



London Ambulance Service **NHS**
NHS Trust

Waste Management Policy

DOCUMENT PROFILE AND CONTROL.

Purpose of the document: to ensure that the London Ambulance Service (LAS) manages waste with a focus on the protection of the environment and cost-effective safe handling and disposal.

Sponsor Department: Estates

Author/Reviewer: Head of Estates. To be reviewed by Facilities Manager by September 2013

Document Status: Draft / Final

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***Version Control Note:** All documents in development are indicated by minor versions i.e. 0.1; 0.2 etc. The first version of a document to be approved for release is given major version 1.0. Upon review the first version of a revised document is given the designation 1.1, the second 1.2 etc. until the revised version is approved, whereupon it becomes version 2.0. The system continues in numerical order each time a document is reviewed and approved.

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ICSG	09/09/10	1.0
Ratified by:		

Published on:	Date	By	Dept
The Pulse	10/01/2011	Governance Administrator	G&C
LAS Website	10/01/2011	Governance Administrator	G&C
The RIB	11/01/2011	Governance Administrator	G&C

EQIA completed on	By
29/07/10	NS, SM, and CM
Staff side reviewed on	By

Links to Related documents or references providing additional information		
Ref. No.	Title	Version
	Technical Guidance WM2 – Interpretation of the definition and classification of hazardous wastes (Environment Agency)	
	Health Technical Memorandum 07-01: Safe management of healthcare waste (Dept of Health)	
	Healthcare Waste Management – HTM 2065	
	Healthcare Standards Committee – C4e (Healthcare Commission)	
	Health Services Advisory Committee – Safe Disposal of Clinical Waste	
HS 19	Infection Control Procedure Manual	

Document Status: This is a controlled record as are the document(s) to which it relates. Whilst all or any part of it may be printed, the electronic version maintained in P&P-File remains the controlled master copy. Any printed copies are not controlled nor substantive.

1. Introduction

The London Ambulance Service NHS Trust (LAS) recognises that the environment is an important factor in the health of our nation. In order to protect the environment it will strive to ensure that waste is managed, handled and disposed of safely and securely within cost effective parameters.

Waste minimisation and recycling initiatives play a key role in waste management and in order to reduce the volume of waste produced the LAS is committed to the implementation of recycling initiatives.

The Trust has a legal responsibility to provide proper and safe equipment and safe systems of work and has a duty to exercise such reasonable care in the management of hazardous waste so as to avoid such acts and omissions which could reasonably be foreseeable to cause injury or harm to any person(s) who are closely and directly affected by the Trust's business.

Effective management is essential to minimise the risks to the health and safety of staff, patients, contractors, the general public, and the environment and this policy has been developed to document the systems of waste management in place.

2. Scope

The scope of this policy covers all waste types generated by the LAS other than those dealt with in separate Environmental Management and Transport policies, standing financial instructions and uniform and workwear policies.

- 2.1 The policy applies to all LAS staff, suppliers, contractors and sub-contractors who, as part of their activities, may produce waste on LAS sites.

3. Objectives

- 3.1 To provide the effective waste management that will deliver a more efficient and sustainable healthcare service and ensure that waste considerations are taken into account in the activities and services of the LAS in line with the requirements of Corporate and Information Governance;
- 3.2 To facilitate compliance with legislation and regulations (see Appendix 1) that govern the production, handling, storage, transportation and disposal of all waste types and therefore meet our legal obligations, including 'Duty of Care';
- 3.3 To minimise risk to staff, patients, public, contracted staff and their agents from exposure to hazardous or potentially hazardous waste;
- 3.4 To assist managers and staff at all levels in the organisation to understand their commitment to and responsibility for effective waste management;

4. Responsibilities

4.1 Chief Executive

The Chief Executive has overall responsibility for having an effective waste management system in place within the Trust and for meeting all statutory requirements and adhering to guidance issued by the Department of Health.

4.2 Medical Director

The Medical Director has delegated responsibility for managing clinical waste. This incorporates any potential risks relating to clinical care including decontamination, infection control, healthcare waste management, medicines and research.

