



Waste Management Policy

1 SUMMARY

Doctors on Riccarton is committed to the appropriate management and disposal of waste. All healthcare waste will be disposed of in a safe, cost efficient manner in accordance with industry standard and local council by-laws.

2 POLICY STATEMENT

2.1 Purpose

To ensure that Doctors on Riccarton employees are aware of the requirements for waste management and comply with these requirements at all times by ensuring safe storage and disposal of sharps, contaminated materials and hazardous and general waste.

2.2 Background

Management of healthcare waste in New Zealand is supported by the NZ Standard 4304:2002 which provides guidelines for the disposal of healthcare waste including the classification, segregation, packaging/containment, labelling, storage, transport and disposal of healthcare waste. This Standard is a requirement for the RNZCGP Foundation Standard (Indicator 14).

Local bodies such as the Christchurch City Council, Waimakariri District Council, Selwyn District Council and Environment Canterbury are the authority as to acceptable types of waste appropriate for disposal via the general waste collection system.

2.3 Scope

This policy applies to all Doctors on Riccarton staff, fixed-term employees and contractors, and other providers who provide services on the premises.

2.4 Waste Management Officer

The designated waste management officer for Doctors on Riccarton is the Practice Manager who will ensure staff are familiar with the handling of waste as outlined in this Policy and ensure new team members are inducted into the practice's processes of waste management.

2.5 Responsibilities

All staff working at this medical centre are expected to understand the waste management system and their role in achieving the defined processes.

2.6 Consideration of Te Tiriti o Waitangi Commitments (as per 4.3.8 of NZS 4304:2002 New Zealand Standard for Management of Healthcare Waste)

This policy shall take into account that some iwi and hapū management plans include statements of concern regarding the pollution of water, water bodies and other taonga, and policies of their protection from contamination.

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In addition, keeping the body intact is important in many cultures. Where possible, body tissue will be returned to the patient if requested. The practice will manage requests to return tissue in a respectful way that is consistent with the patient's cultural, spiritual, and religious beliefs

2.7 Definitions & Abbreviations

This section defines terms that are critical to the interpretation and implementation of the policy.

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| Hazardous Waste: | Healthcare waste which may present a public health or environmental risk or may be considered to be offensive |
| Sharps Hazardous Waste | Sharps including that which are infectious, cytotoxic or radioactive |
| General - Non-hazardous Waste: | Constitutes the bulk of the waste generated by community- based healthcare providers and carries no more public health risk or concern than general or domestic waste |
| Contaminated Materials: | Materials that have been contaminated with blood/body substances containing pathogens or disease-producing germs/organisms or infectious material or any other material of safety concern (e.g. radioactive) |
| Infectious Waste: | Substances known or suspected to contain pathogens e.g. Laboratory specimens, waste containing expressible body fluids, receptacles containing body fluids which could leak on compaction |
| Recyclable Waste: | Recyclables that can be received by the local authority or recycling agents and can include paper, cardboard, glass, plastics, metal |
| Community Based Healthcare Providers: | A community based healthcare worker who has been contracted or employed to provide Community Based Healthcare Services |
| Consumer: | Consumer refers to patient, guardian, whanau support or any person who may receive treatment or give permission for treatment |

2.8 Related Policies

- Health & Safety Policy
- Incident and Adverse Event Risk Management Policy
- Infection Prevention & Control Policy

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3 POLICY DETAIL AND PROCEDURES

When handling waste, Doctors on Riccarton staff follow standard precautions at all times to prevent exposure to blood, expressible body fluids, secretions and excretions

All human blood and body fluids are to be treated as potentially infectious

Waste material and resources will be categorised, segregated and disposed of appropriately and according to the following chart:

| Waste Category | Items | Colour Code | Disposal Process |
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| Non Hazardous Waste - General - Recycling - Organic/Compostable | Plastic, paper, packaging, food scraps, plastic vials, flowers, glass, metal, cardboard, tin cans, broken crockery, etc | | Local council/authority landfill via regular Christchurch City Council roadside rubbish collection arrangements and Waste Management NZ Ltd. Recycling will be used where appropriate |
| Hazardous Waste - Sharps | All sharps including needles, scalpels, glass ampoules, any object having sharp points capable of causing a penetrating injury | Yellow Sharps Containers displaying biohazard symbol | Collected and disposed of by company accredited for this: Interwaste Southern Community Labs |
| Hazardous Waste – Non Sharps Infectious Waste | Waste posing a public health or environmental risk or that contains expressible body substances with known or suspected pathogens eg lab specimens, waste body fluids, receptacles containing body fluids. | Yellow Bags containing bio hazard symbol | Collected and disposed of by company accredited for this: Interwaste |
| Controlled Waste - | Healthcare waste containing potentially infectious blood/body fluids which cannot leak ('not expressible') under compaction | No specified colour coding in the Standard – use appropriate bags supplied by accredited remover | Collected and disposed of by company accredited for this: Interwaste |
| Pharmaceutical waste | Pharmaceutical waste is to be placed in the sterilizer room in the container labelled as pharmaceutical waste on the top shelf. | White | Waste is returned to Remedy pharmacy next door to the practice |
| Special Waste | Confidential Health Information | Document Destruction Bin | Shredded and Collected and disposed of by Waste Management NZ Ltd |

