

COMMONWEALTH OF MASSACHUSETTS
Board of Registration in Pharmacy

NOTICE OF THE REGULARLY SCHEDULED MEETING OF THE
BOARD OF REGISTRATION IN PHARMACY

March 3, 2022

Webex Information

The regular session is open to the public by video or phone.

For video access click on the following link:

<https://eohhs.webex.com/eohhs/onstage/g.php?MTID=e3a324f6b6187ee5a33a46a16e49c4aff>

To access the meeting by phone:

Call in Number: 1-650-479-3208

Access Code: 2530 138 4462

Attendee: #

If you need reasonable accommodations in order to participate in the meeting, contact the DPH ADA Coordinator [Yulanda Kiner](#), Phone: 617-624-5848 in advance of the meeting. While the Board will do its best to accommodate you, certain accommodations may require distinctive requests or the hiring of outside contractors and may not be available if requested immediately before the meeting.

Agenda

Time	#	Item	Page	Contact
8:00	I	CALL TO ORDER		S. Hamilton
8:02	II	APPROVAL OF AGENDA		
8:05	III	APPROVAL OF BOARD MINUTES <ul style="list-style-type: none">Draft of February 3, 2022 Regular Session Minutes		

8:07	IV	REPORTS <ul style="list-style-type: none"> • Applications approved pursuant to Licensure Policy 13-01 • Monthly report from probation • Board Delegated Review pursuant to Licensure Policy 14-02 • PSUD Report-Policy 17-03 		
8:10	V	FLEX <ul style="list-style-type: none"> • Pharmacy issues related to Covid-19 and the state of emergency • Recommendation Document 22-01: Pharmacy Advisory Committee • Approval of delegates to NABP annual meeting • NABP Annual Meeting resolutions 		
8:15	VI	APPLICATIONS <ul style="list-style-type: none"> • West Springfield Pharmacy & Wellness – New Community Pharmacy • Medminder Pharmacy; DS90072 – Petition to Waiver • Pittsfield Pharmacy – New Community Pharmacy 		
8:45	VII	POLICIES <ul style="list-style-type: none"> • Policy 2020-15: Licensee Scope of Practice • Policy 2021-02: Shared Pharmacy Service Models Including Central Fill, Remote Processing, and Telepharmacy • Policy 2022-02: Extended Absence of a Manager of Record 		

9:00	VIII	FILE REVIEW					
		1	CAS-2021-0904	PHA-2021-0086			Maida Pharmacy, DS2822
		2	CAS-2021-0928	PHA-2021-0089			Birds Hill Pharmacy, DS90094
		3	CAS-2021-0903	PHA-2021-0085			Johnson Compounding & Wellness, DS90089
		4	CAS-2021-0892	PHA-2021-0081			Hopkinton Drug, DS8191
		5	CAS-2021-0989	PHA-2021-0095			Walgreens #9233, DS3407
		6	CAS-2021-1169	PHA-2021-0111			Walgreens #3112, DS2798
		7	CAS-2021-0829	SA-INV-18405			Pepperell Family Pharmacy, DS3541
		8	CAS-2021-0935	PHA-2021-0091			Amerisource Bergen, WD372
		9	CAS-2021-0721	PHA-2021-0061			CVS #632, DS89754
9:45	IX	EXECUTIVE SESSION The Board will meet in Executive Session as authorized pursuant to M.G.L. c. 30A, § 21(a)(1) for the purpose of discussing the reputation, character, physical condition, or mental health, rather than professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual. Specifically, to evaluate the Good Moral Character as required for registration for a pending applicant.				CLOSED SESSION	
10:15	X	M.G.L. c. 112, § 65C SESSION				CLOSED SESSION	
11:30	XI	ADJOURNMENT					

