Pharmaceutical Company Representatives – Queensland Health Standards of Interaction and Behaviour guideline

1. Purpose

This Guideline provides recommendations regarding best practice for the conduct of pharmaceutical representatives.

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

Pharmaceutical company sales and marketing representatives are only permitted access to Queensland Health sites and staff members in accordance with the provisions of this Standard.

This guideline is intended to relate only to pharmaceutical, other therapeutic products, and drug related devices. It does not cover activities relating to scientific research. It also identifies the responsibilities (and audit criteria) of individual positions in relation to these requirements.

Pharmaceutical company representatives need to comply at all times with the Medicines Australia Code of Conduct.

2. Scope

This guideline applies to all Representatives of companies seeking to promote pharmaceutical products within Queensland public hospitals. 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.

3. Related documents

Authorising Policy and Standard/s:

4. Guideline for Pharmaceutical Company Representatives – Queensland Health Standards of Interaction and Behaviour

4.1 Consequence of non-compliance with this guideline

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

Most breaches of the Guideline will be able to be resolved at the local level, by direct contact between the representative and/or company with nominated HHS staff.

Should local resolution fail, complainants should direct complaints regarding the conduct of representatives to the Director, Medication Services Queensland (MSQ). Following investigation, the Director, MSQ may recommend to the Chief Executive Officer of the Hospitals and Health Services (HHS) concerned that the representative and/or company be denied access to HHS premises for a period of time, which may be limited or indefinite. The recommendation will also be notified to the Director of Pharmacy.

For medicines purchased on Standing Offer Arrangements, Queensland Health maintains a register of professional conduct issues and issues relating to promotion and marketing activities. These will be taken into account when evaluating submissions for Standing Offer Arrangements. QH employees should complete a Health Service Purchasing and Logistics Supplier Performance Report, and fax to (07) 3006 2900. This is available at http://qheps.health.qld.gov.au/pl/soas_tenders/reports/supplier_perform.pdf

4.2 Attendance at Queensland Health sites

- Representatives must display appropriate identification indicating their names and company at all times whilst on site.

- On attendance at a site, representatives must register at the Pharmacy Department (unless another site has been locally delegated). The register will record the time, purpose and location of appointments. Representatives must not undertake business other than that stated.

- 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 and 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; operating theatres and recovery; day therapy units such as renal dialysis and chemotherapy and radiology. Non-patient care areas such as ward offices, tutorial rooms may be made available for that purpose.
4.3 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.

4.4 Drug displays/Education sessions and other sponsored meetings

- Drug 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 (data sheets) and Consumer Medicine Information must be made available to staff at such sessions.
- Drug displays and education sessions are not limited only to drugs available on the Queensland Health List of Approved Medicines however discussions should indicate the status of the drug and its restrictions.
- Educational sessions must include an opportunity for open discussion where staff members may express independent views relating to the topic.

4.5 New Drugs and Pharmaceutical products

- New drugs may not be used in a hospital without prior approval from the local Medicines Advisory Committee.
- Applications for new drugs to be included on the Queensland Health List of Approved Medicines, or for restrictions to be amended, are considered by the Queensland Health Medicines Advisory Committee on a monthly basis. Applications are only accepted from a Queensland Health professional staff member.
- Medicines Access Programs (MAP) should be conducted according to the relevant section of the Medicines Australia Code of Conduct and Queensland Health’s “Policy Guidelines on Familiarisation Drugs” (available within the LAM), and the...
Council of Australian Therapeutic Advisory Group’s Guiding Principles for Medicines Access Programs in Australian Public Hospitals (available from MSQ).

- Promotion of MAPs must not occur until approval is given by the local Medicines Advisory Committee. Distribution of all medicines, including MAP drugs, must be managed through the Pharmacy Department.

4.6 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 Medicines Access Programs must be supplied to the Director of Pharmacy (or delegate). The Director of Pharmacy may decline to accept supplies if s/he believes that the product or program has not been approved within the Hospital and Health Service.

- Supply of samples does not remove the requirement for proper approval processes for non-LAM medicines

4.7 Supply of Drugs and Pharmaceuticals to Queensland Public Hospitals

- All pharmaceuticals and dental products must be purchased through Central Pharmacy, except with prior approval from the Chief Executive Officer 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.

5. Review

This Guideline is due for review on: 31 May 2016

Date of Last Review: June 2013

Supersedes: 2006 Policy of the same title

6. Business Area Contact

Medication Services Queensland
8. Approval and Implementation

Policy Custodian:
Director, Medication Services Queensland

Responsible Executive Team Member:
Chief Executive, Health Services Support Agency

Approving Officer:
Director, Medication Services Queensland

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