

Joint working with the pharmaceutical industry Policy
 (Template based upon DH Best Practice Guidance for Joint Working between the NHS and the Pharmaceutical Industry, February 2008)

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1. Introduction

The Department of Health guidance, 'Best Practice Guidance for Joint Working between the NHS and the Pharmaceutical Industry',¹ encourages NHS organisations and their staff to consider opportunities for joint working with the pharmaceutical industry, where the benefits that this could bring to patient care and the difference it can make to their health and well-being are clearly advantageous.

As described in the guidance, Joint Working is defined as: "*Situations where, for the benefit of patients, organisations pool skills, experience and/or resources for the joint development and implementation of patient-centred projects and share a commitment to successful delivery. Joint working agreements and management arrangements are conducted in an open and transparent manner.*"

Primary Care Rebate Schemes are periodically offered by pharmaceutical companies. Such an offer of a rebate scheme would not form part of any joint working agreement as defined above. A rebate scheme is based upon the following :

NHS Acute Trusts are responsible for procuring their own drugs and negotiate prices directly with suppliers. In primary care, GPs and CCGs cannot do this, as the drug supply mechanism is very different, with pricing based on the Drug Tariff, where reimbursement prices for community pharmacists are set by the Department of Health. In such cases, some pharmaceutical companies offer a rebate scheme which is a percentage rebate on the Tariff/list price for a given drug which is paid directly to the CCG.

1.1 Statement and aim

The aim of this policy is to:

- assist NHS Wirral Clinical Commissioning Group (CCG) achieve its objectives and delivery of national and local priorities by building effective and appropriate working relationships with the pharmaceutical industry
- inform and advise staff of their main responsibilities when entering into joint working arrangements with the pharmaceutical industry.

Specifically it aims to:

- assist NHS employers and staff in maintaining appropriate ethical standards in the conduct of NHS business.
- highlight that NHS staff are accountable for achieving the best possible health care within the resources available.

1.2 Objectives

The main objectives are to:

- provide all CCG employees a policy framework and guidance for independent contractors for communication with members of the pharmaceutical industry in an appropriate manner.
- make all employees and contractors aware of the limitations of the sponsorship they are at liberty to accept from the pharmaceutical industry.
- introduce mechanisms to recognise potential conflicts of interest

- ensure that all employees and independent contractors approached by the pharmaceutical industry respond in a consistent manner.
- ensure the interests of patients, the public and the CCG are maintained.
- ensure that any sponsorship accepted from the industry is declared publicly to ensure transparency
- ensure that clinical and financial decisions taken by NHS employees and independent contractors do not rely solely on the advice and interventions of the industry representatives

Staff are reminded that at all times they have a responsibility to comply with their own professional codes of conduct, and that representatives of the pharmaceutical industry must comply with the Association of British Pharmaceutical Industry (ABPI) Code of Practice for the Pharmaceutical Industry

2. Scope of document

This document is intended as policy for NHS Wirral Clinical Commissioning Group and its staff who are involved in working with the pharmaceutical industry. This will include joint working agreements with the pharmaceutical industry as well as rebate schemes, hospitality and sponsorship received from the pharmaceutical industry. For the purposes of this policy:

The term “staff “ refers to all healthcare staff employed by NHS Wirral Clinical Commissioning Group and board members in their capacity as board members **and** as independent contractors, all other healthcare professionals including contractors and locum practitioners working under NHS terms and conditions.

Sponsorship is defined as situations where pharmaceutical companies simply provide funds for a specific event or work programme.

3. Roles and responsibilities

It is the responsibility of each individual employee to follow the policy framework when accepting any commercial support. They must also refer to their line-manager for approval.

It is the responsibility of line-managers to ensure that employees are fully aware of this policy. They are responsible for checking that requests from all employees to form collaborations with the pharmaceutical industry are thoroughly examined. They must ensure that the work is beneficial to the organisation, that there is no conflict of interest and the framework is adhered to.

It is the responsibility of the CCG Clinical Lead for Primary Care, in conjunction with the Senior Prescribing Advisor, NWCSU, to resolve any contentious issues and have the final say in determining the appropriateness of any collaboration with the industry.

