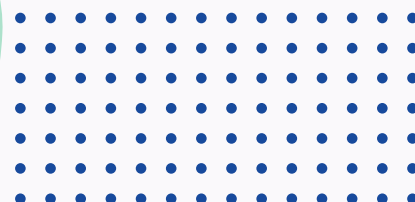


# REPORT ON PHARMACY SERVICES IN EUROPE





*Every day, as community pharmacists, we assist not only patients, but also neighbours, caregivers, parents, children, and the elderly – each with their own story, their own needs and concerns, and great trust placed in the familiar faces at our counters and in our consultation spaces.*

*Whether it is providing reassurance about a new medicine, dispensing it, delivering and administering a life-saving vaccine, identifying a potential health risk through screening services, managing common ailments, or helping someone manage a long-term condition, our role has grown far beyond what many imagine. Community pharmacists have been incrementally building on our essential role in dispensing medicines to play an increased role in serving as accessible health partners, trusted advisors, and vital bridges within the healthcare system.*

*This report reflects the evolution of our profession. It shows how, through education, innovation, and compassion, we are delivering services that improve health outcomes, reduce hospital visits, support prevention, and ultimately bring care closer to people – especially in underserved or rural communities where we are sometimes the only available health contact.*

*But this report is also a call to action. To unlock the full value we can offer, we need the right tools, training, and support. We need policy frameworks that recognise the essential care we provide – not just in times of crisis (like during the COVID-19 pandemic) but every single day.*

*Our work is rooted in the communities we serve, and it is shaped by the belief that healthcare should be personal, equitable, and within reach for all. The pharmacy is where medicines are dispensed with care and expertise and where every interaction offers connection and guidance. It is both a cornerstone of safe healthcare delivery and a place of trust within the community.*

*We invite you to read this report as a shared commitment of over 500,000 pharmacists across Europe – to make health more human, and more accessible, for everyone.*

# EXECUTIVE SUMMARY

Community pharmacists play an essential role in delivering accessible, equitable, and high-quality healthcare across Europe. They are among the most trusted and readily available healthcare providers, often serving as the first, and sometimes only, point of contact between people and the healthcare system. This report provides a comprehensive overview of current pharmacy services and presents policy recommendations to unlock their full potential.

The report shows how pharmacy services build on the trusted foundation of dispensing to deliver an ever-expanding range of health interventions: from health promotion and disease prevention to chronic disease management, managing acute conditions such as common ailments, medicines use reviews, vaccination, screening, referral, and digital health support. These services significantly contribute to improved patient outcomes, reduce hospitalisations, enhance therapeutic adherence, and alleviate the burden on the healthcare system.

The COVID-19 pandemic further accentuated the strategic role of community pharmacies. Throughout the crisis, pharmacists ensured continuity of care, tested for infections, administered millions of vaccines, delivered medicines, and supported public health initiatives, reaffirming their value as resilient frontline providers. However, systemic barriers – such as outdated legal frameworks, inconsistent reimbursement models, and limited read and write access to digital health records – continue to hinder the broader implementation and recognition of these essential services.

## POLICY RECOMMENDATIONS



**A strategic policy shift:** recognising community pharmacies as essential partners in delivering people-centred, sustainable healthcare and empowering them through supportive regulation, appropriate investment, and systemic integration.

**Regulatory reforms:** expand pharmacists' scope of practice according to competency areas and remove legal barriers to service provision.



**Sustainable financing:** ensure appropriate and consistent remuneration for pharmacy services to reflect their clinical and public health contributions.



**Workforce planning:** strengthen education, leadership, and ongoing professional development.

**Crisis preparedness:** fully integrate pharmacies into national public health response frameworks.



**Access and equity:** strengthen pharmacies' role in reducing health inequities by ensuring their presence in underserved areas and enabling access to specialty medicines, supporting territorial cohesion.



**Antimicrobial stewardship:** enable pharmacies to take a proactive role in infection control and antibiotic use.

# ABOUT PGEU



The Pharmaceutical Group of the European Union (PGEU) is the voice of community pharmacists in Europe. Founded in 1959, PGEU brings together national associations of pharmacists and pharmacies from over 30 European countries, including EU Member States, candidate countries, the UK, and EEA countries. PGEU represents more than 500,000 community pharmacists working in over 160,000 pharmacies.

>500.000

Community pharmacists

>160.000

Pharmacies

PGEU's mission is to promote the role of pharmacists as essential providers of high-quality, patient-centred healthcare, and to ensure that pharmacy practice continues to evolve in response to societal and health system needs. Through policy engagement, best practice sharing, and representation at EU level, PGEU advocates for a regulatory and professional framework that enables pharmacists to contribute fully to the health and well-being of European citizens.

