

Minutes of the PHARMAC Consumer Advisory Committee (CAC) meeting

Friday 13 July 2007

The meeting was held at PHARMAC, 14th floor, Cigna House, 40 Mercer St, Wellington from 9.30am.

Present:

Sandra Coney	Chair
Matiu Dickson	CAC member
Dennis Paget	CAC member
Sharron Cole	CAC member
Heather Thomson	CAC member
Kuresa Tiumalu-Faleseuga	CAC member
Te Aniwa Tutara	CAC member

Apologies

Vicki Burnett	CAC member
Paul Stanley	CAC member

In attendance:

Simon England	PHARMAC (minutes)
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Matthew Brougham, Peter Alsop, Steffan Crausaz, Marama Parore, Elspeth Kay, Janet Mackay (PHARMAC Staff) attended for relevant items.

The committee offered its congratulations to Sharron Cole for being recognised with a Queens Service Order in the 2007 Queens Birthday Honours list.

1. Minutes of March 2007 meeting

The minutes of the March 2007 meeting were accepted as a true and accurate record.

Coney/Paget carried

2. Action Points

- The committee sought confirmation that the Gut Reaction project plan had been provided as per its March 2007 meeting request.
- The committee noted the submission made as part of the Ministry of Health's consultation on the Medicines Strategy discussion paper 'Towards a NZ Medicines Strategy' and that all members supported this submission.
- The committee reiterated its request for business cards and consumer-oriented brochures.
- The committee noted that as requested it had had the opportunity to comment on the draft Herceptin resource. Members noted that they had reviewed the document from the point of view of readability and accessibility, rather than the policy content.

- The committee confirmed its interest in being updated on the redevelopment of the PHARMAC website.

3. Correspondence

The committee noted correspondence between the chair of CAC and women campaigning for funding for Herceptin. The committee considered that the interim response had made a number of valid points and that there was little to add in relation to CAC's role or the process around recording its meetings.

The committee agreed a further response be sent, noting that the committee had sought information and provided advice on accessibility and treatment for Maori and Pacific women. The committee had also received copies of all submissions made on the Herceptin consultation and noted a high level of consumer involvement. The committee considered that the voice of the consumer had been prominent and clearly heard around the Herceptin issue.

The chair of CAC had been sent information and a DVD about child psychiatry. The committee resolved to thank the sender for sending the information, and asked PHARMAC to provide information for the next meeting of CAC showing patterns of use of anti-psychotic drugs in children over time, plus ethnicity data.

The committee noted developments in relation to the Transtasman joint therapeutics agency, and resolved to seek information from Medsafe on future steps in relation to medicines regulation.

Paget/Coney carried

4. Chair's report

The committee enquired as to whether the Herceptin patient resource might be translated into Pacific languages. The committee considered that having the resource available in languages other than English (esp Maori and Pacific languages) was important to make it accessible and enable patient consent to treatment to be well-informed.

The chair's report noted concern about the approach taken to the Gut Reaction campaign, and possible legal and ethical concerns about undertaking a teaching programme involving patients. The experience provided the opportunity for PHARMAC to learn should other such projects be undertaken in future.

The committee noted that the terms of four members expired at the end of July (Sandra Coney, Dennis Paget, Heather Thomson and Te Aniwa Tutara). The committee agreed that those members whose terms were ending were continuing to make positive contributions to the committee, and supported their reappointment. The committee further agreed that Sandra Coney continued to take a leading role as the committee's chair.

The committee recommended that, subject to her reappointment to the committee by the Board, that Sandra Coney be also reappointed as chair of CAC

Dickson/Paget carried

The committee recommended that the PHARMAC Board confirm Matiu Dickson as deputy chair of CAC.

Tutara/Tiumalu-Faleseuga carried

The committee noted that a second Consumer summit was being organised for 26 November 2007. PHARMAC had joined the list of organisations sponsoring the event. CAC members had been invited to attend. The committee considered that, subject to sufficient funding being available, it would be preferable to have a 2-day summit and that there be an opportunity for a Maori caucus. The chair agreed to convey this view to the summit organising committee.

The committee discussed the current environment PHARMAC is operating in and the future role CAC might play. The Committee considered that while there were a number of options that might be explored, these would need to be balanced against risks and tensions that might undermine CAC's independence.

The Committee requested a discussion paper be prepared for its next meeting to define the issue and provide options for CAC to consider.

5. Funding and Procurement update

The committee noted a briefing paper outlining current issues and developments around medicines.

Betaloc/felodipine

A price rise being sought by the company may lead to surcharges for patients. Though there had been developments, the situation was still uncertain and may lead to large numbers of patients changing medicine. PHARMAC was seeking feedback on patient groups who might find difficulty in changing their medicine, and gathering information. Consultation was underway on the provisional listing of a generic metoprolol, and would be closely monitoring that through the Medsafe process.

