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Waste Management Policy

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1 Introduction

Tees, Esk and Wear Valleys NHS Foundation Trust is committed to providing a comprehensive waste management service ensuring staff and visitor safety, in accordance NHS and governmental legislation, policy and guidelines. Waste management encompasses the activities and actions required to manage waste from its inception to its final disposal. This includes the generation, handling, storage, transportation, treatment and disposal of waste.

This policy details the Trust's arrangements for Waste Management of all waste produced by Trust activities and services, and applies to all staff, contractors and workers across owned or controlled Trust premises.

Living our values is never more important than at this time and this policy links to the creation of a workplace that is fit for purpose by creating a safe working environment and influencing staff, visitor and service user behaviors in regards to management of waste within the Trust.

This policy also supports the Trust's 5 year strategic goals by creating a great experience for our patients, carers, families and our colleagues where we can be proud of the environment we are in, be involved in its development that is fit for purpose. It is important that we work closely with the patients, ward teams and our waste contractors, so that the service can be as good as it possibly can be, working to ensure the all involved have as much choice and control as possible, whilst ensuring everything linked to the service is dealt with in a safe and efficient manner, ensuring there is not any adverse impact on the workplace. We will work closely with our Trust colleagues so they understand the key aspects of this policy.

Finally, we will work in close partnership with the other agencies involved with this service, to ensure seamless and responsive service.

2 Why we need this policy

This policy aims to provide clear guidance for waste management at the Trust that complies with relevant legislation, prevents or reduces unnecessary waste production by the Trust and promotes responsible resource use among the Trust community.

2.1 Purpose

This policy reflects the Trust's strategic direction of travel and Our Journey to Change, by supporting the Trust values and goals. Waste management cost Tees, Esk and Wear Valleys NHS Foundation Trust £108,158 in 2018/19. The cost of waste is likely to increase in the future due to an increasing population, growing NHS estate, increasing patient care activity and throughput, and increasingly stringent emission regulations for incineration. Within the UK, healthcare organisations generate some 590,000 tonnes of waste annually, of which 75-90% is non-risk . As an NHS organisation generating large quantities of a wide range of waste streams annually, managing our waste more sustainably presents an opportunity to realise significant financial, social and environmental benefits.

This policy outlines the actions we must take to reduce our overall waste and manage our waste as effectively as possible to minimise potential risks and the Trust’s impact on the environment.

2.2 Objectives

- Comply with all relevant healthcare waste legislation and requirements.
- Remove or minimise any activity that does not add value or is wasteful to people who use our services, our staff and our other stakeholders.
- Minimise the negative impacts on the environment and health from waste generation and management at the Trust.
- Minimise air, land and water pollution caused by Trust waste.
- Manage waste provision safely and appropriately, following the correct Waste Management and Health and Safety procedures.
- Work towards resource efficiency, circular economy and waste prevention wherever possible to promote sustainable development.
- Consider the 5Rs in everything we do.
- Re-think purchase requirements.
- Reduce use.
- Re-use if possible.
- Repair where practical.
- Recycle any waste or items for disposal.
 - Improved awareness and knowledge of waste management best practice among staff
 - Zero waste to landfill.
 - Introduce food waste collection by 2023.
 - 75% recycling rate for packaging by 2030.

3 Scope

3.1 Who this policy applies to

The policy applies to all Trust staff including contractors and temporary staff and covers the management of waste within all Trust properties.

3.2 Roles and responsibilities

Role	Responsibility
Chief Executive and the Trust Board	Ensure Trust-wide compliance with the waste policy and procedures

	<p>Allocate responsibility for the development, implementation and monitoring of waste management at the Trust</p> <p>Ensure sufficient resources are allocated in order to enable effective implementation of the policy</p>
Waste Manager	<p>Resolve any issues relating to waste management at the Trust</p> <p>Keep waste records up to date as evidence of compliance</p> <p>Carry out audits and inspections of all waste operations on the trust sites to ensure compliance to this policy and current waste legislations</p> <p>Manage the undertaking of waste audits</p> <p>Maintain ongoing compliance with waste policy and procedures</p>
Estates Officer and Estates Compliance Manager	<p>Inform the Trust Board of the waste management policy, procedures and associated risks</p> <p>Maintain ongoing compliance with waste policy and procedures</p> <p>Ensure ongoing monitoring and reporting of waste management at the Trust</p> <p>Report on waste performance KPIs through quarterly updates, annual reports and ERIC returns</p>
Estates Team	<p>Monitor and ensure compliance of all Trust procedures with the Waste Policy.</p> <p>Provide training to department leads.</p> <p>Ensure policy reflects current legislation and requirements.</p> <p>Develop a strategy to improve the efficiency of our resources e.g. swap-shop events, repair and reuse schemes.</p> <p>Responsible for informing contractors of Trust requirements, procedures and policy.</p>
Environmental/Energy Officer	<p>Provide advice on different options and more sustainable alternatives available to reduce waste and the Trust's impact on the environment.</p>
Head of Procurement	<p>Responsible for tendering waste contracts.</p> <p>Identify inefficient resources and swap with re-usable, longer-lasting alternatives.</p> <p>Ensure suppliers are aware of the Trust's waste policy and requirements.</p> <p>Work alongside suppliers to reduce waste</p>

	produced from their good/services.
Department Heads, Matrons and Line Managers	<p>Complete and review risk assessments on a regular basis.</p> <p>Ensure all area staff are aware of waste procedures and policy by providing the necessary guidance materials and resources.</p> <p>Must report any issues relating to waste procedures to head of service or waste manager.</p>
Trust Staff	<p>Ensure waste is disposed, handled, stored and transported in line with the requirements set out in this policy.</p> <p>Ensure waste is segregated correctly.</p> <p>Minimise wastage by repairing and reusing where possible.</p> <p>Minimise waste through using resources more efficiently.</p> <p>Inform managers of any issues regarding waste and instances of non-compliance.</p> <p>Undertake training on waste annually.</p>
Portering staff	<p>Responsible for the collection, transportation and storage of waste across the Trust</p> <p>Must report any issues relating to waste procedures to line manager through the BATEX reporting system</p>
Contractors	<p>Make necessary arrangements to comply with the waste procedures and requirements of the Trust</p> <p>Minimise waste production wherever possible</p> <p>The Trust manager responsible for the contractor(s) is responsible for communicating the Trust's waste policy and procedures, ensuring all contractor(s) comply with this Policy</p> <p>Ensure all area staff are aware of waste procedures and policy by providing the necessary guidance materials and resources</p> <p>Must report any issues relating to waste procedures to head of service or waste manager</p>

4 Policy & Procedure

4.1.1 Waste Management

Below are the healthcare waste streams of the Trust, as defined by [HTM 07-01 \(page 20\)](#) (* indicated hazardous waste).

