# **POLICY DOCUMENT**

Policy Title:	Waste Management
Policy Group:	Health and Safety
	·
Policy Owner:	General Manager
Issue Date:	February 2022
Review Period:	24 Months
Next Review Due	February 2024
Author:	J Speed
Cross References:	Health and Safety Policy
	Dangerous Substances Policy
	Housekeeping policy
	Infection control Manual
Evidence:	Safe Disposal of Healthcare waste 07-01
	Health and safety at Work Act
	Waste management plan for England
	The Hazardous Waste (England and Wales)Regulations 2005
	Waste Classification Technical Guidance
How implementation will be monitored:	Via Infection Control Committee, Audits including annual audit carried out by External Specialist. Spot checks by NIC
Sanctions to apply for breach:	Retraining or disciplinary action
Computer File Ref.	O:new policy book: health and safety
Policy Accepted by HSC/MT	17 <sup>th</sup> February 2022
Sign-off by CEO	lu -

# Contents

1.	Statement of purpose:	3
2.	Policy Statement:	3
3.	Allocation of Responsibility	3
1	Arrangements for Monitoring Compliance	/

5.	DUTY OF CARE	Error! Bookmark not defined.
6.	Review	5
7.	Procedures:	6
Ca	tegories of Waste Produced at Holy Cross Hospital	6
He	ealthcare Waste	6
	Pharmacy/Medicinal Waste (18.01.19	6
	Disposal Procedures for Healthcare waste	6
	Infectious Waste procedure	6
	Definition of "Known or suspected infectious patient"	6
	Barrier Nursing	7
	On-site storage and transport	7
	Disposal Considerations	7
	Pharmacy Waste Disposal	8
	Arrangements for waste disposal in patient rooms	8
	Procedures for Handling Household and Clinical Waste	8
	Approved method for sealing infectious waste bags (illustrate	ed below) 8
	Training	8
	Identification Tags	8
	Collection and treatment	8
	Other Waste Streams	9
	Confidential paper waste disposal	9
	Electrical and electronic waste	9
	Printer Toners	9
	Food waste:	9
	Waste Oil	9
	Glass and crockery	9
	Surplus furniture and equipment	9
	Construction waste	10
	Household waste:	10
	Residences including Convent	10
	Measures to Reduce Waste Production	10
Ηe	ealth and Safety Risk Assessment	10
HE	ALTH AND SAFETY AUDIT TOOL- Waste Disposal	11
Ar	inual Waste Audit format	12
Bi	n Labels & information poster	15

## 1. Statement of purpose:

The aim of this policy is to increase awareness among both management and employees who may be involved in the handling of Clinical Waste and Household Waste to ensure that procedures are uniform and comply with current legislation. A priority objective is that Clinical Waste should be identified at source and dealt with accordingly until its ultimate disposal. Holy Cross Hospital has a general duty under the Health and Safety at Work Act 1974 to ensure, so far as is reasonably practicable, the health and safety of employees and other persons who may be affected by the storage, handling or disposal of waste products.

## 2. Policy Statement:

The purpose of this policy is:

- 1. To ensure the safe and efficient disposal of waste and the maintenance of a clean and tidy environment;
- 2. To reduce wherever possible the quantity of waste material generated in the Hospital's business and to promote methods of disposal that minimise harm to the environment;
- 3. To ensure the safety of all staff that handles waste produced by others

#### 3. Allocation of Responsibility

#### **Chief Executive:**

- Overall responsibility for policy, monitoring implementation and ensuring resources are available.

