

Vaccines Europe Paper: Improving Access and Convenience to Vaccination

Vaccination is one of the most cost-effective public health interventions ever implemented, significantly decreasing the worldwide incidence of numerous deadly diseases and associated mortality. With 2 to 3 million deaths prevented each year worldwide¹, the success of large-scale immunisation programmes is unequivocal. Childhood vaccination is one of the greatest medical success stories of the 20th century and its benefits have been widely recognised and documented². However, vaccine-preventable diseases also have significant impact on reducing adult mortality, improving health and quality of life. Adult vaccination, which includes adult boosters (i.e. mainly diphtheria, tetanus, and pertussis), influenza, pneumococcus and shingles among others, has been given less emphasis than other health priorities and its benefits to societies are not as well recognised. By 2050, the world's population aged 60 years and older is expected to reach 2 billion, an increase from 900 million today³. The increase of the ageing population is linked to increase of non-communicable diseases, which put people at higher risk of severe Vaccine Preventable Diseases. In addition, preventing infectious diseases more widely by immunisation will reduce the use and misuse of antibiotics to treat such infections. Reducing the use of antibiotics is an urgent global public health need to address the increasing emergence of antimicrobial resistant bacterial strains, which complicates treatment of bacterial infectious diseases⁴.

To ensure continuous and optimal protection of all citizens against infectious vaccine-preventable diseases, taking into consideration the ageing population, better access to immunisation should be ensured and provided throughout Europe. Expanding convenient access to vaccine administration should go together as a shared responsibility to vaccinate with all other Health Care Providers, HCPs (Doctors/GPs, nurses, midwives, pharmacists etc).

Means to widen and enhance access to vaccination varies depending on the country/community and can take place in many settings e.g. vaccination centres, schools, doctor/general practice offices, care homes, hospitals and increasingly, pharmacies. Depending on national regulations, vaccination is delivered by a doctor or consent is provided to a trained vaccine administrator before a person is vaccinated in either of the above-mentioned places.

Several countries have demonstrated since the 1990 the benefit of improving convenience to vaccines through pharmacies including Canada, USA, Portugal, Ireland, UK, New Zealand, Switzerland and Australia⁵. In addition, the French government announced a pilot project aiming to improve 'flu vaccination coverage of the adult population by making this service available through community pharmacies. More than five thousand (5,073) trained community pharmacists delivered 154,740 vaccinations in the period from September 2017 to February 2018⁶. Pharmacies provide convenient public access as 1) they can be accessed in <30 minutes by 98% of the population⁶, 2)

¹ WHO (2016). Vaccination greatly reduces disease, disability, death and inequity worldwide.

Available at: <http://www.who.int/bulletin/volumes/86/2/07-040089/en/> (Accessed on 12th August 2017)

² Vaccine infographic (2007). Leon Farrant.

Accessible at: <http://www.forbes.com/sites/matthewherper/2013/02/19/a-graphic-that-drives-home-how-vaccines-have-changed-our-world/> (Accessed: 1 June 2018).

³ WHO (2016). Ageing and health Fact sheet Available at: <http://www.who.int/mediacentre/factsheets/fs404/en/> (Accessed on 15th August 2017)

⁴ UK Review AMR: Vaccines and alternative approaches: https://amr-review.org/sites/default/files/Vaccines%20and%20alternatives_v4_LR.pdf

⁵ Kirkdale, C.L.; Nebout, G.; Taitel, M.; Rubin, J.; Jacinto, I.; Horta, R.; Megerlin, F.; Thornley, T. (2016) Implementation of flu vaccination in community pharmacies: Understanding the barriers and enablers. *Annales Pharmaceutiques Françaises*, DOI: 10.1016/j.pharma.2016.08.006

⁶ PGEU Annual Report 2017: <https://www.pgeu.eu/en/library/587:annual-report-2017.html>

usually provide extended opening hours beyond conventional working hours, 3) patients do not necessarily require appointments, and 4) have wide community coverage including in more deprived localities and in medically underserved locations such as rural communities potentially helping to improve access to migrant/travelling populations. Pharmacists offer widely distributed healthcare facilities in the EU, with 160,000 community pharmacies across the EU and 46M citizens visiting a pharmacy every day⁷. Pharmacists are highly qualified HCPs (min 5 years of education), trained and skilled to provide patients advice on prevention (incl. hygiene, healthy lifestyle).

Expanding the remit of appropriately trained vaccine administrators can improve convenience and access to vaccines for a wide range of the public. However, a number of challenges need to be overcome before the administration of vaccination can be extended to additional settings. These challenges may include:

- Lack of national government, regulatory or legal support
- Prescribing requirements
- Integration with patient services/primary care
- Knowledge/information sharing.

