PROCEDURAL GUIDELINES FOR THE HANDLING, SEGREGATION AND DISPOSAL OF WASTE

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REPLACES NEP DOCUMENT
KEY CHANGES FROM PREVIOUS VERSION Merger of NEP & SEPT Policies
AUTHOR: Head of Estates and Facilities
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RATIFICATION BY QUALITY COMMITTEE: November 2019
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PROCEDURE SUMMARY
This document highlights the responsibilities of waste disposal within the Trust and confirms the importance of correct segregation handling and storing of waste at all Trust sites. Staff should be aware of the start of the classification of waste streams and insure that they comply with all the procedure requirements whilst at work. The Trust has a duty of care, not only to its patients and staff, but visitors, contractors and the general public, to ensure that they do not incur any risk from the waste that the Trust produces.

The Trust monitors the implementation of and compliance with this procedure in the following ways:
Datix incident reporting. Regular monitoring & reports to committees. Audits and monitoring

SCOPE

<table>
<thead>
<tr>
<th>Services</th>
<th>Applicable</th>
<th>Comments</th>
</tr>
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<tbody>
<tr>
<td>Trustwide</td>
<td>✓</td>
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</tbody>
</table>

The Director responsible for monitoring and reviewing this policy is
The Executive Chief Finance Officer
PROCEDURAL GUIDELINES FOR THE HANDLING, SEGREGATION AND DISPOSAL OF WASTE

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1.1 The Environmental Protection Act 1990 imposed a duty of care on producers of waste that requires them to accept responsibility for waste management from the point of origin to final disposal.

1.2 The Hazardous Waste Regulations 2005 requires that hazardous waste is separated from the general waste stream.

1.2.1 Failure to segregate and store hazardous waste from non-hazardous waste and then to dispose of it correctly is a criminal offence. It may lead to both the Trust and the person(s) individually responsible being prosecuted and fined.

1.3 Differentiating/segregating specific types of non-hazardous waste is not a legal requirement but demonstrates that the Trust is aware of:
   a. Its duty of care.
   b. Good practice
   c. The different waste disposal streams and conscious of the effect these have on the environment i.e. using recycling rather than consigning to landfill.

2.1 The Trust has six main aims with regards to Waste Segregation, handling and storage:

2.1.1 To ensure compliance with both legislation and HTM 07-01: The Safe Management of Healthcare Waste.

2.1.2 To ensure all staff who work within the Trust are aware of the different types of waste.

2.1.3 To ensure all staff know and understand how to segregate, handle and store the waste which has been generated on Trust premises so that it is presented for collection in a manner that will ensure that they, their fellow employees and all other persons are protected from risk of exposure to potential sources of infection, injury and offence.

2.1.4 To ensure all staff are aware that waste should be segregated at the point of origin and secured in containers that meet the specified standards, colour and design for the particular category of waste. The reason for this is that waste is treated in accordance with the colour of
the container used, i.e. consigned to landfill, alternative treatment, incineration.

NB. It is an offence to:
a) consign waste for unnecessary treatment, i.e. send general waste for incineration,
b) consign waste for unsuitable treatment, i.e. infectious clinical waste to landfill.

2.1.5 To ensure all tasks associated with the segregation, handling and storage of waste have had suitable Risk Assessments completed which are regularly reviewed and that any approved controls are implemented.

2.1.6 To ensure staff are aware of the initiative to reduce the amount of waste consigned to landfill by using recycling as a waste management option.

3.0 SEGREGATION, HANDLING AND STORAGE OF WASTE

3.1 All waste produced by the Trust will be deemed to be non-hazardous, hazardous, or recyclable and should be segregated, handled and stored accordingly. Staff should be aware that there are items of both clinical and general wastes that come under the hazardous and non-hazardous classification.

The chart at the end of this appendix gives pictorial guidance with regards to the different categories, the containers they should be placed in, both initially and subsequently prior to disposal.

3.2 Managers must ensure that they have sufficient appropriate containers for the areas for which they are responsible that are both safe for the occupants of that area, i.e. patients and at the same time comply with this appendix to the Waste Management Policy.

3.3 Staff should ensure that they comply with the guidelines by using the correct containers and bringing to their managers attention when there is a problem with the containers they have been asked to use.

3.4 EPUT staff who work on non-EPUT sites and have concerns relating to how waste they produce is being stored and disposed of must ensure the issues are escalated to the Head of Estates and Facilities.
3.5 All persons handling waste must ensure that they comply with the following:

3.5.1 Waste containers and bags are never more than ¾ filled.

3.5.2 Waste containers will generally be lined with a plastic sack. However where it is deemed that the risk to patients is too great to allow for the use of plastic bin liners, there are a number of alternatives which can be considered suitable.

