

SUBSTANCE MANAGEMENT PLAN

September 2022

CONTENTS

| 1 | DOCUMENT INFORMATION | 4 |
|-----|--|-----|
| 2 | INTRODUCTION | 5 |
| 3 | APPLICABILITY | 5 |
| 3.1 | Scope | 5 |
| 3.2 | Exclusions | 5 |
| 3.3 | Exemptions for reference materials | 6 |
| 4 | DEFINITIONS | 6 |
| 5 | GOVERNANCE | 9 |
| 5.1 | Governance Roles | 9 |
| ۹. | University Biosafety Committee Chair | 9 |
| В. | University Biosafety Committee (UBC) | 9 |
| C. | University Scheduled Substance Manager | 9 |
| D. | Scheduled Substance Coordinator (SSC) | 10 |
| Ε. | Eligible persons | 10 |
| 5.2 | Risk Management | 10 |
| 5.3 | Information Communication and Training | 10 |
| 5.4 | Approved Locations | 10 |
| 6 | APPROVALS | 11 |
| 5.1 | General Approval Conditions | 11 |
| 6.2 | Conditions of Approval | 11 |
| 6.3 | Procurement | 11 |
| 5.4 | Arrival at a Controlled Delivery Point | 11 |
| 7 | POSSESSION RESPONSIBILITIES | 12 |
| 7.1 | Records | 12 |
| 7.2 | Disposal | 12 |
| 7.3 | Labelling | 13 |
| 7.4 | Storage | 13 |
| 7.5 | Restricted Access | 13 |
| 7.6 | Inventory Control | 14 |
| 7.7 | Unaccounted Drugs and Incident Reporting | 14 |
| 7 Q | Transport | 1.4 |

| Appendix 1: Categories of Poisons | 15 |
|--|------|
| Appendix 2: Restricted S7 Poisons | 16 |
| Appendix 3: Arrival Form | 17 |
| Appendix 4: Approved Locations for Use | . 18 |
| Appendix 5: Simplified Purchase Request Process Chart | . 19 |
| Appendix 6: Example High-Risk Poisons Log | 20 |
| Appendix 7: Approved Scheduled Substance Coordinators | . 21 |
| Appendix 8: Nominated Supervisors for Destruction of S8, S9, S10 | . 22 |

1 DOCUMENT INFORMATION

| INFORMATION Title | Printable version (PDF) Downloadable version (Word) SUBSTANCE MANAGEMENT PLAN | | | | |
|--|--|--|--|--|--|
| Document number | SMP-2022-1 | | | | |
| Purpose | Details Processes and Procedures for the Purchase, Possession, Application and Disposal of Scheduled Substances. | | | | |
| Audience | All Griffith Persons Purchasing, Possessing, Applying or Disposing of Scheduled Substances in accordance with the Medicines and Poisons Act and the Medicines and Poisons Regulation. | | | | |
| Category | Operational | | | | |
| Subcategory | Safety | | | | |
| Approval date | 1 st March 2022 | | | | |
| Effective date | 1 st September 2022 | | | | |
| Review date | December 2025 - Reviewed for compliance 17/2/2025 no changes further review under way note 1 | | | | |
| Policy advisor | Senior Specialist – Chemicals & Radiation | | | | |
| Approving authority University Biosafety Committee (UBC) | | | | | |
| Description | This document outlines the plan for managing risks associated with Griffith University staff or students preforming regulated activities in relation to scheduled substances (Medicines, Poisons and Therapeutic Goods). | | | | |
| UBC Chair Approval Signature | 17/02/2022 Prof Andrea Bishop | | | | |
| Related documents | Work Health and Safety Act 2011 Griffith University Health and Safety Policy Medicines and Poisons Act 2019 (MPA) Therapeutic Goods Act 2019 (TG Act (Qld) Medicines and Poisons (Medicines) Regulation 2021 Medicines and Poisons (Poisons and Prohibited Substances) Regulation 2021 Medicines and Poisons (Pest Management Activities) Regulation 2021 Standard for the Uniform Scheduling of Medicines and Poisons (the Poisons Standard) Therapeutic Goods Act 1989 Therapeutic Goods Administration (TGA) scheduling of medicines & poisons Queensland Health Departmental Standard – Substance management plans for regulated poisons | | | | |

Note 1: Due to structural changes in Griffith the SMP will require further review and changes to match the new committee structure.

2 INTRODUCTION

From 27 September 2021, the use of Medicines and Poisons in Queensland is administered by the *Medicines and Poisons Act 2019 (MPA), Therapeutic Goods Act 2019 (TG)* and associated regulations. Under the Act, an Entity undertaking activities involving regulated substances must have a Substance Management Plan (SMP). The SMP outlines the organisation's processes for the procurement, storage, handling, record-keeping, stock keeping and disposal of medicines and poisons to ensure safety, security and quality.

