

**Policy Document Control Page**

**Title**

**Title: Conduct of and Liaison with Pharmaceutical Company Employees Policy**

**Version: Version 7**

**Reference Number: CO30**

**Supersedes: Version 6**

**Description of Amendment(s):**

- 13. Updated ABPI reference
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**Originator**

**Originated By: Lesley Smith**

**Designation: Chief Pharmacist**

**Equality Analysis Assessment (EAA) Process**

**Equality Relevance Assessment Undertaken by: Lesley Smith/ Robert Hallworth**

**ERA undertaken on: 9 September 2016**

**ERA approved by EAA Work group on: 7 October 2016**

**Where policy deemed relevant to equality:-**

**EAA undertaken by:**

**EAA undertaken on:**

**EAA approved by EAA work group on:**

**Approval and Ratification**

**Referred for approval by: Lesley Smith**

**Date of Referral: 2<sup>nd</sup> September 2016**

**Approved by: Drugs and Therapeutics Committee**

**Approval Date: 2<sup>nd</sup> September 2016**

**Date Ratified by Executive Directors: 17<sup>th</sup> October 2016**

**Executive Director Lead: Medical Director**

**Circulation**

**Issue Date: 18<sup>th</sup> October 2016**

**Circulated by: Performance and Information**

**Issued to: An e-copy of this policy is sent to all wards and departments**

**Policy to be uploaded to the Trust's External Website? YES**

**Review**

**Review Date: 2<sup>nd</sup> September 2019**

**Responsibility of: Lesley Smith**

**Designation: Chief Pharmacist**

**This policy is to be disseminated to all relevant staff.**

**This policy must be posted on the Intranet.**

**Date Posted: 18<sup>th</sup> October 2016**

## **1 INTRODUCTION**

- 1.1 All staff must act in accordance with the Trust's standards of business conduct policy
- 1.2 It is the responsibility of all staff to ensure that they do not risk or appear to risk conflict between their private interests and NHS duties. Relationships with drug companies are governed by the standards of business conduct. Gifts, hospitality or entertainment other than articles of low intrinsic value or modest hospitality must be declined and those accepted may need to be formally registered.
- 1.3 In accordance with the Trust document "Reservation of Powers to the Board and Delegation of Powers", items of low intrinsic value are classed as items which individually and collectively amount to £25.00 **or less**. Office refreshments, working lunches and casual gifts of low intrinsic value do not need to be registered.
- 1.4 This policy sets out the principles of business conduct for staff of Pennine Care NHS Foundation Trust in relation to the Pharmaceutical Industry, and considers the management of:
  - 1.4.1 Direct contact between Pharmaceutical Company Employees (PCEs) and Trust employees
  - 1.4.2 Educational support
  - 1.4.3 Gifts, hospitality and entertainment
- 1.5 The policy sets out the procedure for the registering of interests and the approval and acceptance of educational support in relation to medicines for both mental health and community health services.
- 1.6 For the purpose of this policy the term medicine refers to a pharmaceutical drug however the same principles could be applied to borderline substances (for example, nutritional supplements) or appliances (for example, dressings).
- 1.7 The time spent on meetings between PCEs and employees of Pennine Care NHS Foundation Trust during the latter's working day should be proportionate and be an appropriate use of the Trust's time.

## **2 CONDUCT OF PHARMACEUTICAL COMPANY EMPLOYEES (PCEs)**

- 2.1 All PCEs must abide by this policy and also follow the Association of British Pharmaceutical Industry (ABPI) Code of Practice for the Pharmaceutical Industry when visiting any of the sites of Pennine Care NHS Foundation Trust.
- 2.2 Prior to the launch of a new medicine, PCEs will discuss that medicine with the Chief Pharmacist before making appointments with other staff of Pennine Care NHS Foundation Trust.
- 2.3 The PCE should ideally wear an identity badge when keeping appointments with staff of Pennine Care NHS Foundation Trust. This should be provided by the company

- 2.4 PCEs must not visit sites of the Trust without prior appointment. Visits should be held in administrative areas such as offices and pharmacy sites wherever possible. PCEs must not visit wards or other clinical areas except for the purpose of providing training or demonstrating the use of a medicine or other pre-arranged clinical activities and then only when special arrangements have been made by local managers to support that visit. For community health services this may include the patient's home.

