Griffith UNIVERSITY
Queensland, Australia

SUBSTANCE MANAGEMENT PLAN

June 2025

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1 DOCUMENT INFORMATION

INFORMATION Title	Printable version (PDF) Downloadable version (Word) SUBSTANCE MANAGEMENT PLAN
Document number	
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	
Effective date	
Review date	
Policy advisor	Senior Specialist – Chemicals & Radiation
Approving authority	University Chemical and Radiation Committee
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).
UCRC Chair Approval Signature	01/04/2026 Rosalind Archer Prof Rosalind Archer
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

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*), associated regulations, and departmental standards. 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 a review 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.

A review incident as defined under the Queensland Health Departmental Standard Substance management plans for regulated poisons – version 1 (27 September 2021):

- there is a substantial change to the internal or external operations related to the dealings, or in connection with, the place
- a non-compliant audit outcome results in new risks being identified or recommendations to modify how known and foreseeable risks related to dealing with regulated poisons are managed
- a systematic issue is identified
- internal checks identify that an amount of a restricted S7 poison or high-risk poison possessed under the substance authority is not accounted for
- release of a restricted S7 poison or high-risk poison possessed under a substance authority causes, or is likely to cause, someone to require medical treatment.
- the holder of the substance authority is issued a compliance notice, or subject to administrative action or prosecuted for an offence under the Act.

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. lease of a lab outside Griffith campuses a remote clinic;
- Any other non-therapeutic 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 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, spread, or use the poison.

Appropriately Qualified: 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.

Approved Disposer (Poisons & Prohibited Substances): Approved disposer classification is dependent upon the classification of the dealing. All approved disposers are listed in this plan.

Approved Disposer (Medicines): Refer to the Medicines and Poisons (Medicines) Regulation 2021, Section 147 for the requirements to be an Approved Disposer for S8 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,

Diversion-risk Medicine: A medicine mentioned in schedule 2, part 4 is a diversion-risk medicine, Medicines and Poisons (Medicines) Regulation 2021.

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

Eligible Person: a person approved by the Group or Element to buy, possess, apply, dispose of of 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.

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.

Diversion-risk Medicine: A medicine mentioned in schedule 2, part 2 is a high-risk medicine, Medicines and Poisons (Medicines) Regulation 2021.

High-risk Medicine: A medicine mentioned in schedule 2, part 2 is a high-risk medicine, Medicines and Poisons (Medicines) Regulation 2021.

High-risk Poisons: A high-risk poison is an S8 poison or a prohibited substance (S9, S10) used for non-therapeutic use. Which does not include a prohibited substance used, or intended to be used, for a therapeutic use.

Medicine: a scheduled substance in the category of a 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 Medicine: A medicine mentioned in schedule 2, part 4 is a monitored medicine, *Medicines and Poisons (Medicines) Regulation 2021*.

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).

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 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 Medicine: Are specified in Medicines and Poisons (Medicines) Regulations 2021 part 5 diversion-risk, restricted, high-risk, or monitored medicines.

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: A medicine mentioned in schedule 2, part 1 is a restricted medicine, Medicines and Poisons (Medicines) Regulation 2021.**Responsible person**: the person prescribed by regulation to be the responsible person for the regulated place.

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

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. The below definitions are as per The Poisons Standard

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.

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 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.

SSD: Scheduled Substance dealing in online activity register. The register maintains a list of all approved work with regulated substances.

Special Approver: Authorised individuals with knowledge of the SMP (this document) and legislative requirements, who can approve the purchase of scheduled substances.

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 poison or regulated medicine 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.

5 GOVERNANCE

5.1 Governance Roles

A. University Chemical and Radiation Committee Chair

The Chemical and Radiation Committee (UCRC) chair will be the person responsible for authorising the SMP and ensuring the plan is implemented and reviewed.

B. Chemical and Radiation Advisory Committee (UCRAC)

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

The Committee 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 UCRC. 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 UCRC 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. 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.

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 UCRC, 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's 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 alternative places of work or fieldwork. A list of approved locations for use is recorded in the dealing authority register. All Griffith University stores or receiving points are authorised to hold scheduled substances from time of delivery until collection by authorised person.

6 APPROVALS

A university must obtain a general approval for the use of regulated poisons and medicines for research, teaching, or analytical purposes. This approval allows authorised individuals within the university to purchase, store, and apply scheduled substances. For more information, please contact the CRS@griffith.edu.au.

Approval Requirements for Scheduled Substances: To purchase, possess, use, or dispose of a scheduled substance, appropriate approval must be obtained in accordance with the substance's schedule classification. Special Approvers are authorised to endorse purchase requests for Schedule 2 to Schedule 10 substances. However, for Schedule 7 (Restricted) to Schedule 10, secondary approval is required from the University Scheduled Substance Manager (USSM) or their delegate.

