

**COMMONWEALTH OF MASSACHUSETTS
Board of Registration in Pharmacy**

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

November 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=ec6d4bacbb57dda2329e84137d27ca130>

To access the meeting by phone:

Call in Number: 1-650-479-3208

Access Code: 2530 823 2757

Attendee: #

*If you need reasonable accommodations in order to participate in the meeting, contact the DPH ADA Coordinator **Erin Bartlett**, erin.bartlett2@mass.gov or 857-262-7431 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	
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 October 13, 2022 Regular Session Minutes		
8:10	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		

8:15	V	FLEX <ul style="list-style-type: none"> Pharmacy issues related to COVID-19 Nomination of Board Officers Pharmacy Advisory Committee Update Award Announcement 		D. Sencabaugh C. Belisle																																																
9:00	VI	APPLICATIONS <ul style="list-style-type: none"> Procare LTC of MA – Petition for Waiver 																																																		
9:30	VII	FILE REVIEW <table border="0"> <tr> <td>1</td> <td>CAS-2022-0788</td> <td>PHA-2022-0144</td> <td>Winchester Pharmacy, DS89848</td> </tr> <tr> <td>2</td> <td>CAS-2022-0517</td> <td>PHA-2022-0102</td> <td>Walgreens #4923, DS2959</td> </tr> <tr> <td>3</td> <td>CAS-2022-0820</td> <td>PHA-2022-0139</td> <td>Walgreens #10342, DS3551</td> </tr> <tr> <td>4</td> <td>CAS-2022-0872</td> <td>PHA-2022-0150</td> <td>Walgreens #3469, DS2593</td> </tr> <tr> <td>5</td> <td>CAS-2022-0478</td> <td>PHA-2022-0115</td> <td>Walgreens #18335, DS90217</td> </tr> <tr> <td>6</td> <td>CAS-2022-0337</td> <td>PHA-2022-0073</td> <td>Walgreens #19067, DS90188</td> </tr> <tr> <td>7</td> <td>CAS-2022-0242</td> <td>PHA-2022-0045</td> <td>Option Care, DS90107</td> </tr> <tr> <td>8</td> <td>CAS-2022-0302</td> <td>PHA-2022-0064</td> <td>CVS #1845, DS3595</td> </tr> <tr> <td>9</td> <td>CAS-2022-0393</td> <td>PHA-2022-0084</td> <td>CVS #5464, DS89826</td> </tr> <tr> <td>10</td> <td>CAS-2021-1137</td> <td>SA-INV-20483</td> <td>Sabahat Saadat Ahmed, PH236241</td> </tr> <tr> <td>11</td> <td>CAS-2022-0541</td> <td>PHA-2022-0123</td> <td>CVS #1204, DS2239</td> </tr> <tr> <td>12</td> <td>CAS-2022-0890</td> <td>PHA-2022-0152</td> <td>CVS #1899, DS89936</td> </tr> </table>	1	CAS-2022-0788	PHA-2022-0144	Winchester Pharmacy, DS89848	2	CAS-2022-0517	PHA-2022-0102	Walgreens #4923, DS2959	3	CAS-2022-0820	PHA-2022-0139	Walgreens #10342, DS3551	4	CAS-2022-0872	PHA-2022-0150	Walgreens #3469, DS2593	5	CAS-2022-0478	PHA-2022-0115	Walgreens #18335, DS90217	6	CAS-2022-0337	PHA-2022-0073	Walgreens #19067, DS90188	7	CAS-2022-0242	PHA-2022-0045	Option Care, DS90107	8	CAS-2022-0302	PHA-2022-0064	CVS #1845, DS3595	9	CAS-2022-0393	PHA-2022-0084	CVS #5464, DS89826	10	CAS-2021-1137	SA-INV-20483	Sabahat Saadat Ahmed, PH236241	11	CAS-2022-0541	PHA-2022-0123	CVS #1204, DS2239	12	CAS-2022-0890	PHA-2022-0152	CVS #1899, DS89936		
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11:00	VIII	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.																																																		
11:30		BREAK																																																		
12:00	IX	M.G.L. c. 112, § 65C SESSION																																																		
3:00	X	ADJOURNMENT																																																		

