

## Summary of the consultation feedback to proposed changes to our advisory committees' terms of reference

The following feedback was received to the consultation on Pharmac's advisory committees.

Feedback received	Who said it
All feedback received was generally supportive of the proposed changes. The major changes we proposed were:	Health professional organisations
Allowing for consumer representation on the PTAC	Consumer advocacy organisations
Increasing the diversity and equity capabilities of members of our expert advisory committees	Current advisory committee members
Renaming the subcommittees of the PTAC to be 'Specialist Advisory Committees'	Pharmaceutical suppliers
Altering the CAC Terms of reference to allow the CAC to consider medicine/device funding applications.	
A range of feedback on te Tiriti, Māori advice, and equity advice within Pharmac's advisory committees, including:	Health professional organisations
<ul> <li>There should be a more entrenched equity focus within all the Terms of Reference.</li> </ul>	Current advisory committee members
<ul> <li>Supportive of Pharmac's commitment to set up a Māori advisory committee and interested in engaging with Pharmac on that.</li> </ul>	
<ul> <li>Would like to see a Māori by-line for all of Pharmac's advisory committees.</li> </ul>	
<ul> <li>Increase the Māori voice within Pharmac and on their committees and Board.</li> </ul>	
Ensure steps are taken so there is no single Māori health practitioner on any clinical committee.	
A range of feedback on administrative and process aspects of the advisory committees, including:	Health professional organisations
Suggestions on timeframes for publication of records.	Pharmaceutical suppliers
<ul> <li>Suggestions on frequency of meetings, dates of meetings, and the sequencing of meetings.</li> </ul>	Current advisory committee member
Suggestions on, and support for, meetings being run remotely.	
<ul> <li>Suggestions on recruitment processes for members, including having clear competencies and selection criteria, seeking nominations from specific organisations, and suggestion that Pharmac not be solely responsible for appointing members.</li> </ul>	
<ul> <li>Suggestions on using international expertise when local expertise is not available.</li> </ul>	
<ul> <li>That all medicine funding applications be made publicly available, with commercially sensitive information removed.</li> </ul>	
Supportive of members of the public attending clinical advisory meetings.	

## COMMERCIAL IN CONFIDENCE

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A range of suggestions on the training and support that may be required by consumer members on clinical advisory committees, including:	Consumer advocacy organisations Health professional organisations Pharmaceutical suppliers Member of the public
<ul> <li>Outline what is required of them in an advisory capacity. Clear about when and how they can provide input and how their advice will be used.</li> </ul>	
<ul> <li>Adequate training and understanding of Pharmac processes and funding, including health equity and Factors for Consideration.</li> </ul>	
<ul> <li>Provision of ongoing professional development, including strategies to deal with difficult circumstances i.e. pressure from those seeking to influence the decisions of Pharmac.</li> </ul>	
<ul> <li>Ensuring material, including clinical information, is presented in Plain English and includes summaries where appropriate.</li> </ul>	
<ul> <li>Being clear on the relationship between PTAC, Pharmac's Consumer Advisory Committee, and any liaison with consumer/patient groups.</li> </ul>	
<ul> <li>Ensuring PTAC has a support framework and approach for the inclusion of consumer member/s.</li> </ul>	
A range of suggestions on the types of things that Pharmac's Consumer Advisory Committee could be involved with providing advice on, including:	Consumer advocacy organisations Pharmaceutical suppliers
<ul> <li>Helping Pharmac to make decisions that remove or reduce patients' barriers to access.</li> </ul>	
<ul> <li>Advising Pharmac on policies, strategies and behaviours to be more consumer-centric.</li> </ul>	
<ul> <li>Having members seek knowledge, perspectives and experiences from other stakeholders.</li> </ul>	
<ul> <li>Having performance indicators for the committee and reporting on these regularly.</li> </ul>	
A range of suggestions on the role of the Specialist Advisory Committees (SACs) and how they should engage with Pharmac staff and PTAC including:	Current advisory committee members Health professional organisations
<ul> <li>Providing SACs with the opportunity to directly engage with PTAC and/or Pharmac staff if their recommendation isn't accepted by PTAC or Pharmac.</li> </ul>	
<ul> <li>Having members of SACs attend PTAC for relevant discussion items.</li> </ul>	
<ul> <li>SAC members being conduits for other clinicians and consumers from their specialist areas.</li> </ul>	
<ul> <li>Ensure SACs are in the advisory space, not the advocacy space.</li> </ul>	
<ul> <li>Ensure the questions asked of SACs are different to those asked of PTAC (noting SAC members' expertise in specific clinical areas).</li> </ul>	
A range of suggestions on how to better include the patient/consumer voice alongside medicines funding applications, including:	Pharmaceutical suppliers

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<ul> <li>Pharmac should seek the voice of consumers who are wanting/using a medicine when looking at funding applications and include early in the process.</li> </ul>	Consumer advocacy organisations Health professional organisations
<ul> <li>Using examples from international organisations, such as NICE, to ensure the patient voice is represented in all strategic, policy and operational activities.</li> </ul>	
<ul> <li>Supporting patient perspectives and/or submissions via online, written, audio or visual means.</li> </ul>	
<ul> <li>Working with consumer advocacy groups to have a wider range of consumer stakeholders who are able to act as conduits for information sharing both into and from Pharmac.</li> </ul>	
Ensure there is clarity about any difference between 'patient' and 'consumer' as appropriate.	
Remove considerations of price from clinical advisory committees and focus on the clinical and scientific information. PTAC and SACs determine priority assessment based on clinical assessment only.	Pharmaceutical suppliers
Funding application sponsors given access to PTAC meeting when its application is considered so PTAC can seek input or clarification at time of meeting.	Pharmaceutical suppliers
More opportunity for suppliers to have dialogue with Pharmac on funding applications during the funding decision process.	Pharmaceutical suppliers
Suggestion of a monthly or bi-monthly newsletter to be sent to NGOs and other community organisations.	Consumer advocacy organisation
Suggestion to have a flexible pool of clinician and consumer representatives that can be called on when needed, rather than multiple different advisory committees.	Pharmaceutical supplier