



WASTE MANAGEMENT POLICY



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1. EXECUTIVE SUMMARY

This policy is a necessary requirement to ensure the document fulfils its moral and legal duties for safe, compliant, environmentally and financially sustainable Waste Management.

This policy provides guidance to all staff, and defines responsibilities in all aspects of Waste Management with clear standards for appropriate waste segregation, storage, handling, transport and disposal.

2. INTRODUCTION

Waste Management is the generic term given to the whole spectrum of activities associated with waste, namely, its generation, segregation, storage, handling and transportation from point of source (ward/department) to final place of disposal (recycling/landfill/incinerator).

This policy details the arrangements, including responsibilities, for the classification, segregation, collection, storage, handling, transportation and disposal of all waste produced as a consequence of the document activities.

3. SCOPE

This policy applies to all services directly provided by the Company and all staff should familiarize themselves with the policy.

This policy encompasses the activities and responsibilities of all Company's staff.

This policy applies also to all contractors and temporary workers who are engaged to work on the behalf of the Company, on its owned or client's premises.

4. AIMS AND OBJECTIVES

This policy has been prepared with the objectives of:

- Ensuring full legislative compliance for Waste Management activities at all time, and when possible lead on best practice.
- Reducing and mitigating the Health & Safety, Fire Safety and Infection Control risks associated with Waste Management activities.
- Reducing and mitigating the environmental impacts associated with Waste Management activities; and
- Ensuring robust controls and assurances are in place for all Waste Management activities.

5. IMPACTS AND RISKS ASSOCIATED WITH WASTE MANAGEMENT

a. Health & Safety and Fire Safety

The Company recognizes the Health & Safety and Fire Safety risks associated with Waste Management.

b. Manual handling

The improper manual handling of waste presents a risk to Company's staff and contractors. The Company is committed to minimize and mitigate these risks as far as practically reasonable. This includes the conduct of risk assessments when new waste management equipment or practices are introduced.

c. Falls and trips

The inappropriate storage of waste can create falls and trips hazards. Refer to the STORAGE OF WASTE section for appropriate waste storage protocols.

d. Fire safety

The inappropriate storage of waste can create fire hazards or impact fire evacuation procedures. Refer to the STORAGE OF WASTE section for appropriate waste storage protocols.

e. Infection Control

It is important to adopt appropriate handling and storage protocols which minimize the Infection Control risks associated with infectious waste. Refer to the STORAGE OF WASTE section for appropriate waste storage protocols.

f. Environmental impacts

Disposing of waste has very significant environmental impacts.

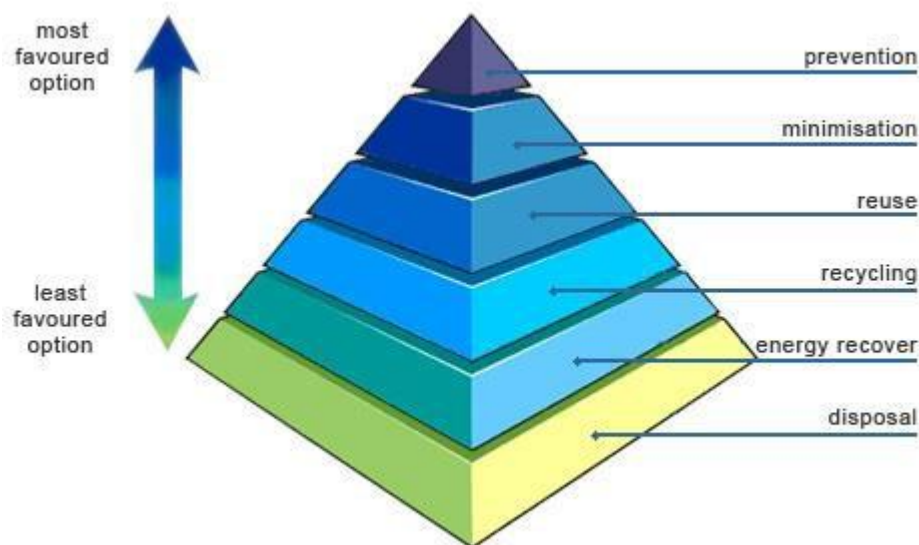
- Throwing away things is a waste of resources. It wastes the raw materials and energy used in making

the items and contributes to global resources depletion.