**COMMONWEALTH OF MASSACHUSETTS
BOARD OF REGISTRATION IN PHARMACY**

MINUTES OF THE GENERAL SESSION

Via Remote WebEx Meeting

March 3, 2022

Board Members Present

Sebastian Hamilton, Pharm D, MBA, RPh President
Caryn Belisle, RPh, MBA, President-Elect
Carly Jean-Francois, RN, NP Secretary
Julie Lanza, CPhT
Susan Cornacchio, JD, RN (leaves 1:30 PM)
Jennifer Chin, RPh
John Rocchio, RPh, PharmD (leaves 1:30 PM)
Dr. Richard Lopez, MD
Sami Ahmed, Pharm.D., RPh, BCPS, BCSCP
Delilah Barnes, RPh (leaves at 1:30 PM)
Rita Morelli, PharmD, BCACP, RPh

Board Members Not Present

Dawn Perry, JD
Katie Thornell, RPh, MBA

Board Staff Present

David Sencabaugh, RPh, Executive Director
Monica Botto, CPhT, Assistant Executive Director
Heather Engman, JD, Board Counsel
Michael Egan, JD, Board Counsel
William Frisch, RPh Director of Pharmacy Compliance
Michelle Chan, RPh, Quality Assurance Pharmacist
Richard Harris, Program Analyst
Joanna Chow, Office Support Specialist
Taylor Lee, Office Support Specialist
Joanne Trifone, RPh, Director of Investigations
Nancy Aleid, Compliance Officer
Christina Mogni, RPh, Investigator
Gregory Melton, RPh, Investigator
Julienne Tran, PharmD, Investigator

TOPIC I. Attendance by roll call:

CALL TO ORDER 8:02 AM

A quorum of the Board was present, established by roll call. President Sebastian Hamilton chaired the meeting and he explained that the Board of Pharmacy was recording the meeting.

Roll call attendance: J. Lanza, yes; S. Hamilton, yes; C. Belisle, yes; D. Barnes; J. Rocchio, yes; J. Chin, yes; S. Cornacchio, yes; R. Lopez, yes; S. Ahmed, yes; R. Morelli, yes; C. Jean-Francois, yes.

Topic II.

Approval of Agenda

TIME 8:05 AM

Agenda 03/03/03

DISCUSSION:

Defer: File Review cases: #1, #2, #3, #4, #6, #8

Ed introduces APPE Students: Patricia Ryan MCP Worcester

Heather introduces new staff attorney: Michael Egan, JD

ACTION:

Motion by S. Ahmed, seconded by J. Lanza and voted unanimously by those present to approve the agenda with no noted change by roll call vote.

Topic III

Approval of Board Minutes

TIME: 8:06 AM

Minutes

1. Draft 2/3/22

Change: no changes

Action:

Motion by S. Ahmed seconded J. Lanza and voted unanimously to approve the regular session minutes of 2/3/22 with no noted changes by roll call vote.

TOIC IV

Reports

Applications approved pursuant to Licensure Policy 13-01

Time: 8:07 AM

Presented by: R. HARRIS

Discussion: R. HARRIS reported that there have been 26 Change in Manager applications approved via Staff Action since the last Board Meeting that took place on February 3rd, 2022.

So noted.

TOPIC IV

REPORTS

Monthly Report from Probation

Time: 8:08 AM

Presented by: R. HARRIS

Discussion: R. HARRIS reported that three licensees have successfully completed their probation monitoring since the last Board meeting. Currently, there are 16 active probation monitoring cases.

So noted.

TOPIC IV

REPORTS

Monthly Report from BDCR pursuant to Policy 14-02

Time: 8:09 AM

Page 2 of 11

Draft Minutes General Session: 3/3/22

BOP Approved: 4/7/22

Presented by: D. SENCABAUGH

Discussion: D. SENCABAUGH reported two approvals from the Board Delegated Review that took place in February. Authorization was given to approve renewals of Petition for Waivers for Coram CVS (DS3601) and New England Lifecare (DS3513) respectively.

So noted.

TOPIC IV**REPORTS****PSUD report by Staff Action 17-03****Time: 8:09 AM**

Presented by: E. TAGLIERI

Discussion: E. TAGLIERI reported that there are currently 12 participants actively enrolled in the PSUD program. One participant chose to withdraw from the program and voluntarily surrender their license. Both the Public and Physician members of five years have resigned from the committee. A new public member is currently pending approval and appointment while the Physician position is currently available and open for referral.

