

MINUTES OF THE PHARMACEUTICAL MANAGEMENT AGENCY (PHARMAC)

BOARD MEETING JULY 2021

The meeting was held at Counties Manukau District Health Board, Middlemore Hospital, Auckland starting at 9.15am with the following attendees:

Board members

Steve Maharey	Chair
Jan White	Deputy Chair
Ross Lawrenson	Board Member
Nicole Anderson	Board Member
Claudia Wyss	Board Member
Elizabeth Zhu	Institute of Directors, Future Director
Peter Bramley	Observer, DHB Representative
Mark Weatherall	Observer, PTAC Chair
Lisa Lawrence	Observer, CAC Chair

PHARMAC staff in attendance

Sarah Fitt	Chief Executive
Lisa Williams	Director of Operations
Alison Hill	Director of Engagement & Implementation
Michael Johnson	Director of Strategic Initiatives
Mark Woodard	Director of Corporate Services/CFO
Trevor Simpson	Chief Advisor Māori
Lizzy Cohen	Board Secretary

The Counties Manukau DHB (CMDHB) hosted the Pharmac Board for the July Board Health and Safety Committee and Board meetings.

The CMDHB Board members joined the Pharmac Board, Senior Leadership Team and Access Equity Team for a discussion focused on equity. The Pharmac Board Chair provided a brief overview of Pharmac's strategic direction, and Pharmac's Manager Access Equity presented on some current issues in medicines access equity and Pharmac's strategic approach and focus on priority conditions and populations. The Board members discussed strategic alignment and opportunities in the current environment to promote equitable health outcomes. They agreed that to work towards achieving equity we need to join up and work together. CMDHB Board noted that they have been working on setting up community hubs and co-designing a model of care for the community, with the community, acknowledging that the current model of care does not work for everyone. Pharmac staff will continue to partner with CMDHB staff to look at the opportunities to promote equitable health outcomes and remove barriers in access to medicines. Specifically, the CMDHB chair mentioned the Te Ranga Ora – The Vibration of Wellness programme that the CMDHB were in the process of refreshing its focus as an opportunity for CMDHB and Pharmac to partner together

1. Directors' Only Discussion

The Pharmac Board members noted that the:

Board plan to discuss the interim report from the Pharmac Review Committee, expected in August, at the Board strategy meeting in September.

Board Secretary plans to circulate the 2022 Board meeting dates and is preparing the 2022 Annual Board Agenda, to be discussed at the September Board meeting.

Pharmac Chief Executive's KPIs for 2021/22 have been finalised and will be circulated to Board members.

Ministry of Health have advised that it is progressing Board member appointments with the Minister of Health.

1.1 Glossary of Terms

1.2 Board Actions

noted the Board Actions.

1.3 Board Annual Agenda 2021

The Board noted the Board Annual Agenda 2021.

1.4 Proposed outline of 2021 Board Strategy Workshop

This paper provided a proposed outline for the Board strategy workshop on 23 September 2021 for Board discussion and agreement. The Board:

agreed the proposed outline for the 2021 Board strategy workshop, with the addition of time to reflect on progress against strategic priorities, future CPB funding pathway and the pharmaceutical pipeline scan

noted that Pharmac staff will prepare any necessary materials in support of preparation for the workshop.

2. Apologies

NA.

3. Record of Previous Board and Committee Meetings

3.1 Minutes of June 2021 Board Meeting

resolved to adopt the minutes of the June 2021 meeting as being a true and correct record.