- Use a rigid liner in the bin, which must then be emptied into a plastic bin liner when emptied by domestic staff. **Rigid liners are only considered suitable for general waste and recyclables**
- If possible and appropriate, locate the bin in a different area.
- Speak to the Estates and Facilities Department who will advise on any suitable alternatives for the area in question.

**NB Clinical waste bins must always be lined with a plastic liner.**

3.5.3 Staff carry waste bags and containers away from their bodies, and when the waste is contained in a bag that these are carried by the neck.

3.5.4 Waste bags and containers should never be thrown or deliberately dropped.

3.5.5 All clinical waste should be tagged with a numbered tag denoting from where the waste originated. (This must be an EPUT tag when the waste has been generated by an EPUT service. Where the waste has been generated by a service from a different organisation, that Organisation must provide the appropriate tags.)

3.5.6 Where PPE has been provided for staff to wear/use whilst handling waste, this must be worn/used. Any defect, excessive wear or malfunction should be reported to a line manager.

3.5.7 Occupational Health requests attendance to receive immunisations in accordance with the Trust's immunisation/vaccination policy.

3.5.8 Not to decant clinical waste from one bag to another except in the case of spillage (see RMPG13 b Spillage Procedure). Decanting general waste and recyclables from a rigid container into a bag is acceptable

3.5.9 Ensure that the spillage procedure is followed correctly in the event of a spillage.
3.6 All persons storing waste prior to collection should ensure that they comply with the following:

3.6.1 Only placing waste in designated storage areas, i.e. waste should never be stored in corridors or any other inappropriate place where it would potentially cause a hazard to any person.

3.6.2 Ensuring that waste is stored securely. This is of particular importance when storing hazardous and confidential wastes, which must be kept in locked containers or compounds.

3.6.3 Ensuring that containers and compounds are always locked and secure where appropriate and reporting where containers and compounds are found to be faulty so that they can be replaced or made secure as quickly as possible.

3.6.4 Ensuring that waste storage areas are kept clean so as to prevent animal and rodent infestation.

4.0 WASTE CONTAINERS

Non-hazardous Clinical Waste

Non-hazardous clinical waste will generally consist of non-infectious incontinence and sanitary waste and nappies,

4.1 Where applicable, non-hazardous/offensive clinical waste will be placed in Tiger Bags, i.e. yellow and black striped bags (British Standard BS381C: 1988). The bag must only be three quarters filled maximum. The bag will then be sealed with a numbered tag before being placed in a locked yellow lidded Eurobin. The bin must always be re-locked.

NB In some areas of the Trust, where patients present a high ligature risk, bins for incontinence waste are provided by the Feminine Hygiene (Sanitary) Waste Contractor, as these containers can be used without a plastic liner.

4.2 Feminine hygiene (sanitary) waste from staff, public and patient toilets will be categorised as offensive waste, unless there is reason to believe that person(s) using the area have an infection that would necessitate the waste to be consigned as hazardous clinical waste. The Trust has contractual arrangements for this type of waste to be collected using the approved receptacles that have been specifically provided for this purpose. Where arrangements with a designated contractor are not in place, feminine hygiene waste will be disposed of as outlined in 4.1.

The Trust now has introduced cardboard bins (Binny Bins) to store sanitary waste in most of its residential units. These bins, once full should be disposed of in the external offensive waste stream.
**Hazardous Clinical Waste**

4.3 Hazardous clinical waste will generally consist of infectious or suspected as infectious waste, infectious waste which is contaminated with either chemicals or medicines, anatomical waste, pharmaceutical waste and cytotoxic and cytostatic waste.

4.4 Hazardous clinical waste must be placed in orange bags (British Standard BS381C:1988) or containers, i.e. sharps boxes depending upon the nature of the waste.

Bags must only be a maximum of three quarters filled. The bag will then be sealed with a numbered tag, and placed in the designated bin, which must always be locked. On some hospital sites the orange bags will be collected by porters upon request.

The Department of Health document – The Safe Management of Healthcare Waste requires hazardous clinical waste to be contained as follows:

- Orange Bags - Infectious or potentially infectious waste
- Yellow Bags - Infectious waste containing chemicals or POMs
- Purple Bags - Cytotoxic or cytostatic waste

**NB Tiger, Orange, Yellow and Purple bags must not be placed in the same external storage container.**

4.5 All Sharps must be treated as hazardous clinical waste and disposed of accordingly. They should be placed in a specified Sharps container (British Standard BS 7320) with either an orange, yellow or purple lid.