#### **General Manager**

- Responsible for implementing the policy on a day-to-day basis and reporting to Management Team following a review of how the policy is working on at least an annual basis and following discussion at the Health and Safety Committee.
- Ensuring Hazardous Waste registration is in place
- Ensuring records of the transfer of Hazardous waste are up to date
- Liaison with contractors
- Responsible for ensuring correct labelling of clinical waste bags by issuing and recording numbered tags (Delegated to Stores Dept)
- Responsible for keeping waste disposal area and bins clean and tidy at all times (delegated to caretakers)
- Responsible for making annual inspection of waste processing facility
- Responsible for arrangement correct disposal of chemicals, Waste electrical items and non-routine items (e.g furniture) (Delegated to Caretakers)

#### **Head Housekeeper and Senior Housekeeper**

- Ensuring correct removal of waste from wards and other departments
- Monitoring labelling, weights and tagging of bags and returning any that are not compliant
- Cleaning of bins when requested

## **Catering Team Leader**

- Ensuring correct disposal of all kitchen and plate waste.
- Monitoring plate waste to minimise unnecessary production.
- Minimising any risk of contamination of food through poor disposal procedures.

## **Director of Nursing Services & Nurse In Charge of Ward**

- Ensuring Clinical Team members receive training and comply with this policy at all times.
- Responsible for identifying patients who are or may be infectious and making arrangements for the correctly labelled bins to be placed in patient rooms and sluices

- Ensuring correct segregation of Offensive/Non-Hazardous Clinical waste and Infectious/Hazardous Clinical Waste.
- Ensuring correct labelling of bins
- Ensuring housekeeping and caretaking team members are made aware of the presence of infectious patients on ward
- Ensuring household waste, recycling and other special wastes are handled and disposed of correctly.

#### **Director of Clinical Services & Therapy Team Leaders**

- Ensuring correct segregation of Offensive/Non-Hazardous Healthcare waste and Infectious/Hazardous Healthcare Waste.
- Ensuring correct labelling of bins
- Ensuring household waste, recycling and other special wastes are handled and disposed of correctly.

## **Heads of departments**

- Ensuring household waste, recycling and other special wastes are handled and disposed of correctly.

## **Reception Team Leader**

- Ensuring household waste, recycling and other special wastes are handled and disposed of correctly.
- Managing the recycling of Printer Toners

#### **Infection Prevention Team**

Responsible for carrying out quarterly waste audit of Clinical Area

#### **Contractors:**

Clinical - responsible for collection of skip containing waste and disposal in accordance with responsibilities defined in contract and in accordance with legal requirements.

Maintenance of records of transport and final disposal should be forwarded to General Manager.

Domestic refuse - responsible for emptying container and disposing of refuse in accordance with legal requirements.

#### 4. Arrangements for Monitoring Compliance

An annual audit of the policy and procedures will be conducted by the Director of Nursing Services. The hospital will also engage the services of a suitable external consultant to carry out an annual audit.

(See Appendix 1) Arrangements are in place for Annual audit of the Clinical Waste Processing facility to be carried out by a Hospital representative.

## 5. Duty of Care

As a producer of waste the Hospital has a legal 'Duty of Care' to make sure its waste is handled safely and only passed to people authorised to receive it. For any waste removed from Hospital premises, the designated waste contractor will have to supply a Waste Transfer Note (WTN) for controlled waste, and a Hazardous Waste Consignment Note (HWCN) for hazardous waste. No waste may leave the hospital without a Waste Transfer Note or Hazardous Waste Consignment Note.

## **Waste Transfer Notes (Controlled waste)**

Before any Controlled waste leaves the Hospital a Waste Transfer Note (WTN) must be produced ensuring all the required information is put onto the form. The form must be signed by an authorised hospital Manager and be given to the waste carrier when they come to collect the waste. For regular collections an annual waste transfer note can be set up in

advance of the first collection. Waste transfer notes must be retained for two years following the disposal of the waste.

## **Hazardous Waste Consignment Notes (Hazardous waste)**

Before any hazardous waste is removed from the Trust a Hazardous Waste Consignment Note (HWCN) must be completed

This form cannot be completed annually but must be completed for each load. Waste consignment notes must be retained for three years following the disposal of the waste.

## **Duty of Care Audits**

It is the Hospital's responsibility to make sure its waste contractors are registered waste carriers and are taking the waste to legitimate sites. As a result the Hospital has a legal responsibility to conduct Duty of Care audits to ensure the facilities receiving the waste handle and treat our waste in a safe, compliant and sustainable manner.