- Landfilling waste generates methane gas, which is explosive and contributes significantly to Climate Change.
- Leachate produced as waste decomposes in landfill causes land or water pollution.
- Incinerating waste produces toxic substances, such as dioxins which have an effect on local air quality.
- Gases from incineration cause air pollution and contribute to acid rain, while the ash from incinerators may contain heavy metals and other toxins.
- Transporting waste is very carbon intensive, contributes to Climate Change and has an effect on air quality.

g. Waste Hierarchy

The waste hierarchy is a classification of preferred waste management options in order of their environmental impact.



h. “Zero-landfill”

Practice wherein wastes are reused; recycled or undergo alternative treatment processes with the aim of avoiding the use of landfills for disposal. This is particularly relevant for the residual fraction of domestic waste (later referred as Non-Healthcare General waste, i.e. black bags).

6. KEY RESPONSIBILITIES

6.1. The Chief Executive

The Chief Executive ultimately has overall responsibility for safe, effective and compliant Waste Management throughout the Company.

6.2. All Staff

All Staff have a responsibility and legal duty of care to comply with this policy and associated procedures. All staff are responsible for:

- Observing the waste policy and waste management procedures. Most particularly in regard to correct waste segregation.
- Reporting accidents and any incidence of non-compliance with this policy.
- Considering any untapped opportunities for waste reduction, minimization in recycling in their area/department.
- Actively participating and supporting waste reduction, minimization and recycling initiatives undertaken in their area/department.
- Minimizing waste production including:

- Ensuring double sided printing (duplex) printing is enabled as the default setting for all printing (where local printers allow);
- Reusing office stationery or wastepaper that has been printed on one side only as scrap paper when appropriate.
- Reviewing the need to purchase items so that future waste is avoided (i.e. not over-ordering items with a shelf life or where there is limited storage capacity);
- Advertising fit for purpose redundant items in the e-bulletin prior to disposal;
- Considering purchasing options that minimize waste including leasing.
- Requesting that suppliers take unwanted items or packaging back where possible (e.g. pallets).

6.3. The Executive Director responsible for Estates

The Executive Director has delegated responsibility for safe, effective and compliant Waste Management throughout the Company and is responsible to the Chief Executive for ensuring systems are in place to this effect.

6.4. The Associate Director of Estates

The Associate Director of Estates has delegated responsibility for safe, effective and compliant Waste Management throughout the Company.

The Associate Director of Estates is responsible:

- To the Executive Director responsible for Estates for establishing systems to this effect and ensuring sufficient resources are allocated.
- For delegating some of these responsibilities and duties to a nominated appointed person with a Waste Manager responsibility.

6.5. The Waste Manager

The Waste Manager has a delegated responsibility for managing and monitoring systems for safe, effective and compliant Waste Management at the Company.

The Waste Manager is responsible:

- For providing advice and guidance on all matters related to Waste Management at the Company.
- For the development, up-keeping and implementation of the Waste Management Policy and associated Procedures throughout the Company.
- For ensuring waste legislative requirements are satisfied at all Company sites including applications for environmental permits or exemptions and registration with the Environment Agency as a Hazardous Waste Producer
- For ensuring that all relevant new and upcoming waste legislative requirements are identified and when appropriate communicated to managers and staff, in a timely manner to ensure the Company remains compliant at all times.
- For reporting breaches of regulatory compliance, the reason for non-compliance, and the measures taken to regain compliance and prevent further incidents.
- For acting as the principal point of contact with regulatory bodies and ensuring that all communications are maintained on file.
- For managing St Mary's clinical waste transfer station in line with its permit license.
- For procuring waste management services contracts in a sustainable and legally compliant manner.
- For managing the Company waste budget in a sustainable and cost-effective manner.
- For producing pre-acceptance reports for clinical waste contractors and undertaking Duty of Care audits of the Company waste contractors.
- For managing all waste contractors employed by the Company.
- For conducting a rolling schedule of waste audits throughout the Company.
- For staff training and raising awareness on this policy and associated procedures.

6.6. The Clinical Waste Operative

The Clinical Waste Operative is responsible for all clinical waste transport operations at any Broght Holder operation location, the up-keeping of the Waste Transfer Station and waste yard and the day to day operational management of the clinical waste transfer station.

