

Scottish Health Technical Note 3

NHSScotland waste management guidance Part B: Waste management policy template

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Disclaimer

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Finally, HFS welcomes the important recognition and endorsement of this guidance by the Scottish Environment Protection Agency, and is grateful to Mark Heggie of SEPA for his practical comments and input to shaping this latest version of SHTN 3.





Preface

Scottish Health Technical Notes

Technical guidance is a vital tool in the safe and efficient operation of healthcare facilities. Scottish Health Technical Notes (SHTNs) provide comprehensive guidance to NHSScotland Boards on a range of healthcare-specific standards, policies and current best practice. SHTNs are essential to the effective management of the Duty of Care placed on NHSScotland Boards to ensure the health, safety and wellbeing of people and the environment.

The SHTN 3 suite of guidance has been compiled by members of Health Facilities Scotland's (HFS) Waste Management Steering Group (WMSG). Version 6.0 is intended to assist all NHSScotland Boards in meeting their waste management priorities by reflecting current legal, policy and procedural requirements and best practice. It provides guidance to staff and contractors involved at all stages of waste management in the modern healthcare setting. SHTN 3 guidance and recommendations are applicable wherever the NHS in Scotland provides healthcare services and produces waste of any kind.

SHTN 3 version 6.0 updates and replaces version 5.0, published in 2010.

Waste management is a complex and ever-evolving topic. Any subsequent revisions and improvements to Version 6.0 required by future policy and procedural changes will be announced to the Service, along with the associated version numbers, via the HFS website and held, distributed, or made available through appropriate channels. Version 6.0 incorporates the relevant requirements of the Waste (Scotland) Regulations 2012. These Regulations mark a shift in emphasis from waste management to waste minimisation, prevention and reuse, as reflected in the recent NHSScotland Waste Management Action Plan 2013-2016 which was issued by a Chief Executive Letter to all NHS Boards (CEL 14 2013).

SHTN 3 should be used by NHS Board staff and contractors, for whom it has been produced specifically. SHTN 3 reflects best practice for NHSScotland and includes Scottish regulations and relevant requirements drawn from other UK-wide guidance. Sole reliance on UK-wide guidance such as 'Safe Management of Healthcare Waste' (previously known as HTM07-01) is not recommended for NHSScotland as it may be unhelpful or misleading for staff and contractors.

To avoid duplication, where possible, SHTN 3 aims to facilitate compliance without repeating external standards. However, where deemed necessary or helpful, Version 6.0 does include reference to the appropriate international, European and industry standards, or relevant UK and Scottish Government legislation.

A summary of the titles and content of each part of this SHTN 3 Version 6.0 guidance is shown overleaf:





SHTN 3: Part A

Best practice overview



Outlines NHS Boards' waste management responsibilities and best practice. This is a 'practical' summary guidance document

SHTN 3: Part B

Waste policy template



Exemplar waste policy for all Boards to adopt and adapt as required

SHTN 3: Part C

Compendium of regulatory requirements



Overview of regulatory waste management requirements in Scotland. This is a 'reference' document

SHTN 3: Part D

Guidance and example text for waste procedures



Guidance on example waste procedures text for all Boards to adopt and adapt as required





Executive summary

Aim of this guidance

1.1 Part B is the second in the suite of four SHTN 3 waste management guidance documents published by HFS. It is a waste management policy template intended to provide an example or basis for all NHSScotland Boards to develop a standardised waste policy or to modify their existing policy to suit their needs, in order to be consistent with best practice and national policy requirements.

It links closely to the information contained in the other three documents within the SHTN 3 guidance, namely:

- Part A (Best practice overview);
- Part C (Compendium of regulatory requirements), and
- Part D (Guidance and example text for waste procedures).

Note: additional useful information on waste minimisation, reuse and recycling is available in the NHSScotland Waste Prevention and Reuse Guide which has been prepared by Zero Waste Scotland and published on the Resource Efficient Scotland website.

Who should use this guidance?

1.2 This guidance has been written for those with responsibility for developing and implementing waste management policy in NHS Boards.

Overview of Part B

1.3 Part B contains an example waste management policy template with guidance notes, and an example distribution list for key staff within a Board.





