

---

## **P051 – WASTE MANAGEMENT POLICY AND PROCEDURES**

---

### **Purpose and Scope**

The purpose of this policy and procedure is to ensure customers, District 360 staff and others are protected from harm as a result of exposure to waste, infectious or hazardous substances generated during the delivery of supports.

It applies to all staff and meets relevant legislation, regulations and Standards as set out in Schedule 1, Legislative References. It should be read in conjunction with District 360's *Work Health and Safety Policy and Procedure*.

### **Applicable NDIS Practice Standards**

#### **Management of Waste**

##### ***Outcome***

Each participant, each worker, and any other person in the home is protected from harm as a result of exposure to waste, infectious or hazardous substances generated during the delivery of supports.

##### ***Indicators***

- Policies, procedures and practices are in place for the safe and appropriate storage and disposal of waste, infectious or hazardous substances that comply with current legislation and local health district requirements.
- All incidents involving infectious material, body substances or hazardous substances are reported, recorded, investigated and reviewed.
- An emergency plan is in place to respond to clinical waste or hazardous substance management issues and/or accidents. Where the plan is implemented, its effectiveness is evaluated, and revisions are made if required.
- Workers involved in the management of waste and hazardous substances receive training to ensure safe and appropriate handling. This includes training on any protective equipment and clothing required when handling waste or hazardous substances.

### **Applicable Human Services Quality Standards**

- Standard 1: Governance and management
- Standard 6: Human resources



## Definitions

**Bulk** - free flowing liquids normally contained within a disposable vessel or tubing, not capable of being safely drained to the sewer.

**Chemical Waste** – waste generated by the use of chemicals in medical, veterinary and laboratory procedures. Chemical waste should be classified in accordance with the step-by-step waste classification process in the ADG Code.

**Clinical and related waste** - waste resulting from medical, nursing, dental, pharmaceutical, skin penetration or other related clinical activity, being waste that has the potential to cause injury, infection or offence. It includes:

- clinical waste;
- cytotoxic waste;
- pharmaceutical, drug or medicine waste; and
- sharps waste.

**Clinical waste** (including pathological waste) - waste that has the potential to cause sharps injury, infection or offence. Clinical waste includes waste from patients known or suspected of having a communicable disease, this includes coronavirus (COVID-19)

Items that have been soiled with blood or body fluids should also be treated as clinical waste.

Clinical waste Includes:

- sharps;
- human tissue (excluding hair, teeth and nails);
- bulk body fluids and blood;
- visibly blood-stained body fluids and disposable material and equipment;
- laboratory specimens and cultures; and
- animal tissues, carcasses or other waste arising from laboratory investigation or for medical or veterinary research.
- Soiled items due to communicable diseases (i.e. COVID-19)

**Cytotoxic waste** - material contaminated with residues or preparations containing materials toxic to cells, principally through action on cell reproduction. This includes any residual cytotoxic drug, and any discarded material associated with the preparation or administration of cytotoxic drugs.

**Generator of waste** – a person conducting work in a District 360 workplace, including customers' homes, where waste (for the purpose of this Policy and Procedure) is created.

**Hazardous waste** - waste arising from medical, nursing, dental, veterinary, pharmaceutical or similar practices, and wastes generated in clinical or other facilities resulting from the investigation or treatment of patients or research projects. Typical hazardous waste includes sharps, anatomical waste, clinical waste, chemically contaminated waste, infectious waste, human tissue, cytotoxic waste, pharmaceutical waste, animal waste, laboratory waste, chemical waste and radioactive waste (or items contaminated with this material such as paper towels, gloves, etc).

**Pharmaceutical waste** - pharmaceuticals or other chemical substances specified in the Poisons List. Pharmaceutical substances include expired or discarded pharmaceuticals, filters



or other materials contaminated by pharmaceutical products.

**Sharps** - any object capable of inflicting a penetrating injury, which may or may not be contaminated with blood and/or body substances. This includes needles and any other sharp objects or instruments designed to perform penetrating procedures.

## Policy

District 360 may generate waste that is unsafe to dispose of with general waste, as part of its delivery of NDIS supports. Appropriate waste disposal is important for infection control. Different types of waste have different waste management procedures that need to be followed.

When specific waste is appropriately handled and contained through safe work practices and the use of appropriate personal protective equipment (PPE), the risk of exposure to infection, chemical contamination, radiation exposure or other health and safety issues is minimised.