EWC code	Description of code
09 01	Wastes from the photographic industry
09 01 01*	Water-based developer and activator solutions
09 01 04*	Fixer solutions
09 01 05*	Bleach solutions and bleach fixer solutions
09 01 06*	Wastes containing silver from on-site treatment of photographic waste
09 01 07	Photographic film and paper containing silver or silver compounds
09 01 08	Photographic film and paper free of silver or silver compounds
18 01 01	Sharps except 18 01 03*
18 01 03*	Waste whose collection and disposal is subject to special requirements in order to prevent infection
18 01 04	Waste whose collection and disposal is not subject to special requirements in order to prevent infection, e.g. dressings, plaster casts, linen, disposable clothing
18 01 06*	Chemicals consisting of or containing dangerous substances
18 01 08*	Cytotoxic and cytostatic medicines
18 01 09	Medicines other than those mentioned in 18 01 08*
18 01 10*	Amalgam waste from dental care
18 02 01	Sharps except 18 02 02*
18 02 02*	Waste whose collection and disposal is subject to special requirements in order to prevent infection
18 02 03	Waste whose collection and disposal is not subject to special requirements in order to prevent infection
18 02 06	Chemicals other than those listed in 18 02 05*
18 02 07*	Cytotoxic and cytostatic medicines
18 02 08	Medicines other than those mentioned in 18 02 07*
20 01 25	Edible oil and fat
20 01 31*	Cytotoxic and cytostatic medicines
20 01 99	Other fractions not otherwise specified (used for offensive waste)
20 02 01 (non-hazardous)	Garden waste
20 03 01	Mixed municipal (domestic) waste - not contaminated and does not have any other special disposal requirements

18 01 03 or 20 03 99	Mattresses
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18 01 03 or 20 03 99 (hazardous or non- hazardous)	Mattresses
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Additional relevant healthcare waste streams include:

- Batteries –Nickle cadmium – alkaline - Lithium (possibly other types) in the future.
- Fluorescent tubes
- Furnishings e.g. tables, chairs, desks, soft furnishings
- Metal waste
- Confidential paperwork
- IT equipment
- Cardboard (currently going as mixed waste in domestic route)

4.1.2 Waste generated by the community

Safe Waste Management as set out in this policy and relating procedures document applies to waste generated by Trust staff at patient’s homes.

Managers should ensure that arrangements are in place to ensure that waste generated in the community is packaged and labelled correctly and transported for appropriate treatment and disposal.

4.1.3 Waste generated by other organisations

All contractors employed or working on behalf of the Trust on Trust premises should make the necessary arrangements to comply with this policy and associated procedures.

Waste contractors must follow site rules for parking, loading/unloading, security and speed limit whilst on Trust site.

4.1.4 Segregation of waste

Waste must be classified and segregated in line with regulations and defined waste categories relevant to the Trust. Please see full for guidance on the appropriate waste management relating to each of the Trust’s waste streams.

TEWV works in partnership with Wincanton Recycling to adopt ‘best practice’ for the recycling of WEEE waste as well as the County Durham Procurement Consortium to improve environmental management performance and help achieve waste reductions. More recently, the Trust has introduced portable compactors for the segregation and subsequent recycling of cardboard.

A national colour coding system has been adopted and the colour coding of containers/bags are as follows:

 Orange – Clinical waste

 Clear – Municipal (Domestic) waste



Yellow with black stripe – Offensive waste

 Purple – Cytotoxic/static contaminated waste

The bags will conform to the following standards by the NHS Performance Specification:

- Be of maximum nominal capacity, which conforms to the NHS National Contract
- Meet the performance specifications set out by the NHS Supplies Authority
- Match the chosen container or fittings in use

4.1.5 Waste handling

Waste must be placed in the appropriate bag or container at the point of generation. The bags will be replaced daily. The bags will be sealed with a knot (swan necking) or plastic tie. Bags should only be filled to $\frac{3}{4}$ capacity to allow for them to be sealed effectively. The individual generating the waste must ensure that the bags are correctly labelled (if required), stored and disposed of based on the type of waste stream, using the Trust's

Waste should be handled by the neck of the waste bags only, and never clasped against the body, thrown or dropped. If any of the bags are split or leaking, re-package the waste correctly, using PPE when required.

When necessary, the correct Health and Safety procedures must be followed.

4.1.6 Health and Safety:

For specific health and safety responsibilities and procedures, refer to the Trust's [Health and Safety Policy](#) (HS-0001-v9) and [Health and Safety Workbook](#).

When dealing with any hazardous substances, staff must carry out a written COSHH assessment. Please see the Trust [COSHH Procedure](#) document for more information. If the COSHH assessment identifies area to remove or reduce personal exposure, appropriate PPE can be ordered and signed for.

4.1.7 Personal Protective Equipment (PPE)

Under the Health and Safety at Work etc Act (1974), the COSHH Regulations and Personal Protective Equipment at Work Regulations 1992 (as amended 2002), the Trust is responsible for staff safety during the management of waste. The Trust will ensure appropriate PPE is available for staff to manage waste safely in order to protect against needle stick injury.

- Water repellent aprons and disposable gloves should be worn when handling clinical waste in a care setting
- Heavy duty shoes/boots and gloves should be worn by staff who regularly handle and transport containers to storage (collection) areas

Staff should follow the correct [PPE procedure](#) to protect them against one or more defined significant risks.

4.1.8 Incidents and spillages

When managing waste at the Trust, staff must adhere to the correct procedures to minimise the risk of injuries from slips and trips for staff, patients and visitors. Staff should follow the [Slips, Trips and Falls Procedure](#) to manage this risk.

If an accident occurs involving any waste items, the incident should be reported to the relevant manager/supervisor immediately.

Immunisation

- Hepatitis B and tetanus primary immunisation shall be offered to all staff considered by Occupational Health to be at risk from handling clinical waste
- Records shall be kept by the Occupational Health Department

4.1.9 On-site emergency plan

Please refer to the [Emergency Planning and Business Continuity Policy](#) for details on the procedures needed for specific scenarios.

Trust evacuation procedures are local to the site, therefore all staff must ensure they have carried out local induction training which involves emergency procedures, fire alarms and evacuation muster areas and emergency response to situations in their area.

4.1.10 Specific procedures for during a pandemic

In risk of infection, waste procedures must adhere to the specific NHS guidance provided to deliver waste management services as part of the Trust's emergency response.

The [COVID-19 waste management operating procedure](#) indicates any specific changes staff must undertake when handling waste, in order to reduce the risk of infection and manage the increases in demand.

4.1.11 Waste storage

Waste should not be allowed to accumulate in emergency exits, corridors, wards or other unsuitable places. Prior to transportation, waste should be stored in a way that does not pose a risk to patients, staff or visitors.

Staff or waste producers have a responsibility to correctly store waste, seal and label waste (if required) and remove from the ward environment as stated within the.

Waste must not be stored loose in any external areas. For all areas, waste must be stored within shut and locked containers when not in use, to prevent unauthorised access.