So noted.

TOPIC V**Flex****1. Pharmacy Issues related to Covid-19 and state of emergency.****Time: 8:10 AM**

Presented by: D. SENCABAUGH

Nothing to report.

2. Recommendation Document 22-01: Pharmacy Advisory Committee**Time: 8:10 AM**

Presented by: W. FRISCH

Discussion: The first 2022 meeting of the Pharmacy Advisory Committee is scheduled for Wednesday, March 30th, at 9AM. The topic of environmental monitoring best practices is being brought forward primarily due to impending changes in USP <797> that will require more frequent environmental sampling, particularly surface sampling, which is proposed to be monthly.

It is thought that many sterile compounders may conduct this more frequent sampling “in-house” versus having it done by third party vendors so additional guidance may be needed. Also, feedback from the field indicates that some facilities could use improvement in their environmental sampling plan. For example, taking samples at times that may not be representative of the actual compounding environment such as immediately after a deep cleaning. Also, as another example, some facilities may have an inadequate number of sampling locations for the size of the compounding spaces.

Action: Motion by J. LANZA, seconded by S. AHMED, and voted unanimously by roll call of those present, to have C. BELISLE advance Recommendation Document 22-01 to the Pharmacy Advisory Committee and J. LANZA to assist as needed.

3. Approval of delegates to NABP annual meeting

Time: 8:15 AM

Presented by: D. SENCABAUGH

Discussion: The following Board members have stated that they plan to attend the NABP annual meeting: S. HAMILTON, J. ROCCHIO, K. THORNELL, and J. LANZA.

Action: Motion by C. BELISLE, seconded by D. BARNES, and voted unanimously by roll call of those present, to have S. HAMILTON as the Board's delegate and J. ROCCHIO and K. THORNELL as alternates.

4. NABP Annual Meeting resolutions

Time: 8:17 AM

Presented by: D. SENCABAUGH

Discussion: At the NABP annual meeting, there will be votes on any resolutions submitted from the states.

Action: Motion by J. LANZA, seconded by C. JEAN-FRANCOIS, and voted unanimously by roll call of those present, to allow the delegate or alternate to vote on the resolutions on behalf of the Board.

TOPIC VI

Applications

1. West Springfield Pharmacy & Wellness

New Community Pharmacy

TIME: 8:22 AM

Represented by: Ajay Desai

Recusal: none

Discussion:

Mr. Desai states that he plans on opening a community pharmacy in West Springfield to cater to all patients and provide basic pharmacy services, including immunizations and non-sterile compounding. He hopes to expand these services in the future to provide different types of testing including blood pressure and glucose monitoring. West Springfield pharmacy also plans on educating a local college with a pharmacy school in the area to teach the traditional and business side of pharmacy. Board member S. Hamilton inquiries about the staffing and security at the facility. Mr. Desai responds that

he plans on just having himself and a part time staff pharmacist as needed, along with a full-time technician, and intern. Mr. Desai states that the facility will have a full security system with cameras and motion sensors and may have a large cabinet to store all controlled substances in a non-visible location. S. Hamilton also inquires as to whether the pharmacy plans on implementing delivery services, and Mr. Desai states that they will have delivery services considering the industry is heading in that direction. S. Hamilton asks about securing the integrity of the medication from the time that it is filled to the time that the patient receives it to prevent diversion. A. Desai responds that confirmation with the patient is the best way to ensure that this doesn't happen while also keeping track of signatures and payments. Board staff B. Frisch notes the advisory on best delivery practices and suggests he refer to those documents. B. Frisch also inquires about compliance packaging. A. Desai responds that they won't begin doing that immediately but will reach out to pharmacies that are doing it for some guidance. B. Frisch also refers to 247 CMR 9 and suggests that A. Desai review it before engaging in compliance packaging. C. Belisle inquires about the blueprints provided by the applicant specifically as they relate to non-sterile compounding. She states that the bench where non-sterile compounding is very close to the drive-thru window and if there are any concerns between the window opening and closing if non-sterile compounding were to occur. A. Desai responds that the drive thru window does not yet exist, and they would have to open a window. A. Desai states that it would be a concern and a better location for the compounding would be to the right of where C. Belisle is referring to. C. Belisle inquires as to whether the pharmacy will be engaging in hazardous medications and A. Desai responds that they won't be doing that initially however, if a need arises for it, they will consider doing it. C. Belisle asks the applicant if he is familiar with USP 800, NIOSH list, and safe handling of hazardous meds. A. Desai responds that he is somewhat familiar but would review the documents when the time comes. B. Frisch states that if the applicant were to decide to engage in hazardous compounding that would require a separate license once the new licensing categories are promulgated. R. Morelli inquires about the applicant's experience and if he has ever been a manager of record. A. Desai states that he has. In the past he had managed two pharmacies and is currently a staff pharmacist but not a pharmacist in charge.

