Western Australian Statewide Medicines Formulary
Expert Advisory Group: Western Australian Psychotropic Drug Committee

Terms of Reference

1. Name

The Group shall be an Expert Advisory Group (EAG) and continue to be known as the Western Australian Psychotropic Drug Committee (WAPDC).

2. Purpose

The Group will provide advice and recommendations relating to psychotropic medicines to support the Statewide Medicines Formulary (SMF) and the paediatric and neonatal sub-formularies.

3. Responsibilities

For psychotropic medicines under review for listing on the SMF or on the paediatric and neonatal sub-formularies, or for regular review of existing listings, the Group will provide advice and recommendations to the WA Drug Evaluation Panel (WADEP), including:

- consider the medicine according to the principles and processes outlined in the Statewide Medicines Formulary Framework
- assess the appropriateness for use in WA public hospitals and hence SMF listing
- formulate indications, restrictions, guidance, audit requirements or outcome reporting measures, where required
- undertake wider consultation with relevant colleagues, where necessary

The Group will provide advice and recommendations to support strategic and project functions to the WA Therapeutics Advisory Group (WATAG) in relation to the SMF:

- provide advice to guide the standardised usage of psychotropic medicines in Western Australia based on scientific knowledge of clinical efficacy, safety and cost-effectiveness;
- provide advice in relation to the design and interpretation of psychotropic medicines utilisation reviews to support and enhance equitable, safe and quality use of medicines in Western Australia;
- assist other assurance functions through provision of advice as requested by WATAG.

Where appropriate, the Group will provide advice to the Chief Pharmacist if medication issues are identified.
4. Membership

The Chair of the WAPDC will be a clinician with psychiatric medicine expertise.

Membership will include at least 3 voting members and where practicable will comprise of a representative of each Health Service Provider. Membership will be made up of the following:

- At least 3 senior medical staff with expertise in the psychiatric medicine;
- 1 to 3 senior pharmacists with an interest in the psychiatric medicine and in medicines evaluation
- 1 to 2 mental health nurses or nurse practitioners
- 1 academic expert
- 1 consumer representative
- 1 carer representative

One member should ideally have a paediatric focus and/or experience.

One member should ideally have an older adult focus and/or experience.

Members may be opted in for specific subspecialties at the discretion of the Chair or WATAG.

4.1 Appointments

The Chair of the WAPDC will be appointed by the Chair of WATAG.

Members may be appointed in relation to their professional networks, expertise and knowledge by WATAG and/or the Chair. Members may be drawn from the metropolitan and country health services. Where possible membership should be broad ranging and represent areas of practice specific to psychiatric medicine. Potential members may be identified by WATAG and the WAPDC, Heads of Departments, Health Networks or expression of interest sought by advertisement.

The Chair and members will be appointed for a term not exceeding three years at which point the position will be eligible for renomination and reappointment.

4.2 Responsibilities

The Chair is responsible for providing leadership, open communication to all stakeholders and working with the Secretariat to ensure the Group’s responsibilities are carried out optimally.

Members are to actively participate in all meetings and decision making; gather, share information and provide expert advice to support the SMF through WATAG and WADEP.

The Secretariat for the Group will be provided by the Patient Safety and Clinical Quality Directorate. The Secretariat may provide advice to the Group but will not have voting rights. The Secretariat will be responsible for facilitating decision making by the Group, recording

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1 Refers to North, South and East Metropolitan Health Service; Child and Adolescent Health and WA Country Health Services.
minutes of meetings and managing and storing documents arising from the Group’s activities.

4.3 Corresponding members:
- the Chair, in consultation with members, may establish a network of stakeholders as corresponding members who are not required to attend meetings, but will receive agenda and minutes of the Committee, and may participate in email discussions, consultations and communications from WAPDC
- the appointment of a corresponding member is at the discretion of the Chair and is subject to review at all times
- will not ordinarily be entitled to vote on WAPDC resolutions, but may be co-opted by the Chair or act as proxies with voting rights, at the discretion of the Chair
- will be required to declare any actual, potential or perceived conflict of interest
- will be required to observe the confidentiality of committee business and not circulate WAPDC information or material to others, unless requested to do so.

4.4 Accountability
The Group reports and is directly accountable to WADEP for SMF listing recommendations and to WATAG for advice relating to strategic planning, medicines usage and specific projects. These groups report to the Executive Director, Patient Safety and Clinical Quality Directorate and the Assistant Director General, Clinical Excellence Division.

4.5 Frequency and location
Business will be conducted out of session wherever possible. Meetings (face to face or teleconference) will be held at the discretion of the Chair or as agreed in consultation with members, in response to need.

4.6 Quorum
Half the number of official voting members or greater is required to constitute a quorum.

4.7 Proxies
Proxies may be nominated by a member who is unable to attend a meeting and will be at the discretion of the Chair. Proxy nominations should be a specialist in psychiatric medicine.

4.8 Resolutions
Recommendations and other resolutions from the Group shall be passed by a majority of the members present. Resolutions at meetings where a quorum is not present will require confirmation at a later meeting at which a quorum is present.

4.8.1 Voting
The Chair shall have a deliberative vote and in case of an equality of votes, the Chair shall have a casting vote.
4.8.2 Out-of-session resolutions

The Chair may elect to determine the Group’s position by an out-of-session vote. A written proposal will be circulated to members with a time and date for responses to be returned. Members will be advised of the outcome promptly after a resolution.

5. Conflicts of interest

Each member of the Group shall abide by the WA Health Code of Conduct and declare any potential conflicts of interest in matters of concern to the Group. Members shall complete and sign a Declaration of Potential Conflict of Interest (COI) annually, at the commencement of a new calendar year, and declare any potential COI verbally when in a meeting or in writing when out-of-session matters arise.

Where a perceived, potential or actual conflict of interest has been declared, the Chair shall determine how to proceed and advise the meeting accordingly. The nature of the conflict and action by the Chair shall be recorded in the minutes.

6. Confidentiality

Members must be mindful and respect the confidentially or commercial sensitivity of any information brought before or discussed at the Group meeting or by email. Member votes and opinions and material marked “confidential” must not be discussed or circulated beyond the Group and WADEP or WATAG membership.

7. Adoption and Amendment

The Terms of Reference will be endorsed at the first meeting of every calendar year and updated when necessary. Amendments shall be ratified by WATAG.