For clinical waste, only authorised personnel shall have access to storage.

4.1.12 Transportation of waste

Internal transport

- Clinical and domestic waste should never be mixed for transport
- Waste bins/trolleys must be easy to handle, regularly cleaned and drained
- When spillages occur, trolleys and carts must be disinfected before reuse

External transport

- Waste can only be carried in vehicles off-site when:
 - Staff are transporting waste from one Trust site to another
 - Waste is generated at patients' homes and being carried back to site to be disposed in line with the correct waste management procedure
 - Contractors are removing waste from site for final disposal

4.1.13 Fly tipping

All Trust staff have a responsibility to follow the correct procedures for disposing waste, outlined in this policy and associated document. 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 Trust staff, be it internal to the Trust premises, or on Trust grounds, will not be tolerated, and all occurrences will be fully investigated

4.1.14 Health and safety

- The Trust recognises the Health and Safety and Fire Safety risks associated with waste management, including:
 - Skin contact, especially through cuts and abrasions or through eye contact
 - Injection through sharps injuries
 - Ingestion through hand to mouth contact (e.g. when eating, drinking or smoking)
 - Inhalation through the lungs
 - Trips and slips associated with inappropriate storage of waste¹

4.1.15 Environmental impacts

- Wasting resources by inefficient management or use of resources
 - Sending waste to landfill generates methane gas, contributing to climate change
 - Incinerating waste produces toxic gases which in turn contribute towards air pollution
 - Transporting waste releases carbon emissions and impacts local air quality

4.1.16 Control of Infection

- Infectious waste can spread diseases, viruses and bacteria through contamination, posing potential health risks to staff, patients and visitors. When handling and storing waste, it is important to follow the correct procedures in order to prevent

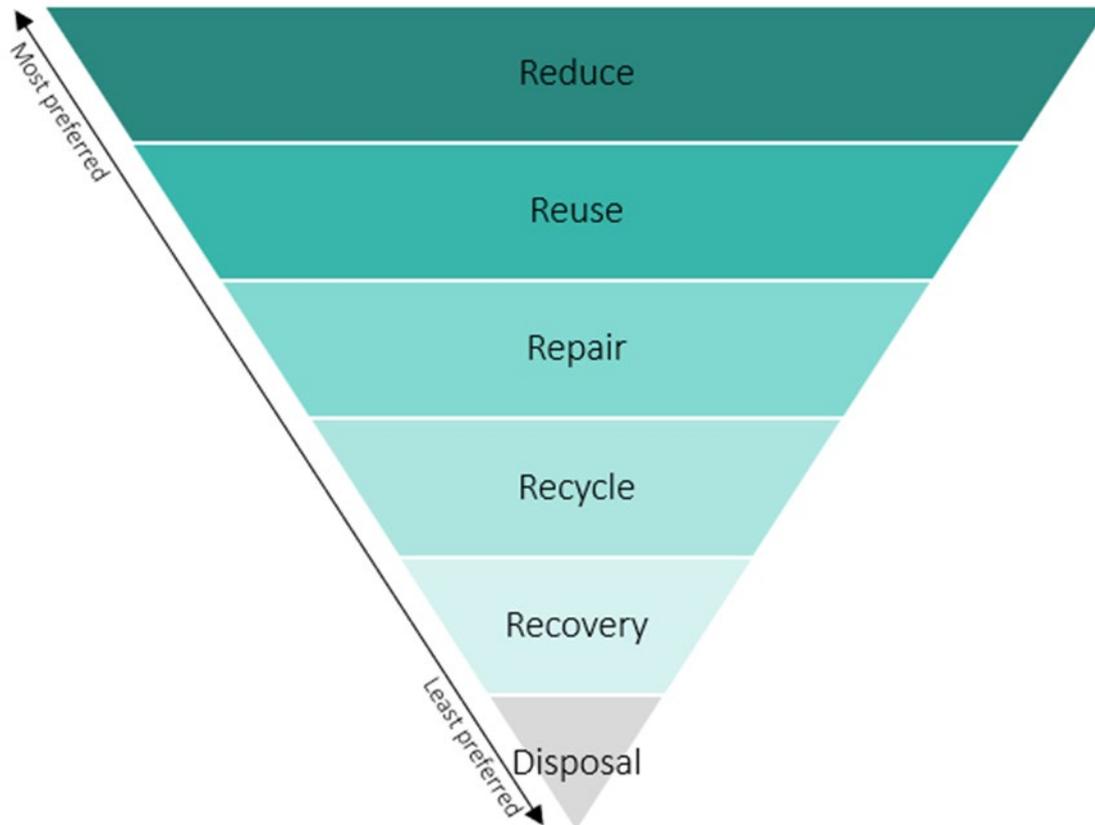
¹ [What are the hazards associated with waste and recycling activities?](#)

infection, increase patient safety and minimise risks associated with infectious waste.

4.1.17 Waste hierarchy

The waste hierarchy is a classification of waste management, required by the Waste (England and Wales) Regulations 2011.

- To communicate the waste hierarchy to staff, the Trust uses the 5Rs: re-think purchase requirements, reduce use, re-use if possible, repair where practical and recycle any waste or items for disposal



4.1.18 Benefits of Waste Management

- Reduced risk of infection – correct waste management procedures will reduce the likelihood of cross-contamination and needle-stick injuries
- Reduced risk of contamination of drinking, surface and groundwaters
- Cleaner working environment – waste will not accumulate in open areas that are accessible to the general public
- Reduces health and safety risks
- Empowering staff with skills and knowledge

4.1.19 Environmental

- Resource efficiency: using resources in a sustainable manner and getting the most out of what we have to prevent environmental degradation and minimise our impact on the environment
- Reducing the amount of waste we produce reduces the use of fossil fuels and reduces the need for landfills and incineration plants – this generates significant environmental benefits from carbon reduction

4.1.20 Financial

- Cost savings from reduction in waste collected and managed
- Greater resource efficiency generates savings from reduced procured goods

Before being dealt with as offensive waste, the waste must be assessed to ensure it is not contaminated by infectious products. If infected, the waste will need to be dealt with as infectious clinical waste.

4.2 Waste Procedures

4.2.1 Overview:

This Procedures document will provide staff with an overview of the correct handling, storage, transportation and disposal methods for the various waste streams generated by the Trust.

This procedures document aims to provide staff with clear waste management guidance in order to comply with NHS, legislative and policy requirements. Correct waste management can help reduce costs, preserve the environment, increase safety in the workplace and reduce our carbon emissions.

Guidance for the correct methods for handling and storing waste will be outlined in this document.

For each waste stream, the following information is provided.

