

STATE OF OHIO



DEPARTMENT OF REHABILITATION
AND CORRECTION

SUBJECT: Infectious Waste Management	PAGE <u> 1 </u> OF <u> 6 </u> NUMBER: 10-SAF-13
RULE/CODE REFERENCE: OAC 3745-27-01, 3745-27-30, 3745-27-31, 3745-27-32, 3745-27-33, 3745-27-34, 3745-27-35, 3745-27-36	SUPERSEDES: 10-SAF-13 dated 10/27/11
RELATED ACA STANDARDS: 4-4331; 4-4358; 1-CTA-3E-03	EFFECTIVE DATE: July 2, 2012
	APPROVED: 

I. AUTHORITY

This policy is issued in compliance with Ohio Revised Code 5120.01 which delegates to the Director of the Department of Rehabilitation and Correction the authority to manage and direct the total operations of the Department and to establish such rules and regulations as the Director prescribes.

II. PURPOSE

The purpose of this policy is to provide for the safe handling and disposal of infectious waste within the agency's state-operated prison facilities and privately owned and/or operated prison facilities that house Ohio Department of Rehabilitation and Correction inmates.

III. APPLICABILITY

This policy shall apply to all state-operated prison facilities within the Ohio Department of Rehabilitation and Correction (DRC) that are covered under the agency's infectious waste generator registration issued by the Ohio Environmental Protection Agency. This policy shall also apply to all privately owned and/or operated prison facilities that house DRC inmates.

IV. DEFINITIONS

Bloodborne Pathogens - Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, all hepatitis viruses and human immunodeficiency virus (HIV).

Contaminated - The presence or the reasonable anticipated presence of blood or other potentially infectious materials on an item or surface.

Contaminated Sharps - Any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels and broken glass.

Infectious Waste - Nearly all categories of infectious waste depend upon the presence or the possibility of presence of infectious agents. The exceptions to this are blood, blood products, and cultures, which are always considered infectious waste. Infectious waste includes the following categories:

- Cultures and stocks of infectious agents and associated biologicals
- Laboratory wastes that were, or were likely to have been in contact with infectious agents
- Pathological wastes, including human and animal tissues, organs, and body parts
- Waste materials from the rooms of humans, or the enclosures of animals, that have been isolated because of a diagnosed communicable disease
- Human and animal blood specimens and blood products, provided that the animals were or are likely to have been exposed to a zoonotic or infectious agent. "Blood products" does not include patient care waste such as bandages or disposable gowns that are lightly soiled with blood
- Contaminated carcasses, body parts, and bedding of animals that were diagnosed with or intentionally exposed to infectious agents from zoonotic or human diseases during research, production of biologicals, or testing of pharmaceuticals
- Sharp wastes (including, but not limited to, hypodermic needles, syringes, and scalpel blades) used in the treatment of human beings or animals, or sharp wastes that have or are likely to have come in contact with infectious agents in medical, research, or industrial laboratories.
- Waste materials generated in the diagnosis, treatment, or immunization of human beings or animals, research pertaining to the immunization of human beings or animals, or in the production or testing of biologicals that the public health council identifies as infectious wastes.
- Any other waste materials the generator designates as infectious wastes.

Large Infectious Waste Generator - Any entity that generates 50 pounds or more of infectious waste per calendar month is required to be certified as a large waste generator by the Ohio Environmental Protection Agency. The Ohio Department of Rehabilitation and Correction is registered as a large generator of infectious waste for all of its state-operated prison facilities. All state-operated prison facilities shall comply with the requirements of a large generator of infectious waste.

Other Potentially Infectious Material - Other potentially infectious material includes the following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.

V. POLICY

It is the policy of the Ohio Department of Rehabilitation and Correction to comply with federal, state and local laws and regulations regarding the handling and disposal of infectious waste.

VI. PROCEDURES

A. Management of Infectious Waste Generator Requirements

1. The Ohio Department of Rehabilitation and Correction holds an agency-wide certificate from the Ohio EPA as a large generator of infectious waste. All state-operated prison facilities are covered under this certificate and shall comply with the requirements to operate as a large infectious waste generator. Private prisons contracting with DRC shall maintain a certificate from the Ohio EPA as a large generator of infectious waste and shall comply with the requirements to operate as a large infectious waste generator.

