

**POLICY STATEMENT**

It is Company, responsibility to limit the amount of waste production through company activities, insofar as is reasonably and economically practicable. This is to be achieved by careful consideration of the disposal implications of all purchases and donations.

**POLICY RATIONALE**

The rationale for this policy is to ensure that all employees understand how to dispose of various types of waste.

**GLOSSARY OF TERMS****CROSS REFERENCES and other RESOURCE MATERIAL**

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## 1.0 DISPOSAL POLICY

It is Company, responsibility to limit the amount of waste production through company activities, insofar as is reasonably and economically practicable. This is to be achieved by careful consideration of the disposal implications of all purchases and donations.

Where the production of waste is unavoidable it is the Company policy to ensure the safe segregation, handling and disposal of waste and that all persons handling any such waste will exercise care to avoid injury or risk of harm to themselves or others, including the general public. It is the producers' responsibility to ensure that all waste is disposed of in the correct manner.

## 2.0 LEGAL & STATUTORY OBLIGATIONS

The following main legislation has been taken into account when formulating this Policy :

- Health and Safety at Work etc. Act, 1974
- Environmental Protection Act ,1990
- Control of Substances Hazardous to Health (COSHH) Regulations, 2002
- Management of Health and Safety at Work Regulations, 1999
- Manual Handling Operations Regulations, 1992
- Special Waste Regulations, 1996
- Environmental Protection (Duty of Care) Regulations, 1991
- Carriage of Dangerous Goods (Classification, Packaging and Labelling) and Use of Transportable Pressure Receptacles Regulations 1996
- Data Protection Act 1998

The Duty of Care can be construed as that degree of care, which does not cause injury to your neighbour. In the Environmental Protection Act 1990, the duty is limited to requiring one to take all measures as are reasonable in the particular circumstances. Reasonable care **MUST** be taken to avoid acts or omissions, which can be reasonably foreseen as likely to injure a neighbour. The term "neighbour" refers to those persons who are so closely and directly affected by an act that the person causing the act ought reasonably to have foreseen that they would be so affected when contemplating the act or omission subject to question in the court.

Implicit in the above regulations is the general duty to dispose of all waste in such a manner, as to protect anyone working with, or near, or handling articles or substances which are wastes and which constitute a reasonably foreseeable risk of injury, or may cause ill health to anyone.

Any incidents involving waste that results in injury / damage or the potential to do so, should be reported via the [Company Incident Reporting Form](#).

### 3.0 GUIDANCE AND DIRECTIVES

Where Government and Department\* guidance, directives or procedures are issued to cover the way in which waste arisings are dealt with by Company, it is the Company policy to ensure that these are complied with.

[ \* refers to Department of Health, NHS Estates, Environment Agency, DEFRA, HSE etc.]

### 4.0 IDENTIFICATION, DESCRIPTION & SEGREGATION OF WASTE

It is the policy of the Company for all waste arisings to be segregated at source. Where practicable, segregated waste will be recycled as part of a cost improvement programme and also to reduce adverse environmental effects.

#### 4.1 Identification of Waste

Waste is defined from the point of view of that person discarding it. Each person discarding an item should ask the question:

- a. Is this what would ordinarily be described as waste?
- b. Is it a scrap material?
- c. Is it an effluent or other unwanted substance?

Does it require to be disposed of as broken, worn out, contaminated?

If the answer to any of these questions is yes, then the item to be discarded is a waste.

#### 4.2 Description of Waste

The producer of waste must be able to describe the waste for disposal. The description should include: -

- a. The name of the waste.  
e.g. Clinical; Domestic; Special, Hazardous etc.
- b. The process that produced the waste.  
e.g. Theatres; Laboratory; Ward; Clinic etc.
- c. Where did the waste arise.  
e.g. The location - Ward A7 - UHW, Cystic Fibrosis Unit - Llandough, Tegfan Day Hospital - Whitchurch Hospital etc.

Where waste is identified as problematical, it is the producer's duty to establish what special precautions for handling and transporting of that waste are required, and to ensure that the waste is bagged securely, tied with the appropriate tie and labelled clearly with the place of origin.

#### 4.3 Types of Waste for Segregation

##### 4.3.1 Clinical Waste

The policy concerning clinical waste is formulated to comply with the HSE Guidance Note "SAFE DISPOSAL of Clinical Waste", Department of Environmental Waste Management Paper 25 "Clinical Waste" and HN82/22 "Disposal of Clinical Waste".

Clinical waste is categorized as: any waste originating from a clinical activity, generated in the treatment or diagnosis of patients; in laboratory areas; and in other areas where the following apply :  
Soiled surgical dressings, swabs and all other contaminated waste from treatment areas;  
Materials other than linen from cases of infectious disease;

All human tissues (whether infected or not), animal carcasses and tissues from laboratories, and all related swabs and dressings.

Discarded syringes, needles, cartridges, broken glass and any other sharp instruments.

Laboratory and post-mortem room waste.

Certain pharmaceutical waste e.g. Controlled drugs.

Used disposable bed-pan liners, urine containers, incontinence pads and stoma bags.

Where waste has been autoclaved prior to final disposal it should be placed in a yellow clinical waste bag, after autoclaving and appropriately sealed.

#### 4.3.2 Segregation of Waste

In order to ensure the safe segregation of clinical waste it is the Company policy to use coloured plastic bags and safety containers in disposing of its clinical and domestic waste.