Specifically, the SMP must specify the University's procedures for Medicines and Poisons to ensure:

- individuals have the necessary qualifications, expertise and authority to undertake a regulated activity involving scheduled substances.
- compliance with the plan is monitored, including reporting, investigation and follow-up of any adverse events associated with the quality, safety and security of a substance.
- authorisation, authentication and non-repudiation of instruction to supply or administer a medicine or poison.
- authorised purchase of a substance from a source external to the licensee, business or entity to minimise the risk of a substance being obtained for illicit purposes.
- restricted access to storage facilities, including measures to be taken to prevent unauthorised access to a storage facility.
- inventory control and reconciliation processes to prevent, detect and/or deter unauthorised access that could result in a substance or relevant records being lost, stolen, misplaced or misused.
- substances are disposed of, or destroyed in order to prevent accumulation, unauthorised access or public harm.
- the safe and secure transport, holding and delivery of substances by managing the chain of custody in order to prevent them from being lost, stolen, misplaced or misused.

Note: The schedule to which a medicine or poison is assigned can also be identified using ChemWatch GoldFFX®.

The SMP will be reviewed as soon as practicable after an incident happens in relation to the regulated place; or at least every 5 years after —

- i) the day the substance management plan starts; or
- ii) if the plan is reviewed in any 5-year period after the plan starts—the day the plan was last reviewed.

3 APPLICABILITY

3.1 Scope

The SMP applies to Medicine and Poison transactions involving:

- research activities;
- learning and teaching activities;
- formal agreements between the University and external organisations when the University occupies a building and
 is responsible for the management of the facility e.g. a remote clinic;
- Any other activity directly controlled by Griffith University.

3.2 Exclusions

This plan does not cover Medicines, Poisons and therapeutic substances in the following circumstances:

- used by Griffith University for Pest Management (see Medicines and Poisons (Pest Management Activities)
 Regulation 2021);
- used within the scope of responsibilities allocated to the University Health Services;

- under the control of individuals for personal needs, e.g. adrenaline to treat anaphylaxis;
- used and controlled by other commercial entities located on campus e.g. a Commercial pharmacy.

3.3 Exemptions for reference materials

Under the Medicines and Poisons (*Poisons and Prohibited Substances*) Regulation (2021), analytical reference materials are exempt from requiring an authority due to the low risk associated with their use.

Universities using reference materials in analytical laboratories may purchase and use reference materials containing up to 1g of regulated poisons without an approval. The reference materials must be manufactured by an accredited laboratory as specified in section 13 of the Poisons Regulation.

4 DEFINITIONS

Apply: (previously 'use') a poison, means add, apply, disperse, inject, spray or spread the poison.

Appropriately Qualified: for an Officer of the University, refers to someone having the qualifications, experience or standing appropriate to the exercise of the power. A person assigned the following positions would be nominated by the Head of Element and confirmed by the appropriate senior manager such as Group PVC:

- Scheduled Substance Coordinator
- Senior Research Academic;
- Technical Managers;
- University Scheduled Substance Manager;
- Manager University Safety Team; and
- Health & Safety Adviser (Chemicals & Radiation), University Health and Safety Team.

Authority: Means the power to make decisions and/or enforce conditions a person has under the Regulation.

Approved Disposer (Poisons & Prohibited Substances): Approved disposer classification is dependent upon the classification of the dealing.

Approved Disposer (Medicines): Refer to the Medicines and Poisons (Medicines) Regulation 2021, Section 147 for the requirements to be an Approved Disposer for Medicines or to witness destruction by the Approved Disposer.

Authorised Supervisor: for a substance authority, means a person stated in the authority as being authorised to supervise the destruction of an S2, S3 or S4 poison or an S7 substance under the authority.

Applicant: an entity applying for a General Approval to carry out a dealing involving all S4, RS7, S8 or S9 substances,

Element: a School/Department/Institute/Centre approved under the General Approval Substance Authority.

Eligible Person: a person approved by the Group or Element to acquire, use, apply or dispose scheduled substances. Note: not all eligible persons will be able to access the General Approval to acquire, use, apply or dispose all categories of scheduled substances.

Emerging Substance: a substance not previously listed under the SMP which is declared as a scheduled substance by the government.

Entity: Griffith University.

General Approval: an approval that authorises an eligible person or class of eligible persons to carry out a regulated activity with a regulated substance stated in the general approval. Note: not all eligible persons will be able to access the General Approval to acquire, use, apply or dispose all categories of scheduled substances.

High-risk Poisons: A high-risk poison is an S8 poison or a prohibited substance (S9, S10), other than a prohibited substance used, or intended to be used, for a therapeutic use.

Medicine: a scheduled substance in the category of an Schedule 2 (S2), Schedule 3 (S3), Schedule 4 (S4) or Schedule 8 (S8) and used or intended to be used for therapeutic use (MPA 2019, section 11), or a substance prescribed as a medicine by another regulation.

