

# Antineoplastic Drug Administration Course: Competency Framework

A competency framework to support standardised training and assessment of health care professionals in the administration of antineoplastic drugs and handling of related waste.

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## Part one: Competency Framework

### Background: eviQ Education

The Cancer Institute NSW provides evidenced based online resources to support the development of knowledge and skill of cancer health professionals. Each resource is supported by eviQ content and aims to provide standardised education while supporting key national cancer education initiatives such as EdCaN and Cancer Learning.

The resources promote best clinical practice for the care of patients with cancer ensuring high quality care is provided to all patients. All resources are flexible in delivery and allow for the easy transfer of clinical knowledge and skills across health facilities. The courses attract Continuing Professional Development (CPD) hours for participants and are provided free of charge.

eviQ Education courses can be incorporated within the health care organisation's staff professional development strategy and are designed to be implemented locally. Resources are available in all health care settings including metropolitan, regional, rural and remote.

### Antineoplastic Drug Administration Course: Competency Framework

In 2009 The Cancer Institute NSW was involved in *The National Cancer Nursing Education Project*<sup>3</sup> of which an output was *A National Professional Development Framework for Cancer Nursing (EdCaN)*.

Following this project there was a recognised need for all registered nurses to receive standardised education in the safe administration of antineoplastic drugs and handling of related waste. A second recognised need was a set minimum standard of clinical competencies promoting best practice. In response to these identified needs the Cancer Institute NSW developed *The Antineoplastic Drug Administration Course: Competency Framework* which outlined learning outcomes and performance criteria for each key competency in the administration of antineoplastic drugs:

1. Handling antineoplastic drugs and related waste safely
2. Understanding how antineoplastic drugs work
3. Reviewing protocols and prescriptions
4. Educating the patient and carer
5. Assessing patients
6. Administering oral antineoplastic drugs
7. Administering intravenous antineoplastic drugs
8. Preventing and managing extravasation of antineoplastic drugs

Following development of the Competency Framework the Antineoplastic Drug Administration Course (ADAC) was developed incorporating the components of each competency.

The Cancer Institute NSW is committed to quality improvement and the course is scheduled for a standard review every year and a comprehensive review every two years. For more information about the review cycle see the Stratified Review Process in the eviQ Education Development Guidelines.