### **3 APPOINTMENTS WITH MEDICAL STAFF**

- 3.1 Consultants and senior medical staff should not see PCEs except by appointment. Where appropriate, a copy of the Summary of Product Characteristics (SPC) for the product, background information e.g. comparative costs and published comparative data/clinical trial papers should be forwarded prior to the meeting.
- 3.2 The PCE must ask the Consultant's permission to visit junior members of medical staff within Trust premises.

### **4 APPOINTMENTS WITH NURSING STAFF/ NON MEDICAL PRESCRIBERS/ OTHER CLINICIANS**

- 4.1 PCEs must not discuss medicines with Registered Nurses, Non Medical Prescribers (NMP) or other clinicians (for example, Allied Health Professionals) except by prior arrangement. Where appropriate a copy of the SPC for the product, background information, for example, comparative costs and published comparative data/clinical trial papers should be forwarded prior to the meeting.
- 4.2 If a PCE wishes to canvass the opinion of a Registered Nurse, NMP or other clinician (for example, Allied Health Professional) they must contact the manager of the unit or service concerned who will advise on the appropriate Registered Nurse or NMP to be contacted.

### **5 APPOINTMENTS WITH PHARMACISTS**

- 5.1 PCEs wishing to discuss medicines with clinical pharmacists employed by the Trust must do so following prior appointment. Where appropriate a copy of the SPC for the product, background information, for example, comparative costs and published comparative data/clinical trial papers should be forwarded prior to the meeting.
- 5.2 PCEs wishing to discuss products with clinical pharmacists providing services under a Service Level Agreement (SLA) must follow the policy of the acute trust by which the pharmacist is employed.
- 5.3 PCEs wishing to make an appointment with the Chief Pharmacist must contact the personal assistant to the Chief Pharmacist giving details of the information or product they wish to discuss. Full details outlining the reason for the appointment must be given. Where appropriate a copy of the SPC for the product, background information e.g. comparative costs and published comparative data/clinical trial papers should be forwarded prior to the meeting. Following receipt of the information the Chief

Pharmacist will contact the PCE if it is wished to discuss the product further.

## **6 EDUCATIONAL SUPPORT**

- 6.1 Acceptance by staff of commercial sponsorship to provide for the cost of residential accommodation and/ or travel costs at relevant conferences and courses may be acceptable, but only where the employee seeks permission in advance and the employer is satisfied that acceptance will not compromise prescribing and thus purchasing decisions in any way. Such sponsorship must be declared.
- 6.2 Modest hospitality to support educational events such as the provision of a light meal is acceptable provided it is similar to the scale of hospitality that the NHS as an employer would be likely to offer. The organiser of such an event must make an appropriate declaration.
- 6.3 It is not expected that staff attending an educational event and being in receipt of modest hospitality as outlined in 6.2 would need to make a declaration (See 1.3).
- 6.4 The educational presentation should be appropriately balanced and not be seen to favour the sponsoring pharmaceutical company in an improper way.
- 6.5 Requests by a PCE to present non-marketing educational material to medical staff, nursing staff, pharmacists or other clinicians/ Allied Health Professionals should be directed via the appropriate medical manager, nurse manager, chief pharmacist or other clinician manager respectively. Educational support may only take place if the appropriate manager has previously agreed to this on behalf of the Trust and their agreement registered (see Section 8). Any such presentation should be reviewed in advance to ensure an absence of marketing content.
- 6.6 The Learning & Development department and Chief Pharmacist must be made aware of all educational support agreed to and being delivered.

## **7 SAMPLES**

Samples in this case means medicines used to treat or diagnose disease which are likely to be used on patients either in hospital or in the community.

- 7.1 Employees of Pennine Care NHS Foundation Trust will not accept samples of medicines to treat NHS patients unless the supply of such samples has been previously agreed on behalf of the Trust and their acceptance registered by a named clinical lead (see Section 8).
- 7.2 Samples must not be left on wards, departments or services unless the supply of such samples has been previously agreed on behalf of the Trust and their acceptance registered by the Service Director and named clinical lead (see Section 8).
- 7.3 Medical staff are recommended not to accept samples for their own personal use. Medical staff should obtain medication from their own General Practitioner or

Specialist.

