



**Asia-Pacific
Economic Cooperation**



Status Report on Consensus Frameworks in the APEC Region

2020 APEC Business Ethics for SMEs Virtual Forum
13-27 October 2020



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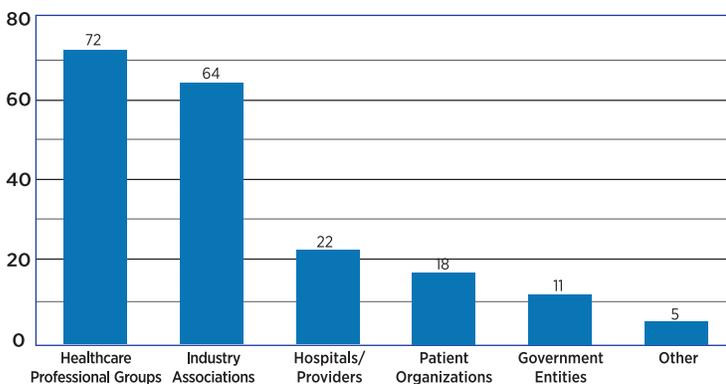


INTRODUCTION

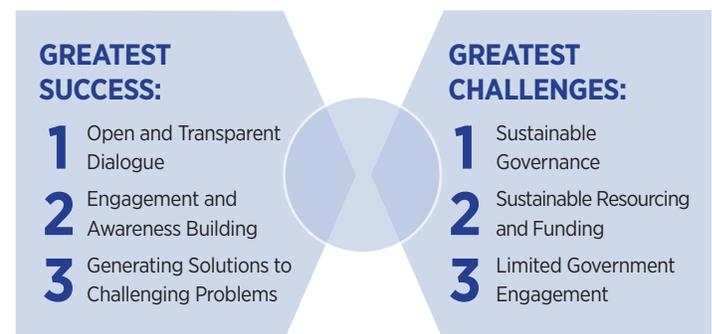
Ethical collaboration among medical device and biopharmaceutical enterprises, industry associations, third-party intermediaries, healthcare professionals and providers, patients, health regulators, and other stakeholders is essential to the delivery of high-quality patient care, patient access to life-saving and health-enhancing medical technologies and therapies, and the development of innovations that meet patient needs. Multi-stakeholder, consensus-based collective action is also vital to successful implementation of the APEC Kuala Lumpur Principles for the medical device sector¹ and APEC Mexico City Principles for the biopharmaceutical sector.² No single group can achieve an ethical environment in these sectors alone. Ethical collaboration among diverse stakeholders also strengthens the ability of APEC economies to respond to and recover from the COVID-19 pandemic, and collaboration underpins the ability of thousands of small and medium-sized enterprises (SMEs) to sustainably operate and engage in cross-border trade. For this reason, APEC Foreign and Trade Ministers, APEC Ministers Responsible for Trade, and APEC SME Ministers have welcomed and encouraged the advancement of formalized “consensus frameworks” for ethical collaboration through the *Business Ethics for APEC SMEs Initiative*, the world’s largest public-private partnership to strengthen ethical business conduct in these sectors. The APEC Nanjing Declaration (2014)³, the APEC Guide

to Facilitate Multi-Stakeholder Ethical Collaborations in the Medical Device and Biopharmaceutical Sectors (2018)⁴, and the annual APEC Business Ethics for SMEs Forum have served as instruments to advance consensus frameworks by diverse parties within APEC economies. Since 2016, nine APEC economies have adopted unique consensus frameworks (Australia, Canada, Chile, China, Japan, Mexico, Peru, The Philippines, and Viet Nam) while parties in several APEC economies actively consider one (such as New Zealand, Thailand, and the United States). These APEC economy-driven efforts build upon the Consensus Framework for Ethical Collaboration adopted in 2014 among several leading international organizations. Several non-APEC economies, such as Brazil, India, and the United Arab Emirates have also been inspired to advance similar consensus framework initiatives. Today, consensus frameworks in the APEC region have brought together 192 public and private organizations representing thousands of companies, hundreds of thousands of healthcare professionals, and millions of patients. This Report provides an overview of the implementation status of each consensus framework currently in place, including the members and activities under each agreement, the greatest successes and challenges, and the impact of COVID-19 on the parties given the importance of reinforcing business ethics and integrity in healthcare amidst the pandemic.