Once the request has been endorsed, the Special Approver may provide a copy of the relevant General Approval to support the procurement process.

Note:

- Refer to Appendix 2 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.

6.1 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 5 years after the last entry is made, refer section 7.

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).

6.2 Procurement

Purchasing shall be completed as per the University purchasing procedures. 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 Special Approver/Scheduled Substance Coordinator. All items that are RS7, S8, S9, or S10 will require secondary approval by the CRS team (See: Appendix 4).

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.

All scheduled substances must be ordered via a purchase order and the order will include the following:

- the date of the purchase order
- the name and contact details of the buyer
- if the buyer carries on a business—the buyer's ABN
- the details of the buyer's authorisation under the Act to buy the poison
- for a regulated poison other than a high-risk poison—the name and amount of the poison
- for a high-risk poison—the name, form, strength and amount of the poison
- if the poison is to be delivered to the buyer—the physical address of the buyer for delivery.

6.3 Arrival at a Controlled Delivery Point

A Controlled Delivery Point may be either a designated Griffith University store 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. All goods must be entered into the Chemical Inventory Management System.
3. The goods must be held in a secure location until collection by the eligible person.
4. The goods must only be released by stores staff to the relevant Eligible Person or Scheduled Substance Coordinator.

7 POSSESSION RESPONSIBILITIES

7.1 Records

All High-Risk Poisons (RS7, S8, S9 and S10) are recorded in a **High-Risk Poisons Arrival Register (HRPAR**). 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 hard copy book 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 3.

Accurate records of RS7, S8, S9, S10 substance transactions and quantities possessed must be kept at all times.

To maintain records of acquisition, S2, S3, and S4 Scheduled Substances are to be ordered by Purchase Request in Marketplace or Special Request. 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 substances, and manifests. The copies are to be emailed to crs@griffith.edu.au

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 are 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 (including all RS7, S8, S9, S10) must be disposed of the Griffith University chemical waste process, with supervision of the disposal by a member of the Chemical and Radiation Specialist Team or approved person (Appendix 5).

The supervision of destruction requires one of the Nominated Supervisors for Destruction to physically witness each destruction. Scheduled Substances (S2, S3 & S4) that are categorised as high-risk, diversion-risk, monitored, or restricted medicines must be treated as a High-Risk Poison. All other Scheduled Substances (S2, S3 & S4) 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 in an area to which the public does not have access.
- **Regulated Medicines (all schedules)**) An authorised person in possession of a controlled medicine must keep the medicine in a locked cabinet that complies with the minimum requirements for a controlled medicine receptacle or another secure place that is at least as secure as the requirements in departmental standard or 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.
- **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, refer to Departmental standard Secure storage of S8 medicines. 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 scheduled 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 regular inspections and stock-take audits.

Scheduled Substance Coordinators or Eligible Persons must reconcile the volume and the High-Risk Register in accordance with the below table. The Medicines and Poisons (Poisons and Prohibited Substances) 2021 requires monthly reconciliation, however, this can be impractical to complete based on the extremely small quantities possessed. Griffith has taken a risk based approach to determine the timing of reconciliation.

Quantity of High-Risk Poison	Reconciliation timing	Justification
Less than 1 gram of a substance in a single container (bottle, ampule, etc)	No reconciliation required	The amount held is below a therapeutic dose and/or is below a quantity that is likely to be diverted.
Multiple containers containing 1 gram or less in each container and less than 10 grams total of the same substance.	3 monthly	The amount held may be at a therapeutic dose but does not represent a risk of diversion.
Any quantities above the previous two	1 monthly	Comply with regulations to minimise diversion.

7.7 Incident Reporting

Any incident involving Medicines and Poisons (including a quantity discrepancy) must be immediately reported to the University using online reporting system and to 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 or delegate will be required to follow up on any incident involving High-Risk Poisons or High-Risk Medicines with an investigation. The findings of the investigation including any recommendations shall be reported to the University Chemical and Radiation Committee and other relevant committees for consideration.