## **8 REGISTERING OF INTEREST**

- 8.1 Trust registers will be kept to record the relationships of Trust staff with pharmaceutical companies and will be held and maintained by the corporate governance team.

Registration of the following is mandatory:

- Acceptance of educational support
- Involvement in any paid or voluntary work to support the pharmaceutical company's activities, e.g, lecturing on a drug, involvement in focus groups.
- Provision of support to Trust educational activities, e.g, teaching, case conferences.
- Sponsorship or support of any clinical or professional activities of Trust, e.g, audit support, sponsorship of posts.
- Any relationship which risks or appears to risk conflict between private interest and NHS duties.

These must be registered whether they occur within the employee's working day or otherwise.

- 8.2 Members of the Drugs & Therapeutics Committee can be expected to have a major influence on prescribing patterns and purchasing arrangements. A central register will therefore be held by the Corporate Governance Department and reviewed by the Drugs and Therapeutics Committee and submitted to the Audit Committee. Members of the Drugs and Therapeutics Committee will declare interests at the start of meetings (Appendix 1). The relevant paperwork will be submitted to the Corporate Governance Department for inclusion in the register.
- 8.3 Executive Directors will declare relevant interests on the directors register of interest.
- 8.4 A register of interests and, for example, acceptance of samples, will be held by the Corporate Governance Department for all Boroughs and Divisions of the Trust (Appendix 2). Medical Managers will approve the activities for medical staff. Service Directors will approve the activities for all other staff before submitting the relevant paperwork to the Corporate Governance Department for inclusion in the central register.
- 8.5 Provision of support for the delivery of local educational events will be approved by the Medical Manager for medical staff and by Service Directors for all other staff and this be registered as in 8.4 above.
- 8.6 Support to the clinical activities of the Trust such as sponsorship of posts must be approved by the responsible Executive Director and registered centrally as in 8.3.
- 8.7 Where doubt exists about appropriate registration, the Chief Pharmacist and /or Medical Director should be contacted.

## 9 RELATED POLICIES

This policy should be read in conjunction with:

- Policy on the Receipt of Hospitality, Gifts, Payment and Commercial Sponsorship (CO43)
- Medicines Policy (CL15)
- Non-Medical Prescribing Policy (CL43)

## 10 IMPLEMENTATION AND TRAINING

The Trust will ensure that the policy for the conduct of and liaison with Pharmaceutical Company Employees has been issued and implemented as follows:

### 10.1 Issue and Implementation

A variety of dissemination methods are in place to make sure that all staff are aware of, have access to and comply with the policy for the conduct of and liaison with Pharmaceutical Company Employees

Lists of all new policies are published in the Trust's Corporate Brief including a brief description and its intended audience.

All policies are held on the Trust's intranet, to which all staff have access. Staff should always consult the intranet for the latest version.

Where a hard copy is kept on a ward/clinical area, it is the responsibility of the Ward Manager/Team Leader to ensure that the current version is on file.

Following approval, the Chief Pharmacist is responsible for cascading details of the latest version of all policies to all healthcare professionals.

Ward and team managers are responsible for ensuring staff in their area of managerial control are fully aware of the content of policy for the conduct of and liaison with Pharmaceutical Company Employees and to act accordingly.

All healthcare staff are responsible for ensuring they understand the content of the policy for the conduct of and liaison with Pharmaceutical Company Employees and to act accordingly.

### 10.2 Training

Training in medicines management and in relation to the policy for the conduct of and liaison with Pharmaceutical Company Employees, forms part of the Trust's mandatory and essential training programme for identified staff groups.

The format of the mandatory medicines management training is described as per the Trust Training Needs Analysis (TNA).

Checking and monitoring of non-completion of mandatory medicines management

training is undertaken by the Organisational Development (OD) Team.

Where pharmacy staff provide additional training on medicines on an ad hoc basis or at the request of managers within the Trust, attendance records will be completed and forwarded to the and OD team for inclusion on the Training database.

Pharmacy staff input on an ongoing basis to the induction programme of junior medical staff.

Further training will be made available when necessary to support initiatives of the National Reporting and Learning System (NRLS) and /or NICE.

