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Public Health
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WASTE MANAGEMENT PROCEDURE

Introduction and Aim

Public Health Wales NHS Trust (The Trust) recognises its duties and legal responsibilities to ensure so far as is reasonably practicable, the health, safety and welfare of its employee's and other people who may be affected by its activities and its duty to the environment in which it operates. Public Health Wales NHS Trust provides a wide range of health related services to the people in Wales. This procedure document outlines Public Health Wales NHS Trust arrangements for discharge of these responsibilities.

The Procedure aims to:

- outline the requirements of the Health and Safety at Work etc., Act 1974;
- outline the management of Health and Safety arrangements within Public Health Wales;
- minimise the Health and Safety risks within Public Health Wales to all staff and others;
- recognise the obligations imposed under the Health and Safety at Work etc., Act 1974, HTM 07-01 (Safe Management of Healthcare Waste)
- increase its waste segregation and minimise the waste going to landfill where practicable to do so.
- minimise the impact of waste disposal on the Environment.

Linked Policies, Procedures and Written Control Documents

- Health and Safety Policy
- Waste Management Policy
- Infection Control Policy

Scope

This procedure and any arrangements made under it applies to:

- All persons employed or engaged by Public Health Wales, including part time workers, temporary and agency workers, those holding honorary contracts and those engaged by the NHS Wales Health Collaborative
- All service users, visitors and volunteers;

Where Public Health Wales provides services with other organisations, including health boards, the policies and procedures of the employing organisation including honorary contract holders will apply. Where appropriate joint working

arrangements will be agreed and for shared premises a Service Level Agreement/Memorandum of Understanding or alternative agreement will be in place.

Equality and Health Impact Assessment	This was completed for the Waste Management Policy and also applies to this procedure.
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Accountable Executive Director/Director	Huw George Deputy Chief Executive / Executive Director of Operations and Finance.
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Disclaimer

If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the [Corporate Governance](#).

Summary of reviews/amendments

Version number	Date of Review	Date of Approval	Date published	Summary of Amendments
1	01.06.06	17.03.04	01.10.09	Black 67 - Waste Management Policy (original document). Velindre NHS Trust Policy transferred to Public Health Wales on 1 October 2009.
2	30.06.20	TBC	TBC	Black 67 – Waste Management Policy (Version 1) reviewed. Document re-developed as a separate policy and procedure.
3	18.09.17	TBC	TBC	A full revision of the policy has been undertaken to incorporate changes in legislation/guidance i.e. Health Technical Memorandum 07-01 Safe Management of Healthcare Waste as amended 2013

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1 Introduction

This procedure applies to all services directly provided by the Public Health Wales NHS Trust and all staff should familiarise themselves with the procedure. Healthcare Waste Management covers a variety of premises and activities and gives reference to Hospitals, Outpatient departments Care facilities, community settings, GP surgeries and mobile units, the guiding principles can be applied in the majority of settings.

It is the responsibility of each Independent Contractor to reduce Health Care Associated Infections (HCAI) and the transmission of infection during the disposal of health care waste. Public Health Wales NHS Trust recommends that staff hosted by other bodies i.e. Health Boards, GP premises apply the principles of this policy as minimum standards within their practices to ensure that their professional and contractual responsibilities are discharged if there are no standard practices employed.

2 Procedure aims and objectives

In compliance with the National Waste Management Strategy, it is Public Health Wales NHS Trust, objective:

- To ensure that waste is managed safely in line with applicable legislation
- To segregate healthcare waste in accordance with HTM07-01 where practicable to do so by increase its waste segregation and minimise the waste going to landfill, minimising the impact of waste disposal on the Environment.
- To reduce the quantities of waste generated and to maximise segregation, re-use, re-cycling and recovery of those materials which enter the waste stream
- To ensure that waste is managed with minimum impact on the environment.

2.1 This will be achieved by:

- Providing procedures for the safe handling of those wastes for which Public Health Wales NHS Trust is responsible, from the locations at which it arises until it's responsibility for transportation and disposal is formally transferred to an approved contractor(s)

- Ensuring that Public Health Wales NHS Trust complies with current relevant legislation and established best practice guidelines
- Minimising the risk so far as is reasonably practicable (SFARP) to staff whose duties involve handling waste and others who may be exposed to it:
 - assessing the risks from the waste and providing the facilities and means for its handling and disposal in the most appropriate and safe manner.
 - training staff, as appropriate, to deal with waste safely and appropriately
 - maintaining and communicating procedures and other guidance detailing Trust's arrangements for segregation, primary containment and storage of waste
 - providing primary and secondary containers for each type of waste
 - regularly removing waste so far as reasonably practicable (SFARP) to secure and safe storage facilities pending collection by licensed transport contractors for disposal by approved methods
 - maintaining and communicating procedures for the management of untoward events such as spillage's and other incidents, arising from the handling of waste (see appendix 7)
- Maintaining comprehensive records to monitor and review progress and demonstrate the effectiveness, in terms of safety and cost, of arrangements and procedures for the management of waste.