COMMONWEALTH OF MASSACHUSETTS
BOARD OF REGISTRATION IN PHARMACY
MINUTES OF THE GENERAL SESSION
Via Remote WebEx Meeting
November 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
Jennifer Chin, RPh
John Rocchio, RPh, PharmD (leaves at 2:03 PM)
Dr. Richard Lopez, MD
Sami Ahmed, Pharm.D., RPh, BCPS, BCSCP
Delilah Barnes, RPh
Rita Morelli, PharmD, BCACP, RPh
Katie Thornell, RPh, MBA
Johanna Lopez, MS (joins meeting 9:23 AM)

Board Members Not Present

Dawn Perry, JD

Board Staff Present

David Sencabaugh, RPh, Executive Director
Monica Botto, CPhT, Assistant Executive Director
Jacqueline Petrillo, PharmD, 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
Ed Taglieri, MSM, NHA, RPh PSUD Supervisor
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

Roll call attendance: J. Lanza, yes; S. Hamilton, yes; C. Belisle, yes; D. Barnes, yes; J. Rocchio, yes; J. Chin, yes; R. Lopez, yes; S. Ahmed, yes; R. Morelli, yes; C. Jean-Francois, yes; K. Thornell, yes. J. Lopez joins meeting at 9:23 AM.

Topic II.

Approval of Agenda

TIME 8:03 AM

Agenda 11/3/22

DISCUSSION:

None

ACTION:

Motion by K. Thornell, seconded by J. Chin 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: 8:04 AM

Minutes

1. Draft 10/13/22

Change: no changes

Action:

Motion by C. Belisle seconded R. Morelli and voted unanimously to approve the regular session minutes of 10/13/22 with no noted changes by roll call vote. Abstain: S. Ahmed, J. Lanza, C. Jean-Francois

TOIC IV

Reports

Applications approved pursuant to Licensure Policy 13-01

TIME: 8:05 AM

PRESENTED BY: M. BOTTO

DISCUSSION: M. Botto reported 26 Change of Manager applications, 4 facility closures, and 17 renovations that have been approved via Staff Action since the October 13th Board meeting.

So noted.

Topic IV.

REPORTS

Monthly Report from Probation

TIME: 8:05 AM

PRESENTED BY: M. BOTTO

DISCUSSION: M. Botto indicated no new reports since the last Board meeting.

So noted.

Topic IV.

REPORTS

Monthly Report from BDCR pursuant to Policy 14-02

TIME: 8:06 AM

PRESENTED BY: M. BOTTO

DISCUSSION: M. Botto reported 4 cases of unknown controlled substance losses that were each issued non-disciplinary stayed probation for one year with controlled substance loss protocol.

So noted.

Topic IV.

REPORTS

PSUD report by Staff Action 17-03

TIME: 8:06 AM

PRESENTED BY: E. TAGLIERI

DISCUSSION: E Taglieri reported one discharge from the program without successful completion. The participant decided that they will resume the program at a later date. Currently, there are 11 active participants in the PSUD program.

So noted.

TOPIC V

Flex

1. Pharmacy Issues Related to COVID-19

Time: 8:06 AM

Presented by: D. SENCABAUGH

Discussion: The Department of Public Health has issued limited use MCSRs to long-term care facilities (LTCF) enabling them to procure, receive, and possess non-patient specific flu and COVID-19 vaccines. The pharmacies serving these facilities have also been issued limited use MCSRs allowing them to supply non-patient specific flu and COVID-19 vaccines to the LTCFs they serve.

So noted.

2. Nomination of Board Officers

Time: 8:08 AM

Presented by: D. SENCABAUGH

Discussion: Nominations for Secretary and President-elect for 2023 were discussed. The final vote will take place at the December Board meeting. The vote will not be by secret ballot.

President-Elect Nominee 1: J. CHIN

Nominated by: C. JEAN-FRANCOIS, seconded by R. MORELLI

President-Elect Nominee 2: J. LANZA

Nominated by: S. AHMED, seconded by J. ROCCHIO

President-Elect Nominee 3: K. THORNELL

Nominated by: J. CHIN, seconded by S. HAMILTON

Secretary Nominee 1: K. THORNELL

Nominated by: J. CHIN, seconded by D. BARNES.

