

Guidance for Pharmacists on Working with the Pharmaceutical Industry

Principles

Recent NHS changes have resulted in many more pharmacists undertaking roles in which they come into regular contact with the pharmaceutical industry.

This interaction is to be welcomed and should be mutually beneficial to the individuals involved, their respective organisations, and ultimately the patient.

Relationships with commercial organisations must always be managed in accordance with ethical and professional standards and with due deference to probity and corporate governance arrangements.

The pharmaceutical industry invests heavily in the UK and conducts valuable research to find new treatments to reduce the burden of ill health. This is acknowledged by the government in the Pharmaceutical Industry Competitiveness Task Force Report (March 2001). The government also invites partnership with the pharmaceutical industry by welcoming industry support for the development and implementation of National Service Frameworks.

There are many examples of the pharmaceutical industry working successfully in partnership with NHS organisations and with pharmacists for the benefits of patients, one of the best being the concordance project.

This guidance has been written to encourage pharmacists to work with colleagues from the pharmaceutical industry to ultimately bring benefits to the patient.

Introduction

The involvement of pharmacists on the boards and sub-committees of Primary Care Groups and Trusts, Local Health Groups and Local Health Care Co-operatives means that pharmacists can expect to be approached by representatives of the pharmaceutical industry wishing to discuss a wide range of subjects. This guidance is not intended to apply to pharmacists who are employed by, or carrying out remunerated work for the pharmaceutical industry but to assist pharmacists working in other sectors who are likely to liaise with the industry.

Recent Government white papers¹²³ place an obligation on those providing health services to work together with other agencies to improve the health of the population that they serve and the health services for that population. Working in partnership with the pharmaceutical industry can have a number of benefits which can include provision of information about products and therapeutic issues, educational activities, project support, provision of

resources/materials/equipment or expertise. It should also be remembered that industry has more information about its existing and future products than is held by any other source. Pharmaceutical companies also have considerable expertise in specific disease areas, and health economic data to enable the burden of disease to be assessed.

Representatives of the pharmaceutical industry have regularly interacted with community pharmacists for product-specific and business orientated discussions, and have built good relationships with senior hospital and health authority pharmacists. However the way in which health care is being delivered is changing rapidly and the need for greater prescribing support to PCGs, PCTs, LHGs, LHCCs and individual general practices has led to many more pharmacists in roles looking at treatment priorities, prescribing policy, formulary development and being involved with prescribing issues based on local health improvement programmes and specific problems in their locality. This interaction could increase further as pharmacists' involvement in independent or supplementary prescribing, and in the production and use of patient group directions, develops in the future.

It is hoped that pharmacists can use this guidance to develop the basis for any agreements to provide reassurance to Chief Executive Officers that appropriate controls are in place.

Conduct of meetings with the Industry

a) Preparation

It is usually good practice to arrange meetings by appointment, with the purpose of the visit and who will be attending stated in advance.

This provides the opportunity to prepare for the meeting so that the time can be put to best use. This may include background reading, discussion with colleagues on the desired outcome for the meeting, preparation of questions, etc. Pharmacists should check that they are receiving an equivalent level of information from industry e.g. on research evidence, as is being supplied to other local health professionals eg. GPs.

The intention to hold a meeting should be made known to all interested parties, so that the appropriate people are given the chance to attend.

It is also helpful to establish either prior to the meeting or at its start the length of time that is available for the discussions.

Clearly this should not preclude adhoc meetings where necessary and appropriate.

b) Critical appraisal and evaluation

For most therapeutic areas more than one pharmaceutical company will be involved in the supply of potential treatment options. In roles providing advice on the choice of therapeutic options it is important that the costs and benefits of all the available options are considered.

Credibility with colleagues will be best sustained by an individual demonstrating a fair and balanced approach towards all companies and their products. In order to be able to reach informed decisions, pharmacists need to have discussions with representatives of all relevant companies within a given therapeutic area. Decisions should be based on the best evidence and clinical practice available, ensuring patients' interests are also taken into account. It is advisable to document the reasoning behind decisions, particularly if recommending the use of one company's product rather than another's.

Pharmacists should have the skills to be able to critically appraise information that they are presented with by pharmaceutical companies. The Code of Ethics and Standards⁴ require pharmacists to participate in continuing professional development to enable them to competently provide the professional services that they offer. Pharmacists should be confident to seek clarification of, or the evidence base for, any claims or statements made by representatives of the Pharmaceutical Industry. Pharmacists should be confident in challenging any data provided by industry representatives.

c) Hospitality, gifts and inducements

Pharmacists and staff must not ask for or accept fees for agreeing to meet with representatives of the pharmaceutical industry. It is also inappropriate to ask for, or accept, any material gifts except those which are inexpensive and relevant to the practice of their profession or the organisation they represent. Examples of items, which may be considered appropriate include pens, memo pads, diaries, calendars etc.

Educational meetings may be accompanied by an offer to provide hospitality. This is generally considered to be acceptable if it is secondary to the purpose of the meeting, and the level of hospitality is appropriate and not out of proportion to the occasion. The costs should not exceed the level that the recipients would normally adopt if they were paying for themselves.

Obligations relating to the provision of inducements and hospitality are also placed on the pharmaceutical industry and health professionals by the Medicines (Advertising) Regulations⁵.