## Aim

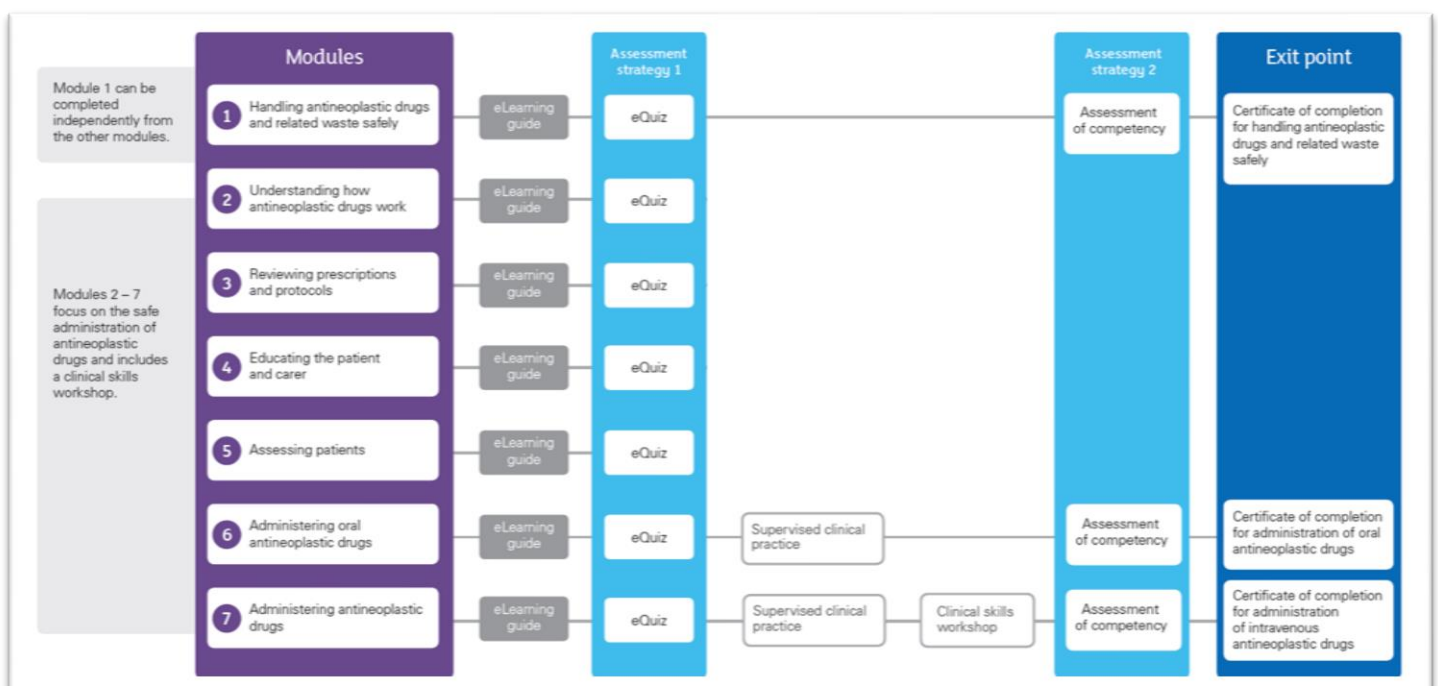
The Competency Framework provides the core structure for the Antineoplastic Drug Administration Course (ADAC). ADAC supports health professionals in developing clinical skills and knowledge in the safe administration of antineoplastic drugs and handling of related waste.

## Structure

The original *Competency Framework* (CI NSW 2009) document consisted of eight competencies associated with each of the ADAC modules. Each competency contained a brief descriptor setting out in broad terms the required knowledge and skills, learning outcomes and performance criteria. The performance criteria were used to inform the competency assessment for each individual module.

In 2013, as part of the review and update to version 2 of the course, the original eight competencies were adapted to develop three competency assessments associated with the exit points of the course. Certificates of completion are awarded following successful completion of all assessment strategies at the three nominated exit points.

1. Handling antineoplastic drugs and related waste safely
2. Administering oral antineoplastic drugs
3. Administering intravenous antineoplastic drugs



In 2016, ADAC was reviewed with an update to version 3. Following consultation with internal and external stakeholders minor changes were made to the structure and content of the course but no changes were made to the three nominated exit points. For more information see the ADAC Planning Workshop Report 2015.

For more information about the structure of ADAC please see the ADAC Information sheet or the Toolkit for facilitators.

## Competency assessment tools

The three competency assessment tools used as Assessment strategy 2 in ADAC have been developed using the information from the original ADAC: Competency Framework developed in 2009. All competency assessment tools are available on the *Facilitator's page* on the eviQ Education website.

Included as part of the assessors guide are the following components:

- Information for the participant
  - › Outlines the stages that are negotiated between participant and facilitator including supervised clinical practice.
- Guidelines for facilitators
  - › Outlines the requirement for facilitators to assess the competency of participants noting the participant needs to be assessed as *competent* for each performance criterion. In assessing competency, combinations of assessment methods are to be used including, clinical questioning, interview and observation.
- Record of supervised clinical practice
  - › Participants have unlimited practice session to encourage confidence and safe practice. Facilitators or clinical assessors may use simulation, demonstration or direct supervision of clinical practice.
  - › Supervised clinical practice needs to be in accordance with any local guidelines and protocols. Participants practice until as they are confident in their ability to successfully complete the competency assessment.
- Record of competency assessment
  - › Formally documents the participant's successful completion of the competency assessment.

