



**Research into attitudes towards the Code of Practice, for the Association of
the British Pharmaceutical Industry**

SUMMARY REPORT

3.04.2019





Introduction and method

The Association of the British Pharmaceutical Industry (ABPI) commissioned Traverse, an independent research organisation, to undertake research into attitudes towards the Code of Practice for the industry. This took place between October 2018 and January 2019.

The research aimed to:

1. Help the ABPI develop its Code,
2. Help industry and others to engage with the Code more effectively, and
3. Help the ABPI understand how to communicate the role the Code plays in the regulation of industry.

Research activities

Stakeholder group	Recruitment	Online survey	Telephone interview
Pharmaceutical industry	Invitation through ABPI networks	124 responses	15 interviews
Health bodies and Royal Colleges	Invitation through ABPI networks	-	6 interviews
Health professionals	Via specialist medical recruiter (incentivised)	-	32 interviews
Patient organisations	Invitation through ABPI networks and direct approach by Traverse	22 responses	6 interviews

Some of those in health body/Royal College roles also worked in an NHS role.





What did we ask?

- The research aimed to generate a picture of:
 - **Awareness, knowledge and understanding of the Code**
 - How aware are stakeholders of the Code, its purpose, how to access it
 - How is it used – frequency, mode
 - **Attitudes towards the Code**, i.e. views on:
 - What works well about the Code
 - What works less well
 - **Future-proofing** (industry stakeholders only)
 - How effectively is the Code keeping pace with societal change
 - **Information and resources around the Code** (industry and health professionals only)
 - How accessible is it
 - How do users access training, support and advice on using the Code
- Participants were encouraged to make **suggestions to improve the Code**
- ***This summary report*** presents the key findings as follows:
 - Summary across all stakeholders
 - A summary for each stakeholder group (industry, health bodies and Royal Colleges, health professionals and patient organisations)
 - Recommendations based on the findings
- **When we refer to ‘stakeholders’ or specific types of stakeholder e.g. ‘industry’ or ‘patient organisations’, this means those who took part in our research**





Key findings – all stakeholders

Common themes across stakeholder groups

- Awareness of the Code is highest and knowledge most detailed within industry; the majority of respondents from other stakeholder groups are aware of the Code but have much less detailed knowledge and are likely to focus only on sections relevant to them
- Stakeholders are broadly supportive of the Code, i.e. positive about the fact that there is a Code and what it aims to do
- There is scope for improvement in the accessibility of the Code in terms of:
 - Language – there is too much use of jargon / technical language, and the language in general could be simpler
 - Layout/navigability – it could be easier to identify and locate the information needed
 - Clarity – the Code can be open to interpretation and therefore it is not always clear what is and is not permissible under the Code

Other key points from different stakeholder groups

- **Industry**
 - the Code should be modernised in relation to digital technologies
 - the application of sanctions is perceived to be inconsistent and it could be clearer to industry how best to learn from cases where sanctions have been applied
- **Health professionals**
 - ambiguity in the Code and variation in how it is interpreted by different companies makes it difficult to know what is correct
 - generally unlikely to use the Code often and therefore not very familiar with it
 - understanding of the roles of the ABPI and the PMCPA is variable and often vague
- **Patient organisations**
 - similar to health professionals
 - some have negative perceptions of the way that industry uses the Code to shape their interactions with patient organisations





Industry professionals (1)

- There are **high levels of awareness and knowledge** of the Code, its role and what it covers amongst industry professionals participating in the research
- It is seen as **very important** and many of those working in compliance roles use it daily
- Industry professionals feel strongly that the Code **holds industry to account** in behaving ethically. Key functions of the Code are seen as:
 - Protecting patient safety by ensuring appropriate use of medicines
 - Regulating interactions between industry and health professionals
 - Upholding the reputation of the industry
- Some note that they are **proud** to work for companies who adhere to the Code
- Most find it **easy to know whether they are acting in accordance** with the Code
- However, some feel that the Code **inhibits or burdens** industry
 - Guidance could be clarified with more specificity in certain areas, including how to engage with patient organisations; how much and what information can be shared with stakeholders; and what should be certified.
 - A trend of increasingly risk-averse behaviour by industry is identified by participants
- Industry feels that **lack of awareness and knowledge of the Code outside industry inhibits joint work and positive perceptions** of the industry, particularly amongst patients, government and the media
 - Industry stakeholders recognise that the requirements of the Code can sometimes appear obstructive to those outside the industry
 - They feel there is an opportunity to improve perceptions of the industry by raising awareness and understanding of the Code



