

Pharmacy inspection readiness form

As part of the application process for a new pharmacy opening, renovation, relocation, or compounding and repackaging licence, a Pharmacy Practice Consultant (PPC) will attend to the pharmacy to ensure compliance with the

- [Standards of Practice for Pharmacists and Pharmacy Technicians](#),
- [Standards for the Operation of Licensed Pharmacies](#),
- [Foundational Requirements: Guidance Document for Opening a Licensed Pharmacy](#),
- [Standards for Pharmacy Compounding of Non-Sterile Preparations](#),
- [NAPRA Model Standards for Pharmacy Compounding of Hazardous and Non-Hazardous Sterile Preparations](#), and
- [Standards of Practice for Virtual Care](#).

An inspection must occur prior to issuing a new pharmacy licence or shortly after a pharmacy has relocated or renovated. While a renovation may have only impacted one area of the pharmacy, the **entire pharmacy will still be assessed for compliance**. You must submit this form immediately upon completion of a renovation or relocation. If the completion date indicated on your initial application form is delayed, it is **your responsibility** to continue to update the registration department. Failure to do so may impact licensure of the pharmacy site.

In order to ensure your pharmacy is prepared for the PPC, once you are ready for a pre-opening inspection or assessment, please review, complete, and submit the following checklist to the registration department to schedule the mandatory inspection.

Requirement
I have reviewed and meet all elements as indicated in the Pharmacy inspection compliance checklist .
For new pharmacies, pharmacy relocations, or as directed by ACP, I have added all the required images into the Digital evidence submission template , which is ready to be submitted once a ShareFile account is provided.
Construction on the pharmacy space is complete, including all electrical fixtures, drywall, and installation of all finishings and equipment. The pharmacy appears neat, tidy, and organized.
The final layout of the pharmacy exactly matches the floorplan submitted to ACP, including the location of compounding equipment, heat source, sink, eye wash station, time-delayed safe, all entrances and exits into the dispensary, and the fridge.
Interior and exterior professional signage, including the hours of operation, Code of Ethics , Patient concerns poster , time-delayed safe signage, and a placeholder for the pharmacy license, are hung in the appropriate areas ¹ .
A drop off and pick up area that has suitable sound and visual barriers to maintain patient confidentiality when communicating with patients ¹ .
The pharmacy's security system is installed, operational, and ready to be tested.
The pharmacy's phone, fax, and computer software are installed, operational, and ready to be tested.
If the pharmacy has yet to receive a pharmacy licence (i.e., new pharmacy), the site does not have scheduled drug products stored on the premises.

¹ These requirements are not applicable to stand-alone compounding and repackaging pharmacies.

Requirement

The pharmacy's private consultation area is²

- a. publicly accessible and not located within or require public access to the dispensary;
- b. not the only access point to the dispensary;
- c. clean, safe, and well-lit;
- d. an adequate size to facilitate quality care;
- e. dedicated to that purpose and kept free for use for communicating with patients or patients' agents and must not be used to store or display anything other than health care products, aids or devices, or patient information materials;
- f. accommodates barrier-free access for patients with mobility limitations;
- g. has suitable sound barriers that prevent conversations from being overheard by unauthorized individuals; and
- h. has suitable visual barriers to prevent others from seeing what drug, health care products, aids, devices, or pharmacy services are being provided to or for the patient.

The pharmacy's policies and procedures manual is comprehensive, specific to the pharmacy, and complete.

NOTE: For guidance, please refer to ACP's [General Policies and Procedures Manual template](#) and [Non-Sterile Compounding Policies and Procedures Manual template](#).

The pharmacy's refrigerator that stores drug product is either laboratory grade or a full-size domestic model, and the temperature probe is operational, showing the minimum, maximum, and current temperatures.

Compounding requirement (applicable to all pharmacies)

A selection of risk assessments and master formulations for compounds the pharmacy may prepare is available for review.

A completed training program or skills assessment for pharmacy personnel related to knowledge or competencies related to compounding is available for review.

Certification is complete for any primary engineering controls (hoods) and secondary engineering controls (rooms), if applicable to the compounding practice.

NOTE: Certification reports must be completed after installation of hoods in their final location and available for review. Manufacturer's factory certification reports are not equivalent.

The pharmacy must be fully functional, professional in appearance, and ready to provide pharmacy services, otherwise you may incur a [re-inspection fee](#) and a delay to your pharmacy's licensure.

Pharmacy name

Pharmacy licence number

Licensee name/ACP registration number

Date

² These requirements are not applicable to stand-alone compounding and repackaging pharmacies.