and hearing reserve fund	\$ 2,500,000	\$ 2,200,000
Contingency reserve fund	5,500,000	5,500,000
Fee stabilization fund	350,000	1,600,000
	\$ 8,350,000	\$ 9,300,000

i) Investigations and hearings reserve fund

The Investigations and Hearings Reserve Fund is designated to cover costs including legal costs, for the conduct of inquiries, investigations, discipline hearings, fitness to practice hearings, appeals and payments under the program for funding for therapy and counselling which exceed annual budget provisions for those activities.

ii) Contingency reserve fund

The Contingency Reserve Fund is designated to provide for extraordinary expenses that exceed or fall outside of the provisions of the College's operating budget and to fund the College's obligations in extreme circumstances as determined and approved by the Council.

iii) Fee stabilization fund

The Fee Stabilization Fund is designated to minimize or delay the impact of year-over-year changes in revenues or expenses on membership renewal fees.

7 Commitments

- a) The College entered an agreement with Pharmapod Canada Limited in January 2018 for a term of eight years to provide a medication incident reporting system. The estimated annual future payments are estimated to be \$1,400,000 per year.
- b) The College has indemnified its past, present and future directors, officers and volunteers against expenses (including legal expenses), judgments and any amount actually or reasonably incurred by them in connection with any action, suit or proceeding, subject to certain restrictions, in which they are sued as a result of their involvement with the College, if they acted honestly and in good faith with a best interest of the College. The College has purchased directors' and officers' liability insurance to mitigate the cost of any potential future suits and actions, but there is no guarantee that the coverage will be sufficient should any action arise.

In the normal course of operations, the College has entered into agreements that include indemnities in favour of third parties, either express or implied, such as in service contracts, lease agreements and purchase contracts. In these agreements, the College agrees to indemnify the counterparties in certain circumstances against losses or liabilities arising from the acts or omissions of the College. The terms of these indemnities are not explicitly defined and the maximum amount of any potential liability cannot be reasonably estimated.

ONTARIO COLLEGE OF PHARMACISTS

Notes to the Financial Statements
December 31, 2019

8 Credit facility

The College has a credit facility available in the amount of \$1,500,000 bearing interest at bank prime rate, subject to certain terms and conditions. At December 31, 2019, the facility had not been drawn upon.

9 Financial instruments

The College is exposed to various risks through its financial instruments. The following analysis provides a measure of the College's risk exposure at the statement of financial position date.

General objectives, policies and processes

Council has overall responsibility for the determination of the College's risk management objectives and policies.

Credit risk

Credit risk is the risk that one party to a financial instrument will cause a financial loss for the other party by failing to discharge an obligation. The College is exposed to credit risk through its cash balances with banks, accounts receivable and cost recoveries and investments.

Accounts receivable are generally unsecured. This risk is mitigated by the College's requirement for members to pay their fees in order to renew their annual license to practice. The College also has collection policies in place.

Credit risk associated with cash and investments is minimized by ensuring that these assets are invested in financial obligations of major financial institutions.

Liquidity risk

Liquidity risk is the risk that the College will not be able to meet a demand for cash or fund its obligations as they come due. The College meets its liquidity requirements and mitigates this risk by monitoring cash activities and expected outflows and holding assets that can be readily converted into cash, so as to meet all cash outflow obligations as they fall due.

Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk is comprised of currency risk, interest rate risk and equity risk.

The College is not exposed to currency or equity risk.

Interest rate risk

Interest rate risk refers to the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate due to changes in market interest rates. The exposure of the College to interest rate risk arises from its interest bearing investments and cash. The primary objective of the College with respect to its fixed income investments ensures the security of principal amounts invested, provides for a high degree of liquidity, and achieves a satisfactory investment return giving consideration to risk.

Changes in risk

There have been no significant changes in risk exposures from the prior year.

10 Comparative figures

Certain comparative figures have been reclassified to conform to the presentation adopted in the current year.

ONTARIO COLLEGE OF PHARMACISTS
Schedule I
Council and Committee Expenses

Year ended December 31	2019	2018
Council	\$ 98,458	\$ 133,712
Committees		
Accreditation	6,054	3,227
Discipline	374,697	316,470
Drug preparation premises (DPP)	2,286	2,867
Executive	8,762	16,409
Finance and audit	758	3,169
Fitness to practice	15,830	12,225
Inquiries, complaints and reports (ICRC)	105,039	82,679
Patient relations	31,474	26,136
Quality assurance	19,905	101,395
Registration	18,387	36,656
Special committees	94,239	85
	\$ 775,889	\$ 735,030

Schedule II
Personnel

Year ended December 31	2019	2018
Salaries	\$ 12,118,673	\$ 10,447,856
Benefits	2,285,791	2,015,746
Personnel costs - other	369,173	361,124
	\$ 14,773,637	\$ 12,824,726

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ONTARIO COLLEGE OF PHARMACISTS
Schedule III
Regulatory Programs

Year ended December 31	2019	2018 (note 10)
Association fees - NAPRA	\$ 132,769	\$ 132,769
Communication initiatives	147,086	114,077
Consulting - regulatory	911	28,482
Donations, contributions and grants - partnership	3,000	153,000
DPP inspection costs	1,184	126
Election expenses	4,993	9,589
Examinations, certificates and registrations	148,257	150,534
Government relations	1,150	42,000
Health inquiry / investigation & intake costs	55,916	21,567
Legal - conduct / external	1,590,867	1,323,892
Legal - regulatory	99,115	16,445
Practice assessment of competence at entry	62,032	67,407
Practice input initiatives	1,959,705	334,620
Professional development remediation	10,716	10,741
Professional health program	109,400	118,812
Quality assurance - program administration costs	75,969	89,664
	\$ 4,403,070	\$ 2,613,725

Schedule IV
Operations

Year ended December 31	2019	2018
Association fees - general	\$ 14,875	\$ 12,587
Audit	25,375	23,000
Bank charges	502,996	411,535
Consulting - operations	64,327	111,495
Courier and delivery	4,973	5,327
Information system maintenance	328,701	288,885
Insurance - errors and omissions	5,978	5,748
Legal - operations	1,365	-
Niagara Apothecary:		
Expenses	51,322	47,148
Sales, grants and donations	(18,174)	(17,875)
Office services equipment leasing and maintenance	28,816	28,373
Postage	24,547	30,249
Property:		
Expenses	440,904	398,804
Rental income	(169,462)	(165,280)
Publications - annual report and Pharmacy Connection	41,572	48,677
Subscriptions	13,428	8,914
Supplies and stationery	23,736	19,569
Telecommunications	185,755	168,094
Travel and conferences	308,001	291,605
	\$ 1,879,035	\$ 1,716,855



COUNCIL BRIEFING NOTE MEETING DATE: MARCH 2020

FOR DECISION	X	FOR INFORMATION
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INITIATED BY:	Executive Committee
TOPIC:	Proposed By-Law No. 6
ISSUE:	Ratification of By-law #6 along with supporting resolution for Council and Committee Remuneration and Schedule of Fees

PUBLIC INTEREST RATIONALE: Governance best practice supports a small governing board comprised of an equal number of public and professional members, with members collectively possessing a range of governance competencies. The proposed draft By-Law No. 6 will allow the College and its Board of Directors to move toward best practice with the goal of strengthening the ability of the Board to provide oversight that is transparently aligned with the mandate of the College to serve and protect the public interest.

BACKGROUND:

In December 2018, College Council approved the decision to review the governance structure of the College. Throughout 2019, Council considered and approved changes related to Council composition, competencies, and selection as well as the composition of statutory committees. In order for the framework to be operationalized, by-laws were drafted and at the December 2019 meeting, Council approved the College's proposed draft By-Law No. 6, including the incorporation of annual fee increases tied to the published consumer price index to commence in 2021, for open consultation.

Open Consultation:

A [60 day open consultation](#) commenced on December 18, 2019. The proposed By-Law and supporting materials were posted on the College's website and the consultation was open until February 15, 2020. Notification of the consultation was circulated through the College's communication channels and frequent reminders were provided throughout the consultation period.

A total of 42 comments were posted, including 12 posts from one individual. All but four of the comments were from pharmacists (the remaining comments were reported to be from two members of the public, one defined as 'other' and one organization).

Feedback provided during the open consultation included comments related to the governance and fee changes as well as questions about how the governance changes will be applied. All of the individual comments posted on the open consultation page of the website were considered in the analysis and remain [publicly accessible online](#).

The response from the Ontario Pharmacists Association (OPA) is also [available online](#).

ANALYSIS:

Compensation and practice environment

The most common theme expressed in opposition to the fee increase was that the College's proposed increase did not take into account registrant remuneration/compensation, with multiple mentions of stagnant wages and reduced reimbursement to registrants. Some respondents

expressed disappointment that the College was not advocating on behalf of pharmacy professionals in regards to their compensation.

The OPA also submitted feedback in response to the consultation. The OPA submission provided a more balanced view that echoed many of the comments made by individual registrants, but also recognized that the cost of doing business will increase year-on-year for all businesses, including the College. The OPA has suggested deferring fee increases until 2024.

While we appreciate the feedback and suggestion for deferral, the College has an obligation to balance the considerations of the profession with the regulatory obligations we are mandated to deliver in the interest of public protection. As the volume of regulatory matters brought to the College's attention continues to rise, the regulatory reporting burden on the College continues to increase, and the College is increasingly called upon by government and stakeholders to address issues of concern to patient safety and quality of care, the College is committed to using the resources collected through professional fees to further its mandate of public protection, including addressing barriers to the delivery of safe, quality care to patients.

Competency-based selection

There was significant variation in the views from respondents on the competency-based selection process proposed in By-Law No. 6. Some respondents felt that competency requirements would favour the nomination and election of pharmacists from chain pharmacies, corporate offices or large institutions, while others felt that the competency-based process would help reduce the influence of corporations on Council and College decisions.

Additionally, feedback shared by some respondents expressed concern that the representation of patient populations would be over-weighted toward sectors that overlap such as northern and Indigenous and under represent other groups (i.e. community pharmacy in urban areas). There were suggestions that the competencies/patient populations should also take into account particular pharmacy services (i.e. compounding) or type (i.e. independent pharmacy).

Overall, comments from consultation respondents suggest that additional clarity and information is needed regarding the competency process and how the elements outlined in the By-Law will be put into practice to achieve the goal of a Council that is a balanced representation of patient populations and desired competencies. The College will ensure transparent communication of the competency process as the changes are implemented.

Changes to the proposed By-Law No. 6 (Attachment 1):

The following changes are proposed:

- Addition of 9.19.3; at the discretion of the Governance Committee, one or more public directors can be appointed to the Finance and Audit Committee.

RECOMMENDATION:

It is recommended that the Council approve By-Law No. 6 and the supporting resolutions for fees (Attachment 2) and remuneration (Attachment 3) effective March 23, 2020 until Sept 19, 2020.

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ONTARIO COLLEGE OF PHARMACISTS – BY-LAW NO. 6

A by-law relating generally to the conduct of the affairs of the Ontario College of Pharmacists

DRAFT

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DRAFT

BE IT ENACTED as a by-law of the **ONTARIO COLLEGE OF PHARMACISTS** as follows:

ARTICLE 1
INTERPRETATION

1.1 Definitions.

In this By-Law, and in all other By-Laws and resolutions of the College, unless the context otherwise requires:

- 1.1.1 “**Act**” means the *Regulated Health Professions Act, 1991*, S.O. 1991, c.18;
- 1.1.2 “**Board**” means the board of directors of the College. For the purposes of the Act, the *RHPA Regulations*, the *Code*, the *Pharmacy Act*, the *Pharmacy Act Regulations*, and any other legislation or policy where the context requires, the Board means the Council of the College;
- 1.1.3 “**By-Law**” or “**By-Laws**” means the By-Laws of the College, as the same may be amended from time to time;
- 1.1.4 “**Certificate of Accreditation**” means a certificate of accreditation issued to a pharmacy by the Registrar pursuant to the *Drug and Pharmacies Regulation Act*;
- 1.1.5 “**Certificate of Authorization**” means a certificate of authorization issued to a health profession corporation by the College;
- 1.1.6 “**Certificate of Registration**” means a certificate of registration issued to a Registrant by the Registrar pursuant to the *Code*;
- 1.1.7 “**Chair**” means the chair of the Board and for the purpose of the Act, the *RHPA Regulations*, the *Code*, the *Pharmacy Act*, the *Pharmacy Act Regulations*, and any other legislation or policy where the context requires, means the President of the College, and “chair” means the chair of a Committee or the person presiding at a meeting of the Board, as the context requires;
- 1.1.8 “**Change of Control**” has the meaning given to it in subparagraph 18.1.2;
- 1.1.9 “**Code**” means the *Health Professions Procedural Code*, being Schedule 2 to the Act;
- 1.1.10 “**Code of Conduct**” means the Code of Conduct and Procedures for Directors and Committee Members which is set out in Schedule B to this By-Law, as the same may be amended from time to time;
- 1.1.11 “**Code of Ethics**” means the Code of Ethics which is set out in Schedule A to this By-Law, as the same may be amended from time to time;

- 1.1.12 “**College**” means the Ontario College of Pharmacists;
- 1.1.13 “**Committee**” or “**Committees**” means a committee or committees of the College, whether a statutory committee or a standing or special committee;
- 1.1.14 “**Contact Person**” means the person designated as the contact person for a hospital pharmacy or institutional pharmacy pursuant to section 146.1 of the *Drug and Pharmacies Regulation Act*;
- 1.1.15 “**Deputy Registrar**” means the person who, from time to time, holds the title of Deputy Registrar of the College;
- 1.1.16 “**Designated Manager**” means the manager designated by the Owner of a pharmacy as required by section 146(1)(b) of the *Drug and Pharmacies Regulation Act*;
- 1.1.17 “**Director**” means a person elected or appointed to be a member of the Board;
- 1.1.18 “**Director Profile**” means the combination of patient populations served as set out in subparagraph 5.9.1, and knowledge, skills and experience as set out in subparagraph 5.9.2, that will be required of applicants who seek to be qualified as candidates for election to the Board, as determined by the Governance Committee;
- 1.1.19 “**Drug and Pharmacies Regulation Act**” means the *Drug and Pharmacies Regulation Act*, R.S.O. 1990, Chap. H.4;
- 1.1.20 “**Drug and Pharmacies Regulation Act Regulations**” means the regulations made under the *Drug and Pharmacies Regulation Act*;
- 1.1.21 “**Drug Preparation Premises**” means drug preparation premises as defined in the *Pharmacy Act Regulations*;
- 1.1.22 “**Elected Director**” means a Director elected to the Board in accordance with this By-Law;
- 1.1.23 “**Former Registrant**” has the meaning given to it in subparagraph 16.9.1;
- 1.1.24 “**Health Profession Corporation**” means a corporation incorporated under the *Business Corporations Act* (Ontario) that holds a Certificate of Accreditation;
- 1.1.25 “**Lay Committee Appointee**” means an individual appointed under this By-Law to serve as a member of a Committee who is neither a Director nor a Registrant;
- 1.1.26 “**Narcotic Signer**” means a pharmacist who is designated by a pharmacy to be authorized to sign the documentation required under the *Controlled Drug and*

Substances Act (Canada) or the regulations thereunder in order to obtain narcotics for the pharmacy;

- 1.1.27 “**Owner**” means an “owner” as defined in the *Drug and Pharmacies Regulation Act Regulations*;
- 1.1.28 “**Pharmacy Act**” means the *Pharmacy Act, 1991*, S.O. 1991, c.36;
- 1.1.29 “**Pharmacy Act Regulations**” means the regulations made under the *Pharmacy Act*;
- 1.1.30 “**Professional Advocacy Association**” means an organization whose principal mandate is to represent the interests of and advocate on behalf of pharmacies (community and hospital), pharmacists or pharmacy technicians, or a segment of them, including those registered in or practising in Canada. Examples of a Professional Advocacy Association include the Ontario Pharmacists Association, the Canadian Pharmacists Association, the Canadian Association of Pharmacy Technicians and Neighbourhood Pharmacy Association of Canada;
- 1.1.31 “**Professional Committee Appointee**” means a Registrant who is not a Director, who is appointed under this By-Law to serve as a member of a Committee;
- 1.1.32 “**Protecting Patients Act**” means the *Protecting Patients Act, 2017*, S.O. 2017, C.11;
- 1.1.33 “**Public Director**” means a Director appointed to the Board by the Lieutenant Governor-in-Council;
- 1.1.34 “**Register**” means the register required to be kept pursuant to the *Code*;
- 1.1.35 “**Registrant**” means a member of the College;
- 1.1.36 “**Registrar**” means the person who, from time to time, holds the title of Registrar and Chief Executive Officer of the College;
- 1.1.37 “**RHPA Regulations**” means the regulations made under the Act;
- 1.1.38 “**Statutory Committees**” means the Committees listed in section 10 of the *Code* as of the date of enactment of this By-Law, and the Accreditation Committee as required under the *Pharmacy Act*; and
- 1.1.39 “**Vice-Chair**” means the vice-chair of the Board and for the purpose of the Act, the *RHPA Regulations*, the *Code*, the *Pharmacy Act*, the *Pharmacy Act Regulations*, and any other legislation or policy where the context requires, means the Vice-President of the College.

1.2 Amendments.

Whenever reference is made in a By-Law to any statute or regulation, such reference shall be deemed to include any amendment to such statute or regulation as may be made from time to time.

ARTICLE 2 CLASSES OF REGISTRATION

2.1 Prescribed Classes of Registration.

Effective upon Schedule 1 (Drug and Pharmacy Regulations Act) of the *Protecting Patients Act* being proclaimed into force, all references in this By-Law to “registered pharmacy student” will be deemed to be deleted and replaced with “intern technician”.

ARTICLE 3 PROFESSIONAL LIABILITY INSURANCE

3.1 Insurance Requirements for a Certificate of Registration.

A Registrant who holds a Certificate of Registration as a pharmacy technician, registered pharmacy student, intern or pharmacist listed in Part A of the Register, must maintain personal professional liability insurance as follows:

- 3.1.1 Limit of Liability.** The policy of insurance must contain limits of a minimum of \$2,000,000 per claim or per occurrence and \$4,000,000 in the annual aggregate.
- 3.1.2 Definition of Insured Services.** The definition of Insured Services under the policy must include all professional services in the practice of pharmacy as regulated by the College.
- 3.1.3 Retroactive Date.** The policy must not contain a retroactive date and must provide for full prior acts protection.
- 3.1.4 Extended Reporting Period (ERP).** If the policy is a “claims made” policy, it must contain an extended reporting period provision for a minimum of three (3) years.
- 3.1.5 Personal Professional Liability Insurance Coverage.** The policy must be issued in the name of the individual Registrant and provide that Registrant with mobility and coverage wherever in Ontario that Registrant practises.
- 3.1.6 Legal Defence Payments.** Legal defence payments for regulatory proceedings or other legal proceedings potentially afforded by a personal professional liability policy must not erode the minimum limits of liability under the policy.

3.2 Evidence of Insurance.

A Registrant shall, upon the request of the Registrar, provide proof satisfactory to the Registrar of professional liability insurance in the required amounts and form, and a copy of the Registrant's professional liability insurance policy.

ARTICLE 4 RESTRICTION ON DIRECTORS AND COMMITTEE MEMBERS

4.1 Restriction on Directors.

A Director shall not be an employee of the College.

4.2 Restriction on Committee Members.

A member of a Committee shall not be an employee of the College.

ARTICLE 5 ELECTION OF DIRECTORS

5.1 Number of Elected Directors.

5.1.1 Subject to subparagraph 5.1.2, there shall be nine (9) Elected Directors, of whom two (2) shall be pharmacy technicians.

5.1.2 In the event that the number of Public Directors exceeds nine (9), the Board may increase the number of Elected Directors to be elected at the next annual August election to correspond to the number of Public Directors. Any such additional Elected Directors shall be pharmacists.

5.1.3 If the number of Public Directors is subsequently reduced, the Board may reduce the number of Elected Directors to be elected at the next annual August election to equal the number of Public Directors then-appointed.

5.2 Voting Eligibility.

Every Registrant who holds a valid Certificate of Registration as a pharmacist or a pharmacy technician, who practises or resides in Ontario, and who is not in default of payment of the annual fee, is entitled to vote in an election of Directors.

5.3 Renewal of the Board - August 2020.

5.3.1 Subject to subparagraph 5.3.2, the terms of office of all Elected Directors who are members of the Council as of the date that this By-Law comes into effect (the "**Incumbent Elected Directors**") will end on the date of the first meeting of the Board held after the election in August 2020, and seven (7) Elected Directors shall be elected to the Board in accordance with this By-Law at the election in August 2020 for the terms of office set out in paragraph 5.5.

5.3.2 Notwithstanding subparagraph 5.3.1, the Board shall select two (2) Incumbent Elected Directors who sit on the Executive Committee as of the date that this

By-Law comes into effect, who will have their terms of office continue for one (1) year and two (2) years, respectively, following the August 2020 election.

5.4 Election Date.

- 5.4.1 An election of Elected Directors will be held on the first Wednesday in August of every year beginning in 2020, for the number of positions on the Board that are then available.

5.5 Terms of Office - August 2020.

The terms of office of the seven (7) Elected Directors elected in August 2020 will commence at the first meeting of the Board following the election and end, subject to paragraph 5.11, as follows:

- 5.5.1 the two (2) pharmacists who receive the highest number of votes out of all pharmacist candidates will be elected for a three (3)-year term;
- 5.5.2 the pharmacy technician who receives the highest number of votes out of all pharmacy technician candidates will be elected for a three (3)-year term;
- 5.5.3 the pharmacy technician who receives the second highest number of votes of all pharmacy technician candidates will be elected for a two (2)-year term;
- 5.5.4 the pharmacist who receives the third highest number of votes out of all pharmacist candidates will be elected for a two (2)-year term;
- 5.5.5 the two (2) pharmacists who receive the fourth and fifth highest number of votes out of all pharmacist candidates will each be elected for a one-(1)-year term; and
- 5.5.6 if there is tie among candidates and it is necessary to break the tie to determine who will receive the longer term between the candidates, the Registrar shall break the tie, by lot.

5.6 Terms of Office - After August 2020.

- 5.6.1 The term of office of an Elected Director who is elected in each annual election beginning with the August 2021 election will be three (3) years, commencing at the first meeting of the Board after the election.
- 5.6.2 No Elected Director who is first elected in the August 2020 election may serve as a Director for more than six (6) consecutive years.
- 5.6.3 No Director who is a member of Council on the date this By-Law comes into effect may serve for more than nine (9) consecutive years (inclusive of years of service prior to the date this By-Law comes into effect).

5.6.4 If an Elected Director reaches the end of his or her maximum service prior to the end of his or her term, the Elected Director will cease to hold office and his or her position on the Board will be filled by way of a by-election in accordance with paragraph 5.20.

5.7 Eligibility for Election.

5.7.1 A Registrant who holds a valid Certificate of Registration as a pharmacist or as a pharmacy technician is eligible to seek to be a candidate for election to the Board if he or she meets the following requirements:

- (a) the Registrant is not in default of payment of any fees prescribed in the By-Laws;
- (b) the Registrant is not the subject of any disciplinary or incapacity proceeding;
- (c) the Registrant has not been found to have committed an act of professional misconduct or to be incompetent by a panel of the Discipline Committee.
- (d) the Registrant is not a registered pharmacy student or intern;
- (e) the Registrant's Certificate of Registration is not subject to a term, condition or limitation other than one prescribed by regulation;
- (f) the Registrant is not, and has not within the three (3) years immediately preceding the election been, an employee, officer or director of a Professional Advocacy Association. For greater certainty, nothing in this clause will prevent a Registrant who serves on an association or organization to which he or she has been appointed by the Board as a representative of the College, from running for election to be an Elected Director;
- (g) the Registrant has not been disqualified from serving on the Board or a Committee within the six (6) years immediately preceding the election;
- (h) where the Registrant was formerly a Director, but is not as of the date of the election a Director, it has been at least three (3) years since he or she was a Director;
- (i) the Registrant is not an adverse party in litigation against the College, the Board, a Committee or any of the College's officers, employees or agents;
- (j) the Registrant commits to devoting sufficient time in his or her schedule to participating in all required Board and Committee activities;

- (k) the Registrant has not, in the opinion of the Screening Committee, engaged in conduct unbecoming a Director; and
- (l) the Registrant is not the Owner or Designated Manager of a pharmacy that, within the six (6) years immediately preceding the election, has undergone a re-inspection, as a result of deficiencies noted in an initial inspection, for a third time or more after the initial inspection.

5.8 Notice of Election and Call for Applicants.

5.8.1 No later than April 1 in the year in which the election is to be held the Registrar shall notify each Registrant who is eligible to vote of the date of the election and the number of available positions on the Board. Such notification shall be by electronic mail, shall include a link to the Director Profile and application form for election and shall be addressed to each Registrant at his or her electronic address that is on file with the College. Such notice shall also be published on the website of the College.

5.9 Director Competencies.

5.9.1 The Board shall at all times comprise Elected Directors who collectively serve, or have experience working with, the following diverse patient populations:

- (a) patients served by rural community pharmacies;
- (b) patients served by urban community pharmacies;
- (c) patients treated at teaching hospitals;
- (d) patients treated at community hospitals;
- (e) patients located in northern/remote areas;
- (f) patients who identify as Indigenous;
- (g) patients with mental health and addictions needs; and
- (h) patients in long-term care.

5.9.2 The Board shall in addition at all times comprise Directors who collectively have the following knowledge, skills and experience:

- (a) experience in and understanding of the principles of protecting, and acting in, the public interest;
- (b) experience working with diverse populations, marginalized groups and people with disabilities;

- (c) experience serving on boards in an oversight capacity;
- (d) experience in managing risk, including reputational risk;
- (e) experience in senior leadership roles in business;
- (f) experience as a human resource professional including in occupational health and safety, organizational structures and human resources oversight and compensation, recruiting and succession planning;
- (g) financial and/or accounting expertise, including experience preparing, auditing, analyzing or evaluating financial statements and an understanding of generally accepted accounting principles;
- (h) ability to navigate electronic systems to access Board and Committee materials;
- (i) legal experience or familiarity with regulated professions, including overseeing regulations and setting standards for certification; and
- (j) experience participating in, or leading, an organization in planning for its future, such as: conducting S.W.O.T. (strengths, weaknesses, opportunities, and threats) analysis, environmental scans, strategy design, planning, implementation and evaluation.

5.10 Application Procedure.

- 5.10.1* A Registrant seeking to be a candidate for election as an Elected Director shall complete and return an application form no later than the deadline provided in the form. The application form shall be accompanied by three (3) reference letters in accordance with the instructions contained in the application form.
- 5.10.2* The application form shall include a signed affirmation by the applicant of his or her commitment to participate in pre-orientation activities aimed at understanding the obligations of a Director.
- 5.10.3* The Screening Committee shall review the applications against the eligibility requirements as set out in paragraph 5.7 and the Director Profile that the Governance Committee has announced for the election. Applicants who (a) meet the eligibility requirements in paragraph 5.7, and (b) serve or have experience with patient populations, and have knowledge, skill and experience, that are within the Director Profile, will be qualified as candidates for election.
- 5.10.4* If the Screening Committee requires additional information in order to assess whether an applicant meets the criteria in the Director Profile, the Screening Committee may require the applicant to participate in an interview in person or by electronic means.

- 5.10.5 An applicant may withdraw his or her application by notice of withdrawal delivered to the Registrar no later than July 1 in the year in which the election is to be held.
- 5.10.6 All applicants who have not withdrawn their application will be notified whether they are eligible and have been qualified as candidates for election.
- 5.10.7 In the event of a dispute about whether a Registrant is eligible or qualified as a candidate for election, the Governance Committee shall conduct an investigation and report its findings and recommendations to the Executive Committee. The Executive Committee shall rule and inform the candidate of its decision and reasons.
- 5.10.8 A person who has a direct interest in the result of an election dispute shall not participate in the investigation or consideration of such dispute.

5.11 Acclamation.

- 5.11.1 If, after the deadline referred to in subparagraph 5.10.5, the number of pharmacy technicians qualified as candidates for election is equal to the number of pharmacy technicians to be elected in that election, the Registrar shall declare those pharmacy technician candidate(s) to be elected by acclamation.
- 5.11.2 If, after the deadline referred to in subparagraph 5.10.5, the number of pharmacists qualified as candidates for election is equal to the number of pharmacists to be elected in that election, the Registrar shall declare those pharmacist candidate(s) to be elected by acclamation.
- 5.11.3 If, after the deadline referred to in subparagraph 5.10.5, the number of pharmacy technicians qualified as candidates for election is less than the number of pharmacy technicians to be elected in that election, the Registrar shall declare the qualified pharmacy technician candidate(s) to be elected by acclamation and there will be a supplementary application, selection and election process held in accordance with paragraph 5.21 in order to fill any remaining vacancies.
- 5.11.4 If, after the deadline referred to in subparagraph 5.10.5, the number of pharmacists qualified as candidates for election is less than the number of pharmacists to be elected in that election, the Registrar shall declare the qualified pharmacist candidate(s) to be elected by acclamation and there will be a supplementary application, selection and election process held in accordance with paragraph 5.21 in order to fill any remaining vacancies.
- 5.11.5 In the event of acclamation pursuant to this paragraph 5.11 in an election in which candidates will be elected to terms of varying lengths, the Registrar shall determine by lot which successful candidate will serve for which length of

term. However, if subparagraph 5.11.3 or 5.11.4 is applicable, the candidate(s) elected by acclamation will serve the longer of the available terms.

5.12 Registrar's Electoral Duties.

5.12.1 The Registrar shall supervise and administer the election of candidates and for the purpose of carrying out that duty, the Registrar shall:

- (a) appoint returning officers or scrutineers;
- (b) establish a deadline for the receipt of ballots;
- (c) establish reasonable safeguards to ensure that the person voting is entitled to vote;
- (d) ensure electronic communication and voting processes are reliable and secure;
- (e) establish procedures for the counting and verification of ballots; and
- (f) provide for the notification of all candidates and Registrants of the results of the election.

5.12.2 No later than twenty-one (21) days before the date of an election, the Registrar shall provide to every Registrant eligible to vote a list of the candidates, secure access to a ballot, and an explanation of the voting procedures as set out in this By-Law.

5.13 Scrutineers.

5.13.1 The Board shall, at the last regular Board meeting before an election, appoint two (2) or more persons to serve as scrutineers for the election.

5.13.2 The scrutineers will be reimbursed for their expenses as provided in Article 7 in accordance with a policy made by a resolution of the Board.

5.13.3 If a scrutineer is unable or unwilling to act, the Chair shall appoint a person as a replacement scrutineer.

5.14 Ballots.

5.14.1 The names of the candidates who have not withdrawn their candidacies by the deadline for so doing will appear on the ballot.

5.14.2 The Registrar shall prepare a list of the voting Registrants.

5.14.3 A Registrant who is eligible to vote and who does not receive, or loses, his or her secure access to a ballot may apply to the Registrar for replacement secure

access to a ballot and the Registrar shall provide the Registrant with a replacement.

5.15 Voting.

- 5.15.1 A ballot shall clearly indicate the candidates of the voting Registrant's choice and shall be submitted so that it is received not later than 5:00 p.m. on the day of the election.
- 5.15.2 The scrutineers shall ascertain that each voting Registrant is eligible to vote according to the list prepared by the Registrar.
- 5.15.3 The scrutineers shall verify the votes at the head office of the College on the day following the election.
- 5.15.4 The verification of the votes by the scrutineers shall be conducted in such a manner that no person will know for whom any voting Registrant has voted.
- 5.15.5 The only persons permitted to be present during the verification will be the scrutineers, the Registrar, such staff of the College as the Registrar authorizes, and the candidates. A candidate may appoint one (1) person to represent the candidate at the verification.
- 5.15.6 If the scrutineers cannot agree on any matter relating to the verification, the matter shall be decided by the Registrar.
- 5.15.7 Upon completing the verification, the scrutineers shall prepare a return and file the return with the Registrar.
- 5.15.8 The successful pharmacist candidates in an election will be those with the highest and next highest number of votes and so on until the number of successful pharmacist candidates equals the number of pharmacists to be elected in that election.
- 5.15.9 The successful pharmacy technician candidate in an election where one pharmacy technician is to be elected will be the one with the highest number of votes. If more than one (1) pharmacy technician is to be elected in an election, the successful pharmacy technician candidates will be those with the highest and next highest number of votes until all positions are filled.
- 5.15.10 Upon receiving the returns from the scrutineers, the Registrar shall declare the pharmacists who were successful in accordance with subparagraph 5.15.8 to be elected as Elected Directors and shall declare that the pharmacy technician or technicians who were successful in accordance with subparagraph 5.15.9 to be elected as Elected Director(s), and shall notify each candidate of the election results.

5.16 Number of Votes to be Cast.

5.16.1 In the election to be held in August 2020, each Registrant may vote for up to five (5) pharmacist candidates and up to two (2) pharmacy technician candidates.

5.16.2 In each annual election beginning in August 2021, each Registrant may vote for up to the number of pharmacy technician candidates as there are pharmacy technician vacancies on the Board and for up to the number of pharmacist candidates as there are pharmacist vacancies on the Board.

5.17 Tie Votes.

5.17.1 If there is a tie in an election of Elected Directors and it is necessary to break the tie to determine who will be the successful candidate, the Registrar shall break the tie, by lot, and then declare the candidate elected.

5.18 Interruption of Service.

5.18.1 Where there is an interruption of mail or electronic service during the application period or election, the Registrar shall extend the deadline for applications and the holding of the election for such period of time as the Registrar considers necessary to compensate for the interruption.

5.19 Conduct of Directors.

5.19.1 An Elected Director is automatically disqualified from sitting on the Board if the Elected Director:

- (a) is found to have committed an act of professional misconduct or is found to be incompetent by a panel of the Discipline Committee; or
- (b) is found to be an incapacitated Registrant by a panel of the Fitness to Practise Committee.

5.19.2 Formal governance action may be taken against a Director, in accordance with subparagraphs 5.19.3, where the Director:

- (a) fails, or does not make himself or herself available, without cause, to attend three (3) consecutive meetings of the Board;
- (b) fails, or does not make himself or herself available, without cause, to attend three (3) consecutive meetings of a Committee of which he or she is a member, or fails without cause to attend a scheduled hearing or review conducted by a panel to which he or she was appointed;
- (c) fails, or does not make himself or herself available, without cause, to attend Director education and evaluation activities hosted by the College from time to time;

- (d) is in default of payment of any fees prescribed in the By-Laws;
- (e) is or becomes an employee, officer or director of a Professional Advocacy Association (however, for greater certainty, a Director shall not be disqualified by reason of serving on an association or organization to which he or she has been appointed by the Board as a representative of the College);
- (f) in the case of a dean of a faculty of pharmacy who is a Registrant,
 - (i) is found to have committed an act of professional misconduct or is found to be incompetent by a panel of the Discipline Committee; or
 - (ii) is found to be an incapacitated Registrant by a panel of the Fitness to Practise Committee;
- (g) initiates litigation against the College, the Board, a Committee or any of the College's officers, employees or agents; or
- (h) engages in conduct or an omission that is reasonably regarded by the Board as being disgraceful, dishonourable, unprofessional or unbecoming a Director.

5.19.3

In the event of a concern or complaint regarding the conduct of a Director, the following procedure shall be followed:

- (a) the person raising the concern or complaint shall report it to any of the Past-Chair, the Chair, the Registrar or the Vice-Chair who shall bring the concern or complaint to the Governance Committee. The concern or complaint will also be disclosed to the Director in question;
- (b) if the Governance Committee is unable to address the concern or complaint, the Executive Committee may appoint another Committee to fulfill the Governance Committee's duties under subparagraph 5.19.3 or perform such duties itself;
- (c) if the Governance Committee or other Committee, after any inquiry it deems appropriate, concludes that the concern or complaint warrants formal investigation, it shall appoint an independent third party, such as a retired Judge or a senior lawyer who does not otherwise act for the College, to conduct the investigation. In addition to any other investigative steps, the independent third party shall notify the Director of his or her right to retain a lawyer and shall provide an opportunity for the Director to respond to the concern or complaint;

- (d) as soon as feasible, the independent third party shall report the results of the investigation in writing to the Governance Committee or other Committee and to the Director. The report shall include the independent third party's findings of fact and his or her opinion as to whether grounds for taking formal governance action against the Director set out in subparagraph 5.19.2 have been met and, if so, the apparent significance of the breach;
- (e) if the Governance Committee or other Committee determines that formal governance action is warranted it shall be placed on the agenda of the next regular Board meeting unless a special meeting is called before then to address the matter. Participation in the investigation and referral process does not render the members of the Governance Committee or other Committee ineligible to participate and vote on the matter at the Board;
- (f) before the Board decides whether to take formal governance action, the Director shall be afforded an opportunity to address the Board for a period of no less than one (1) hour. The Director shall not take part in the deliberation or vote;
- (g) the Board shall determine whether grounds for taking formal governance action against the Director set out in subparagraph 5.19.2 have been met and, if so, whether the breach warrants the imposition of a governance sanction;
- (h) the determination that grounds for taking formal governance action against the Director set out in subparagraph 5.19.2 have been met and the determination to impose a formal governance sanction pursuant to subparagraph 5.19.4 must be approved by a vote of at least two-thirds of the Directors eligible to vote. The vote will be a recorded vote; and
- (i) where the Board determines that grounds for taking formal governance action against the Director set out in subparagraph 5.19.2 have not been met and that formal governance action is not warranted, the Board may direct the College to reimburse the Director for all or part of the Director's legal expenses.

5.19.4 The formal governance sanction imposed by the Board under subparagraph 5.19.3(g) may include one or more of the following:

- (i) censure of the Director verbally or in writing;
- (ii) disqualification of an Elected Director from the Board;

- (iii) where the Director is a Public Director, sending a copy of the independent third party's report and the Board's determination to the Ministry of Health; or
- (iv) where the Director is a dean of a faculty of pharmacy, sending a copy of the independent third party's report and the Board's determination to the applicable Ontario university.