Secretary Nominee 2: J. CHIN

Nominated by: J. LANZA, seconded by S. AHMED

Secretary Nominee 3: D. BARNES

Nominated by: C. BELISLE, seconded by C. JEAN-FRANCOIS

3. Pharmacy Advisory Committee Update

Time: 8:17 AM

Presented by: C. BELISLE

Discussion: At the September 28, 2022, meeting of the Pharmacy Advisory Committee, changes to the draft of 247 CMR 17.00 *Sterile Compounding* were reviewed and suggestions for improvement were made. The document will be brought before the Board after review of the newly released USP <797>.

So noted.

4. Award Announcement

Time: 8:22 AM

Presented by: D. SENCABAUGH

Discussion: The Massachusetts Pharmacists Association will be presenting former Board member and president TIMOTHY FENSKY with the Bowl of Hygeia Award.

This award recognizes pharmacists who possess outstanding records of civic leadership in their communities. In addition to service through their local, state, and national pharmacy associations, award recipients devote their time, talent, and resources to a wide variety of causes and community service.

So noted.

TOPIC VI

Applications

1. Procure LTC of MA

Petition to Waive

TIME: 8:25 AM

Represented by: Donna Gorka & Thomas Lapachelle

Recusal:

Discussion:

T. Lapachelle indicates that Procure LTC is coming before the board to request to go from a 4:1 ratio to a 6:1 ratio. He indicates that Procure is a long-term care pharmacy providing medications to residents throughout the state of Massachusetts. L. Lapachelle indicates that they are no longer a traditional pharmacy and are instead a fulfillment pharmacy and all the traditional regulations for a retail pharmacy are no longer applicable to them. Procure LTC focuses on PV2 to check the product and most shared

services are done out of a clinical hub in Arizona as are all customer interactions and input of medications. Billing, drug interactions, and therapeutic duplications are completed remotely aside from the verification of products. What remains in the fulfillment center is the first dose kits, control room, IV room, and the product verification. S. Hamilton summarizes what was stated by T. Lapachelle who confirms that is a correct summary of their business model. S. Hamilton inquires if all the technicians will be nationally certified. T. Lapachelle responds that only 50% of their technicians are nationally certified. S. Hamilton inquires if the employees will be a mix of board registered technicians and nationally certified technicians to which T. Lapachelle responds is correct. B. Frisch adds that under the Covid flexibilities the board has relaxed the ratios for pharmacies that immunize to be 6:1 provided that there is a combination of certified pharmacy technicians and interns. C. Belisle inquires if a fulfillment pharmacy is different than a central fill pharmacy. T. Lapachelle responds that it is different in that they are a shared service pharmacy with the same common ownership in the clinical hub and with Procure LTC. S. Hamilton adds that they are similarly related and proceeds to describe the processes but that it is just fulfillment. C. Belisle inquires if the request for increased ratio is for the process outlined for the blister card machine or for the entire operation. T. Lapachelle responds that the ratio is for everything in the fulfillment center and that 95% of their operation is for bingo cards as they service 11,000 residents throughout the state of Massachusetts. S. Hamilton inquires if the ratio were to apply to the compounding room and IV room. T. Lapachelle responds yes, the ratio was to apply to other business operations. J. Chen inquires about the bar coding and the steps taken for the technicians to use the Omni machine. T. Lapachelle responds that the reason for the waiver is due to the bar-coding technology. The technicians receive a label and have a bottle, scan the bottle's bar code and the bottle creates a license plate label which is barcoded against a prescription label to increase accuracy. J. Chen inquires as to who completes the verification. T. Lapachelle indicates that PV2 is completed by a pharmacist on site. J. Rocchio summarizes the processes outlined by Procure LTC and T. Lapachelle responds that the summary is correct. J. Rocchio inquires how the dispensing pharmacist verifying the product knows to put the pharmacist's name on the label. T. Lapachelle responds that the pharmacist scans the prescription label and the license plate label, it shows up on the computer, and tells you that it is a match and describes the medication. D. Gorka responds that the PV1 pharmacist's name is on the label and everything else is tracked in the data system. S. Hamilton inquires if the pharmacist completing PV1 is licensed in Massachusetts. T. Lapachelle responds that some are, and some are not. Some of the pharmacists are licensed in Arizona and some pharmacists that work remotely do have a Massachusetts license. S. Hamilton inquires if there are provisions to allow for a non-Massachusetts licensed pharmacist to complete PV1. B. Frisch responds that in the shared services policy the board cannot take any enforcement action, but the Massachusetts pharmacy is ultimately responsible for the accurate dispensing of the medication. S. Hamilton inquired if there was any thought given to having every 6th technician nationally certified technician in the 6:1 ratio. T. Lapachelle responds that this might be a difficult ask but they heavily incentive their technicians to be nationally certified and have offered educational programs on how to do so. D. Barnes inquires if they would have a certified technician in the compounding area. T. Lapachelle responds that in the 6 years they have been opened they only have nationally certified technicians in the compounding room. S. Hamilton inquires if any board registered technician can go into the compounding area and T. Lapachelle responds that it wouldn't be possible as there are many requirements to be able to go into the compounding area. T. Lapachelle responds that certified, registered, and technician trainees are included in the ratio. J. Lanza responds that this is appropriate given the climate and there is appropriate training involved. B. Frisch adds that under the current 4:1 ratio the pharmacy is required to have some combination of technicians and at least 3 would have to be certified technicians. J. Chen inquired if there are narcotics. T. Lapachelle responds that they have a control room with narcotics, but it is only managed by certified technicians and pharmacists.