# COMMUNITY PHARMACY IN EUROPE



Across Europe, community pharmacists are among the most accessible and trusted healthcare professionals, providing essential, and increasingly complex, services in every region.

With more than 160.000 pharmacies and over half a million qualified community pharmacists, they are part of people's daily lives and often serve as the first (sometimes the only) point of contact with the healthcare system.

Pharmacists complete at least five years of university education and continue with lifelong professional development, placing them in a strong position to meet the needs of ageing populations, rising chronic disease, and persistent gaps in access to care.

**European citizens make more than four billion visits to community pharmacies each year:** a clear proof that pharmacies are a vital front door to healthcare. Their presence in both cities and rural areas, combined with extended opening hours, makes access to care more equitable. For many people, the local pharmacy is a familiar, welcoming place where language or mobility barriers are eased through empathy, professional support, and continuity of care. Pharmacists often care for the same families across generations, building durable relationships grounded in trust and expertise.

Beyond their core strength in dispensing and medicines advice, community pharmacists now play a broader **clinical and public health role**. They administer vaccines, support smoking cessation, manage chronic conditions, and provide point-of-care testing, delivering person-centred, evidence-based services that improve outcomes. These interventions reduce hospital admissions, boost adherence, and particularly benefit people with multiple conditions or those living in underserved areas.

The **COVID-19 pandemic** showcased this strategic role. Pharmacies remained open during lockdowns, delivered essential medicines, informed the public, carried out testing, and administered millions of vaccines. This response showed how pharmacists can relieve pressure on overstretched health systems and strengthen population resilience when fully utilised.

Policy is catching up. At the EU and national levels, there is growing momentum to **integrate community pharmacy more fully into primary care and public health**. The European Commission has recognised pharmacy contributions to medicines optimisation, antimicrobial stewardship, and cancer prevention and screening. The European Parliament has acknowledged pharmacists' vital role during COVID-19 and called for greater integration in EU health initiatives. Increasingly, Member States are remunerating advanced services alongside dispensing, reflecting their **added value for patients and healthcare systems**.

This report maps today's community pharmacy services across Europe, illustrates their contribution to health and well-being, and identifies practical steps to unlock their full potential for the future of European healthcare.

# PHARMACY SERVICES



Pharmacy services are professional healthcare activities provided by community pharmacists, with the safe dispensing of medicines at their core and an ever-expanding range of additional healthcare interventions. They are designed to optimise the safe and effective use of medicines, improve health outcomes, and support patients in their day-to-day healthcare journeys.

## For patients

Community pharmacies are part of every neighborhood, offering convenient, walk-in access to care with long opening hours and no appointments. This is especially valuable for people with long-term conditions, the elderly, informal carers, and those in rural or underserved areas. Pharmacists provide personalized, confidential support built on familiarity and trust, advising on new medicines, helping manage complex regimens, treating common ailments, and identifying risks through screening, so patients aren't navigating their health alone.