Motion to approve the new community pharmacy pending successful inspection made by C. Belisle; Seconded by J. Rocchio, then Board Members presented voted unanimously by rollcall to approve motion.

2. Medminder Pharmacy DS90072
Represented by: Dr. Thuan Nuygen

Petition to Waiver

TIME: 8:31

Recusal:

Discussion:

Manager of Record (MOR) Nuygen is requesting an extension of the waivers he had requested back in 2015. S. Hamilton asks if the scope of practice has changed and T. Nuygen responded that their scope of practice has not changed. The new request is to waive 247 CMR 9.01 (16). T. Nuygen states that their scope of practice has not changed and the bread and butter at Medminder focuses on customers who have compliance packaging and utilizing the Medminder pill device and come to the pharmacy for assistance with adhering to their maintenance medications. T. Nuygen states that compounding is not

something that they generally practice and currently don't do any compounding. They are requesting a waiver to continue focusing on multi-dose packaging operations. They are currently having difficulty keeping up with operations and space wise, they don't think they can devote additional space for compounding operations and don't want to reduce their ability to serve patients.

Motion made by D. Barnes to approve the current waivers in addition to the new CMR elimination of compounding for the Medminder system; Seconded by R. Morelli, then Board Members presented voted unanimously by rollcall to approve motion.

3. Pittsfield Pharmacy New Community Pharmacy

TIME: 8:40 AM

Represented by: Tatianna Fuster

Recusal:

Discussion:

T. Fuster states that she was a pharmacy manager working for CVS for 9 years and as a pharmacy for the past 7 years one of the pharmacies being Pittsfield pharmacy. She found that there was a need to create a community pharmacy. She will have 2 pharmacist one of them being herself and another staff pharmacist along with 4 technicians- one of whom is nationally certified. She states that not all staff members will work at the same time and the technicians will rotate. She intends on completing non-sterile compounding and plans to grow the business if there is a need. Free delivery services will be essential as there appears to be a need for deliveries considering the area has an underserved population, and most of these individuals do not have cars or transportation. In the beginning, she will not do any blister packaging and may consider it in the future if there is a demand for it. T. Fuster states that she is familiar with NIOSH and hazardous materials, but she will not practice compounding of hazardous materials in the beginning. If she will, she states that her and her staff will go through the necessary trainings. She will offer same day delivery and that only one other pharmacy in the area offers in the Berkshire County. S. Ahmed inquires if there is a voicemail set up if an individual does not have access to email or texting. T. Fuster responds that she does have a telephone system installed called Nextiva that will have extensive services to call, text, and leave messages. S. Cornacchio states that she noticed that a patient could contact T. Fuster when the pharmacy is closed on Sundays but did not see a mechanism for the patient to receive a response if they had an urgent need or a question about a medication. T. Fuster responds that all messages that are sent when the pharmacy is closed get delivered straight to her cellphone. She states that if there is a need for the pharmacy to be open on Sunday's she is willing to open her pharmacy that day as well and will file necessary paperwork. T. Fuster states that she doesn't see a need for the pharmacy to be open on Sundays as there are two other pharmacies in the area that are open on that day. T. Fuster states that if her customers need her on Sundays, she will provide services for them that day. S. Hamilton asks the applicant to talk about the security of the facility given its size. T. Fuster responds that the building is small, and she had a limited number of options. She states the small space allows her to make the pharmacy very secure and is enough space to work comfortably but also enough to be extended. S. Hamilton asks if the pharmacy is a drive thru or if patients can come into the pharmacy. T. Fuster states that patients can come into the pharmacy because it has a retail and immunization space. She states that the pharmacy has a spectacular security system, as it was previously a medical office and is about 303 square feet. S. Hamilton asks if the applicant plans on maintaining proper storage conditions for vaccinations to which T. Fuster responds "of course." B. Frisch asks about the separate wall between the prescription