6.7. Associate Director

Associate Directors have overall responsibility for the implementation of this policy within their Directorate.

6.8. The Estates Maintenance Foremen

The Estates Maintenance Foremen are responsible for ensuring that all the Estates Maintenance Teams are aware of the right procedures and protocols for disposing of waste arising from maintenance and refurbishment works.

The Estates Maintenance Foremen are responsible for ensuring all contractors working on projects managed by the maintenance team are made aware and adhere to SOP 404 – Contractors’ waste procedure.

6.9. The Capital Planning and Development Manager

The Capital Planning and Development Manager is responsible for ensuring all contractors working on projects managed by the capital team are made aware and adhere to SOP 404 – Contractors’ waste procedure.

6.10. The Infection Control Team

The Infection Control Team is responsible for ensuring Infection Control policies/procedures are aligned with this Waste Policy and associated procedures. The Infection Control Team is responsible for providing advice and support to the Waste Manager to minimize the risks from exposure to infections caused by waste.

6.11. The Health & Safety and Security team

The Health & Safety and Security team is responsible for providing pro-active advice and support to the Waste Manager to minimize the H&S (manual handling, falls and trips), and fire safety risks caused by waste.

6.12. General Managers / Departmental Managers (non-clinical)

General Managers / Departmental Managers in non-clinical areas are responsible for:

- Ensuring that this policy and the procedures it contains, particularly regarding waste segregation are brought to the attention of and observed by all staff in the area under their responsibility. For non-clinical areas this includes
- segregating wastes for recycling and ensuring that correct Company procedures are followed for any hazardous domestic waste (E.g. batteries, toners), electrical waste, bulky waste etc.
- Ensuring that there is a proactive approach to adhering to this policy and for staff under their management to be encouraged to participate in implementing this Waste Policy and associated procedures.
- Actively cooperating with the **Waste Manager** to ensure the effective and compliant management of waste arising in their area of responsibility.

6.13. Clinical managers / Ward managers / Modern matrons

Ward/Department managers are responsible for:

- Ensuring that this policy and the procedures it contains, particularly regarding waste segregation are brought to the attention of and observed by all staff in the area under their responsibility. For clinical areas this relates particularly to clinical waste (infectious waste, sharps, medicines wastes, offensive wastes) and domestic waste.
- Responsible for ensuring that Waste Segregation posters are displayed in appropriate places to inform staff on adequate waste segregation (available from the Waste team).
- Ensuring that waste bins in their area are kept clean. Lockable metal yellow clinical waste cabinets and external clinical bins can be cleaned by Estates on demand.
- Ensuring that their designated waste storage areas (internal or external) are kept clean and tidy and free from loose waste, bulky items and items for storage.
- Ensuring any lockable waste bins/ are kept locked shut at all times except when being filled.

6.14. Head of Facilities Services

The Head of Facilities Services is responsible for ensuring effective systems are in place for the general portering staff, domestics staff and caretakers to fulfil their responsibilities and that they have received adequate training in order to comply with this policy.

6.15. Portering staff

General portering staff are responsible for:

- Collecting and the basic segregation of domestic waste (black bags, clear recycling bags, cardboard, Waste Electronic & Electrical Equipment (WEEE) etc.) in all internal areas with waste cupboards at St Mary's Hospital phase III (and some external areas where applicable).
- Operating the Company's waste compactor after receiving the necessary training.
- Operating the Company's cardboard balers after receiving the necessary training.

Departmental portering staff are responsible for:

- Collecting and the basic segregation of domestic waste (black bags, clear recycling bags, cardboard, WEEE etc.) in their areas.
- Operating the Company's waste compactor after receiving the necessary training.
- Operating the Company's cardboard balers after receiving the necessary training.

Departmental portering staff managers are responsible for ensuring effective systems are in place for their portering staff to fulfil their responsibilities and that they have received adequate training in order to comply with this policy.

6.16. Domestic staff

Domestic's staff are responsible for:

- Emptying domestic/recycling office bins across the Company sites at a frequency set by Hotel Services.
- Ensuring the correct bin bags are placed in the relevant bins (clear for recycling waste, black for domestic waste).
- Ensuring waste is placed in the correct external waste bins.
- Reporting any areas showing poor segregation practice (food waste in recycling bins, recycling waste in domestic waste bins) to the Waste team so that the area involved can be advised and training provided.

