



Representing the  
Consumer Healthcare  
Industry since 1919

PAGB is the UK trade association  
for the consumer healthcare industry.

PAGB represents manufacturers  
of over-the-counter medicines,  
self care medical devices and food  
supplements. Our members range  
from large global brands to small  
producers of self care products.

Our members' brands are among the best-selling over-the-counter  
medicines, medical devices and food supplements in the UK:

**25**

of the top 25 OTC brands

**49**

of the top 50 OTC brands

'Our consumer healthcare business benefits  
enormously from PAGB membership given their  
drive to self care, industry advice and training.  
They are critical partners to our company.'

Neil Lister, Regional Vice President and General Manager, Perrigo



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**www**

To find out more,  
visit [www.pagb.co.uk](http://www.pagb.co.uk)



Follow us on Twitter  
[@PAGBSelfCare](https://twitter.com/PAGBSelfCare)



As I start my third year as Chief Executive of PAGB, I am confident that we are in a strong position to support our members through the uncertainty that surrounds us in every area.

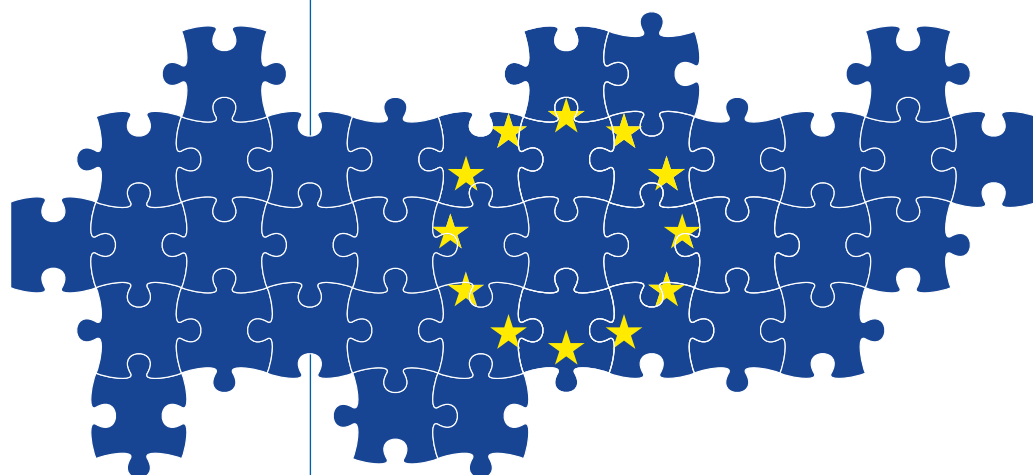


John Smith  
PAGB Chief Executive

### Turbulent times

2016-17 presented many and varied challenges. Analysis of latest consumer healthcare industry data highlights the difficult operating conditions in the UK, with volume and value both in decline in 2016.

There has also been significant political turbulence in our country over the past year. Responding to the external challenges resulting from the UK's decision to withdraw from the European Union has been our main priority over the last 12 months, and will remain so for the next two years at least.





### Opportunities and challenges

PAGB's strength, particularly in these changing times, is in our shared goals and a mutual ambition to create a healthy environment for self care and the consumer healthcare industry.

We have seen progress on access to medicines this year. I am encouraged by four MHRA consultations on new reclassifications in the year to June 2017, and I'm hopeful that this trend will continue.

Our relationship with the Medicines and Healthcare products Regulatory Agency (MHRA) is thriving. Our bilateral meetings enable us to share information that benefits consumers and the industry, and I was delighted to host a seminar on reclassification in partnership with MHRA in November 2016. We will continue to develop this relationship further to the benefit of PAGB members and the industry as a whole.

When faced with challenges to ingredients, PAGB works with our members and MHRA to seek successful resolutions. We were faced with several ingredient issues in 2016-17 and they will continue to arise. I'm proud of our regulatory team and grateful to members on PAGB's Regulatory Affairs Group for their contributions to this process.

### Building on our strengths

We are a small but committed team and I am proud of the way everyone has focussed on delivering excellent services to members throughout this period of change.

Our copy clearance and regulatory teams have had another successful year.

The team has reviewed

**8592**

pieces of copy, up 5% on last year.

PAGB introduced a copy clearance service for medical devices; and trials on a new food supplements advice service and non-member compliance service in response to member feedback. The early signs are that these initiatives have been positively received but we will continue to listen to our members and refine the services appropriately.

PAGB has also continued its support for the Self Care Forum, which has enabled the charity to host another successful Self Care Conference for healthcare professionals and promote Self Care Week, which in 2016 saw more organisations taking part than ever before.

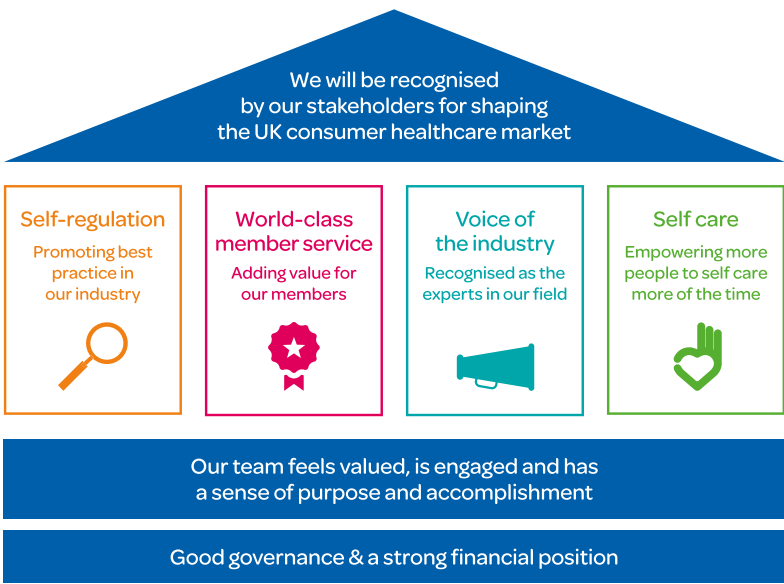
In 2016-17 there were changes to the PAGB Board. I would like to thank Pat Smallcombe, of Johnson & Johnson Ltd, whose promotion earlier this year meant he had to stand down as PAGB President, and welcome David Barnett of GSK Consumer Healthcare, who was appointed President in July 2017. The Board has a key role in supporting the work of PAGB and I am grateful to all 16 Board members for their ongoing contributions.

**Looking ahead, we know that the next 12-24 months will present further challenges for our industry, but I am confident that we have the right team and the right strategy to rise to those challenges and deliver clear benefits and a world-class service for our members.**

At the beginning of 2017, we refreshed our strategic objectives and agreed a three-year fixed strategy, which takes us to 2019, PAGB's centenary year.

# PAGB's mission remains to support member companies to shape the consumer healthcare market and to be recognised by our stakeholders for doing so.

