



Colophon

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Community pharmacy has a rich and colourful history and a bright and exciting future. That future is in the hands of the of every community pharmacist. It is a future worth fighting for not just for pharmacists but for the communities we are at the heart of.

This vision document is dedicated to the memory of the community pharmacists and members of their teams who have lost their lives during the COVID-19 pandemic.



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Foreword

Dear Reader,

It is a pleasure to present to you the Vision of FIP's Community Pharmacy Section (CPS). This new vision is based on our previous "Vision 2020" and lays the foundation for the future of community pharmacy practice, as "One pharmacy" and One FIP".

The world is going through a challenging time as we all learn new ways to interact while fighting the COVID19 pandemic. Despite the challenges, this has also proven to be a great time to connect and unite as we all face this health emergency together. Pharmacists and pharmacy staff are on the front line of this battle. At the same time, our world is experiencing rising health care costs, changing patient demographics, evolving consumer expectations, new market entrants and even more complex health and technology ecosystems. Health care stakeholders need to invest in value-based care, innovative care delivery models, advanced digital technologies, data interoperability and alternative employment models to prepare for these uncertainties and build a smart health ecosystem. In this perspective, community pharmacy is ideally positioned to provide care, as an integrated actor within our healthcare systems and at the hearts of our communities.



The time has come for pharmacists to look for new ways to serve their communities. Our patients are now expecting and welcoming new approaches. All these new ways of working can help us at a time when all healthcare professions are facing workforce shortages. Community pharmacy needs to focus on its strengths and the actions that will make the most difference to our patients, and to find better, quicker and easier ways of doing things. New technologies, digital and automation, will be part of this, but we also need a behavioural mind shift.

Everyone in community pharmacy needs to step up and be able to work in different ways to provide new services and to support each other. There are great opportunities to demonstrate new ways of thinking and working smarter. Technology and digital health also support the provision of services beyond the pharmacy. For example, remote consultations make access to specialist knowledge possible from almost anywhere. One of the biggest mindset changes will be to look outside the pharmacy and get involved in local networks for providing health care. Whether this comes through working with nearby pharmacies and doctors, developing connections with specialists at local hospitals, or working with local public authorities, patient organisations and other stakeholders, pharmacists will need to show how and why we should be part of the healthcare network. We know that pharmacy has a long history of changing and adapting: we are always evolving the ways in which we work, the products we sell and the services we provide. More services will be designed around patient needs, compassionate accessible care will be delivered in local communities where pharmacy teams, integrated with the primary healthcare, will improve the health and well-being of the population. There will be an increased focus on improving patient knowledge and use of their medicines as well as on the importance of selfcare. Pharmacists will focus on optimising therapeutic outcomes using skills that include prescribing. As such, pharmacy services will support and drive innovation and equitable access to new medicines and related technologies, providing choices and seamless, rewarding, early and convenient care for our citizens.

Community pharmacies are a vital and trusted part of our healthcare systems. We expect to see community pharmacies further integrated within primary healthcare, doing more to protect public health and taking on an expanded role in urgent care and medicines safety. This document sets out a clear future vision for community pharmacy providing universal care. A vision where community pharmacy and pharmacists with more information can take more clinical decisions and provide care that is seamless, faster, more customised, convenient and personalised, more effective and, most importantly, safer for our citizens, our communities and our healthcare systems.

**Access is choice
Choice is access**

This document, together with the CPS Strategic Plan 2020-25, will guide the section’s executive committee in helping to unlock pharmacists’ full potential through intensifying dialogue with healthcare administrators and regulators, so that we all can deliver maximum value to our patients and healthcare systems, thus contributing to the objectives of each country’s health strategy.

Our vision “Pharmacists are at the heart of our communities” will show how community pharmacists can and must provide more value, work collaboratively with others, and harness new technology. We can and must offer full choice and access to the expert and unique care we provide. To do any less would be to deny the people we care for the best of our skills and the best outcomes for their health.

The core competencies of community pharmacists across the globe can be distilled into four unique skills (or cornerstones). They are familiar to every community pharmacist in every part of the world, however these unique skills need to be practised more widely (i.e. at our full scope of practice) to deliver our full potential as health care professionals:

- Pharmacists review
- Pharmacists prescribe
- Pharmacists dispense
- Pharmacists administer.

The new CPS vision for community pharmacy lays the foundation for the future of care, where our ambition is to always learn, challenge and improve, and to be more valuable to our members and our member organisations. This vision document offers an opportunity to define the direction for community pharmacy over the next five years, setting priorities for actions that can be implemented at national, regional, local and practitioner levels. More importantly, it signals the intention to make the most of pharmacists’ skills for the benefit of all citizens, in the hearts of our communities.



Lars-Åke Söderlund

President
Community Pharmacy Section
International Pharmaceutical Federation (FIP)

Acknowledgements

The content of this vision document for community pharmacy has only been possible due to the vision of member organisations of FIP around the world. We wish to pay particular thanks to the American Pharmacists Association, the Canadian Pharmacists Association, the Irish Pharmacy Union and the Pharmaceutical Society of Australia. Their collegiality and ambition for the practice of community pharmacy is certainly not limited to their own countries and members.