6.17. Caretakers

Caretakers are responsible for:

- Transferring waste (Redundant equipment and other bulky items as defined above) from its collection point to the Company main waste compound (at Estates) and placing the waste items in the correct bay or container.

6.18. Company contractors

Company contractors are responsible for ensuring all wastes they produce whilst on site are managed and disposed of in accordance with the Company's policy and SOP 404. Contractors who transport Company waste must be suitably licensed waste carriers or where required, waste brokers, with evidence provided (waste carriers licenses). Paperwork for any waste streams leaving the Company's control must be obtained in the form of consignment notes (for hazardous waste) and waste transfer notes (non- hazardous wastes).

Contractors affected would include those undertaking refurbishment projects, routine or non-routine maintenance activities.

Generally, contractors are NOT permitted to use Company facilities and these can only be used with prior consent of the Company's contract manager and then in full accordance with this Policy.

7. DEFINITION OF WASTE

Under the Waste Framework Directive (European Directive (WFD) 2006/12/EC), waste is "Any substance or object the holder discards, intends to discard or is required to discard".

7.1. Controlled Waste

Controlled Waste is waste that is subject to legislative control in either its handling or its disposal under the Controlled Waste Regulations 1992. The types of wastes covered include all domestic, commercial and industrial waste. All waste produced by the Company is classed as controlled commercial waste.

7.2. Hazardous Waste

Hazardous waste is waste that poses substantial or potential threats to public health or the environment. Waste

is legally classified as hazardous if it is covered under the Hazardous Waste Regulations 2005 and it will be listed with a star (*) in the European Waste Catalogue (EWC).

7.3. Radioactive Waste

Radioactive wastes are wastes that contain radioactive material. Radioactive waste typically comprises a number of radioisotopes: unstable configurations of elements that decay, emitting ionizing radiation which can be harmful to humans and the environment. See radionuclide contaminated waste (lymph biopsy – WDS 114).

7.4. Clinical wastes

General definition of clinical waste

Wastes not listed above and known or believed to be contaminated with body fluids (blood, urine, sputum, vomit, faeces) are classed as either infectious clinical or offensive (non-infectious clinical) waste.

Wastes that have not come into contact with blood or body fluid are neither infectious nor offensive and are thus classed as domestic waste. As a result, packaging (including sterile items packaging), paper towels from hand washing, bed rolls not contaminated with body fluids, and other domestic type wastes must not be disposed of in the infectious (orange bags) or offensive (tiger bags) clinical waste streams. These wastes must be disposed of in domestic waste bins (black bags) or if suitable and facilities exist recycling waste bins (clear bags).

Infectious clinical waste

Wastes contaminated with body fluids from a patient known or suspected to be infectious is classed as infectious waste (orange bags). Some areas may be using yellow bags which are another classification of infectious clinical waste.

8. DUTY OF CARE

As a producer of waste, the Company has a legal 'Duty of Care' to make sure its waste is handled safely and only passed to people authorized to receive it.

For any waste removed from Company premises, the designated waste contractor will have to supply a Waste Transfer Note (WTN) for controlled waste, and a Hazardous Waste Consignment Note (HWCN) for hazardous waste.

No waste may leave the Company without a Waste Transfer Note or Hazardous Waste Consignment Note.

8.1. Waste Transfer Notes (Controlled waste)

Before any Controlled waste leaves the Company a Waste Transfer Note (WTN) must be produced ensuring all the required information is put onto the form. The form must be signed by an authorized Company officer and be given to the waste carrier when they come to collect the waste. For regular collections an annual waste transfer note can be set up in advance of the first collection. Waste transfer notes must be retained for two years following the disposal of the waste.

8.2. Hazardous Waste Consignment Notes (Hazardous waste)

Before any hazardous waste is removed from the Company a Hazardous Waste Consignment Note (HWCN) must be completed ensuring all relevant information is put onto the form. This form cannot be completed annually but must be completed for each load. Waste consignment notes must be retained for three years following the disposal of the waste.

8.3. Duty of Care Audits

It is the Company responsibility to make sure its waste contractors are registered waste carriers and are taking the waste to legitimate sites. As a result, the Company has a legal responsibility to conduct Duty of Care audits to ensure the facilities receiving the waste handle and treat our waste in a safe, compliant and sustainable manner.

