

Livewell Southwest

**Policy and Procedure for the Safe  
Handling and Disposal of Healthcare  
Waste**

Version 3  
Review: July 2018

**Notice to staff using a paper copy of this guidance.**

**The policies and procedures page of LSW intranet holds the most recent version of this document and staff must ensure that they are using the most recent guidance.**

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<b>Contents</b>		<b>Page</b>
1	Statement of General Policy and Introduction	6
2	Management Accountability	7
3	General Principles	8
4	Personal Protection	8
5	Accidents/Incidents	9
6	Segregation	9
7	Classifications of Waste	10
8	Category A Highly Infectious Substances (Yellow Bag)	10
9	Category B Infectious Waste (Orange Bag)	11
10	Handling Category A + B infections Waste	11
11	Anatomical Waste	12
12	Sharps Waste	13
13	Pharmaceutical Waste	14
14	Disposal of Bodily Fluids	14
15	Community Waste	14
16	General (Office) Waste	15
16.11	General Equipment and Furniture	16
16.12	Waste Electric and Electronic Equipment (WEEE)	17
16.13	The Safe Handling and Disposal of Waste Foods, Edible Oils and Animal Fat	18
17	Spillages	19
18	Confidential Waste	21
19	Cardboard Waste	22
20	Used Batteries	22
21	Recycling waste	22

22	Mercury Waste	22
23	Radioactive Waste	23
24	Contractors Waste	23
25	Dental (Amalgam) Waste	23
26	Gypsum Waste	23
27	Disposal of glass	24
28	Monitoring	24
29	Training	24
Appendix A	Category A Highly Infectious Substances Affecting Humans	26
Appendix B	Community Waste Information Leaflet	28
Appendix C	'Yellow Bucket' Cleaning Process	29
Appendix D	Recycling Poster	30
Appendix E	Mercury Spillage Flow Chart	31

# Policy & Procedure for the Safe Handling & Disposal of Healthcare Waste

## Statement of General Policy

### 1. Introduction

- 1.1 The Environmental Protection Act 1995 is the principal legislation, which imposes a “Duty of Care” on the producers of waste. Livewell Southwest is required to accept responsibility for waste management from its point of origin through to its final disposal.
- 1.2 Livewell Southwest is committed to ensuring the health, safety and welfare of all employees and contractors who are involved in the disposal of waste and of others who may be affected by waste materials. As a result of its duties, Livewell Southwest has produced this policy for the Safe Handling and Disposal of Waste. The policy applies to all Livewell Southwest employees, as well as contracted staff involved in the handling, storage and disposal of waste.
- 1.3 All managers have a duty to ensure that potential hazards from waste are correctly assessed and identified. Appropriate measures must then be taken to ensure that the health and safety of those who may come into contact with the waste is not jeopardised.
- 1.4 The aim of this policy is to identify and minimise the risks associated with the various categories of waste. This will be achieved by developing safe systems for the containment of the waste and by defining standards for disposal in accordance with statutory requirements.
- 1.5 NB. Satisfactory implementation of this policy will assist Livewell Southwest in its compliance with the following pieces of legislation although this list is not exhaustive:
  - Health & Safety at Work Act 1974
  - Environmental Protection Act 1995
  - Management of Health and Safety at Work Regulations 1999
  - Manual Handling Operation 1992
  - The Controlled Waste Regulations 2012
  - Special Waste Regulations 1996
  - Control of Substances Hazardous to Health Regulations 2015
  - Radioactive Substances Act 1993
  - The Transport of Dangerous Goods Safety Advisors Regulations 1999
  - Trade Effluent (Prescribed Processes and Substances) Regulations 1989
  - The Water Industry Act 1991
  - Data Protection Act 1998
  - Waste Electrical Equipment Regulations 2013
  - Landfill Directive 1999
  - Health Technical Memorandum 07-01: Safe Management of Healthcare Waste 2013

1.6 From the 31<sup>st</sup> October 2007 the Landfill Directive (non hazardous waste) dictates that all non hazardous waste must be treated before it can be sent to landfill. This 'treatment' includes the segregation and recycling of waste to prevent it from being sent to a landfill site. Therefore all future efforts must be directed at minimising the volume of waste produced. Where possible, alternatives to hazardous or difficult to dispose of products should be sought. A revised and updated waste management system for Livewell Southwest has been introduced for the following reasons:

- To reduce the health and safety risk posed by waste to staff, patients and visitors.
- Environment protection and compliance with appropriate legislation.
- To promote and increase the levels of recycling.
- To reduce the costs of waste disposal.

**For the waste management system to work the co-operation of all individuals is needed so please read this document carefully and remember:**

- The success of a good waste management system depends on waste producers assuming responsibility for their own actions.
- The majority of Livewell Southwest employees will handle some form of waste, at some point in their working day whether it is a piece of scrap paper, an empty drinks can or a used syringe.
- How that waste is disposed of is important as it only takes one item placed in the wrong container to cause an accident, environmental incident or infect a person, which may result in Livewell Southwest being liable for prosecution.
- If you deal with waste, you have a legally binding "Duty of Care" and responsibility to ensure that waste is handled and disposed of safely, or correctly stored.

## **2. Management Accountability**

2.1 The Chief Executive has overall responsibility for waste management with delegated responsibility to the Hotel Services Management Team.

