



SOUTH AUSTRALIAN PSYCHOTROPIC DRUGS COMMITTEE (SAPDC) TERMS OF REFERENCE

Purpose of the Committee	SAPDC provides independent advice on rationale, use and practices related to pharmacological agents used in the treatment of psychiatric illness in South Australian health services and to professions prescribing psychotropic drugs, such as medical practitioners and nurse practitioners.
Role of the Committee	<p>The SAPDC will:</p> <ul style="list-style-type: none">• Provide expert advice on psychotropic drug use in health service delivery.• Develop, review and provide recommendations on state-wide guidelines, protocols and procedures related to psychotropic drug use, as appropriate.• Provide advice about the listing and use of psychotropic drugs on the formulary.• Support the reduction of adverse medication events in mental health services.• Oversee and support specialist medication committees and community of practice (CoP) to encourage consistent approaches to medication management across SA. <p>The SAPDC will focus on activities that are:</p> <ul style="list-style-type: none">• National or state priorities• Consumer priorities• Measurable• Best-practice based• In response to a request from or on behalf of the Chief Psychiatrist.
Accountability	<p>SAPDC provides recommendations for consideration and is directly accountable to the South Australian Medicines Advisory Committee.</p> <p>SAPDC provides reports to the Strategic Mental Health Quality Improvement Committee</p> <p>SAPDC may provide relevant advice directly to the Chief Psychiatrist and will inform the Strategic Mental Health Quality Improvement Committee of the nature of this advice.</p> <p>SAPDC provides oversight and support to The Clozapine Strategic Management Group (CSMG). The SA Health Long-Acting Intramuscular Injection (LAI) CoP</p>
Meetings	<p>Meetings to occur quarterly and when necessary, consideration to “out of session” papers may be required.</p> <p>The location of SAPDC meetings will be at the discretion of the Chairperson and determined in consultation with members.</p> <p>Committee members may be required to continue to work on items identified during meetings outside-of-session, which may necessitate more frequent correspondence, meetings, or involvement in working parties for select projects.</p>
Confidentiality	<p>Members must be mindful of and respect the confidentiality of any information brought before or discussed at SAPDC meetings.</p> <p>Material of a confidential nature should be marked ‘Confidential’.</p>

Membership

Members may be appointed in relation to their professional networks, expertise and knowledge and on recommendation by the Chairperson or SAPDC members.

The SAPDC shall consist of at least six members. The total number of members is at the discretion of the Chairperson.

Members will include the following individuals, professions or nominees:

- Chief Psychiatrist (Chair)
- Manager Safety, Quality and Risk, Office of the Chief Psychiatrist (Executive Officer)
- Clinical Risk Manager, Office of the Chief Psychiatrist
- Advanced Nurse Consultant, MH GP Shared Care, OCP
- Chief Pharmacist or delegate
- Chair of Mental Health Pharmacy Group
- Psychiatrist(s) representing diversity of mental health services across Local Health Networks
- Nursing Director
- Consumer representative
- Carer representative
- Academic
- General Practitioner
- Psycho-Geriatrician
- Acute Medical Physician
- Rural and Remote Mental Health Services Specialist
- Technical expert as required

Tenure of Lived Experience Representatives

The tenure of the Consumer and Carer representatives will be for three years, with staggered terms to be applied. When a new member is appointed, the OCP will inform in writing when their tenure will expire. When a member chooses to resign from the group they must endeavor to provide timely notice to the Chair and the Executive Officer. Existing members may reapply for a consecutive term and they will be notified of the outcome by the OCP during the application process.

Nomination of proxy members will be at the discretion of the Chairperson, but normally only considered when a member is on extended leave.

A quorum will be 50% of members plus 1.

The administrative support will be responsible, in conjunction with the Executive Officer and Chair, for drawing up and circulating the agenda and related papers, supported by all relevant documentation including recommendations at least two weeks prior to each meeting. Agenda items and associated papers to be forwarded to Health.OCPSafetyQuality@sa.gov.au at least three weeks prior to each meeting.

The administrative support will be responsible for the taking of minutes and their circulation as soon as possible.

The Executive Officer shall keep the minutes and official records of the SAPDC.

A review of the Terms of Reference shall occur annually.

Draft Terms of Reference to be endorsed at the first meeting by a simple majority.

Psychotropic drugs refer to: antipsychotics, antidepressants, anxiolytics, mood stabilisers, stimulants and others as deemed relevant by the committee.