Introduction

In 2017, FIP's Board of Pharmaceutical Practice (BPP) published its vision for the future of pharmacy practice which defined three pillars through which to practise pharmacy as:

1. Pharmacists providing value
2. Interprofessional teams and collaborative care
3. New technology

Community pharmacy is one of the eight areas of pharmacy practice identified by the BPP in its vision. It is the largest section within FIP, accounting for 31% of FIP individual membership, and the aspect of pharmacy practice that has the closest and most longstanding relationships with communities whose well-being our profession serves.

The CPS Executive Committee has taken up the challenge to create the section's vision for community pharmacy from 2020 to 2025 in the context of how community pharmacists are uniquely positioned to advance the provision of patient-centred care (BPP Vision 2.1.1.2) through their expertise, accessibility and unique centuries-old relationship with the communities they serve. The BPP vision did not set out to define all aspects of each area of practice, nor will that be possible here. What we can do, however, is set out the four cornerstones of how community pharmacists deliver the best patient-centred care to the heart of their communities. These cornerstones will be familiar to every community pharmacist in every corner of the world as we deliver essential pharmacy care to the full scope of our practice:

- Pharmacists review
- Pharmacists prescribe
- Pharmacists dispense
- Pharmacists administer.

Throughout this vision, the CPS recognises and drives the One FIP philosophy as FIP partners with pharmacy representative bodies, stakeholders, legislators and administrators around the globe, particularly with reference to the United Nations Sustainable Development Goals and World Health Organization goal of universal health coverage.

Throughout this vision document, the policy statements and goals of FIP have been cross-referenced in the spirit of One FIP, with particular regard to our Commitment to Action at FIP's Regional Conference for the Eastern Mediterranean (held in Amman, Jordan, in 2019) and at FIP's Regional Conference for the European Region (held in Ankara, Turkey, in 2019), and to the evidence gathered by FIP and its policies around pharmacists' role in reducing harm associated with drugs of abuse, improving use of medicines by the elderly, providing greater access to vaccination through community pharmacy, and in achieving safer, more efficient, accessible and cost effective use of medicines. Furthermore, we are acutely aware of the unique role that pharmacists play in the guardianship of the medicines supply chain and along with this our responsibility to the environment we all share. Our ability to harness new technologies to bring about change in patient outcomes and collaborative care are also unique.

Community pharmacy payment models are changing. The move from paying for volume to paying for value is welcomed as the need to deliver better outcomes as is recognised and encouraged as we move to promote access, choice and universality in healthcare. Payment models must recognise and reward clinical excellence and pharmaco-economic stewardship.

These changes will ultimately bring us closer to the communities we serve as we are already the healthcare professionals that our communities are closest to and see most often.

Another important aspect of the future of pharmacy is reimbursement for our services. The current pharmacy payment models are generally based on payment for dispensing services without accounting for the important clinical services designed and performed by community pharmacy to improve patient care and outcomes. Community pharmacists routinely counsel patients on proper use of medicines and other health issues, but new payment structures are needed to support pharmacists' role as primary healthcare providers, allowing them to receive consistent reimbursement for disease state management, medication optimisation and preventive services. We will work for a proper reimbursement for our clinical services.

The COVID-19 pandemic

The COVID-19 pandemic has shown how quickly healthcare and the pharmacy profession can change, and how critical education and training are to meet evolving needs and demands from our healthcare systems and patients. The COVID-19 pandemic is changing every country's healthcare landscape every day, and presenting significant challenges for the world. Critical health policy changes are occurring at an unprecedented rate.

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 community pharmacy has become an even more vital access point for medicines and healthcare advice.

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.

The valuable service that community 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 pandemic, is now clearer than ever. Around the world, our colleagues within community pharmacy 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.

The impact of COVID-19 has extended beyond our hospitals and healthcare systems and challenged us to think differently when "business as usual" is no longer possible. As medication experts, community pharmacists are true frontline patient care providers and trusted sources of information for patients. One of their most important roles is educating patients about their disease states and how to optimise their medications.

The COVID-19 pandemic has demonstrated the essential role of pharmacies and pharmacists in our communities and their ability to innovate healthcare solutions. We must ensure their role continues to be recognised beyond the pandemic. As the "most accessible and most trusted health care professionals", pharmacists have an opportunity to emerge from this crisis with clearer priorities and innovative means to provide better healthcare and responsible self-care for all. These are positive developments that can contribute to an improved quality of life, but only if we continue to embrace the changes in motion.

I want to reassure our member organisations and individual members that the CPS, as part of One FIP, will continue to work across multiple fronts to support their perspectives and needs as we collectively navigate the ongoing pandemic response as well as the years to come, so we can provide the best care possible for our patients. Never has it been more important to strive towards universal health coverage and establishing the role of community pharmacy as a key profession than now, during the COVID-19 pandemic. Intensifying collaboration with our member organisations to increase the benefit of FIP for our members and to move the CPS and FIP into the future is important for us.

The time has come to narrow the gaps between the different regions of the world in a pragmatic way. We have created this new vision for the community pharmacy, and now it is time to be One FIP and deliver — together with the entirety of FIP — the vision and strategy to support our member organisations and individual members.

Thank you for being a member of the Community Pharmacy Section, and for everything that you do for your patients and our profession.

Lars-Åke Söderlund
President
Community Pharmacy Section
International Pharmaceutical Federation (FIP)

The community pharmacy, at the heart of our communities

When the vision for the CPS was being developed, FIP had built on its support for the Declaration of Astana (2018) to ensure that community pharmacy was recognised and visible in the delivery of primary health care, moving further towards FIP's vision of access to safe and effective medicines for all. We had held conferences for the Eastern Mediterranean and European regions in 2019, whereby we elicited commitments on the delivery of primary health care goals from all sectors and disciplines in our profession and a move to implement and deliver the changes needed.

