

SAHTU HEALTH & SOCIAL SERVICES AUTHORITY

Policy

COMMUNITY HEALTH CENTER POLICY

SHSSA's Handling of Equipment, Devices and Contaminated Materials

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Policy:

With respect to the handling of contaminated equipment, devices and contaminated materials, the SHSSA and its staff are responsible for implementing and communicating the *Hospital and Health Care Facility Standards Regulations, NWT Safety Act and General Safety Regulations, NWT guidelines for the Management of Biomedical Waste in the Northwest Territories (NWT), the Chief Medical Health Officer's Clinical Practice Guidelines, and Accreditation Canada's Standards on Infection Prevention and Control.*

Purpose:

- 1) SHSSA has a duty to provide a safe and suitable environment for its clients/patients and staff.
- 2) Appropriate handling of contaminated and infectious materials minimizes the risk of exposure and infection.
- 3) Workers handling and disposing of biomedical waste are at a potential risk of exposure to infection from sharp-related accidents, or when containers of waste burst open and leak, or spills of certain waste materials occur.

Procedure:

- 1) Used equipment is considered contaminated and potentially infectious, and is therefore transported appropriately to a designated decontamination or disposal area.
- 2) Staff and contracted services wear the appropriate Personal Protective Equipment (PPE) when handling contaminated materials and equipment. Examples of these include, but are not limited to gloves, goggles, gowns, cover garments, masks, and footwear as per *Canadian Standard Association (CSA), Standard Z314.3-01, clause 5.4.2 and Z314.8*
- 3) All staff follows specific procedures to handle, clean and disinfect mobile equipment.
- 4) Workplace Hazardous Materials Information System (WHMIS) makes it mandatory that all hazardous substances be labeled in specific manner and that a Material Safety Data Sheet (MSDS) be available to accompany each hazardous substance. Currently, the requirements of WHMIS do not apply to waste materials.
- 5) All such acts require the SHSSA and its contracted services to provide information, instruction and supervision to workers to protect their health and

safety, and take every reasonable precaution in the circumstances to protect the worker.

- 6) SHSSA and its contracted services must provide all training necessary to work with hazardous substances and must keep written record of their employee education program.
- 7) SHSSA workers handling and disposing of biomedical waste should participate in the preparation of related policies and procedures.
- 8) SHSSA safety program should include a regular assessment of waste management procedures, to ensure compliance with all applicable legislation and standards (federal, territorial, municipal Accreditation Canada, and CSA).
- 9) SHSSA are responsible for providing the appropriate PPE and hand-hygiene facilities involved in the various stages of waste handling and disposal.
- 10) SHSSA must report all adverse or sentinel events and near misses electronically using Risk Monitor Pro, as soon as possible, within 24 hours.
- 11) Workers Safety Compensation Commission (WSCC) Employer/Employee forms must be completed within required time frame.
- 12) These adverse or sentinel events and near misses must be followed up in order to make system and process improvements, minimize risk and to prevent similar incidents from occurring again.
- 13) SHSSA must review the type and quality of waste containers used and if necessary have them upgraded to containers considered to be more suitable.
- 14) SHSSA must consult with the employees on a regular and ongoing basis with respect to any appropriate handling techniques.
- 15) SHSSA must invite employees and the Manager, Quality and Risk Management to participate in the development of system and process improvements.
- 16) Waste handlers should always be appropriately clothed and wear personal protective equipment so that harmful agents, whether physical, chemical, or infectious, are prevented from gaining access to open wounds, cuts, or absorption through the skin. PPE may include safety goggles, gloves, gowns, masks, and protective footwear.
- 17) SHSSA Employee training programs must emphasize the following:
 - a) Personal hygiene, especially hand washing/hygiene.
 - b) SHSSA's procedures for the reduction, segregation, collection, packaging, color-coding, labeling, storage, and in-house movement of waste.
 - c) Methods for preventing the transmission of infections related to hand-hygiene procedures.
 - d) The hazards of those materials to which workers may be exposed.
 - e) Actions to be taken, and which supervisory staff should be notified in the event of an accident.

1) Immunization

- a) SHSSA is responsible for offering a course of Hepatitis B (HBV) vaccine to all employees responsible for handling and disposing of biomedical waste, who are at risk of exposure to human blood, blood products or body secretions.

- b) These same employees should also be up-to-date on their tetanus, diphtheria, and polio immunization. Ten (10) year boosters for tetanus and diphtheria are recommended by the *Public Health Agency of Canada/Canadian Immunization Guide, Seventh Edition, 2006*.

2) Special Precautions for Sharps

(Waste sharps are clinical and laboratory materials consisting of needles, syringes, blades, or laboratory glass capable of causing punctures or cuts. Microbiology Laboratory Waste consists of laboratory cultures, stocks or specimens of microorganisms, live or attenuated vaccines, and laboratory material that has come into contact with any of these)

- a) Sharps must be contained in puncture-resistant containers, and the container must not be filled more than $\frac{3}{4}$ full of their usable volume, in order to prevent injuries from overfilling.
- b) Sharps should never be forcibly pushed into the sharps container
- c) Staff responsible for collecting and replacing sharps containers should be trained in proper handling methods.
- d) Sharps containers must be tested and evaluated under actual conditions of use.
- e) Sharps containers should be conveniently located close to the point of disposal to reduce the likelihood of injury from sharps being carried significant distances for disposal.
- f) Sharps containers must be color-coded yellow and labeled with the biohazard symbol.
- g) During use, sharps containers should not be filled or partially filled with liquid disinfectant solution.
- h) Packaging must be done in cardboard containers specifically designed for transport of Sharps and Laboratory waste, following the instructions for packaging as dictated by the supplier of these containers, as well meeting the requirements of the Transportation of Dangerous Goods Regulations. They must be labeled with the biohazard symbol, rigid, closable, leak-resistant and capable of being sealed. A plastic insert for this container is supplied with the container.
- i) Sharps containers as previously identified should fit into this box comfortably, with paper packing between the dead spaces. They should not be forced. The box should close and be sealed easily, without tension or bulging.
- j) Boxes are ordered with proper labeling affixed.
- k) Each box, once filled, according to policy and box limitations should be shipped via Buffalo Airways to Stanton Hospital, 550 Byrne Road, Maintenance Shop, Yellowknife, NT.

3) Accidental Exposure to Human Blood and Body Fluids

Needlestick injuries

- a) SHSSA's Risk Management Committee, Occupational Health and Safety Committee, Regional Medical Health Officer, must have a written procedure to handle and report needle stick injuries

- b) Injuries caused by needle sticks and sharp instruments should be reported using Risk Monitor Pro within 24 hours, reviewed and changes implemented to prevent similar incidents in the future.
- c) Two handed capping of needles must be avoided by using the many safe capping methods available.
- d) SHSSA utilizes Post-Exposure Prophylaxis (PEP) kits and protocols that direct physicians, nurses, and staff about the use of the PEP kit and protocols
- e) User –friendly information for counseling is included in the kit
- f) All physicians and nursing staff in the SHSSA health centres must know what to do in the event of an occupational or accidental exposure to Hepatitis B (HBV), Hepatitis C (HCV) and Human Immunodeficiency Virus (HIV)
- g) Anyone with questions relating to the PEP protocol and kit, or are unable to be seen immediately in the Health Centre, **are to contact one of the following individuals immediately.**
 - i) Regional physician (current posting)
 - ii) Manager of Health Services (867) 587-3661
 - iii) Office of the Chief Medical Officer (867) 920-8646

Human blood and blood contaminated fluids

- a) Spills of human blood and blood-contaminated fluids should be promptly cleaned up by the following method, using gloves:
 - i) Visible material should first be removed with disposable towels or other appropriate means that prevent direct contact with blood. If splashing is anticipated, both protective eyewear and clothing should be worn.
 - ii) The area should be decontaminated with an appropriate germicide as recommended by Director, Health and Social Programs.
 - iii) Hands should be washed after removal of gloves.
 - iv) Soiled cleaning equipment should be cleaned and decontaminated or placed in an appropriate container for disposal. Plastic waste-holding bags should be available for removing contaminated items from the site of the spill.
 - v) IF there is massive blood contamination on the floor, use of disposable impervious shoe coverings should be considered and protective gloves used for removal.
 - vi) Contaminated coverings and gloves should be placed in a plastic waste bag and disposed of as contaminated materials.
 - vii) Plastic waste-holding bags should be sturdy enough to resist puncture under conditions of use and to the point of disposal. Bags should be fully tested under actual conditions, color coded (red), and labeled with a biohazard symbol.

References:

1. Hospital and Health Care Facility Standards Regulations R-036-2005 including Amendments
2. NWT Safety Act and General Safety Regulations
3. Guidelines for the Management of Biomedical Waste in the Northwest Territories, April, 2005
4. Accreditation Canada Qmentum Standards 2009: Infection Prevention and Control
5. Canadian Standards Association (CSA) Z314.3-01, clause 5.4.2; Z314.8 (PPE)
6. Transportation of Dangerous Goods Regulations (TDGR)
7. Environmental Protection Act and Spill Contingency Planning and Reporting Regulations <http://www.gov.nt.ca/ENR/eps/leg.htm>

Approved by:


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