Industry professionals (2)



- Industry participants do not feel that the Code has **kept up with changes in practice**, in terms of increasing **patient involvement**, and an increasingly **digital world**
 - The Code is not seen to be addressing the implications of these trends sufficiently
 - There is a need for relevant and detailed guidance on these areas
- Industry stakeholders are positive about the **usefulness** of the Code and accompanying resources, and find it **easy to access**. However, many feel that:
 - The **level of detail** in the Code could be improved
 - **Ease of navigation** within the Code could be improved
 - **Language** could be simplified so that it is easier to understand
 - The Code could be more visually appealing
- There is good understanding of the **role of the ABPI** in relation to the Code, and most also understand the **role of the PMCPA** correctly
- However many feel there is **inconsistency in the PMCPA's rulings on complaints**
 - They would like greater transparency, i.e. to know more about the procedures and decision-making around sanctions
 - It was noted that timelines around administering complaints could be too long





- The perceived importance of the Code amongst health body and Royal College participants and their level of knowledge about the Code **varies** from very high to very low
- They recognise its importance and role in **enabling confidence** for patients and health professionals in how the industry conducts its work
- Participants generally understand the **ABPI's role to be in writing and reviewing** the Code, but some are **less clear about the role of the PMCPA**
- The majority of participants in this group believe that the awareness of the Code amongst other stakeholders is insufficient and consider that this **lack of awareness can obstruct joint working**
- Some note that the Code has improved over time in terms of providing **guidance that is practical and comprehensive**, particularly in relation to journal advertising, sponsorship and joint working
- However, they do not think that the Code has **kept up with changes** in practice, especially the move towards more digital technology
- They consider that the **language and layout** of the Code requires improvement:
 - The language used in the Code can be difficult to understand
 - More use of summaries would help readers to find their way around the Code
- This group of stakeholders raised the question of **how the Code's effectiveness is monitored**, and whether clear aims and metrics for measuring the achievement of these may be useful.





Health professionals (1)

- Most health professionals are **aware of but do not have good knowledge** of the Code. Many don't know how it relates to their role, often because they have not (knowingly) encountered a situation in which they might need to refer to the Code.
- However, there is **broad understanding of the purpose of the Code** in terms of enabling self-regulation and supporting accountability and ethical practice within the pharmaceutical industry, particularly in terms of its interactions with health professionals
- Those who have more detailed knowledge of the Code tend to be **familiar only with certain sections**, namely those relating most closely to their roles - including promotion of medicines to health professionals, inducements and incentives, events and publications
- Many see it as **outside their remit** to know the Code in detail, and most are content to rely on companies' interpretation of it, through their interactions with company reps, rather than make their own judgements
- Health professionals are generally aware that the ABPI has a role in relation to the Code but are much less likely to know what the **PMCPA** does
- Overall health professionals are **positive about the Code** and how it guides the conduct of the industry. They find it reassuring, it gives them confidence in the industry and their interactions with the industry, and they identify its **role in protecting** patients, health professionals and the industry itself
- In particular, interviewees identified **positive changes to industry practice** as the Code has developed over the years, which have contributed to **improved reputation** and perceptions of the industry amongst health professionals. The Code helps the industry to be viewed positively in terms of its professionalism and legitimacy.