3 Responsibilities

Organisational Arrangements

In order to ensure that waste is successfully managed within Public Health Wales-NHS Trust, the following responsibilities have been allocated.

The **Chief Executive** accepts overall responsibility for all matters, including those regarding waste management.

The **Deputy Chief Executive / Executive Director of Operations and Finance** is the nominated Director for managing the process aspects and **all Executive Directors / Directors and Divisional Directors** of each function including the **collaborative/hosted** bodies responsible for its implementation.

The Head of Estates (Facilities) and Health and Safety is the nominated waste control officer responsible for ensuring that the handling, disposal and storage of waste, is in accordance with approved practices.

This includes: -

- Providing advice and guidance as required on safe practices and procedures
- Monitoring the control and segregation of waste in departments
- Investigation of any failures in the Trust's procedures for the safe disposal of waste
- Liaison with other Trusts/organisations, Infection Control, Porters and domestics in the internal movement of waste until the transfer to Public Health Wales NHS Trust licensed waste carrier and disposal agents
- Monitoring under Duty of Care that Public Health Wales NHS Trust licensed waste carrier and disposal agents continue to carry out their waste carrier and disposal contract in a due and diligent manner
- Liaison with local environmental and other authorities to assure appropriate waste disposal procedures and communications are maintained

Day to day and overall operational responsibility rests for each aspect of procedure with the people listed below.

Management Responsibility

All Directors and Managers/Supervisors are responsible for:

- Implementation of the Waste Procedures in their units/areas of responsibility
- Undertaking, on a regular basis, a review of the department's management of waste
- Ensuring maximum practical segregation of waste, its correct (see appendices 2,4,5 & 6)
- Identification and storage of healthcare waste originating in their department (see appendix 3)
- Nominating members of staff with management responsibility to manage their departments/units in relation to waste activities
- Assisting with local operating procedure/procedural development

- Ensuring that waste is collected from departments/areas at regular intervals
- Ensuring that training is provided and attended by all members of staff who may come into contact with healthcare waste
- Taking corrective action to rectify deviation from procedure, including the reporting of any adverse incidents or 'near misses' associated with the management of waste in accordance with Public Health Wales NHS Trust incident reporting policy/procedure, this will include appropriate levels of investigation.

Managers/Leads are responsible for the health and safety of all persons (including visitors and contractors) who report to him/her or work within his/her area of responsibility, even when he/she is not present at the workplace. They are also responsible for any workplace equipment and activities they directly control.

Specific responsibilities for Managers include:

- Checking for hazards, unsafe acts and that a suitable and sufficient assessment of risk and the introduction of safe procedures are applied
- Ensuring safe working environments and safe systems of work are in place
- Developing local operating procedures for safe working practice
- Ensuring chemicals and hazardous substances are controlled according to statutory requirements
- Ensuring the necessary waste training for all department members, including issue of statutory information
- Identifying staff waste training needs and keeping records of training
- Ensuring protective equipment is available and used where necessary
- Reporting and recording all accidents, incidents and near misses occurring within their area of control and then investigating to determine the cause and expediting any corrective action required
- Ensuring waste information is communicated to all staff.
- Ensuring these people receive adequate training, support and resources to undertake their roles.

