

Practice Direction

Permanent and Temporary Pharmacy Closures

1.0 Scope and Objective

1.1 Expected Outcome

This document is a practice direction by Council concerning the proper procedure to temporarily or permanently close a pharmacy through the authority of The Pharmaceutical Regulations to *The Pharmaceutical Act* and *The Pharmaceutical Act*. This practice direction is expected to ensure patient safety by ensuring continuity of care in the event of a temporary, permanent, or emergency pharmacy closure.

1.2 Document Jurisdiction (Area of Practice)

The pharmacy owner and manager of a pharmacy that will permanently or temporarily cease to operate are expected to adhere to this practice direction.

1.3 Regulatory Authority Reference

Sections 45(1) and 45(3) of the regulations to the Pharmaceutical Act allows Council to create this practice direction.

2.0 Practice Direction

Permanent Pharmacy Closures

2.1 Prior to the operation ceasing, or at a minimum within seven days of the operation permanently ceasing, it is the joint responsibility of the owner and pharmacy manager to:

- Notify the registrar of the location where the prescription records from the closed pharmacy will be stored. The records need to be kept in a location that complies with The Personal Health Information Act and be accessible upon request to the College and patients or trustees acting on behalf of the patient; and
 - The records must be retained for five years in total, either in hardcopy or electronic form; and
 - All acquisition/invoice records for items that can only be sold in a pharmacy must be accessible for five years
- Surrender the pharmacy license to the College
- Remove all items that may only be sold in a pharmacy from the premises in a manner permitted by law; options include transfer to another licensed

pharmacy, or to a pharmaceutical wholesaler, unless an extension has been approved by the registrar.

- Remove all signs and advertisements that may lead the public to believe that the premises is a pharmacy.
- Provide the registrar with a letter of intent to close the pharmacy and a copy of the notice to patients of permanent pharmacy closure.

2.2 Because the principle of continued care and availability of care must be maintained, the pharmacy manager or owner must:

- At least 30 days before ceasing to operate (or as soon as possible and as soon as reasonable), advise the patients of the pharmacy closing and provide them with the name and contact information of the pharmacy where patient prescription records are to be located.
 - If a patient does not wish to have their prescription record located at the pharmacy mentioned in the notice, the record may be transferred to another pharmacy specified by the patient (except for those prescriptions covered by the Controlled Drugs and Substances Act);
- Display signs on the premises indicating the pharmacy has closed and where the pharmacy records are located.
- Direct fax and phone lines to another licensed pharmacy for a reasonable period of time, preferably the pharmacy responsible for record storage.

Notify the community served by the pharmacy of the closure. Notification methods could include package inserts prior to closure, letters, signs, media announcements, as well as informing key members in the community such as clinics or neighboring pharmacies.

2.3 Narcotics and controlled substance inventory must be kept secure from loss, theft, or diversion by any of the following means:

- Returning the narcotic and controlled drug inventory to the licensed dealer who sold or provided it.
- Transferring the narcotic and controlled drug inventory to a dealer who is licensed to destroy the substances pursuant to a written order.
- Destroying the narcotic and controlled drug inventory locally following the appropriate Health Canada and CPhM Guidelines.
- Transferring the narcotic and controlled drug inventory to another pharmacist in good standing. Both pharmacists involved in the transfer must take inventory of the substances, sign the inventory record, and keep record of the inventory for five years in an auditable format.

Temporary Pharmacy Closures

2.4 It is permissible for a licensed pharmacy to be temporarily closed without surrendering its operating license, provided that the following conditions are fulfilled (the closures described below would be the closure of the whole pharmacy location and not situations presently covered under a Lock and Leave permit for the dispensary in a licensed pharmacy):

- The pharmacy closure is for a maximum of 14 consecutive days (or other period as approved by the Council) each calendar year.
- The pharmacy manager must obtain the approval of the College for the planned closure 30 days in advance of the temporary closure start date.
- All prepared prescription recipients must be contacted to advise of the closure and given the opportunity to obtain their prepared prescriptions prior to the temporary closure start date.
- Notices to the public (such as using in-store postings and media announcements) must be made at least 30 days prior to the temporary closure start date.
- Signage must be posted at the store entrance and a telephone answering machine message must be provided, advising the public about the closure, its duration, the location of the nearest licensed pharmacy, and other information to assist with obtaining necessary pharmacy services during the closure period.
- In compliance with 6(1) and 23(1.1) of the Personal Health Information Act, arrangements must be made to provide access to any request for personal health information within the timeframe prescribed by legislation.
- In single-pharmacy communities, alternate arrangements for medication access and provision of pharmacy services must be made with local prescribers or pharmacies in nearby communities.
- In the event of an unforeseen or emergency closure, pharmacies should make reasonable attempts to do as much of the above as possible in section 2.4, with the acknowledgement that it may not be possible in all emergency situations, and there should be a section of the pharmacy policy and procedures manual that addresses emergency closures.

3.0 Compliance Adjudication

3.1 All documentation must be readily accessible and open to regulatory review

4.0 Appendices

Not applicable

A Practice Direction is a written statement made by Council for the purposes of giving direction to members and owners about the conduct of their practice or pharmacy operations. Compliance with practice directions is required under the Pharmaceutical Act.

The process for development, consultation, implementation, appeal and review is published on the College website.

Development Source:	Standards of Practice Committee
Regulatory Reference:	Section 45(1) and 45(2), The Pharmaceutical Regulations
Consultation Close:	June 9, 2014
Authorized by Council:	June 23, 2014
Effective Date:	July 4, 2014
Revised:	May 6, 2022
Review Due:	November 22, 2021