5.19.5 An Elected Director who is disqualified from sitting on the Board is thereby removed from the Board and ceases to be a Director.

5.20 Filling of Vacancies.

5.20.1 Upon the proclamation of section 30 of Schedule 5 (*Regulated Health Professions Act, 1991*) to the *Protecting Patients Act* by the Lieutenant Governor, the provisions of this paragraph 5.20 will be subject to any provisions of the *RHPA Regulations* respecting the filling of vacancies arising on the Board.

5.20.2 If the position of an Elected Director becomes vacant not more than twelve (12) months before the expiry of the term of office of that Elected Director, the Board may:

- (a) leave the position vacant, if the number of Elected Directors remaining on the Board is nine (9) or more;
- (b) declare the eligible Registrant with the next highest number of votes in the election immediately prior to the vacancy who was not elected to be acclaimed to the vacant position; or
- (c) direct the Registrar to hold a by-election in accordance with this By-Law for an Elected Director who meets the criteria of the Director Profile for the election immediately prior to the vacancy, except if the by-election is held at the same time as an annual election, in which case the Director Profile developed for that annual election will apply.

5.20.3 If the position of an Elected Director becomes vacant more than twelve (12) months before the expiry of the term of office of that Elected Director, the Board shall:

- (a) declare the eligible Registrant with the next highest number of votes in the election immediately prior to the vacancy who was not elected to be acclaimed to the vacant position; or
- (b) direct the Registrar to hold a by-election in accordance with this By-Law for an Elected Director who meets the criteria of the Director

Profile for the election immediately prior to the vacancy, except if the by-election is held at the same time as an annual election, in which case the Director Profile developed for that annual election will apply.

- 5.20.4 The provisions of this By-Law that apply to the conduct of elections apply to the conduct of by-elections, with all necessary modifications.
- 5.20.5 The term of office of an Elected Director acclaimed or elected in a by-election under subparagraph 5.20.2 or 5.20.3 will commence upon acclamation or election and continue until the term of office of the former Elected Director would have expired.

5.21 Supplementary Election Procedures.

- 5.21.1 If the Screening Committee fails to identify a sufficient number of applicants who are qualified as candidates for election by the deadline referred to in subparagraph 5.10.5, or if the number of eligible candidates is less than the number of Elected Directors to be elected, there shall be a supplementary election.
- 5.21.2 The provisions of this By-Law that apply to the conduct of elections shall apply to the conduct of supplementary elections, with all necessary modifications.
- 5.21.3 The term of office of an Elected Director elected in a supplementary election under paragraph 5.21 will commence upon acclamation or election and continue until the end of the term of office that would have been held had an Elected Director been elected to that position on the Board in the applicable August election.

ARTICLE 6 BOARD MEETINGS

6.1 Meetings of the Board.

- 6.1.1 The Board shall hold at least four (4) regular meetings in the one (1)-year period following each annual August election of Elected Directors. The first regular Board meeting shall take place within ninety (90) days following the August election. The dates for the remaining regular Board meetings shall be set no later than the first regular Board meeting following the August election.
- 6.1.2 The Chair may call a special meeting of the Board at any time, provided that notice is given in accordance with the *Pharmacy Act Regulations*, the *Code* and this By-Law to each Director, the Registrants and the public, specifying the purpose of the meeting.
- 6.1.3 The College shall post on its website information regarding upcoming meetings of the Board, including:

- (a) the dates of those meetings;
- (b) matters to be discussed at those meetings; and
- (c) information and documentation that will be provided to Directors for the purpose of those meetings, provided that information and documentation related to any meeting or part of a meeting from which the public is excluded by the Board shall not be posted; and if the Registrar anticipates that the Board will exclude the public from the meeting or part of the meeting, the grounds for doing so.

6.1.4 Subject to subparagraphs 6.1.2 and 6.1.3, notice of any special meeting of the Board shall be sufficient if provided to each Director at his or her specified email address as shown in the records of the College.

6.1.5 The Chair or, in his or her absence or failure to act, the Vice-Chair, shall call a special meeting of the Board upon the written request of two-thirds of the Directors. In the event that the Chair or Vice-Chair are both unable, or fail, to call a meeting of the Board, two-thirds of the Directors may call a meeting upon their written request delivered to the Registrar. Notice of the special meeting shall be given as set out in subparagraphs 6.1.2 to 6.1.4.

6.1.6 Meetings of the Board shall be held at the permanent office of the College, or at such other place or places as the Board may designate.

6.1.7 The quorum for the transaction of business at any meeting of the Board shall be a majority of Directors.

6.1.8 Unless specifically provided for otherwise in the By-Law, any question arising at any meeting of the Board shall be determined by a majority of votes of Directors present at the meeting and eligible to vote. In the event of a tie vote, the Chair shall break the tie with an additional vote.

6.1.9 At the regular meetings of the Board, the business shall include such matters as are set out in an agenda to be approved by the Board.

6.1.10 A Director may place any item that can properly be discussed by the Board on the Board agenda by making a notice of motion. Notices of all motions intended to be introduced shall be given in writing, seconded, and given to the Chair before being considered at a meeting of the Board on a day previous to the discussion or vote unless this requirement is dispensed with by a vote of at least two-thirds of all Directors present at the meeting and eligible to vote.

6.1.11 The Rules of Order set out in Schedule C of this By-Law apply to the conduct of Board meetings.

6.2 Meetings Held By Technological Means.

6.2.1 If two-thirds of all Directors, or of members of a Committee (as the case requires), who are eligible to vote consent thereto generally or in respect of a particular meeting, and each has adequate access, Directors or members of a Committee may participate in a meeting of, respectively, the Board or of a Committee, by means of such conference telephone or other communications facilities as permits all persons participating in the meeting to hear each other, and a Director or member of a Committee participating in such a meeting by such means is deemed to be present at the meeting.

6.2.2 At the outset of each meeting referred to in subparagraph 6.2.1, the Chair shall call roll to establish quorum and whenever votes are required. If the Chair is not satisfied that the meeting may proceed with adequate security and confidentiality, he or she shall adjourn the meeting to a predetermined date, time and place.

ARTICLE 7 REMUNERATION AND EXPENSES

7.1 Remuneration and Expenses.

When they are on official College business, Directors and Committee members, and participants in working groups and task forces, other than Public Directors, will be paid and / or reimbursed for expenses in accordance with a policy made by a resolution of the Board.

ARTICLE 8 COMMITTEES OF THE COLLEGE

8.1 Statutory Committees under the Act.

8.1.1 Pursuant to the Act, the College shall have the following Committees:

- (a) Executive Committee;
- (b) Registration Committee;
- (c) Inquiries, Complaints and Reports Committee;
- (d) Discipline Committee;
- (e) Fitness to Practise Committee;
- (f) Quality Assurance Committee; and
- (g) Patient Relations Committee.

8.1.2 Subject to subparagraph 8.1.3, the composition of the Committees referred to in subparagraphs 8.1.1(a) to 8.1.1(g) shall be as set out in this By-Law and the duties shall be as set out in the Act and the By-Law.

8.1.3 Upon the proclamation of section 5(2) of Schedule 5 (*Regulated Health Professions Act, 1991*) to the *Protecting Patients Act* by the Lieutenant Governor, the provisions of this Article 8 as they relate to the Committees referred to in subparagraphs 8.1.1(a) to 8.1.1(g), shall be subject to the provisions of the *RHPA Regulations*, if any, that relate to such Committees, including, for example, provisions:

- (a) establishing the composition of such Committees;
- (b) establishing the qualifications, screening, appointment and terms of office of members of such Committees who are not Directors; and
- (c) governing the relationship between such provisions and the By-Law.

8.2 Statutory Committee under the Pharmacy Act.

Pursuant to the *Pharmacy Act*, the College shall have an Accreditation Committee, the composition of which is set out in this By-Law and the duties of which are set out in the *Drug and Pharmacies Regulation Act* and this By-Law.

8.3 Standing Committees.

In addition to the Statutory Committees, the College shall establish the following standing Committees, the composition and duties of which are set out in this By-Law:

- 8.3.1 Finance and Audit Committee;
- 8.3.2 Screening Committee;
- 8.3.3 Governance Committee; and
- 8.3.4 Drug Preparation Premises Committee.

8.4 Appointment of Special Committees.

The Board may, from time to time, appoint such special Committees, task forces and working groups as it deems appropriate or necessary for the attainment of the objects of the College and the efficient conduct of its affairs. Every special Committee, task force or working group shall have specified terms of reference and a date upon which it shall dissolve.

8.5 Reporting of Committees.

All Committees shall report at least annually to the Board.

ARTICLE 9

COMPOSITION AND DUTIES OF STATUTORY AND STANDING COMMITTEES

9.1 Article Subject to RHPA Regulations.

Upon the proclamation of section 5(2) of Schedule 5 (*Regulated Health Professions Act, 1991*) to the *Protecting Patients Act* by the Lieutenant Governor, the provisions of this Article 9 as they relate to the Committees referred to in subparagraphs 8.1.1(a) to 8.1.1(g), will be subject to the provisions of the *RHPA Regulations*, if any, that relate to such Committees.

9.2 Composition of the Executive Committee.

The Executive Committee shall be composed of:

- 9.2.1 the Chair and the Vice-Chair, and three (3) additional Directors, one (1) of whom shall be an Elected Director and two (2) of whom shall be Public Directors.

9.3 Chair of the Executive Committee.

The Chair shall be the chair of the Executive Committee.

9.4 Duties of the Executive Committee.

The Executive Committee shall:

- 9.4.1 in accordance with section 12 (1) of the *Code*, exercise all the powers and duties of the Board between Board meetings that, in the Committee's opinion, require attention, other than the power to make, amend or revoke a regulation or By-Law;
- 9.4.2 recommend to the Board proposals for changes to applicable statutes, regulations, By-Laws, College policies and standards of practice;
- 9.4.3 receive findings and recommendations from the Governance Committee pursuant to subparagraph 5.10.7, take such action in respect of the person who is the subject of the findings and recommendations as it deems appropriate, and report its decision to the Board;
- 9.4.4 ensure that the policies of the Board are carried out;
- 9.4.5 report its activities, decisions and recommendations through the Chair at each meeting of the Board; and
- 9.4.6 have the following authorities with respect to staff compensation:
- (a) annually, establish guidelines for the awarding of salary increases to staff;

- (b) at least annually, review compensation for the Registrar; and
- (c) provide broad policy guidance to senior management on matters related to non-salary compensation and benefit programs for College staff.

9.5 Composition of the Registration Committee.

The Registration Committee shall be composed of:

- 9.5.1 two (2) Public Directors;
- 9.5.2 five (5) or more Professional Committee Appointees;
- 9.5.3 at the discretion of the Governance Committee, one (1) or more Lay Committee Appointees;
- 9.5.4 a dean of a faculty or school of a pharmacy program in Ontario that has been accredited by the Canadian Council for Accreditation of Pharmacy Programs, or his or her designate as approved by the Board; and
- 9.5.5 a representative of a pharmacy technician program in Ontario that has been accredited by the Canadian Council for Accreditation of Pharmacy Programs.

9.6 Duties of the Registration Committee.

- 9.6.1 The Registration Committee shall:
 - (a) perform such functions as are assigned to it by statute or regulation; and
 - (b) maintain familiarity with the accreditation standards that the Canadian Council for Accreditation of Pharmacy Programs sets for all pharmacy and pharmacy technician programs that it accredits.
- 9.6.2 The Registration Committee may be required by the Board from time to time in the Board's discretion to:
 - (a) recommend to the Board changes to applicable statutes, regulations, By-Laws, College policies and standards of practice; and
 - (b) provide guidance to the Board on matters concerning registration, examinations and in-service training required prior to registration.

9.7 Composition of the Inquiries, Complaints and Reports Committee.

The Inquiries, Complaints and Reports Committee shall be composed of:

- 9.7.1 all of the Public Directors;

- 9.7.2 ten (10) or more Professional Committee Appointees; and
- 9.7.3 at the discretion of the Governance Committee, one (1) or more Lay Committee Appointees.

9.8 Duties of the Inquiries, Complaints and Reports Committee.

- 9.8.1 The Inquiries, Complaints and Reports Committee shall perform such functions as are assigned to it by statute or regulation.
- 9.8.2 The Inquiries, Complaints and Reports Committee may be required by the Board from time to time in the Board's discretion to:
- (a) recommend to the Board changes to applicable statutes, regulations, By-Laws, College policies and standards of practice; and
 - (b) provide guidance to the Board on matters concerning investigations, complaints and reports.

9.9 Composition of the Discipline Committee.

The Discipline Committee shall be composed of:

- 9.9.1 all of the Elected Directors;
- 9.9.2 all of the Public Directors except those who are on the Accreditation Committee;
- 9.9.3 ten (10) or more Professional Committee Appointees who are not on the Accreditation Committee; and
- 9.9.4 at the discretion of the Governance Committee, one (1) or more Lay Committee Appointees who are not on the Accreditation Committee.

9.10 Duties of the Discipline Committee.

- 9.10.1 The Discipline Committee shall perform such functions as are assigned to it by statute or regulation.
- 9.10.2 The Discipline Committee may be required by the Board from time to time in the Board's discretion to:
- (a) recommend to the Board changes to applicable statutes, regulations, By-Laws, College policies and standards of practice; and
 - (b) provide guidance to the Board on matters concerning discipline.

9.11 Composition of the Fitness to Practise Committee.

The Fitness to Practise Committee shall be composed of:

- 9.11.1 two (2) Public Directors;
- 9.11.2 two (2) or more Professional Committee Appointees; and
- 9.11.3 at the discretion of the Governance Committee, one (1) or more Lay Committee Appointees.

9.12 Duties of the Fitness to Practise Committee.

- 9.12.1 The Fitness to Practise Committee shall perform such functions as are assigned to it by statute or regulation.
- 9.12.2 The Fitness to Practise Committee may be required by the Board from time to time in the Board's discretion to:
 - (a) recommend to the Board changes to applicable statutes, regulations, By-Laws, College policies and standards of practice; and
 - (b) provide guidance to the Board on matters concerning fitness to practise.

9.13 Composition of the Quality Assurance Committee.

The Quality Assurance Committee shall be composed of:

- 9.13.1 two (2) Public Directors;
- 9.13.2 five (5) or more Professional Committee Appointees; and
- 9.13.3 at the discretion of the Governance Committee, one (1) or more Lay Committee Appointees.

9.14 Duties of the Quality Assurance Committee.

- 9.14.1 The Quality Assurance Committee shall:
 - (a) perform such functions as are assigned to it by statute or regulation; and
 - (b) maintain a continuing review of the Quality Assurance Program.
- 9.14.2 The Quality Assurance Committee may be required by the Board from time to time in the Board's discretion to:
 - (a) recommend to the Board changes to applicable statutes, regulations, By-Laws, College policies and standards of practice; and

- (b) provide guidance to the Board on matters concerning quality assurance.

9.15 Composition of the Patient Relations Committee.

The Patient Relations Committee shall be composed of:

- 9.15.1 two (2) or more Professional Committee Appointees; and
- 9.15.2 at the discretion of the Governance Committee, one (1) or more Lay Committee Appointees.

9.16 Duties of the Patient Relations Committee.

- 9.16.1 The Patient Relations Committee shall perform such functions as are assigned to it by statute or regulation.
- 9.16.2 The Patient Relations Committee may be required by the Board from time in the Board's discretion to:
 - (a) recommend to the Board changes to applicable statutes, regulations, By-Laws, College policies and standards of practice; and
 - (b) provide guidance to the Board on matters concerning patient relations.

9.17 Composition of the Accreditation Committee.

The Accreditation Committee shall be composed of:

- 9.17.1 two (2) Public Directors;
- 9.17.2 three (3) or more Professional Committee Appointees; and
- 9.17.3 at the discretion of the Governance Committee, one (1) or more Lay Committee Appointees.

9.18 Duties of the Accreditation Committee.

- 9.18.1 The Accreditation Committee shall perform such functions as are assigned to it by statute or regulation.
- 9.18.2 The Accreditation Committee may be required by the Board from time to time in the Board's discretion to:
 - (a) recommend to the Board changes to applicable statutes, regulations, By-Laws, College policies and standards of practice; and
 - (b) provide guidance to the Board on matters concerning accreditation.

9.19 Composition of the Finance and Audit Committee.

The Finance and Audit Committee shall be composed of:

9.19.1 two (2) or more Elected Directors; and

9.19.2 at the discretion of the Governance Committee, two (2) or more Lay Committee Appointees; and -

9.19.29.19.3 at the discretion of the Governance Committee, one or more Public Directors.

9.20 Duties of the Finance and Audit Committee.

The Finance and Audit Committee shall:

9.20.1 review and recommend to the Board, the annual operating and capital budget for the College;

9.20.2 maintain a rolling two (2) year operating budget;

9.20.3 review quarterly financial statements and report to the Board significant deviations from budget;

9.20.4 meet with the auditor each year,

(a) before the audit to review the timing and extent of the audit and to bring to the attention of the auditor any matter of which it considers the auditor should be made aware; and

(b) as shortly after the completion of the audit as is practical, in order to review and discuss with the auditor the financial statements and the auditor's report;

9.20.5 review and report to the Board on the effectiveness of the external audit function and any matter which the external auditor wishes to bring to the attention of the College;

9.20.6 make recommendations to the Board on the appointment or reappointment of the external auditor;

9.20.7 make recommendations to the Board regarding the management of the College's assets and liabilities and additions or improvements to the real property owned or operated by the College; and

9.20.8 recommend to the Board changes to applicable By-Laws, College policies and standards of practice.

9.21 Composition of the Screening Committee.

The Screening Committee shall be composed of:

- 9.21.1 the chair of the Governance Committee;
- 9.21.2 two (2) additional Directors, one (1) or more of whom shall be a Public Director; and
- 9.21.3 two (2) or more Lay Committee Appointees.

9.22 Duties of the Screening Committee.

The Screening Committee shall:

- 9.22.1 administer the process for screening applicants to be qualified as candidates for the Board in accordance with paragraph 5.10; and
- 9.22.2 review applications and recommend applicants to be appointed as Professional Committee Appointees or Lay Committee Appointees.

9.23 Composition of the Governance Committee.

The Governance Committee shall be composed of:

- 9.23.1 four (4) Directors, including the Vice-Chair (who shall be the chair of the Governance Committee) and one (1) or more of each of the following: a Public Director, a pharmacist Elected Director and a pharmacy technician Elected Director; and
- 9.23.2 at the discretion of the Governance Committee, one (1) or more Lay Committee Appointees.

9.24 Duties of the Governance Committee.

The Governance Committee shall:

- 9.24.1 assess the collective knowledge, skills and experience of the current Board in order to:
 - i) determine the competencies the Board will be seeking in the upcoming election and develop the Director Profile; and
 - ii) consider and implement the succession strategy for the positions of Chair, Vice-Chair and member of the Executive Committee, in order to determine which Directors are qualified for the purpose of paragraph 12.1;
- 9.24.2 recommend a slate of appointees for Committees;
- 9.24.3 oversee the processes for orientation of Directors and members of Committees;

- 9.24.4 oversee the process to evaluate the performance of Committees, the Board as a whole, as well as individual Directors and Committee appointees;
- 9.24.5 identify and recommend opportunities for education, training, coaching and remediation of Directors and Committee members;
- 9.24.6 in the event of a dispute as set out in subparagraph 5.10.7, conduct an investigation and report findings and recommendations to the Executive Committee about whether a Registrant is eligible or qualified as a candidate for election; and
- 9.24.7 review By-Laws and Board policies for conformance with current legislative requirements and good governance best practices.

9.25 Composition of the Drug Preparation Premises Committee.

The Drug Preparation Premises Committee shall be composed of the same members as the Accreditation Committee. The chair of the Accreditation Committee shall be the chair of the Drug Preparation Premises Committee.

9.26 Duties of the Drug Preparation Premises Committee.

The Drug Preparation Premises Committee shall:

- 9.26.1 administer and govern the College's Drug Preparation Premises inspection program in accordance with the *Pharmacy Act Regulations*; and
- 9.26.2 deal with any other matters concerning the inspection of Drug Preparation Premises as directed by the Board.

ARTICLE 10 DUTIES OF OFFICERS

10.1 Duties of the Chair and the Vice-Chair.

- 10.1.1 The Chair shall:
 - (a) preside as chair at all meetings of the Board; and
 - (b) make all necessary rulings as to the order of business, subject to an appeal to the Directors present.
- 10.1.2 The Vice- Chair shall, in the event of the absence or inability of the Chair to act, perform the duties of the Chair.
- 10.1.3 In the event of the absence or inability of both the Chair and the Vice- Chair to act, the Directors present at a meeting of the Board may appoint one (1) of the other Directors to preside at any meeting of the Board.

10.1.4 In the event of the death, or disqualification, or inability to act of a permanent nature of the Chair or the Vice-Chair, the Board shall elect Directors to fill these vacancies according to the provisions of this By-Law for calling a meeting and electing the Chair and the Vice-Chair.

10.1.5 Where the Chair has lost the confidence of the Board, the Board may, on a notice of motion to that effect or at a special meeting of the Board, disqualify the Chair from office by a vote of at least two-thirds of the Directors present and eligible to vote.

ARTICLE 11 COMMITTEE APPOINTEES

11.1 Professional Committee Appointments.

11.1.1 The application form for appointment as a Professional Committee Appointee shall be made available on the College's website.

11.1.2 Subject to subparagraph 8.1.3, a Registrant is eligible for appointment to a Committee as a Professional Committee Appointee if the Registrant has completed and submitted an application form to the Screening Committee and on the date of the appointment:

- (a) the Registrant holds a valid Certificate of Registration as a pharmacist or as a pharmacy technician;
- (b) the Registrant either practises or resides in Ontario;
- (c) the Registrant is not in default of payment of any fees prescribed in this By-Law;
- (d) the Registrant has not been found to have committed an act of professional misconduct or to be incompetent by a panel of the Discipline Committee;
- (e) the Registrant is not the subject of any disciplinary or incapacity proceeding;
- (f) the Registrant is not currently charged with nor has been found guilty of an offence under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada);
- (g) the Registrant has not, in the opinion of the Screening Committee, engaged in conduct unbecoming a Committee member;
- (h) the Registrant's Certificate of Registration has not been revoked or suspended in the six (6) years preceding the date of the appointment;

- (i) the Registrant's Certificate of Registration is not subject to a term, condition or limitation other than one prescribed by regulation;
- (j) the Registrant has not been disqualified from serving on the Board or a Committee within the six (6) years immediately preceding the appointment;
- (k) the Registrant does not have a conflict of interest in respect of the Committee to which he or she seeks to be appointed;
- (l) the Registrant is not the Owner or Designated Manager of a pharmacy that, within the six (6) years immediately preceding the appointment, has undergone a re-inspection, as a result of deficiencies noted in an initial inspection, for a third time or more after the initial inspection; and
- (m) the Registrant is not, and has not within the three (3) years immediately preceding the election been, an employee, officer or director of a Professional Advocacy Association. For greater certainty, nothing in this clause will prevent a Registrant who serves on an association or organization to which he or she has been appointed by the Board as a representative of the College, from becoming a Professional Committee Appointee.

11.2 Lay Committee Appointees

11.2.1 The application form for appointment as a Lay Committee Appointee shall be made available on the College's website.

11.2.2 An individual is eligible for appointment to a Committee as a Lay Committee Appointee if the individual has completed and submitted an application form to the Screening Committee and on the date of the appointment:

- (a) the individual resides in Ontario;
- (b) the individual has not been disqualified from serving on the Board or a Committee within the six (6) years immediately preceding the appointment;
- (c) the individual has never been a Registrant;
- (d) the individual has not been found to have committed an act of professional misconduct or to be incompetent by a panel of an adjudicatory committee of any profession;
- (e) the individual is not the subject of any disciplinary or incapacity proceeding by a panel of an adjudicatory committee of any profession;

- (f) the individual is not currently charged with nor has been found guilty of an offence under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada);
- (g) the individual has no direct or indirect ownership interest in a pharmacy other than holding shares on a publicly traded stock exchange;
- (h) the individual does not have a conflict of interest in respect of the Committee to which he or she seeks to be appointed; and
- (i) the individual is not, and has not within the three (3) years immediately preceding the election been, an employee, officer or director of a Professional Advocacy Association, or any professional advocacy association of any health profession under the Act. For greater certainty, nothing in this clause will prevent an individual who serves on an association or organization to which he or she has been appointed by the Board as a representative of the College, from running becoming a Lay Committee Appointee.

ARTICLE 12

ELECTION OF OFFICERS AND EXECUTIVE COMMITTEE

12.1 Election of the Chair, Vice-Chair and Executive Committee.

12.1.1 At the first regular meeting of the Board after each annual August election, the Governance Committee shall present a report of all eligible Directors who are willing to serve as and have been assessed by the Governance Committee to be qualified for the role of (a) Chair, (b) Vice-Chair, and (c) member of the Executive Committee.

12.1.2 The election of the Chair shall be conducted in the following manner:

- (a) The chair of the Governance Committee shall announce those who are willing to serve as and are qualified to be Chair.
- (b) The chair of the Governance Committee shall call for further interest from the floor, and those additional Directors who are interested in running for Chair shall be added as candidates for election.
- (c) If there is more than one (1) candidate, an election shall be held using electronic voting methods.
- (d) The candidate receiving the overall majority of votes cast will be elected. If there are three (3) or more candidates and no candidate has received an overall majority of votes, the candidate who received the fewest votes will be removed from the ballot and the vote will be repeated until there are two (2) candidates remaining.

The vote will then be repeated until one (1) of the candidates has an overall majority of votes. If three (3) votes result in a tie, the result will be determined by lot by the outgoing Chair.

12.1.3 The procedure outlined in subparagraph 12.1.2 will then be repeated for the office of Vice- Chair.

12.1.4 The Board shall elect the remaining members of the Executive Committee, in accordance with the composition requirements in paragraph 9.2. The election will be conducted in the following manner:

- (a) The chair of the Governance Committee shall announce those who are willing to serve as and are qualified to be on the Executive Committee.
- (b) The chair of the Governance Committee shall call for further interest from the floor, and those additional Directors who are interested in running for open positions on the Executive Committee shall be added as candidates for election.
- (c) Should there be only one (1) candidate who is an Elected Director, such candidate shall be declared appointed.
- (d) Should the number of candidates who are Public Directors match the number of open positions on the Executive Committee for Public Directors in accordance with paragraph 9.2, such candidates shall be declared appointed.
- (e) Should the number of candidates in either category exceed the number of open positions in that category, an election shall be held following the procedure in subparagraph 12.1.2(c). Should there be more than one (1) open position in a category, Directors shall mark their ballots for up to the number of candidates that matches the number of open positions in the category. The candidate who receives the fewest votes will then be removed from the ballot, and the voting will continue until the number of candidates remaining matches the number of open positions in the category, and such candidates shall be declared appointed. Directors may only cast one (1) vote per candidate on each ballot.

ARTICLE 13 APPOINTMENTS TO COMMITTEES

13.1 Appointments to Statutory and Standing Committees.

13.1.1 All Statutory Committee and standing Committee appointments, with the exception of the Executive Committee and the Screening Committee, shall be made by the Board in accordance with this paragraph 13.1 at the first regular

meeting of the Board after each annual August election, and shall be for a term that expires at the first regular meeting of the Board after the following election.

13.1.2 At the first regular meeting of the Board after each annual August election, the Governance Committee shall present to the Board a slate of candidates for all Committees, other than the Executive Committee and the Screening Committee.

13.1.3 For each Committee to be formed at the first regular meeting of the Board after each annual August election except for the Executive Committee, the Board shall pass a resolution approving the slate, subject to any amendments by Board resolution. Once approved, each candidate on the slate shall be deemed to have been appointed to that Committee

13.2 Appointment of Screening Committee.

13.2.1 The Screening Committee for the election to the Board each year shall be appointed by the Board at the Board Meeting held in March in the year of the election. The members of the Screening Committee shall hold office for a term that expires at the first Board meeting following the election.

13.3 Committee Chairs

13.3.1 Following their formation, each Statutory Committee and standing Committee other than the Governance Committee, the Drug Preparation Premises Committee and the Executive Committee, shall select from among its members a chair of the Committee.

ARTICLE 14 COMMITTEE PROCEDURES

14.1 Disqualification, Vacancies and Term Limits of Committee Members.

14.1.1 A member of a Committee who is a Registrant is disqualified from sitting on the Committee if the member:

- (a) is found to have committed an act of professional misconduct or is found to be incompetent by a panel of the Discipline Committee; or
- (b) is found to be an incapacitated Registrant by a panel of the Fitness to Practise Committee.

14.1.2 The Board may disqualify a member of a Committee from sitting on the Committee if the member:

- (a) fails, without cause, to attend the orientation of members of Committees or three (3) consecutive meetings of the Committee or of a subcommittee of which he or she is a member;

- (b) fails, without cause, to attend a scheduled hearing or review conducted by a panel to which he or she was appointed;
- (c) repeatedly fails to make himself or herself available to participate in meetings or panels of a Committee or Committees on which the member sits;
- (d) ceases to either practise or reside in Ontario;
- (e) is in default of payment of any fees prescribed in the By-Laws;
- (f) becomes an employee, officer or director of a Professional Advocacy Association (however, for greater certainty, a member of a Committee will not be disqualified by reason of serving on an association or organization to which he or she has been appointed by the Board as a representative of the College);
- (g) breaches the provisions of the By-Laws, including the Schedules to the By-Laws, or the policies and procedures of the College in force at the relevant time;
- (h) in the case of a Director who sits on a Committee, ceases to be a Director;
- (i) in the case of a Professional Committee Appointee, no longer meets the eligibility requirements specified in subparagraph 11.1.2; or
- (j) in the case of a Lay Committee Appointee, no longer meets the eligibility requirements specified in subparagraph 11.2.2.

14.1.3 A person who is disqualified under subparagraph 14.1.1 or 14.1.2 from sitting on a Committee is thereby removed from the Committee and ceases to be a member of the Committee and, subject to subparagraph 14.1.5, the Chair shall appoint a successor as soon after the disqualification as is feasible.

14.1.4 The term of office of a person who is appointed as a successor to a Committee member under subparagraph 14.1.3 will commence upon the appointment and continue until the term of office of the member of the Committee who is being replaced would have expired.

14.1.5 A vacancy in the membership or chair of a Committee shall be filled by appointment made by the Chair. In the case of a vacancy in the membership of a Committee, the Chair shall consult with the chair of the Committee before making the appointment.

14.1.6 Nothing in paragraph 14.1 prevents the Board, or the Executive Committee acting on its behalf, from adding members to or substituting members on a Committee at any time where one (1) or more members of the Committee cannot fulfill their role.

14.2 Quorum.

Unless specifically provided for otherwise under the Act, the *RHPA Regulations*, the *Code*, the *Pharmacy Act*, the *Drug and Pharmacies Regulation Act*, or the regulations made under any of those Acts, a majority of the members of a Committee constitutes a quorum for a meeting of a Committee.

14.3 Voting.

Unless specifically provided for otherwise under the Act, the *Code*, the *Pharmacy Act*, the *Drug and Pharmacies Regulation Act*, the regulations made under any of those Acts, or this By- Law, any question arising at any meeting of a Committee shall be determined by a majority of votes of members of the Committee present at the meeting and eligible to vote.

14.4 Committee Vacancies.

Where this By-Law requires a Committee to have a minimum number of persons by using the phrase “or more” or words of a similar meaning, a vacancy which reduces the number of members of the Committee below the minimum number will not affect the validity of any action or decision taken by the Committee or any panel of the Committee.

ARTICLE 15 BUSINESS OF THE COLLEGE

15.1 Seal.

The seal shall be the seal of the College.

15.2 Execution of Documents.

15.2.1 Deeds, mortgages, conveyances, powers of attorney, transfers and assignments of property of all kinds including without limitation transfers and assignment of shares, warrants, bonds, debentures or other securities (collectively the “instruments”) may be signed on behalf of the College by the Chair or Vice-Chair and any one (1) of the Registrar, the Deputy Registrar, and the persons holding the positions of director of conduct, director of corporate services, or director of quality, or their equivalent, provided that such instruments have been signed in accordance with any policy of the College regarding the execution of instruments then in effect, and further provided that no individual shall execute, acknowledge, or verify any instrument in more than one capacity. All instruments so signed shall be binding upon the College without any further authorization or formality. In addition, the Board may from time to time direct by resolution the manner in which, and the person or persons by whom, any particular instrument or class of instruments may or shall be signed. Any signing officer may affix the corporate seal thereto.

15.2.2 Certificates of Registration shall be signed by the Chair and the Registrar.

15.2.3 Contracts may be signed on behalf of the College in accordance with any policy of the Finance and Audit Committee regarding the execution of such contracts.

15.2.4 The signature of any individual, authorized to sign on behalf of the College may be written, printed, stamped, engraved, lithographed or otherwise mechanically reproduced or may be an electronic signature. Anything so signed shall be as valid as if it had been signed manually, even if that individual has ceased to hold office when anything so signed is issued or delivered, until the individual's authorization to sign on behalf of the College is revoked by resolution of the Board.

15.3 Banking and Finance.

15.3.1 The banking business of the College shall be transacted with such chartered banks, trust companies or other financial institutions as may, from time to time, be designated by or under the authority of the Board on recommendation of the Finance and Audit Committee. All such banking business, or any part thereof, shall be transacted on the College's behalf by one (1) or more officers and/or other persons as the Board may designate, direct, or authorize, from time to time, by resolution and to the extent therein provided.

15.3.2 Cheques drawn on the bank, trust or other similar accounts of the College, drafts drawn or accepted by the College, promissory notes given by it, acceptances, bills of exchange, orders for the payment of money and other instruments of a like nature, may be made, signed, drawn, accepted or endorsed, as the case may be, by any two (2) of the Registrar, the Deputy Registrar and the persons holding the positions of director of conduct, director of corporate services, and director of quality, or their equivalent, provided however that no individual shall execute, acknowledge, or verify any instrument in more than one (1) capacity.

15.4 Financial Year and Audit.

15.4.1 The financial year of the College is the calendar year ending December 31.

15.4.2 The Board shall appoint a chartered accountant or a firm of chartered accountants to audit the books and prepare a financial statement for each fiscal year, such appointment to be made at a Board meeting in the year for which the books are to be audited.

15.5 Inspectors.

The Registrar may from time to time, and within budgetary limits, appoint inspectors for the purposes of the *Drug and Pharmacies Regulation Act*, any such appointment to be reported to the Executive Committee and to the Board at the next regular meeting following the appointment. Inspectors so appointed will have such authority and shall perform such

duties as are set out in the *Drug and Pharmacies Regulation Act* and such additional duties as may be prescribed by the Registrar.

15.6 Inspectors for the Purposes of Inspecting Drug Preparation Premises.

The Registrar may appoint inspectors for the purposes of the *Pharmacy Act Regulations*. Inspectors so appointed shall have such authority and shall perform such duties as are set out in the *Pharmacy Act Regulations*.

15.7 Grants.

15.7.1 The Board shall set aside, in the budget each year, such funds as are deemed necessary for the maintenance and operation of the Niagara Apothecary, in keeping with the agreement signed in respect thereof with the Ontario Heritage Trust.

15.7.2 The Board shall set aside in the budget each year such funds as are deemed appropriate for grants for any purpose that may tend to advance scientific knowledge or pharmacy education, or maintain or improve the standards of practice in pharmacy.

15.8 Funds.

15.8.1 The disbursement of funds of the College shall be as authorized in the annual budget approved by the Board for the fiscal year upon the recommendation of the Finance and Audit Committee. Funds not authorized under the budget shall be disbursed only after approval by the Board.

15.8.2 Investments of surplus funds shall be made in accordance with investment policies in effect from time to time approved by the Board on the recommendation of the Finance and Audit Committee. The securities of the College may be deposited for safekeeping and withdrawn, from time to time, with one (1) or more chartered banks, trust companies or other financial institutions in accordance with such investment policies.

15.9 College Membership.

The College may be a member of a national organization of bodies with similar functions.

15.10 Delegation of Powers and Duties.

15.10.1 The Registrar may, by written delegation, delegate any of the Registrar's powers and/or duties to any employee or officer of the College.

15.10.2 The Deputy Registrar is vested with and may exercise all the powers and perform all the duties of:

- (a) the Registrar in the event the Registrar is absent or is unable to act with the exception of those powers or duties, if any, that have been

delegated by the Registrar in accordance with subparagraph 15.10.1;
and

- (b) a delegate of the Registrar in the event that such delegate is absent or unable to act in respect of any powers or duties delegated to him or her by the Registrar in accordance with subparagraph 15.10.1.

ARTICLE 16 THE REGISTER

16.1 Registrant's Name.

A Registrant's name in the Register shall be:

- 16.1.1* the Registrant's name as provided in the documentary evidence used to support the Registrant's initial registration with any other given name commonly used by the Registrant included in parentheses, or such other name as is acceptable to the Registrar; or
- 16.1.2* a name other than as provided in subparagraph 16.1.1 where a written request is made by the Registrant and the Registrar is satisfied that the Registrant has validly changed his or her name and that the use of the name is not for an improper purpose.

16.2 Business Address and Telephone Number.

- 16.2.1* A Registrant's business address and business telephone number in the Register shall be, respectively, the address and telephone number of each location at which the Registrant practises in Ontario or, in the case of a Registrant whose practice consists of providing temporary or relief services and who maintains no permanent place of practice, the address and telephone number of each agency or other person or business for or through which the Registrant provides such services.
- 16.2.2* Where a Registrant does not practise in Ontario, the Registrant's business address and business telephone number in the Register shall be, respectively, the address designated by the Registrant as the Registrant's business address and the telephone number associated with that business address.