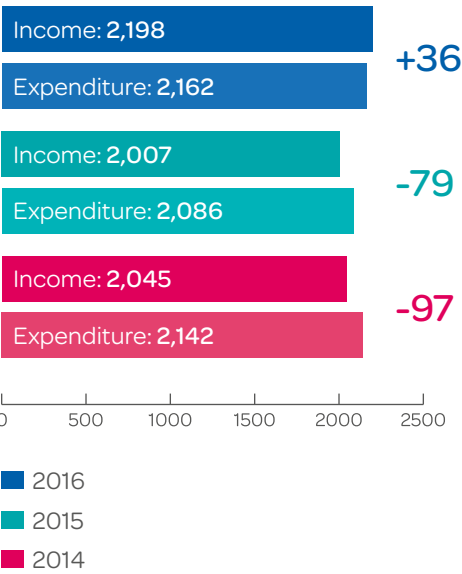
We are committed to providing a world-class member service, promoting self care and acting as the voice of the industry. Self-regulation is now included as a separate pillar of our strategy, giving greater prominence to PAGB's role in promoting best practice in our industry.



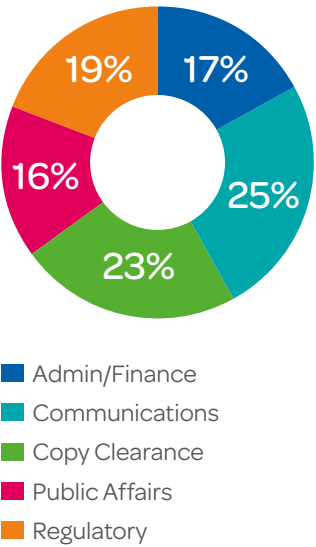
## Financial position

PAGB is funded by subscription fees paid by member and associate member companies. We take our responsibility to our members seriously and expenditure is carefully allocated to enable us to provide our core services.

### Profit and Loss summary (£000s)



### Expenditure by function (2016)



## This year has been marked by an overall slowdown in market performance.

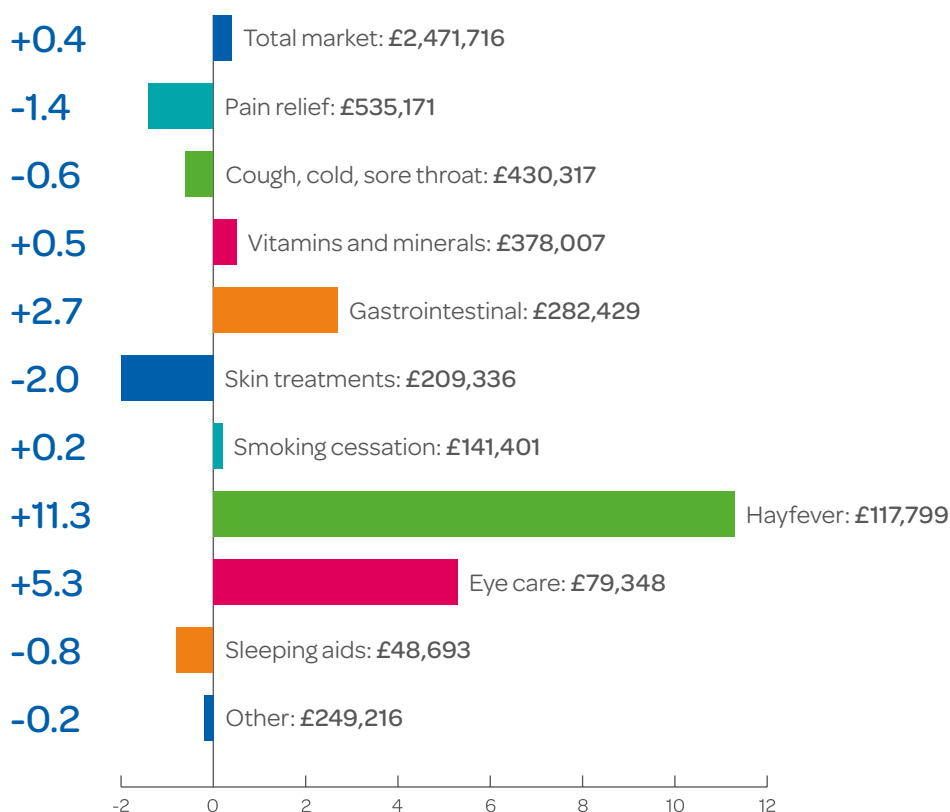
We saw volume across total FMCG decline to -0.2% in the year to 1 July 2017, accelerating to -1.0% in the final 12 weeks. After a prolonged period of nearly 4% solid value growth in the OTC market, this too slowed to just 0.4% with volume showing an actual decline of 1.5%.

The economic and political uncertainty around Brexit has contributed to shoppers feeling a little less confident than they did a year ago, and becoming a little more cautious when it comes to their spend. Consumers are also more demanding than ever before driven by developing tastes, lifestyle trends, desire for convenience, greater social awareness and evolving technology.

In spite of this, there was some specific category growth in OTC and surprisingly, we have the British summer to thank for it. Hayfever recorded +11.3% value growth this year and eye care achieved +5.3% value growth compared to this time last year. Early summer 2017 was exceptionally warm and as a result recorded higher pollen counts.

As temperatures soared and people spent more time outside enjoying the sun, visiting local parks and attending barbecues, so too did the demand for smaller categories such as bite and sting (+14.6%), sunburn (+11.5%) and burn remedies (+17.7%), all of which recorded double-digit growth.

% change in value sales of OTC products (July 2016 to July 2017)



The biggest decline in the OTC market in 2016-17 came from a more commoditised category, pain relief, with a similar impact in the cough, cold and sore throat category. Adult oral analgesics declined by -1.8% in comparison to last year and paediatric analgesics declined -4.2%. Perhaps not surprising given the good weather in early summer, cough liquids declined by -6.5% and medicated confectionery by -1.1%.

Overall, however, pain relief and cough, cold and sore throat medications are bigger, more established categories and therefore more greatly impacted by wider market trends such as changing shopper behaviour, retailer strategies and the growth of discounters.

This year's data reinforce the impact of seasonality on growth in the OTC market. Planned strategic promotions are essential, with timing and visibility the key factors. However, major retailers are continuing to shift promotional spend away from health and beauty, while at the same time facing a challenge from discount retailers. Consumer healthcare brands will need to engage in early conversations with retailers, with a focus on in-store promotions and shopper experience.

**Vitaliy Zhyhun, Nielsen Client Business Partner**



Nielsen's OTC read was defined by Nielsen in agreement with PAGB and its members. It covers over 75,000 stores including multiple and independent chemists, grocery retailers and in-store pharmacies as well as impulse stores.

 PAGB aims to deliver a world-class service for its members and associate members.

# In the year to 30 June 2017 we welcomed six new member companies and nine new associate members.

The total number of full members remained relatively stable, partly a result of merger and acquisition activity in the industry.

At the end of June 2017, PAGB had 41 members and 29 associate members, with new applications in progress.

Our aim in the coming year is to clarify our membership offer for all members and potential members. We plan to expand our associate membership base to bring a wider range of expertise within PAGB membership and to enable more companies to benefit from working with suppliers who really understand the consumer healthcare industry.

44%

of PAGB members have been members for over 20 years.

3

companies reached their 75 year anniversary with PAGB in 2017.

## Length of PAGB membership

<5 years



5-9 years



10-19 years



20-49 years



50-69 years



70 + years



In November 2016 we asked for feedback on our performance:

89%

of members rated us at least 4 out of 5 as a trade association

Over 90% satisfaction with our core services\*:

## Results from our member satisfaction survey, October 2016



91%

Copy clearance



94%

Regulatory advice



96%

Training and development



98%

Information on industry issues



90%

Media activity



91%

Representing the industry with stakeholders

\*members who had used those services



This year we expanded our member communications activity to provide more of the content that our members want to receive, and began the process of refreshing our online and offline publications to create a more consistent and vibrant brand identity.

