# Stakeholders consultation on strengthened cooperation against vaccine preventable diseases

|--|

#### **General Context**

This questionnaire is a working document prepared by the European Commission. This consultation collects the views from administrations, associations and other organisations, and EU citizens on 'Strengthened cooperation against vaccine preventable diseases'. The outcome of this public consultation will provide input to a proposal for a Council Recommendation. It is without prejudice to the final position of the European Commission.

The consultation builds on several EU actions and policies related to vaccination including:

- The Council recommendation on seasonal influenza vaccination (2009)
- The Council conclusion on childhood immunisation (2011)
- The Council conclusions on vaccination as an effective tool in public health (2014)
- The report of the high-level hearing on the implementation of the Council recommendation on seasonal influenza vaccination (2015)
- The <u>final report of the SANTE high level workshop "Seeking new partnerships for EU action on vaccination"</u> (May 2017)
- The objectives of the joint action on vaccination (start 2018), co-funded by the Health Programme.
- The <u>report on the implementation of Decision 1082/2013</u> on serious cross-border threats to health (2015)
- The <u>European Court of Auditors Special report 28/2016</u> Dealing with serious cross-border threats to health in the EU (2016)
- The public consultation on a roadmap for a 'Commission communication on a One Health action plan to support Member States in the fight against antimicrobial resistance (AMR)', published on October 2016
- The <u>Commission communication to the European Parliament and the Council on the action plan</u> <u>against the rising threats from antimicrobial resistance</u> (AMR) (COM (2011) 748), published on November 2011
- The <u>mid-term review of the Digital single Market</u> (potential of big data high performance computing for infectious diseases outbreaks, May 2017)

# A Short Introduction On Strengthened Cooperation Against Vaccine Preventable Diseases

Vaccination is one of the most powerful and cost-effective public health measures developed in the 20th Century and the main tool for primary prevention of disease. Currently, Europe is facing avoidable large measles outbreaks in a number of countries. Even worse, Europe is exporting measles to other parts of the world. In addition, the risk of poliovirus re-introduction or importation to the EU remains a possibility, putting the current EU polio-free status at risk and undermining the global polio eradication initiative. Seasonal influenza vaccination currently prevents up to 37,000 deaths each year in the EU. Yet, seasonal influenza vaccination coverage rates in the majority of EU countries are significantly below the agreed objective of 75 % for elderly (Council Recommendation on seasonal influenza vaccination, 2009). Current challenges related to low and declining coverage, supply shortages and vaccine hesitancy require

Current challenges related to low and declining coverage, supply shortages and vaccine hesitancy require an urgent response. Council conclusions on vaccination as an effective tool in public health call on Member States and the Commission to develop joint actions in order to share best practices on vaccination policies. Furthermore the Council conclusions call on the Commission to identify synergies between vaccination and other EU policies and legislation, in particular as regards crisis management and preparedness.

In May 2017 the Commission organised the workshop "Seeking new partnerships for EU action on vaccination" to explore how cooperation at EU level can increase vaccine coverage, address shortages and strengthen routine immunisation programmes, taking into account possible synergies between vaccination and the use of antibiotics.

To this end, a joint action on vaccination, co-funded by the Union's Health Programme, will start in 2018, focusing on strengthened interaction of immunisation information systems, fostering of vaccine supply management, enhanced prioritisation of vaccine research and development, and tackling vaccine hesitancy.

## **Replies To The Questionnaire**

We invite administrations, associations and other organisations members of the Health Policy Platform to take part in this consultation. A separate consultation has been launched for citizens.

This consultation includes questions on vaccine hesitancy, sustainable vaccine policies in the EU and EU coordination on vaccination.

This questionnaire will be available only in English and only answers in English will be taken into account. As answers to the entire questionnaire are mandatory, we have reserved the option 'Don't know / No opinion' for such cases.

The questionnaire should take about 30 minutes to complete and there are several open questions where you can add your own comments/recommendations.