Consensus Framework Parties (By Type)



Top Three Successes and Challenges (2020)



¹ APEC Kuala Lumpur Principles (Medical Device Sector): http://mddb.apec.org/Documents/2011/MM/SMEMM/11_smemm_009.pdf

² APEC Mexico City Principles (Biopharmaceutical Sector): http://mddb.apec.org/Documents/2011/SOM/CSOM/11_csom_021.pdf

³ Nanjing Declaration on Promoting Ethical Environments in the Medical Device and Biopharmaceutical Sectors through 2020: http://mddb.apec.org/Documents/2014/MM/SMEMM/14_smemm_020a.pdf

⁴ APEC Guide to Facilitate Multi-Stakeholder Ethical Collaborations in the Medical Device and Biopharmaceutical Sectors: http://mcprinciples.apec.org/wp-content/uploads/2020/01/18_smewg47_014-1.pdf



International Consensus Framework

Year Proposed: 2013

Date Launched: January 2014

Number of Parties: 6

Stakeholder Participants by Type:

- Patient Organizations
- Hospitals / Healthcare Centers
- Biopharmaceutical Industry
- Healthcare Professionals

Were government authorities involved, either as members or supporters, in the Framework from its outset?

No.

Complete List of Parties:

- World Medical Association (WMA)
- International Alliance of Patient’s Organizations (IAPO)
- International Pharmaceutical Federation (FIP)
- International Council of Nurses (ICN)
- International Hospital Federation (IHF)
- International Federation of Pharmaceutical Manufacturers and Associations (IFPMA)

Organizational structure of the Consensus Framework:

Roundtable of equal partners with a rotating secretariat.

Does the Consensus Framework receive operational or in-kind funding, either from parties or external sources?

Yes, from the parties.

Have the Consensus Framework parties held meetings in 2020?

Yes, on 30 March, 5 May and 6 June

Priorities and activities of the Framework to date:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Align the Framework’s parties’ codes of ethics.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties’ commitment to ethical conduct.
- Gather additional signatories or endorsers of the Framework.

Next steps being considered by the Framework:

- Schedule additional Framework meetings (virtual or in-person) every two months; virtual format for the time being
- Gather additional signatories or endorsers of the Framework.

Greatest success of the Consensus Framework:

The consensus framework is a powerful platform for multi-stakeholder collaboration. The parties have leveraged the platform to work together in strengthening ethics and business integrity as well as a range of additional issues, including anti-microbial resistance, counterfeit medicines, and regulatory standards.

Greatest challenge of the Consensus Framework:

Ensuring close collaboration on a sustained basis, with equitable commitments and contributions.

Specialized collaborations as a result of the COVID-19 crisis:

The consensus framework has been utilized to discuss draft guidance documents amidst COVID-19, including the IFPMA “Ethical Considerations for resuming F2F interactions with HCPs”. The consensus framework partners also support each other on reinforcing common messages on social media platforms.



Australian Ethical Health Alliance

Year Proposed: 2017

Date Launched: July 2018

Number of Parties: 72

New Parties in 2020: 1

Stakeholder Participants by Type (2019):

- Medical Device Industry
- Third Parties / Distributors
- Patient Organizations
- Hospitals / Healthcare Centers
- Biopharmaceutical Industry
- Healthcare Professionals
- Government Authorities
- Private Medical Healthcare Funds

Additions to the type of stakeholder participants:

- Private Medical Healthcare Funds

Were government authorities involved, either as members or supporters, in the Framework from its outset?

X Yes.

Complete List of Parties:

- Arthroplasty Society of Australia
- Assistive Technology Suppliers Australia
- Audiology Australia
- Australasian College of Cosmetic Surgery
- Australasian College of Dermatologists
- Australasian College of Health Service Management
- Australasian College of Paramedicine
- Australasian College of Phlebology
- Australasian College of Sport and Exercise Physicians
- Australasian Leukemia and Lymphoma Group
- Australasian Sleep Association
- Australian and New Zealand Association of Oral and Maxillofacial Surgeons
- Australian and New Zealand College of Anaesthetists
- Australian and New Zealand Sarcoma Association
- Australian and New Zealand Society for Geriatric Medicine
- Australian and New Zealand Society for Vascular Surgery
- Australian and New Zealand Society of Cardiac and Thoracic Surgeons
- Australian and New Zealand Urogenital and