### Online member resources

We relaunched [www.pagb.co.uk](http://www.pagb.co.uk) in July 2016, and retired six other sites, creating one easy to use, comprehensive website. It includes a secure area to provide accessible information for members on regulation, codes and guidance, and PAGB working groups, where PAGB members can access privileged information quickly and easily.

**40k** sessions (+3%)

**128k** page views (+55%)

**38.6%** returning visitors (+13%)

### Sharing industry expertise

As more members and associate members join PAGB, the pool of expertise is growing. This year, associate members have provided insight for members on issues as diverse as pharmacy, virtual and augmented reality, and politics, always with a focus on what this means for the consumer healthcare industry. We also welcomed exclusive editorial from opinion leaders.



**58%**

increase in twitter impressions to 43k

### Regular e-newsletters

- Over **500 subscribers**
- above average for the industry: **opens (29%)** and **click through (22%)**
- **110 newsletters** delivered to members from 1 July 2016-30 June 2017



Updates on PAGB, the consumer healthcare industry, advertising, policy, health and pharmacy.

**52 issues**



In-depth monthly briefing. Features contributions from PAGB, associate members, and external thought leaders.

**12 issues**



Alerts members to rulings, consultations, safety issues, new claims and more from the UK and the EU.

**41 issues**



News and developments on EU Exit as it happens. Launched 29 March 2017.

**5 issues**





If ever there was a time to be a member of a trade association this is it.

PAGB wants to ensure that when the United Kingdom leaves the European Union there should be no fewer over-the-counter products available in the UK and those products should be no less safe than they are today.



Katharine Mason, PAGB's Director of Regulatory and Legal Affairs on the steps PAGB has taken to get to grips with EU Exit.

The only way to achieve this is for the consumer healthcare industry to work together and collaborate with key stakeholders in our sectors.

We have reviewed our work programme and redirected resource into understanding the regulatory and supply chain ramifications of EU Exit across our sectors. Our members are key contributors to this work through the EU Exit (Medicines and Medical Devices) and EU Exit (Food Supplements) Sub Groups and provided additional expertise at our 'details deep dive' in April 2017.

So, what is PAGB doing to protect the interests of the consumer healthcare industry through the EU Exit negotiations?

#### PAGB published its position on EU Exit with three core aims:

1

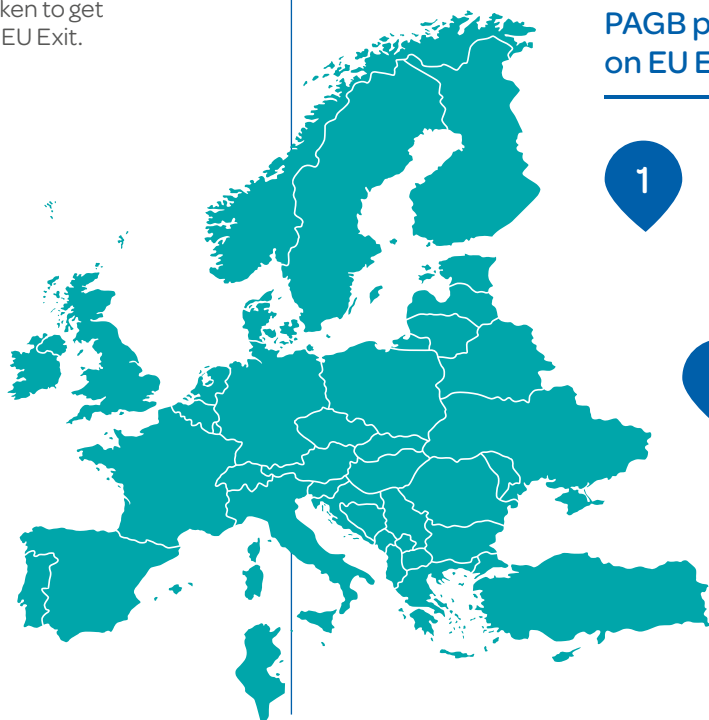
raising awareness of the issues our sectors face and the potential threat to self care post-Exit if careful attention isn't given to the detail of the deal for medicines, devices and food regulation

2

taking our members' concerns to those responsible for negotiating on EU Exit

3

identifying opportunities to improve UK regulatory frameworks as decisions are taken





## Collaboration for the future of self care

PAGB has used its existing network of external panels and committees to share our industry's position. From these we can also keep our members up to date and adapt our strategy as things develop. PAGB is in regular contact with MHRA on specific regulatory issues that would be impacted by EU Exit.

We contributed to the ABPI deep dive work on the potential ramifications of EU Exit to feed into the Life Sciences Ministerial Industry Strategy Group (July to September 2016).

We have monthly calls with our colleagues from other life sciences related trade associations to keep track of events.

PAGB joined the monthly Food & Drink Industry Round Table convened under the sponsorship of DEFRA and run by the Food and Drink Federation.

**The Round Table brings together the leaders of around 50 UK representative organisations from the food and drink sector and Government departments:**

- Department for Environment, Food and Rural Affairs
- Department for Exiting the European Union
- Department for International Trade
- The Treasury
- The Food Standards Agency

We have signed industry letters on key issues for the food industry, recognising that food supplements will be affected by wider issues in the supply chain.



## Working for our members

We listened when our members told us they needed to hear more from us about EU Exit. We hold regular meetings and calls, and in 2017 we introduced a dedicated area on our website and weekly email alerts to keep members updated as the landscape evolves. It has been a year of learning for everyone involved, and we've dedicated time to ensuring that PAGB's position on EU Exit is clear.

The UK's future may yet be uncertain but, together with our members, we will use our knowledge and experience to work for the best possible outcome for consumer healthcare, and ultimately to ensure that people have access to medicines, medical devices and food supplements for self care.

**The practicalities are daunting and there are no doubt fresh unknown challenges around the corner but one thing is certain: this is the time to work together, this is the time to be part of a trade association.**



Reclassification, moving products from prescription control to availability over the counter, when appropriate, is important for self care and for a sustainable NHS.

## PAGB's work with the Medicines and Healthcare products Regulatory Agency in 2016-17 gives us confidence that the UK has a regulator that understands the potential benefits that widening access to medicines brings to individuals and to the NHS.

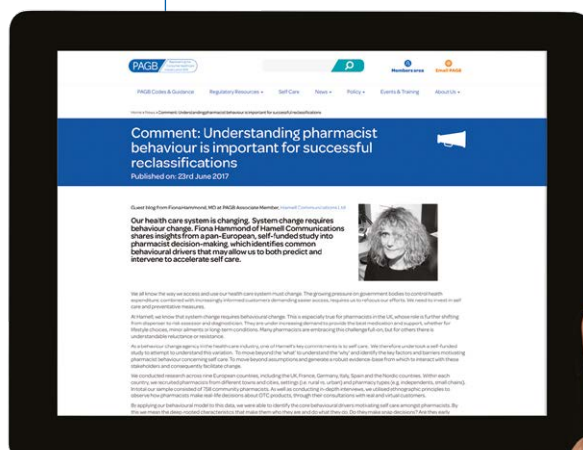


PAGB's John Smith explains why PAGB is optimistic about the future of access to OTC medicines.