For more information, refer to the competency assessment tools:

1. Handling antineoplastic drugs and related waste safely
2. Administering oral antineoplastic drugs
3. Administering intravenous antineoplastic drugs

## Maintenance of competence

A nurse's continuing competence in the administration of antineoplastic drugs should be maintained through regular participation in continuing professional development activities.<sup>1-5</sup> Further education and training for nurses involved in administering antineoplastic drugs should be undertaken when new agents, protocols or equipment are introduced or when procedures change.<sup>3-6</sup>

It is recognised some registered nurses, particularly those working in remote and rural areas, may only be involved in antineoplastic drug administration on an intermittent basis and may lose confidence and competency over time. There are a number of ways in which these nurses can be supported to maintain skills and regain confidence and competency, including:

- opportunities to regularly spend time in specialist centres to update skills,
- supervised clinical practice in their own area of work,
- use of technology such as telemedicine for virtual supervision and confidence building,
- use of ADAC reassessment of clinical competency education.

## Assessment

Facilitators and clinical assessors must be experienced and competent in the administration of antineoplastic drugs and be approved by their health facility to undertake clinical assessments. It is recommended facilitators have a minimum of 3 years experience in the administration of antineoplastic drugs and experience in clinical assessment. Formal processes should be in place within the health facility to support assessors and, where appropriate, training in workplace assessment should be considered.

The Cancer Institute NSW undertakes facilitator training workshops and provides ongoing support to facilitators. For more information contact [eviqed@eviq.org.au](mailto:eviqed@eviq.org.au)

## Part two: Learning Outcomes and Performance Criteria

### Learning Outcomes

#### 1 Handling antineoplastic drugs & related waste safety

1.1 Comply with legislation, relevant guidelines and local organisation policies for:

- handling, disposal, transport and storage of antineoplastic drugs;
- waste management including hazardous drug spill management, handling patients' body waste and waste associated with administration of antineoplastic drugs;
- health surveillance of employees; and
- first aid measures for accidental contamination.

1.2 Describe the:

- routes of excretion of antineoplastic drugs;
- sources of waste associated with administration of antineoplastic drugs;
- management of hazardous drug spills; and
- management of personnel contamination to antineoplastic drugs or related waste.

1.3 Implement safe workplace practices to minimise the risk of:

- occupational exposure to antineoplastic drugs or related waste for staff / patients / carers; and
- contamination of the environment with antineoplastic drugs or related waste.

#### 2 Understanding how antineoplastic drugs work

2.1 Understand the cell cycle including the different stages.

2.2 Describe the:

- effects of antineoplastic drug treatment on the cell cycle;
- different antineoplastic drug classifications and their mechanism of action on the cell;
- common side effects, drug specific side effects and toxicities of antineoplastic drugs;
- different routes for administration and implications for clinical practice; and
- safety issues and policy requirements associated with administration of intrathecal antineoplastic drugs.

2.3 Identify and access resources for information on antineoplastic drugs including side effects, drug specific side effects and toxicities.

#### 3 Reviewing protocols and prescriptions

3.1 Identify and access resources for information on antineoplastic drug treatment protocols.

3.2 Review antineoplastic drug treatment protocols and correctly identify specific administration and supportive care requirements.

3.3 Identify the risk of a hypersensitivity reaction and/or risk of extravasation for the prescribed antineoplastic drugs.

- 3.4 Calculate drug doses using different calculations i.e. Body Surface Area (BSA), Area Under the Curve (AUC) and mg / kg (aged based), dose modifications for toxicity.
- 3.5 Compare the patient's prescription chart to the prescribed treatment protocol ensuring all doses and timing of antineoplastic drugs and supportive therapy is correct.
- 3.6 Respond appropriately to indications for changes in treatment and dose modifications according to the antineoplastic drug treatment protocol.
- 3.7 Describe the role of clinical trials in the management of patients with a cancer diagnosis.
- 3.8 Report incidents and medication errors according to organisational policies and procedures.

#### **4 Educating the patient and carer / family members**

- 4.1 Describe the potential and actual ethical issues in the care of patients receiving treatment for a cancer diagnosis including informed consent, assent, advocacy and duty of care.
- 4.2 Implement the key elements of education into education for patients and carers / family members.
- 4.3 Assess the information needs and learning requirements of patients and carers/family members before, during and after the administration of antineoplastic drugs.
- 4.4 Educate patients and carers / family members about:
  - managing side effects and toxicities of antineoplastic drug treatment; and
  - the difference between side effects and toxicities which require hospitalisation and those which can be managed at home.
- 4.5 Use supportive care resources and appropriate sources of patient information when providing education for patients and carers / family members.
- 4.6 Accurately document provision of education in a patient's medical record.

#### **5 Assessing patients**

- 5.1 Complete a comprehensive patient assessment including clinical, physical and psychosocial assessments before administration of antineoplastic drugs.
- 5.2 Assess a patient's venous access requirements according to the prescribed antineoplastic drug treatment protocol.
- 5.3 Assess a patient's venous access and refer for an appropriate device if required.
- 5.4 Complete and review all relevant clinical assessments required for specific antineoplastic drugs according to eviQ, or organisation specific treatment protocols or clinical trials information.
- 5.5 Describe and access information resources on the assessment and immediate management of hypersensitivity reactions.
- 5.6 Assess a patient's risk factors which may lead to an extravasation injury.
- 5.7 Complete all documentation at the conclusion of treatment and ensures the effective discharge for the patient.
- 5.8 Accurately document all assessment findings in a patient's medical record.



## **6 Administering oral antineoplastic drugs**

- 6.1** Comply with legislation, relevant guidelines and local organisation policies for administration of oral antineoplastic drugs.
- 6.2** Complete an initial and then follow up physical, clinical and psychosocial assessment of the patient receiving oral antineoplastic drugs.
- 6.3** Implement key elements of education into education for patients and carers / family members about treatment with oral antineoplastic drugs.
- 6.4** Educate the patient and carer / family member about safety issues related to treatment with oral antineoplastic drugs.
- 6.5** Demonstrate the correct:
  - handling precautions when administering oral antineoplastic drugs;
  - procedure for the administration of oral antineoplastic drugs including use of personal protective equipment; and
  - procedure for disposal of all associated equipment and clinical waste.
- 6.6** Accurately document administration of oral antineoplastic drugs in a patient's medical record.

## **7 Administering antineoplastic drugs**

- 7.1** Comply with legislation, relevant guidelines and local organisation policies for administration of antineoplastic drugs.
- 7.2** Describe the core principles, processes and safety issues of administering antineoplastic drugs via different routes including intravenous, intramuscular, intraperitoneal, intravesical, topical, subcutaneous and intrathecal.
- 7.3** Implement the key elements of education into education for patients and carers / family member's education about treatment with antineoplastic drugs and routes of administration.
- 7.4** Educate the patient and carer / family member about safety issues related to treatment with antineoplastic drugs.
- 7.5** Identifies the specific safety issues relating to the administration of intravenous antineoplastic drugs via an infusion and bolus.
- 7.6** Ensure the appropriate access device is inserted before administration of antineoplastic drugs.
- 7.7** Demonstrate skill in management of peripheral and central venous access devices including assessment of site and patency of device.
- 7.8** Demonstrate the correct:
  - safe handling precautions when administering antineoplastic drugs including intravenous, intramuscular, intraperitoneal, intravesical, topical, subcutaneous and intrathecal;
  - preventative measures to minimise extravasation injuries;
  - procedure for the administration of antineoplastic drugs via different routes including use of personal protective equipment; and
  - procedure for disposal of all associated equipment and clinical waste.

**7.9** Describe the:

- signs and symptoms of an extravasation injury; and
- immediate and long-term management of a suspected or actual extravasation injury.