Motion to approve the 6:1 ratio with 2 certified technicians made by D. Barnes; Seconded by C. Belisle, then Board Members presented voted unanimously by rollcall to approve motion.

TOPIC VII

File Review

Case #1/CAS-2022-0788

PHA-2022-0144

Winchester Pharmacy, DS89848

Time: 08:57 AM

RECUSAL: NONE

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

- Inspectional deficiencies on 7/1/22 for PTT Foley and PTT Khater working unlicensed. The inspection noted during the previous inspection on 04/05/2022, PTT Foley was told not to work in production and the licensure requirement was discussed with MOR O'Connor and Owner McNeill.
- In the POC, MOR O'Connor stated PTT license applications were submitted and new hires will be given the application on the hire date. In the response, he acknowledged PTT Foley had filled out an application when he had been promoted from driver to technician trainee back in March 2022. MOR O'Connor failed to have it notarized and forwarded to HR. PTT Foley was promoted to PTT/cashier on 3/31/22, and his duties include working production and as a cashier. PTT Khater was hired on 6/8/22 but MOR O'Connor did not inform her she was required to complete a PTT application. Her duties include putting away deliveries and working production and as a cashier. Both of them obtained licensure on 7/12/22. MOR O'Connor reported PTT Foley had worked 722 hours and PTT Khater had worked 191 hours.
- Going forward, MOR O'Connor will have all new hires complete the application before their start date. He will also limit any new hires to cashier and front store duties until the trainee license is approved.

ACTION: Motion by C. BELISLE, seconded by C. JEAN FRANCOIS, and voted unanimously by those present, to refer the matter (PHA-2022-0144), 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-2022-0517

PHA-2022-0102

Walgreens #4923, DS2959

Time: 09:00 AM

RECUSAL: NONE

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

- A consumer complaint of Insanitary conditions at the Pharmacy including the immunization room, confirmed during a site visit on 04/26/2022. The immunization room was cluttered, the floor was filthy, the sink was dirty, and there was trash on the floor including tablets. The Pharmacy shelves, vents, and sink also needed cleaning. A POC was issued. Significant progress was observed the next day during a follow up site visit, but the floor and vents needed work orders to be opened.
- DM Carreira and MOR Yu contended increased volume, staffing issues, and the impact of COVID contributed to difficulties in maintaining cleanliness. DM Carreira stated the Pharmacy had administer

over 7,000 vaccines in the past 18 months. MOR Yu indicated wear and tear over the years also contributed to the heavy staining of the floor which could not be cleaned with household cleaners. The policies and procedures for cleaning the Pharmacy and immunization room were requested but only the Walgreens "COVID-19 Reactive Cleaning Checklist" was provided.

