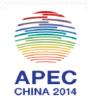
APEC Business Ethics for SMEs Forum

Promoting Ethical Business Environments in the Medical Device and Biopharmaceutical Sectors

1-3 September 2014 | Nanjing, China



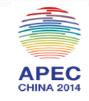


Opening session

Mr. Zhen Xin Director General, Ministry of Industry and Information Technology

People's Republic of China





The Honorable Zenaida Cuison-Maglaya Under Secretary for Regional Operations Group, Department of Trade and Industry

The Philippines





Ms. Lynn Costa

Project Overseer, Business Ethics for APEC SMEs Initiative

Senior Policy Advisor for Global Markets U.S. Department of Commerce

The United States





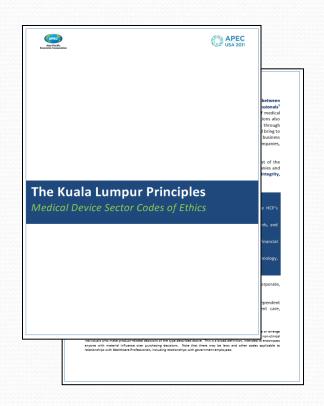
Overview:

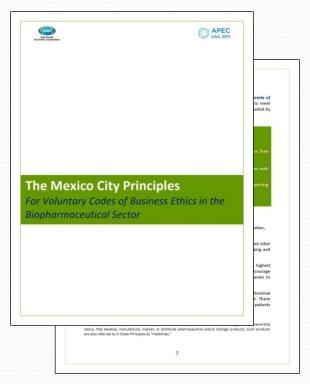
"Business Ethics for APEC SMEs" initiative

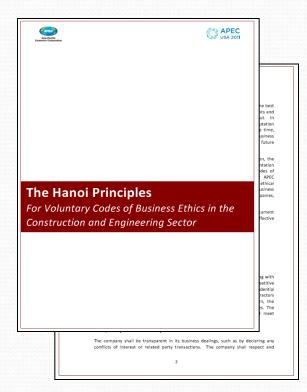
- Small & Medium Enterprises (SMEs) are the engine of economic growth and will continue to serve as a key driver in the APEC region's economic expansion <u>as long as they are able to operate, trade, and</u> innovate in ethical business environments.
- As a result, the Business Ethics for APEC SMEs initiative was launched under the APEC SME Working Group in 2010.
- The initiative is led by the United States with active support and participation from <u>all 21 APEC economies</u>. Since 2010, initiative programs have been hosted by China, Malaysia, Indonesia, Philippines, Chinese Taipei, Brunei Darussalam, Mexico, Vietnam, and Japan. The initiative is also strongly supported by the APEC Business Advisory Council (ABAC).

What have we achieved?

APEC Principles for codes of business ethics in three sectors, **setting the highest ethical standards for the region**, each developed by experts from government, industry and academia from all 21 APEC economies.







Endorsement by APEC Ministers (Foreign and Trade Ministers) in the U.S. APEC Host Year



"We applaud the decision of the APEC SME Ministers at Big Sky, Montana in May 2011 to endorse the Kuala Lumpur Principles for Medical Device Sector Codes of Business Ethics. This set of principles for the region's medical devices industry is the first of its kind, and will improve the quality of patient care, encourage innovation, and promote the growth of SMEs that produce medical devices."



Support by APEC Leaders (Heads of State) in the Russia APEC Host Year



Corruption is "...a tremendous barrier to economic growth, the safety of citizens, and to the strengthening of economic and investment cooperation among APEC...We will also support the efforts of respective member economies to build capacity to combat corruption...by encouraging the implementation of high standard codes of ethics."

-- November 2012, Vladivostok

Capacity building from 2012 - 2013 to implement the principles

Formation of a network of over 100 ethics trainers, spanning all three sectors and 21 economies!

April 22-24, 2012 Brunei Darussalam

APEC workshop to assist industry associations to draft codes aligned with The KL Principles

July 10-11, 2012

Taipei, Chinese Taipei

APEC workshop to assist industry associations to draft codes aligned with The Mexico City Principles

August 26 - 30, 2013

KL, Malaysia

APEC Train-the-Trainer Workshop hosted by Malaysian Anti-Corruption Academy







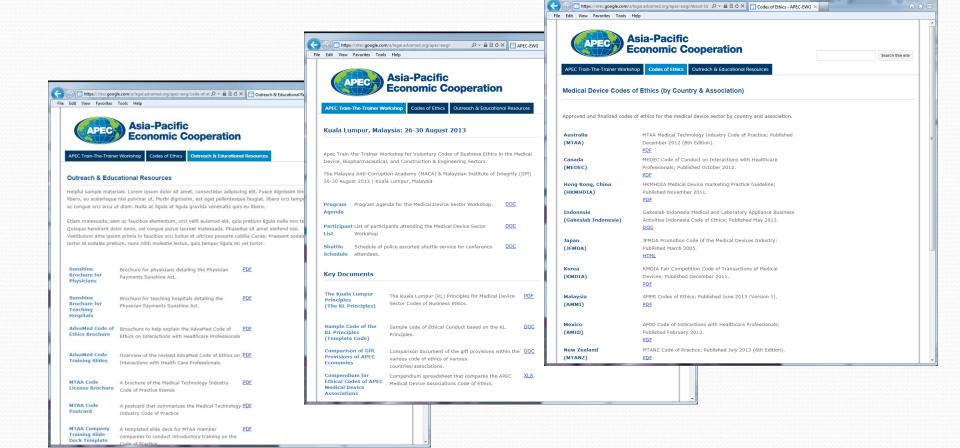
Jan/Feb 2012

Mar/Apr 2012 May/ June 2012 July/ Aug 2012 Sep/ Oct 2012 Nov/ Dec 2012 Jan/ Feb 2013 March/ April 2013 May/ June 2013 July/ Aug 2013 Sept/ Oct 2013