8.4. Clinical Waste Pre-Acceptance Audits

Facilities authorized to incinerate or treat clinical wastes are required to assess and have access to detailed information on the composition of the waste from the producer before they receive it. As a result, the Company has a legal obligation to produce and provide its clinical waste contractor detailed and thorough clinical waste annual pre-acceptance audits for both St Mary's Hospital and its community premises producing clinical waste, in line with the requirements of the Environment Agency Additional guidance for clinical waste.

9. OTHER LEGISLATIVE AND REGULATORY REQUIREMENTS

The Company is committed to following all applicable waste legislation, statutory guidance, and other environmental requirements to which it subscribes, as well as to adhere to industry best practice when possible. The Associate Director of Estates is responsible for ensuring that the Company adheres to all such legislation through the active support and guidance of the Waste Manager.

The Company is fully committed to cooperating with regulators, such as the Environmental Agency, the Water Authority, the Health & Safety Executive and DEFRA.

9.1. Landfill Tax

This is a tax on the disposal of waste. It aims to encourage waste producers to produce less waste, recover more value from waste and to use more environmentally friendly methods of waste disposal.

9.2. The Waste (England and Wales) Regulations 2011

This regulation provides the requirements for using the waste hierarchy. The waste hierarchy is a classification of waste management options in order of their environmental impact, such as: reduction, reuse, recycling and recovery.

9.3. Hazardous Waste Regulations 2005

Hazardous waste is essentially waste that contains hazardous properties which if mismanaged has the potential to cause greater harm to the environment and human health than non-hazardous. As a result, strict controls apply from the point of its production to its movement, management, and recovery or disposal.

9.4. Waste Electrical and Electronic Equipment Directive

Waste Electrical and Electronic Equipment (WEEE) directive aim to reduce the quantity of waste from electrical and electronic and increase its re-use, recovery and recycling.

9.5. Landfill directive

This directive aims to prevent or reduce as far as possible negative effects on the environment from the landfilling of waste, by introducing stringent technical requirements for waste and landfills and setting targets for the reduction of biodegradable municipal waste going to landfill.

9.6. Batteries directive

This directive aims to improve the environmental performance of batteries and minimize the impact waste batteries have on the environment by banning the disposal batteries in landfill or by incineration.

10. WASTE GENERATED BY THE COMPANY

The Company produces a very wide variety of waste streams. These can be broadly classed as Healthcare and Non-healthcare wastes.

Please refer to **Appendix A – Waste Data Sheets** for a detailed break-down of all waste streams and associated transport/disposal procedures.

10.1. Healthcare Wastes (Appendix A – PART A)

This category covers all the wastes specifically produced in a healthcare environment, such as clinical waste, offensive waste, anatomical waste, sharps wastes, etc.

Healthcare waste can be defined as:

1. “. . . any waste which consists wholly or partly of human or animal tissue, blood or other body fluids, excretions, drugs or other pharmaceutical products, swabs or dressings, syringes, needles or other sharp instruments, being waste which unless rendered safe may prove hazardous to any person coming into contact with it; and
2. any other waste arising from medical, nursing, dental, veterinary, pharmaceutical or similar practice, investigation, treatment, care, teaching or research, or the collection

of blood for transfusion, being waste which may cause infection to any person coming into contact with it.”

10.2. Non-Healthcare Wastes (Domestic waste) (Appendix A – PART B)

This category covers all the wastes which could typically be produced in a domestic / household setting such as general (black bag) waste, dry mixed recycling, bulky items, etc.

10.3. Non-Healthcare Hazardous Wastes (Appendix A – PART C)

This category covers wastes not specific to a healthcare setting, but which have a particular property making them hazardous such as asbestos, Waste Electrical and Electronic Equipment, chemicals, etc....

11. WASTE GENERATED IN THE COMMUNITY

11.1. Company Community premises

This Policy and associated procedures fully apply to Company community premises such as Health Centres and Community Clinics.

12. WASTE GENERATED BY OTHER ORGANISATIONS

12.1. Contractors working for the Company

All contractors employed or working on behalf of the Company on the Company’s premises will make the necessary arrangements to comply with this policy, but most especially SOP 404 – Contractors’ waste procedure. Waste carriers / contractors are required to follow on site rules for vehicle parking, loading/unloading, security and speed limit whilst on the Company premise.