**7.10** Access information sources on:

- guidelines for safe handling of antineoplastic drugs and related waste;
- antineoplastic drug information;
- antineoplastic drug treatment protocols; and
- extravasation injuries and their management.

**7.11** Accurately document in a patient's medical record:

- administration of antineoplastic drugs; and
- incidents and medication errors.

## Performance criteria

### Handling antineoplastic drugs and related waste safely

#### 1 Domain: Policies, procedures and guidelines

**1.1** Complies with all Commonwealth, National and State legislation, policies and guidelines for the safe administration of antineoplastic drugs.\*

**1.2** Complies with all organisational policies, procedures and guidelines for:

- handling, packaging, storage and transport of antineoplastic drugs;
- health surveillance of employees;
- waste management including: hazardous drug spill management, handling patients' body waste and waste associated with administration of antineoplastic drugs; and
- reporting of incidents.

#### 2 Domain: General knowledge

**2.1** Demonstrates self-awareness of limitations of clinical practice and seeks advice when necessary.

**2.2** Identifies:

- common causes of exposure to antineoplastic drugs and related waste; and
- correct use of Personal Protective Equipment (PPE) when handling antineoplastic drugs and related waste.

**2.3** Describes:

- the risks involved in the handling of antineoplastic drugs and the precautions required for health professionals, patients and carers / family members;
- steps to minimise occupational exposure to antineoplastic drugs and related waste;
- procedures for dealing with accidental contamination and occupational exposure of health professionals to antineoplastic drugs or related waste; and
- health surveillance requirements for employees.

### **3 Domain: Clinical skills**

- 3.1** Practices within professional boundaries and organisational role descriptions.
- 3.2** Accesses information sources on guidelines for safe handling of antineoplastic drugs and related waste.
- 3.3** Demonstrates clinical skill in use of correct PPE when handling antineoplastic drugs and related waste.

\*Not applicable for staff who do not administer antineoplastic drugs as part of their scope of practice.

## **Administering oral antineoplastic drugs**

### **1 Domain: Legislation, policies, procedures and guidelines**

**1.1** Complies with all Commonwealth, National and State legislation, policies, procedures and guidelines for the:

- safe administration of antineoplastic drugs, and
- verification of patient identity using three appropriate patient identifiers.

**1.2** Complies with all organisational policies, procedures and guidelines for:

- handling, packaging, storage and transport of oral antineoplastic drugs;
- health surveillance of employees;
- administration of oral antineoplastic drugs;
- waste management including: hazardous drug spill management, handling patients' body waste and waste associated with administration of oral antineoplastic drugs;
- reporting of incidents and medication errors; and
- documentation of patient care.

### **2 Domain: Communication**

**2.1** Communicates effectively with patients, carers, family members and the treating team.

**2.2** Demonstrates via accurate documentation in a patient's medical record:

- provision of patient and carer / family member education;
- patient assessment and associated care;
- administration of oral antineoplastic drugs; and
- incidents and medication errors.

### **3 Domain: General knowledge**

**3.1** Demonstrates self-awareness of limitations of clinical practice and seeks advice when necessary.

**3.2** Understands the cell cycle including the different stages.

**3.3** Identifies:

- common causes of exposure to antineoplastic drugs and related waste;
- correct use of Personal Protective Equipment (PPE) when
  - handling oral antineoplastic drugs and related waste, and
  - administering oral antineoplastic drugs;
- the effects of antineoplastic drugs on the cell cycle;
- different drug classifications and their mechanism of action on the cell;

- nursing implications for patients' receiving treatment as part of a clinical trial;
- the nurse's responsibilities relating to informed consent and assent for adult, young adult and paediatric patients receiving antineoplastic drug treatment;
- antineoplastic drugs that have a potential to cause hypersensitivity (allergic) reactions; and
- appropriate patient information resources to support patient care and education.