#### INFORMATION ABOUT THE RESPONDENT

Please provide the following data on your organisation/association/administration:	
* Please indicate the name of your organisation/association/administration	
* Postal address of the organisation	
1 ostar address or the organisation	

*Туре	e of organisation
0	health administration
0	health service provider
0	trade association
0	private enterprise
0	professional consultancy
0	professional association
0	non-governmental organisation
0	research and academia
0	churches and religious communities
0	regional or local authority
0	international organisation
0	other
* If "ot	her", please specify
	, p
* Plea	se enter the country where your organisation/association/administration is based
0	Afghanistan
0	Albania
0	Algeria
0	Andorra
0	Angola
0	Antigua and Barbuda
0	Argentina
0	Armenia
0	Australia
0	Austria
0	Azerbaijan
	Bahamas
0	Bahrain
0	Bangladesh
0	Barbados
0	Belarus
0	Belgium
0	Belize
0	Benin
0	Bhutan
0	Bolivia
0	Bosnia and Herzegovina
0	Botswana
	Brazil
	Brunei Darussalam
	Bulgaria  Burkina Face
	Burkina Faso

0	Burundi
	Côte D'Ivoire
	Cabo Verde
	Cambodia
	Cameroon
	Canada
	Central African Republic
	Chad
	Chile
0	China
	Colombia
	Comoros
0	Congo
	Costa Rica
0	Croatia
0	Cuba
0	Cyprus
	Czech Republic
0	Democratic Republic of the Congo
	Denmark
	Djibouti
	Dominica
	Dominican Republic
	Ecuador
	Egypt
	El Salvador
0	Equatorial Guinea
	Estonia
	Ethiopia
0	j
	Finland
	France
	Gabon
	Gambia
	Georgia
	Germany
	Ghana
	Greece
	Grenada
	Guatemala
	Guinea
	Guinea Bissau
	Guyana

HaitiHonduras

- Hungary
- Iceland
- India
- Indonesia
- Iran
- Iraq
- Ireland
- Israel
- Italy
- Jamaica
- Japan
- Jordan
- Kazakhstan
- Kenya
- Kiribati
- Kuwait
- Kyrgyzstan
- Laos
- Latvia
- Lebanon
- Lesotho
- Liberia
- Libya
- Liechtenstein
- Lithuania
- Luxembourg
- Madagascar
- Malawi
- Malaysia
- Maldives
- Mali
- Malta
- Marshall Islands
- Mauritania
- Mauritius
- Mexico
- Micronesia
- Monaco
- Mongolia
- Montenegro
- Morocco
- Mozambique
- Myanmar
- Namibia
- Nauru
- Nepal

- NetherlandsNew ZealandNicaragua
- Niger
- Nigeria
- North Korea
- Norway
- Oman
- Pakistan
- Palau
- Panama
- Papua New Guinea
- Paraguay
- Peru
- Philippines
- Poland
- Portugal
- Qatar
- Republic of Moldova
- Romania
- Russian Federation
- Rwanda
- Saint Kitts and Nevis
- Saint Lucia
- Saint Vincent and the Grenadines
- Samoa
- San Marino
- Sao Tome and Principe
- Saudi Arabia
- Senegal
- Serbia
- Seychelles
- Sierra Leone
- Singapore
- Slovakia
- Slovenia
- Solomon Islands
- Somalia
- South Africa
- South Korea
- South Sudan
- Spain
- Sri Lanka
- Sudan
- Suriname
- Swaziland

	Sweden Switzerland Syrian Arab Republic
_	Tajikistan
	Tanzania
	Thailand
	The former Yugoslav Republic of Macedonia
0	Timor-Leste
0	Togo
_	Tonga
	Trinidad and Tobago
_	Tunisia
	Turkey
_	Turkmenistan
_	Tuvalu
_	Uganda
	Ukraine
_	United Arab Emirates
_	United Kingdom
_	United States of America
_	Uruguay
_	Uzbekistan
_	Vanuatu
_	Venezuela
	Viet Nam
	Yemen
	Zambia
	Zimbabwe
above	rou an umbrella organisation/association representing the interests of the stakeholders you indicated Yes
	No
	NO .
0	se specify the geographic coverage of your organisation/association/administration International European National Subnational/local
Regist	se indicate whether your organisation/association/administration is listed in the Transparency ser: Yes No
* Place	se specify identification number