Monitored Substance: a Schedule 8 medicine or substance prescribed by regulation to be a monitored substance.

Non-restricted S7 substances: a non-restricted S7 substance is a substance that is not a restricted S7 poison.

Poison: an S5, S6, S7 or a substance in the category of S2, S3, S4, or S8 when not used or intended to be used for therapeutic use (MPA 2019, section 12) (Appendix 1).

Possess: having custody or control of, and the ability or right to obtain custody or control of the drug, poison or other substance.

Prohibited Substance: a scheduled substance in the category of an Schedule 9 (S9) or Schedule 10 (S10) Appendix C prohibited substance (MPA 2019, section 13).

Regulated Activity: a person performs a regulated activity for a scheduled substance if they possess, manufacture, supply, buy, apply, use or dispose, the substance or directs or authorises another person to perform any of these activities.

Regulated Place: a place where a dealing happens, or is proposed to happen, with a regulated substance; and is prescribed by regulation.

Regulated Substance: is a medicine, poison, prohibited substance, fumigant or pesticide.

Restricted Medicine: an S4 or S8 medicine, listed in the Poisons Standard or prescribed by regulation.

Responsible person: the person prescribed by regulation to be the responsible person for the regulated place.

Relevant Occupation: an occupation such as dentist, doctor, indigenous health worker, midwife, optometrist, podiatrist, registered nurse or veterinary surgeon.

Restricted S7 poisons: A Schedule 7 (S7) poison stated in *Schedule 1* of the Medicines and Poisons (Poisons and Prohibited Substances) Regulation 2021 (Qld) (See Appendix 2).

Scheduled Substance: substances declared as an emerging substance, in The Poisons Standard and those listed in the latest (in-force) version of The Poisons Standard including the below. The schedules are not an exhaustive list, consideration may be given to substances on an *ad-hoc* basis.

Schedule 2: Pharmacy Medicine: Substances, the safe use of which may require advice from a pharmacist and which should be available from a pharmacy or, where a pharmacy service is not available, from a

licensed person.

Schedule 3: Pharmacist Only Medicine: Substances, the safe use of which requires professional advice but which

may be available to the public from a pharmacist without a prescription.

Schedule 4: Prescription Only Medicine or Prescription Animal Remedy: Substances, the use or supply of which

should be by or on the order of persons permitted by State or Territory legislation to prescribe and

should be available from a pharmacist on prescription.

Schedule 5: Caution: Substances with a low potential for causing harm, the extent of which can be reduced

through the use of appropriate packaging with simple warnings and safety directions on the label.

Schedule 6: Poison: Substances with a moderate potential for causing harm, the extent of which can be reduced

through the use of distinctive packaging with strong warnings and safety directions on the label.

Schedule 7: Dangerous Poison: Substances with a high potential for causing harm at low exposure and which

require special precautions during manufacture, handling or use. These poisons should be available only to specialised or authorised users who have the skills necessary to handle them safely. Special regulations restricting their availability, possession, storage or use may apply

regulations restricting their availability, possession, storage or use may apply.

Schedule 8: Controlled Drug: Substances that should be available for use but require restriction of manufacture,

supply, distribution, possession and use to reduce abuse, misuse and physical or psychological

dependence.

Schedule 9: Prohibited Substance: Substances which may be abused or misused, the manufacture, possession, sale

or use of which should be prohibited by law except when required for medical or scientific research, or for analytical, teaching or training purposes with approval of Commonwealth and/or State or Territory

Health Authorities.

Schedule 10: Substances prohibited for sale, supply and use: Substances of such danger to health as to warrant

prohibition of sale, supply and use (formerly Appendix C). In Queensland, schedule 10 substances include many common chemicals that have been prohibited for use in particular circumstances such as

human therapeutic or domestic use.

Scheduled Substances Coordinator: (SSC) a person authorised by an Element and nominated to be the Site Contact for the purpose of a General Approval application to monitor the use and storage of scheduled substances and the person who applies for an endorsement on behalf of an Applicant.

Special Approver: Particular individuals within the University that have a level of specialised knowledge to make a determination whether the appropriate protocols and risks have been considered and addressed in relation to purchases and have the authority to approve these purchases.

Substance Authority: a manufacturing licence; or a wholesale licence; or a retail licence; or a pest management licence; or a prescribing approval; or a general approval.

Supply: for a scheduled substance, means to sell, dispense, give a treatment dose/s, or dispose of the substance as waste.

Transaction: An event by which – A controlled drug, restricted drug or poison comes into or goes out of a person's possession; or the composition, form or strength of, or way of packing, a controlled or restricted drug or poison is changed; for example: moving a controlled or restricted drug or a poison from one place to another (with or without a change of ownership).