2.2 However, all Livewell Southwest Managers are responsible for implementing the Waste Management policy and procedures. All Managers are responsible for ensuring that staff are trained in line with the requirements of their roles in relation to waste disposal and matters relating to specific manual handling problems relating to waste, should be discussed with the Livewell Southwest's Ergonomics Advisor who will be able to offer advice.

2.3 The Livewell Southwest has identified a number of support mechanisms which are accessible to all staff should they have a particular query with the disposal of certain types of waste. All concerns in the first instance should be addressed to the Hotel Services Management Team but the Risk Manager or Infection Prevention & Control Team may also be able to provide advice. Please contact

Hotel Services Management Team on 01752 (4)35044 or  
PCHCIC.hotelservices@nhs.net

### **3. General Principles**

- 3.1 All wastes will be presented for collection in a manner that eliminates the risk from potential injury or infection.
- 3.2 Any waste accepted for disposal from outside Livewell Southwest must meet the requirements of this policy. Disposal of such waste must also be notified to the Hotel Services Management Team.
- 3.3 Departments that use chemicals or other hazardous waste must ensure that COSHH assessments are regularly reviewed and updated. Copies of the COSHH assessments must be sent to the Hotel Services Management Team before disposal can be arranged. Where necessary new measures to control the risk of contamination must be implemented and continuously monitored.
- 3.4 All waste must be segregated at the point of origin and secured in containers that meet the Livewell Southwest's specified standards, colour and design for that particular category of waste. Waste containers that are damaged or defective i.e. broken locks must be reported to the Hotel Services Management Team.
- 3.5 The Hotel Services Team will be responsible for ensuring that the number of waste bags etc. provided is compatible with the volume of waste produced. In addition, they must ensure that the correct bags are provided and used for each category of waste produced in their Department (see section 6).
- 3.6 The frequency of waste collection will be planned to avoid the unnecessary accumulation of waste on Wards and in Departments. All waste must be presented and identified correctly in accordance with this policy.

### **4. Personal Protection**

- 4.1 The types of hazards present in clinical waste containers/bags will vary. Products such as blood, bodily fluids, secretions or excretions and human tissues may be present. Any of these substances may contain potentially infectious micro-organisms, which may be liberated by:
  - Contaminated sharp objects penetrating containers/bags and injuring staff.
  - Waste bags being over filled, thereby bursting and liberating the contents.
  - Containers leaking.
  - Unauthorised tampering with the waste.
- 4.2 The probability of particular harmful organisms being present varies considerably as does their capacity for causing harm. Blood borne viruses cause most concern, particularly the Hepatitis B (HBV) and Human Immunodeficiency Viruses (HIV, the causative agent of AIDS) and possibly Creutzfeldt-Jakob Disease (CJD).

- 4.3 Other possible sources of infection include viruses such as Hepatitis C agents causing enteric infections and those that cause sepsis Staphylococci and Streptococci or Tuberculosis (Mycobacteria). Where hazards and risks remain after control methods have been implemented, personal protective equipment must be provided which is suitable for the purpose for which it is intended. Line Managers are responsible for the provision of any personal protective equipment and ensuring it is worn/used appropriately. All cuts and grazes must be covered with a waterproof dressing (sticking plaster).
- 4.4 Where personal protective equipment is provided, employees are required to wear it and report any defect, excessive wear or malfunction to their Supervisor/Line Manager. The level of personal protective equipment shall vary according to the risk present during the handling of waste, but shall include:
- Protective gloves
  - Protective aprons or leggings
  - Eye/face protection

## 5. Accident/Incidents

- 5.1 All incidents involving the handling and disposal of waste must be reported and recorded in accordance with the Livewell Southwest's current Incident Reporting System. If a needlestick injury occurs then the handler must follow the Management of Inoculation Injury Policy. A copy of this policy should be available in all clinical areas.

## 6. Segregation

- 6.1 The effective segregation of hospital waste is an essential element of the safe handling and disposal of waste.

The following colour coding system must be adhered to:

Colour of Sack	Type of Waste
<b>Black</b>	Domestic waste, non infectious waste destined for landfill
<b>Yellow</b>	All Category A Highly Infectious waste (see Appendix A) destined for incineration
<b>Orange</b>	All Category B infectious waste destined for incineration
<b>Yellow &amp; Black Stripes (Tiger Bag)</b>	All offensive/hygiene – non infectious waste.
<b>Clear</b>	Paper/Plastics/Tin destined for recycling  Gypsum

## 7. Classifications of Waste

- 7.1 Health Technical Memorandum 07:01 – ‘Safe Management of Healthcare Waste’ has altered the way in which Hospital waste is classified. All references to clinical waste have been removed and what was clinical waste is now known as ‘Hazardous Waste’. There are two forms of hazardous waste: Category A – Highly Infectious and Category B – Infectious. The black bag waste category remains unchanged.

