

FIFTH PIPA NHS MEDICINES INFORMATION PHARMACISTS (UKMI) CUSTOMER SURVEY

PIPA Standards Working Party

Abstract

A fifth PIPA UKMi survey, initiated by the PIPA Standards Working Party was conducted in the second quarter of 2007. The purpose was to assess the service provided by Industry Medical Information Departments to one of their major customer groups, Hospital Medicines Information Pharmacists and to monitor trends.

Methodology

The survey took place on one working day unknown to the industry on which hospital medicines information pharmacists were asked to complete a survey form assessing the service provided each time they contacted the industry. The criteria assessed were the same as the previous 4 surveys. Information was also collected on the use made of the information and the reasons for contacting the industry.

Demographics

12/14 regions in Great Britain and Ireland took part in this year's survey. Of the 133/199 (67%) centres responding, 68 (51%) had contacted the industry on the survey day and 49% had not. This contact rate is lower than previous surveys. The results of this survey are based on 133 forms evaluating a response to a specific enquiry.

Results

For 87% of questions, the enquirer was able to contact the industry easily. Ratings of 'good'/'excellent' were given for: 'Telephone manner' 96%, 'Knowledge/ competence' 86%, and 'Overall level of service' 88% (where stated). Where assessable, 89% of enquiries were answered within an acceptable timescale. For 81% of calls it was felt that the company could not have done more.

Information requested was used as follows: 59% for a decision on the management of existing (46 %) or future (13%) patients, 16% for a decision on shelf-life/stability, 22 % for 'other' purposes, 1% of responses for education/ research or private study, and in 1% for formulary decisions.

The most common reasons for contacting the company were: 37% as a more comprehensive source of information, 33% as the only source of the information, 13% as a reliable source, 7% because it was 'quicker' and in 11% other reasons were given.

A sub-analysis of the small number of responses receiving a 'poor'/'very poor' overall rating identified that a number of factors influenced this rating including poor access, knowledge/ competence, timeliness and telephone manner.

In contrast, the main determinants of an 'excellent' overall service rating were a high level of ease of access to the Medical Information Department plus 100% timeliness and 100% good/excellent ratings in both knowledge/competence and telephone manner.

Conclusions

The results from this survey indicate that industry medical information departments continue to provide a valuable resource for this important customer group with the overall service being good or excellent in over 88% of occasions where rated.

This year's survey has seen a number of changes from previous surveys:

- Reduction in the number of contacts to the Industry
- Reduction in the number of enquiries where the information was used for a decision on management of an existing patient and for private study/education
- A reduction in the proportion of contacts where the reason was that industry was the only source of information.
- An increase in the proportion of contacts where the reason was that industry was a reliable source of information.

The possible reasons for these changes are discussed within the report.

Background

This is the fifth full PIPA UKMI customer survey of the service provided to hospital medicines information pharmacists by industry medical information departments. For the purpose of this survey, 'Hospital Medicines Information Pharmacists' includes medicines information pharmacists based in local Medicines Information centres and those based in Regional Medicines Information centres (which may or may not be located in a hospital). Previous surveys took place in the last quarter of 2003, the first quarter of 2002 and the last quarters of 1999 and 2000.

The purpose of the survey was to continue to gain feedback from this important customer group in order to encourage continuous improvement of medical information services by the industry.

Methodology

This survey took place during the second quarter of 2007. As with previous surveys, the date of the survey was only known to the medicines information pharmacists and not to any members of the Industry or those involved with the analysis of the findings. Although initially, it was planned for this to be an annual survey, over time, it was felt that this was too short an interval to enable results to be analysed, communicated and to enable improvements to be made. Therefore the interval has been gradually increased over time (see table below).

Survey Year	Interval since last survey
1999	
2000	1 year
2002	1.25 years
2003	1.5 years
2007	3.5 years

During the first quarter of 2005, PIPA conducted a pilot reverse survey of UKMi departments. During this pilot survey, 12 Industry Medical Information Centres assessed various issues including telephone manner, whether sufficient background searches had been completed before contacting the industry and whether sufficient information was provided in order for a satisfactory reply to be provided.

For this year's survey, a similar customer service survey questionnaire to the 2003 survey was used (see [Appendix 1](#)). A consistent form was used to permit direct comparison between surveys.

Customer service survey questionnaires, together with a covering letter, were distributed by Fiona Woods (Director of the Welsh Medicines Information Centre) to medicines information pharmacists in Great Britain and Ireland via the regional medicines information network. On the chosen day, all medicines information pharmacists were asked to complete a questionnaire each time they contacted the industry to assess the service provided. In addition, individual centre return forms (number of staff answering enquiries in the centre on the survey day, number contacting the industry and number of forms returned) and regional return forms (total number of centres in region sent forms and number of centres returning forms) were used.

Because of the nature of the survey, and the relatively small volume of data, no formal statistical analysis was conducted.

Participating Centres and Response rates

This year, for administrative reasons, only 12 of the 14 regions of the British Isles represented by UKMi participated in the survey, compared with all 14 for the last survey. This meant that only 199/231 (86%) of centres took part. This represents a reduction of approximately 20% from the last survey.

A total of 199 centres (246 last survey) were sent survey forms. Responses were received from 133 (67%) centres. This included both regional and local centres. This response rate was slightly lower than the 71% response rate for the previous survey which had been the highest response rate to date. As in previous years, there was a regional variation in the proportion of centres responding (range 33% to 92%). From conversations with some of the regional centres after the survey, it was suggested that where there was not a response from a centre, this was most likely to be because nobody had contacted the industry on the survey day.

Of the 133 centres responding, 68/133 (51%) had contacted the industry on the survey day and 65 (49%) had not. This is a substantial decrease from the last survey when 69% of the responding centres had contacted the industry. A total of 133 forms evaluating a response to a specific enquiry were received (vs 239 in 2003 and 218 in 2002). This number is a considerable reduction on previous years. Even taking into account that only 12/14 regions participated, the number of industry contacts is less than the previous survey. 133 survey responses represented the experience of 91 Medicines Information Pharmacists on the survey day. This is discussed further in the results section.

The following figures relate to the findings from the 133 forms completed:

Companies contacted.

