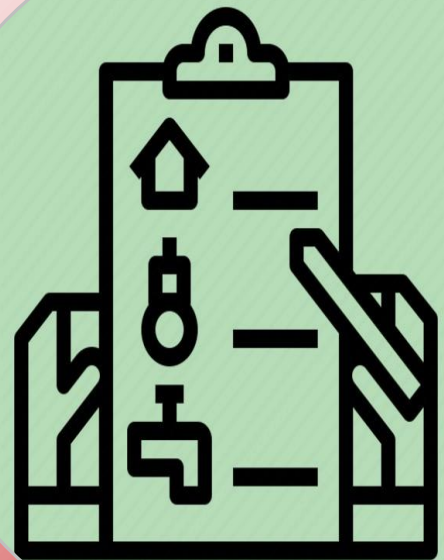




OHSC

Office of Health Standards Compliance
Ensuring quality and safety in health care

Regulatory Central Hospital Inspection Tool v1.0



Health Care Waste Management



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|-----------|
| Facility: |
| Date: |

- **Tool Name:** Regulatory Central Hospital Inspection Tool v1.0
- **HEs Type:** Hospitals
- **Sector:** Public
- **Specialization:** Central
- **Created By:** Health Standards Development and Training

Health Care Waste Management

Domain 37.2 CLINICAL GOVERNANCE AND CLINICAL CARE

Sub Domain 37.2.1 7 Clinical management.

Standard 37.2.1.1 7(2) (b) A health establishment must establish and maintain systems, structures and programmes to manage clinical risk.

Criterion 37.2.1.1.1 7 The establishment must have undertaken a health care risk waste management process in the previous two years to identify the hazardous waste that it generates and must establish how to deal with it safely.

37.2.1.1.1.1 The health care risk waste management assessment report is available.

Assessment type: Document - **Risk rating:** Essential measure

The purpose of the assessment is to identify the hazards associated with hazardous waste. The management report of the assessment undertaken must be available.

Not applicable: Never

| Score | Comment |
|-------|---------|
| | |

37.2.1.1.1.2 The management plan addresses the risks identified in the health care risk waste management report.

Assessment type: Document - **Risk rating:** Essential measure

The document aims to ensure minimisation of risks associated with hazardous waste. The health care risk waste risk assessment report and the management plan must be available. The document must be signed and dated.

Not applicable: Never

| Score | Comment |
|-------|---------|
| | |

37.2.1.1.1.3 Actions taken to address the risks identified in the health care risk waste report are documented.

Assessment type: Document - **Risk rating:** Essential measure

The health care risk waste management implementation report must be available. The document must be signed and dated.

Not applicable: Where there were no risks identified.

| Score | Comment |
|-------|---------|
| | |

Criterion 37.2.1.1.2 7 The health establishment must implement an effective waste management procedure within the health establishment and buildings and grounds.

37.2.1.1.2.1 The health establishment has a waste management committee.

Assessment type: Document - **Risk rating:** Essential measure

As required by the Practical Manual for Implementation of the National Infection Prevention and Control Strategic Framework 2020 in page 75. Waste management committee members must be designated by means of signed letters of appointment. Request letters of the committee members listed below. Score 1 if a signed letter is available and 0 if not available.

| Score | Comment | |
|---|---------|---------|
| | | |
| Aspects | Score | Comment |
| 1. Designated or appointed health care waste management officer (ideally an environmental health practitioner) | | |
| 2. Representative of section responsible for infection and prevention control | | |
| 3. Chief executive officer/facility manager | | |
| 4. Representative of section responsible for quality control | | |
| 5. Representative of the section responsible for procurement and contract management | | |
| 6. Nominated health and safety representative | | |
| 7. Representative of section responsible for cleaning and hygiene services | | |
| 8. Representative of section responsible for occupational health and safety | | |
| Reference: • Practical Manual for Implementation of the National Infection Prevention and Control Strategic Framework. March 2020 | | |

37.2.1.1.2.2 Waste management’s practices are discussed.

Assessment type: Document - **Risk rating:** Essential measure

Manual or electronic minutes from the forum’s meeting for the previous quarter should reflect discussions on waste management practices. The minutes must be dated and signed and include an attendance register (Note that minutes will not be signed if the subsequent meeting has not taken place).