- Prostate Cancer Trials Group Ltd
- Australian College of Emergency Medicine
- Australian College of Nursing
- Australian Dental Association
- Australian Hand Surgery Society
- Australian Healthcare and Hospitals Association
- Australian Knee Society
- Australian Orthopaedic Association
- Australian Orthopaedic Association Medical Legal Society
- Australian Orthopaedic Foot and Ankle Society
- Australian Orthopaedic Trauma Society
- Australian Paediatric Orthopaedic Society
- The Australian Pain Society
- Australian Pharmacy Council
- Australian Private Hospitals Association
- Australian Society of Anaesthetists
- Australian Society of Clinical Immunology and Allergy
- Australian Society of Ophthalmologists
- Australian Society of Otolaryngology Head and Neck Surgery
- Australian Society of Plastic Surgeons
- Australian Traditional Medicine Society
- Breast Cancer Trials
- BUPA
- Complementary Medicines Australia
- Consumer Healthcare Products Australia
- Consumers Health Forum of Australia
- Cosmetic Physicians College of Australasia
- Day Hospitals Australia
- Gastroenterological Society of Australia
- General Surgeons Australia
- Medical Technology Association of Australia
- Medicines Australia
- Melanoma and Skin Cancer Trials Limited
- Musculoskeletal Australia
- National Prescribing Service (NPS) Medicinewise
- National Rural Health Alliance
- Neurological Society of Australia
- Painaustralia
- Praxis Australia
- Private Healthcare Australia

- Royal Australasian College of Dental Surgeons
- Royal Australasian College of Physicians
- Royal Australasian College of Surgeons
- Royal Australian and New Zealand College of Obstetricians and Gynaecologists
- Royal Australian and New Zealand College of Ophthalmologists
- Royal Australian and New Zealand College of Psychiatrists
- Royal Australian College of General Practitioners
- Royal College of Pathologists of Australasia
- Shoulder and Elbow Society of Australia
- Skin Cancer College
- Society of Hospital Pharmacists of Australia
- Spine Society of Australia
- The Thoracic Society of Australia and New Zealand
- Universities Australia
- Urological Society of Australia & New Zealand

Parties added in 2020:

- The Australian Pain Society

Organizational structure of the Consensus Framework:

AEHA is an informal alliance. Participating organisations are members of the Australian Ethical Health Alliance and participate voluntarily. Initial members are those who were signatories of the ACF. At inception, all signatories were made members of AEHA. AEHA is not established as a separate legal entity. Member organisations may withdraw from participation at any time.

The AEHA Steering Committee was established by AEHA member organisations, as at May 2019, to act as a leadership group for the Alliance. The AEHA Steering Committee comprises representatives from member organisations. Their work is guided by terms of reference, which describes the composition and function of the Committee, including its role and responsibilities.

AEHA's structure also currently includes two working groups: The AEHA Symposium Working Group and the AEHA Communications and Media Working Group. These working groups have been established to progress the

Continued on next page



Australian Ethical Health Alliance (AEHA) continued

goals of AEHA, by expressions of interest amongst the member organisations, and report back to the AEHA Steering Committee.

The following documents guide AEHA's governance and organizational structure:

- [AEHA Governance](#)
- [AEHA Steering Committee Terms of Reference](#)

Does the Consensus Framework receive operational or in-kind funding, either from parties or external sources?

X Yes.

AEHA received limited funding. In addition to this, it has received in-kind support from the Australian Orthopaedic Association and has been provided with meeting rooms by the Royal Australasian College of Surgeons and the Australian Government Department of Health.

Have the Consensus Framework parties held meetings in 2020?

X Yes.

Three meetings have occurred as follows:

- AEHA Steering Committee Meeting – 25 February 2020
- AEHA Communications and Media Working Group Meeting – 23 April 2020
- AEHA Steering Committee Meeting – 13 May 2020

Two meetings planned for late 2020:

- AEHA Steering Committee Meeting – 10 August 2020
- AEHA Steering Committee Meeting – 4 November 2020

Priorities and activities of the Framework to date:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties' commitment to ethical conduct.
- Gather additional signatories or endorsers of the Framework.
- Develop common resources and tools for the education of Framework members and/or additional parties, such as training materials.
- Foster public-private coordination of Framework activities.

Next steps are being considered by the Framework:

- Schedule additional Framework meetings. Dates and Type (virtual or in-person):

A regular schedule of four Steering Committee meetings has been determined to be held per year.

Two meetings are planned to be held for late 2020:

- AEHA Steering Committee Meeting – 10 August 2020 (virtual)
- AEHA Steering Committee Meeting – 4 November 2020 (virtual).
- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Develop one common code of ethics for all Framework parties.
- Align the Framework's parties' codes of ethics.

- Enhance the integrity and credibility of organizations in the healthcare sector.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties' commitment to ethical conduct.
- Gather additional signatories or endorsers of the Framework.
- Develop common resources and tools for the education of Framework members and/or additional parties, such as training materials.
- Foster public-private coordination of Framework activities.