16.3 Information Regarding a Result.

When any provision of this Article 16 requires information regarding a "result" to be included in the Register, the term "result" shall have the same meaning as provided to it in the Act. Specifically, "result" when used in reference to:

- 16.3.1* a disciplinary proceeding, means the panel's finding that the Registrant committed an act of professional misconduct or was incompetent, particulars of the grounds for the finding, a synopsis of the decision and the order made, including any reprimand, and where the panel has made no such finding,

includes a notation that no such finding was made and the reason why no such finding was made; and

- 16.3.2 an incapacity proceeding, means the panel's finding that the Registrant is incapacitated and the order made by the panel.

16.4 Publication Ban.

Notwithstanding any other provision herein, no action shall be taken under this Article 16 which violates a publication ban, and nothing in this Article 16 requires or authorizes the violation of a publication ban.

16.5 Disclosure of Information.

Notwithstanding any other provision herein, nothing in this Article 16 shall require or authorize the disclosure of information, including personal health information (as defined by the *Code*) where such disclosure would lead to a violation of the *Code*, including subsections 23(8), 23(9) or 23(11) of the *Code*.

16.6 Information to be kept in Register by the Code - Registrants.

Under subsection 23(2) of the *Code*, but subject to the remaining subsections of section 23 of the *Code*, the following information must be contained in the Register and must be available to the public:

- 16.6.1 Each Registrant's name, business address and business telephone number, and, if applicable, the name of every Health Profession Corporation of which the Registrant is a shareholder.
- 16.6.2 Where a Registrant is deceased, the name of the deceased Registrant and the date upon which the Registrant died, if known.
- 16.6.3 The name, business address and business telephone number of every Health Profession Corporation.
- 16.6.4 The names of the shareholders of each Health Profession Corporation who are Registrants.
- 16.6.5 Each Registrant's class of registration and specialist status (specialist status not applicable to the College).
- 16.6.6 The terms, conditions and limitations that are in effect on each Certificate of Registration.
- 16.6.7 A notation of every caution that a Registrant has received from a panel of the Inquiries, Complaints and Reports Committee under paragraph 3 of subsection 26(1) of the *Code*, and any specified continuing education or remedial programs required by a panel of the Inquiries, Complaints and Reports Committee using its powers under paragraph 4 of subsection 26(1) of the *Code*.

- 16.6.8 A notation of every matter that has been referred by the Inquiries, Complaints and Reports Committee to the Discipline Committee under section 26 of the *Code* and has not been finally resolved, including the date of the referral and the status of the hearing before a panel of the Discipline Committee, until the matter has been resolved.
- 16.6.9 A copy of the specified allegations against a Registrant for every matter that has been referred by the Inquiries, Complaints and Reports Committee to the Discipline Committee under section 26 of the *Code* and that has not been finally resolved.
- 16.6.10 The result, including a synopsis of the decision, of every disciplinary and incapacity proceeding.
- 16.6.11 A notation and synopsis of any acknowledgements and undertakings in relation to matters involving allegations of professional misconduct or incompetence before the Inquiries, Complaints and Reports Committee or the Discipline Committee that a Registrant has entered into with the College and that are in effect.
- 16.6.12 A notation of every finding of professional negligence or malpractice, which may or may not relate to the Registrant's suitability to practise, made against the Registrant, unless the finding is reversed on appeal.
- 16.6.13 A notation of every revocation or suspension of a Certificate of Registration.
- 16.6.14 A notation of every revocation or suspension of a Certificate of Authorization.
- 16.6.15 Information that a panel of the Registration Committee, Discipline Committee or Fitness to Practise Committee specifies shall be included.
- 16.6.16 Where findings of the Discipline Committee are appealed, a notation that they are under appeal, until the appeal is finally disposed of.
- 16.6.17 Where, during or as a result of a proceeding under section 25 of the *Code*, a Registrant has resigned and agreed never to practise again in Ontario, a notation of the resignation and agreement.
- 16.6.18 The outcomes of any inspections undertaken by an inspection program of the College established under subsection 95(1)(h) or (h.1) of the *Code*, including inspections of the nature referred to in subparagraph 16.10.1.
- 16.6.19 Information that is required to be kept in the Register in accordance with the By-Laws.
- 16.6.20 Information that is required to be kept in the Register in accordance with the *RHPA Regulations*.

16.7 Information to be kept in Register by RHPA Regulations - Registrants.

Under the *RHPA Regulations*, specifically, Ontario Regulation 261/18, subject to any exceptions or restrictions contained therein, the following information shall be contained in the Register, if known to the College, and must be available to the public:

- 16.7.1 If there has been a finding of guilt against a Registrant under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada) and if none of the conditions in subparagraph 16.7.6 have been satisfied:
- (a) a brief summary of the finding;
 - (b) a brief summary of the sentence; and
 - (c) if the finding is under appeal, a notation that it is under appeal until the appeal is finally disposed of.
- 16.7.2 With respect to a Registrant, any currently existing conditions of release following a charge for an offence under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada) or subsequent to a finding of guilt and pending appeal or any variations to those conditions.
- 16.7.3 If a Registrant has been charged with an offence under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada) and the charge is outstanding:
- (a) the fact and content of the charge; and
 - (b) the date and place of the charge.
- 16.7.4 If a Registrant has been the subject of a disciplinary finding or a finding of professional misconduct or incompetence by another regulatory or licensing authority in any jurisdiction:
- (a) the fact of the finding;
 - (b) the date of the finding;
 - (c) the jurisdiction in which the finding was made; and
 - (d) the existence and status of any appeal.
- 16.7.5 If a Registrant is currently licensed or registered to practise another profession in Ontario or a profession in another jurisdiction, the fact of that licensure or registration.
- 16.7.6 The conditions referred to in paragraph 16.7.1 are the following:
- (a) the Parole Board of Canada has ordered a record suspension in respect of the conviction;

- (b) a pardon in respect of the conviction has been obtained; and
- (c) the conviction has been overturned on appeal.

16.7.7 Nothing in this paragraph 16.7 shall be interpreted as authorizing the disclosure of identifying information about an individual other than a Registrant.

16.7.8 For the purposes of this paragraph 16.7, “identifying information” means information that identifies an individual or for which it is reasonably foreseeable in the circumstances that it could be utilized, either alone or with other information, to identify an individual.

16.8 Additional Information to be kept in Register - Registrants.

For the purposes of paragraph 20 of subsection 23(2) of the *Code*, and subject to paragraphs 16.13 and 16.14, the following additional information referable to Registrants will be kept in the Register, and is designated as public pursuant to subsection 23(5) of the *Code*:

16.8.1 Any changes to each Registrant’s name which have been made in the Register since the Registrant was first issued a Certificate of Registration.

16.8.2 Each Registrant’s gender and registration number.

16.8.3 The date when each Registrant’s Certificate of Registration was first issued or, if the Registrant was licensed under Part VI of the *Health Disciplines Act*, the date when the Registrant was first issued a licence by the College.

16.8.4 Where a person ceased to be a Registrant as a result of his or her resignation or death, the last calendar year during which the person was a Registrant.

16.8.5 Where a Registrant holds a Certificate of Registration as a pharmacist, intern, pharmacy technician or intern technician (following the date upon which the *Pharmacy Act Regulations* are amended to recognize intern technicians as a class of Certificates of Registration) the name and location of the university or college from which the Registrant received his or her degree in pharmacy or completed his or her pharmacy technician or intern technician program (as the case may be) and the year in which the degree was obtained or the program was completed.

16.8.6 The classes of Certificate of Registration held or previously held by each Registrant, the date on which each was issued and, if applicable, the termination or expiration date of each.

16.8.7 Where a Registrant holds a Certificate of Registration as a:

- (a) pharmacist, a notation as to whether the Registrant is listed in Part A or Part B of the Register; and

- (b) pharmacy technician, following the date upon which the *Pharmacy Act Regulations* are amended to include a two (2)-part register for pharmacy technicians, a notation as to whether the Registrant is listed in Part A or Part B of the Register.

- 16.8.8 Whether the Registrant has completed the necessary injection training requirements approved by the College.
- 16.8.9 Where a Registrant is an officer or director of a Health Profession Corporation which holds a Certificate of Authorization, the name of the Health Profession Corporation and what position or title the Registrant holds with that corporation.
- 16.8.10 Where a Registrant is an officer or director of a corporation which holds a Certificate of Accreditation, the name of the corporation and what position or title, if any, the Registrant holds with that corporation.
- 16.8.11 Where a Registrant is a Designated Manager or Contact Person of a pharmacy, a notation of the name and location of each pharmacy at which the Registrant holds that designation.
- 16.8.12 Where a Registrant is a Narcotic Signer of a pharmacy, a notation of the name and location of each pharmacy at which the Registrant holds that authority.
- 16.8.13 Where applicable, a summary of any restriction on a Registrant's right to practise:
- (a) resulting from an undertaking given by the Registrant to the College or an agreement entered into between the Registrant and the College; or
 - (b) of which the College is aware and which has been imposed by a court or other lawful authority, in which event the summary shall include a description of the restriction, the date on which the restriction was imposed, the jurisdiction in which the restriction was made, and the existence and status of any appeal.
- 16.8.14 Without affecting the requirement of paragraph 16.7, where there has been a charge or finding of guilt against a Registrant of which the College is aware in respect of a federal, provincial and/or state offence in Canada or any other jurisdiction, that the Registrar believes is relevant to the Registrant's suitability to practise:
- (a) a brief summary of the charge or finding, as the case may be;
 - (b) the date of the charge or finding, as the case may be;
 - (c) the jurisdiction in which the charge was brought or finding of guilt was made; and

- (d) in the case of a finding of guilt, the existence and status of any appeal, unless, in the case of a finding of guilt the relevant legal authority has: (i) ordered a record suspension in respect of the conviction; (ii) issued a pardon in respect of the conviction; or (iii) the conviction has been overturned on appeal, in which case the information described in subparagraph 16.8.14 will no longer be required.

- 16.8.15* Without affecting the requirement of subparagraph 16.7.2, a summary of any currently existing conditions, terms, orders, directions or agreements relating to the custody or release of the Registrant in respect of a federal, provincial and/or state offence in Canada or any other jurisdiction of which the College is aware and that the Registrar believes is relevant to the Registrant's suitability to practise.
- 16.8.16* Without affecting the requirement of subparagraph 16.7.5, where the College is aware that a Registrant is currently licensed or registered to practise: (i) the profession in another jurisdiction; or (ii) another profession in Ontario or any other jurisdiction, with respect to such licence or registration:
- (a) the existence of the licence or registration;
 - (b) the name of the granting organization; and
 - (c) the jurisdiction in which it was granted;
- 16.8.17* Where a Registrant's Certificate of Registration is subject to an interim order of the Inquiries, Complaints and Reports Committee, a notation of that fact, the nature of that order and its effective date.
- 16.8.18* Without affecting the requirement of subparagraph 16.6.13, where a Registrant's Certificate of Registration is suspended by the Registrar, the date upon which the suspension or revocation took effect and, for greater certainty, the reason for such suspension.
- 16.8.19* Without affecting the requirement of subparagraph 16.6.6, where a Registrant has any terms, conditions or limitations in effect on his or her Certificate of Registration, the effective date of those terms, conditions and limitations.
- 16.8.20* Where terms, conditions or limitations on a Registrant's Certificate of Registration have been varied or removed, the effective date of the variance or removal of those terms, conditions and limitations.
- 16.8.21* Where a suspension of a Registrant's Certificate of Registration is lifted or otherwise removed, the effective date of the lifting or removal of that suspension.

- 16.8.22 Where a Registrant's Certificate of Registration is reinstated, the effective date of the reinstatement.
- 16.8.23 Where the Registrar confirms whether the College is investigating a Registrant because there is a compelling public interest in disclosing this information pursuant to 36(1)(g) of the Act, the fact that the Registrant is under investigation.
- 16.8.24 Where a complaint has been filed or an investigator has been appointed under 75(1)(a) or 75(1)(b) of the *Code*, and a panel of the Inquiries, Complaints and Reports Committee requires a Registrant to appear before a panel of the Committee to be cautioned:
- (a) a notation of that fact;
 - (b) a summary of the caution;
 - (c) the date of the panel's decision; and
 - (d) if applicable, a notation that the panel's decision is subject to review and therefore is not yet final, which notation shall be removed once the review is finally disposed of.
- 16.8.25 Where a complaint has been filed or an investigator has been appointed under 75(1)(a) or 75(1)(b) of the *Code*, and a panel of the Inquiries, Complaints and Reports Committee takes other action requiring a Registrant to complete a specified continuing education or remediation program:
- (a) a notation of that fact;
 - (b) a summary of the continuing education or remediation program;
 - (c) the date of the panel's decision; and
 - (d) if applicable, a notation that the panel's decision is subject to review and therefore is not yet final, which notation shall be removed once the review is finally disposed of.
- 16.8.26 Where an allegation of a Registrant's professional misconduct or incompetence has been referred to the Discipline Committee, where a Registrant has been referred by the Accreditation Committee to the Discipline Committee under section 140 of the *Drug and Pharmacies Regulation Act*, or where the Registrar has referred an application for reinstatement to the Discipline Committee under section 73 of the *Code* and the matter is outstanding:
- (a) the date of the referral;
 - (b) a brief summary of each specified allegation;

- (c) the notice of hearing;
- (d) the anticipated date of the hearing, if the hearing date has been set or the next scheduled date for the continuation of the hearing if the hearing has commenced;
- (e) if the hearing is awaiting scheduling, a statement of that fact; and
- (f) if the hearing of evidence and arguments is completed and the parties are awaiting a decision of the Discipline Committee, a statement of that fact.

16.8.27 Where the results of a disciplinary proceeding are contained in the Register, the date on which the panel of the Discipline Committee made the finding of professional misconduct or incompetence and the date on which the panel ordered any penalty.

16.8.28 A summary of any reprimand given to a Registrant as part of the order of a panel of the Discipline Committee, unless the results of the proceeding before the Discipline Committee are not otherwise [without reference to the By-Laws] available to the public under the *Code*.

16.8.29 Without affecting the requirement of subparagraph 16.6.15, where the question of a Registrant's capacity has been referred to the Fitness to Practise Committee and is outstanding,

- (a) a notation of that fact; and
- (b) the date of the referral.

16.8.30 Without affecting the requirement of subparagraph 16.7.4, where the College is aware that a finding of professional misconduct or incompetence has been made against a Registrant outside of Ontario in respect of any profession:

- (a) a notation of that fact;
- (b) the date of the finding and the name of the governing body that made the finding;
- (c) a brief summary of the facts on which the finding was based;
- (d) the penalty; and
- (e) where the finding or penalty is under appeal, a notation of that fact, which notation shall be removed once the appeal is finally disposed of.

16.8.31 Where a decision of a panel of the Discipline Committee has been published by the College with the Registrant's or former Registrant's name included after December 31, 1999:

- (a) a notation of that fact; and
- (b) identification of, a link to, or a copy of the specific publication containing that decision.

16.8.32 The language(s) in which the Registrant can provide professional services as reported by the Registrant.

16.8.33 Any other information not otherwise referred to in subparagraph 16.6.20, which the College and the Registrant have agreed shall be available to the public.

16.9 Former Registrants.

16.9.1 The term "Former Registrant" means those individuals whose registration with the College is revoked, suspended or rescinded (in which case, recognizing that such individual is deemed to have never held registration with the College) by the College or is otherwise resigned or terminated.

16.9.2 Where the College is aware of such information, the information described in subparagraphs 16.6.12, 16.7.1 to 16.7.4, 16.8.14 to 16.8.16 and 16.8.30 in respect of Former Registrants shall be kept in the Register and is designated as public pursuant to subsection 23(5) of the *Code*.

16.10 Information to be kept in Register – Drug Preparation Premises.

For the purposes of paragraph 20 of subsection 23(2) of the *Code*, and subject to paragraphs 16.13 and 16.14, the following information referable to Drug Preparation Premises shall be kept in the Register, and is designated as public pursuant to subsection 23(5) of the *Code*:

16.10.1 The purpose (after January 1, 2016), outcome and status of inspections of Drug Preparation Premises (including conditions and reasons for fail results) carried out under the *Pharmacy Act Regulations*, including the relevant date.

16.10.2 A summary of the details of a Change of Control of a Drug Preparation Premises received by the College in accordance with Article 18.

16.10.3 Any other information which the College and a designated Registrant for the Drug Preparation Premises have agreed shall be available to the public.

16.11 Information to be Kept in Register – Health Profession Corporations.

For the purposes of paragraph 20 of subsection 23(2) of the *Code*, and subject to paragraphs 16.13 and 16.14, the following information referable to Health Profession Corporations

shall be kept in the Register, and is designated as public pursuant to subsection 23(5) of the *Code*:

- 16.11.1 The Certificate of Authorization number of the Health Profession Corporation and the date upon which that Certificate was first issued.
- 16.11.2 Where the Certificate of Authorization has been revoked, a notation of that fact, the date when the revocation occurred and a brief summary of the reasons for the revocation.
- 16.11.3 Where the Certificate of Authorization was revised or a new Certificate of Authorization was issued to the Health Profession Corporation, a notation of that fact and the date when that occurred.
- 16.11.4 The name, as set out in the College's Register, of each of the shareholders, officers and directors of the Health Profession Corporation who are Registrants and the title or office, if any, held by each.

For greater certainty, the information required by this paragraph shall not affect the requirement of subparagraph 16.6.3.

16.12 Information to be Kept in Register - Pharmacies.

For the purposes of paragraph 20 of subsection 23(2) of the *Code*, and subject to paragraphs 16.13 and 16.14, the following information referable to pharmacies shall be kept in the Register, and is designated as public pursuant to subsection 23(5) of the *Code*:

- 16.12.1 The pharmacy's name, address, telephone and fax number.
- 16.12.2 The class of Certificate of Accreditation and Accreditation Number of the pharmacy.
- 16.12.3 The date the pharmacy opened.
- 16.12.4 The name of the Designated Manager or Contact Person of the pharmacy, as applicable.
- 16.12.5 The purpose (after January 1, 2016), outcome and status of inspections of the pharmacy, including the relevant date. This subparagraph applies to the most current purpose (after January 1, 2016), outcome and status of any inspection conducted after July 1, 2013 and the purpose (after January 1, 2016), outcome and status of every inspection conducted thereafter.
- 16.12.6 Any terms, conditions and limitations on the Certificate of Accreditation.
- 16.12.7 Where terms, conditions or limitations on the Certificate of Accreditation have been varied or removed, the effective date of their variance or removal.

- 16.12.8 Where the Certificate of Accreditation has been revoked or suspended, or has expired, a notation of that fact, the date when the revocation or suspension or expiry occurred and a brief summary of the reasons for the revocation or suspension.
- 16.12.9 Where a suspension of the Certificate of Accreditation has been lifted or otherwise removed, the effective date of its lifting or removal.
- 16.12.10 Where the Certificate of Accreditation has been amended, a notation of that fact and the date when it occurred.
- 16.12.11 A notation of every referral by the Accreditation Committee to the Discipline Committee under section 140 of the *Drug and Pharmacies Regulation Act* of the person who has been issued the Certificate of Accreditation, a Designated Manager of the pharmacy or, where the person who has been issued the Certificate of Accreditation is a corporation, the directors of the corporation, until the matter has been resolved, including:
- (a) the date of the referral;
 - (b) a brief summary of each specified allegation; and
 - (c) the anticipated date of the hearing, if the hearing date has been set, or the next scheduled date for the continuation of the hearing if the hearing has commenced.
- 16.12.12 The result, including a synopsis of the decision, of every disciplinary proceeding against the person who has been issued the Certificate of Accreditation, a Designated Manager of the pharmacy or, where the person who has been issued the Certificate of Accreditation is a corporation, the directors of the corporation, unless a panel of the Discipline Committee makes no finding with regard to the proceeding.
- 16.12.13 Where findings of the Discipline Committee are appealed, a notation that they are under appeal, until the appeal is finally disposed of.
- 16.12.14 A summary of any reprimand given publicly after November 1, 2006 to a Designated Manager of the pharmacy as part of an order of a panel of the Discipline Committee, unless the results of the proceeding before the Discipline Committee are not otherwise available to the public under the *Drug and Pharmacies Regulation Act* or the *Code*.
- 16.12.15 Where a Certificate of Accreditation is subject to an interim order of the Discipline Committee, a notation of that fact, the nature of the order and its effective date.
- 16.12.16 Where, during or as a result of a proceeding that was commenced pursuant to section 140 of the *Drug and Pharmacies Regulation Act*, a person or

corporation ceases to operate a pharmacy and agrees never to operate a pharmacy again in Ontario, a notation of same.

16.12.17 Where applicable, a summary of any restriction on a pharmacy's ability to operate:

- (a) resulting from an undertaking given to the College or an agreement entered into with the College; or
- (b) of which the College is aware and which has been imposed by a court or other lawful authority, in which event the summary of the restriction shall also include the source of the restriction.

16.12.18 Where an order has been made under section 162 or section 162.1 of the *Drug and Pharmacies Regulation Act* against the person who has been issued the Certificate of Accreditation, a Designated Manager of the pharmacy or, where the person who has been issued the Certificate of Accreditation is a corporation, the directors of the corporation, a notation of that fact including:

- (a) the date the order was made;
- (b) a summary of the order; and
- (c) where the order has been appealed, a notation that it is under appeal, until the appeal is finally disposed of.

16.12.19 Where the Owner or operator of the pharmacy, the person who has been issued the Certificate of Accreditation, a Designated Manager of the pharmacy or, where the person who has been issued the Certificate of Accreditation or the operator of the pharmacy is a corporation, the directors of the corporation, have been found guilty of an offence under section 165 or section 166 of the *Drug and Pharmacies Regulation Act*, a notation of that finding including:

- (a) the date the finding was made;
- (b) a summary of the finding of the court;
- (c) the sentence that the court imposed; and
- (d) where the finding or the sentence has been appealed, a notation that it is under appeal, until the appeal is finally disposed of.

16.12.20 Where a trustee in bankruptcy, liquidator, assignee or personal representative of the person who owns or operates the pharmacy becomes authorized to own or operate the pharmacy pursuant to section 145 of the *Drug and Pharmacies Regulation Act*, a notation of that fact including the date the person commences to be so authorized and the date the person ceases to be so authorized.

- 16.12.21 Where a person has permanently closed the pharmacy, a notation of that fact and the date the pharmacy was closed.
- 16.12.22 Any other information not otherwise referred to in this paragraph, which the College and the person who has been issued the Certificate of Accreditation have agreed shall be available to the public.

16.13 Deletion of Information.

- 16.13.1 Unless otherwise indicated, where the information described in paragraphs 16.6 to 16.12 changes, the College may maintain the previous information on the Register, in addition to the new, changed information, as long as it may be relevant for the public to know in the opinion of the Registrar.
- 16.13.2 Despite paragraphs 16.8 to 16.12, and subject to subparagraphs 16.13.3, 16.13.4 and 16.13.5, the College is not required to maintain and may delete from the Register information about a Registrant, a Drug Preparation Premises, a Health Profession Corporation, or a pharmacy once three (3) years have passed since the revocation, suspension or other termination of the Certificate of Registration, operation of the Drug Preparation Premises, Certificate of Authorization or Certificate of Accreditation as the case may be.
- 16.13.3 Despite subparagraphs 16.13.2 and 16.13.5 and the *Code*, the College shall maintain on the Register all of the information about a Registrant and a pharmacy where the Register contains information about the Registrant, resulting from a direction or order of a Committee or resulting from an offence proceeding.
- 16.13.4 The College is not required to maintain and may delete from the Register any information which would otherwise have been required to be maintained under subparagraphs 16.8.13, 16.8.33, 16.12.17, 16.12.22 and 16.13.3 where the Registrar is satisfied that the information is no longer relevant for the public to know.
- 16.13.5 The College is not required to maintain and may delete from the Register any information which would otherwise have been required to be maintained under subparagraphs 16.8.24 and/or 16.8.25 where, after a review, the Inquiries, Complaints and Reports Committee has been required to remove or vary the appearance for a caution or a specified continuing education or remediation program. Where the original requirement to appear for a caution or to complete a specified continuing education or remediation program has been varied, the Registrar may enter a summary of the process leading up to and the results of the variation.

16.14 Disclosure.

All of the information referred to in paragraphs 16.6 to 16.12 is designated as information that may be withheld from the public for the purposes of subsection 23(6) of the *Code*,

such that the Registrar may refuse to disclose to an individual or post on the College's website any or all of that information if the Registrar has reasonable grounds to believe that disclosure of that information may jeopardize the safety of an individual.

ARTICLE 17

FILING OF INFORMATION BY REGISTRANTS, PHARMACIES AND HEALTH PROFESSION CORPORATIONS

17.1 Filing of Information by Registrants.

17.1.1 The College shall forward to each Registrant who holds a Certificate of Registration as a pharmacist or pharmacy technician each year, and may forward to any Registrant at any time, in a form approved by the Registrar, a request for information that includes, but is not limited to:

- (a) the Registrant's home address and home telephone number, being the address and telephone number of the principal Ontario residence of the Registrant or, if the Registrant does not have a residence in Ontario, the Registrant's principal residence and, where available, the Registrant's e-mail address;
- (b) where a Registrant is engaged in the practice of pharmacy, whether inside or outside of Ontario, the name, address, telephone number and facsimile number of each person or business for or through which the Registrant engages in the practice or, in the case of a Registrant whose practice consists of providing temporary or relief services and who maintains no permanent place of practice, the name, address, telephone number and facsimile number of each agency or other person or business for or through which the Registrant provides such services;
- (c) the Registrant's preferred address, preferred telephone number and where applicable, the Registrant's preferred e-mail address for communications from the College;
- (d) in the case of a Registrant who is required to possess personal professional liability insurance in accordance with Article 3, information respecting the Registrant's personal professional liability insurance;
- (e) information respecting the Registrant's participation in the Quality Assurance Program;
- (f) information required to be contained in the Register pursuant to the *Code* and the By-Laws;
- (g) such other information as may be required to be provided to the College pursuant to the By-Laws, the Act, the *Pharmacy Act*, the

Drug and Pharmacies Regulation Act or the regulations made under any of those Acts;

- (h) information that relates to the professional characteristics and activities of the Registrant that may assist the College in carrying out its objects;
- (i) information for the purpose of compiling statistical information to assist the College in fulfilling its objects; and
- (j) any other information that the College deems may assist it in carrying out its objects.

17.1.2 Each Registrant shall fully and accurately respond to the request for information, and shall submit the information to the College, in the required form, by the deadline set out in the request for information to the Registrant.

17.1.3 Where any information that a Registrant has provided to the College in response to a request under subparagraph 17.1.1 has changed, the Registrant shall notify the College of the change within thirty (30) days of its effective date.

17.1.4 In addition to the requirements in subparagraphs 17.1.2 and 17.1.3, a Registrant shall comply, within the time stipulated by the Registrar, with all requests by the Registrar for the provision of any information that is required to be contained in the Register, or that the Registrant is required to provide to the College, pursuant to the *Code* or the By-Laws.

17.2 Filing of Information by Applicants for a Certificate of Accreditation.

17.2.1 Every applicant for a Certificate of Accreditation shall file the following information with the Registrar at least 30 (thirty) days before the date on which the applicant proposes to commence operation of the pharmacy:

- (a) the full name of the applicant and, where the applicant is a corporation, the full name and residential addresses of the directors and officers of the corporation and the corporation number;
- (b) where the applicant is:
 - (i) a corporation or partnership, the business address of the corporation or partnership; or
 - (ii) an individual, the home address of the individual;
- (c) the name by which the pharmacy will be known to the public;
- (d) the location of the pharmacy;

- (e) the proposed date of the opening of the pharmacy;
- (f) such additional information as the College requires in its application form for issuance of a Certificate of Accreditation, or as the College otherwise requests or requires pursuant to the *Drug and Pharmacies Regulation Act Regulations*; and
- (g) any other information that the College deems may assist it in carrying out its objects.

17.2.2 Every applicant for a Certificate of Accreditation shall provide such additional information as the College requests or requires pursuant to the *Drug and Pharmacies Regulation Act Regulations*.

17.2.3 Every applicant for a Certificate of Accreditation shall, on or before the day the person commences to operate the pharmacy, notify the College of the name of the Designated Manager or Contact Person of the pharmacy, as applicable.

17.2.4 Where any of the information that an applicant has provided to the College under subparagraph 17.2.1, 17.2.2 or 17.2.3 has changed, the applicant or Owner, as applicable, of the pharmacy shall provide notification of the change to the College within thirty (30) days of its effective date.

17.3 Filing of Information by Pharmacies.

17.3.1 In connection with the annual renewal of a Certificate of Accreditation, every Owner of a pharmacy shall provide the following information respecting the pharmacy to the College:

- (a) the full name of the Owner of the pharmacy and, where the Owner is a corporation, the full name and residential addresses of the directors and officers of the corporation and the corporation number;
- (b) where the Owner is:
 - (i) a corporation or partnership, the business address of the corporation or partnership; or
 - (ii) an individual, the home address of the individual;
- (c) the name by which the pharmacy is known to the public;
- (d) the location of the pharmacy;
- (e) such additional information as the College requires in its application form for renewal of a Certificate of Accreditation, or as the College otherwise requests or requires pursuant to the *Drug and Pharmacies Regulation Act Regulations*; and

- (f) any other information that the College deems may assist it in carrying out its objects.

17.3.2 Where any of the information that an Owner of a pharmacy has provided to the College under subparagraph 17.3.1 has changed, the Owner of the pharmacy shall provide notification of the change to the College within thirty (30) days of its effective date.

17.3.3 In addition to the requirements in subparagraphs 17.3.1 and 17.3.2, every Owner of a pharmacy shall comply, within the time stipulated by the Registrar, with all requests by the Registrar for the provision of any information or documentation that the Owner of the pharmacy is required to provide to the College pursuant to the By-Laws, the *Drug and Pharmacies Regulation Act* or the *Drug and Pharmacies Regulation Act Regulations*.

17.4 Filing of Information for Closing Pharmacies.

17.4.1 Subject to subparagraph 17.4.2, every person who permanently closes a pharmacy, shall, within seven (7) days of closing the pharmacy, notify the Registrar of the closing and within thirty (30) days of the closing shall file with the Registrar a signed statement setting out:

- (a) the date of closing;
- (b) the disposition of the drugs in stock in the pharmacy at the time of closing;
- (c) the disposition of the prescription files, drug registers and other records required to be kept under the *Drug and Pharmacies Regulation Act* or the *Drug and Pharmacies Regulation Act Regulations*; and
- (d) the date on which all signs and symbols relating to the practice of pharmacy either within or outside the premises were removed.

17.4.2 Where a person permanently closes a remote dispensing location, the signed statement referred to in subparagraph 17.4.1 need only set out the information in subparagraph 17.4.1(a) and (d).

17.5 Filing of Information by Health Profession Corporations.

17.5.1 The College shall forward to each Health Profession Corporation each year, in a form approved by the Registrar, a request for such information as the Health Profession Corporation is required to provide to the Registrar pursuant to applicable statutes and regulations.

17.5.2 Every Health Profession Corporation shall fully and accurately respond to the request for information and shall submit the information to the College, in the

required form, by the tenth day of March next following the forwarding of the request for information to the Health Profession Corporation.

- 17.5.3* Where any information that a Health Profession Corporation has provided to the College in response to a request under subparagraph 17.5.1 has changed, the Health Profession Corporation shall notify the College of the change within thirty (30) days of its effective date.
- 17.5.4* Despite subparagraph 17.5.3, a Health Profession Corporation shall notify the Registrar within ten (10) days of a change in the shareholders of the corporation.
- 17.5.5* In addition to the requirements in subparagraphs 17.5.2, 17.5.3 and 17.5.4, a Health Profession Corporation shall comply, within the time stipulated by the Registrar, with all requests by the Registrar for the provision of any information or documentation that is required to be contained in the Register, or that the Health Profession Corporation is required to provide to the College, pursuant to applicable statutes or regulations or the By-Laws.

ARTICLE 18 CHANGE OF CONTROL

18.1 Change of Control.

- 18.1.1* In the event that a Registrant engages in or supervises drug preparation activities at or in connection with a Drug Preparation Premises, the Registrant must notify the College in the event that the Registrant becomes aware that a Change of Control has occurred in respect of such Drug Preparation Premises.
- 18.1.2* When used herein, the term “Change of Control” in respect of a Drug Preparation Premises means:
- (a) any transfer of all or substantially all of the assets of the owner of the Drug Preparation Premises;
 - (b) any transfer of all or substantially all of the assets used in the operation of the Drug Preparation Premises;
 - (c) any change in ownership of more than fifty percent (50%) of the shares of the owner of the Drug Preparation Premises;
 - (d) any amalgamation, merger or consolidation of the owner of the Drug Preparation Premises with another entity;
 - (e) any governance reorganization causing a change in fifty percent (50%) or more of the members of the board of directors of the owner of the Drug Preparation Premises; and

- (f) any dissolution, liquidation or winding-up of the owner of the Drug Preparation Premises,

in each case, by way of one (1) or a series of related transactions.

ARTICLE 19 REGISTRANT FEES

19.1 Application and Issuance Fees

- 19.1.1* Every person, other than a person who already holds a Certificate of Registration, who wishes to apply for a Certificate of Registration of any class, shall pay an initial application fee due and payable immediately upon the College opening a registration file for such person.
- 19.1.2* Every applicant for a Certificate of Registration of any class shall pay an application fee, due and payable upon the applicant submitting his or her completed application to the Registrar.
- 19.1.3* Every successful applicant for a Certificate of Registration shall pay an issuance fee which is the applicable annual fee.

19.2 Examination Fee.

An applicant for a Certificate of Registration who wishes to write the examination in pharmaceutical jurisprudence approved by the College shall pay an examination fee.

19.3 Annual Fees.

- 19.3.1* Every person who holds a Certificate of Registration as a pharmacist or pharmacy technician shall pay an annual fee, except that in the year in which the person is first registered as a pharmacist or pharmacy technician, if the Certificate of Registration is issued on or after September 1, the fee will be fifty percent (50%) of the annual fee for that year.
- 19.3.2* The annual fee must be paid on or before March 10, except that in the year in which a person is first registered, if the Certificate of Registration is issued after March 10, the annual fee must be paid on the date the person is registered.
- 19.3.3* No later than thirty (30) days before the annual fee is due, the Registrar shall notify the Registrant of the amount of the fee and the day on which the fee is due.
- 19.3.4* A Registrant who fails to pay an annual fee on or before the day on which the fee is due shall pay a penalty in addition to the annual fee.

19.4 Fee to Lift Suspension or for Reinstatement.

19.4.1 Where a Registrant's Certificate of Registration has been suspended by the Registrar for failing to pay a required fee, the fee that the Registrant shall pay for the lifting of the suspension shall be: (a) the fee the Registrant failed to pay; (b) the annual fee for the year in which the suspension is to be lifted, if the Registrant has not already paid it; and (c) a penalty.

19.4.2 Where a Registrant's Certificate of Registration has been suspended by the Registrar pursuant to the *Pharmacy Act Regulations*, the fee that the Registrant shall pay for the lifting of the suspension shall be: (a) the annual fee for the year in which the suspension is to be lifted, if the Registrant has not already paid it; and (b) a penalty.

19.4.3 A Registrant shall pay a reinstatement fee for the reinstatement of his or her Certificate of Registration.

19.5 Other Fees.

19.5.1 Where a person requests the Registrar to do anything that the Registrar is required or authorized to do, the person shall pay the fee set by the Registrar for doing so.

19.5.2 Where, pursuant to the *Pharmacy Act Regulations*, a Registrant:

(a) has undertaken remediation by order of the Quality Assurance Committee;

(b) undergoes a practice review by an assessor after the remediation, and is found by the Quality Assurance Committee to continue to have a deficiency in his or her knowledge, skills or judgment that requires correction; and

(c) is ordered by the Quality Assurance Committee to undertake a further remediation and a further practice review by an assessor after the further remediation, the Registrant shall pay a fee for each such further practice review by an assessor, and for any additional practice reviews that the Registrant undertakes thereafter.

19.5.3 An applicant required to undertake the Practice Assessment of Competence at Entry (PACE) a third and/or subsequent time shall pay a fee for such assessment(s).

19.5.4 Registrants who engage in, or supervise, drug preparation activities at a Drug Preparation Premises shall, jointly and severally, be required to pay a fee for the inspection of the Drug Preparation Premises pursuant to the *Pharmacy Act Regulations*, including all activities related to the inspection.

ARTICLE 20 PHARMACY TRANSACTION FEES

20.1 Application Fee.

- 20.1.1* Subject to subparagraph 20.1.2, an applicant for a Certificate of Accreditation to establish and operate a pharmacy of the community pharmacy class or hospital pharmacy class shall pay an application fee, due and payable upon the applicant submitting a completed application to the Registrar.
- 20.1.2* Where an applicant who has acquired two (2) or more existing pharmacies of the community pharmacy class or hospital pharmacy class, applies for Certificates of Accreditation to establish and operate the pharmacies, the applicant shall pay an application fee for the first application and for each additional application.

20.2 Issuance Fee.

- 20.2.1* Every successful applicant for a Certificate of Accreditation of the community pharmacy class and the hospital pharmacy class shall pay an issuance fee.
- 20.2.2* Every successful applicant for a Certificate of Accreditation to establish and operate a community pharmacy that permits the operation of remote dispensing locations shall pay an issuance fee. The fee will apply for each remote dispensing location to be operated, except that there will be no additional fee for the issuance of a Certificate of Accreditation that permits the operation of remote dispensing locations if the Certificate of Accreditation is issued to an applicant who has acquired or relocated an existing community pharmacy that permits the operation of remote dispensing locations.
- 20.2.3* An applicant who has acquired or relocated an existing pharmacy shall pay an issuance fee for a Certificate of Accreditation to establish and operate a pharmacy.

