

European Union

Hospital pharmacies

- ☣ **Increase the use of risk assessments** as a key proactive exposure prevention measure (currently employed by only **84%** of hospital pharmacies)
- ☣ **Promote the active recording of incidents involving hazardous drugs** to avoid issues being ignored
- ☣ **Ensure that decontamination protocols are in place in all pharmacies** - a measure that **11%** of hospital pharmacies still lack
- ☣ **Increase levels of training for patients and caregivers**, which are currently falling a long way behind the levels of training offered to staff and are a high exposure risk
- ☣ **Increase medical surveillance**, particularly in Western European countries. Regular medical testing, for example, is only carried out regularly in **62%** of the pharmacies, falling to 20% in the UK, 30% in France, for example
- ☣ **Ensure that hazardous drugs are universally prepared in hospital pharmacies** rather than in wards - currently **21%** of preparation is carried out outside the pharmacy area
- ☣ **Ensure that closed systems drug transfer devices (CSTDs) are the primary device used in the preparation of hazardous drugs** to protect worker and patient safety
- ☣ **Ensure that sterile rooms used in the preparation of hazardous drugs are equipped with either a Biological Safety Cabinet (BSC) or an Aseptic Isolator (AI)** - **9%** of pharmacies revealed that this was not the case, with low results especially in Eastern Europe. Further, the use of CSTDs should be required as recommended by the World Health Organisation
- ☣ **Regular monitoring of surface contamination should be universal, more frequent and more comprehensive** - this is currently only carried out in **55%** of hospital pharmacies, and where it is carried out it is often infrequent and superficial
- ☣ **Formalise a European list of hazardous drugs** – currently the National Institute for Occupational Safety and Health (NIOSH) list is used but this is based on non-European criteria and is insensitive to the particulars of the European oncology environment

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- ☣ To achieve these recommendations, **hazardous drugs should be included in the Carcinogens and Mutagens Directive EU 2004/37, combined with mandatory European guidelines and a European list of hazardous drugs**

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Oncology outpatient units

- ☣ **Increase the use of risk assessments** as a key proactive exposure prevention measure (currently employed by **90%** of oncology outpatient units)
- ☣ **Promote the active recording of incidents involving hazardous drugs** to avoid issues being ignored
- ☣ **Ensure that preparation of hazardous drugs and spiking of medication bags is carried out in the hospital pharmacy** - currently only **86%** of the preparation and **61%** of the spiking of medical bags occurs in pharmacies, meaning that many workers in wards are exposed to the risk of spillages and leakages
- ☣ **Eliminate the use of outdated administration systems and promote the use of systems offering full protection, such as CSTDs**
- ☣ **Increase the use of all forms of personal protective equipment (PPE) where appropriate** - this is critical to worker safety, but most measures fail to be employed by approximately **25%** of units
- ☣ **Increase levels of training for patients and caregivers**, which are currently falling a long way behind the levels of training offered to healthcare staff but who are also at high exposure risk
- ☣ **Increase regular medical testing**, particularly in Western European countries - it is only carried out regularly in **58%** of the units, falling to 33% in Ireland, 35% in France, for example
- ☣ **Regular monitoring of surface contamination should be universal, more frequent and more comprehensive** - this is currently only carried out in **55%** of oncology outpatient units
- ☣ **Ensure a universal protocol for the cleaning of administration areas** - currently this only exists in **82%** of units and is essential for the maintenance of a safe environment for staff and patients
- ☣ To achieve these recommendations, **hazardous drugs should be included in the Carcinogens and Mutagens Directive EU 2004/37, combined with mandatory European guidelines and a European list of hazardous drugs**