A total of 65 named companies were contacted (2 not specified) during the survey (95 in 2003 and 83 in 2002). This represents a reduction of approximately 30% from the previous survey. The number of contacts per company ranged from 1-11 (mean 2 (2.5 in 2003 and 2.6 in 2002)). The range of contacts per company was less than the last survey. In this survey 65% (55% in 2003 and 50% in 2002) of companies had one call and 89% had 3 or less (82% in 2003 and 79% in 2002). The distribution of numbers of contacts per company (together with comparative data for the previous 4 years) is detailed below:

Contacts per company	2007	2003	2002	2000	1999
1	42	52	51	56	47
2	11	20	10	11	10
3	5	6	8	12	9
4	3	4	5	3	3
5		2	3	4	1
6		2	2	5	3
7	2	3	0	1	1
8	1		1	1	1
9	1	3	1		2
10			2		1

Contacts per company	2007	2003	2002	2000	1999
11	1		0		2
12		2	0		
13			3	1	
14					
15				1	1
16					
17					
18					
19		1			

A list of companies contacted can be found in [Appendix 2](#). It should be born in mind that the companies contacted are all perceived by the customers in this survey as ‘Pharmaceutical Industry’. However, the list of companies includes both traditional research-based pharmaceutical companies, specials manufacturers, plus companies providing generic products, parallel imports, specialist imports, medical devices, consumer products, and biotech products.

A brief review of the 65 named companies contacted found that approximately:

- 60% have at least one PIPA member (although the member may not be within the Medical Information department)
- 48% are members of ABPI (Association of the British Pharmaceutical Industry)
- 25% are members of PAGB (Proprietary Association of Great Britain)
- 9% are members of BGMA (British Generic Manufacturers Association)

Some companies have multiple memberships. However, of the 65 companies listed, 19 (30%) companies are not members of any (although it is possible that some of the smaller companies may contract out their MI activities to a service that does have PIPA members).

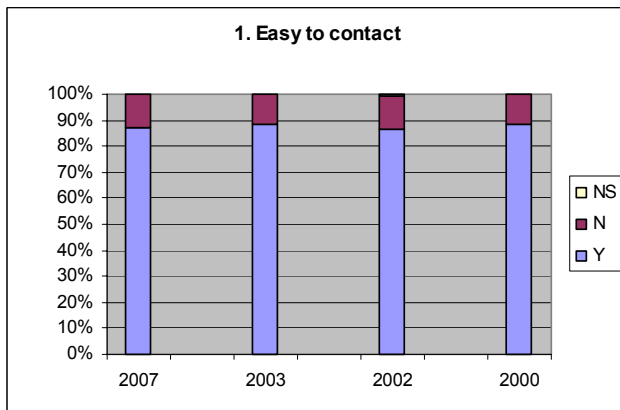
Therefore, based on this data, it is possible that at least 30% of companies contacted on the survey day could have been unaware of the PIPA Standards for Medical Information Services. This figure is more likely to be higher as the PIPA Standards have previously been publicised via the ABPI and PIPA with only 41 (63%) of companies contacting being a member of at least one association.

Results

(full summary table in [Appendix 3](#))

- *Q1-Access – Was it easy to contact the Medical Information Department?*

For **87%** (88% in 2003, 87% in 2002, 89% in 2000 and 1999) of questions the enquirer was able to contact the Medical Information Department (not just the company) easily. In 13 % of questions (12% in 2003 and 2002, and 11% in 1999 and 2000) it was not.

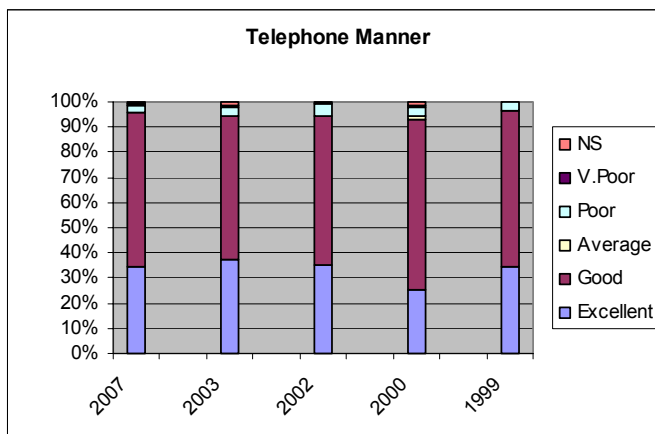


These figures have been similar for all surveys to date. However a number of respondents commented on difficulties experienced as a result of e.g. the Medical Information contact number not being published, use of ansaphones, all Medical Information staff being at a meeting (see *Appendix 5*).

Although access is generally very good, there were still 17 occasions on this single survey day where the Medical Information Department was not easy to contact. Based on 225 working days per year, this could equate to 3825 occasions where a Medicines Information Pharmacist is unable to easily contact the correct person to answer their question

- *Q2- Telephone manner - How would you rate the telephone manner of the staff?*

In **95.5%** (95% in 2003, 94% in 2002, 93% in 2000, 96% in 1999) of enquiries, the telephone manner was rated as 'good' (61%) or 'excellent' (35%). In a further 3%, telephone manner was rated as 'poor' and in 1 case 'very poor'. In 1 case the telephone manner was not assessed.



- *Q3-Knowledge/Competence of Medical Information staff- How would you rate the knowledge/competence of the Medical Information staff?*

For **86%** (86% in 2003, 87 % in 2002, 82% in 2000, 86% in 1999) of enquiries, the knowledge/competence of medical information staff was rated as ‘good’ (66 %) or ‘excellent’ (20%). In 10% of enquiries the rating was ‘poor’ (8%) or ‘very poor’(2% - 3 cases). In 4%, no rating was selected.



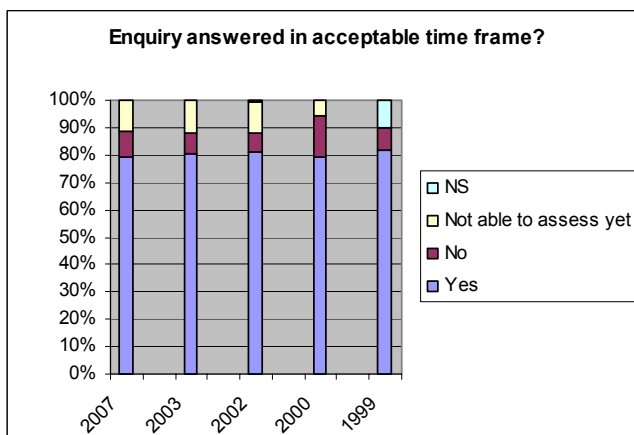
The overall proportion of ‘poor’/‘very poor’ responses was similar to the previous survey.

It is interesting that a number of comments where the overall level of service was ‘poor’ or ‘very poor’ commented on the company being unable or unwilling to provide any information outside the SPC.

For a high proportion of enquiries from Medicines Information Pharmacists, the reason for contacting the company relates to a decision about patient management and therefore it is essential that the enquirer can feel confident in the information provided. It is reassuring that there has been an increase in the proportion of contacts where the enquirer contacted the company because it was considered a reliable source of information (*see also Question 7*).

