

Policy Title:	Waste Management		
Applies To:	All Team Members		
Approved:	Effective:	Next Review:	
Oct. 13, 2020	Nov. 16, 2020	Oct. 13, 2024	
Sponsor:	Senior Director, Facilities Management & Support		
Issuing Authority:	VP, Corporate Services and Chief Financial Officer Executive Leadership Team		
Number: ENV-WS-001	Manual: E	nvironmental Services	

TABLE OF CONTENTS

DEFINITIONS	2
PRINCIPLES AND VALUES	4
POLICY STATEMENTS	4
Sorting and Storing Waste Streams	4
Transporting Waste	5
Reporting Incidents	5
Specific Waste Streams	5
ROLES AND RESPONSIBILITIES	6
REFERENCES	7
Legislative	7
Other	7
RELATED DOCUMENTS	8
Documents	8
Policies	8
District Health Authority Policies Being Replaced	9
Version History	9

DEFINITIONS

Dermanions			
Anatomical Waste	Biohazardous Waste consisting of:		
	• Tissues,		
	• Organs, or		
	$\circ~$ Body parts other than teeth, hair, or nails.		
Biohazardous Waste	Also referred to as biomedical waste. Contaminated, infectious waste that requires treatment prior to disposal. This includes:		
	• Human Anatomical Waste;		
	 Human and animal cultures or specimens (excluding urine and feces); 		
	• Human liquid blood and blood products;		
	 Items contaminated with blood or blood products that would release liquid or semi-liquid blood if compressed; 		
	\circ Body fluids visibly contaminated with blood;		
	 Bodily fluids removed in the course of surgery, treatment, or for diagnosis (excluding urine and feces); 		
	$\circ~$ Sharps that have come into contact with blood or body fluids;		
	• Cytotoxic Waste;		
	 Radioactive Waste; 		
	 Laboratory Containment Level 2 Zone Waste; 		
	\circ Live or attenuated vaccines.		
Clean Zones	An area specifically designated for non-contaminated (sterile or disinfected) items.		
Confidential Waste	Paper materials that include patient, Team Member, and/or sensitive organizational information.		
Containment Level 2 (CL2) Zones	A laboratory space that meets the physical containment and operational practices required to work with risk group 2 (RG2) pathogens. Risk group 2 pathogens pose a moderate risk to the health of individuals or animals, and a low risk to public health and the animal population. These pathogens are able to cause serious disease in a human or animal but are unlikely to do so. Effective treatment and preventive measures are available and the risk of spread of diseases caused by these pathogens is low. Examples of RG2 human pathogens include E. coli, Salmonella, Measles virus, and Norovirus. These laboratories hold a Pathogen and Toxin		

ENV-W3-001 Waste Manag	ruge 5 0 9		
	License issued by the Public Health Agency of Canada under the <u>Human Pathogens and Toxins Act</u> .		
Cytotoxic Drug	An agent that possesses a destructive action on cells, which may be genotoxic, oncogenic, mutagenic, teratogenic, or other hazardous mechanisms. This term typically denotes cancer chemotherapy drugs.		
Cytotoxic Waste	Biohazardous Waste comprised of items that have come in contact with a Cytotoxic Drug. Includes, but is not limited to, the following:		
	\circ leftover or unused cytotoxic drugs and tubing		
	• tissues		
	• needles		
	• gloves		
	 patient bodily fluids and excreta 		
General Waste/ Regular Mixed	Waste that does not fall into any of the following categories:		
	 Confidential Waste, 		
Waste (RMW)	 Recyclable Waste, 		
	• Organic Waste,		
	• Biohazardous Waste.		
Nova Scotia Health Team Member	Unless specifically limited by a certain policy, refers to all employees, physicians, learners, volunteers, board members, contractors, contract workers, franchise employees, and those with affiliated appointments and other individuals performing activities within Nova Scotia Health.		
Organic Waste	Material that is biodegradable and comes from either a plant or animal (e.g., food waste).		
Patient Care Units	Designated departmental spaces that provide patients/clients/residents treatment in a health care setting.		
Pharmaceutical Waste	Biohazardous Waste containing pharmaceutical substances and includes:		
	• Expired, unused and contaminated medications;		
	 Opened multi-dose vials, creams, ointments, inhalers, and patches; 		
	 Opened bottles of liquids; 		
	 Opened unit-dose packages (i.e., when a partial tablet is to be administered, and the remainder is discarded). 		
Public Areas	A place that is generally open and accessible to people.		
	I. Construction of the second s		

This is a CONTROLLED document for internal use only. Any documents appearing in paper form are not controlled and should be checked against the electronic file version prior to use.

Radioactive Waste	Hazardous waste that contains nuclear substances with a dose rate above background levels.	
Recyclable Waste	Items that can be treated or processed so as to make suitable for reuse.	
Sharps	Includes but is not limited to injection needles, lancets, intravascular needles, catheters, cannulae, suture needles, trocars, scalpel blades, and glass.	
Waste Management Vendor		

PRINCIPLES AND VALUES

Health and Safety: Implementing and maintaining best practices for infection prevention and control and occupational health and safety helps to protect Nova Scotia Health Team Members and the public from needle-stick injuries, exposure to blood-borne pathogens, and materials that have the potential to cause harm.

Health, Safety, and Accountability: Investigative processes are used to discover the root cause of any injury to ensure that adequate controls are in place for prevention of further injury.

Environmental Sustainability and Fiscal Responsibility: Reducing the amount of waste generated, and incorporating the "3R" philosophy — reduce, reuse, recycle — promotes environmental sustainability and responsible financial stewardship.

POLICY STATEMENTS

1. Nova Scotia Health must comply with all municipal, provincial, and federal regulations related to waste management.

Sorting and Storing Waste Streams

- 1. All waste, defined herein, must be properly separated into the appropriate stream at the point of care/use:
 - Regular Mixed Waste
 - Confidential Waste
 - Recyclable Waste, e.g., paper (non-confidential), cardboard, refundable, plastics, etc.
 - Organic Waste
 - Biohazardous Waste, e.g., Sharps, non-anatomical, Anatomical, Cytotoxic, Pharmaceutical, and hazardous waste (chemical, Radioactive)
- 2. Waste must not be mixed (e.g., regular waste must not be mixed with Biohazardous Waste, confidential waste must not be mixed with recyclables, etc.).

ENV-WS-001 Waste Management

- 3. Waste must be stored in appropriate containers at the point of care/use and stored in a designated room (e.g., soiled holding/utility room).
- 4. Collected waste must be stored in a designated waste holding room with access limited to authorized Nova Scotia Health Team Members.

Transporting Waste

- 1. All waste must be transported in a way that prevents content spills, leakage, and route diversion.
 - 1.1. Waste transportation routes must be clearly defined within facilities.
 - 1.2. Waste must be transported in leak-proof carts that are cleaned on a regular basis.
 - 1.3. Transport routes must be selected to reduce the spread of infection and minimize the manual handling of the Waste.
 - 1.3.1. Where possible, designated routes do not include Clean Zones, Public Areas, or Patient Care Units.
 - 1.4. Waste must not be transported on elevators at the same time as patients and/or clean/sterile instruments, supplies, and linen.

Reporting Incidents

- 1. All safety incidents related to any handling of Waste must be reported using the appropriate local reporting tool (<u>SIMS</u> and/or <u>SAFEline</u>).
 - 1.1. Incident reports are investigated by the applicable Department/Program Manager and reviewed by Occupational Health Safety & Wellness.

Specific Waste Streams

Confidential Waste

1. The privacy of all patient, employee, and sensitive organizational information must be maintained through the appropriate disposal of Confidential Waste in a clearly labeled container that is secure from patient/public view.

Recyclable Waste

- 1. Waste must be recycled where possible and fiscally feasible.
 - 1.1. Nova Scotia Health investigates opportunities for environmental stewardship.

Organic Waste

1. Organic Waste must be composted where possible.

Biohazardous Waste, including waste from Containment Level 2 Zones:

- 1. Biohazardous Waste must be:
 - 1.1. Managed in accordance with the <u>Canadian Council of Ministers of the Environment</u> (CCME) Guidelines for the Management of Biomedical Waste in Canada, as feasible.

This is a CONTROLLED document for internal use only. Any documents appearing in paper form are not controlled and should be checked against the electronic file version prior to use.

- 1.2. Segregated according to categories for proper disposal
- 1.3. Handled and disposed of in a way that avoids transmission of potential infections.
- 2. Nova Scotia Health collaborates on strategies for the appropriate disposal of Biohazardous Waste with the assigned Waste Management Vendor.
- 3. Refrigerated space (at or below four degrees Celsius) must be provided for storage of all Biohazardous and Anatomical Waste if stored for more than four days.

EXCEPTION: Radiation Waste.

Refer to the <u>Radiation Safety Manual Part 1: General</u>

3.1. Nova Scotia Health must have a contingency plan for dealing with the storage of refrigerated waste in the event of excess waste production, malfunctioning equipment, or other disruptions of disposal services.