- Going forward, the Pharmacy would be cleaned on a weekly basis including wiping surfaces and sweeping floors. The cleanliness would be assessed monthly and work orders for professional cleaning would be placed, if necessary. DM Carreira stated, "Upon receiving the complaint the team immediately dusted and cleaned all shelving and we had the immunization room and vent professionally cleaned by a third-party independent vendor to ensure proper cleaning. Going forward, I will follow up to ensure appropriate cleanliness is being maintained during my store visits and touchpoints (At least 3 per month) and will provide direction and support if needed to ensure compliance". A copy of the Walgreens "COVID-19 Reactive Cleaning Checklist" was submitted that was signed and dated by the Pharmacy staff confirming review. A retail compliance inspection conducted on 06/06/2022 was deemed satisfactory.

ACTION: Motion by K. THORNELL, seconded by J. ROCCHIO, and voted unanimously by those present, to DISMISS the matter (PHA-2022-0102), No Discipline Warranted, Remediation Complete.

PHA-2022-0139

Walgreens #10342, DS3551

Time: 09:03 AM

RECUSAL: NONE

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

- RLCS untimely unknown loss of 140mL methadone 10mg/mL initially reported as identified on 5/12/22 when there was an insufficient quantity on hand to fill a prescription. The internal investigation included a search of the Pharmacy, review of the CII movement report, and review of security footage of the fill on 05/12/2022.
- MOR Tran responded he discovered the discrepancy while performing the perpetual inventory on 5/21/22 when the BOH indicated 140mL, but none was found in the safe. He reached out to the staff who worked on 5/12/22 and reviewed video. Pharmacist French stated on 5/12/22 when a prescription was received for 420mL, the perpetual inventory showed 540mL on hand. She stated the stock bottle only contained 400mL. She could not locate another bottle so 400mL was dispensed. MOR Tran contacted the only patient who is dispensed methadone 10mg/mL monthly. The patient confirmed only receiving 400 mL when last picked up on 5/13/2022.
- MOR Tran attributed the loss to using the markings on the amber bottles to measure the quantity dispensed and storing the stock bottle on its side so it may have leaked. MOR Tran admitted during the perpetual reconciliation, the work queue was checked to see if there was any movement on the liquid medications. If there wasn't, they would just record the previous quantity. On 5/12/22, Pharmacist French failed to document the remaining BOH as zero in the perpetual. Pharmacist N.Tran and MOR Tran also didn't document the BOH as zero when they reconciled the perpetual inventory on 5/13/22 and 5/21/22, respectively.
- The procedure for performing the reconciliation of liquids in the perpetual inventory was reviewed with the pharmacists. All Pharmacy staff attested all policies and procedure for the proper storage and handling of controlled substances have been reviewed.

ACTION: Motion by J. CHIN, seconded by C. JEAN FRANCOIS, and voted unanimously by those present, to refer the matter (PHA-2022-0139), 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 #4 /CAS-2022-0872

PHA-2022-0150

Walgreens #3469, DS2593

Time: 09:07 AM

RECUSAL: NONE

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

- Inspectional deficiency on 7/20/2022 for PTT Costa working with a license that expired on 6/12/2020. MOR Thatcher reported PTT Costa has worked 186 hours as a PTT. MOR Thatcher assumed the role as MOR in May 2022 and had assumed PTT Costa had obtained a PT license. The PTT license was immediately extended when the issue was brought to the Pharmacy's attention. PTT hours are tracked by Kronos which is followed by both the MOR and the Store Manager.
- PTT Costa stated she has been a PTT since 2018. She was unaware that her license was expired as she did not receive notification. She acknowledged it was her responsibility to ensure she was properly licensed. From 6/12/2020 to June 2022, she had worked in the Pharmacy as cashier, filled prescriptions and filed the prescription bags. In June 2022, she was promoted to an Inventory Specialist which entails counting inventory, putting the daily order away, and releasing out-of-stock prescriptions from the computer.
- MOR Thatcher stated, "I am updating all employee files with current licenses and implementing color codes for the files with licenses near expiration and will also be monitoring hours worked by pharmacy technician trainees". According to the POC, these files will be checked on the first day of each month to ensure they are active. MOR Thatcher attested to review of the Walgreens "ASHP Pharmacy Technician Training Program Guide". PTT Costa indicated she will apply for her Pharmacy Technician license before the expiration of her PTT license which was extended to 06/12/2023.

