

Minutes of the PHARMAC Consumer Advisory Committee (CAC) meeting

Friday 19 March 2010

The meeting was held at PHARMAC, 9th floor, Cigna House, 40 Mercer St, Wellington from 9.30am.

Present:

Sandra Coney	Chair
Anne Fitisemanu	CAC member
Vicki Burnett	CAC member
Maurice Gianotti	CAC member
Jennie Michel	CAC member
Kate Russell	CAC member
Matiu Dickson	CAC member
Te Aniwa Tutara	CAC member
Heather Thomson	CAC member

In attendance:

Fiona Rutherford PHARMAC (CAC Secretariat)

Jude Ulrich, Bryce Wigodsky, Adam McRae, Marama Parore, Davina Carpenter, Rico Schoeler, Matthew Brougham (PHARMAC Staff) attended for relevant items.

1. Minutes of December 2009 meeting

The minutes of the December 2009 meeting were accepted as a true and accurate record.

Coney/Dickson (carried)

2. Chair's Report

The Chair noted that:

- Dennis Paget resigned from the Committee in January for personal reasons. Dennis had been a founding member of the CAC and had ably presented the consumer viewpoint of older people and people with diabetes;
- the Committee provided PHARMAC staff with feedback on the draft CAC Terms of Reference at a teleconference in early February, and that a number of suggested changes were incorporated, however, not all of those sought by the CAC;
- she was unable to attend the January Board meeting due to the airport being closed and had attended the February Board meeting;
- prior to the Board's consideration of the draft CAC Terms of Reference at the February Board meeting, the Board Chair had sought the CAC Chair's comment. The CAC Chair

reiterated to the Board the Committee's view that the Terms of Reference should require more than two meetings per year. The Chair also discussed concerns with provisions in the draft Terms of Reference relating to observer attendance and this section was subsequently changed;

- the Ministry of Health sought CAC's feedback on its consultation on a national formulary. While the consultation was chiefly aimed at health professionals, the Committee considered that similar information to that being proposed for inclusion in the formulary for health professionals, was required for consumers;
- the Board had responded to the Chair's letter regarding the frequency of CAC meetings, and CAC membership fees. The Chief Executive's response encouraged CAC to share its view on its meeting frequency in the formal consultation process on the draft CAC Terms of Reference which is currently occurring. The CE also advised that the Board had agreed on a small increase in CAC fees, in keeping with the Cabinet Office Fees Framework; and
- the constitution of the Consumer Collaboration charter will hopefully be finalised shortly and 20 or more consumer groups will be required for incorporation of the Collaboration.

Coney/Gianotti

3. Conflicts of Interest

No interests relating specifically to items on the October meeting agenda were declared.

4. Action points

The Committee agreed upon the action points.

Dickson/Burnett (carried)

5. Matters arising

The Committee asked the CAC Secretary to write to each Committee member explaining the implications of the fee changes for each individual.

6. CAC response to Medsafe consultation on Medicines Regulations changes

The Committee agreed that it wished to provide a response to this consultation. The Committee discussed the contents of the submission, including responding to proposed changes to medicine labelling, advertising requirements, electronic prescribing, prescription requirements, and medicines substitution.

The Committee agreed to provide comments on a draft to enable the submission to be completed by 26 March.

7. Access and Optimal Use Prioritisation Process

The Committee discussed how consumer views would best be considered in PHARMAC's Access and Optimal Use programme prioritisation process.

The Committee considered that consumer input into, or representation at, the proposed annual brain-storming meeting would be desirable. In addition, the Committee considered that to ensure consumer viewpoints are reflected, two or three Committee members should be involved in the prioritisation process.

The Committee also discussed a range of issues that arise in any prioritisation process – the need to clearly identify criteria, the difficulties inherent in weighting criteria.

The Committee was concerned that an opportunity be provided to trial new approaches to encouraging behaviour change. In some cases there isn't strong evidence to support these but testing out innovative ideas is the only way to determine whether they will work.

Coney/Dickson

8. CAC submission on draft CAC Terms of Reference

The Committee discussed the contents of its submission on the consultation on the draft Consumer Advisory Committee Terms of Reference.

The Committee was disappointed that the Board has not increased the number of meetings per year for the Committee. The Committee's comments focussed on the number of meetings, meeting length, provisions for observers and visitors to attend meetings, the ability for the Committee to contribute to the work of other agencies, the role of CAC members on the Māori Caucus, and membership provisions.

The Committee agreed to provide feedback via email on a draft version of the submission so that it can be completed by 1 April.

9. Proposal for External Stakeholder Consultation

The Committee provided feedback on how PHARMAC could engage with consumers on its PHARMAC's Records Retention and Disposal Schedule. The Committee identified a number of groups it considered would likely be interested in being contacted about the consultation.

The Committee also had a general discussion about the potential value to families and researchers of the records PHARMAC holds that relate to individuals.

10. PHARMAC correspondence to consumers

The Committee provided feedback on anonymous examples of PHARMAC's correspondence with consumers. Committee members had different views regarding the appropriate tone of responses to consumers. The Committee suggested that PHARMAC keep a record of people who have expressed interest in issues and update them of progress on these. PHARMAC staff commented that this is already usual practice.

11. In PHARMAC's shoes


The Committee continued its discussion on PHARMAC's prioritisation task – using the Mission Impossible scenario to simulate the challenges involved in prioritisation. Members reflected an increased appreciation of the range of factors considered in decision-making and requested that an item on the origins of the QALY be included on the June meeting agenda.

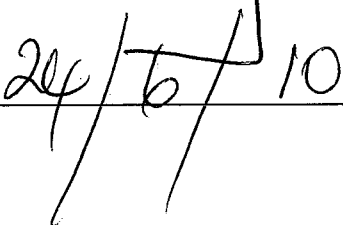
12. CE discussion: the Minister's Review Group Report and High Cost Medicines Panel work

The Chief Executive outlined the recommendations of the MRG Report that are relevant to PHARMAC and advised that work on the possible implementation of these recommendations is continuing. The CE also informed the Committee of the High Cost Panel's review process, and the recommendations of the Panel's preliminary report. The Committee noted that final decisions about any expansion of PHARMAC's role will be made by the Minister of Health and Cabinet.

13. Updates

The Committee noted the Access and Optimal Use, and Funding and Procurement updates.


Chair


Date