

**CLOZAPINE POLICY**  
*(Medicines Management Reference MO1)*

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Applies to:	All clinical staff involved in the prescribing, supply, administration and monitoring of clozapine.

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## DOCUMENT CONTROL

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## 1. INTRODUCTION

- 1.1 Clozapine is an antipsychotic drug licensed for treatment-resistant schizophrenia and those experiencing severe, untreatable neurological adverse reactions to other antipsychotic agents. Clozapine is also licensed for the treatment of psychotic disorders occurring during the course of Parkinson's disease, where standard treatment has failed.
- 1.2 Clozapine can only be prescribed by consultants registered with a clozapine monitoring service or by individuals under their direction. It cannot be prescribed by a patient's general practitioner. For registration requirements, please see SOP CLOZ01 and forms on patient monitoring website.

## 2. PURPOSE AND RATIONALE

- 2.1 The purpose of the policy is to promote safe and effective use of clozapine.

## 3. POLICY STATEMENT

- 3.1 This policy advises staff on the position the Trust takes for prescribing, dispensing or supply, administration and monitoring of clozapine in Trust premises or patient's place of residence. It also offers guidance to staff on how they can support patients who may be prescribed clozapine.
- 3.2 The Clozapine Management SOPs describe the procedures for the management of clozapine. The [Medicines Policy](#) describes standards required for the management of medicines.

## 4. DEFINITIONS

- 4.1 **CPMS – Clozaril Patient Monitoring Service**  
The patient monitoring service operated by Mylan as part of the licensing requirements of the **Clozaril®** brand of clozapine. Contact details are listed on the Trust intranet under [Medicines > Clozapine](#)
- 4.2 **DMS – Denzapine Monitoring Service**  
The patient monitoring service operated by Britannia Pharmaceuticals LTD as part of the licensing requirements of the **Denzapine®** brand of clozapine. Contact details are listed on the Trust intranet under [Medicines > Clozapine](#)
- 4.3 **Analytical Services International**  
The Clinical Diagnostic Pathology Service where blood samples are sent for plasma concentrations to be measured.
- 4.4 **POCBA system**  
The POCBA (point of care blood analyser) is supplied by Sysmex UK Limited and consists of the **pocHI-100®** machine and computer software to

communicate with the monitoring services. A set of equipment is located in each clozapine clinic.

4.5 **Full Blood Count (FBC)**

FBC monitoring to identify the development of severe blood dyscrasias caused by clozapine is undertaken at regular intervals as per the monitoring service requirements and as clinically indicated.

4.6 **SOP – Standard Operating Procedure**

Established or prescribed methods to be followed routinely for the performance of designated operations or in designated situations

**5. DUTIES AND RESPONSIBILITIES**

5.1 The **Chief Executive** is ultimately responsible for ensuring the Trust complies with legal requirements and national recommendations for medicines management.

5.2 The **Trust Board** has a responsibility to ensure training is available to all relevant staff.

5.3 The **Chief Medical Officer** is the Executive Lead responsible for this policy but will delegate authority for the operational implementation and management of this policy to the Chief Pharmacist.

5.4 The **Chief Pharmacist** is responsible for the operational implementation and management of this policy.

5.5 The **Chief Nurse** is the Executive Lead for Non-Medical Prescribing for the Trust.

5.6 The **Director for Mental Health and Learning Disability Care** has devolved responsibility for Non-Medical Prescribers, ensuring training, updates and Non-Medical Prescribing information is cascaded.

5.7 The **Service Directors** are accountable for ensuring that the clozapine clinics are appropriately staffed and resourced and responsible for ensuring improvements, where necessary, are implemented.

5.8 **CMHT Operational Service Manager** – is responsible for ensuring that the clozapine clinics are appropriately staffed and resourced

5.9 Each **Registered Healthcare Professional** is accountable for their own practice and will be aware of their legal and professional responsibilities and work within the Code of Practice of their professional body. All healthcare professionals involved in the use of clozapine:

- Must acquaint themselves with this policy and SOPs and related policies

- Will be aware of the action that should be taken if their practice or their patients' safety is compromised
  - Must be aware of the safe dose range, frequency, side effects, contraindications and interactions of clozapine
  - Must monitor the patients for side effects and adverse reactions and manage them appropriately
  - Must be aware of their limitations and seek advice or support from appropriate health professionals when in doubt
- 5.10 **All Staff** must appreciate the importance of involving the patient and/or carer in their treatment as much as possible, This includes ensuring the patient and/or carer has been given information about the treatment in a language and format which they can easily understand, that they agree to the use of clozapine and appreciate as far as possible any risks of side effects
- 5.11 **Line Managers** are responsible for ensuring that all involved in the use of clozapine staff are conversant with this policy. Line managers are responsible for ensuring that staff attend mandatory clozapine training in line with the Staff Mandatory Training Matrix.
- 5.12 **Consultant psychiatrists** are responsible for ensuring that all medical staff in their team, including themselves, are competent to prescribe clozapine and are following this policy and SOPs where applicable to their practice.
- 5.13 **Clozapine Clinic Staff** are responsible for completing the required clozapine-related monitoring of patients attending the clinic.
- 5.14 **Systemex UK Limited** is responsible for the maintenance and repair of the POCBA, training of certified users and providing training material for certified users to train other operators.
- 5.15 **Mylan** is responsible for ensuring that the operating instructions for the POCBA comply with the licensing requirements for Clozaril and for the operation of the CPMS. They are also responsible for monitoring completion of the Systemex Point of Care online training and will notify the Chief Pharmacist, within one working day of anyone who is subsequently prohibited from using the machine as a result of non-completion of the training.
- 5.16 **Britannia Pharmaceuticals Ltd** is responsible for the operation of the DMS within the licensing requirements of Denzapine.
- 5.17 **Yeovil District Hospital Pharmacy** is responsible for ensuring that dispensing of clozapine complies with the license requirements. They are responsible for the production of all Standard Operating Procedures (SOP's) for the dispensing process and for ensuring their staff are competent to dispense clozapine. They will investigate any dispensing or supply incidents and report their findings back to the Chief Pharmacist of Somerset Partnership NHS FT

- 5.18 The **Medicines Incident Group** is responsible for reviewing incidents involving clozapine and disseminating lessons learned.
- 5.19 The **Trust Clozapine Forum** is for clozapine clinic staff to receive ongoing training and peer and managerial supervision.
- 5.20 The **Medicines Oversight Group** is responsible for approving the policy, ensuring that it is audited appropriately and reviewed at appropriate intervals.
- 5.21 The **Learning and Development Department** is responsible for ensuring sufficient provision of training, monitoring attendance and reporting training completion rates to Local Managers.

## 6. CLOZAPINE POLICY

6.1 Clozapine is accepted for initiation in the Trust for its licensed indication and in accordance with relevant [NICE guidance](#).

- Treatment resistant schizophrenia in people whose illness has not responded adequately to treatment, despite sequential use of adequate doses of at least 2 different antipsychotic drugs including an atypical antipsychotic agent for an adequate duration, or in those who have severe, untreatable neurological adverse reactions to other antipsychotics
- Psychosis during the course of Parkinson's disease in cases where standard treatment has failed.

6.2 Clozapine prescribed for any other indication is considered "off-licence", the relevant monitoring service must be informed and intended use should be discussed with the clinical director.

This includes clozapine for patients receiving chemotherapy, which might affect their FBC results, and where clozapine cannot be discontinued. The Medical Team must discuss with the relevant monitoring service as it may prevent generation of automatic alerts.

Refer to the [Medicines Policy](#) for details of requirements for "off-licence prescribing.

6.3 The brands of clozapine currently approved for use in the Trust are:

- Clozaril tablets – Clozaril Patient Monitoring Service (CPMS)
- Denzapine liquid – Denzapine Monitoring Service (DMS)

Where care of a patient on a different brand of clozapine is transferred to the Trust, patients will be switched, with appropriate due diligence, to the equivalent Trust approved brands.