4.3 Director of Finance

The Director of Finance has delegated responsibility for managing all other types of waste, including hazardous waste, through the Head of Estates.

4.4 Head of Estates

The Head of Estates is the “designated” lead in respect of providing the Trust with organisational assurance for the management of waste, including clinical and hazardous waste, and will ensure the provision of a comprehensive reporting system for producing performance reports to evaluate the effectiveness of the internal controls and risk management of waste. The Head of Estates devolves the day to day operational management of waste to the Facilities Manager.

4.5 Facilities Manager

The Facilities Manager will have responsibility for co-ordination of all waste management activities within the LAS and to ensure that the objectives of the Waste Management Policy are achieved.

The Facilities Manager is to:

- develop an LAS Waste Management Strategy and promote its awareness throughout the organisation;
- ensure the LAS is meeting its legal obligations;
- develop appropriate procedures for the management of all types of waste
- identify all waste types and ensure they are appropriately managed and disposed;
- co-ordinate the LAS waste management initiatives and schemes;
- produce an annual report on the implementation of waste management for the Infection Control Steering Group;

- monitor overall performance of waste management practices, and where appropriate, recommend actions
- Develop and co-ordinate appropriate waste management training and awareness programmes for all relevant staff and at induction to the LAS.
- Liaise with the Information Security Manager to ensure appropriate handling of all secure and confidential waste.

4.6 **Managers**

All managers have responsibility for compliance with the Waste Management Policy.

Duty Station Officers and a delegated individual at other LAS sites will be given responsibility to:

- assist the LAS in meeting all legal obligations with the collection, storage and disposal of all types of waste;
- plan and assist the implementation of the Waste Management Policy, and procedures and actively promote best practice;
- Monitor the overall performance of waste management practices, and where appropriate, recommend actions.

4.7 **General Responsibilities of all Staff**

All staff has a statutory obligation to ensure that they comply with the LAS Health and Safety Policy and Waste Management Policy when handling and disposing all waste types. This includes the safe, secure and proper disposal of waste produced from Service establishments, and in particular, all items of waste generated from operational activities and patient care interventions.

Staff have a duty to inform their line manager of any inappropriate waste management practices.

4.8 **Trust Board**

The Trust Board takes ultimate corporate responsibility for the management of waste throughout the LAS and the Director of Finance has lead responsibility on the Board.

4.9 **Infection Control Steering Group**

The Infection Control Steering Group has responsibility to:-

- advise staff and any third party contractors to meet all legal obligations relating to the collection, storage and disposal of all types of waste;

- oversee the implementation of the Waste Management Policy and procedures for the implementation of the objectives and targets set in the Waste Management Policy;
- ensure changes in legislation are incorporated into the LAS policies and procedures;
- ensure policy implementation and compliance with waste management procedures are audited with time limited action plans to remedy any shortfalls;
- encourage and promote sustainability and environmental best practice;
- monitor all on-site activity to see that it is carried out in accordance with current best practice guidance – DoH: Health Technical Memorandum 07-01: Safe management of healthcare waste;
- recommend sufficient physical and financial resources to ensure waste is handled and disposed of in accordance with relevant legislation and best practice guidance;

5. Definitions

5.1 Clinical Waste

Clinical waste is defined as waste arising from healthcare activities that pose a risk of infection or that may prove hazardous. Within the Controlled Waste Regulations 1992 clinical waste is defined as, ***“Any waste which consists wholly or partly of human or animal tissues, blood or other body fluids, excretions, drugs or other pharmaceutical products, swabs or dressings, syringes, needles or other sharp instruments, which unless rendered safe may prove hazardous to any person coming into contact with it”*** and or as ***“any other waste arising from medical, nursing, dental, veterinary, pharmaceutical or similar practice, investigation, treatment, care, teaching or research, or the collection of blood for transfusion, being waste which may cause infection to any person coming into contact with it.”*** This also includes single use items.

5.2 Confidential Waste

Confidential waste includes any material that contains patient, employee or other personal information or may be used to identify an individual. It also applies to business confidential information, restrictively marked documents or information otherwise deemed to be of a sensitive nature. It applies to all materials, i.e., paper, computer, video or audiotape, photographs, film fiche, disks etc.