## **Clinical Waste Pre-Acceptance Audits**

Facilities authorised to incinerate or treat clinical wastes are required to assess and have access to detailed information on the composition of the waste from the producer before they receive it. As a result the Hospital has a legal obligation to produce and provide its clinical waste contractor detailed and thorough clinical waste annual pre-acceptance audits, in line with the requirements of the Environment Agency Additional guidance for clinical waste - EPR 5.07 (2011)

#### 6. Review

This policy has been reviewed for adverse impact on people with protected characteristics within the meaning of the Equality Act 2010 and no such impact was found.

#### 7. Procedures:

## **Categories of Waste Produced at Holy Cross Hospital**

#### **Healthcare Waste**

(See appendix 3 for details of bin labels and information poster)



**Healthcare Offensive/Non Hazardous waste (waste code 18.01.04)** is the name given to a collection of wastes deemed; non-infectious, non-hazardous and not needing a specialist means of disposal – but does cause offence to those who may come into contact with it. Such waste includes:

human and animal faeces

- vomit
- urine
- nappies
- sanitary waste



**Infectious/Hazardous waste (waste code 18.01.03\*)** — waste containing viable microorganisms or their toxins which are known or reliably believed to cause disease in man or other living organisms. If a patient has a known or suspected infection which could be transmitted ALL WASTE should be disposed of in the orange bag waste stream

- This includes:
- Incontinence Waste (including catheter waste)
- Suction disposables (tubing & catheters)
- Oxygen and ventilator disposables (tubing etc)
- Dressings
- Gloves and aprons used for patient care
- Facemasks and PPE

#### Sharps (18.01.19)

Any items that could cause skin punctures or cuts must be disposed of with great care. Used needles and syringes along with razor blades are to be put immediately after use in the bins provided on each ward floor.

Full containers are stored in a locked area until collection by our clinical waste contractor.

## Pharmacy/Medicinal Waste (18.01.19

Any waste medicines and drugs should be appropriately disposed

#### <u>Disposal Procedures for Healthcare waste</u>

## **Infectious Waste procedure**

- As soon as infection is suspected or confirmed the Clinical Waste bin in the patients bedroom should be changed to an orange bin, to avoid confusion the yellow bin should be removed, cleaned and stored.
- All Clinical waste must be disposed of in the orange bag waste until the patient is no longer infectious
- You must use the correct waste bag (orange bag) in the bin & a label should be attached saying "infectious waste"
- You should inform Support Services by email that you are using the orange bag waste stream

See checklist Appendix 4

#### Definition of "Known or suspected infectious patient"

For the purpose of this policy a patient is known or suspected to be infectious if the answer is YES for ANY of the following questions:

Is the patient being isolated for any infection?

- Is the patient being treated for any infection, e.g. on antibiotics?
- Is the patient having diarrhoea or vomiting, where the cause is not certain and infection has not been excluded?
- Is the patient suspected to have an infection

## **Barrier Nursing**

- If a patient is being barrier nursed, ALL waste including household waste items from that room must be disposed of through the Infectious (Orange Bag) waste stream
- You should remove the yellow bin from the room, clean it and store it and move an
  orange bin into the room or if preferred an appropriately labelled wheelie bin may be
  placed outside of the room.
- You must use the correct waste bag (orange bag) in the bin & a label should be attached saying "infectious waste"
- You should inform Support Services by email (Use STORES email address) that you are
  using the orange bag waste stream & barrier nursing a patient

## On-site storage and transport

The waste is stored in dedicated bins in each bedroom. The bins are colour coded and labelled to indicate the type of waste that should be disposed of within. The bags from the rooms are removed to sack holders in soiled holding that are colour coded and labelled in the same way. When the sacks are  $2/3^{rd}$  full they are removed and secured using an individually numbered tag after all air has been expelled and ties in a swan neck fashion. Bags not exceed labelled weight (Orange bag) or 10kgs for yellow/Black bags.

