



## 2016 e newsletter # 6 - July

### Your (Clinical) Waste Management Policy

In each of the 10 e newsletters for 2016, I am previewing a policy template - how does yours compare? Each of the policy templates includes: procedures, resources, contacts, references and further notes and is available for purchase.

#### 1. PREAMBLE

- 1.1 There are legal requirements for disposal of prescribed waste generated in health care facilities (HCFs). This is related to the safety of others who handle it. The bulk nature of such waste does increase potential for risk.
- 1.2 HCFs need to provide for appropriate disposal of clinical and sharps waste in addition to general waste and recyclables. Standard approved yellow sharps bins for sharps and yellow bags for clinical waste are used. Further requirements are secure storage space and collection only by a registered collector.
- 1.3 There are current Australian national and state guidelines<sup>1</sup> to inform on waste management. This practice follows these guidelines and relevant state requirements.

#### 2. POLICY

- 2.1 This practice follows the Victorian EPA definition of clinical waste: all visible blood, all genital fluids and wound exudates. Faeces and vomit from a suspect gastro case and any waste from a person with an epidemiologically significant communicable disease e.g. Influenza is clinical waste. Urine, unless visibly bloodstained or for lab testing is not clinical waste. Currently, this definition is taken to include waste from patients with MRSA etc.
- 2.2 This practice follows the Victorian EPA definition of sharps, which includes all needles and lancets even if the sharp is not exposed, glass vials, blades and any items that can pierce the skin. Syringes even without needles are included in an effort to avoid removal of needles and reduce sharps injury. Staff are urged not to disconnect needles from syringes but to treat them as a single unit for safe sharps disposal
- 2.3 All staff are informed at induction by the Practice Nurse of the current state definitions for clinical and sharps waste. Updates are provided as needed.
- 2.4 To improve waste segregation, where a clinical waste bin is required, it is smaller than the general waste bin next to it - placement and size improve segregation
- 2.5 The clinical waste bin is not easily accessible by small children and is either pedal operated or a benchtop bin
- 2.6 Used sharps are disposed to approved sharps containers which are mounted to walls, trolleys or benches
- 2.7 External surfaces of both clinical waste bins and sharps are safely wiped as soon as contamination is noted.
- 2.8 A secure cupboard/shed/room is provided for clinical waste and sharps and only a licensed collector is used.
- 2.9 Protocols for safe waste disposal and waste segregation within the practice are attached to this policy