The COVID-19 pandemic in 2020 has left us with new imperatives and new priorities, but not a new vision or purpose. Never more important has community pharmacy been in the delivery of primary health care and access to safe and effective medicines for all. Regarded as essential by all health services and all nations, community pharmacists, and hence this vision for the FIP Community Pharmacy Section, have gained greater importance than ever, and a higher profile.

At this time of great uncertainty and challenges for us all, we would like to thank those who are working in the hearts of communities to make sure that patients get their treatments. The role of pharmacists is crucial: they are important actors in the health chain. Through taking care of patients with minor illnesses or chronic diseases, giving information, and performing triage, they are relieving the burden on doctors, nurses and hospital emergency departments.

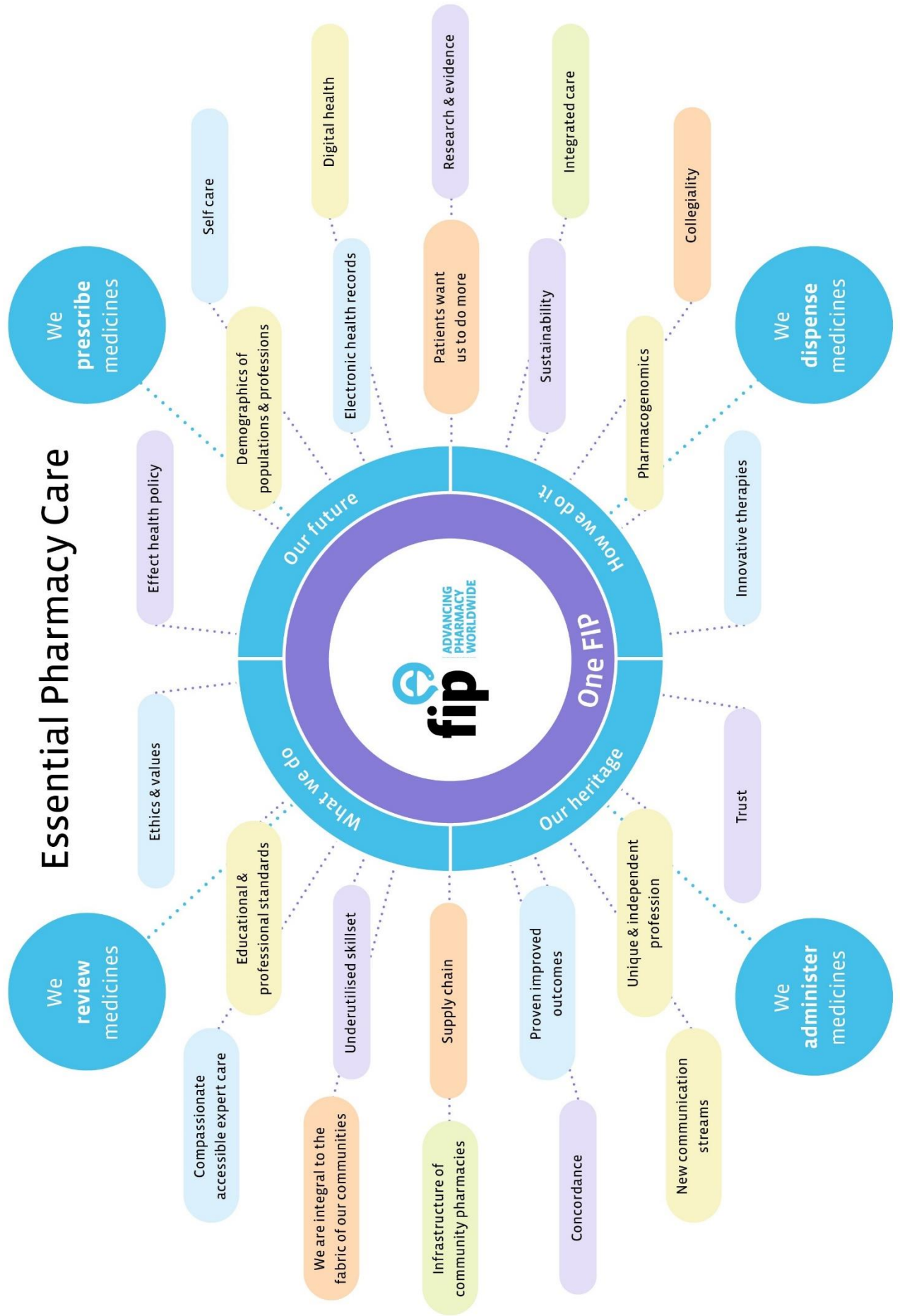
FIP is doing its best to support its member organisations and pharmacists during this difficult time with global guidelines in addition to the different guidelines of its members. Community pharmacists, in particular, should take appropriate measures to protect their teams as well as their patients, using our recommendations, guidance and support whenever needed.

It is because of the position of our profession in our communities that we can act as a gateway and an access point to medicines, advice and care for all, and our communities themselves know this now as never before. Alongside the need for guidance and interpretation of the emergent evidence base around tests, treatments, repurposed drugs and vaccines for COVID-19, our profession is united as never before too. United in our vision for all and united in our support for all.

Long live pharmacy,
Long live FIP!