Medicines management training needs in relation to the policy on the prescribing, supply and use of unlicensed medicines should be identified through the Individual Performance and Development Review (IPDR) process and feed into the Trust's TNA.

Training required for individual members of staff is identified through the Trust's IPDR process and arranged as appropriate. Any non- attendance is reported via e-mail from the OD team to the individual's authorising manager for action and future attendance to be arranged.

## **11 AUDIT AND MONITORING OF COMPLIANCE**

### **11.1 Audit**

Audit in relation to the policy for the conduct of and liaison with Pharmaceutical Company Employees will be carried out as part of the Trust's clinical audit programme and in accordance with the annual audit calendar.

### **11.2 Monitoring**

Compliance with this policy will be monitored using an analysis of incidents and complaints, by the Managing Prescribing Risk group on a quarterly basis, where there has been a failure to follow procedure.

Quarterly medication error/incident reports (Safeguard) prepared and reviewed by Managing Prescribing Risk Sub Group. Analysis allows identification of trends and themes.

Action plans to manage improvement in compliance will be developed by the Managing Prescribing Risk group on a quarterly basis where necessary.

Key findings of both audit and monitoring of compliance will be reported to the Drugs and Therapeutics Committee.

Training required for individual members of staff is identified through the Trust's IPDR process and arranged as appropriate. Any non-attendance is reported to the individual's Service Manager.

The Workforce and OD Team will provide a monthly report to Service Managers detailing staff attendance at required training. In addition the Workforce and OD Team will provide a six monthly report of staff attendance for all required training to the Educational Governance Group (EGG) for monitoring. The EGG will be responsible for the development of any actions required in relation to training which will be implemented and monitored by Divisional and Borough Integrated Governance Groups.

## **12 REVIEW**

This policy will be reviewed every 3 years or sooner should the need arise

## **13 REFERENCES**

Code of Practice for the Pharmaceutical Industry. January 2016. ABPI. Prescription Medicines Code of Practice Authority.

HSG(93)5. Standards of Business Conduct for NHS Staff.

**PENNINE CARE NHS FOUNDATION TRUST  
REGISTER OF INTERESTS IN RELATION TO PHARMACEUTICAL COMPANIES FOR  
MEMBERS OF THE DRUGS & THERAPEUTICS COMMITTEE**

Under the Policy for the Conduct of and Liaison with Pharmaceutical Company Employees adopted by the Pennine Care NHS Foundation Trust, members of the Drugs & Therapeutics Committee are invited to register all interests in relation to pharmaceutical companies as outlined in the policy. The completed form will be forwarded to the Chief Executive's office and filed on an official register which will be scrutinised by the Trust auditor.

**Name:**

**(please print)** .....

**Place of Work:** .....

I disclose that on .....(date) I \*accepted/refused the following  
\*gift/ hospitality (\*delete as appropriate)

**Details** .....

.....

**Estimated Value:** .....

**From:** .....

(Name of person or organisation offering gift or hospitality)

**Any other organisation involved:** .....

**Signed:** .....

**Date:** .....

**Signed by Chief Executive:** .....

**(Or deputy)**

**Date:** .....

**PENNINE CARE NHS FOUNDATION TRUST  
REGISTER OF INTERESTS IN RELATION TO PHARMACEUTICAL COMPANIES FOR  
STAFF OTHER THAN MEMBERS OF THE DRUGS & THERAPEUTICS COMMITTEE**

Under the Policy for the Conduct of and Liaison with Pharmaceutical Company Employees adopted by the Pennine Care NHS Foundation Trust, members of the Drugs & Therapeutics Committee are invited to register all interests in relation to pharmaceutical companies as outlined in the policy. The completed form will be forwarded to the Chief Executive’s office and filed on an official register which will be scrutinised by the Trust auditor.

**Name: (please print)** .....

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\*gift/ hospitality (\*delete as appropriate)

**Details** .....

**Estimated Value:** .....

**From:** .....  
(Name of person or organisation offering gift or hospitality)

**Any other organisation involved:** .....

**Signed:** .....

**Date:** .....

**Signed by Manager:** .....

**Name and Job Title:** .....

**Date:** .....

**Signed by Chief Executive:** .....  
(Or deputy)

**Date** .....

