

18 November 2014

Dr Richard Chadwick  
General Manager  
Adjudication Branch  
Australian Competition and Consumer Commission  
23 Marcus Clarke Street  
CANBERRA ACT 2601

By email to: [adjudication@acc.gov.au](mailto:adjudication@acc.gov.au)

Dear Dr Chadwick

**Re: A91436-A91440 – Medicines Australia Limited – draft determination**

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) welcomes the opportunity to provide feedback to the Australian Competition and Consumer Commission's (ACCC) draft determination in response to Medicines Australia's proposed *Code of Conduct, Edition 18* (Code of Conduct).

Based on our [previous submission in August 2014](#), the RANZCP welcomes and supports the ACCC's proposed imposition of a condition to ensure that all relevant transfers of value by pharmaceutical member companies to individual healthcare professionals are reported and that individual healthcare professionals are identified by name.

To maximise the public benefit of the Code of Conduct, the RANZCP considers it appropriate that healthcare professionals do not have a choice under the Code of Conduct on whether or not they are identified by name in transfer of value reports. This position is consistent with the RANZCP's [ethical guidelines](#), which emphasise the importance of openness and transparency in dealings between individual psychiatrists and pharmaceutical companies, including disclosure of financial or any other arrangements. Currently, under the Code of Conduct, healthcare professionals can refuse to give their consent to their names being included in transfer of value reports and, if they do so, the relevant transfer of value is reported in aggregate form.

Our August 2014 submission also called for transparency reports to be published in one central location rather than on Medicines Australia company websites to maximise the accessibility of the transparency regime.

We note the comment in the ACCC's determination that Medicines Australia "are actively investigating the establishment of a central platform for future disclosure" but that it is still working on several outstanding design and construction issues for the creation of the database.

The RANZCP supports the idea of a central database to enable meaningful analysis, evaluation

and tracking of transfer of value data, however, we would prefer to see the transparency reports being published and made available on an independent website to enhance the public benefit of the transparency regime. In our August 2014 submission, the RANZCP suggested that an appropriate body could be the Australian Institute of Health and Welfare.

Nonetheless, the RANZCP acknowledges that the creation of a central database would be a step forward and it would be a solution more likely to be acceptable to Medicines Australia member companies. Therefore, we endorse the ACCC's statement in the determination that the

ACCC strongly encourages Medicines Australia to dedicate appropriate resources to developing a centralised database and implement it as soon as possible.

If you would like to discuss any of the issues raised in the submission, please contact Dr Anne Ellison, via [anne.ellison@ranzcp.org](mailto:anne.ellison@ranzcp.org), General Manager, Practice, Policy and Projects or by phone on (03) 9601 4918.

Yours sincerely



Dr Murray Patton  
**President**

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