ACTION: Motion by D. BARNES, seconded by R. MORELLI, and voted unanimously by those present, to refer the matter (PHA-2022-0150), 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 #5/CAS-2022-0478

PHA-2022-0115

Walgreens #18335, DS90217

Time: 09:10 AM

RECUSAL: NONE

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

- On January 26, 2022, WAG 18335 submitted an incomplete initial notification to BORP regarding a possible unknown loss of 30 Adderall XR capsules (100 capsule stock bottle, CII) discovered on January 20, 2022. WAG 18335 then failed to submit a final report of loss within 21 days in violation of BORP Policy 2018-05: Loss or Theft of Controlled Substances in effect at the time of the loss.
- After follow up by BORP, WAG 18335 submitted a final report of loss on May 6, 2022, which confirmed that an unknown loss of 30 Adderall XR capsules occurred. WAG 18335 explained that a completed

prescription for 30 Adderall XR capsules was discovered missing from the “Ready Bins” when a patient arrived to purchase their prescription.

- At that time, an internal investigation was initiated including review of pharmacy records, daily counts for 30 days, and surveillance video by MOR Shah and APM Taylor. Ultimately, WAG 18335 was unable to determine the cause for the loss and no further variances were uncovered.
- CA: MOR Shah indicated procedures for filling and sale of controlled substances were reviewed with staff “to ensure that the right medication is going to the right person.” In addition, MOR Shah indicated that “consistent bag checks for all employees upon leaving the store” were now conducted.

ACTION: Motion by S. AHMED, seconded by K. THORNELL, and voted unanimously by those present, to refer the matter (PHA-2022-0115), 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 #6/CAS-2022-0337

PHA-2022-0073

Walgreens #19067, DS90188

Time: 09:13 AM

RECUSAL: NONE

DISCUSSION: J. TRAN presented and summarized the investigative report that pertained to this matter.

- During a retail compliance inspection conducted on 03/23/2022, the Pharmacy was cited for deficiencies related to security, signage, absence of a MOR, CS record keeping, insanitary conditions, expired drug, and lack of immunization and CPR certificates. Specifically, Investigator Geaney observed the back pharmacy door was not secured, the Former MOR’s name was still posted on the front door, having left back in September 2021, the Schedule II perpetual inventory had not been reconciled at least every 10 days, the Change in MOR paperwork could not be located, the Pharmacy department was not clean and organized, expired medication was observed in the consultation room, and immunization certificates and CPR cards were not displayed.
- The deficiencies were remediated. In terms of the MOR change, DM Maloof indicated that Former MOR Day left in 09/2021. The lapse in MOR was due to COVID staffing challenges and had asked several internal candidates to accept the position who either left the company or went on a leave of absence.
- Former MOR Khan served as MOR from 02/12/2022 until 05/31/2022, followed by Former Rosenberg took over as MOR from 05/31/2022 until 08/13/2022.
- DM Maloof stated that the policy and procedure regarding the security of drug within the pharmacy has been reviewed with the team. Additionally, it has been reinforced with the that epinephrine, syringes and needles should not be stored outside of the pharmacy.
- Current MOR Rosenberg stated that he understands the policies for the MOR change and will be compliant with the said actions going forward.
- A Retail Compliance inspection (ISP-19497) conducted on 09/09/2022 was deemed satisfactory.

ACTION: Motion by C. BELISLE, seconded by S. AHMED, and voted unanimously by those present, to refer the matter (PHA-2022-0073), 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 #7/CAS-2022-0242

PHA-2022-0045

Option Care, DS90107

Time: 09:16 AM

RECUSAL: NONE

DISCUSSION: J. TRAN presented and summarized the investigative report that pertained to this matter.

