Pharmacy inspection compliance checklist



Updated January 2025

Pharmacy name:	macy name: Practice site #:			
Licensee name:		ACP registration #:		
Licence type (select all that apply):	Community	Compounding	and repackaging	Mail order
Pharmacy practice consultant name:		Inspe	ection date:	
Inspection type (select all that apply):	Opening	Renovation	Relocation	Non-sterile compounding
Accompanying inspections (select all th	at apply):	Sterile compoundi	ng Other:	

This compliance checklist references requirements outlined in the <u>Foundational requirements</u>: <u>Guidelines for opening and operating a licensed pharmacy</u>. Prior to applying for a new pharmacy licence, relocating an existing pharmacy to a new space, or renovating an existing pharmacy, the pharmacy must meet all legislative requirements. Depending on the pharmacy services provided, additional requirements may apply.

Reference #	Foundational requirements	Compliant	Comments
Prescription	department		
Size 1	The physical facilities, size, and layout of the prescription department (dispensary and patient services area) match the scale drawing submitted and approved by ACP at the time of application.	Yes	
	The prescription department must	No	
	 be at least 355.2 ft² (33 m²) in area; 	No	
	 have adequate lighting, ventilation, and humidity and temperature control; and 		
	 have an overall design that is professional in appearance and function, including any consultation rooms, fixtures, equipment, and signage. 		
Safety and security	The pharmacy has an electronic security system and procedures to protect against theft and diversion, prevent unauthorized access, and ensure security of drugs. All drugs and patient records must be secured from	Yes	
_	unauthorized personnel.	No	
Drug storage and location	The prescription department has the proper storage facilities to ensure that the quality and integrity of drugs and healthcare products are maintained.	Yes	
3	Drugs will be kept in the appropriate locations within the prescription department, according to their scheduling under Part 4 of the <i>Pharmacy and Drug Act</i> . This includes ensuring	No	
	 Schedule 3 drugs are within the patient services area within view of the dispensary, and 		
	 homeopathic products are displayed and advertised independently from other drugs. 		



Reference #	Foundational requirements	Compliant	Comments
Maintenance 4	The prescription department is maintained in a clean and orderly condition and all equipment is inspected, certified, and calibrated as required.	Yes No	
Dispensary			
Physical	A dispensary must have		
specifications of a	 at least 18 m² (193.8 ft²) in area of contiguous space that does not consist of or include any 	Yes	
dispensary 5	 areas separated by publicly accessible space, or 	No	
•	 separate adjoining rooms dedicated to compounding or repackaging; 		
	 aisles and entranceways at least 90 cm (2.95 ft) wide; 		
	 a dedicated area for preparing drugs for dispensing, including a work area with at least 1.5 m² (16.1 ft²) of uninterrupted counter space; 		
	 drop-off and pick-up areas 		
	 located a suitable distance from patient waiting and high-traffic areas; 		
	 with suitable sound and visual barriers; and 		
	 when the pharmacy shares premises, the drop-off and pick-up areas must not be in close proximity to the patient waiting area, the health professionals' reception desk, or impede the path of patients into the health professional's space; 		
	 a physical barrier that separates the dispensary from the patient services area; and 		
	 sufficient space and equipment to allow the practice of pharmacy to be conducted effectively and safely. 		



Reference #	Foundational requirements	Compliant Comments
Security and	The dispensary	
storage of drugs in the	 has a physical barrier that prevents access by individuals not authorized by the licensee, and 	Yes
dispensary 6	 unauthorized individuals do not have access to Schedule 1 and Schedule 2 drugs. 	No
	Drugs in the dispensary are stored	
	 at appropriate temperatures; 	
	 under appropriate conditions; 	
	 in a manner that protects them from contamination; and 	
	 in accordance with any manufacturer's requirements. 	
Time-delayed	The dispensary must have	
metal safe	 a metal safe that is secured in place and equipped with a time-delay lock (at least five minutes and cannot be opened or overridden by any means 	Yes
	before the time delay has expired), and	Na
	Council-approved signage.	No
Additional	A dispensary must have	
requirements	 adequate shelf and storage space; 	Yes
8	 a laboratory-grade or full-size domestic refrigerator or appropriate temperature-controlled area with a digital temperature monitoring device supplied with an uninterrupted power source that indicates the minimum and maximum temperatures reached since the last reading; 	No
	 a sink with hot and cold running water that is 	
	 readily accessible for hand hygiene at all times, and 	
	 located outside of segregated compounding rooms; 	
	• equipment to make and receive telephone calls.	