In 2016, member companies and PAGB worked closely with MHRA to understand where manufacturers and the regulator could adapt their approach to reclassification applications.

MHRA reviewed the process to improve its effectiveness, provide greater understanding of the process (including how companies can make better use of scientific advice meetings) and develop predictable timelines with clear communication points from a named MHRA assessor. This new system should mean a more efficient and systematic approach to evaluating medicines for reclassification and PAGB is proud to have played an important part in this.

As part of this collaboration, PAGB and MHRA held a seminar to explain the medicines reclassification process and improve the quality, content and structure of reclassification applications submitted to MHRA.



Guest blog from our associate member, Hamell Communications





Speaking to OTC Bulletin, Colette McCreedy, Self-Medication Unit Manager at MHRA described the seminar as 'hugely productive'.

**'The MHRA reclassification team welcomed the opportunity to explain the reclassification process in detail to industry representatives and to introduce the new assessment process and timeline which we have developed jointly with PAGB.'**

This isn't the end of the story. PAGB's Regulatory Affairs Group will be reviewing the new 210 day assessment process later in 2017 and seeking input from members to help with feedback to MHRA.

There will inevitably be adjustments to make on both sides to meet the new requirements but we're confident that the changes that we were part of in 2016-17 will help make more products available over the counter, widening choice for consumers and helping to relieve pressure on the NHS.

**In the year to June 2017, four new consultations were announced on reclassification from POM to P medicines.**

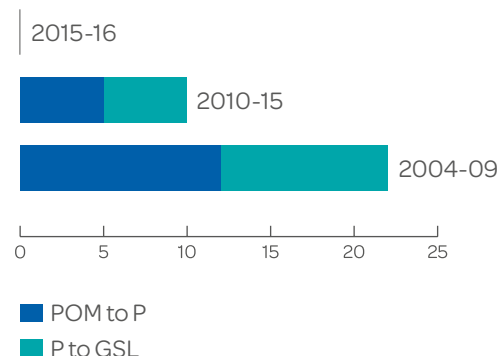
This is very encouraging, and we hope to see further applications considered by MHRA in the coming months and years.

PAGB will continue to support companies that bring forward potential switches where there is a clear benefit and case for promoting self care, and will continue to work constructively with MHRA in making this a reality.

**'If we're going to successfully alleviate the pressure on NHS services, then the UK needs to once again be at the forefront of reclassification to continue to drive self care through pharmacy.'**

**From my June 2017 column in P3 Magazine**

#### Reclassifications 2004-2016



#### Glossary

**POM** = prescription only medicine

**OTC** = over-the-counter  
(P and GSL)

**P** = pharmacy medicine  
(pharmacy only)

**GSL** = general sales list  
(pharmacy or other retailer)

It's a condition of PAGB membership that all eligible consumer-facing advertising is submitted for review prior to publication or broadcast.



Kate Howlett, PAGB's Advertising Services Manager shares her highlights from a year of change in copy clearance.

PAGB's copy clearance team has now been established in its current form for a full year and this stability has enabled the team to exceed previous service levels while at the same time introduce new services for members.

Our Copy Clearance assessors are specialists, skilled in providing fast and confidential vetting of advertising materials with a collective knowledge-base in marketing, biomedical science and human nutrition.

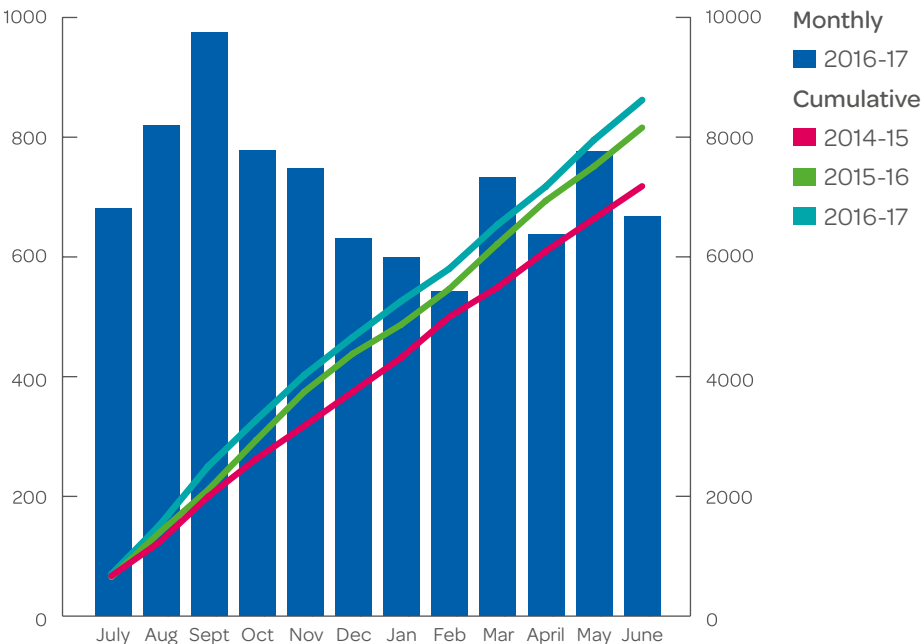
We know that our members are working to tightly planned deadlines. A key priority for the team is to ensure copy and its supporting evidence is reviewed effectively and efficiently. We continued to evaluate our ways of working to help us meet the growing demand for copy approvals.

**8,592** total pieces of copy reviewed July 2016-June 2017

**165** average number of pieces a week; 55 per assessor each week

**56%** more submissions than the same period three years ago

Monthly copy reviewed  
1 July 2016-30 June 2017





The Copy Clearance team is passionate about supporting PAGB members to produce effective, responsible advertising. We provide early concept advice and work proactively to help identify potential issues and solutions pre-publication.

**1,309**  
pieces of copy advice

**741**  
telephone

**568**  
email

In the last year, there were just three complaints published by MHRA related to PAGB member products, of which two were upheld, and two complaints published by the Advertising Standards Authority, both of which were upheld. Five complaints is equivalent to just 0.06% of submissions.

Members asked that we look for ways to improve consistency and new approaches to help them get to grips with complex areas. In response to these challenges we introduced an internal process to review quality and identify themes within the service.

Our database development work in 2017-18 includes plans to improve precedent searching.

'The pragmatism and availability of the team is much appreciated. Also, the opportunity to get a pre-opinion on visuals, claims, and general projects enables us to work better with our communication agencies and marketing teams, ultimately saving time and money.'

Delphine Vandenberghe, infirst Healthcare

Over 80% of respondents to our copy clearance survey (October 2016) rated the team as good or excellent for detail, tone, clarity, helpfulness and knowledge.

#### % rating good or excellent in copy clearance survey

 **85%**  
Detail

 **85%**  
Tone

 **85%**  
Clarity

 **87%**  
Helpfulness

 **85%**  
Knowledge

 **52%**  
Consistency of assessment



### Embracing change in copy clearance

In early 2017, we began the expansion of the service to cover eligible medical devices through a phased transition (see page 16 for more on this).

The team also developed guidance to support members in providing the materials they will need when a product first comes into membership. It has been a challenge, and we're still getting the balance right, but PAGB has been proud to assist our members in leading the way in this sector.

We listened to our members' frustrations about industry-wide compliance and we are exploring the potential for PAGB to influence non-compliant, non-member copy to redress this balance. In spring 2017, we also launched a trial exploring a different way of reviewing copy for food supplements, mindful of the unique challenges this area of regulation brings. The trials are still underway but are already providing interesting insight into what may be possible in the future.

