

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

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**FROM:** EXECUTIVE OFFICE

**SUBMITTAL DATE:** August 28, 2001

**SUBJECT:** Response to Grand Jury Report: **Departments of Environmental Health and Public Health – Medical Waste**

**RECOMMENDED MOTION:** That the Board of Supervisors:

- 1) Approve with or without modifications, the attached response to the Grand Jury's recommendations regarding the Departments of Environmental Health and Public Health – Medical Waste.
- 2) Direct the Clerk of the Board to immediately forward the Board's finalized response to the Grand Jury, to the Presiding Judge, and to the County Clerk-Recorder (for mandatory filing with the State).

**BACKGROUND:** On July 10 the Board directed staff to prepare a draft of the Board's response to the Grand Jury's report regarding the Departments of Environmental Health and Public Health – Medical Waste.

Section 933(c) of the Penal Code requires that the Board of Supervisors comment on the Grand Jury's recommendations pertaining to matters under the control of the Board, and that a response be provided to the Presiding Judge of the Supervisor Court within 90 days.

**TONY CARSTENS**

Deputy County Executive Office

Department Recommendation:  Policy  Consent  Policy  Policy  Consent  Policy

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<b>FINANCIAL DATA:</b>	N/A			
<b>CURRENT YEAR COST</b>	\$	<b>ANNUAL COST:</b>	\$	
<b>NET COUNTY COST</b>	\$	<b>IN CURRENT YEAR BUDGET:</b>	Yes/	No/
		<b>BUDGET ADJUSTMENT FY:</b>	Yes/	No/

**SOURCE OF FUNDS:**

**C.E.O. RECOMMENDATION: APPROVE.**

County Executive Officer Signature

**MINUTES OF THE BOARD OF SUPERVISORS**

On motion of Supervisor Mullen, seconded by Supervisor Tavaglione and duly carried by unanimous vote, **IT WAS ORDERED** that the above matter is approved as recommended.

**Ayes:** Buster, Tavaglione, Venable, Wilson and Mullen  
**Noes:** None  
**Absent:** None  
**Date:** August 28, 2001  
**xc:** Environ. Health & Public Health-Medical Waste, Grand Jury, Deputy E.O., Pres. Judge, Co.Clk. & Recorder

Gerald A. Maloney  
Clerk of the Board

By: Deputy

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SPECIFIC FINDINGS AND RECOMMENDATIONS

HEALTH AND HUMAN RESOURCES

ENVIRONMENTAL HEALTH AND PUBLIC HEALTH – MEDICAL WASTE

**Findings**

**Finding Number 1:**

Some biohazardous waste containers are not properly marked with "Biohazardous" labels as required by the California Health and Safety Code.

**Response:**

- X Respondent disagrees partially with the finding. Explain the partial disagreement.

Environmental Health staff was not present at the time of the observation by the Grand Jury. Subsequent inspections of several sites did not reveal this violation.

Public Health clinic staff indicate that some of the material in question, though "conspicuously" marked as biohazardous as required by the Medical Waste Management Act (ACT) may not have had multiple OSHA approved labels for visibility from all lateral directions.

**Finding Number 2:**

Central Holding areas for medical waste are in areas that contain other supplies and materials.

**Response:**

- X Respondent agrees with the finding.

At some clinics, where space is a particular problem, other supplies and material are nearby and not separated.

**Finding Number 3:**

Individual training records are not maintained to indicate the qualifications of each employee.

**Response:**

- X Respondent agrees with the finding.

This is not a requirement of the ACT.

**Finding No. 4:**

Pickup for disposal of medical waste is by county courier delivering supplies and mail in the same van. The biohazardous waste container is fastened to the van wall by one elastic bungee cord. According to the Code, a courier can transport only 20 pounds of biohazard waste per trip.

**Response:**

X Respondent agrees with the finding.

Authorized pickup for disposal of medical waste for the period covered by the report, under "Limited Quantity Hauling Exemptions", was by Community Health Agency (CHA) (formerly Health Services Agency) Courier, not by County Courier. The ACT does not identify standards for the hauling of this waste, other than the limitation to 20 lbs. per trip.

**Finding Number 5:**

The Facilities Management Department (formerly Building Services) is responsible for service and of all clinics with the exception of the Isolation Rooms.

**Response:**

X Respondent agrees with the finding.

(Not an area regulation under the ACT)

**Finding Number 6:**

Isolation room maintenance and certification are under contract to private vendors. The reports do not provide sufficient data to the Public Health Administrator to confirm certification.

**Response:**

X Respondent agrees with the finding.

