

TEMPORARY PHARMACY CLOSURE

Interpretation Guide

May 15, 2026

1. INTRODUCTION

Temporary closure of a community pharmacy can adversely impact patient care and safety. However, the College of Pharmacy of Newfoundland and Labrador (CPNL) recognizes that there may be unforeseen, emergency, or other situations that arise where a temporary closure is necessary. To minimize the impact of a temporary pharmacy closure, the pharmacist-in-charge has responsibilities that must be performed in accordance with the legislation – namely, section 31 of the [Pharmacy Act, 2024](#), section 7 of the [Pharmacy Regulations, 2024](#) and section 9 of the [CPNL Bylaws](#). This interpretation guide is intended to support pharmacists-in-charge in meeting these responsibilities.

2. REQUIREMENTS

Planned Temporary Closures

2.1. Per sections 9.27 and 9.28 of the [CPNL Bylaws](#), the Registrar may approve an application for a planned temporary closure of a pharmacy for up to 14 consecutive days once per year. In these situations, the pharmacist-in-charge must complete the temporary closure application on the CPNL [Pharmacy Portal](#) at least 30 days prior to the anticipated start of the temporary closure. The following information is required to complete the application:

- a) The dates, or anticipated dates, of the temporary closure including the date the pharmacy will close and the date the pharmacy will reopen.
- b) A description of any additional pharmacy services (such as those provided to personal care homes) that the pharmacy offers, along with the measures that will be implemented to ensure that patient needs are addressed during the closure.
- c) An outline of how the security of the pharmacy premises, medications, and personal health information on site will be safeguarded during the temporary closure.

Unplanned Closures

- 2.2. Pharmacy owners and pharmacists-in-charge are expected to have contingency plans in place to address staff turnover, vacations, and other foreseeable circumstances that may disrupt pharmacy services. However, section 9.27 of the [CPNL Bylaws](#) permits a pharmacy to close temporarily for up to 90 days without surrendering the pharmacy licence in emergency circumstances, such as severe weather events, public health crises, or physical damage that renders the pharmacy inaccessible to the public. In these instances, the pharmacist-in-charge must contact CPNL at the earliest opportunity to discuss the emergency circumstances and must complete the temporary closure application on the CPNL [Pharmacy Portal](#) as soon as possible.
- 2.3. If the emergency circumstances are such that the pharmacy is not anticipated to re-open within 90 days, a temporary closure will not be appropriate, and the pharmacy will likely have to close permanently. In these instances, the pharmacist-in-charge must contact CPNL at the earliest opportunity to discuss the emergency circumstances and next steps. Where a pharmacy closes permanently due to emergency circumstances, it can reopen in the future, but the owner will need to apply for a new pharmacy licence.

3. PATIENT CARE CONSIDERATIONS

- 3.1. The expanding scope of pharmacy practice and the increasing role that pharmacy services play in people's healthcare heighten the impact of pharmacy closures on patients. Therefore, patients and the public must be informed of temporary closures at the earliest opportunity.
 - a) For planned temporary closures, public notification should take place after receiving approval from CPNL and as far in advance of the beginning of the closure as possible.
 - b) A variety of methods can be utilized for public notification, such as websites, social media platforms, the pharmacy's outgoing voicemail, local media outlets, and physical signage.
 - c) The public notification must specify the anticipated duration of the closure (if possible), provide an emergency contact number, and indicate where the nearest pharmacy is located.
 - d) Physical signage containing the above information must be prominently displayed at the public entrance of the pharmacy throughout the entire duration of the temporary closure.
- 3.2. Information about the temporary closure must be communicated to other healthcare providers and pharmacies in the area at the earliest opportunity. This is especially important

for communities served by a sole pharmacy, as well as for pharmacies offering services that may require alternative arrangements during the closure, such as service to personal care homes, opioid agonist therapy, or specialized compounding.

- 3.3. Patients with prescriptions ready for pick up must be contacted prior to the temporary closure, if possible.
 - Patients must be informed about the upcoming closure and provided with the chance to collect their prescriptions or to make alternative arrangements, such as having their prescriptions delivered or transferred to a different pharmacy, whenever possible.
 - Any prescriptions that remain uncollected before the closure must be cancelled in the pharmacy's practice management system and reversed through the Pharmacy Network, whenever possible.

4. OPERATIONAL CONSIDERATIONS

- 4.1. During the temporary closure, the pharmacist-in-charge holds the responsibility for ensuring the security of all scheduled drugs within the pharmacy, as well as the safeguarding of patient personal health information located on the premises. The pharmacist-in-charge must also be prepared to provide access to the pharmacy's patient records, per the [Personal Health Information Act \(PHIA\)](#), should the need arise.
- 4.2. If the temporary closure is due to physical damage to the pharmacy, the pharmacist-in-charge must consult with CPNL to determine if a renovation application and associated pharmacy assessment are required prior to reopening.
- 4.3. If the temporary closure is due to physical damage to the pharmacy, or if an extended loss of power occurred during the closure, the pharmacist-in-charge must assess impacts on the integrity of medications and carry out any necessary actions (e.g., removal from inventory, appropriate destruction).
- 4.4. A physical inventory count of narcotics, controlled drugs, benzodiazepines and targeted substances must be conducted and reconciled with the perpetual inventory as soon as possible following the re-opening of the pharmacy.
- 4.5. The pharmacist-in-charge must notify CPNL prior to reopening the pharmacy. If the reopening date is different than the date previously indicated on the temporary closure application, the pharmacist-in-charge must contact CPNL in advance to discuss the change.