- *Q4- Timeliness - Was your enquiry resolved within an acceptable time?*

In **79%** (80% in 2003, 81% in 2002, 79% in 2000, 81.6% in 1999) of enquiries the information was provided within an acceptable time-frame. In 10% of enquiries it was not (8% in 2003, 7% in 2002). In 11% it was not possible to assess yet. This is similar to the last survey.

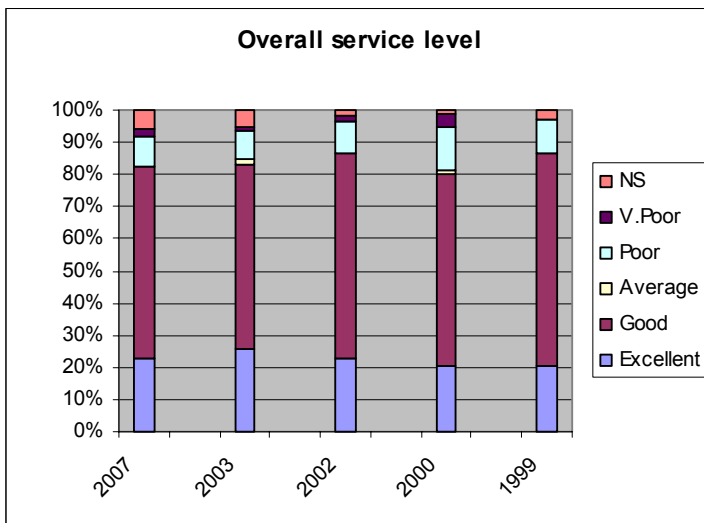


Considering only those 118 enquiries where an assessment of timeliness was possible, 89% (91% in 2003, 92% in 2002) were answered within an acceptable time-frame and 11% were not.

- *Q5 Overall level of service - Overall, how would you rate the level of service provided?*

For **83%** (84% in 2003, 87% in 2002, 80% in 2000, 86% in 1999) of enquiries the overall level of service was rated as ‘good’ (60%) or ‘excellent’ (23%).

In 11% (10% in 2003, 12% in 2002) of enquiries, the level was rated as ‘poor’ (9%) or ‘very poor’ (2%). A further 6% did not specify a service level.



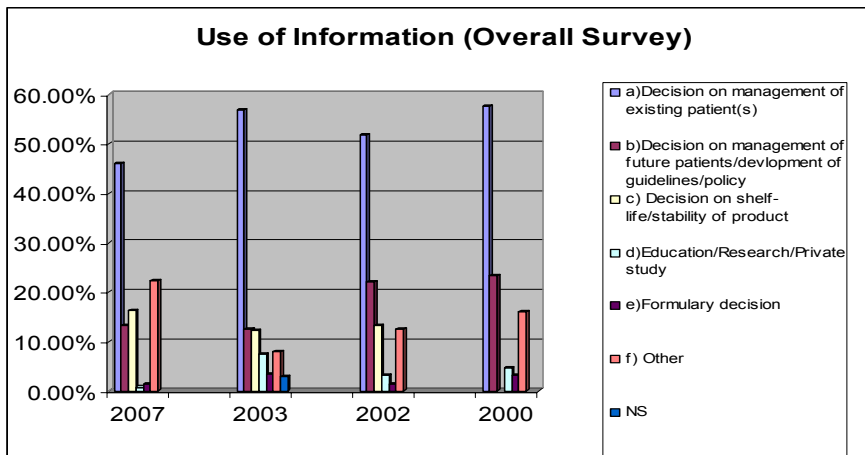
Considering only those enquiries where an assessment of overall service was made, the overall service was rated ‘good’/‘excellent’ in 88% and ‘poor’/‘very poor’ in 12%. This was similar to last year’s findings.

Although the overall good/excellent service rating of 88% is encouraging, there were still 15 occasions when the overall service was rated as ‘poor’ or ‘very poor’. This could equate to 3375 occasions a year.

A separate analysis has been performed on the subgroup where the overall level of service was rated as ‘poor’ or ‘very poor’.

- *Q6- The information provided was used for: (more than one category can be chosen)*

In 59% (70% in 2003, 74% in 2002) of cases, the information requested was used for a decision on the management of existing (46 %) or future (13%) patients. In 16% (12% in 2003) of cases it was used for a ‘decision on shelf-life/stability’, in 22% (8 % in 2003) for ‘other’ purposes (see [Appendix 4](#)), although in the large majority of cases, these could be re-classified into one of the other categories. In less than 1% of cases (8% in 2003, 3% in 2002) the information was used for education/ research or private study, and in 1% (3% in 2003, 1% in 2002) for formulary decisions.

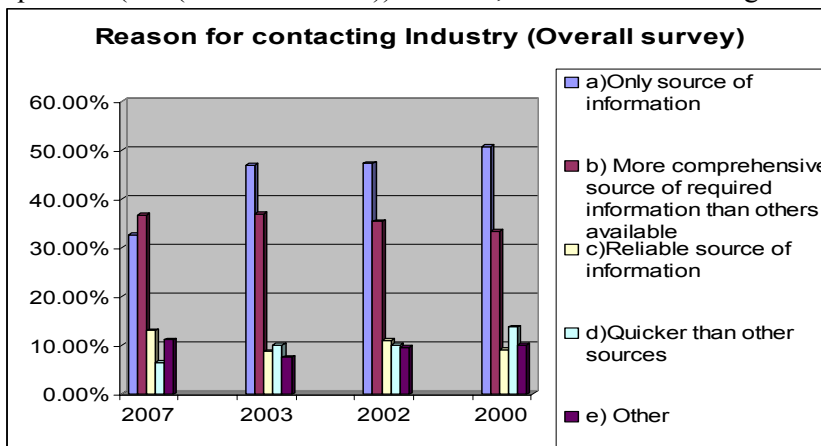


This year, there has been a large reduction in the proportion of enquiries directly relating to decisions on patient management (a reduction of 11 percentage points since the last survey). This has solely been as a result of a decrease in enquiries relating to a decision on the management of an existing patient (46% this year vs 57% in 2003).

- Q7 - For which reasons did you choose to contact the company for information? (more than one category can be chosen)

The most common reasons for contacting the company were that it was a more comprehensive source of the required information (37% (vs 37% in 2003 and 35% in 2002)) and that it was the only source of information (33% (vs 47% in both 2003 and 2002)).