2. Policy template

NHS [add Board name]

Waste Management Policy

Policy Ref:				
Controlled Document:	This document can be copied in part or whole but not altered without the express permission of the author or the author's representative.			
Expiry Date:	None; to be reviewed annually			
Author:	Waste Management Officer			
Responsibilities for im	esponsibilities for implementation:			
Organisational Responsibility:	Chief Executive, Chief Operating Officer and Management Teams			
Departmental Responsibility:				
Policy Application:	This Policy applies to ALL members of staff, contractors and any other party undertaking business for, or on behalf of, <i>[add Board]</i> .			
	This Policy applies to all premises and sites owned or controlled by [add Board] .			
	This policy applies to ALL wastes that arise from premises and land which is owned, leased or used in the delivery of NHS <i>[add Board]</i> healthcare services. This includes all scrap, surplus materials, assets and moveable equipment, part or whole, which are defined in law as waste.			
	This policy is to be used and read in conjunction with other NHS <i>[add Board]</i> policies, in particular, integrated with the Infection Prevention and Control Policy, the Environmental Policy and the Corporate Health and Safety Policy.			
Purpose:	This document sets out the policy objectives, the supporting management responsibilities and organisational arrangements for waste management in NHS <i>[add Board]</i> , in keeping with statutory and mandatory requirements.			

Note: This document does not contain the specific details of the statutory or mandatory arrangements for waste and materials minimisation and management. Reference should be made to NHSScotland waste guidance: SHTN 3 for this information.





Policy statement

	•				
1.	NHS [add Board] takes seriously the requirements for a structured approach to the management of waste generated by the Board or on its behalf.				
2.	NHS [add Board] recognises that the management of waste is a significant responsibility comparable in importance to other management and performance objectives;				
3.	NHS [add Board] recognises the importance of the requirement to appoint a Waste Management Officer (WMO) to coordinate and review waste management activities. NHS [add Board] acknowledges that waste management can only be effective when everyone (staff and visitors) takes responsibility for waste.				
4.	to achieve this through the develop	ard] is committed to the effective and safe management of waste. It aims his through the development of realistic and acceptable risk-based cusing on waste minimisation, re-use and recycling.			
5.	Instructions and all relevant statutory	[add Board] is committed to ensuring compliance with Standing Financial actions and all relevant statutory and mandatory requirements by undertaking, raining and monitoring the performance of management arrangements and atting risks.			
6.	Instructions and all relevant statutory	rd] is committed to ensuring compliance with Standing Financial all relevant statutory and mandatory requirements by undertaking, monitoring the performance of management arrangements and			
7.	NHS [add Board] will, as far as is reasonably practicable, ensure that waste is secure from areas of public access and properly and efficiently managed throughout, in keeping with the statutory obligations of the Duty of Care.				
8.	NHS [add Board] recognises its responsibilities to all its employees, including agency, contract and volunteer staff, under the Health and Safety at Work etc. Act: 1974, and associated Regulations. NHS [add Board] will provide employees with sufficient information, training, supervision, equipment and safe systems of work to carry out their duties in the implementation of this Policy.				
9.	NHS [add Board] recognises its responsibilities to minimise the amount of waste generated and, where appropriate, purchase items with recycled content, thereby stimulating local recycling markets.				
10.	NHS [add Board] requires the assistance and co-operation of all employees in the pursuit of this policy.				
Review:This policy will be reviewed annually by the Waste Committee.					
Approved by:		Designation:			
(Print name)		(Print)	I		
Signature:			Date:		

Version 6.0: February 2015





4. NHS [add Board] Waste management policy guidance

Introduction

4.1 NHS [add Board] delivers healthcare services across a wide portfolio of settings, resulting in the production of a correspondingly broad range of wastes.

NHS [add Board] is responsible for managing the waste produced by its employees irrespective of whether the waste is generated on a site owned or leased by the NHS Board.

NHS [add Board] is obliged to comply with all regulatory requirements, including, but not limited to those related to The Health and Safety at Work etc Act: 1974 and The Environmental Protection Act: 1990.

NHS [add Board] is required to assess the risks in the context of the protection of workers engaged in or supporting healthcare delivery, in waste and materials management, in the protection of the public, and the local and wider environment.

