

FIP-WHO Collaboration Report 2009-2010

Introduction

Pharmacists play a vital role in promoting health and shaping global health, providing a crucial link between the local/grass roots level and national and international policy level. As the global Federation representing the world's pharmacists and pharmaceutical scientists, FIP is in the unique position to be able to advocate for greater responsibility and accountability of health professions, particularly pharmacists, to promote good health and well being of their citizens while also building community capacity to address the social determinants of health and common behavioural risk factors for the prevention and control of non-communicable diseases. Coordinated action and advocacy is necessary on both levels to decrease the health equity gap.

With the new FIP office established in Geneva, Switzerland, the Federation continually raises and fulfills expectations amongst our Members in our Mission to improve global health.

With a focus on improving the safety, quality and rational use of medicines, FIP is most actively working with the WHO department on Essential Medicines and Pharmaceutical Policies (EMP) within the WHO cluster on Health Systems and Services (HSS). Over the years, the Federation has extended its collaboration and advocacy with other clusters and departments in WHO.

This report highlights the key milestones and achievements of the collaboration between the Federation and the various WHO initiatives from 2009 to April 2010.

Medicines

In this area, the goal of FIP is to enable better access to and rational use of safe, cost-effective, quality medicines worldwide by improving global cooperation, participation and coordination of medicines related initiatives

Key Partner: WHO Essential Medicines and Pharmaceutical Policies department

Summary of joint FIP/WHO activities:

- On behalf of the World Health Professions Alliance (WHPA), FIP had taken a lead role in the WG Communications in WHO International Medical Products Anti-Counterfeiting Taskforce (IMPACT) with an aim to drive forth a risk communications strategy for counterfeit medicines globally. FIP continues to work very closely with the WHO Anti-Counterfeiting Programme and IMPACT since 2006.
- FIP had led the development of a World Health Professionals Alliance (WHPA) joint position statement on combating counterfeit medical products. With an objective to engage constructively engage the Geneva-based diplomatic Missions and the most relevant NGOs and Civil Society groups in strengthening political commitments so as to raise awareness about the public health risks of counterfeiting, and to bring about unified international actions to combat counterfeit medical products, FIP successfully organized an Open Forum for NGOs and diplomatic missions in Geneva in April 2009 as part of the pro-active approach to engage key stakeholders in the discussions on counterfeit medical products.

- FIP was invited to co-moderate a WHO Open Forum on the International Medical Products Anti-Counterfeiting Taskforce (IMPACT) on the 26th March 2010. FIP also assisted the Secretariat in organising the IMPACT part of the event. This meeting brought together 49 WHO Member States and 24 international development agencies, NGOs and private sector organizations from around the world to share information on the work of IMPACT, and review the feed-back from WHO Member States on the use of the term "counterfeit medicines" and/or equivalent in national legislation. The meeting was a valuable opportunity to present detailed overview of the technical work that FIP has undertaken since 2006 as chair of the IMPACT WG on Communications.
- FIP assisted in revision of the WHO Guide on Multisource (Generic) Pharmaceutical Products: Guidelines on registration requirements to establish interchangeability. A FIP/WHO Biopharmaceuticals Classification System (BCS) Task Force had been established to take on an immense amount of work in preparing the review articles on individual medicines' biowaiver monographs which is ongoing and important. The FIP Board of Pharmaceutical Sciences will continue to be instrumental in the revision process of these guidelines.
- FIP and WHO had published the WHO/FIP Developing Pharmacy Practice: a Focus on Patient Care, Booklet 2006 Edition. This manual served as a tool and a guide for pharmacy training, both in industrialized and resource-constrained countries. A process of field testing had been initiated and will be continued through 2008 and beyond. FIP had also been actively promoting the publication in its Boards. This resource had been translated into French, Spanish, and Russian. Currently, FIP is working with partners on further translation into Chinese, Italian and other languages.
- FIP attended the WHO Expert Committee on Specifications for Pharmaceutical Preparations meeting in Geneva in October 2009. FIP contributed actively in the review of various WHO guidelines in particularly, the revision and update of the WHO Good Distribution Practice guidelines for pharmaceutical products. The Federation also took the opportunity to provide a status update on our work done to prepare for the revision of the 1993 FIP/WHO guidelines on quality of pharmacy services in the community and hospital settings. It is anticipated that the guidelines will be updated by 2010.
- FIP was invited by WHO to author the Chapter on Human Resources in the pharmaceutical sector in the WHO World Medicines Situation Report 2010. This publication provides a review of the medicine situation in the world.
- The FIP South East Asia Pharmaceutical Forum (SEARPharm) has been invited to share its work on promoting Good Pharmacy Practice and Access of Medicines at the WHO's Inter-country meeting on promoting rational use of medicines in the community to be held on 13-15 July 2010 in New Delhi. The FIP SEARPharm forum has also recently concluded its work to assist the development of the first ever India National Drug Formulary based on the WHO model formulary.