- Duty of care under Part II, Section 34(1) of the Environmental Protection Act 1990 (see appendix 1)
- Ensuring waste is segregated within the Trust by use of a colour-coded system (see appendix 2)

Employee Responsibility - All employees must:

- Comply with Public Health Wales NHS Trust policy and procedure for the safe handling, segregation and storage of waste in your place of work (see appendix 3).
- Ensure that all bags and sharps bins are sealed and labelled, stating contents, ward/department and day and date of disposal in accordance with laid down procedures.
- Ensure that all clinical waste bags are stored correctly in a secure environment prior to collection from the area.
- Ensure that clinical, offensive and domestic waste bags are kept separately at all times, including storage and collection.
- Attend staff training seminars on the correct method of handling, safe disposal and storage of waste, as appropriate for their role.
- Report any adverse incidents or 'near misses' associated with the management of waste in accordance with Trust's Incident Reporting Procedure.
- Co-operate with the employers waste arrangements including the use of personal protective equipment (PPE) where appropriate
- Duty of care under Part II, Section 34(1) of the Environmental Protection Act 1990 (see appendix 1)
- Segregated with the Trust by use of a colour-coded system (see appendix 2)

Estates:

The Estates (Facilities) and Health and Safety team lead for Public Health Wales NHS Trust on Waste Management.

Compliance

Compliance with the waste procedure is verified through the Infection Control audits and compliance audits of our contractor.

4. Legislation/Guidance:

- Environmental Protection Act 1990
- Waste Management the Duty of care Code of Practice 2016
- The Workplace Regulations 1992
- Safe Disposal of Clinical Waste HSC (1992)
- Health & Safety at Work etc Act 1974
- Infection Control in Clinical Practice Wilson, 1995.
- Hazardous Waste Regulations 2005
- HTM 07-01 (Safe Management of Healthcare Waste)

DUTY OF CARE REGULATIONS

Part II, Section 34(1) of the Environmental Protection Act 1990, imposes a duty of care on any person who produces, carries, stores, treats or disposes of controlled waste.

The duty of care requires such persons to:

- Ensure that there is no unauthorised or harmful deposit, treatment or disposal of the waste.
- Prevent the escape of waste from their control or that of any other person to whom their waste is transferred.
- Ensure that the transfer is only to an authorised person, for authorised transport purposes and, finally, to an appropriately licensed site, and that a written description of the waste is also transferred and records of such transfers retained.
- Ensure that this procedure is brought to the attention of all employees who are producing, handling or storing all types of waste.

Breach of the Duty of Care Regulations is a criminal offence. Legislation

- Health and Safety at Work etc Act 1974
- Environmental Protection Act 1990
- Special Waste Regulations 2005/ The Hazardous Waste Regulations 2005
- COSHH Regulations 2002
- Control of Pollution Act 1974 and 1989 amendment
- Carriage of Dangerous Goods by Road and Rail (Packaging and Labelling) Regulation 1996
- The Water Act 2014
- The Water Industry Act 2014
- The Waste Electrical and Electronic Equipment Regulations 2005





The above list of legislation is not an exhaustive list.





Appendix 2


HEALTHCARE WASTE STREAM TABLE

Waste is segregated within the Trust by use of a colour-coded system:

Colour Description

Type of Waste	Receptacle	Disposal Stream
Red top (lid) Anatomical waste		Waste which requires disposal by incineration Treatment required for safe disposal is incineration in a suitably permitted or licensed facility.
Yellow Bags The yellow infectious waste stream is used for waste that is infectious but has additional characteristics that means that it must be incinerated		Waste which requires disposal by incineration Treatment required for safe disposal is incineration in a suitably permitted or licensed facility.
Orange Bags Any healthcare waste that is either infectious/ hazardous or suspected to be infectious or hazardous		Waste which may be "treated" Treatment required for safe disposal to be "rendered safe" in a suitably permitted or licensed facility, usually alternative treatment plants (ATPs). However this waste may also be disposed of by incineration. Hazardous/infectious waste
Yellow Bag with Black stripe (Tiger bags) Items used in the care of a patient when employing Standard Precautions, e.g. gloves and apron,		Offensive/hygiene waste* Treatment required for safe disposal is landfill in a suitably permitted or licensed site. This waste should not be compacted in unlicensed/permitted facilities. Non infectious waste Tiger Bag

wipes etc. sanitary products or other healthcare waste that is considered not to be infectious or hazardous		
Type of Waste	Receptacle	Disposal Stream
Black Bag Kitchen waste, flowers, hand towels etc.		Trade/Domestic (municipal) waste Minimum treatment/disposal required is landfill in a suitably permitted or licensed waste site.
Yellow top (lid) Sharps		For the disposal of Sharps contaminated with medicinal products and their residues (other than cytotoxic and/or cytostatic medicines)
Blue top (lid) Pharmaceutical Waste – tablets in blister packs, empty elixir bottles		Designed for the safe collection, transportation and disposal of solid medicinal waste in its original packaging e.g. pills in a blister pack (not cytotoxic or cytostatic) Indicative treatment/disposal required is incineration in a suitably permitted or licensed facility.
Orange top (lid) Sharps		For the disposal of Sharps, excluding those contaminated with medicinal products and their residues