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3.1 Sharps Management

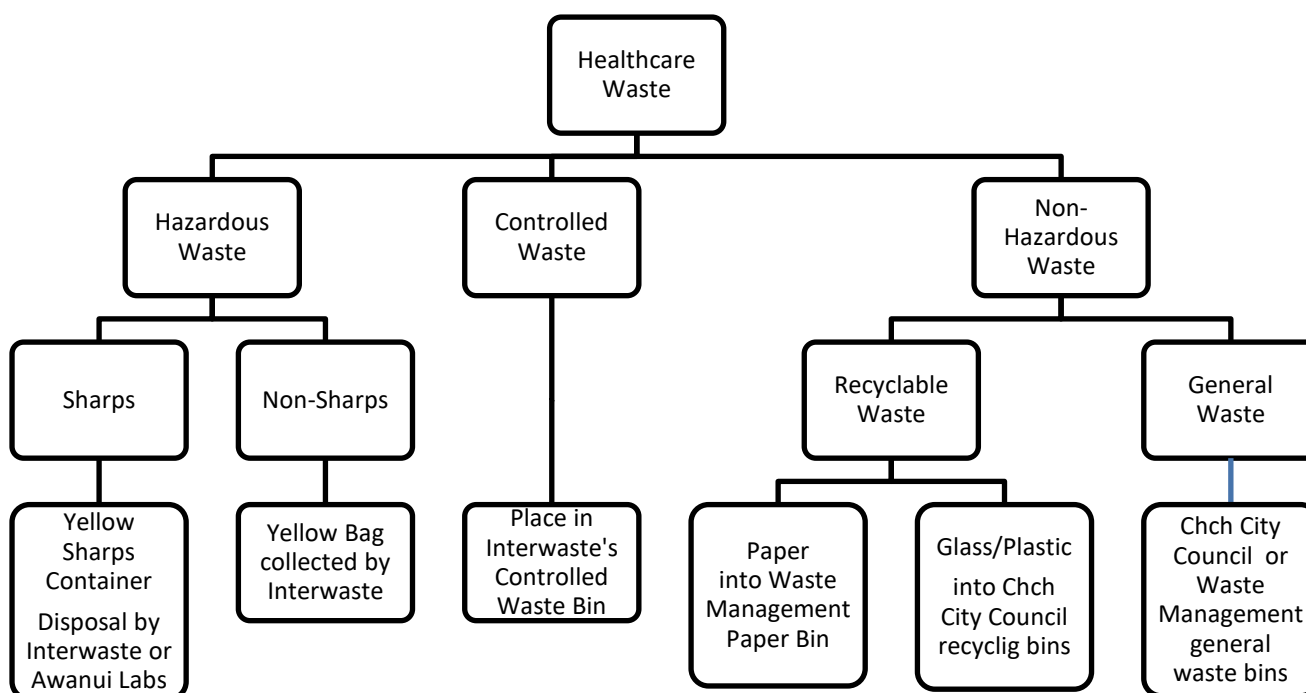
Needles, syringes, cannulas, scalpel blades, stitch cutters, or any other single use sharp object that has been in contact with a patient's blood or body fluids will be carefully disposed of using approved sharps disposal protocols.

- Handle all needles and sharps with care. DO NOT re-sheath needles, bend or remove needles by hand.
- Sharps must be placed in an approved container immediately after use. Sharps should be carried in a kidney dish or similar container if not disposed of immediately. Used needles should be separated from syringe using the slot in the top of the biohazard container and disposed of in this container. Syringes go into usual rubbish as they are not sharp.
- Keep sharps containers in a location which excludes risk of injury to staff, patients and visitors. Ideally, they should be fixed to a wall, out of a child's reach.
- Do not fill sharps containers more than $\frac{3}{4}$ full.
- Once $\frac{3}{4}$ full the containers should be securely closed for collection and destruction by a licensed and approved operator. Store in an area where there is no public access prior to collection.

3.2 Handling Contaminated Waste

- All Standard Precautions should be observed.
- Whilst wearing gloves dispose of sharps as detailed above.
- Whilst wearing gloves contaminated material e.g. gauze swabs, used dressings etc should be placed in a plastic bag, sealed and placed in a medical waste container.
- Remove gloves and place in medical waste
- Wash and dry hands thoroughly.

3.3 Healthcare waste will be categorised by its properties and characteristics.



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3.4 Emergency Waste Management

In any emergency, if normal waste disposal procedures are insufficient or unavailable, the waste management officer and/or emergency coordinator will adjust procedures as needed. In a pandemic situation, items that are normally included in general waste may need to be treated as controlled waste to limit the spread of infection.

3.5 Audit to Check Compliance Against the Policy

An audit of our waste management processes to check compliance with this policy will be conducted yearly.

4 REFERENCES

- NZS 4304:2002 New Zealand Standard for Management of Healthcare Waste
- AS/NZS 4815:2006 "Office-based Healthcare Facilities - Reprocessing of reusable medical and surgical instruments and equipment, and the maintenance of the associated environment"
- AS/NZS 4187:2014 - Reprocessing of reusable medical devices in health service organizations
- Department of Labour www.osh.dol.govt.nz
- Christchurch City Council Waste Management and Minimisation Bylaw 2023. Christchurch City Council makes this bylaw under section 56 of the Waste Minimisation Act 2008, sections 145 and 146 of the Local Government Act 2002, section 64 of the Health Act 1956, and section 12 of the Litter Act 1979.

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