Claudia Wyss and Jan White

(carried)

3.2 Audit and Risk Committee Recommendations

approved the revised Audit and Risk Committee's (the Committee) Terms of Reference, reviewed by the Committee at the June 2021 Committee meeting, subject to a change to the wording in the Committee Objective – removing reference to the Committee providing 'independent' assurance and advice

noted that the Committee plan to discuss adding an external advisor to the Committee membership at the September Committee meeting. This will provide an

opportunity for the Committee to assess the criteria of Committee membership and identify any capability gaps which may be filled with an external member

agreed that a quorum of two Committee members is sufficient for a small Board Committee membership

noted the 2022 Audit and Risk Committee Annual Agenda (Committee work programme) which reflects the Internal Audit Work Programme, as noted by the Board at the June Board meeting

noted that the Audit and Risk Committee will conduct an annual review of cyber security and risk management questionnaire for Boards and report their findings to the Board

noted the June 2021 Audit and Risk Committee meeting minutes which will be approved by the Committee at the September 2021 Committee meeting

noted that the Committee reviewed the risk register at the June 2021 Board meeting (refer to Board agenda item 8.4 and June 2021 Committee meeting minutes).

Jan White and Ross Lawrenson

(carried)

3.3 Summary of June 2021 Consumer Advisory Committee (CAC) Meeting

This paper informs the Board of advice received from the Consumer Advisory Committee (CAC) at the 11 June 2021 face-to-face meeting. The Board:

noted the following summary of the Consumer Advisory Committee (CAC) meeting held on 11 June 2021

noted the minutes of the meeting will be published on the Pharmac website during August

noted that staff will schedule a time for the Board Chair and Deputy Board Chair to attend an upcoming CAC meeting.

4. Interests Register

noted the interests register; and

noted any decisions by the Chair to manage actual or potential conflicts of interest, as follows:

[None required]

5. Matters Arising

noted the matters arising and actions progressed.

The Board requested that staff consider moving the scheduled report on Public understanding, trust and confidence from the November Board meeting to an earlier meeting.

6. Chair's Report

6.1 Verbal Report

A verbal update was provided by the Board Chair. The Board noted:

The Board Chair and Chief Executive met with Minister Verrall, Associate Minister of Health for an introductory meeting and agreed to an annual meeting.

The request from the Review Committee to access commercially sensitive information.

The article in the New Zealand Herald on Wednesday 28 July 2021 'Pharmac: is our medicines agency still fit for purpose?'

6.2 Correspondence

noted the correspondence report

noted the letter from the Te Arawhiti Chief Executive and the Public Service Commissioner providing a copy of the Whāinga Amorangi: Transforming Leadership framework, which was shared with Public Service agencies in December 2020, as a way of setting out practical steps to assist leaders and individuals to build their Māori Crown Relations capability. The Chief Executive noted that this is a useful framework and aligns well with our People and Capability Strategy work programme. Staff plan to respond to this letter. The Board noted that Board members may like to consider a te reo immersion course to ensure that Board members are not out of step with staff's progress.

7. Chief Executive's Report

noted the Chief Executive's Report

noted the financials for June 2021

noted the recent release of Pharmac's Options for Investment (OFI) list, in alphabetical order

noted that the Chief Executive will be interviewing applicants for the Chief Medical Officer role in the week commencing 2 August

noted the update from staff on influenza and MMR vaccines uptake

noted the update from staff on the additional requests from the Review Committee

noted that recruitment of particular roles continues to be challenging and suggested that remote regional staff are considered. This may assist with connecting with organisations such as The Fono, which the Board met with on the evening of Thursday 29 July.

The Board thanked staff for organising the talanoa with The Fono the night prior to the Board meeting.

8. Key Items

8.1 Update on actions to address inequities in access to medicines for gout

The purpose of this paper was to update the Board on actions planned to achieve medicine access equity for gout treatment and management. The action plan (that was attached to the paper) has been informed by an analysis of the system level enablers for addressing inequities in gout treatment and long-term management. The Board:

noted the gout action plan, which includes actions where Pharmac has direct control or a role, actions where we can be an active partner, and actions where we can influence and advocate

noted that the discussion with The Fono members on Thursday evening 29 July solidifies what is detailed in the action plan

noted that success and engagement measures will be developed. The next stage of the Pacific Responsiveness Strategy (PRS) is to activate and strengthen relationships and partnerships with Pacific Peoples, which is critical to the success of the PRS.