12.2. Organizations for which the Company arranges waste disposal

If the Company arranges any waste disposal services through its waste contractor(s) for other organizations, those organizations have to adhere to this Waste Policy and are responsible for ensuring their staff are aware and apply the policy and associated procedure. Compliance might be audited by the Waste Manager or any other authorized officer.

13. SEGREGATION OF WASTE

13.1. Waste segregation policy

- All wastes produced at the Company are segregated in accordance with the **Waste Data Sheets** supplied in **Appendix A** of this policy. There may be specific local circumstances which require to adopt adapted or different segregation procedures, but only if agreed in advance with the Waste team.
- **Waste segregation in line with this policy is not optional but MANDATORY.**

13.2. Domestic waste segregation – Recycling scheme

- When recycling facilities are deployed to an area, different communication channels will be used to make staff aware of the new segregation procedure. Every effort will be made to adapt to local circumstances.
- Area’s with facilities for recycling (recycling bins), then full segregation of dry mixed recyclables is required by all staff at all time.
- In office areas supplied with both recycling bins and general waste bins in shared locations (on same principle as confidential waste consoles), Hotel Services has full authority to instruct Domestic to only empty the provided shared bins.

13.3. Organizations for which the Company arranges waste disposal

If the Company arranges any waste disposal services through its waste contractor(s) for other organizations, those organizations have to adhere to this Waste Policy and are responsible for ensuring their staff are aware and apply the policy and associated procedure. Compliance might be audited by the Waste Manager or any other authorized officer.

14. TRANSPORT OF WASTE

14.1. Internal transport

- **Healthcare (Clinical) and Non-healthcare (Domestic) wastes may under no circumstances be mixed for transport.**
- Waste bins / trolleys used for the movement of clinical waste within premises shall be designed and constructed so they are easy to manually handle.
- Waste bins/trolleys must be regularly cleaned and drained to prevent infestation.
- Trolleys and carts must be disinfected when spillages occur before reuse.

15. HANDLING OF WASTE

15.1. Healthcare Wastes

Refer to the **Appendix A** of this policy for each specific clinical waste stream.

16. STORAGE OF WASTE

16.1. Waste bins

- Waste bins purchased by wards/ clinical departments must be as specified in the latest version of **Waste bins for clinical areas** in line with the recommendations of the Waste Management Group.
- Clinical waste bins must be pedal operated, fireproof, easy to clean and disinfect to prevent risk of infection, odor and offence. They must be in a good state of repair (pedal and lid working properly etc.) and carry the right color-coding.
- The Waste Manager has final authority on the chosen type and model of recycling waste bin supplied when recycling is introduced to any area. The type and model of recycling waste bins supplied by Estates are the default option throughout the Company for both clinical and non-clinical areas.
- Should departments purchase waste bins for domestic waste, these must be compatible with the Company Recycling scheme and meet the approval of the Waste Manager.

16.2. Choosing waste containers and bags

Subject to securing the relevant and appropriate assurances, the Waste Manager has final authority on the type of waste containers (e.g. sharps bins) and bags used by department/wards, so to ensure containers and bags are compatible with the Company policy and procedures, internal transport arrangements, our waste contractors' requirements, and the Carriage of Dangerous Goods.

16.3. Purchasing of waste containers and bags

- All waste containers and bags in clinical areas are purchased by the ward/department (through Supplies).
- Broken glass/crockery buckets in all areas are purchased by the ward/department.
- Bags for domestic (black) and recycling (clear) waste in all non-clinical areas (including public areas, such as corridors) are purchased and supplied by Hotel Services.
- Confidential waste bags (for clear-outs/office moves) are supplied by the Waste team at Estates

16.4. Internal storage

- Healthcare (Clinical) and Non-healthcare (Domestic) wastes may under no circumstances be mixed in storage areas.
- Waste must not accumulate in corridors, lobbies, wards or other unsuitable places.
- Waste must not under any circumstances obstruct access routes, fire escape routes or fire doors.
- Waste items must not be placed in areas that are likely to cause a tripping hazard.
- Waste containers, waste cupboards and waste bins must be kept shut and locked when not in use to prevent unauthorized access or access to waste by vermin.
- Clinical waste bins shall be sited away from food preparation, general storage and route used by the public.
- Access to clinical waste storage shall be for authorized personnel only.