Greatest success of the Consensus Framework:

The greatest success has been in the engagement and awareness of the initiative. This is mostly attributed to the high-energy and committed group of leaders that make up the AEHA Steering Committee.

Greatest challenge of the Consensus Framework:

One of the greatest challenges has been in securing funding to continue the initiative's initial momentum and sustain the progress made on encouraging a commitment to ethical practice.

Specialized collaborations as a result of the COVID-19 crisis:

The COVID-19 pandemic has provided a platform for greater engagement amongst AEHA member organisations. In addition to meetings of various groups within the healthcare sector, the AEHA community have been asked to share publications and/or position statements that align with the Australian Consensus Framework's principles that can be promoted through the Alliance, which is hoped to provide an opportunity for collaboration of resources during and beyond the pandemic.



Canadian Consensus Framework

Year Proposed: 2015

Date Launched: June 2016

Number of Parties (2019): 8

New Parties in 2020: 1

Stakeholder Participants by Type (2019):

- Patient Organizations
- Biopharmaceutical Industry
- Medical Device Industry
- Over the Counter Medications Industry
- Healthcare Professionals
- Government Authorities

Additions to the type of stakeholder participants:

- Medical Device Industry

Were government authorities involved, either as members or supporters, in the Framework from its outset?

- Not initially, but later became involved.

Complete List of Parties (2019):

Best Medicines Coalition (BMC)
 Canadian Medical Association (CMA)
 Canadian Nurses Association (CNA)
 Canadian Pharmacists Association (CPhA)
 Consumer Health Products Canada
 Health Charities Coalition of Canada (HCCC)
 Innovative Medicines Canada (IMC)
 MedTech Canada

New Parties in 2020: MedTech Canada

Please describe the organizational structure of the Consensus Framework:

The group meets on a quarterly basis. The Agenda is developed by consensus. Three sub-committees have been established.

1) Governance Subcommittee 2) Membership/ Recruitment Subcommittee 3) Consensus Framework Document Review/ Renewal Subcommittee (Including Vision 2025)

Does the Consensus Framework receive operational or in-kind funding, either from parties or external sources?

X No.

Have the Consensus Framework parties held meetings in 2020?

X Yes.

Two meetings have taken place this year (January 13, 2020 and June 3, 2020). Sub Committees meet separately to advance their objectives.

Priorities and activities of the Framework to date:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties' commitment to ethical conduct.
- Gather additional signatories or endorsers of the Framework.
- Develop common resources and tools for the education of Framework members and/or additional parties, such as training materials.
- Foster public-private coordination of Framework activities.

Next steps being considered by the Framework:

- Schedule additional Framework meetings. Dates and Type (virtual or in-person): August and September 2020
- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties' commitment to ethical conduct.
- Gather additional signatories or endorsers of the Framework.
- Develop common resources and tools for the education of Framework members and/or additional parties, such as training materials.
- Foster public-private coordination of Framework activities.

Greatest success of the Consensus Framework:

- We had a delegation of in 2019 Global Affairs funded 3 Canadian patient representatives to attend the meeting. A fourth Canadian patient representative is a Patient Co-Chair of the APEC Biopharmaceutical Working Group on Ethics; The Canadian delegation also included representation from: The Canadian Medical Association, Government of Canada/ Global Affairs, and Industry/Takeda Canada
- Expansion of membership: Identifying a growth strategy for including other stakeholders in the Canadian Consensus Framework
- Increased membership and participation in Consensus Framework Group - Inclusion of Medical Devices Industry Association as well as Consumer Health Products Association. Increased participation from Global Affairs Canada and participation from the Generic Industry Association
- Developed and disseminated a COVID-19 Statement reinforcing Ethics – statement disseminated to the APEC community as well as to government officials
- Providing input on the future state of Nanjing Declaration and identifying ways that our Framework could support the identified goals and actions.

Greatest challenge of the Consensus Framework:

- Establishing a governance model
- Establishing a clear collaboration and two-way communications model with government
- Establishing sustainable resources and commitment to continue the work of the Consensus Framework Group
- Gaining Recognition of importance and relevance

Specialized collaborations as a result of the COVID-19 crisis:

- We have issued a statement on COVID 19 and the importance of Ethics
- Leveraged the statement to re-engage governments and stakeholders
- In collaboration with APEC Secretariat, organized a Patient Webinar to discuss the challenges of COVID-19 and the impact of patient organizations amongst APEC economies



Chilean Consensus Framework

Year Proposed: 2018

Date Launched: September 2019

Number of parties to the Consensus Framework: 17

Stakeholder Participants by Type:

- Medical Device Industry
- Third Parties
- Distributors
- Patient Organizations
- Healthcare Professionals
- Government Authorities
- Fundación Politopedia

Were government authorities involved, either as members or supporters, in the Framework from its outset?