Catherine Duggan
Chief Executive Officer
FIP

Dominique Jordan
President
FIP

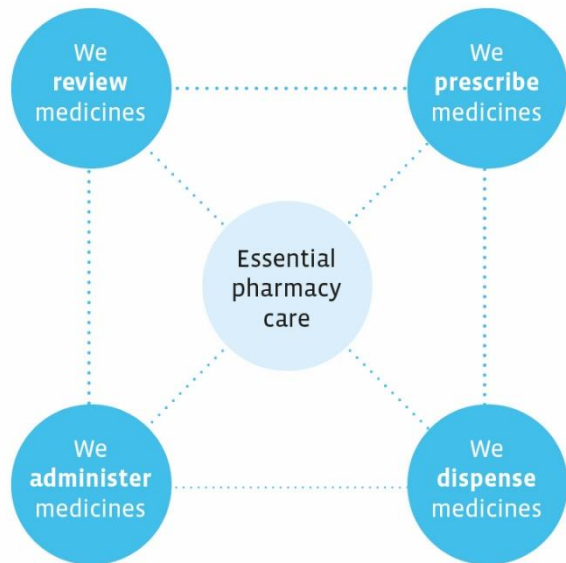


Essential pharmacy care

Community Pharmacists are ready to provide more value, to care collaboratively, to harness new technologies and to offer more choice in people's health care through access to the four cornerstones of the expert and unique care we provide: Review, Prescribe, Dispense and Administer.

We can deliver universal, safer, accessible, timely and better value health care through a more compassionate, personalised and rewarding model of care for the communities we serve, now and into the future.

This vision will show how essential pharmacy health care is only achievable through fully utilising the unique skills and network of community pharmacists to give our communities choice of services from community pharmacists and their teams working to their full scope of practice.



The mind map on p6 in of this document was a great help to the CPS Executive Committee and its observers as a frame of reference for who we are as community pharmacists, where our profession has progressed from and where we want to go. It helps us to see our potential through our own ability and unique skills as healthcare professionals. It also helps us to picture the challenges the communities we serve have in accessing appropriate healthcare and the lack of choice they often face.

This mind map distils what we can do into four pillars. Each topic you see in a capsule was a discussion point for the CPS Executive Committee as it wrote this vision. They will be topics familiar and relevant to every community pharmacist around the globe.

The capsules on the left show the discussion points as the Executive Committee looked back through our heritage as a profession, our adaptability and our huge relevance to the daily lives of the communities we serve. The capsules on the right of the mind map show our potential and relevance into the future. These discussion points allowed the Executive Committee to make the case for the pivotal role community pharmacists can play in the future of healthcare.

The four circles in the corners of the mind map are the four competencies of community pharmacists, now and into the future. We can be better at our core competencies if we are enabled to work to our full scope. These four competencies do not exist in isolation and are the embodiment of who we are.

The circle in the middle of the mind map symbolises that we are one profession throughout the world and that we must work together and help each other to advocate for our community's healthcare. Every community pharmacist must be fully recognised for his or her ability, the care he or she delivers, and must be allowed and encouraged to be his or her best. We cannot rely on any other profession or body to do that for us. We must do it for ourselves and the communities we serve.

1.1 A unique and independent profession

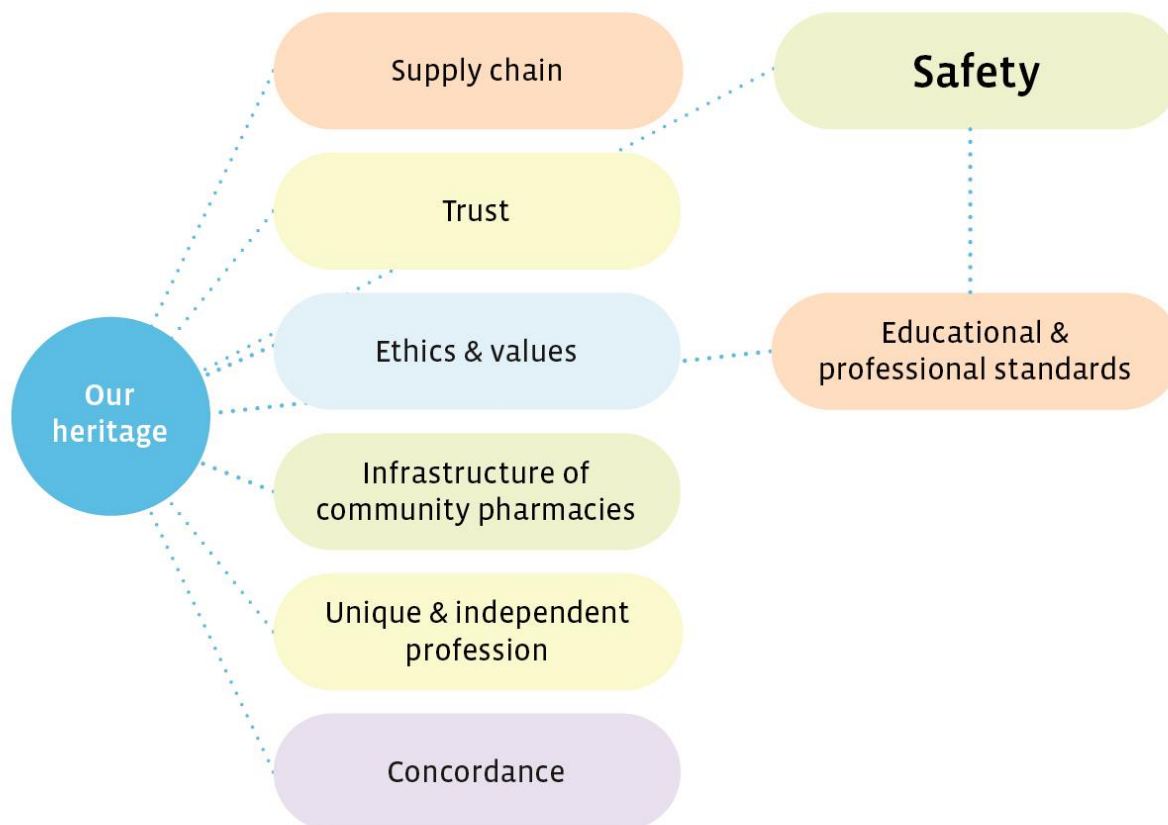
Healthcare and how it is delivered have never achieved more for the communities we serve. Across the globe people have never lived longer and enjoyed better health than they do today. As we look back through the history of pharmacy, we can see that community pharmacists have always sought to improve their profession to adapt to the needs of the people and communities they serve through their professional practice and through being attuned and responsive to their individual patients' and broader communities' needs. We have done so by always identifying ourselves as a unique profession with a unique and relevant skillset.