Not applicable: Never

| Score | Comment |
|-------|---------|
| | |

Criterion 37.2.1.1.3 7 The health establishment must have a functional quality management system.

37.2.1.1.3.1 Quality improvement plans are developed by health care personnel.

Assessment type: Document - **Risk rating:** Essential measure

Request the quality improvement plan of the unit from the previous six months. Verify whether the aspects listed below are documented. Score if aspect is documented and 0 if not. Score not applicable where no gaps have been identified.

| Score | Comment | |
|--|---------|---------|
| | | |
| Aspects | Score | Comment |
| 1. Gaps identified | | |
| 2. Activities required to address gaps | | |

| | | |
|--------------------------------------|--|--|
| 3. Health care personnel responsible | | |
| 4. Time frames | | |

37.2.1.1.3.2 Corrective action has been taken to improve the quality of service provided where gaps are identified.

Assessment type: Document - **Risk rating:** Essential measure

Evidence must be available that the action specified in the quality improvement plan was implemented.

Not applicable: Where there were no gaps identified.

| Score | Comment |
|-------|---------|
| | |

Sub Domain 37.2.2 8 Infection prevention and control programmes.

Standard 37.2.2.1 8(1) The health establishment must maintain an environment, which minimises the risk of disease outbreaks, the transmission of infection to users, health care personnel and visitors.

Criterion 37.2.2.1.1 8(2)(a) The health establishment must ensure that there are hand washing facilities in every service area.

37.2.2.1.1.1 Hand washing facilities are available for waste management personnel.

Assessment type: Observation - **Risk rating:** Vital measure

Select one area in the unit and inspect the handwashing facilities for the items listed below. Score 1 If the item is available and 0 if not available.

| Score | Comment | |
|---|---------|---------|
| | | |
| Aspects | Score | Comment |
| 1. Functional hand wash basin. Explanatory note: The basin should not be blocked, broken or have cracks. | | |
| 2. Taps are functional and not broken | | |
| 3. Plain liquid soap | | |
| 4. Wall mounted soap dispenser | | |
| 5. Paper towel dispenser with disposable hand paper towels | | |
| 6. General waste container. Explanatory note: Containers used for the temporary storage of general waste should be leak proof, intact, corrosive resistant and have a tight-fitting lid. The container must be lined with the appropriate colour coded liner. (Practical Manual: Implementation of the National Infection Prevention and Control Strategic Framework page 82 and page 84). | | |

37.2.2.1.1.2 Alcohol based hand rub is available.

Assessment type: Observation - **Risk rating:** Vital measure

Observe whether alcohol-based hand rub is available.

Not applicable: Never.

| Score | Comment |
|-------|---------|
| | |

37.2.2.1.1.3 Posters on hand hygiene are displayed.

Assessment type: Observation - **Risk rating:** Essential measure

Observe whether posters on hand hygiene are displayed. This could be a single hand hygiene poster or individual posters for hand washing or correct use of alcohol-based hand rub.

Not applicable: Never

| Score | Comment |
|-------|---------|
| | |

Criterion 37.2.2.1.2 8(2)(d) The health establishment must ensure that health care personnel are protected from acquiring infections through the use of personal protective equipment and prophylactic immunisations.

37.2.2.1.2.1 Personal protective equipment is worn.

Assessment type: Observation - **Risk rating:** Vital measure

Select three healthcare workers and verify whether protective clothing and equipment is worn. Score 1 if the items are worn and 0 if not worn. Score not applicable where at the time of the inspection, personnel are not in a situation in which they are required to wear protective clothing.

| Score | Comment |
|-------|---------|
| | |

Unit 1 Health care worker 1

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Heavy duty domestic rubber gloves | | |
| 2. Overalls or uniform | | |
| 3. Full-length heavy-duty aprons | | |
| 4. Respirator or appropriate mask or approved equivalent | | |
| 5. Closed-toe shoes or water-resistant boots | | |

Unit 2 Health care worker 2

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Heavy duty domestic rubber gloves | | |
| 2. Overalls or uniform | | |
| 3. Full-length heavy-duty aprons | | |
| 4. Respirator or appropriate mask or approved equivalent | | |
| 5. Closed-toe shoes or water-resistant boots | | |

Unit 3 Health care worker 3

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Heavy duty domestic rubber gloves | | |
| 2. Overalls or uniform | | |
| 3. Full-length heavy-duty aprons | | |
| 4. Respirator or appropriate mask or approved equivalent | | |
| 5. Closed-toe shoes or water-resistant boots | | |

Sub Domain 37.2.3 9 Waste management.

