WASTE MANAGEMENT POLICY

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<tr>
<td>AUTHOR:</td>
<td>Head of Estates and Facilities</td>
</tr>
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<td>CONSULTATION GROUPS:</td>
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**POLICY SUMMARY**

EPUT is committed to providing waste services that
- Meet the requirements of ‘Safe Disposal of Health care Waste’ in all Trust settings.
- Provides external containers for storage of waste and a collection and disposal process in line with Trust requirements.
- Ensures that all waste streams are disposed of correctly and in line with legislation.
- Provides training to all of its staff on the safe handling and storage and disposal of all waste streams.
- Works towards a sustainable solution of waste disposal with 0% emissions.
- Monitors and audits quantities of waste and their disposal method.

The Trust monitors the implementation of and compliance with this policy in the following ways:
- Datix reporting of Incidents. Regular monitoring and reports to relevant committees.
- Regular contract review meetings. Duty of Care visits to contractor sites.

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The Director responsible for monitoring and reviewing this policy is Executive Chief Finance Officer
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ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

WASTE MANAGEMENT POLICY

Assurance Statement

Essex Partnership University NHS Foundation Trust (EPUT) is committed to ensuring the health, safety and welfare of its employees, patients, visitors and residents and contractors, particularly those who are involved in waste disposal and others who may be affected by wastes which are generated in the course of its business.

By adopting this policy the problems and risks associated with an uncoordinated approach to the management of waste can be minimised.

By failing to adopt this policy the Trust could be deemed to have been negligent in its duty of care to the environment, patients/clients, staff, visitors and other persons either employed by or contracted by the Trust to move, collect and transfer waste away from its premises.

1.0 INTRODUCTION

1.1 The Trust aims to provide an environment that is both safe and healthy for its staff, patients and any other person that is contracted to assist with the disposal of all categories of waste from its premises, whilst at the same time being mindful of the impact the waste it produces has on the environment.

1.2 The Trust recognises the need for safe and efficient handling of waste, as this will allow for waste products/items to be either, segregated, stored and/or disposed of/recycled correctly.

1.3 The Trust recognises its responsibilities and its Duty of Care with all matters relating to disposal of waste as specified in the following documents:

- Management of Health and safety at Work Regulations (1999)
- The Environmental Permitting (England & Wales) Regulations (2016)
- The Environment Protection Act (1990)
- The Control of Pollution Act (1974)
- The Hazardous Waste Directive
- HTM 07-01 The safe Management of Healthcare Waste
- The Carriage of Dangerous Goods and Use of Transportable Pressure Equipment Regulations 2009 ("CDG 2009")
- The Controlled Waste Regulations (2012)
- Statutory Duty of Care Regulations
1.4 The Trust recognises its responsibilities under the Carriage of Dangerous Goods and Use of Transportable Pressure Equipment Regulations 2009 as a consignor of articles and substances classified as dangerous goods for carriage on public roads and highways. The Trust uses the services of a qualified Dangerous Goods Service Advisor (DGSA) to ensure our compliance and responsibility for waste at sites and also whilst being transported.

1.5 The Trust recognises its responsibilities with regards to actively reducing the volume of waste it produces by the use of and promotion of recycling thereby Reducing the level of waste sent to landfill.

1.6 The Trust is committed to working with suppliers of goods and services to the organisation to promote the minimisation of unnecessary packaging.

### 2.0 SCOPE OF THE POLICY

2.1 This policy applies to all Trust employees whether on a permanent or temporary contract, or as a member of the bank. It also applies to locum and Agency staff and staff from other organisations who work on EPUT sites and staff who work on non EPUT sites.

2.2 Any organisation contracted by the Trust to dispose of waste or collect waste for recycling will be made aware of this policy.

2.3 Any Contractor employed by the Trust must be made aware of the Waste Management Policy and Procedures.

### 3.0 RESPONSIBILITIES

3.1 The Chief Executive has responsibility to ensure, so far as reasonably practicable, that the waste management policy is applied throughout the organisation in order that wastes produced are disposed of using the safest method possible and in accordance with current statutory requirements.

3.2 Service Managers have a responsibility to ensure, so far as is reasonably practicable that all persons reporting to them are aware of their duties with regards to:
3.2.1 The segregation and safe handling of all items that are either to be recycled or disposed of. In particular they will ensure that waste generated in their service is handled, stored and disposed of safely (Please refer to relevant procedures, (RMPG13a, b, c, d).

3.2.2 The correct Standing Financial Instruction, i.e. FP05/02, when an item that is included on the Asset Register is disposed of.