Strengthening Pharmaceutical Workforce

In this area, the goal of FIP is to document and analyse pharmacy workforce trends and to develop guidance for FIP member organisations and other stakeholders on how to address challenges in pharmacy workforce development to support access to and rational use of medicines.

Key Partners: WHO Human Resources department and the WHO Essential Medicines and Pharmaceutical Policies department

Summary of joint FIP/WHO activities:

- FIP has progressively increased its collaborations with the WHO Human Resources Department since the WHO World Health Report 2006 and toolkit. Our contributions in Human Resources for Health included:

- A work plan focusing on the country case studies in 7 African countries for 2010-2012 has been developed following the regional workshop held in Nairobi in August 2009 (report of workshop available on request). Through this plan, we aim to strengthen needs-based pharmacy education capacity in case study countries through regional and international collaboration for academic capacity, quality assurance systems, strategic vision and advocacy; as well as, to develop evidence base tools and guidance to inform global pharmacy education strategic development.
- At the FIP Congress in Istanbul (September 2009), the 4th Global Consultation on pharmacy education was held. Representatives from WHO HQ and country offices were actively involved and provided inputs to a first meeting of invited Deans of pharmacy schools. It was important to incorporate their views into the work of the FIP Pharmacy Education Taskforce and to engage them in steering FIP organisational development and policy with regard to pharmacy education.
- The University Twining Network (UNITWIN) Chairs Programme is a UNESCO based programme that aims to advance research, training and programme development in higher education by building university networks and encouraging inter-university cooperation through transfer of knowledge across borders. The UNITWIN project to establish a Global Pharmacy Education Development Network has received designate status from UNESCO and WHO is a partner in supporting this initiative.
- Validation of the Global Framework for Quality Assurance of Pharmacy Education – a survey has been undertaken in 24 countries with 77 respondents. Data is being analysed and an updated framework to be completed in the next 6 – 9 months. As an outcome of this work, WHO and FIP is jointly developing an institutional self-assessment for pharmacy education. This will be piloted in Nigeria with the WHO country office.
- FIP-WHO Pharmacy Education Taskforce organised the fourth round table for Pharmacy Education at the 69th FIP Congress in September 2009. The outcome of this meeting was the validation of the action plan of the Taskforce with specific recommendations on the long term vision, objectives and project domains for 2010 and beyond.
- FIP and WHO are both undertaking a collaborative programme of work to develop evidence-based guidance and frameworks through which to facilitate the sustainable development of higher education capacity and a needs-based pharmacy workforce. The aim of the database is to provide estimate information on global pharmacy education capacity for policy makers and researchers at international, regional and national levels.
- FIP and our collaborating centre in London, together with support from the WHO launched the new global academic journal on Pharmacy Education in June 2009.
- The 2009 FIP Global Pharmacy Workforce Report was officially launched at the 69th International Congress of FIP in Istanbul, Turkey. In the report, contributors from the World Health Organization (WHO) state that "Pharmacy workforce shortages translate into gaps in the management of the pharmaceutical system and supply chain and pose serious risks to patients." FIP is pleased to be part of efforts to address such risks and offer advocacy tools to support pharmacy workforce planning in countries.
- FIP had joined the Global Health Workforce Alliance (GHWA). A representative of the FIP-WHO Pharmacy Education Taskforce was invited to join the technical group on scaling up training and education.
 - FIP moderated part of the e-discussions focussing on task-shifting. This was organised by the Global Health Workforce Alliance from 28th April - 8th May 2009.
 - Since 2008, FIP in collaboration with its partners in the World Health Professions Alliance and support from the WHO Global Health Workforce Alliance, initiated the Positive Practice