ROLES AND RESPONSIBILITIES

All Nova Scotia Health Team Members

- Minimize, sort, and dispose of their own Waste according to local recycling guidelines.
- Ensure confidential waste is disposed of properly.
- Adhere to the following best practice as applicable to their role:
 - <u>Best Practices for Environmental Cleaning for Prevention and Control of Infections in</u> <u>All Health Care Settings, 3rd Edition</u>

Managers

- Ensure all Nova Scotia Health Team Members receive education and training in Waste segregation and safe handling procedures (as applicable to role).
- Ensure all Nova Scotia Health Team Members receive education and training in the use of Personal Protective Equipment (as applicable to role).
- Investigate and follow up on safety incidents related to the handling of waste.
- Investigate and follow up on Privacy incidents related to the improper storage or disposal of confidential waste.

Facilities Support Services (FSS)

- Oversee all Waste management, including:
 - All processes involving collection, handling, storage, transportation, and disposal by a contract company.
 - The implementation of procedures/plans for:
 - □ Spill response.
 - □ Monitoring and measuring compliance.

- □ Storage of Biomedical Waste due to the disruption of service.
- Complete training in the following areas (as applicable to role):
 - Safe handling, collection, storage, and transportation for all waste streams.
 - Containment Level 2 Zone Biosafety Training (as per Human Pathogens and Toxins Act (HPTA) legislation).
 - Risks associated with handling, collection, storage, and transportation of Biohazardous Waste.
- Maintain current immunizations as applicable to role.

Waste Management Vendor

• Must have applicable Transportation of Dangerous Goods certification.

REFERENCES

Legislative

- Human Pathogens and Toxins Act, Statutes of Canada (2009, c. 24). Retrieved from the Justice Laws website <u>http://laws.justice.gc.ca/eng/acts/H-5.67/page-1.html</u>
- Regulations Amending the Transportation of Dangerous Goods Regulations (Emergency Response Assistance Plan). (2019/SOR-101). *Canada Gazette Part II*, 153(9). Retrieved from the Canada Gazette website <u>http://gazette.gc.ca/rp-pr/p2/2019/2019-05-</u> 01/html/sor-dors101-eng.html

Other

- Accreditation Canada. (2017). Infection prevention and control standards (Ver. 14). Ottawa, ON.
- Austin, K. (2020). *Health services assistance: Supporting nursing in acute care* (2nd ed.). South Melbourne, Australia: Cengage Learning.
- Canadian Council of Ministers of the Environment. (1992). *Guidelines for the management of biomedical waste in Canada*. Retrieved from <u>https://www.ccme.ca/files/Resources/waste/hazardous/pn_1060_e.pdf</u>
- Easty, A. C., Coakley, N., Cheng, R., Cividino, M., Savage, P., Tozer, R., & White, R. E. (2015). Safe handling of cytotoxics: Guideline recommendations. *Current oncology, 22*(1), e27-e37. <u>https://doi.org/10.3747/co.21.2151</u>
- Health Canada. (2015). *Canadian biosafety standards*, 2nd edition. (Standard No. 3.7.11). Retrieved from <u>https://www.canada.ca/en/public-health/services/canadian-biosafety-standards-guidelines/second-edition.html</u>
- Public Health Ontario: Provincial Infectious Diseases Advisory Committee. (2018)._Best practices for environmental cleaning for prevention and control of infections in all health care settings (3rd ed.). Retrieved from <u>https://www.publichealthontario.ca/-</u> /media/documents/B/2018/bp-environmental-cleaning.pdf?la=en

This is a CONTROLLED document for internal use only. Any documents appearing in paper form are not controlled and should be checked against the electronic file version prior to use.

RELATED DOCUMENTS

Documents

Radiation Safety Manual Part 1: General

Policies

NSHA ENV-CD-001 Cleaning & Disinfecting the Physical Environment

NSHA-AD-OHS-005 Sharps Safety

NSHA AD-AO-030 Privacy and Confidentiality of Personal Health Information

Relevant local policies on the safe handling of cytotoxic materials

* * *

DISTRICT HEALTH AUTHORITY POLICIES BEING REPLACED

NSHA ENV-WS-015 Waste Collection, Handling, Storage, Transportation & Disposal

CDHA CH 20-016 Recycled and General Waste Management

CDHA CH 20-015 Confidential Waste Management

CDHA CH 20-017 Biomedical Waste Management

PCHA - Management of Biomedical Waste

GASHA 9-110 - Preparation, Handling & Disposal of Infectious/ Hazardous Waste

SSH-ES-160-103 Waste Management Policy

CBDHA 11-240 - Waste Collection, Handling, Storage, Transportation & Disposal

VERSION HISTORY

Version:	Effective:	Approved by:	What's changed:
Original	2020-11-16	VP, Corporate Services and Chief Financial Officer ELT	N/A