- Orange lids - Sharps that have not been contaminated with medicinal products
- Yellow lids - Sharps which have been contaminated with Prescription Only Medicines (POMs)
- Purple lids - Sharps contaminated with cytotoxic and cytostatic medicinal products

**NB Sharps contaminated with general pharmaceutical products (consigned as 180103) must never be mixed with those contaminated with cytotoxic/cytostatic products (consigned as 180103/180109).**

The label on the sharps bins must be completed, both when the container is initially started, and again when it is closed and sealed. The following information will be required:

- Name of ward/area
- Date
- Signature of person completing the action

A numbered tag must be attached to the sharps bin.

**Sharps bins must NOT be placed in a clinical waste bag under any circumstances.**
Sharps bins may not be placed in a container with any bagged waste, they must be stored separately, in an appropriate locked container.

4.6 Pharmaceutical waste, including empty medicine bottles (glass and plastic) and blister packs must be placed in an appropriate container, i.e. rigid yellow bin container with a blue lid, e.g. pharmi-bin. These will be consigned as 180109.

Bins containing pharmaceutical waste must not be placed in a clinical waste bag under any circumstances; neither should they be placed in a container with any bagged clinical waste as they must be stored separately.

General Waste

4.7 All general waste will either be placed in bins lined with black sacks (British Standard BS381C: 1988), or bins with a rigid plastic liner. If a rigid plastic liner is used, the contents must be emptied into a black bag prior to collection for disposal. The bags should then be tied before being placed in the General Waste container or waste holding area, prior to collection by the waste contractor/Porters.

Recyclables

4.8 Paper, cardboard, plastic containers, tins, cans, packaging materials, etc. can all be recycled. Arrangements may vary slightly of different sites, but essentially recyclables will be collected in designated containers which will either be unlined or lined with a clear plastic liner. Recyclables can be mixed in the same container inside wards, offices etc.

Recyclables should be placed in the container clean, i.e. plastic containers and cans washed out.

Where possible, recyclables should be flattened to decrease the volume of the item.

(On some Trust sites, where there are arrangements in place with specific councils, these sites will recycle in accordance with their local instructions)

4.9 Use and Disposal of Batteries

All batteries must be from an approved supplier or manufacturer.

They must be checked regularly to ensure that they are not damaged or leaking. Staff are advised to handle them with care and that when replacing batteries that they are fitted correctly, to ensure that the terminals are in contact.

Spent batteries, especially those containing Lithium, must be stored in a separate box or container. These containers should be ready for collection by the Trust’s waste contractor.

Regular checks on the containers should be undertaken to ensure it is safe, it is positioned correctly and that it contains batteries which are safe
to be stored in it.

All batteries should be disposed of as hazardous waste. The Trust has introduced a battery box on all sites, to collect the normal batteries used in clocks, radios, phones, etc. Once the box is filled it will be emptied and taken off site by a registered contractor.

### 5.0 CLARIFICATION OF WASTE CLASSIFICATION / SEGREGATION

#### 5.1 In the event that a member of Trust staff is unsure of how any particular item of waste is to be disposed of, they must contact the Estates and Facilities Department for advice.

- South Essex - [Link]
- North Essex - [Link]
- Bedford and Luton - [Link]
- West Essex - [Link]

#### 5.2 For information about the classification of the different categories of waste please see chart below:

<table>
<thead>
<tr>
<th>TYPE OF WASTE</th>
<th>DESCRIPTION OF WASTE</th>
<th>CONTAINER / METHOD OF DISPOSAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLINICAL WASTE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hazardous Clinical Waste</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orange Bag</td>
<td>Infectious clinical waste, i.e. waste that could be infectious to others, e.g. - Incopads from patient with for e.g. C Diff.; Dressings from patient with for e.g. MRSA or Hepatitis; Gloves and aprons worn by staff treating a patient with known infection.</td>
<td>Yellow or yellow and white bin lined with an orange bag which must be fastened with numbered tag and placed in the designated contractor’s yellow clinical waste bin.</td>
</tr>
<tr>
<td>Yellow Bag</td>
<td>Infectious clinical waste contaminated with chemicals or medicinal products, i.e.</td>
<td>A/A, except the bag lining the bin will be yellow. Must not be mixed with other hazardous clinical wastes.</td>
</tr>
<tr>
<td>Purple Bag</td>
<td>Waste contaminated with cytotoxic or cytostatic products</td>
<td>A/A, except the bag lining the bin will be purple. Must not be mixed with other hazardous clinical wastes.</td>
</tr>
<tr>
<td></td>
<td>(If unsure, please contact Estates and Facilities to confirm infectious nature of waste).</td>
<td>Hazardous clinical wastes must not be mixed with non-hazardous clinical waste.</td>
</tr>
<tr>
<td>Non-Hazardous Clinical Waste</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tiger Bag</td>
<td>Incontinence and sanitary waste that is not infectious, e.g. Incopads, Nappies, Gloves and aprons worn by staff treating a non-infectious patient, Sanitary/feminine hygiene waste</td>
<td>Tiger bags which must be fastened with a numbered tag and placed in the designated contractor’s yellow clinical waste bin, or in a Grey/Blue nappy bin as provided by Sanitary/Feminine hygiene waste contractor.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>n.b. This waste must not be mixed with hazardous clinical wastes.</td>
</tr>
</tbody>
</table>
### Sharps Waste