8.2 Pacific Responsiveness Strategy Stage Two update

This paper provided the Board with an update on Pharmac's Pacific Responsiveness Strategy (PRS), and an overview of work planned for 2021/22 year. The last update was provided to the Board in October 2020. The Board:

noted progress and achievements made since October 2020

noted the actions and outputs planned for 2021/22 year

noted that an element of the end-to-end review of our medicines assessment and decision-making process is looking at strengthening both Māori and Pacific responsiveness across Pharmac.

noted that Pharmac will not be able to deliver of the PRS alone and that engagement across the health sector and with key stakeholders is key to the success of the PRS

noted that the availability of data on Pacific Peoples will be helpful to increase our understanding and progress with our goal to improve access to medicines.

8.3 Monthly Communications Report

This paper summarised communications activity for June 2021. The Board:

noted that our media sentiment score has slightly increased again this quarter to -0.2

noted we intend to publish the Year in Review in November 2021 which will include a new 'looking forward' section

noted that our approach for the Year in Review focuses on telling our story and looking back on the year as well as looking ahead to next year

noted that the Options for Investment (OFI) list, recently released for the first time, will be updated regularly on the Pharmac website and a media release prepared quarterly.

8.4 Risk Report – Quarterly Report and Exceptions

The full risk register is considered by the Audit and Risk Committee and provided to the Board as an information item. The register lists risks that exceed the Board's identified risk tolerance. This exceptions' report also updates the Board on the items on the risk register that have materially changed since it was considered at the Audit and Risk Committee. The Board:

noted that the Audit and Risk Committee reviewed the risk register at its 25 June 2021 meeting

noted that the quarter four risk register has been updated following discussion at that Audit and Risk Committee as well as through regular updating by staff as described in this paper

noted that the quarter four risk register will be included in the quarter four performance report to the Minister of Health

noted that staff expect that the supply chain for medicines will continue to be disrupted for 12-18 months, at least, and that they are well engaged with other government agencies to troubleshoot supply chain disruptions. Staff are also working closely with suppliers to obtain earlier information on potential supply chain issues.

9. Schedule and Funding

9.1 Combined Pharmaceutical Budget Management Update

The purpose of this paper was to update the Board on the June 2021 CPB Forecast. It aims to enable a wider discussion by the Board regarding management's planned activities to manage CPB expenditure in 2021/22 and in the out-years. The Board:

noted that the Combined Pharmaceutical Budget (CPB) for 2021/22 is \$1,085 million

noted that the Government has separately provided \$76 million to cover COVID-19-related costs in 2021/22

noted that there continues to be considerable uncertainty around the ongoing impact of COVID-19 on CPB expenditure

noted that staff are considering if we should forecast a separate amount in future years for one off costs such as additional costs associated with freight for medicines supply.

Nicole Anderson and Jan White

(carried)

9.2 Pharmaceutical Transactions Report

This paper provides the Board with an advance overview of the contentious, large or significant medicines transactions that staff are currently progressing.

resolved to delegate decision-making for the sunitinib capsules 2020/21 Invitation to Tender award to the Chief Executive

noted the update from Pharmac staff on the large and/or significant medicines transactions that are currently planned or in progress.

Claudia Wyss and Ross Lawrenson

(carried)

9.3 Proposal to fund rosuvastatin for people at high cardiovascular risk and award sole supply to Mylan

Having regard to the decision-making framework set out in Pharmac's Operating Policies and Procedures, Pharmac staff presented the proposal to fund rosuvastatin for people at high cardiovascular risk and award sole supply to Mylan for Board approval. The proposed access criteria would see rosuvastatin tablets funded as a first line treatment option for Māori and Pacific people who are at an increased risk of cardiovascular disease, and as a second or third-line treatment option for people that have maintained higher LDL-cholesterol on other funded cholesterol lowering treatments. The Board:

resolved to accept the tender from Mylan New Zealand Ltd. for its brand to be the sole subsidised brand of the Community Pharmaceutical rosuvastatin tab 5 mg, 10 mg, 20 mg and 40 mg from 1 May 2022 until 30 June 2023

resolved to accept the tender from Mylan New Zealand Ltd. for its brand to be the Hospital Supply Status brand of the Hospital Pharmaceutical rosuvastatin tab 5 mg, 10 mg, 20 mg and 40 mg, with a DV limit of 1%, from 1 May 2022 to 30 June 2023

resolved to list Mylan Rosuvastatin (rosuvastatin) in the Cardiovascular System therapeutic group, Lipid-Modifying Agents (HMG CoA Reductase Inhibitors (Statins)) subgroup in Section B and Part II of Section H of the Pharmaceutical Schedule from 1 December 2021 as follows (ex-manufacturer, excl GST)

Chemical and presentation	Brand	Pack Size	Subsidy and price (ex-man., ex. GST)
Rosuvastatin tab 5 mg	Mylan Rosuvastatin	30	\$1.70
Rosuvastatin tab 10 mg	Mylan Rosuvastatin	30	\$2.42
Rosuvastatin tab 20 mg	Mylan Rosuvastatin	30	\$3.92
Rosuvastatin tab 40 mg	Mylan Rosuvastatin	30	\$5.28

resolved to apply Special Authority restrictions to the listing of rosuvastatin in Section B of the Pharmaceutical Schedule from 1 December 2021 as follows:

Special Authority for Subsidy

Initial application (cardiovascular disease risk) from any relevant practitioner.

Approvals valid without further renewal unless notified for applications meeting the following criteria:

Either:

1. Both:
 - 1.1. Patient is considered to be at risk of cardiovascular disease; and
 - 1.2. Patient is Māori or any Pacific ethnicity; or
2. Both:
 - 2.1. Patient has a calculated risk of cardiovascular disease of at least 15% over 5 years; and

VERSION FOR PUBLIC RELEASE, SOME INFORMATION MAY HAVE BEEN EXCLUDED
DUE TO CONFIDENTIALITY

- 2.2. LDL cholesterol has not reduced to less than 1.8 mmol/litre with treatment with the maximum tolerated dose of atorvastatin and/or simvastatin.

Initial application (familial hypercholesterolemia) from any relevant practitioner. Approvals valid without further renewal unless notified for applications meeting the following criteria:

Both:

1. Patient has familial hypercholesterolemia (defined as a Dutch Lipid Criteria score greater than or equal to 6); and
2. LDL cholesterol has not reduced to less than 1.8 mmol/litre with treatment with the maximum tolerated dose of atorvastatin and/or simvastatin.

Initial application (established cardiovascular disease) from any relevant practitioner. Approvals valid without further renewal unless notified for applications meeting the following criteria:

Both:

1. Any of the following:
 - 1.1. Patient has proven coronary artery disease (CAD); or
 - 1.2. Patient has proven peripheral artery disease (PAD); or
 - 1.3. Patient has experienced an ischaemic stroke; and
2. LDL cholesterol has not reduced to less than 1.4 mmol/litre with treatment with the maximum tolerated dose of atorvastatin and/or simvastatin.

Initial application (recurrent major cardiovascular events) from any relevant practitioner. Approvals valid without further renewal unless notified for applications meeting the following criteria:

Both:

1. Patient has experienced a recurrent major cardiovascular event (defined as myocardial infarction, ischaemic stroke, coronary revascularisation, hospitalisation for unstable angina) in the last 2 years; and
2. LDL cholesterol has not reduced to less than 1.0 mmol/litre with treatment with the maximum tolerated dose of atorvastatin and/or simvastatin.

resolved to apply Hospital Indication restriction to the listing of rosuvastatin in Part II of Section H of the Pharmaceutical Schedule from 1 December 2021 as follows:

Restricted

Initiation - cardiovascular disease risk

Either:

1. Both:
 - 1.1. Patient is considered to be at risk of cardiovascular disease; and
 - 1.2. Patient is Māori or any Pacific ethnicity; or
2. Both:
 - 2.1. Patient has a calculated risk of cardiovascular disease of at least 15% over 5 years; and
 - 2.2. LDL cholesterol has not reduced to less than 1.8 mmol/litre with treatment with the maximum tolerated dose of atorvastatin and/or simvastatin.