Environments (PPE) Campaign, a worldwide campaign - to generate public awareness and political will to introduce and maintain improved working conditions and environments within health systems. This is a country and facility-centred initiative focusing on all health care settings. The campaign aims to improve the quality of health services by raising awareness, identifying good practice, developing tools for managers and health professionals in the field.

- The Alliance convened a two-day informal consultation on 'Advocacy and Communication Priorities for 2010-2011 on 19-20 November 2009. The meeting gathered around 30 key advocates and communicators from the Alliance Communications Expert Network (CEN), HWA (Health Workforce Advocacy Initiative) and other activists working on health workforce advocacy and communications. The meeting aims to create a platform for joint sharing, basing on lessons learnt and achievements, while identifying priority events and activities for the coming period. FIP was present and provided its inputs in the discussions.
- Working with the WHO department on Essential Medicines and Pharmaceutical Policies, FIP provided technical input in the WHO-supported "Survey of pharmaceutical human resources" project. A regional workshop was conducted in July 2009 in Abuja, Nigeria. Four countries were represented – Ghana, Nigeria, Sudan and Tanzania – with stakeholders from national ministries, professional regulatory councils, universities and private sector consultants, as well as FIP.

Patient Safety

In this area, the goal of FIP is to focus on the contribution of pharmacists to improve patient safety. FIP aims to be a pro-active partner of the WHO Alliance on Patient Safety in its global initiatives, including involvement with the Global Challenges, Small Research Grant Programme, Patient Safety Solutions, Patients for Patient Safety, and African Partnerships for Patient Safety and where medication safety and patient safety is important.

Key Partner: WHO Patient Safety department

Summary of joint FIP/WHO activities:

- To support the WHO Patient Safety Global Challenge on antimicrobial resistance, FIP and WHO organised a joint symposium on combating antimicrobial resistance for patient safety in the 69th FIP Congress in Istanbul, Turkey.
- FIP successfully received funding for its submission of a patient safety project on "Implementation and testing of culture-specific pharmaceutical pictograms for the labelling of medications in Mexico" by the World Alliance on Patient Safety Small Research Grant programme in 2008/2009. This project is an initiative of the FIP Military and Emergency Pharmacy Section and is strongly supported by the Children's Hospital of Eastern Ontario (CHEO), Canada.
- FIP has been invited to review the WHO Patient Safety Curriculum Guide. WHO and FIP are both undertaking a major consultation exercise to develop a Multi-professional Patient Safety Curriculum Guide. This is being done in partnership with the International Confederation of Midwives, as well as the International Council of Nurses, the World Dental Federation and the World Medical Association under the auspices of the World Health Professions Alliance. This work is envisioned to be completed by end of 2010.
- FIP had initiated discussions with the WHO African Partnerships for Patient Safety on potential opportunities to strengthen our activities and collaborations on the following areas:
 - Input into the WHO hospital situational analysis tool on hospital pharmacy processes. FIP will contribute by designing and defining key questions for the checklist on hospital pharmacy, based on the 6 themes of the Basel Consensus Statements. This will be one of the ways of monitoring the implementation of the Basel Statements and its evaluation in real practice.

- Develop patient safety tools and advocacy materials on medication use and medication safety issues
- Engage national pharmacy associations in African with the activities of the Partnership, especially in regards to the need to establish culturally accepted levels of hospital pharmacy practice standards in the beginning, leading to wider patient safety roles of pharmacists in the health system

Non-Communicable Diseases

In this area, the goal of FIP is to support and promote pharmacists' interventions in the prevention and control of non communicable diseases (inter alia, tobacco cessation and HIV/AIDS. FIP aims to be a pro-active partner in supporting the WHO Global Strategy on Prevention and Control of Non Communicable Diseases and Mental Health, where appropriate, to give input into the implementation of the Global strategy by identifying the specific areas where FIP could contribute or collaborate with WHO.