Waste Group	Waste Definition
<b>Category A Highly Infectious Waste (yellow bag)</b>	Highly Infectious Waste that requires disposal by incineration. For a definitive waste categorisation of what constitutes Highly Infectious Waste please see Appendix A
<b>Category B Infectious Waste (Orange Bag)</b>	Infectious or potentially infectious hospital waste. <b>(All hospital clinical waste that is considered as Infectious waste should be disposed of via the Orange Bag stream, unless the patient has an infection listed in Appendix A)</b>
<b>Offensive Waste (Yellow with Black Stripe – Tiger Bag)</b>	Offensive/hygiene waste (previously known as ‘sanpro’ or human hygiene waste) is not ‘clinical waste’, ‘hazardous’ or ‘special waste’ under environmental legislation and not dangerous goods under transport legislation if it: <ul style="list-style-type: none"> <li>■ is considered non-infectious;</li> <li>■ does not require specialist treatment or disposal.</li> </ul>

## 8. Category A - Highly Infectious Substances (Yellow Bag) (unlikely to be produced by Livewell Southwest)

- 8.1 This category includes highly infectious and other waste requiring incineration including anatomical waste, diagnostic specimens, reagent or test vials and kits including chemicals. A detailed list of what constitutes Category A waste can be found in Appendix A, which lists diseases such as Ebola virus; Flexal virus and Hendra virus.
- 8.2 This waste group includes all forms of Microbiological cultures and potentially highly infected waste from Pathology Departments, and Clinical Research Laboratories. Departmental Managers must undertake a documented Risk Assessment of the waste produced within their Department. This will identify the hazards present and will determine whether waste should be disposed of via the yellow or orange bag streams.
- 8.3 Control measures will then be put in place to manage the risks safely. Laboratory waste must be rendered safe before leaving the premises for final disposal.

## 9. Category B - Infectious Waste (Orange Bags)

- 9.1 This category encompasses all other types of what was formerly known as clinical waste and includes any item of waste emanating from patient care that is infectious and therefore cannot be disposed of via the general (black bag) waste stream and also does not appear in the Highly Infectious list contained in Appendix A. Wrapping from any product or implement that has not come into contact with infected materials should be treated as domestic waste.

## 10. Handling Category A & Category B Infectious Waste

- 10.1 Before handling this waste all staff **must** receive appropriate training, information, instruction and offered immunisation.

### 10.2 Yellow Bags (unlikely to be used in Livewell Southwest)

- If a patient produces highly infectious waste then you must request a supply of yellow bags (if none are already available) from Hotel Services at Mount Gould Hospital. You must then notify the Hotel Services Management Team immediately and request a separate yellow wheelie bin to be provided for this area. The bin must be marked in pen by the Ward/Department with '**UN No.2814**' to identify it as highly infectious. Managers should seek advice from the Infection Control Department if unsure of the potential risk to the public.
- Yellow waste bags **must never** be mixed with orange or any other colour waste bags at any time.
- Yellow waste bags **must never** be generally used in Ward areas for any reason other than when a patient is infected with any of the highly infectious conditions contained in Appendix A.
- Yellow waste bags must be taken from source (e.g. patient's treatment area) to a designated Highly Infectious Yellow Wheelie bin as described above. It **must NOT** be stock piled, left in corridors or sluice areas or stored with any other type of waste bag at any time.
- Any Sharps generated by the patient will be designated as Highly Infectious and should be placed in a yellow lidded sharps container, marked with location, date and time of disposal and initial of disposer and placed into the separate yellow waste wheelie bin along with the Highly Infectious yellow bag.
- Place waste into the yellow bags provided.
- When sacks are  $\frac{3}{4}$  full seal securely with coded black waste tie and mark the full sack with:
  - Hospital Department or Ward
  - Date and time of disposal
  - Initials of disposer
- Place the bag in a marked Highly Infectious yellow waste wheelie bin

### 10.3 Orange Bag Waste

Before handling infectious waste all staff **must** receive appropriate training, information, instruction and offered immunisation.

All staff involved in the handling of infectious waste must follow the following guidelines:

- Use the personal protective equipment provided.
- Place waste into the orange bags provided.
- When sacks are  $\frac{3}{4}$  full seal securely with coded black waste tie to be obtained from Hotel Services Management Team.
- Orange sacks should only be handled by their necks and not dropped or thrown.
- **Never** hold infectious waste bags against the body.
- Any sacks found to be inadequately sealed should not be removed. The person in charge of the Ward/Department at the time should be advised as they are responsible for ensuring that sacks/containers are adequately sealed at the site of origin.
- Any split sacks or broken sharps containers must be reported immediately to the person in charge of the Ward/Department at that time. A trained member of staff from the originating site must be responsible for containing and cleaning spillages and for the transferral of the contents to a suitable container.
- Infectious waste must never be transported on a trolley with anything else as cross contamination will occur.
- Place the bag in an infectious waste bin.
- Where supplied, yellow wheeled bins should be used for storing infectious waste prior to incineration. When placing infectious waste bags in the yellow bin **never** push the bag down into the bin with your hands. These bins must be locked at all times.
- Separate, regular collections of infectious waste shall be provided for each Ward/Department.
- Never leave infectious waste bags on the floor next to the bin.