(Not an area subject to regulation under the ACT)

The certification of the filtering and negative-flow systems in the isolation rooms has been accomplished on a regularly scheduled basis. Public Health requires that a contractor use only NSF certified technicians for all certifications of our aerosol rooms and equipment<sup>1</sup>.

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<sup>1</sup> (NSF is a non-profit organization that provides certification services nationally in the areas of public health, safety, and environment. The American National Standards Institute accredits NSF certification programs)

The tests have resulted in certification of the effectiveness of the systems. The individual test results, however, have not been submitted with quantitative data, only with pass/fail results.

**Finding Number 7:**

**Handling of medical waste and processing airflow in isolation areas varies from clinic to clinic.**

**Response:**

X Respondent agrees with the finding.

**RECOMMENDATIONS:**

**Recommendation Number 1:**

**Label all containers (per Section 118280 of the California Health and Safety Code) with the international Biohazardous markings on the container lid and sides to be visible from any lateral direction.**

**Response:**

X The recommendation has been implemented. Provide a summary regarding the implemented action:

All clinics have been advised to correctly label all medical waste containers. Environmental Health will confirm via inspections.

**Recommendation Number 2:**

**Storage of medical waste should be in an isolated and locked area.**

**Response:**

X The recommendation has not yet been implemented, but will be implemented in the future. Provide a time frame for implementation

While combined storage (with supplies) is not expressly prohibited by the ACT, the segregation elements clearly imply it, and safety concerns would recommend it whenever possible. The recommendation has been implemented at those clinics which have suitable storage space available. For other clinics where storage space is not already configured for total isolation, Public Health will undergo a clinic-by-clinic analysis, and develop a specific plan for implementation, which may involve physical reconfiguration of space and/or renovation/construction. Depending on our ability to obtain the necessary designs and approval of construction

plans, this could take up to one year for full compliance. In the interim, all medical waste will be properly bagged and maintained in locked storage.

**Recommendation Number 3:**

**Must maintain individual training record on file at each County Clinic.**

**Response:**

- X The recommendation has not yet been implemented, but will be implemented in the future. Provide a time frame for implementation.

All new employees receive this training at orientation. Records of the initial training are maintained at H.R. All Clinic Managers will meet in August to determine a common format for maintaining files in each clinic. Once the format and tracking systems are approved, the clinic files will be maintained. As future training at each of the clinics is held, the certifications will be placed in the personnel files. We expect the process to be fully in place by early October 2001. In the interim, Department policy requires that all employees receive training when hired, and on an annual basis thereafter. We will continue to follow that policy.

This is not an area regulated under the ACT and will not be evaluated by Environmental Health Staff during inspections/investigations.

**Recommendation Number 4:**

**Secure the medical waste container in the transport vehicle in a manner to prevent spillage in the event of an accident.**

- X a. The recommendation requires further analysis. Explain the scope and parameters of an analysis or study

With the division of the Health Services Agency (HSA) into a separate Riverside County Regional Medical Center and a Community Health Agency (CHA), it is appropriate to re-evaluate the overall effectiveness and appropriateness of this method of transportation. There have been instances in which the 20 lb. limitation has resulted in non-transport of waste from facilities that are served late during the courier rounds.

The analysis will require participation by the Public Health Clinics, Environmental Health and Courier staff.

- b. Provide a time frame for analysis or study to be completed by the department/agency. This time frame shall not exceed six months from the date of publication of the Grand Jury Report

The study should be completed by October 1, 2001.

**Recommendation Number 5:**

**The private contractor should be reviewed by the Public Health Administrator and also by the Facilities Management Department, as to the accuracy of the technical data, and to periodically verify data on site inspections.**

**Response:**

- X      The recommendation has been implemented. Provide a summary regarding the implemented action:

This recommendation has been implemented with all private contractor reports being evaluated for compliance. Test results will be provided to the Facilities Management Department for review.

This is not an area regulated under the ACT and will not be evaluated by Health Staff during inspections/investigations.

**Recommendation Number 6:**

**Compliance with all Medical Waste Regulations should be uniform in each of the twelve County Health Clinics.**

- X      The Recommendation will not be implemented because it is not warranted or is not reasonable. Explain:

The Grand Jury's report, and its comments to the clinic staff, indicate a belief that the methods of compliance, and not just compliance itself, should be uniform. Due to the configuration of the various clinics this is not always possible, nor would there appear to be adequate justification to make this a goal.

The Department of Public Health directly manages nine clinics. The level of compliance with all appropriate policies and regulations will be uniform as discussed above. The other three sites are staff and managed by private contractors. For the three clinics which are run by contractors, we will ensure that contract language requires complete compliance with all Federal and State laws and regulations which relate to medical waste.