

3 March 2021

PHARMAC

By email: consult@pharmac.govt.nz

Changes to advisory committees

Dear Colleague

The New Zealand Medical Association (NZMA) wishes to provide feedback on the above consultation.

We note that PHARMAC is proposing changes to how it works with, and receives advice from, its advisory committees. Currently, the role of the Consumer Advisory Committee (CAC) is limited to providing advice on how to access and consider a range of consumer views. We note that PHARMAC is planning to broaden the role of the CAC to provide advice and to work with the agency to enable the views and perspectives of consumers to be integrated into PHARMAC's work. This includes providing input into medicine funding proposals, policy changes and strategic work. With respect to the clinical advisory committees, we note that PHARMAC is proposing the following: i) renaming and restructuring the subcommittees of PTAC; ii) increasing consumer input into clinical advisory committees by enabling consumers to be a member of PTAC and allowing consumer perspectives to be part of any medicine funding application considered by PTAC; iii) actively promoting diversity and equity expertise when recruiting new committee members and requiring committee members to bring an understanding of, and commitment to, health equity.

The NZMA is supportive of the direction of the above proposed changes. To help inform this work, we suggest that PHARMAC consider drawing on the experience of other parts of the health sector such as mental health that have a long history of consumer, patient and whānau involvement. Organisations such as Te Pou¹ may be a useful resource in this regard. While the CAC has been established for some time, we ask whether the committee's name could be modified to include the term 'patient' such that it becomes known as the Consumer and Patient Advisory Committee. While broadening the role of the CAC is welcome, it is important to ensure diversity among the CAC such that it includes the views of different groups such as the elderly and disabled, for example. As well as strengthening the voice of patients and whānau, we believe it is important to ensure that other perspectives such as paediatric expertise are also included and retained across all Specialist Advisory Committees. We also look forward to learning more about PHARMAC's plans to set up a Māori advisory committee, including how this will work with the CAC.

¹ <https://www.tepou.co.nz/>

Our specific responses to the consultation questions are provided below.

Updating the role of the Consumer Advisory Committee

a. Where do you see the CAC adding the most value to PHARMAC with advice and consumer views?

We envisage the updated CAC having a critically important role in adding value across PHARMAC's work including providing input into medicine funding proposals, policy changes and strategic work.

b. How do you want to see the CAC's influence on PHARMAC's work and decisions shared with the public?

We would like to see minutes from the CAC made available to the public.

c. Do you have any comments or thoughts on the CAC's role?

We suggest that nominations to the committee could come from patient groups in addition to members being directly appointed by PHARMAC. The committee should have an advisory role that is balanced with other factors such as evidence-based medicine, costs, and competing interests, for example.

Strengthening clinical advisory committees

a. Do you think the proposed changes to the clinical advisory committees will succeed in providing consumer views, and strengthening health equity and diversity on the committees?

Yes. The proposed changes to the clinical advisory committees should enable patient and consumer views to be provided as well as strengthen health equity and diversity on the committees.

b. What would PHARMAC need to do to support a consumer representative on PTAC?

To support a consumer representative on PTAC, PHARMAC would need to call for nominations and then pay consumer representatives the same as it does for medical advisors.

c. What can we do to ensure we use consumer perspectives to support clinical advice?

It would be useful to allow patient and consumer representatives to give oral presentations to clinical advisory committees.

d. What other changes would you like to see made to how the clinical advisory committees work?

We would like to see a Māori by-line for all of PHARMAC's advisory committees.

We hope our feedback is helpful.

Yours sincerely



Dr Kate Baddock
NZMA Chair