A dedicated cart is used for transporting the filled bags from the soiled holding to the containers at the rear of the hospital.

The Contractor provides us with UN-approved clinical waste containers that are kept at the rear of the building; these containers are kept locked at all times. The bins are cleaned periodically by the housekeeping staff.

## **Disposal Considerations**

- Both infectious & non-hazardous clinical waste must be disposed of in correctly labelled bags
- The bags should be secured with a plastic individually numbered tie prior to being disposed of in the external bins Identification Tags. Stores Coordinator is responsible for the ordering and distribution of identification tags. A record is kept of the sequential numbers of tags sent to each department
- NO household waste, such as packaging (glove boxes, feed bottles etc.) should be disposed of in the yellow/Black striped bag or Orange bag (\*except during barrier nursing)

Hazardous/ Infectious waste	Offensive/Non Hazardous waste	Sealing Tag	Sharps bin	Pharmacy waste box
CAMICAL WASHINGTON			DANGER OF THE STREET	
Bag must be	10kgs max	All bags must be	Yellow sharps bin	Blue & Yellow box
labelled and dated	weight	secured with tag	must be labelled	must be labelled
prior to being placed in bin.	Secure with swan	prior to placing in external bins.	and correctly assembled. When	and correctly assembled. When
8kgs max weight	neck tie &	Stores coordinator	3/4full, label and	filled , label and seal
Secure with swan	numbered tag	issues and records	seal and arrange for	and arrange for
neck tie &		tags	disposable(email	disposable(email
numbered tag			Stores email)	Stores email)

#### **Pharmacy Waste Disposal**

- Medicines/Drugs, surplus or unused must be transferred to the Clinical Waste Contractor for destruction. All drugs that are not required will be stored in a locked cupboard until a sufficient quantity is available for collection. The Nursing Service Manager is responsible for ensuring all drugs to be disposed of are recorded.
- Controlled drugs should be denatured using the DOOM kit available from Ashton's Pharmacy.
- A senior nurse will be responsible for handing over the drugs box to the Clinical Waste Collector and for obtaining a signature to confirm receipt.
- Wards are not authorised to dispose of Waste Medicines/Drugs.
- Glass medicine bottles that contain residue of medicines must be disposed of in the pharmacy waste box

## Arrangements for waste disposal in patient rooms

- Each patient room will have only one type of "Clinical" Waste Bin
- · Which type will depend on whether they are infectious or not
- There must never be a mixture of two types of Clinical waste
- In addition to Clinical waste disposal, there can also be a household waste bin

## **Procedures for Handling Household and Clinical Waste**

- All staff handling clinical or household waste must wear appropriate and suitable Personal Protective Equipment (PPE) as supplied.
- All bags of waste must not be more than three-quarters full.
- Ward staff will be responsible for transporting waste to the Segregated Storage Areas, and ensuring that waste is kept segregated in these areas.
- Ward staff are responsible for securing and identity tagging Yellow Clinical Waste bags.
- Housekeeping Staff are responsible for frequent daily collections of Clinical and Household Waste from each storage disposal points. Housekeeping Staff are responsible for maintaining segregation of Household and Clinical Waste during transportation to the Main Central Waste Disposal area.

## Approved method for sealing infectious waste bags (illustrated below)

- Swan necking requires that the bag is not over filled.
- If it can't be swan necked then it is over filled.
- Once swan necked, the bag can be carried in the appropriate manner by staff.
- The neck gives a good handle and allows for the bag to be carried away from the body, minimising risk of needle stick injury, should anything have been inappropriately disposed of

## **Training**

All Clinical, housekeeping and caretaking staff are given training on the safe management of healthcare waste on induction and this training is refreshed on an annual basis

## **Identification Tags**

Stores Coordinator is responsible for the ordering and distribution of identification tags. A record is kept of the sequential numbers of tags sent to each department.