20.3 Fee for Amended Certificates - Remote Dispensing Locations.

- 20.3.1* Every person who seeks to amend a Certificate of Accreditation to permit the operation of remote dispensing locations or additional remote dispensing location(s) shall pay an application fee for each remote dispensing location or additional remote dispensing location that is to be operated.
- 20.3.2* Every successful applicant for an amended Certificate of Accreditation to permit the operation of remote dispensing locations or additional remote dispensing location(s) shall pay an issuance fee for each remote dispensing location or additional remote dispensing location that is to be operated.

- 20.3.3 For greater certainty, subparagraphs 20.3.1 and 20.3.2 will only apply with respect to the issuance of a Certificate of Accreditation of the community pharmacy class.

20.4 Renewal Fee.

Every person who holds a Certificate of Accreditation of the community pharmacy class or a Certificate of Accreditation of the hospital pharmacy class shall pay the applicable renewal fee on or before May 10 each year.

20.5 Additional Renewal Fee.

An additional renewal fee will apply, and be due and payable on or before May 10 each year, for the renewal of a Certificate of Accreditation for each pharmacy that, within the twelve (12) months prior to the renewal, has undergone a re-inspection as a result of deficiencies noted in an initial inspection, for a third time or more after the initial inspection. The additional renewal fee will apply for each re-inspection but will not apply where the re-inspection was pursuant to an order of the Discipline Committee.

ARTICLE 21 CERTIFICATE OF AUTHORIZATION FEES

21.1 Application Fee.

An applicant for a Certificate of Authorization for a Health Profession Corporation shall pay an application fee.

21.2 Renewal Fee.

- 21.2.1 Every Health Profession Corporation that holds a Certificate of Authorization shall pay the applicable renewal fee each year.

- 21.2.2 The renewal fee for a Certificate of Authorization must be paid on or before March 10 each year.

- 21.2.3 No later than thirty (30) days before the annual renewal fee is due, the Registrar shall notify the Health Profession Corporation of the amount of the fee and the day on which it is due.

- ~~21.2.4 A Health Profession Corporation that fails to pay a renewal fee on or before the day on which the fee is due shall pay a penalty in addition to the renewal fee.~~

ARTICLE 22 APPLICATION OF FEES

22.1 Application of Fees

- 22.1.1 Unless otherwise indicated, the fees and penalties set out in Article 19, Article 20, Article 21 and Schedule D shall be effective as of the date set out in Schedule D.
- 22.1.2 The fees and penalties prescribed in Article 19, Article 20 and Article 21 are set out in Schedule D. All fees and penalties are subject to applicable taxes, which are payable in addition to the fees and penalties.
- 22.1.3 On January 1 of each year commencing in 2021, each fee prescribed in Article 19, Article 20, and Article 21, and listed in Schedule D, will be increased by the percentage increase, if any, in the consumer price index for goods and services in Canada as published by Statistics Canada or any successor organization.

ARTICLE 23 CODES OF ETHICS AND CONDUCT

23.1 Code of Ethics.

There shall be a Code of Ethics for Registrants, which is Schedule A to this By-Law.

23.2 Code of Conduct.

There shall be a Code of Conduct for Directors and Committee members, which is Schedule B to this By-Law.

ARTICLE 24 MAKING, AMENDING AND REVOKING BY-LAWS

24.1 Requirements.

- 24.1.1 By-Laws may be made, repealed or amended by at least two-thirds of all Directors present at a meeting of the Board and eligible to vote.
- 24.1.2 Amendments may be proposed by not fewer than three (3) Directors or by the Executive Committee.
- 24.1.3 Proposed amendments shall be sent to the Registrar thirty (30) days in advance of the meeting at which the amendments will be voted on by the Directors.
- 24.1.4 The Registrar shall, at least two (2) weeks before the meeting at which the amendments are to be considered, notify all Directors of the proposed amendments

24.2 Repeal of Former By-Laws.

Subject to subparagraph 5.3.1 and subparagraph 5.3.2, the repeal of any By-Law in whole or part shall not in any way affect the validity of any act done or right, privilege, obligation or liability acquired or incurred thereunder or the validity of any contract or agreement

made pursuant to any such By-Law prior to such repeal. All Directors and other persons acting under any By-Law so repealed in whole or in part shall continue to act as if elected or appointed under the provisions of this By-Law.

24.3 Effective Date.

This By-Law shall come into force and effect on the date that it is approved by the Board. Upon this By-Law coming into force and effect, By-Law No. 5 shall hereby be repealed.

24.4 Conflict.

If any By-Law is, at any time, found to be in conflict with the Act or the *Pharmacy Act* or the *Drug and Pharmacies Regulation Act*, it will, to the extent of such conflict, be disregarded in favour of the Act or the *Pharmacy Act* or the *Drug and Pharmacies Regulation Act*, as the case may be, and the Registrar shall, upon discovery of such conflict, prepare, for consideration by the Board, a proposed amendment, alteration or repeal of the offending By-Law which shall have the effect of removing from the By-Law anything inconsistent with any such Act.

PASSED by the Board and sealed with the corporate seal of the College the _____,
_____.

Chair
(Corporate Seal)

Vice-Chair

SCHEDULE A

Ontario College of Pharmacists Code of Ethics

Role and Purpose of the Code of Ethics

One of the objects of the Ontario College of Pharmacists (OCP, the College), as outlined in the *Regulated Health Professions Act, Schedule 2, Health Professions Procedural Code* is to “develop, establish and maintain standards of professional ethics for members” of the profession.

The role and purpose of OCP’s Code of Ethics is to clearly articulate the ethical principles and standards which guide the practice of pharmacists and pharmacy technicians in fulfilling the College’s mandate to serve and protect the public by putting patients first.

Specifically, OCP’s Code of Ethics supports the College in fulfilling its mandate by:

- Clearly articulating the ethical principles and standards by which pharmacists and pharmacy technicians are guided and under which they are accountable
- Serving as a resource for education, self-evaluation and peer review
- Serving as an educational resource for the public outlining the ethical obligations of the profession
- Providing a benchmark for monitoring and addressing the conduct of pharmacists and pharmacy technicians

Who does the Code of Ethics Apply to?

The Code of Ethics applies to all registrants of the College, in accordance with their scope of practice, including registered pharmacists, interns, intern technicians and pharmacy technicians. The Code of Ethics is also relevant to all those who aspire to be registrants of the College.

The Code of Ethics is applicable in all pharmacy practice, education and research environments including non-traditional practice settings which may not involve a healthcare professional/patient relationship.

All registrants are responsible for applying the Code of Ethics requirements in the context of their own specific professional working environments.

Compliance with the Code of Ethics

The Standards listed in OCP’s Code of Ethics are not intended to provide an exhaustive or definitive list of ethical behaviours and attitudes required of registrants. Registrants do not justify unethical behaviour by rationalizing that such behaviour is not expressly prohibited in a Standard of this Code.

- The College holds registrants accountable for adhering to the Code of Ethics and will inquire into allegations of a breach of the Code of Ethics and take appropriate action(s) in relation to the severity of the breach.

The Code of Ethics, Standards of Practice and all relevant legislation, policies and guidelines are companion documents and none of these should be read or applied in isolation of the other(s). It is not unusual for there to be duplication within these documents as requirements may be both ethical and legal.

All registrants of the College are required to affirm their understanding of and commitment to OCP's Code of Ethics by signing the Declaration of Commitment.

Understanding the Professional Role and Commitment of Healthcare Professionals

The most important feature or characteristic that distinguishes a healthcare professional from another type of professional is that: *healthcare professionals are committed, first and foremost, to the direct benefit of their patients and only secondarily to making a profit.* Pharmacists and pharmacy technicians are healthcare professionals.

What does being a healthcare professional require of pharmacists and pharmacy technicians?

In choosing to become a pharmacist or pharmacy technician we acknowledge our understanding and commitment to the professional role, recognizing it is not about us – our own personal or business interests – it is about the patient.

We appreciate that our patients are vulnerable and may often be limited by personal and circumstantial factors which enhance and reinforce this vulnerability and that inherent within the healthcare professional/patient relationship there is an imbalance of power with the healthcare professional holding that power.

Patients trust that as healthcare professionals we will respect and protect their vulnerability and maintain professional boundaries within the healthcare professional/patient relationship as we use our knowledge, skills and abilities to make decisions that enhance their health and well-being.

Where does this obligation come from?

When we become a regulated healthcare professional we implicitly enter into what is commonly referred to as a “*social contract with society*”.

This contract requires that we keep our promise to act in the best interest of our patients and place their well-being first and foremost. It requires that we recognize and remember that we have not simply chosen a profession but also a vocation, committing ourselves to help and benefit those entrusted to our care in a spirit of altruism, goodwill, sincerity and integrity.

In exchange for our promise society agrees to provide our profession with the autonomy to govern ourselves as a self-regulating profession with all the privileges and statuses afforded regulated healthcare professionals.

Ethical Principles that Govern Healthcare Practice

In fulfilling our professional promise to our patients and to society, healthcare professionals are guided by the following ethical principles of healthcare:

Beneficence (to benefit):

The first foundational principle that forms and guides our commitment to serve and protect the best interests of our patients establishes the fact that our primary role and function as healthcare professionals is to benefit our patients. We need to remember that our patients seek our care and services because they believe and trust that we will apply our knowledge, skills and abilities to help make them better.

Non maleficence (do no harm, and prevent harm from occurring):

The second foundational principle that guides our commitment to serve and protect the best interests of our patients addresses the reality that as we strive to benefit our patients we must be diligent in our efforts to do no harm and, whenever possible, prevent harm from occurring.

Respect for Persons/Justice:

The third foundational principle merges the principles of “Respect for Persons” and “Justice” which collectively guide our understanding of how we ought to treat our patients. Respect for persons acknowledges that all persons, as a result of their intrinsic humanity, are worthy of our respect, compassion and consideration. We demonstrate this when we respect our patients’ vulnerability, autonomy and right to be self-governing decision-makers in their own healthcare. The principle of “Justice” requires that we fulfill our ethical obligation to treat all patients fairly and equitably.

Accountability (Fidelity):

The fourth and final foundational principle directly ties us to our professional promise to be responsible fiduciaries of the public trust ensuring that we keep our promise to our patients and society to always and invariably act in their best interests and not our own. It is this principle that holds us accountable, not just for our own actions and behaviours, but for those of our colleagues as well.

Code of Ethics and Standards of Application

The Ontario College of Pharmacists Code of Ethics is founded on the core ethical principles of healthcare: beneficence, non-maleficence, respect for persons/justice and accountability (fidelity). Code requirements are articulated in the form of guiding ethical principles, general statements of application and standards that specify the behaviours and attitudes that are required of all registrants of the College as regulated healthcare professionals.

1. Principle of Beneficence

The ethical principle of “Beneficence” refers to the healthcare professional’s obligation to actively and positively serve and benefit the patient and society.

Application

Pharmacists and pharmacy technicians serve and benefit the patient and society's best interests.

Standards

- 1.1 Registrants ensure that their primary focus at all times is the well-being and best interests of the patient.
- 1.2 Registrants utilize their knowledge, skills and judgment to actively make decisions that provide patient- centred care and optimize health outcomes for patients.
- 1.3 Registrants apply therapeutic judgment in order to assess the appropriateness of current or proposed medication therapy given individual patient circumstances.
- 1.4 Registrants seek information and ask questions of patients or their advocate to ascertain if the current or proposed medication provides the most appropriate therapy for the patient.
- 1.5 Registrants ensure that they consider relevant factors such as; age, mental capacity, lifestyle and living circumstances of the patient and adapt and tailor provision of care accordingly.
- 1.6 Registrants provide patients with the relevant and sufficient information they need in order to make more informed decisions about their healthcare.
- 1.7 Registrants ensure that information provided to patients is current and consistent with the standards of practice of the profession and best available evidence.
- 1.8 Registrants consider and take steps, when possible, to address factors that may be preventing or deterring patients from obtaining the pharmacy care or services required or from achieving the best possible health outcome.
- 1.9 Registrants prioritize care and services and provide adequate time to ensure that complex patients receive the care they need.
- 1.10 Registrants participate in consultation, communication and documentation with colleagues or other healthcare professionals to facilitate quality patient care.
- 1.11 Registrants make every reasonable effort to provide quality cost-effective pharmacy care and services to patients and society.
- 1.12 Registrants participate as appropriate and viable in public education programs that promote health and wellness and disease prevention.
- 1.13 Registrants strive to contribute to the development of the profession by participating in the education and mentoring of pharmacy students and interns, pharmacists and pharmacy technicians.

- 1.14 Registrants, within their roles and expertise, strive to conduct, participate in or promote appropriate research practices that advance pharmacy knowledge and practice.
- 1.15 Registrants ensure that when conducting and/or participating in research initiatives they are scientifically and ethically approved by a research ethics board that meets current ethical research standards.
- 1.16 Registrants strive to facilitate positive change in the healthcare system by actively participating in healthcare policy review and development as it applies to the practice of pharmacy.

2. Principle of Non Maleficence

The ethical principle of “Non Maleficence” refers to the healthcare professional’s obligation to protect their patients and society from harm.

Application

Pharmacists and pharmacy technicians refrain from participating in behaviours that may harm patients or society and whenever possible prevent harm from occurring.

Standards

- 2.1 Registrants refrain from participating in behaviours/attitudes which could potentially result in harm and utilize their professional judgment to make every reasonable and conscientious effort to prevent harm to patients and society.
- 2.2 Registrants practise only within their scope of practice, recognize their limitations and when necessary, refer the patient to a colleague or other healthcare professional whose expertise can best address the patient’s needs.
- 2.3 Registrants disclose medical errors and “near misses” and share information appropriately to manage risk of future occurrences.
- 2.4 Registrants act with honesty and transparency if harm does occur and assume responsibility for disclosing this harm to the patient and initiating steps to mitigate the harm.
- 2.5 Registrants challenge the judgment of their colleagues or other healthcare professionals if they have good reason to believe that their decisions or actions could adversely affect patient care.
- 2.6 Registrants provide the patient with relevant and sufficient information regarding the potential harms identified in terms of risks and the most frequent and serious side effects associated with the medication therapy or pharmacy service.
- 2.7 Registrants ensure that when they are involved in the patient’s transition from one healthcare provider or healthcare facility to another the relevant patient information

is provided to the receiving healthcare provider or healthcare facility to ensure safe and effective transition of care.

- 2.8 Registrants provide only medications and health-related products that are from safe and proven sources, of good quality, and meet the standards required by law.
- 2.9 Registrants respect the patient's right to privacy and confidentiality and take every reasonable precaution to protect patient confidentiality by preventing unauthorized or accidental disclosure of confidential patient information.
- 2.10 Registrants ensure that the healthcare professional/patient relationship is not exploited by the registrant for any personal, physical, emotional, financial, social or sexual gain.
- 2.11 Registrants do not under any circumstances participate in sexual behaviour including, but not limited to:
 - (i) Sexual intercourse or other forms of sexual relations between the registrant and the patient;
 - (ii) Touching of a sexual nature, of the patient by the registrant; or
 - (iii) Behaviour or remarks of a sexual nature, by the registrant towards the patient.
- 2.12 Registrants do not under any circumstances participate in any form of harassment including, but not limited to:
 - (i) Bullying or intimidating;
 - (ii) Offensive jokes or innuendos;
 - (iii) Displaying or circulating offensive images or materials; or
 - (iv) Offensive or intimidating communications (phone calls, emails, text messages, etc.).
- 2.13 Registrants must, in circumstances where they are unwilling to provide a product or service to a patient on the basis of moral or religious grounds, ensure the following:
 - (i) that the registrant does not directly convey their conscientious objection to the patient;
 - (ii) that the registrant participates in a system designed to respect the patient's right to receive products and services requested;

- (iii) that there is an alternative provider available to enable the patient to obtain the requested product or service, which minimizes inconvenience or suffering to the patient.
- 2.14 Registrants may only consider ending the professional/patient relationship when the registrant has met the following conditions:
- (i) In his/her judgement the professional/patient relationship is compromised and/or issues cannot be resolved;
 - (ii) Considers the condition of the patient;
 - (iii) Considers the availability of alternative services; and
 - (iv) Provides the patient with notice and sufficient opportunity to arrange alternate services.
- 2.15 Registrants assume responsibility for making reasonable efforts to ensure continuity of patient care when they are unable or unwilling to provide requested pharmacy services.
- 2.16 Registrants in emergency situations, including pandemics and other public health emergencies where the health of the patient or the public is at risk, have a duty to provide patient care within their professional competence and expertise.
- 2.17 Registrants maintain appropriate human resources to facilitate compliance with Standards of Practice and relevant legislation, policies and guidelines governing the practice of pharmacy and the operation of pharmacies to ensure that professional performance and the health of others in the work place are not compromised.
- 2.18 Registrants raise concerns to the appropriate authority if they reasonably believe human resources, policies, procedures, working conditions or the actions, professional performance or health of others may compromise patient care or public safety.
- 2.19 Registrants assign tasks only to those individuals who are competent and trained to do them.
- 2.20 Registrants ensure that they remain current with respect to professional knowledge and skills and are committed to continuous lifelong learning and professional improvement throughout their professional working life.

3. Principle of Respect for Persons/Justice

The ethical principle of Respect for Persons/Justice refers to the healthcare professional's dual obligations to respect and honour the intrinsic worth and dignity of every patient as a human being and to treat all patients fairly and equitably.

Application

Pharmacists and pharmacy technicians respect their patients as self-governing decision-makers in their healthcare and treat all patients fairly and equitably.

Standards

- 3.1 Registrants recognize and respect the vulnerability of patients.
- 3.2 Registrants respect and value the autonomy and dignity of patients.
- 3.3 Registrants practise patient-centred care and treat patients with sensitivity, caring, consideration and respect.
- 3.4 Registrants listen to patients to seek understanding of their needs, values and desired health goals and respect their right to be an active decision-maker in their healthcare.
- 3.5 Registrants respect the patient's values, customs and beliefs and their right to hold these as self-governing decision-makers.
- 3.6 Registrants respect the patient's right to privacy and do not disclose confidential information without the consent of the patient unless authorized by law or by the need to protect the welfare of the patient or the public.
- 3.7 Registrants seek only that information that is reasonable to make informed decisions about the patient's health and the treatment alternatives that align with the patient's treatment goals, unless otherwise authorized by law.
- 3.8 Registrants respect the patient's right to accept or refuse treatment and/or services offered, without prejudice.
- 3.9 Registrants respect the patient's right to choose a pharmacy and/or pharmacy professional and facilitate the patient's wish to change or transfer pharmacy care and services as requested.
- 3.10 Registrants obtain the patient's consent, implied or expressed, prior to the provision of pharmacy care or services.
- 3.11 Registrants respect the right of a competent minor to provide informed consent and make decisions about their healthcare.
- 3.12 Registrants recognize and respect the right of a legally authorized substitute decision-maker to make decisions on the incompetent patient's behalf.
- 3.13 Registrants recognize the known wishes/intentions of a patient who is not competent where those wishes/intentions, through a personal directive, were expressed before the person became incompetent.
- 3.14 Registrants ensure that their views about a patient's personal life, religious beliefs, and other morally irrelevant factors such as: race, gender, identity, sexual

orientation, age, disability, marital status and any other factor(s), do not prejudice their opinion of the patient and affect the quality of service that they provide to the patient.

- 3.15 Registrants recognize the power imbalance inherent in the healthcare professional/patient relationship and assume responsibility for maintaining appropriate professional boundaries at all times.
- 3.16 Registrants provide fair and equitable access to pharmacy services and deliver consistent quality of care to all patients regardless of socio-economic status, culture, disease state or any other related factor that might unfairly bias patient care.
- 3.17 Registrants advocate for the fair treatment and fair distribution of resources for those in their care.
- 3.18 Registrants make fair decisions about the allocation of resources under their control based on the needs of persons, groups or communities to whom they are providing care and services.

4. Principle of Accountability (Fidelity)

The ethical principle of Accountability (Fidelity) refers to the healthcare professional's fiduciary duty to be a responsible and faithful custodian of the public trust.

Application

Pharmacists and pharmacy technicians maintain the public trust by ensuring that they act in the best interest of their patients and society.

In order to fulfill their fiduciary duty to maintain the public trust:

- A. Registrants practise within their scope of practice, in accordance with their Code of Ethics, Standards of Practice and all relevant legislation, policies and guidelines and only when competent to do so.
- B. Registrants refrain from participating in unethical business practices.
- C. Registrants avoid conflict of interest.

Standards

A. General Responsibilities

- 4.1 Registrants abide by the spirit of this Code which applies to the practice of the profession of pharmacy and the operation of pharmacies.
- 4.2 Registrants conduct themselves with personal and professional integrity at all times and ensure that they demonstrate good character and maintain good standing with the College.

- 4.3 Registrants ensure that they only practise when they are competent, with respect to both relevant knowledge and skill and physical, emotional and mental capacity, to do so.
- 4.4 Registrants assume responsibility for all decisions and actions they undertake in professional practice, including failure to make a decision and take appropriate action when necessary.
- 4.5 Registrants do not perform controlled acts under their scope of practice for an unethical or illegal purpose.
- 4.6 Registrants ensure that all professional documentation is accurately maintained in accordance with practice standards.
- 4.7 Registrants maintain confidentiality in creating, storing, accessing, transferring and disposing of records they maintain and control.
- 4.8 Registrants understand that their trust in the care provided by colleagues and other healthcare professionals must be balanced with critical evaluation.
- 4.9 Registrants must be diligent in identifying and responding to red flag situations that present in practice.
- 4.10 Registrants report professional incompetence or unethical behaviour by colleagues or other healthcare professionals to the appropriate regulatory authority.
- 4.11 Registrants take appropriate steps to prevent and report the misuse or abuse of substances by themselves, patients, colleagues, other healthcare professionals or other pharmacy employees.
- 4.12 Registrants do not practise under conditions which compromise their professional judgment and impede their ability to provide quality patient care and services.
- 4.13 Registrants participate in responsible and ethical communication and ensure that any comments or images communicated are not offensive and do not in any manner discredit the member or the profession.
- 4.14 Registrants ensure that when power imbalances exist in professional working relationships they do not exploit these relationships for personal, physical, emotional, financial, social or sexual gain.
- 4.15 Registrants co-operate in any inspection, assessment, review or audit conducted by the College or any other authorized person or organization and abide by any undertakings or restrictions placed on their practice as result of an investigation.
- 4.16 Registrants recognize that self-regulation of the profession is a privilege and that each pharmacist and pharmacy technician has a professional responsibility to merit this privilege by maintaining public trust and confidence in each registrant individually and the profession as a whole.

B. Participate in Ethical Business Practices

- 4.17 Registrants recognize that their patient's best interests must always override their own interests or the interests of the business which the registrant owns, has a financial interest in or is employed by.
- 4.18 Registrants only provide pharmacy care and services that are of good quality and intended to optimize the patient's health outcomes and do not compromise patient care for corporate or business interests or financial gain.
- 4.19 Registrants shall not provide pharmacy services, care or products where there is no potential benefit to the patient.
- 4.20 Registrants do not influence, persuade or pressure patients to accept pharmacy services in order to retain the patient's business.
- 4.21 Registrants shall not compromise their professional integrity in order to further institutional or business interests and promote financial gain to the detriment of the patient and public interest.
- 4.22 Registrants are honest in dealings with patients, colleagues, other healthcare professionals, the College, other organizations, service suppliers, and public or private payers related to the practice of the profession and to the operation of the pharmacy.
- 4.23 Registrants are transparent in the fees that they charge and ensure that these are communicated to patients in advance of the provision of the service or product provided.
- 4.24 Registrants do not submit charges to patients or to any third party drug payment plan for services that they know or ought to know are false and fraudulent.
- 4.25 Registrants do not participate in any practice that involves falsifying patient health records or registrant practice records.
- 4.26 Registrants must ensure that they do not participate in any form of advertising or promotion that contravenes this Code, Standards of Practice or relevant legislation, policies or guidelines, reflects poorly on the profession or breaches public trust and confidence.

C. Avoid Conflict of interest

Registrants need to proceed with caution and conscientiously exercise professional judgment in dealing with conflict of interest situations which they may encounter in practice but which are not explicitly addressed below.

- 4.27 Registrants avoid situations that are or may reasonably be perceived to construe a conflict of interest.

- 4.28 Registrants avoid dual relationships and other situations which may present a conflict of interest and potentially affect the registrant's ability to be impartial and unbiased in their decision-making.
- 4.29 Registrants declare any personal or professional interests and inform the relevant party(s) if they are involved in a real, perceived or potential conflict of interest and resolve the situation in the best interests of the patient and public safety as soon as possible.
- 4.30 Registrants involved in decision-making must disclose any relationship they are involved in that may influence or appear to others to influence their objectivity.
- 4.31 Registrants enter into relationships with industry which are appropriate and in compliance with this Code and which allow them to maintain their professional integrity and retain public trust and confidence.
- 4.32 Registrants do not provide rewards or incentives that have the potential to adversely influence patient decisions which may result in harm to the patient.
- 4.33 Registrants do not ask for or accept gifts, inducements or referrals that may affect or be perceived to affect their professional judgment.
- 4.34 Registrants ensure that they do not participate in referral programs with other Registrants or with members of other healthcare professions for the expressed purpose of benefiting financially.
- 4.35 Registrants limit their treatment of self and the members of their immediate family to minor conditions and emergency circumstances unless another appropriate healthcare professional is not readily available.

SCHEDULE B

THE “CODE OF CONDUCT” FOR DIRECTORS AND COMMITTEE MEMBERS

Directors and members of Committees shall,

- (a) be familiar and comply with the provisions of the *Regulated Health Professions Act, 1991*, the *Health Professions Procedural Code*, the *Pharmacy Act*, the *Drug and Pharmacies Regulation Act* and their regulations, and the by-laws and policies of the College;
- (b) be prepared to participate in Board meetings and Committee work including reading background materials and briefing documents;
- (c) diligently take part in Committee work and actively serve on Committees as appointed by the Board;
- (d) regularly attend meetings on time and participate constructively in discussions;
- (e) offer opinions and express views on matters before the College, Board and Committee, when appropriate;
- (f) participate in all deliberations in a respectful and courteous manner, recognizing the diverse background, skills and experience of Directors and Committee members;
- (g) uphold the decisions made by a majority of the Board and Committees, regardless of the level of prior individual disagreement;
- (h) place the interests of the College, Board and Committee above other interests;
- (i) avoid and, where that is not possible, declare any appearance of or actual conflicts of interest and remove oneself from discussing or voting on any issue where there is a conflict of interest;
- (j) refrain from including or referencing Director or Committee titles or positions held at the College in any personal or business promotional materials, advertisements and business cards (although referencing one’s titles or positions held at the College in one’s curriculum vitae is acceptable so long as the curriculum vitae is not overtly used in a promotional manner);
- (k) preserve confidentiality of all information before the Board or Committee unless disclosure has been authorized by the Board or is otherwise exempted under the RHPA (e.g., it is already in the public domain);
- (l) refrain from attempting to influence a statutory decision unless one is a member of a panel of the Committee or, where there is no panel, of the Committee dealing with the matter;
- (m) respect the boundaries of staff whose role is not to report to or work for individual Directors or Committee members including not contacting staff members directly, except on matters

where the staff member has been assigned to provide administrative support to that Committee or the Board or where otherwise appropriate; and

- (n) be respectful of others and not engage in behaviour that might reasonably be perceived as verbal, physical or sexual abuse or harassment.

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SCHEDULE C

RULES OF ORDER OF THE BOARD

1. Each agenda topic shall be introduced briefly by the person or Committee representative raising it. Directors may ask questions of clarification, then the person introducing the matter shall make a motion and another Director must second the motion before it can be debated.
2. When any Director wishes to speak, he or she shall so indicate by raising his or her hand and shall address the presiding officer and confine himself or herself to the matter under discussion.
3. Staff persons and consultants with expertise in a matter may be permitted by the presiding officer to answer specific questions about the matter.
4. Observers at a the Board meeting are not allowed to speak to a matter that is under debate.
5. A Director may not speak again on the debate of a matter until every other Director who wishes to speak to it has been given an opportunity to do so. The only exception is that the person introducing the matter or a staff person may answer questions about the matter. Director shall not speak to a matter more than twice without the permission of the presiding officer.
6. No Director may speak longer than five (5) minutes upon any motion except with the permission of the Board.
7. When a motion is under debate, no other motion can be made except to amend it, to postpone it, to put the motion to a vote, to adjourn the debate or the Board meeting or to refer the motion to a Committee.
8. A motion to amend the motion then under debate shall be disposed of first. Only one motion to amend the motion under debate can be made at a time.
9. When it appears to the presiding officer that the debate on a matter has concluded, when the Board has passed a motion to vote on the motion or when the time allocated to the debate on the matter has concluded, the presiding officer shall put the motion to a vote.
10. When a matter is being voted on, no Director shall enter or leave the Board room, and no further debate is permitted.
11. No Director is entitled to vote upon any motion in which he or she has a conflict of interest, and the vote of any Director so interested shall be disallowed.
12. Any motion decided by the Board shall not be re-introduced during the same meeting except by a two-thirds vote of the Director then present and eligible to vote.

13. Whenever the presiding officer is of the opinion that a motion offered to the Board is contrary to these rules or the by-laws, he or she shall rule the motion out of order and give his or her reasons for doing so.
14. The presiding officer shall preserve order and decorum, and shall decide questions of order, subject to an appeal to the Board without debate.
15. The above rules may be relaxed by the presiding officer if it appears that greater informality is beneficial in the particular circumstances, unless the Board requires strict adherence.
16. Directors are not permitted to discuss a matter with observers while it is being debated including during any recess of the debate.
17. Directors and others present in the room shall turn off cell phones or put them on vibrate during Board meetings and, except during a break in the meeting, shall not use a cell phone, blackberry or other electronic device. Laptops and tablets may only be used during Board meetings to review materials related to the matter under debate (e.g., electronic copies of background documents) and to make personal notes of the debate.
18. Directors shall be silent while others are speaking except to bring a permissible motion.
19. In all cases not provided for in these rules or by other rules of the Board, the current edition of “Robert’s Rules of Order” shall be followed so far as they may be applicable.
20. These Rules shall apply, with necessary modifications, to meetings conducted by teleconference or any other electronic means permitted by the by-laws, including audio or video conferencing.

SCHEDULE D
SCHEDULE OF FEES

[\[See attached\]](#)

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SCHEDULE OF FEES

All fees and penalties are subject to Harmonized Sales Tax (HST).

Line	2019 Fees	HST	Total with tax	2020 Fees	HST	Total with tax	
REGISTRANT FEES							
Application and Issuance Fees							
1	Initial Application	375.00	48.75	\$423.75	375.00	48.75	\$423.75
2	Application Fee - Payable upon submission of complete application	94.00	12.20	\$106.20	94.00	12.20	\$106.20
3	Pharmacist A - New Applicant Registration, Mar 10 to Aug 31	675.00	87.75	\$762.75	750.00	97.50	\$847.50
4	Pharmacist A - New Applicant Registration, Sept 1 to Mar 09	337.50	43.90	\$381.40	375.00	48.75	\$423.75
5	Pharmacist B - New Applicant Registration, Mar 10 to Aug 31	337.50	43.90	\$381.40	375.00	48.75	\$423.75
6	Pharmacist B - New Applicant Registration, Sept 1 to Mar 09	169.00	21.95	\$190.95	188.00	24.40	\$212.40
7	Pharmacy Technician - New Applicant Registration, Mar 10 to Aug 31	450.00	58.50	\$508.50	500.00	65.00	\$565.00
8	Pharmacy Technician - New Applicant Registration, Sept 1 to Mar 09	225.00	29.25	\$254.25	250.00	32.50	\$282.50
Examination Fee:							
9	Jurisprudence Exam - Pharmacist and Technician	125.00	16.25	\$141.25	125.00	16.25	\$141.25
Renewal Fees:							
10	Pharmacist - Part A	675.00	87.75	\$762.75	750.00	97.50	\$847.50
11	Pharmacist - Part B	337.50	43.90	\$381.40	375.00	48.75	\$423.75
12	Pharmacy Technician	450.00	58.50	\$508.50	500.00	65.00	\$565.00
Penalty for failure to pay renewal fee by the due date:							
13	within 30 days	125.00	16.25	\$141.25	125.00	16.25	\$141.25
14	31 days or more	188.00	24.40	\$212.40	188.00	24.40	\$212.40
Fee to Lift Suspension or for Reinstatement							
15	Lift Suspension	188.00	24.40	\$212.40	188.00	24.40	\$212.40
16	Reinstatement	313.00	40.70	\$353.70	313.00	40.70	\$353.70
Other Fees:							
17	Each Practice Assessment After Remediation	1,000.00	130.00	\$1,130.00	1,000.00	130.00	\$1,130.00
18	Each Practice Assessment of Competency at Entry (PACE) after the third attempt	1,000.00	130.00	\$1,130.00	1,000.00	130.00	\$1,130.00
19	Drug Preparation Premises (DPP) Inspections	3,125.00	406.25	\$3,531.25	3,125.00	406.25	\$3,531.25
PHARMACY FEES							
Application Fees apply to Community and Hospital Class Pharmacies							
20	Application Fee (includes Opening, Relocating, Acquisition and Amalgamation)	625.00	81.25	\$706.25	625.00	81.25	\$706.25
21	Application fee for Additional Pharmacies when acquiring more than one	63.00	8.20	\$71.20	63.00	8.20	\$71.20
Community Pharmacy:							
22	Pharmacy Opening - Issuance May 10 - Nov 9	938.00	121.90	\$1,059.90	938.00	121.90	\$1,059.90
23	Pharmacy Opening - Issuance Nov 10 - May 9	469.00	61.00	\$530.00	469.00	61.00	\$530.00
24	Pharmacy Acquisition/Relocation - Issuance fee (per application)	313.00	40.70	\$353.70	313.00	40.70	\$353.70
Remote Dispensing Location Associated Fees							
25	New Opening with Remote Dispensing Location(s) - Issuance	938.00	121.90	\$1,059.90	938.00	121.90	\$1,059.90
26	Amended Certificates Remote Dispensing Location(s) - Application	313.00	40.70	\$353.70	313.00	40.70	\$353.70
27	Amended Certificates Remote Dispensing Location(s) - Issuance	938.00	121.90	\$1,059.90	938.00	121.90	\$1,059.90
Community Pharmacy Renewal and Reinspection							
28	Renewal	1,175.00	152.75	\$1,327.75	1,175.00	152.75	\$1,327.75
29	Reinspection	1,250.00	162.50	\$1,412.50	1,250.00	162.50	\$1,412.50
Hospital Pharmacy:							
30	Pharmacy Opening - Issuance May 10 - Nov 9	4,375.00	568.75	\$4,943.75	4,375.00	568.75	\$4,943.75
31	Pharmacy Opening - Issuance Nov 10 - May 9	2,188.00	284.40	\$2,472.40	2,188.00	284.40	\$2,472.40
32	Acquisition/amalgamation/Relocation - Issuance (per application)	1,200.00	156.00	\$1,356.00	1,200.00	156.00	\$1,356.00
Hospital Pharmacy Renewal and Reinspection							
33	Renewal	4,375.00	568.75	\$4,943.75	4,375.00	568.75	\$4,943.75
34	Reinspection	1,250.00	162.50	\$1,412.50	1,250.00	162.50	\$1,412.50
HEALTH PROFESSION CORPORATION							
35	Certification of Authorization Application	1,250.00	162.50	\$1,412.50	1,250.00	162.50	\$1,412.50
36	Certificate of Authorization Renewal	375.00	48.75	\$423.75	375.00	48.75	\$423.75

REMUNERATION AND EXPENSES - By-Law 7.1

1. When they are on official College business, members of Council and Committees, working groups and task forces, other than persons appointed by the Lieutenant Governor in Council, shall be paid the following:

(a) a travel allowance, which shall consist of a rate for distance traveled of 45 cents per kilometer; or air fare, bus or rail fare, plus transportation to and from air, bus or train terminals;

(b) an expense allowance of \$300.00 for each day when out of the community in which the Council member resides;

(c) an expense allowance of \$210.00 in lieu of the daily allowance described in subparagraph 7.1.1(b), whenever arrival is necessary the night prior to a scheduled meeting;

(d) a daily expense allowance of \$165.00 when on College business in the community in which the Council member resides, which amounts include travel allowance.

2. If the Council appoints a Member, other than a Council or Committee member, to represent the College at a meeting or conference, the Member shall be reimbursed for expenses incurred at the rate set out in subparagraph 7.1.1, plus registration fees, if applicable. The Member shall not accept reimbursement for expenses from any other body.

3. An amount in excess of the amounts authorized under subparagraph 7.1.1 may be paid to a Council member or Committee member provided the amount was specifically included in the College budget for the year in which the expenses are incurred, or with the express, prior authorization of the Executive Committee.

Council Resolution Effective:

March 23, 2020 until September 19, 2020



COUNCIL BRIEFING NOTE

MEETING DATE: MARCH 2020

FOR DECISION	X	FOR INFORMATION
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- INITIATED BY:** Executive Committee
- TOPIC:** Review and approve the New Remuneration Policy effective September 20, 2020.
- ISSUE:** To undertake the functions outlined in By-Law No. 6 over the next six months leading to the start of the 2020-2021 council year.

PUBLIC INTEREST RATIONALE: The College's proposed remuneration policy is derived from the Ministry of Health model of both remuneration and expense reimbursement for Public Appointees to the Health Professionals Regulatory Bodies. The policy will reflect the remuneration for Board Members, Professional Committee Appointees (PCAs) and Lay Committee Appointees (LCAs).

BACKGROUND: In order to effectively inform applicants seeking election to the Board and appointment to committees the remuneration and expense policy effective September 2020 must be approved.

ANALYSIS:

Remuneration and Expenses Policy

In September 2019 Council approved that in September 2020 the professional members of the Board and committees as well as lay committee appointees will begin to receive a taxable honorarium for time spent on college work and be reimbursed for expenses incurred. Time will be paid on a full day or half day basis and expenses will be reimbursed in accordance with common practice followed by other health colleges and public appointments. The approved daily honorarium was set at \$260/day (\$130 for <3 hours).