Reference #	Foundational requirements	Compliant	Comments
Electronic	The dispensary has		
Infrastructure	 equipment that enables the electronic receipt and transmission of health information through a means that is secure (e.g., fax); 	Yes	
	 a computer or electronic device with an operating internet connection; and 	No	
	 an effective system for the creation, maintenance, secure storage, and retrieval of all records (e.g., dispensing software, scanner). 		
	The system, equipment, and software must		
	 Meet the requirements outlined in Appendix A - Electronic infrastructure requirements of the <u>Standards for the Operation of Licensed</u> <u>Pharmacies</u>. 		
	 Be documented in a privacy impact assessment (PIA) that has been submitted to the Office of the Information and Privacy Commissioner of Alberta (OIPC). 		
	Submit and receive patient information from the Alberta Netcare Electronic Health Record system using real-time integration. To satisfy this requirement at pre-opening inspection, the licensee must have submitted the expedited PIA requirements to the OIPC. This includes the policies and procedures that support Sections B and E of the PIA requirements and the OIPC cover letter.		
	 Both documents must be available upon request during the pre-opening inspection. 		
Compounding	A licensee must provide a patient access to compounding services		
services 10	by directly compounding preparations in the licensed pharmacy, or	Yes	
	 through an agreement with a pharmacy issued a compounding and repackaging licence. 	No	
	Pharmacies that do not compound preparations on site in the licensed pharmacy must		
	 have a current and valid compounding repackaging agreement with the compounding and repackaging pharmacy listed on the ACP compounding and repackaging pharmacy directory, and 		
	 submit the declaration on compounding services to pharmacy@abpharmacy.ca. 		



Reference #	Foundational requirements	Compliant Comments
Patient servi	ces area	
Private consultation	A licensee must ensure the licensed pharmacy has a private consultation area that	Yes
area	 is attached to the dispensary or is immediately adjacent to the dispensary; 	165
	 is publicly accessible and is not located within or require public access to or through the dispensary; 	No
	 is not the only access point to the dispensary; 	
	is clean, safe, and well lit;	
	is an adequate size;	
	 is dedicated to providing confidential communication with the patient (must not be used to store or display anything other than healthcare products, aids or devices, or patient information materials); 	
	 accommodates barrier-free access for patients with mobility limitations; 	
	 has suitable sound and visual barriers; and 	
	 if sharing premises with another business or health professional, the private consultation area must be dedicated for pharmacy use and must not be located in or shared with the adjoining health professional or business. 	
Additional re	equirements	
Signage	The following signs are posted in the pharmacy:	
12	 pharmacy licence in a conspicuous public part of the pharmacy, 	Yes
	 patient concerns poster in the prescription department, 	No
	 hours of operation at all public entrances to the pharmacy, 	
	Code of Ethics in the prescription department, and	
	Council-approved signage (e.g., time delayed safe)	
	Note: The pharmacy must have all of the above signs posted. For new pharmacies, a placeholder demonstrating the location of the pharmacy licence must be in place and posted once the licence is received.	