#### **Collection and treatment**

Clinical waste is collected and disposed of by a contractor who is licensed to transport and dispose of clinical waste. On collection the waste is recorded using a handheld tracking

<sup>\*</sup> Exceptions apply when barrier nursing

device, this device can be tracked using GPS so at all times the location of our clinical waste is known. The treatment facility used by the Clinical Waste Contractor is registered by the environment agency and the General Manager holds a copy of the registration certificate. The General Manager is responsible for arranging for a representative from the hospital to visit the treatment facility on an annual basis.

#### **Other Waste Streams**

#### Confidential paper waste disposal

Confidential Paper Waste must be shredded. Secure consoles are located around the hospital for the safe storage of Confidential Paper waste. The Confidential waste is shredded off site by the contractor every four weeks and a secure destruction certificate is issued (refer to Management of information Policy for further details)

#### **Electrical and electronic waste**

All electrical and electronic items must be disposed of in line with The Waste Electrical and Electronic Equipment (WEEE) Regulations. Electrical and electronic waste is the fastest growing waste stream in the UK and the regulations aim to reduce the amount of this type of waste going to landfill and improve recycling and recovery rates. A specialist contractor collects all electrical and electronic waste and disposes of it in an environmentally sound way.

Batteries- should be disposed of in battery boxes which are located in sluices on both wards, in reception kitchen, Team Room and In St Hugh's office. Caretakers should be alerted when these bins are ¾ full.

All other electrical items should be decontaminated before being given to caretakers for disposal.

## **Printer Toners**

From 2016 the WEEE Regulations applied to waste ink and toner cartridges. This means that waste cartridges must be sent to an Approved Authorised Treatment Facility (AATF) for recycling. The Reception Team Leader is responsible for arranging for the collection and recycling of used toners.

- Remove New cartridge from box and plastic sleeve
  - o Flatten cardboard box and dispose of through cardboard recycling
  - Keep the plastic sleeve
  - Remove empty toner and replace with new toner
- Put the old toner inside the plastic sleeve and return this to reception for processing
- The reception team have a large cardboard box in St Hugh's Store room where waste cartridges are stored until collection

## Food waste:

All food waste, in the hospital, whether from plates or leftover in serving dishes, is to be returned to the kitchen. Catering staff will dispose of it using the waste disposal units provided. Food waste should never be mixed with paper waste.

## **Waste Oil**

Waste oil is collected periodically by Olleco who recycle the oil into biofuels

#### Glass and crockery

Glass and crockery should be wrapped in paper and placed in a labelled box before being put into the bin.

## Surplus furniture and equipment

Surplus or condemned articles should be dealt with as follows:

#### Linen:

To be collected by the Head Housekeeper in the Laundry and disposal agreed with the General Manager. Disposal via household refuse or 'rag' collection.

#### **Furniture and Equipment:**

Should be reported to the General Manager who will assess the items, and advise on proper method of disposal. Many such items are recorded in the hospital's asset register and the records will be adjusted at the time of disposal.

## **Construction waste**

Construction waste must be assessed to ensure that all hazardous materials have been separated where this is technically feasible; if not possible to separate then the whole waste will be deemed hazardous and must be disposed of accordingly. General building debris will be normally non hazardous

#### **Household waste:**

**Definition of household waste:** General Waste, such as paper, cardboard, packaging, flowers, tins and items of a non-contaminated or non-hazardous nature. Glass is defined as Household Waste. However it is separately disposed of to ensure safe practice.

#### Wards and departments:

Household waste is segregated into items which can and cannot be recycled.

Items that can be recycled are put into a separate container at department level and the housekeeping staff take it to the dedicated skips at the rear of the building. Items that cannot be recycled are disposed of in black sacks and placed into the containers for non-recyclable waste at the rear of the building.

Recyclable items are Paper, newspapers and magazines, plastic bottles including feed containers, tins and cans and cardboard.

## **Residences including Convent**

All household waste from the Residences and from the Convent is to be placed in the smaller wheeled bins provided outside the Residences. Housekeepers take these bins to the collection point for weekly collection by the Local Authority contractor.

