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## What do health consumers want to know about childhood vaccination?

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**General practitioner-pharmacist collaborations to improve patients' adherence to medication**

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**Introduction:** Pharmacists and general practitioners (GPs) face an increasing expectation to collaborate on a number of healthcare issues, including patient non-adherence to medication.

**Objectives:** To investigate (i) type of interactions between community pharmacists and GPs aimed at improving patients' adherence (ii) factors influencing inter-professional collaboration; and (iii) opinions about how healthcare professionals might more effectively collaborate in the future to support adherence.

**Methods:** A qualitative study using focus group discussions (n=6) with GPs (n=22) and community pharmacists (n=23) was undertaken in three distinct geographic areas of Sydney metropolitan. Audio-recordings were transcribed verbatim and content analysed using thematic content analysis. Three themes were identified i) type of interactions ii) factors influencing collaboration and iii) suggested strategies to improve collaboration.

**Results:** Inter-professional interactions between community pharmacists and GPs do occur, but they are very limited and mostly concern administrative issues. Factors found to influence pharmacist-GP interactions included work environment (time constraints, practitioner accessibility, staffing) and stakeholder attitudes and behaviors (open communication, trust, respect and willingness to work as a team). A range of suggested strategies to improve collaboration were proposed. These included: access to patients' medication histories and clinical information for pharmacists, improved methods for secure electronic communication between parties, and arranging regular meetings.

**Conclusions:** Collaboration in the context of patient adherence is still undeveloped. There is a need for changes to the current structure of primary care to break down the silos of practice. This may lead to improvement in collaboration between healthcare professionals as a first step in supporting patients' adherence to their therapy.

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**What do health consumers want to know about childhood vaccination?**

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**Introduction.** Vaccines are crucial to population health. Nevertheless, there are multiple barriers for parents or carers to vaccinate their children, resulting in lower than required population immunisation coverage.

**Aim.** This study aimed to identify the information needs and concerns of health consumer regarding childhood vaccination.

**Methods.** We conducted a retrospective, mixed method study of 1,342 childhood vaccination-related calls to an Australian consumer medicines call centre, NPS Medicines Line (September 2002-June 2010). Call narratives were explored to identify the key themes. Themes were compared for callers from high and low immunisation coverage areas (National Health Performance Authority data linked to caller postcode).

**Results.** Vaccines that raised the most questions were the measles, mumps, rubella vaccine (29.9%), combined diphtheria, tetanus, pertussis, hepatitis B, poliomyelitis, Haemophilus influenzae type b vaccine (18.5%) and varicella vaccine (17.5%). The most commonly identified theme was safety concerns (60.4%), with questions about vaccine constituents as the predominant issue (31.6%). Other common themes involved adverse drug reactions (12.2%) and general vaccine information (10.4%). The most important difference between low and high immunisation areas was the higher level of concern about vaccine preservatives (mercury and thiomersal) in low immunisation areas.

**Conclusion.** The consistent number of vaccine-related calls, particularly about safety, demonstrates an information gap that can act as a barrier to vaccination. Improving health professionals' awareness of the immunisation rate in their local area and the concerns that act as barriers to vaccination uptake for their patients can help to fill the information gap and improve immunisation coverage.