2. The Health and Safety Coordinator assigned to each state-operated prison facility shall serve as the Infectious Waste Control Manager for the facility. They are to direct and coordinate staff to ensure compliance with all applicable requirements. The Managing Officer shall also appoint a backup coordinator to be available to address concerns with infectious waste in the absence of the Health and Safety Coordinator.
3. The Health and Safety Coordinator shall monitor compliance with this policy and all applicable infectious waste management requirements during their monthly comprehensive inspection of the prison facility.

B. Segregation and Proper Packaging of Infectious Wastes

1. All infectious sharps must be placed into containers specifically designed and manufactured for the management and/or disposal of sharps. The container must be labeled with the international biohazard symbol and the word "sharps."
2. Unused and non-infectious sharps such as hypodermic needs, syringes, hard plastic pipets, and scalpel blades that are not infectious or are unused, can be discarded in a cardboard box lined with a plastic bag. Used intravenous bags, bottles, and tubing that are not contaminated with blood or attached to a needle are not classified as infectious wastes.
3. Untreated liquid or semi-liquid infectious waste consisting of blood, blood products, body fluids, and excreta may be disposed of into a sanitary sewer if the disposal is allowed for the waste water treatment system.
4. All other infectious wastes must be directly placed in red plastic bags manufactured for infectious waste disposal or a bag labeled with an international biohazard symbol that is at least 5 inches in diameter. The bag must be impervious to moisture; constructed of a single thickness to prevent ripping, tearing, or bursting under normal handling conditions; able to hold 25 pounds of water while being carried from its top for 60 seconds without leakage; and securely tied or sealed to prevent leakage or spillage of wastes during storage, handling or transport.
5. While processing a crime scene, staff shall be alert for the presence of sharp objects such as hypodermic needles, knives, razors, broken glass, nails and other sharp objects, as well as for blood and other body fluids.
6. Protective containers shall be used for all contaminated evidence. Sharp items shall be placed in puncture proof containers. Other items shall be placed in plastic bags and sealed to prevent leakage and clearly marked as hazardous.

C. Handling and Storage Requirements

1. Packaged infectious wastes must be handled and stored in a manner that maintains the integrity of the packaging and maintains the infectious wastes in a non-putrescent state, using refrigeration or freezing when necessary. It must also protect the infectious waste from becoming a food source for insects or animals. The storage area must be locked and

marked with a sign that states “WARNING: INFECTIOUS WASTE” and/or displays the international biohazard symbol. Any outside storage areas must be locked to prevent unauthorized access.

2. Any infectious waste or infectious waste mixture that meets the definition of a hazardous waste shall be managed as a hazardous waste under the Ohio EPA guidelines for handling hazardous wastes.

D. Infectious Waste Spills

1. Each facility shall have staff and/or inmates who are properly trained and responsible for the containment and clean-up of infectious waste spills. The facility Health and Safety Coordinator shall ensure that all staff and/or inmates assigned to responsibilities involving the containment or clean-up of infectious waste spills are trained to properly handle and manage infectious waste spills in compliance with this directive and the local spill containment and clean-up procedures. Documentation of such training must be available in the staff member’s training record or the inmate file in OnBase. Inmate training shall be documented on the Inmate Training Form (DRC1953).
2. Each facility must maintain a spill containment and clean-up kit in the general area where infectious waste is handled. Such kits shall contain the following items:
 - a. Materials designed to absorb spilled liquids;
 - b. Red or biohazard labeled bag(s);
 - c. An U.S. EPA Registered hospital disinfectant that is also tuberculocidal, or materials necessary to prepare a minimum 10% sodium hypochlorite solution using an unexpired household bleach (5.25-6.15%) with minimum contact time of 30 minutes;
 - d. Disposable gloves and personal protective equipment;
 - e. Boundary tape, first aid kit, and other appropriate safety equipment.
3. Each facility must develop and implement written local policy and procedures to address spill containment and clean-up procedures. The spill containment and clean-up procedures shall be modeled after the template attached to this policy as Appendix A and must include the following:
 - a. The name, address and telephone number of the Infectious Waste Control Manager and their back-up must appear at the top of the spill containment and clean-up procedure;
 - b. Universal precautions shall be followed for all infectious waste spills, as established in Department Policy 68-MED-18, Infection Control Activities.
 - c. Procedures must limit access to spill areas to authorized personnel;
 - d. The clean-up crew must utilize the appropriate personal protective equipment;
 - e. Any broken containers and spilled materials must be placed in the appropriate infectious waste containers.
 - f. Absorbent materials must be used to collect any spilled liquids, and this material must be managed as infectious waste after use;
 - g. After all materials have been picked up, the contaminated area must be thoroughly cleaned and then the spill area must be disinfected. The spill containment and clean-

- up procedures must specify how to properly disinfect the area using the correct chemicals as specified in this policy;
- h. Any non-disposable items must also be cleaned and disinfected, using the correct disinfectant specified in this policy.
 - i. Personal protective equipment must also be removed and all disposable items managed as infectious waste.
 - j. Contact information to call for emergency help when needed.
4. A copy of the written policy and procedure must be posted or readily available in appropriate locations for all people likely to handle infectious wastes. Copies of the procedure shall be provided at the request of the board of health with jurisdiction or the Director of the Ohio EPA or their authorized representative.

E. Infectious Waste Treatment

1. Packaging Requirements

- a. Bags of regulated waste to be sent to an infectious waste treatment facility must be placed inside of a fully enclosed, sturdy container.
- b. If containers are used they must be disposable (cardboard) or reusable; labeled with the international biohazard symbol on at least two opposite sides; in good repair, clean on the outside, leak resistant, and able to withstand handling.
- c. If reusable, they must be disinfected between uses with a detergent and disinfectant. The disinfectant must be a U.S. EPA registered hospital disinfectant that is also a tuberculocidal. A 10% vol/vol of household bleach (5.25-6.15%) may be used instead of the registered hospital disinfectant.

2. Registered Infectious Waste Transporter

- a. Facilities may not transport infectious waste, as ODRC is not certified as a registered infectious waste transporter. Untreated infectious wastes must be transported by a business that is registered with the Ohio EPA to transport infectious waste.

3. Treatment Shipping Papers

- a. A treatment shipping paper must accompany all shipments of untreated infectious waste that are being transported.
- b. Each facility must retain the yellow copy of the treatment shipping papers and match it to the white copy that has been signed by the treatment facility and returned to the facility.
- c. If the treatment facility does not return a signed white copy of the treatment shipping papers to the facility within 30 days of shipment, facility staff shall contact the transporter to obtain the shipping papers.
- d. If the treatment facility does not return a signed white copy of the treatment shipping papers to the facility within 45 days of shipment, facility staff shall contact the treatment facility and/or transporter to verify that the waste was treated. Facility staff shall write a letter to the Board of Health and Ohio EPA outlining staff's efforts to

verify the receipt and treatment of the waste and measures taken to obtain copies of the treatment shipping paper.

- e. All treatment shipping papers must be maintained for a minimum of three years.

Related Department Forms:

Inmate Training Form DRC1953

Appendix A

Infectious Waste Control Manager

Name:

Address:

Phone:

Backup Contact

Name:

Address:

Phone:

INFECTIOUS WASTE SPILL CONTAINMENT AND CLEANUP PROCEDURES

I. SECURE THE AREA

- A. No unauthorized persons shall be allowed into the contaminated area. Authorized persons are those responsible for Investigation, Health and Safety Coordinator, and others specifically authorized by the managing officer.
- B. **Do not** attempt to clean the spill unless trained to do so.

II. NOTIFY THE DESIGNATED OFFICIAL AND ALERT OTHER SITE PERSONNEL.

- A. Notify the Shift Supervisor as soon as possible of the contaminated area. Inform the shift supervisor if emergency medical help is needed to assist any injured persons.
- B. The Shift Supervisor will call for the Spill Clean-Up Crew using the roster provided to the shift by the Infectious Waste Manager.
 - The Shift Supervisor is responsible to initiate a cleanup of the spill immediately to protect from spreading the contamination. Universal precautions shall be followed for all infectious waste spills.
 - A designee of the Shift Supervisor will escort this crew along with their Spill Clean-Up Kit to the scene, when needed.
 - The Spill Clean-Up Crew will conduct the procedures within the scope of their training to return the scene to a safe condition; ensuring proper handling and disposal of suspected infectious material.
 - The Spill Clean-Up Crew should be used for infectious waste clean-ups only.
- C. Notify the Infectious Waste Manager that the Spill Clean-Up Crew has been utilized.
 - The Shift Supervisor will immediately notify the Infectious Waste Manager verbally by phone and also in writing with a copy of the Incident Report (DRC 1000) if the spill is within normal business hours.
 - If the spill is after normal business hours, the Shift Supervisor will notify the Infectious Waste Manager at the onset of the next business day.