Health professionals (2)

- In terms of **language, layout and content**, some find it acceptable but many think it makes the Code inaccessible to health professionals and patients. For example it could be made easier and therefore less time-consuming to locate relevant information/sections
- Many welcome the **level of detail** in the Code because it helps make clear what should be done and how in certain situations. This was felt to have improved over time
- Nonetheless some feel there are **grey areas**, that are too open to interpretation and therefore inconsistently applied by different pharmaceutical companies. This can be confusing for health professionals and make them feel unsure as to whether they or companies are doing the right thing
- The information resources available **online** (supplementary guidance, case reports etc) are not widely used by health professionals
- Health professionals tend to **go to colleagues for advice**, particularly pharmacists, if they have questions about something in the Code
- They did not generally express a strong **desire to improve their knowledge** of the Code, but some were open to receiving training or information, for example:
 - From industry
 - As part of their CPD / existing training sessions
 - Through articles in journals





- There is very **high awareness** of the Code amongst patient organisations participating in our research, but **less knowledge** about its specific purposes and what it covers
 - When prompted, the vast majority recognised that the Code has a role in determining how industry interacts with patient organisations and with health professionals
- They understand the ABPI's role to be in writing, reviewing and ensuring compliance with the Code, but are much less clear about the role of the **PMCPA**
- They feel positively about the Code as a way of:
 - Encouraging **transparent and ethical practice**
 - Demonstrating that the industry is held to **high standards**
 - **Protecting** the best interests of patients
- Patient organisations were unsurprisingly most concerned with how effectively the Code works as **a framework for the industry to work with patient organisations**
- Patient organisations are positive about the **potential** of working with industry and want it to be clearly stated in the Code that patient organisations and industry *can* work together
- However, they do not feel the Code is always **clear about interactions between patient organisations and industry**, because of ambiguity and lack of detail and examples that could make it clearer how to interpret the guidance in the Code
- While some feel that the Code effectively prevents the exploitation of these relationships, others are concerned that it is being **misused** by industry to unfairly dictate the terms
 - For example, industry was seen to 'blame' their decisions about interactions with patient organisations on the Code





- Patient organisations feel that they are at a disadvantage in that they often **lack the expertise and time** to properly engage with and understand the detail of the Code, and therefore do not feel able to make their own judgements of whether companies are applying it correctly
 - Therefore they would like a specific summary or document to be produced for patient organisations, focusing on the interactions between the industry and patient organisations and using clear language to explain what patient organisations need to know.
- Some think the Code **inhibits their relationship** with industry (to the detriment of patients) and see requirements as increasingly strict
 - For example about what patient organisations can get funding for; gaining re-approval for projects
- Patient organisations would like to see more information on **the rationale behind the stipulations** in the Code
 - If they could understand these reasons, they would be less likely to feel frustrated or suspicious of companies' motivations in referring to the Code
- Some patient organisations feel that the Code creates a **risk-averse culture** which can be used as an excuse by industry not to work with them
 - More clarity and less room for interpretation may help to address this
 - For example, a clearer definition of 'promotion' to facilitate interaction around clinical trials
- Some patient organisations consider that the Code does not reflect the needs of **rare disease groups**; they think this has a negative effect on these patient groups, as industry is wary about funding, sponsorship or interactions about clinical trials.



Recommendations



The following recommendations are based on the key themes that arose across all stakeholders' input. Addressing these areas would contribute to the ABPI's key aims of developing the Code, improving engagement with it, and better championing the Code.

1. **Improve accessibility** through simplifying language, improving layout and navigability (i.e. making it easy to find and understand the information needed)
2. **Provide materials tailored to specific audiences**, either sections within the Code or supporting / standalone documents (e.g. summaries, FAQs)
3. **Address 'grey areas'** i.e. where the Code is considered too open to interpretation
4. **Consider providing more explanation of the rationale** behind clauses / requirements within the Code, as this may reduce frustration of stakeholders outside industry
5. **Make the Code fit for the digital age**
6. **Raise awareness of the Code** with stakeholders outside of industry
7. **Consider routes for responding to queries** about the Code
8. **Address consistency and transparency around sanctions** processes and outcomes
9. **Establish process for monitoring effectiveness** of the Code (including definition of goals and metrics)
10. **Promote the roles of the ABPI and the PMCPA** as these are currently not consistently understood

Some of this work will require further research and engagement with users of the Code in order to address these points successfully.





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