



<b>Section</b>	<u>Psychiatric Health Facility (PHF)</u> <u>Psychiatric Health Facility (PHF)</u>	<b>Effective:</b> 06/2007
<b>Sub-section</b>	<u>Infection Prevention</u> <u>Infection Control</u>	<b>Version:</b> 2.0
<b>Policy</b>	<u>Medical Waste Management – Biohazardous and Sharps Waste</u> <u>Medical Waste Management – Biohazardous and Sharps Waste</u>	<b>Last Revised:</b> DRAFT
<b>Director's Approval</b>	_____	<b>Date</b> _____
	Alice Gleghorn, PhD	
<b>PHF Medical Director's Approval</b>	_____	<b>Date</b> _____
	Ole Behrendtsen, MD	
<b>Supersedes</b>	Medical Waste Management - Biohazardous and Sharps Waste rev. 05/24/17	<b>Audit Date:</b> DRAFT
<b>Approvals:</b>	PHF MPC Approval Date: _____	PGB Approval Date: _____

## 1. PURPOSE/SCOPE

- 1.1. To protect all persons at the Santa Barbara County Psychiatric Health Facility (hereafter the "PHF") from contact with items classified as biohazardous medical waste and to comply with applicable governmental laws and regulations. establish procedures on how to properly handle biohazardous waste and sharps waste in accordance with the Medical Waste Management Act of California and the California Occupational Safety and Health Administration (OSHA) Bloodborne Pathogen Standard.

## 2. DEFINITIONS

- 2.1 **Biohazardous Waste** – The bloodborne pathogens standard defines regulated waste as liquid or semi-liquid blood or other potentially infectious material (OPIM); contaminated items that would release blood or OPIM in a liquid or semi-liquid state if compressed; items that are caked with dried blood or OPIM and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or OPIM [29 CFR 1910.1030(b)]. (OSHA.) This also includes laboratory specimens as well as waste that contains recognizable fluid blood, fluid blood products, containers or equipment containing fluid blood, such as wasted vaccines. items saturated with blood such that the item drips blood when compressed. Blood liquid (drips) or semi-liquid state.

- 2.2 **Sharps Waste** – any device having acute rigid corners, edges or protruberances capable of cutting or piercing that are contaminated by Bbiohazardous Wwaste. Examples of these include needles, syringes, blades, lancets, and broken glass items (such as blood vials).
- 2.3 **Sharps Container** – a rigid and ,puncture-resistant, container with the Biohazard symbol that is used in patient care or research activities. The container meets the standards of, and receives approval from, the United States Food and Drug Administration (FDA) as a medical device used for the collection of discarded medical needles or other sharps. leak-proof red container labeled with the international biohazard symbol. Sharps containers shall not be lined with a plastic bag or inner liner.
- 2.4 **Safety Engineered Sharp Medical Device** – a –A non-needle sharp or a needle device with a built-in safety feature or mechanism that effectively reduces the risk of exposure used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of exposurean exposure incident.” (OSHA Bloodborne pathogens standard 1910.1030(b)).
- 2.5 **Biohazardous Waste Bag** – a disposable film bag, used to contain medical waste, that is certified to American Society for Testing Materials (“ASTM”) D1709 and ASTM D1922 standards. The Biohazardous Waste Bag will be red or have a Biohazard symbol. When the bag is prepared for transport offsite, it must be placed into a US Department of Transportation (USDOT) approved container that is lined with another Biohazardous Waste Bag.
- 2.6 **Biohazardous Waste Container** – a rigid, leak resistant container with tight fitting covers that is labeled with the words “Biohazardous Waste” or the international biohazard symbol and the word “BIOHAZARD” on the lid and sides so as to be visible from any lateral direction. Biohazardous Waste Containers shall comply with the USDOT requirements when prepared for transport offsite from the facility.bags are red, impervious to moisture and have sufficient strength that bursting, leaking or ripping does not occur. Said bags are labeled “Biohazardous” and have the international biohazard symbol on them.

### 3. **POLICY**

- 3.1. Biohazardous and Sharps Waste shall be handled using will be managed according to regulations and using in accordance with the PHF’s Standard Precautions policy –to ensure the safety of staff and patients at the PHF. Medical bBiohazardous and Sharps wWaste shall be handled using standard precautions to in such a way that persons handling and disposing of them are protect usersed from potential exposures. accordance with applicable local and state regulations.

### 4. **PROCEDURE**

- 4.1. Biohazardous Waste is to be contained separately from other waste at the point of origin.

1. Biohazardous Waste being held for shipment offsite for treatment is to be packaged accordingly, including labels on the lid and sides of the container.

#### 4.2. Sharps Waste:

##### 1. PHF staff will:

- a. Place all Sharps Waste into a Sharps Container.
- b. Lock, tape closed, or tightly seal lid when Sharps Container is ¾ full.
- c. Store Sharps Containers ready for disposal for no longer than 30 days unless given written approval of the Southern California regional branch of the California Department of Public Health.
- d. Label Sharps Containers with the words “Sharps Waste” or with the international biohazard symbol and the word “BIOHAZARD.”
- e. Ship the Sharps Container to the contracted medical waste vendor within 30 days of the Sharps Container being ready for disposal.

##### 1.2. Psychiatric Health Facility (PHF) PHF staff will utilize ~~SSafety-Engineered Ssharp Mmedical Ddevices~~ Sharps safety devices whenever available, in the following way:

- a. Activate all safety devices immediately after use;
- b. Never recap the safety device unless such action is required for specific medical use. —If required, recapping is carried out through the one-handed scoop technique;
- c. Place uncapped needles and syringes into a puncture resistant Sharps Container marked with biohazard symbol, and;

##### 2. The Sharps Container will be placed in a secondary container if leakage is possible. Lock and replace the Sharps Container when it's ¾ full; and

##### d.

Ship the Sharps Container to the contracted medical waste vendor.

PHF staff will inspect new Sharps safety devices and evaluate them. Monitoring for new and/or improved safety engineered sharp medical devices will be routinely conducted. User opinions are sought before decisions are made to change devices.

Immediately following use, the safety feature of the syringe is activated.

The syringe (and needle) will be placed in the red sharps container marked with a biohazard sign.

Sharps containers that are filled to the fill line or close to the fill line will be closed and replaced immediately.

Sharps containers will be packaged according to the contracted vendor's instructions and placed in the front office.

##### 3. ~~Biohazardous Waste:~~ Biohazardous Waste:

#### 4.3.

1. Tie used Biohazardous Waste Bags in a single knot technique to prevent leakage;
2. If the outside of the Biohazardous Waste Bag becomes contaminated, place in another Biohazardous Waste Bag;
3. Place the used Biohazardous Waste Bags in a Biohazardous Waste container;

4. Place the container in a shipping box and package according to the contracted vendor's instructions;
5. Ship the box to the medical waste vendor as soon as possible and within 30 days of generation of the Biohazardous Waste.

4.4. In the event of a Biohazardous Waste spill, PHF staff will:

1. First establish that everyone is safe and clear the area.
- 1.2. Follow procedures in the *Standard Precautions* policy;
- 2.3. Attempt to contain the spill;
- 3.4. Obtain/Find the spill kit;
- 4.5. Manage the Contain-regulated-Biohazardous Waste spill using the spill kit instructions; in the Biohazard Waste Bag in the "Spill Kit Recovery System" provided by the contracted medical waste vendor.
6. used/Biohazardous Waste Bag/B;used Biohazardous Waste Bagswaste ;;; andClean and disinfect the affected area.

Healthcare linen with Biohazardous Waste:Healthcare linen with Biohazardous Waste:

4.5.

1. Healthcare linen with vomitus, stool, or blood should be handled using Standard Precautions. It will be placed in a Biohazardous Waste Bbag at the location where it was used, tied at the top with one knot and placed in the cart with soiled linen.
5. Contain regulated medical waste in the Biohazard Waste Bag in the "Spill Kit Recovery System" provided by the contracted medical waste vendor.
  - a. Find the spill kit in the exam room.
  - b. Tie bags in a single knot technique to prevent leakage.
  - c. If the outside of the bag becomes contaminated, place in another biohazard bag.
6. Biohazardous waste will be placed in the red biohazard waste bag contained in the "Spill Kit Recovery System" container provided by the contracted vendor. The biohazardous bag and the container are located in the examination room.
7. The biohazardous waste bag is placed in the rigid, biohazardous waste container and packaged according to the contracted vendor's instructions for shipping to the vendor and placed in the front office.
1. A new biohazardous waste container is placed in the designated cupboard in the examination room.

4. Linen with biohazardous waste

5.

A. Per request of linen processor, linen with vomitus, stool or blood should be placed in a biohazard bag, tied at the top with one knot and placed in the cart with soiled linen.

## ASSISTANCE

Infection Preventionist

## REFERENCE

Association for Professionals in Infection Control & [Epidemiology](#) [Epidemiology](#) Text (4<sup>th</sup> ed), 2015.

California Medical Waste Management Act: CA Health and Safety Code Sections 117600-118360 (2007)

California Code of Regulations

*Title 8 Section 5193*

Code of Federal Regulations

Title 29 Section 1910.1030 - Occupational Health and Safety Bloodborne Pathogen Standard 1910.1030

[29 CFR 1910.1030(b)]. (OSHA)

(OSHA Bloodborne pathogens standard 1910.1030[b]);

29 CFR 1910.1030(g)(1)(i).

## ATTACHMENTS

Behavioral Wellness PHF Waste Management Grid

## RELATED POLICIES

Standard Precautions

Bloodborne Pathogens Exposure Control Plan

PHF Sharps Injury Log

**REVISION RECORD**

DATE	VERSION	REVISION DESCRIPTION
DRAFT	2.0	Updated definitions and current procedures. Deleted procedures from 4.1 regarding Medical Waste.

***Culturally and Linguistically Competent Policies***

*The Department of Behavioral Wellness is committed to the tenets of cultural competency and understands that culturally and linguistically appropriate services are respectful of and responsive to the health beliefs, practices and needs of diverse individuals. All policies and procedures are intended to reflect the integration of diversity and cultural literacy throughout the Department. To the fullest extent possible, information, services and treatments will be provided (in verbal and/or written form) in the individual’s preferred language or mode of communication (i.e. assistive devices for blind/deaf).*

DRAFT