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Our ref: KM21-149

PHARMAC
PO Bo 10254
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via email: consultation@pharmac.govt.nz

Tēnā koe

Proposed changes to PHARMAC Advisory Committees

Thank you for giving The Royal New Zealand College of General Practitioners the opportunity to comment on the **Proposed Changes to PHARMAC Advisory Committees**.

The Royal New Zealand College of General Practitioners is the largest medical college in New Zealand. Our membership of 5,500 general practitioners comprises almost 40 percent of New Zealand's specialist medical workforce. Our kaupapa is to set and maintain education and quality standards for general practice, and to support our members to provide competent and equitable patient care.

We note that PHARMAC is intending to make the following changes:

Regarding Consumer input;

- Broadening the role of the Consumer Advisory Committee (CAC).
- Enabling PTAC membership to include a consumer

Regarding Te Tiriti, health equity, and diversity;

- Enhancing health equity expertise and diversity on clinical advisory committees
- Building on PHARMAC's commitment to Te Tiriti o Waitangi by setting up a Māori advisory committee

Other changes;

- Renaming the Pharmacology and Therapeutics Advisory Committee (PTAC) sub committees as Specialist Advisory Committees (SAC)
- Creating new separate Terms of Reference (TOR) for PTAC and the SACs

Submission

The College considers that it is essential that PHARMAC's decisions are informed by the lived experiences of patients from populations with the highest levels of health inequities. The College welcomes PHARMAC's moves towards ensuring that this can occur.

Consumer input

To enable maximum benefit from consumer input PHARMAC will need appropriate selection criteria and will need to provide high quality support to the consumers appointed.

We note that the TOR for CAC do not include any information on how CAC members will be selected by the PHARMAC Board, apart from stating that PHARMAC staff and members of the CAC will be involved in the selection process. Likewise, the TOR of PTAC do not indicate how the Consumer Advisory Member would be selected apart from stating that they would be appointed by the Director-General of Health in consultation with the PHARMAC Board. Neither do the TOR state whether the Consumer Advisory Member would also be a member of CAC. We would appreciate more information on this.

The College is pleased to see that the CAC membership will include at least two Māori members and at least one Pacific member. Likewise, we are pleased that in making appointments to the CAC, the PHARMAC Board will endeavour to ensure the CAC membership includes consumers from a variety of age groups, genders, and communities in Aotearoa New Zealand and with diverse experiences within the Aotearoa New Zealand health system.

Support for CAC members will need to include orientation, training, and ongoing professional development. Clinical and administrative support must also be provided. While some consumers will be very capable of critically appraising research this should not be an absolute prerequisite to selection. PHARMAC should ensure that staff resource is made available to facilitate analysis where necessary and present relevant information in a digestible format. This will be particularly necessary to support the Consumer Advisory Member on PTAC.

We envisage that consumers on PHARMAC committees will come under considerable pressure from those seeking to influence the decisions of PHARMAC, some of whom may be distressed. PHARMAC should provide professional development for consumer members to not only assist them with understanding the context in which PHARMAC operates, but also to help them to develop appropriate strategies in anticipation of such difficult circumstances.

The Health Quality and Safety Commission (HQSC) operates a consumer network and we suggest that PHARMAC engage with the HQSC to make use of their learnings and utilise the resources they have available.¹

We note that the Consumer Advisory Committee does not have a relationship with PTAC but with the PHARMAC board; one member of the board will attend CAC meetings. We would appreciate more clarity on how the insights gained by this board member will be factored into the deliberations at PTAC level.

Hauora Māori Health Equity and Diversity

The College welcomes the inclusion of para 4.1.2 in both the PTAC and subcommittee TOR; “PHARMAC requires Members to bring an understanding of and commitment to achieving health and medicines access equity” and the new approach that this signals. The previous (2016) terms of reference did not include any mention of equity.

We asked the College Māori Representative Group, Te Akoranga a Māui, for their input regarding the changes relating to hauora Māori, health equity and diversity.

Te Akoranga a Māui welcomes the plan to set up a Māori advisory committee and are interested in engaging with PHARMAC and with Trevor Simpson, PHARMAC’s recently appointed Chief Advisor Māori² around the ToR for the Māori advisory committee. They are particularly interested in engaging on the role of the Māori advisory group, its relationship with PTAC and the PHARMAC board, and how it will input into decision making.

¹ <https://www.hqsc.govt.nz/our-programmes/partners-in-care/our-consumer-network/> accessed 16/3/21

² <https://pharmac.govt.nz/news-and-resources/news/inaugural-chief-advisor-maori-appointed-to-pharmac/> accessed 16/3/21

Membership of PTAC

Te Akoranga a Māui are pleased to read that Membership of PTAC will include, at a minimum, a senior health practitioner who is Māori. Given the under-representation of Māori in the health workforce it can be challenging to find Māori health practitioners with the capacity to devote the time required to such a role, however, Te Akoranga a Māui urges PHARMAC to strive to ensure that there are at least two Māori health practitioners on PTAC. If this is not immediately possible, in order to ensure a stronger more collective voice then steps must be taken to ensure that a single Māori health practitioner is not a lone isolated voice. The College supports this view.

Health equity training

The College also endorses the advice of Te Akoranga a Māui that health equity training should not only be available but should be mandatory for all members of PTAC, both existing and new.

Conclusion

The College commends the work that PHARMAC has done in proposing these changes and looks forward to working with PHARMAC in future.

We hope you find our submission helpful. If you have any questions, or would like more information, please email us at policy@rnzcgp.org.nz

Nāku noa, nā



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