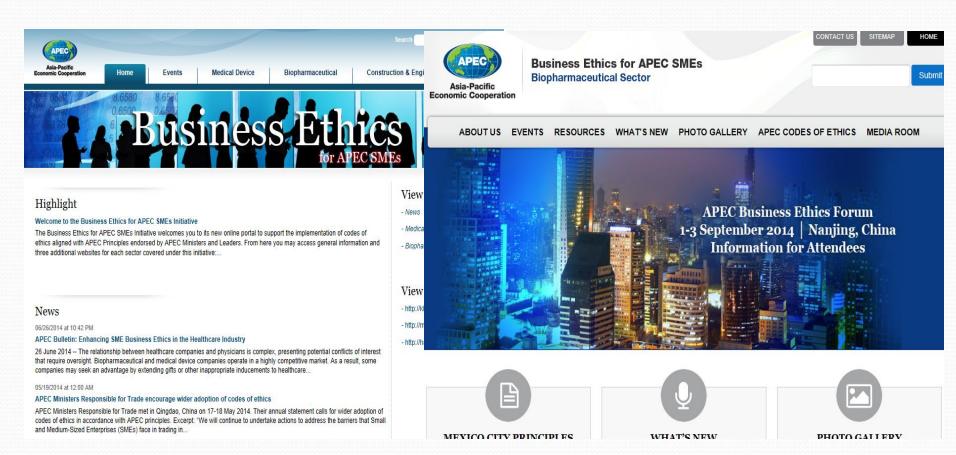
April 2012 – today

Monitoring programs and mentor teams in all three sectors are progressing implementation of codes of ethics in preparation.

Making Tools Available to Facilitate Code Adoption & Best Practices



New APEC Business Ethics Websites

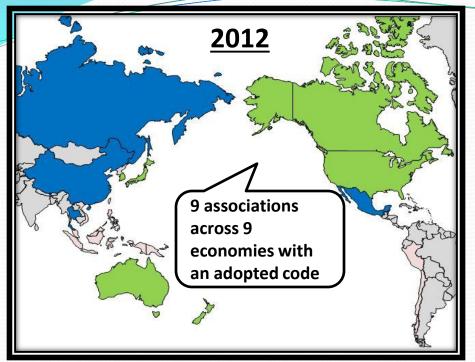


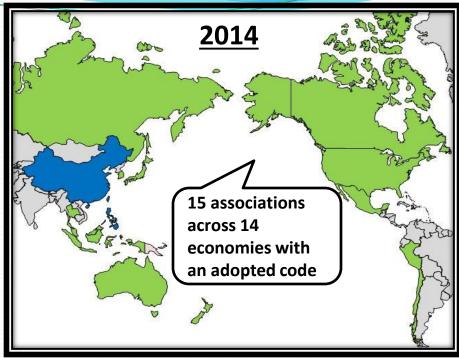
http://businessethics.apec.org

http://mcprinciples.apec.org

Results since we first started monitoring progress in 2012...

Medical Device Sector: 2012 vs 2014



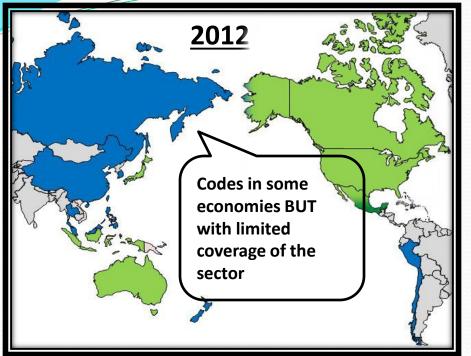


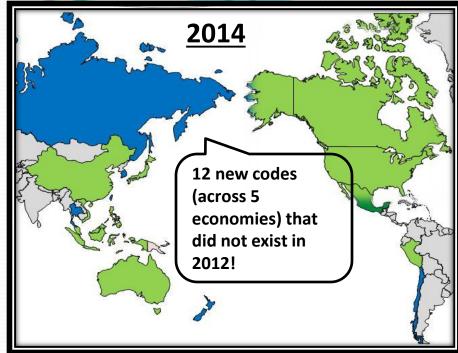
Code adopted

Code under development / alignment

Industry Associations Monitored	24	
Member Companies	10,542+	
SME Member Companies	6,010+	
STATUS REPORT	2012	2014
Associations with Code	9	15 (16)
Member Companies	5,720+	6,773+ (1 ,053+)
SME Member Companies	4,027+	4,740+ (↑713+)

Biopharmaceutical Sector: 2012 vs 2014







Codes with broad coverage of the sector

Codes but with limited coverage of the sector

Industry Associations Monitored	53	
Member Companies	7,724+	
SME Member Companies	3,746+	
STATUS REPORT	2012	2014
Associations with Code	24	36 (12)
Member Companies	3,699+	6,870+ (↑3,171+)
SME Member Companies	2,536+	3,308+ (↑772+)