Each of these requires training, communication and advocacy to effectively address all these challenges^{8 9} and the willingness to change the law to expand vaccine administration. However, several EU/EEA countries have overcome these challenges and adopted legislation allowing vaccine administration in pharmacies¹⁰, testimony to the health care benefits of improving access and convenience to vaccines. Potential solutions can include, for example the introduction of a special immunisation-training programme for pharmacists to develop their understanding on key aspects e.g. on influenza vaccine supply/management, community/patient advocacy and, in country support (e.g. legal/regulatory requirements, administration aspects, adverse event handling, data reporting to the patients GP etc).

Portugal's National Association of Pharmacies (ANF), whilst preparing for the 2008/2009 influenza season, developed a training programme on immunization, attended by 2000 pharmacists from 1,273 Portuguese pharmacies. Up to one in four people who were vaccinated in Portugal during that influenza season received their vaccination in a pharmacy¹¹. This represents a considerable public health contribution to approaching the WHO and EU Council recommended flu immunization target of 75% (in influenza season 2014-15, Portugal met a target of around 60% flu vaccination coverage among older age groups)¹².

Widening the in country/community settings facilitating the administration of vaccination could also significantly facilitate the management of emergency and/or pandemic vaccine administrations e.g.

⁷ PGEU – Overview of Community Pharmacy Services in Europe. Available [here](#). (Accessed on: 08 November 2017).

⁸ Steve Anderson – Pharmacy flu service should not be marred by veiled threats from GPs (UK). Available [here](#); Megan Haggan – Flu study shows pharmacists increased coverage (AUS). Available [here](#); (Accessed on: 08 November 2017).

⁹ Drozd E.M., Miller, L, Johnsrud M. (2017). Impact of Pharmacist Immunization Authority on Seasonal Influenza Immunization Rates Across States. *Pubmed. Gov.* Vol. 39 (8): 1563-1580.

¹⁰ PGEU – The role of pharmacists in protecting people with diabetes against influenza infection. Available [here](#). (Accessed on: 08 November 2017).

¹¹ Case study: Pharmacists and Flu vaccines in Portugal. *Vaccines Today*. Available at: <https://www.vaccinestoday.eu/stories/case-study-pharmacists-flu-vaccines-in-portugal/> (Accessed on: 09 August 2017)

¹² ECDC – Technical Report. Seasonal influenza vaccination in Europe - Vaccination recommendations and coverage rates in the EU Member States for eight influenza seasons (2007–2008 to 2014–2015). Available at: <https://ecdc.europa.eu/sites/portal/files/documents/influenza-vaccination-2007%E2%80%932008-to-2014%E2%80%932015.pdf> (Accessed on 03 August 2017)

in case of a pandemic influenza outbreak, by improving convenience and public access to vaccination services.

All HCPs should be educated to provide advice on vaccination to their customers and/or patients in their interactions. In the case of pharmacists and, based on their training and interactions with the public, they can identify people belonging to at-risk groups (such as patients with chronic diseases) that are recommended for vaccination. Through interactions with their customers and by offering advice on health issues, pharmacists can answer questions about immunisation they may receive. They can also provide reminders to their customers and/or patients as well.

Recommendations at EU level to expand access to vaccination

In a decade long effort, the EU has adopted several initiatives on vaccination. In 2009, the Council of the European Union adopted the Council recommendation on seasonal influenza vaccination encouraging EU Member States to establish and implement strategies to increase influenza vaccination coverage in all people at high risk, with the goal of attaining at least 75% vaccination coverage. The 2014 Council Conclusions on vaccinations as an effective tool in public health invited Member States to *“actively offer appropriate vaccination to population groups considered to be at risk in terms of specific diseases and to consider immunisation beyond infancy and early childhood by creating vaccination programmes with life-long approach. Finally, in 2018 the European Commission proposed a Council Recommendation on Strengthened Cooperation against Vaccine Preventable Diseases where the issue of convenience/access to vaccination is addressed. In line with the abovementioned initiatives, VE supports the following actions to increase convenience and access to vaccination:*

- Facilitate access to national and/or regional vaccination services by simplifying and broadening opportunities to offer vaccination, leveraging community-based providers such as pharmacists, nurses, and school and workplace medical services to address the suboptimal uptake of available effective vaccines
- Adopt local legislation as appropriate to allow pharmacists' and other potential administrators to increasingly become involved in administering vaccines
- Continuous medical education programmes should include or strengthen training on vaccine-preventable diseases, vaccinology, and immunisation for healthcare workers across all sectors, including training modules on pharmacy-based immunisation delivery
- Develop Immunisation Information Systems (IIS), allowing GPs and health systems to track records of vaccines administered by pharmacists and other potential vaccine administrators
- Use the European Structural Funds, in particular the European Social Fund and the European Regional Development Fund, to strengthen vaccine-related training of the healthcare workers and reinforce the health infrastructures capacities in the area of vaccination

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