## For health systems

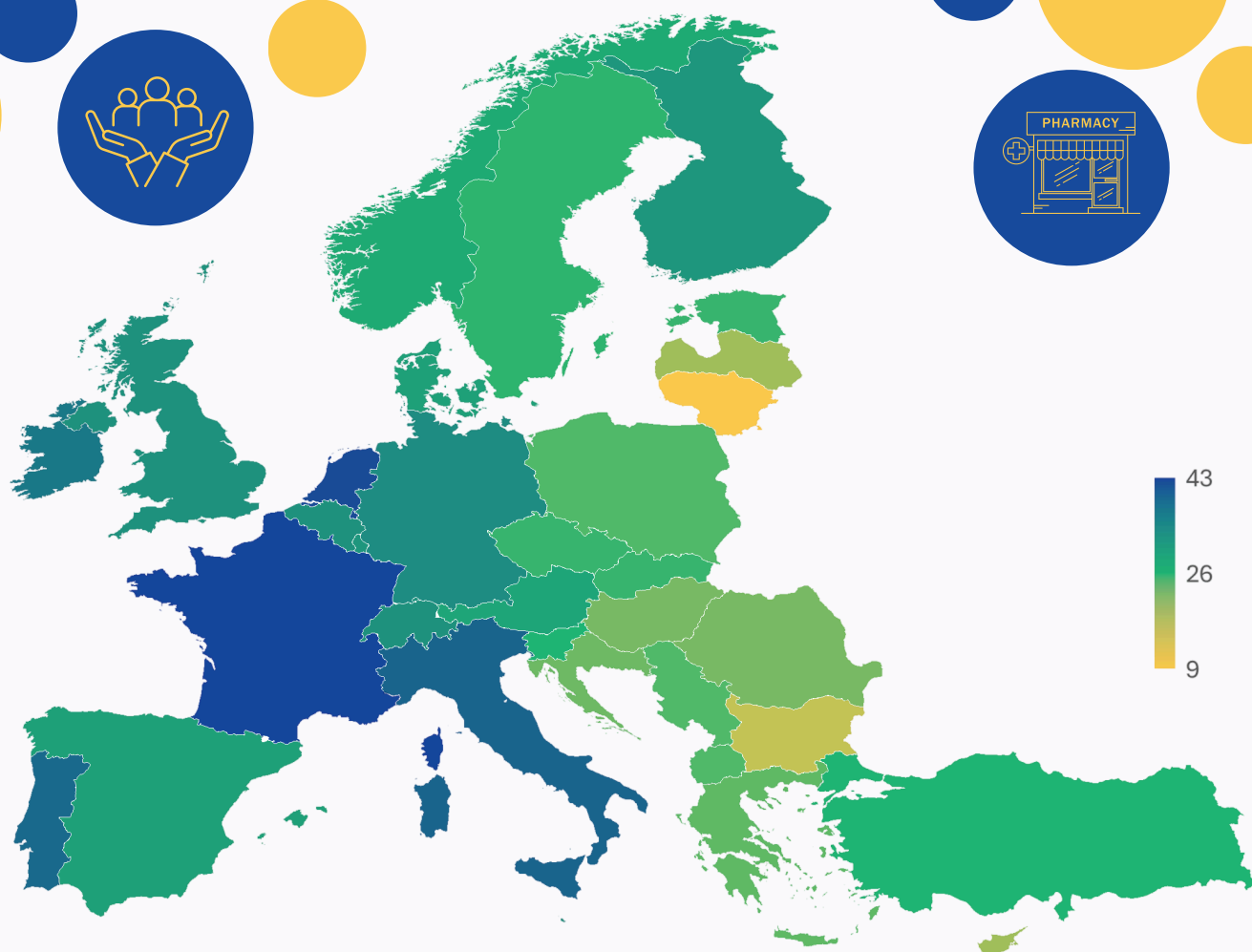
Pharmacy services are a cost-effective way to deliver more care closer to home. They help prevent avoidable hospitalizations, enable earlier detection, support treatment adherence, and reduce pressure on general practice and emergency departments. In many countries, pharmacists also provide vaccinations, monitor long-term therapies, and contribute to public health surveillance.

## For society

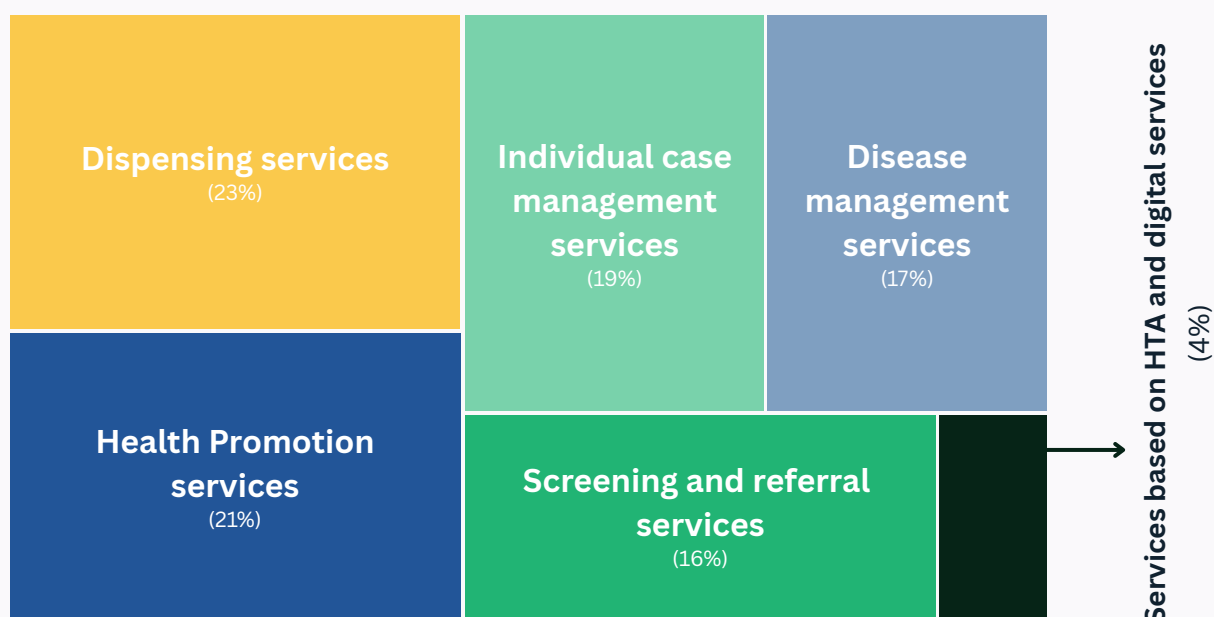
With over 160.000 pharmacies across Europe, no other part of the health system is as accessible, advancing health equity and territorial cohesion. Pharmacies strengthen system resilience (as demonstrated during COVID-19, when they stayed open, adapted rapidly, and supported communities) and they embody a modern, person-centered approach that improves outcomes, boosts prevention, and makes healthcare more sustainable and responsive. Investing in their development and integration is an investment in better, more accessible care for all.