In summary, in two years we have supported the development of 18 new industry codes across 9 economies where they previously did not exist, expanding high standard APEC principles to nearly 14,000 companies (of which over 8,000 are SMEs)

Business Ethics for SMEs Forum 1-3 September 2014 -- Nanjing, China

- Over 200 participants representing more than 80 different organizations — bringing together stakeholders critical to ethical business practices in the healthcare sector (senior representatives from ministries of health, hospital and physician associations, patient organizations, industry, and APEC SME Working Group delegates).
- Co-hosted by China and the United States to facilitate regional cooperation, build capacity and <u>provide strategic vision and</u> <u>recommendations for this initiative through 2020 (Nanjing Declaration to be discussed this afternoon)</u>

THANK YOU...

- China Ministry of Industry & Information Technology
- RDPAC
- Previous APEC member economy hosts: Malaysia, Indonesia, Philippines, Chinese Taipei, Brunei Darussalam, Mexico, Vietnam, and Japan
- APEC SME Working Group and Delegates
- Mentors and trainers from companies and associations
- The Philippines





Official Photo





Part I:

The Importance of Ethical Environments to Sustainable Business and Trade





Session One: The view from industry leaders operating in the APEC region

Moderator: Mr. Stephen Dibert, Advisor, International Affairs, MEDEC (Canada)

<u>Discussants (5 minutes each / 20 minutes Q&A and Discussion):</u>

- 1. Ms. Roberta Lipson, CEO, Chindex International & Board Chair, United Family Healthcare (China)
- 2. Mr. Jesse Wu, Chairman, Johnson & Johnson China & Board of Directors, U.S.-China Business Council
- **3. Mr. Mario Mongilardi**, General Manager, Laboratories Americanos S.A., President, COMSALUD (Peru)
- 4. Mr. Katsumi Takahashi, President, Omnico Co & Vice Chairman, Japan Dental Trade Association (JDTA)
- 5. Mr. Leonard Ariff Abudul Shatar, CEO, CCM Duopharma Biotech Berhad & Immediate Past President, Malaysian Organization of Pharmaceutical Industries (MOPI)





Ethical Environment for Medical Devices Business in Japan



September 2, 2014 JFMDA & JFTC

4 Ethics Rules & 5 Guidelines in Japan

4 Ethics Rules (JFMDA/JFTC)



5 Guidelines (JFMDA)

- 1. The Code of Ethics (JFMDA)
- 2. The Charter of Business Behavior (JFMDA)
- 3. The Promotion Code of the Medical Devices Industry in Japan (JFMDA)
- 4. The Fair Competition Code of the Medical Devices Industry in Japan (JFTC)
- 1. Transparency Guidelines
- 2. Guideline for Medical Devices' Advertisement
- 3. Guideline for Medical Devices Exhibition Under Application for Approval
- 4. Guideline for Personal Information Management
- **5. Guideline for Donation to Medical Society**

Positioning of 4 Ethics Rules for Medical Devices

for Establishment of Fair Business Practice in Japan

- 1. The Code of Ethics (JFMDA)
 - 2. The Charter of Business Behavior (JFMDA)
- 3. The Promotion Code of the Medical Devices Industry in Japan (JFMDA)
 - 4. The Fair Competition Code of the Medical Devices Industry in Japan (JFTC)



Outline of The Japan Federation of Medical Devices Associations

Since 1984, Only One Federation for Medical Devices

- The Japan Federation of Medical Devices Associations (JFMDA) was founded in February 1984 by medical device associations consisting of manufacturers and suppliers of medical and health-care devices, equipment, instruments and materials.
- Since then, JFMDA has been addressing various national and international issues related to all its member associations.
- By taking appropriate actions on these issues, and through the support of innovation and sustainable supply of medical devices and technologies to the world, JFMDA has contributed to the growth of the industries it represents and to the improvement of welfare and health care in Japan.
- JFMDA became a legal entity as of January 6th,2014.

19 Associations and Approx. 4,900 Companies

At present, membership has increased to 19 associations (representing approx. 4,900 companies), while associate member organizations and about 130 individual companies are registered as supporting members approved sponsoring JFMDA's Activities.



Member List of JFMDA -19 Associations

(12 Associations in "Red" are the member of JFTC, too)

- 1. The Japan Home-health Apparatus Industrial Association
- 2. Japan Association of Health Industry Distributors
- 3. Japan Analytical Instruments Manufacturers' Association
- Japan Association of Medical Devices Industries
- 5. Japanese Association of Surgical Sutures
- 6. Japan Condoms Industrial Association
- 7. Japan Contact Lens Association
- 8. Japan Dental Trade Association
- 9. Japan Electronics and Information Technology Industries Association
- 10. Japan Home Health Care Association

- 11. Japan Hearing Instruments Dispensers
 Association
- 12. Japan Hearing Instruments Manufacturers Association
- 13. Japan Hygiene Products Industry Association
- 14. Japan Industries Association of Physical Therapy Devices
- 15. Japan Medical Imaging and Radiological Systems Industries Association
- 16. Japan Medical Industry Association
- 17. Japan Medical-Optical Equipment Industrial Association
- 18. Japan Ophthalmic Instruments
 Association
- 19. Medical Technology Association of Japan (Note: random order)