## 11. Anatomical Waste

11.1 Any area likely to produce anatomical waste should seek advice from Hotel Services Management Team.

11.2 Anatomical waste to be disposed in a red lidded rigid yellow container.

## 12. Sharps Waste

12.1 Following the completion of a procedure using sharps e.g. needles, the used sharps must be placed immediately into a sharps bin. Please also refer to the Infection Prevention and Control team's 'Safe Disposal of Sharps' Policy located on public folders. When disposing of infectious sharps waste, the following guidance must be followed:

- Sharps **not** contaminated with cytotoxic/cytostatic products – dispose via **yellow** lidded sharps containers.
- Sharps contaminated **with** cytotoxic/cytostatic products – dispose via **purple** lidded sharps containers.
- Sharps contaminated with radioactive products – please refer to the Nuclear Medicine guidance found in paragraph 23.
- Place syringes, needles, cartridges and broken glass into a sharps bin as a single unit. Do not break down in component parts.
- When the sharps bin is  $\frac{3}{4}$  full seal and mark the full sharps bin with the following:
  - Hospital/Department name
  - Date and time of disposal
  - Initials of disposer
  - Sharps bins must be tagged with a coded black waste tie
- If for any reason the yellow wheeled bin is found to be full, inform the Hotel Services Management Team who will arrange for it to be emptied.
- Sharps bins must be kept out of the reach of children and members of the public. The temporary closure mechanism must be deployed when bins are left unattended or being moved. A sliding temporary closure is recommended.
- Sharps bins must not be stored outside of the designated storage areas.
- Sharps bins should not be placed on window ledges or near radiators and other sources of heat. The heat produced in these areas can weaken the container.
- Damaged sharps bins can leak their contents or even allow the needles inside to puncture the bin. Such containers should be placed inside a larger sharps box and re-labelled.
- Sharps bins must not be placed into an orange or yellow waste sack.

- Disposal of sharps will be by incineration only.
- Where supplied, yellow wheeled bins should be used for storing sharps boxes prior to incineration. These bins must remain locked at all times.
- The frequency of waste collection will be planned to avoid unnecessary accumulation of sharps bins in Wards and Departments.

### **13. Pharmaceutical Waste**

Please refer to:

Safe & Secure Handling of Medicines Policy and procedures: Section 15: Policy for the disposal or re-use of pharmaceuticals.

### **14. Disposal of Bodily Fluids**

- 14.1 This group of waste includes urine, faeces and other bodily secretions or excretions e.g. disposable bedpan liners and urine containers, which must be placed with contents directly into the macerator.
- 14.2 Incontinence pads, stoma bags, vacuum units containing bodily fluids etc must be placed into orange waste bags. Some of the vacuum containers are susceptible to leaking and a solidifying gel should be added to the contents prior to disposal.

### **15. Community Waste (Waste Generated in Patients Homes)**

- 15.1 Community clinical waste is where a healthcare worker generates waste in a patient's home. Clinical waste can be classified as non - infectious and infectious following a risk assessment.

#### **1. Non-infected waste**

This can be placed in the domestic refuse, e.g. small dressings no larger than a dressing pad 130mm x 22mm, adhesive dressings and incontinence products, e.g. Stoma products, nappies and catheter products.

This type of waste must be placed in a non-recyclable waste sack and placed in the household waste in a solid dustbin/wheelie bin and lid.

#### **2. Clinical Infected waste:**

Waste that is known to be contaminated with infectious pathogens e.g. dressings from known infected wounds, infected continence products, wound vacuum drains etc. is classified as infected waste.

- 15.2 To accurately assess whether the waste generated is infectious, a risk assessment must be performed. This should be based on the professional

assessment, clinical signs and symptoms and any prior knowledge of the patient.

- 15.3 Plymouth City Council and South Hams District Council will arrange to collect all clinical waste from patient's home. The patient or their representative will need to contact either:

Plymouth City Council on telephone number 01752 668000 (option 5).

South Hams District Council on telephone number 01803 861234 (option1).

West Devon Borough Council on telephone number 01822 813600 (option 1).

Please see Appendix B.

- 15.4 It is the patient's responsibility to ensure the correct storage of waste awaiting collection and for arranging of the collection by Plymouth City Council, South Hams District Council or West Devon Borough Council. The waste will be stored in an orange bag within a rigid container stored in a suitable place to which children, pets, pests, etc do not have access.

- 15.5 All sharps waste generated by the Healthcare Professionals must be brought back to a Livewell Southwest site for collection and disposal. (See also Safe Disposal of Sharps Policy).

- 15.6 All healthcare waste generated in community settings that is being returned to Livewell Southwest must be transported in clinical waste sack secured by a coded black waste tie and disposed on site in a clinical waste bin. Transportation of waste must be secured within a rigid container. Container must be cleaned using a hypochlorite solution e.g. Actichlor Plus or Clinell 'green' wipe (detergent and disinfectant cloth) after each use.

## **16. General (Office) Waste**

### **16.1 Handling General Waste**

- 16.2 All staff involved in the treatment movement, storage and disposal of waste **must** receive training information and instruction.

- 16.3 Refuse sacks should only be handled by their necks and not dropped or thrown.

- 16.4 Any sacks found to be inadequately sealed should not be removed. The person in charge of the Ward/Department at that time is responsible for ensuring that bags/containers are adequately sealed at the site of origin.

- 16.5 Hotel Services Team will be responsible for ensuring that the number of waste bags provided, is compatible with the volume of waste produced. Also they must ensure that the correct bags are provided for the disposing of general waste.

## **16.6 Disposal of General Waste**

16.7 This includes all forms of household/office waste. The following procedures should be followed to dispose of general waste:

- Place waste into the Black bags provided.
- When sacks are  $\frac{3}{4}$  full seal and place in domestic wheelie bin and replace with an empty sack.
- General and domestic waste is non-clinical waste that does not present risk of injury or exposure to a potential source of infection.
- It will be of a type found in any household or office e.g. disposable paper towels etc.
- Food Waste - dispose of via waste disposal unit or food waste recycle bin where available, otherwise deposit in black bags for disposal as above.

