#### Clinical Waste Policy for Care Home

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| Reviewed on 11.06.2023 | Next Review date on 10.06.2024 |

#### 1. Introduction

**1.1 Purpose:**

The purpose of this clinical waste policy is to provide guidelines and procedures for the safe and effective management of clinical waste within a care home setting. It aims to ensure compliance with relevant legislation, minimize risks to residents, staff, and the environment, and promote a clean and hygienic care home environment.

#### 1.2 Scope:

This policy applies to all staff members involved in the handling, storage, disposal, and documentation of clinical waste within the care home premises. It encompasses all areas where clinical waste may be generated, including resident rooms, treatment areas, communal spaces, and staff areas.

#### 2. Definitions

**2.1 Clinical Waste:**

Clinical waste refers to any waste that contains potentially infectious or hazardous materials resulting from healthcare activities. This includes but is not limited to sharps (needles, syringes, lancets), soiled dressings, contaminated personal protective equipment (PPE), discarded medical devices, and laboratory specimens.

**2.2 Care Home Waste:**  
Care home waste refers to any waste that is not classified as clinical waste but is generated within the care home, such as general waste, recyclables, and non-hazardous waste materials.

#### 3. Responsibilities

**3.1 Care Home Management:**  
The care home management is responsible for ensuring that an effective clinical waste management system is in place. This includes providing adequate resources, training, and supervision to staff, implementing appropriate waste segregation measures, and maintaining compliance with regulatory requirements.

**3.2 Staff Members:**  
All staff members have a responsibility to adhere to this clinical waste policy. They should receive training on waste management practices, follow proper waste segregation protocols, use designated waste containers correctly, and report any issues or concerns to the appropriate authority.

#### 4. Waste Segregation and Handling

**4.1 Segregation:**  
All staff members must segregate clinical waste from non-clinical waste at the point of generation. Segregation should be based on the waste classification and color-coded containers provided, following national and local guidelines.

The Legend House has hand washing facilities for staff, visitors and heath care professionals at the entrance of the Home. All staff to continue following good donning and doffing practice. Donning guide is on each resident door to remind staff good practice .Doffing guide in resident’s bathrooms. Remove all PPE in yellow bin located in residents bathrooms. All dirty washing needs to be put straight in the washing machine, in case machine is in use staff to Leave dirty washing outside ,not to mix with clean. Red bags are used for soiled laundry only and tide with a dissoluble string attached at the bottom of the bag. Yellow line bags are used only for clinical waste-pads, empty catheter leg bags Wear visors when attending to residents who have tested positive to COVID19.Dispose visors outside of the bedroom in the bin provided. Dispose masks outside of the bedroom in the bin provided.

**4.2 Waste Containers:**  
Designated clinical waste containers should be provided throughout the care home. These containers should be clearly labeled, leak-proof, and appropriately sized for the volume of waste generated. Staff should ensure that waste is placed in the correct containers and that containers are securely closed when not in use.

**4.3 Sharps Disposal:**  
Sharps, including needles, syringes, and lancets, must be disposed of in puncture-resistant sharps containers. These containers should be located in easily accessible areas and should never be overfilled. Staff should never recap or bend sharps and should follow safe handling procedures to minimize the risk of injuries.

**4.4 Storage:**  
Clinical waste should be stored in designated secure areas that are inaccessible to unauthorized personnel. Storage areas should be well-ventilated, well-lit, and easily cleaned. Waste containers should be stored off the floor and away from food preparation areas to prevent contamination.

#### 5. Waste Collection and Disposal

**5.1 Scheduled Collections:**  
Arrangements should be made for regular and timely collections of clinical waste by a licensed waste management contractor. Collections should be scheduled to prevent overfilling of containers and minimize the accumulation of waste.

**5.2 Documentation:**  
Accurate and up-to-date records of clinical waste collections should be maintained. This includes waste transfer notes, consignment notes, and any other required documentation as per local regulations. Records should be securely stored for the recommended retention period.

**5.3 Disposal Methods:**  
Clinical waste should be disposed of through licensed and authorized waste management facilities. Disposal methods should comply with local regulations and best practices, ensuring the safe and environmentally responsible handling of clinical waste.

#### 6. Training and Education

**6.1 Staff Training:**  
All staff members involved in the handling and management of clinical waste should receive comprehensive training on waste segregation, safe handling procedures, infection control practices, and emergency response protocols. Training should be documented, and regular refresher sessions should be conducted.

**6.2 Awareness Programs:**  
The care home management should conduct awareness programs to educate staff and residents about the importance of proper waste management practices, the risks associated with improper handling of clinical waste, and the care home's commitment to environmental stewardship.

#### 7. Monitoring and Auditing

**7.1 Regular Audits:**  
Periodic audits should be conducted to assess compliance with the clinical waste policy and identify areas for improvement. Audits may include waste segregation checks, container inspections, documentation reviews, and staff interviews.

**7.2 Incident Reporting:**  
Staff should be encouraged to report any incidents, accidents, or near-misses related to clinical waste management. Incidents should be thoroughly investigated, and corrective actions should be implemented to prevent recurrence.

#### 8. Review and Updates

**8.1 Policy Review:**  
This clinical waste policy should be reviewed regularly to ensure its continued effectiveness and compliance with regulatory requirements. Updates should be made as necessary, and staff members should be notified of any policy changes.

**8.2 Communication:**  
The care home management should ensure that this policy is effectively communicated to all staff members, residents, and relevant stakeholders. It should be readily accessible, and staff members should receive training and updates on policy changes.

#### Conclusion:

The implementation of an effective clinical waste policy in a care home is crucial for maintaining a safe and hygienic environment for residents, staff, and visitors. By adhering to the guidelines and procedures outlined in this policy, the care home can ensure the proper segregation, handling, storage, and disposal of clinical waste. This, in turn, promotes infection control, minimizes risks, and demonstrates a commitment to the well-being of all individuals within the care home setting.