- OPP received notification that the Pharmacy had an unknown loss of hydromorphone injection 10mg/ml on or about 12/30/2021; and during a 797 inspection, it was observed that Senior director of operations, Chris Czech, has access to controlled substance storage box. Employee is unlicensed in the state of Massachusetts.
- On 12/30/2021, a Pharmacy staff member discovered a single 50ml vial of hydromorphone 10mg/ml was short approximately 6ml when drawn up into a syringe. The internal investigation included a drug screening of all staff who have access to or handle controlled substances; review of alarm arming/disarming and badge swipe logs; and review of patient records and prescriptions.
- Security footage was reviewed with no evidence of diversion.
- The Attorney stated that after a thorough investigation, the Pharmacy determined the loss was not significant and did not qualify as a reportable loss according to Board Policy 2022-01.
- Former MOR Rogers stated that although there was no evidence of diversion, the Pharmacy took this incident as an opportunity to review and improve controlled substance security.
- Former MOR Rogers indicated Sr. DOO Czech's role does not include practicing pharmacy. He stated that Mr. Czech's involvement was limited to cycle counts for financial purposes, where he would use a scanner to verify the contents in the cabinet...Mr. Czech would occasionally assist in the inventory check when licensed pharmacists were occupied with their daily duties. Mr. Czech's role in the inventory checks was supervisory. Former MOR Rogers indicated that after the reported loss of hydromorphone, only he and Sr. DOO Czech had access to the controlled substance storage box out of an abundance of caution.
- A Retail Compliance Inspection (ISP-18111) was conducted on 03/29/2022 with deficiencies cited for scale not sealed, and naloxone supply was not sufficient.

ACTION: Motion by D. BARNES, seconded by J. CHIN, and voted unanimously by those present, to refer the matter (PHA-2022-0045), 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 STAYED PROBATION for a period of 1 year, with special terms to include the submission of a request within 30 days for a waiver of 247 CMR 6.02(4) to not stock schedule II medications, and to make the necessary adjustments within 30 days to their P & P in the area of compounding specific to the process for end product verification by the Pharmacist, i.e., process for verifying the right amount of drug in the compound.

Case #8/CAS-2022-0302

PHA-2022-0064

CVS #1845, DS3595

Time: 09:40 AM

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

DISCUSSION: J. TRAN presented and summarized the investigative report that pertained to this matter.

- RLCS- unknown loss of #784 lorazepam 1mg tablets on or about 02/03/2022.
- The loss of #784 lorazepam 1mg tablets was discovered via internal Loss Prevention monitoring.
- The investigation which concluded on 04/04/2022, confirmed that there was no theft or significant loss of lorazepam 1mg tablets at this Pharmacy.
- The investigation comprised of video review, daily counts, multiple reconciliations, and behavioral investigations. The final conclusion determined that a reporting error existed within the stores

perpetual inventory leading the team to believe that there was a loss. The final reconciliation reports indicated a final loss of #37 tablets.

- MOR Tran indicated that all loss prevention policy and procedures will be reviewed with the Pharmacy Team to prevent future losses. All Pharmacists will review the Controlled Substance dispensing policies and procedures.

ACTION: Motion by K. THORNELL, seconded by C. JEAN FRANCOIS, and voted unanimously by those present, to DISMISS the matter (PHA-2022-0064) , No Discipline Warranted, Remediation Complete.

Case #9/CAS-2022-0393

PHA-2022-0084

CVS #5464, DS89826

Time: 09:42 AM

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

DISCUSSION: J. TRAN presented and summarized the investigative report that pertained to this matter.

- RLCS-unknown loss of #372 alprazolam 1mg tablets on or about 02/10/2022. The investigation which concluded on 04/13/2022, confirmed that there was no theft or significant loss of alprazolam 1mg tablets.
- The initial notification was submitted due to concern for a missing/lost sealed stock bottle which was later found to be misplaced on another shelf in error.
- A variance report indicated that there was only an 8-tablet variance for alprazolam 1mg.
- MOR Ly stated to ensure this does not occur again, the pharmacists will personally put away the control drugs to their shelf location immediately following the check in of the delivery.

ACTION: Motion by J. CHIN, seconded by D. BARNES, and voted unanimously by those present, to DISMISS the matter (PHA-2022-0084), No Discipline Warranted, Remediation Complete.

Case #10/CAS-2021-1137

SA-INV-20483

Sabahat Saadat Ahmed, PH236241

Time: 09:44 AM

RECUSAL: J. ROCCHIO 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.