**3.4** Describes:

- the risks involved in the handling of oral antineoplastic drugs and the precautions required for health professionals, patients and carers / family members;
- steps to minimise occupational exposure to oral antineoplastic drugs and related waste;
- procedures for dealing with accidental contamination and occupational exposure of health professionals to oral antineoplastic drugs and related waste;
- health surveillance of employees handling antineoplastic drugs and related waste;
- implications for clinical practice with administration of oral antineoplastic drugs;
- side effects, drug specific side effects and toxicities associated with the administration of oral antineoplastic drugs; and
- signs and symptoms of hypersensitivity (allergic) reactions and their management.

**4 Domain: Clinical skills**

**4.1** Practices within professional boundaries and organisational role descriptions.

**4.2** Accesses information sources on:

- guidelines for safe handling of oral antineoplastic drugs and related waste;
- antineoplastic drug information; and
- antineoplastic drug treatment protocols.

**4.3** Accesses and provides appropriate resources to patients and carer / family member for:

- provision of patient and carer / family member education; and
- self management of side effects.

**4.4** Demonstrates clinical skill in:

- use of correct PPE when administering oral antineoplastic drugs and handling related waste;
- reviewing and interpreting the prescribed antineoplastic drug treatment protocol to determine the
  - potential risk of a hypersensitivity (allergic) reaction, and
  - supportive care requirements;
- drug calculation of all prescribed drugs including supportive therapy for doses based on
  - weight, BSA, AUC, aged based and dose modifications (e.g. paediatric or geriatric patients);
- comparing the patients' prescription chart(s) against the prescribed antineoplastic drug treatment protocol to confirm the prescription chart and all drug doses including timing of drugs is correct; and

- administering oral antineoplastic drugs and supportive therapy as prescribed ensuring the correct technique is used.

**4.5** Responds appropriately to a deviation from the antineoplastic drug treatment protocol and identifies situations where dose reduction, dose delay or cessation may be necessary.

## **5 Domain: Patient and carer / family members education**

**5.1** Describes key elements of education to include in patient and carer / family member education.

**5.2** Assesses the patients and carers / family members' knowledge about oral antineoplastic drug treatment before commencing education and following completion of education.

**5.3** Discusses the patients and carers / family member's goals for education sessions.

**5.4** Plans education sessions and accesses appropriate resources based on diagnosis, planned treatment, health literacy and need for information.

**5.5** Reinforces patients and carers / family members learning by repeating information in multiple sessions as opportunities arise e.g. upon return for subsequent cycles / treatment.

**5.6** Provides appropriate education to patients and carers / family members on:

- the prescribed treatment protocol including
  - antineoplastic drugs to be administered,
  - route of administration including timing of drug(s),
  - doses of each drug, and
  - number and frequency of cycles;
- managing side effects and toxicities of treatment;
- rationale for dose modifications for side effects and toxicities; and
- safe handling of oral antineoplastic drugs and related waste e.g. vomit, soiled clothing, storage.

## **6 Domain: Patient assessment**

**6.1** Completes a comprehensive patient assessment including clinical, physical and psychosocial assessment before administration of oral antineoplastic drugs.

**6.2** Identifies specific clinical or physical assessment as outlined in the prescribed treatment protocol.

**6.3** Accurately interprets assessment results and responds appropriately to findings from the comprehensive patient assessment.

**6.4** Reports any abnormal findings to the treating team.

**6.5** Discusses with the patient and carer / family member their response to previous treatments, e.g. side effects and their management.

**6.6** Completes a patient review at the conclusion of treatment ensuring the effective discharge of the patient.

## Administering antineoplastic drugs

*(intravenous, oral, subcutaneous, intramuscular, topical, intraperitoneal, and intravesical)*

### 1 Domain: Policies, procedures and guidelines

1.1 Complies with all Commonwealth, National and State legislation, policies and guidelines for:

- the safe administration of antineoplastic drugs; and
- verification of patient identity using three appropriate patient identifiers.