16.5. External storage

- Waste must not be stored loose in any external areas – See fly-tipping section below.
- Waste wheelie bins or any other containers must be kept shut and locked when not in use to prevent unauthorized access or access to waste by vermin.

- Access to clinical waste storage shall be for authorized personnel only.

16.6. Spills

- It is the responsibility of all staff within a work area, to be aware of any procedure regarding any 'Spillage' of substance in their area of work, if applicable. To know where the spill kit is located and what course of action is required to clean up the spillage.
- Further guidance on chemicals can be found in the COSHH Policy available on the intranet.
- Any materials used in the containment and absorption of spills should be treated for disposal as the material spilled. For instance, contaminated materials used to clean cytotoxic/cytostatic medicines spills should be disposed as cytotoxic/cytostatic waste. Same applies to chemicals.

17. FLY TIPPING

It is the responsibility of the person or department producing the waste to ensure a suitable waste disposal route is identified in line with this policy and associated procedures. Any waste left unattended in internal areas or on grounds with no arrangements for disposal will be considered fly-tipping.

Fly-tipping of waste, including by Company staff, be it internal to the Company premises, or on Company grounds will not be tolerated, and all occurrences will be fully investigated.

18. DISPOSAL TO DRAINS AND SEWERS

Under no circumstances can any discharges to sewer other than domestic sewage be made. The following are also suitable for disposal to drains body fluids, glucose / saline, sterile water and nutritional supplements.

Currently the Company it is not permitted to discharge anything to sewer other than the above. Any uncontrolled releases to sewers put us in breach of the Trade Effluent Regulations (Water Industry Act 2003) and expose us to prosecution from the regulatory body (Southern Water). Should a spill occur which results in chemicals, oils and other toxic materials to be released to drains or sewers, contact the Waste Manager immediately.

19. CLINICAL WASTE TRANSFER STATION

The Company operates transport of clinical waste, where its waste is delivered to a third party to be properly treated.

19.1. Technically Competent Manager (TCM) cover

The Company is required to ensure a Technically Competent Manager cover as specified by the Environment Agency. This is currently set at 15% of the station operating time (or 1 working day per calendar week). The required qualification is Certificate of Technical Competence Level 4 in the Transfer of Hazardous Waste or equivalent.

Quarterly Waste Return

This is a record of waste tonnages handled at the Transfer Station, being waste received and waste removed over the period of time reported for.

Quarterly Consignee Return

This is a record of all Hazardous Waste consignments accepted at the Transfer station over the period of time reported for.

19.2. Access and ingress, building alterations

Access to the Clinical Waste Transfer Station is strictly limited to authorized personnel and at the discretion of the Waste Manager. No waste whatsoever can be deposited in the Clinical Waste Transfer Station without prior authorization from the Waste manager.

Any alterations or building works undertaken inside or within immediate vicinity of the Clinical Waste Transfer Station and which could affect its use or access cannot be undertaken without prior written authorization of the Waste manager.

20. AUDITING

It is the responsibility of the Waste & Recycling Officer to conduct a monitoring and auditing programme for all clinical areas for waste management to ensure the correct implementation of this policy.

The monitoring and auditing programme will follow a pro-format audit schedule with a wide scope ranging from adequate waste segregation at ward level, staff awareness of operational procedures for waste management, to opportunities for waste minimization.

Departments/Wards managers will have full responsibility for addressing any negative audit findings and taking adequate corrective actions.

21. TRAINING AND AWARENESS-RAISING

This Waste Management Policy does not have a mandatory training requirement, but the following non-mandatory training will be available:

- Waste management e-learning training will be available. Undertaking the e- learning module will be risk driven. Should an area display poor practice or understanding of waste segregation, the Waste Manager may require the Department/Ward manager to train their staff using the module.
- Waste management awareness will be actively promoted through a number of communication channels.

22. REVIEW AND REVISION ARRANGEMENTS

The Waste Manager will be responsible for reviewing and revise as appropriate this Policy no later than 3 years after its publication. Should legislation or any other changes of circumstances arise; this Policy will be updated accordingly prior to the 3 year's timeframe.