Standard 37.2.3.1 9(1) The health establishment must ensure that waste is handled, stored, and disposed of safely in accordance with the law.

Criterion 37.2.3.1.1 9(2)(a) The health establishment must have appropriate waste containers at the point of waste generation.

37.2.3.1.1.1 Replacement containers for disposal of all types of waste are available in the storage area.

Assessment type: Observation - **Risk rating:** Vital measure

Verify whether the waste containers listed below are available. Health care risk waste containers must have the appropriate international hazard symbol and be marked as prescribed in the SANS 10248-1:

Management of Health Care Waste, Part 1: Management of healthcare risk waste from a health facility. Score 1 if the waste container is available and 0 if not available.

| Score | Comment | |
|---|---------|---------|
| | | |
| Aspects | Score | Comment |
| 1. Human anatomical waste (red bucket with tight fitting lid) | | |
| 2. Infectious non-anatomical waste (red) | | |
| 3. Sharps (yellow) | | |
| 4. Chemical waste including pharmaceutical, cytotoxic or genotoxic | | |
| 5. Pharmaceutical waste (dark green) | | |
| 6. General waste (black, beige, white or transparent packaging may be used) | | |

Criterion 37.2.3.1.2 9(2)(b) The health establishment must implement procedures for the collection, handling, storage and disposal of waste.

37.2.3.1.2.1 The health care waste management plan complies with legal requirements and national guidelines.

Assessment type: Document - **Risk rating:** Essential measure

Verify whether the aspects listed below are included and explained in the waste management plan. Waste management plan must be updated if waste management practices /generation patterns change in the health establishment. Score 1 if the aspect is included and explained and 0 if not included or not explained.

| Score | Comment | |
|---|---------|---------|
| | | |
| Aspects | Score | Comment |
| 1. Health establishment information related to workload | | |
| 2. Contact details of person in charge of waste management (health care waste officer) | | |
| 3. Classification of waste streams | | |
| 4. Assessment of quantity of waste that will be generated | | |
| 5. Categories of waste that will be generated. | | |
| 6. Description of waste management systems/services provided on generation, storage, collection, transportation, treatment and disposal of such waste | | |
| 7. Contract with service provider for collection and final disposal to licensed waste disposal facility | | |

| | | |
|--|--|--|
| 8. Description of separation of recyclable and non-recyclable waste at point of waste generation | | |
| 9. Waste minimisation measures such as reduction, reuse and recovery | | |
| 10. Pollution prevention measures to minimise impact or potential impact on environment | | |
| 11. Health risk minimisation measures to protect public and any workers | | |
| 12. Remedial measures to be implemented | | |
| 13. Those responsible for generating contaminated waste are trained at the time of employment and training is refreshed periodically; training must include infection prevention and control and occupational health | | |
| 14. Those responsible for handling contaminated waste are trained at the time of employment and training is refreshed periodically; training must include infection prevention and control and occupational health <i>References: • Practical Manual for Implementation of the National Infection Prevention and Control Strategic Framework. March 2020 • National Environmental Health Norms and Standards for premises and acceptable monitoring standards for environmental health practitioners 2015</i> | | |

37.2.3.1.2.2 A waste collection schedule for all service areas is available.

Assessment type: Document - **Risk rating:** Vital measure

Regular waste collection in the health establishment is an important aspect of infection prevention and control. The waste collection schedule must indicate the date and time for collection of waste in various sections of the health establishment.

Not applicable: Never

| Score | Comment |
|-------|---------|
| | |

37.2.3.1.2.3 Waste is collected daily from clinical areas, clinical support areas and non-clinical areas in accordance with the schedule.

Assessment type: Document - **Risk rating:** Vital measure

Waste must be collected from temporary/intermediate storage areas daily to prevent overflow and to minimise infection control risks. A record kept by the waste management unit must indicate that waste is collected daily in the health establishment. This may be captured in a register or other documented record. Evidence may be manual or electronic.