Therapeutic Use: use in or in connection with:

- a) preventing, diagnosing, curing or alleviating a disease, ailment, defect or injury in human beings or animals;
- b) influencing, inhibiting or modifying a physiological process in human beings or animals;
- c) testing the susceptibility of human beings or animals to a disease or ailment;
- d) influencing, controlling or preventing conception in human beings or animals;
- e) testing for pregnancy in human beings or animals; or
- f) the replacement or modification of parts of the anatomy in human beings or animals.

University Scheduled Substance Manager: a person endorsed by the University Biosafety Committee (UBC) to provide advice and support to the Scheduled Substance Coordinators and other eligible persons; maintain centralised records of endorsements; and facilitate incident investigations and conduct periodic audits.

5 GOVERNANCE

5.1 Governance Roles

A. University Biosafety Committee Chair

The University Biosafety Committee (UBC) chair will be the person responsible for authorising the SMP and ensuring the plan is implemented and reviewed.

B. University Biosafety Committee (UBC)

At Griffith University the establishment, communication, monitoring and review of the SMP will be overseen by the UBC.

The UBC will take reasonable steps to:

- inform all employees and other persons required to comply with and about the contents of this plan.
- ensure that employees and other persons required to comply with the plan do so; and
- ensure that the plan is monitored and reviewed, including after significant changes to activities or at least every five years after the commencement of the plan.

The effectiveness of the SMP will be monitored by the Committee in conjunction with the University Scheduled Substances Manager and other relevant persons using records, audits, inspections, and incident reports.

C. University Scheduled Substance Manager

A member of the Health and Safety Team will be authorised as the University Scheduled Substance Manager by the Chair of the UBC. As part of the authorisation process this role will be subject to a criminal history check. This role will provide advice and support to the SSCs and other eligible persons; maintain centralised records relating to Scheduled Substances and facilitate periodic audits. The Scheduled Substance Manager may participate in purchasing workflow requests as required. In addition, the role will assist the UBC in the reporting, investigation and follow-up of any adverse events relating to the quality, safety and security of substances.

D. Scheduled Substance Coordinator (SSC)

Elements must elect an appropriate person to act as a Scheduled Substance Coordinator(s) (SSC). They can be nominated on the General Approval Application as the Site Contact and as part of the authorisation process, a criminal history check should be undertaken by the Element. The SSM may function as the SSC if no appropriate person is available.

The role of the SSC will be to coordinate the acquisition of substances by eligible persons within the Element. The SSC shall confirm that eligible persons having access to or carrying out a regulated activity have the necessary qualifications, expertise and authority to undertake these tasks. The SSC shall confirm compliance with the SMP for the secure storage, dispensing, use, disposal and recording of scheduled substances within their Element. These are to be provided to the Scheduled Substance Manager on request.

E. Eligible persons

An eligible person will be a member of an Element and is required to provide evidence of their qualifications, expertise and training to the SSC before being granted approval to procure, possess, use, apply or dispose of a scheduled substance under a General Approval. Eligible persons will also be required to complete all relevant online training modules but would not normally be subject to a criminal history check.

5.2 Risk Management

This SMP aims to ensure that controls are in place to manage the risks associated with scheduled substances and regulated activities at the University. These risks include:

- Intentional or accidental misuse
- Theft, diversion, or other loss
- · Incorrect labelling, expiry or other substance quality issues that may affect persons or animals
- Incorrect disposal, spillage or release; and
- Non-compliance with Local Laws or State and Federal legislation.

5.3 Information Communication and Training

Information on this SMP, including notification of changes, will be provided to relevant persons through Groups and Elements by the UBC, Health and Safety Committees, and the University Scheduled Substance Manager. The SMP will also be available on the web through the staff portal. Awareness training will also be included in online laboratory safety modules and incorporated into laboratory inductions. Further training and instruction will be provided by the University Scheduled Substance Manager as required.

5.4 Approved Locations

Scheduled substances may be used and securely stored within approved University facilities. Scheduled substances may also be approved for use in secure locations controlled by Griffith University off campus such as in remote clinics. A list of approved locations for use for each sub-approved element under the GA is listed in Appendix 4.

6 APPROVALS

A Substance Authority in the form of a General Approval for Research, Analysis & Teaching at a University will apply to the University for the use or application of regulated poisons and medicines. The General Approval authorises approved persons within the University to perform the regulated activity with a scheduled substance for research, teaching or analytical purposes.

For more information, please contact the University Scheduled Substance Manager.

6.1 General Approval Conditions

In order to buy, possess, manufacture, apply or dispose of a scheduled substance and depending on the schedule of the substance, it is a requirement to obtain permission to access the General Approval. Approval is delegated by the University Scheduled Substance Manager to the special approvers before scheduled substances can be procured (Appendix 7). When a scheduled substance is used as a medicine (therapeutic use), separate General Approval requirements exist and will be administered by the University Scheduled Substance Manager.

Note:

- Refer to Appendix 5 for flow chart of procurement requirements and internal approval pathways
- For definitions of the schedules refer to the current version of the Poisons Standard.
- For further information consult with the University Scheduled Substance Manager.

