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## FIP CALL TO ACTION

### To support pharmacists and pharmacy workers on the coronavirus/COVID-19 frontline

Pharmacies are often the first point of contact with the health system. In some parts of the world, this is ever more true. As hospitals and other healthcare facilities are challenged with caring for large numbers of COVID-19 patients and as countries around the world restrict non-essential daily activities and services for the public, the pharmacy becomes an even more vital access point for medicines and healthcare advice.

The valuable service that pharmacists and their teams provide to communities, and their important contribution to easing the enormous strain being placed on our world's health systems during this coronavirus/COVID-19 pandemic, is now clearer than ever.

Pharmacists at community and hospital pharmacies and clinical biology laboratories are preventing the spread of the new coronavirus disease by advising the public and supporting the efficient management of infection by healthcare systems. Around the world, our colleagues are making sure that patients, particularly the vulnerable, receive their medicines despite the quarantines and lockdowns. They are continuing to ensure a robust and efficient medicines and medical product supply chain, in some cases compounding hand sanitisers themselves to relieve shortages.

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The International Pharmaceutical Federation (FIP), which represents over 150 national pharmacy organisations around the world, calls on governments and other stakeholders to support pharmacists and their teams as key partners in this global health crisis so that people can continue to count on pharmacists in the weeks and months to come.

**FIP calls for the following measures:**

1. Recognising pharmacists and pharmacy staff as key workers, for example, fully including them in emergency protocols, affording them freedom of movement during lockdowns, and providing for childcare if schools are closed.
2. Ensuring pharmacy staff have access to appropriate protective equipment, according to FIP guidelines “Coronavirus SARS-CoV-2/COVID-19 pandemic: Information and interim guidelines for pharmacists and the pharmacy workforce” and in compliance with World Health Organization recommendations.
3. Including pharmacy staff in the groups of healthcare and essential workers to be tested for coronavirus/COVID-19.
4. Providing logistical and financial support for home delivery of medicines and medical devices by pharmacists, especially to high-risk groups, such as older adults, patients with non-communicable diseases and patients with immunocompromising conditions (congenital or acquired), who have been advised to stay



- at home. This can be done in partnership with postal services or with other logistical partners.
5. Enabling funding for the provision of other pharmaceutical services to patients who must stay at home.
  6. In coordination with all relevant medicines supply chain stakeholders, allowing early prescription refills, supply of larger quantities of medicines and emergency supplies without a prescription, especially for patients with chronic non-communicable diseases, who are a higher-risk group for COVID-19. This should be done in a staged manner to avoid medicines shortages and further strain on pharmacy personnel who are already under pressure from the COVID-19 pandemic response.
  7. Identifying medicines that are at risk of shortage and working to put in place mitigation plans, such as authorising pharmacists to conduct therapeutic substitution without prescriber authorisation.
  8. Enabling the provision by community pharmacies of medicines that are normally supplied to outpatients by hospital pharmacies to avoid patients having to travel to hospitals and further pressure on hospital pharmacy services.
  9. Allowing pharmacists and pharmacy staff to conduct routine pharmacy tasks remotely as necessary, including through telepharmacy consultations.
  10. Governments and other employers ensuring that pharmacists are getting adequate breaks during their



- shifts, and time off between shifts, in order to be able to carry on providing pharmaceutical care.
11. Issuing wider announcements to encourage redeployment of capable and able pharmacists and pharmacy technicians to the front line to help with the current demand placed on pharmacies at this time.
  12. Affirming that student pharmacists and interns are an important contributor to the healthcare team and, where possible, are utilised to contribute to patient care.
  13. Further investing in infrastructure for immunisation beyond infancy, to ensure health systems are ready for mass immunisation against COVID-19 when vaccines are available. In order to expand capacity, governments should consider updating their regulations to enable pharmacists to immunise adults against vaccine-preventable diseases, including COVID-19 when this becomes possible.
  14. Authorising and harnessing the network of pharmacies to contribute to mass testing across the population, following the adoption of evidence-based protocols for the usability of rapid point-of-care tests for COVID-19 in appropriate individuals in the community setting.
  15. Authorising pharmacists to test and treat conditions with similar symptoms to COVID-19, such as streptococcal infection, enabling specialists in the health service to focus on direct treatment of COVID-19 patients.
  16. Funding continuing education in infectious disease and emergency response to ensure that pharmacists are up-to-date with clinical and regulatory changes.



17. Governments providing pharmacists with the latest accurate and comprehensive clinical information on COVID-19.
18. Expediting evidence-based treatments for COVID-19 vaccines and treatments by implementing a systematic and globally joined-up approach, facilitating data gathering, access and sharing, and fully utilising the expertise of pharmaceutical scientists as well as pharmacists.
19. Putting in place appropriate services to support the psychological health of pharmacists and pharmacy staff. We have already witnessed pharmacist deaths related to coronavirus/COVID-19. Many pharmacists will have patients who have died because of the infection.
20. Providing financial aid to pharmacies in the event of temporary closure for health reasons.
21. National pharmacy organisations engaging all members of the pharmaceutical workforce, across community and education; across supply to the support workforce; across industry and hospital; to respond comprehensively to the COVID-19 pandemic, and in solidarity.
22. Recognising the importance of international cooperation in combating the coronavirus/COVID-19 pandemic.
23. Governments and international agencies, such as the UN, WHO, UNICEF, UNHCR and UNESCO, along with international philanthropic organisations working together and setting up a funding mechanism to ensure that developing countries have the equipment, supplies and



resources they need to strengthen their health and  
education systems.

**The above measures are urgently needed to ensure the  
continuity of pharmaceutical care to people around the world,  
and so that pharmacists can play an even greater part in the  
fight against coronavirus/COVID-19.**

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**International Pharmaceutical Federation (FIP)**

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