District 360's *Emergency Plan* includes responding to clinical waste or hazardous substance management issues and accidents.

Staff involved in the management of waste and hazardous substances are trained to ensure safe and appropriate handling. This includes training on any protective equipment and clothing required when handling waste or hazardous substances.

## Procedures

In the course of delivering its NDIS services, District 360 is likely to produce Pharmaceutical and Sharps Waste. Staff must ensure they dispose of waste as per the procedures described below. Any instances where they are not able to do so should be reported to the Director, and any waste incidents (e.g. exposure) should be reported immediately in accordance with District 360's *Incident Reporting Policies and Procedures*.

District 360 will develop and implement a Waste Management Plan relevant to the types of waste it is likely to generate. The Waste Management Plan must be developed in consultation with other co-located services such as pathology services, and will cover:

- who has overall responsibility for the plan as well as the functions/responsibilities within the plan;
- strategies for:
  - ensuring waste is disposed of safely - to prevent contact with people and minimise environmental risks
  - minimising waste;
  - training and waste management promotion;
  - work health and safety requirements;
  - auditing;
  - measuring waste management performance; and
  - incident management;
- procedures for segregating, collecting, transporting, storing and disposing of waste from various areas of the service;
- spills management;
- contract management, including contractor details, contact arrangements, auditing, safe operating and spill management procedures; and



- relevant insurances.

### **Minimum Requirements for Waste Disposal**

Disposal of any contaminated or hazardous waste generated by District 360 activities must:

- be disposed of in accordance with the legislative requirements for the type of waste;
- be conducted and implemented in consultation with relevant staff; and
- occur based on a risk management process that is used when planning and implementing hazardous waste disposal.

### **Disposal**

This Policy and Procedure covers disposal of Pharmaceutical and Sharps waste, given this is the waste most likely to be produced in the delivery of District 360's NDIS supports.

Should general waste be mixed or contaminated with any of the above listed waste it must be then treated as the contaminated or hazardous waste.

### ***Pharmaceutical Waste***

#### Disposal

Pharmaceutical waste must be disposed of safely and in a manner that is not harmful to the environment. Medication to be destroyed (i.e. out of date, no longer required or incorrectly dispensed) must be labelled and disposed of in an appropriate bag and returned to the local pharmacist for disposal under the Returned Unwanted Medicine program.

If the customer, their supporter or family is unable to return pharmaceutical waste, District 360's staff will dispose of it on their behalf. District 360 will provide staff with address and contact details of nearby pharmacies that are registered to accept unwanted medicines.

#### Labelling

Pharmaceutical waste packages/containers must be marked with the label PHARMACEUTICAL WASTE. No symbols or signage are required.

### ***Sharps Waste***

Sharps injuries are a common cause of getting infected by a blood-borne virus. The following basic requirements should apply if sharps are used or found:

- whoever uses the sharp, disposes of it;
- don't pass sharps by hand, use tongs;
- use disposable sharps;
- don't put a used needle back in its cover, put it in a sharps container;
- don't separate a needle from a syringe;
- don't break, burn or manipulate a sharp;
- don't clean re-usable sharps by hand, use a long-handled brush and tongs;
- don't put hands or fingers into garbage bags, laundry bags, crevices etc. where you suspect there are sharps – use tongs;
- don't manually compress garbage bags – use the tie-straps to lift and carry the bag; and
- ensure that any containers are kept out of reach of children.

### Disposal

Sharps must be disposed of in an approved sharps disposable container (yellow with biohazard symbol). Sharps containers that are resistant to impact, penetration and leakage, are stable, have integrity of the handles/other carrying features and closure device, and have a capacity indicator (fill line) marked on the outside wall of the container must be used. PPE must be worn at all times when handling sharps, including gloves and safety glasses.

Staff **MUST NOT** use drinks cans, bottles or cardboard boxes to dispose of sharps – they may find their way into domestic waste and present a hazard to council workers and the public.

Staff should never try to retrieve anything from a sharps container, or press down on the contents to make more room. Containers must be labelled and regularly emptied.

### Labelling

Sharps disposable containers must bear the Division 6.2 label:



and be marked with the label CLINICAL SHARPS.

Regular disposal of waste items with storage container will be arranged by management however it is the responsibility of all staff/volunteer to notify management if a storage container requires replacement sooner than scheduled disposal. Contracted waste disposal companies will remove waste and replace containers.

