

# WASTE MANAGEMENT POLICY

**Waste Management Policy**

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<b>Directorate:</b>	Facilities Management Directorate		
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Environment Group		20 November 2015	
<b>Links or overlaps with other policies:</b>			
Infection Control			
Immunisation			
Manual Handling			

**Amendment History**

Issue	Status	Date	Reason for Change	Authorised
1.1		2-11-2015	Change of logo, trust name and intranet link	Collette Germon
1.2		8-12-15	Add in contact for DGSA and contractors, appendix B	Collette Germon
1.3		13-09-16	Add auditing programme	Collette Germon

**Waste Management Policy**

**NHS Unclassified**

1	Policy Statement	4
2	Purpose/Introduction	4
3	Equality Impact Assessment	4
4	Roles and Responsibilities	4
5	General Principles	5
6	Personal Protection	5
7	Security	6
8	Waste Storage Compounds	6
9	External Transport	6
10	Risk Assessment	6
11	Training and Awareness	7
12	Training Records	7
13	Audits	7
14	Record Keeping	8
15	Monitoring	8
16	Safe Systems of Work	8
17	References	8
18	Contact Details	8
19	Monitoring, Audit and Review Procedures for the Policy	8
20	Appendix A Best Practice for Segregation	10
21	Appendix B Contract Arrangements	11
22	Appendix C Audit Arrangements	12

## 1 Policy Statement

Waste is any substance or object that you discard, intend to discard, or are required to discard. Controlled waste means household, industrial and commercial waste, or any such waste.

The Trust is committed to ensuring the health, safety and welfare of its employees and contractors who are involved in waste disposal and of others who may be affected by waste materials which result from its work. The policy is intended to enable the Trust to safeguard employees and all other persons during the handling, storage and disposal of waste. The Trust's main objectives with regard to waste management are to:

Ensure that all waste is disposed of safely and in accordance with all statutory waste management and health and safety regulations and in compliance with the waste hierarchy, and appropriate segregation of waste at source.

To audit and monitor contractor and Trust's compliance with statutory waste management regulations, key performance indicators (KPI) policies and procedures.

Ensure that records of waste consignments are kept in accordance with statutory duties, Environmental Protection (Duty of Care) Act 1991 and kept for appropriate length of time. Two years for Waste Transfer Note and three years for Consignment Note.

Provide staff with suitable information, instruction and training to ensure that the Trust's waste management policy and procedures are understood and followed.

## 2 Purpose/Introduction

The Health & Safety at Work Act 1974 requires the Trust to ensure the health and safety of its staff and other persons affected by its work activities. This responsibility includes ensuring that adequate arrangements are in place for the safe segregation, storage, collection and transportation for the disposal of waste.

Wherever in this document the words "the Trust", "the organisation", or the "the community" it shall be understood to mean Torbay and Southern Devon Health and Care Trust and South Devon Healthcare Foundation Trust.

The "Safe Management of Healthcare Waste" shall be recognised as the Department of Health's framework document for good practice for the management of healthcare waste. A copy should be freely available for reference to all managers who have a responsibility for clinical waste via Intranet.

## 3 Equality Impact Assessment

To ensure staff understand the safe management of all healthcare waste, to meet national legislation and guidance.

## 4 Roles and Responsibilities

### Chief Executive/s

The Chief Executive has overall responsibility for waste management and has, on behalf of the Trust Board of Directors, responsibility to do all that is reasonably practical to meet the requirements of Health & Safety at Work etc. Act 1974 and other related legislation. This includes ensuring that adequate waste management arrangements are implemented and maintained on all Trust premises.

### Director of Estates and Commercial Development

The Director of Estates and Commercial Development is responsible for the management of waste related activities including enabling the Trust to meet its statutory obligations and segregate, handle, transport and dispose of waste properly so as to minimise the risks to the health and safety of patients, staff, public and the environment.

### Environmental Services Manager

## Waste Management Policy

### NHS Unclassified

The Environmental Services Manager is directly responsible for the day to day management of waste related activities for the Trust, including arranging and monitoring of appropriate training in waste related topics.

They will also be responsible for research and introduction of new and innovative methods of waste management and disposal which will increase the efficiency, safety and cost effectiveness of waste disposal practices.

In addition they are responsible for providing representation at organisational meetings which include:

Environment Group

Community Hospital Admin Group

Joint Health and Safety Committee

And other groups on an ad hoc basis

### Managers

“Managers” is the generic term being used to identify Site Managers, Zone Managers or Business Managers.