The attached Remuneration and Expense Policy is modeled after the Ministry of Health (MOH) Remuneration Framework and Summary of Allowable Expenses. The policy will be used by individual appointees, the College and the Board to clarify the parameters for payment of per diem honoraria and allowable expenses for reimbursement for appointees performing the business of the College.

The College's policy developed for remuneration and expense reimbursement is attached (Attachment 1). This policy, once approved, will also be used to inform applicants seeking to run for election or appointment to the Board or committees on how they will be compensated for their work with the College.

RECOMMENDATION:

- **That the Board approve the Remuneration and Expense Policy to come into effect on September 20, 2020.**

NEXT STEPS: The College will operationalize the infrastructure to issue the new remuneration structure and applicants for Board and Committees will be informed of the Compensation associated with their election or appointment.



Ontario College
of Pharmacists

Putting patients first since 1871

Remuneration Policy & Summary of Allowable Expenses

*Applicable to Elected Directors of the Board of Directors, Professional, Lay
Committee Appointees and Working Group Members*

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Introduction

Application and Scope

This Remuneration Policy (“Policy”) is intended to apply to

- **Board Directors:** individuals who are elected to the Board of Directors at the Ontario College of Pharmacists; and
- **Committee Appointees:** professional (registrants) and lay (non-registrant) members appointed to committees, working group and task forces by the Board of Directors.

Purpose

This Policy is intended for use by individual Directors and appointees, and the College to clarify the parameters for payment of per diem honoraria for performing the business of the of the College. This Policy also addresses reimbursement for eligible expenses.

Effective Date

This Policy is effective for work conducted beginning **September 19, 2020** and replaces all previous practices relating to reimbursement and may be subject to change pursuant to OCP Board of Director approval. Supplementary policy statements, guidelines or amendments may be issued.

Conditions of Election to the Board and Committee Appointment

Acceptance of election or appointment indicates acceptance of the conditions of remuneration Policy and summary of allowable expenses. Conditions, including those relating to financial compensation, if any, are subject to change pursuant to the resolution of the Board of Directors of the Ontario College of Pharmacists.

All elected and appointed positions to the Board and Committees are part-time. Remuneration paid to part-time positions are made on a per diem basis. The Ontario College of Pharmacists is responsible for paying honoraria and expenses for Board Directors and committee appointees, pursuant to the applicable statutory provisions and the resolution established by the Ontario College of Pharmacists, including the policies set out in this Policy.

College Contacts

Completed and signed honoraria and expense claims, along with any required receipts, should be submitted to the designated College staff person for verification of attendance and submission to accounting. Individuals are required to use the most current version of the electronic claim form, and, where payments are to be made, receive payment by electronic funds transfer.

Any questions regarding the remuneration policy should be directed to the Board Liaison, Sarah MacDougall at (416) 847-8243 or smacdougall@ocpinfo.com.

Remuneration Policy

General

The basis of serving on the College's Board of Directors or Committees, working group or task forces is to uphold the mandate of protecting the public and should be viewed as public service. Therefore, any remuneration that may be paid is not expected to be competitive with the marketplace or the individual's usual occupational compensation.

Basis of Remuneration

In general, such functions or tasks are those which are performed within the context of formal meetings of the Board of Directors or Committees, or a statutory hearing or review conducted by an adjudicative Committee. Where applicable, preparation time and the writing of decisions are included. However, depending on the mandate of the College, such "business" may also include attending conferences or public forums which are directly related to the business of the College and the individual's assigned functions or tasks.

Eligible Payments

Eligible payments to individuals have been established in this Policy in accordance with College by-law No. 6. They include a per diem honorarium and reimbursement of necessary and reasonable expenses actually incurred in conducting the *business* of the College, such as travel costs, accommodation and meals.

Government Taxes

Honoraria paid is taxable under the *Income Tax Act*. Thus, in order to receive remuneration (honoraria and/or expenses); individuals are required to provide their Social Insurance Number to the College by completing a TD1/TD1ON form. Reimbursement for expenses incurred is not generally subject to taxation.

The CRA has determined that, for *tax purposes*, remuneration received is considered income from employment. This means that:

- At the end of the calendar year, you will receive a T4 slip issued by the College.
- Remuneration is provided to the individual only and not to an incorporated company or charity.
- You will be required to provide the College with your social insurance number.
- All members are required to complete a TD1/TD1ON form for the purposes of withholding tax.
- Your services are not considered to be taxable supplies and you should not charge Harmonized Sales Tax (HST) on your services.

Assignment of Honoraria

Honoraria is payable **only** to the individual; it may not be directly "assigned" to a third party, that is, to another individual or a business or corporate entity. However, should an individual wish to do so, they are at liberty to donate any honoraria payable or received to a charitable organization of their choice and receive a tax receipt, as applicable.

Honoraria

Remuneration for part-time Directors and appointees must be on a per diem basis. Per diems are generally based on 7 hours of work. A per diem is the amount that is payable for conducting the formal business of the College (e.g., attending a meeting or hearing). When less than three hours of work is involved, one half of the established per diem rate will be paid. **Only one per diem payment can be made for a calendar day.**

Attendance Honoraria - Board of Directors, Statutory and Standing Committees

Position	Criteria	Per Diem Rate	
Elected Members of Board of Directors or Committee Appointees	Applicable when conducting the business of the College.	1 Day:	\$260
		<3 hours:	\$130

Where a single-day proceeding concludes earlier than its scheduled duration, individuals may be remunerated equal to the scheduled duration.

Honoraria may be claimed for attendance, preparation, decision-writing and/or deliberation time for meetings of the Board of Directors and Committees. Specific conditions apply to remuneration for preparation, decision-writing and deliberation time, which are outlined in subsequent sections. In general, honoraria may be claimed for the activities listed in **Chart 1**.

Chart 1 Claims for Honoraria

Committee	Attendance	Preparation	Decision Writing/Review	Deliberation
Board of Directors	✓	✓		
Inquiries, Complaints and Reports Committee (ICRC)	✓	✓	✓	
Executive Committee	✓	✓		
Fitness to Practice Committee	✓	✓	✓	
Patients Relations Committee	✓	✓		
Quality Assurance Committee	✓	✓		
Registration Committee	✓	✓	✓	
Accreditation Committee	✓	✓		

Discipline Committee Meetings	✓	✓		
Discipline Committee Hearings	✓	✓	✓	✓
Standing Committees	✓	✓		
Ad-Hoc Committees and all other meetings	✓			

Attendance Honoraria Rates Payable – Other Meetings and Activities

Participation in educational seminars, workshops and conferences is remunerated on the basis of the standard rate of **\$260.00 per diem**.

Electronic Meetings

From time to time, for reasons of economy and/or timeliness, Colleges may hold meetings via interactive electronic communication media (e.g., by telephone or videoconference). As long as such electronic meetings represent a duly constituted meeting of Board of Directors or a committee, or representing the College on official College business the attending or participating individual may request payment of attendance honorarium.

The amount payable for "attendance" at electronic meetings is based on the applicable per diem rate for the member and Committee. **No payment, other than the applicable honorarium may be claimed in respect of electronic meetings.** Where any expenses are incurred in respect of electronic meetings (such as personal long-distance telephone, or internet charges), such expenses are the responsibility of and reimbursable by the College upon presentation of the required documentation.

Preparation, Decision-Writing, Deliberation and Cancellation Honoraria

Preparation Time

While being fully prepared to conduct College business is a normal requirement and expectation payment for time is not an entitlement. However, the College recognizes that, in some instances (such as, multi-day meetings or when dealing with highly specialized, technical information), a Board, Committee or panel member may be required to dedicate more time than usual to prepare properly to discharge her or his duty.

In all cases, preparation time is remunerated on the basis of the standard per diem rate (**\$260.00 per diem**).

Individuals may request honoraria for preparation time for meetings of the College's Board of Directors and committees.

For budgetary reasons, honoraria is not available for preparation time for other committees or activities at this time. With the exception of preparation time for the Inquiries, Complaints and Reports Committee meetings and Discipline Committee *Hearings*, individuals may request honoraria for the amount of preparation time actually undertaken, as set out in **Chart 2**.

Chart 2: Preparation Honoraria

Meeting of:	Meeting Duration	Remuneration Rate
Board of Directors and all statutory and standing Committees EXCEPT the Inquiries, Complaints and Reports Committee and Discipline Committee <i>Hearings</i>	For each scheduled half-meeting day (up to 3 hours)	Up to one-half (50%) per diem
	For each scheduled full meeting day (greater than 3 hours)	Up to one (100%) per-diem

Inquiries, Complaints, and Reports Committee (ICRC)

Determination of the amount of preparation time claimable by ICRC members is based on Committee workload data, specifically, the number of matters considered. The committee staff support is required to confirm the number of inquiries, complaints and reports considered at each meeting on your claim. The remuneration rate is outlined in **Chart 3**.

Chart 3: Inquiries, Complaints and Reports Committee – Preparation Honoraria

Inquiries, Complaints and Reports considered per meeting	Remuneration rate
25 or less	Up to 1 per diem
26 to 35	Up to 2 per diems
36 to 50	Up to 3 per diems
Greater than 50	Up to 4 per diems

Discipline Committee Hearings

Preparation is not generally required for Discipline Committee Hearings. The College recognizes, however, that there are specific circumstances when members of a Discipline Committee panel are required to prepare for a hearing (i.e. in advance of motions, review of transcripts prior to a continuation, etc.). Where applicable, preparation for Discipline Committee Hearings may be payable up to a maximum of one per Diem, per matter.

Decision Writing

To facilitate effective decision writing, the College, at its discretion, compensates individuals appointed to adjudicative committees or panels dealing with matters of professional misconduct, proprietary misconduct, incompetence or incapacity for decision writing.

Remuneration for the time required to prepare, review and draft decisions is available only to individuals who are:

- assigned to committees which are statutorily mandated to adjudicate matters (complaints, allegations or charges) relating to the professional misconduct, incompetence or incapacity of College registrants; and
- assigned the responsibility of preparing and drafting the Committee's decision by the Committee chair.

Remuneration is not available for time required to draft or type Committee reports or minutes, regardless of the nature of the committee, or for drafting or editing College newsletters, communiques or other publications.

Decision writing time is compensated at the standard rate (**\$260.00 per diem**). Individuals may request honoraria for decision writing time actually undertaken, as applicable, **up to a maximum of one per diem per matter**. "Per matter" is interpreted as per file and not based on duration.

Deliberation

Compensation for time required to deliberate following completion of a statutory hearing of the Discipline Committee may be claimed only if the panel of the Committee conducting a statutory hearing is required (by the length of the hearing day or need to review complex and lengthy submissions) to schedule additional meeting time on a different day to complete the statutory hearing process. In claiming honoraria for deliberation time, the individual must specify the hearing or hearings involved (such information is public information).

Deliberation time is compensated at the standard rate (\$260.00 per diem). Individuals may request honoraria for deliberation time actually undertaken, **up to a maximum of one per diem per matter**. "Per matter" is interpreted as per file and not based on duration.

Cancellation of Scheduled Hearings and Meetings

In general, payment of honoraria is contingent upon attendance for the purposes of College business. The College recognizes, however, that from time to time, individuals may suffer a loss of income or

the opportunity to earn income, as well as an off-setting per diem, as a result of having made a commitment and arranged one's activities to attend a meeting or hearing which is subsequently cancelled at short notice or adjourned/terminated in process.

While attempting to mitigate such situations, the College reminds individuals that they should not expect to be fully compensated for all loss of income and inconvenience arising from the cancellation of a scheduled meeting. It is expected that upon notification of a cancellation, all reasonable attempts will be made to mitigate against the loss of income and expenses for that period. Individuals are also encouraged to consider waiving the cancellation honoraria where there has been no actual loss of either income or opportunity to earn income.

Where the individual is requested and makes arrangements to attend a meeting of the College a review or hearing of a statutory committee for which an honorarium is normally payable, and such meeting, review or hearing is cancelled by the College, the individual may request payment of honoraria on the basis outlined in **Chart 4**.

In all cases, cancellation payments will be made at the standard member rate (\$260 per diem).

If an individual has received remuneration from some other source (e.g., salaried employment) during the period for which the cancellation honorarium would have been claimed, she/he shall neither request nor receive any payment for cancellation.

Individuals who have made unchangeable travel arrangements and, thereby, have incurred non-refundable travel costs, will be reimbursed for out-of-pocket expenses.

Preparation Time for Cancelled Meetings

In general, if an individual has undertaken and would normally claim for preparation time with respect to a meeting that is cancelled, she or he may request payment for such preparation time with respect to the original scheduled meeting date or with respect to the date of the rescheduled review/hearing, **but not both**, if the meeting is rescheduled for a date within 30 days of the original cancellation date.

In cases where a hearing or review is adjourned to be continued at a later date for the purposes of securing more information and/or reviewing new information or submissions, it may be appropriate to request additional preparation time.

However, such requests must be accompanied by a written explanation.

Chart 4: Cancellation Honoraria

Meeting	Condition of Cancellation	Allowable Claim
Board of Directors Meetings	<ul style="list-style-type: none"> • Notice of meeting published to public; and • Meeting cancelled three (3) or less business days prior to published start date. 	Max of one (1) per diem.

<p>Statutory adjudicative committees except Discipline Committee Hearings</p>	<ul style="list-style-type: none"> • Formal notice of meeting issued by College; and • Meeting cancelled three (3) or less business days prior to scheduled start time. 	<p>Max of one (1) per diem.</p>
<p>Discipline Committee Hearings</p>	<ul style="list-style-type: none"> • Formal notice of Hearing was issued to parties; and • Hearing cancelled/ adjourned three (3) or less business days prior to schedule start time. 	<p>Max of one (1) per diem. Hearing must be identified on the claim.</p>
	<ul style="list-style-type: none"> • Hearing adjourned in-process and no other business can be substituted. 	<p>The per diem that would have been payable for the adjourned day. If multi- day hearing was scheduled, up to one (1) additional per diem.</p>
<p>Other Statutory and Standing Committees, excluding electronic meetings</p>	<ul style="list-style-type: none"> • Formal notice of meeting was issued by the College; and • Meeting is cancelled three (3) or less business days prior to scheduled start time. 	<p>Max of one (1) per diem.</p>
<p>Electronic (such as teleconference) meetings or ad-hoc</p>	<ul style="list-style-type: none"> • Not applicable. 	<p>No claim allowed.</p>

Expenses

Summary of Allowable Expenses

This section is intended for use by Directors, Appointees and staff to clarify expectations for submission and verification of expense claims

Where applicable, the College will reimburse for authorized, necessary and reasonable expenses actually incurred in the course of carrying out College business. Reimbursement is based on the amount actually expended up to any maximum allowed for a specific type of expense under the guidelines provided herein.

The guiding principles for reimbursement include:

- Fiscal responsibility – ensure registrant dollars are used prudently and responsibility with a focus on accountability and transparency;
- Expenses for travel, meals and hospitality support the College's objectives; and
- Plans for travel, meals, accommodation and hospitality are necessary and economical with due regard for health and safety.

Claimants must:

- Complete the most current version of the claim form electronically
- Submit receipts with all claims. Where the receipt is not available, a written explanation must be provided to explain why the receipt is unavailable and a description itemizing and confirming the expenses must be provided;
- Submit the claims promptly after the expense is incurred; claims must be submitted within four (4) months after the meeting/hearing to be eligible for reimbursement;
- Submit claims for expenses before leaving the position within the organization.

Approvers must:

- Provide approval only for expenses that were necessarily incurred in the performance of College business; and
- Provide approval only for claims that include all appropriate documentation.

Transportation

Individuals are required to choose the most efficient, effective and/or economical mode of transportation to and from meetings. While modes of transportation other than the most economical may be used for reasons of personal convenience, reimbursement will be based on the most economical and practical mode of transportation. Time of travel is expected to be arranged within a reasonable timeframe of scheduled College meetings.

When rail or air travel is required for meetings which are regularly scheduled, or scheduled for enough in advance to allow it, individuals are encouraged to pre-book their travel to take advantage of discount or excursion fares.

- **Public Transit:** Local public transportation including hotel/airport shuttles (such as the Union-Pearson Express) is strongly encouraged and should be used wherever possible.

- **Train:** Travel by train is permitted when it is the most practical and economic way to travel. A coach class economy fare is standard.

Only in limited circumstances is business class travel acceptable, any only with prior approval¹, such as:

- The need to work with a team;
- Choosing a travel time that allows you to reduce expenditures on meals or accommodation (e.g. compare an economy (coach) class ticket plus a meal, with the cost of the ticket for VIA1, where the meal is included);
- Accommodation requirements; and/or
- Health and safety considerations.

Where a business class ticket is more economical than the economy fare, a copy of the economy fare to substantiate claim of the fare should be provided.

Where possible, individuals should book or reserve seats in advance to take advantage of lower fares.

Taxis / Ride Sharing Apps (Uber, Lyft)

Prior approval¹ to use a taxi or ride sharing should be obtained whenever possible. These may be justified in cases where:

- Group travel is more economical than the total cost of having individuals travel separately by public transit or shuttle; or
- Taking a car allows you to meet an unusually tight schedule for meetings.

Taxis or ride sharing may not be used to commute to work or home except under exceptional circumstances; for instance:

- Weather; health or safety conditions indicate it is the best, appropriate option; or
- Transport of work related baggage or parcels is required.

The use of airport limousines should be avoided in place of regular city taxis, ride sharing and airport shuttles.

Air Travel

Air travel is permitted if it is the most practical and economical way to travel. Economy (coach) class is the standard option for ticket purchase.

Toronto is served by two major airports: Toronto Pearson (YYZ) and Billy Bishop (YTZ). Individuals are encouraged to ensure that their air travel is purchased at the most economical rate with consideration to transportation changes/distance to the College.

¹ Prior approval should be sought from the staff resource to the Committee or the Chair or the Committee.

Rental Cars

When renting a vehicle, a compact model or its equivalent is required. Any exceptions must be:

- Documented and approved prior to the rental if possible; and
- Guided by the principal that the rental vehicle is the most economical and practical size, taking into the business purpose, number of occupants and safety (including weather) considerations.

Luxury and sports vehicles are prohibited. To avoid higher gasoline charges, refuel your rental car before returning it.

Personal Vehicles

Where a personally-owned vehicle is used, the individual will be reimbursed at the mileage rates established, providing that the radius of the distance between the individual's residence and the meeting site exceeds 40 km (i.e. is greater than 40 km one-way). Lesser distances are considered to be travel undertaken as part of a normal day's work. Individuals who reside in the Greater Toronto Area (GTA) are encouraged to use available public transit to travel to and from the College.

The College assumes no financial responsibility for personal vehicles. The College will, however, pay the kilometric rate if you are using your own vehicle for College business.

If you will be driving more than 200 kilometers in a day, you should consider using a rental vehicle. If you are going to drive your personal vehicle for more than five days within a single calendar month - even if you are not exceeding 200 kilometers in a single day -you should consider lower cost options, such as vehicle rental or audio or video conferencing.

Reimbursement for using your own car is \$0.45/kilometer for the first 25,000 km and \$0.35/km thereafter. (Rates are calculated to include gas, repairs and insurance, as well as wear and tear on the vehicle.) The College reserves the right to review the cost effectiveness of this model of reimbursement.

Parking & Tolls

Reimbursement is provided for necessary and reasonable expenditures on parking, as well as for tolls for bridges, ferries and highways, when driving on College business. Parking expenses will be reimbursed at the most economical available rate (valet parking is not generally permitted). Parking costs incurred as part of a regular commute will not be reimbursed.

Traffic Violations, Insurance & Vehicle Repair

There is no reimbursement for traffic or parking violations. Under no circumstances will individuals be reimbursed for the cost of vehicle repairs incurred as a result of vehicle breakdowns or accidents which occur while travelling on College business. Individuals using personal vehicles for College business are responsible for ensuring that their insurance coverage includes business use of the vehicle. Car insurance expenses are not reimbursable.

Accommodations

Individuals who are required to travel out of town and overnight to attend to College business may be accommodated in a hotel for the duration of the trip. However, hotel accommodation is not generally provided to individuals who reside within a radius of 40 km of the meeting site. Individuals who reside in the Greater Toronto Area (GTA) are encouraged to use available public transit to travel to and from the College without the need for overnight accommodation.

Hotels

Individuals travelling on College business are encouraged to stay at a College recommended hotel where favourable corporate rates have been negotiated. A list of favorable corporate rates is available on the *Board Portal*. When booking please quote the Ontario College of Pharmacists in order to be eligible for these rates. The College's usage will be tracked and the rates will be renegotiated at the end of the year, based on that usage.

Many hotels in Toronto offer preferential rates for frequent travelers and you may wish to investigate these when making your reservations. As well, there are many websites that offer last-minute discounts and you may sometimes get a better rate simply by booking on-line. In all cases, reimbursement will be made for single accommodation in a standard room rate.

Individuals choosing to stay at other Toronto hotels will only be reimbursed for a maximum of \$240 per night.

Chart 5: Maximum Hotel Reimbursement Amounts (taxes included)

Season	Rate
October to April	\$240.00
May to September	\$240.00

Under no circumstances will travel agent fees be paid.

Hotel internet charges (such as WiFi or network charges) are to be incurred only where required to conduct College business.

Airbnb or other Peer-to-Peer Rentals

Use of Airbnb lodging is strictly at the discretion of the Board Directors and Committee members and is at your own risk. The College doesn't assume any responsibility for the individual's decision to use these services.

Accommodation expenses

Under no circumstances will individuals be reimbursed for the cost of entertainment (alcohol, videos or pay movies), or for personal services (dry cleaning, personal grooming items, etc.). Such items should be deducted from hotel bills prior to submission for payment.

Private Homes

Private stays with friends or family are acceptable and encouraged. A cash payment or gift may be provided to the friends or family:

- A maximum of \$30 per night is allowed for accommodation including any meals with friends or family, in lieu of commercial accommodation. Instead of a receipt, you must submit a written explanation describing the purpose of the trip, identifying the host and the number of days you stayed.
- The \$30 value may be given in the form of a small gift (which must be accompanied by a receipt) or by cash or cheque.

Meals

Individuals may be reimbursed for the meal expenses incurred while engaged on College business, providing the individual is away from her/his residence or place of employment; on College business; and the meal (or meals) are not already provided as a part of the business process or transportation. Reimbursement for meals is an expense and not an additional allowance or stipend. Receipts are not required to be submitted/retained for meal claims.

Reimbursement is for restaurant/prepared food only. Reimbursement for groceries must have prior approval and a written rationale must be submitted with the claim.

Reimbursement will not be provided for meals consumed at home or included in the cost of transportation, accommodation, seminars or conferences.

Criteria for reimbursement are as follows:

- Breakfast expenses may be claimed if the individual is required to depart his/her residence 2-hours prior to the start time of the scheduled meeting.
- Lunch may be claimed only if required to attend the College for a full-day. The College will generally provide a catered lunch if you attend the College for a full-day meeting.
- Dinner expenses may be claimed if the formal meeting time extends beyond 4:00 p.m. and when the return trip from a meeting usually exceeds two (2) hours.

Reimbursement for meal expenses incurred is subject to a daily maximum of \$50.00 based on submitted receipts. The chart below can be used as a guide. These rates include taxes and gratuities.

Meals	Guideline
Breakfast	\$10.00
Lunch	\$15.00
Dinner	\$25.00

The rates are not an allowance. They are for individual meals - you must have eaten the meal to be able to submit a claim for reimbursement.

Alcohol cannot be claimed and will not be reimbursed as part of a travel or meal expense. There are no exceptions to this rule.

Other Expenses

Personal phone calls

Wherever possible, individuals are expected to use the least expensive means of communication, such as a personally–owned mobile device with a long-distance plan. If you are away on College business, reimbursement will be made for reasonable, necessary personal calls home for each night away.

Tips/Gratuities

You may be reimbursed for reasonable gratuities for porter, hotel room services, and taxis. Keep a record of gratuities paid.

Examples of reasonable amounts for gratuities include:

- 15% on a restaurant meal
- 10% on a taxi fare
- \$2-\$5 for housekeeping for up to two nights in a hotel, up to \$10 for a longer stay
- \$2-\$5 per bag for a porter.

Claiming Honoraria and Expenses

Timing of Claims

Individuals are asked to submit their claims for honoraria and expenses within five (5) business days of the event (meeting, panel hearing or other). In any case, the claim must be submitted for payment **no later than four (4) months after the meeting/hearing, etc. to be eligible for reimbursement.** The College will not consider claims received after this period for retroactive payment.

All claims relating to the period immediately before the end of the College's fiscal year (**December 31st**) must be submitted within two weeks of that date so that they are eligible for payment out of that fiscal year's allocation.

Claim Forms

Claims for honoraria and expenses must be submitted on the appropriate form (see **Appendix 1**) to the College directly. **Claim forms must be completed electronically** and electronically signed by the individual and must have a copy of receipts (please retain your original receipts for reference if needed). Failure to use the required form and attach required receipts will delay processing.

Please note that the claim form is periodically updated. Current claim forms will be available on the electronic Board Portal, Boardvantage.

Receipts

Reimbursement will be made only for expenses actually incurred. Therefore, it is essential that receipts are submitted along with your claim forms.

Claim Processing

Where the College's accounting staff have all necessary approved claims and receipts, staff will process completed claims. The College provides remuneration payments in accordance with the bi-weekly pay schedule. Reimbursement is made via electronic funds transfer directly to the individual.

Electronic Funds Transfer (EFT)

Payment is made only by Electronic Funds Transfer (Direct Deposit). See Appendix 2 for the EFT application.

Appendix 1: Per Diem Report Claim Form

TBD

Appendix 2: EFT Sign-Up

Payment is made only by Electronic Funds Transfer (EFT, or Direct Deposit). Below is an example of the application that must be submitted in order to have EFT initiated. This form is periodically updated; please contact the College for a copy of the latest version.



COUNCIL BRIEFING NOTE

MEETING DATE: MARCH 2020

FOR DECISION	X	FOR INFORMATION
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INITIATED BY: Executive Committee

TOPIC: Appointment of the Screening Committee and Governance Committee

ISSUE: To undertake the functions outlined in By-Law No. 6 over the next six months leading to the start of the 2020-2021 Board year.

PUBLIC INTEREST RATIONALE: Governance best practice supports competency-based selection and appointment of Board and Committee participants. By ensuring there are robust and transparent governance practices setting out recruitment, distribution, training, evaluation and remediation, including external unbiased individuals well versed in governance principles, provides protection against perceived bias in the screening and appointment process.

BACKGROUND:

In order to begin the process for Board and Committee recruitment the members of the new Screening and Governance Committees must be appointed as set out in By-Law No. 6 below.

Composition of the Screening Committee

The Screening Committee shall be composed of:

- Chair of the Governance Committee;
- Two (2) additional Directors, one or more of whom shall be a Public Director; and
- Two (2) or more Lay Committee Appointees.

Composition of the Governance Committee

The Governance Committee shall be composed of:

- Four (4) Directors, including the Vice-Chair (who shall be the Chair of the Governance Committee) and one (1) or more of each of the following:
 - Public Director;
 - Pharmacist Elected Director;
 - Pharmacy Technician Elected Director;
- At the discretion of the Governance Committee, one (1) or more Lay Committee Appointees.

ANALYSIS:

The proposed composition for the Screening Committee and the Governance Committee and high-level synopsis of the mandate of each committee is listed below for Council's consideration.

1) Screening Committee

a. Proposed Composition:

- Vice-Chair of the Board – Billy Cheung
- One Public Director – Dan Stapleton
- One Elected Director – Nadia Facca

b. Proposed Lay Committee Appointees

David Collie	CPMF Working Group Member, President and CEO, The Electrical Safety Authority, Public Member, NAPRA, ICD Designation
Megan Sloan	Project Coordinator, Planning & Performance at Children's Hospital of Eastern Ontario (CHEO), 2016-2017 Council President, College of Nurses of Ontario

- c. Proposed Process: In order to prevent any possible perception of bias, external governance consultants will be engaged to complete the initial pre-screening of Board applications. They will screen and rank or group applications and provide the list to the Screening Committee for consideration. With the upcoming 2020 election of seven (7) seats, the recruitment will focus on addressing all of the identified skills and competencies.

2) Governance Committee

a. Proposed Composition:

- Vice Chair of the Board – Billy Cheung
- Elected Director (Pharmacist) – James Morrison
- Elected Director (Pharmacy Technician) – Connie Beck
- Public Director – David Breukelman

- b. Proposed Process: The Governance Committee will review and make recommendations on the recruitment material for Board and committee appointee applications, consider necessary amendments to the governance processes, and undertake any other functions required as set out in By-law #6.

RECOMMENDATION:

- That the Board approve the appointments to the Governance and Screening Committees.

NEXT STEPS:

Key Dates	Schedule
April 6, 2020 – May 1, 2020	<ul style="list-style-type: none"> • April 6, 2020: The College will send an email to all eligible voters inviting them to submit an Application if they wish to run for a seat on the Board. • May 1, 2020: Applications will close.
May 2, 2020 – May 15, 2020	<ul style="list-style-type: none"> • College Staff will review applications to confirm eligibility of the candidates. External governance consultants will receive a listing of eligible candidates, assess the applications for competence and prepare a short-list of candidates for consideration by the Screening Committee.
May 15, 2020 – June 30, 2020	<ul style="list-style-type: none"> • The Screening Committee will determine if additional information is required and the manner in which that information can be acquired. Once satisfied, they will

	finalize the list of approved candidates and notify the candidates of the results of the assessment.
July 8, 2020 – August 5, 2020	Voting for the Board of Directors will take place electronically. <ul style="list-style-type: none">• July 8, 2020: Voting will commence.• August 5, 2020: Voting will close at 5:00 p.m.
June – August 2020	<ul style="list-style-type: none">• The recruitment of the LCAs and PCAs will be conducted following the procedures used in previous years with staff screening and ranking the applications for the governance committee's consideration. .• Once the candidates have been approved the Governance Committee will develop a slate of committee appointments for the Board's consideration at the September 2020 Council Meeting.



COUNCIL BRIEFING NOTE MEETING DATE: MARCH 2020

FOR DECISION	FOR INFORMATION	X
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INITIATED BY: Nancy Lum-Wilson, CEO and Registrar

TOPIC: Community Pharmacy Practice Environment Initiative

ISSUE: Shared Accountability in the Delivery of Patient-Centred Healthcare in Community Pharmacy

PUBLIC INTEREST RATIONALE: Pharmacy professionals as well as pharmacy owners and operators have a shared accountability for the delivery of safe care to pharmacy patients. The College has a duty as the regulatory authority, established through legislation and associated objects, to reinforce and uphold these shared accountability expectations and obligations outlined in the laws and regulations relevant to pharmacy as well as the Standards of Practice, Standards of Operation and Code of Ethics.

BACKGROUND:

Over the past few years, the College has conducted a number of engagement activities with registrants including regional meetings, open consultations and informally through direct communication and dialogue related to various key initiatives and programs designed to promote safe, quality pharmacy care. One of the common themes in the feedback received through these engagement activities is the concern amongst registrants regarding their ability to provide safe, quality patient care within an increasingly challenging pharmacy practice environment.

Specific concerns that have been raised include workload and other pressures to meet operational expectations, the impact this has on professional autonomy, and registrants' ability to meet the Standards of Practice. These concerns, which are now being expressed in nearly every consultation exercise and increasingly in registrant responses to public complaints registered with the College, relate mainly to experiences within corporate/chain pharmacies and are often equated with an increased risk of medication errors and lack of time available to adequately provide patient-centered pharmacy care.

Along with this feedback, data anonymously reported by pharmacy professionals through the AIMS Program is providing important insights into various causal factors that may be contributing to errors and near misses. In the first AIMS data snapshot published last September along with the inaugural expert bulletin, staffing, workload and environmental factors are the single most commonly noted contributor, comprising 23.6% of the 4,426 incidents reported by community pharmacies. The availability of this data and the ongoing concerns being expressed by registrants makes it evident that workload and staffing related challenges are top-of-mind for many community pharmacy professionals as a significant challenge that impacts on quality patient care.

The College shares the view that the practice environment must enable and support the provision of safe, quality patient-centred care at all times, and any barriers to achieving that goal must be addressed collaboratively.

CONSIDERATIONS:

Safe patient care is everyone's business, and ensuring the safety and quality in pharmacy at all times is a shared accountability. As the College considers the ongoing roll out and maturity of its medication safety program, the implementation of important quality improvement initiatives and

the evolution of pharmacist scope of practice in the province, it believes very strongly that shared accountability within pharmacy is more important than ever.

While the College is aware of the limitations of its authority over business practices in pharmacy, it is fully committed to acting appropriately and effectively within its legislated mandate and objects through existing regulatory mechanisms designed to protect the public. This includes ensuring that owners/operators of pharmacies, including Designated Managers and those who exert any control over pharmacy operations, understand and are held accountable to their responsibilities and obligations under the Standards of Operation, just as pharmacy professionals are held accountable to the Standards of Practice.

This is a complex issue that is not unique to Ontario. However, it is one that must be better understood and addressed through thoughtful, respectful and meaningful collaboration and engagement with pharmacy professionals, pharmacy owners/operators, system stakeholders and patients.

Additionally, as the role of *provider experience* in quality health care becomes increasingly understood, it is acknowledged that the needs of healthcare professionals must be considered in order to improve system quality and patient outcomes. The College's work with Health Quality Ontario (now a part of Ontario Health) in the development of the Quality Indicators for Pharmacy will lead to the development of indicators specific to *provider experience* within the community pharmacy setting later in 2020.

ACTION TAKEN:

The College is launching a Community Practice Environment Initiative that will involve the active collaboration and participation of pharmacy stakeholders with the initial goal of understanding confirmed and potential barriers to professional autonomy and patient safety in community pharmacy.

The first phase of this initiative is focused on developing a set of essential shared accountability principles. It is expected that these principles will guide the development of specific solutions and strategies that the sector and profession will be able to adopt in order to further strengthen the quality and safety of pharmacy care, and position the profession for ongoing success as pharmacy plays an increasingly important role in the health and wellbeing of Ontarians.

To move this work forward, the College initiated preliminary stakeholder communication in September 2019 and has started the work to formally establish a Community Practice Environment Advisory Group that will comprise corporate community pharmacy owners/operators, association representatives, Designated Managers, staff pharmacists and pharmacy technicians and patients. Draft Terms of Reference have been established and membership recruitment is currently underway.

NEXT STEPS:

- The first meeting of the Advisory Group is expected to be held in early April.
- The College is developing a comprehensive engagement plan that will involve opportunities for the broader registrant and pharmacy community, as well as pharmacy patients, to provide input and feedback throughout this initiative.
- The initiative will be supported by an integrated communication plan. More information can be found on the public website and additional details and updates will be shared as this work moves forward.

COUNCIL BRIEFING NOTE
MEETING DATE: MARCH 2020

FOR DECISION	FOR INFORMATION	X
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INITIATED BY: Laura Weyland, President

TOPIC: President's Report to March 2020 Council

ISSUE: As set out in the Governance Manual, the President is required to submit a report of activities at each Council meeting.

PUBLIC INTEREST RATIONALE: This report is circulated and posted publicly and speaks to the transparency of the Council and its activities.

BACKGROUND: I respectfully submit a report on my activities since the December 2019 Council Meeting. In addition to regular meetings and phone calls with the Registrar and the Vice President, listed below are the meetings, conferences or presentations I attended on behalf of the College during the reporting period.

Attached to my report is a summary of the December Council Meeting Evaluation (Attachment 1), the results of which will assist us in understanding and recognizing what is working well and identifying areas for improvement as we strive to advance the College's mandate to serve and protect the public interest.

College and Other Stakeholder Meetings:

December 9, 2019 – Council Meeting
January 2, 2020 – Patient Relations Committee
February 28, 2020 - Ivey Leadership Summit with Registrar
March 2, 2020 – Finance and Audit Committee Meeting
March 5, 2020 – Executive Committee Meeting
Bi-weekly meetings with Registrar



COUNCIL BRIEFING NOTE
MEETING DATE: DECEMBER 2019

FOR DECISION	FOR INFORMATION	X
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INITIATED BY: Laura Weyland, President

TOPIC: December 2019 Council Meeting Evaluation

ISSUE: As set out in the Governance Manual, after each Council meeting, Council performs an evaluation of the effectiveness of the meeting and provides suggestions for improvement.

BACKGROUND:

At the December 2019 Council meeting, we provided Council members with the opportunity to provide their feedback. 14 Council members responded to the survey. A summary of the input is being provided to Council for information.

1. Governance philosophy Council and staff work collaboratively, each in distinct roles, to carry out self-regulation of the pharmacy profession in the interest of the public and in the context of our mission statement and legislated mandate. How would you evaluate the meeting overall?

Answer Options	Always	Frequently	Often	Occasionally	Never	Response Count
1. In accordance with the governance philosophy, topics were related to the interest of the public and the purpose of OCP	14	0	0	0	0	14
2. Members were well prepared to participate effectively in discussion and decision making	11	3	0	0	0	14
3. In accordance with the governance philosophy, Council worked interdependently with staff	11	2	1	0	0	14
4. There was effective use of time	11	1	2	0	0	14
5. There was an appropriate level of discussion of issues	11	2	0	0	0	13
6. The discussion was focused, clear, concise, and on topic	8	5	1	0	0	14

2. Did the meeting further the public interest?

YES = 14 = 100%

NO = 0 = 0%

3. Identify the issue for which you felt the discussion and decision-making process worked best, and why.

- The discussion of the governance reforms.
- Discussion on minor ailments.
- Good discussion on the expanded scope.
- Motion for prescribing for Lyme disease-good orderly discussion.