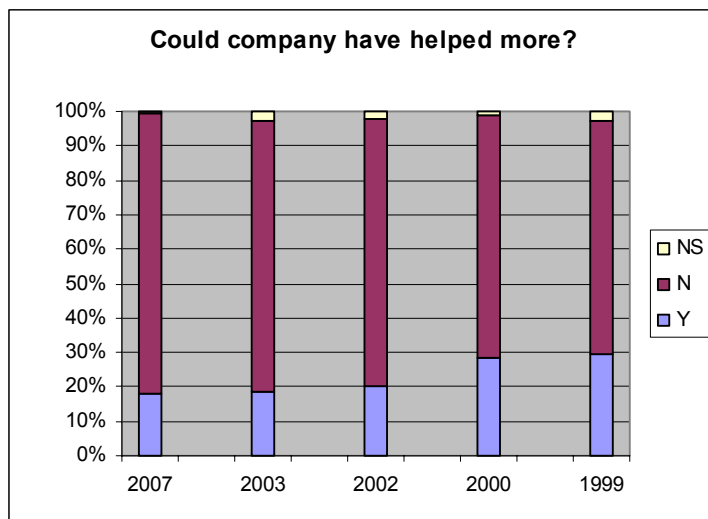
This was followed by it being a reliable source (13% (vs 9% in 2003 and 11% in 2002)) and 'quicker' (7% (vs 10% in 2002)). In 11%, other reasons were given (see [Appendix 4](#)).



These results show a different pattern from previous years. The proportion of enquiries where the reason given for contacting the company was 'because it was a more comprehensive source of information' has remained similar over the past 3 surveys. However, the main change in reasons for contacting the industry appears to be a reduction in the number of contacts (from 47% to 33%) where it was the only source of information. In addition, there has been a small decrease in the number of contacts to companies because it is considered to be quicker (a reduction from 10% to 7%). There has, however been an increase (13% vs 9%) in the proportion of contacts with the industry because it is a reliable source.

- Q8- Could the company have helped you better in any way?

For 81% (vs 79% in 2003, 78% in 2002) of enquiries, the responder felt that the company could not have helped them better. However for 24 (18%) enquiries (18% in 2003, 20% in 2002), the enquirer felt that the company could have helped them more. In 1%, no option was chosen.



Although there has been a slight increase in the proportion of enquiries where the enquirer felt that the company could not have helped them more, the proportion of enquiries where it was felt that the company could have helped more, remains at 18%.

Of the 24 cases where the enquirer felt that the company could have helped them more, 13 (54%) rated the overall service as 'poor'/'very poor'. 3 (13%) didn't make an assessment. In 8 cases, despite giving an overall service rating of 'good', it was still felt that the company could have helped more. Notably, in no case where the customer thought that the company could help helped more was an overall service level of 'Excellent' given.

30 responders described their experiences and offered suggestions of how companies could have helped them better. A table of the comments (plus some spontaneous comments) is attached in [Appendix 5](#). The main areas where these enquirers expressed dissatisfaction related to access to the Medical information Department, not providing information outside the SPC and timeliness in response. It is worth noting that in the reverse survey conducted in 2005⁽¹⁾, 16% of enquiries related to off-label use (the second highest category after product-specific pharmaceutical data (33% enquiries).

Sub-analyses

In order to identify the key factors which contributed to a 'poor/very poor' overall service rating and to an 'excellent' rating a 'sub-analysis' was completed on two separate groups of responses – those where the overall service was rated as poor/very poor and those where the overall service was rated as excellent. It was hoped that these analyses would help identify key areas for improvement. It should be borne in mind that these ratings relate to individual contacts and not to the company as a whole.

‘Poor’/‘very poor’ rating for the overall level of service (Summary table [Appendix 6](#))

A sub-analysis was carried out on the 15 responses where the overall level of service was rated as ‘poor’ or ‘very poor’. This year, this represented 11% (vs 10% in 2003 and 12% in 2002) of responses. The responses together with comparative data for the survey as a whole are summarised in [Appendix 6](#)

Although this ‘sub-analysis’ is based on a small of responses (n=15), a number of factors seemed to influence the overall rating given of ‘poor’/‘very poor’:

<i>Knowledge /competence</i>	In 11 (73%) cases, this was rated ‘poor’ (53%) or ‘very poor’ (20%). In only 4 (27%) was knowledge/competence rated as ‘good’ and in no cases ‘excellent’.
<i>Timeliness</i>	In only 50% , where an assessment was made was the enquiry answered within an acceptable time-frame
<i>Access</i>	In 5 (33%) cases it was not easy to contact the medical information department
<i>Telephone manner</i>	In 5 cases ‘phone manner was rated as ‘poor’ (4) or ‘very poor’ (1). In 10 (67%) cases, a rating of ‘good’(53%) or ‘excellent’ (13%) was given.

As can be seen from these figures, in several cases, there was failure to meet expectations in multiple areas. When looking at the reasons for contacting the industry, 5 enquiries (33%) were for the management of current patients and 5 related to shelf-life/stability. In addition, in 7 (47%) cases the industry was contacted because it was considered to be the ONLY source of information and in 6 (40%) because it was a more comprehensive source. Therefore, on these occasions, the enquirers had specific needs and expectations which were not met.

The table below compares the ratings given for these key ‘poor’ aspects of service with findings from the survey as a whole.

	‘Poor’/ ‘Very Poor’ service sub-group (n=15)	Overall survey (n=133)
Easy to contact MI Department	10/15 (67%)	87%
Good/excellent telephone manner	10/15 (67%)	96%
Good/excellent knowledge/competence	4/15 (27%)	86%
Enquiry answered in a timely manner (where assessment possible)	7/14 (50%)	89%

As can be seen, the ‘norms’ for the industry on the survey day were:

- For 87% of enquiries the medical information department was easy to contact
- In 86% of cases, staff had good to excellent knowledge/competence

- 89% of enquiries were answered in a timely manner
- In 96% of cases, staff had a good or excellent telephone manner.

Therefore, it is not surprising that enquirers who had very specific needs and expectations and whose service experience fell so far below the norm should give an overall service rating of ‘poor or very poor’,

However, it has also been suggested that expectations of the industry may sometimes be unrealistic and lead a pharmacist to assess the inability of the industry to provide specific clinical guidance to that pharmacist’s specific situation as unhelpful when this may not necessarily be the case.

‘Excellent’ rating for the overall level of service (Summary table [Appendix 7](#))

In addition to looking at the sub-group of ‘poor’ and ‘very poor’ overall service, an analysis was performed on the group where the overall service level was rated as ‘excellent’.

23% of responses (31 cases) rated the overall service level in answering their enquiry as ‘excellent’.

The table below compares the findings with the survey as a whole and the poor/very poor overall service subgroup by focussing on the number of ‘Excellent’ ratings.

