

TITLE: HAZARDOUS MATERIALS AND WASTE MANAGEMENT PLAN		
FACILITY: St. Vincent's East	FUNCTION:	ORIGINATING DEPT: Safety
HOSPITAL SHARED POLICY? _X Yes __ No		EFFECTIVE DATE: 11/05/97
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SCOPE: This plan applies to all St. Vincent's East associates, Medical Staff, contracted employees, and volunteers for all components of the health care organization.
PURPOSE: The Hazardous Materials Management Plan is based on the mission, vision and values of St. Vincent's East and is designed, taught, implemented, measured, assessed, changed and improved to provide a safe environment for patients, visitors and staff as it relates to the handling and disposal of hazardous materials and waste.
DEFINITIONS: Hazardous materials (HAZMAT) and waste – Materials whose handling, use, and storage are guided or defined by local, state, or federal regulation -for example, the Occupational Safety and Health Administration's Regulations for Blood-Borne Pathogens regarding the disposal of blood and blood-soaked items; the Nuclear Regulatory Commission's regulations for the handling of radioactive waste, hazardous vapors (for example, nitrous oxide), and hazardous energy sources (for example, ionizing and non-ionizing radiation, lasers, microwave, ultrasound).
POLICY:

*The contents of this document rescind any previous document covering similar material.
The online version of this document is deemed current.*

The objective of the Hazardous Materials management plan is to communicate to St. Vincent's East associates the processes for managing hazardous materials and waste. The Hazardous Materials Management Program was developed to coordinate an effective hazardous materials safety program based on organizational experience, applicable laws and regulations, and accepted practice. This includes maintaining a safe physical environment, monitoring associate workspaces, reviewing departmental policies and procedures and implementing a hazardous material waste reduction program.

The Hazardous Materials Management Program is directed by the Director of Environmental Services with assistance from the Coordinator of Infection Control and is monitored by the Safety Committee. These functions will be carried out by cooperation between the Director of Environmental Services, Coordinator of Infection Control, Department Directors, and the Nursing Service Department. Problems are routed to the Safety Committee for evaluation.

The Safety Committee meets at least bimonthly at which time reports and measurement from various activities related to this plan are reviewed. The Safety Committee evaluates the overall effectiveness of the Hazardous Materials and Waste Plan on an annual basis.

All associates are responsible for knowing what the hazardous materials in their department are, what an MSDS (Materials Safety Data Sheet) is, where to find an MSDS, how to appropriately use an MSDS, and the correct procedure to use in responding to an accident and cleaning up a spill.

PROCEDURE:

Our plan provides for:

- a. Selecting, handling, storing, transporting, using and disposing of hazardous materials and waste from receipt or generation through use or final disposal;

Several committees are involved in the oversight of hazardous materials. These include the Infection Control Committee, Radiation Safety Committee, and Safety Committee. Department Directors are involved in developing any procedures related to hazardous materials in their area. The Safety Committee must approve all processes involving a hazardous material in any area.

Those chemicals specified by the Environmental Protection Agency (EPA), Occupational Safety and Health Administration (OSHA), and/or the Joint Commission as hazardous are stored in a secure area accessible only by authorized personnel. Hazardous chemicals will be stored in appropriate containers and clearly labeled. Flammable liquids will be labeled "Flammable". All types of hazardous materials will be identified with adequate and legible labels. All associates will receive departmental training upon hire on the proper handling of hazardous materials in their area. Personal protective equipment is available for handling

hazardous materials.

All waste identified as hazardous will be disposed of in an environmentally safe manner. The Safety Officer should be consulted before disposal of any hazardous material to ensure compliance with hospital policy requirements. The documentation, including required permits, licenses, manifests, and adherence to other regulations, is maintained by the Director of Environmental Services.

