BEFORE THE INDIANA BOARD OF PHARMACY
CAUSE NO.: 2014 IBP 0017

IN THE MATTER OF THE PHARMACY TECHNICIAN-IN-TRAINING PERMIT APPLICATION OF:

ELLIE HEFFERNAN
LICENSE NO.: 99061640A

DECISION ON TECHNICIAN-IN-TRAINING PERMIT APPLICATION

Ellie Heffernan made a personal appearance before the Indiana Board of Pharmacy ("Board") on April 14, 2014, in Room W064 of the Indiana Government Center South, 402 West Washington Street, Indianapolis, Indiana, concerning her application for a pharmacy technician-in-training permit.

The Board, after considering the file and statements of the Applicant, by a vote of 6 to 0 to issues her permit on probation.

BACKGROUND

1. The Applicant, whose mailing address is 640 Graham Drive, Martinsville, Indiana 46151, applied for a pharmacy technician-in-training permit in December 2013.

2. The Applicant revealed she has a long history of struggles with alcoholism, but she is now in active recovery and has been sober for five years.

3. Applicant has demonstrated to the Board that she is able to practice with reasonable skill and safety to the public provided she complies with the probationary terms set out below.

TERMS AND CONDITIONS

Based upon the foregoing Information, the Board imposes the following Terms and Conditions on the Applicant's technician-in-training permit:

1. The Applicant's pharmacy technician-in-training permit will be issued on **INDEFINITE PROBATION**. She may apply to have the probation withdrawn after two years from the date of this order.

2. The Applicant's practice as a pharmacy technician-in-training shall be governed by the following **TERMS AND CONDITIONS**:

a) **CONTACT INFORMATION:** Applicant must keep the Board apprised of the following information in writing and update it as necessary:

1. Current home address, mailing address, e-mail address and residential telephone number.
2. Current place of pharmacy employment, employment telephone number, employment e-mail address and name of supervisor.
3. Occupation and work schedule, including number of hours worked per week.

b) Applicant shall cause her pharmacy employer to submit supervisory reports to the Board in care of the Indiana Professional Licensing Agency addressing her professional competence, sense of responsibility, work habits, mental attitude and ability to work with others throughout the probationary period. The reports are to be submitted quarterly.

c) Applicant shall provide a copy of all Board orders imposing discipline or limiting practice to any pharmacy employer (store manager and/or pharmacy

manager) who shall sign and return a copy of such orders to the Board within ten (10) days of employment or receipt of this order.

d) Applicant is required to attend two Alcoholics Anonymous/Narcotics Anonymous meetings a week. She shall submit quarterly reports of her attendance to the Board. Reports shall indicate the chapter attended, its address, telephone number, the person in charge (or contact person), the dates and times of meetings attended, and verification of her attendance by a responsible member of the facility. She shall also include her comments regarding the degree to which she finds these meetings helpful.

e) Applicant shall submit self reflections/reports detailing her current status, her progress in recovery, issues or problems she is experiencing, and the value she has gained by attending counseling or group recovery sessions. The reports are to be submitted quarterly.

f) Applicant shall immediately notify the Board in writing of any relapse.

g) Applicant shall not violate any laws regulating the practice of being a pharmacy technician.

h) Applicant shall notify the Board in writing of any discipline incurred in other states during the duration of her probation; including any relevant criminal or licensing charges pending.

i) Applicant shall make probationary appearances before the Board at the normally scheduled monthly board meetings on a quarterly basis. Her first appearance will be on June 9, 2014.

j) Applicant shall perform one hour of community service a month while she is on probation and submit written proof thereof when she makes her personal appearances.

3. The failure of Applicant to comply with the terms of this decision may subject her to a show cause hearing and the imposition of further sanctions.

ISSUED this 17th day of April, 2014.

INDIANA BOARD OF PHARMACY

By: Norbert W Rhoad

for Nicholas W. Rhoad
Executive Director
Indiana Professional Licensing Agency

NOTICE OF RIGHT TO PETITION FOR REVIEW OF THIS DECISION

You may petition for review of this decision under IC 4-21.5-3-7. The petition must be filed with the Indiana Board of Pharmacy in writing, identifying the reasons for review and demonstrating that you have been aggrieved or adversely affected by the Board's decision. The petition for review must be filed no later than eighteen days from the issuance of this decision unless such date is a Saturday, a Sunday, a legal holiday under state statute or a day the Indiana Professional Licensing Agency's offices are closed during regular business hours in which case the deadline would be the first day which is not a Saturday, a Sunday, a legal holiday under state statute or a day the Indiana Professional Licensing Agency's offices are closed during regular business hours.

If your petition for review is timely filed and review granted, you will receive notification of an administrative hearing. You or your representative must be present at that hearing. You have the right to be represented by an attorney at your own expense. A deputy attorney general may be present to represent the state of Indiana. As petitioner, you will have the burden of proving that the Board's decision is incorrect.

CERTIFICATE OF SERVICE

I certify that a copy of the "Decision on Technician-In-Training Permit Application" has been duly served upon:

Ellie Heffernan
640 Graham Drive
Martinsville, IN 46151
Service by U.S. Mail

4/17/14
Date

Jessi N. Rager, Litigation Specialist

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Explanation of Service Methods
Personal Service: by delivering a true copy of the aforesaid document(s) personally.
Service by U.S. Mail: by serving a true copy of the aforesaid document(s) by First Class U.S. Mail, postage prepaid.
Service by Email: by sending a true copy of the aforesaid document(s) to the individual's electronic mail address.