We constantly strive to ensure we are providing the best service we can to our members. Looking forward to 2018 we plan to review the codes and guidelines that frame the work we do, with support from members on our Regulatory Affairs Group. We will draw on PAGB's relationship with the MHRA; it's position on the Committee of Advertising Practice (CAP) board; and newly established ASA stakeholder relationship to influence and ensure alignment across the regulatory landscape.

40%

of member companies and 14% of associate members participated in PAGB advertising workshops in 2016-17. The most common reason given is to upskill new staff members or movers within the company.

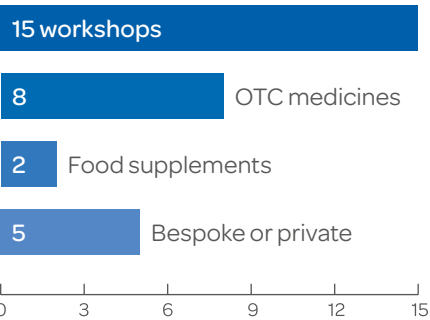
216

total attendees

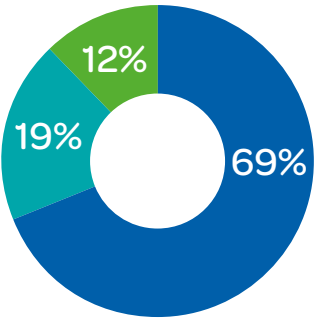
28%

increase on the previous year

### PAGB advertising workshops 1 July 2016-30 June 2017



### Companies attending PAGB workshops (by type) 1 July 2016-30 June 2017



Total = 26 companies

- Member
- Associate member
- Non-member





## Building knowledge in the industry

Our advertising workshops provide essential training on applying PAGB's codes and guidelines to help members ensure that their online and offline promotional material complies with the advertising rules for OTC medicines, medical devices, traditional herbal remedies and food supplements.

'As a newcomer to the consumer healthcare industry it was crucial for me to understand the codes and guidance, and regulation, of OTC products. Thanks to the training, I am now more knowledgeable and feel more confident in producing advertising for OTC products.'

**Ewa Karmowska, Marketing Manager, Healthcare Brands, Church and Dwight UK**

In addition to the regular medicine and food supplement advertising workshops delivered onsite, in 2016-17 we took our expertise to our members, delivering introductory workshops on OTC medicines, self care medical devices and food supplements for whole teams – new staff and old hands. Our tailored workshops were very popular and provided the added opportunity in some cases to go into detail on specific campaign examples or advertising media.

'A comprehensive summary of the new medical device regulation was brilliantly delivered by PAGB's Dafydd Taylor to the RB team!'

**Cristina Bassi, Head of Regulatory Healthcare Northern Europe, RB**

PAGB training is popular with associate members that work with our full member companies, helping them to better support their clients by being creative within the code.

'Keeping up to date on the rules for advertising and promotion of OTC medicines enables us to continually deliver innovative, engaging campaigns for our clients, whilst ensuring we are always code compliant.'

**Beth Whitworth, Director, Virgo Consumer Health & Wellbeing**

## The OTC diploma

PAGB continued to offer the PAGB Professional Learning Programme, which can lead to the diploma in OTC healthcare, in collaboration with Wellards. The e-learning qualification is designed for anyone working in the consumer healthcare industry, or in agencies supporting consumer healthcare companies.



## In 2016 PAGB started the process of introducing self-regulation of substance-based medical devices in the UK.



Dafydd Taylor, Regulatory and Medical Affairs Manager, gives an overview of what this involved and why it is big news for consumer healthcare.

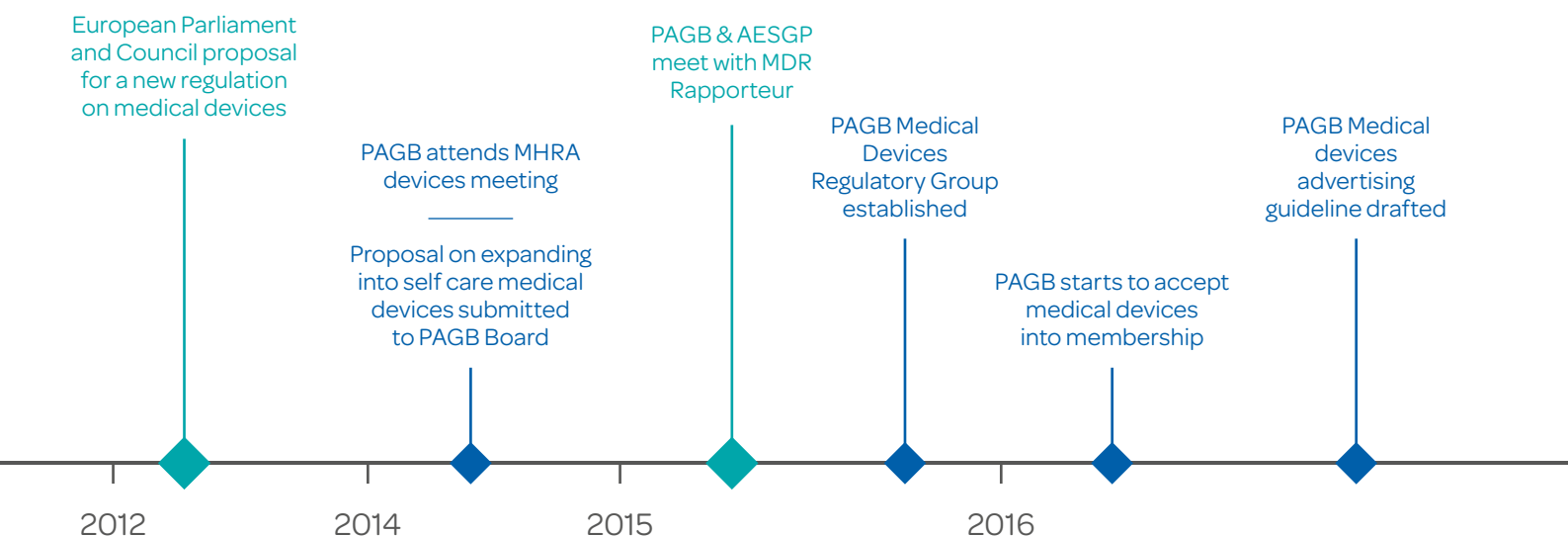
PAGB and its members have a long and distinguished record on proactively ensuring balanced and responsible marketing of self care products.

- 1919** PAGB established by medicines manufacturers; the start of self-regulation by the industry
- 1968** The Medicines Act introduced regulation for over-the-counter medicines
- 2017** PAGB expanded its remit to include substance-based medical devices
- 2020** Medical Devices Regulation (MDR) will be applied

### Why substance-based self care medical devices?

This group of products is almost indistinguishable from medicines on the same shelf. With no specific advertising rules or guidance available, PAGB members were concerned that advertising of these products didn't always meet the high standards set by OTC medicines.

PAGB members with substance-based medical devices worked together to establish industry best practice for advertising, publishing the PAGB Self Care Medical Devices Advertising Guideline in May 2016. Like the OTC Medicines Advertising Codes of Practice before it, the guideline set out for the first time in the UK the standards to be met by advertisers to ensure responsible promotion across the substance-based medical devices category.



