**Case Study: Multiagency Responses to Infectious Clinical Waste Management in Very Remote Indigenous Communities in Central Australia & the Barkly Region**

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**Abstract Summary**

This presentation corresponds to the conference subtheme of ‘collaborating with health services to inform actions and respond to preventable illnesses’. It aims to discuss multidisciplinary actions provided in response to a needle stick injury suffered by a local municipal worker within and a remote Indigenous community in the Central Australia Barkly Region.

A case study will describe an investigation undertaken in 2018 by an indigenous Environmental Health Worker; and how this supported wider multidisciplinary investigations. This overview will also discuss the subsequent multi-agency review of Clinical Waste Management guidelines employed by health services, in remote communities, in response to the incident. This will demonstrate actions undertaken by organisations to improve practices of generation, segregation, collection, storage, transportation, and treatment of clinical wastes.

The presentation will ultimately tell a story, using many pictures, about the risks to municipal workers, and wider community members if clinical waste is not managed appropriately remote communities.

**Abstract**

The presentation will ultimately tell an interesting story, using many pictures, about the risks to municipal workers, and wider community members if clinical waste is not managed appropriately remote communities.

It is essential that municipal workers in remote Indigenous communities are familiar with the risks caused by clinical waste. These, infectious wastes provide great risk because they can contain bacterial, viral, parasitic, and fungal pathogens and diseases; and provide significant potential for contagion if not properly managed. However, while, most Australian jurisdictions have established up to date policies and procedures, the management of infectious clinical waste has provided challenges in very remote Indigenous communities in Central Australia and the Barkly Region.

Appropriately, this presentation corresponds to the conference subtheme of collaborating with health services to inform actions and respond to preventable illnesses. It aims to discuss multidisciplinary actions provided in response to a needle stick injury suffered by a local municipal worker within and a remote Indigenous community in the Central Australia Barkly Region; and the potential impacts that may have occurred from the injury.

A case study will describe an investigation undertaken in 2018 by an indigenous Environmental Health Worker; and how this supported wider multidisciplinary investigations. This overview will also discuss the subsequent multi-agency review of Clinical Waste Management guidelines employed by health services, in remote communities, in response to the incident. This will demonstrate actions undertaken by organisations to improve practices of generation, segregation, collection, storage, transportation, and treatment of clinical wastes.

The presentation will also demonstrate logistical and geographical constraints associated with the clinical waste transportation requirements imposed upon 29 Major communities dispersed across 873,000 km2. This demonstrates challenges for waste producers who must appropriately store waste for long periods; and then transport clinical waste for disposal to an approved incinerator that is located interstate several hundred kilometres away.

Ultimately, the overview and case study will demonstrate risks stemming from improper management of clinical waste and impacts to local community members and the environment. This will inherently discuss, current improvement made to clinical waste management following the needle stick injury by those organisations and groups involved in implementing and monitoring sound healthcare waste management systems.