6.2 Conditions of Approval

For scheduled substances used as poisons under the General Approval, the end use must fit with the application type. For the majority of activities at Griffith University, this will be for Research, Analysis or Teaching. Some scheduled substances used as poisons may require separate General Approval applications, please consult the University Scheduled Substance Manager.

Records shall be kept by the approved applicant of incoming and outgoing stock as specified in the approval and kept for a minimum of 2 years after the last entry is made.

It is also a condition of approval that any change in the criminal history of an individual for whom an endorsement applies must be disclosed to the Regulator within 24 hours.

For scheduled substances that are not used for research, analysis or teaching please contact the SSM. This includes where possession, application or disposal could be categorised as therapeutic use (medicines).

6.3 Procurement

Purchasing shall be completed as per the <u>University purchasing procedures</u>. The procurement procedures require a Purchase Request to be raised within the finance system. All purchase requests for scheduled substances will be identified and referred by the relevant Financial Approver to the Scheduled Substances Manager or Scheduled Substance Coordinator for the Element for final endorsement (See: Appendix 5).

Requestors must be eligible persons who have completed the relevant training to use the General Approval for the University. If purchases are completed outside of the purchasing system reimbursement for these orders will be refused.

6.4 Arrival at a Controlled Delivery Point

A Controlled Delivery Point may be either a designated Griffith University stores site or the site where eligible persons receive the scheduled substance.

- 1. When High-Risk Poisons (RS7, S8, S9 & S10) are delivered to a Griffith University store, the relevant staff shall immediately advise the Scheduled Substance Manager of the arrival.
- 2. A record of the delivery must be made on the High-Risk Poisons Arrival Form and sent to the SSM to be kept as a record (Appendix 3)
- 3. The goods must be held in a secure location until collection by the eligible person.
- The goods must only be released by stores staff to the relevant Eligible Person or Scheduled Substance Coordinator.

All arrival documentation must be forwarded to the Scheduled Substance Manager.

7 POSSESSION RESPONSIBILITIES

7.1 Records

All High-Risk Poisons (RS7, S8, S9 and S10) are recorded in a **High-Risk Poisons Register (HRPR**). It is a requirement of the Regulation that the receipt, application and disposal information be recorded in the High-Risk Poison Register. It is recommended that the record be in hardcopy and located at the storage location for the High-Risk Poisons, e.g. in the lockable Drug Safe or Drug Cabinet within the facility.

The register shall be used to record all dispensing transactions for High-Risk Poisons. The register should be kept in a bound book with numbered pages. An example of the layout of the Register is provided in Appendix 6.

Accurate records of RS7, S8, S9, S10 substance transactions and quantities possessed must be kept at all times. Additional records are required for specific scheduled substances, for example Schedule 8 Controlled Drugs and Scheduled 9 or 10 prohibited substances.

To maintain records of acquisition, S2, S3, and S4 Scheduled Substances are to be ordered by Purchase Request in Marketplace or Special Request. Arrival documentation is not required for S2, S3 and S4 substances ordered via this pathway. Records of application for these substances are not required for when used as poisons.

Groups, Elements or Institutes must ensure all records are maintained and provided to the University Scheduled Substances Manager at least quarterly or on request by the Regulator (e.g., Qld Health). This includes copies of all HRPR detailing application logs, transfer vouchers, evidence of destruction, records of acquisition of S2, S3 and S4 substance and manifests.

7.2 Disposal

From the 27 September 2021 the *Medicines & Poisons Act 2019* has changed the way that controlled drugs are required to be destroyed. RS7, S8, S9, and S10 high risk poisons are no longer required to be destroyed by Forensic and Scientific Services in Queensland.

Disposal and destruction is required to be witnessed and or supervised by different categories of person in accordance with the relevant Regulation that applies to each substance.

Prohibited substances (S9 and S10 substances) and regulated poisons, including S2, S3, S4, RS7 and S8 poisons, when not used or intended for use in therapeutic purposes and must be disposed of in accordance with the Medicines and Poisons Act 2019 and the Medicines and Poisons (Poisons & Prohibited Substances) Regulation.

High-Risk Poisons (RS7, S8, S9, S10) must be disposed of under the supervision of the SSM as described in the General Approval The supervision of destruction does not require the SSM to physically witness each destruction. The requirement is to ensure maintenance and retention records.

Scheduled Substances (S2, S3 & S4) that are used as poisons do not require a record of application and disposal.

Any substances that are used or intended to be used for a therapeutic purpose as per Schedule 1 of the Poisons Standard are considered Medicines. Schedule 8 substances that are not poisons must be disposed of and destroyed in accordance with Section 147 of the Medicines and Poisons (Medicines) Regulation 2021. The Person nominated to supervise destruction of Poisons is an approved person under a substance authority and satisfies the criteria for s147 (b) as being "specifically authorised to supervise the destruction of the waste under a substance authority."