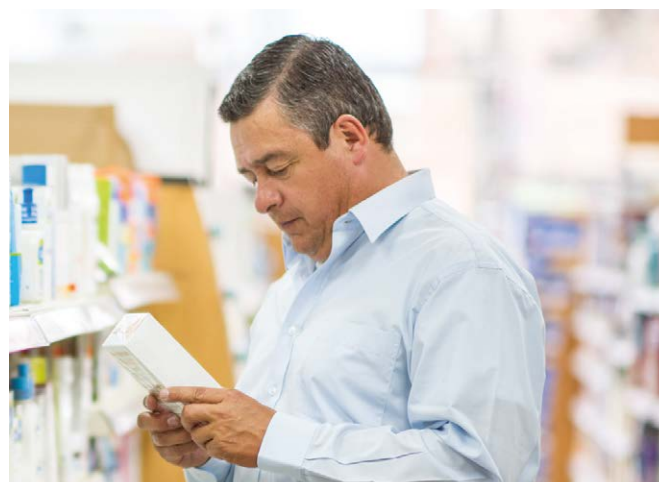
John Smith explains the Medical Devices Regulation.  
Video produced by Pegasus, June 2017.



The guideline was developed with external stakeholders and member companies, in particular with colleagues from Neprofarm and Keuringsraad in the Netherlands, and members of the PAGB Medical Devices Working Group. PAGB also liaised with regulators to keep them apprised of progress.

A copy clearance pilot in three therapeutic categories: head lice, topical pain and dry skin and eczema helped to identify particular challenges associated with introducing self-regulatory requirements and a pre-advertising approval system in the prevailing climate.

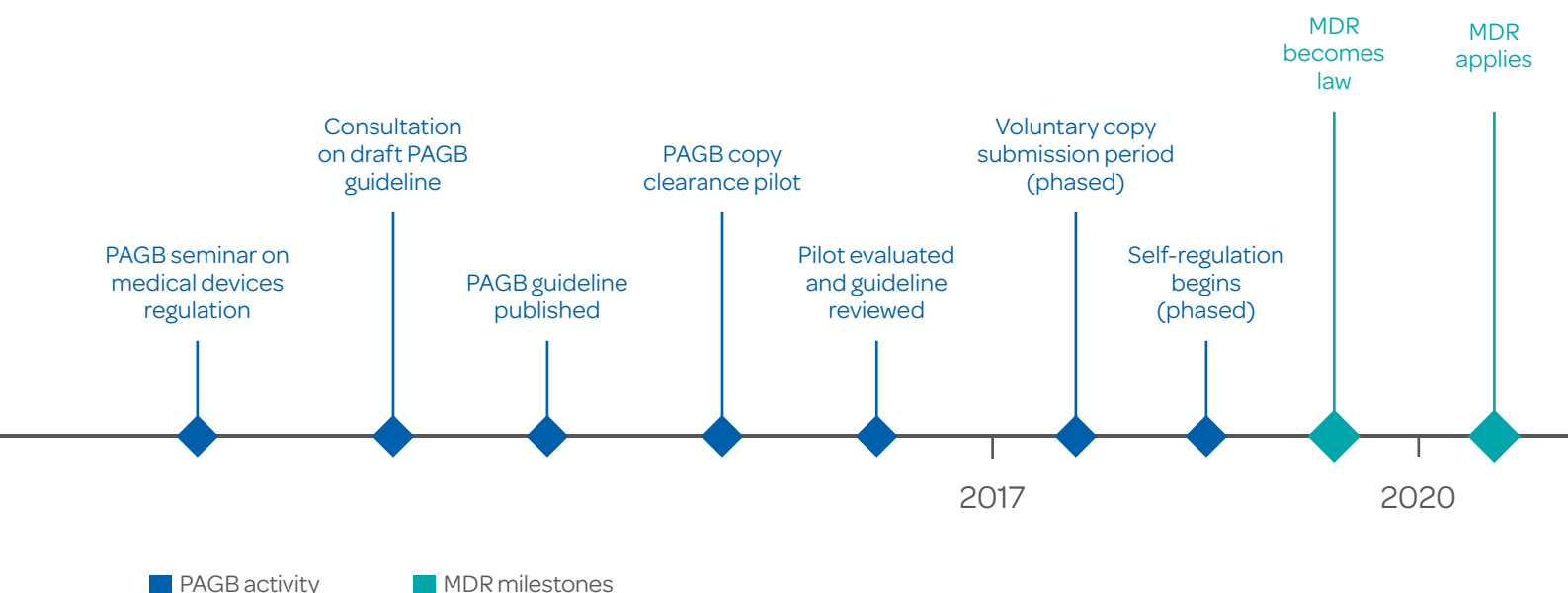
PAGB began a phased roll-out of the copy clearance service to include all PAGB member self care medical devices products in January 2017; however, we are continuing to review and adapt the guideline and implementation plan, in consultation with our members, to ensure that it meets their needs in the longer term.



### What is a substance-based medical device?

Unlike medicines, these products don't work by pharmacological, metabolic or immunological means but by a physical mode of action. The medical devices category is broad and includes complex diagnostic equipment, implants and many other products that are not included in PAGB's remit of 'substance-based, self care medical devices'.

Medical devices don't always look different to medicines; formats include sprays, pumps, creams, gels and tablets.





With continued pressure on the NHS, the need to empower people to self care has never been greater.

This is a key pillar in the PAGB strategy and we continue to campaign for self care to be recognised as an essential part of health policy.



PAGB works with 22 national associations to influence policy through AESGP (Association of the European Self Medication Industry). In 2016-17 we spoke at European meetings and conferences, sharing learnings from UK self care campaigns with our European colleagues.



**WSMI**

Through AESGP we are also represented on WSMI (World Self Medication Industry Association) which aims to promote self care at a global level.

### Putting the case to policymakers

PAGB has continued to make the case for self care to politicians and policy makers. We agreed our key priorities for self care and shared these with political parties at the general election in 2017. Self care is also at the heart of PAGB's Position on EU Exit, which we are using in our engagement with policy makers throughout the negotiations.

In 2016-17 we attended several meetings with government officials at the Department of Health and met with the health adviser at Number 10. We also met with the new Department of Health team responsible for food supplements regulation, and briefed MPs on malnutrition (November 2016), securing support from the shadow health team.

PAGB contributes to the early formation of policy and proposed changes to the current regulatory framework through working groups and industry fora, providing evidence-based arguments that promote and protect the importance of over-the-counter medicines, medical devices and food supplements for self care.

### In 2017 PAGB submitted responses to consultations on:

- Nutrition and Health Claims Regulation (REFIT), February 2017
- Mandatory fortification with folic acid (Scotland) – SACN (Scientific Advisory Committee on Nutrition), March 2017
- Primary Authority – Regulatory Delivery, March 2017

To help our members understand the policy process, the PAGB-funded Health and Food Supplements Information Service (HSIS) held an expert seminar in March 2017 about government recommendations on micronutrient supplementation, how these came to be introduced, and the potential for further progress.





We continued to provide the secretariat to the All Party Parliamentary Group on Primary Care and Public Health in 2016-17. Its inquiry into Managing Demand in Primary Care: the case for a National Strategy (February 2017) focussed on self care as an important contribution to reducing pressure on the NHS. We briefed MPs on self care in advance of a parliamentary debate in Self Care Week which explored the inquiry's recommendations.