area and will call area with concerns about the supervision of staff while the pharmacist is in the back working. T. Fuster responds that the prescription and cash register area have a large window opening in between its which provides direct opportunity to supervise all staff in the pharmacy. R. Morelli inquiries about the bathroom towards the end of the pharmacy and if it was open for public use, and if so, what security measures were in place to protect the pharmacy. T. Fuster responds that the bathroom that is seen on the plans is only for pharmacist use, and everyone else uses the bathroom in the retail space. T. Fuster responds that there is a small retail space, a vaccination room, and a storage room for record keeping that is closed off, along with a break room and bathrooms. B. Frisch asked for an updated drawing of the entire pharmacy space. C. Belisle asks about the plans and whether they depict just the pharmacy space or the pharmacy and retail space. D. Sencabaugh responds that the board only asks for drawings of the licensed pharmacy space as we do not license the entire space and the information that was sent by the applicant was adequate. M. Chan states that the immunization space would not be part of the licensed space because the public can enter it. T. Fuster states that she can submit the plans for the entire space to the board. R. Harris asks if the applicant has an anticipated start date, and she states that she is ready to start whenever she receives her licensing information from all applicable agencies.

Motion made by S. Hamilton to approve the application as submitted pending successful inspection and submission of the additional plans; Seconded by D. Barnes, then Board Members presented voted unanimously by rollcall to approve motion.

TOPIC VII**Policies****1. Policy 2020-15: Licensee Scope of Practice****Time: 8:55 AM****Presented by:** M. CHAN

Discussion: All the changes to this policy involve pharmacy technician duties especially those of certified technicians who would now be permitted to make entries into Schedule II perpetual inventories.

There were also a few other clarifying changes regarding automated dispensing devices and the handling of Schedule II medications.

Action: Motion by J. LANZA, seconded by C. BELISLE, and voted unanimously by roll call of those present, to approve the policy changes.

2. Policy 2021-02: Shared Pharmacy Service Models Including Central Fill, Remote Processing, and Telepharmacy**Time: 9:06 AM****Presented by:** M. CHAN

Discussion: There was a small change to this policy in regard to the Central and Remote Processing section. The title was changed to just "remote processing" to eliminate confusion

with central fill and the term "off-site" was added to this section for further clarification. A memo that had been attached for non-resident pharmacies was also removed.

J. ROCCHIO had several questions about other sections of the policy that will be addressed in a future meeting.

Action: Motion by J. ROCCHIO, seconded by R. MORELLI, and voted unanimously by roll call of those present, to defer the vote on the changes.

3. Policy 2022-02: Extended Absence of a Manager of Record

Time: 9:04 AM

Presented by: M. CHAN

Discussion: This policy replaces policy 98-010 and provides additional details regarding the naming of an Interim Manager should the MOR be away from the position for an extended period of time. Much of the language was taken from the DRAFT regulations at 247 CMR 9.00 but some additional language was added regarding Board notification and the allowance for an existing MOR of another pharmacy to serve as an Interim Manager for up to 100 days.

Action: Motion by J. ROCCHIO, seconded by R. MORELLI, and voted unanimously by roll call of those present, to approve the policy.

TOPIC VIII

File Review

Case #1/CAS-2021-0989

PHA-2021-0095

Walgreens #9233, DS3407

Time: 09:16 AM

RECUSAL: P. RYAN recused and was not present for the discussion or vote in this matter.