	Overall Service Rating		Overall Survey (n=133)
	‘Excellent’ sub-group (n=31)	‘Poor’/‘Very Poor’ sub-group (n=15)	
Easy to contact	94%	67%	87%
Good/excellent telephone manner	100%	67%	97%
Good/excellent Knowledge/ competence	100%	27%	87%
Answered within acceptable timeframe <i>(where assessment possible)</i>	100%	50%	89%
Company could have helped more?	0%	87%	18%

As can be seen, where a response was given an ‘excellent’ overall service rating, the medical information department was easy to contact and the enquiry answered within an acceptable timeframe in 100% of cases, with a 100% good/excellent rating for telephone manner and knowledge/competence. In addition, accessibility (94%) was higher than that for the survey overall. In no cases did the enquirer state that the company could have helped them better compared with 87% of enquirers where the overall service was rated as ‘poor’ or ‘very poor’ and 18% for the survey overall.

Conclusions

The results from this survey indicate that industry medical information departments continue to provide a valuable resource for this important customer group and a high level of service.

The main conclusions from the responses to individual enquiries from this year's survey were:

Ease of contact – At 87% is still generally good although could be improved. There were individual comments about problems of access because of use of ansaphones or staff in meetings.

Telephone manner – remains a strength with a 96% good/excellent rating.

Knowledge/competence – remains at a high level (86% good or excellent).

Timeliness – This was similar to last year with 89% of enquiries (where assessed) being answered within an acceptable time frame.

Overall service – was similar to the last survey and rated as 'good'/'excellent' in 88% of responses where an assessment was made.

Use of information – 59% of enquiries related to decisions on existing and future patient management, though this survey has seen a large decrease (46% vs 57% last survey) in the number of enquiries which related to management of current patients. There has also been a decrease in the number of enquiries for private study/education (from 8% to 1% of enquiries).

Reasons for contacting the industry – The most common two reasons continue to be because industry is perceived to a comprehensive source of information and because it is the only source of information.

However, this year, the main reason for contacting the industry was that it was a comprehensive source of information, whereas in the previous 3 surveys, it was 'the only source of information'. Although this year's main reason (more comprehensive source) was given for the same proportion of enquiries (37%) as the last survey, the proportion of enquiries where the reason of 'the only source' was given has reduced from 47% to 33 % this year.

Could companies have done more? – For the majority of calls (at 81%) the caller felt that the company could not have done more to help. However there were still 18% of calls where it was felt that companies could have done more

Sub-analysis of 'Poor'/'Very Poor' overall service – The main factors associated with 'poor' and 'very poor' overall service ratings were: poor knowledge/competence and not answering the enquiry within an acceptable timeframe combined with reduced accessibility and lower ratings for telephone manner.

Sub-analysis of Excellent overall service – In contrast to those occasions where poor or very poor overall service was provided, the main determinants of an 'excellent' overall service

rating was a higher than average (93%) level of accessibility, 100% timeliness, 100% Good/excellent knowledge/competence and telephone manner .

Discussion, Areas for improvement and Recommendations

Participating centres and response rates

It has been suggested that the relatively low overall response rate may have been partially associated with the fact that centres had not contacted the industry on the survey day. However, it is possible that two factors may have contributed to the lower overall response rates compared with the last survey, firstly the timing of the survey and secondly the long gap since the previous survey. 3 out of 4 of the previous surveys had taken place in the last quarter which is generally outside the main holiday season, whereas the current survey (Quarter 2) was just before the holiday season. Secondly, gaps between previous surveys had been a maximum of 18 months which meant that staff were used to doing the survey each year.

The reduction in the proportion of centres contacting the industry on the survey day could be related to a number of factors including:

- Changes in the provision of medicines information within the NHS where more staff (MI and Non-MI) are being trained to answer their own queries.

Increasing availability of information resources to Medicines Information Pharmacists e.g. Up to date SPCs and PILs on the EMC

- Increased information made proactively available by companies (e.g. Product Specific websites)
- Availability of Medline and Embase
- Use of electronic enquiry management systems within some trusts which increases access to information on previous enquiries
- Availability of full text electronic journals, reducing the need to contact the company for articles
- UKMi shared resources via the NeLM, e.g. fridge database
- MI e-mail discussion groups
- Increased skill levels of Medicines Information Pharmacists at using available electronic sources.
- Previous poor experience of an individual company's service (e.g. if a company had only been willing to quote the SPC) inhibit a pharmacist contacting them again and colour their personal opinion on the value of that company.
- Overall work pressures (e.g. staff shortages)
- Survey fatigue

Use of Information

The decrease in the proportion of enquiries relating to management of an existing patient may be due to a number of possible factors:

- Patients spending much less time in hospital resulting in very little time for Medicines Information Pharmacists to deal with any enquiries relating to their management.
- Handling of 'Medicines Information' queries by other staff trained by the Medicines Information Pharmacists to do so e.g. Clinical/Ward Pharmacists.
- Increased availability of resources as discussed above

The other major reduction has been seen in enquiries for the purposes of education, research or private study (reduced from 8% in 2003 to less than 1%). However, there has been an increase in the number of enquiries for 'Other' purposes (22% this year vs 8% in 2003), although most of the list of 'Other' uses could be classified elsewhere.

The reduction in the number of questions for the purposes of private study/research and education is possibly related to improved access to easily available resources (e.g. EMC/electronic journals/other internet resources) and increased skill levels of Medicines Information Pharmacists so that they are able to access the relevant information themselves. There may also be an effect from time restrictions allowing little time to work on such projects

Reasons for contacting the industry

It seems likely that the reduction in the proportion of enquiries where the industry was considered to be either the only source of information or quicker than other sources may be influenced by a number of factors discussed previously:

- Increased availability of reliable up to date information from the industry
- Increased availability of other resources to Medicines Information Pharmacists
- Improved skills of Medicines Information Pharmacists
- As most enquiries that Medicines Information Pharmacists need to contact the Industry for are complex and therefore need specialist help from the Medical Information department rather than an initial call handler. It is possible, therefore, that Medicines Information Pharmacists may no longer perceive contacting an Industry Medical Information Department as 'quick'.

However, it should be borne in mind that sometimes, although the company may be the only source of the information if it exists, the information may not exist because the research was never done.

The continued use of Industry as a comprehensive source of information could be due to the fact Medicines Information Pharmacists now tend to receive fewer 'simple' queries, so that those that they do receive are more complex in nature and therefore require more research.

Service Levels

Overall Service

That the overall ratings are comparable with previous surveys suggests either that standards have not risen or that expectations have and that industry departments are rising to these expectations.

