

PS40(G) Position statement on the relationship between fellows, trainees and the healthcare industry 2012

Short title: Healthcare industry relationships

1. Introduction

This policy is intended to assist fellows and trainees of the Australian and New Zealand College of Anaesthetists ("the college", which includes the Faculty of Pain Medicine), with professional and ethical matters that may arise from involvement with the healthcare industry. While the healthcare industry generally makes its approaches to doctors, other health professionals, healthcare facilities or professional organisations, any association should ultimately benefit the quality and safety of healthcare provision to the community.

2. General principles

- 2.1 Community benefit should be the ultimate basis for any association with the healthcare industry.
- 2.2 The college will not sanction or promote sponsorship from which a fellow or trainee would receive pecuniary benefits.
- 2.3 Fellows, trainees or groups should formally and openly declare if they are in receipt of financial or material support from the healthcare industry for any professional activity.
- 2.4 An association between the college and the healthcare industry does not imply endorsement of the product or service being promoted by the industry. A specific disclaimer to this effect should be included with any associated publication, including promotional material.
- 2.5 During the negotiation of any agreement in which the college is involved, the final agreement must be subject to college approval. If negotiations are conducted in a personal capacity, mention of college affiliation cannot be made. Refer to ANZCA conflict of interest policy.
- 2.6 During the negotiation of any agreement involving the college, all sources of funding for the activity must be fully and formally acknowledged.
- 2.7 Fellows are encouraged to respect the important educational role of the college and be mindful of their ethical responsibility to trainees and colleagues.
- 2.8 Administrative meetings with an educational component should be regarded as educational meetings.

3. Educational meetings supported by the healthcare industry

3.1 The meeting should be under the control of an organising committee, which may include a minority representation from the healthcare industry. It is not acceptable for primary control of the meeting or any session of the meeting to be assumed by a member of the healthcare industry without reference to the organisers. Maintenance of control of the meeting program and content is particularly important and normal college guidelines for control of the meeting or any session of the meeting must be observed.



- 3.2 Promotional material advertising meetings organised by fellows or trainees in association with the healthcare industry should be clearly labelled as advertising material. Any advertising material distributed by the college may attract a fee for the service.
- 3.3 The support by the healthcare industry must be fully and formally acknowledged by the organising committee. There must be a disclaimer to separate this support from endorsement (by the college) of any service, opinion or product being promoted by the healthcare industry (refer to item 2.4).
- 3.4 Presenters must declare, both in distributed written material, and at the time of presentation, any additional funding or material support that they receive from the healthcare industry (refer to item 2.3).
- 3.5 The decision by fellows and trainees whether to attend meetings should be made having regard to the general principles outlined in section 2. Greater scrutiny should be applied when an educational event is sponsored in association with a single company.

4. Educational meetings organised by the healthcare industry

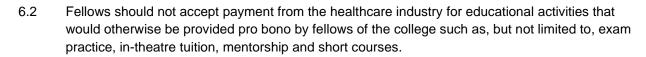
- 4.1 When members of the healthcare industry take responsibility for the organisation or program content of a meeting, the appropriate disclaimers should be published (refer item 2.4).
- 4.2 In deciding whether to attend commercially organised meetings, as in item 4.1, fellows and trainees should have regard to the general principles outlined in section 2.
- 4.3 Fellows and trainees presenting at commercially organised meetings should consider the general principles. They should be aware that they are not representing the college, and should not purport to do so.

5. Research projects

- 5.1 The healthcare industry is a major sponsor of research. The establishment of a written contract between all parties involved is essential and the process should involve a neutral third party such as a university, hospital or research foundation. The contract should be subject to the rules of the third party with all financial arrangements being channelled through them. The contract must support the investigators' right to access and publish data, whatever the outcome of the study.
- 5.2 Researchers must follow normal ethics committee procedures and applications for ethics approval must include full prospective disclosure of the proposed commercial association. This also applies when seeking patient consent for participation in any such study.
- 5.3 If a prize is offered for work performed by a fellow or trainee, the selection of the prize winner must be entirely under the control of an appropriately constituted and independent committee which excludes industry representation.

6. Industry sponsored employment

6.1 Where funding is provided in whole or in part for an employed or training position, this should be paid through a neutral third party such as the hospital or university responsible for employment of the fellow or trainee. All matters related to employment must be subject to the normal rules of the employer.



7. Travel

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- 7.1 Funds offered on a personal basis to facilitate attendance at an educational activity (for example a conference or short course) should be carefully considered having regard to the general principles noted in section 2. While acceptance of such funds is a private matter, if attendees are presenting, they should acknowledge industry support for travel and other expenses in any presentation or report.
- 7.2 Travel and tour expenses to attend or present at a commercially sponsored educational visit to other centres should be considered in terms of the likely professional benefit to all involved.
 Talks or lectures must be presented in an unbiased manner and acknowledge the support given.
 A specific disclaimer in respect of the sponsor's services or product may be appropriate.

8. Advice for items not covered in this statement

8.1 Circumstances may arise where the appropriate guidance may not be found in this statement. Advice should be sought in the first instance from the chief executive officer of the college who may then refer the matter to members of a regional/national committee or ANZCA Council.

This document is accompanied by a background paper (PS40(G)BP) which provides more detailed information regarding the rationale and interpretation of the Position Statement.

Related ANZCA documents

Conflict of interest policy. Available from: <u>http://www.anzca.edu.au/resources/corporate-policies</u>

Further reading

Medical Board of Australia. Good medical practice: a code of conduct for doctors in Australia. [Internet]. 2020 Oct. Available from: <u>https://www.medicalboard.gov.au/Codes-Guidelines-Policies/Code-of-conduct.aspx</u>

Medicines Australia. Code of conduct. 16th ed. Deakin: Medicines Australia, 2010. Available from: <u>http://medicinesaustralia.com.au/code-of-conduct/</u>. Accessed 21 May 2012.

Medical Technology Association of Australia. Medical Technology Association of Australia Code of Practice. 7th ed. North Sydney: Medical Technology Association of Australia, 2011. Available from: <u>http://www.mtaa.org.au/pages/page90.asp</u>. Accessed 15 June 2012.

Medicines New Zealand. Code of practice. 15th ed. Wellington: Medicines New Zealand, 2010. Available from: <u>http://www.medicinesnz.co.nz/code-of-practice/</u>. Accessed 15 June 2012.

Morgan JM, Marco J, Stockx L, Zannad F. Educational governance for the regulation of industry sponsored continuing medical education in interventional and device based therapies. Heart 2005;91(6):710–712.

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ANZCA professional documents are reviewed from time to time, and it is the responsibility of each practitioner to ensure that he or she has obtained the current version which is available from the college website (www.anzca.edu.au). The professional documents have been prepared having regard to the information available at the time of their preparation, and practitioners should therefore take into account any information that may have been published or has become available subsequently.

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