Reference #	Foundational requirements	Compliant Comments
Signage 12	The licensee must ensure that signage used inside and on the exterior of the licensed pharmacy	Yes
12	 is clear, accurate, and not misleading; 	res
	 is clearly visible to patients and the public; 	
	 does not indicate or imply that a pharmacy is affiliated with another independent business; and 	No
	 does not make inappropriate, unsubstantiated, or unprofessional claims about professional services. 	
References	The pharmacy has access to current and appropriate clinical resources including	Yes
13	 relevant electronic health and practice information; 	165
	 a library with all resources by the <u>list of required</u> reference sources set out by the College; and 	No
	 all required reference sources must be dedicated for use in the licensed pharmacy and not shared with other sites or non-pharmacy personnel. 	
Website	If the pharmacy has a public website , it prominently	
	displays	Voo
14	 a copy of the pharmacy licence; 	Yes
	 the pharmacy's location, mailing address, email address, and telephone number; 	No
	 the licensee's name, practice permit number, and business address; 	
	 the proprietor's name and business address and name of the proprietor's representative; 	N/A
	 a statement that the licensee is required to provide, on the request of a patient, the name and practice permit number of any regulated member who provides a pharmacy service to the patient or who engages in the practice of pharmacy with respect to a patient; and 	
	 other information as required by the Council. 	
Policies and procedures	The pharmacy has an electronic general policies and procedures manual that	Yes
15	addresses the areas outlined in <u>ACP's Policies and Procedures Manual template</u> and <u>Non-sterile compounding policies and procedures manual</u> (if applicable), and	No
	 includes a pharmacy closure plan and a disaster recovery plan. 	



Foundational requirements	Compliant	Comments
Licensees must		
 ensure the pharmacy has an active subscription to 	Yes	
 a practice incident management platform, and 		
 a safety self-assessment tool, 	No	
meeting the requirements outlined in the Guide to CQI+;		
 demonstrate that a Data Sharing Agreement (DSA) has been established between the licensee and the Institute for Safe Medication Practices Canada to facilitate submission of practice incident and close call data to the National Incident Data Repository; and 		
 establish site-specific policies and procedures to support the licensed pharmacy's CQI program. 		
If the pharmacy's practice incident management platform involves the collection, disclosure, or use of patient information, it must be included in the pharmacy's PIA submitted to the Office of the Information and Privacy Commissioner.		
*The requirement for CQI+ must be in place by February 1, 2026.		
The pharmacy profile must be up to date in myACP including regulated members employed at the pharmacy (this includes part-time, temporary, and relief pharmacists and/or pharmacy technicians).	Yes	
	No	
The licensed pharmacy requires a criminal record check from all unregulated individuals engaged by the pharmacy to support or provide assistance in the provision of a restricted activity or the delivery of a drug to a patient.	Yes	
	No	
	ensure the pharmacy has an active subscription to	ensure the pharmacy has an active subscription to



Reference #	Foundational requirements	Compliant	Comments
Nametag 17	The licensee must ensure each member of the pharmacy team is clearly identifiable to the public and other regulated health professionals of the licensed pharmacy, and wears a nametag that	Yes	
	identifies their name;	No	
	 for licensees, identifies them as the pharmacy licensee or pharmacy manager; 	140	
	 for regulated members, identifies their role using a title authorized in the <u>Pharmacists and Pharmacy</u> <u>Technicians Profession Regulation</u> that they are entitled to use; 		
	 for other regulated health professionals who are part of the pharmacy team, identifies their role using a title authorized by their respective regulatory body that they are entitled to use; and 		
	 for unregulated employees, clearly differentiates them from regulated members. 		
Public area a	and shared premise		
Public area	The prescription department is physically delineated from the public area by the use of	Yes	
10	 variations in decor, flooring, or fixtures; or 	Yes	
	 physical separation and signage that reads "pharmacist, prescriptions, prescription department, or pharmacy." 	No	
Shared premise	A pharmacy that shares premises with other businesses or health professionals must	Yes	
19	 operate as a lock and leave pharmacy, and 	165	
	 operate independently of the other business or health professional. 	No	
	A licensee protects the public by ensuring that when it shares a premises with another business or a regulated health professional who is not part of the pharmacy team, the licensed pharmacy is secure when it is not open, and the prescription department is differentiated from the other business or the practice area of the regulated health professional.	N/A	



