

**Corporate Policy and Guidance
for Joint Working with the
Pharmaceutical Industry**

**(Template based upon DH Best Practice Guidance for Joint
Working between the NHS and the Pharmaceutical Industry,
February 2008)**

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VERSION CONTROL

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1.0	April 2013	Updated from PCT policy for CCG as commissioning body
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CORPORATE POLICY AND GUIDANCE FOR JOINT WORKING WITH THE PHARMACEUTICAL INDUSTRY

1 SCOPE

- 1.1 This document is intended as policy for Somerset CCG and its staff who are involved in joint working with the pharmaceutical industry. It should be read in conjunction with the CCG policies for managing conflicts of interest and business standards and for the acceptance of gifts and hospitality and commercial sponsorship.
- 1.2 For the purposes of this policy, the term 'staff' refers to clinicians and managers employed or seconded by Somerset CCG including those providing representative roles or clinical advisors.
- 1.3 The policy does not apply to independent contractors working on behalf of their practices.
- 1.4 For the purpose of this policy, joint working is defined as situations where, for the benefit of patients, organisations pool skills, experience and/or resources for the joint development and implementation of patient centred projects and share a commitment to successful delivery. Joint working agreements and management arrangements are conducted in an open and transparent manner. Joint working differs from sponsorship, where pharmaceutical companies simply provide funds for a specific event or work programme.
- 1.5 The policy is based upon the template provided in the Department of Health Best Practice Guidance for Joint Working between the NHS and the Pharmaceutical Industry, February 2008¹.

2 INTRODUCTION

- 2.1 DH Guidance¹ encourages NHS organisations and their staff to consider opportunities for joint working with the pharmaceutical industry, where the benefits that this could bring to patient care and the difference it can make to their health and well-being are clearly advantageous.

3 AIMS AND OBJECTIVES

- 3.1 The aim of this policy is to:
- assist Somerset CCG to achieve its objectives and delivery of national and local priorities by building effective and appropriate working relationships with the pharmaceutical industry

¹ Department of Health, 2008. Best practice guidance for joint working between the NHS and the pharmaceutical industry.

- inform and advise staff of their main responsibilities when entering into joint working arrangements with the pharmaceutical industry. Specifically, it aims to:
 - assist NHS employers and staff in maintaining appropriate ethical standards in the conduct of NHS business
 - highlight that NHS staff are accountable for achieving the best possible health care within the resources available

3.2 Staff are reminded that at all times they have a responsibility to comply with their own professional codes of conduct that provide a framework for professional practice in respect of working with private companies and industries, and that representatives of the pharmaceutical industry must comply with the *ABPI Code of Practice for the Pharmaceutical Industry*.²

4 VALUES

4.1 In line with the NHS Code of Conduct³ three public service values underpin the work of the NHS:

- accountability – everything done by those who work in the NHS must be able to stand the test of parliamentary scrutiny, public judgements of propriety and professional codes of conduct
- probity – there should be an absolute standard of honesty in dealing with the assets of the NHS. Integrity should be the hallmark of all personal conduct in decisions affecting patients, staff and suppliers, and in the use of information acquired in the course of NHS duties
- openness – there should be sufficient transparency about NHS activities to promote confidence between the organisation and its staff, patients and the public

4.2 Where staff enters into any joint working with the pharmaceutical industry, their conduct should also adhere to the following values:

- transparency and trust
- appropriateness of projects
- patient focused
- value for money
- reasonable contact
- responsibility
- impartiality and honesty
- truthfulness and fairness

5 PRINCIPLES OF JOINT WORKING

5.1 Joint working must be for the benefit of patients or of the NHS and preserve patient care. Any joint working between the NHS and the

² ABPI, 2016. *Code of Practice for the Pharmaceutical Industry* (http://www.abpi.org.uk/our-work/library/guidelines/Documents/code_of_practice_2016.pdf).

pharmaceutical industry should be conducted in an open and transparent manner. Arrangements should be of mutual benefit, the principal beneficiary being the patient. The length of the arrangement, the potential implications for patients and the NHS, together with the perceived benefits for all parties, should be clearly outlined in a written proposal before entering into any joint working arrangement for the benefit of patients.

5.2 The following principles will also apply to joint working:

- staff should be aware of relevant NHS guidance and CCG policies, the legal position and appropriate and relevant professional codes of conduct
- confidentiality of information received in the course of duties undertaken as part of an agreed joint working project must be respected and never used outside the scope of the specific project
- joint working arrangements should be agreed and undertaken at a corporate, rather than an individual, level with approval and oversight through the appropriate governance arrangements in within Somerset CCG.
- clinical and financial outcomes will be assessed through a process of risk assessment undertaken as part of the development of the proposal for the joint working project

5.3 To ensure Somerset CCG has a mechanism in place for recording and monitoring, and evaluating any joint working arrangements each proposal for joint working should have a clearly identified CCG sponsor. The sponsor should be a member of the CCG Clinical Operations Group (COG), CCG Director or CCG Head of Department. The sponsor is responsible for identifying a project manager responsible for seeking approval and production of project detail including:

- joint working project summary
- assessment of resources and costs
- assessment of impact on outcomes framework
- assessment of impact upon primary or secondary care resources
- risk assessment
- governance arrangements
- communications plan
- monitoring and evaluation
- data and patient protection
- declaration of interests
- impact assessments for equality, quality and privacy as appropriate
- key performance indicators as appropriate

5.4 A mutually agreed and effective exit strategy will be in place at the outset of any joint working arrangement detailing the responsibilities of each party and capable of dealing with a situation where premature termination may become necessary.

6 CONFIDENTIALITY AND DATA PROTECTION

- 6.1 Staff should be aware of relevant NHS guidance with regard to patient confidentiality and data protection, the legal position and appropriate and relevant professional codes of conduct . The CCG policy on confidentiality and data protection should be followed.
- 6.2 Please seek advice from the CCG's Caldicott Guardian or Information Governance Team if you have any queries.

7 LEGISLATION, GOVERNANCE, CONFLICTS OF INTEREST, PAYMENTS AND HOSPITALITY

- 7.1 Staff should be aware of relevant NHS guidance, the legal position and appropriate and relevant professional codes of conduct as described in existing NHS guidance with regard to patient confidentiality and data protection. The CCG policy on conflicts of interests, payments and hospitality should be followed.

8 APPROVAL OF JOINT WORKING ARRANGEMENTS

- 8.1 The Prescribing and Medicines Management Committee has delegated authority to approve or decline all proposals for joint working.
- 8.2 No joint working projects should commence without approval of the Prescribing and Medicines Management Committee.
- 8.3 The Corporate Governance Manager will be informed of each decision of the Prescribing and Medicines Management Committee (PAMM) and will hold a register of each application and decision on behalf of the CCG. The Register will be reported to the Audit Committee as part of the regular reporting on registers of interest.
- 8.4 The Chair, and Vice Chair of PAMM or Associate Director of Medicines Management may act as CCG signatories for each approved proposal for joint working. Each project will require two signatories to sign off the proposal.
- 8.5 The sponsor and project manager will be responsible for planning, implementation, engaging stakeholders, monitoring and evaluation of the joint working project.
- 8.6 As a minimum each project will produce for PAMM an interim report on the project and a final report on the project including feedback, evaluation and lessons learned.
- 8.7 This Policy will be approved by the PAMM and a copy presented to the Audit Committee for ratification.

9 REFERENCE AND ADDITIONAL READING

9.1 The Policy should be read in conjunction with the following supporting documents and information:

- Moving beyond sponsorship – available via the DH archives at [Moving beyond sponsorship](#)
- ABPI [Code of Practice for the Pharmaceutical Industry](#) and [Guide for Joint Working with the Pharmaceutical Industry](#)
- Department of Health, [Code of Conduct: Code of Accountability in the NHS. 2nd Ed July 2004](#)
- CCG Standards of Business Conduct and Managing Conflicts of Interest Policy
- CCG Acceptance of Gifts and Hospitality/Commercial Sponsorship Policy and Procedure