
LCA Code of conduct for interaction with industry: medicines, devices and healthcare industry



Contents

1	Introduction.....	3
2	The Department of Health (DH) key principles	3
3	The Association of British Pharmaceutical Industry (ABPI) and Guidance on Collaboration	4
4	Operational issues for the LCA working in collaboration with industry.....	4
	Appendix 1 – Declaration form for Potential Conflict of Interest.....	6
	Appendix 2 – Operational Policy Flowchart.....	9
	Appendix 3 – Proposal for interaction with Industry.....	10

1 Introduction

The London Cancer Alliance (LCA) exists to improve patient outcomes, care, education, research and the experience of care. An important interaction in cancer care is that between clinicians and the industry that fosters and supports care, research and training. This is generally the pharmaceutical industry, devices industry and more recently, in the field of practice and systems innovation, partnerships with general medical industry.

The LCA welcomes jointly working with industry to support the implementation of LCA activities in support of pillars of governance including audit, education and training, research and policy. It is essential that all partnerships between the LCA and industry have appropriate governance and that all participants, both clinicians and industry partners adhere to an appropriate code of conduct. This paper sets out the code of conduct that will be used with all partners from industry.

The process for engaging with Industry should adhere to the LCA Code of Conduct and will be managed by the LCA Review Panel. This panel consists of the following:

- LCA Clinical Director
- LCA Associate Clinical Director
- Medicines and Chemotherapy Steering Group Chair
- 3 Members from the Clinical Board
- LCA Programme Director

All requests for engaging with industry should follow the operational policy flowchart and be submitted using the LCA Proposal template in Appendix 3. All internal requests should be submitted to the LCA Review Panel by the LCA Pathway Chair via the Programme Director.

External requests/proposals may also be sent directly to the Programme Director, Claire Dowling for consideration by the LCA Review Panel.

For more information or to discuss further, please contact claire.dowling1@nhs.net.

2 The Department of Health (DH) key principles

The DH recognises the expertise in industry and encourages partnership working guided by the following three overarching principles:

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 (DH 2008).

Recognising the benefits that partnership with industry can create for patients, the DH has authored a code of practice or toolkit for clinicians working in partnership with industry (DH 2010). The toolkit emphasises joint working for the benefit of patients and outlines some key working arrangements:

1. Agreeing objectives up front with a shared vision of improved patient outcomes, care or experience.
2. Recognition backed by behaviour of mutual respect for the participants in the partnership
3. Transparency, openness and honesty in the relationship and declaration of any conflict of interests.
4. There should be open agreement about the benefits for everyone in the partnership (DH 2010).

3 The Association of British Pharmaceutical Industry (ABPI) and Guidance on Collaboration

Any activities/collaboration with Industry should adhere to the ABPI Code of Practice. This promotes professional, ethical and transparent standards and processes which support the provision of high quality healthcare to benefit patients.

Further details on the ABPI Code of Practice, administered by the Prescription Medicines Code of Practice Authority (PMCPA) can be found here.

<http://www.pmcpa.org.uk/thecode/Pages/default.aspx>

4 Operational issues for the LCA working in collaboration with industry

The LCA is a collaborative partnership of 17 Provider organisations. This guidance is intended for all staff of all the Providers, encompassing the entire membership of the LCA. The governance arrangements rest with individuals and their responsible employing body.

All interactions between clinicians in the LCA and healthcare industry will be conducted in an ethical manner as guided by the principles outlined in the frameworks above (2-3). Any individual clinician is bound by their professional code of conduct as below:

- Medicine: General Medical Council (GMC) “good medical practice” & BMA “medical ethics today”
- Pharmacy: General Pharmaceutical Council “standards of conduct, ethics and performance”
- Nursing: Nursing and Midwifery council (NMC) “standards of conduct performance and ethics for nurses and midwives”.
- Allied Health Professionals: according to their related professional body.

All individual staff working within LCA need to adhere to their employer’s own Trust policy, record interaction with industry as part of their annual appraisal which should be available to the LCA on request.

All potential conflicts of interest should be declared and submitted to the LCA Pathway Chair. (See Appendix 1 for form.) Where a project is sponsored by the LCA and includes clinical and industry partners, a clear transparent contract will be authored that meets the above ethical principles for joint working. This contract will be submitted to the LCA Clinical Board to ensure objective scrutiny and sound governance.

The operational flowchart in Appendix 2 for collaborating with industry should be followed. All proposals should be submitted to the Review Panel using the template proposal in Appendix 3. All successful submissions and monies should be submitted centrally, to the LCA Programme Director, Claire Dowling.

If the LCA has concerns about the behaviour of any clinician with regard to their conduct in respect to industry this should be reported with the evidence to the LCA Clinical Board and a designated member will liaise with the clinician and the employing Trust.

REFERENCES

DH (2008) Best Practice Guidance on Joint working between the NHS and Pharmaceutical Industry and other relevant commercial organisations.

DH (2010) Moving Beyond Sponsorship: joint working between the NHS and the Pharmaceutical Industry.

Appendix 1 – Declaration form for Potential Conflict of Interest



LCA Form for Declaration of Potential Conflict of Interest

This form should be submitted to the Pathway Chair and will be held centrally by LCA. Any information will not be made public without permission.

Name:

Correspondence Address:

Declaration of Conflict of Interest

Print name:

Sign name:

Date:

LCA Form for Declaration of Potential Conflict of Interest

Statement on Conflict of Interest

Competing interests exist when professional judgement concerning a primary interest may be influenced by a secondary interest. Conflict of interest is a state, not behaviour and exists whether or not judgement is actually influenced by competing interests. As such the LCA Medicines and Chemotherapy Steering Group ask that potentially competing interests are declared. This information is for use within the group and will not be disclosed without permission.