Initiation - familial hypercholesterolemia

Both:

1. Patient has familial hypercholesterolemia (defined as a Dutch Lipid Criteria score greater than or equal to 6); and
2. LDL cholesterol has not reduced to less than 1.8 mmol/litre with treatment with the maximum tolerated dose of atorvastatin and/or simvastatin.

Initiation - established cardiovascular disease

Both:

1. Any of the following:
 - 1.1. Patient has proven coronary artery disease (CAD); or
 - 1.2. Patient has proven peripheral artery disease (PAD); or
 - 1.3. Patient has experienced an ischaemic stroke; and
2. LDL cholesterol has not reduced to less than 1.4 mmol/litre with treatment with the maximum tolerated dose of atorvastatin and/or simvastatin.

Initiation - recurrent major cardiovascular events

Both:

1. Patient has experienced a recurrent major cardiovascular event (defined as myocardial infarction, ischaemic stroke, coronary revascularisation, hospitalisation for unstable angina) in the last 2 years; and

2. LDL cholesterol has not reduced to less than 1.0 mmol/litre with treatment with the maximum tolerated dose of atorvastatin and/or simvastatin.

resolved that any future minor changes proposed to the Special Authority criteria, as a result of any further feedback on specific wording relating to ethnicity criteria, be delegated by the Board for approval by the Chief Executive

resolved that the consultation on this proposal was appropriate, and no further consultation is required

noted that Pharmac staff met with Uruta who were very supportive and see this as a positive decision for Pharmac in considering ethnicity in funding decisions

noted that while this is a funding decision for preventative medicines, noting the issues we have heard around lower rates in uptake of medicines for particular priority groups, this decision will contribute to our work to ensure Pharmac is not contributing to barriers in access to medicines and demonstrate our commitment to being a pro-equity organisation. Pharmac staff will monitor uptake including ethnicity criterion, like the diabetes medicines decision

noted the work of Pharmac staff to partner with stakeholders and service providers to promote access and uptake of funded medicines

noted that staff may like to consider adding in more information into the implementation and communication section of board papers on funding decisions to highlight the impact of our decisions on the health sector.

Claudia Wyss and Nicole Anderson

(carried)

9.4 Prioritisation Report

This report describes prioritisation activity since the last report presented to the Board at its May 2021 meeting. It also updates the Board on the progress of selected items from the prioritisation lists; top 10 proposals on the Options for Investment list, proposals with a high PTAC priority on the Options for Investment or Under Assessment lists, and proposals with a high PTAC priority on the under assessment list. The Board:

noted the prioritisation activity undertaken by Pharmac staff since March 2020 and the progress of selected items from Pharmac's prioritisation list

noted that since Pharmac staff prepared this report, the Director of Operations has approved a process to remove items from the Options for Investment (OFI) list which are not Medsafe approved and are unlikely to get approved.

9.5 Medical Devices Transaction and Investment Report

This paper provides a monthly update to the Board on progress with medical devices national contracting activity. The Board:

noted that Pharmac staff have completed contracting for 62% of the estimated DHB spend on medical devices, with a further 26% in progress.

9.6 Summary of Decisions Made Under Delegated Authority – June 2021

This report contains a summary of all decisions made by Pharmac staff under delegated authority since the last Board meeting, i.e., decisions made during March/April 2021. The Board:

noted the summary of decisions made under Delegated Authority during June 2021 by the Chief Executive, Director of Operations, Manager Pharmaceutical Funding, Senior Advisor/Team Leader and Senior Therapeutic Group Managers/Team Leaders.