DISCUSSION: G. MELTON presented and summarized the investigative report that pertained to this matter.

- On October 8, 2021, OPP Investigator John Murray conducted a retail compliance inspection at WAG 9233. During a CII audit, he discovered that WAG 9233 failed to properly report an unknown loss of unknown loss of 40 amphetamine 30mg mixed salts tablets discovered on or about April 26, 2021.
- WAG 9233 explained that a loss of 30 amphetamine 30mg tablets was initially reported to BORP on May 3, 2021. WAG 9233 asked for an extension on submitting a final RLCS. Then, WAG 9233's pharmacy integrity and loss prevention teams conducted further audits on May 11, 2021. The internal investigation found an additional 10 amphetamine 30mg tablets missing for a total of 40 missing tablets. WAG 9233 indicated that the internal investigation attributed the losses to two separate dispensing errors but did not provide any evidence to support its conclusion.
- WAG 9233's MOR explained that he was not aware of BORP's reporting requirements for RLCS. He then attested that he reviewed BORP Policy 2018-05 and, going forward, he would ensure that reports of loss were filed in a timely fashion.

ACTION: Motion by J. CHIN, seconded by R. MORELLI, and voted unanimously by those present, to refer the matter (PHA-2021-0095), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Case #2/CAS-2021-0829

SA-INV-18405

Pepperell Family Pharmacy, DS3541

Time: 9:19 AM

RECUSAL: NONE

DISCUSSION: C. MOGNI presented and summarized the investigative report that pertained to this matter.

- Inspectional deficiency cited for the improper storage of Moderna COVID vaccine in a freezer without a thermometer or temperature logs observed during an inspection (ISP-16762) conducted on 8/25/2021. During the inspection a thermometer was placed into the freezer and was observed above the acceptable storage temperature. The Pharmacy voluntarily ceased immunizing and quarantined the Moderna vaccine and implemented a continuity of care plan with Ayer Pharmacy. The POC submitted indicated a new freezer and thermometer were installed on 8/29/2021 and staff signed the Pharmacy's "Policy and Procedure on Vaccine Storage 08/30/2021" with the requirement to record twice daily temperatures for the refrigerator and the freezer.
- MOR Ezzio reported that until 6/1/2021, the Moderna vaccine was stored in the refrigerator as it was used within 30 days of receipt. Only 280 doses received on 6/1/2021 were stored in the freezer which coincided with a slowdown in immunizations. The Pharmacy staff overlooked freezer temperature monitoring as they were overwhelmed, understaffed, and feeling a dramatic increase in volume. The quarantined Moderna vaccine were wasted into a Sharps container. A letter was sent to patients who were administered the improperly stored vaccine and attempts were made to contact them by phone in September 2021. In a clarified response on 1/21/2022, the Pharmacy provided all required information per MIIS reporting for Moderna vaccines administered 3/9/2021 to 8/24/2021 including off-site clinics.
- CA: The Pharmacy will continue to log freezer and refrigerator temperatures at the opening and closing of day. All pharmacists and CPhTs who vaccinate were mandated to complete "COVID-19 Vaccine: Storage, Handling, Administration, and Safety" (3.5 CE). Proof of completion in October 2021 was provided for MOR Ezzio, Pharmacist Hubbard, Pharmacist Tahmasbi, CPhT Lane, and CPhT Speidel.

ACTION: Motion by C. BELISLE, seconded by S. CORNACCHIO, and voted unanimously by those present, to ELEVATE the matter (SA-INV-18405) to a complaint, and refer the complaint to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND, as well a request that the MOR follow

Policy 2020-05: Proper Storage of Refrigerated and Frozen Medications by notifying the patients involved and their PCP by letter and recommend further consultation regarding revaccination.

Case #3 /CAS-2021-0721

PHA-2021-0061

CVS #632, DS89754

Time: 09:30 AM

RECUSAL: S. CORNACCHIO and J. ROCCHIO recused and were not present for the discussion or vote in this matter.