Not applicable: Never

Reference: Practical Manual for Implementation of the National Infection Prevention and Control Strategic Framework March 2020. National Infection Prevention and Control Strategic Framework. March 2020

| Score | Comment |
|-------|---------|
| | |

37.2.3.1.2.4 The health establishment has closed or lockable or sealable containers or trolleys for transportation of waste.

Assessment type: Observation - **Risk rating:** Vital measure

Verify whether the health establishment has closed or lockable or sealable containers or trolleys for transportation of waste.

Not applicable: Never.

Reference: Practical Manual for Implementation of the National Infection Prevention and Control Strategic Framework. March 2020 (pg.81)

| Score | Comment |
|-------|---------|
| | |

| | |
|--|--|
| | |
|--|--|

37.2.3.1.2.5 The health care risk waste central storage area must meet the requirements listed below.

Assessment type: Observation - **Risk rating:** Vital measure

Inspect the central storage area which is the area where waste is stored while awaiting collection by the waste removal service provider to verify it complies with the aspects listed below. Score 1 if the aspect is compliant and 0 if not compliant. The central storage areas for health care risk waste must comply with SANS 10248:2004, edition 2 and the National Norms and Standards for Environmental Health, 2015.

| Score | Comment | |
|--|---------|---------|
| | | |
| Aspects | Score | Comment |
| 1. Adequate space is available to store waste containers | | |
| 2. Area is enclosed and protected from natural elements such as rain, wind and sun | | |
| 3. Area is vermin proof, i.e. enclosed to prevent insects and rodents, etc. from entering storage area | | |
| 4. Area has a smooth, slip resistant and non-porous floor with a good drainage system connected to municipal/council sewerage | | |
| 5. Area has a display board with name and contact details of person responsible for waste management | | |
| 6. Area is marked with international biohazard symbol | | |
| 7. Area is well ventilated | | |
| 8. Area is well lit | | |
| 9. Area is locked and not accessible to unauthorised personnel, as indicated through "No unauthorised entry" signs | | |
| 10. Area is equipped with spill kit, i.e. container with items required to manage spillages, e.g. disinfectants and absorbent material. Other health establishments will use Chemical spill kit. | | |
| 11. Area has a refrigeration facility for waste storage at low temperatures. Explanatory note: This can be available in an area which is in close proximity to the Central storage area. | | |
| 12. Refrigeration facility maintained at -2 degrees Celsius. Explanatory note: This can be available in an area which is in close proximity to the Central storage area. | | |
| 13. All waste in refrigeration facility is appropriately containerised | | |
| 14. Register available for waste stored in refrigeration facility | | |
| 15. Area has access to fire extinguisher | | |
| <i>References: • Practical Manual for Implementation of the National Infection Prevention and Control Strategic Framework. March 2020. • National Environmental Health Norms and Standards for premises and acceptable monitoring standards for environmental health practitioners 2015.</i> | | |

37.2.3.1.2.6 The outside general waste storage area is well maintained and poses no health risk.

Assessment type: Observation - **Risk rating:** Essential measure

The area must be access-controlled and protected against scavenging or theft. Waste must be kept inside the containers. Skip bins must be located at the back of the main buildings or in an area that is not easily accessible by the public. A well-built storage area with lockable mesh wire is also acceptable.

Not applicable: Never

| Score | Comment |
|-------|---------|
| | |

37.2.3.1.2.7 Health care risk waste containers are labelled before transportation for disposal.

Assessment type: Observation - **Risk rating:** Essential measure

Healthcare risk waste containers must be labelled with colour codes and the international biohazard symbol for health care risk waste as prescribed in SANS 10248-1-Management of Health Care Waste, Part 1: Management of healthcare risk waste from a healthcare facility. (National Environmental Health Norms and Standards for Premises and Acceptable Monitoring Standards for Environmental Health Practitioners 2015). Verify whether containers ready for collection by service providers have been labelled as listed below. Score 1 if the container is labelled and 0 if not labelled.

| Score | Comment | |
|---|---------|---------|
| | | |
| Aspects | Score | Comment |
| 1. Name of appointed service provider is identified on health care risk waste container/s | | |
| 2. Waste containers are marked with international biohazard symbol | | |
| 3. Waste containers are colour-coded and labelled appropriately | | |