All bags should not be more than two thirds full, nor so heavy that they are unable to be lifted, by a lightly built person using one hand

The colour coding for bags is as follows:

COLOUR OF BAG	TYPE OF WASTE
Yellow	All Clinical Waste
Black	All Domestic Waste incl. Residences
Brown	Food Waste

There will be non-clinical waste arising in some clinical areas (i.e. offices) where possible black bags will be introduced in these areas. Waste must be segregated into clinical (yellow bag) and non clinical (black bag) waste.

#### 4.3.3 Confidential Waste

Where waste is considered to be of a confidential nature then it should either be shredded at departmental level or arrangements made via the Waste Management Office for the waste to be taken away for shredding and disposal by a specialist contractor, who will supply a certificate as proof of shredding. Confidential waste must be stored in a secure area prior to disposal. All disposal methods will be compliant with the Trust Data Protection Policy as appropriate.

#### 4.3.4 Clinical Sharps Containers

All clinical sharps, should be disposed of in a special 'sharps' safety container provided for that purpose. Sharps safety containers must not be filled to more than three quarters full, and are to be properly secured to the manufacturer's instructions, and labelled accordingly with the source of origin.

*On no account should 'sharps' containers be placed in yellow clinical waste bags.*

## 5.0 COLLECTION AND TRANSPORTATION OF WASTE

The labelling, tagging and removal of waste bags from bins to waste collection points, is the responsibility of teaching staff. All waste areas are to be kept secure to prevent unauthorised access.

### TRAINING IN THE HANDLING OF WASTE

#### General Awareness Training

Waste Management training forms an integral part of the Company's mandatory / obligatory training and staff induction programme, which each member of staff *MUST* attend. Mandatory training is carried out on a regular basis throughout the company. Training will also be undertaken as part of the Company Induction Day and through the networked Statutory and Mandatory training programme.

All training will include the following :

- segregation of waste and the filling of bags.
- protective clothing and gloves appropriate to the risk, must be worn while handling waste bags.
- all storage bags are sealed with an identification tie indicating its origin and source.
- storage bags are only handled by the neck;
- all sharps containers are sealed in accordance with the manufacturer's requirements
- on completion of handling the waste the container is intact, and no spillage has occurred, the waste should be taken to the appropriate collection point and where possible placed in the container provided.
- given the special risks associated with the handling of waste, any accidents/injuries must be reported immediately in accordance with the Company's procedures for the reporting of accidents and untoward incidents, utilising Incident Report Form.

Those supervising the waste handling procedures should ensure that those persons handling the waste : are fully aware of any dangers which may arise in handling that waste have the necessary mechanical aids and equipment, to handle that waste safely are trained in the procedures associated with segregation and waste handling appropriate to their work environment.

## 6.2 Spillages

All spillages of waste must be cleaned without delay. Waste spillages should not be left unattended or unsecured. Where spillages occur in the ward or laboratory it is the responsibility of persons working in that area to clean up the spillage. Where spillages occur in "common areas" i.e. corridors etc then Facilities must be notified immediately.

Further information on spillages is contained in Local Waste Management Procedures of the *WASTE MANAGEMENT - Policies and Operational Procedures Manual*.

## 7.0 STORAGE OF WASTE

It may be necessary to store waste temporarily prior to disposal.

Duty of Care under the E.P.A. (1990) requires that waste holders must introduce and maintain such housekeeping measures in order to keep any waste safe from:

- a. corrosion or wear of waste containers;
- b. accidental spillage or leakage;
- c. accident or weather, breaking contained waste open, and allowing it to escape;
- d. waste blowing away or falling while stored, transported or handled;
- e. scavenging of waste by vandals, thieves, children, trespassers or animals.

Highly Flammable Waste at departmental level must be stored in a secure Highly Flammable cabinet and must not contain vessels (empty or full) which are capable of storing more than 50 litres of highly flammable substances. No more than 500ml. of flammable substance may be held on an open bench.

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In order to satisfy the Duty of Care and the Fire Safety Requirements, it will be policy for all types of waste to be placed into the correct containers which will be stored at authorised collection points and the designated waste areas.

#### 7.1 Security of Waste Storage

Security precautions at sites where waste is stored should prevent theft, vandalism or scavenging of the waste. Holders should take particular care to secure waste materials arising from building and demolition works, where totally enclosed skips capable of being secured are to be used.

Segregation of different categories of waste where they are produced may be necessary to prevent the mixing of incompatible wastes. The waste holder must ensure that all the staff permitted in those areas of segregation are aware of the locations and use of each segregated waste container.

#### 7.2 Containers for Storing Waste

All waste that is stored and to be handed on to another person must be in a container. Waste containers must suit the waste placed in them, e.g. plastic sacks are not suited to liquid, jagged or hot waste, and must be of sufficient integrity to enable the waste to be safely contained.

The policy is that yellow bags for clinical waste will be of 104 gauge density. 220 gauge density yellow bags will be used in specialist areas such as Theatres, where the volume and range of clinical waste warrants additional security. Black bags must be of 100 - 160 gauge density, where brown food waste bags are used these must be of 400 gauge density. All clinical waste bags will be in accordance with UN3291 specification.

#### 8.0 DISPOSAL OF WASTE

All clinical waste arising within the Company will be collected and disposed of at an appropriate disposal point.

All domestic waste arising within the Company is collected by a combination of waste contractors, including local authority, and disposed of at a licensed landfill site facility.

If a particular waste needing disposal does not fit into one of the waste sections, the Directors should be contacted for further advice

#### 9.0 TRACKING, AUDITING AND MONITORING

The "audit trail" must be carefully controlled and maintained to ensure protection against escape or unlicensed handling or disposal. It is the responsibility of all staff involved in the production, transport or disposal of waste to maintain the integrity of the waste management policy and its audit trail requirements.