10. Strategy Planning and Policy

10.1 Medical Devices Programme Update

This paper provided an update on our Medical Devices Programme and the engagement approach that Pharmac are taking. It describes our progress to date; the pathway forward; and the factors that may impact on our advancement. The Board:

noted Pharmac's progress with its programme to deliver on its medical devices strategic priority

noted that Pharmac staff will be undertaking a series of engagement activities during 2021/22 with targeted health sector stakeholders to help develop the operational detail and approach for the management of medical devices

noted that the Board will be informed throughout the year on progress with engagement activities

noted that staff are mindful of the current pressures on our sector colleagues and are considering smaller group engagement rather than larger engagement events

noted that the Finance and Procurement Information Management (FPIM) System and associated Health Sector Catalogue (HSC) IT solutions currently under development by NZ Health Partnerships and the Ministry of Health are a critical enabler for the Medical Devices Programme.

The Board requested staff prepare a medical devices roadmap of planned key deliverables to be discussed at the Board strategy meeting in September under the discussion item progress against our strategy.

10.2 Continuous improvement of Pharmac's medicine assessment and funding decision-making processes

The purpose of this paper was to provide the Board with an update on the process improvement project that is underway looking at an end-to-end review of our medicines assessment and decision-making process.

noted that increasing transparency and making Pharmac's medicines funding application processes faster, clearer, and simpler has been a key focus area since 2018

noted the work to date and progress being made to increase transparency and improve timeliness of Pharmac's medicines funding application processes

noted that the Minister of Health's 2021/22 and 2020/21 Letters of Expectations outlined the expectation for Pharmac 'to continue to build on our work to improve the transparency and timeliness of our processes, and further develop our relationship and communication with the public and other stakeholders'

noted that the scope of the external review of Pharmac includes considering the timeliness of Pharmac's medicines funding decisions and how transparent and accessible to the public Pharmac's decision making processes are

noted that as part of the Enhanced Key Functions strategic priority a significant process improvement project commenced in February 2021 looking at an end-to-end analysis of our medicines assessment and decision-making processes

noted that the Board will receive a number of updates on the end-to-end analysis project over coming months

noted that as part of the 'blue skies' project, Pharmac staff will look at Pharmac's consultation process including time to consult and comparable international consultation processes.

10.3 Pharmac 2020/21 Quarter Four Performance Report

This paper provided the Board with Pharmac's 2020/21 Quarter Four Performance Report and progress towards our strategic priorities. The Board:

noted Pharmac's 2020/21 Quarter Four Performance Report;

noted the following key insights from the Quarter Four Performance Report:

1. Pharmac staff have made good progress towards delivering the initiatives set out in the first year of our new strategic direction.
2. Progress has been made on many initiatives, and much of the work continues in the 2021/22 year.
3. There has been significant progress across all strategic priority areas. Overall, three strategic priority areas have been rated Green (Medical Devices, Data and Analytics and Relationship and Partnerships) with the remaining three being rated Amber (Enhance Key Functions, Equitable Access and Use, and Public Understanding, Trust and Confidence). Of the two supporting priorities Te Whaioranga is rated Amber, and People and Capability is rated Green.
4. Resourcing issues, including recruitment challenges and delays, have continued to affect our capacity to deliver as well as wider health sector capacity issues.
5. The external review of Pharmac commenced in March which has involved a significant amount of staff time and effort to respond to the Review Committee.
6. The development of performance measures and the collection of data for new performance measures is on track for the 2020/21 Annual Report.

noted. The Board will discuss progress against our strategic priorities at the Board strategy meeting in September.

10.4 Statement of Performance Expectations deliverables

This paper provided the Board with a one-year roadmap of key deliverables in 2021/22 to progress and deliver our strategic direction in line with Pharmac's 2021/22 Statement of Performance Expectations (SPE). It also provided the Board with an updated four-year roadmap to progress delivery of our strategic direction. The Board:

noted that the 2021/22 Statement of Performance Expectations was approved by the Board at its May 2021 meeting

noted that staff have developed a one-year roadmap of key deliverables to progress and deliver our strategic direction for 2021/22

noted that staff have updated the high-level four-year roadmap to our Strategic Direction

noted that the Board will receive progress reports on activity as part of regular quarterly performance reporting throughout the 2021/22 financial year.