Type of Waste	Receptacle	Disposal Stream
<p>Purple top (lid) Sharps contaminated with cytostatic /cytotoxic medicinal products – if no cytotoxic bags are available then other contaminated products can go into the cytotoxic bin Types of cytostatic medicines can include: Most hormonal preparations Some anti-viral drugs Many antineoplastic agents Immunosuppressant's</p>		<p>For the disposal of Sharps including those contaminated with cytotoxic and/or cytostatic medicinal products and their residues (anything that changes the cell structure)</p>

* The use of yellow/black for offensive/hygiene waste was chosen as these colours have historically been universally used for the sanitary/offensive/ hygiene waste stream.

Appendix 3

Healthcare Waste (Safe Handling, Segregation and Storage)

Waste should be segregated according to the above definitions according to the setting that you work.

When dealing with healthcare waste the following should apply:

- Healthcare waste must be disposed of into **appropriate coloured bags** at the point of generation. Contents **MUST** not be transferred loose from container to container.
- Bags should not be closed by stapling as puncturing the bag may significantly weaken it and would not provide a secure closure.
- Each bag must be no more than two thirds full.
- Each bag must be fastened with adhesive tape or plastic security grips to prevent risks of spillage of contents.
- Clinical waste must not be allowed to accumulate in corridors or other unsuitable places.
- If leakage of body fluids is likely, a second bag or an impervious container should be used.

Labelling

- Bags/Sharps containers must be labelled to identify their source (i.e. the name of the person, hospital ward, clinic, surgery or practice including date disposed of). This is the responsibility of the organisation or practice producing the waste.
- Waste bags should not be more than 2/3 full and should be securely tied.

Storage

- Healthcare waste should be stored in an area which is free from pests and protected from the elements and which is locked and inaccessible to the public prior to collection by the approved method/contractor.
- The storage area should be kept clean.

- Bags of waste MUST not be thrown.

Segregation

- Household, offensive and clinical waste bags MUST be kept separate from each other.
- Trade/Household waste MUST not be disposed of in Orange or Tiger bags.
- Infectious waste must not be disposed of in Tiger or Black bags.

Handling of Waste

- Staff dealing with infectious/hazardous waste should wear appropriate protective clothing (Minimum of gloves & apron) and should have been immunized against hepatitis B.
- Staff dealing with waste should wash their hands after doing so and after glove use.
- All staff dealing with waste in any setting should be aware of the correct procedure to follow in case of a spillage.

Identification of Waste

Public Health Wales NHS Trust will use the nationally accepted colour coding for the identification of waste e.g.

1. Household/Domestic/Trade Waste - Black Bag

Examples include:

- Paper towels (Recycle if recycling in place)
- Wrapping/packing paper (Recycle if recycling in place)
- Unmarked couch roll (Recycle if recycling in place)
- Disposable paper tissues (Recycle if recycling in place)
- Flowers
- Food cartons (Recycle if recycling in place)
- Plastic bottles (Recycle if recycling in place)
- Non-combustible household tins and aerosols (Recycle if recycling in place)

2. Glass/Broken China

Glass, empty clean medicine bottles and broken china to be placed in appropriate cardboard containers or equivalent to eliminate/reduce health and safety risk. (Recycle if recycling in place and practicable to do so)

3. Combustible Tins/Aerosols

Clear bag as flammable, so that domestic staff can retain them in a safe (lockable metal) environment until waste collection day, when the tins/aerosols can be placed into the appropriate waste collection container/skip.

4. Offensive waste – Tiger Bag (marked “Offensive Waste” three quarters full with unique identification (18-01-04) tape/tags, and date of use and staff initials written on to bag using indelible marker)

Waste produced will either be classed as “offensive waste” or infectious/hazardous waste”. Staff must carry out an assessment as to whether the waste is infectious or not, if not the waste must be placed in a tiger bag.

Examples include:

- incontinence and other waste produced from hygiene
- gloves and aprons (PPE) used to undertake a task or care with a non-infectious patient
- sanitary items
- nappies
- disposal of medical items that do not pose a risk of infection

*Offensive waste – Tiger Bag (marked “**Gypsum Waste**” three quarters full with unique identification (18-01-04) tape/tags, and date of use and staff initials written on to bag using indelible marker)*

- non-infectious plaster casts.