## 6.4 Initiation or re-titration of Clozapine

- 6.4.1 Before initiating clozapine, individuals must be provided information in a format accessible for the individual, to enable them to make an informed choice on treatment.
- 6.4.2 Initiation, re-titration and stopping clozapine must be managed by the supervising specialist in conjunction with the medical and nursing team. The appropriate Clozapine Clinic and Medicine Management team should be notified.
- 6.4.3 Suggested dose schedules for initiating clozapine are in SOP CLOZ 07. Increasing the rate of titration described in these schedules is not recommended.
- 6.4.4 The initiating/supervising specialist, dispensing pharmacy and patient must comply with the requirements of the relevant patient monitoring service.
- 6.4.5 For initiation or re-titration of clozapine, the Trust's position is that patients can be admitted to hospital or treated in community. The decision must be an individualised patient centred choice, however clinical safety is paramount. The inclusion criteria within SOP CLOZ01 (Initiating clozapine all settings) and SOP CLOZ02 (Initiating/re-titration in community) must be followed.
- 6.4.6 Patients who previously experienced any respiratory or cardiac arrest or any other serious adverse reaction during initial dosing **must** be admitted to hospital for re-titration
- 6.4.7 For a community titration or re-titration to proceed, it must be authorised by the Chief Pharmacist (or nominated deputy).
- 6.4.8 The decision to initiate clozapine in the community must be made in conjunction with the multidisciplinary team with agreement from all parties: HT team, care co-ordinator and CMHT manager, local clozapine clinic, local inpatient ward manager, senior medicines management pharmacist, patient, family/carer.
- 6.4.9 Use of liquid formulation of clozapine for initiation or re-titration must only be undertaken in exceptional circumstances and must be approved by the Chief Pharmacist (or nominated deputy).
- 6.4.10 Full information about the initiation process for in-patients and in community is in SOP CLOZ01 (Initiating clozapine all settings) and SOP CLOZ02 (Initiating/retitration in community).



## 6.5 Prescribing

- 6.5.1 Clozapine must only be prescribed by a consultant psychiatrist, or by a prescriber (including non-medical prescribers) working under the supervision of a consultant psychiatrist who is registered with the appropriate monitoring service.
- 6.5.2 Non-medical prescribers are not permitted to initiate clozapine, even under the supervision of a consultant psychiatrist who is registered with the appropriate monitoring service

## 6.6 Monitoring

- 6.6.1 Clozapine can cause serious blood dyscrasias (agranulocytosis & neutropenia). Monitoring FBCs is a legal requirement, at the frequency specified in the license for each brand of clozapine (SOP CLOZ 03 & SOP CLOZ 04).
- 6.6.2 Other monitoring required includes physical health, assessment of side effects, smoking status (Prescribing Guidance PX:CLOZ 01) and monitoring mental state.
- 6.6.3 Assessment of side effects should include using a validated tool such as GASS-C monitoring, available on the medicines pages of the intranet (Prescribing Guidance PX:CLOZ 02).
- 6.6.4 Managing side effects: constipation is an important side effect of clozapine the consequences of which may be life-threatening. Guidance on managing the effect of clozapine on gut motility is available on the medicines pages of the Trust intranet (PX: CLOZ 02).
- 6.6.5 Hypersalivation is a distressing side-effect of clozapine that may be a significant cause of non-compliance with treatment and potentially serious consequences. Guidance on managing hypersalivation is available on the medicines pages of the Trust intranet (Prescribing Guidance PX: CLOZ 03)
- 6.6.6 Results of monitoring and side effect assessment must be recorded in the electronic patient record using the designated forms.
- 6.6.7 The Trust supervising specialist is responsible for ensuring that their Clozapine patients have an appropriate review at least once a year (to include clozapine assay and results of physical health monitoring tests).
- 6.6.8 It is recommended that all clozapine patients attend their local Trust Clozapine Clinic for recommended monitoring.
- 6.6.9 If patients attend their GP surgery for FBC monitoring, they should have their physical health and side effects monitored by the GP. The

Trust prescriber retains responsibility to ensure that monitoring is appropriate and timely.

6.6.10 If the required monitoring is not being completed at the GP surgery the Trust prescriber is responsible for ensuring that appropriate arrangements are made so that monitoring takes place.

## 6.7 Ordering, supply and administration of medication

6.7.1 Only pharmacies registered with clozapine providers can supply clozapine. The supplier for the Trust is Yeovil District Hospital. The process for ordering medication for inpatients is outlined in SOP CLOZ05 and SOP CLOZ06. Contact information, including out of hours provision, is on the Trust intranet, under [Medicines > Medicines Supply Service](#)

6.7.2 The Trust prescriber is responsible for ensuring that the required prescriptions are sent to the registered pharmacy, including patients who attend their GP for FBC monitoring.