23. MONITORING / KEY PERFORMANCE INDICATORS

For the successful implementation of this policy, the following key performance indicators will be measured:

- ERIC (Estates Return Information Collection) data
- Waste risk register for compliance to the relevant legislation

24. APPENDICES

Appendix A - Financial and Resourcing Impact Assessment on Policy Implementation

This form must be completed where the introduction of this policy will have either a positive or negative impact on resources. Therefore, this form should not be completed where the resources are already deployed, and the introduction of this policy will have no further resourcing impact.

Document title:

Totals	WTE	Recurring	Non Recurring
Manpower Costs			
Training Staff			
Equipment & Provision of resources			

Summary of Impact:

Risk Management Issues:

Benefits / Savings to the organization: Equality Impact Assessment

- Has this been appropriately carried out? YES/NO
- Are there any reported equality issues? YES/NO

If "YES" please specify:

Use additional sheets if necessary.

Please include all associated costs where an impact on implementing this policy has been considered. A checklist is included for guidance but is not comprehensive so please ensure you have thought through the impact on staffing, training and equipment carefully and that ALL aspects are covered.

Manpower	WTE	Recurring	Non-Recurring
Operational running costs			
Totals:			

Staff Training Impact	Recurring	Non-Recurring
Totals:		

Equipment and Provision of Resources	Recurring £ *	Non-Recurring £ *
Accommodation / facilities needed		
Building alterations (extensions/new)		
IT Hardware / software / licenses		
Medical equipment		
Stationery / publicity		
Travel costs		
Utilities e.g. telephones		



Process change		
Rolling replacement of equipment		
Equipment maintenance		
Marketing – booklets/posters/handouts, etc		
Totals:		

- Capital implications \$5,000 with life expectancy of more than one year.

Funding /costs checked & agreed by finance:	
Signature & date of financial accountant:	
Funding / costs have been agreed and are in place:	
Signature of appropriate Executive or Associate Director:	

Appendix B - Equality Impact Assessment

This Equality Analysis is a written record that demonstrates that you have shown *due regard* to the need to **eliminate unlawful discrimination, advance equality of opportunity** and **foster good relations** with respect to the characteristics protected by the Equality Act 2010.

Name of policy/procedure	Waste Management Policy
Date of assessment:	
Responsible department:	
EIA Author:	
Intended equality outcomes:	

Who was involved in the consultation of this document?

Date	Forum

Please describe the positive and any potential negative impact of the policy on service users or staff.

Protected Characteristic	Equality Analysis	EIA Impact (Positive/Negative)
Age		
Disability		
Gender reassignment		
Marriage & civil partnership		
Pregnancy & maternity		
Race		
Religion/Belief		
Sex		
Sexual orientation		

Stage 2: Full impact assessment

What is the impact?	Mitigating actions	Monitoring of actions

Appendix C - WASTE DATA SHEETS (WDS)

For ease of use, the Waste Management Policy is divided into Waste Data Sheets (WDS) for all waste streams generated by the Company.

WDS are indexed below, headings give the following details:

WDS	Waste Stream	Color	EWC Code	Haz	Description
WDS reference number	Heading description of the waste stream	Color-coding of containers	European Waste Catalogue code (* if hazardous)	Y: Hazardous N: Non-hazardous LB: Landfill ban	More detailed description of waste stream

Each WDS gives the following details for each waste stream when applicable:

EWC code	European Waste Catalogue code
Definition	Definition of the waste materials
Examples	Relevant examples
Container(s)	Details of waste container(s) / packaging to be used including color coding.
Handling	(If required) Requirements for handling the waste stream.
Internal Storage	Details of correct storage for the waste
Internal Transport	Details of transport arrangements for the waste to storage before disposal.
Final Disposal	Details of disposal route / treatment process for waste stream.

INDEX

PART A – HEALTHCARE WASTES

WDS	Waste Stream
101	Clinical waste - yellow stream

PART B – NON-HEALTHCARE – NON-HAZARDOUS WASTES

WDS	Waste Stream
201	General Waste

PART C – NON-HEALTHCARE – HAZARDOUS WASTES

WDS	Waste Stream
301	Asbestos, Plasterboard – plaster, Oils / oil contaminated waste, Paints, Chemicals / gas cylinders, Printer toners and inkjet cartridges