*(The findings in this report are complemented by a peer-reviewed analysis pending publication. More information will be available soon.)*

# PHARMACY SERVICES IN EUROPE



Gradient colour map portraying the number of pharmacy services available in each country.



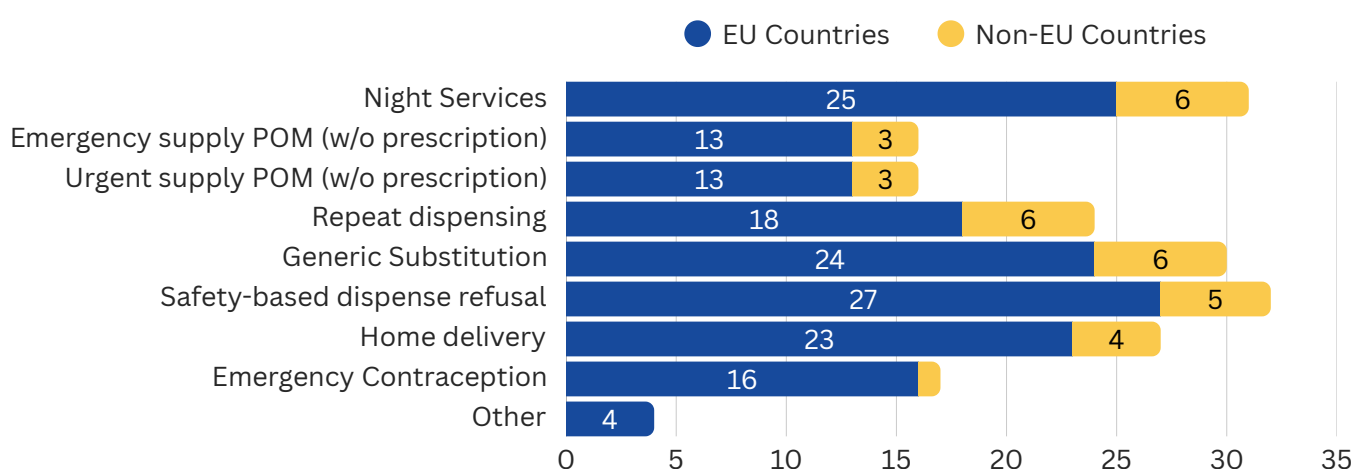
Proportion of each category of pharmacy services available.

# PHARMACY SERVICES IN EUROPE

## Dispensing Services

Dispensing services form the foundation of community pharmacy practice, **ensuring safe, equitable, and timely access to medicines**. These services include night services, emergency and urgent supply of medicines without prescription, repeat dispensing, generic substitution, home delivery, among others.