1.2 Infrastructure of community pharmacies

We are the experts in optimal outcomes for prescribed medicines and therefore the cornerstone for the effective provision of universal health care. In jurisdictions that have empowered full scope of practice, community pharmacists deliver the best care, the most timely and accessible interventions, with outcomes that are better clinically and economically. These jurisdictions, unfortunately, are in a minority, but many countries are not far behind.

This vision shows how every community pharmacist can improve outcomes for his or her community and help build and sustain a safe and collaborative community of care that can harness exciting technological advances such as those highlighted through the One FIP Forum on technology.



The CPS also recognises the need to allow pharmacists to practise autonomously and not to be placed under duress to act against their professional judgement, leading to outcomes that are not in the best interests of the communities they serve or the individual patients in their care.

As societies’ needs change so do their workforces. Pharmacists have always adapted and shown a keen sense for meeting their communities’ needs. There are more than 4 million licensed pharmacists in the world, 75% working in community pharmacy. Pharmacy is a rewarding profession that attracts the brightest and motivated school leavers and graduates. This vision document recognises that the CPS must advocate for community practice to evolve to meet the ambitions of practice and educational standards of young pharmacists. Unfortunately, we see a decrease in job satisfaction among community pharmacists, as is the case with other health care professionals, who feel their skills are neither recognised nor utilised.

Community pharmacists throughout the world work in and lead dynamic teams in their readily accessible community practices. The availability of community pharmacies across all communities globally means we have a network of regulated professionals accessible to all for advice and proactive interventions on prevention, medicines use and safety issues. Employers and regulators must allow and encourage pharmacists to focus on their core professional competencies and promote a safe working environment for those pharmacists and their teams.

Community pharmacists are ideally placed to liaise with other health professions on emerging needs and to support patients with triage and next steps. The ideal step to universal health coverage is through primary health care. The transition to digital health will enhance the continuum of care.

The vital role of pharmacists in communities as an intrinsic part of the primary health care solution will enable the value and reward felt by community pharmacists a reality. The advocacy role of FIP for community pharmacy as a vital part of the World Health Organization vision globally, regionally and nationally, and in partnership with those working in secondary care and other professions, is important.

The four core competencies of review, prescribe, dispense and administer are each complementary to the other. Countries whose community pharmacies deliver most for their people are the ones that have challenged, empowered and backed community pharmacists to improve outcomes, improve concordance, improve access and choice to appropriate healthcare, improve value for money and through that created a more fulfilling and rewarding profession for the pharmacists who are at the hearts of our communities.

“Scope of practice”, generally, refers to the boundaries within which any health professional may practise. For pharmacists, the scope of practice is established by state legislatures and regulated by an independent regulator most commonly at national level but also at federal or provincial level.

1.3 Full scope of practice

Pharmacist services include all proactive and comprehensive interventions that prevent or manage illness and are within an individual’s competency to perform independently. These are essential services that all communities should expect and be entitled to receive at the full scope of community pharmacist practice.

No two countries have identical training standards for healthcare professionals. Regulators and legislators must proactively engage with community pharmacists to review and resource any training needs and find new and sustainable remuneration models that reflect the healthcare and monetary value of the improved access and outcomes that a full scope of practice for community pharmacists will allow.

