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1 INTRODUCTION

1.1 Policy Overview

Local Councils, under the Local Government Act, 1993 and Regulations, are responsible for regulating the storage, transportation and disposal of waste (including contaminated waste) generated on premises outside the Metropolitan Waste Disposal Region. Therefore the disposal of clinical and related waste within the Council area rests clearly with Bellingen Shire Council.

Concerns have been raised by Council staff about the handling and disposal of contaminated clinical and related waste prompting the need for formulation of a policy on this issue.

There are an increasing number of commercial generators of clinical and related waste and similarly, diabetics who would generate sharps and related medical waste in this Shire. To achieve policy acceptance every effort has been made to reflect survey findings (carried out by Wingecarribee Shire Council) within policy content whilst simultaneously accommodating the various legislative requirements.

In order that the policy be comprehensive and satisfactorily address community concerns, a section of the policy refers specifically to domestic waste generators. Those residents who generate sharps and or medical waste (e.g. diabetics) also require access to a safe and practical means of disposal.

1.2 Policy Objective

To provide procedures to ensure the safe packaging, labelling, storage, transport and disposal of contaminated clinical and related wastes to:

(a) Reduce the risk of contamination and infection to the community and,
(b) Minimise pollution of our environment by such waste.

1.3 Definition of Contaminated Clinical and Associated Waste

The NSW Health Department, in its document titled "Guidelines for the Handling Storage and Disposal of Clinical and Related Waste", and the Environmental Protection Authority (EPA) define contaminated waste as follows:

Contaminated waste is waste that has the potential to cause injury, infection or offence. Sources include medical, nursing, dental, veterinary, pharmaceutical and similar facilities engaged in treatment, investigation, teaching or research. Domestic sources include sharps and associated medical waste generated as a result of home-based treatment of a medical condition (such as those associated with a diabetes sufferer or dialysis patient).
• **Contaminated Sharps**: Any object capable of inflicting penetrating injury that has been contaminated with blood/body fluids e.g. needles, needle/syringe combinations, lancets and any other sharp object or instruments capable of inflicting penetrating injury.

• **Bulk body fluids, blood and blood products**: Including vessels, bags and tubing containing body fluids, blood/blood products.

• **Dressing and disposable linen**: Heavily soiled with blood/body fluid.

• **Microbiological and pathological waste**: Including discarded laboratory specimens, cultures and materials that have contact with such, and biological reagents.

• **Tissue**: Human tissue, organs, body parts, human foetuses, placentas and products of autopsy and animal tissue.

• **Other material**: Which may be determined by the organisation's Infection Control Officer to present a significant risk of infection.

The EPA has advised that sanitary napkins/incontinence pads only need to be classified as contaminated waste if they are generated in bulk, and are unable to be sufficiently dispersed and diluted with general wastes to render them unrecognisable.

2 MANAGEMENT OF CONTAMINATED SHARPS AND MEDICAL WASTE FROM DOMESTIC GENERATORS

2.1 General

(i) Sharps and/or other medical contaminated waste, i.e. swabs, gauze etc, NOT LIQUIDS, should be presented for disposal in puncture resistant containers, see Appendix 1.

Deposit stations for containers are to be accessed at the following locations:

• Courthouse toilets – Church Street, Bellingen
• Bellingen Park Toilets – Church Street, Bellingen
• CBD Carpark, Urunga
• Toilets – Alma Doepel Park, Mylestom
• Toilets – Community Centre, Dorrigo

(ii) This particular service is free to the public, however is not available to health professionals or other commercial generators of clinical and related wastes.
(iii) Bulk collection bins are to be emptied as required by Council's appointed and approved disposal personnel.

(iv) Council reserves the right to levy appropriate charges to users of this service should they become necessary.

(v) Suitable training for staff providing a collection service at exchange points will be conducted on a regular basis.

2.2 Handling and Disposal Requirements for Containers

- Special care must be taken to prevent injuries and infection during disposal of used sharps.
- Disposal stations have a responsibility to ensure adequate and accessible resources are provided for the disposal of sharps, and the facility is monitored regularly to ensure the site is safe.
- Staff must not directly handle sharps. The containers or the waste bin are not to be interfered with. Containers are to be placed immediately into the secure clinical waste bin provided, by the service user.
- All staff involved at the disposal facility shall be familiar with this policy and be suitably trained in its implementation.

2 MANAGEMENT OF CONTAMINATED SHARPS AND MEDICAL WASTE FROM DOMESTIC GENERATORS

2.2 Handling and Disposal Requirements for Containers (Cont’d)

- Needles must not be removed from the container, or be purposely broken or otherwise manipulated by hand.
- Needles must not be resheathed, or otherwise handled directly under any circumstances.
- Deposit Containers should be placed directly into the specially marked ‘yellow contaminated waste bin’ provided. Under NO circumstances should the container be opened, contents of the container be emptied or removed other than by an approved waste collection operator.
- Deposit bins should at all times be placed so children do not easily access them.
- Sharps containers must:
  (i) be puncture-resistant, waterproof and leak proof;
  (ii) never be overfilled; and
  (iii) be securely sealed with a lid before disposal.
- Contaminated waste storage facilities should be suitably sited, covered and lockable.
3 MANAGEMENT OF CONTAMINATED WASTES FROM COMMERCIAL GENERATORS

(i) Council requires all clinical and related waste generated within the Bellingen Shire area to be collected and removed only by an operator approved by Council in accordance with its powers under Section 68 of the Local Government Act, 1993. This will ensure these potentially hazardous materials are disposed of in accordance with Council, NSW Health Department and Environment Protection Authority Requirements.

