

### POLICY APPLIES TO:

- All Mercy Staff.
- Compliance with this policy for Credentialed Specialists, Contractors and visitors will be facilitated by Mercy staff.

### RELATED STANDARDS:

- Equip Standard 3.2.3 Waste and Environment Management
- Management of Healthcare Waste NZS 4304:2002
- Health & Disability Sector Standards NZS 8134.1:2008 (Standard 4.1)

### RATIONALE:

All waste shall be handled in such a manner that it does not cause harm, injury or cause offence to people, to community cultural values or to the environment. Waste that fits into more than one category shall be classified according to the highest risk.

### DEFINITIONS:

**Controlled Waste:** Healthcare waste that is recognizable as coming from a healthcare facility which, may be contaminated or soiled with potentially infectious human body fluids which will not be expressible under compaction: Is not infectious but may be considered culturally or aesthetically offensive.

**Non Expressible waste:** Waste containing liquid which will not leak under compaction

**Expressible Waste:** Waste containing liquid which has potential to leak under compaction

**Hazardous Waste:** Waste exhibiting characteristics posing a threat or risk to public health, safety or the environment.

**Clinical Hazardous Waste:** Any waste which consists wholly or partly of human or animal tissue, blood or other bodily fluids, drugs or other pharmaceutical products, swabs or dressings, syringes, needles or other sharp instruments, being waste which unless rendered safe may prove hazardous to any person coming into contact with it.

**Sharps waste:** Objects or devices having sharp points or cutting edges capable of causing injury or puncturing containers

**Cytotoxic Waste:** Items contaminated or potentially contaminated with a cytotoxic drug.

**Infectious Waste:** Items capable of causing infectious disease; items contaminated with blood, saliva, or other body substances, or those actually or potentially infected with pathogenic material this includes waste from an isolation room.

**Radioactive waste:** Items contaminated or potentially contaminated with radioactive substances.

**Body parts waste:** is any human tissue, bone and/or organs.

**General Waste:** items or recyclable waste that poses no threat or risk to public health, safety or the environment and is deemed disposable without controls, to either landfill or to the sewer.

**Kitchen Waste:** Green waste, food scraps etc.

**Recyclable:** Any product or package that can be collected and processed for re-use.

**PVC Waste:** Any IV fluid bags, oxygen masks and tubing, and suction tubing for recycling.

**Confidential Paper Waste:** Any patient information or commercially sensitive papers is placed into locked blue document destruction bins until collection by external contractors.

**PPE:** Personal Protective Equipment.

**Sanitary landfill:** a landfill that provides for methods of disposing of waste on land in a manner that protects the environment.

**Waste Segregation:** Separation of waste streams.

**ACD:** Asbestos Contaminated Dust.

### OBJECTIVES:

- Minimise risk
- Minimise waste
- Maximise recycling
- Ensure handling of waste is based on best practice principles
- Ensure staff are aware of and compliant with waste management policy and processes.

### IMPLEMENTATION:

All staff shall be trained in waste management as part of their orientation and will receive waste education updates (as per mandatory training and update schedule).

Front of House Team Leader is the appointed Waste Officer. This role provides oversight of the waste management system: include all staff education covering cytotoxic waste for the appropriate staff, waste analysis, reporting and benchmarking.

Nominated housekeeping members of staff shall undergo bi annual 'stationary compactor operator competency assessments' by the compactor contractor confirming them as authorised trainers to Mercy Hospital staff.

All Housekeeping staff with the specific responsibility for use of the compactor for disposal of waste shall receive education by the authorised trainers.

The Waste Officer will arrange visits to waste disposal sites for Housekeeping staff who transport waste on site and shall produce an annual waste report which will be presented to the Infection Prevention and Control Committee and Quality & Risk committee. The annual report will be disseminated to staff in newsletters and service area waste education updates.

The report will include:

- Cost analysis of each stream
- Waste incidents, type and number
- Changes of practice
- Audits reports: segregation, contractor and internal
- Education and promotion

### EVALUATION

- Incident reports
- Patient feedback
- Staff feedback
- Staff training records
- Audit reports

## ASSOCIATED DOCUMENTS

### EXTERNAL

- Risk Management Principles and Guidelines AS/NZS ISO 31000:2009
- Non-therapeutic use of human tissue, New Zealand Standard DZ 8135/2009
- Resource Management Act 1991- reprint 2021
- Cytotoxic drugs – keeping workers safe Nov 2020 Worksafe

### INTERNAL

- Mercy Hospital Orientation quiz
- Standard Precautions Policy
- Hand Hygiene Policy
- MDRO Policy
- Blood and Body Fluid Exposure and Management Policy
- Emergency Management Plan
- Radiation Policy
- Cytotoxic Safe Handling Disposal and Storage
- Return or Disposal of Body Parts / Human Tissue
- Waste Disposal Responsibilities and Procedures, Housekeeping Work Manual
- Tikaka Best Practice Guidelines for Mercy Hospital,
- Mercy Hospital Food Safety Programme
- Incident Policy
- Global Waste Management Audit, F:\Mercy Shared\Audits\Global Audits\Global Audit Tools
- Asbestos Management plan

## Appendices

Appendix 1: Waste Categories & General Information

Appendix 2: Controlled Waste; Storage, Transport and Disposal

Appendix 3: Hazardous Waste; Storage, Transport and Disposal

Appendix 4: General Waste; Storage, Transport and Disposal

Appendix 5: Hazardous Waste Spillage Procedures