

Vaccination policy conference for FIP Member Organisations

Glasgow, 1 September 2018

Conclusions and key messages

The conference provided excellent presentations and rich discussions, which showed not only the vital importance of vaccines for people of all ages, and particularly for children and older adults, but also the key roles that pharmacists play in improving awareness and trust in vaccines, and in increasing vaccination coverage and uptake.

Dr Raymond Hutubessy (Senior Health Economist, Initiative for Vaccine Research, Department of Immunization, Vaccines & Biologicals, World Health Organization), explained how the development of new vaccines for infectious diseases and improved access to existing vaccines are fundamental pillars to achieving universal health coverage. There are still several pockets around the world of undervaccinated or unvaccinated populations. Vaccines have a high impact not only in terms of lives saved and improved health for individuals and communities, but also in terms of productivity gains and net tax revenues for countries.

- What will drive uptake?
- How do we keep up with population growth and movement?
- By identifying and targeting pockets of unvaccinated individuals, setting in place appropriate policies, and promoting a life-course approach to vaccination.

Then, Dr Jane Barratt, from the International Federation on Ageing, expressed how important a life-course approach to vaccination is, with a special focus on how influenza, pneumococcal and herpes zoster vaccines can help preventing ill-health and a loss of quality of life in older adults. Pharmacists are ideally placed to inform them and their carers about such vaccines, and to administer them whenever possible.

This idea was also supported by the array of practices and evidence presented by David Eaton, from the International Longevity Centre, of how pharmacists are involved in communicating the benefits of life-course immunisation and administering vaccines in the community, thus improving adult immunisation rates.

Lisa Nissen (Queensland University of Technology, Australia) and Claire Anderson (University of Nottingham, UK) presented new evidence of their international research team, bringing together pharmacy practice researchers from various countries to identify existing knowledge gaps, build research capacity, foster international collaborations and develop strategies for the uptake of research into policy change.

In the second part of the session, Mitch Rothholz (American Pharmacists' Association, US) shared how 320,000 US pharmacists are active members of "immunisation neighbourhoods" together with other health professionals, patients and other stakeholders. They administer vaccines and serve as accessible and knowledgeable health care providers within their communities in all 50 US States, in addition to serving as a platform for the expansion of other patient care services.

Sofía Segura (College of Pharmacists of Costa Rica) explained how vaccine administration in the private sector is offered by community pharmacies, empowering pharmacists to access and interpret the patient's medical history and identify the need for a vaccine. She presented how a recently introduced shared electronic vaccination record allows for a seamless integration of pharmacies and the public health system for an integral approach to vaccination.

In France, a three-year pharmacy-based vaccination pilot project had such a successful first season that authorities decided for an early expansion of the project in terms of its geographical and demographical scope for the coming seasons. Carine Wolf-Thal (French Chamber of Pharmacists) described the implementation strategy used in France by introducing a dedicated IT platform developed by the Chamber to ensure strict compliance and the generation of evidence.

Mariet Eksteen (Pharmaceutical Society of South Africa) presented how South Africa is striving towards implementing Universal Health Coverage and how a close cooperation between community pharmacies and health authorities is helping to reach out and vaccinate a significant part of the population not yet covered by the public system.

Finally, Helle Jacobsgaard (Association of Danish Pharmacies) presented the Danish service of travel vaccine administration at community pharmacies. Although vaccination by pharmacists is still done upon delegation from a medical doctor, the positive results obtained from this service since 2015 have led the Association to advocate for an expanded and independent role by pharmacists in vaccine administration in the future.

In conclusion:

- There is established evidence of the advantages of pharmacists' role in immunisation in terms of improved accessibility and supply, vaccination rates and coverage; and public acceptance, trust and support.
- There is a growing trend at international level for active involvement of pharmacists with vaccination-related services, but adequate regulatory frameworks and balanced reimbursement systems would contribute to growth of vaccination services, both in terms of widespread implementation and sustainability over time.
- Access to education and training is key in progressing development of vaccination and vaccine-related services.
- Greater advocacy of the known public health gain of increased vaccination coverage and ease of access through community pharmacies is essential.
- Leadership bodies should consider targeted campaigns to promote the established societal benefits of pharmacy-based vaccination.

FIP is committed to supporting the efforts of its Member Organisations in achieving or expanding the authority of pharmacists to vaccinate and play a range of different roles leading to improved access to vaccination and increased coverage rates.

We commit to showcasing the toolkits and case studies to date so that other can learn from them and can develop their own services.