7.7.1 Reportable incidents under the regulations

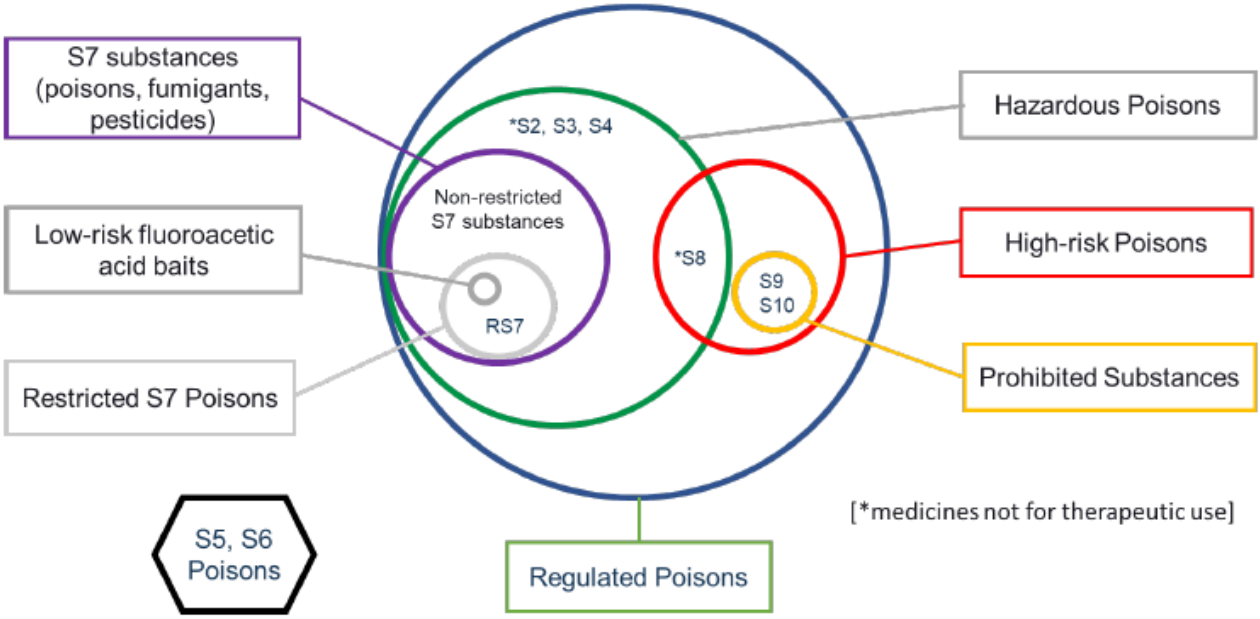
The following incidents must be notified to the chief executive as soon as practicable, and no later than 7 days, after the incident and include enough particulars to identify the nature of the incident and its location.

1. Any an amount of a restricted S7 poison or high-risk poison possessed under the authority is not accounted for – this could be due to loss, theft, fire, natural disaster, or other event.
2. Any release of a restricted S7 poison or high-risk poison possessed under the authority causes, or is likely to cause, someone to require medical treatment.
3. Any loss, stolen, or destroyed high-risk poison register.

7.8 Transport

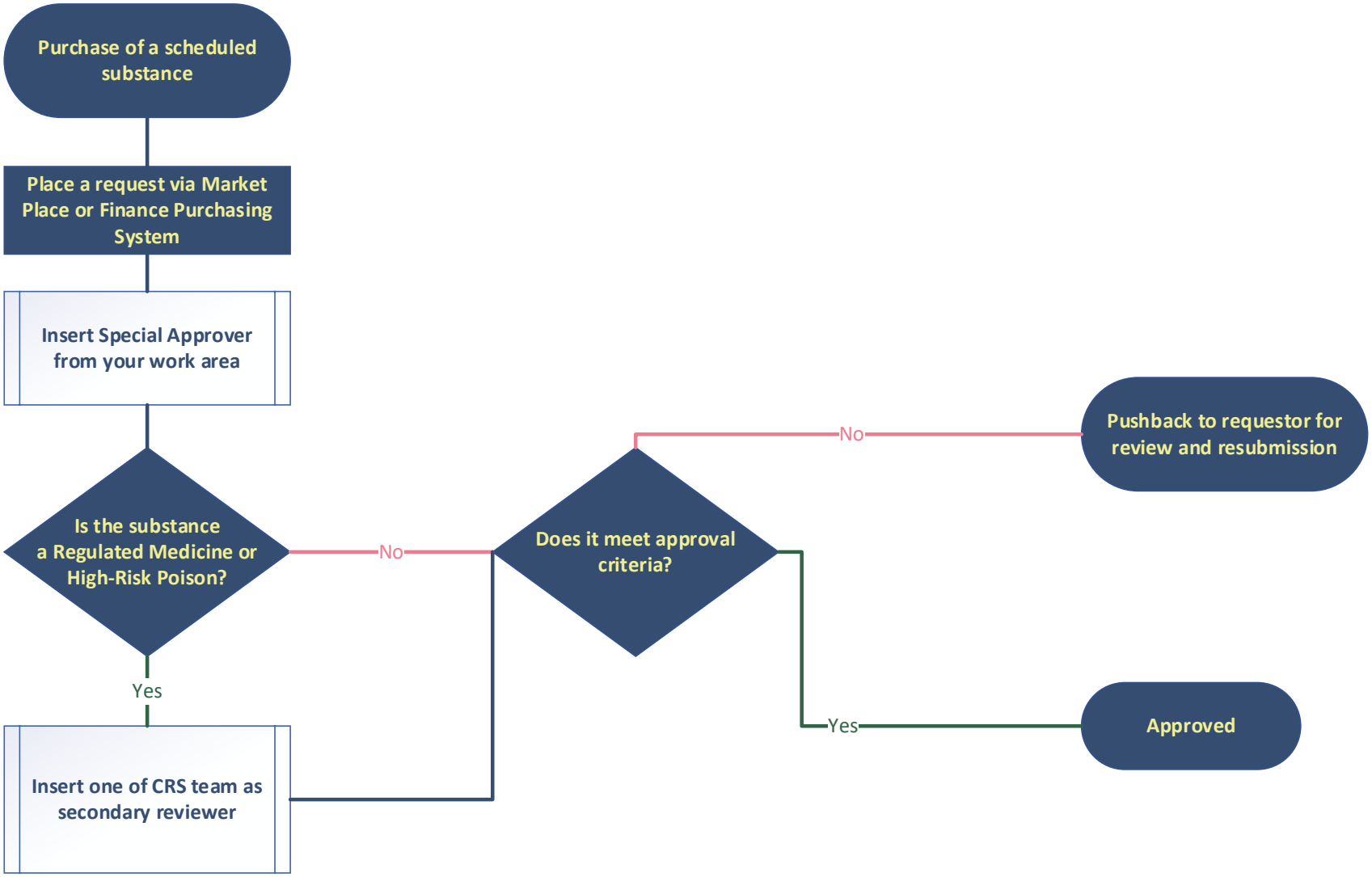
In order to ensure the safe and secure transport of substances to prevent them from being lost, stolen, misplaced, or misused; procedures should be in place to monitor the receipt of orders. In addition, only licensed couriers must be used to dispatch scheduled substances. Any loss or other discrepancy 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: Simplified Purchase Request Process Chart