The local authority operates a mixed recycling scheme so any items that are recyclable should be placed in the dedicated wheeled bins for collection fortnightly. (refer to posters in residence for details of mixed recycling)

#### **Measures to Reduce Waste Production**

#### **Purchasing:**

Action will be taken to avoid purchasing goods that unnecessarily create waste (e.g. goods with unnecessary wrapping).

Care will be taken to ensure that all purchases are as appropriate as possible to the need.

#### **Use of Disposables:**

Although some disposable products must be used in some situations, all employees are asked to assist in reducing to a practical minimum the quantity used. Examples of items that may be used to excess include gloves, poorly filled polythene sacks, kitchen foil, wrapping film and inco-pads.

## **Health and Safety Risk Assessment**

#### Injury from sharp objects:

There is serious risk of injury if care is not exercised in the disposal of used needles, broken glass or other sharp objects. All such material must be placed at the first opportunity in the bin provided.

#### Infection from clinical waste:

The risk of infection is greatest from cuts by sharp objects in waste. In addition all staff handling waste must exercise proper judgement in the use of gloves, protective clothing and in personal hygiene. Specific training must be given to all staff on induction and at intervals thereafter.

#### Fire:

It is essential that waste is removed regularly from the buildings and placed in the correct containers. Particular care is to be taken with flammable material e.g. paper waste

## Accidents arising from poor storage:

General waste or surplus furniture and equipment must not be allowed to cause congestion, particularly in corridors or near doors.

## Manual handling of heavy or awkward loads:

All employees are trained in correct handling. No one must attempt to lift heavy or awkward loads alone or without proper instruction

## **HEALTH AND SAFETY AUDIT TOOL- Waste Disposal**

	Appendix 1	Complies	Does not	Comments
			comply	
1	Waste policy has been reviewed in the			
	last year			
2	Waste risk assessment has been carried out			
3	All problem areas identified in the assessment have been actioned			
4	All hazardous and non-hazardous clinical waste is correctly segregated in bags			
5	Clinical waste sacks are not more than 2/3 <sup>rd</sup> filled and are individually number tagged			
6	waste bags are always transported in wheeled carts			
7	Wheeled carts are clean			
8	Only the correct items are placed in the black bags (check three bags at random)			

9	Electrical items including batteries are given to Support Services staff for correct disposal		
10	Sharps bins contain only correct items, are correctly assembled, filled, sealed and signed		
11	Controlled drugs authorised for disposal are denatured using a DOOM kit following procedure, and signed		
12	Pharmaceutical waste is placed in a pharmaceutical bin, and signed		
13	Confidential waste is always shredded		
14	Fluorescent tubes are always sent for recycling		
15	Food waste is always returned to the kitchen for disposal in the waste disposal unit		
16	Glass waste is wrapped in paper and placed in a labelled glass bin for disposal		
17	All new staff are given training on waste management in their 1 <sup>st</sup> week		
18	Clinical waste bins are locked when they contain waste		
19	Random bag check demonstrates that waste is correctly segregated		

# <u>Annual Waste Audit format</u> <u>Appendix 2</u>

SAW

Yes/No
Record findings

Description of Bins in rooms

One Orange bag bin
One Tiger Bag bin
One household waste bin

Description of bins in bathrooms

Are all bins labelled?

Action required

Action required

Sample of five rooms checked –	
record findings	
Check contents of bin	
Description of waste stored in	
sluice (inc Recycling, household)	
Bags checked in sluice – detail	
findings (including check that bags	
are not overfull)	
Describe arrangements for sharps	
waste disposal	
Describe arrangements for	
Describe arrangements for	
pharmaceutical waste disposal	
Have all staff received training on	
management of healthcare waste?	
Describe arrangements for the	
removal of waste from wards	
Temoval of waste Holli Walus	
Describe arrangements for tracking	
of waste (tags?)	
or waste (tags: )	

SMW	Yes/No Record findings	Action required
Description of Bins in rooms		
One Orange bag bin		

One Tiger Bag bin One household waste bin	
Description of bins in bathrooms	
Are all bins labelled?	
Sample of five rooms checked – record findings Check contents of bin	
Description of waste stored in sluice (inc Recycling, household)	
Bags checked in sluice – detail findings (including check that bags are not overfull)	
Describe arrangements for sharps waste disposal	
Describe arrangements for pharmaceutical waste disposal	
Have all staff received training on management of healthcare waste?	
Describe arrangements for the	
removal of waste from wards	 
Describe arrangements for tracking	
of waste (tags?)	