### Putting the case to healthcare professionals

We have been working to strengthen relationships with pharmacy organisations and support the pharmacy sector to seize the opportunity presented by self care.

Our Chief Executive John Smith has a monthly column in the pharmacy magazine P3 and took part in a webinar about the pharmacy reforms.

We are building relationships with the Royal College of General Practitioners and Age UK to support public affairs engagement on self care and work with a number of other professional organisations, including the Royal College of Nursing, to support the Self Care Forum.

HSIS expert, Dr Carrie Ruxton presented on healthy and active ageing to Food Matters Live, a conference for the food industry and nutrition professionals, in November 2016.

PAGB campaigns that helped make the case for self care.



**Self Care Nation** results of a survey on self care attitudes and behaviours (November 2016)



**Five Examples of Waste in the NHS** challenged policy makers to recognise the importance of self care (November 2016)



**Enabling self care in Greater Manchester**  
An analysis of data on NHS activity in Greater Manchester to identify potential savings to the NHS from self care policies (February 2017)

# 'The moment for self care has arrived!'

Then Health Minister, David Mowat MP, 22 November 2016



Self care has definitely moved up the agenda in Government and in local health communities, thanks in large part to the continued efforts of the Self Care Forum, says PAGB's Libby Whittaker, who manages the group's activities.

'The Self Care Forum, with PAGB's assistance, is the only organisation at local or national level providing support to health and care providers, commissioners and individuals to empower people in looking after their own health.'

**Dr Pete Smith, Co-Chair, Self Care Forum**



In 2016 the Self Care Forum became a registered charity. Established by PAGB in 2011, PAGB now supports the Forum with an annual grant and staff resource to manage its activities, as well as sitting on its Board. We are working with the charity in the next stage of its development: a more diverse funding model and business plan to support it into the future.

Sustained efforts to raise the profile of self care for self-treatable conditions have paid off, and the Self Care Forum has become known by primary care and public health organisations as a valuable resource to support self care in practice.

National organisations have referenced Self Care Forum data and activities in their policy papers and guides, including the British Medical Association, the Local Government Association and the Nuffield Trust.

But it's at the primary care and public health coalface with general practices, clinical commissioning groups and local authorities that the Self Care Forum's impact is most critical. Under pressure to deliver high quality care against a backdrop of escalating service demand and reduced budgets, local health providers and commissioners have begun to recognise the opportunities presented by self care models. We have seen more examples of providers encouraging their patients and population to take better care of their own health, to use NHS resources wisely and think 'self care first'.

The Self Care Forum is now the first port of call for many local NHS organisations looking for support in developing appropriate strategies to embed self care in their communities. 110 delegates, mostly from NHS organisations attended the Self Care Conference in 2016. The Self Care Forum also organises Self Care Week, which provides a focus for activity nationwide, and resources and tools to help local health teams promote self care.

supporting

**STAY WELL  
THIS WINTER**

Eight cough, cold and flu brands supported Stay Well This Winter, Public Health England and NHS England's national winter health campaign.

**92%**

of pharmacists were aware of the 2016/17 Stay Well This Winter campaign and 79% displayed the campaign resources.

**77%**

of pharmacists think the Stay Well This Winter campaign encouraged more people to ask for advice or information about what to do when they have a winter illness such as flu, a cold, cough or sore throat.

'Public Health England is delighted that PAGB has made a commitment to continue to support our Stay Well This Winter campaign. We are excited to continue to build our partnership with PAGB, across a range of health issues, where pharmacists play a crucial role.'

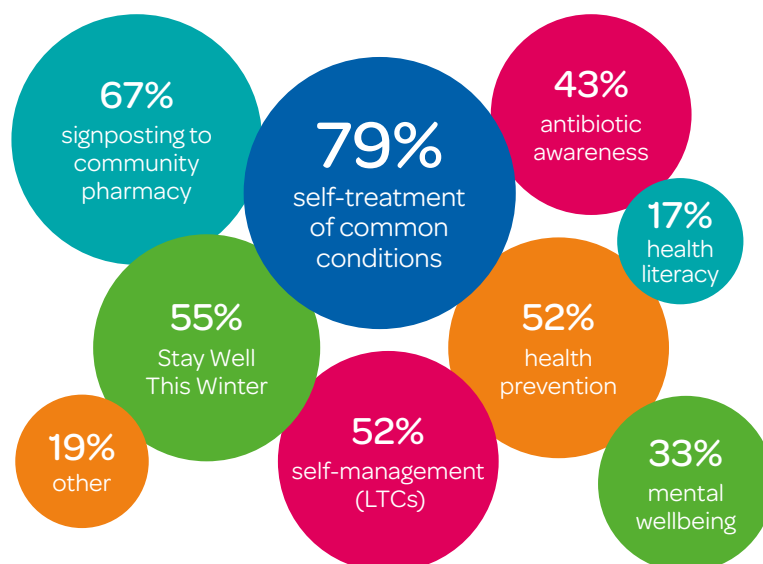
**Sheila Mitchell,**  
Marketing Director at  
Public Health England

## Self Care Week 2016 – the best yet

- **200+ organisations took part.**  
200% increase since 2011
- **www.selfcareforum.org** had over **43,000 unique page views** in Self Care Week. 30,000 more than in 2015
- Self Care Week was highlighted at **7 national and international conferences**
- **8,600 downloads of Self Care Forum fact sheets** in Self Care Week 2016. 2000 more than in 2015.



Self-treatment of common conditions was the leading message in Self Care Week 2016, featuring in 79% of local campaigns



(source: 91% of practice managers in our OTC directory survey, March 2017)

## PAGB's OTC Directory

Sent to over 56,000 health professionals in 2016, providing 'a unique source of information on OTC healthcare products'.

36,000	GPs
5,500	Practice nurses
5,900	Independent pharmacies
4,465	Multiple pharmacies
3,775	Schools of Pharmacy
991	Hospital pharmacies and Information and Poison Units

## The voice of the industry in challenging times

One of the key objectives of PAGB's media relations work is to defend the industry against any issues that might negatively affect people's attitude to self care.



Donna Castle, Director of Public Affairs and Communications, on the approach taken by PAGB in response to media issues.

It's one of our core communications services to members and supports our wider media strategy, which aims to promote the benefits of self care for self-treatable conditions.

The media often reports on research studies looking at the side effects of a range of commonly used medicines. Many of these studies are based on prescription use but journalists often reference more well-known over-the-counter products.

Over the last year the most frequent media issues have related to analgesic ingredients, particularly paracetamol and ibuprofen, and heartburn medication.

PAGB aims to make sure media coverage is fair and not misleading. Where possible, we try to secure the inclusion of a PAGB quote to reassure the public that medicines on sale are appropriately safe if used in accordance with the instructions.

PAGB works closely with member companies to address arising media issues and to prepare statements. In 2016, PAGB developed a strong statement explaining the value of brands in response to the increasing media interest in the price of medicines in 2016-17.

'The PAGB media team has been a fantastic support to GSK Consumer Healthcare, particularly over the past 12 months. They respond quickly to media issues and produce quality position statements on behalf of the industry which are often included in the relevant news articles. As a result, PAGB – and ultimately its members – are viewed as a credible voice which helps to mitigate any potential negativity for the industry when issues arise.'