- Yesterday's session was more of a review of matters previously decided upon or accomplished but still allowed for clarifications, questioning and suggestions. The process worked best because our President had a good handle of running the process.
- The Lyme disease discussion.
- Good discussion on the topic of governance.
- By-laws discussion.
- The meeting and all the discussions were productive and worked well.
- The discussion of minor ailments was very rich.
- I felt that there was a generally good level of discussion on all topics. Specifically, there was good discussion on the topic of the request for prophylaxis of Lyme disease to be included in the list of Minor Ailments.

4. Identify the issue(s) for which you have felt the discussion and decision-making process was not effective, and why. Note any areas where the distinction between governance and operations was unclear.

- Not sure if the intent was not there in the first place but I spent a lot of time going over the changes in policies both in terms of substance and text but there did not seem an appetite for robust discussion over these. I felt that the by-law changes were very guides. It wasn't really a discussion but more the executive defending decisions they already had made.
- I think that the council should have voted to accept the briefing not on scope of practice. As a self-regulated profession we should take more ownership on our scope of practice.

5. Using the Code of Conduct and Procedures for Council and Committee Members as your guide, in general, how satisfied are you with Council members' ability to demonstrate the principles of accountability, respect, integrity and openness?

Answer Choices	Responses
Completely Satisfied	10
Mostly Satisfied	4
Neither Satisfied Nor Dissatisfied	0
Mostly Dissatisfied	0
Completely Dissatisfied	0
Total Responses	14

6. Suggestions for improvement and General Comments (name of respondent - optional)

- I thought the budget discussion was well handled, with good questions and appropriate responses.
- Just a comment that as Council and soon-to-be Board of Directors, we need to keep reminding ourselves to take our role seriously and go over our materials thoroughly so we can engage meaningfully during our Council sessions.
- I think that the land claim notification was well done. For the patient story we have had only good story to share. I think we should find a way to have more balanced testimonies. Asking patients what they expect from the profession. I think it is a bit self serving.
- Maybe introduce the new members at the beginning..haha, just kidding.
- Well run meeting.
- There are some Council Members who do not speak at the meetings. It may be beneficial to actively seek their input on occasion.

Respectfully submitted,
Laura Weyland, President



COUNCIL BRIEFING NOTE
MEETING DATE: MARCH 2020

FOR DECISION

FOR INFORMATION

X

INITIATED BY: Nancy Lum-Wilson, CEO and Registrar

TOPIC: Registrar's Report to March 2020 Council

ISSUE: As set out in the Governance Manual, Council holds the Registrar accountable for the operational performance of the organization. The Registrar is expected to report on these activities at every Council meeting.

BACKGROUND:

I respectfully submit a report on the activities that have taken place since the December 2019 Council Meeting. In addition to various internal meetings with staff and regular meetings and phone calls with the President and the Vice President, summarized below are the matters that I dealt with on behalf of the College during the reporting period.

PUBLIC INTEREST RATIONALE:

The Registrar is responsible for reviewing the effectiveness of the College in achieving its public interest mandate and the implementation of the Council's strategic plan and directional policies.

Strategic Priorities Progress Update

A key part of the Registrar's performance is to regularly provide an update to Council on the College's Operational Plan. I am pleased to present the 2019 year-end scorecard that illustrates College performance against predetermined targets to fulfill the objectives in year one of the 2019-2021 Strategic Plan. (Attachment 1)

Also presented for information is the final 2020 scorecard that sets out the targets for performance against objectives for year two of the 2019-2021 Strategic Plan developed by council. (Attachment 2)

Risk Report

As outlined in the Council Governance Manual, the Registrar is tasked with reporting annually on risk management activities to inform Council on how risks that may impact the College's ability to achieve its public protection goals are being managed. Attached is the College's Risk Management Report. It should be noted that the activities outlined in the report are in addition to the financial risk oversight role that the Finance and Audit Committee serves, as outlined in the Briefing Note respecting the Audited Financial Statements for 2019. (See Attachment 3)

A key risk to College operations in 2020 is a possible COVID-19 pandemic. The College has an emergency preparedness protocol in place and has been engaged in preparations to ensure business continuity, should community transmission become a reality in Ontario.

Ministry/Government Activities

As reported in my February update to Council, Susan James and I had the opportunity to meet with the Deputy Premier and Minister of Health, the Honourable Christine Elliot on February 3, 2020, to provide

an update on several of the College's current initiatives, including governance reform, scope of practice, quality indicators and the Community Workplace Environment Initiative.

Along with senior staff, I continue to engage regularly with several Ministry representatives to keep them informed of our work and collaborate on issues of mutual importance. Our primary contacts continue to be in the Health Workforce Regulatory Oversight, Ontario Public Drug Programs and Health Analytics and Insights branches.

The College has also been participating in the Ministry Emergency Operations Centre (MEOC) meetings over the past couple of months in order to prepare the health care sector for a possible COVID-19 pandemic. Information and links are available on the OCP website.

Federal/Provincial Initiatives

The College continues to maintain its relationship with several Health Canada representatives, particularly with the Office of Controlled Substances (OCS), Opioid Response Team as part of our ongoing implementation of the opioid strategy. We recently assisted the OCS in their recruitment of pharmacies to pilot the new loss and theft reporting portal which, once fully implemented, will lead to improved data reporting to regulators on pharmacy reporting compliance and loss and theft trends.

On February 7th, the College, along with other NAPRA members, participated in a biannual meeting with the Office of Controlled Substances, to receive updates on a number of initiatives, including modernization of the *Controlled Drugs and Substances Act* and related regulations, low dose codeine, opioid safe supply initiatives, suspicious activity reporting and US Wholesaler Advisory.

Inter-Professional Relationships

Health Professional Regulators of Ontario (HPRO)

At the HPRO Board of Directors meeting held on December 10, 2019, the discussion continued around regulatory governance reform as well as the next steps for HPRO including their updated Statement of Purpose, structure and budget approval.

Advisory Group of Regulatory Excellence (AGRE)

At the AGRE Registrars meeting on December 18, 2020, discussions solely focused on governance reform, as well as identifying opportunities for leadership in governance modernization in Ontario. The group also discussed the proposed Ministry's College Performance Measurement Framework and its potential impact on College governance activities.

Pharmacy Stakeholders

As previously reported, the College started conversations with corporate pharmacy and the pharmacy associations in September 2019 regarding continued feedback from front-line providers on the challenges in the pharmacy practice environment that are perceived to impact on patient care. The College has met with the Ontario Pharmacists Association and the Neighbourhood Pharmacy Association of Canada as well as the larger pharmacy corporations to begin engagement on the development of principles to support a work environment that will optimize pharmacy practice to improve patient outcomes (*see 10.1 Community Pharmacy Practice Environment*).

Other Stakeholder Meetings

CLEAR Winter Symposium

In January, Connie Campbell and I attended the CLEAR Winter Symposium in San Diego. The session focused on Data Technology in Professional Regulation, including discussion about the use of AI and machine learning for predictive analytics. In addition, there is significant ongoing work in the US regarding harmonization and cross-state licensing.

Home Care in the New Ontario Health Environment

On January 24, I attended the session “Home Care in the New Ontario Health Environment” presented by Fasken Health Law Group. The main theme discussed was the role of home care in Ontario’s restructured health system. A key theme of the discussion was the role of the Ontario Health Teams and community services to maintain patients in their homes as the population ages in an environment of inadequate long term care home beds.

National Association of Pharmacy Regulatory Authorities (NAPRA)

Natural Health Products

On January 2, 2020 the list of the Natural Health Products scheduled to be removed from the National Drug Schedules came into effect (see Attachment 4). Given the risks associated with ephedrine and pseudoephedrine Health Canada requested a delay in the removal of these products until January 2, 2021. NAPRA has agreed to accommodate their request and these exceptions are now listed on the [NAPRA website](#). The College will continue to consider the impact of these changes and the potential need to propose changes to the provincial drug scheduling regulations in order to ensure the safety of the Ontario public.

NAPRA working groups

The College is actively participating on numerous national working groups that NAPRA established in 2019 to move their strategic plan forward. The key initiatives are well-aligned with needs that Ontario has identified. The following updates relate to two key milestones:

- NAPRA Standards of Practice Working Group
The objective of this working group is to facilitate the overall development and updating of the National Association of Pharmacy Regulatory Authorities (NAPRA) Model Standards of Practice, for both pharmacists and pharmacy technicians. The work for the project is expected to occur between October 2019 and April 2021. A two day in-person workshop was held in Ottawa on January 21-22nd to determine a framework for the document.
- NAPRA Cross-Jurisdictional Framework Working Group
The objective of this working group is to assist NAPRA with the development of a framework to govern cross-jurisdictional practices within Canada. The issues to be considered include licensing requirements, information sharing between the pharmacy regulatory authorities, regulatory oversight, protection of the public, patient safety, and ethical practices. The work for the cross-jurisdictional project is expected take place between May 2019-December 31, 2021.

On February 6, 2020, following the Board meeting, there was a full day meeting with each PRA and their respective legal representatives to review a jurisdictional scan and policy considerations identified by the working group regarding the development of the Cross-Jurisdictional Framework.

Board Meeting Update

The winter NAPRA Committee of the Whole and Board meetings took place February 4 and 5, 2020 in Ottawa, during which NAPRA’s operational plan for 2020 was presented. Cross-jurisdictional practices, medication incident reporting standards, renewal of standards and guidance documents continue to be a focus. There was also significant discussion on the need for strategic discussion on licensure issues, the future of NAPRA offerings related to IPGs and various other cross jurisdictional issues such as digital pharmacy.

Miscellaneous Items

Digital Health Update

OneID project with eHealth Ontario - now called Ontario Health (Digital Services)

In February, the College was informed that Ontario Health (Digital Services) will no longer resource the ONE ID project and registration will remain a manual process as it is currently. Ontario Health (Digital Services) confirmed however that onboarding Ontario community pharmacies to the clinical viewers is still a priority, and the College is still committed to supporting this work and will create a robust communication plan to inform pharmacists about the benefits of obtaining access to the clinical viewers.

PrescribeIT

The College is represented on a PrescribeIT Working Group enabling us to stay informed of this work and ensure that the pharmacy standards of practice are considered throughout the development of the service. As of February 4, 2020, the following care providers that utilize the service in Ontario are 830 pharmacies, 1198 physicians and 67 nurse practitioners.

Assurance and Improvement in Medication Safety (AIMS)

Through implementation of the interoperability model that was developed to reduce the burden of dual reporting, the College was able to meet its objective of onboarding all 4,400 community pharmacies to the AIMS program prior to year-end, 2019.

In addition, the Pharmacy Safety Self-Assessment tool (PSSA) was completed and is currently being piloted in over 40 community pharmacies. The tool is designed to bring heightened awareness to the distinguishing characteristics of safe pharmacy systems and to assist pharmacy teams to make improvements in their practice and operations to proactively improve patient safety. Feedback from the pilot will be collected and analyzed before full roll-out.

Finally, the AIMS response team, an independent team of pharmacy professionals and patient safety experts, is engaged in further analysis of the AIMS data and anticipates the release of their second bulletin later this spring. The College will also report on key performance indicators, which will help inform whether additional resources or supports are needed to promote meaningful use of the program.

OCP Annual Report

The 2019 annual report, which will highlight key accomplishments and activities aligned with the 2019-2021 Strategic Framework and Council-defined priorities, will be provided to Council via Boardvantage following the March 23rd Council meeting and approval of the audited financial statements.

Registration and Quality Assurance Regulation Amendments Update

Early in the year, the Ministry informed the College that rather than proceeding solely with the previously submitted amendments to the Quality Assurance regulation, they will move forward with the Registration regulation amendments at the same time. The College submitted amendments to both regulations in March 2018 and looks forward to Cabinet approval in the near term. This will enable registration of pharmacy technician interns, allowing them to practice to full scope following graduation while completing all of the registration requirements. It will also allow the inclusion of pharmacy technicians in the Quality Assurance program, enabling the College to fully implement practice assessments for these registrants. Registration of pharmacy students will be discontinued, which will reduce the regulatory burden for these registrants while still allowing them to practice to full scope as defined in the *Regulated Health Professions Act*.

Pharmacy Examining Board of Canada (PEBC)

The annual meeting of the PEBC Board of Directors was held in Toronto on February 22, 2020. A report from the meeting is attached for your reference. (see Attachment 5)

Strategic Plan Alignment				Quarterly Scorecard – OCP Council - Q4 2019						2019					Annual Target
										2018 Actual	Key Performance Indicators and Milestones				
No.	SP1	SP2	SP3	Governance and Strategic Risk											
1			✓	n/a	*Develop governance evaluation tool to measure public interest focus							17-Sep		n/a	30-Sep
2			✓	n/a	*Develop a plan to advance governance framework, aligned with agreed principles						17-Jun			n/a	30-Sep
3			✓	n/a	*Integrate operational risk oversight into Finance & Audit Committee work plan						31-Mar			n/a	30-Jun
Regulatory Risk															
4		✓		30%	% Complaints disposed within 150 days					cumulative measure (YTD)			26%	41% min	
5		✓		103/340	Number of complaints disposed within 150 days / total number disposed					cumulative measure (YTD)			103/396	n/a	
6		✓		41%	% Registrar's Inquiries disposed within 365 days					cumulative measure (YTD)			37%	54% min	
7		✓		37/89	Number of Registrar's Inquiries disposed within 365 days / total number disposed					cumulative measure (YTD)			38 / 102	n/a	
8		✓		79%	% HPARB complaint decisions confirmed (# decisions confirmed/ # HPARB decisions)					cumulative measure (YTD)			87%	75% min	
9		✓		41%	% Decisions for uncontested hearings issued within 60 days (total # of uncontested decisions issued)					cumulative measure (YTD)			84%	66% min	
10	✓			44%	% Pharmacists assessed meeting more than 75% of indicators without coaching					47%	48%	46%	37%	45%	53% min
11	✓			n/a	*Implement a framework for risk-based assessment of pharmacy professionals & pharmacies							30-Sep		n/a	30-Sep
Stakeholder, Transparency and Reputational Risk															
12	✓	✓	✓	n/a	*Formally launch pharmacy indicator initiative						6-Jun			n/a	30-Jun
13	✓	✓	✓	n/a	*Public reporting of medication incidents commences						31-May			n/a	31-May
14		✓	✓	n/a	*Publish transparency framework and principles						10-Jul			n/a	30-Jun
Financial and Operational Performance Risk															
15			✓	44%	% Engagement drivers, organizational culture (subset)					Annual Report Q3 2019			51%	51%	
16	✓	✓	✓	n/a	% Variance of operating annual budget to year end actuals					Annual Report Jan 2020			0.8%	within 5%	
17	✓	✓	✓	n/a	*End of development and testing, data analytics strategy								31-Dec	n/a	31-Dec
18		✓		n/a	*Presentation of draft Discipline cost recovery model policy					15-Mar				n/a	31-Mar
<i>SP Ref. (Strategic Alignment)</i>															
SP1: Enhancing system and patient outcomes through collaboration and optimization of current scope of practice															
SP2: Strengthen trust & confidence in the College's role and value as a patients-first regulator															
SP3: Enhance the College's capacity to address emerging opportunities and advance quality and safe pharmacy practice and regulatory excellence.															
10-Feb-20	Legend			Indicator Performance to Target						*Milestone Performance to Target					
	n/a = not applicable			On Target within 10%						On Track (proceeding per plan)					
	* Indicates a project milestone			Approaching Target >10% - 25%						Potential Risk					
	Completed milestone			Beyond Target >25%						Risk/Roadblock					

Scorecard Measure	Q4 2019 Council Summary / Improvement Strategies
<p>#1 *Develop governance evaluation tool to measure public interest focus</p>	<p>This project milestone is complete.</p>
<p>#2 *Develop a plan to advance governance framework, aligned with agreed principles</p>	<p>This project milestone is complete.</p>
<p>#3 *Integrate operational risk oversight into Finance & Audit Committee work plan</p>	<p>This project milestone is complete.</p>
<p>#4 % Complaints disposed within 150 days</p>	<p>YTD did not meet target (41%). Staffing shortfall in Complaints in Q4 + large # of backlog ICRC decisions (matters >150 days) issued in Q4, leading to smaller numerator/larger denominator contributed. 2020 initiatives: early resolution + decision backlog clearance (see notes under #5).</p>
<p>#5 Number of complaints disposed within 150 days / total number disposed</p>	<p>Values that support indicator #4 above. Total # of ICRC complaints decisions issued in 2019 = 401 (17% increase over 2018 + 50% increase over 2017). Large # of backlog decisions issued in Q4 means ↑ denominator. Risk assignment means lower-risk complaints may not be prioritized. Decision backlog clearance + early resolution strategy should eventually lead to ↑ # of complaints that can be disposed of within 150 days.</p>
<p>#6 % Registrar's Inquiries disposed within 365 days</p>	<p>YTD did not meet target (54%). New Investigators + complex multi-member matters + large # of RI matters disposed of by ICRC in Q4 and YTD contributed. 2020 initiatives: file management improvements, RI backlog clearance (see notes under #7).</p>
<p>#7 Number of Registrar's Inquiries disposed within 365 days / total number disposed</p>	<p>Values that support indicator #6 above. Total # of RI decisions issued by ICRC in 2019 = 102 (50% increase over 2018 and 42% increase over 2017). ICRC continues to prioritize RI decisions with other high-risk matters. RI backlog clearance + file management streamlining should eventually lead to ↑ number of RIs that can be disposed of within 365 days.</p>
<p>#8 % Health Professions Appeal and Review Board (HPARB) complaint decisions confirmed (# decisions confirmed/ # HPARB decisions)</p>	<p>YTD met target.</p>
<p>#9 % Decisions for uncontested hearings issued within 60 days (total # of uncontested decisions issued)</p>	<p>YTD met target. In total, 16 out of 19 decisions were issued within 60 days. Target for 2020 increased from 66% within 60 days to 72%.</p>

<p>#10 % Pharmacists assessed meeting more than 75% of indicators without coaching</p>	<p>4th quarter and YTD did not meet target. Results YTD remain stable and approximately the same as 2018 year end results. Although Improvement was expected as more pharmacists are aware of practice assessment expectations. The final cohort represented a higher percentage of relief and occasional practicing pharmacists which impacted the outcome such that year-end results were below target. Changes to the practice assessment model are being implemented in 2020 and will be evaluated.</p>
<p>#11 *Implement a framework for risk-based assessment of pharmacy professionals & pharmacies</p>	<p>This project milestone is complete. Presented to Council in September.</p>
<p>#12 *Formally launch pharmacy indicator initiative</p>	<p>This project milestone is complete. Official launch took place in June.</p>
<p>#13 *Public reporting of medication incidents commences</p>	<p>This project milestone is complete. First Response Team Bulletin released in September.</p>
<p>#14 *Publish transparency framework and principles</p>	<p>This project milestone is complete. Presented to Council in September.</p>
<p>#15 % Engagement drivers, organizational culture (subset)</p>	<p>The Pulse Survey reported at September Council.</p>
<p>#16 % Variance of operating annual budget to year end actuals</p>	<p>% Variance was less than 1%.</p>
<p>#17 *End of development and testing, data analytics strategy</p>	<p>This project milestone is complete.</p>
<p>#18 *Presentation of draft Discipline cost recovery model policy</p>	<p>This project milestone is complete.</p>

Scorecard Measure	Indicator or Milestone Definition	Performance
#1 Develop governance evaluation tool to measure public interest focus	Develop governance evaluation tool to measure public interest focus.	 On Track  Potential Risk  Risk/Roadblock
#2 Develop a plan to advance governance framework, aligned with agreed principles	Develop a plan to advance governance framework, aligned with agreed principles.	 On Track  Potential Risk  Risk/Roadblock
#3 Integrate operational risk oversight into Finance & Audit Committee work plan	Integrate operational risk oversight into Finance & Audit Committee work plan.	 On Track  Potential Risk  Risk/Roadblock
#4 % Complaints disposed within 150 days	The % compliance with the statutory requirement to dispose of complaints within 150 days. Includes all complaints (investigator appointed (75.1c) and complaints where an Investigator is not required. The 150 days begins the date the complaint is “filed” and ends on the date the complaint is disposed of (decision mailed).	% performance is:  37% or more  31% – 36%  31% or less
#5 Number of complaints disposed within 150 days/total number disposed	This indicator illustrates the volume of complaints represented in indicator #4 above, including those that exceed 150 days	
#6 % Registrar’s Inquires disposed within 365 days	The % of the Registrar’s Inquiries (75.1a) disposed of within 365 days. The 365 days begins the date the Inquiry is “filed” and ends on the date the Inquiry is disposed of (decision mailed).	% performance is:  48% or more  40% – 47%  39% or less
#7 Number of Registrar’s Inquiries disposed within 365 days/total number disposed	This indicator illustrates the volumes of Registrar’s Inquires represented in indicator #6 above, including those that exceed 365 days.	
#8 % HPARB complaint decisions confirmed (# decisions confirmed/# HPARB decisions)	The % of HPARB (Health Professions Appeal and Review Board) complaint decision requests confirmed.	% performance is:  67% or more  56% – 66%  55% or less
#9 % Decisions for uncontested hearings issued within 60 days (total # of uncontested decisions issued)	The % of “Decisions” for uncontested hearings that are issued within 60 days. The period of measurement for this indicator begins from the last day of the hearing to the date the hearing “Decision” was released to the parties. The total number of uncontested decisions issued for the quarter is shown in brackets.	% performance is:  59% or more  49% – 58%  48% or less

Scorecard Measure	Indicator or Milestone Definition	Performance
<p>#10 % Pharmacists assessed meeting more than 75% of indicators w/out coaching</p>	<p>The % of community pharmacists meeting standards in more than 75% of their performance indicators without coaching. (routine assessments)</p>	<p>% performance is:  47.7% or more  39.7% – 47.6%  39.6% or less</p>
<p>#11 Implement a framework for risk based assessment of pharmacy professionals & pharmacies</p>	<p>This milestone reflects the development of a framework for identification of risk factors that will be developed through analysis of data to establish criteria and scheduling for practice and operational assessments.</p>	<p>  On Track  Potential Risk  Risk/Roadblock </p>
<p>#12 Formally launch pharmacy indicator initiative</p>	<p>Part of the Outcome Indicators for Pharmacy initiative, this milestone reflects the official launch of the initiative.</p>	<p>  On Track  Potential Risk  Risk/Roadblock </p>
<p>#13 Public reporting of medication incidents commences</p>	<p>Part of the Medication Safety Program project, this milestone reflects the start of medication incident reporting across all community pharmacies (excluding hospitals) in Ontario.</p>	<p>  On Track  Potential Risk  Risk/Roadblock </p>
<p>#14 Publish transparency framework and principles</p>	<p>Part of the Transparency core priority, this milestone reflects the publishing of a formal transparency framework to guide the advancement and evolution of the College’s transparency principles.</p>	<p>  On Track  Potential Risk  Risk/Roadblock </p>
<p>#15 % Engagement drivers, organizational culture (subset)</p>	<p>A full scale employee engagement survey was conducted by an external 3rd party in 2018. Senior Management Relationships was targeted as an area for improvement. A pulse survey on this subset of indicators will be conducted on the 1 year anniversary of the survey. The target is set at the industry benchmark.</p>	<p>% performance is:  46% or more  38% - 45%  37 % or less</p>
<p>#16 % Variance of operating annual budget to year end actuals</p>	<p>This is a measure of the variance of actual operating expenses against budget. Achieving operating outcomes with additional efficiencies would exceed performance.</p>	<p>% performance is:  5.5% or less  5.6% - 6.3%  6.4 % or more</p>
<p>#17 End of development and testing, data analytics strategy</p>	<p>Part of the Data Management Program project, this milestone reflects the end of the development and testing of the data analytics strategy.</p>	<p>  On Track  Potential Risk  Risk/Roadblock </p>
<p>#18 Presentation of draft discipline cost recovery model policy</p>	<p>Part of the Discipline Cost Recovery Model project, this milestone reflects the readiness of the draft policy for Council presentation.</p>	<p>  On Track  Potential Risk  Risk/Roadblock </p>

Strategic Plan Alignment				Quarterly Scorecard - OCP Board of Directors - QX 2020					2020					Annual Target		
				2019	Key Performance Indicators and Milestones					Q1	Q2	Q3	Q4	YTD	Annual Target	
No.	SP1	SP2	SP3	Actual	Governance and Strategic Risk											
1		✓	✓	n/a	*2020/2021 Board elected under new governance framework										10-Aug	
2		✓	✓	n/a	*2020/2021 Committees operating under new governance framework										1-Dec	
3	✓	✓	✓	n/a	*Proactive Risk Register Developed for 2021										30-Dec	
Regulatory Risk																
4		✓		26%	% of Complaints disposed of within 150 days					cumulative measure (YTD)					32%	
5		✓		103/396	Number of complaints disposed within 150 days / total number disposed					cumulative measure (YTD)					172 / 536	
6		✓		37%	% of Registrar's Inquiries disposed of within 365 days					cumulative measure (YTD)					42%	
7		✓		38 / 102	Number of Registrar's Inquires disposed within 365 days / total number disposed					cumulative measure (YTD)					56 / 134	
8		✓		87%	% HPARB complaint decisions confirmed (decisions confirmed/HPARB decisions)					cumulative measure (YTD)					75%	
9		✓		84%	% of decisions for uncontested hearings issued within 60 days (total # decisions/total # hearings)					cumulative measure (YTD)					72% (14/19)	
10	✓			n/a	% of community pharmacies active on AIMS platform					cumulative measure (YTD)					60%	
11	✓	✓		n/a	*AIMS in hospital - Implementation plan developed										30-Dec	
12	✓			n/a	*College resources in place to enable registrant uptake of expanded scope.										1-Sep	
13	✓			n/a	*Evaluate the New Practice Assessment Model										30-Dec	
Stakeholder, Transparency and Reputational Risk																
14	✓	✓	✓	n/a	*Refine public register to conform to new transparency framework										30-Sep	
15		✓		n/a	*Implement the Cultural Competency Initiative										4-Dec	
Financial and Operational Performance Risk																
16			✓	60%	% Engagement drivers, organizational culture (subset)					Annual Report Q3 2020					70%	
17	✓	✓	✓	0.81%	% variance of operating annual budget to year end actuals					Annual Report January 2021					within 5%	
18			✓	n/a	*Implement a Talent Management Strategy to support succession planning & organizational depth/capacity										30-Jun	
19		✓	✓	n/a	*Discipline Costs Recovery - Investigation costs incorporated										30-Jun	
SP Ref. (Strategic Alignment)																
SP1: Enhance system and patient outcomes through collaboration & optimization of current scope of practice																
SP2: Strengthen trust and confidence in the College's role as a patients-first regulator																
SP3: Enhance capacity to address emerging opportunities & advance quality & safe pharmacy practice & regulatory excellence																
Legend																
				n/a = not applicable					Indicator Performance to Target					*Milestone Performance to Target		
									On Target within 10%					On Track (proceeding per plan)		
				* Indicates a project milestone					Approaching Target >10% - 25%					Potential Risk		
				Completed milestone					Beyond Target >25%					Risk/Roadblock		

13-Mar-20



Risk Management Report – March 2020

In accordance with the expectations outlined in the Council Governance Manual, a Risk Management Plan was created by staff and reported to Council in 2015. As indicated in the manual, the Registrar is to report to Council annually on the status of the risk management plan and any updating that is required. Accordingly, a Risk Management Report is included in the Registrar's report in March each year. The Plan continues to appropriately represent the philosophy, intentions and high level activity undertaken to manage risks to the College and its operations.

This year the Risk Management Report, which highlights the activity undertaken over the past year that contributes to risk mitigation and management, has been transitioned from a narrative to a tabular risk register format, in preparation for the anticipated adoption of such a format in the future.

Overview

While the College's Risk Management Plan is appended below for reference, the philosophy goals and approach are repeated herein for guidance on this Risk Management Report:

Risk Management Philosophy

The College has embraced a collaborative, strategic approach to risk management, which includes identifying and addressing the threats and opportunities the organization faces. The views and participation of personnel at all levels of the organization, including Council, will be sought as the College identifies risk management priorities and implements strategies for modifying, retaining and/or financing risk. This collaborative effort will culminate in the creation of a Risk Management Plan. The Plan will be reported to Council annually.

Risk Management Goals

Any and all risk management activities should be designed to enable, rather than impede the mission of the Ontario College of Pharmacists.

Approach to Risk Management

The College takes a multi-tiered approach to risk management:

- *Strategic – organization-wide*
- *Operations – statutory obligation (committee and/or program)*
- *Operations – corporate services and support*

The Registrar/CEO works with the various entities in the organization to identify and evaluate risks and create appropriate risk management plans.

1.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ OCP’s governance model does not reflect best practices for the purposes of a modern regulator (e.g., board size, composition, functions, competencies and nomenclature) <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Reduced regulatory effectiveness ○ Reduced public confidence in the OCP ○ Reputational damage ○ Reduced government confidence in OCP and possible Ministry supervision 	Strategic, Organization-Wide Risks	High	Registrar’s Office	<ul style="list-style-type: none"> ○ Following the approval of the Four Governance Reform Concepts (separation of Council and statutory committees, competency-based framework, reduction in Council size, equal Professional and Public membership) in December 2018, OCP undertook the drafting of by-laws to operationalize the framework. ○ The draft By-Law No. 6 was presented to December 2019 Council, which approved distribution for consultation. ○ Council agreed to an election schedule for professional members of the new board, additional eligibility criteria, a transparent and independent selection process, honoraria for board and committee members, and the requirement for both Professional Committee Appointees (PCAs) and Lay Committee Appointees (LCAs) to be selected using the same competency based recruitment and screening process. ○ By-Law No. 6 to be considered by Council in March 2020, following consultation, and implemented thereafter. 	<ul style="list-style-type: none"> ○ New governance model results in a move towards adherence to regulatory best practices, which leads to public and Ministry confidence in OCP. ○ The OCP is seen as a leader in governance reform amongst the RHPA Colleges and other professional regulators.
2.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ OCP’s issues management and/or media management capacity and processes are insufficient. <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Reputational damage ○ Reduced public confidence in the OCP 	Strategic, Organization-Wide Risks	Medium	Communications	<ul style="list-style-type: none"> ○ Proactive planning in place to support timely response to potential issues, including adoption of issues management practices; ensures readiness to manage potential issues and faster response time. ○ Comprehensive communications and audience-specific messaging developed to support key initiatives. ○ Reporting and monitoring of media inquiries in place, with sharing of insights and trends at management team discussions. 	<ul style="list-style-type: none"> ○ College demonstrates readiness and ability to manage issues proactively and as they arise. ○ All media inquiries are responded to in a timely and effective manner.
3.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ Delays in Intakes, Investigations and ICRC decisions <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Statutory non-compliance with 150-day complaints timelines ○ Regulatory risk of harm to patients 	Statutory Obligations (Operations: Committees, Programs and Services)	High	Conduct	<ul style="list-style-type: none"> ○ Following divisional realignment in 2018, worked with Business Processes to improve business processes and case file management – ongoing in 2020. ○ Staff resources added to Intakes, Investigations, Complaints, Inquiries Complaints and Reports Committee (ICRC) administration. ○ CAMH monitoring services replaced with Lifemark to ensure continuity of monitoring for members with health issues. ○ 20% more ICRC meetings added to deal with increased number of investigations. 	<ul style="list-style-type: none"> ○ Improved timelines achieved for Intakes. ○ Timelines for all processes to be monitored throughout 2020. ○ More effective and efficient processes – ongoing monitoring for 2020.

	<ul style="list-style-type: none"> ○ Potential liability for OCP ○ Reputational damage ○ Fairness to members and complainants 					
4.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ Competence drift for Pharmacy Technicians <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Regulatory risk of harm to patients ○ Reduced public confidence in OCP 	<p>Statutory Obligations (Operations: Committees, Programs and Services)</p>	Medium	Quality/ Registrant Competence Community Practice	<ul style="list-style-type: none"> ○ A practice assessment program for community and hospital technicians (mirroring program for community pharmacists) was introduced in 2019 on a voluntary basis until pending Quality Assurance (QA) regulations are approved. ○ The program is ready to be scaled up once the QA regulations pass and the program is mandatory. 	<ul style="list-style-type: none"> ○ In 2019, 291 technicians were assessed and all were successful, progressing to self-directed learning.
5.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ Outdated OCP policies and guidelines relating to practice <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Regulatory risk of harm to patients ○ Inadvertent non-compliance of members with policies ○ Reputational damage 	<p>Statutory Obligations (Operations: Committees, Programs and Services)</p>	Low	Quality/Strategic Policy	<ul style="list-style-type: none"> ○ New process to review and update OCP policies and guidelines implemented, to ensure practice expectations are conveyed to registrants. 	<ul style="list-style-type: none"> ○ All OCP policies and guidelines relating to practice are kept updated in a timely manner.
6.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ Lack of procedural and technological firewalls between practice and facility assessments and outdated assessment tools. <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Inadvertent non-compliance by OCP with statutory QA confidentiality requirements 	<p>Statutory Obligations (Operations: Committees, Programs and Services)</p>	Medium	Quality/Pharmacy Assessments Community Practice Hospital Practice	<ul style="list-style-type: none"> ○ A business process review of the various elements of practice assessments and facility assessments in a shared visit was conducted and resulted in the separation of the visit into distinct operational and practice attendance with an implementation date of January 1, 2020. ○ All operational assessment tools for both community and hospital were reviewed and updated including the sterile compounding criteria. Assessment tool was developed to support the implementation of NAPRA standards for non-sterile compounding. 	<ul style="list-style-type: none"> ○ QA confidentiality requirements observed. ○ More effective operational assessment tools.

	<ul style="list-style-type: none"> Reputational damage 				<ul style="list-style-type: none"> Data quality checks on pharmacy records to identify and triage errors, and develop short and long term resolution strategies were imbedded into daily department practice. 	
7.	<p>Potential Risk:</p> <ul style="list-style-type: none"> Cyber-attacks on OCP information, data and financial assets (e.g. ransomware, malware, business disruptions, fraud, data insecurity/breaches) <p>Potential Impacts:</p> <ul style="list-style-type: none"> Confidentiality breaches and non-compliance with privacy laws Financial losses Reputational damage Business disruption 	<p>Operations Support - Corporate</p>	High	<p>Corporate Services/ Information Technology Processes Accounting and Operations</p>	<ul style="list-style-type: none"> Maintenance of appropriate business insurance to cover financial losses due to cyber-attacks A large number of internal controls were undertaken to mitigate the risk of a cyber-attack, including: <ul style="list-style-type: none"> Security patches for operating systems, applications and databases reviewed and installed monthly. Anti-malware programs installed on all production servers and the College's PCs. Increased malware scans on servers. Running scheduled checks for random executables and services on affected servers. All OCP all-in-one computers scheduled to scan and restart every day. An external vulnerability assessment and penetration test on OCP's web application environment. All College staff required to complete security training modules. Phishing campaigns aimed at College staff are run regularly, with additional staff training required if a staff member "fails" a phish attempt. Website blocking is in place to free up bandwidth, increase productivity and minimize risk of a "drive-by" downloaded Trojan malware. Ad blocker and App locker applications in place to restrict pop-ups and unwanted software installs. Incoming email messages screened and quarantined if suspicious. Email – additional checks in place to prevent OCPINFO emails from being spoofed (disguised). Monthly audit summaries of folder access and file read reports. Address verification system (AVS) and card verification system (CVV/CV2) for credit card payments. IT process improvements to add internal controls and training re: phishing attempts. More robust internal controls and training implemented within Accounting to mitigate against unwitting participation in fraud attempts. 	<ul style="list-style-type: none"> Minimal successful cyber-security attacks against OCP Timely and appropriate mitigation of effects of any successful cyber-security attacks.

					<ul style="list-style-type: none"> ▪ Mandatory training in fraud detection for Accounting staff; and refined processes for wire transfers in foreign currency. 	
8.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ Inadequate information and records management (IRM) maturity and practices <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Non-compliance with OCP’s statutory obligations ○ Privacy breaches ○ Security threats ○ Liability issues ○ Disrupted operations and disaster recovery ○ Reputational damage 	Operations Support - Corporate	Medium	Corporate Services/ Information and Data Management	<ul style="list-style-type: none"> ○ An assessment of the College’s Information, Records Management (IRM) Program was completed, evaluating the internal controls against industry recognized standards including the Generally Accepted Recordkeeping Principles and the International Standard ISO 15489-1: 2016 - Information and documentation: Records Management. ○ The assessment revealed high staff interest in effecting records management improvements and room for improvement in the Program’s framework and tools to fully support all phases of the IRM life cycle. ○ Development of a transformation roadmap, to be initiated in 2020. ○ Initiated work on the development of a standard for the protection of privacy and access to Information including information security classification and the management of privacy breaches. The manual is intended as a practical guide to help OCP employees interpret, administer, and meet the requirements of various College policies and procedures on privacy and information access. 	<ul style="list-style-type: none"> ○ OCP IRM Program is mature and in full compliance with legislative obligations.
9.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ Inadequate data management maturity, governance and practices, with poor data and information quality, leading to sub-optimal decision making. <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Reduced regulatory effectiveness ○ Reputational damage ○ Loss of confidence in the OCP 	Operations Support - Corporate	High	Corporate Services/ Information and Data Management	<ul style="list-style-type: none"> ○ Used TDWI (Transforming Data with Intelligence) Analytics Maturity Model and assessment tool to measure the maturity of analytics at OCP objectively across several domains and criteria that are key to deriving value from analytics. ○ The assessment revealed that the current state of analytics at OCP is “Nascent” (i.e. beginning). ○ A pilot project on the understanding and use of predictive analytics was executed in 2019. ○ Work will continue on expanding these initiatives into 2020. 	<ul style="list-style-type: none"> ○ OCP’s information and data management is mature. ○ OCP data quality is high. ○ OCP uses robust data analytics to support decision making.