WASTE STREAM	
Definition	
EWC	
Examples	
Containers	
Hazard warning	
Additional guidance	
Final disposal	

4.2.2 Summary of waste produced by the Trust

NON-HAZARDOUS WASTE		
Clinical waste		
Medicines other than those that are cytotoxic/static (18 01 09)		
Non-clinical waste		
Sharps not contaminated with body fluids or medicines (18 02 01)	Building waste materials (10 12 08)	Food waste (20 01 08, 02 02, 02 03)
Offensive waste (18 01 04)	Furniture/bulky waste (20 03 07)	Garden waste (20 02 01)
Domestic waste (20 03 01)	Mattresses (20 03 99)	Waste oil and cooking oil (20 01 25)
General recycling	WEEE waste (20 01 36)	Paper waste (03 03 08)
Materials for reuse	Metal waste (20 01 40)	
HAZARDOUS WASTE		
Clinical waste		
Sharps contaminated with body fluids or medicines (18 01 03*)	Cytotoxic/static contaminated waste (18 01 08*, 20 01 31*)	
Infectious clinical waste (18 01 03*)	Pharmaceutical waste (18 01 09)	
Non-clinical waste		
Amalgam waste (18 01 10*)	Batteries (20 01 33*)	
Contaminated mattresses (18 01 03*)	WEEE waste (20 01 21*, 20 01 23*, 20 01 35*)	Fluorescent tubes (20 01 21*, 20 01 35*)

Please see the Trust's COSHH Procedure for more information on identifying and managing hazardous substances

DOMESTIC/GENERAL WASTE	
Definition	Domestic waste is non-infectious and non-hazardous waste, similar to that produced in the home environment and should not contain any infectious materials sharps, medicines or chemicals.
EWC	20 03 01
Examples	Plastic, packaging and wrappings, food, out of date dressings/bandages
Containers	<p>Depending on location grey foot bin, or</p>  <p>clear plastic sacks</p>   <p>compacted waste.</p>
Hazard warning	N/A
Additional guidance	Glass, crockery etc. whether broken or not, should be well wrapped (in newspaper etc.) and placed in a suitable cardboard box. These boxes

	should be securely sealed with sticky tape and placed in the large domestic waste bin sited in the nearest secure waste storage area.
Final disposal	Recycling

OFFENSIVE WASTE

Definition	Offensive waste' is non-clinical waste that's non-infectious and does not contain pharmaceutical or chemical substances, but may be unpleasant to anyone who comes into contact with it.
EWC	18 01 04
Examples	Outer dressings and protective clothing like masks, gowns and gloves that are not contaminated with body fluids, sterilised laboratory waste or from a known infectious source, Municipal offensive waste: Hygiene waste and sanitary protection like nappies and incontinence pads from a non-infectious source etc
Containers	<p>Yellow bag with black stripe (tiger bag)</p> 
Hazard warning	N/A
Additional guidance	You must segregate healthcare offensive waste from both clinical and mixed municipal wastes.
Final disposal	Incineration

INFECTIOUS CLINICAL WASTE	
Definition	Clinical waste derived from patients with known or suspected infectious diseases.
EWC	18 01 03*
Examples	Wound dressings, gloves, aprons, tests containing chemicals
Containers	<p>Internal storage bags</p> 
	<p>External storage container</p> 
Hazard warning	Do not allow such substances to come into contact with skin
Additional guidance	Must keep separate from non-infectious clinical waste ‘Clinical Waste Disposal Procedure’
Final disposal	Alternative treatment methods or incineration

SHARPS	
Definition	Sharps refer to any item which can cause cuts or punctures
EWC	18 02 01, 18 01 03*
Examples	Needles, scalpels, cannulas, knives, scissors and blades.
Containers	 <p>Yellow lid: sharps that are contaminated with (that is, used in the administration of) non-cytotoxic and non-cytostatic medicines. Medicinally contaminated sharps also includes opened ampoules, and broken glass medicine bottles.</p>
	 <p>Orange lid: used for sharp items that are not contaminated with any medicines.</p>
	 <p>Purple lid: for the disposal of sharps, needles/syringes and tests contaminated with cytotoxic/cytostatic medicines.</p>
Hazard	Cuts or punctures, infection

warning	
Additional guidance	‘Sharps – Safe Use and Disposal’ ‘Accidental inoculation policy’
Final disposal	Incineration

4.2.3 The standard for sharps containers specifies the following:

- Be puncture resistant and leak proof.
- Be capable of being handled and moved with minimal danger of the contents spilling or falling out.
- Be provided with an aperture which in normal use will inhibit removal of the contents, but will ensure that it is possible to place items intended for disposal into the container, using one hand without contaminating the outside of the container.
- Have a closure device attached for sealing when three quarters full or ready for disposal.
- Have a horizontal line to indicate when the container is three quarters full and marked with the words “Warning – do not fill above the line”.
- Be made of materials that can be incinerated.
- Be clearly marked with the words “Danger – Contaminated Sharps Only – Destroy by Incineration”.

4.2.4 Clinical waste bags:

The bags will conform to the following standards.

- Be of maximum nominal capacity, which conforms to the NHS National Contract.
- Meet the performance specifications set out by the NHS Supplies Authority.
- Match the chosen container or fittings in use.

4.2.5 Storage of clinical waste:

Clinical waste should not be allowed to accumulate in corridors, wards or unsuitable places:

- Clinical waste will be removed from the ward environment to the main collection area on a daily basis, or as determined by the user.
- The storage area will be clearly reserved for clinical waste and also be secure.

- A separate storage area for sharps containers and pharmaceuticals with a high degree of security will be established where necessary by the user.
- Washing facilities are provided for staff who transport and store the clinical waste in case of a spillage occurring.
- Staff or clinical waste producers have a responsibility to seal and label (at the point of origin) clinical waste, and then store it prior to transportation in such a way that it does not pose a risk to clients, staff or visitors.

4.2.6 Handling of Clinical waste:

- Clinical waste must be placed in orange bags at the point of generation. The bags will be replaced daily. The bags will be sealed with a knot or plastic tie. The person generating the clinical waste must ensure that the bags are correctly labelled with the name of the department, the date and site written on the bag. Only correctly sealed and identified bags will be collected. Between organisations
- Sharps are items that could cause cuts or puncture wounds, including needles, syringes with needles attached, broken glass ampoules, scalpels and other blades.
- They should be placed in a safe manner into properly designed sharps containers. Syringes, cartridges and needles should be disposed of intact. Sharps must never be placed in receptacles used for the storage of any other waste.
- Sharp containers should be sealed and transported into storage prior to incineration when three-quarters full. The container labels must be completed with the date, the name of the unit producing the waste and a signature before removal from site. These sharp containers must never be placed in orange sacks, but should be carried and kept separate during storage and transportation to ensure that faulty or broken containers, which may leak fluid or sharps, are readily identified. Damaged containers should be placed in a larger secure container and must be properly labelled.
- The Trust's health care staff, when treating patients in their homes, may remove sharps generated in appropriate containers which can be disposed of via the Trust's clinical waste disposal system.
- Sharps containers, while in use, must be kept out of reach of children and people who do not appreciate the risk associated with this type of waste.
- Medicinal waste will be segregated into two waste streams.
 - a) Cytotoxic and cytostatic medicines
 - b) Non-hazardous – medicines other than those classified as cytotoxic and cytostatic including controlled drugs that have been de-natured
- The containers will have different coloured tags to identify each waste stream, and will then be removed from site by an appropriately qualified waste carrier.

