Guide for pharmaceutical company representatives

Queensland Health standards of interaction and behavior

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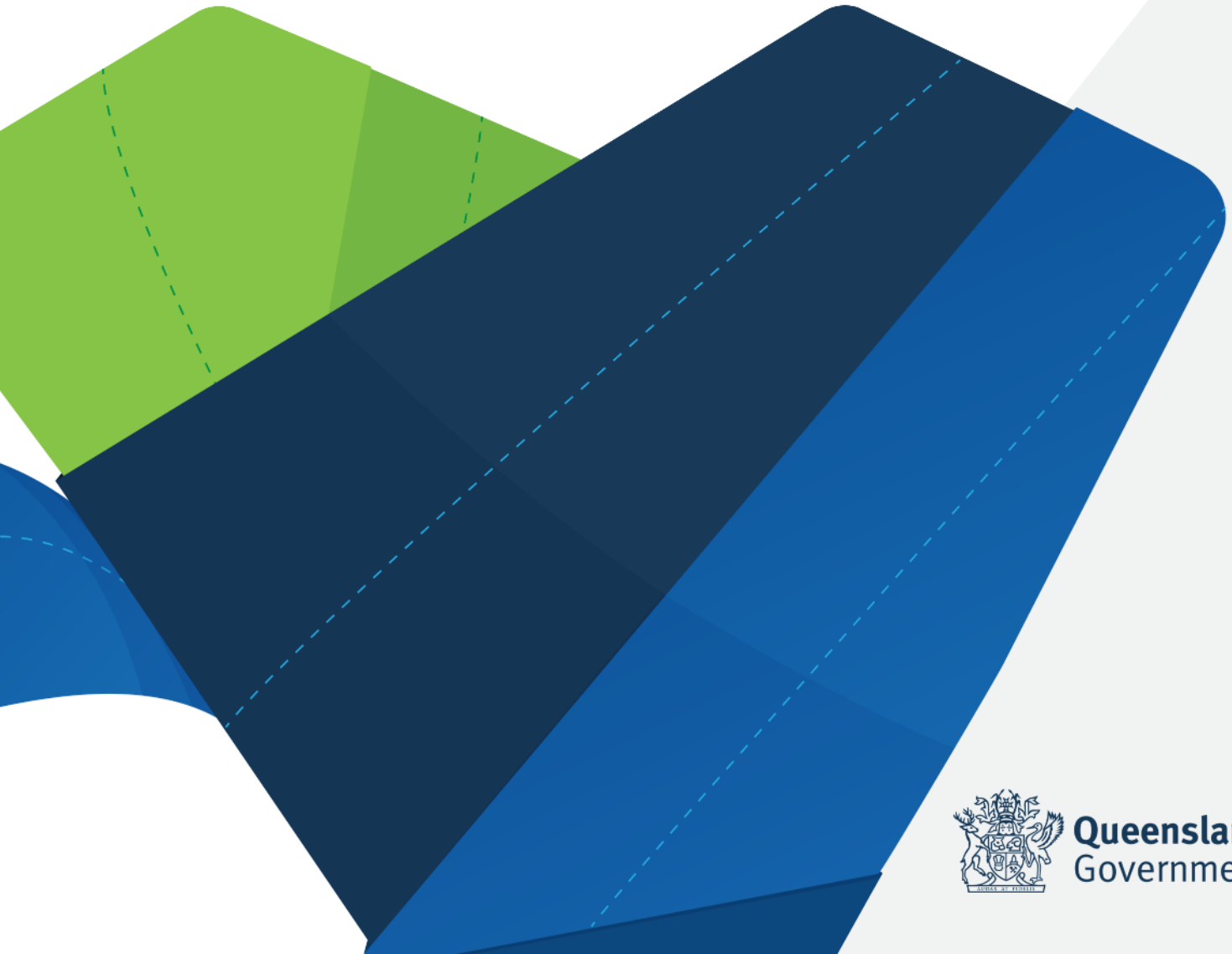

Queensland Government

Guide for pharmaceutical company representatives - Queensland Health standards of interaction and behavior

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An electronic version of this document is available at https://www.health.qld.gov.au/__data/assets/pdf_file/0019/444142/guide-pharmaceutical-reps.pdf

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1 Purpose

This guideline provides recommendations regarding best practice for the conduct of pharmaceutical representatives visiting Queensland Health sites.

2 Scope

This guideline applies to all representatives of companies seeking to promote pharmaceutical products within Queensland public hospitals. Pharmaceutical company sales and marketing representatives are only permitted access to Queensland Health sites and staff members in accordance with the provisions of this guide. Pharmaceutical company representatives must comply at all times with the Medicines Australia code of conduct.

Queensland Health employees (permanent, temporary and casual) and all organisations and individuals acting as its agents (including visiting medical officers and other partners, contractors, consultants and volunteers) are expected to ensure that the guideline is observed.

This guideline is intended to relate only to pharmaceuticals, other therapeutic products, and medication related devices. It does not cover activities relating to scientific research or representatives of companies seeking to promote other products within Queensland public hospitals.

3 Introduction

Queensland Health supports the objectives of the National Medicines Policy and recognises the need to maintain a responsible and viable medicines industry. This guide seeks to provide transparency for acceptable standards of interaction and behaviour between industry representatives and Queensland Health staff.

Failure to comply with this guide may result in restriction of access of individuals to Queensland Health sites.

Breaches of the guide should be resolved at the local level, by direct contact between the representative and/or company with nominated HHS staff. Breaches of a significant nature should also be notified to Strategic Procurement.

