

**Minutes of the PHARMAC Consumer Advisory Committee (CAC) meeting  
Wednesday 15 February 2012**

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

**Present:**

Kate Russell	Chair
Anne Fitisemanu	Deputy Chair
Anna Mitchell	CAC member
Maurice Gianotti	CAC member
Shane Bradbrook	CAC member
Katerina Pihera	CAC member
Jennie Michel	CAC member
Barbara Greer	CAC member
Moana Papa	CAC member

**Apologies:**

Steffan Crausaz                      PHARMAC Acting Chief Executive

**In attendance:**

Bryce Wigodsky	PHARMAC (CAC Secretariat)
Jude Urlich	PHARMAC (Management Team representative)

Simon England, Fiona Rutherford, Jayne Watkins, Rico Schoeler (PHARMAC staff) and Brenda Ratcliffe (pattillo consultancy) attended for relevant items.

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**1. Minutes of November 2011 meeting**

The Chair reviewed the 17 November 2011 minutes.

A Committee member observed as omitted from the November minutes a discussion about PHARMAC's identity statements referencing the Treaty of Waitangi and Whānau Ora. The member also recalled the Committee discussed extending an invite to the Minister for Whānau Ora to speak to the Committee.

Regarding the Committee's November discussion of the Regional and national Forums, members discussed who is attending PHARMAC's Forum in February 2012 and the need to balance different health sectors.

*Russell/Pihera (carried as amended)*

**2. Chair's Report**

*Due to the Christmas break I have little to report to this meeting other than the following*

- 1. CAC were asked to provide an article to the Pharmaceutical Guild magazine regarding our observations on the mini-fora that were held last year. Due to the tight timeframe (only a few days) and the fact that I was on holiday, Bryce drafted up an article for me,*

*using the observation notes we had from our last meeting and I approved it with only a few minor changes. I expect a copy of the article will be in your meeting papers.*

- 2. I have been asked, by Pharmac, to co-facilitate a session on the role of Pharmacy as a medicines information conduit to consumers, with the President of the Pharmacy Guild who runs a pharmacy not far from my home. We have yet to touch base (I have sent an email requesting a meeting but have not had a reply yet) but I envisage this session to be highly interactive where we look at what Pharmacists can do to enhance their role as trusted community advisors and what resources need to be put their way to facilitate this*
- 3. Board meetings over this period have not turned up anything that is of particular interest to the committee.*
- 4. The Board has received our recommendation on having other committee members at meetings as a part of orientation and they are happy for this to occur when I cannot be at meetings but not extra to my attendance as they feel it would set an unsustainable precedent for other advisory groups. Each time I cannot attend I will throw it out to the group for someone to attend in my stead.*
- 5. The Board viewed and accepted our Annual Plan. Kura Denness asked about the costs involved in greater consumer engagement but I explained that we all expected that, with little exception, much of this increased activity would come about during our 'business as usual' activities with our own networks and that what we were after, was the mandate to attend things with our CAC hat on where appropriate. This was agreed to. The Board commented that this level of activity would make the committee more useful as an advisory body going forward.*

### **3. Matters arising**

#### 3A. Interests register

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

#### 3B. Action points

The Committee reviewed and agreed upon the action points.

Members discussed and clarified that the Committee's Annual Plan will be included in Committee meeting papers as a regular item and is intended to be a "working" document that is updated regularly. Members also discussed ensuring the Committee's Annual Plan aligns with PHARMAC's and the Ministry of Health's strategic priorities. PHARMAC staff noted that the Committee would simply need to show a linkage to PHARMAC's Statement of Intent, which draws a connection between the Committee and PHARMAC's strategic priorities (Output 2.1). The Chair agreed to draft a brief discussion paper ensuring the Committee's Plan aligns with this.

#### 3C. Correspondence

The Committee noted the PHARMAC Correspondence Report.

The Committee discussed a letter it received following up on the Regional Forums in 2011. Members discussed issues raised in the letter, including free medicines for targeted regions and high needs areas and treatments for scabies. Members agreed to reply to the correspondent.

### 3D. Grapevine

The Committee briefly discussed tracking issues it is aware of and added items relating to the regional targeting of medicines for particular populations and conditions.

A member noted she was approached following the 2011 Regional Forums by a person interested in teaming with PHARMAC to hold health-related seminars in the South Island. Contact details were passed on to PHARMAC staff.

#### **4. Session with Acting Chief Executive**

The Acting Chief Executive was unable to attend due to prior commitments. The Manager, Corporate and External Relations briefed the Committee on recent PHARMAC issues. This item was discussed following the Committee's discussion of the PHARMAC Forum (items 5-6).

The Manager briefly discussed the coming year for PHARMAC and the upcoming PHARMAC Forum.

The Manager updated the Committee on the decision of a Judicial Review brought against PHARMAC by AstraZeneca relating to proposed changes to funding for asthma products. Members were informed that, subsequent to the Judicial Review, PHARMAC and AstraZeneca reached agreement to continue fully funding AstraZeneca's Symbicort and Vannair products.

The Manager briefed the Committee on a recent case study report from the Health and Disability Commissioner regarding a child who died from an allergic reaction to cashew nuts. The Manager noted the funding situation for treatments for such situations.