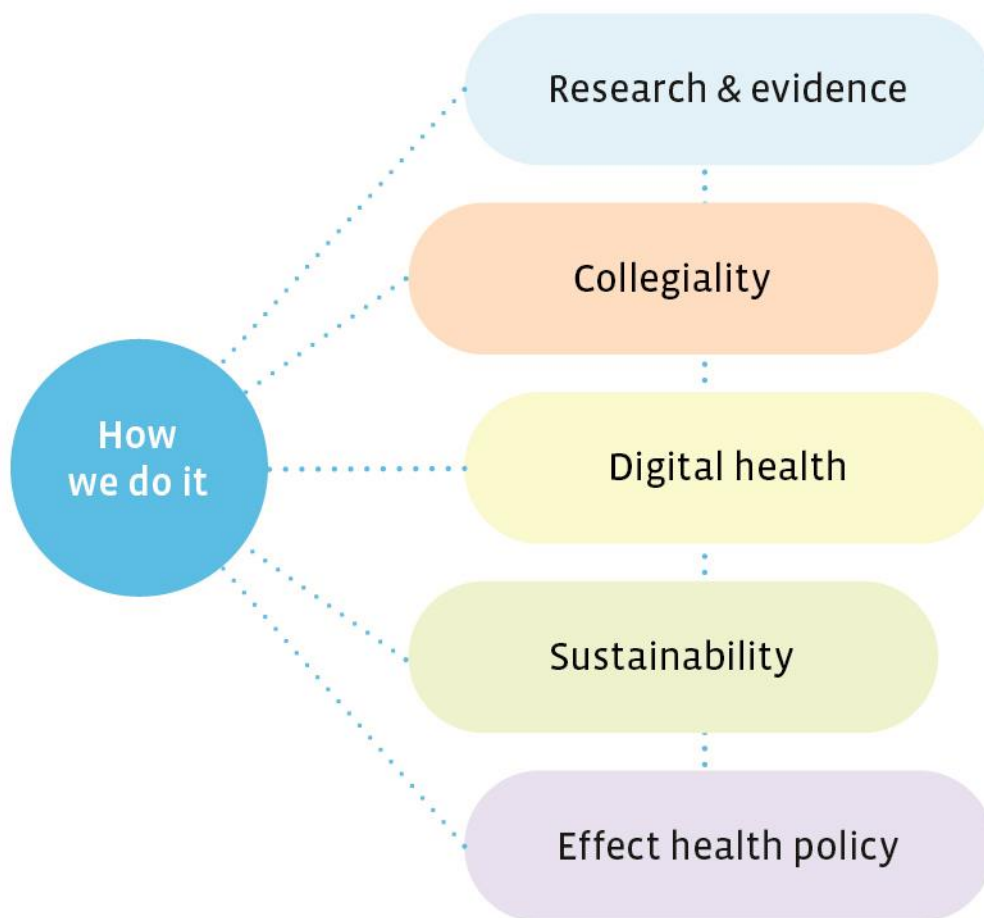
Community pharmacists must rise to the challenge of accepting the responsibility for their full scope of practice. They must, in turn, be challenged and encouraged to do so by their professional representative bodies.

1.4 Review

Review of medicine therapy has regard to the pharmaceutical and therapeutic appropriateness of a prescribed medicine therapy for a patient. The potential problems to be screened for include those which may be due to therapeutic duplication, interactions with other medicinal products (including serious interactions with non-prescription medicinal products, herbal products or foods), incorrect dosage or duration of treatment, allergic reactions, and clinical abuse and/or misuse. Review also includes screening for any potential sub- or non-therapeutic outcomes that may have arisen. A review is the basis of any change of therapy carried out in concordance with the patient and with reference to other prescribers involved in the patient’s care.



Review is an integral part of the professional role of the community pharmacist. It is an integral part of the dispensing process. Advances in the utilisation of community pharmacists’ skills to full scope has empowered us to apply our clinical and therapeutic knowledge to improve patient outcomes and has led to more appropriate use of resources outside the dispensary. Medicines usage reviews are a valued and stand-alone service which bring a unique insight to collaborative compassionate care. As we move towards digital health, pharmacists are ideally placed to harness this data for people in their communities, virtually and/ or in their pharmacies.



Community Pharmacists are the healthcare professionals who see their patients most often and understand their concordance to medication uniquely. It is important to offer patient choice and access and to avoid role duplication and unnecessary waste by empowering autonomous community pharmacists to carry out this service rather than making it solely a function of a pharmacist in the employment of the prescribing physician.

1.5 Prescribe

Prescribing is the iterative process involving: information gathering, clinical decision-making, communication and evaluation, which results in the initiation, continuation or cessation of a medicine. Pharmacists prescribe medicines for people in their pharmacies who present with common ailments. Notable advances include greater access to hormonal contraception and emergency contraception, therapies for urinary tract infections, upper respiratory tract infections and minor ailments, and travel medicine through pharmacist triage, screening and prescribing



Full scope

If universal health coverage is to have true meaning, patients and healthcare practitioners must have access to and work at the most appropriate level of care. If pharmacists prescribe from a wider selection of medicines for a wider array of ailments there will be greater patient satisfaction, better value and outcomes. Pharmacists practising to full scope will allow other healthcare professionals to focus on their core competencies and in turn practise to their full scope. The continuation of

therapies through pharmacist prescribing is an extremely valuable resource for patient concordance and resource utilisation in primary care.

1.6 Dispense

Dispensing is the process of the safe procuring, storing, preparing, compounding, reviewing, recording, counselling and giving medicine to a named person on the basis of a prescription. It involves the correct interpretation of the wishes of the prescriber and the accurate preparation or compounding and labelling of a medicine for use by the individual patient. The safe disposal and management of medicine supply infrastructure is part of dispensing.



We
dispense
medicines

Full scope

People deserve to have access to a full suite of acute and chronic services from their pharmacy in their community. Notable advances and success in dispensing include patient access to immunological medicines, opioid substitution therapy, Hepatitis C treatment, pre-exposure prophylaxis, compounded speciality medicines, infusions and monitored dosage systems in jurisdictions where pharmacists have been enabled to work to their full scope.