Key Partner: WHO Health Promotion department

Summary of joint FIP/WHO activities:

- As a pro-active partner to the WHO Tobacco Free Initiative (TFI) and the Framework Convention on Tobacco Cessation (FCTC), with a specific focus on supporting the implementation of Article 14: Demand reduction measures concerning tobacco dependence and cessation, FIP continued to be active in promoting the “Global Network of Pharmacists against Tobacco”. The Network was established in order to facilitate collaboration between regional pharmaceutical forums, professional pharmaceutical associations and individual pharmacists in the area of smoking cessation and anti-tobacco activities. The website: www.pharmacistsagainststobacco.org had been updated regularly.
- As an observer to the WHO FCTC, FIP participated in a meeting of NGOs in January 2009. The consultative meeting covered the areas of cooperation that will advance implementation of the Convention and the decisions of the Conference of the Parties. FIP will continue to working closely with the FCTC secretariat and WHO TFI on establishing mechanisms and resources for strengthening international cooperation and coordination for implementation of the Convention
- FIP was invited to participate in the first WHO global forum on NCDNet on the 24th February 2010. NCDnet is composed of the WHO Secretariat staff, an International Advisory Council, NCDnet Global and Regional Forum meetings and selected, time-bound, task specific working groups. It is supported by web-based communications tools. The International Advisory Council provides strategic advice to WHO's Assistant Director-General for Non-communicable Diseases and Mental Health (NMH) on the achievement of objective 5 of the Action Plan for the Global Strategy for the Prevention and Control of Non-communicable Diseases and the goals of NCDnet. FIP continues to be actively engaged with the progress of this initiative supported in partnerships with other organisations such as the International Union of Cancer Control.
- On activities relating to health promotion, FIP continued its support as a board member of the WHO NGO Alliance on Health Promotion in 2009/2010. The mission of this Alliance is to improve the health and development of all people by generating and sharing knowledge for building a collective NGO voice and to strengthen advocacy, policy and action in the promotion of health. FIP provided inputs into a workshop that on civil society advocacy at the 7th Global Conference on Health Promotion in October 2009.
- For the WHO Executive Board meeting in January 2010, FIP drafted the joint intervention that was presented on behalf of the Inter-African Committee on Traditional Practices, the International Union of Health Promotion and Education, the International Network of Health Promotion Foundations, the International Health Co-operative Organisation, the NGO Alliance for Health Promotion, Life University USA, the Stop-Drink-Network Thailand, the Afro-European Medical Research Network, the International Baby Food Action Network, the Education Development Center, the International

Council on Social Welfare, International Federation of Medical Students' Associations, the International Pharmaceutical Federation, the Associated Country Women of the World and the World Federation for Mental Health.

- FIP is currently working with WHO to organise a one-day forum for NGOs, civil society and diplomatic missions in Geneva in 2010, focusing on the following thematic areas of a WHO global strategy for health promotion:
 - Documenting the evidence showing the value of health promotion
 - Strengthening advocacy of NGOs in health promotion
 - Exploring models for financing health promotion
 - Holding governments accountable for health promotion