The committee urged PHARMAC to think hard about how to manage this issue as it affected approximately one in every 20 New Zealanders.

Paroxetine

CAC's input to the implementation of this decision had been noted. To date the implementation had been relatively smooth.

Generics

Members noted use of the word 'generic' in PHARMAC papers and considered that, while this was a term well understood by Pharmacist, that it might not be as well understood by the public. Members considered that the public may simply associate

`generic' with `cheap', and that there was an opportunity to explain this to consumers. This might be achieved through a question on the PHARMAC website, or through developing information on medicines.

6. Medicines Strategy

CAC's submission on the Medicines Strategy had been sent to the Ministry of Health . The Ministry had held four consultation meetings, Pharmac attended them all and received feedback.

The committee noted that `optimal use' was one of the more significant themes throughout the consultation.

The Ministry of Health was planning to publish a summary of submissions later this year, and a draft strategy. The committee requested it be provided with copies of these documents when available.

The committee considered that PHARMAC's summary of the medicines system (diagram) should include an open, participative structure that is responsive to consumers as one of its pillars.

7. Statement of Intent 2007-08

The committee was presented with PHARMAC's 2007-08 Statement of Intent. The document reflects a greater PHARMAC focus on strategic planning for 2008 and beyond. It was noted that a number of PHARMAC's workstreams, including strategic priorities, would likely benefit from CAC input.

It was acknowledged that the Statement of Intent had been presented to the Committee as a finalised document, and the Committee would in future be given the opportunity to provide input at an earlier stage.

8. Pacific Responsiveness Strategy

A stocktake report on PHARMAC's responsiveness to Pacific people has been completed. The report describes the work that is currently undertaken, what the disparities are and what can be done to close the gaps. The report also describes possible ways in which PHARMAC can link into DHB Pacific initiatives.

The report shows PHARMAC is already doing a lot in Pacific health, although this is often not clearly articulated. For example, One Heart Many Lives has a clear Pacific component, some PHARMAC resources are translated into Pacific languages. More needs to be done to promote the initiatives that are already in place.

The committee welcomed completion of the report and considered that steps that might be explored included creating a Pacific human resource within PHARMAC, and a Pacific Board member of PHARMAC.

The committee requested that members receive a copy of the report with a timeline process to ensure it goes forward to the Board with CAC support.

9. Demand Side Update

PHARMAC's Demand Side team had increased in size and this created greater capacity to undertake more project work. The committee was introduced to new Demand Side team members.

Recently the Demand Side team had been involved in implementation of some high profile PHARMAC decisions, including Herceptin, paroxetine and methylphenidate.

The Herceptin resource had been produced to a high standard in a brief time period. Consumer feedback had been incorporated into the final product. The committee suggested further channels for distributing the resource, including cancer groups, women's groups, Maori health providers, Pacific groups & churches.

One Heart Many Lives was continuing in Hawke's Bay and Northland. A Hawke's Bay one year on project was being developed. PHARMAC had been approached by the Kingitanga to take the programme into Waikato, this would be further explored. PHARMAC was also looking at extending the project into Lakes DHB and Nelson-Marlborough DHB regions. Waitemata DHB had already committed funding to OHML.

PHARMAC was developing a new project around polypharmacy. A paper was being prepared with recommendations around high risk areas. PHARMAC was examining the use of tools developed by the National Prescribing Service in Australia, these included a consumer component.

The committee noted its long-standing interest in polypharmacy and asked to be kept informed about what PHARMAC is doing. A secure link to the website might be a useful tool for this.

Maori health team

A new Maori health manager had been appointed and this had helped to refresh and revive the Maori Responsiveness Strategy. An internal project, Matariki@PHARMAC, had been developed to ensure greater awareness of Maori among PHARMAC staff. Increased capacity will see greater progress being made in advancing the Maori Responsiveness Strategy.

10. Discussion paper and Consumer group checklist

The committee considered draft guidelines on consumer groups accepting sponsorship from health industry. Members considered the draft would benefit from some further introductory comments. Further feedback would be provided via email.

Once comments had been made (by end of July), a finalised draft would be circulated to interested groups by the end of August, seeking feedback. This could then be incorporated into a final document.

11. General business

The committee discussed how it might be more closely involved in correspondence received by PHARMAC from consumers or from providers on behalf of consumers.

While more information on correspondence might be useful, the committee did not want to slow the process for PHARMAC responding to correspondence. Privacy issues may also be raised.

The committee sought advice from PHARMAC for its next meeting on how the committee might make a meaningful contribution to responses PHARMAC makes to correspondence.