The waste collection services employed at Griffith offer secure transport to the destruction facility to protect diversion risk medicines and High-Risk Poisons from misappropriation. High-Risk Poisons and regulated medicines must also use a high temperature incineration method of destruction and the waste collection service uses this method at the destruction facility.

The Department of Health (QLD) have provided standards for approved methods of destruction. Please contact the SSM for further information.

7.3 Labelling

At each campus, proper marking/labelling of packages and containers must be completed to ensure the identity of the contents and their hazards are known. Scheduled Substance Coordinators and eligible persons must ensure that:

- packages of scheduled substances are marked in accordance with the Regulation, the Poisons Standard and Australian Dangerous Goods Code (7th Ed); and
- if Scheduled Substances are received without correct marking, they receive proper marking.

7.4 Storage

Scheduled substances must be stored securely in accordance with the regulatory requirements and the MPA.

- Schedule 2 and 3 substances should be kept in areas where there is no public access.
- **Schedule 4 substances** must be kept in a cupboard, dispensary, drawer, storeroom or other area to which the public does not have access.
- Schedule 7 (Restricted) Cyanide (includes any inorganic salt of hydrocyanic acid, other than ferricyanide or ferrocyanide salts) and strychnine should be stored in a locked cabinet that is reasonably secure and not accessible to children or the public.
- Schedule 8, 9 and 10 substances (Controlled Drug & Prohibited Substance) An authorised person in possession of a controlled drug must keep the drug in a locked cabinet that complies with the minimum requirements for a controlled drug receptacle or another secure place that is at least as secure as the requirements in departmental standard and that has been approved by QLD Health. The authorised person must always keep the receptacle or secure place locked and personally possess the key or combination to the receptacle or place.

7.5 Restricted Access

Scheduled Substance Coordinators and Eligible Persons must ensure access to locations in which medicines and poisons are held are restricted to appropriate persons. Where a location has limited security, the location should be considered as being accessible to the public. In these circumstances, substances must be locked in a suitable container in accordance with the schedule storage conditions listed in Section 6.4 (above). Regular audits of access holders (both key and swipe card) must also be undertaken to ensure only currently authorised personnel have access to the location.

7.6 Inventory Control

Scheduled Substance Coordinators and Eligible Persons must ensure that appropriate measures are in place to monitor the inventory of High-Risk Poisons (RS7, S8, S9 &S10) through the use of regular inspections and stock-take audits.

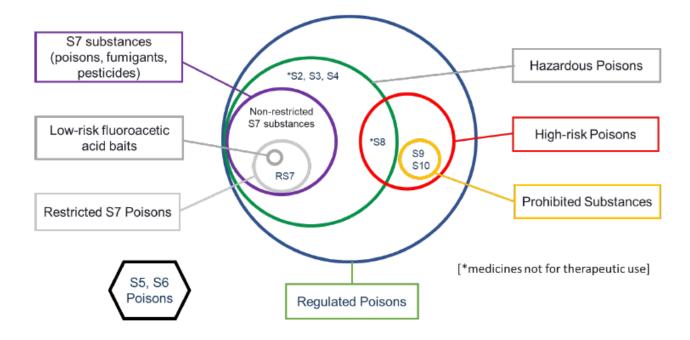
7.7 Unaccounted Drugs and Incident Reporting

Any incident involving Medicines and Poisons (including a quantity discrepancy) must be immediately reported to the University using GSafe and the University Scheduled Substance Manager. Where required, written notice will be provided to QLD Health (Division 2, Poisons & Prohibited Substances Regulation) by the SSM on behalf of the reporter. The University Scheduled Substance Manager will be required to follow up any incident involving High-Risk Poisons with an investigation. The findings of the investigation including any recommendations shall be reported to the University Biosafety Committee and other relevant committees for consideration.

7.8 Transport

In order to ensure the safe and secure transport of substances to prevent them from being lost, stolen, misplaced or misused procedures should be in place to monitor the receipt of orders. In addition, only licenced couriers must be used to despatch scheduled substances. Any loss or other discrepancy that occurs during transit must be immediately reported as outlined in 6.7.

Appendix 1: Categories of Poisons



From: Factsheet - Poisons terms - September 2021

Appendix 2: Restricted S7 Poisons

Medicines and Poisons (Poisons and Prohibited Substances) Regulation - Restricted S7 poisons*

acrylonitrile
alachlor
4-aminopropiophenone (para-aminopropiophenone)
arprinocid
azocyclotin

captafol carbadox

chlordecone chlordimeform

chloromethiuron

cyhexatin

1,2-dibromo-3-chloropropane 4-dimethylaminoazobenzene

dinitrocresols

dinoseb

etaconazole

ethylene dibromide

fluoroacetamide

fluoroacetic acid (sodium fluoroacetate)