III. PERSONAL PROTECTIVE EQUIPMENT (PPE)

- A. Personal Protective Equipment is required for all infectious waste spill containment and clean-up procedures.
- B. Protective gloves impervious to body fluids must be worn by all persons participating in the clean up, regardless of the size of the spill. Double gloving is recommended.
- C. If the spill is large or spread beyond a small area, additional protective equipment shall be utilized by trained staff or the Spill Clean-Up Crew.
- D. The Spill Clean-Up Kit(s) will include all necessary Personal Protective Equipment and materials necessary to complete the procedure. The location of the Spill Clean-Up Kit and additional Personal Protective Equipment supplies such as gloves, tyvec suits, gowns, masks, goggles, etc. shall be determined by the Infectious Waste Manager.

Appendix A

IV. PROCEDURES FOR SPILL CLEAN-UP CREW

- A. Select and wear the appropriate Personal Protective Equipment for the procedure.
- B. All contaminated clothing and bedding should be secured in the following manner:
 - State property shall be secured in a water-soluble bag, then securely placed in a biohazard bag and labeled for delivery to the laundry.
 - Personal property shall be secured in a water-soluble bag, then securely placed in a biohazard bag and labeled for delivery to the laundry.
- C. If the spill is large or scattered, spread absorbent materials onto the spill to absorb the fluid. The resulting mass should be picked up and placed in a biohazard bag for disposal.
- D. Spray the spill area with one of the following disinfectants:
 - A U.S. EPA registered hospital disinfectant that is also tuberculocidal, for a contact time as specified by the manufacturer.
 - A minimum 10% sodium hypochlorite solution that is prepared immediately prior to use with a minimum thirty minutes of contact time with the waste. [Comment: household bleach must be 5.25-6.15% sodium hypochlorite by volume. A 1:10 dilution of household bleach (one part household bleach to nine parts of water) contains a minimum 10% volume/volume sodium hypochlorite solution and will produce a solution with 5250-6150 parts per million of free available chlorine. To make a 10% household bleach solution for disinfection, add approximately 6.4 ounces of household bleach to 57.6 ounces of tap water. This yields ½ gallon of solution.]
- E. Wipe up any remaining spill with an absorbent rag or paper towel.
- F. Dispose of the absorbent materials by placing them in the biohazard bag.
- G. Repeat this procedure until no traces of infectious waste are visible.
- H. Repeat this procedure once more for final disinfection.
- I. Remove all Personal Protective Equipment.
 - All disposable Personal Protective Equipment including gloves must be placed in the biohazard bag.
 - All non-disposable Personal Protective Equipment must be cleaned and disinfected after each use.
- J. Securely tie or seal the biohazard bag to prevent leakage or expulsion of wastes from them during storage, handling or transport.
- K. Deliver the sealed biohazard bag(s) containing the disposable contaminated materials to the designated secure biohazard area for proper disposal.
- L. Deliver the sealed biohazard bag(s) containing state or personal property to the laundry if during normal business hours. If the delivery is after normal business hours, deliver to the Shift Supervisor's Office. The Shift Supervisor will ensure the bags are delivered to the laundry at the onset of the next business day.
- L. Return the Spill Clean-Up Kit to the location designated by the Infectious Waste Manager to restock supplies.
- M. Wash hands thoroughly with generous amounts of water and hand soap, or other mild detergents.

Appendix A

V. Additional Information

- A. The Spill Clean-Up Kit is to be used only by trained staff and or inmates trained and assigned to responsibilities involved in this procedure (Spill Clean-Up Crew), and maintained in a location determined by the Infectious Waste Manager.
- B. After the Spill Clean-Up Crew has completed its task to return the area to a safe condition, they should be allowed a shower in their housing unit. If there has been some type of exposure to one of the team members clothing, it will not be permitted to be worn back to the housing unit. The clothing should be secured in a water-soluble bag, then placed in a biohazard bag and labeled with the inmates name, number and housing unit. The Shift Supervisor should ensure the bag is delivered to the laundry and also make arrangements to secure appropriate clothing for this individual prior to return to their unit.
- C. Only contaminated items need to be placed into the biohazard bag(s).
- D. Broken containers and spilled materials must be directly placed in red plastic bags manufactured for infectious waste disposal, or a bag labeled with an international biohazard symbol that is at least 5 inches in diameter. The bag must be impervious to moisture, constructed of a single thickness to prevent ripping, tearing, or bursting under normal handling conditions; able to hold 25 pounds of water while being carried from its top for 60 seconds without leakage; and securely tied or sealed to prevent leakage or spillage of wastes during storage, handling or transport.