(ii) Any contaminated waste disposal operator intending to collect, transport or dispose of clinical and related waste within the Council area must obtain prior approval of Bellingen Shire Council as per section 68 Local Government Act, 1993. An application shall be received in writing for this purpose and an approval fee shall apply (fee details available from Council upon request).

(iii) Council will carry out annual inspections of premises generating clinical and related waste for the purposes of determining compliance with clinical and related waste policy requirements, and public health standards generally. An inspection fee will be charged for this service in accordance with the provisions of Section 608 of the Local Government Act, 1993.

(iv) Each premises generating clinical and related waste shall enter into a written agreement with an approved contaminated waste disposal operator to provide a collection and disposal service. This agreement shall be made available to Council's Inspecting Officer for perusal, upon inspection of each premises. Service frequency will be determined according to the volume of clinical and related waste generated by individual premises.

(v) A lockable yellow clinical waste bin (wheeled - 80, 120, 240 litre capacity) or similar container with approved liners and/or clinical waste bags clearly marked "contaminated waste" (usually supplied by the disposal operator) shall be provided for the storage of clinical and related waste generated on the premises.

(vi) All sharps (i.e. needles, needle/syringe combinations, lancets etc) MUST be segregated by being placed in approved yellow sharps containers. When full, sharps containers should be placed in the clinical waste bin.

(vii) The clinical waste bins are required to be stored in a cool dry secure place, not readily accessible to the public and isolated from other wastes. The bins should be kept locked at all times when not in use to avoid unauthorised or mistaken access.

(viii) The disposal of non-irradiated dead animals at Council landfill depot can be made by way of special arrangement with Council's Manager, Buildings and Services.

(ix) Commercial generators will be responsible for arranging their individual waste service as required by this policy, at their own cost.

(x) Council will provide a register of approved Clinical Waste Disposal Operators as required.
4 REGULATORY PROVISIONS

Provisions exist under Local Government Act, 1993 to restrain persons who transport waste without prior approval of Council and to regulate and restrain persons who generate and handle clinical waste.

Council's DCP 4 – Local Orders Policy defines the criteria by which an Order under the Local Government Act, 1993 can be served to control and regulate commercial premises generating contaminated clinical wastes.

In addition, provision exists under Chapter 5 of Protection of the Environment Operations Act 1997, for a person, or an owner of the waste to be guilty of an offence if they negligently dispose of waste (tier 1 offence).

5 REFERENCES

1 NSW Department of Health Guidelines for Handling and Disposal of Clinical and Related Waste.

2 Diabetes Australia Contaminated Sharps Disposal - suggested options.

3 National Health & Medical Research Council National Guidelines for the Management of Clinical and Related Wastes.

4 EPA Special Conditions Applicable to Storage of Trade Waste Being Contaminated Waste generated in Hospitals etc.

5 City of Hawthorne Policy of Disposal of Sharps & Medical Waste.


7 NSW Health Department Infection Control Policy, Circular 95113.

8 Wingecarribee Shire Council Policy on Management of Contaminated Clinical and Related Waste
GUIDELINES FOR INFECTIOUS WASTE/SHARPS CONTAINERS

1 The containers are required to be capable of disposal by incineration.

2 In general, non-PVC plastic containers, being more rigid and impermeable to fluids are preferred and are to comply with the appropriate Australian Standard.

3 The opening must be wide enough to allow disposable materials to be dropped into the container by a single hand operation. Depending on the bulk of the disposable material for which the particular container is designed, the aperture should under normal conditions of use, inhibit removal of contents.

4 If retractable lids are incorporated, they should be designed so that material should never need to be pushed into the container by hand.

5 When upright, the container walls should be impermeable to fluids. In the case of cardboard containers, wax lining must be adequate enough to prevent seepage through the seams. If separate trays are used in the bottom of such containers they must be correctly positioned. Protection against seepage by means of a movable tray has the disadvantage that its position may be disturbed during transport and seepage (or needle penetration) could occur between it and the cardboard box.

6 Containers should be designed to minimise the possibility of the external surface being contaminated when disposing of a used item.

7 The container should be capable of being securely sealed during transport.

8 The container should not be readily penetrable by sharps.

9 The container should be easy to carry.

10 The colour of the container should be predominantly yellow, which is the accepted colour to denote infectious wastes.

Note: Cytotoxic wastes may be received in purple containers.

11 It should be clearly labelled with the words 'Danger - Contaminated Sharps - Destroy by Incineration' and should contain the biohazard symbol on the label. Room should be allowed on the label to note the source of the container.