



Policy Name: <p style="text-align: center;">MANAGEMENT OF WASTE AND SHARPS</p>	Policy Number: <p style="text-align: center;">1723</p>
Approved By: <p style="text-align: center;">Executive Team</p>	Effective Date: <p style="text-align: center;">NOVEMBER 5, 2021</p>
Reason for Revision: Click on item below and select item from list. <p style="text-align: center;">CONTENT- Enter BELOW Reason for change Ex: Combined Policy ## and ##.</p> <p style="text-align: center;">New policy.</p>	Date Revised: <p style="text-align: center;">November 5, 2021</p> Next Date for Review: <p style="text-align: center;">November 5, 2021</p>
Section: <p style="text-align: center;">Section 17 - Infection Prevention and Control</p>	Page No: <p style="text-align: center;">Page 1 of 2</p>

Policy

OBJECTIVES

- To maintain the health and safety of Agape Hospice staff by the prevention and management of blood and body fluid exposures.
- To provide direction on the management of health care waste.

APPLICABILITY

Compliance with this document is required by all Agape Hospice employees, students, volunteers, and other persons acting on behalf of Agape Hospice (including contracted service providers as necessary).

POLICY ELEMENTS

1. Sharps

- Sharps such as needles and blades shall be disposed of by the health care provider in an accessible, appropriate sharps container at point of use.
- Reusable medical devices that are sharp or have components shall be segregated to protect staff from injury.
- Staff shall use the Point of Care Risk Assessment (PCRA) for the prevention of exposure to blood and body fluids.
- Glass and fragile objects shall be handled with care.
- Staff should never reach blindly into an instrument set, soiled bin or transport container.
- Staff shall wear PPE appropriate to the PCRA.
- Biomedical waste shall be handled using appropriate PPE as identified by a Point of Care Risk Assessment (PCRA).
- Staff shall report all blood and body fluids exposure to a supervisor and follow the Agape Hospice Policy 0155 Exposed to Blood & Body Fluids.



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- Sharps containers will be closed and sealed when they are $\frac{3}{4}$ of the way full, and packaged for pick up in the soiled utility room, by the RN's and RA's.

2. General Waste

General waste from healthcare settings is no more hazardous than general household waste. General waste does not require special disposal methods. Examples of general waste in healthcare settings include cotton balls, gauze, dressings, gloves, disposable gowns, tissues, disposable needle-guided tubes, alcohol wipes, Band-Aids, etc.

- Handle waste as little as possible.
- Dispose of waste in containers with a plastic bag.
- Double bag only if the integrity of the bag is compromised or the outside is visibly soiled.
- Empty when $\frac{3}{4}$ full.
- Waste bags will be brought to the soiled utility room. Bags will not be dragged along the ground.

3. Biomedical waste

Biomedical waste can be classified as one of the following:

- **Contaminated sharps** – needles, lancets, staple removers, cord clamps, syringes, blades and other glass that has come in contact with blood, body fluids or microorganisms. It does not include unused drug vials and ampoules.
- **Human blood or body fluids** – fluid blood and blood products. It does not include saliva, urine, feces, vomit or tears (these are considered general waste).
- **Cytotoxic material**
- **Human anatomical waste** – human tissue, organs and body parts. It does not include teeth, hair and nails (these are considered general waste).
- **Biomedical waste** - that is not sharps, will be double bagged and put into the red hazardous waste bucket in the soiled utility room.

REFERENCES

AHS Provincial Medical Device Reprocessing Working Group Standard Operating Procedure
AHS Waste and Sharps Handling in Community-based Services