5. Infectious/Hazardous waste – Orange Bag (marked “Infectious/Hazardous Waste” three quarters full with unique identification (18-01-03) tape/tags, and date of use and staff initials written on to bag using indelible marker)

Examples include:

- disposal of medical waste items that pose a risk of infection i.e. Clostridium difficile, MRSA, CPE, Norovirus etc. – contact the Infection Prevention and Control Team as required
- Any medical waste that is known or suspected to be infectious i.e. Blood borne viruses (HIV), Hepatitis

6. Sharps – approved Sharps Containers (BS7320:1981 Standard and UN3291)

Examples include:

- Needles
- Syringes
- Suturing needles
- Small cannula
- Stitch cutters
- Disposable razors
- Scalpel blades
- Disposable scalpels
- Lancets
- Glass phials and ampoules
- Guide wires
- Chest drain introducers
- Cannula introducers
- Disposable heaf guns

- Patient sample bottles (if glass)
- Intravenous giving sets
- Any other sharp instruments

Sharps Containers must not be disposed of in a bag – they should be sealed when three-quarters full, no later than 3 months after being brought into use and clearly labelled with the department and date of origin and staff signature and placed at agreed lockable collection points by clinical staff.

7. Pharmaceutical Waste

Prescription only medicines and non-prescription medicines must be disposed of into

- a) A blue lidded cin bin if non-hazardous waste solid or liquid (in a container) waste
- b) A purple lidded cin bin if hazardous solid/liquid or sharp waster
- c) A yellow sharps bin if non-hazardous sharps

8. Cytotoxic agents

Any medicinal product or chemically contaminated biological waste that possesses one or more of the hazardous properties **toxic, carcinogenic, toxic for reproduction or mutagenic**.

This may include drugs from a number of medicinal classes, for example antineoplastic agents, antivirals, immunosuppressant's, a range of hormonal drugs and others.

9. Chemical waste

- a) Refer to the Estates and Health and Safety team.
- b) Departmental Managers/supervisors are responsible for identifying and labelling waste chemicals with the relevant documentation (SDS – Safety Data Sheet).

10. Asbestos

Refer to the Head of Estates and Health and Safety (If unsure of material DO NOT DISTURB).

11. Radioactive waste – solid/liquid

The Radiation Protection Advisor who has overall responsibility for ensuring the safe disposal of radioactive waste.

12. Confidential Waste

Where waste is considered to be of a confidential nature then it should be disposed of in an appropriate way.

13. The Waste Electrical and Electronic Equipment Regulations 2013

The WEEE Regulations place specific obligations on producers of non-household EEE when it is discarded as waste by non-household end users in the UK, Refer to the Estates and Health and Safety team for further information.

- Any items awaiting collection for disposal must be stored within the department store room (not outside)
- Any items of equipment being sent for disposal must first be de-contaminated by the department. This should be done in accordance with the relevant Trust procedure
- Removal via Contractor
- Items must be removed from the Trust Asset Register

IT Electrical Waste Equipment

- Any Obsolete or condemned items of equipment being sent for disposal must first have the hard drive wiped by an IT Technician.
- An email is then sent to the WEEE contractor
- Collected by WEEE contractor, a waste consignment or transfer note must be completed by a member of the IT department and the disposal contractor for every movement of waste
- Removal via Contractor
- An asset management report is then sent via email. Items are then removed from IT Asset spreadsheet and transferred to the WEEE spreadsheet
- Items must be removed from the Trust Asset Register

Identification of Recycling Waste

	<p>General waste including: Crisp packets Tissues All food (please see below)</p>
	<p>Plastic including: Drink bottles - Salad containers Milk containers - Yogurt pots (All containers must be rinsed)</p>
	<p>Paper and cardboard including: Newspapers Magazines – Flyers - Kitchen paper towels (blue roll) Cardboard (sandwich wrappers) Birthday cake boxes - Tissue boxes This is not confidential waste</p>
	<p>Cans including: Drink cans Food cans (baked beans etc) (All containers must be rinsed)</p>
	<p>Most take away coffee cups are not recyclable (they have a mixture of plastic and card). If they are recyclable then they will have the  symbol on them.</p>

Identification of Recycling Waste

Disposal of confidential Waste information

Data is produced in various formats and when the data is no longer required it must be disposed of securely, in a permanently irretrievable form and in accordance with local policies and procedures.