Appendix 3: Example High-Risk Poisons Log Page

n.b – this must be recorded in a bound book with consecutively numbered pages.

HIGH RISK POISONS REGISTER

Chief Investigator		Name of Compound	
Schedule		Name and address of Supplier	
Storage Location		Form (liquid, solid)	

N.B. Include building and room number, and storage location as Fridge/Freezer/Safe/Cupboard/Drawer.

Date	User's Name & Position	Experiment / Procedure	Amount of Drug Received (mg or g or mL)	Amount of Drug Used (mg or g or mL)	Balance of Drug Remaining (mg or g or mL)	User's Signature

Chief Investigator		Date		Page Number	

These records must be kept for all High-Risk Poisons for at least five (5) years after final log entry

Appendix 4: Approved Scheduled Substance Coordinators

Entity General Approval Approved Sub-Element	Approved SSC	Location	Phone	email
Science & Environment	**Dr Ben Norton** Senior Technical Manager	**Brisbane South (Nathan Campus)** N44_1.33	07 373 57552	ben.norton@griffith.edu.au
	Dr William Wallace Senior Technical Manager	**Gold Coast Campus** G39_4.43	07 555 28538	w.wallace@griffith.edu.au
Griffith University Health Group	**Dr Carie-Anne Logue** Manager (Health & Safety)	**Gold Coast Campus** G40_8.42	07 567 88148	c.logue@griffith.edu.au
	Dr Paulina Janeczek Technical Manager Research, Technologies and Logistics	**Gold Coast Campus** G40_8.42		p.janeczek@griffith.edu.au
Bioresources Facility	**Mr Hamish McMath** Manager, Bioresources Facility	**Gold Coast Campus** G25_3.51	07 555 28308	h.mcmath@griffith.edu.au
Institute for Biomedicine and Glycomics	**Dr Pauline Kelly** Senior Manager, Operations and Infrastructure	**Brisbane South (Nathan Campus)** N75_1.10/1.13	07 373 56534	IBGFLOmanagers@griffith.edu.au
	Dr Jake Russel Senior Operations Manager	**Gold Coast Campus** G26_4.31	0403 093 720	IBGFLOmanagers@griffith.edu.au
	Dr Michael Batzloff Head of Facilities and Laboratory Operations		0466 523 583	IBGFLOmanagers@griffith.edu.au m.batzloff@griffith.edu.au

Appendix 5: 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	**Brisbane South (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
Institute for Biomedicine and Glycomics	**Dr Michael Batzloff** Head of Facilities and Laboratory Operations, Institute for Biomedicine and Glycomics	**Brisbane South (Nathan) and Gold Coast campuses** G26_4.21 or N75_1.10	07 555 29434	IBGFLOmanagers@griffith.edu.au m.batzloff@griffith.edu.au

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