The Japan Fair Trade Council of the Medical Device Industry (JFTC)

- ➤ JFTC is established for administration of "The Fair Competition Code of the Medical Devices Industry in Japan (FCC)".
- > FCC, as voluntary ethics rule, focuses on "Restriction on Premium Offers in the Medical Devices Industry" and was established in 1998.
- Also JFTC is authorized by the Consumer Affairs Agency and the Japan Fair Trade Commission (Japanese Government)
- So "The Fair Competition Code of the Medical Devices Industry in Japan" has regal grounds. This is the difference from other JFMDA's voluntary ethics rules/guidelines.
- At present, 12 medical devices related associations are the member of JFTC. (Those 12 associations are the member of JFMDA, too.)
- > JFTC has the following 3 committees to administrate FCC.
 - Planning & Public Relations Committee
 - Guidance & Examination Committee
 - Regulations & Standard Committee





Outline of The Fair Competition Code of the Medical Devices Industry (FCC)

- ➤ FCC is authorized under the Fair Trade Commission on November 16, 1998 Notification No.19.
- ➤ FCC was enforced in April 1999 as "Voluntary Ethics Rule for Restrictions on Premium Offer in the Medical Devices Industry".
- FCC aims to prevent unfair inducement of customers through restrictions on unjustifiable premium offers in the medical devices manufacturing and distributing industry. And to ensure fair competition and order within the industry.
- > FCC restricts the following activities as unjustifiable premium offers.

Cash & Cash equivalent

NG!

Free-of-Charge Medical Devices

NG !

Free-of-charge benefit & Labor

NG!

Key Points to Consider

- ➤ JFMDA has promoted high compliance & ethics standards for 30 years!
- ➤ This helped improve our reputation and trust with doctors, patients, media and other stakeholders!

Thank you!!







Session One: The view from industry leaders operating in the APEC region

Moderator: Mr. Stephen Dibert, Advisor, International Affairs, MEDEC (Canada)

Discussants (5 minutes each / 20 minutes for Q&A and Discussion):

- 1. Ms. Roberta Lipson, CEO, Chindex International & Board Chair, United Family Healthcare (China)
- 2. Mr. Jesse Wu, Chairman, Johnson & Johnson China & Board of Directors, U.S.-China Business Council
- **3. Mr. Mario Mongilardi**, General Manager, Laboratories Americanos S.A., President, COMSALUD (Peru)
- 4. Mr. Katsumi Takahashi, President, Omnico Co & Vice Chairman, Japan Dental Trade Association (JDTA)
- 5. Mr. Leonard Ariff Abudul Shatar, CEO, CCM Duopharma Biotech Berhad & Immediate Past President, Malaysian Organization of Pharmaceutical Industries (MOPI)





Part II:

A Multi-Stakeholder Response to Strengthen Ethical Business Practices





Session Two: The Role of Industry & Implementing Voluntary Industry Codes

Moderator: Mr. Iván Ornelas Díaz, Director of International Relations, Ministry of Economy (Mexico) & Co-Chair, Expert Working Group, The Mexico City Principles

Discussants (5 minutes each / 30 minutes for Q&A and Discussion):

- 1. Dr. Lee Kyeong-Ho, Chairman, Korea Pharmaceutical Manufacturers Association
- 2. Ms. Wang Tongyan, Vice President, China Pharmaceutical Industry Association
- Ms. Faye Sumner, CEO, Medical Technology Association of New Zealand (MTANZ)
- 4. Dr. Yio-Wha Shau, Chairman, Taiwan Biotech Association (Chinese Taipei)
- 5. Dr. Masami Ishii, Executive Board Member, Japan Medical Association
- **6. Ms. Elise Owen**, Associate Vice President, The Advanced Medical Technology Association (United States)





推行医药伦理准则 营造健康产业环境

Implementing Pharmaceutical Ethics Guidelines Creating Healthy Industrial Environment

王彤焱 副会长 - 中国化学制药工业协会 Wang Tongyan Vice President - CPIA

APEC Business Ethics for SMEs Forum
Biopharmaceutical Sector
1-3 September 2014 | Nanjing, China





内容提要 Content

- ➤ CPIA化药协会介绍 Introduction of CPIA
- > 《医药企业伦理准则》实施意义
 Meaning for implementing "Pharmaceutical Industry Principles of Ethics"
- CPIA工作及成果CPIA Key achievements
- CPIA的其他活动和推进 CPIA other initiatives in China





CPIA协会介绍

Introduction of CPIA

中国化学制药工业协会(简称CPIA)是1988年9月经民政部批准正式注册的全国性4A级行业协会

China Pharmaceutical Industry Association (CPIA) was approved as national 4A level industry association by Ministry of Civil Affairs in September 1988

- 拥有313家会员单位313 members
- ▶ 制药企业主营业务收入占化学制药全行业的65%以上
 Main business incomes of pharmaceutical companies account for more than 65% of the whole pharmaceutical industry
- ▶ 利润占60%左右
 Profits account for about 60%





CPIA推行《医药企业伦理准则》原因

Meaning for implementing "Pharmaceutical Industry Principles of Ethics"

- 中国医药市场和制药企业快速发展
 Fast development of healthcare market and pharmaceutical industry
- 建立完善的市场法制环境
 To establish a perfect legal market environment
- 建立规范的市场经营行为 To regulate market business behavior
- > 实现行业可持续发展
 To realize the sustainable development of the industry