3.3 The Director of Estates and Facilities and the Head of Estates and Facilities has the responsibility:

3.3.1 Ensure that the Waste policy and procedures are monitored and audited to ensure compliance with relevant legislation and the guidance contained within HTM 07-01: The Safe Management of Healthcare Waste. Results of the monitoring and waste audits will be reported to the Health, Safety & Security Sub-Committee.

3.3.2 Waste Pre-Acceptance:
   The Environmental Permitting Regulations requires all wastes generated at a Healthcare site is subject to a pre-acceptance audit prior to collection via a contractor. This also confirms the type of waste and its appropriate method of disposal. These should be done in accordance with the amount of waste produced annually, e.g. Sites producing over 5 tonnes per year – every 12 months; sites with less than 5 tonnes - every 5 years.
   Audits may be completed by staff, internal or external contractors or the Waste contractor.

3.3.3 Ensure that waste is disposed of in accordance with relevant legislation, i.e. using only authorised waste contractors.

3.3.4 Monitor waste contractors to ensure compliance with statutory requirements and Trust Standards.

3.3.5 Ensure that all appropriate documentation i.e. consignment notes are kept in accordance with statutory duties at each unit for a period of three years.

3.3.6 Ensure that the service is tendered in accordance with the correct timescale.

3.4 All staff working on EPUT sites have a responsibility to ensure that their Workplace is hazard free and that they follow the appropriate procedures handling the different categories of waste i.e. hazardous, (including clinical waste), non-hazardous and recyclables to ensure that waste is handled correctly and safely and in a manner that will not endanger themselves or other persons (see RMPG13a).

3.5 The Trust has a duty towards other organisations to ensure that waste and endanger their employees or any persons connected with tasks associated with the collection and disposal of waste.
3.6 Trust staff who are disposing of surplus and redundant items must ensure that the procedure (RMPG13c) for the disposal of these items is followed.

4.0 IMPLEMENTATION

4.1 All Trust employees (see 2.0 Scope of Policy) will receive information regarding the segregation, storage and handling of waste firstly during their induction Training and subsequently through regular updates to ensure they fully understand the risks attached these tasks. In particular they must be aware of the different categories of waste and recyclables and how they must be dealt with.

4.2 The Trust will provide all staff who are to handle waste in the course of their duties with appropriate protective clothing to ensure that staff remain as safe as possible whilst they are handling or moving waste.

4.3 The Trust will offer all staff who handle waste in the course of their duties the opportunity to receive free immunisation against Hepatitis B through the Occupational Health Department. Staff who do not wish to accept this offer must put into writing that they understand the implications of the risks they may face as a consequence of not accepting the immunisations.

4.4 All Trust employees will have access to the Waste Management Policy and Procedures via the intranet so that they are aware of the correct procedure to be followed when they handle waste in the course of their duties.

4.5 The Policy and accompanying Procedures will be updated as and when required by changes in legislation and guidance.

4.6 All waste management concerns should be addressed to the Estates and Facilities Department.

5.0 MONITORING OF IMPLEMENTATION AND COMPLIANCE

5.1 This policy and its attached procedures (except RMPG13c which will be monitored by the Finance Department) will be monitored by the Estates and Facilities Department. The manager of any area that does not comply will be notified in writing. Persistent non-compliance of any specific area will be reported to the Health, Safety & Security Committee, where appropriate non-compliance will be reported using the Datix system.

5.2 Risk assessments must be carried out for all tasks associated with the segregation, handling, storage and disposal of waste. The assessments should be reviewed in line with Trust policy.

5.3 The Estates and Facilities Lead will arrange for an external agency DGSA to provide the Trust with a written audit report on its waste management procedures to ensure compliance with current legislation and regulations on an annual basis.
5.4 The Estates and Facilities lead will work with the waste contractors ensuring that they comply with Trust Policies and Procedures as well as legislation. They will ensure that all waste is removed from sites as per specified frequencies.

### 6.0 POLICY REFERENCES / ASSOCIATED DOCUMENTATION

The following procedures and guidelines should be read in conjunction with this policy:

- RMPG13a Procedural Guidelines for the Handling, Segregation and Storage of Waste
- RMPG13b Waste Spillage Procedure
- RMPG13c Procedure for the Disposal of Surplus/redundant Equipment
- RMPG13d Procedural Guidelines for the Secure Storage and Disposal of Confidential Waste
- RM01 - Corporate Health & Safety Policy
- ICP1 - Infection Prevention and Control Policy and associated guidelines
- CLP13 – Safe and Secure Handling of Medicines Policy & Procedures
- RM04 - COSHH Policy

END