#### **5-6. Preparing for the PHARMAC Forum**

PHARMAC staff and the PHARMAC Forum facilitator attended to prepare the Committee for the PHARMAC Forum on 20 February.

The Committee discussed the logistics of the Forum, the agenda, attendance, discussion tables, members' roles and the "Pharmacy and the Patient Experience" breakout session.

Committee members and PHARMAC staff clarified that members are attending primarily as a representative of their respective consumer groups, and secondly as a member of the Committee.

Members agreed that they would present the voice and views of participants from the Regional Forums at the main Forum. It was discussed that there would be multiple opportunities for members to communicate feedback from the Regional Forums, including at the "Pharmacy and the Patient Experience" session, during table discussions and in the Open Forum general question and answer session.

Members also suggested they take note of other health sector players at the Forum and the discussions that are had so they can report back to their communities.

Regarding the "Pharmacy and the Patient Experience" session co-hosted by the Committee Chair, the Committee agreed that the goal of the session is to work towards solutions to encourage consumers to be confident to ask more questions and to remove the barriers for pharmacists to provide better tailored services. Based on feedback from the Regional Forums, the Committee agreed it wanted to encourage pharmacists to reclaim their role as a trusted health advisor.

One member proposed including a timeline of the progression of pharmacy practice over time, highlighting resource constraints.

The Committee hoped to see outcomes from the session that included continued discussion of these issues, a working group to continue exploring solutions and consumers to begin asking more questions of their pharmacists.

Members discussed the timeline for this session's discussion and that time was limited and discussions needed to be targeted. Members discussed key issues to raise in this session, including referring to the Regional Forums and the key message from these that the pharmacy is the preferred place for medicines information but that this is not always fulfilled, the barriers to better services, how to change the mindset of consumers and pharmacists to enable better services, and requesting ideas from attendees for a simple solution and a complex solution to overcoming barriers.

The Committee requested that its Secretariat develop a response sheet for session attendees to work in groups on to discuss and capture ideas on these issues.

## **7. Communicating NPPA implementation: Q&A for patients**

PHARMAC staff attended to seek the Committee's views on draft resources for consumers in preparation for PHARMAC's new Named Patient Pharmaceutical Assessment (NPPA) scheme. Members were generally positive about the appropriateness of the resources for consumers/patients.

Members provided feedback on simplifying the language in the resources and improving the purpose and usefulness of diagrams in the resources.

Members noted that resources such as these can empower consumers and help them connect with PHARMAC. One member noted that the resources could be beneficial for patients to increase their confidence in asking questions of their doctor and would give them more responsibility for their healthcare decisions.

One member suggested also creating a simpler pamphlet/leaflet resource for prescribers to provide to their patients. This would be a "front-line" resource and could include very basic information about NPPA and point patients to where they can find more details.

Members sought clarity around what treatments can be requested under NPPA, i.e. what does "medicines and medicinal products" mean. PHARMAC staff clarified that anything that can be dispensed by a pharmacy can be applied for under NPPA. Committee members suggested rewording this section of the resource to clarify this point.

Members suggested clarifying examples used in the resources about what PHARMAC will and will not consider when assessing a NPPA application.

Members suggested providing more clarity around what are the "grounds" for review which can be considered, noting this would not be an exhaustive list.

## **8. Exercise: Mission Impossible – prioritising medicines funding**

PHARMAC staff presented to the Committee an exercise demonstrating how PHARMAC assesses and prioritises medicines for funding. Examples were provided illustrating the costs, patient population, expected benefits and comparisons of medicines.

Staff highlighted PHARMAC's need to abstain from value judgements as much as possible and remain neutral in the decision making process.

Staff also discussed PHARMAC's move to present its calculations as QALY/million dollars spent rather than its traditional presentation as cost/QALY (quality adjusted life year). Staff emphasised that there are no changes to the calculation itself, only to the way its final figure is expressed. Staff noted this allows for a better evaluation and comparison between alternative funding options.

Committee members discussed the need and difficulty of making medicines funding decisions, particularly in the context of funding and resource limitations.

## **9. Resource bucket review**

The Committee discussed its new resource for informing consumers about PHARMAC's work – the Resource Bucket.

The Committee suggested including information about different Access and Optimal Use activities and campaigns. This could also include application forms to provide people if they want to become involved.

In addition to hard copies, the Committee suggested providing a sample of resources in PDF and/or on a memory stick, with references to where people can go for the material. Members recommended also having prepaid envelopes with a list of available material that people can check the ones they want and send to PHARMAC. These options would allow for higher quality materials to be provided to consumers.

Members also requested more individual information sheets for distribution.

The Committee noted that its key messages will need to be updated once Named Patient Pharmaceutical Assessment take effect on 1 March.

## **Noting papers**

*Noted:*

- Access and Optimal Use update
- Summary of new investments
- Medicines Regulations changes

The Committee discussed proposed changes to the Medicines Act and Medicines Regulations. Members considered whether the Committee should provide a submission on the proposals and asked PHARMAC to keep it informed of progress in this area to help decide if a submission is needed. Staff also undertook to request that the Committee be included in the Ministry of Health's consultation database.