It will be Departments/Site Managers responsibility to ensure compliance with this policy. Managers will ensure that all staff under their direct control are aware of the necessary details to deal with the type of waste most frequently produced within their respective work area (or activity) and comply with it.

### All Staff

Every Trust member of staff has a duty of care to ensure that they dispose of all the waste they generate in accordance with the SSOW.

External Contractors working on behalf of the Trust

Contractors working on behalf of the Trust will make all necessary arrangements to comply with Trust procedures and make arrangements for the disposal of all the waste generated as a result of their activities on behalf of the Trust.

## 5 General Principles

All waste generated on Trust premises will be presented for collection in a manner that will ensure that Trust employees and waste disposal contractor employees are protected from risk of exposure to potential sources of infection, injury or offence.

Managers of units that generate chemical or other hazardous wastes must ensure that COSHH assessments are regularly reviewed and approved controls are implemented.

All waste must be segregated at the point of origin and secured in identifiable containers that meet the specified standards, colour and design for the particular category of waste.

The designated local manager will be responsible for ensuring that the number of containers provided is compatible with the volume of waste and types of segregation. In clinical areas flip top lidded bins with foot pedals should be used.

The frequency of waste collections will be planned to avoid unnecessary accumulation of waste in offices, wards and departments and in outside storage areas.

Incorrectly presented waste such as sharp bins which are not assembled correctly, information not completed or containers with mixed coloured waste bags will not be removed from the place of origin. In such cases an incident report will be completed and the local manager requested to investigate how and why the situations has arisen and take steps to ensure that it does not happen again.

## 6 Personal Protection

All staff likely to handle or come into contact with clinical waste should be offered the following immunisations:

Hepatitis B

Tetanus

## Waste Management Policy

### NHS Unclassified

Where risk assessment has identified personal protective equipment as being essential to the performance of waste management operations, employees are obliged to wear it and report any defect, excessive wear or malfunction to their supervisor/line manager.

Emergency situations, such as spillages, should also be addressed in any risk assessments and reported as an incident. This might include the need for protective equipment to prevent exposure via routes such as skin contact (e.g. disposable aprons and gloves) or inhalation (e.g. respiratory protection and / or face visors).

## 7 Security

It shall be the responsibility of the designated local manager to ensure the security of all stored waste at all times until it has been removed from site by organisations authorised to transport and/or dispose as appropriate.

Other than whilst waste is being loaded into, or removed from them by a duly authorised person, all external waste storage compounds/cages and containers must be kept closed and locked at all times, regardless of the volume of waste container within.

## 8 Waste Storage Compounds

In areas where porters/domestics are employed it is their responsibility to maintain external storage areas. At other sites it is the responsibility of the Local Manager. External storage areas will be:-

- Kept free of animals/rodent infestations
- Sited away from general storage and food areas
- Well lit and ventilated
- Arranged to prohibit different waste streams being mixed.
- Kept locked at all times, providing access by authorised persons only.
- Within a fenced and gated enclosure upon a concrete base.
- Have wash down facilities.

The local site manager is responsible for ensuring that the contractor provides sufficient quantities of suitable bulk waste storage bins that will adequately meet the needs of the site to securely store the total volume of each waste stream to be collected from that site. This will include additional capacity required to sustain periods when collections are delayed due to periods of public holiday or other short term service disruptions.

Provision shall be made for total segregation between waste streams, e.g. orange bags, sharps containers and yellow/black bags may not be mixed within the same bin. Each bin to be clearly labelled to indicate its permitted contents.

Healthcare waste should be stored securely so as to prevent the escape of waste, harmful to the environment and harmful to human health. Failure to do so is a breach of the statutory duty of care. This applies to storage at the point of production and bulk storage areas.

## 9 External Transport

Transport of waste from the Trust properties to the point of disposal will be the designated responsibility of the appointed contractor. Waste can only be removed by a registered waste carrier where a Duty of Care has been undertaken on the contractor by the Trust.

The contractor will use a dedicated collection vehicle for transportation. The waste producer (The Trust) remains responsible in law for all waste until such time as it has been destroyed.

## 10 Risk Assessment

Risk assessments shall be carried out by the Trust to address all identified risks associated with waste management practice and procedure. Once risk assessments are in place any waste management related incidents should be reported through the appropriate risk management system.

Copies of all risk assessments shall be made freely available to all who may be affected by the operation that presents the hazards identified in the risk assessment, and shall be distributed in line with the risk management policy and procedure of the Trust.