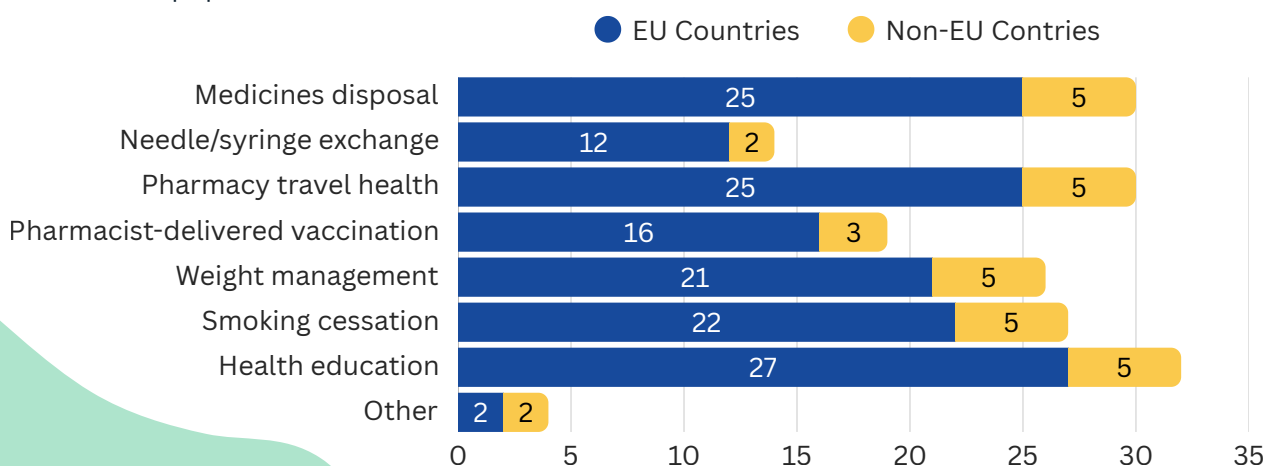
Organised through contractual agreements or national legislation, they are widely available across Europe, with some reimbursed by healthcare systems. Pharmacists play a key role in promoting medicine safety and cost-effectiveness by substituting generics and assessing prescription appropriateness. Beyond simply supplying medicines, these services foster continuous therapy and mitigate medicine shortages. For patients, dispensing services represent a vital interface with the healthcare system, providing not just medicines, but also expert counselling and risk mitigation.



## Health Promotion Services

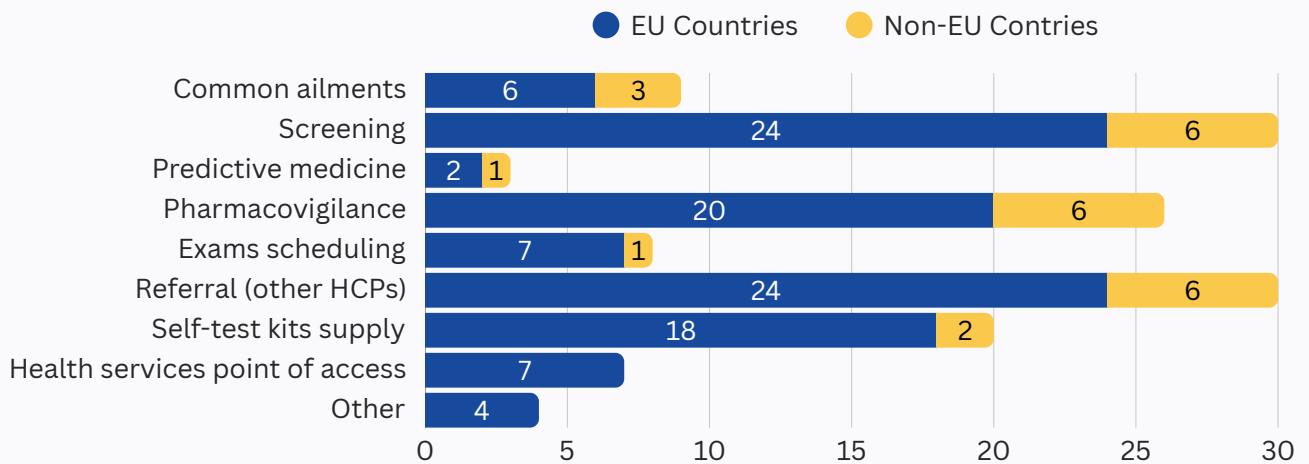
Health promotion services in pharmacies are increasingly important in enhancing public health through education and prevention. These services include pharmacist-led vaccination, smoking cessation, weight management, safe disposal of medicines, travel health advice, and needle exchange programmes. Often supported by national campaigns or regional initiatives, they are widely organised within pharmacies, sometimes alongside private consultation spaces.

Many are reimbursed by health authorities, recognising pharmacists' role in increasing reach and uptake of **preventative care**. For patients, these services provide accessible, trusted, and community-based support to prevent illness, promote healthier lifestyles, and **improve self-care**, especially for vulnerable or underserved populations.