DISCUSSION: Intern P. RYAN presented and summarized the investigative report that pertained to this matter.

- Failure to comply with the requirements of a change in MOR and Board Policy 98-010 for an extended leave of a MOR.
- OPP Investigator Cheryl Lathum conducted a retail compliance inspection on 07/28/2021 and observed that former MOR Feldhouse was still listed as the MOR even though she has not worked in this capacity since mid-January 2021.
- Current MOR Hemingway indicated that she became the interim MOR of CVS #632 effective July 10, 2021, and became the permanent MOR on August 5, 2021.
- District Leader Jay Fregeau noted that Former MOR Feldhouse was the acting MOR at the Pharmacy through July 9, 2021. Between mid-January 2021 and July 9, 2021, Former MOR Feldhouse was performing all MOR duties. Additionally, Former MOR Feldhouse was utilized to help with the implementation of in-store COVID vaccines at CVS. Due to the changing landscape of the COVID vaccine rollout, she intermittently resumed normal duties at the Pharmacy and was pulled from her role multiple times to support other stores.
- Current MOR Hemingway stated she will continue to be the MOR for the foreseeable future at CVS #632. She noted that when she is no longer the manager at this location her manager will submit the required paperwork to licensing and the Board in a timely manner.
- A retail compliance inspection conducted on 10/28/2021 was deemed satisfactory.

ACTION: Motion by D. BARNES, seconded by R. MORELLI, and voted unanimously by those present, to DISMISS the matter (PHA-2021-0721), No Discipline Warranted, Remediation Complete.

Topic IX: Executive Session Call to Order: Time: 9:42 AM
By: S. Hamilton reads the executive session language and requests a motion to enter executive session.

Action: A motion was made by to J. Chin enter Executive Session; Seconded by C. Jean-Francois and Board Members present voted unanimously by roll call to approve motion. Roll call attendance: J. Lanza, yes; S. Hamilton, yes; C. Belisle, yes; D. Barnes; J. Rocchio, yes; J. Chin, yes; S. Cornacchio, yes; R. Lopez, yes; S. Ahmed, yes; R. Morelli, yes; C. Jean-Francois, yes.

Topic X: 65C Sessions MGL c. 112 section 65C Time: 10:33 AM

DISCUSSION: None

ACTION: President S. Hamilton request a motion to enter 65C.

At 10:33 AM J. Lanza, seconded by C. Jean-Francois and voted unanimously by all those present to enter 65C by roll call vote.

Lunch 11:50 AM to 12:30 pm

D. Barnes leaves meeting at 1:30 PM

J. Rocchio leaves meeting at 1:30 PM
S. Cornacchio leaves meeting at 1:30 PM

Topic XI

ADJOURNMENT OF MEETING

TIME: 1:53 PM

ACTION: Motion by C. Jean-Francois seconded by J. Lanza and voted unanimously by those present, to adjourn from General Session by roll call vote.

EXHIBITS USED DURING THE OPEN SESSION OF THE MEETING

1. Draft Agenda of the 3/3/22 General Session
2. Draft Minutes of the 2/3/33 Meeting
3. Report on Applications approved pursuant to Licensure Policy 13-01
4. Report on probation
5. Report on Board Delegated Complaint Review to licensure policy 14-02
6. Report on PSUD 17-03
7. West Springfield Pharmacy & Wellness – New Community Pharmacy
8. Medminder Pharmacy; DS90072 – Petition to Waiver
9. Pittsfield Pharmacy – New Community Pharmacy
10. Policy 2020-15: Licensee Scope of Practice
11. Policy 2021-02: Shared Pharmacy Service Models Including Central Fill, Remote Processing, and Telepharmacy
12. Policy 2022-02: Extended Absence of a Manager of Record
13. CAS-2021-0989 PHA-2021-0095 Walgreens #9233, DS3407
14. CAS-2021-0829 SA-INV-18405 Pepperell Family Pharmacy, DS3541
15. CAS-2021-0721 PHA-2021-0061 CVS #632, DS89754

Respectfully Submitted,
Carly Jean-Francois, NP, Secretary