Although the overall level of service is high, there are still a number of areas where improvements could be made

○ ***Access***

- Improving access to the Medical Information department
 - E.g. if staff at a meeting, ensuring that the person taking calls is able to contact somebody if an urgent response is required.
 - Offering alternative options on ansaphones for urgent enquiries

○ ***Timeliness***

- Although 89% of enquiries were answered within an acceptable timescale, 11% were not. This may be due, in part, to mismatched expectations. In order to try and improve this, Medical Information Departments should be reminded of the PIPA standards

guidance on Timeliness i.e. that for every call, a timescale for response is agreed between the person who will be providing the information and the caller. This will enable a full appreciation of the needs of the caller and the urgency of the enquiry. Then, if difficulty is encountered in meeting the deadline, the caller is contacted and updated before the deadline arrives.

○ ***Unlicensed Information***

- To be aware of the value (where not currently provided) of information (if available) outside the licensed use/SPC to a Medicines Information Pharmacist who is seeking information to enable a value judgement to be made on the management of an individual patient.
- Medicines Information Pharmacists, as a group of professionals, are appropriately qualified to appreciate the issues surrounding the provision of unlicensed information and its limitations and can find this type of information extremely valuable. In the pilot reverse survey (2005), one of the main reasons for contacting the company was for information on unlicensed use.

Recommendations for future surveys

In order to continue to gain further insight into the relationship between Medicines Information Pharmacists and Industry Medicines Information Departments and to improve standards, a reverse survey is recommended within the next year i.e. 2008 and a repeat of the current survey within two years time, i.e. 2009. However, in view of the reduced level of contacts to Industry in this survey (and therefore the reduced number of individual companies contacted) compared with the previous survey, it would be worthwhile considering whether it might be more useful to conduct the survey for 2 days rather than a single day. Timing of the survey needs to be carefully considered to avoid conflict with holidays.

Communication of results

As the range of companies (perceived by Medicines Information Pharmacists as 'Pharmaceutical Industry) covers a wide range of company types, all of whom are not necessarily PIPA or ABPI members, it is recommended that the results of the survey, are widely publicised to UKMi, PIPA, ABPI, PAGB and BGMA member companies and to other non-member companies who were contacted during this survey informing them that the Standards are available to PIPA members.

It is also recommended that the PIPA Managers Checklist on the PIPA website is revised.

References

1. Joshi M

A survey of UKMI by AIOPI MI Personnel: Improving the Working Relationship
Research submitted as part of a Diploma in Pharmacy Practice 2005

Acknowledgements

Particular thanks should go to all the Medicines Information Pharmacists who participated in this survey and especially to Fiona Woods for co-ordinating the survey.

Appendices

Appendix 1	2007 Survey form
Appendix 2	Companies contacted
Appendix 3	Survey summary findings vs previous years
Appendix 4	Use of information and Reasons for contacting the industry ‘other’ responses
Appendix 5	Comments provided by respondents including where they felt that the company could have done more to help and spontaneous comments.
Appendix 6	Sub-analysis of responses giving a ‘Poor/Very Poor’ rating for the overall level of service they had received
Appendix 7	Sub-analysis of responses giving an ‘excellent’ rating for the overall level of service they had received

This is the fifth survey on behalf of the Pharmaceutical Information and Pharmacovigilance Association (PIPA) Standards Working Party. Both PIPA and UKMI believe that an assessment of the performance of industry medical information departments is essential to improving standards for you, the customer.

Please could you complete this questionnaire for **each** enquiry that you submit to a pharmaceutical company on the day specified?

Region		Centre		Initials	
Company contacted			Product		

	Question	Please circle appropriate answer(s)			
1	Access Was it easy to contact the Medical Information Department?	Yes	No		
2	Telephone Manner How would you rate the telephone manner of the staff? <i>(If you spoke to more than one person, please give an overall rating)</i>	Excellent	Good	Poor	Very Poor
3	Knowledge/Competence of Medical Information Staff How would you rate the knowledge/competence of the Medical Information staff?	Excellent	Good	Poor	Very Poor
4	Timeliness Was your enquiry resolved within an acceptable time frame? <i>*If No, please comment (over page if required)</i>	Yes	No	Not possible to assess yet	
5	Overall level of service Overall, how would you rate the service provided?	Excellent	Good	Poor	Very Poor
6	The information provided was used for: <i>(More than one category can be chosen)</i> <i>*If other, please give details:</i>	a	Decision on the management of existing patient		
		b	Decision on the management of future patients/ development of guidelines or policy		
		c	Decision on shelf-life/stability		
		d	Education/Research or Private study		
		e	Formulary decision		
		f	Other (please give details)		
7	For which reasons did you choose to contact the company for information? <i>(More than one category can be chosen)</i> <i>*If other, please give details:</i>	a	Only source of information		
		b	More comprehensive source of required information than others available		
		c	Reliable source of information		
		d	Quicker than other sources		
		e	Other (please give details)		
8	Could the company have helped you better in any way? <i>*If Yes, please give more detail (over page if required)</i>	Yes*	No		

Thank you. If you have any further comments, please write on the back of this form. At the end of the survey day, please return this form to the head of your Medicines Information Centre for forwarding to your Regional Medicines Information Centre.

Appendix 2 – Companies contacted 2007 (alphabetical)

3M	Martindale Aurum
Abbott	Mayne Pharmaceuticals Plc
Abello Ltd	Meda
Actavis	Mill
Allen & Hanbury's (GSK)	Napp
Allergan	Niche Generics
Alliance	Novartis
Almus Pharmaceuticals	Novo Nordisk
Amgen	Nutricia
Ashbourne Pharmaceuticals	Organon
Boehringer Ingelheim	Pfizer
Boots Medical Services	Pharmacia
Cambridge Labs	Pliva
Cardinal Health	Ranbaxy
Celgene	Roche
Chefaro UK	Sandoz
Coloplast	Sanochemia
De Witt	Sanofi
Dentsply	Sanofi Synthelabo
Flynn Pharmaceuticals	Sanofi-Aventis
GSK	Sanofi-Pasteur
Goldshield	Schering Healthcare
Grunenthal?	Schering Plough
Hamelyn Pharmaceuticals	Schwartz
IDIS Worldwide	Servier
Ipsen	Sovereign medical
IVAX Pharmaceuticals	Special Products Ltd
Janssen Cilag	Taro Pharmaceuticals
Kent Pharmaceuticals	TEVA
Leo	UCB Pharma
Lilly	Valeant
Link Pharmaceuticals	Wyeth
Malborough Pharmaceuticals	