## **16.8 Storage**

16.9 Areas designated for the storage of general waste on Wards and in Departments, such as sluices/utility rooms should be cleaned daily. Waste must not be stored outside these designated areas.

## **16.10 Removal of Waste**

- The Livewell Southwest's refuse contractor will regularly collect refuse from each site. Details of the collection schedule is available from the Hotel Services Management Team.
- If at any time additional collections are required or collections are missed, the Hotel Services Management Team should be contacted and a collection will be arranged.
- If there are any issues out of hours please follow out of hours procedure for your area.

## **16.11 General Equipment and Furniture (not electrical)**

- Prior to the collection of any redundant equipment or furniture, the item should be cleaned/decontaminated by Ward/Department staff.
- Following cleaning the item should be labelled "Redundant Equipment/Furniture". Items not labelled will not be removed.
- Attempts should be made to re-use the item within Livewell Southwest by contacting other Wards/Departments via Livewell Southwest's communication team.
- Any item that is broken or not suitable for use must not be used in any other capacity in any other location, as this could result in serious harm.
- Prior to collection the redundant item should remain in the Ward/Department and not placed in the corridor, lift area or stairwell.

- The Locality Manager should be informed of the item in order to remove it from the Asset Register and Finance Capital Charging System.
- Redundant manual beds and all mattresses should be decontaminated before leaving the Ward/Department. All traces of bodily fluids must be removed. If the mattress cannot be completely cleaned and it was soiled by a patient that was known to be infectious, then the mattress must be disposed of via the orange bag stream. Wards/Departments must purchase mattress bags for disposal via eproc.

## **16.12 Waste Electric and Electronic Equipment (WEEE)**

The Waste Electric and Electronic Equipment regulations (WEEE) came into force on 1<sup>st</sup> July 2007 and places a responsibility on all businesses (including Livewell Southwest) to dispose of WEEE separately from other waste.

Examples of items covered by WEEE include fridges, freezers, washing machines, televisions, video/dvd recorders, electric cookers, microwaves, toasters, electric fans, vacuum cleaners, telephones, fluorescent light bulbs, medical devices and batteries.

Waste electrical and electronic equipment (WEEE) must be disposed of via an Approved Authorised Treatment Facility, (AATF). There are two methods available to comply with the regulations.

**You can dispose of your electrical and electronic equipment free of charge if:**

- It was sold to you after 13<sup>th</sup> August 2005.
- You are replacing it with equivalent WEEE.

In these instances you should contact the supplier of the original or the replacement WEEE who will provide you with information of the 'Take Back' system that is available to you, for its free disposal.

Livewell Southwest will have to arrange and pay for the transfer and disposal of WEEE by an approved authorised treatment facility if

- You are discarding WEEE purchased before August 13<sup>th</sup> 2005 and are not replacing it with equivalent WEEE.
- You cannot trace the producer or their compliance scheme.

For these items, managers must contact Estates 01752 435100 to arrange the condemning of the equipment. When Estates condemn the items, they will bring smaller items back to Mount Gould for disposal by an AATF.

**Do not dispose of any WEEE items via black bag waste or via skips.**

The arrangements of fridges, freezers, medical devices, batteries and I.T. equipment remain unchanged.

**Fridges etc** – Once condemned, contact the Site Assistant Service via Hotel Services Management Team to arrange collection. You will need to provide a budget number to cover the cost of disposal.

**Medical Devices** - Contact MEMS on 01752 763521

**Batteries** – Send to Estates Dept. at Mount Gould Hospital for disposal

**I.T. equipment & Telephones** - Contact the I.T. Helpdesk 01752 437000

Some suppliers may offer you a discount on new purchases if you agree to take on the obligations of WEEE for that item. We suggest that you DO NOT follow this course of action, as it will be your responsibility when it comes to disposal.

### 16.13 The Safe Handling and Disposal of Waste Foods, Edible Oils and Animal Fat

#### Classification

Type	Definition	Correct Disposal Method
Food Waste (Bulk & Plate)	Any item of food that has been produced for patients, visitors and staff and is no longer required or fit for human consumption	<ul style="list-style-type: none"> <li>waste disposal unit.</li> </ul> <p><b>Note:</b> In the event of a waste disposal unit being out of order all waste food from that area should be disposed of in the waste disposal unit of an adjacent Ward or be double bagged in a black waste bag and placed in a wheeled bin.</p> <p>Dispose of all food waste in food waste recycle carrier (Mount Gould &amp; Glenbourne sites only).</p>
Edible Oil Waste	Vegetable oil that has been used in the production of food for patients, visitors and staff	<ul style="list-style-type: none"> <li>Oil that is no longer required must be returned to an empty oil drum and disposed of through a recognised agent.</li> <li>Alternatively small amounts of oil (maximum of 1 litre) can be placed into a sealable</li> </ul>

		container and disposed of in a black bag.
Animal Fat Waste	Any solid or liquid fat that is produced during or after the cooking process	<ul style="list-style-type: none"> <li>• All solid fats must be disposed of in a black bag.</li> <li>• All liquid fats must be placed in a sealable container and disposed of in a black bag.</li> </ul>

- All food production and disposal areas must have filter covers fitted over drainage outlet pipes and gratings. Filters must be removable and readily cleansable.
- All food preparation sinks and equipment wash sinks must be fitted with a removable filter trap which must be readily cleansable.
- Edible oil drums awaiting collection must be stored in a safe, secure manner so as not to cause any obstruction.
- All spillages of food waste, edible oils and animal fats are to be cleared up immediately and the area cleaned in accordance with existing cleaning schedules/method statements.
- Livewell Southwest will undertake random monitoring of all ward kitchens and food production/disposal areas in order to ensure compliance with this policy.

