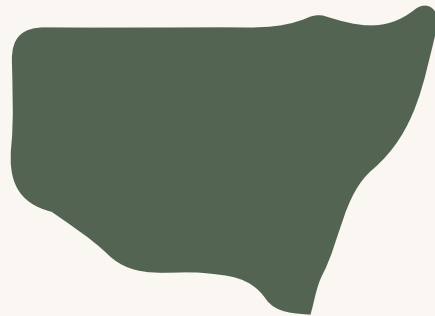
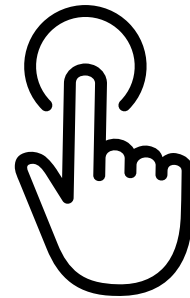


PHARMACEUTICAL WASTE
GUIDELINES AND POLICIES
NEW SOUTH WALES



'Go there' Buttons can be found throughout the document. Clicking on them will result in the relevant linked policy opening in your browser.



DISCLAIMER

This document was created by DrugWaste International for the sole purpose of education and information provision. This document has not been created for commercial purposes and should not be viewed as such. It includes relevant links to governing policies and documents. All credit is given to the original authors. We encourage clinicians to read the linked policies/guidelines in their entirety to ensure complete understanding. This document is not a completely exhaustive or comprehensive list. Policies and frameworks are constantly being updated. DrugWaste International will attempt to ensure that all information presented is current, however, it is the full responsibility of the reader to ensure they engage with the links to ensure currency of resources.

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NSW HEALTH POLICY DIRECTIVE: MEDICATION HANDLING

Purpose: this Policy Directive consolidates procedures and standards on medication procurement, storage, prescribing, supplying, dispensing and administration at NSW public health facilities ... The Policy can be used as the basis for public health facilities to develop detailed protocols and procedures specific to the local situation and circumstances. (NSW Health, 2022, title page, pg. 6).

KEY COMPONENTS



- **Page 53:** Governance for the disposal of Schedule 8 medications
- **Page 53:** 4.8.3 Recommended methods for the destruction of Schedule 8 medications
- **Page 54, 55:** Specific guidelines for destruction and disposal of different forms of medications

WHAT DOES THIS MEAN FOR YOU?

1. Schedule 8 medication must be made **unusable and unrecoverable through disposal into an absorbent material** such as a commercial medication disposal product.
2. Disposal must **NOT cause damage to the environment** in any way. Therefore, disposal of drugs in waterways or landfill is non-compliant.
3. Disposal must **mitigate risk** to any person. Meaning that drugs should not remain in their original form, posing a diversion risk.

Schedule 8 Medications must be disposed of in an **absorbent material in a dedicated pharmaceutical waste bin.**

CLINICAL AND RELATED WASTE MANAGEMENT FOR HEALTH SERVICES

Purpose: provides a minimum standard for waste management that must be met by health services ... ensures handling and containment of specific clinical waste streams is in line with NSW legislation, licensing and waste minimisation (NSW Health, 2020, title page).

KEY COMPONENTS



- **Page 2:** 1.6 Segregation of Waste
- **Page 3:** Guidance for ensuring waste is correctly segregated
- **Page 5, 6:** 2.3, Table 1 & 2, Management of specific types of waste

WHAT DOES THIS MEAN FOR YOU?

Clinicians are governed by NSW Health to **segregate waste at point of generation.**

THROUGH:

- Ensuring proper **education** for clinicians about waste and appropriate segregation.
- Correct **colour coding** and labelling on bins.
- Provision of **suitable containers** at point of waste generation.
- Incorporating **efficient waste disposal methods** into practice.

EPA WASTE CLASSIFICATION GUIDELINE'S PART 1: CLASSIFYING WASTE

Purpose: Classifying wastes into groups that pose similar risks to the environment and human health facilitates their management and appropriate disposal. It is the responsibility of those who generate waste to classify that waste. To assist waste generators classify the wastes they produce, the EPA has developed the Waste Classification Guidelines ('the Guidelines') which are a step-by-step process for classifying waste.

Generators and waste facilities must carefully follow the procedures in these Guidelines to ensure they comply with applicable laws in classifying their waste and safeguard protection of the environment and human health. (© State of NSW, Environment Protection Authority, 2014, pg. iii)

KEY COMPONENTS



- **Page 1:** Classes of waste
- **Page 1, 2:** 'Special waste'

WHAT DOES THIS MEAN FOR YOU?

Special care must be given to 'special waste' to mitigate environmental impacts. Each 'clinical and related waste' has a separate definition and therefore separate requirements for disposal.

EPA as a governing body requires both clinicians and larger bodies to effectively classify and segregate waste according to their enforced categories.

Pharmaceutical waste must be incinerated and therefore cannot be mingled with sharps waste.

EPA Governance ensures Pharmaceuticals MUST NOT be disposed of:

- **Down the drain** – ending up in our rivers, streams, oceans and tap water.
- **Into general waste** – ending up in landfill, leeching into soil and our water table.
- **Into waste streams that are 'Autoclaved and shredded'** – drugs are not destroyed and end up in landfill and consequently water table.

SUMMARY

NSW Health and the EPA mandate the categorisation of waste. Disposal methods will differ dependant on what category waste falls under.

In NSW, healthcare facilities are required to **segregate waste at point of generation**.

NSW Health governs that waste containers must be appropriately coloured, conveniently placed, efficient to use and be associated with relevant education.

- In NSW, **Pharmaceutical waste must be incinerated**.
- In NSW, legislation requires Schedule 8 medications to **rendered unusable and unrecoverable at point of disposal** to mitigate the risk of diversion. A commercial absorbent material is recommended, along with the use of a purpose made 'Pharmaceutical waste bin'.

Clinicians have a legal responsibility to dispose of pharmaceuticals responsibly, to mitigate the possibilities of drug diversion and to minimise harm to the environment.

WANT TO KNOW MORE?

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