5.3 **Domestic waste**

All household waste, including glass and aerosols, but excluding any item generated from a clinical related activity.

5.4 **Recyclable Waste**

Specific items which can be recycled and have designated bins include cardboard, empty cans, plastic bottles, plastic cups, and carrier bags.

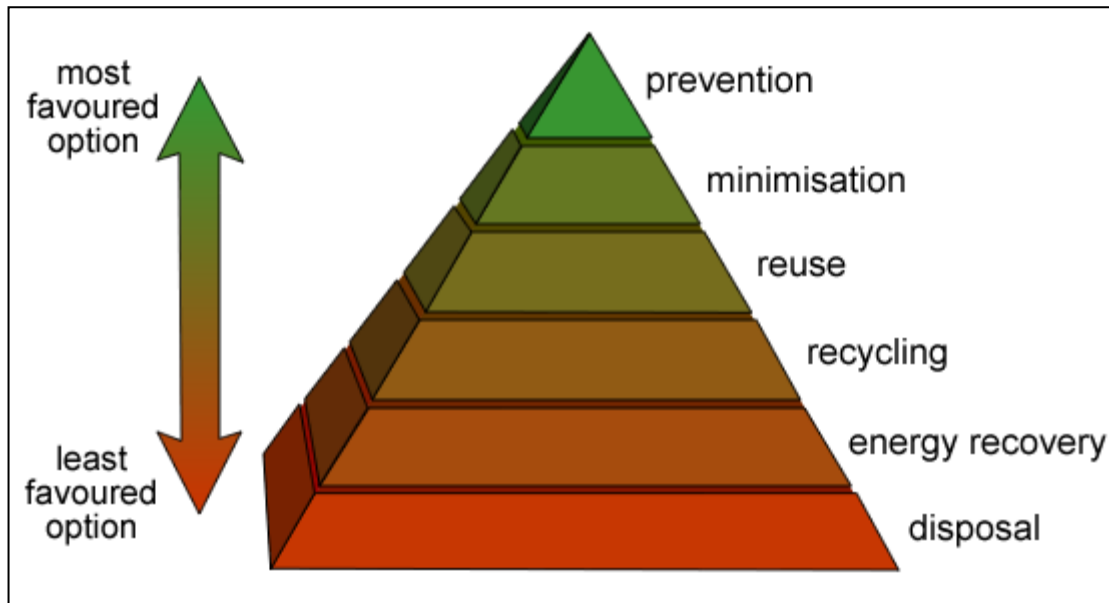
6. **Policy Statement**

It is the policy of The Trust to:

- Segregate all waste into recyclable and non-recyclable streams to minimise environmental impact and keep operational costs to a minimum;
- Develop appropriate procedures to ensure the safe segregation, handling, transportation, storage and final disposal of all waste streams;
- Limit the quantity of waste produced. Re-use, re-cycle, and dispose of waste, using the principles of sustainability and the Hierarchy of Waste Management model;
- Employ innovative approaches to waste management wherever possible;
- Gather information from waste management contractors in order to facilitate improvement in waste management performance and recycling rates;
- Ensure principles of sustainable waste management are implemented in any construction projects;
- Train staff in accordance with this policy and waste management procedures to encourage best practice and statutory compliance;
- Ensure this policy and any procedures comply with Infection Control requirements;
- Monitor and audit waste management through such initiatives as the quarterly Infection Control Audit and Duty of Care performance and produce an annual report for the Trust.

7. Waste Management Principles

7.1 Hierarchy of Waste Management



The Hierarchy of Waste Management model sets out the key principles by which the Trust intends to manage waste:

- **Prevention**

Procurement department to encourage suppliers to reduce waste at the source by minimising packaging as detailed in Section 21.1.1 of the NHS Conditions of Contract for the Purchase of Goods (July 2007) and to comply with the Producer Responsibility Obligations (Packaging Waste) Regulations 2005... Encourage suppliers to use cages rather than boxes for deliveries.

Encourage staff to use email or the scan to e-mail facility rather than printing and mailing a document.