Commercial Sponsorship

Pharmaceutical companies may offer to provide support for the business of an NHS organisation. Support should not be overtly promotional and examples of the sort of initiatives that may be discussed include:-

- ◆ Sponsorship of local educational meetings:
- ◆ Provision of doctors, nurses, pharmacists or technicians to carry out audit work
- ◆ Funding the costs of a post within the organisation
- ◆ Provision of management and organisational development training
- ◆ Sponsorship of 'health awareness' sessions for patients on particularly disease states (non-product specific).

a) Points to be considered

In considering the development of any sponsorship arrangements with a pharmaceutical company, pharmacists should consider the importance of the particular area of work to the organisation. It is clear that the investments of resources in areas that represents a priority for the organisation will be seen as best use of time and manpower.

Other issues that will need to be considered and agreed prior to entering into a sponsorship agreement include:

- ◆ That the intended benefit to patients or service users is clear
- ◆ Whether the arrangement will provide the best value services for the resources available
- ◆ That all parties are clear about the others' expectations of the arrangement
- ◆ Where appropriate, the clinical and financial outcome measures to be used, and how they will be monitored
- ◆ Ownership of intellectual property resulting from the arrangement
- ◆ If appropriate, how the project will be managed and by whom
- ◆ That opt-out clauses are included so that either party can terminate the arrangement if it is not providing the desired outcomes or good value for money
- ◆ Confidentiality and access to patient-specific information
- ◆ Terms and conditions for employees, where relevant

Any sponsorship agreement must be legally robust. This may require advice to be sought from the legal advisers to the organisation. The confidentiality of NHS data is of paramount importance. The requirements of the Data Protection Act must be adhered to. Guidance has also been issued on the use of patient information within the NHS⁶.

b) **Conduct and Accountability**

In England and Wales guidance issued by government Health Departments defines the expected standards of corporate governance for staff of the NHS.^{7,8,9} The same principles apply to independent contractors working with NHS organisations.

In considering the development of any joint ventures it is important that such arrangements are seen to be open and transparent by all stakeholders. This is likely to require discussion of proposals at Executive or Board meetings of the organisation. Pharmacists should ensure that any potential conflicts of interest due to financial or commercial involvement with a pharmaceutical company or other interested party, are openly declared and recorded.

Primary Care Groups, Primary Care Trusts, NHS Trusts and Health Authorities in England & Wales should have a register for recording sponsorship arrangements, which should be available to the public. No such registers exist in Scotland.

Code of Practice for the pharmaceutical industry

The Association of the British Pharmaceutical Industry (ABPI) regulates the conduct of the pharmaceutical industry in relation to the promotion of medicines to members of the health professions. The ABPI's Code of Practice¹⁰ is drawn up, and regularly revised, in consultation with the British Medical Association, Royal Pharmaceutical Society and Medicines Control Agency. It aims to ensure that the promotion of medicines is carried out in a responsible, ethical and professional manner.

The promotion of over-the-counter medicines to health professionals is covered by similar codes of practice issued by the Proprietary Association of Great Britain (PAGB)^{11,12}.

Summary

Pharmacists will, now and in the future play an increasingly significant role in delivering better health care to the population they serve.

Specifically pharmacists work at the crucial interface where the pharmaceutical industry's products meet their intended beneficiaries, namely, the patients.

In helping patients gain the full benefits from their medicines there is much to be derived from developing a mutually beneficial partnership with the pharmaceutical industry which, as this guidance acknowledges, has more information about its products than any other source.

This guidance, then, seeks to provide a positive and responsible platform on which to base the development of such a partnership.

References

- 1 The New NHS: modern, dependable. The Stationery Offices, 1997 (Cm. 3807)
- 2 Designed to Care: renewing the National Health Service in Scotland. The Stationery Office, 1997 (Cm 3811)
- 3 NHS Wales: putting patients first. The Stationery Offices, 1997 (Cm. 3841)
- 4 Medicines, Ethics and Practice – a guide for pharmacists. Royal Pharmaceutical Society of Great Britain, 2001 (Ed 25)
- 5 Medicines (Advertising) Regulations, 1994 (SI 1994 No 1932)
- 6 The Protection and Use of Patient Information. NHS Executive, 1996 (HSG(96)18)
- 7 Standards of Business Conduct for NHS Staff. NHS Executive, 1993 (HSG(93)5)
- 8 Standards of Business Conduct for NHS Staff. NHS Executive, 1993 (DGM 93(84))
- 9 Corporate Governance in the NHS: Code of Conduct; Code of Accountability. Department of Health, 2001
- 10 Code of Practice for the Pharmaceutical Industry. Association of the British Pharmaceutical Industry, 2001
- 11 Code of Practice of Advertising Over-the-Counter Medicines to Persons Qualified to Prescribe or Supply. Proprietary Association of Great Britain, 1999
- 12 Consumer Promotions and PR Guidelines. Proprietary Association of Great Britain, 1999

Related Material

Code of Professional Conduct and Guidelines for Professional Practice. United Kingdom Central Council for Nursing, Midwifery and health Visiting, 1996

Duties of a Doctor: Good Medical Practice. General Medical Council, 1998

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January 2003