<table>
<thead>
<tr>
<th>Type of Sharps</th>
<th>Description of Waste</th>
<th>Disposal Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orange lidded</td>
<td>Sharps contaminated with blood, but not contaminated with medicinal products.</td>
<td>On specific hospital sites, porters will collect sharps boxes from wards. To access this service, please contact your relevant Estates and Facilities Department.</td>
</tr>
<tr>
<td>Yellow lidded</td>
<td>Sharps and sharps contaminated with medicinal products.</td>
<td>Otherwise they must either be placed in designated external containers or collected from the building by the designated clinical waste contractor.</td>
</tr>
<tr>
<td>Purple lidded</td>
<td>Sharps contaminated with cytostatic or cytotoxic products</td>
<td></td>
</tr>
</tbody>
</table>

### Medicinal Waste

<table>
<thead>
<tr>
<th>Description of Waste</th>
<th>Disposal Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicines etc. that are no longer required or out of date. Spoiled or spilled liquid medicine Empty medicine bottles with residual POM. Blister packs for POM</td>
<td>Pharmi-bin, i.e. yellow box with a blue lid or return to Pharmacy in Pharmacy box for disposal.</td>
</tr>
</tbody>
</table>

### General Waste & Recyclables

<table>
<thead>
<tr>
<th>Type of Waste</th>
<th>Description of Waste</th>
<th>Container / Method of Disposal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-hazardous general waste i.e. Domestic waste</td>
<td>Non-recyclable items, i.e. <em>paper hand towels</em> <em>tissues</em> <em>food</em> <em>vacuum cleaner bags, dust etc. from dustpans.</em></td>
<td>Generally white lidded bins lined with either a black sacks or a rigid plastic liner which will be emptied into a black sack before being placed in a General Waste container supplied either by a designated waste contractor or local council.</td>
</tr>
<tr>
<td>Batteries</td>
<td>Used Batteries</td>
<td>Place in Battery box and advise Estates and Facilities Department when full.</td>
</tr>
<tr>
<td>Glass and china</td>
<td>Unwanted or broken plates, drinking glasses, glass containers which have not been contaminated with POMs, i.e. perfume bottles and coffee jars</td>
<td>Place in orange glass bucket or other designated glass container.</td>
</tr>
<tr>
<td>Hazardous General waste i.e. WEEE</td>
<td>Televisions, fridges, <em>(Estates and Facilities)</em> Computer Monitors <em>(IT)</em> Fluorescent bulbs <em>(Estates and Facilities)</em></td>
<td>Contact department indicated next to Items in Description Column to arrange for collection by a registered contractor.</td>
</tr>
</tbody>
</table>
Any other item – i.e. chemicals etc. listed in the European Waste Catalogue as having hazardous properties. (Estates and Facilities)

<table>
<thead>
<tr>
<th>Confidential waste</th>
<th>Confidential Waste, i.e.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>documents that contain ANY person identifiable details</td>
</tr>
<tr>
<td></td>
<td>TRUST or corporately sensitive information</td>
</tr>
<tr>
<td></td>
<td>Always refer to the Estates and Facilities department if unsure of whether the waste to be disposed of is hazardous.</td>
</tr>
<tr>
<td></td>
<td>Place in a blue plastic sack or blue or grey confidential waste container and contact Estates and Facilities for Collection, if required in addition to scheduled collections</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Recyclables</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paper, (providing it does not contain either person identifiable or corporately sensitive information)</td>
</tr>
<tr>
<td>Newspaper</td>
</tr>
<tr>
<td>Cardboard (flattened)</td>
</tr>
<tr>
<td>Plastic bottles &amp; containers</td>
</tr>
<tr>
<td>Cans and tins.</td>
</tr>
<tr>
<td>Recyclables must be segregated from general waste at original point of disposal and placed in the recycling bins which are generally grey/green. It is possible to mix recyclables, i.e. paper and plastic etc. in the same bin. Recyclables will then be placed in either contractor Recycling bins or those supplied by local council. Containers should be rinsed out before being flattened to decrease their volume.</td>
</tr>
</tbody>
</table>

END