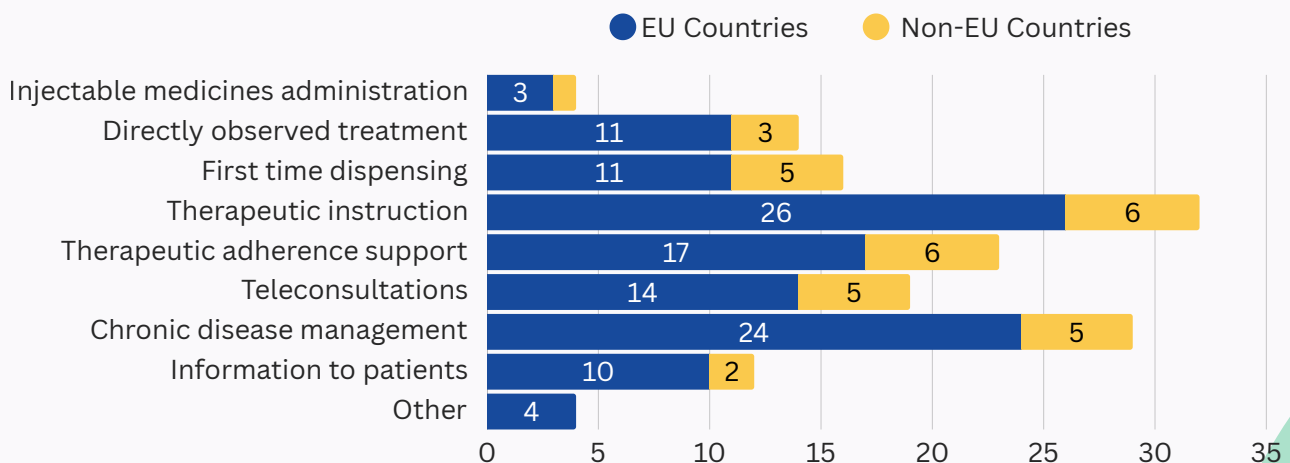
## Screening and Referral Services

Screening and referral services enable **early detection** and timely intervention for at-risk individuals, extending the public health role of pharmacies. These services encompass disease screening (e.g., diabetes, hypertension, HIV), common ailment management, supply of self-test kits, pharmacovigilance, and structured referral to other healthcare providers. Pharmacies often provide these services through in-pharmacy testing or digital tools, and in collaboration with general practitioners or health authorities. They are increasingly formalised and reimbursed, particularly in preventive care frameworks. These services benefit patients by offering low-barrier access to **early diagnosis**, encouraging **timely medical intervention**, and **reducing unnecessary doctor visits** for common conditions.



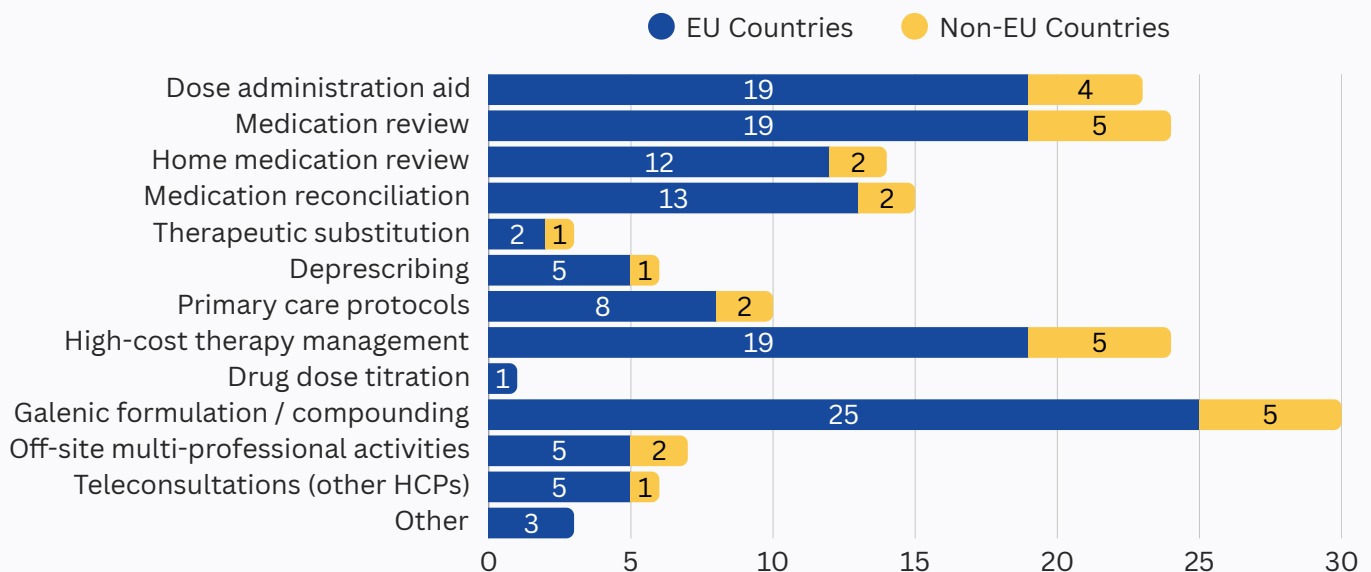
## Disease Management Services

Disease management services support patients with chronic or complex conditions by **enhancing medication use, therapy adherence, and self-care**. These services include administering injectables, supervised medicine consumption, adherence support, first-time use interventions, and chronic condition management (e.g. asthma, diabetes, hypertension). Typically structured around pharmacist-led consultations and sometimes integrated with digital follow-up, these services are implemented via regional protocols or national pilots. They are increasingly recognised and reimbursed. For patients, these services mean better disease control, improved treatment outcomes, and enhanced quality of life through personalised care, particularly in managing long-term therapy and reducing complications.



## Individual Case Management Services

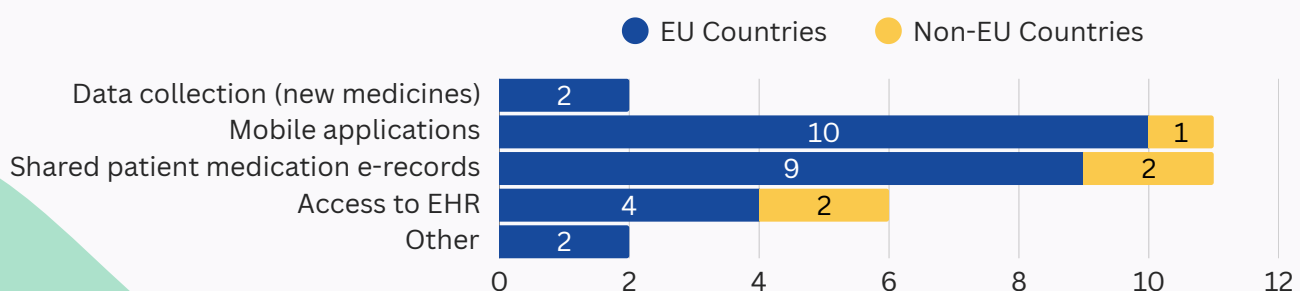
Individual case management services enable pharmacists to deliver **highly personalised pharmaceutical care**, particularly for complex therapeutic regimens. These services include medicine use reviews, dose administration aids, deprescribing, therapeutic substitution, medication reconciliation, and support for high-cost or compounded therapies. Organised under **specific protocols** or collaborative care models, they often involve **interprofessional communication** and may take place in the pharmacy, at home, or in care institutions. Many of these services are reimbursed, reflecting growing recognition of pharmacists' clinical role. For patients, these services offer tailored interventions that optimise treatment, reduce adverse effects, and support independence, especially in **polypharmacy, multimorbidity, or transitions of care**.



## Services Based on Health Technology Assessment and Digital Services

Digital services and those based on Health Technology Assessment (HTA) are transforming pharmacy practice across Europe. These include **data collection on medicine effectiveness**, access to shared electronic records, mobile health applications, and teleconsultations. Often integrated into national digital health systems or pharmacy software, these services support real-time communication, care continuity, and informed decision-making.

Pharmacists' **access to electronic health data** enhances safety and coordination, while mobile tools and telehealth improve patient reach and self-management. These innovations offer substantial benefits: greater efficiency, better outcomes, improved adherence, and increased patient engagement, particularly in chronic disease care and during healthcare access disruptions.



# POLICY RECOMMENDATIONS

## 1. Expand the scope of pharmacy practice

- Remove **legal and regulatory barriers** preventing pharmacists from offering innovative, patient-centred services (e.g. vaccination, deprescribing, prescription renewal, and therapeutic substitution).
- Expand the **legal scope of community pharmacy** to enable their integration in vaccination campaigns, early screening, and referral for common ailments.
- Improve pharmacists' **(read and write) access to shared electronic health records** to strengthen continuity of care and integrated service provision.

## 2. Sustainability of pharmacy services and healthcare systems

- Ensure appropriate **remuneration of pharmacy services** to reflect their clinical and public health value. This includes adherence services, vaccination, medicine use reviews, screening, and counselling.
- Recognise the indispensable role of community pharmacists in delivering **cost-effective care** and reward their contribution to improving health system sustainability.
- Incentivise the **uptake of generics and biosimilars** through community pharmacy while ensuring adequate compensation for pharmacists.
- Invest in the **digital transformation of community pharmacies**, including support for digital infrastructures, and fairly remunerate services that community pharmacies deliver through digital tools.
- Fund and integrate **pharmacy-led waste disposal schemes** to ensure environmentally sustainable use.

## 3. Workforce development and planning

- Develop and implement **national workforce strategies** for pharmacy, aligned with broader health system planning.
- Ensure **strategic representation of pharmacists** in health governance, by appointing senior pharmacists in advisory and leadership roles.
- Increase **investment in pharmacy education and training**, adapting curricula to reflect evolving roles, including interprofessional collaboration and emerging services.
- Support **continuing professional development** for community pharmacists across all fields, especially in advanced services and digital health.