- b. Establishing written criteria consistent with applicable law and regulation to identify, evaluate and inventory hazardous materials and waste used or generated;

Hazardous materials and wastes at St. Vincent's East include: blood and blood soaked items, radioactive materials, hazardous vapors, hazardous energy sources, chemicals, chemotherapeutic materials, and infectious and/or regulated medical waste, including sharps.

A list will be maintained in each department for the hazardous materials located in the department. A master list of all hazardous materials will be maintained by the Safety Officer and kept in the Master MSDS binder in the Emergency Department. The Safety Committee will be responsible for updating this list annually. Department Directors will update the department's hazardous materials inventory when new hazardous materials are introduced into the workplace and will forward a copy to the Safety Officer.

When new hazardous materials are ordered, it is the responsibility of Materials Management to obtain an MSDS. When the new MSDS is obtained, Materials Management will forward a copy to the user department and one to the Safety Officer for inclusion in the master list.

- c. Managing chemical waste, chemotherapeutic waste, radioactive waste and regulated medical or infectious waste, including sharps;

The Hazardous Material Procedures (*Safety Manual #401-402*) detail procedures for handling and disposing all types of waste in the Hospital. Methods of disposing waste outlined in the manual are incineration, flushing, off-site disposal, landfill, neutralizing, and reclaiming.

- d. Monitoring and disposing of hazardous gases and vapors;

A variety of methods including filtration, direct ventilation and dilution (using fume hoods and scavenger systems) to the exterior of the building are utilized to dispose of airborne contaminants. Personnel and area monitoring are conducted, documented, and monitored by the Safety Committee. Whenever possible, hazardous materials are replaced with suitable alternatives that are less toxic.

- e. Providing adequate and appropriate space and equipment for safe handling and storage of hazardous materials and waste;

Separate areas are maintained for the storage of chemicals, radioactive and bio-hazardous wastes. These areas are secured. A variety of equipment and personal protective equipment (PPE) is maintained to facilitate safe use, transport, handling and spill clean up of these materials.

- f. Reporting and investigating all hazardous materials or waste spills, exposures and other incidents;

The Quality Assurance Report form is used to collect data from any spill, needle-stick or material exposure incident. All associates and medical staff are required to complete this form if an incident occurs. The Infection Control Coordinator collects this information and investigates major occurrences. During second and third shifts, incidents are reported to the House Supervisor and reported to the Infection Control Coordinator the following day.

- g. An orientation and education program;

All associates receive general education on hazardous materials during new employee orientation and each year during mandatory training. Managers during department orientation provide department specific information for personnel who manage and/or have contact with hazardous materials or waste.

- h. Ongoing monitoring of performance;

Performance measures are selected to monitor actual and/or potential risks related to one or more of the following issues:

- Staff knowledge and skills
- Level of staff participation
- Monitoring and inspection activities
- Emergency and incident reporting
- Inspection, preventive maintenance and testing of equipment

- i. Emergency procedures describe the specific precautions, procedures and protective equipment used during hazardous material and waste spills or exposures;

The Hazardous Materials Procedures (*Safety Manual #401-402*) contains detailed emergency procedures for all hazardous material, spills or exposures. This information is located in the Safety Manual.

- j. Annual Evaluation;

The Hazardous Materials Management Plan will be reviewed annually and revised as needed by the Safety Committee. The objectives, scope, performance and effectiveness of the overall program will be evaluated including: staff knowledge and skills, monitoring and inspection activity, emergency procedures and incident reporting, level of staff participation, and inspection, preventative maintenance and testing of equipment.

k. Spill Notification:

In the event of a hazardous materials spill Plant Operations should be notified, as well as the Hospital Emergency Code Line at 838-3500. A "Code Orange" will be paged overhead by Protective Services specifying the spill location. Do not call Environmental Services until after Plant Operations has completed hazardous waste cleanup. Once the spill has been maintained, Protective Services will page "Code Orange Clear."

REFERENCES:

ATTACHMENTS:

APPROVAL ROUTING:

Safety Committee → VP Operations

REVIEW HISTORY:

REVISION HISTORY: