

Child and Adolescent Health Center (CAHC) Waste Management and Exposure Control Content Relevant to: CAHC and SWP Models

Waste Management and Exposure Control

CAHC MPR #15 The health center staff shall follow all Occupational Safety and Health Act guidelines to ensure protection of health center personnel and the public.

SWP MPR #20 The SWP shall follow all Occupational Safety and Health Act guidelines to ensure protection of SWP personnel and the public.

The Child and Adolescent Health Center (CAHC) program and School Wellness Program (SWP) health centers are legally required to comply with the complete Michigan Occupational Safety and Health Administration (MIOSHA) guidelines and the Michigan Department of Environment, Great Lakes, and Energy (EGLE) for waste management and exposure control. The fiduciary is responsible for staff training and overall adherence to MIOSHA guidelines throughout the agency, including the CAHC and SWP sites. While there are several standards required by MIOSHA, the CAHC program highlights five specific program requirements for evaluating adherence:

- Policy and procedures for waste disposal (site-specific)
- Policy and procedures for exposure plan (site-specific)
- Current medical waste license and is posted onsite
- Evidence of appropriate waste disposal
- Safety Data Sheet (SDS) location is posted and is accessible to staff

Regarding the policies and procedures (P&Ps) for waste disposal and exposure plan, the program follows laws and regulations from MIOSHA and EGLE but currently does not define specific required elements in the fiduciaries P&Ps. The fiduciary must identify procedures that can be applied at the site level and assist employees in navigating waste disposal and exposure planning. A fiduciary can meet the two policy requirements through the following options: 1) use of existing fiduciary P&Ps and include CAHC and/or SWP site-specific procedures as an addendum if needed; 2) create site-specific waste disposal and exposure P&Ps; or 3) create a CAHC manual containing site specific waste disposal and exposure plans. Policies may be separate or combined. In addition to the P&Ps, the day-to-day practice of staff should match the procedures outlined in the policies.

Waste Management

Evidence of appropriate waste handling and disposal is a program requirement. The fiduciary must maintain compliance with all MIOSHA and EGLE standards throughout the agency, including in the CAHC and/or SWP. The CAHC program highlights the following practice components as program requirements and reviews these practices at site reviews to assess general fiduciary compliance of MIOSHA and EGLE established standards:

- A current medical waste license (i.e., Certificate of Registration as a Medical Waste Producing Facility) that is posted onsite.
- Sharps containers are securely attached to the wall at or above hip level.
- Exam room containers/bins are constructed of correct materials to prevent spills/leaks/punctures and replaced every 90 days and/or at fill line (whichever comes first).
- Any collected waste waiting for pick-up (i.e., central accumulation area) is stored in a secured area in appropriate containers (e.g., locked collection box in a leak proof bag and cardboard box) and picked up based on quantity generator size (e.g., 90 days for large and 180 days for small).
- Waste manifest logs or receipts are kept onsite for three years.

When reviewing your site's Waste Disposal P&P, it is best practice to include procedures about the above practice components. Additionally, consider the following best practices:

- Who is responsible for waste collection, storage, and disposal procedures?
 - How often is waste collection, storage checks, and disposal done?
- What procedures are maintained in collecting and storing waste?
 - Are incompatibles separated?
- What labeling should be on exam room containers and collected waste waiting for pick-up (e.g., dates, biohazard stickers, etc.)?
- What documentation is completed regarding waste collection, storage, and disposal and who will do the documenting?
- Is any medical waste transported by staff to a central location? If yes, are procedures in place for waste transported to another site by staff, including documentation of receipt at drop-off site?

Exposure Control

The fiduciary exposure control plan for bloodborne pathogens should set forth universal precautions, engineering controls, regulated waste disposal, laundry handling (if applicable), post-exposure and vaccination follow-up, hazard communications, record keeping, information and training aimed at protecting employees from the health hazards to be compliant with MIOSHA requirements.

MIOSHA standards are a program requirement. The CAHC and SWP models will review the fiduciary exposure control practices to assure general compliance with these standards by examining the following practice requirements:

- Hand washing facility or solutions
- Eyewash station or alternative available for eye exposures to blood or chemical hazards
- A spill kit on-site for spill containment or per fiduciary defined policy
- Appropriate PPE for staff
- No storage under sink areas
- Practices follow risk reduction of exposure (e.g., no food/drink/cosmetics in testing area, washing hands, changing gloves, etc.)
- Workplace safety posters onsite (e.g., MIOSHA) in employee accessible area(s)
- Safety Data Sheets (SDSs) are accessible for all chemicals onsite and potential hazard exposures in the CAHC and/or SWP site

When reviewing your site's Exposure Plan P&P, it is best practice to include procedures about the above practice components. Additionally, consider the following best practices:

- What actions do staff take to clean up spills at site?
- What steps should staff take for accidental exposures at the site?
- What exposure prevention methods are used at the site?
- What equipment is available in the event of an accidental exposure?
- How often are P&Ps and/or plans reviewed to reflect changes and reduce risk?
- What is included in the training process (e.g., who completes the training, how often, what is included in the training)?

Waste Management and Exposure Plan Resources

See the list below for relevant standard practices for CAHC and SWP:

[MIOSHA A to Z Topic Index](#)

- Bloodborne Pathogens
- Doctors/Dentists Office
- Eyewash/Shower Facilities
- Personal Protective Equipment
- HBV and HIV
- Influenza
- Posters
- Safety Data Sheets
- Stickers
- Waste

Waste Management and Exposure Plan References

For CAHC program specific resources, see program model Basecamp folder title “Laboratory Toolkit”.

[Department of Labor and Economic Opportunity General Industry Standard, Part 554, Bloodborne Infectious Diseases](#)

[MCL380.1179 Use of inhaler or epinephrine auto-injector permitted; conditions; liability; extra inhaler or epinephrine auto-injector; FDA approved over-the-counter topical substance; notice to classroom teachers; definitions.](#)

[Michigan Department of Environmental Quality Epinephrine Auto-Injector Disposal Guide](#)

[Michigan Occupational Safety and Health Administration \(MIOSHA\) Fact Sheet Bloodborne Infectious Diseases](#)

[Occupational Safety and Health Administration, US Department of Labor Bloodborne Pathogen and Needlestick Prevention](#)

[Public Health Code: Act 368 of 1978 as amended, Medical Waste Regulatory Act, Part 138](#)