

Minutes of the PHARMAC Consumer Advisory Committee (CAC) Meeting Friday 08 July 2022

The meeting was held on Level 9, 40 Mercer St, Wellington and via zoom from 9.00 am.

Present:

Lisa Lawrence (Chair)
Hazel Heal
Janfrie Wakim
Leslie Robinson
Mary Schnackenberg
Nele Kalolo
Robyn Manuel
Sione Vaka
Vivien Verheijen

Apologies:

Leslie Robinson (left zoom at 1pm)

PHARMAC staff in attendance:

Mako Osborne (Graduate Implementation Advisor)
Peter Alsop (Director Engagement and Implementation)
Trish Elise (EA to Director Engagement and Implementation)

For relevant items:

Allanah Andrews (Manager, Policy and Government Services)
Lisa Williams (Director of Operations)
Logan Heyes (Senior Therapeutic Group Manager).
Robyn Harris (Senior Advisor Access Equity)
Sandy Bhawan (Manager, Access Equity)
Sarah Fitt (Chief Executive)
Steve Maharey (Pharmac Board Chair)

1. Karakia and welcome

The meeting was opened with a karakia.

2. CAC Chair update

Members-only time was held.

3. Action items / notes from previous meeting / interest register

Action items

The action items were reviewed.

Notes from previous meeting

Notes for the April and June meeting were approved as true records of discussion.

Interest register

Noted. New interests were declared.

ACTIONS:

- (1) *Executive Assistant to Director Engagement and Implementation to email CAC members with a contact number.*
- (2) *Pharmac staff to check if PTAC have similar problems to CAC with the invoice process.*

4. Pharmac Verbal Update

Director, Engagement and Implementation gave a verbal update.

- The items taken to Board included a presentation by Colmar Brunton on public trust and understanding, consumer involvement in the clinical space, boundary products, and the transfer of Covid vaccines to Pharmac.
- The new health reforms are underway, which aim for the health system to be more connected and integrated.
- Pharmac's focus on vaccine treatments and access criteria.
- Lung cancer RFP has been released. Any support from the CAC will be welcomed. Later agenda item.
- Accuretic supply was disrupted, with all patients needing to transition to an alternative medicine.
- Board strategy day is set for September. Pharmac is looking at how best to get input from committees.
- Pharmac is continuing to focus on CAC fees and the proposal put forward to the MoH for an increase. A possible letter from the Chair was discussed to outline the impacts of the current fee level.
- Te Tiriti policy is progressing for adoption in the coming weeks. The final changes are currently going through the Māori Advisory Rōpū.
- The equity policy is making progress and will need further discussion with the CAC.
- A discussion paper for paediatric oncology is being targeted to be available early August. Discussion with CAC will be important for this.

5. Pharmac's approach to products that aren't medicines or medical devices

Director of Operations gave an overview of Pharmac's approach to assessing and managing the funding of products that aren't medicines or medical devices; but are 'related products or related things.'

Members suggested to push forward with improving public knowledge around this topic but noted it didn't need to be a priority.

Members discussed wastage risks and patients' not following their medication as a potential issue and the additional support required for this. The importance of ensuring people have access and can rely on other parts of the health system for support was highlighted.

Members also took time to discuss the Flu vaccine and Accuretic supply issue with the Director of Operations.

Members discussed access to GPs as a potential barrier to uptake as it has become increasingly harder to make an appointment with a GP and often there are long wait times.

Members noted that although former refugees are listed as a priority population for Pharmac, there isn't any evidence that demonstrates this. Members suggested Pharmac work with former refugee NGO's to establish relationships to be able to leverage their channels and connections.

Members noted that there is opportunity with the new health reforms to influence other players in the sector and communicate more efficiently to make better progress.

Pharmac staff discussed the inability to communicate directly to patients affected by the Accuretic supply issue and noted that the ideal communication would be direct and personal for an issue of this size. Staff noted that the new health reforms may be able to support doing this in future, so that those affected know first.

Members noted that the consumer voice will be crucial in sharing information about the Accuretic supply issue.

NOTES:

That the committee:

- (1) Recommended developing a brief statement to improve public knowledge on Pharmac's funding approach for products that aren't medicines or medical devices.*
- (2) Recommended Pharmac work to establish relationships with former refugee NGO's.*

ACTIONS:

- (1) Pharmac staff to update CAC on changes in uptake of the Flu vaccine in 2022 as a result of the widened access, once the flu season is over (likely near the end of the year).*

6. Review response

Director, Engagement and Implementation asked members for further and more specific ideas and suggestions on Pharmac's response to the Pharmac Review, following the CAC's last meeting where initial thoughts on the review response was discussed.

Pharmac staff highlighted that this was an interim response and Pharmac will be working toward a full response, including implementation plans, for the end of October.

Pharmac staff noted that the CAC Chair, and possibly the whole committee, will have the opportunity to see the draft interim response and channel any further thoughts from the members.

Concerns were raised around the sensitivity of using Māori kupu and other aspects of Te Ao Māori, and whether these reflect real meaning and intent (and not just labels and words). Members noted that it is important to run these things by Pharmac's Chief Advisor Māori and Te Whaioranga team.

Pharmac staff noted the difficulty in finding the right balance between acknowledging the things Pharmac has achieved and risking sounding defensive, while also importantly acknowledging the significant further work to do.

Members acknowledged that the current language and tone of the response was coming from a place of humility and made some further suggestions. Focussing on the priority populations and getting the general sentiment of equity across in the response was also discussed.

Members suggested developing partnerships with key population agencies, as the review and new health reforms gives Pharmac an opportunity to connect with external capabilities. Inviting this kind of feedback would demonstrate an activated and collaborative approach. Engagement with MPP, Ethnic Affairs and Whaikaha were also noted as important touch points for the fuller response.

Members noted the core work of Pharmac as adequate and appropriate and acknowledged that the organisation does not currently have efficient resources to carry out all the necessary work.

Members raised the possibility of all Māori staff at Pharmac, including on committees, to wānanga in future; the Director E&I noted that some thought had been put into this to strengthen connections across committees and staff focussed on kaupapa Māori.

NOTES:

That the committee:

- (1) Suggested that the language of the review response be more action orientated, balanced and have a clear tone.*
- (2) Suggested exploring the possibility of all Māori staff at Pharmac, including on committees, to wānanga in future.*
- (3) Recommended that Pharmac implement a Māori recruitment policy.*
- (4) Suggested members have the opportunity to present to Pharmac's specialist groups on their own topic.*

7. Discussion with Board Chair and CE

The Board Chair and CE introduced themselves to the committee and briefly discussed the Pharmac review response and Pharmac's position on it.

The Chair and CE noted how pleased they were with the progress, support and advice from CAC, as an important part of Pharmac's overall arrangements.

Members acknowledged the work Pharmac has been doing and noted their support for the organisation and continued support for Pharmac to do better.

The Board Chair noted that a formal paper from the CAC at the end of each year discussing what members felt they influenced would be useful for and welcomed by the Board.

8. Equity Considerations

Director, Engagement and Implementation provided an overview on equity considerations and their high importance to Pharmac's work. This included work under 'equitable use and access' strategic priority, wider work across Pharmac that is directly relevant to enhancing

equity, and how Pharmac can make sense of equity considerations across all work for the future.

Members discussed health literacy as a barrier and observed that the language Pharmac uses can be complicated to non-health professionals. Members noted the medicine access equity monitoring framework and gout response as examples and suggested the language be more transparent, people friendly and action orientated.

Members also recommended that Pacific authorship be considered for future data insight reports for Pacific peoples. CAC members noted that a week prior to release to feedback on the reports for feedback was not adequate and have requested that a longer time be given for future reports.

Members also observed the application process on the Pharmac website as a barrier due to its complexity, noting that it would be difficult for non-health professionals to navigate. Members suggested having navigators to help consumers traverse through the process but acknowledged more resources would be required for this.

Members noted that there was opportunity for Pharmac to develop key partnerships to further investigate vulnerable populations as part of its ongoing progress in equity.

Members noted and congratulated Pharmac on the commencement of the STIR Collaborative Posse (Stop Institutional Racism). Members were keen to be linked into the resources of Heather Came's STIR website.

Members asked about Pharmac's ongoing engagement with the Fono and the Counties Manukau Board following last year's engagement event with the Pharmac Board. Pharmac staff advised CAC that the pandemic meant we have not been able to progress the level of engagement planned. However, relationships have been held and maintained to ensure we can recommence engagement.

Pharmac staff noted there is a self-assessment tool for PTAC capability that is currently being developed, with plans to share with sub-committees at a later date. There is potential to share this with other committees including CAC.

NOTES:

That the committee:

- (1) Recommended that Pharmac's Factors of Consideration be reviewed, and a new framework explored that looks more overtly at equitable health outcomes.*
- (2) Discussed attaching a similar lens or tool to an ethnicity criterion over medicines that are already funded, where appropriate and reasonable to do so.*
- (3) Recommended that Pharmac develop an accountability framework (in relation to equity).*
- (4) Discussed the inequity surrounding medical cannabis and suggested that it be a focus for Pharmac.*

ACTIONS:

- (1) Pharmac staff to share the resources of Heather Came's STIR website with members.*

9. Request for proposals for advanced non small cell lung cancer

Senior Therapeutic Group Manager provided CAC with an overview of the request for proposals for late-stage non-small cell lung cancer (NSCLC), the key identified barriers to

successful implementation and asked members for their input on the engagement and implementation approach.

Members considered it would be useful to time implementation activities closer to the time when consulting on the outcome of the request for proposal.

Members suggested leveraging off the Diabetes 'you are a priority' campaign, noting that it is an established and successful campaign that could effectively lend its format to other medicines. Members however acknowledged the difference between primary and hospital care and noted that this would need to be considered.

Members discussed developing partnerships with key agencies including the Te Aka Whai Ora - Māori Health Authority and engaging with end users, iwi radio stations, Pacific and Māori providers, iwi runanga and Māori student associations.

Members raised some concerns including institutionalised racism, fear of biopsy and CT scans, and access to CT scans as barriers to earlier diagnosis and access to care.

Members considered that there would be benefit in providing treatment closer to home if possible and specifically that it would be beneficial to have infusion centres in rural areas and areas that don't have close by hospital services, to support equitable access to treatment.

Pharmac staff noted that there is an upcoming open forum and asked members if there was anything that they should touch on specifically. Members suggested making the public aware that Pharmac has consulted with CAC and discussed significant barriers. Members also suggested Pharmac be clear on its stance that it invites system change and a sector response to provide equitable access to treatment.

Members discussed the importance of how the request for proposals and potential investment in lung cancer treatments could be promoted as and contribute to wider system benefits in respect to access and equity.

ACTIONS:

(1) Members to email any further thoughts after reflection.

10. Karakia and meeting close

The meeting was closed with a karakia.