Risk assessments shall be reviewed on at least an annual frequency by the local managers.

Wards or departmental level waste management operational risk assessments should be completed locally and retained locally with copies being sent to the Environmental Services Department for filing in a central data base.

## **11 Training and Awareness**

Waste Management training although not mandatory is important to ensure that Trust staff are complying with all the relevant legislation and standard operating procedures. Consequently it is the responsibility of the local managers to ensure that:

Staff are released from their normal duties to attend training;

Correct procedures are followed by all staff;

All staff at all levels that generate the waste recognises that they are personally responsible for complying with agreed procedures.

Under Health and Safety at Work legislation, the Management of Health and Safety at Work Regulations and COSHH Regulations, staff must receive information and training on:

The risk to their health and safety, that is the details of the substances hazardous to health to which they are likely to be exposed;

The findings of any risk assessment which may be undertaken and any precautions identified by the assessment;

The results of any monitoring and actions carried out.

## **12 Training Records**

Local managers will maintain comprehensive and up to date records of all training delivered to individual members of staff. This will enable them to identify members of staff who are not receiving the appropriate levels of training, and where such training should be focussed.

## **13 Audits**

Audits of waste management practice and procedure are essential to ensure that the Trust are legally compliant and doing everything they can to manage the waste they produce in a responsible and legally compliant manner. A schedule of audits undertaken is shown at Appendix C.

In terms of waste management in the healthcare setting there are a number of different audits which need to be undertaken on an annual basis to give the Board assurance that the waste being produced is being managed appropriately.

The Trust will audit in line with audit procedures as identified in the latest version of Safe Management of Healthcare Waste and report the findings of these audits and obtain approval for audit action plans to address any non-compliance to the Waste Management Group and Health and Safety Committee

The Trust contracts:

Freight Transport Association, Hermes House, St John's Road, Tunbridge Wells TN4 9UZ  
Tel: 01892 526171

as a Dangerous Goods Safety Adviser to undertake an annual audit on the carriage of dangerous goods.

## 14 Record Keeping

The manager of each unit will be responsible for ensuring that for every clinical waste collection and collection of non-clinical, hazardous waste; that the relevant sections of a Hazardous Waste Consignment note are correctly completed and signed, dated and printed in the presence of the waste disposal contractor. It is the responsibility of the local manager to ensure that all relevant information provided at parts A & B of the Hazardous Waste Consignment note are complete and accurate prior to signing and dating.

An "Annual Waste Transfer Note" for some clinical and most domestic waste should be completed by the Trust waste lead and a copy sent to the designated local manager for each unit.

The Local Manager must retain Consignment Notes for 3 years. Waste Transfer Notes are to be retained for 2 years. These are legal documents.

All records referred to above shall be stored in a site record file for each site and held in a safe place for future referral and be made available for examination by the Environment Agency's Inspector upon demand at any reasonable time.

The legal responsibility for the management of all clinical waste remains with the producer i.e. the Trust. Failure to comply with the legislation could lead to the Trust being prosecuted; with a financial penalty of up to £50,000.

## 15 Monitoring

Using records obtained at collection, Local Managers should check against invoices prior to payment to ensure that they have been billed accurately for the services they have received.

Monitoring waste volumes will also establish if the site has to register for Hazardous Waste Premises Code with the Environment Agency. This premises code has to be used on all hazardous waste consignment notes. Failure to register could lead to disruption in collections.

KPIs are part of the new waste contracts. Constant monitoring is advisable to get value for money and identify patterns or repeat occurrences. Please submit monthly monitoring sheets or reports incidences to enable early intervention.

## 16 Safe Systems of Work

This policy outlines the Trust's approach to the management of waste within the organisations. In addition to this document a number of Safe Systems of Work (SSOW) have been produced to specify the detailed management of specific waste streams.

## 17 References

Safe Management of Healthcare Waste.

## 18 Contact Details

Environmental Services  
Torbay and South Devon NHS Foundation Trust  
Tel: 01803 656811/01803 656837  
Or contact Environmental Services at [Waste.sdhct@nhs.net](mailto:Waste.sdhct@nhs.net)  
<https://icon.torbayandsouthdevon.nhs.uk/areas/waste/Pages/default.aspx>

## 19 Monitoring, Audit and Review Procedures for the Policy

This policy will be monitored and audited on a regular basis. A full review will take place every two years by the Directorate of Estates and Commercial Development unless legislative changes determine otherwise.