The types of interest that should be declared include:

Personal Interests

Personal interests in industry/an organisation (e.g. a pharmaceutical company) that may in any way gain or lose financially from work undertaken on behalf of the MCSG. Personal interests include consultancies, fee-paid work or directly managed shareholdings (not shareholdings through unit trusts or similar).

Non-Personal Interests

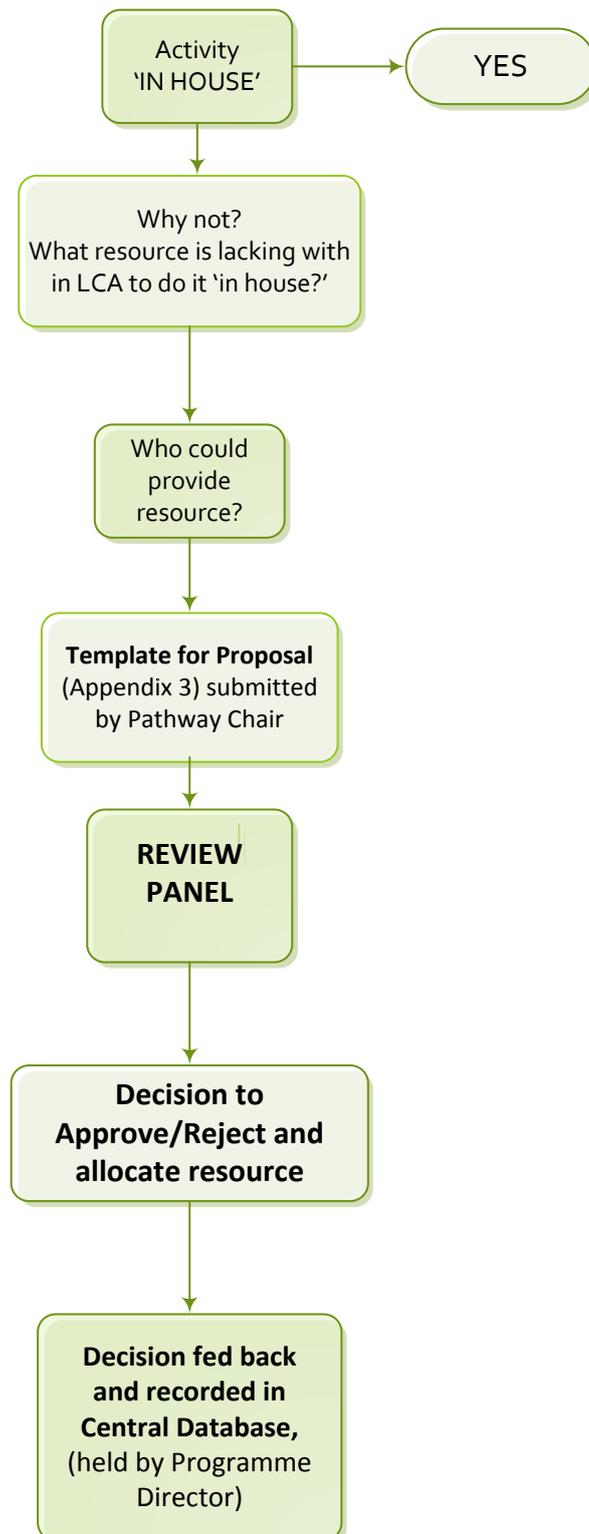
Non-personal interests in an organisation that may in any way gain or lose financially from work undertaken on behalf of the MCSG. Non-personal interests are those which benefit a department for which the member is responsible but not the member personally. Examples of non-personal interests include fellowships, grants for the running of a unit or department, sponsorship of a post or member of staff, commissioned research or other work from staff in the unit and, sponsorship of attendance at scientific or similar meetings.

Other Potential Conflicts

We would also ask reviewers to declare other potential conflicts of interest. For example, former employment in an organisation that may in any way gain or lose from work undertaken on behalf of the MCSG, political or religious convictions which might influence conclusions, or academic or personal links with somebody whose interests may be affected by work undertaken on behalf of the MCSG.

Reviewers will be asked to sign a 'Declaration of Potential Conflict of Interest' form. Only the existence of a potential conflict of interest, the organisation concerned and the nature of the interest need be recorded. The amount of any fees, grants etc. need not be disclosed.

Appendix 2 – Operational Policy Flowchart



Please note all contracts, documents, invoices, forms for resource/activity will be held centrally by the Programme Director and will be subject to audit/review.

Appendix 3: Proposal for interaction with Industry

This template should be used in conjunction with the LCA Industry Code of Conduct for Interaction with Industry policy and be submitted as instructed below. This proposal template is also available as a Word document.

In accordance with the policy, all proposals for interaction/donations/grants will be reviewed and allocated by the dedicated Review Panel. Resources will be held centrally by the LCA Programme Director.

Name of Proposer:

Company/Organisation and Job title: _____

What is the activity/interaction: (please circle/specific below):

Unrestricted educational grant/Donation/ Other _____

Rationale for Partnership /Interaction: (objectives, benefits)

Conditions/Restrictions (if any): (performance targets, outputs etc.)

Timescales: (open, year, etc.)

Please forward this form with potential conflict of interest form, if appropriate to:

Claire Dowling, Programme Director

claire.dowling1@nhs.net

London Cancer Alliance

5th Floor Alliance House

12 Caxton Street

London SW1H 0QS