In the interest of transparency, organisations and associations have been invited to provide the public with relevant information about themselves by registering in Transparency Register and subscribing to it Code of Conduct.
IDENTIFICATION OF RESPONDENT
Please provide the following data:
*Name, Surname (please note that you can still opt for your answers to remain anonymous when results
are published)
*Country of residence
Afghanistan
Albania
Algeria
Andorra
O Angola
Antigua and Barbuda
Argentina
Armenia
Australia
<ul> <li>Austria</li> </ul>
<ul> <li>Azerbaijan</li> </ul>
Bahamas
Bahrain
Bangladesh
<ul><li>Barbados</li></ul>
Belarus
Belgium
Belize
Benin
Bhutan
Bolivia
Bosnia and Herzegovina
Botswana
Brazil

Brunei Darussalam

BulgariaBurkina Faso

Burundi

Côte D'Ivoire

0	Cabo Verde
	Cambodia
	Cameroon
	Canada
	Central African Republic
	Chad
0	Chile
0	China
	Colombia
	Comoros
	Congo
	Costa Rica
0	Croatia
0	Cuba
	Cyprus
	Czech Republic
	Democratic Republic of the Congo
	Denmark
	Djibouti
	Dominica
	Dominican Republic
	Ecuador
	Egypt
	El Salvador
	Equatorial Guinea
0	Eritrea
	Estonia
0	•
	Fiji
	Finland
	France
	Gabon
	Gambia
	Georgia
	Germany
	Ghana
	Greece
	Grenada Guatemala
	Guinea Riccou
	Guinea Bissau Guyana
	Haiti
	Honduras
	rioriduras

HungaryIceland

- India
- Indonesia
- Iran
- Iraq
- Ireland
- Israel
- Italy
- Jamaica
- Japan
- Jordan
- Kazakhstan
- Kenya
- Kiribati
- Kuwait
- Kyrgyzstan
- Laos
- Latvia
- Lebanon
- Lesotho
- Liberia
- Libya
- Liechtenstein
- Lithuania
- Luxembourg
- Madagascar
- Malawi
- Malaysia
- Maldives
- Mali
- Malta
- Marshall Islands
- Mauritania
- Mauritius
- Mexico
- Micronesia
- Monaco
- Mongolia
- Montenegro
- Morocco
- Mozambique
- Myanmar
- Namibia
- Nauru
- Nepal
- Netherlands
- New Zealand

Nicaragua
Niger Niger
Nigeria
North Korea
Norway
Oman
Pakistan
Palau
Panama
Papua New Guinea
Paraguay
Peru
Philippines
Poland
Portugal
Qatar
Republic of Moldova
Romania
Russian Federation
Rwanda
Saint Kitts and Nevis
Saint Lucia
Saint Vincent and the Grenadines
Samoa
San Marino
Sao Tome and Principe
Saudi Arabia
Senegal
Serbia
Seychelles
Sierra Leone
Singapore
Slovakia
Slovenia
<ul><li>Solomon Islands</li><li>Somalia</li></ul>
South Africa
South Korea

South Sudan

SpainSri LankaSudanSurinameSwazilandSwedenSwitzerland

	Syrian Arab Republic
	Tajikistan
	Tanzania
	Thailand
	The former Yugoslav Republic of Macedonia
	Timor-Leste
	Togo
	Tonga
	Trinidad and Tobago
	Tunisia
	Turkey
	Turkmenistan
	Tuvalu
	Uganda
	Ukraine
	United Arab Emirates
	United Kingdom
0	United States of America
0	Uruguay
	Uzbekistan
	Vanuatu
0	Venezuela
0	Viet Nam
0	Yemen
0	Zambia
0	Zimbabwe
*Plea	se enter your e-mail address (this data will not be made public)
*Do v	ou consent to the Commission publishing your replies?
_	Yes (I consent to the publication of all my replies and any other information I provide, and declare
	that none of it is subject to copyright restrictions that prevent publication)
0	Yes, only anonymously (My replies can be published, but not any information identifying me as
	respondent)
Plea	se indicate if you have work experience in any of these areas (more than one answer possible)
	Vaccination
	Pharmaceutical industry
	Healthcare sector
	Social care sector
	Education sector
	Health/social insurance sector
	Public administration

*Are you a	a healthcare	professional
Yes	3	

O No

### PILLAR I: TACKLING VACCINE HESITANCY

Vaccine hesitancy refers to delay in acceptance or refusal of vaccines despite availability of vaccination services. Vaccine hesitancy is complex and context specific varying across time, place and vaccines. It includes factors such as complacency, convenience and confidence

1.1 Who do you believe are the most important actors in promoting the use of recommended vaccination?

	Not important	Somewhat important	Important	Very important	Most important	Don't know / No opinion
*Civil society	0	0	0	0	0	0
*European Commission	0	0	0	©	0	0
*European Parliament or other EU institutions	©	0	0	©	0	0
*Famous people	0	0	0	0	0	0
*Friends, peer groups	0	0	0	0	0	0
*Healthcare providers (e.g. doctors, nurses)	0	0	0	0	0	0
*International organisations (e.g. WHO)	0	0	0	0	0	0
*Media	0	0	0	0	0	0
*Member States	0	0	0	0	0	0
*Non-governmental organisations (NGOs)	©	0	0	©	0	0
*Other public services (school programmes, health campaigns, etc)	0	0	0	0	0	0

*Parents, family members	0	0	0	0	0	0
*Patient groups	0	0	0	0	0	0
* Pharmaceutical industry	0	0	0	0	0	0
* Pharmacists	0	0	0	0	0	0
*Religious leaders	0	0	0	0	0	0

vaco	cines?						
Plea	se select all that apply						
	Articles in newspapers						
	European campaigns						
	National campaigns						
	Provision of relevant user friendly	information	n online				
	Social media (Twitter, Facebook,						
	Special programmes on radio/TV	,					
	None of the above						
	Don't know / No opinion						
	Other (please specify)						
	2 Cirio (picado opeciny)						
Otl	ner (please specify)						
	(picase specify)						
*1.3	s. How can health authorities better o	rommunica	te with hea	althoare work	ers on the s	afe use and	d
	ctiveness of vaccines?	Jonninamoa		annound work		aro aco arn	3
	ase select all that apply						
	European campaigns						
	National campaigns						
	Newsletter						
	Specific training during the Univer	city etudios					
	Specific training during the onliver	-					
		(including 6	z-trairiirig)				
	Don't know / No opinion						
	Other (please specify)						
Otl	ner (please specify)						
1.4	. Based on your experience, how m	uch impact	do these f	actors have	on vaccine h	esitancy?	
							Don't
		No	Low		Medium	High	know /
		impact	impact	Medium	to high	impact	No
				impact	impact		opinion
-							
	*complacency (perceived risks of						
	vaccine-preventable diseases are	0	0	0	0	0	0
	low and vaccination is not						1

deemed necessary)

\*confidence in effectiveness of vaccines (trust issues in the effectiveness and safety of

vaccines; the system that delivers

\*1.2 How can health authorities better communicate with the public on the safe use and effectiveness of

them, including the reliability and competence of the health services and health professionals; and the motivations of the policymakers who decide on the needed vaccines)	©	©	©	©	©	©	
*convenience (extent to which physical availability, affordability and willingness-to-pay, geographical accessibility, ability to understand and appeal of immunisation services affect uptake)	©	•	•	•	•	•	

### 1.5. Which other more specific factors do you think have a big influence on vaccine hesitancy?

	No impact	Low	Medium impact	Medium to high impact	High impact	Don't know / No opinion
*Activity of anti-vaccination groups	0	0	0	0	0	0
*Attitude (negative or neutral) of general practitioners	0	0	0	0	0	0
* Different and sometimes contradictory recommendations from healthcare providers	0	0	0	0	0	0
* Difficulties on access to vaccines	0	0	0	0	0	0
* Distrust of science	0	0	0	0	0	0
* Diversity of vaccination schedules/calendars across countries (e.g each country has own rules on when, who and how often to vaccinate)	0	0	0	0	0	0
*Fear of possible side effects	0	0	0	0	0	0
*Funding issues (e.g. out-of- pocket expenses)	0	0	0	0	0	0
*Lack of (or too much) availability of vaccines	0	0	0	0	0	0
*Lack of information about impact and side effects of vaccination	0	0	0	0	0	0
*Introduction of compulsory vaccination for some vaccines	0	0	0	0	0	0

*One size fit all vials (e.g. same dosage used for different age groups)	0	0	0	0	0	0
*The belief that individual decisions do not impact the community	0	©	•	•	0	©
*Unreliable news on social media and the internet	0	0	0	0	0	0
*1.6. Does the EU provide adequate con authorised vaccines to maintain or increa Yes No		on to health	care profess	sionals on the	e benefits o	of
500 character(s) maximum						
<ul><li>Yes</li><li>No</li><li>Please specify</li><li>500 character(s) maximum</li></ul>						
*1.8 Does the EU ensure adequate comportant organisations, civil society) on the benefit Yes No Please specify						
500 character(s) maximum						
*1.9 What activities should the EU under citizens on their vaccination needs and in Please select all that apply  EU campaigns on vaccination	n strengthe	ening confi		-	essionals i	n advising
<ul><li>Propose common EU wide vaccina</li><li>Proposing an EU vaccination day</li></ul>			ccination			

1.10 In order to reduce vaccine hesitancy and help Member States' efforts to increase vaccine coverage rates, a number of activities to cooperate at EU level are listed in the table below. Please rate the helpfulness of the following EU facilitated activities:

	Not helpful	Slightly Helpful	Helpful	Very helpful	Don't know / No opinion
*a) Member States establish a shared EU mapping on vaccine coverage, vaccine safety and vaccine effectiveness	0	0	0	0	0
*b) Member States and health professional associations develop and provide together inservice training for health professionals	0	0	0	0	0
*c) Member States and health professional associations develop and provide together information sessions with parent on vaccination	0	0	0	0	0
*d) Member States set-up of an information website with user friendly, evidence based, up to date and factual information on safety and effectiveness of vaccines for the population and health professionals	0	•	0	0	•
*e) Member States have common tools to follow what is published on social and online media, to monitor, in real time, the public confidence in vaccines, in view of understanding and appropriately addressing public concerns	0	•	0	•	•
*f) Member States evaluate together the impact of intervention strategies to address vaccine hesitancy	0	0	0	0	0
*g) Member States share media campaigns on vaccination	0	0	0	0	0
*h) Member States establish a common approach towards a recommended EU					

	Low	Mediu effor		High efforts	Don't know / No opinior
*a) International organisations (e.g. WHO, Global Health Security Initiative)	0	0		0	0
*b) European Commission and EU agencies (European Centre for Disease Prevention and Control, European Medicines Agency)	0	0		0	0
*c) Member States	0	0		0	0
*d) Pharmaceutical industry	0	0		0	0
*e) Healthcare professionals (doctors, nurses, pharmacists, etc.)	0	0		0	0
				_	
*f) Non-Governmental Organisations.  2 What actions are necessary to better support health can be character(s) maximum	re profession	als to a		oate vaccin	ation?
2 What actions are necessary to better support health ca	re profession				
2 What actions are necessary to better support health can be character(s) maximum  3 How can civil society contribute to overcome vaccine health can be contributed.	re profession				
2 What actions are necessary to better support health can be character(s) maximum  3 How can civil society contribute to overcome vaccine health can be contributed.	re profession				
2 What actions are necessary to better support health can observed character(s) maximum  3 How can civil society contribute to overcome vaccine had character(s) maximum	re profession				
2 What actions are necessary to better support health can observed character(s) maximum  3 How can civil society contribute to overcome vaccine had character(s) maximum	re profession esitancy?	als to a	dvoca		
2 What actions are necessary to better support health can or character(s) maximum  3 How can civil society contribute to overcome vaccine had character(s) maximum  4 What role can the industry play in reducing vaccine head character(s) maximum	re profession esitancy?  CIES IN	als to a	dvoca	ate vaccin	ation?

vaccination schedule and an EU vaccination

card and registries

*a) International organisations (e.g. WHO, UNICEF, Global Health Security Initiative)	0	0	0
*b) European Commission and EU agencies (ECDC, EMA)	0	0	0
*c) EU Member States	0	0	0
*d) Healthcare professionals (doctors, nurses, pharmacists)	0	0	0
*e) Non-Governmental Organisations.	0	0	0
*f) Pharmaceutical industry	0	0	0
*2.2 What actions are necessary to better integrate vaccination program  500 character(s) maximum	mes in n	ational I	nealth systems?
*2.3 What actions are necessary to promote vaccination as a central para 500 character(s) maximum	t of prev	ention p	oolicies?
*2.4 What kind of incentive(s) do you consider most helpful to establish a production capacity for vaccines in the EU?  500 character(s) maximum  *2.5 How can coordination be improved at EU level to better address vac 500 character(s) maximum			
*2.6 How can public health and regulatory authorities better communicate balance vaccine supply and demand?  500 character(s) maximum	e with va	accine ir	ndustry to better
*2.7 What are the most important issues (both short-term and long-term) between public health authorities and industry?  500 character(s) maximum	to be a	ddresse	d in a dialogue
*2.8 What kind of actions could be taken to increase vaccine manufacture production lead times in the European Union?  500 character(s) maximum	ing capa	acities a	nd reduce long

0 Which policy interventions would ?	have the bi	ggest impa	act on mitiga	ting vaccine	shortages	at EU
	No impact	Low	Medium impact	Medium to high impact	High impact	Doi knov No opini
*Regulatory clarifications	0	0	0	0	0	0
*Mutual assistance among Member States, sharing vaccines	0	0	0	0	0	0
*Vaccine forecasting	0	0	0	0	0	0
*Prioritisation of vaccine Research and Development	0	0	0	0	0	0
*Joint Vaccine procurement between countries	0	0	0	0	0	0
*Stakeholder dialogue	0	0	0	0	0	0
*Availability of individual vaccines (not only combined vaccines)	0	0	0	0	0	0
*Stockpile of key vaccines at EU level	0	0	0	0	0	0
*Alignment and simplification of vaccination schedules	0	0	0	0	0	0
1 What actions could the EU under ine effectiveness at EU level?  2 character(s) maximum  2 What actions could the EU under						

better engaged in supporting sustainable vaccination po 500 character(s) maximum	licies?			
*2.14 How can the EU better support scientific evaluation in respect of national competences in the decision-making 500 character(s) maximum		oduction of ne	w vaccines ir	n the EU,
*2.15 Should the EU develop a common approach to va  Ves  No	ocination sche	edules across	the Europea	n Union?
Please explain and indicate reasons for your response 500 character(s) maximum	(e.g. spelling of	out the advan	tages / disad	vantages)
*2.16 List two or three priority areas of investment in eH programmes.  500 character(s) maximum	ealth to streng	then the mon	itoring of vac	cination
*2.17 Do you consider that each EU citizen should have electronically to vaccination providers?  Yes No  2.18 Of the following actions please indicate the import coverage rates in the interest of public health:			·	
	Least important	Important	Most important	Don't know / No opinion
*Setting up effective electronic vaccination reminder systems	0	0	0	0
*Improving linkage with patient summaries and electronic health records, including access to	0	0	0	©

patient immunisation history.

\*2.13 How could grassroots level organisations, particularly NGOs, patient groups and civil society be

vaccina	ating cross-border sharing of info tion status and interoperability ac t points of care at national/EU lev	cross	0	0	©	0
vaccination p	ch areas would it be important to programmes?  ter(s) maximum	o support new	EU actions t	to address su	stainability of	
	II: EU COORDINATIO OLDERS' DIALOGUE					
HEALTH						
	the EU propose initiatives to fa respond to situations of shortag		change of va	ccine medicin	al products a	cross
Please exp	lain ter(s) maximum					
	consider that the EU system she vaccination policies among Men		support and fa	acilitate the e	xchange of b	est
Please exp	lain ter(s) maximum					
	nd of EU cooperation is missing	in the area o	f vaccination	?		
3.4 In your	view, which funding instruments	s could be imm	ontant to sun	nort vaccines	R&D?	
5.4 III your	view, willon fullallig instruments	Not important	Less important	Important	Very important	Don't know / No opinion

*Funding via EU framework Programme Horizon 2020 grant scheme	©	©	0	•	0
*SME instrument under Horizon 2020	0	0	0	0	0
*Loan-based instruments like InnovFin Infectious Diseases provided jointly by the EC and the European Investment Bank (EIB)	0	0	0	0	•
*Inducement Prizes	0	0	0	0	0
*R&D funding provided by the EC's public-private partnership Innovative Medicines Initiative (IMI)	0	•	•	0	0
*R&D funding provided by the European & Developing Countries Clinical Trials Partnership (EDCTP)	0	0	•	0	0
*R&D provided entirely by the budget of the EU (public-public partnership)	0	0	0	0	0

\*3.5 Regarding vaccine research for fighting infectious diseases, should the efforts of the European Union focus on actions in the EU region alone or also focus on worldwide actions?

- Actions in the EU region
- Worldwide actions
- Both are equally important
- Don't know / No opinion

3.6 In order to increase the contribution of vaccination to public health preparedness and help Member States' efforts to ensure vaccine supply, a number of activities to cooperate at EU level are listed in the table below. Please rate the helpfulness of the following EU facilitated activities:

	Not helpful	Less Helpful	Helpful	Very helpful	Don't know / No opinion
*a) Member States collaborate to assess vaccination needs	0	0	0	0	0
*b) Member States collaborate to build a European virtual repository on vaccine management needs and stocks	0	0	0	0	0
*c) Member States collaborate to evaluate financing mechanisms for the procurement of vaccines	0	0	0	0	0

*d) Member States collaborate to investigate public perception on the pharmaceutical industry.	0	0	0	0	©	
*e) Member States collaborate to develop a crisis management plan with industry to anticipate and reduce risks during vaccine manufacturing able to decrease vaccine shortages.	•	•	•	0	0	
*f) Member States collaborate to establish a stakeholder communication platform to better balance vaccine demand and supply.	0	0	0	0	0	

3.7 In order to increase the efficiency and effectiveness of EU funding of vaccine R&D and Research and Development, a number of activities to cooperate at EU level are listed in the table below. Please rate the helpfulness of the following EU facilitated activities:

	Not helpful	Less Helpful	Helpful	Very helpful	Don't know / No opinion
*a) Member States collaborate to identify common stages and criteria for priority-setting of vaccine R&D needs.	0	0	0	0	0
*b) Member States collaborate to develop a concept and prototype for a vaccine research & development priority-setting framework.	0	0	0	0	0
*c) Member States collaborate to develop a roadmap of unmet population needs in terms of vaccination that can be used to inform all future vaccine funding programmes.	0	0	©	0	•

3.8 Which organisation should make efforts in ensuring vaccine supply and addressing vaccine shortages?

	No efforts	Low efforts	Medium efforts	High efforts	Very high efforts	Don't know / No opinion
*a) International organisations (e.g. WHO, Global Health Security Initiative)	0	0	©	0	0	•
*b) European Commission	0	0	0	0	0	0
*c) EU Member States	0	0	0	0	0	0
*d) Pharmaceutical industry	0	0	0	0	0	0

	*e) Healthcare professionals (doctors, nurses, midwives, pharmacists, etc.)	0	0	©	0	0	0			
	*f) Non-Governmental Organisations.	0	0	0	0	0	0			
*3.9 What would the most appropriate framework be for the collaboration of Public Health Authorities and civil society with the vaccine industry on issues related to implementation research?  500 character(s) maximum										
Thank you for replying to the questionnaire.  Is there any other policy intervention that you would like to add which was not addressed in the questionnaire?										
15	500 character(s) maximum									