1.2 Complies with all organisational policies, procedures and guidelines for:

- handling, packaging, storage and transport of antineoplastic drugs;
- health surveillance of employees;
- administration of antineoplastic drugs via different routes including oral, intravenous, intrathecal, topical, subcutaneous, intramuscular, intraperitoneal, and intravesical;
- waste management including: hazardous drug spill management, handling patients' body waste and waste associated with administration of antineoplastic drugs;
- reporting of incidents and medication errors; and
- documentation of patient care.

### 2 Domain: Communication

2.1 Communicates effectively with patients, carers / family members and the treating team.

2.2 Demonstrates via accurate documentation in a patient's medical record:

- provision of patient and carer / family members education;
- patient assessment and associated care;
- administration of antineoplastic drugs; and
- incidents and medication errors including extravasation injuries and hypersensitivity reactions.

### 3 Domain: General knowledge

3.1 Demonstrates self-awareness of limitations of clinical practice and seeks advice when necessary.

3.2 Understands the cell cycle including the different stages.

3.3 Identifies:

- common causes of exposure to antineoplastic drugs and related waste;
- correct use of Personal Protective Equipment (PPE) when
  - handling antineoplastic drugs and related waste, and
  - administration of antineoplastic drugs via different routes including oral, intravenous, intrathecal, topical, subcutaneous, intramuscular, intraperitoneal and intravesical;
- the effects of antineoplastic drugs on the cell cycle;
- different drug classifications and their mechanism of action on the cell;
- nursing implications for patients receiving treatment as part of a clinical trial;

- the nurse's responsibilities relating to informed consent and assent for adult, young adult and paediatric patients receiving antineoplastic drug treatment;
- antineoplastic drugs that have a potential to cause hypersensitivity reactions or extravasation injuries; and
- appropriate patient information resources to support patient care and education.

#### 3.4 Describes:

- the risks involved in the handling of antineoplastic drugs and the precautions required for health professionals, patients and carers / family members;
- steps to minimise occupational exposure to antineoplastic drugs and related waste;
- procedures for dealing with contamination and occupational exposure of health professionals to antineoplastic drugs and related waste;
- health surveillance of employees handling antineoplastic drugs and related waste;
- different routes of administration and implications for clinical practice;
- side effects, drug specific side effects and toxicities associated with the administration of antineoplastic drugs;
- signs and symptoms of hypersensitivity reactions and their management;
- signs and symptoms of extravasation injuries;
- management of extravasation injuries caused by vesicant, irritant and neutral antineoplastic drugs; and
- risk factors and steps to reduce risk of extravasation injuries when administering antineoplastic drugs via a peripheral or central venous access device.

## 4 Domain: Clinical skills

### 4.1 Practices within professional boundaries and organisational role descriptions.

### 4.2 Accesses information sources on:

- guidelines for safe handling of antineoplastic drugs and related waste;
- antineoplastic drug information;
- antineoplastic drug treatment protocols;
- hypersensitivity reactions and their management; and
- extravasation injuries and their management.

### 4.3 Accesses and provides appropriate resources to patients and carers / family members for:

- provision of patient and carer / family members education; and
- self management of side effects.

### 4.4 Demonstrates clinical skill in:

- use of correct PPE when administering antineoplastic drugs via different routes and handling related waste;
- reviewing and interpreting the prescribed antineoplastic drug treatment protocol to determine the:
  - risk of a hypersensitivity reaction for each prescribed drug,
  - risk of extravasation for each prescribed drug,
  - requirements for venous access,

- supportive care required including pre and post hydration,
  - appropriate intravenous fluids for priming and flushing, and
  - appropriate equipment including infusion pumps;
  - drug calculation of all prescribed antineoplastic drugs including supportive therapy for doses based on:
    - weight, BSA, AUC, mg / kg (aged based for paediatric or geriatric patients) and dose modifications;
  - comparing the patients' prescription chart(s) against the prescribed antineoplastic drug treatment protocol to confirm the prescription chart and all drug doses including timing of drugs is correct;
  - administering antineoplastic drugs via different routes ensuring the correct technique is used for intravenous, intramuscular, subcutaneous, intravesical and intraperitoneal routes;
  - ensuring the infusion rate is correct when administering intravenous antineoplastic drugs; and
  - administering supportive therapy as prescribed in the antineoplastic drug treatment protocol.
- 4.5** Responds appropriately to a deviation from the antineoplastic drug treatment protocol and identifies situations where dose reduction, dose delay or cessation may be necessary.
- 4.6** Demonstrates skill in management of peripheral and central venous access devices including assessment of site and patency of device.