Yes.

Complete List of Parties as of May 2020

- Alianza Chilena de Agrupaciones de Pacientes (ACHAP)
- Instituto de Salud Pública (ISP)
- Cámara Nacional de Laboratorios (CANALAB)
- Asociación Industrial de Laboratorios Farmacéuticos (ASILFA)
- Sociedad Científica de Dispositivos Médicos (SCDM)
- Cámara de Innovación Farmacéutica (CIF)
- Asociación Gremial de Dispositivos Médicos de Chile (ADIMECH)
- Asociación de Productores Locales de Medicamentos (PROLMED)
- Asociación de Proveedores de la Industria de la Salud (APIS)
- Fundación Politopedia
- Dueños de Farmacias de Chile (UNFACH)
- Asociación Gremial de Farmacias Independientes (AFFI)

- Federación de Enfermedades Poco Frecuente (FENPOF)
- Colegio de Enfermeras de Chile
- Asociación Chilena de Agrupaciones Oncológicas (ACHAGO)
- Asociación de Sociedades Científicas-Médicas de Chile (ASOCIMED)
- Federación Chilena de Enfermedades Raras (FECHER)

Please describe the organizational structure of the Consensus Framework:

Chair is lead by the Under-secretariat for international economic affairs (SUBREI) and ad-hoc groups of members to advance certain tasks.

Does the Consensus Framework receive operational or in-kind funding, either from parties or external sources?

No.

Have the Consensus Framework parties held meetings in 2020?

Yes.

In 2020, the first meeting was in January and then roughly every 2-3 weeks thereafter.

Priorities and activities of the Framework to date:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Converge the Framework’s parties to one common code of ethics.
- Align the Framework’s parties’ codes of ethics.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties’ commitment to ethical conduct.

- Gather additional signatories or endorsers of the Framework.
- Foster public-private coordination of Framework activities.

Next steps being considered by the Framework:

- Schedule additional Framework meetings. Dates and Type (virtual or in-person): Every 2-3 Weeks
- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Align the Framework’s parties’ codes of ethics.
- Enhance public awareness of the Framework and the parties’ commitment to ethical conduct.
- Gather additional signatories or endorsers of the Framework.
- Foster public-private coordination of Framework activities.

Greatest success of the Consensus Framework:

This public-private partnership has fostered trust, alignment, and commitment among diverse parties to create an ecosystem that provides open and transparent dialogue for the first time.

Greatest challenge of the Consensus Framework:

Generated consensus towards a common ethical standard as well as enhanced awareness to consider the patient at the center of any decision-making process among the stakeholders.

Specialized collaborations as a result of the COVID-19 crisis:

The Chilean Consensus Framework has prepared a statement reinforcing our commitment to high standard ethics and integrity amidst the COVID-19 pandemic.



Chinese Consensus Framework

Year Proposed: 2017

Date Launched: July 2018

Number of Parties (2019): 25

Stakeholder Participants by Type:

- Medical Device Industry
- Third Parties / Distributors
- Biopharmaceutical Industry
- Hospitals / Healthcare Centers

Were government authorities involved, either as members or supporters, in the Framework from its outset?

X No.

Complete List of Parties:

- China Pharmaceutical Industry Association (CPIA)
- China Chamber of Commerce for Import & Export of Medicines & Health Products (CCCMHPIE)
- R&D-based Pharmaceutical Association Committee of China Association of Enterprises with Foreign Investment (RDPAC)
- China Association of Traditional Chinese Medicine (CATCM)
- China Pharmaceutical Innovation and Research Development Association (PhIRDA)
- China Association of Pharmaceutical Commerce (CAPC)
- China Nonprescription Medicines Association (CNMA)
- Chinese Hospital Association (CHA)
- China Pharmaceutical Enterprises Development Promote Association (CPEP)
- China Association for Medical Devices

Industry (CAMDI)