- **Minimisation**

Reduce the amount of waste produced, through initiatives such as the 'paper light office'

Encourage employees to print responsibly and to recycle where possible. Facilitate transition of paper documents into digital form and ensure they are correctly archived to alleviate the need for hard copies.

Print double sided; make double sided printing the default position on computers to save paper consumption. Staff where practical should shred confidential documents so that they can be recycled.

- **Reuse**

Seek to identify waste streams suitable for re-use and encourage commercial ventures utilising re-use items i.e. compost bins.

- **Recycling**

Recycle non-healthcare waste streams where possible and seek to identify healthcare waste streams that could be recycled.

Use printer manufacturers pre-paid postage labels to recycle printer/toner cartridges or designated recycling collection boxes.

Operate dry recycling scheme which includes paper, plastic, cardboard, cans etc.

- **Energy Recovery**

Bagged clinical waste is autoclaved, shredded and the heat is converted to form electricity. Providing sustainable green energy for London.

- **Disposal**

The Trust will only consign to landfill those wastes which cannot be 'disposed' of using the principles described above.


8. Segregation of Waste

Different types of waste require different treatment to ensure their safe and appropriate disposal. Proper segregation of waste is critical to the effective and safe management of waste and if undertaken correctly, should control the costs associated with disposal. For example, incineration of a bag of infectious waste is more expensive than disposing of a bag of domestic waste. It is therefore LAS policy that waste is correctly identified and segregated at source, in order to remove all avoidable risk during subsequent handling, storage and transportation.

To assist staff in segregating waste the LAS has adopted a national colour coding system (below) that identifies and segregates waste on the basis of its classification and suitability of treatment and disposal options. See Section 19 of the Infection Control Procedure Manual for procedures concerning segregation, handling, and storage of waste.


8.1 Sharps waste

Sharps are items that could cause cuts or puncture wounds, including needles, syringes with needles attached, broken glass ampoules, scalpels and other blades, and infusion sets. Yellow-lidded sharps receptacles should contain waste that requires disposal by incineration only.

	Description	Example	Disposal Method
	Sharps including single use items	Syringe body, ampoule	Incineration


8.2 Infectious waste

Orange bags should be used for infectious waste which may be treated to render it safe prior to final disposal. Treatment may only take place in a suitably licensed or permitted facility. The Trust, by segregating waste in the orange stream, will reduce its carbon footprint and environmental pollutants.

	Description	Example	Disposal Method
	Infectious waste, potentially infectious waste, autoclaved laboratory waste and single use items	Soiled dressings, single use items	Licensed/permitted treatment facility

8.3 Domestic waste

Black bags should be used for domestic waste which is waste similar in nature and composition to waste generated in the home. It should not contain any infectious materials, sharps or medicinal products, or any confidential material and therefore may be placed in black bags for disposal.

	Description	Example	Disposal Method
	Domestic waste	General refuse, including confectionery products, food, flowers etc	Landfill

8.4 Confidential waste


White bags should be used for the disposal of any waste material that contains confidential or restricted information that will constitute a breach of confidentiality if it became available to unauthorised persons.

Confidential waste includes any material that contains information that would identify an individual patient or employee or business confidential information.

This Disposal of Confidential waste applies to all materials, i.e., paper, computer, video or audiotape, photographs, film fiche, disks etc.


Paper waste can be shredded or placed in the confidential waste bins/bags.

Disposal of uniform will be in accordance with the current uniform and work wear policy

	Description	Example	Disposal Method
	Confidential Waste	Paper, or any material that contains patient information	Shredding and then recycled


8.5 Recycling waste


Clear sacks will be used for all recycling waste. This includes cans, paper, cardboard, plastic bottles, carrier bags etc.

	Description	Example	Disposal Method
	Recycling waste	Paper, cans, cardboard, plastic bottles etc	Recycled

8.6 Workshop Waste

Waste arising from the servicing of LAS vehicles will be deposited into a designated workshop skip.