4 Legislation/standards

- Public Sector Ethics Act 1994 and related Public Sector Ethics Regulation 2010 http://www.legislation.qld.gov.au/Acts_SLs/Acts_SL_P.htm
- Code of Conduct for the Queensland Public Service 2011 https://www.forgov.qld.gov.au/code-conduct-queensland-public-service

- Medicines Australia code of conduct. https://medicinesaustralia.com.au/wp-content/uploads/sites/52/2020/01/20200108-PUB-Edition-19-FINAL.pdf
- Council of Australian Therapeutic Advisory Group's - Managing Medicines Access Programs Guiding principles for the governance of Medicines Access Programs in Australian hospitals.

5 Attendance at Queensland Health sites

- Representatives must display appropriate identification, including their name and company, at all times whilst on site.
- On attendance at a site, representatives must register at the pharmacy department (unless another department has been locally delegated). The register will record the time, purpose and location of appointments. Representatives must not undertake business other than that stated in the register.
- All hospital staff including, but not limited to, heads of department, medical staff, registrars, nursing staff, directors of pharmacy and pharmacy staff can only be seen by appointment.
- Unsolicited email, texting, phoning or paging must not be used as a means of making contact or organising appointments with staff.
- Patient care areas are not to be used for interviews. This includes, but is not limited to, patient accommodation in the wards and intensive and coronary care units; operating theatres and recovery; day therapy units such as renal dialysis, chemotherapy and radiology. Non-patient care areas such as ward offices, tutorial rooms may be made available for that purpose.

6 Promotion and promotional materials

- Promotional materials must be educational in nature and useful to healthcare providers for the care and treatment of their patients.
- Marketing materials must not include promotion for non-TGA approved indications.
- When providing information on medicines or indications not included in the QH List of Approved medicines (LAM), representatives must clearly indicate the non-LAM status of the product.
- Promotional material must be accompanied by published evidence from peer-reviewed journals.

6.1 Medication displays/education sessions and other sponsored meetings

- Medication displays and exhibits are to display only materials of an educational nature.
- Education sessions for resident medical staff should be organised with nominated senior staff member of that department and/or institution.
- In-service education sessions for nursing staff and pharmacy staff must be approved by the respective educational co-ordinators in each department.
- Sponsorship of educational and other unit meetings must be declared and in accordance with Medicines Australia code of conduct.
- Copies of published evidence from peer-reviewed journals, as well as approved product information (PIs) and consumer medicine information (CMIs), must be made available to staff at such sessions.
- Medication displays and education sessions are not limited only to medications available on the Queensland Health LAM; however, discussions should indicate the status of the medication and its restrictions.
- Educational sessions must include an opportunity for open discussion where staff members may express independent views relating to the topic.

7 New medications and pharmaceutical products

- New medications may not be used in a Queensland Health public hospital without prior approval from the local Medicines Advisory Committee (MAC) or, in the absence of a MAC, the locally appointed gatekeeper (e.g. Director of pharmacy, Medication Safety Committee)
- Applications for new medications to be included on the Queensland Health LAM, or for restrictions to be amended, are considered by the Queensland Health Medicines Advisory Committee (QHMAC) on a monthly basis. Applications are only accepted from a Queensland Health professional staff member.
- Medicines Access Programs (MAPs) should be conducted according to the relevant section of the Medicines Australia Code of Conduct and Queensland Health's Formulary notes for the List of Approved Medicines - "Policy guidelines for familiarisation medicines", and the Council of Australian Therapeutic Advisory Group's Managing Medicines Access Programs - Guiding principles for the governance of Medicines Access Programs in Australian hospitals.
- Promotion of MAPs must not occur until approval is given by the local MAC (or equivalent). Distribution of all medicines, including MAP medications, must be managed through the pharmacy department.

7.1 Management of samples

- No samples of any kind are to be left in clinical areas, at educational meetings, or given to individual members of staff. All samples, including supplies for MAPs must be given to the director of pharmacy (or delegate). The director of pharmacy may decline to accept samples if s/he believes that the product or program has not been approved within the Hospital and Health Service.
- Provision of samples does not remove the requirement for proper approval processes for non-LAM medicines, nor does it place any obligation on the hospital to maintain supply once samples have been exhausted.

8 Supply of medications and pharmaceuticals to Queensland Public Hospitals

- All pharmaceutical and dental products must be purchased through Central Pharmacy, except with prior approval from the Chief Executive of the Hospital and Health Service, or where specific exemptions have been made; e.g. bulk infusion and irrigation solutions, patient-specific parenteral nutrition or chemotherapy.
- Supply of free or bonus stock as part of a purchasing arrangement is not permitted at an individual hospital level. All such arrangements and offers must be part of the contracted supply with Central Pharmacy.
- Compassionate use stock must first have been approved by the director of pharmacy and be delivered and distributed through the hospital pharmacy.

9 Approving officer

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10 Version Control

Version	Amendments	Author(s)	Approved
2.0	Revision	Andrew Jagels	June 2013
2.1	Transfer to Policy Unit template	Andrew Jagels	November 2013
3.0	Regular review. Update of terminology. Update of Consequence of non-compliance with this guideline paragraph regarding reporting against SOA performance. Deletion of paragraph numbering & transfer to QH template	Andrew Jagels	February 2016
4.0	Removal of reference to register of professional conduct issues. References to 'drugs' changed to 'medications' Updating of template and hyperlinks	Josie Quin/Andrew Jagels	December 2020