In the year to 30 June 2017

54

media issues on OTC medicines and self care medical devices

94%

of coverage included a PAGB quote

15

issues on food supplements





PAGB funds HSIS, the Health and Food Supplements Information Service, which engages independent experts, such as dietician, Dr Carrie Ruxton, and nutritionist, Dr Emma Derbyshire, to provide accurate and balanced information to journalists on nutrition and food supplements.

There was a slight increase in the number of media issues on food supplements, but overall this has remained low.

## Raising the standard of reporting on food supplements

HSIS relaunched in April 2017 with a fresh look and new website, [www.hsis.org](http://www.hsis.org), specifically designed for the media and health professionals.

In its first 3 months, website users increased by 15% on the previous year, with increased page views (up 60%) and returning visitors 24% compared to 13% in the same period 2016.

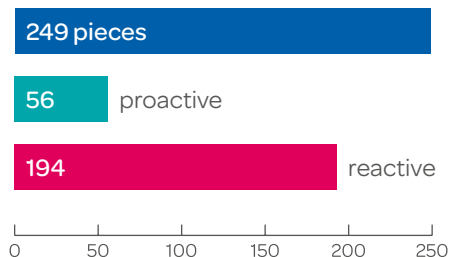
## Self care messages

PAGB promotes positive self care messages to the media, providing information and statistics that journalists can use in articles about any issues relating to self care, over-the-counter medicines and medical devices, and food supplements.

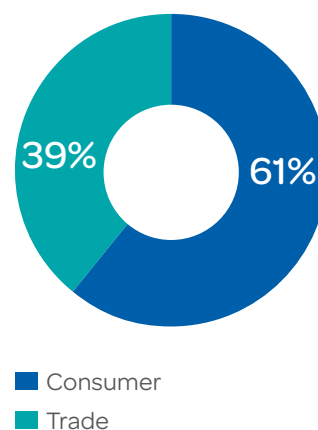
PAGB's Self Care Nation survey explored people's attitudes to self care and their behaviour. These figures were used to support media activity on self care and the role of pharmacists in changing self care behaviour.

- **Nearly half (46%)** of people admit **using GP and A&E services for minor conditions**
- **Four in five would rethink which service to use**, if they knew the impact on the NHS
- **47% wouldn't visit their pharmacist first** for advice or medication for a self-treatable condition

## PAGB media coverage (excluding HSIS) 1 July 2016-30 June 2017



## Proactive coverage 1 July 2016-30 June 2017



## PAGB working groups met 27 times between July 2016 and June 2017.

### How do PAGB members have their say?

PAGB member companies provide representatives to sit on working groups and committees. This is an opportunity for formal input into PAGB policy and work programmes. PAGB invites member input on other issues on an ad hoc basis via virtual working groups.

We also meet with individual member companies throughout the year to discuss their priorities and to get feedback on PAGB services.

Our member satisfaction surveys provide an opportunity for companies to give positive and constructive feedback too. We're always at the end of the phone – we encourage members to contact us for more information or to share ideas.

In 2017 PAGB held a meeting of associate members to provide input on associate member benefits and services. We are working on projects to deliver real clarity on what membership of PAGB means for current and potential members.



**Working groups also communicated by telephone and email to turn around important projects including:**

- PAGB's position on EU Exit
- Ingredient issues
- Public affairs programme
- Pilot on self-regulation of medical devices
- Consultation responses

# PAGB working groups and committees

correct at 30 June 2017

## PAGB Board

PAGB strategic direction  
and work programme

### President

David Barnett, GSK Consumer Healthcare

### Vice Presidents

Chris Mummery, Sanofi  
Steve Troote, RB

## Operations Group

PAGB operations, finance

### Committee chair

John Smith, PAGB

## Regulatory Affairs Group

Regulatory issues for OTC medicines  
and substance-based medical devices

The Group has four sub-groups  
on specialist issues:

- EU Exit
- Naming
- Switch
- Pharmacovigilance

### Committee chair

Gill Peckham, Johnson & Johnson

### Vice chairs

Cristina Bassi, RB  
Michelle Riddalls, Pfizer

## Food Supplements Forum

Food supplements regulation,  
ingredients, Health and Food  
Supplements Information Service (HSIS)

- Sub-group on exiting the EU

### Committee chair

Paulina Lukaszewicz, Pfizer

### Vice chair

Audrey LeMarche, Bayer

## Medical Devices Regulatory Group

Medical Devices Regulation,  
relationship with MHRA and EU bodies

### Committee chair

Dafydd Taylor, PAGB

### Vice chair

Linda McLaughlin, Mentholatum

## Public Affairs and Communications Group

Media relations, public affairs campaigns

### Committee chair

Donna Castle, PAGB

## Advertising Committee

Codes and guidance, advertising  
approval and advice service

### Committee chair

Kate Howlett, PAGB

## Our members

## PAGB members



Membership at 30 June 2017



## PAGB associate members



PAGB members are companies that manufacture and/or market branded non-prescription medicines, self-care medical devices, food supplements or registered herbal medicines in the United Kingdom.

Associate members are companies that offer, or could offer, services to PAGB or its member companies including but not limited to, advertising agencies, PR consultancies, regulatory consultancies, marketing agencies, sales and distribution companies and public affairs agencies.

Companies that are seeking to reclassify a medicine from a prescription only medicine (POM) to a pharmacy (P) or general sales list (GSL) category medicine; or developing a new product are eligible to join as 'gateway' associate members.

Here's a short guide to who does what at PAGB.

We're a small but dedicated team with expertise in advertising, regulation, finance, public affairs, communications and training.

**1. John Smith**

Chief Executive

Strategic overview, EU Exit, industry representative on national and international bodies.

**2. Donna Castle**

Director of Public Affairs and Communications

PAGB policy positions, EU Exit, public affairs and stakeholder relations, media relations including HSIS.

**3. Katharine Mason**

Director of Regulatory and Legal Affairs

Regulatory affairs, EU Exit, ingredient issues, oversight of advertising and regulatory services.

**Advertising**

Codes and guidance, copy advice and approvals, workshops, compliance.

**4. Kate Howlett**

Advertising Services Manager

**5. Bethany Collison**

Codes of Practice Assessor

**6. Alex Teckkam**

Codes of Practice Assessor

**7. Victoria Trowse**

Codes of Practice Assessor

**Regulatory Affairs**

Regulatory support on OTC medicines, medical devices and food supplements.

**8. Dafydd Taylor**

Regulatory and Medical Affairs Manager

**9. TC Callis**

Food Supplements Regulatory Manager

**Public Affairs and Communications**

Promotion of PAGB and the consumer healthcare industry to members and wider stakeholders, public affairs, self care campaigns.

**10. Nikki Kennedy**

Communications Manager

**11. Libby Whittaker**

Public Affairs Executive;  
and Self Care Forum

**Operations and Administration**

Administrative and operational support for PAGB and its members.

**12. Pauline Young**

HR and Administration Manager;  
PA to senior management team

**13. Lorraine Lee**

Membership Secretary;  
Finance and Facilities Manager

**14. Sandra Smith**

Operations Assistant Finance

**15. Lauren Higgins**

Reception and Operations Assistant



'As President, I'm committed to working with PAGB to promote self care and shape the consumer healthcare industry. I've been involved with trade associations across the world and I am proud to say that PAGB is among the very best.'

David Barnett,  
Area General Manager Northern  
Europe at GSK Consumer Healthcare  
PAGB President



David Barnett, PAGB President

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of Great Britain**

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Company No. 00375216  
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