## **5 Domain: Patient and carer / family members education**

- 5.1** Describes key elements of education to include in patient and carer / family member's education.
- 5.2** Assesses the patient and carers / family member's knowledge about antineoplastic drug treatment before commencing education and following completion of education.
- 5.3** Discusses the patients and carers / family members goals for education sessions.
- 5.4** Plans education sessions and accesses appropriate resources based on diagnosis, planned treatment, health literacy and need for information.
- 5.5** Reinforces patients and carers / family members learning by repeating information in multiple sessions as opportunities arise e.g. upon return for subsequent cycles / treatment.
- 5.6** Provides appropriate education to patients and carers / family members on:
- the prescribed treatment protocol including
    - antineoplastic drugs to be administered,
    - routes of administration,
    - doses of each drug,
    - number and frequency of cycles;
  - managing side effects and toxicities of treatment;
  - rationale for dose modifications for side effects and toxicities; and
  - safe handling of antineoplastic drugs and related waste e.g. vomit, soiled clothing.



## **6 Domain: Patient assessment**

- 6.1** Completes a comprehensive patient assessment including clinical, physical and psychosocial assessment before administration of antineoplastic drugs.
- 6.2** Identifies specific clinical or physical assessment as outlined in the prescribed treatment protocol.
- 6.3** Accurately interprets assessment results and responds appropriately to findings from the comprehensive patient assessment.
- 6.4** Reports any abnormal findings to the treating team.
- 6.5** Discusses with the patient and carer / family members their response to previous treatments, e.g. side effects and their management.
- 6.6** Completes a patient review following the administration of treatment ensuring the effective discharge of the patient.

## Appendix 1

### Definitions

#### **Antineoplastic drug**

A drug which is used to control or kill cancer cells. Examples include cytotoxic, hormonal, biological and molecular targeted therapies.

#### **Biohazard**

A biohazard is an infectious agent or hazardous biological material that presents a risk to the health of humans or the environment.

#### **Chemotherapy drug**

Chemical agents used to treat disease. The term usually refers to a drug used to treat cancer. This is the term that most patients and carers are familiar with.

#### **Cytotoxic drug**

A drug which is capable of disrupting the growth function and replication of both healthy and diseased cells. These agents are carcinogenic, mutagenic and teratogenic.

#### **Hazardous drugs**

Drugs are classified as hazardous if studies in animals or humans indicate that exposure to them has a potential for causing cancer, developmental or reproductive toxicity, or harm to organs.

#### **Competence**

Competence can be defined as the 'combination of skills, knowledge, attitudes, values and abilities that underpin effective and/or superior performance in a profession /occupational area'.<sup>1,2</sup>

#### **Learning outcomes**

Learning outcomes are statements that describe significant and essential learning participants will have achieved and can reliably demonstrate at the end of each course component.

#### **Performance criteria**

Performance criteria are evaluative statements specifying what is to be assessed and the required level of performance. The performance criteria detail the activities, skills, knowledge and understanding that provide evidence of competent performance of each criterion. All criteria must be achieved using a range of assessment strategies in order for a comprehensive assessment to be completed.

## Appendix 2

### References

1. [Nursing and Midwifery Board of Australia: Professional Standards](#)
  - 1.1 Registered nurse standards for practice. June 2016.
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6. CNSA, Position statement on the minimum safety requirements for nurses involved in the administration of anti-cancer drugs. 2010. <http://www.cnsa.org.au>