Appendix 3 – Summary of overall findings compared with previous years

Demographics			2007	2003	2002	2000	1999
	Total Centres contacted		199	246	254	262	>255
	Number of centres responding		133	174	151	177	170
	% centres responding		67%	70.7%	64%	68%	66%
	Number of responding centres contacting industry		68	103	100	100	
	% responding centres contacting the industry		51%	59%	66%	57%	
	Number of responding centres Not contacting industry		65	71	51	77	
	% of responding centres Not contacting industry		49%	40.8%	34%	43%	
	Number of forms evaluating a response to a specific enquiry		133	239	218	219	234
	Number of staff answering enquiries in MI centre on survey day		254	336+	316	260	
	Number contacting industry		91	147	146	135	
						%	%
	Responses						
1	Was it easy to contact the Medical Information Dept	Y	87.2%	88.3%	87%	89%	89
		N	12.8%	11.7%	12%	11%	11
		NS	0	0.0%	1%	0%	0
2	How would you rate the telephone manner of the staff	Excellent	34.6%	37.7%	35%	26%	34
		Good	61%	56.9%	59%	67%	62
		Average			0%	1%	N/A
		Poor	3%	3.3%	5%	4%	4
		V.Poor	0.75%	0.4%	0%	1%	0
		NS	0.75%	1.7%	0%	1%	0
3	How would you rate the Knowledge/competence of the Medical Information Staff	Excellent	20.3%	25.1%	21%	19%	21
		Good	66.25	61.1%	66%	63%	65
		Average				1%	See NS
		Poor	7.5%	9.2%	12%	11%	10
		V.Poor	2.3%	0.4%	0%	3%	1
		NS	3.8%	4.2%	1%	3%	3

	Demographics		2007	2003	2002	2000	1999
4	Was your enquiry resolved within an acceptable time frame	Yes	79%	80.3%	81%	79%	82
		No	9.8%	7.5%	7%	15%	9
		Not able to assess yet	11.3%	12.1%	11%	6%	
		NS			0%		10
5	Overall, how would you rate the level of service provided	Excellent	22.6%	25.9%	23%	21%	21
		Good	60.2%	57.3%	64%	59%	66
		Average		1.7%		1%	See NS
		Poor	9%	8.8%	10%	13%	11
		V.Poor	2.3%	1.3%	2%	5%	0
		NS	6%	5.0%	2%	1%	3
6	The information provided was used for	a)Education/Research/Private study	0.7%	7.5%	3%	5%	
		b)Decision on care of existing patient(s)	45.9%	56.9%	52%	58%	
		c)Decision on future patient management	13.3%	12.6%	22%	23%	
		d)Formulary decision	1.5%	3.3%	1%	3%	
		e) Decision on shelf-life/stability	16.3%	12.1%	13%		
		f) Other	22.2%	7.9%	12%	16%	
		NS		2.9%			
7	For which reasons did you choose to contact the company for information?	a)Quicker	6.5%	10.0%	10%	14%	
		b) More comprehensive source of required information	36.6%	36.8%	35%	33%	
		c)Only source of required information	32.7%	46.9%	47%	51%	
		d)Reliable source	13.1%	8.8%	11%	9%	
		e) Other	11.1%	7.5%	10%	10%	
		NS		1.7%			
8	Could the company have helped you better in any way ?	Y	18.1%	18.4%	20%	28%	30
		N	81.2%	78.7%	78%	71%	68
		NS	0.75%	2.9%	2%	1%	3

Appendix 4

Question 6 – The Information Provided was used for:

	%
a) Decision on the management of existing patient	45.93
b) Decision on the management of future patients/development of guidelines or policy	13.33
c) Decision on shelf-life/stability of product	16.30
d) Education/Research/Private Study	0.74
e) Formulary decision	1.48
f) Other (listed below)	22.22
• Availability/supply problem	5.26
• Information about excipients	3.76
• Unspecified	3.01
• Identification of tablet	2.26
• SPC Request	1.50
• Patient Complaint	1.50
• General info (papers)	0.75
• Product disposal	0.75
• Identification of patients at risk of event	0.75
• Clarification of SPC	0.75
• Compatibility	0.75

Question 7 - For which reasons did you choose to contact the company for information?

	%
a) Only source of information	32.68
b) More comprehensive source of required information than others available	36.60
c) Reliable source of information	13.07
d) Quicker than other sources	6.54
e) Other (listed below)	11.11
• To add to information already found.	6.77
• Little information elsewhere	2.26
• Clarification of PL	0.75
• Product specific info requested	0.75
• Supply problem	0.75
• Request SPC	0.75
• To elaborate on the SPC information	0.75

Appendix 5 Spontaneous comments provided by respondents including where they felt that the company could have done more to help.

Service Area	Overall service rating	Could company have helped more?	Comments (Verbatim)
Access	Good	No	Had to leave a message on answer phone initially for them to phone us back.
Access	Poor	Yes	Rang the main customer service hotline who tried to put me through to correct dept but nobody answered the phone. Tried again 20 minutes later and even the customer service could not reach the correct team.
Access	Good	Yes	Phoned the company but was unable to speak to anyone as went to answerphone. Left two messages. Needed answer that day as patient due following morning.
Access	Good	No	Was quite worrying that when I first asked to speak to medical information I was told they had all gone in to a meeting and would not be available for about 2 hours. Fortunately there was someone available who was able to deal with the call.
Access	Good	Yes	Had to search internet to get 'Phone number - not listed in BNF.
Access	N/A	Yes	Had to insist on being put through to medical information as receptionist said that they didn't do that product anymore and wouldn't hold the information. Was 'phoned back 1 hour later by which time enquiry completed. Was polite, and apologised for not getting back to me sooner. Getting answerphones too often from companies.
Access	Very Poor	Yes	Told that person who dealt with product was unavailable. Asked if a message could be left requesting them to call me and told No that I must call back later. called back and left message on ansaphone Call was not returned.
Access	Good	No	I was able to contact the MI department well. However, was then given the mobile number of the person who deals with the product. Left a message on that mobile asking for a call back the same day. Was not called for 21/2 hours.
Access and Timeliness	Poor	Yes	Company failed to return call twice. Could have put me straight through to medicines info.
Knowledge/Competence	Good	Yes	Couldn't answer my query. <i>(Author's note: Company contacted as only source of information for management of existing patient)</i>