## 17. Spillages

17.1 The following procedures must be followed when containing and clearing a spillage of waste materials.

- All spillages must be regarded as potentially hazardous and dealt with immediately.
- Under no circumstances should patients or members of the public be allowed to assist in the clearing or cleaning up of spillages.
- When dealing with a spillage protective equipment should be used. The type of equipment will depend on the risk present in that particular waste spillage. Suitable protective equipment would include disposable nitrile gloves, a disposable apron, new waste container, paper towels, disposable cloths and eye protection. For further information please see Livewell Southwest's Disinfection and Cleaning Policy.

- Whilst cleaning up a spillage ask another member of staff to assist in keeping unauthorised persons away until the area can be isolated (using barriers).

## 17.2 Infectious Waste Spillage

- Equipment, PPE and instructions for cleaning bodily fluids is available in all domestic cupboards using the 'yellow bucket cleaning process'. When the area has been cleaned, disinfect the area in accordance with the Livewell Southwest's current Disinfection and Cleaning Policy. See Appendix C.

## 17.3 Spillage of Blood or Fluids

When responding to a spillage of blood or bodily fluid, the following guidance should be followed.

- Blood must be cleaned up immediately. Where there is an extensive spill use the recommended cleaning materials as outlined in Livewell Southwest's Disinfection Policy. All waste products should be placed in an orange bag for disposal.
- For further advice please see guidance on Livewell Southwest's intranet.
- **Note:** Infection Prevention and Control Team can be contacted via switchboard in case of emergencies during working hours.
- After cleaning up any spillage, if the floor surface is wet provide a warning sign to identify a slipping hazard.
- Any burst containers should be re-packed in another infectious waste bag, securely sealed, re-labelled and disposed of in the normal way.
- The Head of Department must ensure the necessary materials and equipment are provided to clean up spillages in their area.
- An investigation into the cause of the spillage must be initiated by the Ward/Department Manager to prevent future incidents.

## 17.4 Sharps Spillages

- Forceps or litter picker must be used to pick up and transfer spilt sharps to another sharps bin.
- If discarded sharps are found in the grounds of any Livewell Southwest premises these must only be picked up by a competent person. PPE must be worn. For further advice, please contact Hotel Services Management Team or Estates Team.

## 17.5 Domestic Waste Spillage

- Put on PPE including a pair of gloves and apron, clear the spillage and be alert to any hazards present whilst clearing the spillage.
- Ensure no hazards remain i.e. sharp items. Then re-pack in another black bag, together with the burst container. Securely seal the bag and dispose of in the prescribed way and clean the area thoroughly. If the floor surface is wet provide warning sign to prevent slipping.

## 17.6 Pharmaceutical Spillage

- Following any spillage of liquid pharmaceuticals, contact the Pharmacy immediately for advice.

## 17.7 Emergency Advice

If in doubt contact the Hotel Services Management Team. Out of hours follow out of hours procedure for your service.

### Do Not

- Ignore any spillages, no matter how small.
- Deviate from the spillage procedure above.
- Allow unnecessary access to the spillage area.

## 18. Confidential Waste

18.1 Confidential waste will consist of paper work containing sensitive information relating to staff or patients.

There are 2 options for its disposal:-

1. Shred the waste using a cross shredder.

**Please note:-** If the confidential paper can be shredded it is no longer classed as confidential waste, and can be placed into a clear recycling bag.

2. Place confidential waste into the locked confidential waste cabinet located within your area of work. If confidential waste is accidentally placed into cabinet or cabinet is full, please contact Hotel Services Management Team in the first instance. If additional collections are required these must be requested via the Hotel Services Management Team only.

18.2 Under no circumstances should any confidential waste paper be disposed of or stored in yellow/orange clinical waste bags or black domestic waste bags. The bags must be capable of being lifted easily in one hand. If this cannot be achieved the bag is too full and some of the contents should be transferred to another bag.

- 18.3 For the disposal of **Electronic data** such as floppy disks, CDs, back up tapes etc you should contact IT via e-mail at [PictsProcurement@plymouth.nhs.uk](mailto:PictsProcurement@plymouth.nhs.uk) or by phone on (4)37000 (option1) who will be able to advise.

## 19. Cardboard Waste

- 19.1 All cardboard boxes and trays should be flat packed, after removing any plastic coverings etc, either by the members of staff who have unpacked the boxes or those assigned this responsibility by the Ward/Department Manager receiving the goods.
- 19.2 Cardboard must not be deposited in the yellow wheeled bins.
- 19.3 The cardboard once flat packed should be disposed in the external recycling bin.

## 20. Used Batteries

All used batteries should be brought/sent to Estates Workshop at Mount Gould Hospital and placed in the designated storage container.

## 21. Recycling Waste

Items for recycling (other than confidential waste or cardboard) – see Appendix C - should be placed into the internal recycling bin provided.

Please do not put any other waste product into this recycling bin.

## 22. Mercury Waste

Livewell Southwest has agreed through the Risk Management Group to phase out instruments that contain mercury to reduce any associated risks.

Should a mercury spillage occur, contact MEMs at Derriford. See below. **Do not** attempt to clean up the spillage yourself. See Appendix E.

Handling mercury within Livewell Southwest:

**Do not** ignore any spills, no matter how small.

**Do not** deviate from the spillage procedure.

**Do not** attempt to clean up the spillage yourself.

**Do not** allow unnecessary access into spillage area.

**Do not** send damaged equipment containing mercury through the postal system, the blood gas technician should collect it. (Tel: 763579 Derriford Hospital).

**Do not** dispose of items which have been in contact with mercury (i.e. bedding and clothing) via the normal procedure contact the blood gas technician for advice.

**Do not** forget to fill in the appropriate paperwork required, i.e. Incident report form.

**Do not** use mercury containing instruments in carpeted areas as there is no adequate way to decontaminate them.

**Do not** dispose of damaged, contaminated equipment e.g. thermometers. They will be dealt with by the technician.

### **23. Radioactive Waste**

Not usually applicable to Livewell Southwest. However if an occurrence should arise contact Nuclear Medicine Dept. at Derriford Hospital for advice.

### **24. Contractors Waste**

All waste generated by contractors remains their responsibility to remove and dispose of appropriately at an off site treatment facility. Contractors are not permitted at any time to leave their waste at Livewell Southwest premises, allow it accumulate to such an extent as to cause a fire hazard and they are not permitted to use any of Livewell Southwest's waste treatment facilities without prior written agreement with the Hotel Services Management Team. Additional costs for removing contractors waste or waste caused as a result of contractors work e.g. desks, cabinets, cupboards etc will be disposed of and charged to the Ward/Department the contractor is working for, including a £100 administration fee.

All waste generated by contractors carries a legal responsibility to be segregated and disposed of at a registered treatment site and Livewell Southwest managers that appoint contractors should ensure that they receive documented evidence of appropriate waste disposal e.g. certificate of destruction, consignment note or waste transfer note.

Managers should also make sure that when they let contracts, the terms of these contracts also state that waste generated by the particular contract is disposed of off site and copies of the necessary legal documents are provided to the contract manager.

Failure to dispose of the waste correctly and of a contract manager to obtain reasonable written proof that this has occurred, can result in Livewell Southwest and or individual managers being prosecuted and fined.

### **25. Dental (Amalgam) Waste**

All amalgam waste must be placed in the approved, pre-labelled containers supplied by the Dental Department's waste contractor, secured when no more than 3/4s full, and stored safely until collected by the contractor.

### **26. Gypsum Waste**

All gypsum waste must be placed in a clear plastic sack and disposed in an external gypsum waste container. This is located at Thornberry Centre. Please contact Hotel Services Management Team for further advice.

### **27. Disposal of Glass**

Broken glass or crockery should be placed in a “sharps bin” specially designated for glass and crockery.

Once full the bin should be sealed and can be disposed of via the black bag refuse route.

## 28. Monitoring

Monitoring mechanisms will be instigated to check the following procedures set out below have been followed:

- storage
- segregation
- collection
- disposal

Non-compliance will be traced back to source so that corrective action can be taken.

Monitoring will be carried out as follows using Livewell Southwest’s Health and Safety Audit report form:

<b>Responsibility</b>	<b>Areas to be monitored</b>
Infection Prevention & Control Team	<ul style="list-style-type: none"><li>• Sharps Bins</li></ul>
Hotel Services Management Team	<ul style="list-style-type: none"><li>• Wards/Departments</li><li>• Waste in transit</li></ul>

**Any breaches in procedures should be brought to the attention of the Hotel Services Management Team**

## 29. Training

All staff who handle waste must receive appropriate training, commensurate with their involvement in the waste handling process. This will vary between staff groups but is likely to include:-

- knowledge of the various waste streams
- segregation of waste
- handling waste
- marking of bags/sharps containers
- storage of waste

Depending on the staff group, staff will receive their training from different sources, i.e. Infection control training, domestic awareness training.

**All policies are required to be electronically signed by the Lead Director. Proof of the electronic signature is stored in the policies database.**

**The Lead Director approves this document and any attached appendices. For operational policies this will be the Locality Manager.**

**The Executive signature is subject to the understanding that the policy owner has followed the organisation process for policy Ratification.**

Signed: Director of Finance

Date: 26<sup>th</sup> July 2016

## Appendix A

### Highly Infectious Substances Affecting Humans

<b>UN No. 2814</b>	Bacillus anthracis (cultures only)
Infectious	Brucella abortus (cultures only)
substances	Brucella melitensis (cultures only)
affecting humans	Brucella suis (cultures only)
	Burkholderia mallei – Pseudomonas mallei – Glanders (cultures only)
	Burkholderia pseudomallei – Pseudomonas pseudomallei (cultures only)
	Chlamydia psittaci – avian strains (cultures only)
	Clostridium botulinum (cultures only)
	Coccidioides immitis (cultures only)
	Coxiella burnetti (cultures only)
	Crimean-Congo haemorrhagic fever virus
	Dengue virus (cultures only)
	Eastern equine encephalitis virus (cultures only)
	Escherichia coli, verotoxigenic (cultures only)
	Ebola virus
	Flexal virus
	Francisella tularensis (cultures only)
	Guanarito virus
	Hantaan virus
	Hantavirus causing haemorrhagic fever with renal syndrome
	Hendra virus
	Hepatitis B virus (cultures only)
	Herpes B virus (cultures only)
	Human immunodeficiency virus (cultures only)
	Highly pathogenic avian influenza virus (cultures only)
	Japanese Encephalitis virus (cultures only)
	Junin virus
	Kyasanur Forest disease virus
	Lassa virus
	Machupo virus
	Marburg virus
	Monkeypox virus
	Mycobacterium tuberculosis (cultures only)
	Nipah virus
	Omsk haemorrhagic fever virus
	Poliovirus (cultures only)
	Rabies virus (cultures only)
	Rickettsia prowazekii (cultures only)
	Rickettsia rickettsii (cultures only)
	Rift Valley fever virus (cultures only)
	Russian spring-summer encephalitis virus (cultures only)
	Sabia virus
	Shigella dysenteriae type 1 (cultures only)

Tick-borne encephalitis virus (cultures only)  
Variola virus  
Venezuelan equine encephalitis virus (cultures only)  
West Nile virus (cultures only)  
Yellow fever virus (cultures only)  
Yersinia pestis (cultures only)

## Appendix B

### Community Waste Information Leaflet



Community Waste  
Information Leaflet.p

## Appendix C

# Cleaning Instructions for Bodily Fluids – “You find it, you clean it...!”

Your yellow bucket should contain:

- Yellow mop and mop handle
- Disposable yellow mop heads
- A bottle of detergent
- Actichlor tablets (Granules can be used on Blood)
- Yellow disposable cloths
- Yellow aprons
- Safety goggles
- Face masks
- Detergent wipes

If any of those items is missing, please contact your Hotel Services Management Team on (4)35044 to order a replacement.



Always wear gloves and aprons when carrying out any type of cleaning activity!

Identify the type of spillage and put on your gloves and apron.

### Urine Spillage

- Use a paper towel to soak up the urine.
- Make up a solution of detergent and water in the yellow bucket and wipe/mop the affected area.
- **DO NOT USE ACTICHLOR**

All used cloths, paper towels, disposable mop heads, aprons and gloves must be disposed of in a clinical waste bag.

Any curtains need to be placed in a green patient property bag and sent to Mount Gould Laundry.

Lastly clean both the handle and bucket thoroughly and return to their original place.

### Blood and Faeces

- Use a paper towel to remove the spillage.
- (Actichlor Granules will solidify Blood – **DO NOT USE ON CARPETS**).
- Make up a solution of detergent and water in the yellow bucket and wipe/mop the affected area.
- Once completed dispose of the detergent solution and make up a second solution using Actichlor tablets as per manufacturer's instructions.

### Vomit and Diarrhoea

- Put on your PPE including a **face mask**.
- Use a paper towel to remove the spillage.
- Make up a solution of detergent and water in the yellow bucket.
- Wipe all hard surfaces starting with the cleanest area to the dirtiest and lastly mop the floor.
- Once completed dispose of the detergent solution and make up a second solution using Actichlor tablets as per manufacturer's instructions (**wear goggles**).
- Wipe all hard surfaces starting with the cleanest area moving to the dirtiest the mop the floor.
- Change any curtains and replace with clean ones.

**Appendix D**

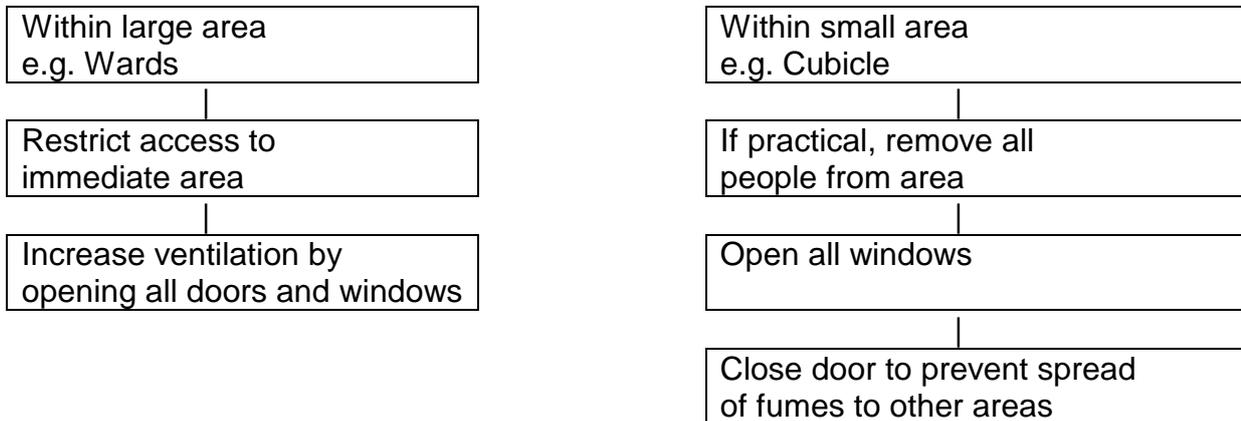
Recycling Poster



Livewell recycling  
Poster.pdf

## Procedure for dealing with all mercury spillages Livewell Southwest

### SPILLAGES



Do not attempt to clean up

Telephone Mems 763579 during normal working hours

07.30 - 16.30

Outside normal working hours contact Derriford switchboard and ask telephonist to  
bleep the

On-call blood gas technician

Await arrival of technician with spillage kit

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## Bags Glass

Card & Cardboard  
Food Tins

& Drink **is**