

Pharmacy Permits

Pharmacy Closing Procedures and Declaration

The following pharmacy closing procedures must be conducted. According to section 48 of *The Pharmacy and Pharmacy Disciplines Act* entitled "Duty to inform registrar," a proprietor who ceases to operate the proprietary pharmacy named in the permit shall **notify the registrar no later than five (5) days prior to the change in operation.**

Complete and return this declaration and the pharmacy permit to the College no later than 10 business days following the closure of the pharmacy to confirm all closing procedures have been completed. Completed forms can be emailed to: info@saskpharm.ca or faxed to 306-584-9695.

Current Pharmacy Manager:	Member #:
Pharmacy Trade Name:	Permit #:
Name of Operating Corporation:	
Location Address:	
Last Day of Operation:	Closed Date
Please INITIAL beside completed state	ements:
Mail the current Pharmacy Perr	nit to the SCPP office
Inform Patients of Closure [obliq	gation under The Health Information Protection Act (HIPA)]
postings and media announcen store entrance, update phone n	prepared prescriptions; post notices to public (in-store nents) at least 30 days prior to date of closure; post signage at nessage advising the public about location of the nearest nformation to assist with obtaining necessary pharmacy nove from web listings, etc.
	otic and Controlled Drugs, including all CDSA drugs: es and Benzodiazepines, and Targeted Substances
Keep one copy of the inventory inventory from you	record with the files of the pharmacy purchasing the N&G
Keep one copy of the inventory	record with your records
Provide the name and address	of the pharmacy purchasing the N&G inventory:
Have a pharmacist employed b	y the pharmacy sign and date the inventory list .
NOTE: Narcotic and controlled	drugs <u>cannot</u> be transferred from one pharmacy to another. ptions. Prescriptive authority cannot be used as pharmacists

Immediately remove all interior and exterior signage and symbols relating to the pharmacy operation.	
Within 24 hours of the closure, submit a photograph showing the removed exterior signage	
Remove all Schedule I, II & III Drugs	
Advise SCPP of the disposition of all prescription and non-prescription, pharmacy-only products, especially Narcotic and Controlled drugs	
Advise of the disposition of all patient profiles and prescription files: paper and electronic	
Ensure any computers and equipment removed from service has hard drive removed and/or professionally wiped clean <u>AND</u>	
Ensure an electronic copy of the above is retained	
Wipe clean photocopiers, scanners, fax machines, etc. *Sanitize computer hard drives professionally—simply deleting files and reformatting is insufficient.	
Advise if computers are being purchased by another pharmacy, and name/location of pharmacy: Yes / No	
There are no provisions in <i>The Pharmacy and Pharmacy Disciplines Act or</i> Bylaws for pro-rating or efunding the cost of the proprietary pharmacy permit.	
Inform Patients – An obligation under <i>The Health Information Protection Act</i> (HIPA):	
22 (1) "Where a trustee ceases to be a trustee with respect to any records containing personal health information, the duties imposed by this Act on a trustee with respect to personal health information in the custody or control of the trustee continue to apply to the former trustee until the former trustee transfers custody and control of the personal health information to another trustee or to an information management service provider that is a designated archive.";	
27 (4) "A trustee may disclose personal health information in the custody or control of the trustee without the consent of the subject individual in the following cases:(c) where the disclosure is being made to a trustee that is the successor of the trustee that has custody or control of the information, if the trustee makes a reasonable attempt to inform the subject individual of the disclosure."	
Declaration of Completion of Procedures:	
I hereby acknowledge that the closure procedures have been completed as per SCPP regulations, The Pharmacy and Pharmacy Disciplines Act, the SCPP Regulatory Bylaws, and The Health Information Protection Act.	
Manager Name (Printed) & Member #:	
Signature of Pharmacy Manager: Date:	

For more information contact:

SASKATCHEWAN COLLEGE OF PHARMACY PROFESSIONALS

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Email: info@saskpharm.ca | Website: www.saskpharm.ca | Revised: May 2020