The CCG will maintain a register of gifts, hospitality and sponsorship on the CCG website. The NHS parties should be accountable for any agreement and be in a position to evaluate and monitor these agreements. No organisation should be given preferential treatment and individuals must be accountable for their reason for forming relationships with industry members. Final consideration and approval for any joint working arrangements will be sought from the NHS Wirral Clinical Commissioning Group Quality, Performance & Finance Committee.

4. Principles and values of joint working

4.1. Values

The seven principles of public life set out by the Nolan Committee underpin the work of the NHS:

- Selflessness
- Integrity
- Objectivity
- Accountability
- Openness
- Honesty
- Leadership

Where staff enter into any joint working arrangement with the pharmaceutical industry, their conduct should also adhere to the following values:

- transparency and trust
- appropriateness of projects
- patient focused
- value for money
- reasonable contact
- responsibility
- impartiality and honesty
- truthfulness and fairness

4.2 Principles of Joint Working

Joint working agreements must be for the benefit of patients or of the NHS and preserve patient care. Any joint working agreement between the NHS and the pharmaceutical industry should be conducted in an open and transparent manner.

Arrangements should be of mutual benefit, the principal beneficiary being the patient. The length of the arrangement, the potential implications for patients and the NHS, together with the perceived benefits for all parties, should be clearly outlined before entering into any joint working agreement.

The following principles will also apply to joint working agreements:

- staff should be aware of NHS guidance, the legal position and appropriate and relevant professional codes of conduct as described in existing NHS guidance
- contract negotiations will be negotiated in line with NHS values
- confidentiality of information received in the course of duty must be respected and never used outside the scope of the specific project
- joint working arrangements should take place at corporate, rather than at an individual level
- clinical and financial outcomes will be assessed through a process of risk assessment

NHS Wirral Clinical Commissioning Group shall implement a mechanism for recording and monitoring, and evaluating each joint working agreement.

A mutually agreed and effective exit strategy will be in place at the outset of any joint working agreement detailing the responsibilities of each party and capable of dealing with a situation where premature termination may become necessary. Any other risks or governance issues (clinical or business) need to be considered at the planning stage for any joint working to remove or minimise risk to the CCG or patients.

4.3 Principles of sponsorship and hospitality that are covered by this policy

Sponsorship to the NHS in the form of cash, goods, services or other benefits include but are not restricted to the following:

- funding for all or part of the costs of a member of staff
- funding to support NHS research being carried out by NHS employees or independent contractors in Wirral
- sponsorship of any staff or patient training event that is undertaken or organised by NHS staff or contractors
- equipment being donated by an independent organisation in order to support the NHS or independent contractors.

Hospitality should generally not be accepted and can only be provided to health professionals and managers as part of scientific or promotional meetings. Hospitality must be secondary to the meeting and of an appropriate standard i.e. not more lavish or deluxe than employees would usually have themselves e.g. sandwiches at lunch. Hospitality may include:

- meals
- meetings
- hotel and transport costs (including overseas travel) NB only economy air travel can be provided for delegates
- Samples of medicines should not be accepted under any circumstance by a health professional.
- Gifts from independent organisations to NHS Wirral Clinical Commissioning Group employees or independent contractors
- Donations to the cost of buildings or premises.

4.4 Exceptions to sponsorship covered by this policy

Gifts of the value of £10 or under per gift are acceptable as long as they are relevant to the person's profession (e.g. pens, post-it notes, pill counting triangles). The gifts must be declared in the register of gifts, hospitality and sponsorship if the total value is greater than £10 over a 12-month period.

Gifts for GPs from their patients: regulations concerning the acceptance by GPs of gifts from patients came into force in March 2004. The National Health Service (General Medical Service Contracts) Regulations 2004, statutory instrument 291, specify that a register should be kept of gifts from patients or their relatives which have a value of £10 or more unless the gift is unconnected to the provision of services.

Income generation schemes will be logged separately at a local level.

Discounts on particular pharmaceuticals, for example, where a community pharmacist or hospital pharmacy received a discount for buying a specified amount of a particular drug.

4.5 Confidentiality and Data Protection

Patient confidentiality must always be protected under the terms of the Data Protection Act. Patient consent must be obtained to disclose any information to another organisation. Disclosures should also be in line with the information sharing protocol.