CPIA的工作及取得成果

CPIA Key Achievements

参加APEC组织推行《墨西哥城原则》的培训 Participating the "Mexico City Principles" training by APEX

- ▶ 2012-7 CPIA参加"关于生物制药业志愿实施企业伦理准则草案研讨会" CPIA attended the "Draft seminar about the biopharmaceutical industry voluntarily implementing corporate ethics guidelines"
- > 2013-8 CPIA参加"生物制药行业、医疗器械行业、建筑工程行业商业道德 自愿行动准则培训班"
 - CPIA attended the "Training course for the bio-pharmaceutical industry, Medical device and pharmaceutical industry, and construction industry voluntarily implementing operative norm of business ethics"



CPIA的工作及取得成果

CPIA Key Achievements

积极将《墨西哥城原则》引进中国 Actively engaged in introducing "Mexico City Principles" into China

- 2013-8 CPIA将《墨西哥城原则》引进中国 CPIA introduced "Mexico City Principles" into China
- ➤ 2013-11 CPIA推出《医药企业伦理准则(草案)》
 CPIA introduced the "pharmaceutical Industry principle of Ethics (draft)"
- CPIA发布《伦理准则》并推进实施CPIA issued the "Principle of Ethics" and drive the implementation





CPIA成功召开两次全国专题会议

CPIA Successfully Held Two National Conferences

2013-10-29 "中国医药企业伦理准则发布大会"

"China Pharmaceutical Industry Principle of Ethics Launch Conference"

2014-05-27 "医药企业伦理准则中国论坛"

"China Forum of Pharmaceutical Industry Principles of Ethics"







CPIA开展信用评价和交流活动

Credit Rating Evaluation and more cooperation

《伦理准则》的推进实施与行业信用等级评价相结合
Combining the implementation of the "Principles of Ethics" with the credit rating evaluation in industry

- 2007 CPIA 获得行业企业信用评价资质CPIP was approved to work for Credit Rating Evaluation
- 2008 启动信用评价工作CPIA started pharmaceutical industry Credit Rating Evaluation
- 2013 80余家医药企业 获得A级以上信用等级
 Over 80 pharmaceutical industry enterprises obtained A level
- > 国际交流与合

International Communication and Cooperation





Code of Practice

Faye Sumner Chief Executive Officer Medical Technology Association of NZ

APEC Business Ethics for SMEs Forum

Medical Device Sector

1-3 September 2014 | Nanjing, China











Certificate of Adoption

Required:

- Written Policies & Procedures
- Compliance Officer /Committee
- Training & Education
- Lines of Communication
- Auditing & Monitoring
- Corrective Action





Certificate of Adoption

Suggested Use:

- Marketing materials
- Business cards
- Displays at meetings / conferences
- Company stationery

















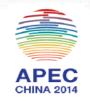
Session Three: The Role of Healthcare Providers and Professional Organizations and Best Practices in Ethical Collaboration with Industry

Moderator: Mr. Russell Williams, President, Rx&D – Canada's Research-Based Pharmaceutical Companies; Chair of the IFPMA Code Compliance Network (CCN); and Co-Chair, Expert Working Group, The Mexico City Principles

Discussants (5 minutes each / 40 minutes for Q&A and Discussion):

- 1. Kin-ping Tsang, Chairman, International Alliance of Patient Organizations (Hong Kong, China)
- Sabrina Chan, Executive Director, The Hong Kong Association of the Pharmaceutical Industry
- 3. Dr. Wonchat Subhachaturas, Immediate Past President, The Medical Association of Thailand
- 4. Dr. Andreas Loefler, Second Vice President, Australian Orthopaedic Association





The Global Patients Movement: The value of patient engagement and the need for collaboration

King-Pin Tsang

IAPO Chair

APEC Business Ethics for SMEs Forum
Biopharmaceutical Sector
1-3 September 2014 | Nanjing, China



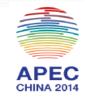


IAPO's Mission

Our mission is to help build patient-centred healthcare in every country by:

- Realizing active partnerships with patients' organizations, maximizing their impact through capacity building
- 2. Advocating internationally with a strong patients' voice on relevant aspects of healthcare policy, with the aim of influencing international, regional and national health agendas and policies
- 3. Building cross-sector alliances and working collaboratively with like-minded medical and health professionals, policy makers, academics, researchers and industry representatives





What is patient-centred healthcare?

The essence of patient-centred healthcare is that the healthcare system is designed and delivered so that it can answer the needs of patients

- Patient-Centred Healthcare Principles
- 2. Respect and support for the individual patient, their wants, preferences, values, needs and rights
- 3. Choice and empowerment
- 4. Patient engagement in health policy
- 5. Access and support
- 6. Information that is accurate, relevant and comprehensive



*Principles defined in IAPO's Declaration on Patient-Centred Healthcare: www.patientsorganizations.org/declaration



Declaration on Patient-Centred Healthcare Patient-centred healthcare is the way to a fair and cost-effective healthcare system

Health systems in all world veglors are under pressure and cannot cope if they continue to focus on discases safter than patients; sequile the involvement of individual publishs who adhers to their fisatinests, make behavioural changes and self-manage. Pail contrast healths are may be the most rentalitative, work in inviews behaviour and the recisions.

