

# Metro South Health - Mental Health

Local Services Offered:

Investigator Initiated Trials; Trial Patient Recruitment; Treatment of patients; Completion of study documentation as per ICH GCP and contract

Details: This PDF complements the information found in the CSV generated by this website with additional site information.

<b><u>Facility Details:</u></b>	
Please provide your Facility Website.	<a href="https://www.metrosouth.health.qld.gov.au/hospital-and-health-centres">https://www.metrosouth.health.qld.gov.au/hospital-and-health-centres</a>
What Department is your Trial Site? ( <b>Queensland Health HHS- See List of Services and Levels-Clinical Services Capability Framework</b> ).	Medical services
Is your Facility affiliated with a government agency or part of a government funded health service?	Yes
Is your facility/organisation a Life Sciences Queensland (LSQ) Member?	No
Please provide other areas of expertise for your Facility.	Schizophrenia; Alzheimers
Provide the list of Sub-Therapeutic Areas for your Facility.	ADHD; anxiety; Bipolar Disorder; Dementia; Depression; Migraine; Schizophrenia; Smoking Addiction; Substance
Does your Clinical Trial site or Service undertake any recruitment?	Yes
What percentage of Clinical trials undertaken on your site do you meet or exceed the recruitment target?	80-90%
<b><u>IRB/ERB/Ethics Committee:</u></b>	
Does your Facility perform HREC (IRB/ERB/Ethics) Committee submissions?	Yes
Does your Facility have a dedicated department or group to perform HREC (IRB/ERB/ETHICS) Committee submissions?	Yes
What is the meeting frequency of your Local IRB/ERB/Ethics Committee?	Two meetings per week in NMA

Are there any other steps that the Sponsor should be aware of for your IRB/ERB/Ethics Committee review and submission?	No
Does the HREC Committee require payment prior to the release of final approval documents?	Yes
Does the HREC require contract/budget approval prior to release of final approval documents?	Yes
<b><u>Consent:</u></b>	
Does your Facility have a written SOP/Policy/Procedure for Informed Consent?	Yes
Does your Facility have a written SOP/Policy/Procedure for Minor Assent for paediatric populations?	Yes
Does your Facility have a written SOP/Policy/Procedure for Other vulnerable populations?	Yes
Does your Facility have access to translators and translation support for study conduct (e.g. consent, study-specific instruction)?	No
<b><u>Training:</u></b>	
Does your Facility have a training program for the research staff?	Yes
Does your Facility training course content include GCP?	Yes
Do you have a process or program in place to retrain research staff when a protocol is amended?	Yes
Does the study staff that prepares or transports dangerous goods have training that meets the IATA International Air Transport Association (US) or other countries hazardous training requirements for shipping dangerous goods?	Yes
<b><u>Facility And Equipment:</u></b>	
<b><u>Facility Capabilities:</u></b>	

Can your Facility support in-patient admissions for research studies?	No
Can your Facility support patient visits on weekends?	Yes
Is your Facility capable of administering infusions?	Yes
Is your Facility adequately staffed to support studies with both blinded and unblinded Investigational Product?	Yes
Does your Facility typically allow the collection of Pharmacogenomic (PGX) samples for research purposes?	No
Does your Facility have the ability to collect and store PK/PD specimens?	No
Does your Facility have the ability to collect PK/PD samples beyond normal business hours?	No
Does the Facility have storage space for Study-Related materials (e.g. Lab Kits, Patient Materials, etc.)?	Yes
<b><u>Equipment:</u></b>	
Does your Facility have an SOP or process that ensures routine calibration and maintenance of general equipment? Examples of general equipment include: scale, pulse oximeter, stadiometer, sphygmomanometer, etc.?	Yes
<b><u>IT Capabilities:</u></b>	
What browser does your facility use?	Internet Explorer
What type of computer operating system(s) does your institution use to support studies?	Windows (Windows XP; Windows 7; Windows 10; etc)
Does the Facility have access to local IT support?	Yes
Does your Facility limit or prohibit access and use of external web-based tools or sites for clinical research (E.g. web portals to submit documents to sponsors or CROs)?	Yes

Please indicate all equipment that will be available to Monitors.	Phone;Copy Machines;Internet Access
<b><u>Labs:</u></b>	
Is your Facility using a local lab?	Yes
Please provide Local Lab Name.	Pathology Queensland-PAH
<b><u>IP Storage Details:</u></b>	
IP Recipient Name	Princess Alexandra Hospital Pharmacy
Does the Investigational Product Storage Room have back-up power?	Yes
Is the Investigational Product Storage Room secured with controlled access?	Yes
Is the Investigational Product Storage Area securely constructed?	Yes
Does your Facility have the ability to manage on-site or off-site destruction of the Investigational Product?	Yes
Does your Facility have the ability to manage on-site or off-site destruction of controlled substances when appropriate?	Yes
Does the Facility have the ability to handle radio-labelled Investigational Products?	Yes
Do you provide your Satellite Site(s) with a dedicated inventory of Investigational Product?	Yes
Does your Facility have a written SOP/Policy/Procedure to ensure that Investigational Product is appropriately maintained during transportation to Satellite Site(s)?	Yes
<b><u>Source Documents:</u></b>	
Does your Facility have secure storage for patient records?	Yes
<b><u>Electronic Medical Records (EMR) /Electronic Health Records (EHR):</u></b>	
Do you have Electronic Health Records (EHR)/ Electronic Medical Records (EMR)?	Yes

What EMR/EHR system do you use?	In-house system
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