## 20 Appendix A Best Practice for Segregation

Segregating waste at source means the Trust is compliant with Safe Management of Healthcare Waste. It saves the Trust money and is better for the environment reducing Co2e in line with government targets of 10% by 2015.

Clinical waste costs up to 2.5 times more than recycling for equivalent weight. Please segregate your waste appropriately.

Best Practice Colour Coding	
	Infected Waste contaminated with chemicals or pharmaceuticals - incineration only
	Anatomical Waste - Incineration only
	Infected Waste - Waste suitable for alternative treatment plant (ATP)
	Non-Hazardous Medicinal Waste - incineration only. Includes pharmaceutically contaminated items
	Cytotoxic/Cytostatic Waste - High temperature incineration (above 1200 degrees) in a suitably permitted facility
	Offensive Waste - Minimal treatment/disposal required is deep landfill in a suitably permitted site.
CLEAR BAG	Recycling segregated in accordance with current waste contractor. Most items that can be recycling include domestic glass, rigid plastics, paper, cardboard, batteries and metal/foil.
Confidential Waste Consoles	Confidential waste paper for shredding
	Domestic Waste - minimum treatment/disposal required in suitably permitted landfill site
<b>All other waste such as gypsum, batteries, condemned bulky waste or electronics, please contact the Environmental Services Department.</b>	

## 21 Appendix B Contract Arrangements

Company	Start Date	Length of Contract	Waste Streams	Contingency
Viridor	Feb 2015	5 years plus 2 years extension	Domestic and Recyclable waste	Contractor has responsibility to provide alternative avenues for disposal of waste as per contract
SRCL	April 2013	3 years plus 2 years extension	All clinical waste	
Restore Shred	Oct 2015	1 year plus 1 year extension	Confidential waste paper	

## 22 Appendix C Audit Arrangements

<b>Non-Compliant Local Audits</b>						<b>Description of audit</b>
Yard audit	every 2 months					Monitor Health and Safety in the yard and ensure the yard is abiding by its exemptions on the safe storage and disposal of waste
site questionnaire	monthly				Questionnaire	Completed by Domestic Supervisors to identify early any problems with bin stock or collections.
Bin check	monthly				Bin Check	Monitor bin capacity and frequency of collection to ensure value for money
<b>Compliant Audits</b>	<b>yearly</b>	<b>3 yearly</b>	<b>5/2 yearly</b>			
<b>Duty of Care on all contractors</b>					Duty of Care	assess contractors licences, exemptions, insurances. Some of this can be checked via Environment Agency Public Registers, via a questionnaire to contractor but at least every 2 years it is advisable to visit the site
Battery Back	y					
Restore Shred	y					
SRCL	y					
Viridor	y					
Glanvile	y					
Dangerous Goods Safety Advisor	y				Dangerous Goods Safety Advisor	The Trust has to legal employ a DGSA to under an audit twice a year (Sept/March) to look at the carriage of all dangerous goods (not just waste)

**Waste Management**

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						e.g. pharmaceuticals, blood samples from HSDU and petrol (gardens). Sept 17 to visit community sites where volume exceeds 330kg
<b>Pre-Acceptance Audit</b>						
						Depending on the volume of waste all sites that generate hazardous waste are required to complete a pre-acceptance audit which is submitted as a legal document to the relevant contractors. Sites are listed that generate hazardous waste and how frequently they have the formal pre-acceptance completed, but generally every year they have a visit to assess the actions from the last audit.
Newton Abbot Hospital	y				Pre-Acceptance Audit	
Brunel Dental Practice			y		2 yearly	
Paignton Hospital	Y					
Brixham Hospital			y			
Hollacombe CRC			y			
Acute 1/3 (35 areas)		y				
Acute 1/3 (35 areas)		y				
Acute 1/3 (35 areas)		y				
Kings Ash House			y			
Dartmouth Clinic			y			
Midvale Clinic			y			
Castle Circus Clinic			y		2 yearly	Dental Areas needs assessing 2 yearly
Torbay Pharmaceuticals	y					
Totnes Hospital			y			
Dawlish Hospital			y			
Ashburton Hospital			y			
Teignmouth Hospital			y			

**Waste Management**

**NHS Unclassified**

Walnut Lodge			y		
St Edmunds			y		
Exemptions		y			Exemptions Register every 3 years with the Environment Agency on the storage, disposal and treatment of waste on site e.g. baling, destruction of controlled drugs
Carrier Licence		y			Carrier Licence 2016 registered as low tier carrier which means the Trust is not required to update annually, unless the situation changes