

ŠSSFĐ Position paper: »Vaccination in pharmacies: The fight against vaccine-preventable communicable diseases. «

The students' Section of the Slovenian Pharmaceutical Society (ŠSSFĐ) is the national association representing pharmacy, laboratory medicine, cosmetic science, and industrial pharmacy students in Slovenia. ŠSSFĐ recognises the importance of national vaccination programmes as an effective preventive measure against spreading infectious diseases. We agree that pharmacists' involvement in vaccination strategies would improve vaccination rates, vaccine accessibility and prevent hesitancy due to misinformation. To include our students' opinions as a basis for his document, we posed relevant questions about the topic and collected answers through the survey.

In June 2022, we surveyed pharmacy students at the Faculty of Pharmacy (University of Ljubljana). Our sample consisted of 88 students who completed the whole survey. The majority (85,2%) of participants were a part of our Master of Pharmacy programme (MPharm). We proposed different statements about vaccination in pharmacies to evaluate our student's opinions. Participants were asked to grade their level of agreement with our views on a scale from 1 to 5 (1 – I strongly disagree, 2 – I disagree, 3 – Neutral, 4 – I agree, 5 – I entirely agree).

In April 2018, PGEU (Pharmaceutical Group of European Union) published its Best Practice Paper on Communicable Diseases and Vaccination. One of the recommendations was to increase pharmacists' involvement in national vaccination strategies on the primary healthcare level by providing new services to increase vaccination coverage against communicable diseases and lessen vaccine hesitancy [1]. Following their appeal, we wanted to get an estimation of students' opinions about vaccinations taking place in community pharmacies. We were positively surprised that the majority of the participants supported the idea of vaccinations in community pharmacies since 77,3% of participants agreed that it would be beneficial that vaccinations take place in community pharmacies (grades 4 and 5). However, 10,2% were indecisive (grade 3), and 12,5% disagreed with the idea (grades 1 and 2). A major part of students (85,3%) also acknowledged the role of pharmacists as professionally capable and trustworthy healthcare professionals in terms of counselling when deciding about administering certain vaccinations and preventing misinformation about vaccines.

In 2016, a systematic review of 14 studies taken in the United States (12 studies), Canada (1 study) and England (1 study) showed an improvement in vaccinations rates when pharmacists were involved in vaccination strategies, regardless of their role (e.g., administering vaccine or counselling) [2]. We wanted to get an estimation of students' opinions on whether such practice could lift the vaccination rates in Slovenia. We have gathered that 62,5% of participants believe in successful outcomes if such strategies were implemented in Slovenian community pharmacies. However, a significant number of participants were still undecided (23,9%), and 13,6% estimated that such an approach would not improve vaccination rates in Slovenia.

Regarding the accessibility of vaccines, most participants (83%) agreed that vaccinations taking place in pharmacies would improve the accessibility of vaccines. Students' opinion is valid since it can be supported by the fact that around two-thirds of Europeans can access a pharmacy within five minutes from their home address, and in comparison to healthcare centres and

physicians' offices do not require an appointment beforehand [3]. Community pharmacies usually offer longer business hours than other primary-level institutions, which gives even more excellent »backup« to the previous claim of improved accessibility in case vaccines are administered in pharmacies [4].

However, ŠSSFD is aware of barriers to implementing immunisation practices in Slovenian pharmacies. We know that students' opinion regarding everyday work in community pharmacy is still limited since they have not spent much time working in pharmacies. Only senior students usually have more experience in the field because they have taken part in practical training, and younger students may work as student interns for a couple of weeks. We were still eager to get their opinion about the possible effect of additional roles (as immunisers) on the quality of existing services a community pharmacy offers at present. Even though the majority thinks that additional work would not pose an obstacle to the quality of the process, this question should be debated by working pharmacists with experience. A survey made in 11 pharmacies in Germany administering COVID-19 vaccine during the COVID-19 pandemic showed that significant barriers when implementing such practice in community pharmacies are the lack of space and personnel required to provide successful vaccination services. A parallel survey of 424 patients who received their vaccine in pharmacies showed that they chose a pharmacy vaccination site because of easier accessibility and fast scheduling. Furthermore, availability was a facilitating factor for 12,8% of patients who stated they had no time to visit a physician during business hours [5].

Pharmacists should receive sufficient education and competencies in case vaccinations occur in community pharmacies. At the beginning of this year, the Slovenian Chamber of Pharmacy (LZS) advocated for a pilot project to enable influenza vaccination in pharmacies. They have already prepared a 120-hour programme for community pharmacists, consisting of theoretical and practical training. It is ŠSSFD's opinion that such training should be part of the faculty's curriculum, given that pharmacists would work as immunisers in the future. In our survey, 72,7% of students welcomed the idea of including additional content in the curriculum to acquire complementary vaccination competencies. However, 7% of students were indecisive, and 19,4% disagreed. Half of the participants were also interested in participating in campaigns that promote changes in current vaccination policy, increasing pharmacists' involvement in national vaccination strategies. Implementation of similar practices was already well received in other countries. In Australia, where pharmacists can vaccinate in community pharmacies, students embraced the addition of the vaccination administration module into the curricula, which was valuable in improving knowledge and confidence. Students have taken the course in the majority and perceived it as helpful in improving confidence and ability to administer vaccines [6].

All in all, ŠSSFD supports the Slovenian chamber of Pharmacy (LZS) in their effort to extend vaccinations against vaccine-preventable diseases in community pharmacies [6]. We know there are still barriers in practice and legislation to allow such changes in Slovenian community pharmacies. We appeal to the Ministry of Health to provide the corresponding legislative groundwork to enable such practice since it has proven beneficial in other European countries.

We also support potential changes in the curriculum, provided by faculty staff, to allow complementary vaccination competencies.

References:

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