

Psychotropic Drugs Committee

Clozapine Coordinator Role Statement

Each mental health hospital unit and CMHT involved with clozapine management requires a systematic approach to coordinating the clozapine service led by designated Clozapine Coordinators sponsored by lead Consultant Psychiatrists. Clozapine Coordinators work as part of a multidisciplinary team in accordance with the Therapeutic Goods Administration (TGA), the relevant manufacturers monitoring system, the Pharmaceutical Benefits Scheme (PBS) and the SA Health Clozapine Clinical Guideline.

The clozapine service involves multiple stakeholders that rely heavily on timely communication and engagement of local services and where possible GP Shared Care supported by specialist mental health services as follows:

1. GENERAL CENTRE COORDINATION

- a) Ensuring compliance with TGA, relevant manufacturer monitoring protocol, PBS and the SA Health Clozapine Clinical Guideline*
- b) Coordination of all registrations with the manufacturer's database involving participants, Medical Officers, GPs, pharmacies and pharmacists involved in checking bloods or physical assessments*
- c) Distribution of all necessary communication in relation to participant monitoring to relevant staff using the CPN for cross reference in correspondence with registered healthcare providers*
- d) The manufacturer recommends maintenance of an active personnel and pharmacy log*
- Monitoring weekday email alerts or running the OACIS clozapine report each morning to identify hospital admissions and ED presentations, liaison with the treating team or consult liaison service
- f) Initiation and updating of clozapine alerts in OACIS/EPAS, CBIS, CCC, and BART as appropriate
- g) Documentation on all relevant data systems and paper based forms as per SA Health guidelines
- h) Contribution to the mental health care plan or service plan that identifies process, roles and reasons for any variance to protocols
- i) Participation in clinical team reviews

2. EDUCATION

- a) Education of participants regarding clozapine, the monitoring regime and the roles of the various health professionals involved
- Education of medical officers, other clinical staff, participants and relevant other stakeholders on specific clozapine monitoring and documentation (electronic and paper-based) requirements
- c) Ensure up to date clozapine information and resources are stored in the clinic or team centre*
- d) Ensure GPs and pharmacists are kept informed and supported in their role

3. PHYSICAL HEALTH REVIEW AND APPOINTMENTS

- a) Coordination of physical health review appointments in line with frequency indicated by the relevant manufacturer and as clinically indicated
- b) Ensure necessary blood tests are performed and that a system of review is in place and acted upon that includes the full monitoring requirements including GP Shared Care*
- c) Assisting with prescription logistics; faxing or posting scripts to pharmacies where required
- d) Follow up non-attendance and clozapine/medication adherence issues
- e) Coordination of psychiatry reviews six monthly or as clinically indicated

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4. LIAISON AND KEY RELATIONSHIPS

- a) Liaison with participants, care coordinators, family, carers, supported accommodation staff and NGOs regarding the co-ordination of:
 - i.Blood tests and cardiac monitoring
 - ii.Attendance of clinic / GP review appointments and health related issues.
 - iii. Pharmacy logistics such as payment, blister packs, collection of medication
- b) Liaison with pathology and cardiac services when required; advocating for bulk billing
- c) Liaison with pharmaceutical product manager and monitoring service as required
- d) Liaison with SA Hospital, community pharmacies and other health services to ensure continuity of medication management at transition of care
- e) Engages the support of the CMHT for case management of participants in the initiation phase and those with high or complex needs

5. QUALITY

All clozapine centre coordinators are responsible for

- a) Utilising the local LHN meetings to provide feedback to line managers regarding clinical issues and workload, escalating care where required
- b) Reporting performance and outcomes as required by the Psychotropic Drugs Committee
- c) Participation in audits
- d) Maintenance of professional development and keeping up-to-date with current literature and resources for clozapine management

*CPMS Protocol Centre Coordinator Guideline

Document title:	Clozapine Coordinator Role Statement
First developed:	Feb 2009
Version Number:	4
Last reviewed:	May 2016
Replaces document:	Clozapine Duty Statement
Author:	Chief Psychiatrist
Audience:	Medical, nursing, midwifery, pharmacy and allied health staff in South Australia public and private services

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