## 4. Crisis and Preparedness

- Formally integrate pharmacists in **national preparedness and vaccination strategies**.
- Include pharmacies in the development of **care models for public health emergencies**, ensuring rapid mobilisation and communication.
- Strengthen investments in **primary care, prevention, and medicines optimisation**, with pharmacy as a cornerstone of local resilience.



# POLICY RECOMMENDATIONS



## 5. Access and equity

- Enable community pharmacies to dispense **specialty and high-cost medicines**, improving access for patients and reducing inequities caused by hospital-only supply.
- Recognise and fund **pharmacists' role in health literacy, combating misinformation**, and guiding vulnerable populations toward care.
- Ensure community pharmacies play a central role in **reducing health inequities** by maintaining their viability in underserved and low-density areas. This includes expanding their capacity to provide essential health services, thereby improving continuity of care and reinforcing territorial cohesion.

## 6. Antimicrobial resistance and infection control

- Expand **pharmacy-based vaccination services** to increase coverage and reduce infection risks.
- Commission and fund **pharmacist-led services on antibiotic stewardship**, including point-of-care testing, prescription counselling, and responsible disposal.
- Develop structured services and protocols for **common ailment management**, to avoid unnecessary antibiotic use and reduce burden on GPs and emergency care.

## 7. Digital health and artificial intelligence

- Promote **interoperability between AI tools and pharmacy systems**, ensuring that digital solutions enhance, and not replace, the (human) pharmacist-patient interaction.
- Support **pharmacists' access to digital health data**, reinforcing their role in service delivery and pharmacovigilance.
- Ensure **pharmacists' participation in shaping EU digital health policies** (e.g. EHDS) and its integration with pharmacy services.



# CONCLUSION

Across Europe, community pharmacies are increasingly recognised as **vital access points for patient-centred, primary healthcare**. With over 47 distinct pharmacy services currently mapped across 33 European countries, and the average of countries implementing 26 services, the data is clear: pharmacy services are no longer “additional”, they are a core component of modern healthcare delivery.

From health promotion and vaccination to medicine use review, disease screening, and chronic disease management, these services are rooted in pharmacists’ clinical training and patient-facing experience. Yet, the availability of such services remains uneven across countries, and their implementation is often hindered by outdated legal frameworks and fragmented policy environments. Too often, pharmacists are equipped with the skills, the infrastructure, and the patient trust, but **lack the legal power to act to their full potential**.

**Expanding the scope of practice of community pharmacists** through legislative change is therefore a matter of urgency. The COVID-19 pandemic has demonstrated the capacity of pharmacies to operate at scale and speed in times of crisis – administering millions of vaccines, maintaining medicine access, and offering accurate, community-based public health guidance. These capabilities should now be formalised and scaled through permanent legal reforms, including the ability to renew prescriptions for chronic conditions, administer a wider range of vaccines, provide point-of-care testing, and offer structured counselling and common ailment management services. Doing so will not only improve access and convenience for patients but also **relieve overburdened doctors and emergency services**.

In parallel, governments and healthcare payers must commit to **sustainable remuneration models for pharmacy services**. Remuneration models must recognise that dispensing medicines is essential, while also valuing the wider clinical contributions pharmacists deliver through every patient interaction. With proper resourcing and recognition, pharmacy services enable earlier diagnoses, strengthen treatment adherence, reduce hospitalisations, and improve chronic disease control, **delivering long-term savings and better health outcomes**.

Furthermore, remuneration is critical for ensuring equity. Without public funding, pharmacy services risk becoming available only in wealthier communities or to those who can afford them out-of-pocket. To truly realise the contribution of pharmacies in promoting **health equity**, all patients must have access to essential pharmacy services as part of publicly supported health coverage, particularly in rural, remote and underserved areas of Europe.

At a time when Europe’s healthcare systems face unprecedented pressures – ageing population, rising chronic disease levels, constrained budgets, and growing health inequalities – the case for integrating community pharmacies into the heart of healthcare strategies has never been stronger. Community pharmacists offer a unique combination of **accessibility, continuity, expertise, and public trust**. They are **ready to do more: to prevent disease, promote health, and optimise the use of medicines**. But they need the policy framework and investment to match. A patient-centred healthcare system cannot be achieved without fully activating the community pharmacy network.

**It is time to turn potential into policy, and policy into action.**

# PGEU MEMBERSHIP

## Ordinary Members



## Observer Members





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