37.2.3.1.2.8 Health care risk waste for disposal is documented.

Assessment type: Document - **Risk rating:** Essential measure

Request records from the previous three months and verify whether waste destined for disposal is documented as listed below. Score 1 if documented and 0 if not documented.

| Score | Comment | |
|---|---------|---------|
| | | |
| Aspects | Score | Comment |
| 1. All waste for disposal is registered | | |
| 2. All waste for disposal is weighed | | |
| 3. All waste for disposal is signed over to authorised service provider | | |

37.2.3.1.2.9 The service level agreement for removal and safe disposal of waste is monitored for compliance.

Assessment type: Document - **Risk rating:** Vital measure

Request records from the previous six months and check whether the service level agreement is monitored. Evidence could include but is not limited to signed monitoring checklists, minutes of meetings and reports.

Not applicable: Never.

| Score | Comment |
|-------|---------|
| | |

| | |
|--|--|
| | |
|--|--|

37.2.3.1.2.10 Remedial action is taken to rectify the breaches identified.

Assessment type: Document - **Risk rating:** Vital measure

A document reflecting actions taken to rectify identified breaches in the terms of the service level agreement is available.

Not applicable: Where breaches were not identified.

| Score | Comment |
|-------|---------|
| | |

Domain 37.4 GOVERNANCE AND HUMAN RESOURCES

Sub Domain 37.4.1 20 Occupational health and safety.

Standard 37.4.1.1 20(1) The health establishment must comply with the requirements of the Occupational Health and Safety Act, 1993.

Criterion 37.4.1.1.1 20 Measures must be in place to minimise the incidence of critical occupationally acquired injuries and diseases.

37.4.1.1.1.1 Occupational health and safety incidents are reported to the responsible person.

Assessment type: Document - **Risk rating:** Vital measure

All occupational health and safety incidents involving waste personnel must be reported. A register or similar document for recording occupational health and safety incidents must be available at the waste management unit. Where no incidents have occurred, zero reporting must be done.

Not applicable: Never

| Score | Comment |
|-------|---------|
| | |

37.4.1.1.1.2 Health care personnel are able to explain which occupational health and safety incidents must be reported immediately.

Assessment type: Staff interview - **Risk rating:** Essential measure

Interview three health care personnel to determine whether they are aware of occupational health and safety incidents that must be reported immediately. Score 1 if the health care personnel answers the questions below correctly and 0 if not.

| Score | Comment |
|-------|---------|
| | |

Unit 1 Health care personnel 1

| Aspects | Score | Comment |
|---|-------|---------|
| 1. Exposure to blood and body fluids either due to a sharp's injury or spillage | | |
| 2. Exposure to chemicals, radiation and other noxious substance | | |
| 3. Back injury or physical injury during transportation of waste | | |

Unit 2 Health care personnel 2

| Aspects | Score | Comment |
|---|-------|---------|
| 1. Exposure to blood and body fluids either due to a sharp's injury or spillage | | |
| 2. Exposure to chemicals, radiation and other noxious substance | | |
| 3. Back injury or physical injury during transportation of waste | | |

Unit 3 Health care personnel 3

| Aspects | Score | Comment |
|---|--------------|----------------|
| 1. Exposure to blood and body fluids either due to a sharp's injury or spillage | | |
| 2. Exposure to chemicals, radiation and other noxious substance | | |
| 3. Back injury or physical injury during transportation of waste | | |

Official Sign-Off

The National Health Act, 2003 (Act No. 61 of 2003) provides for quality requirements and standards in respect of health services provided by health establishments to the public. The main objective is to promote and protect the health and safety of the users of health services and contribute to improved outcomes and improved population health. To achieve this mandate standardised inspection tools aligned to Norms and Standards Regulations applicable to different categories of health establishments promulgated by the Minister of Health in 2018 have been developed for Central Hospitals.

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It is hereby certified that the Regulatory Central Hospital Inspection Tools version 1.0 was developed by the Office of Health Standards Compliance.

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A decorative graphic on the left side of the page, consisting of three curved, overlapping bands of color: a dark blue band at the top, a red band in the middle, and a green band at the bottom. The bands curve from the left edge towards the right, creating a sense of movement and depth.