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CONFIDENTIALITY AGREEMENT FOR CPL MEMBERS & STAFF

I understand that as a CPL member/staff member I may have sight of or acquire information that will be commercially sensitive or may for other reasons be information that CPL or the pharmacy contractor(s) to whom the information relates would not wish to be communicated to third parties.

I acknowledge my obligation to ensure that I do not make use of any such information for purposes other than those of CPL. I further acknowledge that all information received from or about contractors that relates to their business and financial affairs may not be disclosed to anyone without the express consent of the contractor to whom it relates, in which case the disclosure will be through the CPL CEO.

I will make full disclosure to the CPL of all appointments or offices held by me and I will consult the CPL prior to accepting any appointment or office that may reasonably be thought to be relevant to my membership of CPL or as a member of staff of the CPL.

Signed: _____ **Date:** _____

“Putting Community Pharmacy on the local healthcare map!”

Chair Michael Ball MRPharmS, Vice-Chair Mari Williams MRPharmS
“Community Pharmacy Lancashire” is the name adopted by Lancashire LPC”