4.2.7 Personal Protective Equipment:

To prevent skin contact when handling clinical waste, the use of Personal Protective Equipment (PPE) is advised.

- Water repellent aprons and disposable gloves should be worn when handling clinical waste in a care setting.
- Heavy duty shoes/boots and gloves should be worn by staff who regularly handle and transport containers to storage (collection) areas.

4.2.8 Disposal of clinical waste

Under no circumstances must clinical waste be transported by any means other than that specified in this procedure.

- Clinical Waste will be collected from relevant premises on behalf of the Trust by a licensed waste carrier at specified frequencies. This depends on quantities, type of waste and storage times. A program of collections will be agreed.
- It is imperative that staff understand the importance of correct classification and marking of clinical waste bags. The Duty of Care is the responsibility of each member involved in the production, handling and disposal of clinical waste.
- Under no circumstances should clinical waste be put into black/clear bags.
- Part of the regulations state that the transportation of clinical waste is to be covered by a consignment note. Each premise from which clinical waste is collected will be identified by a unique code supplied by the Environment Agency. This code must be on every consignment note and each consignment note must be sequential. All consignment notes must be kept on site for a period of 3 years. This consignment note procedure is designed to provide an audit trail of the waste from its production to its disposal. It also gives the waste producer an assurance that waste is being disposed of correctly.
- The producer will initiate the production of the consignment note for each clinical waste collection which gives all relevant information regarding type, weight and numbers of containers, allowing traceability for the producer, waste transporter and the Environment Agency. (Small quantities of waste generated by medical and nursing personnel as a result of treating patients in the community, may be carried, appropriately contained, in the individuals' vehicles used to a disposal storage area).

CYTOTOXIC/STATIC CONTAMINATED WASTE	
Definition	Waste associated with cytotoxic drugs which contain chemicals that are toxic to the cells.
EWC	18 01 08*, 20 01 31*
Examples	IV bags, lines, tubing, etc contaminated with cytotoxic/static medicines
Containers	
Hazard warning	Do not allow such substances to come into contact with skin.
Additional guidance	Medicines – ordering, storage, security, transporting and disposal
Final disposal	Incineration

PHARMACY AND MEDICINE WASTE	
Definition	Pharmaceutical waste is produced during any stage from the point of prescribing to the taking or not taking of medicines by a patient due to failures in existing processes or patient behaviours.
EWC	18 01 09
Examples	Unused and out of date non-cytotoxic/static medicines including tablets, liquid medicines, creams, skin patches.
Containers	
Hazard warning	N/A
Additional guidance	Medicines – ordering, storage, security, transporting and disposal
Final disposal	Incineration

AMALGAM WASTE	
Definition	Hazardous waste that includes amalgam in any form and materials contaminated with amalgam.
EWC	18 01 10*
Examples	Amalgam capsules, amalgam and teeth containing amalgam
Containers	
Hazard warning	Amalgam contains Mercury
Additional guidance	<p>Amalgam waste may be mixed with body fluids, such as saliva, or other potentially infectious material, so use PPE, such as gloves, masks and protective eyewear when handling it.</p> <p>Do not rinse or dispose of amalgam waste via drains or toilets.</p>
Final disposal	Recycling

RADIOACTIVE WASTE	
Definition	A type of waste that contains radioactive material.
EWC	18 01 03* and 18 01 02* (if infectious)
Examples	Solid waste and aqueous waste
Containers	 <p>Radioactive stickers used on storage containers</p>
Hazard warning	Risk of pollution of the environment or harm to human health
Additional guidance	All waste containing radioactive material must be clearly labelled as radioactive and disposed of in the correct container to allow its strength to decay.
Final disposal	By incineration in compliance with the Radioactive Substances Act (RSA)

WASTE ELECTRICAL ELECTRONIC EQUIPMENT (WEEE)	
Definition	All equipment dependant on electric currents or electromagnetic fields
EWC	20 01 21*, 20 01 23*, 20 01 35*, 20 01 36
Examples	Appliances, IT equipment, electronic tools and equipment, medical devices
Containers	
Hazard warning	N/A
Additional guidance	The department wanting to dispose of non-IT WEEE is responsible for contacting the Call Centre/Help Desk within the Estates Department to request the transfer of the WEEE to the appropriate collection point. When a sufficient quantity of WEEE has been accumulated, the Trust's Environmental Officer should be notified who shall arrange for appropriate disposal of the items.
Final disposal	Specialist recovery or recycling, recovery and reuse

NON-CONFIDENTIAL PAPER WASTE	
Definition	Paper waste with NO patient identifiers or commercially sensitive information
EWC	20 01 01
Examples	Newspapers, magazines, catalogues
Containers	 <p>Blue and white bin: general recycling</p>
	 <p>Blue bin: recycled paper</p>
Hazard warning	N/A
Additional guidance	N/A
Final disposal	Recycling

CONFIDENTIAL PAPER WASTE	
Definition	Confidential waste is defined as any personal information that can be used to identify individuals, including their name, address, contact numbers or any financial data.
EWC	20 01 01
Examples	Invoices, appointment details, patient records
Containers	
Hazard warning	N/A
Additional guidance	If confidential information is stored on a non-paper format e.g. DVD, CDROM, the Call Centre/Help Desk within the Estates Department must be contacted to collect or direct confidential non-paper waste to the central collection point at Lanchester Road Hospital.
Final disposal	Recycling

WASTE OIL AND COOKING OIL	
Definition	<p>Waste oil is defined as any petroleum-based or synthetic oil that, through contamination, has become unsuitable for its original purpose due to the presence of impurities or loss of original properties.</p> <p>Cooking oil is synthetic fat used in frying, baking and other types of cooking.</p>
EWC	20 01 25
Examples	Lubricants, fluids, waste oils
Containers	 <p>Waste oil/grease container</p>
Hazard warning	<p>Do not allow such substances to come into contact with skin.</p> <p>Spillage risk of slips and trips</p>
Additional guidance	<p>Under no circumstances should cooking oil be disposed of via the sink/drain or into clear domestic waste bags. Waste cooking oil must be poured back into the original container and placed in the external waste store, ready for collection by the waste oil contractor. In the event of a spillage of cooking oil, the spillage must be dealt with immediately using the appropriate spillage kit.</p> <p>‘Slips, Trips and Falls Procedure’</p>
Final disposal	Recycled to biofuel

BATTERIES	
Definition	A battery stores chemical energy, which it converts to electrical energy.
EWC	20 01 33*
Examples	Mixed household batteries, industrial batteries
Containers	
Hazard warning	<p>Incorrect waste management of batteries can result in:</p> <ul style="list-style-type: none"> - Toxic materials leaking into the environment and causing land contamination - Fire risk - Acid from batteries is highly corrosive and harmful to skin
Additional guidance	Liquid or residue from leaking batteries can cause serious harm, such as a dangerous chemical reaction. Wear gloves if required to dispose of leaking batteries.
Final disposal	Recycling

FLUROESCENT TUBES	
Definition	A low-pressure mercury-vapor gas-discharge lamp that uses fluorescence to produce visible light
EWC	20 01 21*, 20 01 35*
Examples	Lamps, tube lights
Containers	
Hazard warning	Contains mercury Broken glass may be present – risk of cuts and injury
Additional guidance	When a sufficient quantity of the waste has been accumulated, the Trust's Waste Manager should be notified who shall arrange for appropriate disposal of the items.
Final disposal	Specialist recovery/recycling

FURNITURE/BULKY WASTE	
Definition	Old, broken or unwanted furniture
EWC	20 03 07
Examples	Tables, chairs, desks, soft furnishings etc
Containers	
Hazard warning	N/A
Additional guidance	Please see correct lifting procedures in 'Storing and handling waste' section below to prevent injury.
Final disposal	Reuse, recovery or recycling

MATTRESS WASTE	
Definition	Mattresses that are deemed unusable due to damage, torn, stained or contaminated.
EWC	18 01 03* or 20 03 99 (hazardous or non-hazardous)
Examples	Static foam mattresses, mattress covers, specialist mattresses
Containers	
Hazard warning	N/A
Additional guidance	Mattresses for disposal should be considered as infectious waste and enclosed in a plastic yellow hazardous bag and removed from clinical areas. A separate collection arranged by contacting the Call Centre/Help Desk within the Estates Department.
Final disposal	Non-infectious (domestic waste/recycling), infectious (incineration/alternative treatment)

4.2.9 Disposal of contaminated mattresses:

- Mattresses contaminated with bodily fluids and unable to be cleaned need to be located into a UN approved Yellow plastic sack and then sealed.
- The part number of the sacks is MVN003 and can be purchased from Cardea.
- If appropriate the sack containing the mattress can be moved into an external waste compound.

- Contact Estates Department Special Services Engineer who will arrange collection via licensed Specialist Contractor.

METAL WASTE	
Definition	Waste metal, metallic material and any product that contains metal that is capable of being recycled from previous consumption or product manufacturing
EWC	20 01 40
Examples	Aluminium, brass, copper, steel
Containers	
Hazard warning	Scrap metal can have sharp edges (risk of cuts)
Additional guidance	Individuals with authorisation to access this area are permitted to place ferrous metal waste in the skip. Alternatively, a department wanting to dispose of ferrous metal waste is responsible for contacting the Call Centre/Help Desk within the Estates Department to request the transfer of this waste to the collection/storage skip.
Final disposal	

	Recycling
GENERAL RECYCLING	
Definition	Waste that can be converted into new materials and objects; not contaminated and does not have any other special disposal requirements
EWC	20 03 01
Examples	Glass, paper, plastic, metal
Containers	
Hazard warning	N/A

Additional guidance	N/A
Final disposal	Recycling

GARDEN WASTE

Definition	Any organic waste that can be composed
EWC	20 02 01
Examples	Grass clippings, leaves, trees.
Containers	<p>Skips for garden waste</p> 

Hazard warning	N/A
Additional guidance	Where possible, green waste can be shredded and placed on garden areas, as appropriate
Final disposal	Composting

4.2.10 Storing and handling waste

When handling waste, staff must follow the general guidance outlined in the Waste Management Policy:

Waste must be placed in the appropriate bag or container at the point of generation. The bags will be replaced daily

The bags will be sealed with a knot (swan necking) or plastic tie

Bags should only be filled to $\frac{3}{4}$ capacity to allow for them to be sealed effectively

The individual generating the waste must ensure that the bags are correctly labelled (if required), stored and disposed of based on the type of waste stream

Waste should be handled by the neck of the waste bags only, and never clasped against the body, thrown or dropped. If any of the bags are split or leaking, porters must not remove any waste bags until the contents are re-packaged correctly, using PPE when required.

5 Definitions

Environment Agency (EA)

The regulatory body responsible for environmental regulation (including waste) in England and Wales.

European Waste Catalogue (EWC)

The European Waste Catalogue (EWC) provides a categorised list of waste that has been transposed into English law through the List of Wastes (England and Wales) Regulations 2005.

Health Technical Memorandum 07-01: Safe management of healthcare waste

Health Technical Memorandum 07-01 provides practical guidance for classifying waste and a best practice framework for waste management, in order to comply with legislative requirements as well as benefit from reduced costs and carbon emissions.

Our Waste, Our Resources: a Strategy for England (HM Government, 2018)

The strategy states that the government will introduce the 'polluter pays' principle for producers of waste. The polluter pays principle is currently included within legislation associated with waste and the environment, including the Waste Framework Directive, Landfill Directive and Water Framework Directive. Additional objectives within this strategy

include mandatory separate food waste collections by 2023 and 75% recycling rate for packaging by 2030.

The Carriage Regulations

The Carriage Regulations outlines the duties of all stages of the supply chain for the transportation of goods and waste. The regulations cover substance classification, packing, marking and labelling, loading, vehicle specification and required training.

The Control of Substances Hazardous to Health (COSHH) Regulations 2002

COSHH is the law that requires employers to protect workforce against health risks from hazardous substances by undertaking a risk assessment and control of exposure to substances. This includes the handling, storage and disposal of waste products.

The Environmental Protection Act 1990 (Part II)

The Environmental Protection Act 1990 establishes a legal framework for dealing with contaminated land in England. This policy outlines the means of identifying and restoring land that poses a significant risk to health or the environment.

The Health and Safety at Work Act etc 1974

The Health and Safety at Work Act 1974 is the primary piece of legislation covering occupational health and safety in Great Britain. This legislation outlines the requirements of employers to ensure risks surrounding health and safety are controlled and minimised.

The Waste Electrical and Electronic Equipment Directive

The Waste Electrical and Electronic Equipment Directive is the European Community Directive 2012/19/EU on waste electrical and electronic equipment which, together with the Restriction of Hazardous Substances Directive 2002/95/EC, became European Law in February 2003.

The Waste (England & Wales) Regulations 2011

The Waste (England & Wales) Regulations 2011 require businesses to apply the waste management hierarchy before disposal.

Radioactive Substances Act (RSA) 1993

The Act deals with the control and disposal of radioactive material within the UK to minimise the accumulation and impact of radioactive waste on the environment and public health.

Clinical waste

Clinical waste, otherwise known as healthcare waste, is defined in the Health Technical Memoranda 07-01: Safe Management of Healthcare Waste as:

“... 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”

Clinical waste can be divided into three categories:

- Infectious

A substance containing viable micro-organisms or their toxins which are known or reliably believed to cause disease in man or other living organisms.

- Hazardous

Waste with one or more properties that are hazardous to health or to the environment. f

- Offensive/hygiene waste

Waste which is non-infectious and which does not require specialist treatment or disposal, but which may cause offence to those coming

- Confidential waste

Confidential waste contains sensitive and confidential information within the NHS, including health and private information from patients, staff, external contractors and TEWV business.

- Food waste

Any food, and inedible parts of food, removed from the food supply chain to be recovered or disposed (including composted, crops ploughed in/not harvested, anaerobic digestion, bioenergy production, co-generation, incineration, disposal to sewer, landfill or discarded to sea)².

Pharmaceutical waste

Pharmaceutical waste is produced during any stage from the point of prescribing to the taking or not taking of medicines by a patient due to failures in existing processes or patient behaviours. Pharmaceutical waste includes tablets, capsules, unused ampoules, inhalers, liquids and powders.

Resource efficiency

Using our resources effectively to achieve the same output with less, such as the durability and quality of the products.

Waste

Waste is defined by the 2008 Waste Framework Directive as “any substance or object which the holder discards or intends or is required to discard”. The discarded materials are required to be disposed of in the correct way depending on the waste stream.

Waste streams are categorised using the European Waste Catalogue to identify the materials and processes specific to each waste type, as well as the EWC code and safety level.

Waste Electrical and Electronic Equipment (WEEE)

WEEE is electrical or electronic equipment that has come to the end of its ‘user life’ and covers a range of equipment. Those items that use electricity, usually connected via a plug or battery, are included in this category. WEEE is classified as either household or non-household and, up until recently, has not been recycled. Every year an estimated 2 million tonnes of WEEE items are discarded by householders and companies in the UK³.

Waste prevention

The Waste Framework Directive (2008/98/EC) defines waste prevention as measures taken before a substance, material or product has become waste, that reduce:

- (a) the quantity of waste, including through the re-use of products or the extension of the life span of products;
- (b) the adverse impacts of the generated waste on the environment and human health;
- (c) the content of harmful substances in materials and products.

² [EU FUSIONS: Food waste definition](#)

³ [Waste Electrical and Electronic Equipment recycling \(WEEE\)](#)

6 Related documents

- Emergency Planning and Business Continuity Policy
- COVID-19 Waste Management operating procedures
- Staff can access the following policy and procedures via the Trust intranet site'
- Trust Environmental Strategy
- COSHH Procedure
- Clinical Waste Disposal Procedure
- Sharps – Safe Use and Disposal
- Accidental inoculation policy
- Medicines – ordering, storage, security, transporting and disposal
- Slips, Trips and Falls Procedure
- Infection Prevention and Control Policy
- Health and Safety Policy
- Medicines Overarching Framework
- PPE procedure

7 How this policy will be implemented

This policy will be published via intranet, Trust Website.

Line managers will disseminate this policy to all Trust employees through a line management briefing.

7.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
Clinical & Non-Clinical Staff	Identification, classification, handling, segregating, storing and disposal of waste in relation to their activities	Varies by staff group	Included in induction training and undertaken every 3 years.

8 How the implementation of this policy will be monitored

All managers are responsible for ensuring waste management is monitored and complied by all staff. Staff must inform the Estates Compliance Manager or Estates Officer of any instances of non-compliance from lack of resources or lack of staff discipline.

Auditable Standard/Key Performance Indicators		Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	Percentage of waste recycled by volume	Annual Waste Manager (review of annual waste compliance documents weight and type waste from contracted waste disposal carrier)	Waste Compliance Committee and Infection Prevention & Control Committee
2	Percentage of total waste by volume	Annual Waste Manager (review of annual waste compliance documents weight and type waste from contracted waste disposal carrier)	Waste Compliance Committee and Infection Prevention & Control Committee
3	Total waste per occupied floor area	Annual Waste Manager (review of annual waste compliance documents weight and type waste from contracted waste disposal carrier)	Waste Compliance Committee and Infection Prevention & Control Committee

4	Total waste cost per occupied floor area	Annual Waste Manager (review of annual waste compliance documents weight and type waste from contracted waste disposal carrier)	Waste Compliance Committee and Infection Prevention & Control Committee
5	Annual audit by waste Authorised Engineer (AE)	Authorised Engineer (annual waste audit implementation of corrective actions and compliance with current regulations).	Waste Compliance Committee and Infection Prevention & Control Committee
6	Annual waste checklist monitoring	Waste Manager (internal program of waste compliance visits to departments to conduct documented waste checks)	Waste Compliance Committee and Infection Prevention & Control Committee

8.1 Monitoring policy effectiveness

Continual monitoring and recording of waste types and volumes will be undertaken monthly through waste consignment notes and invoicing. Waste costs, quantities and carbon emissions will be reported as ERIC (Estates Return Information Collection) data annually by the Trust's Monitoring and Compliance Officer. These records will be kept for 5 years. Risks associated with waste will be documented in the risk register to ensure compliance with relevant legislation and to allocate actions to minimise any potential risks.

The following Key Performance Indicators (KPIs) will be reviewed annually to monitor our effectiveness and progress towards waste reduction targets:

- Percentage of waste recycled per total waste volume (%)
- Percentage of total waste by volume (%)
- Total waste volume per occupied floor area (kg/m²)
- Total waste cost per occupied floor area (£/m²)
- Total carbon emissions from waste (tCO₂e)

Waste audits monitor the effectiveness of waste management systems and help identify key areas of improvement. They also help ensure compliance with regulatory standards and will ensure the Trust is adhering to this waste policy and working towards Trust-wide waste reduction targets set out in our Sustainable Development Management Plan (SDMP).

The Trust will develop and implement a monitoring and auditing programme to ensure adherence to waste management procedures and regulations. Managers will have full responsibility for resolving any issues found from the audit and undertaking adequate actions to resolve them

9 References

- (COSHH) Control of Substances Hazardous to Health Regulations (2002)
- The Management of Health & Safety at Work Regulations (1992)
- HTM 07-01 Safe Management of Health care Waste.

10 Document control (external)

To be recorded on the policy register by Policy Coordinator

Date of approval:	01 September 2021		
Next review date:	01 September 2024		
This document replaces:	HS-0001-011-v2 Clinical Waste Disposal Procedure		
This document was approved by:	Name of committee/group	Date	
	IPPC	15 June 2021	
This document was ratified by:	Name of committee/group	Date	
	SLG	01 September 2021	
An equality analysis was completed on this document on:	15 June 2021		
Document type	Public		
FOI Clause (Private documents only)	Not Appropriate		

Change record

Version	Date	Amendment details	Status
3	01 Sept 2021	<ul style="list-style-type: none"> This document has been reviewed and changed to comply with current trust Policy as well as a change of name to Waste Management Policy The waste management Policy is a converted document to policy to ensure all current regulations are complied with in regards to Trust waste management. To ensure that the legal requirements are met and defined appropriately within the Policy. Highlighting current guidance in regards to waste management for managers and Trust staff. Insertion of current Environment 	Ratified

		<p>Agency standards and expectations in how to deal with waste.</p> <ul style="list-style-type: none"> • Set out standards for training requirements for trust staff. • Our Journey to Change text added. 	

Appendix 1 - Equality Analysis Screening Form

Please note: The Equality Analysis Policy and Equality Analysis Guidance can be found on the policy pages of the intranet

Name of Service area, Directorate/Department i.e. substance misuse, corporate, finance etc.	Estates & Facilities Management			
Policy (document/service) name	Waste Management Policy & Procedure			
Is the area being assessed a...	Policy/Strategy	X	Service/Business plan	Project
	Procedure/Guidance		X	Code of practice
	Other – Please state			
Geographical area covered	Trust Wide			
Aims and objectives	Management of Waste			
Start date of Equality Analysis Screening (This is the date you are asked to write or review the document/service etc.)	February 2021			
End date of Equality Analysis Screening (This is when you have completed the equality analysis and it is ready to go to EMT to be approved)	April 2021			

You must contact the EDHR team if you identify a negative impact. Please contact the Equality and Diversity Team.

1. Who does the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?							
All staff, contractors and visitors							
2. Will the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups below?							
Race (including Gypsy and Traveller)	No	Disability (includes physical, learning, mental health, sensory and medical disabilities)	No	Sex (Men, women and gender neutral etc.)	No		
Gender reassignment (Transgender and gender identity)	No	Sexual Orientation (Lesbian, Gay, Bisexual and Heterosexual etc.)	No	Age (includes, young people, older people – people of all ages)	No		
Religion or Belief (includes faith groups, atheism and philosophical belief's)	No	Pregnancy and Maternity (includes pregnancy, women who are breastfeeding and women on maternity leave)	No	Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners)	No		
<p>Yes – Please describe anticipated negative impact/s</p> <p>No – Please describe any positive impacts/s</p>							

<p>3. Have you considered other sources of information such as; legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.? If 'No', why not?</p>	<p>Yes</p>	<p>X</p>	<p>No</p>	
<p>Sources of Information may include:</p> <ul style="list-style-type: none"> • Feedback from equality bodies, Care Quality Commission, Equality and Human Rights Commission, etc. • Investigation findings • Trust Strategic Direction • Data collection/analysis • National Guidance/Reports 	<ul style="list-style-type: none"> • Staff grievances • Media • Community Consultation/Consultation Groups • Internal Consultation • Research • Other (Please state below) 			
<p>4. Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the following protected groups?: Race, Disability, Sex, Gender reassignment (Trans), Sexual Orientation (LGB), Religion or Belief, Age, Pregnancy and Maternity or Marriage and Civil Partnership</p>				
<p>Yes – Please describe the engagement and involvement that has taken place</p>				
<p>This document has been discussed within the Estates department at managerial level, it is has been presented various committees including the Trust Infection Prevention & Control Committee</p>				
<p>No – Please describe future plans that you may have to engage and involve people from different groups</p>				

Waste Management Group, staff feedback and waste group meetings

5. As part of this equality analysis have any training needs/service needs been identified?

Yes Please describe the identified training needs/service needs below

A training need has been identified for;

Trust staff	Yes	Service users	Yes	Contractors or other outside agencies	Yes
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Make sure that you have checked the information and that you are comfortable that additional evidence can provided if you are required to do so

If you need further advice or information on equality analysis, the EDHR team host surgeries to support you in this process, to book on and find out more please contact the team.

Appendix 2 – Approval checklist

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
1.	Title		
	Is the title clear and unambiguous?	Y	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Y	
2.	Rationale		
	Are reasons for development of the document stated?	Y	
3.	Development Process		
	Are people involved in the development identified?	Y	
	Has relevant expertise has been sought/used?	Y	
	Is there evidence of consultation with stakeholders and users?	Y	
	Have any related documents or documents that are impacted by this change been identified and updated?	Y	
4.	Content		
	Is the objective of the document clear?	Y	
	Is the target population clear and unambiguous?	Y	
	Are the intended outcomes described?	Y	
	Are the statements clear and unambiguous?	Y	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	Y	
	Are key references cited?	Y	
	Are supporting documents referenced?	y	

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
6.	Training		
	Have training needs been considered?	Y	
	Are training needs included in the document?	Y	
7.	Implementation and monitoring		
	Does the document identify how it will be implemented and monitored?	Y	
8.	Equality analysis		
	Has an equality analysis been completed for the document?	Y	
	Have Equality and Diversity reviewed and approved the equality analysis?	Y	
9.	Approval		
	Does the document identify which committee/group will approve it?	Y	
10.	Publication		
	Has the policy been reviewed for harm?	Y	
	Does the document identify whether it is private or public?	Y	public
	If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	n/a	

11 Appendix 3 Waste Audit Checklist

Waste audit checklist		Yes / No / N/A	Comments
1	Are staff aware of the Trust's Waste Management Policy and associated procedures and where to access them if needed?		
2	Have staff undertaken the relevant training?		
3	Are waste management procedure guidance displayed / easily available for staff?		
4	Is the correct PPE being worn by staff when handling waste (if appropriate)?		
5	Do waste bins clearly indicate the type of waste that is accepted for that specific container?		
5	Are the main storage compounds locked in a secure area, only accessible by authorised personnel?		
6	Is the main storage area clean and tidy, free from trip and slip hazards?		
7	Are the waste carts clean?		
8	Are clinical waste bins locked?		
9	Does the storage compound provide a separate storage area for sharps and clinical waste?		
10	Does the storage compound clearly indicate where different waste streams need to be disposed?		
11	Are there hand washing facilities in close proximity to the waste areas?		
12	Are clinical waste bags correctly labelled and secured before disposal?		
13	Are staff undertaking the correct Health and Safety procedures when handling, transporting and storing waste?		
14	Are the relevant waste management records available, and are they kept for 5 years?		
15	Is the storage area situated away from food preparation and general storage areas, and from routes taken by the public?		
16	Are all waste bins around the Trust clean?		
17	Are all sharps bins being assembled and labelled		

	correctly, with the correct lids?		
18	Are bins/containers being filled within their limits? e.g. ¾ for bags, to the line for boxed containers		
19	Is waste being stored away from visitors or service users?		
20	Are staff aware of who to report issues surrounding waste management at the Trust?		
21	Are contractors or other organisations working at Trust sites aware of the Waste Policy and Procedures?		
22	Do you monitor waste streams?		
23	Do you have objectives and targets for dealing with waste and waste reduction?		
24	Any other issues surrounding handling, storage, transportation or disposal of waste?		