POLICY AND PROCEDURE

Purpose

Subee Newlake has a duty of Care under work place health and safety guidelines to provide a safe work place to staff and clients.

We will alert support staff that a client they are caring for is undergoing chemotherapy and direct them to the correct procedures for handling cytotoxic waste.

Scope

The Cytotoxic Medication Management in the Community policy and procedure applies to all Subee Newlake employees, clients and contractors.

Definitions

Cytotoxic: an agent capable of disrupting the growth and function of both healthy and diseased cells and can be carcinogenic, genotoxic, mutagenic, teratogenic or hazardous to cells in any way. Commonly used in referring to antineoplastic drugs that selectively damage or destroy dividing cells.

Biohazard: an infectious agent or hazardous biological material that presents a risk to the health of humans or the environment

Procedure

Support staff and subcontractors who work in clients homes who are being treated with cytotoxic chemicals,

the most common being chemo therapy are at risk of being exposed to cytotoxic waste.

Cytotoxic waste may be inhaled, ingested, absorbed by the skin or through percutaneous injury.

Clients who take cytotoxic drugs excrete bodily fluids that are contaminated with cytotoxic waste. It is recommended by the NSW Department of Health that these clients be considered contaminated for up to seven (7) days, and staff to take the highest precaution during this time.

Subee Newlake recommends extended precaution during the whole time clients are being treated with cytotoxic drugs not just seven (7) days. Subee Newlake Registered Nurses will complete a risk assessment and inform care staff if precautions are to cease.

For Subee Service Coordinators/Registered Nurses to complete:

- Cytotoxic and hazardous medications that may have the potential for safety risks to staff and clients are required to be identified appropriately with warning labels applied to the dispensed container.
- If possible corresponding Material Safety Data Sheets for agents used is accessible.
- Subee service coordinators or registered nurse caries out a cytotoxic drug risk assessment.





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Cytotoxic waste, because it is highly toxic, must be handled with utmost care, otherwise, it can be dangerous to those who are exposed. These guidelines include safeguard against cytotoxic drugs that are found in urine, vomit and stool of chemotherapy patients. When you care for someone who is receiving treatment you need to be careful about coming into contact with the clients bodily fluids.

Support Workers must:

- Support workers to call office if unwell and DO NOT attend service as client's immune system may be compromised during treatment and vulnerable to infection.
- Double glove whilst doing care work or cleaning
- Clients use the toilet as usual but close the lid and flush twice. Be sure to wash hands with soap and water.
- If a bedpan, commode or urinal is used, the caregiver should wear gloves when emptying it. (Two pairs of latex or nitrile gloves are recommended.) Rinse it well with water and wash with soap and water at least once per day.
- The same applies to basin used for vomiting. Use disposable containers for vomiting when possible empty in toilet and flush with toilet lid down.
- Wash clothing and linen as usual unless it's soiled with chemotherapy or body fluids. Use gloves and immediately put the

soiled laundry in the washer separate from other laundry. If you don't have a washer, put laundry in a sealed plastic bag until it can be washed.

- Any disposable items including gloves need to be double bag and place in RED bin.
- If chemotherapy is spilled on skin, irritation or rash may occur. Wash the area thoroughly with soap and water. If redness lasts more than an hour, make an appointment to see a doctor. Phone your supervisor and fill in an incident report. You can avoid contact with skin by wearing gloves when handling chemotherapy, equipment or wastes.
- Use gloves when handling all oral chemotherapy doses.
- For spills on the floor or in the home (not on your skin), use a spill kit. If the client hasn't been supplied with one call the office and one will be brought out. Fill in an incident report.

Where Medication assist is required for cytotoxic and hazardous medications:

• Medications are dispensed into a webster pack, the supplying pharmacy has a responsibility to ensure that no other non-cytotoxic or non-hazardous medications are included in the same pack (that is, a separate webster pack is to be used for cytotoxic and hazardous medications).

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 Cytotoxic and hazardous medications are to be delivered by the supplying pharmacy packaged in a container or bag separate from any other medication or items and the bag must also be labelled as "CYTOTOXIC" or "HAZARDOUS" as is appropriate for the particular medication(s).

· If on receipt of a cytotoxic or hazardous medication or in the administration process, there is evidence that the medication is damaged or the packaging is broken in any way such that there is risk of powder inhalation or skin contamination, the medication is to be returned to the supplying pharmacy in a sealed container or bag.

Note: If however the risk of contamination is likely to be increased by returning the medication to the pharmacy (e.g. leaking container), it is to be disposed of as cytotoxic waste using the spill kit if necessary and a new supply requested from the pharmacy. · All cytotoxic and hazardous medications are to be

handled and administered using a no-touch technique and appropriate personal protective equipment (PPE) utilised as recommended.

 Staff who are pregnant, breastfeeding or planning parenthood may elect to not be involved in the handling and administration of cytotoxic or hazardous medications.

• Staff handling and administering cytotoxic and hazardous medications receive training in procedures required for safe handling and administration, and all staff involved in care procedures and cleaning of clients' rooms, linen, clothing and incontinence aids etc., receive training as to any additional precautions

required due to potential risks involved in carrying out these tasks.

• In general, cytotoxic and hazardous medications are to be limited to oral solid dose formulations (tablets or capsules) and topical agents. Oral dose formulations are not to be altered (e.g. tablets crushed, or capsules opened). However, if there is a particular requirement for administration by injection or oral liquids, or for crushing or other altering of oral solid dose formulations, Subee Newlake registered nurses will review service request on a case by case basis and only agree to where the potential risks can be managed by the use of additional PPE (that is, face mask, eye goggles and protective gown in addition to disposable gloves), and staff training as necessary. Disposable equipment (e.g. sealed bag) is to be used in the crushing process and medication altered is to be given separately to other altered medication and the equipment used such as the medication cup and plastic spoon are disposed of as cytotoxic waste.

Role of Subee Newlake registered nurse

Registered Nurse must discuss specific risks associated with the cytotoxic medication prescribed, with Subee Newlake Clinical Team Leader prior to the first administration, and thereafter whenever there is uncertainty.

• Pregnant nursing staff must NOT administer cytotoxic medication and/or care for clients that are eliminating cytotoxic waste.

 Registered Nurse must ensure that specific care required during the course of treatment with cytotoxic

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medication is entered on the care plan, including the period of time that urine or faeces are contaminated.Staff must wear personal protective equipment (PPE) as outlined in client's care plan.

•Pathology requests for collecting or handling of cytotoxic specimens will be discussed with clients GP and see if can be delayed for 72 hours (7 days if faecal specimen) post last cytotoxic medication.

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