Other notable collaborations

- FIP is an official Partner of the WHO Partnership for Maternal, Newborn and Child health (PMNCH) and FIP continues to advocate a role of the pharmacist in maternal, newborn and child health care. A new FIP Working Group has been established to develop a reference paper on the effective utilization of pharmacists in improving maternal, newborn and child health (MNCH). WHO will be invited to provide input.
- FIP will collaborate with the WHO Stop TB department to organise a joint symposium on “Pharmacists: an untapped potential in TB Control?” in the FIP Congress in Lisbon 2010. In strengthening our partnership in this area, both FIP and WHO will explore the opportunities to develop a joint declaration on the global situation of TB and MDR-TB. A working group will first be established.
- FIP was present at the 125th Executive Board Meeting of the World Health Organization in January 2009. During this time the Federation took to the floor to make interventions on:
 - Counterfeit Medical Products
 - Public Health Innovation and Intellectual Property
 - Primary Health Care
 - Social Determinants of Health
 - Code of Practice in the international recruitment of health personnel
- FIP was present at the World Health Assembly in May 2009. During this time, the Federation took the floor to make interventions on:
 - Rational use of Medicines
 - Public Health Innovation and Intellectual Property
- FIP was present at the 126th Executive Board Meeting of the World Health Organization in January 2010. During this time the Federation took to the floor to make interventions on:
 - Prevention and control of non communicable diseases: implementation of the global strategy (joint with the World Health Professions Alliance);
 - Prevention of Alcohol Abuse (as part of the World Health Professions Alliance)
 - Healthcare Worker Migration (as part of the World Health Professions Alliance)
 - Prevention and control of non-communicable diseases: implementation of the global strategy (joint with a wider NGO alliance).
- As part of enhancing our ongoing communication strategy with WHO, FIP released supporting statements and press releases on the following international observance Days:
 - World Tuberculosis Day, 24th March 2009
 - World No Tobacco Day, 31st May 2009
 - World Heart Day, 27th September 2009
 - World Mental Health Day, 12th October 2009
 - World Diabetes Day, 14th November 2009
 - World AIDS Day, 30th November 2009
 - World Cancer Day, 4th February 2010
 - World Tuberculosis Day, 24th March 2010
 - World Health Day, 7th April 2010

- Several representatives from WHO attended the 69th World Congress of Pharmacy and Pharmaceutical Sciences in Istanbul, Turkey, as participants and/or speakers.
- FIP delivered expertise and input in the following WHO documents:
 - WHO Patient Safety Curriculum
 - WHO CC Chemical reference substance report
 - WHO Good Practices for Pharmaceutical Microbiology Laboratories (QAS/09.297/Rev.1)
 - WHO guideline on transfer of technology (QAS/08.259 Rev.1)
 - WHO good practices for pharmaceutical quality control laboratories (QAS/09.296 and QAS/09.296 Rev.1)
 - WHO guidelines on requalification of prequalified products (QAS/09.294 and QAS/09.294 Rev.1)
 - WHO GMP for sterile pharmaceutical products (QAS/09.295 and QAS/09.295 Rev.1)
 - The following revised proposals for the International Pharmacopoeia
 - Amikacin
 - amikacin injection
 - amikacin sulfate
 - Indinavir capsules
 - kanamycin acid sulfate
 - Kanamycin monosulfate
 - kanamycin injection
 - Lopinavir
 - lopinavir and ritonavir tablets
 - Saquinavir tablets
 - Tenofovir disoproxil fumarate
 - Tenofovir tablets
 - Quinine bisulfate tablets

In conclusion

All pharmacists have a common goal to protect the well-being of patients in all parts of the world from poor quality, substandard and counterfeit medical products. FIP and its Member Organisations are taking pro-active steps in collaboration with governments and WHO to ensure the quality, safety and efficacy of all medical products available in countries, in accordance with recognized international standards.

Our collective experience tells us that successful health interventions demands a complex interaction between the available public and private sector institutions financing, availability of functioning health care facilities, skilled health personnel such as Pharmacists, access to medical and educational resources, both modern and traditional, all factors working with individuals taking responsibility for their own health. There are of course challenges to achieve all of that.

The motivation for developing and establishing a new advocacy office comes from the desire to build upon several significant accomplishments of the past several years. The most significant of these is the increased awareness and reputation of both FIP and the role of the pharmacist and pharmaceutical sciences. This has resulted from the work FIP has done internally and through mutually beneficial partnerships with key global players, such as, the World Health Organisation (WHO). The complementary work of the FIP Regional Pharmaceutical Forums has facilitated a stronger relationship between FIP's Member Organisations and the WHO Offices in their respective countries and regions. This collaboration has also served to promote the role of pharmacists in the WHO healthcare agenda globally.

FIP invites its 122 national member organisations and all individual members to note this report.

We would also like to take the opportunity to thank Dr Sabine Kopp from WHO for her resolute support to our sustained collaborations in 2009.