All employees are responsible for maintaining the confidentiality of information gained during their employment with NHS Wirral Clinical Commissioning Group. The NHS Code of Confidentiality and NHS Wirral CCG constitution should be read and understood prior to any contract of employment or other confidentiality agreement being signed.

4.6 Declaring Conflicts of interest

Individuals involved in the development or consideration of any proposal must declare any potential conflict of interest they, or their immediate family, may have at the beginning of the process; Examples could include:

- shareholding or directorship in a company speaking at industry sponsored events research or educational grant.
- consultancy work
- NHS employees are advised not to engage in outside employment which may conflict with their NHS work, or be detrimental to it. They are advised to tell their NHS employing authority if they think they may be risking a conflict of interest in this area: the NHS employer will be responsible for judging whether the interests of patients could be harmed, in line with the principles outlined. Please refer to the NHS Wirral CCG Conflict of Interest Policy available on the staff intranet as well as the CCG website.

4.7 Payments

If any outside work for the pharmaceutical industry is carried out in NHS time i.e. during the normal working day, without the member of staff taking annual leave, any fee should either be refused, or if accepted, be paid to a budget agreed with the line manager in advance of undertaking the activity. A fee can be accepted for work carried out in the staff member's own time.

4.8. Bribery legislation

The Bribery Act 2010 (“the Act”) imposes extensive obligations on all commercial organisations, including those in the healthcare sector, to ensure that they have adequate procedures in place to prevent bribery from occurring within their organisation.

A bribe is an inducement or reward of a financial or other advantage that is offered, promised or provided to a person in order to gain any commercial, contractual, regulatory or personal advantage through the improper performance of a relevant function or activity as a result of the bribe.

- ‘Financial or other advantage’, - payments, gifts, hospitality or anything else that could be reasonably perceived as an “advantage” as understood by its normal, everyday meaning.
- “Improper performance” means performance in breach of an expectation that a person will act in good faith, impartially, or in accordance with a position of trust.
- A “relevant function or activity” means any function of a public nature, connected with a business, performed in the course of a person’s employment or performed by or on behalf of an incorporated or unincorporated body of persons.

All allegations or suspicions of bribery, fraud or corruption must be reported to the local Counter Fraud Specialist. Further information and guidance can be found in the NHS Wirral CCG Counter Fraud and Corruption Policy.

5. Audit and monitoring criteria

| Document Audit and Monitoring Table | |
|---|--|
| Monitoring requirements *What in this document do we have to monitor (e.g. processes) Note specifically any monitoring needed to assure equality and equity of delivery | a) The number of requests to joint working and their outcome b) Monitor the source of the application (employee) and the sponsorship (commercial organisation) to ensure that the process is equitable to all concerned |
| Monitoring Method: (e.g. statistics, report) | a) Report |
| Monitoring prepared by :- (name job titles) | a) Senior Prescribing Advisor, North West CSU |
| Monitoring presented to:- (e.g. Committees) | a) Quality, Performance & Finance Committee |
| Frequency of presentation:- (e.g. annually, six-monthly etc) | a) Annually |

6. Statement of evidence/references

1. Department of Health, 2004. Code of Conduct: Code of Accountability in the NHS. 2nd Ed
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4116281
2. Commercial Sponsorship – Ethical Standards for the NHS (2000)
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4005135
3. ABPI Code of Practice which can be found at: <http://www.abpi.org.uk/our-work/library/guidelines/Pages/code-2012.aspx>
4. 'Standards of business conduct for NHS staff, and Commercial Sponsorship – Ethical Standards for the NHS (2000), www.kch.nhs.uk/EasysiteWeb/getresource.axd?AssetID=793&type=Full&servicetype=Attachment
5. 'Moving beyond sponsorship : joint working between the NHS and the pharmaceutical industry'
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_082840
6. Department of health confidentiality policy

7. Implementation and dissemination of document

Once this policy has been approved by NHS Wirral CCG it will be added to the regular email communication (CCG Connecting) which is distributed to all practices. It will also be sent to all Wirral community pharmacists.

9. Associated Documents

- Guidance on collaboration between healthcare professionals and the pharmaceutical industry – Ethical Standards in Health & Life Science Group
- Review of Primary Care Rebate Schemes – Steve Riley, Senior Prescribing Advisor, NWCSU