10.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ Performance management and talent management systems did not effectively support succession planning and business continuity <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Loss of employee engagement ○ Lack of alignment across organization ○ Failure to execute strategic priorities and operational plans ○ Loss of critical organization intelligence 	Operations Support - Corporate	High	Corporate Services/ Human Resources	<ul style="list-style-type: none"> ○ OCP introduced a new performance management system following employee engagement through focus and feedback groups, while incorporating HR best practices. ○ As part of this exercise, OCP revised its core and leadership competencies to support the OCP's mandate as well as the strategic and operational plans. ○ More proactive and open performance management discussions to ensure that that staff goals align with organizational strategic goals. 	<ul style="list-style-type: none"> ○ Greater employee engagement. ○ Improved alignment across the organization. ○ Improved execution on strategic priorities and operational plans.
11.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ Inconsistent operational planning, performance measurement and project management practices <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Failure to appropriately execute on operational priorities ○ Failure to appropriately monitor key aspects of organizational performance ○ Failure to execute on projects in terms of timeliness, deliverables and/or budget ○ Inefficiencies and financial impacts 	Operations Support - Corporate	Medium	Corporate Services/ Business Processes (BP)	<ul style="list-style-type: none"> ○ Introduction of standardized planning tools, templates and timelines to facilitate discussion and documentation of work plans, dependencies and resource requirements. ○ BP undertook initiatives to clarify and monitor key performance data, indicators and targets. ○ Introduction of standardized project management tools, templates and expectations to facilitate greater consistency in project delivery. 	<ul style="list-style-type: none"> ○ Improved identification and clarification of timelines, deliverables, dependencies and resource requirements. ○ Improved performance monitoring, identification of performance gaps and root causes, and mitigation where opportunities identified. ○ Percentage of key performance indicators (KPI's) reviewed and available. ○ Improved performance on project timeliness, deliverables and budget. ○ Percentage of project milestones completed within 10 business days of target date.

12.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ Elevator security access permitting possible intruders to access all floors once inside elevator <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Unauthorized intrusion ○ Access to confidential information ○ Theft of equipment (financial impact) ○ Possible personal security risk 	Operations Support - Corporate	Low	Corporate Services/ Facilities & Building Operations	<ul style="list-style-type: none"> ○ As part of a risk assessment matrix, staff are now required to swipe access card for normal elevator operation. This limits movements/access of intruders and non-employees to work areas and documents within the College. 	<ul style="list-style-type: none"> ○ No unauthorized intrusions due to elevator insecurity.
13.	<p>Potential Risk:</p> <ul style="list-style-type: none"> ○ Outdated legacy centralized fire warning system <p>Potential Impacts:</p> <ul style="list-style-type: none"> ○ Could malfunction, leading to possible injury or loss of life 	Operations Support - Corporate	Medium	Corporate Services/ Facilities & Building Operations	<ul style="list-style-type: none"> ○ New fire annunciator panel has been installed and has superior functionality and efficacy – speaking to the importance of life safety in an emergency situation. 	<ul style="list-style-type: none"> ○ Zero incidents of malfunctioning fire warning system.



Risk Management Plan

Change Creates Opportunity
Opportunity Creates Risk
Optimized Risk Creates Value

If we only have a compliance focus, we will miss opportunity.

Version date: February 12, 2018

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Section 1 - Risk Management Program

Risk Management Philosophy

The College has embraced a collaborative, strategic approach to risk management, which includes identifying and addressing the threats and opportunities the organization faces. The views and participation of personnel at all levels of the organization, including Council, will be sought as the College identifies risk management priorities and implements strategies for modifying, retaining and/or financing risk. This collaborative effort will culminate in the creation of a *Risk Management Plan*. The Plan will be reported to Council annually.

Risk Management Goals

Any and all risk management activities should be designed to enable, rather than impede the mission of Ontario College of Pharmacists.

Approach to Risk Management

The College takes a multi-tiered approach to risk management:

- Strategic - organization-wide
- Operations - statutory obligation (committee and/or program)
- Operations – corporate services and support

The Registrar/CEO works with the various entities in the organization to identify and evaluate risks and create appropriate risk management plans. Working together, these leaders develop protocols, program standards, policies and incident response plans.

Section 2 - Responsibility for Risk Management

Council

Receives periodic reports from the Registrar/CEO concerning the priority risks facing the organization and its risk management framework.

Contributes to a shared understanding of the enterprise level and strategic risks.

Receives periodic reports on the organization's risk financing and insurance strategies.

Receives and periodically reviews the organization's *Risk Management Plan*.

Registrar/Chief Executive Officer (CEO)

Keeps the Council apprised of staff-led risk assessment and risk management activity.

Presents a periodic summary of the critical risks facing the organization for Council discussion and feedback.

Monitors and reports on the compliance obligations of the organization.

Delegates responsibility for specific risk areas and tasks to appropriate staff.

Director, Corporate Services

Champions organization-wide effort to protect the vital assets of the College and engage key stakeholders in risk management activities.

Keeps the Registrar/CEO apprised of changes in critical risks and risk management strategies.

Engages staff throughout the organization in risk assessment and risk management activities.

Evaluates the insurance program.

Committee Chairs/ Program Managers

Responsible for complying with the obligations outlined in the Health Professional Procedural Code respecting procedure, timeliness, transparency, objectivity and fairness.

Section 3 - Governance Structure

Incorporation

The College was incorporated in the province of Ontario in February 1871. Its duties and objects are set out in *Regulated Health Professions Act (RHPA)*, *Pharmacy Act (PA)* and *Drug and Pharmacies Regulation Act (DPRA)*. Annual not-for-profit corporate filings are submitted annually as required by provincial law.

The Council of the College serves as the Board of Directors. The role of the Council, Committees and staff are outlined in the Governance Manual approved by Council and posted to the College website and serve to guide the various entities in fulfilling their obligations.

The authority to establish by-laws is prescribed in statute. The by-laws are reviewed and amended by Council periodically to support the governance approach and operational requirements.

The Council is committed to having the minutes accurately reflect the actions of Council. The minutes are circulated between meetings and approved at the next scheduled meeting after which they are posted to the website for public viewing.

Indemnification

The Council, committee members and staff are protected from action or other proceeding for damages under the immunity provisions of S. 38 of the RHPA for acts done/or intended to be done in good faith in the performance of a duty or exercise of power under the various statutes.

Council, Committees and staff are educated on their obligations through orientation and training at the council, committee and staff levels.

Council Operations

OCP has adopted a Governance Manual containing the key assumptions and expectations of Council, Committees, Chairs and staff. The Manual will be reviewed annually during Council orientation and updates will be made on an as needed basis.

Orientation - To ensure that the members of the Council/Committees are properly trained and prepared for their service, the organization conducts orientation training for all members on an annual basis. Legal Counsel/s (with staff support) delivers the orientation at the Council and Committee levels and experienced members share their insights and coach the new members.

Development - The College strives to enhance the ability of its Council members to govern the organization by providing training for council members and chairs. Periodically the Council will assess the educational needs of the members and offer training, support or assistance as needed.

Assessment - The Council is committed to evaluating and improving its performance as a responsible, accountable and effective governing body. The Council periodically evaluates its performance and adopts a work plan to address any weaknesses.

A Code of Conduct for Council and Committee Members was adopted by Council in September 2014. Every year each Council/Committee member completes and signs a statement declaring any known conflicts and agreeing to comply with the policy. These annual statements are gathered in September of each year.

Staff Operations

The Registrar as CEO assembles the staff necessary to carry out the work of the College. Staff are organized as appropriate to carry out the duties in an efficient manner, accountable ultimately for implementation of the strategic priorities identified by Council, statutorily prescribed in the legislative framework and consistent with the culture and values of the organization. A Deputy Registrar is assigned to fulfill the duties of the Registrar if she is unable to do so.

Structure - The College has developed job descriptions for all paid positions in the organization to clearly communicate staff work objectives. These documents are created with input from line managers and are finalized before the recruitment process begins. Job descriptions help to establish pay structure between positions by evaluating responsibility and value to the College.

Organizational Accountability – The College views effective staff supervision as an essential component of risk management. Supervisory staff are expected to communicate their expectations of direct reports clearly and consistently and hold employees accountable with regard to key tasks and responsibility and compliance with the organization's employment policies. All employees are encouraged to raise concerns or questions about work priorities and assignments with their direct supervisor.

Employees may be assigned to projects operating under a matrix management or team approach. Major projects involve personnel from various units in the organization who work under the direction of a team leader. The team leader for a project is responsible for holding team members accountable. The team leader may impose discipline on a team member who fails to meet performance requirements or violates the code of conduct for the organization.

Orientation – The Human Resource department staff at the College are responsible for coordinating an orientation session for all new employees within the first week of employment. During this session, there is an overview of the mandate and organizational structure of OCP, key provisions of OCP's policies, procedures and guidelines are discussed, a benefits summary is provided along with forms which require completion by the employee. The employee is encouraged to ask questions about any aspect of employment policy or operations.

Employee Policies – The College believes that written employment policies are an essential risk management tool. The organization has compiled its key employment policies and publishes them on the intranet. The College reviews and updates its policies every two years or as new legislation is introduced in order to ensure that policies remain suitable for the organization and in compliance with provincial and federal employment laws. Policy updates are vetted through legal counsel where appropriate.

New policies are communicated via email and through the intranet to employees. Staff are provided with ample time to review policies and are required to confirm their understanding of and willingness to abide by any new policies. For legislated policies, the College will organize staff training sessions.

Assessment - The College requires annual reviews for all employees. Staff are asked to complete self assessments of key objectives and competencies outlined in the performance plan. Supervisors are responsible for scheduling review meetings and completing the performance review form in the dedicated Performance Management system. The performance review is tied into career development counselling and training. Supervisors conduct reviews with employees within six months of the hire date and thereafter on an annual basis as a minimum.

If needed, performance improvement plans can be used to facilitate constructive discussion between an employee and supervisor to clarify the work performance to be improved.

Section 4 - Strategic, Organization Wide Risk

The College recognizes that it must not only act in the public interest but be seen to act in the public interest. Failure to do so exposes the College to the risk of losing the right to self-regulation through the appointment of a Supervisor under the provisions of the RHPA.

The College further recognizes that while it is incorporated as an independent body, it is established by statute and its duty to serve and protect the public interest while regulating the profession of pharmacy are delegated by the government.

The College also recognizes that it, as well as the profession it regulates, operates within the broader context of a healthcare system. It is imperative to take this perspective into account and ensure that the interests of the broader system and its delivery of quality service to the public of Ontario take precedence over the interest of the College.

The College further recognizes that innovation, evolution and continuous improvement in its programs and services and those of the profession we regulate are necessary to meet the changing demands and expectations of our stakeholders.

Section 5 - Statutory Programs and Services

OCP undertakes their statutory obligations outlined in the legislation in accordance with the provisions set out in the various Acts. These obligations must balance timeliness with process and quality outcomes. Failure to do so could result in successful appeals and an erosion of confidence in the College and its effectiveness as a self-regulatory organization.

- Committee orientations are developed and delivered with the input from legal expertise.
- Legal support is available to guide decisions and practices.
- Statistical data is compiled and reported to monitor adherence.
- Committees report to Council annually.

Section 6 - Operations Support

Financial Management

On the recommendation of the Finance and Audit Committee, the Council approves an annual budget that represents the financial plan for operations for the coming year. The Finance and Audit Committee establishes policies in relation to contract execution and cash reserves, whereas the Council establishes a policy for investment of surplus funds of the College. Staff, under the direction of the Director of Corporate Services, establish policies to ensure the consistent treatment of financial transactions in accordance with sound accounting principles.

Council reviews the operations and activities of the College. This oversight responsibility is delegated to the Finance and Audit Committee. The Registrar acts as the primary fiscal agent. The Registrar may delegate to the Director of Corporate Services the responsibility for implementing all financial management policies and procedures and managing the various aspects of financial management.

The financial management objectives of the Ontario College of Pharmacists are to:

- preserve and protect financial assets needed for mission critical activities;
- exercise appropriate care in the handling of incoming funds and disbursement of outgoing funds;
- strive for transparency and accountability in fiscal operations.

Financial Responsibilities and Objectives

The Director of Corporate Services shall be responsible for developing and presenting to the Finance and Audit Committee a proposed budget for the upcoming fiscal year. The Finance and Audit Committee shall consider the budget and present it to the Council. The budget shall contain detailed projections for revenues and expenditures.

The College's financial statements shall be prepared on an accrual basis in accordance with Generally Accepted Accounting Principles (GAAP). The net assets of the organization and changes shall be classified as unrestricted or internally restricted to be used for specific purposes.

The presentation of the Financial Statements shall follow the Canadian accounting standards for not-for-profit organizations.

The Director of Corporate Services shall direct the preparation of quarterly Financial Statements and presentation of these statements to the Finance and Audit Committee.

The College has adopted a number of internal control measures as part of an overall effort to safeguard financial assets.

In addition, and to the extent possible given its size and circumstances, the organization strives to segregate the duties so that a single staff member isn't required to perform two or more incompatible functions

It is the policy of the College to engage the services of a reputable, independent CPA firm to conduct an annual audit of the organization's financial statements. The audit is completed as soon as practical after the end of each fiscal year. The audit firm is selected by and reports to the College's Finance and Audit Committee. The Council shall approve the appointment at a Council meeting in the year for which the books are to be audited. A representative of the audit firm is requested to make an annual presentation to the Council by the Finance and Audit Committee.

The College's Investment Policy establishes the principle that all investments shall ensure preservation of capital and sets out the restrictions and limitations of investments vehicles. The primary objectives of such investments shall be, in order of importance, preservation of capital and yield.

In addition to the Investment Policy established by Council and the Reserve Fund and Contract Execution Policy established by the Finance and Audit Committee, internal accounting policies are in place to ensure consistency in processing, e.g. expense authorization, purchasing, corporate credit card use. Fraud Protection services offered by the College's financial services provider were recently added. Policies are reviewed annually and new policies added as necessary in response to suggestions from the Auditors.

Technology and Information Management

Technology Policy

The College's information and office technology systems (networks, software, computers, telephones, printers, copiers, etc.) are tools provided to employees and volunteers to enhance productivity and performance on the job. Limited non-business use is permitted when on personal time (e.g. during lunch hour or after work). Regardless of the type of use, employees must not have any expectation of privacy to data, information or files that are created, stored or used on the College's systems. College Management reserves the right to access the employee's computer or files at any time. Staff are expected to use good judgment in their use of the College's information and office technology systems, especially electronic mail. Access to all systems, including electronic mail and the Internet, is a privilege, not a right.

The failure to use good judgment or the abuse of the organization's policies may result in suspension of privileges or disciplinary action. If any employee discovers he or she has unintentionally violated this policy, that employee should notify his or her supervisor immediately.

Policy on Systems Inventory and Documentation

To safeguard its office and technology assets, the College maintains a complete inventory of its electronic equipment and computer and technology systems, including hardware, software, media and data. The inventory process includes documentation of how the networks and systems are configured. Responsibility for maintaining the inventory has been assigned to a regular staff member. The inventory is updated at least quarterly or whenever new equipment, media or software are acquired or discarded. The inventory is stored on-site as well as off- premises.

Physical Security for Technology Assets

The College is committed to protecting its office technology assets. The organization takes all reasonable steps to protect and safeguard systems and equipment from damage due to power fluctuations, water damage, dust, extreme temperature change and other environmental factors. In addition, the organization guards against threats due to viruses, worms, malicious software and hackers. The Manager, Technology Process is responsible for overseeing the security of office systems.

The College maintains numerous files containing personal data, financial information, and other confidential or proprietary information. These files may be in paper or electronic form. The systems administrator will limit access to certain electronic files based upon individuals' responsibilities and job tasks. Confidential documents will be secured in locked filing cabinets. Any employee whose work requires access to confidential documents should ensure that files are returned to their secure location. Persons who knowingly obtain unauthorized access to confidential information will be subject to discipline, up to and including termination. All incoming employees will be required to execute a Confidentiality Undertaking concerning access to and use of confidential information prior to being given access to any confidential information.

Disaster Recovery Plan

Information technology is critical to the College's ability to provide its programs and services. As a key component of our operations, the Manager, Technology Process is responsible for establishing a disaster recovery plan for our network and computer operations. All employees and volunteers will support this staff person in developing, maintaining and testing the plan. All personnel involved with the disaster response must be familiar with the plan and their assigned roles and responsibilities.

Internet Security

In order to protect personal information, the College uses technologies and processes such as encryption, access control procedures, network firewalls and physical security. These measures increase the security and privacy of information traveling to, from and within our website. Only our authorized employees or agents carrying out permitted business functions are allowed to access personal information. Employees who violate our privacy access policies may be subject to disciplinary actions, up to and including termination.

Website Functionality

The College depends on its website to distribute information and meet its reporting and public register obligations. An inoperable website or one functioning less than optimally can have serious consequences with regard to the organization's reputation and service delivery. To ensure that the website remains fully operational at all times, the Communications Department has established a monitoring procedure which includes a complaint or notice feature allowing visitors/users to report problems encountered while using the website. The Communications Department has also established a goal of responding to all complaints or notices of site errors or problems within eight hours. The Communications Department has also provided detailed instructions to staff about their role in reporting website irregularities or other malfunctions.

Web Content

To maintain the integrity of the organization's website, the Communications department staff oversee the content and look and feel of the site. They are responsible for ensuring that content meets the organization's quality standards and due diligence has been completed to ensure that the organization is within its rights to use any material it posts.

Website Disclaimer

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Facility/Site Safety and Security

Facility Needs

Ontario College of Pharmacists seeks to utilize its resources and assets fully in achieving its mission. The prudent use of facilities and resources is required to protect the safety and well-being of all personnel - including staff, volunteers and service recipients - while safeguarding the organization's financial assets.

Building Security

The College buildings are configured to provide light of site surveillance of individuals entering the buildings. Monitored access cards enable the College to identify traffic in off-hours. The buildings are monitored 24/7 through an external alarm monitoring service. Security cameras are installed at entry points and in the parking areas. Policies are in place to communicate expectations of staff and visitors during and after hours. Additional procedures are enacted during periods of high alert as required.

Preventative Maintenance and Inspections

The College undertakes preventive maintenance for all its building and related facilities. Maintenance protocols are in place for fire safety, mechanical and electrical equipment,

cleaning, grounds maintenance, elevator maintenance, waste disposal, food handling, etc. In accordance with legislation, the College maintains a joint Workplace Health and Safety Committee comprised of staff and management. Workplace inspections are conducted monthly. Issues brought forward by the Committee are addressed promptly, or where investment is required, are implemented in a timely manner.

Policy Concerning Invitees

The College will permit other organizations affiliated with the College (Federation of Health Regulatory Colleges of Ontario (FHRCO), National Association of Pharmacy Regulatory Authorities (NAPRA)) to use College property for meetings provided that the events will not interfere with the business of the College. College facilities staff will be present to manage security and equipment issues and respond in the event of an emergency. Where facilities staff are unavailable, a meeting designate will be trained on the fire, safety, and evacuation procedures.

As a facility owner, Ontario College of Pharmacists is committed to providing outside users of its premises with a safe environment. This commitment includes, but is not limited to meeting building code requirements, making timely repairs, and providing and maintaining appropriate security.

Section 7 - Emergency Response Planning and Crisis Management

Emergency Response Policy

Ontario College of Pharmacists has adopted an Emergency Response policy whose purpose is to provide direction to the stakeholders of the organization in the wake of an emergency that may threaten the mission of the organization and the safety of its personnel and stakeholders. The Registrar/CEO is responsible for managing the organization's emergency response in accordance with the following priorities:

- to save lives;
- to protect health and to provide for the safety and health of all responders;
- to protect property and infrastructure;
- to protect the environment; and
- to restore the principle functions of the organization.

Business Continuity Planning Policy

The College's Emergency Response Plan addresses business continuity by assessing the potential impact to core and ancillary business functions and outlining impacts. The members of the ER team are responsible for developing strategies for crisis communication, financing a business interruption incident and for implementing mitigation strategies.

A table top exercise is executed every second year to test the plan and remind members of the ER team of the procedure.

Vital Records, Data and Documents Backup Policy

In order to ensure the continuity of mission-critical services, Ontario College of Pharmacists will duplicate and store off site all information identified as essential to fulfilling its business continuity plan.

Crisis Communications Policy

The College is committed to taking a pre-emptive approach to public relations crises, using disclosure whenever possible as the preferred strategy for preventing or minimizing a crisis. No one is authorized to speak to the news media during a crisis without clearance from the Registrar/CEO. The Registrar/CEO or her designee will be responsible for developing crisis communication strategies.

When a crisis unfolds, the designee will gather and verify information about the crisis, and with the Registrar/CEO, will assess the severity of the matter and determine how information is to be released, who should speak for the organization and who is to be notified.

Section 8 - Insurance Program

Insurance/Risk Financing Strategy

To safeguard the assets and resources of the College the organization maintains insurance for those insurable risks of major importance to mission-critical operations and the financial health of the organization. It is the Director, Corporate Services' responsibility to oversee the organization's insurance program and report annually to the Registrar/CEO.

Insurance Program for Ontario College of Pharmacists

The College relies on HIROC (Health Insurance Reciprocal of Canada) under umbrella coverage through FHRCO for insurance advice and services relating to:

Errors and Omissions/Directors and Officers Liability.....	\$5 Million
Liability Insurance.....	\$5 Million
• Bodily Injury	
• Property	
• Tenant Coverage	
• Healthcare Professional	
• Contingent Employer	
• Employee Benefits	
• Cyber Threats	
• Environment Impairment	
• Non-Owned Automobiles	
Crime Insurance – Employee Dishonesty.....	\$2 Million
• Loss, money order and counterfeit paper, depositors forgery.....	\$200,000
Travel Accident Coverage.....	\$100,000
Property.....	\$9.8 Million
Property coverage extensions	
• rental income.....	\$228,000
• business interruption/valuable paper and records.....	\$100,000
Company leased vehicles (Ed Johnstone and Sons, brokerage).....	\$.1 Million

Relationship with Insurance

Advisors Selection Process

The College works cooperatively with the members of FHRCO to realize efficient, cost effective coverage for our common operations.

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Aloin			U		CONFIRMED NHP: Per NHPID, sourced from Aloe Vera	Remove
Ammonium hydroxide			U		CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations	Remove
Attapulgitte		active	U		CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations	Remove
Benzocaine and its salts..		for topical application on the skin	U		CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations (A non-NHP only as an allergenic extract.)	Remove
Bile salts			U		CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an extract) of the Natural Health Products Regulations	Remove
Bioflavonoids			U		CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an extract) of the Natural Health Products Regulations	Remove
Boric acid and its salts.		in ophthalmic preparations in concentrations up to and including 2%, and in contact lens solutions intended to be rinsed off prior to insertion into the eye	U	Dec-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations. This ingredient must be used in accordance with the restrictions set out on the Hotlist when included in topical natural health products, unless additional evidence for safety is submitted. Included in the Hotlist for this ingredient under "Restrictions" are (1) the risk statement "Do not use on broken or abraded skin" (required on the PLA (Product Licence Application) form and label), (2) a subpopulation of "children over 3 years of age" and (3) a maximum concentration of 5%.	Remove

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Camphor.		in oleaginous vehicles and in liquid forms in concentrations up to and including 11%	U	Oct-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2, (an isolate) of the Natural Health Products Regulations. Camphor should be used in the minimum quantity required for the non-medicinal ingredient purposes. The presence of this ingredient on the List of Prohibited and Restricted Cosmetic Ingredients (the Cosmetic Ingredient Hotlist) indicates that there are potentially significant safety issues. This ingredient cannot be used in topical natural health products except in accordance with the restrictions set out on the Hotlist unless additional evidence for safety is submitted.	Remove
Caprylic acid		except when sold in topical formulations containing alpha hydroxy acids alone or in combination at concentrations greater than 30% and/or with a pH lower than 3.0 for a use other than to be applied to warts, corns or calluses	U	14-Dec	CONFIRMED NHP: AKA Octanoic acid, which is classified as an NHP under Schedule 1, item 2 (an isolate) of the NHPR. (the copy of the PDL listing for alpha hydroxy acids will remain in the NDS) Are restrictions to flavouring agent only and topical use only - for non-medicinal purposes only.	Remove
Capsaicin			U	Aug-97	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations for medicinal uses. Topical use only for the non-medicinal purposes: Fragrance Ingredient and Skin conditioning agent, permitted at concentrations equal to or less than 0.002 percent. Need to confirm this interpretation with HC but fairly confident is an NHP thus will remove. CONFIRMED WITH HC (EMAIL DEC 17, 2019): "The restrictions associated with the substances in the NHPID are indeed applicable to their use as non-medicinal ingredient"	Remove
Cascara sagrada or its extracts or derivatives			U	Aug-97	CONFIRMED NHP: Listed in NHPID under Frangula purshiana, Cascara sagrada listed as a common name for Frangula Purshiana in the NHPID. Classified as an NHP under Schedule 1 item 1 (plant or plant material) of the NHP Regulations.	Remove

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Digestive enzymes		from plant sources	U	Sep-99	CONFIRMED NHP: Considered NHP under Schedule 1 item 1, non-human animal material, of the NHP Regulations. (Note: Pancreatic enzymes, pancreatin, pancrelipase over 20 000 USP require Rx, are listed on PDL - that Schedule I listing that mirrors PDL will remain)	Remove
Docosanol		10% for topical use	U	02-Oct	Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations per NHPID. However, Abreva listed on DPD as OTC. Email response from HC Dec 17, 2019 "Docosanol is indeed listed with a medicinal role, as classified as an NHP substance falling under Schedule 1, item 2 (an isolate) of the NHPR, in the Natural Health Products Ingredients Database (NHPID). The current status and original market dates were both indicated as 2005-08-15 in the Drug Product Database; and as such, the Natural and Non-prescription Health Products Directorate is looking at the reason(s) why this product has not been transitioned following the coming into force in 2004 of the NHPR. " Email response from HC Feb 25, 2020: "According to the information available to date on Abreva®, containing Docosanol as medicinal ingredient consistent with its medicinal role in the NHPID, this product should have been transitioned from DIN to NPN in accordance with the ARCHIVED - Fact Sheet - Drug Identification Number (DIN) to Natural Product Number (NPN) Transition. The NNHPD is currently looking at transitioning this product accordingly."	Remove
Glutamic acid and its salts		gastric acidifiers	U	Feb-99	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 4 (an amino acid) of the Natural Health Products Regulations. Amino acid listings in PDL will remain.	Remove
Inositol niacinate			U	Dec-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations	Remove
Ipecac and its extracts and derivatives.		for use other than as an emetic	U	Oct-98	AKA carapichea ipecacuanha. CONFIRMED NHP: Classified as an NHP under Schedule 1 item 1 (plant or plant material) of the NHP Regulations.	Remove

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Iron and its salts and derivatives.		in preparations containing 30 mg or less elemental iron per solid dosage unit or 5 ml oral liquid	U		CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations	Remove
Methyl salicylate.		in liquid dosage forms in concentrations up to and including 30%	U		Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. Appears to be a restriction of up to a maximum concentration of 1% in buccal, dental, and topical products for non-medical purposes. LNHPD lists products such as methyl salicylate (oil of wintergreen 100%) as having an NPN. CONFIRMED WITH HC: "The restrictions associated with the substance in the NHPID are indeed applicable to their use as non-medical ingredient"	Remove
Niacin (nicotinic acid).		in immediate-release formulations except when sold in an immediate-release oral dosage form that provides more than 500 milligrams per dosage unit or per daily dose	U	10-Mar	Classified as an NHP under Schedule 1, item 3 (a vitamin) of the Natural Health Products Regulations.. A non-NHP in forms listed on the Prescription Drug List as follows: Nicotinic acid when sold in (a) a modified-release oral dosage form that provides 500 mg or more per dosage unit or per daily dose; or (b) an immediate-release oral dosage form that provides more than 500 mg per dosage unit or per daily dose, There is a note in NHPID to restrict to topical use only - I believe this is for non-medical purposes only because there are products listed in the LNHPD that are oral with less than 500mg. Therefore, confident this is NHP. CONFIRMATION BY HC (DEC 17, 2019) : "As for niacin, this substances is also associated with a non-NHP role based on the following rationale - A non-NHP bacuase listed in the PDL as follows: Nicotinic acid when sold in (a) a modified-release oral dosage form that provides 500 mg or more per dosage unit or per daily dose; or (b) an immediate-release oral dosage form that provides more than 500 mg per dosage unit or per daily dose. Products containing these substances in those situations, in addition to administration by puncturing the dermis as per schedule 2 to the NHPR, would not be considered NHPs. " Schedule I listing (PDL listing) for nicotinic acid remains in NDS.	Remove

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Niacinamide		for topical use	U	Oct-98	Classified as an NHP under Schedule 1, item 3 (a vitamin) of the Natural Health Products Regulations. Appears to be a restriction to topic route of administration for non-medicinal ingredients purposes only. CONFIRMED WITH HC: "The restrictions associated with the substance in the NHPID are indeed applicable to their use as non-medicinal ingredient"	Remove
Niacinamide.		oral	U	Oct-98	Classified as an NHP under Schedule 1, item 3 (a vitamin) of the Natural Health Products Regulations. Appears to be a restriction to topical route of admin for non-med purposes only. Oral products listed in Natural Health Database with NPN number so fairly confident are NHPs.	Remove
Nicotine and its salts		<p>when sold in the form of a chewing gum containing 4 mg or less of nicotine per dosage unit</p>	U	Nov-00	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations when the following conditions are met: (a) in natural substances; (b) in the form of a chewing gum containing 4 milligrams or less of nicotine per dosage unit; (c) in the form of a transdermal patch with a delivery rate of 22 milligrams or less of nicotine per day; (d) in a form to be administered into the oral cavity by means of a non-active device (one that operates on energy generated by the human body or by gravity) that delivers 4 milligrams or less of nicotine per dose for buccal absorption; or (e) in the form of a lozenge containing 4 milligrams or less of nicotine per dosage unit. Non-NHP when listed on PDL. PDL listing would remain in NDS. This Unscheduled listing would be removed	Remove

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Nicotine and its salts		<p>when sold in the form of a transdermal patch with a delivery rate of 22 mg or less of nicotine per day</p>	U	Nov-00	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations when the following conditions are met: (a) in natural substances; (b) in the form of a chewing gum containing 4 milligrams or less of nicotine per dosage unit; (c) in the form of a transdermal patch with a delivery rate of 22 milligrams or less of nicotine per day; (d) in a form to be administered into the oral cavity by means of a non-active device (one that operates on energy generated by the human body or by gravity) that delivers 4 milligrams or less of nicotine per dose for buccal absorption; or (e) in the form of a lozenge containing 4 milligrams or less of nicotine per dosage unit. Non-NHP when listed on PDL. PDL listing would remain in NDS. This Unscheduled listing would be removed	Remove
Nicotine and its salts		<p>when sold in a form to be administered into the oral cavity by means of a non-active device (one that operates on energy generated by the human body or by gravity) that delivers 4 mg or less of nicotine per dose for buccal absorption;</p>	U	05-Jan	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations when the following conditions are met: (a) in natural substances; (b) in the form of a chewing gum containing 4 milligrams or less of nicotine per dosage unit; (c) in the form of a transdermal patch with a delivery rate of 22 milligrams or less of nicotine per day; (d) in a form to be administered into the oral cavity by means of a non-active device (one that operates on energy generated by the human body or by gravity) that delivers 4 milligrams or less of nicotine per dose for buccal absorption; or (e) in the form of a lozenge containing 4 milligrams or less of nicotine per dosage unit. Non-NHP when listed on PDL. PDL listing will remain in NDS. This Unscheduled listing will be removed	Remove

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Nicotine and its salts		<p>when sold in the form of a lozenge containing 4 mg or less of nicotine per dosage unit</p>	U	06-Jun	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations when the following conditions are met: (a) in natural substances; (b) in the form of a chewing gum containing 4 milligrams or less of nicotine per dosage unit; (c) in the form of a transdermal patch with a delivery rate of 22 milligrams or less of nicotine per day; (d) in a form to be administered into the oral cavity by means of a non-active device (one that operates on energy generated by the human body or by gravity) that delivers 4 milligrams or less of nicotine per dose for buccal absorption; or (e) in the form of a lozenge containing 4 milligrams or less of nicotine per dosage unit. Non-NHP when listed on PDL. PDL listing will remain in NDS. This Unscheduled listing will be removed	Remove
Pancreatic extracts, pancreatin, pancrelipase		except when sold in a dosage form that provides more than 20 000 USP units of lipase activity per dosage unit or indicated for the treatment of pancreatic exocrine insufficiency	U	13-Dec	CONFIRMED NHP: Pancreatic enzymes considered NHP under Schedule 1 item 1, non-human animal material, of the NHP Regulations. Except in concentrations listed on PDL. Products containing pancreatic extracts are listed on LNHPD. PDL listings will remain in NDS. This listing to be removed.	Remove
Papain		as a debriding agent	U	Sep-99	Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. Listed as for topical and dental use only - for non-medicinal purposes only - but need to confirm Interpretation with HC. RESPONSE FROM HC: "The restrictions associated with this substances in the NHPID is indeed applicable to their use as non-medicinal ingredient"	Remove
Pepsin			U		CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations.	Remove
Peptone			U		CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an extract) of the Natural Health Products Regulations	Remove

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Salicylic acid and its salts.		in topical preparations in concentrations up to and including 40% except when sold in topical formulations containing salicylic acid at concentrations greater than 20% and/or with a pH less than 3.0 for a use other than to be applied to warts, corns and calluses)	U	14-Dec	Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. Except when listed in Prescription Drug List: When sold in topical formulations containing salicylic acid at concentrations greater than 20% and/or with a pH less than 3.0, except when sold to be applied to warts, corns or calluses. Also appears to be limited to topical use up to 2% for non-medicinal purposes only - to confirm interpretation with HC, but fairly confident NHP, therefore will remove listing. CONFIRMED WITH hc (EMAIL DEC 17, 2019): "...associated with a non-NHP role based on the following rationale, ...this ingredient is assigned the role of non-NHP, as listed on the Prescription Drug List: When sold in topical formulations containing salicylic acid at concentrations greater than 20% and/or with a pH less than 3.0, except when sold to be applied to warts, corns, or calluses. Products containing these substances in those situations, in addition to administration by puncturing the dermis as per Schedule 2 to the NHPR, would not be considered NHPs.	Remove
Senna and its extracts and derivatives			U		CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations (sennosides and senna organisms)	Remove
Sodium tartrate			U		Listed in Natural Health Products Ingredients Database as non-medicinal ingredient only. Not listed as medicinal ingredient. Listed in Natural Products Database. Not listed in Health Canada Drug Product Database. CONFIRMATION FROM HC: "In the NHPID, both D- and L-tartaric acid as classified as an NHP under Schedule 1, item 2 (an isolate) of the NHPR. Therefore, as the sodium salt of tartaric acid, sodium tartrate would be considered a source ingredient of tartaric acid, an NHP substance."	Remove
Trypsin			U	Dec-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations	Remove

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Ubiquinone			U	Dec-98	Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. Appears to be a restriction to topical use only for non-medicinal purposes, but need to confirm with HC. Oral products listed on Natural Products Database, so fairly confident is NHP CONFIRMATION by HC (email Dec 17, 2019): "The restrictions associated with this substance in the NHPID are indeed applicable to their use as a non-medicinal ingredient"	Remove
Aloe vera latex, its extracts and derivatives[except aloin]		dosage forms for systemic use containing more than 300 mg per dosage unit	III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1 item 1 (plant or plant material) of the NHP Regulations. In stimulant laxatives, aloe vera is considered medicinal at a single dose between 80 and 120 mg for children 6 to 12, and between 120 to 250 mg for those older than 12.	Remove
Aluminum oxide			III	Sep-98	Classified as an NHP under Schedule 1, item 7(a mineral) of the Natural Health Products Regulations. Appears to be restricted to topical use only for non-medicinal purposes only. There are oral products in LNHPD confirming this is the case.	Remove
Belladonna alkaloids and their salts and derivatives		for topical use	III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1 item 1 (plant or plant material) of the NHP Regulations. The presence of this ingredient without conditions on the List of Prohibited and Restricted Cosmetic Ingredients (the Cosmetic Ingredient Hotlist) indicates that there are potentially significant safety issues. This ingredient cannot be used in topical natural health products without the submission of additional evidence for safety.	Remove
Benzocaine and its salts.		for topical use on mucous membranes for teething	III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations (A non-NHP only as an allergenic extract.)	Remove
Berberis vulgaris		Barberry	III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1 item 1 (plant or plant material) of the NHP Regulations.	Remove
Casanthranol			III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an extract) of the Natural Health Products Regulations	Remove

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Deoxycholic acid or its salts.		except when used in an injectable form	III	15-Oct	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations, except when listed in PDL as follows: Deoxycholic acid or its salts, when used in an injectable form. The PDL listing for injectables will remain, this Schedule III listing should be deleted.	Remove
Electrolyte solutions		for oral rehydration	III	Sep-98	CONFIRMED NHP: Listed in LNHPD (Chloride, citrate, glucose, potassium, sodium, zinc)	Remove
Fluoride or its salts (see sodium fluoride).		in oral preparations containing 1 mg or less of fluoride ion per dosage unit	III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations. Except those listed in PDL: Sodium fluoride (in solid oral dosage forms containing more than one milligram of fluoride ion). Note: PDL listings will remain, this Schedule III listing will be removed.	Remove
Heparin and its salts		for topical use	III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. Lipactin on LNHPD. (see below re injectables listings)	Remove
Hydrocortisone or hydrocortisone acetate..		when sold in a concentration that provides 1% or less hydrocortisone in preparations for topical use on the skin in adults and children 2 years of age and over in package sizes containing no more than 30 g	III	14-Dec	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 6 (a synthetic duplicate) of the Natural Health Products Regulations. A non-NHP when listed in the PDL. A copy of the PDL listing will remain in NDS.	Remove
Iodine and its salts and derivatives		for topical use	III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations. The presence of this ingredient without conditions on the List of Prohibited and Restricted Cosmetic Ingredients (the Cosmetic Ingredient Hotlist) indicates that there are potentially significant safety issues. This ingredient cannot be used in topical natural health products without the submission of additional evidence for safety.	Remove

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Lactic acid.		in preparations in concentrations of more than 10%, except when sold in topical formulations containing alpha hydroxy acids alone or in combination at concentrations greater than 30% and/or with a pH lower than 3.0 for a use other than to be applied to warts, corns or calluses	III	14-Dec	CONFIRMED NHP: Classified as an NHP under Schedule 1 item 2 (isolate) of the NHP Regulations. Except when listed on the Prescription Drug List: When sold in topical formulations containing alpha hydroxy acids alone or in combination at concentrations greater than 30% and/or with a pH lower than 3.0, except when sold to be applied to warts, corns or calluses. Other lactic acid products seems to be listed on LNHPD. PDL listing will remain on NDS. This Schedule III listing to be removed.	Remove
Magnesium citrate		cathartics	III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations.	Remove
Magnesium salicylate		except oral dosage forms which also contain choline salicylate	III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. Natural Health Products Ingredient Database notes formulation is topical. Oral products listed on Licensed NHP Database.	Remove
Narcotine and its salts		Noscapine	III	Sep-98	CONFIRMED NHP: AKA Noscapine per Martindale's. Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. The presence of this ingredient without conditions on the List of Prohibited and Restricted Cosmetic Ingredients (the Cosmetic Ingredient Hotlist) indicates that there are potentially significant safety issues. This ingredient cannot be used in topical natural health products without the submission of additional evidence for safety	Remove
Noscapine			III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations	Remove
Povidone - iodine		topical preparations, except in concentrations of 5% or less	III	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations	Remove

NDS listings that will be removed on Jan 2, 2020

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Sodium biphosphate.		cathartics	III	Sep-98	This ingredient is pending a decision on its addition to the Prescription Drug List which would impact the acceptability of an NHP containing phosphate sodium salts equivalent to 20 grams or more of sodium phosphate per oral dose in a 24 hour period and/or products for a purgative indication. However, if added to PDL, the copy of PDL listing would appear in NDS, so this particular listing would be replaced by that one. HC CLARIFICATION via email on Dec 17, 2019: There are no imminent plans to add these substances to the PDL. Currently, these products are scheduled as ethical. Products containing sodium bisphosphate and/or sodium phosphate that would not meet the PDL principles and factors and fully meet the NHP definition as outlined in the NHPR would be classified as NHPs.	Remove
Sodium phosphate.		cathartics	III	Sep-98	This ingredient is pending a decision on its addition to the Prescription Drug List which would impact the acceptability of an NHP containing phosphate sodium salts equivalent to 20 grams or more of sodium phosphate per oral dose in a 24 hour period and/or products for a purgative indication. However, if added to PDL, the copy of PDL listing would appear in NDS, so this particular listing would be replaced by that one. CONFIRMATION FROM HC via email on Dec 17, 2019 "There are no imminent plans to add these substances to the PDL. Currently, these products are scheduled as "ethical" Products containing sodium bisphosphate and/or sodium phosphate that would not meet the PDL principles and factors and fully meet the NHP definition as outlined in the NHPR would be classified as NHPs.	Remove

DPD: Drug Product Database

LNHPD: Licensed Natural Health Products Database

NHPID: Natural Health Products Ingredients Database

NDS listings that will be removed on Jan 2, 2021

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Ephedrine and its salts in combination products		in preparations containing no more than 8 mg per unit dose, with a label recommending no more than 8 mg/dose or 32 mg/day and for use not more than 7 days, and indicated for nasal congestion.	III	06-Apr	CONFIRMED NHP: Classified as an NHP under Schedule 1 item 2 (an isolate) of the Natural Health Products Regulations. It should be noted that this ingredient is subject to additional regulatory requirements in accordance with the Precursor Control Regulations since it is listed on Schedule VI Part 1 of the Controlled Drugs and Substances Act (Max 0.4g ephedrine, 3g pseudoephedrine per package for retail sale). However, confirming combination product status with HC.	At Health Canada's request, ephedrine and pseudoephedrine will continue to be subject to the conditions of sales as outlined in NDS Schedule III until January 2, 2021.
Pseudoephedrine and its salts and preparations in combination products		Note: Pharmacists are advised that in areas where there is evidence of abuse or particular concern about abuse, pseudoephedrine products should not be located in a self-selection area of the pharmacy	III	06-Apr	CONFIRMED NHP: Classified as an NHP under Schedule 1 item 2 (an isolate) of the Natural Health Products Regulations. It should be noted that this ingredient is subject to additional regulatory requirements in accordance with the Precursor Control Regulations since it is listed on Schedule VI Part 1 of the Controlled Drugs and Substances Act (Max 0.4g ephedrine, 3g pseudoephedrine per package for retail sale). However confirming combination product status with HC.	At Health Canada's request, ephedrine and pseudoephedrine will continue to be subject to the conditions of sales as outlined in NDS Schedule III until January 2, 2021.