1.7 Administer

Administration is defined as the introduction to a human being, whether orally, by injection or by introduction into the body in any other way, or by external application, whether by direct contact with the body or not of a medicinal product either in its existing state or after it has been dissolved or dispersed in, or diluted or mixed with, some other substance used as a vehicle.



We
administer
medicines

Full scope

Community pharmacists practising at full scope of administration can give choice and access to their communities for therapies requiring intramuscular or subcutaneous administration, for example, immunological therapies. Pharmacists can use their skills in administering to provide screening services and as a conduit to diagnostic services and services that require direct observation (e.g. tuberculosis treatment) and supervision (e.g. methadone). Patients prefer to avail of such services in their community pharmacy rather than travel to secondary care settings.

Any jurisdiction that does not empower community pharmacists to administer medicines to the full scope of practice is endangering their population's health and wasting a valuable resource in achieving better patient care and outcomes.

1.8 Universal health coverage is collaborative compassionate care

Community pharmacists, by their very nature, have never worked in isolation from the people they serve. As often the first, always the most frequent and most accessible part of any person's healthcare journey the community pharmacy is a focal point of collaborative, compassionate, continuous and transitional care. Our unique expertise, independence and connectivity makes us an indispensable facet of the safety and sustainability of collaborative care for all members of our communities not just the vulnerable, isolated, excluded, elderly, displaced or people who lead chaotic lives.

Our working relationship with other healthcare professionals throughout the ages has meant we have been uniquely positioned to advocate for best practice, patient choice, safety, compassion and sustainability.

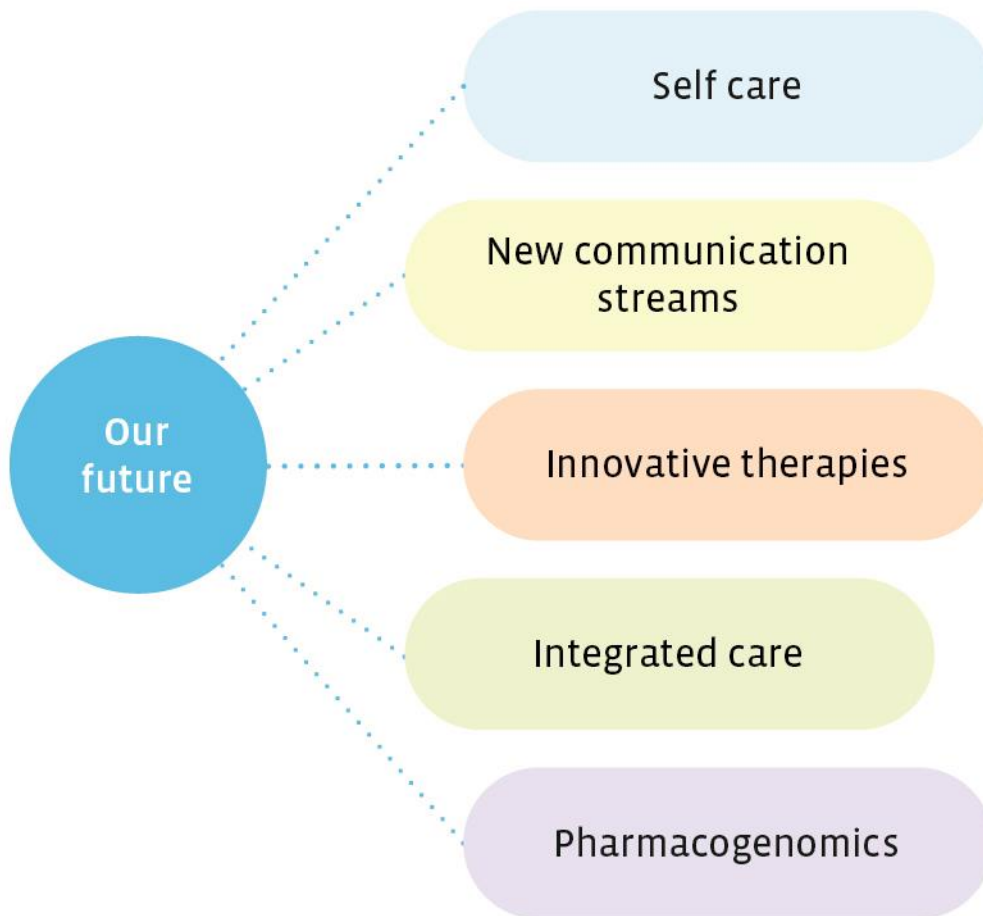
Countries that have adopted electronic prescribing and electronic health records have embraced universal care by placing the patient, not the health care professional, at the centre of collaborative care.

Pharmacists in their communities can improve patient choice, access, care and outcomes greatly where they are able to practise to the full scope of their licence. Community pharmacists harnessing new individualised information as we move to digital health will improve personalised healthcare outcomes. New communication technologies, such as the addition of remote consultation services, add to the continuum of care and offer more choice and access through the already vibrant network that form part of our social fabric.

It is incumbent on all countries who claim to value their healthcare provision to allow and resource community pharmacists to practice to the full scope of their licence.