10.5 PTAC and Specialist Advisory Committee Terms of Reference

This paper sought Board approval on the revised Pharmacology and Therapeutic Advisory Committee (PTAC) and new Specialist Advisory Committee (SAC) Terms of Reference (ToR) documents. The Board:

noted that the Board received a summary of consultation feedback on Pharmac's advisory committee's Terms of Reference at the June 2021 Board meeting

noted that consultation feedback was supportive of proposed changes to the Pharmacology and Therapeutic Advisory Committee (PTAC) Terms of Reference, including consumer involvement, and the new Specialist Advisory Committee (SAC) Terms of Reference documents (previously referred to as PTAC subcommittees)

noted that the CAC Chair and PTAC Chair, along with Pharmac staff, are currently discussing options for consumer representation on PTAC. They noted that two current CAC members will be observing an upcoming PTAC meeting and will be asked to report back to staff on their experience and views on how the role of consumer representative on PTAC may work in practice.

approved the revised PTAC Terms of Reference

approved the new Specialist Advisory Committee (SAC) Terms of Reference

noted the approach Pharmac staff are taking to implement the changes.

Jan White and Nicole Anderson

(carried)

10.6 Board Statutory Committee Appointments Recommendations

This paper sought Board agreement on the recommended appointment of the new Chair of the Pharmacology and Therapeutics Advisory Committee (PTAC), the appointment of a new member of the Consumer Advisory Committee, and the appointment of new co-Deputy Chairs of the Consumer Advisory Committee. The Board:

resolved to recommend to the Director-General of Health the appointment of Dr Jane Thomas, Anaesthetist and Pain Medicine Specialist, Starship Children's Hospital and the Auckland Regional Pain Service, as Pharmacology and Therapeutics Advisory Committee (PTAC) Chair for a period of three years beginning 6 December 2021

noted that interviews were also undertaken for the position of Deputy Chair of the Pharmacology and Therapeutics Advisory Committee (PTAC), however the interview Panel deferred making a decision on this appointment pending the clarification of the roles and responsibilities of this position

noted that the appointments of the current PTAC Chair, Professor Mark Weatherall, and Deputy Chair, Associate Professor Marius Rademaker, which are both due to expire at the end of October 2021 will continue until 3 December 2021

noted that the current PTAC Chair, Professor Mark Weatherall, will attend the November 2021 Board meeting and thanked him for his service

resolved to appoint Nele Kalolo to the Consumer Advisory Committee for a period of three years from 1 August 2021

resolved to appoint Les Robinson and Tui Taurua as co-Deputy Chairs of the Consumer Advisory Committee from 1 August 2021.

Ross Lawrenson and Claudia Wyss

(carried)

10.7 Pharmaceutical pipeline scan 2021 update

This paper provided the Board with an update on the global development pipeline for pharmaceuticals, and an opportunity to provide feedback on the draft report. The Board:

noted the attached draft report from Sapere Research Group on the global development pipeline for pharmaceuticals

noted that Pharmac staff will consider the implications of the report findings in its future business planning activities

noted that the Board intend to have a fulsome discussion on the pipeline for pharmaceuticals at the Board strategy meeting in September

noted that staff intend to provide a briefing with the report to the Review Committee for their information.

11. Interest Articles

noted the interest articles.

12. General Business

The Board thanked staff for organising the offsite Board meeting and the talanoa with The Fono on 29 July. The Board Chair asked for feedback from Board members on the value of offsite Board meeting for future meetings.

Date of Next Meeting

The date for the next Board meeting is set for Friday 24 September 2021.

The meeting closed at 3.00pm.

Chair:

Date: