NON-HOSPITAL MEDICAL AND SURGICAL FACILITIES ACCREDITATION PROGRAM

Accreditation Standards

Waste Management

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INTRODUCTION

Waste management includes the collection, segregation, containment, handling, storage and disposal of waste. Types of waste generated in non-hospital facilities include but are not limited to general waste, biomedical waste and hazardous waste.

WMGT1.0 WASTE MANAGEMENT

WMGT1.1	**Waste is safely and appropriately contained.**	
WMGT1.1.1	**M**	Waste is appropriately segregated at point of generation. *Guidance: Categories of waste include biomedical (e.g. anatomic, non-anatomic, sharps), pharmaceutical, cytotoxic, general and recyclable.*
WMGT1.1.2	**M**	Waste containers are an appropriate size, suitable for the intended waste, and fabricated of metal, plastic or other rigid, impervious material. *Guidance: Waste containers may be reusable or single-use and have the appropriate strength and related characteristics for the types of waste being collected (e.g. approved sharps container, leak-proof bag or container for wet wastes). Reusable waste containers are visually inspected for holes, cracks or leaks after emptying and are cleaned and disinfected in accordance with infection, prevention and control procedures. Single-use containers include sharps containers, waste-holding bags and commercially-manufactured cardboard waste containers.*
WMGT1.1.3	**M**	Waste containers located in semi-restricted and non-restricted areas are emptied and/or removed when two-thirds full or daily, whichever occurs first. *Guidance: All waste containers in operating and procedure rooms, except for sharps containers, are emptied at the end of each case.*
WMGT1.2	**Anatomical biomedical waste is safely and appropriately contained.** *Guidance: Anatomical biomedical waste includes but is not limited to human tissues and body parts. Teeth, hair or nails are considered general waste, not biomedical waste.*	
WMGT1.2.1	**M**	Anatomic waste is placed in a **red** colour-coded waste container that is labelled with the anatomical waste biohazard symbol.
WMGT1.2.2	**M**	The anatomical biomedical waste container is rigid and leak-resistant with a non-removable lid. *Guidance: Biomedical waste destined for incineration is placed in a single-use biomedical waste container.*

WMGT1.2.3	**M**	The anatomical biomedical waste container is lined with a **red** waste-holding plastic bag.
WMGT1.3	**Non-anatomical biomedical waste is safely and appropriately contained.** *Guidance: Non-anatomical biomedical waste includes but is not limited to human diagnostic specimens and human blood and body fluids (e.g. items saturated with blood, body fluids removed during surgery, treatment or for diagnosis) not including saliva, feces, vomit, urine or tears. This includes items that would release liquid or semi-liquid blood if compressed. Items contaminated with scant/trace amounts of blood/body fluids or secretions are considered general waste.*	
WMGT1.3.1	**M**	Non-anatomical biomedical waste is placed in a **yellow** colour-coded waste container that is labelled with the biohazard symbol.
WMGT1.3.2	**M**	The non-anatomical biomedical waste container is lined with a **yellow** waste-holding plastic bag.
WMGT1.4	**Fluid waste is safely and appropriately contained.**	
WMGT1.4.1	**M**	Fluid biomedical waste is contained in a sealed, single-use container before being placed in a **yellow** biomedical waste container. *Guidance: Fluid that contains visible blood is considered biomedical waste and is to be disposed of as biomedical waste. If the bodily fluid is collected through suctioning, single-use suction liners should be used so that the liner and lid are removed in a single step which minimizes the risk of spillage and eliminates the risk of exposure associated with the manual dumping of reusable suction canisters. The suction liner and lid are then tightly sealed/closed after use and placed carefully into the **yellow** biomedical waste container. Some suction liners are sold with solidifying agents pre-installed, and some solidifying agents can be added using a closed-delivery system (e.g. Canister Express PremiGuard™ Cap). However, adding a solidifier to fluid biomedical waste is not required, and fluid waste should not be removed from a contained system (i.e. to add solidifier) as this increases risks of exposure to potentially infectious agents through spills, splash backs and inhalation of aerosolized particles. Where containment in a sealed, single-use container is inappropriate, fluid biomedical waste may be disposed of in a sanitary sewer if permitted by municipal bylaws. If fluid biomedical waste is being disposed of in a sanitary sewer, evidence of the municipality bylaws that permit this is on file. Fluid waste cannot be disposed of into clean sinks (i.e. MDR, hand hygiene).*
WMGT1.4.2	**M**	Fluid general waste is disposed of in a manner that minimizes exposure through spills, splash backs and inhalation of aerosolized particles. *Guidance: Bodily fluid (e.g. saliva, feces, vomit, urine) that does not contain any visible blood is considered general waste and can be disposed of in a sanitary sewer. This may be performed by manually dumping the fluid waste into a waste hopper or by using a reusable fluid disposal machine that is connected to the facility's plumbing system. However, if the bodily fluid is collected through suctioning, single-use suction liners should be used so that the liner and lid are removed in a single step. The suction liner and lid should then be tightly sealed/closed after use and placed carefully into a **yellow biomedical waste container**. Some suction liners are sold with solidifying agents pre-installed, and some solidifying agents can be added using a closed-delivery system (e.g. Canister Express PremiGuard™ Cap). However, adding a solidifier to fluid disposed as biomedical waste is not required, and fluid waste should not be removed from a contained system (i.e. to add solidifier) as this increases risks of exposure to potentially infectious agents through spills, splash backs and inhalation of aerosolized particles. Fluid waste cannot be disposed of into clean sinks (i.e. MDR, hand hygiene).*

