COMMONWEALTH OF MASSACHUSETTS

SUFFOLK COUNTY BOARD OF REGISTRATION

 IN PHARMACY

In the Matter of )

Westminster Pharmacy ) Registration No. DS1710 )

Expires December 31, 2015 )

 PHA-2014-0172

**CONSENT AGREEMENT FOR PROBATION**

The Massachusetts Board of Registration in Pharmacy ("Board") and the Westminster Pharmacy ("Westminster" or "Pharmacy"), DS1710, 128 Main Street, Westminster, Massachusetts, do hereby stipulate and agree that the following information shall be entered into and become a permanent part of the Pharmacy's record maintained by the Board:

1. The Pharmacy acknowledges that the Board opened a complaint against its Massachusetts pharmacy registration related to the conduct set forth in Paragraph 2, identified as Docket No. PHA-2014-0172.1

2. The Board and the Pharmacy acknowledge and agree to the following facts:

a. On or about June 16, 2014, Board investigators conducted an unannounced retail compliance and United States Pharmacopeia General Chapter 795 ("USP 795") inspection of the Pharmacy. During the inspection, Board investigators made observations from which they determined the Pharmacy to be non-compliant with certain requirements of Board regulations and USP 795.

b. Specifically, Board investigators observed retail compliance deficiencies including but not limited to the following:

i. Inadequate security for controlled substances, in violation of 247 CMR

 6.02(6)(c).

 ii. Lack of signs informing patients of their right to counseling by a

 pharmacist, in violation of 247 CMR 9.07(3)(c) and of the availability of

 lock boxes to secure prescription medications, in violation of M.G.L. c.

 94C, § 21B.

iii. Lack of policies and procedures establishing standards pertaining to

 compounding of drugs and supervision of technicians, in violation of 247

 CMR 6.07(1)(e).

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1 The term "registration" applies to both a current registration and the right to renew an expired registration.

iv. Lack of documentation pertaining to the duties and scope of pharmacy

 technicians and guidelines regarding pharmacy technician training

 program, in violation of 247 CMR 8.06(1)(b) & (c) and 247 CMR

 8.06(2).

v. Inadequate documentation of biennial inventory, in violation of 247 CMR

 6.07(1) and 247 CMR 9.01(1).

vi. Lack of proper equipment to mix creams and ointments, in violation of

 247 CMR 6.01(5)(a)(5).

vii. Failure to maintain the pharmacy in a clean and sanitary manner, in

 violation of 247 CMR 6.02(1).

viii. Failure to maintain a sink equipped with hot and cold running water, in

 violation of 247 CMR 6.01(5)(a)(7).

ix. Storage of expired compounded medication on shelves, in violation of

 247 CMR 9.01(10).

x. Improper and inadequate refrigeration and storage of drugs, in violation

 of 247 CMR 9.01(5).

xi. Lack of, or inaccessible, written standard operating procedures ("SOPs")

 pertaining to significant procedures performed in the compounding area,

 in violation of 247 CMR 6.07(1)(d) & (e) and 247 CMR 9.01(3)

xii. Inaccessibility of Continuous Quality Improvement ("CQI") Program to

 pharmacy personnel, in violation of 247 CMR 15.04(1) and 247 CMR

 15.02(l)(a) and (d)-(f).

xiii. Failure to maintain a QRE record, in violation of 247 CMR 15.04(2).

c. Specifically, Board investigators observed violations of USP 795 non-sterile

compounding standards and 247 CMR 9.01(3), including but not limited to the following:

i. Failure to properly store, prepare, and handle hazardous drugs.

ii. Absence of documentation evaluating and confirming staff competency

 prior to staff initiation of compounding.

iii. Absence of documentation confirming pharmacists' and pharmacy

 technicians' qualifications to perform their assigned duties.

iv. No availability of FDA list of components withdrawn or removed from

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 the market for safety or efficacy reasons.

v. No evidence of studies performed to determine extended Beyond Use

 Dates or expiration dates.

vi. Inadequate or non-pharmaceutical grade equipment used for

 compounding.

vii. Absence of policies and procedures, SOPs, or training manuals

 pertaining to mechanisms to promptly address equipment problems.

viii. Absence of policies and procedures, SOPs, or training manuals

 pertaining to a quality assurance program for compounding.

ix. Absence of policies and procedures, SOPs, or training manuals

 pertaining to compounding.

x. No evidence of proper training on handling of hazardous compounds,

 including but not limited to attestations of risk to personnel of

 reproductive capability.

xi. The powder hood was not certified and the HEPA filters needed

 replacing.

xii. Lack of a purified water supply for use in compounding or washing.

xiii. Failure to label containers with date of receipt and expiration date for

 components for which there IS no manufacturer or supplier assigned

 expiration date.

xiv. Preparation of drugs without a Master Formulation Record or a

 Compounding Record.

1. On or about July 15, 2014, the Board and Westminster Pharmacy entered into

Consent Agreement to Refrain from Sterile Compounding and Non-Sterile Compounding.

e. On or about September 19, 2014, Board investigators conducted an unannounced retail compliance inspection of Westminster Pharmacy. During the inspection, Board investigators confirmed that all deficiencies identified on the June 16, 2014 inspection had been remediated in accordance with the plan of correction submitted in response to the June 16, 2014 inspection. Board inspectors did not observe any further deficiencies.