halofuginone

halogenated dibenzodioxins and dibenzofurans

hexachlorobenzene (HCB)

hydrocyanic acid and cyanides

iodomethane

methacrifos

methoxyethylmercuric acetate

4,4'-methylenebis [2-chloroaniline]

mirex

nicotine

nitrofen

o-tolidine

phenylmercuric acetate

pyrinuron

strychnine

sulcofuron

vinyl chloride monomer

^{*}Subject to change



High-Risk Poisons Arrival Form RS7, S8 & S9, S10

Stores to complete and forward to Scheduled Substance Manager

Stores Staff: Please ensure this form is completed in full for each arrival of a Restricted S7, S8, S9, or S10 High-Risk Poison prior to the item(s) being released. Form to be forwarded once completed to the University Scheduled Substance Manager. A copy is to be provided to the Person collecting the Scheduled items.

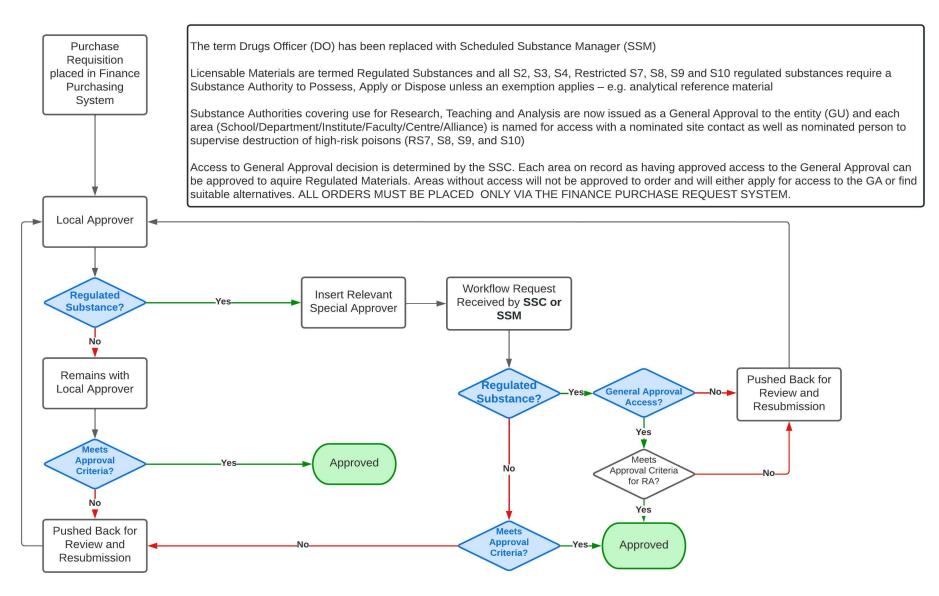
| SECTION 1: Completed upon arrival by Stores | | | | | | | |
|---|-------------------------|----------------------|----------------------|---------|-------------------------------|--|--|
| Substance name: | | | | | | | |
| Product catalogue code: | | | | | | | |
| Poisons Schedule: | Restricted S7 S8 S9 S10 | | | | | | |
| Volume or mass (mL or g): | (from pack | (from packaging) | | | | | |
| Batch/Lot/Serial No.: | (from packaging) | | | | | | |
| Griffith Purchase Order: | | | | | | | |
| Supplier: | | | | | | | |
| Arrival date: | | | | | | | |
| Requested by (name): | | | | | | | |
| | | | | | | | |
| SECTION 2: Person | collectir | ng to complet | e at time of co | llectio | on | | |
| Laboratory STORAGE location | n: | | | | | | |
| Building: | Room: | | Location: (eg drug | safe) | | | |
| Laboratory USE location: | | | | | | | |
| Building: | Room: | | | | | | |
| Authorisation for General Approval access: | ☐ Biore | source Facility | | | | | |
| | GRID | | | | | | |
| | ☐ Healt | h Group | | | | | |
| | ☐ Scien | nce & Environment | | | | | |
| Name of person collecting the item: | | | | | | | |
| (This must be the person who | placed the d | order or a person en | dorsed by the person | who pla | ced the order.) | | |
| Signature*: | | | | Date: | Click or tap to enter a date. | | |
| *In taking receipt of these items I understand my obligations with the Medicines & Poisons Act, Regulation and the Griffith University Substance Management Plan & will comply with these requirements. | | | | | | | |
| COMPLETE THIS FORM FOR EACH RS7, S8, S9 OR S10 SUBSTANCE AND EMAIL COMPLETED COPIES TO: | | | | | | | |
| Scheduled Substance Manager - Dan Shelley Safety Specialist (Chemicals & Radiation) – Health & Safety d.shelley@griffith.edu.au | | | | | | | |