Reference #	Foundational requirements	Compliant	Comments
Lock and leave 20	If a licensed pharmacy is located where it does not occupy all of the premises, the licensee must advise the registrar that the pharmacy is operating as a lock and leave pharmacy.	Yes	
		No N/A	
		IN/A	
Other licence	e categories		
Compounding and	A pharmacy with a compounding and repackaging (C&R) licence must	Yes	
repackaging licence	 have appropriate infrastructure, including adequate space and equipment to perform the activities of the licensed pharmacy; 	103	
21	meet the size and equipment requirements of a dispensary in a licensed community or satellite	No	
	pharmacy as outlined in the legislative framework, or is of the appropriate size and has the appropriate equipment as determined necessary by the registrar to safely and effectively perform the services undertaken at the pharmacy;	N/A	
	 only provide drug products compounded or repackaged in accordance with the legislative framework and for other licensed pharmacies or institution pharmacies with which it has a compounding and repackaging agreement; 		
	 in addition to the prescription labelling requirements required by the Standards of Practice for Pharmacists and Pharmacy Technicians, include a unique identifier on each prescription label for all drugs processed by a compounding and repackaging pharmacy that identifies the compounding and repackaging pharmacy; and 		
	 not engage in manufacturing as defined by Health Canada. 		
Compounding and repackaging	A pharmacy with a compounding and repackaging (C&R) licence that does not have a community pharmacy licence is not required to have	Yes	
licence ONLY	 drop-off and pick-up areas, 		
21	 a private consultation area, or 	No	
	 the requirements for the transmission of data to the Alberta Netcare Electronic Health Record. 		
		N/A	



Reference #	Foundational requirements	Compliant	Comments
Mail order	A pharmacy with a mail order licence must:		
licence 22	 establish policies and procedures that enable regulated members to provide professional services in accordance with the standards; and 	Yes	
	 in addition to the records that must be kept in a community pharmacy, keep records that demonstrate that patients who receive mail order 	No	
	services meet criteria outlined in the <u>Standards of Practice for Virtual Care</u> .	N/A	



Additional comments	



Compliance readiness

	Practice site #:			
	ACP registration #:			
Community	Compounding a	and repackaging	Mail order	
	Inspection date:			
Opening	Renovation	Relocation	Non-sterile compounding	
that apply):	Sterile compounding	ng Other:		
must be corrected s must be correct tact the pharmacy	before the pharmaced before using the	cy is issued a pha renovated pharm	rmacy licence, and for acy space. Once all identified	
	rm to the pharmacy	practice consulta	ınt.	
photos) demonstr	ating compliance to	the pharmacy pr	actice consultant.	
e-inspection fee w	ill apply.			
	Opening That apply): rmacy practice continust be corrected as must be corrected attact the pharmacy ee onal Declaration for photos) demonstr	Community Compounding a Insperior Insperior Opening Renovation Sterile compounding that apply): Sterile compounding the instant be corrected before the pharmaces must be corrected before using the stact the pharmacy practice consultant that the pharmacy practice consultant the pharmacy practice c	ACP registration #:	

When the pharmacy practice consultant has confirmed compliance with the legislative requirements, they will inform the licensee that the inspection is complete and to wait for a subsequent email from the registration team. A registration team member will receive a signed copy of this document and will email the licensee to confirm the opening date and issue the pharmacy licence.



Professional declaration

This form is to be completed by the licensee if directed by the pharmacy practice consultant. Once the identified deficiencies have been corrected, complete this form and email a signed copy to the pharmacy practice consultant.

I,, the licensee, declare that all deficienci	ies identified by			
the pharmacy practice consultant during the inspection have been corrected for the following pharmacy.				
Practice site #:				
Proposed pharmacy opening date:				
I acknowledge that ACP will be relying on the truth and accuracy of this professional declaration in determination that the pharmacy to provide pharmacy services. I understand that if there are any false or misleading this professional declaration, this may result in a determination that the requirements for the pharmacy liber met. I also understand that any false or misleading statements or representations made in this professional may constitute as "unprofessional conduct" and may result in a referral to the complaints directly declaration.	statements in icence have not fessional			
Licensee's signature				
Date				