

11.08 Disposal of Sharps, Syringes and Contaminated Products SOP

Section 1 - Purpose and Objectives

(1) To describe the procedures to be followed for the disposal of clinical waste, sharps, and syringes.

Section 2 - Scope

(2) This procedure applies to all CFA members.

Section 3 - Procedure

Sharps Containers

- (3) A sharps container and an infectious waste bag should be carried on all CFA vehicles where it is deemed necessary in the conduct of specified operational duties.
- (4) A sharps container and an infectious waste bag may be carried on other CFA vehicles as determined by the Brigade Captain, in consultation with the Assistant Chief Fire Officer (ACFO).
- (5) All sharps containers used by CFA members should comply with AS 23907:2023 Sharps injury protection Requirements and test methods Sharps containers.

Actions at a Fire or Incident

- (6) When CFA members identify sharps, needles, or syringes at a fire or incident, they should be disposed of in an appropriate sharps container.
- (7) Clinical Waste including disposable gloves, tubing, and other disposable medical items should be placed in an infectious waste bag and sealed at the conclusion of operations.

After the Incident

- (8) Any full sharps containers or infectious waste bags used at a fire or incident should be disposed of as soon as practicable.
- (9) Sharps should be collected into sharps containers, and contaminated products should be bagged and sealed. Where possible, both should be handed to an attending Ambulance Victoria crew for disposal.
- (10) When Ambulance Victoria is not in attendance or has already left the incident scene, sharps, syringes, and contaminated products should be collected in the appropriate sharps container, bagged, sealed, and returned to the station and isolated. Contact the State Duty Officer (SDO) / District Duty Officer (DDO) for further advice.
- (11) Where a CFA member has suffered an exposure to blood or body fluid, follow the procedures outlined in the Chief

Officer's SOP 11.02 - Medical Monitoring - Biological and Hazardous Substances.

Safety Note

(12) The Incident Controller should be aware of the potential presence of infectious materials. When in doubt, assume that such materials are present and respond according to the "Standard Precautions" described in the Chief Officer's SOP 11.01 – Infection Control at Incidents.

(13) CFA members should always undertake a dynamic risk assessment when undertaking their duties.

Environmental Note

(14) Nil.

Section 4 - Definitions

Commonly defined terms are located in the CFA <u>centralised glossary</u>. Document-specific definitions are listed below.

Sharps: Objects or devices having sharp points or protuberances or cutting edges, capable of cutting or piercing the skin.

Sharps Container: A receptacle intended for collection and disposal of sharps.

Section 5 - Related Documents

AS 23907:2023 Sharps injury protection — Requirements and test methods — Sharps containers

Status and Details

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Accountable Officer	Jason Heffernan Chief Officer
Responsible Officer	Garry Cook Deputy Chief Officer Operational Response & Coordination
Author	Emma Pollard
Enquiries Contact	Specialist Response

Glossary Terms and Definitions

- "CFA member" Refers to all CFA volunteers, volunteer auxiliary workers, officers, employees and secondees.
- "CFA vehicle" All vehicles owned or operated by CFA or any Group or Brigade. This includes FRV vehicles being driven by an FRV Secondee.
- "Incident Controller" The individual designated by the control agency to have overall management of the incident and who is responsible for all incident activities.
- "Dynamic Risk Assessment" The continuous assessment and control of risk in the rapidly changing circumstances of an operational incident. DRA is an intuitive thought process and is typically not recorded.
- "Brigade Captain" The Captain is the highest ranking officer of a volunteer brigade. Where the position of Captain is currently vacant these responsibilities are carried out by next highest ranking officer.
- "Clinical Waste" Clinical and related waste can include: sharps like syringes and needles, specimens such as blood and urine, cultures, animal and human tissue, and other materials from laboratories and waste from patients with contagious diseases.