To us, the international Alliance of Patients' Organizations, the essence of patient-centred healthcare is that the healthcare system is designed and delivered to address the healthcare needs and preferences of patients so that healthcare is appropriate and cost-effective. By promoting yearing patient responsibility and optional usage, patient.

Fatients', families' and cares' priorities are different in every country and in every disease area, but from this diversity we have some common priorities. To achieve retrieve retrieve healthcare we believe that healthcare must be based on the following Five Delectoles.

1. Respect

ts and carers have a fundamental right to patient-centred healthcare that respects their unique needs, preferences and values, I as their autonomy and independence.

2. Choice and empowerment

Patients have any and and repromibility to participate, to their level of ability and participate, as a partient in making healthcare discisions that affect their first. This requires a responsible health service within probability of calculative and animate and management and support in the fif in with patients' meabs, and encouragement and support to patients are calculated. An instance can be appropriated and support to patients are calculated updated for the animate can be appropriated and support to patients and other patients and other patients are distinct animate can be appropriated and patients and other patients are patients and other patients and other patients and other patients are patients are patients.

3. Patient involvement in health policy

Patients and patients' organizations deserve to share the responsibility of healthcare policy-making through meaningful and supported organgement in all levels and at all points of decision-making, to ensure that they are designed with the patient at the central substitution to exercise the healthcare policy but include, for example, social policy that will ultimately impact on patients' lives. See MPOD is Policy Scientment at views or generating the patients of the patients of the patients' lives. See

4. Access and support

raisents must have access to the healthcare services warranted by their condition. This includes access to safe, quality and appropriate werkers, teatherman, powerable care and health personition accessibles. Provision should be made to make that application can access accessary services, regardless of their condition or sood-economic status. For patients to advise the best positive quality of this, admits a contraction of their conditions or sood-economic status. For patients to advise the best positive quality of this, admits a contraction of their conditions or sood-economic status. For patients to advise the best positive quality of this admits a condition of their conditions of their conditions are considered and admits access to a service of the condition of their conditions are conditions as a condition of their conditions are conditions as the condition of their conditions are conditions as a condition of their conditions are conditioned as a condition of their conditions are conditioned as a condition of their conditions are conditions as a condition of their conditions are conditioned as a condition

5. Information

is, relevant and comprehensive information is essential to enable patients and cause to make informed discisions about the cause beatment and bring with their condition, information must be presented in an appropriate format according to health principles consistently the infolderation condition, language, age, understanding, abilities and culture. See WPD's Policy and all were wooldnot organizations confine attributionary.

To achieve protest-control hostiticans at every lever in every community, this introductional Artistics of Protestine Cognitations is calling for this support and collaboration of policy-induces, health professionals, service provides and the provides and the provides of the provides the increasing structures, resources and training to insiste that the Principles outlined in this Declaration are upload by all.

4.20% INVO. At rights named. This pointy was adopted in Hamiley 2004 by WPO following member commission and agreement by the Governing learnt-retired information should failled Central Healthcare including evidence for its impact and benine to its practice can be found in the WPO publication What is Added-Central Healthcare? A Parker of Defetibles and Principles (IMPO, 2005) all seaw-patientscognitization opject involves Central WPO at Introduction Security (IMPO, 2005) at seaw-patientscognitization opportunities contact WPO at Introduction Security (IMPO, 2005) at seaw-patientscognitization opportunities.

Globalization and Healthcare

- Public health issues are global
- The health industry is increasingly multinational
- Healthcare policies are debated and developed internationally
- Progress in science, medicine and technology is international
- Other important stakeholders in healthcare are organized and influential internationally





Global Issues for Patients' Organizations: IAPO's Policy Priorities

- 1. The massive issues of access to treatment and care
- Lack of meaningful patient involvement in health policy decisionmaking
- 3. The need for an international concerted effort to address patient safety
- 4. The need for quality health information and communication





Patient Group – Industry Collaborations

Benefits

- Skills/expertise sharing
- Greater understanding of respective needs
- Access to information & data
- ✓ Funding, resources & in-kind support

Challenges (and in some cases risks)

- Potential loss of independence (on both sides!)
- Differing expectations and aims
- Perceived threat to public image and credibility

Benefits and challenges are not exclusive to patient groupindustry collaborations





Consensus Framework for Ethical Collaboration

- putting patients first;
- supporting ethical research and innovation;
- ensuring independence and ethical conduct; and
- promoting transparency and accountability.















Session Four: The Role of Government and Proactive Support to Encourage Ethical Business Practices in the Medical Device and Biopharmaceutical Sectors

Moderator: Dato' Hafsah Hashim, Chief Executive Officer, SME Corporation Malaysia & Co-Chair, Expert Working Group, The Kuala Lumpur Principles

<u>Discussants (5 minutes each / 30 minutes for Q&A and Discussion):</u>

- 1. **Dr. Kenneth Hartigan-Go**, Acting Director-General, The Food & Drug Administration (Philippines)
- 2. Ms. Julie Mu, Director of Community Relations, Independent Commission Against Corruption (Hong Kong, China)
- 3. Ms. Kathleen Hamann, Partner, White & Case (United States)
- **4. Ms. Andrea Perez Figueroa**, Head of Ethics Committee, Mexican Association of Innovative Medical Devices
- **5. Ms. Jessie Yap**, Chief Compliance Counsel, Asia Pacific & General Counsel, Australia and New Zealand, Covidien (Australia)

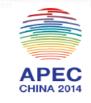




Lunch: "The Kitchen" (by lobby)

PLEASE RETURN AND READY TO RESUME BY 14:00





Session Four: Views from China

Moderator: Dr. Xu Ming, Vice President, China Chamber of Commerce for Import and Export of Medicines and Health Products (CCCMHPIE) & Expert Working Group, The Mexico City Principles

<u>Discussants (5 minutes each / 40 minutes for Q&A and Discussion):</u>

- Ms. Zheng Hong, Executive Chairman, China Pharmaceutical Industry Association
- 2. Mr. Joseph Cho, President, R&D-based Pharmaceutical Association Committee
- 3. Mr. Zhao Yisu, General Secretary, China Association for Medical Devices Industry





推行《医药企业伦理准则》建议坚持的原则

Principles for the implementation of "Principles of Ethics"

郑 鸿 执行会长 - 中国化学制药工业协会 Zheng Hong President - CPIA

APEC Business Ethics for SMEs Forum
Biopharmaceutical Sector
1-3 September 2014 | Nanjing, China





中国《医药企业伦理准则》

" Pharmaceutical Industry Principles of Ethics" - China

- 》《墨西哥城原则》是积极推动市场法制化、合规化的具 有可操作性的重要文件
 - "Mexico City Principles" is the operational important documents that actively promote market legal system and market compliance
- ▶中国医药行业九家协会共同推出了《医药企业伦理准则
- The nine associations worked together to issue the "pharmaceutical industry principles of ethics" in China





推行《医药企业伦理准则》需要坚持的原则

Principles for the implementation of "Principles of Ethics"

- ➤ 坚持患者至上,确保患者能够获得安全有效的使用品 Adhere to the patient first, and ensure the patients could have access to safe and effective drugs
- ▶ 各利益相关方在相互合作、交流的基础上,围绕《医药企业伦理准则》的各条规定,致力于在自己的行业范围内推行实践,共同营造健康、道德、合规的市场环境
 - Different stakeholders, on the basis of cooperation and communication, execute the "Principles of Ethics" in their own industry within the scope of their practice, to create a healthy, ethical, compliant market environment
- ▶科学界定医药代表的职责,规范其行为
 Scientifically define the responsibilities of the medical representatives and regulate their behaviors

Asia-Pacific Economic Cooperation



坚持患者利益至上

Adhere to the patient first

- ➤ 药企责任
 Corporate responsibility
- ➤ 医疗人员责任
 Medical staff responsibility
- ➤ 政府相关部门责任 Relevant government departments responsibility





执行与监督认同一致统一原则

The consensus of execution and supervision identity

- ➤ 利益相关方沟通,取得认同
 Stakeholders obtained consensus based on communication
- ➤ 政府有关部门与利益相关方沟通取得认同 Relevant government departments communicate with different stakeholders to obtain consensus
- ▶执行和监督认同一致统一原则
 The consensus of execution and supervision identity





科学界定认同医药代表责任与职责规范其行为

Scientifically define the responsibilities of the medical representatives, and regulate their behaviors







中国医疗器械行业 诚信体系建设工作介绍

中国医疗器械行业协会

2014年9月 南京

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第一部分

中国医疗器械行业发展现状

国际现状

- 2012年全球医疗器械市场产值超过4000亿美元,占医药市场42%,发达国家药械产值比达1:1
- 近年成为发达国家提升生物医药产业和高端装备制造业的重要抓手,受到高度重视

2013年全国医疗器械产值

>工信部统计规模以上企业:

行业	主营业务收入(亿元)	同比(%)
医疗仪器设备及器械制造	1888.6	17.2
卫生材料及医药用品制造	1398.2	21.8

●卫生材料按医疗器械纳入监管,因此样本医疗器械企业产值 合计应达到2500亿元

行业协会推算全行业产值:超过4000亿元

生产、经营企业情况 2013年

▶ 生产企业15961家Ⅰ 类4587家, Ⅲ类8649家, Ⅲ 类2725家

▶ 经营企业16万家。

数据来源: 国家药监局

我国三大医疗器械生产区

- ▶珠江三角洲——广东、深圳
- ▶长江三角洲——江苏、浙江、上海
- ▶京津环渤海湾——京、津、鲁、冀、辽



我国医疗器械产业发展的特点

- > 区域发展态势良好
- > 贸易呈顺差,但进口增速明显强于出口
- > 研发投入加大
- 产业总体水平在国际上处于中等偏下水平
- ▶ 外资品牌、合资品牌在高端市场上占有优势

第二部分 协会所做的工作

国际活动

2010年9月,与美国先进医疗技术协会(AdvaMed)共同签订《关于推进中国医疗器械市场道德准则行为的谅解备忘录》。

Memorandum of Understanding

To Develop an Ethical Code for the Chinese Medical Device Market

Sentember 2010

The China Association for Medical Devices Industry (CAMDI) and the Advanced

关于推进中国医疗器械市场道验准则行为 的效解各后录 2010年9月

中国医疗器械行业协会(CAMDI)和美国先进医疗技术协会(AdvaMed)是代表中 美医疗器械企业和先进医疗技术的行业协会。一直以来、双方致力于共同合作、探 付双边列阶间度、并不断推进对双方或员跨具重大数义问题的物件。