	Description	Example	Disposal Method
	Workshop Waste	Exhausts, disc brakes, waste metal etc.	Sorted and recycled where possible

	Vehicle batteries, defib batteries	Lead, acid batteries	Sorted and recycled where possible
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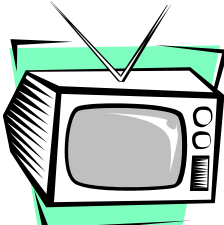
The above items are consigned as hazardous waste and must be accompanied by a hazardous waste consignment note. They must be collected by an approved contractor with full audit trail.

There is currently no legislative requirement to segregate alkaline or zinc carbon batteries (i.e., AA, AAA) from domestic waste destined for landfill. However where feasible, recycling points may be installed. New regulations which came into force 5th May 2009 require UK to increase recycling levels on batteries. This also reduces landfill volumes.

8.7 Electrical and Electronic Waste

The Waste Electrical and Electronic Directive (WEE) is now in force in the UK and a wide range of waste equipment is covered by the directive.

A contracted company is, on an ad hoc basis, used to remove this waste which is then transferred for recycling or reuse to an Authorised Approved Treatment Facility.

	Description	Example	Disposal Method
	Waste electrical equipment	IT equipment, electrical household appliances, medical devices	Approved treatment facility

9 Continuous Development

9.1 The Waste Management Strategy will identify waste management programmes to:

- Encourage staff and contractors to minimise any undue waste;
- increase recoverable/recyclable LAS generated waste on a year by year basis;

- consult our stakeholders and collaborate with appropriate external organisations.

Implementation Plan

IMPLEMENTATION PLAN	
Intended Audience	For all LAS staff and external stakeholders
Dissemination	Available to all staff on the Pulse and to the public on the LAS website
Communications	New policy to be announced in the RIB and a link provided to the document
Training	Procedures for the management and disposal of hazardous waste will be incorporated within the induction training and on the CPD training programme for all staff and will comprise of the risks associated with handling, segregation, storage safe disposal and transportation and procedures for dealing with spillages and accidents and, where appropriate, the use of personal protective equipment.
Monitoring	<p>Waste segregation will be monitored by the quarterly infection control audits carried out by the infection control champions.</p> <p>Under Duty of Care there will be an annual audit of waste contractors premises carried out by the Facilities Manager to check that hazardous waste is disposed of in line with appropriate regulations and to examine the effectiveness of the hazardous waste management process.</p> <p>An annual audit will also be carried out by the Facilities Manager on policy implementation and the development of waste management procedures.</p> <p>Contractors will provide information on recycling rates on a monthly basis and this performance will be monitored by the Facilities Manager in order to ensure continuous improvement.</p> <p>All monitoring will be reported through to the Infection Control</p>

	Steering Group (ICSG) every quarter and will form the basis of the annual waste management report by the Facilities Manager. The ICSG reports through to the Clinical Quality Safety and Effectiveness Group which will monitor the outcomes and recommendations from the reports.
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Appendix 1

Legal compliance

Listed below are some of the Acts, Regulations & EC Directives identified as key to creating a comprehensive waste policy document. These standards are open to iteration and should be monitored regularly to ensure adherence to the latest versions (as discussed in section 9 above).

Hazardous Waste Regulations 2005

Environmental Protection Act 1990

Health and Safety at Work Act 1974

Management of Health and Safety at Work Regulations 1999

Environmental Protection (Duty of Care) Regulations 1991

The Carriage of Dangerous Goods and Use of Transportable Pressure Equipment Regulations 2004

The Chemicals (Hazard Information and Packaging for Supply) Regulations 2002

Control of Substances Hazardous to Health Regulations 1999

Controlled Waste Regulations 1992

European Union Directive on Waste Electrical and Electronic Equipment (WEEE)

New environmental strategy for the health service (NHS Estates, 2001)

ERIC Facilities Management Good Practice Guide – Environmental Management

(NHS Estates, 2001)

BS EN ISO 14001 - The International Environmental Management System Standard

1996.

Controls Assurance standard – Waste Management

National Waste Strategy for England and Wales 2000

Waste Management Licensing Regulations 1994

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Special Waste Regulations 1996
Hazardous Waste Directive 91/689/EEC
Landfill Directive 99/31/EC