Knowledge/Competence	Poor	Yes	No info offered other than on SPC.
Knowledge/Competence	Poor	Yes	They could have known something about the product! As its not a medicine as such, there is no SPC and they knew practically nothing about it.
Knowledge/Competence	Very Poor	Yes	I could not give the answer any credence. There was no offer of supporting literature. <i>(Author's note: Enquirer was seeking clarification of an SPC statement)</i>
Knowledge/Competence	Good	Yes	Company did not provide any additional information other than was on the SPC.
Knowledge/Competence	Poor	Yes	Company would only repeat that what I was asking was not licensed and would not discuss further.
Knowledge/Competence	Good	Yes	Contacted company regarding accidental administration of product by incorrect route. The person that I spoke to seemed to have very little clinical knowledge and no appreciation of clinical urgency of the situation. Would not offer further information as product had been used "outside its product license". Had to prompt to obtain basic product information. I think the person really should have passed me onto someone more clinically competent. Was asked if I might have the time to go through to pharmacovigilance to report the incident with no appreciation for the fact that I needed to get off the phone to go and deal with an urgent clinical situation. I felt that the approach of the person I dealt with was inappropriate, unsympathetic, quite ignorant but most of all unhelpful.
Knowledge/Competence	Poor	Yes	The contact person in medical information did not have the current SPC for the product when I called. The reply consisted quoting from the SPC which we already had.
Knowledge/Competence	NS	Yes	Unable to give any more advice than SPC.
Knowledge/Competence	Good	No	The person I spoke with just re-iterated info from the SPC and Stockley. However, information was WRONGLY quoted from Stockley (ie opposite effect stated). Did carry out Medline search, although this didn't add anything to the enquiry.
Other	N/A	N/A	Finds MI centres from the industry less and less helpful. Tries not to telephone.
Other	Good	Yes	No SPC on EMC. Had to collaborate with the MI officer at the other end to get an answer, rather than just being told what I wanted to know.
Other	Good	Yes	Could have given name more quickly at beginning. Could have explained rationale for answer.
Other	Good	Yes	Question didn't have a real answer so gave best possible answer ie referred me to a specialist.

Other	Good	No	Contact via switchboard (not direct). Had to ask MI person for their name.
Telephone Manner. Knowledge/competence. Timeliness	Very Poor	Yes	Unhelpfull and unable to answer or even look into query until the next day.
Timeliness	Good	No	I had to call the company to follow up this enquiry as they did not return my call on the day. I could not get through for a long time and when I did the person on the other end of the line seemed unable to hear me and put the phone down. This happened on several occasions and we did not get a response until 2 days later.
Timeliness	Good	No	Company said they would email me a data sheet Have not received it yet, but this could be a problem with the trust end receiving e-mails.
Timeliness	Poor	Yes	Left message on answerphone. Needed to ring again as no reply received. Could have helped more by giving answer much quicker as it was very simple to them.
Timeliness	Poor	Yes	Did not meet timeline they promised to reply in and did not let me know it was taking longer. Rang three times.
Timeliness	Good	No	Still awaiting answer

Appendix 6 - Sub-analysis of responses giving a ‘Poor/Very Poor’ rating for the overall level of service they had received

	QUESTIONNAIRES	Response	Poor/V Poor subset %	Whole Survey %
1	Was it easy to contact the Medical Information Dept	Y	66.67	87.22
		N	33.33	12.78
		NS	0.00	0.00
2	How would you rate the telephone manner of the staff	Excellent	13.33	34.59
		Good	53.33	60.90
		Poor	26.67	3.01
		V.Poor	6.67	0.75
		NS	0.00	0.75
3	How would you rate the knowledge/competence of the Medical Information Staff	Excellent	0.00	20.30
		Good	26.67	66.17
		Poor	53.33	7.52
		V.Poor	20.00	2.26
		NS	0.00	3.76
4	Was your enquiry resolved within an acceptable time frame	Yes	46.67	78.95
		No	46.67	9.77
		Not able to assess yet	6.67	11.28
5	Overall, how would you rate the level of service provided	Excellent	0.00	22.56
		Good	0.00	60.15
		Poor	80.00	9.02
		V.Poor	20.00	2.26
		NS	0.00	6.02
6	The information provided was used for	a) Decision on the management of existing patient	33.33	45.93
		b) Decision on the management of future patients/development of guidelines or policy	6.67	13.33
		c) Decision on shelf-life/stability of product	33.33	16.30
		d) Education/Research/Private Study	0.00	0.74
		e)Formulary decision	0.00	1.48
		f) Other (listed below)	33.33	22.22
7	For which reasons did you choose to contact the company	a)Only source of information	46.67	32.68

	for information?			
		b) More comprehensive source of required information than others available	40.00	36.60
		c)Reliable source of information	13.33	13.07
		d)Quicker than other sources	0.00	6.54
		e) Other (listed below)	13.33	11.11
8	Could the company have helped you better in any way ?	Y	86.67	18.05
		N	13.33	81.20
		NS	0.00	0.75

Appendix 7 - Sub-analysis of responses giving an 'excellent' rating for the overall level of service they had received

			Excellent	Poor/V Poor Overall service	Whole Survey
	QUESTIONNAIRES	Response	%	%	%
1	Was it easy to contact the Medical Information Dept	Y	93.55	66.67	87.22
		N	6.45	33.33	12.78
		NS	0.00	0.00	0.00
2	How would you rate the telephone manner of the staff	Excellent	67.74	13.33	34.59
		Good	32.26	53.33	60.90
		Poor	0.00	26.67	3.01
		V.Poor	0.00	6.67	0.75
		NS	0.00	0.00	0.75
3	How would you rate the knowledge/competence of the Medical Information Staff	Excellent	64.52	0.00	20.30
		Good	35.48	26.67	66.17
		Poor	0.00	53.33	7.52
		V.Poor	0.00	20.00	2.26
		NS	0.00	0.00	3.76
4	Was your enquiry resolved within an acceptable time frame	Yes	96.77	46.67	78.95
		No	0.00	46.67	9.77
		Not able to assess yet	3.23	6.67	11.28
5	Overall, how would you rate the level of service provided	Excellent	96.77	0.00	22.56
		Good	3.23	0.00	60.15
		Poor	0.00	80.00	9.02
		V.Poor	0.00	20.00	2.26
		NS	0.00	0.00	6.02
6	The information provided was used for	a) Decision on the management of existing patient	45.45	33.33	45.93
		b) Decision on the management of future patients/development of guidelines or policy	9.09	6.67	13.33
		c) Decision on shelf-life/stability of product	18.18	33.33	16.30
		d) Education/Research/Private Study	3.03	0.00	0.74
		e)Formulary decision	0.00	0.00	1.48

		f) Other (listed below)	24.24	33.33	22.22
7	For which reasons did you choose to contact the company for information?	a)Only source of information	29.27	46.67	32.68
		b) More comprehensive source of required information than others available	31.71	40.00	36.60
		c)Reliable source of information	21.95	13.33	13.07
		d)Quicker than other sources	12.20	0.00	6.54
		e) Other (listed below)	4.88	13.33	11.11
8	Could the company have helped you better in any way ?	Y	0.00	86.67	18.05
		N	100.00	13.33	81.20
		NS	0.00	0.00	0.75