DPD: Drug Product Database

LNHPD: Licensed Natural Health Products Database

NHPID: Natural Health Products Ingredients Database

NDS listings that will be removed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Arginine and its salts			II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 4 (an amino acid) of the Natural Health Products Regulations	Remove
Artemisia, its preparations, extracts and compounds		except in trace amounts in homeopathic preparations	II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1 item 1 (plant or plant material) of the NHP Regulations.	Remove
Belladonna alkaloids, and their salts and derivatives		except in preparations for topical use or in trace amounts in homeopathic preparations	II	Sep-98	CONFIRMED NHP. Classified as an NHP under Schedule 1 item 1 (plant or plant material) of the NHP Regulations. The presence of this ingredient without conditions on the List of Prohibited and Restricted Cosmetic Ingredients (the Cosmetic Ingredient Hotlist) indicates that there are potentially significant safety issues. This ingredient cannot be used in topical natural health products without the submission of additional evidence for safety.	Remove
Benzyl benzoate			II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations for medicinal use. Is a restriction for topical use, up to 4%, seems to be for non-medicinal purposes only, but need to confirm. Doesn't appear to be any approved products at this time. RESPONSE FROM HC (DEC 17, 2019): "The restrictions associated in the NHPID are indeed applicable to their use as non-medicinal ingredient"	Remove
Boric acid and its salts		in preparations for systemic use, or ophthalmic preparations in concentrations over 2% [Note: does not apply to contact lens solutions intended to be rinsed off prior to insertion in the eye]	II	Dec-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the NHPRegs. This ingredient must be used in accordance with the restrictions set out on the Hotlist when included in topical natural health products, unless additional evidence for safety is submitted. Included in the Hotlist for this ingredient under "Restrictions" are (1) the risk statement "Do not use on broken or abraded skin" (required on the PLA (Product Licence Application) form and label), (2) a subpopulation of "children over 3 years of age" and (3) a maximum concentration of 5%.	Remove

NDS listings that will be removed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Camphor		in oleaginous vehicles and in liquid forms in concentrations greater than 11%	II	Oct-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2, (an isolate) of the Natural Health Products Regulations. Camphor should be used in the minimum quantity required for the non-medicinal ingredient purposes. The presence of this ingredient on the List of Prohibited and Restricted Cosmetic Ingredients (the Cosmetic Ingredient Hotlist) indicates that there are potentially significant safety issues. This ingredient cannot be used in topical natural health products except in accordance with the restrictions set out on the Hotlist unless additional evidence for safety is submitted.	Remove
Cantharides, their preparations and derivatives			II	Sep-98	CONFIRMED NHP: Per PubChem, Cantharidin is a cantharide, Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. This ingredient is on the Restricted Substances list in the Natural Health Products Compliance Guide. Unauthorized products with this ingredient are subject to the risk-based approach to compliance. A product licence must be obtained prior to marketing in Canada	Remove
Ephedrine and its salts in single entity products.		in preparations containing no more than 8 mg per unit dose, with a label recommending no more than 8 mg/dose or 32 mg/day and for use not more than 7 days, and indicated for nasal congestion.	II	06-Apr	CONFIRMED NHP: Classified as an NHP under Schedule 1 item 2 (an isolate) of the Natural Health Products Regulations. It should be noted that this ingredient is subject to additional regulatory requirements in accordance with the Precursor Control Regulations since it is listed on Schedule VI Part 1 of the Controlled Drugs and Substances Act (Max 0.4g ephedrine, 3g pseudoephedrine per package for retail sale). At Health Canada's request, ephedrine and pseudoephedrine will continue to be subject to the conditions of sales as outlined in NDS Schedule III until January 2, 2021.	Remove

NDS listings that will be removed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Esdepallethrin/piperonyl butoxide			II	Sep-98	CONFIRMED NHP for Pyrethrins - already a separate listing for piperonyl butoxide. Esdepallethrin is a type of pyrethrin per Martindale's. Not listed separately in NHPID, but pyrethrins are listed as NHP (see pyrethrins listing). However, piperonyl butoxide listed as NON-NHP in NHPID. Remove this listing and keep only the Piperonyl butoxide listing.	Remove
Histamine and its salts		except for topical use	II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations	Remove
Hyaluronic acid and its salts		preparations in concentrations of 5% or more	II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations	Remove
Hyaluronidase			II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations	Remove
Hydroquinone or its derivatives		When sold in a concentration less than or equal to 2% in preparations for topical use on the skin	II	19-Jun	Classified as an NHP under Schedule 1 item 2 (isolate) of the Natural Health Products Regulations in topical form up to 2%. Unless listed on the PDL: Hydroquinone is listed on the Prescription Drug List for human use as follows: Hydroquinone or its derivatives, when sold in a concentration greater than 2% in preparations for topical use on the skin. The presence of this ingredient on the List of Prohibited and Restricted Cosmetic Ingredients (the Cosmetic Ingredient Hotlist) indicates that there are potential safety issues. This ingredient cannot be used in topical natural health products except in accordance with the restrictions set out on the Hotlist unless additional evidence for safety is submitted. A copy of the PDL listing will remain in NDS.	Remove

NDS listings that will be removed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Hyoscyamine and its salts and derivatives		except for topical use	II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. The presence of this ingredient without conditions on the List of Prohibited and Restricted Cosmetic Ingredients (the Cosmetic Ingredient Hotlist) indicates that there are potentially significant safety issues. This ingredient cannot be used in topical natural health products without the submission of additional evidence for safety.	Remove
Iodine and its salts and derivatives		except topical preparations or in oral doses of 1 mg or less per day	II	Dec-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations. The presence of this ingredient without conditions on the List of Prohibited and Restricted Cosmetic Ingredients (the Cosmetic Ingredient Hotlist) indicates that there are potentially significant safety issues. This ingredient cannot be used in topical natural health products without the submission of additional evidence for safety.	Remove
Ipecac and its extracts and derivatives		when used as an emetic	II	Oct-98	AKA carapichea ipecacuanha. CONFIRMED NHP: Classified as an NHP under Schedule 1 item 1 (plant or plant material) of the NHP Regulations.	Remove
Iron and its salts and derivatives		in preparations with more than 30 mg elemental iron per solid dosage unit or 5 mL oral liquid	II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations	Remove
Mannitol and its salts			II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations	Remove

NDS listings that will be removed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Methenamine and its salts		except for topical use	II	Sep-98	Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. There appears to be a restriction to topical products only up to 16% - believe this is for non-medicinal purposes, but need to confirm with HC. Per DPD, some non-topical products used to exist that were classified as ethicals, they've been cancelled post-market. CONFIRMED WITH HC: "The restrictions associated with the substance in the NHPID are indeed applicable to their use as non-medicinal ingredient"	Remove
Methyl salicylate		in liquid dosage forms in concentrations greater than 30%	II	Sep-98	Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. Appears to be a restriction of up to a maximum concentration of 1% in buccal, dental, and topical products for non-medicinal purposes. LNHPD lists products such as methyl salicylate (oil of wintergreen 100%) as having an NPN. CONFIRMED WITH HC: "The restrictions associated with the substance in the NHPID are indeed applicable to their use as non-medicinal ingredient"	Remove

NDS listings that will be removed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Niacin (nicotinic acid)		in extended-release formulations, except when sold in a modified-release oral dosage form that provides 500 milligrams or more per dosage unit or per daily dose	II	10-Mar	Classified as an NHP under Schedule 1, item 3 (a vitamin) of the Natural Health Products Regulations.. A non-NHP in forms listed on the Prescription Drug List as follows: Nicotinic acid when sold in (a) a modified-release oral dosage form that provides 500 mg or more per dosage unit or per daily dose; or (b) an immediate-release oral dosage form that provides more than 500 mg per dosage unit or per daily dose, There is a note in NHPID to restrict to topical use only - I believe this is for non-medicinal purposes only because there are products listed in the LNHPD that are oral with less than 500mg. Therefore, confident this is NHP. CONFIRMATION BY HC (DEC 17, 2019) : "As for niacin, this substances is also associated with a non-NHP role based on the following rationale - A non-NHP bacuase listed in the PDL as follows: Nicotinic acid when sold in (a) a modified-release oral dosage form that provides 500 mg or more per dosage unit or per daily dose; or (b) an immediate-release oral dosage form that provides more than 500 mg per dosage unit or per daily dose. Products containing these substances in those situations, in addition to administration by puncturing the dermis as per schedule 2 to the NHPR, would not be considered NHPs. " Schedule I listing (PDL listing) for nicotinic acid remains in NDS.	Remove
Phenol		preparations with concentration of more than 20%	II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations (throat lozenges). Concentration not specified on Natural Products Ingredients Database	Remove

NDS listings that will be removed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Physostigmine salicylate.		for oral or topical use	II	Sep-98	Physostigmine listed as an NHP under Schedule 1, Item 2 of NHPR. However, notes that non-NHP when listed in the Prescription Drug List as follows: Physostigmine salicylate (except preparations for oral or topical use only). Not clear whether oral/topical physostigmine salicylate would be NHPs. No products listed in Natural Health Products Database or Drug Product Database. CONFIRMED WITH HC " Classified as an NHP under schedule 1, item 2 (an isolate) of the Natural Products Regulations, It's important to note that this ingredient is a non-NHP under certain circumstances because the Prescription Drug List contains one of its derivatives ("Physostigmine salicylate (except preparations for oral or topical use only)"). When Physistigmine is used ophthalmically as a miotic, the product should be assessed for safety. Orally, physostigmine is very toxic, which will require extensive human safety information". Based on the above, a product that contains physostigmine for ophthalmic use as a miotic agent would not be considered a prescription drug, but an NHP, unless evidence submitted would suggest that prescription status is warranted by meeting the PDL principles and factors. Unless otherwise evidenced, physostigmine salicylate in preparation for oral or topical use would be considered a source ingredient of physistigmine, an NHP substances. Schedule I (PDL listing) will remain.	Remove
Potassium salts.		in oral preparations containing more than 5 mmol per single dose [except potassium bromide, potassium gluconate when sold or recommended for administration to cats, potassium para-aminobenzoate, potassium citrate when recommended for the treatment of renal tubular acidosis and kidney stones]	II	13-Dec	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations - except as listed in PDL. PDL listings will remain. This Schedule II listing will be removed.	Remove
Povidone - iodine		vaginal preparations, except in concentrations of 5% or less	II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations	Remove

NDS listings that will be removed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Pseudoephedrine and its salts and preparations in single entity products			II	06-Apr	CONFIRMED NHP: Classified as an NHP under Schedule 1 item 2 (an isolate) of the Natural Health Products Regulations. It should be noted that this ingredient is subject to additional regulatory requirements in accordance with the Precursor Control Regulations since it is listed on Schedule VI Part 1 of the Controlled Drugs and Substances Act (Max 0.4g ephedrine, 3g pseudoephedrine per package for retail sale) At Health Canada's request, ephedrine and pseudoephedrine will continue to be subject to the conditions of sales as outlined in NDS Schedule III until January 2, 2021.	Remove
Pyrethrins			II	Sep-98	CONFIRMED NHP: Listed as Pyrethrin I and II. Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. However, piperonyl butoxide is a NON-NHP and most products on the market have both. The piperonyl butoxide listing will remain, thus any combo products will need to follow NDS.	Remove
Racemethionine			II	Sep-98	CONFIRMED NHP: AKA DL -Methionine, DL -Methioninum, methionine per Martindale's. DL -Methionine- Classified as an NHP under Schedule 1, item 6 (a synthetic duplicate) of the Natural Health Products Regulations	Remove
Rue and its preparations and extracts			II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1 item 1 (plant or plant material) of the NHP Regulations.	Remove

NDS listings that will be removed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Salicylic acid and its salts		when sold to be applied to warts, corns or calluses in topical preparations in concentrations greater than 40%	II	14-Dec	Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. Except when listed in Prescription Drug List: When sold in topical formulations containing salicylic acid at concentrations greater than 20% and/or with a pH less than 3.0, except when sold to be applied to warts, corns or calluses. Also appears to be limited to topical use up to 2% for non-medicinal purposes only - to confirm interpretation with HC, but fairly confident NHP, therefore will remove listing. CONFIRMED WITH hc (EMAIL DEC 17, 2019): "...associated with a non-NHP role based on the following rationale, ...this ingredient is assigned the role of non-NHP, as listed on the Prescription Drug List: When sold in topical formulations containing salicylic acid at concentrations greater than 20% and/or with a pH less than 3.0, except when sold to be applied to warts, corns, or calluses. Products containing these substances in those situations, in addition to administration by puncturing the dermis as per Schedule 2 to the NHPR, would not be considered NHPs.	Remove
Silver nitrate			II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations	Remove
Stramonium, its preparations, extracts and compounds			II	Sep-98	Not in NHPID. However, NHP because are products listed in Licensed NHP Database with NPN vs DIN-HM. NO products listed in DPD.	Remove
Xylose			II	Sep-98	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations	Remove

NDS listings that will be removed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Ephedrine and its salts		in preparations containing more than 8 mg per unit dose, or with a label recommending more than 8 mg/dose or 32 mg/day, or labelled or implied for use exceeding 7 days, or if indicated for other than nasal congestion.	I	02-Feb	CONFIRMED NHP: Classified as an NHP under Schedule 1 item 2 (an isolate) of the Natural Health Products Regulations. It should be noted that this ingredient is subject to additional regulatory requirements in accordance with the Precursor Control Regulations since it is listed on Schedule VI Part 1 of the Controlled Drugs and Substances Act (Max 0.4g ephedrine, 3g pseudoephedrine per package for retail sale). At Health Canada's request, ephedrine and pseudoephedrine will continue to be subject to the conditions of sales as outlined in NDS Schedule III until January 2, 2021.	Remove
Hydrocortisone or hydrocortisone acetate		when sold in a concentration that provides 1% or less hydrocortisone in preparations for topical use on the skin in children under 2 years of age	I	14-Dec	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 6 (a synthetic duplicate) of the Natural Health Products Regulations. A non-NHP when listed in the PDL. PDL listing will remain in NDS. This listing will be removed. Health Canada initially expressed concern about the removal of this product from the NDS however, in their letter received Dec 20, 2019 Health Canada did not request a delay in the delisting of this ingredient	Remove
Hydrocortisone or hydrocortisone acetate.		when sold in a concentration that provides 1% or less hydrocortisone in preparations for topical use on the skin in adults and children 2 years of age and over in package sizes containing more than 30 g	I	14-Dec	CONFIRMED NHP: Classified as an NHP under Schedule 1, item 6 (a synthetic duplicate) of the Natural Health Products Regulations. A non-NHP when listed in the PDL. PDL listing will remain in NDS. This listing will be removed. Health Canada initially expressed concern about the removal of this product from the NDS however, in their letter received Dec 20, 2019 Health Canada did not request a delay in the delisting of this ingredient	Remove
Nicotinyl-tartrate			I	Sep-98	CONFIRMED NHP: AKA Nicotinyl Alcohol Tartrate per Martindale's. Nicotinyl alcohol tartrate is classified as an NHP, because it is used as a source of Niacin, and therefore is considered an NHP under Schedule 1, item 2 (an isolate), of the Natural Health Products Regulations.	Remove

NDS listings that will be removed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Quinidine salts			I	Sep-98	<p>Quinidine bisulfate- Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. This ingredient is pending a decision on its addition to Prescription Drug List which would impact its acceptability as an NHP. Quinidine gluconate-Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. Quinine is listed as an NHP in the NHPID - doses 50mg or less are classified as NHP, others are not because listed on PDL. However, we don't have quinine listed on NDS, other than the PDL listing. Not clear if this will be added to PDL - to confirm with HC. However, if were added to PDL - a copy of PDL listing would be added to Schedule I, which would address it. Therefore, this listing is likely to be removed. Will leave until confirm with HC. CONFIRMED WITH HC via email on Dec 17, 2019: "There are no imminent plans to add these substances to the PDL. Currently these products are scheduled as "ethical". Products containing quinidine bisulfate that would not meet the PDL principles and factors as outlined in the above linked guidance document and fully meet the NHP definition as outlined in the NHPR would be classified as NHPs.</p>	Remove

DPD: Drug Product Database

LNHPD: Licensed Natural Health Products Database

NHPID: Natural Health Products Ingredients Database

NDS listings that will be changed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Acetylcysteine			II	Sep-98	<p>DPD Lists acetlcysteine as an ethical product (inhalation, IV, oral solution). However, N-acetyl-L-cysteine is classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations . There are products with n-acetylcysteine listed in LNHPD. Per Martindale's: Acetylcysteine is the N-acetyl derivative of the naturally occurring amino acid, L-cysteine. Acetylcysteine and N-acetyl-L-cysteine listed as the same molecule. Confirmed with HC via email (2020-02-25) that acetylcysteine and L-cysteine as an NHP. The products listed as ethical are listed as ethical because they are indicated for injection (as well as other routes) and therefore are excluded as NHPs under SCHEDULE 2 of NHPR.</p> <p>HC response: "N-Acetyl-L-cysteine is indeed listed with a medicinal role, as classified as an NHP under</p>	<p>Change to: Acetylcysteine, in injectable form</p>
Alverine and its salts		for parenteral use	I	Sep-98	<p>Not on HC databases, but injectables not NHP per Schedule 2 of NHPR.</p> <p>For clarity, will change wording to state in injectable form - parenteral technically means not per GI tract, so could include other forms (ophthalmic)</p>	<p>Change to: Alverine and its salts, in injectable form</p>
Amino Acid solutions		for parenteral use	I	Sep-99	<p>Not on HC databases, but injectables not NHP per Schedule 2 of NHPR.</p> <p>For clarity, will change wording to state in injectable form - parenteral technically means not per GI tract, so could include other forms (ophthalmic)</p>	<p>Change to: Amino Acid solutions, in injectable form</p>
Epinephrine and its salts.		other than in pre-filled syringes intended for emergency administration by injection in the event of anaphylactic reactions to allergens	I	Sep-99	<p>Ingredient classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. Racemic epinephrine products in LNHPD, but EpiPen, etc. in DPD and classified as ethical. This is because a substance that is administered by puncturing the dermis is excluded from NHP per Schedule 2 of NHPR. Potentially, there could be oral or topical NHP products that are currently covered under this listing that would need to be removed from the NDS as they would be NHPs (theoretical only). Therefore, will change listing to keep injectables only.</p>	<p>Change to: Epinephrine and its salts, in injectable form, EXCEPT in pre-filled syringes intended for emergency administration in the event of anaphylactic reactions to allergens</p>

NDS listings that will be changed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Benzocaine and its salts		for parenteral or ophthalmic use	II	Sep-98	<p>CHANGE LISTING - Ingredient is NHP - but injectables are NON-NHP. Ingredient classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations</p> <p>Parenterals are not NHP per s5, Schedule 2 of NHPR, ophthalmic is an NHP that will need to be removed from NDS. Allergenic extracts are Schedule D and so excluded from NHPR via s1 of Schedule 2 to NHPR)</p> <p>For clarity, will change wording to state in injectable form - parenteral technically means not per GI tract, so could include other forms (ophthalmic)</p>	<p>Change to : Benzocaine and its salts, in injectable form</p>
Choline bitartrate		parenteral	II	Sep-98	<p>CHANGE LISTING: Ingredient is NHP, but injectables are NON-NHP. Ingredient is classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations, but only seems to be allowed as a non-medicinal ingredient in NHPs. Notation that the presence of this ingredient without conditions on the List of Prohibited and Restricted Cosmetic Ingredients (the Cosmetic Ingredient Hotlist) indicates that there are potentially significant safety issues. This ingredient cannot be used in topical natural health products without the submission of additional evidence for safety.</p> <p>Regardless, substances administered by puncturing the dermis are excluded from NHPR per Schedule 2.</p> <p>For clarity, will change wording to state in injectable form - parenteral technically means not per GI tract, so could include other forms (ophthalmic)</p>	<p>Change to: Choline bitartrate, in injectable form</p>
Chymopapain		parenteral	II	Sep-98	<p>CHANGE LISTING: Ingredient is NHP, but injectables are NON-NHP. Ingredient classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. However, substances administered by puncturing the dermis are excluded from NHPR per Schedule 2.</p> <p>For clarity, will change wording to state in injectable form - parenteral technically means not per GI tract, so could include other forms (ophthalmic)</p>	<p>Change to: Chymopapain, in injectable form</p>

NDS listings that will be changed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Chymotrypsin		parenteral and ophthalmic	II	Sep-98	CHANGE LISTING: Ingredient is NHP, but injectables are NON-NHP. Ingredient classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. However, parenterals are not NHP per s5, Schedule 2 of NHPR, ophthalmic is an NHP that will need to be removed from NDS. For clarity, will change wording to state in injectable form - parenteral technically means not per GI tract, so could include other forms (ophthalmic)	Change to: Chymotrypsin, in injectable form
Dextrose		sclerosing agents	II	Sep-98	Change listing: Ingredient is NHP, but injectables are not. Ingredient classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. However, sclerosing agents are usually administered by piercing the dermis - therefore sclerosing agents would not be NHPs.	Change to: Dextrose, in injectable form, when used as a sclerosing agent
Heparin and its salts.		except for topical use	II	Sep-99	CHANGE LISTING: Ingredients classified as NHP, but injectables are not - many injectable Heparin products on market. Ingredient classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations. However, any injectable would be excluded from NHP under Schedule 2. For clarity, will use injectable form wording instead of parenteral wording	Change to: Heparin and its salts, in injectable form
Hyoscine and its salts and derivatives [scopolamine]		except Hyoscine butylbromide, when recommended for parenteral use	II	16-Aug	Classified as an NHP under Schedule 1, item 2 (an isolate) of the Natural Health Products Regulations (Transderm-V). However, hyoscine butylbromide (Buscopan) is classified as a NON-NHP. There is also a PDL listing for hyoscine butylbromide, for parenteral use, which will remain in NDS. Question to HC: Please confirm that hyoscine butylbromide is a non-NHP while scopolamine/hyoscine with the butylbromide would be an NHP. Response from HC via email on Dec 17, 2109 "Yes, this is consistent with the information outlined in the NHPID"	Change to Hyoscine butylbromide (Butylscopolamine bromide), except when recommended for injectable use AND Hyoscine (scopolamine), in injectable forms.

NDS listings that will be changed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Magnesium sulfate		for parenteral use	II	Sep-98	CHANGE LISTING: Ingredient is NHP, but injectables are not. Injectable products are exempted from NPH status Ethical Product as per Health Canada Drug Product Database. Non-injectable forms are classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations. For clarity, will change wording to injectable form - parenteral can mean anything non-GI	Change to: Magnesium sulfate, in injectable form
Norepinephrine and its salts		levarterenol, noradrenaline	II	Sep-98	Epinephrine is listed as an NHP, Norepinephrine not listed not listed in Health Canada Natural Products Ingredient Database. Injectable products excluded from NHPR. Injectable formulations listed in Health Canada Drug Product Database as Ethical Products. Potentially, if there were any non-injectable products (could not find any per HC databases), could be NHPs. Is it possible norepinephrine isn't an NHP and epinephrine is?? Like scopolamine butylbromide. CONFIRMED AS AN NHP BY HC: "As per the Merck Index Online, norepinephrine occurs in animals and man, is a sympathomimetic hormone of both adrenal origin and adrenergic orthosympathetic postganglionic origin in man, and it has also been found in plants, e.g. Portulaca Therefore, unless evidenced otherwise, norepinephrine would be an NHP substances, falling under item 2 of Schedule 1 to the NHPR.	Change to: Norepinephrine and its salts (levarterenol, noradrenaline), in injectable form
Pyrethrins/piperonyl butoxide			II	Sep-98	Pyrethrins are an NHP, but piperonyl butoxide is a NON-NHP. (A non-NHP because not a naturally occurring substance included in Schedule 1 of the NHP Regulations.) Will change to remove pyrethrins from the listing - but keep the piperonyl butoxide listing, thus any combo products will need to follow NDS.	Change to: Piperonyl butoxide
Sodium acetate		for parenteral use	II	Sep-98	CHANGE LISTING: Ingredient is NHP, but injectables are not. Injectable products are exempted from NPH status Ethical Product as per Health Canada Drug Product Database. Non-injectable forms are classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations. For clarity, will change wording to injectable form - parenteral can mean anything non-GI	Change to: Sodium acetate, in injectable form

NDS listings that will be changed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Sodium biphosphate		for parenteral use	II	Sep-98	Non-NPH- as this listing is for injectable use. Will change wording for clarity to injectable, as only injectables excluded from NHPR. Parenteral means non-GI which could be cause for confusion (could technically include other non-injectable forms)	Change to: Sodium biphosphate, in injectable form
Sodium chloride		single ingredient solutions for parenteral or ophthalmic use in concentrations of more than 0.9% [NOTE: Does not apply to contact lens solutions intended to be rinsed off prior to insertion into eye]	II	Oct-98	CHANGE LISTING: Ingredient is NHP, but injectables are not. Ingredient classified as an NHP under Schedule 1, item 7 (a mineral) of the Natural Health Products Regulations, except a Non-NPH when used in injectable formulations. The ophthalmic products with concentrations of greater than 0.9% would be NHPs theoretically and should be removed from NDS. Will keep the parenteral - but will change wording to use term injectable instead.	Change to: Sodium chloride, single ingredient solutions for injectable use in concentrations of more than 0.9%
Sodium citrate		for parenteral use	II	Sep-98	CHANGE LISTING: Ingredient is NHP, but injectables are not. Ingredient classified as an NHP under Schedule 1, item 2 (an isolatel) of the Natural Health Products Regulations. A Non-NPH when used in injectable formulations. The ophthalmic products with concentrations of greater than 0.9% would be NHPs theoretically and should be removed from NDS. Will keep the parenteral - but will change wording to use term injectable instead.	Change to: Sodium citrate, in injectable form
Sodium iodide		for sclerosing	II	Sep-98	Listed in Natural Health Products Ingredient Database but NPH status not noted. However, sclerosing agents are usually administered by piercing the dermis - therefore sclerosing agents would not be NHPs	Change to: Sodium iodide, in injectable form, when used as a sclerosing agent
Sodium phosphate		for parenteral use	II	Sep-98	Non-NPH- as this listing is for injectable use. Will change wording for clarity to injectable, as only injectables excluded from NHPR. Parenteral means non-GI which could be cause for confusion (could technically include other non-injectable forms)	Change to: Sodium phosphate, in injectable form

NDS listings that will be changed on January 2, 2022

Drug Name	Footnote	Comment	Schedule	Date	Notes (includes info from HC databases)	Required change to NDS (Indication to remove is for the specific listing only, other listings with the same ingredient may remain in NDS)
Strontium and its salts		for parenteral use	II	Sep-98	CHANGE LISTING: Ingredient is NHP, but injectables are not. Ingredient classified as an NHP under Schedule 1, item 7 of the Natural Health Products Regulations. A Non-NPH when used in injectable formulations. For clarity, will change wording to injectable form - parenteral can mean anything non-GI	Change to: Strontium or its salts, in injectable form
Vitamins		any parenterals not otherwise included in Schedule I	II	Sep-98	Non-NPH- as this listing is for injectable use. Will change wording for clarity to injectable, as only injectables excluded from NHPR. Parenteral means non-GI which could be cause for confusion (could technically include other non-injectable forms)	Change to: Vitamins, in injectable form, except those listed in Schedule I

DPD: Drug Product Database

LNHPD: Licensed Natural Health Products Database

NHPID: Natural Health Products Ingredients Database

PEBC UPDATE

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2020 Annual Board Meeting Summary



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The Pharmacy Examining Board of Canada held its Annual Board Meeting on February 22, 2020 in Toronto. Standing committees met over the 3 days preceding this meeting. The following are highlights of issues addressed and recommendations made by the Board. For further information, you may contact Board appointees, President Dinah Santos or the Registrar-Treasurer, Dr. John Pugsley.

Board Appointments

New appointments to the Board, taking effect at the close of the Annual Board Meeting are:

College of Pharmacists of British Columbia – Gabriella Wong

New Brunswick College of Pharmacists – Heather LeBlanc

2020 Executive Committee

President – Dinah Santos
Vice-President – Melissa Benoit
Past-President – Kaye Moran

Executive Members:

Dr. Suzanne Len
Dr. Terri Schindel

2019 PEBC Statistics

PEBC Pharmacist Register:

There were 1454 names added to the Pharmacist Register by examination in 2019.

Pharmacist Qualifying Examination:

A total of 2736 candidates took the Qualifying Examination-Part I (MCQ) in 2019, compared to 2693 in 2018. A total of 2127 candidates took the Qualifying Examination-Part II (OSCE) in 2019, compared to 2216 in 2018.

There were a total of 19 candidates assessed for non-certification purposes.

Pharmacist Evaluating Examination:

A total of 2073 took the Pharmacist Evaluating Examination compared to 2010 in 2018.

Pharmacist Document Evaluation:

A total of 3623 applicants in 2019 were ruled acceptable for admission into the Evaluating Examination, compared to 2580 in 2018.

PEBC Pharmacy Technician Register:

There were 804 names added to the Pharmacy Technician Register by examination in 2019, bringing the total to 11,065 since 2009.

PEBC UPDATE
The Pharmacy Examining
Board of Canada

Contributor:
J. Pugsley

Committee on Examinations

PEBC continues to monitor evolving scopes of practice to ensure that these practices are reflected in PEBC examinations.

The Committee on Examinations received an update on the development of a new portfolio assessment (Prior Learning Assessment and Recognition) tool for international pharmacy technicians and pharmacists seeking to become pharmacy technicians. This tool will replace the Pharmacy Technician Evaluating Examination and will be piloted in 2020.

The Committee on Examinations discussed the future of sites and frequency of examinations for the Pharmacy Technician Qualifying Examination-Part II (OSPE) following provincial deadlines. As the number of candidates for the Qualifying Examination decrease, PEBC continues to review trends to assist planning the offerings of the Pharmacy Technician Qualifying Examination.

The current remediation requirements after a third attempt for the Pharmacy Technician Qualifying Examination-Part I (MCQ) were reviewed due to limited CE credits available and the elimination of the National Pharmacy Technician Bridging Education Program. In addition to the current requirement of 78 CEUs or 500 hours of supervised practice experience, the following options were recommended and approved by the Board of Directors: 1 full college course from a CCAPP accredited program, or 38 CEUs plus 250 supervised practice hours.

Public Relations Committee

At the February 2020 meeting, the Public Relations Committee discussed communication strategies for encouraging CCAPP Pharmacy Technician graduates to take the Qualifying Examination to become registered pharmacy technicians.

The Committee also reviewed the communication strategies for the transition to Computer-Based Testing (CBT) for the Pharmacy Technician Qualifying Examination-Part I (MCQ).

PEBC continues to present educational sessions and research at conferences.

Members of the Committee will work with a consultant to identify stakeholder needs to better understand PEBC certification processes.

2019 PEBC Sponsorship of Awards for Excellence in Research or Innovation in Assessment of Competence:

AFPC Award: Not Awarded in 2019

CPTA Award was presented to Sharon Lee, Humber College

Computer-Based Testing

Pharmacist Evaluating Examination

In June 2019, PEBC delivered the first Pharmacist Evaluating Examination via Computer-Based Testing (CBT) at Prometric test centres across Canada and in London, England. The second administration of the exam was in January 2020. The exam was administered in each sitting to approximately 1,000 candidates as a single examination day window, with up to three sittings per day. The single day administration provided enhanced examination security. The examination was 4.25 hours in total with 200 scored items.

Pharmacy Technician Qualifying Examination-Part I (MCQ)

PEBC is on track to transition its last MCQ paper and pencil exam to CBT for September 2020. PEBC conducted an attenuation study to determine the impact of shortening the examination with the primary focus of reducing unnecessary redundancy in the content of the exam while maintaining the reliability and pass-fail decision consistency. PEBC staff worked with Prometric's Test Development Team to

conduct the study and the content validity of the exam was confirmed by a panel of practitioner experts.

The results of the study determined the exam could be reduced from 140 to 120 scored examination questions. The 3.75 hours exam delivery will include the tutorial, examination and feedback questionnaire.

Pharmacist Qualifying Examination-Part I (MCQ) – May and November 2019 Administration

In order to enhance examination security, PEBC coordinated with Prometric to reduce the length of the CBT examination window to a two-day window for the May 2019 Pharmacist Qualifying Examination-Part I (MCQ) and the November 2019 exam to a single day window.

Through the use of CBT, PEBC continues to enhance its assessment tools to provide a rigorous and secure certification process.

Strategic Plan 2019-2021

Last February, the Board of Directors finalized a Strategic Action Plan for 2019-2021.

The key strategic areas of the plan include:

1. Ensuring current services are relevant and sustainable
2. Exploring the expansion of services
3. Developing and enhancing strategic relationships
4. Optimizing blueprint and assessment processes
5. Optimizing exam delivery
6. Exploring the impact of technology on processes and operations

Board Meetings

The next Board Meeting and Committee Meetings will be held on October 22-24, 2020 (Mid-Year Meeting). The date of the next Annual Meeting is set for February 20, 2021, with Committee meetings preceding.