- China Medicinal Biotech Association (CMBA)
- China National Pharmaceutical Packaging Association (CNPPA)
- China Pharmaceutical Association of Plant Engineering (CPAPE)
- China Biochemical Pharmaceutical Industry Association (CBPIA)
- Chinese Non-government Medical Institutions Association (CNMIA)
- PSM Foundation
- Beijing Pharmaceutical Profession Association (BPPA)
- Shanghai Pharmaceutical Profession Association (SPPA)
- Hebei Pharmaceutical Profession Association (HBPPA)
- Shandong Pharmaceutical Profession Association (SDPPA)
- Jiangsu Pharmaceutical Profession Association (JSPPA)
- Shaanxi Pharmaceutical Profession Association (SPPA)
- Liaoning Pharmaceutical Profession Association (LNPPA)
- Fujian Pharmaceutical Profession Association (FJPPA)
- Zhejiang Pharmaceutical Industry Association (ZJPIA)

Organizational structure of the Consensus Framework:

Informal structure with CPIA, CCCMHPIE, PhIRDA, and RDPAC serving a leadership role in consensus framework meeting organization as well as related activities, such as the annual China Consensus Framework survey and report.

Does the Consensus Framework receive operational or in-kind funding, either from parties or external sources?

X No.

Have the Consensus Framework parties held meetings in 2020?

X No.

Priorities and activities of the Framework to date:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Align the Framework's parties' codes of ethics.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties' commitment to ethical conduct.
- Foster public-private coordination of Framework activities.

Next steps being considered by the Framework:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Align the Framework's parties' codes of ethics.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties' commitment to ethical conduct.
- Foster public-private coordination of Framework activities.



Japanese Consensus Framework

Year Proposed: 2018

Date Launched: July 2018

Number of Parties: 8

Stakeholder Participants by Type:

- Medical Device Industry
- Patient Organizations
- Biopharmaceutical Industry
- Healthcare Professionals
- Government Authorities

Were government authorities involved, either as members or supporters, in the Framework from its outset?

X Yes.

Complete List of Parties:

- Japan Patients Association
- Japan Federation of Cancer Patient Groups
- Japanese Nursing Association
- The Federation of Pharmaceutical Manufacturers' Associations of Japan
- The Japan Federation of Medical Devices Associations
- Japan Pharmaceutical Association
- Japan Medical Association
- Ministry of Health, Labour, and Welfare

Organizational structure of the Consensus Framework:

The Federation of Pharmaceutical Manufacturers' Associations of Japan (FPMAJ) serves as the current secretariat for the Japan Consensus Framework and all parties are of equal status.

Does the Consensus Framework receive operational or in-kind funding, either from parties or external sources?

X No.

Have the Consensus Framework parties held meetings in 2020?

X No.

Members agreed to meet in July 2020, but that was cancelled due to COVID-19. We will plan to meet in September ahead of the 2020 APEC Business Ethics for SMEs Forum. Our last meeting was held on 6 Dec 2019.

Priorities and activities of the Framework to date:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Develop common resources and tools for the education of Framework members and/or additional parties, such as training materials.

Next steps being considered by the Framework:

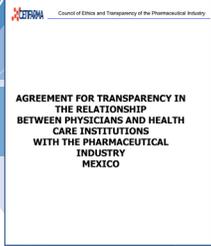
- Schedule additional Framework meetings.
- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Enhance public awareness of the Framework and the parties' commitment to ethical conduct.

Greatest success of the Consensus Framework:

Our greatest successes include developing the first-ever local platform where relevant local healthcare stakeholders, especially patient groups (upholding the patients first principle), can get together and discuss business ethics matters and issues. We have also held periodically meetings and created a Tokyo Consensus Framework Memorial Day on July 20 to enhance public awareness.

Greatest challenge of the Consensus Framework:

Our greatest challenge is to set collective goals for the members.



Mexico Agreement for Transparency

Year Proposed: 2007

Date Launched: October 2007

Number of parties as of May 2020: 13

Stakeholder Participants by Type:

- Medical Device Industry
- Hospitals / Healthcare Centers
- Biopharmaceutical Industry
- Healthcare Professionals
- Government Authorities
- National Commission of Bioethics
- Universities / Medicine Schools

Were government authorities involved, either as members or supporters, in the Framework from its outset?

X Yes.

Complete List of Parties:

- Academia Nacional de Medicina de México
- Cámara Nacional de la Industria Farmacéutica en México
- Comisión Nacional de Bioética
- Consejo de Ética y Transparencia de la Industria Farmacéutica
- Academia Mexicana de Cirugía
- Academia Mexicana de Pediatría
- Colegio Médico de México
- Asociación Nacional de Hospitales Privados
- Facultad de Medicina, Universidad Nacional Autónoma de México
- Escuela Superior de Medicina, Instituto Politécnico Nacional
- Instituto Mexicano del Seguro Social
- Instituto de Seguridad y Servicios Sociales de los Trabajadores del Estado
- Secretaría de Salud

Organizational structure of the Consensus Framework:

The Head of the agreement is the General Council of Health and this entity has a follow-up committee that consistent of one representative from each signatory who is in charge of promoting compliance, identifying deviations, and suggesting appropriate measures to correct them.