WMGT1.5		**Sharps waste is safely and appropriately contained.** *Guidance: Contaminated sharps include but are not limited to scalpel blades. Unused drug vials and ampoules are not considered contaminated sharps.*
WMGT1.5.1	**M**	Sharps and similar wastes are placed in a **yellow** "sharps" container that is labelled with the biohazard symbol. *Guidance: Cytotoxic sharps waste (e.g. Mitomycin) is placed in a **red** "cytotoxic sharps" container that is labelled with the cytotoxic and biohazard symbols.*
WMGT1.5.2	**M**	Sharps containers are accessible for convenient sharps disposal.
WMGT1.5.3	**M**	Sharps containers are no more than three-quarters full or filled only to the manufacturer-specified fill line. *Guidance: Overfilling poses a hazard.*
WMGT1.5.4	**M**	Sharp container lids are securely fastened/locked when full.
WMGT1.5.5	**M**	There is safe handling and disposal of sharps. *Guidance: Safe work procedures are implemented (i.e. immediate disposal of sharps after use, prohibiting the recapping of sharps, and making use of a neutral zone or hands-free technique for passing sharp instruments, blades and needles).*
WMGT1.6		**Cytotoxic waste is safely and appropriately contained.** *Guidance: Contaminated sharps include but are not limited to scalpel blades. Unused drug vials and ampoules are not considered contaminated sharps.*
WMGT1.6.1	**M**	Biomedical waste that is contaminated with cytotoxic agents is contained in a **red** single-use container that is labelled with the biohazard symbol and the cytotoxic hazard symbol. *Guidance: Cytotoxic waste includes items in contact with cytotoxic agents (e.g. Mitomycin) such as needles, tubing, vials, gauze and gloves.*
WMGT1.7		**Pharmaceutical waste is safely and appropriately contained.** *Guidance: Pharmaceutical waste includes drugs that are no longer usable, are outdated or have become contaminated, have been stored improperly, or are no longer required. Empty vials are considered general waste. Vials that are not empty are considered pharmaceutical waste.*
WMGT1.7.1	**M**	Pharmaceutical waste is placed in a waste container that is clearly identified as containing pharmaceutical waste. *Guidance: Controlled drugs and substances must be handled and disposed of in accordance with federal regulations. For further information, refer to the NHMSFAP Medication Management standard.*
WMGT1.7.2	**M**	Cytotoxic pharmaceutical waste is placed in a waste container that is clearly identified as containing cytotoxic pharmaceutical waste and displays the cytotoxic hazard symbol. *Guidance: Cytotoxic pharmaceutical waste is handled separately from other pharmaceutical waste.*

WMGT1.8	**General waste is safely and appropriately contained.** *Guidance: General waste includes office waste, waste without blood or body fluid, or contains only a trace amount of blood in diluted form that will not release liquid or semi-liquid blood if compressed (i.e. dressings, sponges, personal protective equipment, catheters, empty IV bags and tubing, teeth, nail clippings and hair).*	
WMGT1.8.1	**M**	Solid general waste is placed in a **black** or **dark green** waste container. *Guidance: The waste container should be black or dark green in colour but could be any other colour **except** red, yellow or orange.*
WMGT1.8.2	**M**	The general waste container is lined with a **black** or **dark green** waste-holding plastic bag.
WMGT1.9	**Recycling waste is safety and appropriately contained.** *Guidance: Municipal bylaws determine what is considered recycling waste. Facilities are encouraged to contact their local recycling provider for assistance in determining what items are recyclable.*	
WMGT1.9.1	**M**	Recycling waste is placed in a **blue** waste container that is clearly identified as containing recyclable waste.
WMGT1.9.2	**M**	The recycling waste container is lined with a **clear** or **blue** waste-holding plastic bag.
WMGT1.10	**Waste is safely moved and appropriately stored.** *Guidance: After removal from administrative, clinical and patient care areas, waste is moved to an intermediate storage area before being removed from the facility (i.e. general waste disposed of in commercial dumpster, biomedical waste picked up by waste disposal contractor).*	
WMGT1.10.1	**M**	Manual handling of waste is minimized. *Guidance: Waste should be moved using carts, as appropriate. Lifting, handling or carrying waste can result in occupational health and safety injuries. Before moving waste, the following risk factors should be considered to determine whether a cart should be used: the category of the waste, the size, shape and weight of the load, how close the load needs to be to the body to minimize stress on the body, and the distance the load has to be carried to the waste storage room.*
WMGT1.10.2	**M**	Appropriate personal protective equipment (PPE) is worn when handling all types of waste. *Guidance: At minimum, gloves are worn when handling waste materials. A gown is worn if it is likely that the waste container will come in contact with the employee's body.*
WMGT1.10.3	**M**	All waste is stored in a dedicated waste storage room. *Guidance: The waste storage area must be totally enclosed.*
WMGT1.10.4	**M**	Waste is moved to the waste storage room by the most direct route possible avoiding patient care areas and clean zones. *Guidance: The transport routes for waste are clearly defined. Routes should avoid passage through public and patient care areas, medical device reprocessing areas, and clean and sterile storage areas (i.e. clean storage, linen storage, sterile supply room, medication inventory storage). If waste is transported using an elevator, the waste is not transported at the same time as patients, clean or sterile supplies, linens or food.*
WMGT1.10.5	**M**	The waste storage room is accessed by authorized personnel only. *Guidance: It is recommended that the waste storage room be locked when unoccupied.*

WMGT1.10.6	**M**	Signage on the door to the waste storage room displays the biohazard symbol.
WMGT1.10.7	**M**	Waste remains segregated in appropriately labelled, colour-coded, rigid waste containers. *Guidance: Waste containers are fabricated of metal, plastic or other rigid, impervious material and may be reusable or single-use. Reusable waste containers are visually inspected for holes, cracks or leaks after emptying and are cleaned and disinfected in accordance with infection, prevention and control procedures. Single-use containers include sharps containers, waste-holding bags and commercially-manufactured cardboard waste containers. Waste bags should not be stored directly on the floor.*
WMGT1.10.8	**M**	Anatomical biomedical waste is stored at 4°C or lower or contained in formaldehyde. *Guidance: Frozen waste is not removed from storage until proper pickup is arranged.*
WMGT1.10.9	**M**	Biomedical waste is stored at 4°C or lower if stored for more than four days. *Guidance: This does not pertain to sharps and waste contaminated with cytotoxic agents. Frozen waste is not removed from storage until proper pickup is arranged.*
WMGT1.10.10	**M**	Biomedical waste refrigerators and freezers are exclusive to biomedical waste storage.
WMGT1.10.11	**M**	A disposal contractor is used for the proper disposal of biomedical and other hazardous waste. *Guidance: Biomedical and hazardous waste must be transported by a certified waste hauler to a waste management facility for final disposal. Non-hospital facilities may not treat biomedical waste on-site or transport their own biomedical and other hazardous waste to a local disposal or transfer station. The medical director is responsible for ensuring that the disposal contractor is appropriately authorized to transport and dispose of biomedical and other hazardous waste.*
WMGT1.11	**The waste storage area is cleaned and disinfected.**	
WMGT1.11.1	**M**	Reusable waste containers are cleaned and disinfected prior to re-use. *Guidance: Reusable waste containers in the waste storage area are cleaned and disinfected when emptied (i.e. after waste pick up by a certified waste hauler, prior to re-use).*
WMGT1.11.2	**M**	Waste movement carts are cleaned and disinfected daily and when visibly soiled. *Guidance: Cleaning logs are maintained.*
WMGT1.11.3	**M**	Floors in the waste storage room are cleaned weekly and when visibly soiled. *Guidance: Cleaning logs are maintained. Waste spills/leakage must be cleaned up immediately.*
WMGT1.11.4	**M**	Walls in the waste storage room are cleaned monthly and when visibly soiled. *Guidance: Cleaning logs are maintained.*
WMGT1.11.5	**M**	Ceilings in the waste storage room are cleaned monthly and when visibly soiled. *Guidance: Cleaning logs are maintained.*
WMGT1.11.6	**M**	Vents in the waste storage room are cleaned monthly and when visibly soiled. *Guidance: Cleaning logs are maintained.*

WMGT1.11.7	**M**	Biomedical waste fridge/freezer is cleaned annually and when visibly soiled. *Guidance: Cleaning logs are maintained.*
WMGT1.12	**Policies and procedures contain all the information necessary for the safety of patients, staff and visitors.** *Intent: Policies and procedures ensure that activities/procedures are performed consistently and accurately by all personnel within the non-hospital facility.*	
WMGT1.12.1	**M**	There is policy and procedures for waste management. *Guidance: The policy and procedures should be developed based on provincial and municipal legislations and relevant standards and address segregation of waste, examples of types of waste generated by the facility to ensure proper segregation, waste handling, transport to storage, temporary storage, and final disposal. Facilities are encouraged to contact their local recycling provider for assistance in determining what items are recyclable.*
WMGT1.12.2	**M**	There is policy and procedures for managing spilled waste. *Guidance: The policy and procedures outline how to manage all categories of spilled waste (e.g. biomedical, sharps, general, other) including use of proper PPE for each type of spill, proper containment and isolation for each type of spill, clean-up procedures, safety incident documentation, and any other considerations, as appropriate (i.e. evacuation).*

Summary of changes	
2019-12-05	• Waste storage area cleaning schedule revised. • All facilities must use a certified waste hauler for the transportation of biomedical and hazardous waste to a waste management facility for final disposal. • Substantial format changes and guidance added.

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