Conclusion

Our vision for community pharmacy 2020-2025 is both ambitious and realistic, and is the cornerstone of the FIP CPS Strategic Plan 2020-2025. It is the culmination of two years of work by practising community pharmacists from around the world who have come together to share a vision of best practice and best outcomes for our communities, locally and globally. We have been enabled to do so by the singular vision within FIP: One FIP. This CPS vision "Pharmacists at the Heart of our Communities" has been created as a template for every community pharmacist, representative body and policy maker in health care to highlight the value we add to the health of our communities and as a challenge to us all to practise and to be enabled to practise to our full potential.



Everything highlighted in this CPS vision as best practice and best outcomes has been accelerated and focused due to the covid-19 pandemic. We pharmacists have proved to our communities, locally and globally, our accessibility, our expertise, our resilience, our professionalism but foremost our compassion through this crisis. Our profession's close contact and trust with our communities has never been stronger.

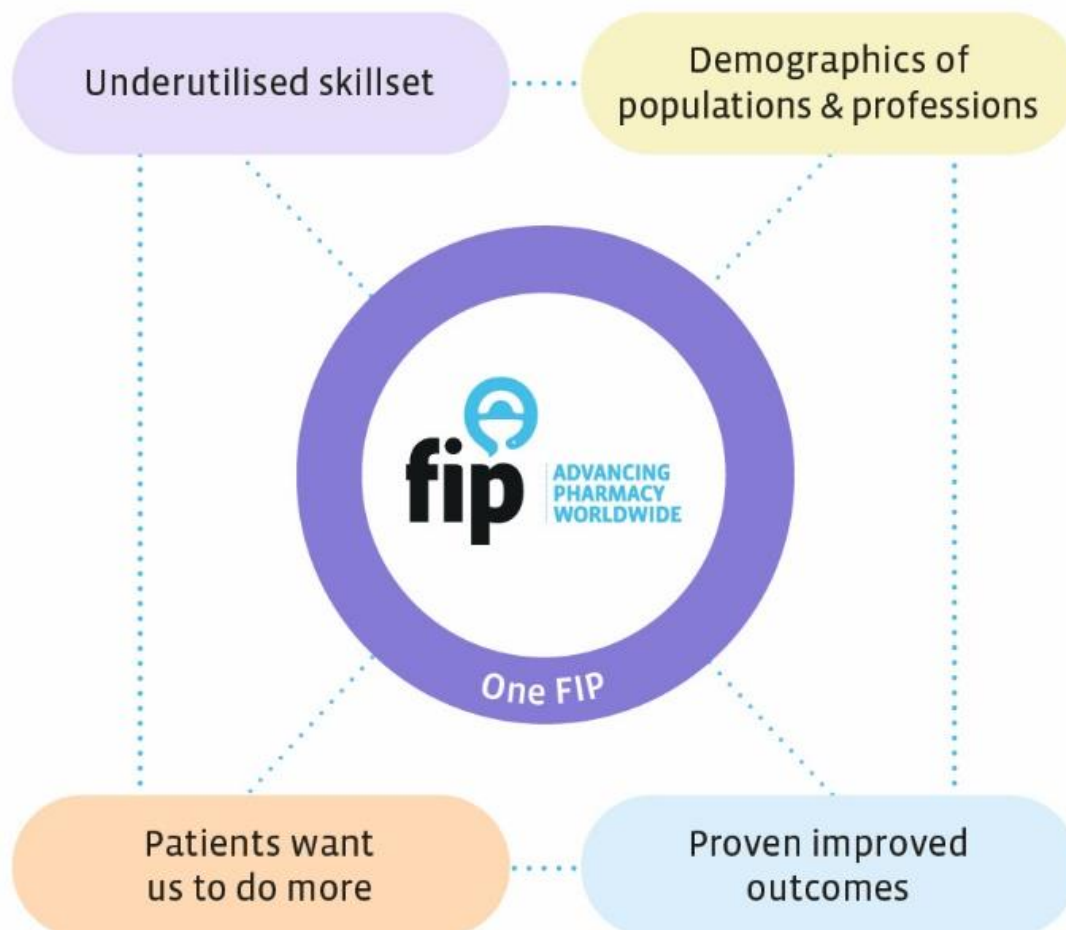
Pharmacists have always been the most accessible healthcare professionals. We have always listened to our patients needs and adapted how we learn, how we practice and how we can improve our relevance. When we ask our communities "what more can we do for you?" we are asked to deliver more professional services.

In summary people want pharmacists at the heart of their communities to give them and their families access and choice to expert healthcare. Pharmacists want to do more, to practise to full scope. Pharmacists want to

stay relevant and challenged. Pharmacists want their profession to advance in a rewarding, compassionate and sustainable direction.

To achieve our Vision 2025 community pharmacists and their representative bodies must be their own advocates

- Community pharmacists must identify and champion best practice in the delivery of care, choice, value, sustainability, and safety. We must recognise our rich heritage and identify future needs and relevance.
- Community pharmacists must ensure that community pharmacy is front and centre of the WHO Sustainable Development Goals to help achieve universal health coverage.
- All our futures rely on rebalancing our environmental stewardship to more sustainable models. Community pharmacists are ideally placed to lead this change in primary health care but must be given the resources to do so.
- As community pharmacists we must challenge our own profession, policymakers and regulators to resource and unleash the potential of community pharmacy through full scope essential pharmacy care.



We must continue to channel our energies in addressing our underutilised skillset, the wishes and needs of our patients, the progression of the practice of community pharmacy and all pharmaceutical sciences, through proven improved outcome based evidence. This is best achieved through international collaboration and collegiality and is singularly aligned with the vision of One FIP.

Further reading

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