Does the Consensus Framework receive operational or in-kind funding, either from parties or external sources?

X No.

Have the Consensus Framework parties held meetings in 2020?

X No.

Priorities and activities of the Framework to date:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Align the Framework’s parties’ codes of ethics.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties’ commitment to ethical conduct.
- Gather additional signatories or endorsers of the Framework.
- Foster public-private coordination of Framework activities.

Next steps being considered by the Framework:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties’ commitment to ethical conduct.
- Gather additional signatories or endorsers of the Framework.
- Foster public-private coordination of Framework activities.

Greatest success of the Consensus Framework:

- Solve specific problems in the interaction between Biopharmaceutical Industry and other Stakeholders, and reflect in laws agreements of the Consensus Framework.
- Enhance the dialogue about ethics, bioethics, integrity and transparency among different stakeholders.

Greatest challenge of the Consensus Framework:

Follow-up for the parties has slowed because there are new public officials in government and it will require more time to resume this mechanism.



Peruvian Consensus Framework



Year Proposed: 2016

Date Launched: Sept 2016

Number of parties as of May 2020: 22

Stakeholder Participants by Type:

- Medical Device Industry
- Third Parties / Distributors
- Patient Organizations
- Biopharmaceutical Industry
- Healthcare Professionals
- Government Authorities
- Pharmacies Associations
- Clinics Associations

Were government authorities involved, either as members or supporters, in the Framework from its outset?

Yes.

Complete List of Parties (2019):

Dirección General de Medicamentos, Insumos y Drogas- DIGEMID

Superintendencia Nacional de Salud- SUSALUD

Centro Nacional de Abastecimiento de Recursos Estratégicos en Salud CENARES

Comision de Alto Nivel Anticorrupción- Presidencia del Consejo de Ministros

Sociedad de Comercio Exterior del Perú- COMEX Perú

Asociacion de Industrias Farmacéuticas Nacionales- ADIFAN

Confederacion Nacional de Instituciones Empresariales Privadas- CONFIEP

Comité de Productos para la Salud- COMSALUD –Cámara de Comercio de Lima

Asociación Nacional de Laboratorios Farmacéuticos- ALAFARPE

Asociacion de Laboratorios Farmacéuticos Latinoamericanos- ALAFAL

Asocacion Nacional de Cadenas de Boticas -ANACAB

Colegio Médico del Perú

Colegio Químico Farmacéutico del Perú

Asociacion de Clínicas Particulares del Perú

ESPERANTRA

Asociacion PROSA

Asociacion Benéfica PRISMA

Servicio de Medicinas PROVIDA

Red Peruana de Pacientes y Usuarios

Sociedad Peruana de Farmacia Hospitalaria

Accion Internacional para la Salud- AIS

MeTA Peru

Organizational structure of the Consensus Framework:

The organizational structure is lead by DIGEMID and the participation of the other members.

Does the Consensus Framework receive operational or in-kind funding, either from parties or external sources?

No.

Have the Consensus Framework parties held meetings in 2020?

No.

Priorities and activities of the Framework to date:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Converge the Framework’s parties to one common code of ethics.
- Align the Framework’s parties’ codes of ethics.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties’ commitment to ethical conduct.
- Gather additional signatories or endorsers of the Framework.
- Develop common resources and tools for the education of Framework members and/or additional parties, such as training materials.
- Foster public-private coordination of Framework activities.

Next steps being considered by your Framework:

- Schedule additional Framework meetings (virtual or in-person): virtual
- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Develop one common code of ethics for all Framework parties.
- Align the Framework’s parties’ codes of ethics.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Promote public confidence and trust in the health system.
- Enhance public awareness of the Framework and the parties’ commitment to ethical conduct.
- Gather additional signatories or endorsers of the Framework.

Greatest success of the Consensus Framework:

The greatest successes include promoting a better dialogue between the members as well as aligning the different code of ethics. The consensus framework has also enhanced the position of government leaders to promote ethical conduct in the health sector.

Greatest challenge of the Consensus Framework:

The greatest challenges include getting additional members involved as well as gathering more significant data to pursue further objectives.

Specialized collaborations as a result of the COVID-19 crisis:

The consensus framework should be improving dialogue among members in virtual spaces to contribute on ethics on the health sector during the COVID -19 crisis.