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3. The Pharmacy agrees the facts described in Paragraph 2 warrant disciplinary action by the Board under M.G.L. c. 112, §§ 42A & 61 and 247 CMR 10.03(1)(a) & (v).

4. The Pharmacy agrees that its registration shall be placed on PROBATION for two (2) years ("Probationary Period"), commencing with the date on which the Board signs this Agreement ("Effective Date").

5. During the Probationary Period, the Pharmacy further agrees that it shall comply in all material respects with all laws and regulations governing the practice of pharmacy in Massachusetts and the United States Pharmacopeia.

6. During the Probationary Period, the Pharmacy further agrees to refrain from preparing and/or dispensing any sterile compounded medication unless and until it receives written approval from the Board to resume the preparation and dispensing of sterile compounded medications. Board approval shall not be granted unless and until Westminster demonstrates, upon inspection by Board investigators,

that it is fully compliant with USP 797 and all other state and federal laws and regulations pertaining to the practice of pharmacy.

7. During the Probationary Period; the Pharmacy further agrees to refrain from preparing and/or dispensing any non-sterile compounded medication unless and until it receives written approval from the Board to resume the preparation and dispensing of non-sterile compounded medications. Board approval shall not be granted unless and until Westminster demonstrates, upon inspection by Board investigators, that it is fully compliant with USP 795 and all other state and federal laws and regulations pertaining to the practice of pharmacy.

8. The Board agrees that in return for the Pharmacy's execution and successful compliance with the requirements of this Agreement it will not prosecute the Complaint.

9. If the Pharmacy has complied to the Board's satisfaction with all the requirements contained in this Agreement, the Probationary Period will terminate two (2) years after the Effective Date upon written notice to the Pharmacy from the Board2.

10. If the Pharmacy does not materially comply with each requirement of this Agreement, or if the Board opens a Subsequent Complaint3 during the Probationary Period, the Pharmacy agrees to the following:

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2 In all instances where this Agreement specifies written notice to the Pharmacy from the Board, such notice

 shall be sent to the Pharmacy's address of record.

3 The term "Subsequent Complaint" applies to a complaint opened after the Effective Date concerning acts,

 omissions, or events occurring after the Effective Date, which (1) alleges that the Pharmacy engaged in

 conduct that violates Board statutes or regulations, and (2) is substantiated by evidence, as determined

 following the complaint investigation during which the Pharmacy shall have an opportunity to respond.

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a. The Board may upon written notice to the Pharmacy, as warranted to protect

the public health, safety, or welfare:

i. EXTEND the Probationary Period; and/or

ii. MODIFY the Probation Agreement requirements; and/or

iii. IMMEDIATELY SUSPEND the Pharmacy's registration.

b. If the Board suspends the Pharmacy's registration pursuant to Paragraph

l0(a)(iii), the suspension shall remain in effect until:

i. the Board provides the Pharmacy written notice that the Probationary

 Period is to be resumed and under what terms; or

ii. the Board and the Pharmacy sign a subsequent agreement; or

iii. the Board issues a written final decision and order following adjudication

 of the allegations (1) of noncompliance with this Agreement, and/ or (2)

 contained in the Subsequent Complaint.

11. The Pharmacy agrees that if the Board suspends its registration in accordance with Paragraph 10, it will immediately return its current Massachusetts registration to the Board, by hand or certified mail. The Pharmacy further agrees that upon said suspension, it will no longer be authorized to operate as a pharmacy in the Commonwealth of Massachusetts and shall not in any way represent itself as a pharmacy until such time as the Board reinstates registration or right to renew such registration.

12. The Pharmacy understands that it has a right to formal adjudicatory hearing concerning the Complaint and that during said adjudication it would possess the right to confront and cross-examine witnesses, to call witnesses, to present evidence, to testify on its own behalf, to contest the allegations, to present oral argument, to appeal to the courts, and all other rights as set forth in the Massachusetts Administrative Procedures Act, M.G.L. c. 30A, and the Standard Adjudicatory Rules of Practice and Procedure, 801 CMR 1.01 *et seq*.

13. The Pharmacy further understands that by executing this Agreement, it is knowingly and voluntarily waiving its right to a formal adjudication of the Complaints.

14. The Pharmacy acknowledges that it has been at all times free to seek and use legal counsel in connection with the Complaint and this Agreement.

15. The Pharmacy acknowledges that after the Effective Date, the Agreement constitutes

 a public record of disciplinary action by the Board. The Board may forward a copy of this Agreement to other licensing boards, law enforcement entities, and other

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individuals or entities as required or permitted by law.

16. The Pharmacy understands and agrees that entering into this Agreement is a voluntary and final act and not subject to reconsideration, appeal or judicial review.

17. The individual signing this Agreement certifies that he/she is authorized to enter into this Agreement on behalf of the Pharmacy, and that he/she has read this Agreement.

Joseph P. Serio, R.Ph. for Westminster Pharmacy, 9/1/15

 (sign and date)

David Sencabaugh, R. Ph.

Executive Director

Board of Registration in Pharmacy

Effective Date of Probation Agreement: 9/18/15

**Fully Signed Agreement Sent to Registrant on** 9/18/15 by

**Certified Mail No.** 7015 1520 0002 8254 8853

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