In the workplace, a large variety of wastes are produced; these can be classified broadly into the following five 'core' waste streams:

- healthcare (including clinical) waste waste produced as a direct result of healthcare activities which may pose a risk of infection and/or is medicinally contaminated;
- other (non-healthcare) special wastes waste with hazardous characteristics produced from support (non-healthcare) activities, such as paints, batteries and waste electrical and electronic equipment (WEEE);
- 3. **source-segregated recyclates** glass, paper, card, plastics, cans and other metals suitable for recycling;
- 4. **food waste** unwanted food from patients, staff and visitors of the site, and
- residual waste the fraction of waste that remains once all special waste, recyclates and food have been removed at source. This is typically described as 'black bag' or 'domestic' or municipal waste.

Responsibilities and procedural framework

- 4.2 The Chief Executive, the Chief Operating Officer and management teams are responsible for:
 - ensuring that operational procedures, health, safety, environmental and risk management arrangements are in place to meet legal and policy requirements;
 - providing resources for implementing and maintaining legal and policy requirements;





- reviewing the performance and effectiveness of this policy and related procedures and guidance, and
- effective communication of this policy through the appropriate management structures.

4.3 **The Waste Management Officer** (WMO) is responsible for:

- ensuring that the Chief Executive, the Chief Operating Officer and management teams are aware of their responsibilities and duties as well as the relevant procedures necessary to implement this policy;
- ensuring that practical and workable procedures are in place to deal with all waste streams, which include measures to minimise waste at source;
- ensuring that staff have the necessary equipment to ensure that wastes are segregated and packaged appropriately;
- ensure that all staff receive training and that role-specific training is provided to staff with day-to-day responsibilities for the segregation and management of wastes;
- providing secure storage, uplift, recycling and disposal arrangements;
- providing performance reports to site management and collating and completion of eMART returns with respect to waste on behalf of the NHS Board;
- reviewing the effectiveness of this policy across NHS [add Board];
- providing and leading a Waste Committee to provide appropriate crosssector expertise to support, co-ordinate and review operational management and controls.

4.4 **Departmental/Line Managers** are responsible for:

- ensuring that all staff are aware of this policy and are familiar with the procedures applicable to their areas;
- putting into practice local procedures which are designed to reduce the risks associated with the segregation and recycling of materials, and the production, handling and uplift of all wastes through to their final disposal process;
- ensuring that all staff and workers engaged in healthcare and in waste management have adequate information, training, instruction, supervision and support.
- monitoring the effectiveness of procedures and providing feedback and updates as required;
- ensuring that staff receive suitable and effective support following any accidents or incidents relating to waste management activities.
- 4.5 **All staff and workers** engaged in healthcare and in waste management are responsible for:



- taking precautions and reasonable care with regard to their own safety, that
 of any other persons who may be affected by their actions, and the
 environment;
- following procedures and safe systems of work that are in place to minimise risk to persons and the environment;
- reporting of all incidents that arise (including near misses);
- attending the appropriate training and instruction, and ensuring practical skills are regularly refreshed, and
- assisting managers with the identification of any risks arising from waste and materials management.

Risk-based approach

- 4.6 A risk assessment approach should be taken to identify and put in place controls to minimise harm to human and/or environmental health that may arise from waste management activities. The Waste Management Officer and Infection Control Team can provide additional support to local managers on the assessment of local waste management risks.
- 4.7 As a result of risk assessment, all locations where waste arises should have effective control measures in place to manage the identified risk(s). Waste disposal procedures should reflect local requirements. Local managers are responsible for updating and ensuring local procedures reflect current practices and the range of wastes produced.
- 4.8 There are various factors that need to be considered when conducting risk assessment on waste, including:
 - infectious or bio hazardous characteristics with reference to the Control of Substances Hazardous to Health Regulations (COSHH) and the definition of infectious (characteristic H9) in the Special Waste Regulations;
 - other hazardous or dangerous characteristics, for example:
 - explosive;
 - oxidising;
 - flammable;
 - irritant;
 - harmful;
 - toxic;
 - carcinogenic;
 - corrosive:
 - toxic for reproduction;
 - mutagenic;
 - produces toxic gas, sensitising or ecotoxic;





- sharp or cutting edges (broken glass, sharps, other intrusive devices, etc.);
- radioactive substances;
- offensiveness (volume, time and temperature controls);
- exposure pathways throughout the entire waste management chain.