Philippines Consensus Framework

Year Proposed: 2018

Date Launched: Nov 2018

Number of Parties (2019): 17

Additions to the number of parties as of May 2020: 1

Stakeholder Participants by Type (2019):

- Medical Device Industry
- Patient Organizations
- Hospitals / Healthcare Centers
- Biopharmaceutical Industry
- Healthcare Professionals

Were government authorities involved, either as members or supporters, in the Framework from its outset?

X No.

Complete List of Parties (2019):

- Philippine Alliance of Patient Organizations (PAPO)
- Philippine Medical Association (PMA)
- Philippine Pharmacists Association (PPhA)
- Philippine Nurses Association (PNA)
- Pharmaceutical and Healthcare Association of the Philippines (PHAP)
- Association of Nursing Service Administrators of the Philippines (for ceremonial signing)
- Institute for Solidarity in Asia (ISA)
- Philippine Association of Medical Device Regulatory Affairs Professionals (PAMDRAP)
- Medicines Transparency Alliance (MeTA)
- Region 1 Medical Center (RIMC)
- Mariano Marcos Memorial Hospital and Medical Center
- Tondo Medical Center
- Navotas City Hospital
- Southern Philippines Medical Center (SPMC)
- Ilocos Training and Regional Medical Center (ITRMC)

Philippine Hospitals Association (for ceremonial signing)
Dr. Paulino J. Garcia Memorial Research & Medical Center (for ceremonial signing)

Additions to the List of Parties as of May 2020:

- Association of Nursing Service Administrators of the Philippines (formally signed)
- Philippine Hospitals Association (formally signed)
- Dr. Paulino J. Garcia Memorial Research & Medical Center (formally signed)
- Bataan General Hospital and Medical Center

Organizational structure of the Consensus Framework:

The main conveners are based in metro Manila but several are based in various parts of the economy. There is no formal structure.

Does the Consensus Framework receive operational or in-kind funding, either from parties or external sources?

X No.

Have the Consensus Framework parties held meetings in 2020?

X No.

Priorities and activities of the Framework to date:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Align the Framework’s parties’ codes of ethics.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Gather additional signatories or endorsers of the Framework.
- Develop common resources and tools for the education of Framework members and/or additional parties, such as training materials.
- Foster public-private coordination of

Framework activities.

Next steps being considered by your Framework:

- Schedule additional Framework meetings: virtual or in-person.
- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Align the Framework’s parties’ codes of ethics.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Gather additional signatories or endorsers of the Framework.
- Develop common resources and tools for the education of Framework members and/or additional parties, such as training materials.
- Foster public-private coordination of Framework activities.

Greatest success of the Consensus Framework:

Successes include: (1) the involvement of Philippine affiliates of organizations that originally endorsed the Consensus Framework; and (2) the involvement of signatories from various parts of the economy.

Greatest challenge of the Consensus Framework:

Challenges include: (1) meeting and updating all the signatories, and (2) confirming more signatories, including the government.



Viet Nam Consensus Framework



Year Proposed: 2017

Date Launched: September 2017

Number of parties as of May 2020: 9

Stakeholder Participants by Type (2019):

- Medical Device Industry
- Patient Organizations
- Biopharmaceutical Industry
- Healthcare Professionals
- Additional Stakeholders Not Listed

Were government authorities involved, either as members or supporters, in the Framework from its outset?

Yes. (Supporter)

Complete List of Parties (Full Names of Each Organization) (2019):

- Viet Nam Medical Association
- Viet Nam Women Union
- Vietnamese Pharmaceutical Association
- Viet Nam Pharmaceutical Companies Association
- Viet Nam Medical Equipment Association
- Healthcare Committee, American Chamber of Commerce in Viet Nam
- Pharma Group, EuroCham
- International Quality Medicines - Generic & Biosimilar (formerly International Quality Generics Sector Committee), EuroCham
- Medical Devices and Diagnostics, EuroCham

Please describe the organizational structure of the Consensus Framework:

Informal structure of equal parties. The Pharma Group serves as de facto secretariat for consensus framework sessions and activities.

Does the Consensus Framework receive operational or in-kind funding, either from parties or external sources?

No.

Have the Consensus Framework parties held meetings in 2020?

No.

Priorities and activities of the Framework to date:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Promote public confidence and trust in the health system.
- Foster public-private coordination of Framework activities.

Next steps being considered by the Framework:

- Promote better dialogue, collaboration and interaction among organizations in and working with the healthcare sector.
- Enhance the integrity and credibility of organizations in the healthcare sector.
- Promote public confidence and trust in the health system.
- Foster public-private coordination of Framework activities.

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