High-Risk Poisons Arrival Form V4_DS 10th October 2022

Appendix 4: Approved Locations for Use

| ntity General Approval Approved Sub-Elements for Use | Campus/s | Building/s | Level/s | Room/s |
|---|-----------|------------|---------|--------|
| Science & Environment | Nathan | N13 | All | All |
| | | N25 | All | All |
| | | N34 | All | All |
| | | N44 | All | All |
| | | N78 | All | All |
| | | N79 | All | All |
| | Southport | G05 | All | All |
| | | G12 | All | All |
| | | G24 | All | All |
| | | G39 | All | All |
| | | G51 | All | All |
| Griffith University Health Group | Nathan | N13 | All | All |
| , | | N16 | All | All |
| | | N23 | All | All |
| | | N48 | All | All |
| | | N55 | All | All |
| | | N70 | All | All |
| | | N78 | All | All |
| | Southport | | | |
| | ' | G01 | All | All |
| | | G02 | All | All |
| | | G05 | All | All |
| | | G12 | All | All |
| | | G16 | All | All |
| | | G40 | All | All |
| Bioresources Facility | Southport | G12 | All | All |
| | | G40 | All | All |
| Griffith Institute for Drug Discovery | Nathan | N27 | All | All |
| | | N75 | All | All |
| nstitute for Glycomics | Southport | G24 | All | All |
| | | G25 | All | All |
| | | G26 | All | All |

Appendix 5: Simplified Purchase Request Process Chart



Griffith University

Substance management Plan – September 2022

Appendix 6: Example High-Risk Poisons Log

n.b – this record is best kept in the hardcopy booklets available for purchase from most stationary suppliers.

| Chief Investi | gator | Name of Compound | | | | |
|---------------|-------------------------|------------------------------------|----------------------------|-----------------|------------------------------|------------------|
| Schedule | | Name and address o | f Supplier | | | |
| Storage Loca | tion | I | I | | | |
| l.B. Includ | le building and room nu | ımber, and storage location as Fri | dge/Freezer/Safe/ | Cupboard/Draw | /er. | |
| Date | User's Name | Experiment / Procedure | Amount of Drug Received | Amount of Drug | Balance of Drug Remaining | User's Signature |
| Dute | 000.0.1.00 | | (mg or g or mL) | (mg or g or mL) | (mg or g or mL) | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Appendix 7: Approved Scheduled Substance Coordinators

| Entity General Approval Approved Sub-Element | Approved SSC | Location | Phone | email |
|---|---|----------------------------------|------------------------------|--|
| Science & Environment | Dr Ben Norton Technical & Logistics Manager | Nathan Campus N25_1.18A | 07 373 57552 | ben.norton@griffith.edu.au |
| | Dr William Wallace Technical Manager | Southport Campus G39_4.43 | 07 555 28538 | w.wallace@griffith.edu.au |
| Griffith University Health Group | Mrs Susie Head Manager (Health & Safety) Dr Paulina Janeczek | Southport Campus G40_8.42 | 07 567 88148 | s.head@griffith.edu.au |
| | Technical Manager Research, Technologies and Logistics | Southport Campus G40_8.42 | | |
| Bioresources Facility | Mr Hamish McMath Manager, Bioresources Facility | Southport Campus G25_3.51 | 07 555 28308 | h.mcmath@griffith.edu.au |
| Griffith Institute for Drug Discovery | Dr Pauline Kelly Institute Manager, GRIDD | Nathan Campus N75_1.13 | 07 373 56534 | pauline.kelly@griffith.edu.au |
| Institute for Glycomics | Dr Michael Batzloff & Dr Carie-Anne Logue Senior Operations Managers, Institute for Glycomics | Southport Campus G26_4.31 | 07 555 29434 07 555 27165 | glycomicsoperationsmanager@griffith.edu.au |

21

Appendix 8: Nominated Supervisors for Destruction of S8, S9, S10

| Entity General Approval Approved Sub-Element | Approved SSC | Location | Phone | email |
|---|---|-------------------------------|--------------|---------------------------------------|
| Science & Environment | Mr Anthony Fowler Senior Manager, Chemical Safety | Nathan Campus N11_1.07 | 0408 762 321 | anthony.fowler@griffith.edu.au |
| Griffith University Health Group | Dr M Al-Mamun Senior Specialist, Chemicals & Radiation | Gold Coast Campus G34_1.19 | 0414 127 665 | m.al-mamun@griffith.edu.au |
| Bioresources Facility | Dr M Al-Mamun Senior Specialist, Chemicals & Radiation | Gold Coast Campus G34_1.19 | 0414 127 665 | m.al-mamun@griffith.edu.au |
| Griffith Institute for Drug Discovery | Mr Anthony Fowler Senior Manager, Chemical Safety | Nathan Campus N11_1.07 | 0408 762 321 | anthony.fowler@griffith.edu.au |
| Institute for Glycomics | Dr Michael Batzloff Senior Operations Manager, Institute for Glycomics | Southport Campus G26_4.31 | 07 555 29434 | <u>IBGFLOmanagers@griffith.edu.au</u> |

22