6.7.3 Clozapine will always be dispensed as individually named patient supplies. Supplies must never be administered or supplied to another patient (unless specifically authorised by a Trust senior pharmacist or lead technician)

6.7.4 Receipt of dispensed clozapine, storage and issue/delivery to patients must be in line with the Medicines Policy.

## 6.8 Discharge from hospital

6.8.1 Information about factors to be considered for the discharge of patients on clozapine is in SOP CLOZ08.

# 7. MONITORING COMPLIANCE AND EFFECTIVENESS

## 7.1 Monitoring arrangements for compliance and effectiveness

Overall monitoring of compliance with and effectiveness of the policy will be the responsibility of the Medicines Oversight Group.

## 7.2 Responsibilities for conducting the monitoring

The **Medicines Oversight Group** will be responsible for the monitoring compliance with the training requirements outlined in this policy.

The Trust **Clinical Audit Department** will be responsible for facilitating audits involving patients prescribed clozapine.

### 7.3 **Methodology to be used for monitoring**

Monthly clozapine training attendance reports to the Medicines Oversight Group.

The Medicines Incident Group will conduct an annual analysis of all reported incidents involving clozapine and will report this to the Trust Clozapine Forum.

Audit of patients prescribed clozapine to be included in the Trust Clinical Audit Plan and undertaken at least every 3 years.

### 7.4 **Process for reviewing results and ensuring improvements in performance occur**

Audit results will be presented to the relevant Divisional Governance Groups and Medical Audit Group for consideration, identifying good practice, any shortfalls, action points and lesson learnt.

Divisional Service Directors will be responsible for ensuring improvements, where necessary, are implemented and for reporting progress on actions to the Medicines Oversight Group.

## 8. **TRAINING AND COMPETENCY REQUIREMENTS**

8.1 The Trust will work towards all staff being appropriately trained in line with the organisation's Staff Training Matrix (training needs analysis). All training documents referred to in this policy are accessible to staff within the [Learning and Development Section of the Trust Intranet](#).

8.2 Trust Clozapine Training – mandatory training for all clinical staff involved in the Trust Clozapine Clinics and recommended training for all clinical staff involved with prescribing, administration or supply of clozapine and care co-ordinators. The training should be repeated every 3 years.

8.3 Pochi operators – certified POCHA machine operators must complete the training course provided by the manufacturer of the Pochi equipment (Sysmex). Certified operators can train other operators locally using training materials provided by Sysmex.

8.4 Sysmex Point of Care on-line training – to be completed annually by Pochi machine operators

## 9 **REFERENCES, ACKNOWLEDGEMENTS AND ASSOCIATED DOCUMENTS**

[NICE CG178:](#)

Psychosis and schizophrenia in adults: prevention and management 2014

[Clozaril Patient Monitoring Service \(CPMS\)](#)

## [Denzapine Monitoring Service \(DMS\)](#)

### **References**

Summary of Product Characteristics for Clozaril Tablets – accessed via <https://www.medicines.org.uk/emc/search?q=%22clozapine%22>

Summary of Product Characteristics for Denzapine oral solution - accessed via <https://www.medicines.org.uk/emc/search?q=%22Denzapine%22>

Sysmex Pochi 100i Training Manual

Maudsley Prescribing Guidelines, 13<sup>th</sup> Edition

## [Trust Guidelines for Monitoring Adult Patients Taking Psychotropics](#)

### **Cross reference to other procedural documents**

Capacity and Consent to Examination and Treatment Policy

Health and Safety Policy

ICPA (Integrated Care Planning Approach) Policy

Infection Prevention and Control Policy

Learning Development and Mandatory Training Policy

Medical Devices Policy

Medicines Policy

Point of Care Testing Policy

Risk Management Policy and Procedure

Untoward Event Reporting Policy and procedure

Waste - Healthcare Clinical Waste Policy

All current policies and procedures are accessible in the policy section of the public website (on the home page, click on 'Policies and Procedures'). Trust Guidance is accessible to staff on the Trust Intranet.

## **10 APPENDICES**

**For the avoidance of any doubt, please note that all Appendices are available on the Staff Intranet under [Operational Services>Medicines>Clozapine](#) and are not attached to this document.**

SOP01 Initiating clozapine all settings

SOP02 Initiating clozapine in the community

SOP03 Monitoring frequencies and re-titration schedules

SOP04 Clozapine FBC monitoring results and actions

SOP05 Ordering clozapine on inpatient units

SOP06 Ordering clozapine out of hours

SOP07 Titration and observation schedules

SOP08 Discharge from hospital on Clozapine