随着保健和灰行技术创新逐海跨越了国家和文化的界限。对于德靖国际统 文化、实现医疗器械公司与家护专业人员之间连维互动的实实缘来越强。美国先进 医疗技术协会制订了进售推迟,指导其成员与医护专业人员之间的互动。中国医疗 替城行业协会制定的行业公约中也包含了行业道德的内容。但导其会员单位遵守行 体短高难能则。双方均在道德框架下有着相似的目标,推动行业遵守良好遗德原则 和分平分条公营排充。

为了确保中美观方持辖发展先进的医疗技术,安全和有效地使用医疗技术,并 对医护专业人员进行教育和培训,中美双方协会通过本谅解落忘录对以下零宜达成 一致。

- 协商制定《中国医疗器械行业道德推图》("中国道德推图"),并与 美国先进医疗技术协会推测中提出的道德标准一致。
- 二、中美协会通过双边对话以及更太经合组织(APEC)渠建进行,与其他更太 经合组织成员共同制定《亚太经合组织成员医疗器械行业职业道等原 105
- 三、通过新的中国医疗器械行业道槽推划为中国医疗器械行业的公司与医护 专业人员在以下方面的互动提供职业道题行为指导,涉及研究与开发、 医疗技术教育给引及患等事业相关赞助等。
- 四、双方在2011年5月之前为中国医疗技术行业的道德准则提出最终的一系列建议,并放助中国医疗器械行业的公司遵守和执行中国道德准则。

avaMed) are industry associations representing the medical technology in China and U.S.A.. CAMDI king cooperatively to discuss issues of mutual offine to improve their collaboration on issues of

y innovation increasingly extends beyond national young need to premote internationally a harmonized among medical device and diagnostics companies ied has developed a Code of Ethics to guide its e professionals. Similarly, CAMDI includes nion to guide its member companies. Both goals in their ethical frameworks, promoting and thir business operations.

ent of advanced medical technologies, safe and and training, education for medical professionals, I AdvaMed agree the followings:

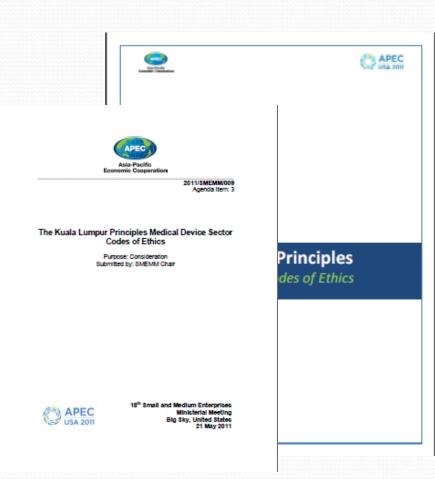
ndards for China's medical device industry" t are in harmony with ethical standards set out in the

ions and through APEC channels, where the United h other APEC members to develop joint Principles the Medical Device Industry.

2010年9月,协会参加了在日本举行的"亚太经济体医疗器械行业职业道德原则"研讨会。

2011年,协会与美国先进医疗技术协会(AdvaMed)共同起草了《中国医疗器械行业协会专业医务人士道德行为准则》。

2011年4月,创新联盟理事长、协会副会长姜峰博士参加了APEC 医疗器械行业会议,与10余个APEC成员国代表共同讨论了《医疗器械行业道德准则吉隆坡原则



2013年8月26-30日,协会受邀参加"2013亚太经合组织医药产业伦理准则会议",会议推进了各成员国医药产业伦理准则的制定与实施

政府相关工作

2008年3月,协会成为第二批行业信用评价试点单位之一。

· 在是中央教育主义的主义的主义的主义。

商信用字[2008]1

商务部办公厅、国资委行业协会联系办公室 关于印发第二批行业信用评价 试点单位名单的通知

各有关商会、协会:

按照国务院关于机构改革的要求,全国整顿和规范市场经济秩 序工作由商务部承担,由原全国整规办组织实施的行业信用建设工 作相应转由商务部信用工作办公室(以下简称商务部信用办)负责。

根据(关于开展第二批行业信用评价试点工作的通知》(整规 办发(2007)33号)要求,截至2008年3月,共有53家商会协会提 出试点申请。经组织专家评审和论证,确定52家商会协会为第二 批试点单位。现格试点单位名单予以公布(见附件1),并将有关 事项通知如下;

政府相关工作

2011年8月、2012年5月,参加商务部市场秩序司和国资委行业办组织召开的2011年行业信用建设工作会议,推动企业诚信体系建设。

协会工作

▶2011年9月,协会邀请专家对《吉隆坡原则》的背景、 内容及要求向重点会员企业进行了解读。

协会工作

协会在2013年3月17日 召开的五届三次理事会 上审议通过了信用体系 评价工作方案。



协会工作

- ▶2013年3月18-19日,协会在会员年会同期举办了中国 医疗器械行业诚信体系建设论坛
- ▶2013年4月,由协会作为发起单位之一在第69届 CMEF开幕式上发起诚信体系建设倡议启动仪式

第三部分问题及建议

问题及建议

- > 政府方面
- ▶协会方面
- >企业方面
- ▶社会环境方面

Part III: The Nanjing Declaration





Awarding of the APEC Business Ethics for SMEs Lighthouse Award:

Recognition of an individual or organization that has served as a bright and steady light to strengthen the ethical business environment for SMEs in the APEC region.