### **Clinical waste**

You must place your clinical waste into a dedicated yellow bag or a container or bin with a yellow lid and biohazard symbol.

When you prepare clinical waste for collection, follow these steps:

- Place the clinical waste directly into a ridged clinical waste bin or in a double-layered yellow plastic bag (i.e. double-bagging), and clearly label it as clinical waste.
- Double-layered plastic bags should be placed in a suitable container (e.g. wheelie bin or other rigid, leak-proof container).
- Ensure you tie-off the bags with knots facing upwards, and close bin lids.
- Bins should be almost full, or at least 50 per cent full, for collection. Do not compress the waste.
- Disinfect the lids, handles and top of the bins when you open, close and move them.
- After handling clinical waste wash your hands for at least 20 seconds, using soap and



water or use a hand sanitiser that contains at least 60 per cent alcohol.

Schedule the collection of your bins when they are almost completely full. This will help reduce the number of collections with small amounts of waste. Please note that some contractors will not collect on the weekends.

## **Chemical Waste**

### Disposal

When disposing of chemicals and containers that have contained hazardous chemicals:

- check the label for advice on disposal of chemicals or containers;
- triple rinse empty containers to remove all traces of the chemical; and
- uncap, puncture and/or crush all rinsed containers.

Ensure that appropriate PPE (e.g. gloves and safety glasses) are worn before handling or rinsing the empty containers.

### Labelling

Chemical waste packages/containers must be labelled with the product identifier (name) and the relevant hazard pictogram/symbol depending on the type of hazard classification (e.g. corrosive, flammable, toxic). It must also include the Australian name, address and contact details of the manufacturer.

Labelling requirements do not apply to household consumer products, however, if the original label is faded, worn or illegible, a replacement label/sticker must be applied so that the contents can be easily identified.

## **Internal Transport and Tracking**

District 360 must optimise the waste collection process, reduce handling and transportation, and promote safe work practices.

When removing waste, staff should avoid walking through food preparation and heavily used areas (e.g. kitchen) taking a direct route to the outside bin if possible. This further reduces the risk of contamination should an accident occur (e.g. slip/trip/fall).

## **Managing Spills**

District 360 must ensure that:

- its Waste Management Plan sets out procedures for waste spills;
- staff involved in spill management are trained in emergency procedures and handling requirements, including use of spill kits;
- spill kits are readily accessible and clearly labelled and mapped;
- it stocks PPE and emergency spill kits appropriate to the waste handled;
- spill kits are disposed of with the relevant waste; and
- spill kits are restocked with the necessary components immediately after use, returned to their locations and regularly inspected for malfunctioning or missing components.

## **Personal Protective Equipment**



District 360 will supply the necessary Personal Protective Equipment (PPE) for the types of waste that may be handled. Staff must use appropriate PPE when handling waste, including gloves, safety eyewear and in some cases, an apron.

## Reporting

Incidents relating to waste management and disposal should be reported in accordance with District 360's *Incident Management Policies and Procedures*.

Workers who sustain a needlestick injury or are exposed to blood and/or body fluids may need to be notified to the Regulator – refer District 360's *Workplace Incident Reporting Policy and Procedure* for further guidance.

## Other relevant policies and documents

Staff, especially managers and supervisors, are encouraged to read this policy in conjunction with other relevant District 360 policies and documents, including

- Incident and Hazard Report Form
- Risk Register
- "COVID-19 Response and Business Continuity Plan"
- Continuous Improvement Policy & Procedures
- Medication Management Policy and Procedure
- Incident Management Policy and Procedure (Participants)
- Workplace Health and Safety Policy
- Health and Safety Handbook

## Relevant legislation;

- The National Disability Insurance Scheme Act 2013 (NDIS Act)
- NDIS Practice Standards
- WA Disability Services Act 1993
- VIC Disability Amendment Act 2017

## More information

If you have a query about this policy or need more information, please contact the management team at [info@district360.com.au](mailto:info@district360.com.au)

## Review details

Approval Authority	Tanya Johnston
Responsible Officer	Coco Johnston
Approval Date	01 May 2021
Last updated Date	7 July 2023
Next Review Date*	7 July 2024



Last amended

Updated company logo

*\* Unless otherwise indicated, this procedure will still apply beyond the review date.*

Printed versions of this document are not controlled. Please refer to the D360 Policy Library for the latest version.