Note: The risk presented should be reduced to the lowest level that is reasonably practicable.

Training

4.9 Waste management training should be provided by and/or coordinated by the NHS Board's Waste Management Officer. Waste Management Officers should provide 'basic' waste training to all staff as part of their induction. In addition, role-specific training should be provided to those responsible for on-site waste segregation and waste handling.

Occurrence recording

4.10 All persons and workers engaged in healthcare and in waste management should report all incidents involving waste, including near misses. This will ensure compliance with the Reporting of Injuries, Diseases, and Dangerous Occurrence Regulations (RIDDOR): 2013.

Monitoring arrangements

4.11 Local managers are required to monitor and review the effectiveness of local procedural arrangements, risk registers and incident analysis.

Review arrangements

4.12 The Board's Waste Committee meets [add frequency] and is chaired by the Board's Waste Management Officer.

Note: The Waste Management Officer is responsible for compiling a report, on an annual basis for submission to the Chief Executive, summarising performance and issues that may have arisen.





5. Distribution list

NHS [add Board]

- Chief Executive
- Chief Operating Officer
- Operational Management & Sector Teams
- Human Resources
- Health & Safety Management Committee
- Waste Committee
- Occupational Health Service
- Infection Prevention & Control
- Risk Management Support Unit
- Public Health Department
- Corporate Communications
- Staff Side Representatives
- Planning Directorate
- General Manager Facilities & Estates
- Facilities & Estates Management Teams
- Learning and Development
- GP Premises Group
- University Estates
- Leased / Rented Property Owners

[add or remove departments or titles as appropriate to Board-specific circumstances or arrangements]





6. Contact list

 NHS [add Board] Waste Management Officer (WMO): to chair the Waste Committee and produce advice, training, contractual, legal, operational and performance arrangements (including preparation of reports) for waste management;

Contact on [add telephone number].

 WMO and/or Environment Manager(s): for local operational waste management arrangements including advice, training and monitoring across all settings;

Contact on [add telephone number].

 Dangerous Goods Safety Advisor (DGSA): for monitoring compliance with the rules and providing advice on the transport of dangerous goods;

Contact on [add telephone number].

 Physical Distribution Manager(s): for logistical transport and portering arrangements across all settings;

Contact on [add telephone number].

 Infection Control Nurse(s): for procedural and training arrangements for clinical staff producing waste, including preparation of reports;

Contact on [add telephone number].

 Chief Biomedical Scientist: for laboratory arrangements and microbiological advice;

Contact on [add telephone number].

 Biomedical Scientist(s) – for laboratory arrangements and microbiological advice;

Contact on [add telephone number].

 Facilities Health and Safety/Risk Advisor(s): for health, safety and risk advice and incident reporting;

Contact on [add telephone number].

 Environment and Safety Support Team Manager – delegated chair of Waste Committee and for advice, training, contractual, legal, operational and performance arrangements (including preparation of reports);

Contact on [add telephone number].

 Waste and Water Services Manager - for local operational arrangements, including advice, training and monitoring across all settings;

Contact on [add telephone number].

 Energy and Environment Manager – for general advice on local operational arrangements, training and performance reporting;

Contact on [add telephone number].





 Infection Prevention and Control Nurse(s) – for clinical waste producer, procedural and training arrangements, including preparation of reports;

Contact on [add telephone number].

Senior Charge Nurse(s) – for acute and non-acute nursing input;

Contact on [add telephone number] (acute) or

Contact on [add telephone number] (non-acute).

Supply Chain Manager – for logistical transport arrangements;

Contact on [add telephone number].

Portering Services Manager – for portering arrangements;

Contact on [add telephone number].

 Head of Health and Safety – for health, safety and risk advice and incident reporting;

Contact on [add telephone number].

• Risk Training Co-ordinator [or equivalent] who can be contacted on *[add telephone number].*