



Community Infection Prevention and Control Policy for Care Home settings

Safe disposal of waste, including sharps

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FE DISPOSAL OF WASTE, INCLUDING SHARPS

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SAFE DISPOSAL OF WASTE, INCLUDING SHARPS

1. Introduction

This Policy is one of the 'Standard infection control precautions' (SICPs) referred to by NHS England in the *National infection prevention and control manual (NIPCM) for England*.

The management of healthcare waste, including sharps, is an essential part of ensuring that care home activities do not pose a risk or potential risk of infection and are appropriately managed. Waste is potentially hazardous and, if not disposed of correctly, can result in injury or infection.

All staff are responsible for the safe management and disposal of waste, including sharps, and should understand how it should be segregated and stored prior to collection or disposal. This is driven by the need to reduce environmental impact, comply with waste regulations and other national guidance, such as the Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance, and reduce costs associated with waste management.

Contingency plans and emergency procedures are in place in the event of contamination from waste.

Always use SICPs and, where required, 'Transmission based precautions' (TBPs), refer to the 'SICPs and TBPs Policy for Care Home settings'.

When caring for residents in relation to COVID-19 or any other new emerging infections, staff should refer to national infection prevention and control guidance on the disposal of waste, including sharps.

2. Responsibilities

Staff in care homes have a responsibility for ensuring that waste, including sharps, is dealt with appropriately from the point of generation to the point of final disposal. All staff should be trained and aware of waste procedures. It remains the legal responsibility of the care home, not the waste contractor, to ensure full compliance with environmental waste regulations. Waste, including sharps, should be:

- Correctly segregated
- Appropriately labelled
- Packaged appropriately for transportation

- Stored safely and in a secure place away from areas of public access within the premise
- Described accurately and fully on the accompanying documentation when removed from the premise
- Recorded and copies of the waste documentation retained, including record keeping
- Transferred to an authorised waste contractor for transport to an authorised waste disposal site
- Monitored, audited, and the way in which waste arrangements work should be reviewed

Further information can be found in the *Environment and sustainability Health Technical Memorandum 07-01: Safe management of healthcare waste.*

3. Disposal of waste

- All waste should be segregated correctly (see Section 5).
- When handling waste, appropriate personal protective equipment (PPE) should be worn and hands cleaned after removing PPE.
- All waste bags should be no more than 3/4 full and no more than 4 kg in weight. This allows enough space for the bag to be tied using a swan neck and then secured with a suitable plastic zip tie.
- Waste bags should be labelled with the address and date prior to collection by the waste contractor (some waste contractors may undertake this) to ensure traceability if an incident occurs.
- When handling tied waste bags, only hold the bag by the neck and keep at arms length to reduce the risk of injury in case a sharp item has been inappropriately disposed of in the bag.
- If a waste bag awaiting collection is torn or contaminated, the bag and contents should be placed inside a new waste bag.
- Waste bins in clinical areas, resident's rooms and toilets should be lined and foot pedal operated with a lid. Always use the foot operated mechanism to open the lid to prevent hand contamination. If this is used by the resident, a risk assessment should be undertaken.
- Waste bins in other areas, e.g. office, should have a liner, but do not need to have a lid.

4. Disposal of sharps

Refer to 'Safe management of sharps and inoculation injuries Policy for Care Home settings'.

- Sharps should be placed into the correct colour coded sharps container (see Section 5).
- Sharps containers must be situated in a safe and secure place, not accessible to residents or visitors.
- In rooms or areas where sharps containers do not need to be moved, they should be wall-mounted near the point of use, i.e. where the sharp is used.
- At no time should a sharps container be placed on the floor.
- Sharps containers should comply with the UN3291 and British Standard BS7320.
- The correct size of the sharps container to be used should be determined according to the volume of sharps generated.
- Sharps containers must be correctly assembled, with the lid securely fastened to the base and dated, signed and location recorded when assembled.
- Sharps containers must not be used for any other purpose than the disposal of sharps, e.g. no packaging, wrappers, cotton wool, gauze.
- Sharps should be placed into the sharps container by the person using them.
- Never press down the contents to make more room or attempt to retrieve an item from the sharps container.
- After disposing of a sharp into the sharps container, the aperture should be moved into the temporary closure 'closed' position.
- Sharps containers must **not** be filled above the 'fill line' as this could result in sharps protruding through the aperture.
- The aperture must be 'locked' prior to disposal.
- Sharps containers must be disposed of when the fill line has been reached.
- Sharps containers must not be placed inside waste bags prior to disposal.
- Sharps containers must be dated and signed when locked and disposed of.

Assessing waste, including sharps, for segregation

Waste, including sharps, should be assessed by the member of staff at the time it is produced and segregated in the correct colour waste stream identified below.

Further information can be found in the *Environment and sustainability Health Technical Memorandum 07-01: Safe management of healthcare.*

Waste stream guide for Care Home settings **Description** Colour* Orange: Clinical/Infectious waste Orange bag Waste from residents with a confirmed or suspected infection, but **not** contaminated with medicines or chemicals. Examples are: Contaminated PPE, e.g. gloves, aprons Items contaminated with urine, faeces, vomit, sputum, pus or wound exudate, e.g. continence pads, urine bags, single use items, single use bowls Contaminated dressings that do not contain an active pharmaceutical product Waste from blood and/or body fluid spillages Syringes contaminated with body fluids Infectious waste may be treated to render it safe prior to disposal, or alternatively incinerated in a licensed facility. Domestic and offensive waste must not be placed in this waste stream. Yellow and black Offensive/hygiene waste striped: Yellow Waste from residents with no confirmed or suspected and black striped infection which may be contaminated with body fluids. bag Examples are: Gloves, aprons Uncontaminated dressings Stoma or catheter bags* Cardboard vomit/urine bowls* Incontinence pads Female hygiene waste, nappies * Note: Liquids, e.g. urine, faeces, vomit, should be discarded into a foul sewer (sluice or toilet). They can, however, be absorbed onto a disposable cloth, e.g. paper towel, and placed in the offensive waste stream, ensuring there is no free-flowing liquid present

Waste stream guide for Care Home settings (continued)			
Colour*	Description		
Black:	Domestic waste		
Black bag	Non-hazardous paper, includes items normally found in household waste.		
	Examples are:		
	Newspapers		
	Food waste		
	Paper towels from handwashing		
	Packaging		
	Clear or opaque waste bags can also be used for domestic waste.		
	Recycling options should be considered where available.		
	Domestic waste may be land filled in a permitted or licensed facility.		
Purple:	Cytotoxic and cytostatic waste		
Purple bag	Items contaminated with cytotoxic and/or cytostatic medications.		
	This waste stream is rarely used in care home settings. Cytotoxic and cytostatic waste must be incinerated in a permitted or licensed facility.		

 Colour waste streams may vary depending on waste contractors – check with your local contractor before implementing the waste stream guidance.

Always select the correct colour coded sharps container

Purple lid with matching purple labelled container:

For the disposal of sharps contaminated with cytotoxic and cytostatic medicines

Orange lid with matching orange labelled container:

For the disposal of sharps not contaminated with medicines

Yellow lid with matching yellow labelled container:

For the disposal of sharps contaminated with medicines

6. Infection Prevention and Control resources, education and training

See Appendix 1 for the 'Safe disposal of waste, including sharps: Quick

reference guide'.

The Community Infection Prevention and Control (IPC) Team have produced a wide range of innovative educational and IPC resources designed to assist your Care Home in achieving compliance with the *Health and Social Care Act 2008:* code of practice on the prevention and control of infections and related resources and CQC registration requirements.

These resources are either free to download from the website or available at a minimal cost covering administration and printing:

- 30 IPC Policy documents for Care Home settings
- Preventing Infection Workbook: Guidance for Care Homes
- IPC CQC inspection preparation Pack for Care Homes
- IPC audit tools, posters, leaflets and factsheets
- IPC Bulletin for Care Homes

In addition, we hold IPC educational training events in North Yorkshire.

Further information on these high quality evidence-based resources is available at www.infectionpreventioncontrol.co.uk.

7. References

Department of Health and Social Care (Updated December 2022) *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance*

Department of Health (2022) Health Technical Memorandum 07-01: Safe and sustainable management of healthcare waste

National Institute for Health and Care Excellence (2012, updated February 2017) Healthcare-associated infections: prevention and control in primary and community care Clinical Guidelines 139

NHS England (2022, updated April 2023) National infection prevention and control manual (NIPCM) for England

NHS Improvement (July 2017) Resident Safety Alert: Risk of death and severe harm from ingestion of superabsorbent polymer gel granules

8. Appendices

Appendix 1: Safe disposal of waste, including sharps: Quick reference guide

Appendix 1: Safe disposal of waste, including sharps: Quick reference guide





Safe disposal of waste, including sharps: Quick reference guide

Key principles

- All staff in care homes are responsible for the safe management and disposal of waste.
- When handling waste, appropriate PPE should be worn,
- All waste bags should be no more than 3/4 full and no more than 4 kg in weight.
- All waste bags should be labelled with the care home address and date.
- When handling tied waste bags, only hold by the neck of the bag and keep at arms length.



 Sharps should be placed into the correct colour coded sharps container, which must be placed in a safe and secure place.

waste st Colour*	ream guide for Care Home settings Description
Orange	Infectious waste: items contaminated with urine, faeces, vomit, sputum, pus or wound exudate, from a confirmed, suspected or at risk of infection source. Items may include personal protective equipment (PPE), continence pads, urine bags, single use items, single use bowls and dressings.
	 Waste from blood and/or body fluid spillages.
	 Infectious waste may be treated to render it safe prior to disposal, or alternatively incinerated in a licensed facility.
Yellow and black	Offensive/hygiene waste: items contaminated with urine, faeces, vomit, sputum, pus or wound exudate, from residents with no risk of, confirmed or suspected infection. Items may include PPE, continence pads, urine bags, single use items, single use bowls, dressings, feminine hygiene, nappier and any other items assessed to be non-infectious, such as uncontaminated PPE.
	 Liquids, e.g. urine, faeces, vomit, should be discarded into a foul sewer (sluice or toilet). They can, however, be absorbed onto a disposable cloth, e.g. paper towel, and placed in the offensive waste stream, ensuring there is no free-flowing liquid present.
	 Offensive/hygiene waste may be land filled in a permitted or licensed facility.
Black	Domestic waste: items which do not contain infectious materials, sharps or medicinal products, e.g. paper towels from hand washing, packaging, newspapers.
	 Clear or opaque waste bags can also be used for domestic waste.
	Recycling options should be considered where available.
	 Domestic waste may be land filled in a permitted or licensed facility.
Purple	This waste stream is rarely used in care home settings. Cytotoxic and cytostatic waste: items contaminated with hormone or oxytocin-based agents.

Cytotoxic and cytostatic waste must be incinerated in a

permitted or licensed facility.

Waste stream guide note

* Colour waste streams may vary depending onwaste contractors - check with your local contractor before implementing the waste stream guidance.

Always select the correct colour coded sharps container

Purple lid with matching purple labelled container:

For the disposal of sharps contaminated with cytotoxic and cytostatic medicines

Orange lid with matching orange labelled container:

For the disposal of sharps not contaminated with medicines

Yellow lid with matching yellow labelled container:

For the disposal of sharps contaminated with medicines

For further information, please refer to the full Policy which can be found at www.infectionpreventioncontrol.co.uk/care-homes/policies/

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