- As part of remediation after a vaccine administration error at CVS #1882 (PHA-2022-0106) in Fitchburg, MA, Pharmacist Ahmed indicated that she reviewed 247 CMR 15.00 and completed 1.5 hours of CE in patient safety in addition to annual requirements for 2021 as part of corrective action. However, Pharmacist Ahmed did not, in fact, complete annual CE requirements for 2021. She was deficient 12 hours.
- Pharmacist Ahmed acknowledged that she did not complete 2021 CE requirements. She indicated that she renewed her license for 2019-2020 cycle on June 29, 2021, in accordance with COVID-19 expiration deferrals and asserted “it was unclear whether all 20 contact hours of continuing education had to be completed in the six months that remained in [2021] or if more time would be given...”
- Pharmacist Ahmed next indicated that her position as a part-time immunizer expanded to full-time “as the fight against COVID-19 continued and a need for immunizers persisted...” She then explained that her expanded role as an immunizer was in addition to “a high burden of personal responsibilities, which were also sustained.” The combination caused her to fall behind on completing her 2021 CE

requirements. She asserted that she had intended to complete the outstanding 2021 CE during 2022. Pharmacist Ahmed added that “[she did] not anticipate this to happen again.”

- Pharmacist Ahmed subsequently completed 12 hours of CE to remediate for her 2021 deficiency.

ACTION: Motion by D. BARNES, seconded by J. LANZA, and voted unanimously by those present, to ELEVATE the matter (SA-INV-20483) to a complaint, and then refer 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 STAYED PROBATION for a period of 90 days, with special terms to include a 2:1 remediation of PH Ahmed’s 2021 CE deficiency within 90 days.

Case #11/CAS-2022-0641

PHA-2022-0123

CVS #1204, DS2239

Time: 09:52 AM

RECUSAL: J. ROCCHIO 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 May 26, 2022, CVS 1204 reported an unknown loss of 100 oxycodone 10mg tablets discovered on April 19, 2022, in violation of requirements for maintaining security of prescription drugs after completing reconciliation of Schedule II perpetual inventory logs.
- Kimberly Gonsalves, Senior Analyst, CVS Health Pharmacy Regulatory Affairs responded on behalf of the pharmacy. Senior Analyst Gonsalves indicated that MOR Tessier and District Leader Devante Marshall did not have any additional information. However, DL Marshall did add that he and staff from asset protection interviewed “ ‘both RPHs in store to see if there were any details to be found that could lead us to identifying the cause of this loss, however, no additional details were found that substantiated anything other than an unknown loss.’ ”

ACTION: Motion by K. THORNELL, seconded by J. LOPEZ, and voted unanimously by those present, to REFER the matter (PHA-2022-0123), 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 #12/CAS-2022-0890

PHA-2022-0152

CVS #1899, DS89936

Time: 09:54 AM

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

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

- Inspectional deficiency observed on 08/27/2022 for PTT Nguyen working with a license that expired on 11/3/2021. Documentation provided with the POC confirmed PTT Nguyen was issued PT29038 on 8/12/2022.
- Senior Analyst Furtado stated PTT hours are tracked by an automated process in which an email is sent by CVS with the number of accumulated hours worked with the PTT license expiration date. PTT hours are tracked by the POS system when clocking in and out. She indicated PTT Nguyen was hired on 11/27/2020.

Lunch 12:30 PM to 1:00 PM

J. Rocchio leaves meeting at 2:03 PM

Topic X

ADJOURNMENT OF MEETING

TIME: 2:23 PM

ACTION: Motion by R. Lopez 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 11/3/22 General Session
2. Draft Minutes of the 10/13/22 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. Procure LTC of MA – Petition for Waiver
8. CAS-2022-0788 PHA-2022-0144 Winchester Pharmacy, DS89848
9. CAS-2022-0517 PHA-2022-0102 Walgreens #4923, DS2959
10. CAS-2022-0820 PHA-2022-0139 Walgreens #10342, DS3551
11. CAS-2022-0872 PHA-2022-0150 Walgreens #3469, DS2593
12. CAS-2022-0478 PHA-2022-0115 Walgreens #18335, DS90217
13. CAS-2022-0337 PHA-2022-0073 Walgreens #19067, DS90188
14. CAS-2022-0242 PHA-2022-0045 Option Care, DS90107
15. CAS-2022-0302 PHA-2022-0064 CVS #1845, DS3595
16. CAS-2022-0393 PHA-2022-0084 CVS #5464, DS89826
17. CAS-2021-1137 SA-INV-20483 Sabahat Saadat Ahmed, PH236241
18. CAS-2022-0541 PHA-2022-0123 CVS #1204, DS2239
19. CAS-2022-0890 PHA-2022-0152 CVS #1899, DS89936

Respectfully Submitted,
Carly Jean-Francois, NP, Secretary