Other areas	Yes/No	Action required
	Record findings	
Description of bins in main bin		
storage area		
3		
Is bin area Tidy?		
is bill area ridy:		
And Ding looked decombs accounts		
Are Bins locked – describe security		
procedure		
Visual Check of inside one of each		
bin an record findings		
Describe arrangements for disposal		
of WEEE waste		
Of WELL Waste		
Describe waste collection		
arrangements for council waste		
Is the bin area tidy		
Visual check of two bins		

# **Bin Labels & information poster**

Appendix 3









## Segregation of Waste

Type of Waste	Classification	Colour Coding	Description & Disposal method	Description of type of waste at Holy Cross
Offensive	Non Hazardous (Yellow & Black)		non-infectious may be incinerated or disposed of in deep landfill	All waste from a patient with no known or suspected infection including  incontinence Waste (including catheter waste)  Suction disposables (tubing & catheters)  Oxygen and ventilator disposables (tubing etc.)  Dressings  Gloves and aprons used for patient care  Facemasks
Infectious	Hazardous (Orange)		Infectious waste my be treated to render safe prior to disposal	All of the waste listed above from a patient with a known or suspected infection
Infectious	Hazardous (Yellow)		Infectious waste which requires disposal by incineration (may include associated vials and ampoules from medicines)	We only have sharps bins that are incinerated, no other waste here is yellow bagged waste
Domestic	Non-hazardous		This waste must not contain any infectious waste, sharps or medicinal products. Diposed of in landfill OR recycled	Waste should be separated into recyclable & non-recyclable  NOTE –  Glass bottle should be rinsed and placed in box in Sluice (labels removed if medicine bottles  electrical items must be given to Caretakers for disposal (including batteries)

## Infectious waste checklist (appendix 4)

To be implemented without delay when a patient has a confirmed or suspected infection which could be transmissible

- ✓ Retrieve Orange Bags, suitable bin and incontinence waste bucket from storage. Check they are labelled with "Infectious Waste Label"
- ✓ Remove the yellow and black non-hazardous (offensive) bin and incontinence pad bucket from room & decontaminate. Arrange for housekeeper to carry out a steam clean of the bins before putting in storage.
- ✓ Ensure all staff are aware that all **clinical waste** generated in this room must be disposed of in orange bags until further notice.
- ✓ Ensure there is an orange bag in the bulk storage area (Sluice) for disposal of incontinence pads
- ✓ Alert Support Services that a patient is currently infectious (email "stores email")
- ✓ Inform housekeeping team of any special precautions required when Cleaning the room

## When infection has passed

- ✓ Retrieve Yellow/Black Bags, suitable bin and incontinence waste bucket from storage. Check they are labelled with Non Hazardous Waste Label
- ✓ Remove the Orange bag bin and incontinence pad bucket from room & decontaminate. Arrange for housekeeper to carry out a steam clean of the bins before putting in storage.
- ✓ Ensure all staff are aware that all clinical waste generated in this room is now disposed of through yellow/Black non-hazardous waste stream
- ✓ If no other patients are infections Ensure that the orange bag in the bulk storage area (Sluice) for disposal of incontinence pads is removed.
- ✓ Ensure Support Services are informed that you are no longer creating orange bag waste

Please note – orange bags must be labelled with date and room number and closed up with a sequentially numbered tag.

# **Barrier Nursing Checklist**

- ✓ Put up screens
- ✓ Request Wheelie bin for outside patient room- ensure it is labelled with "Infectious Waste" label
- ✓ Remove the yellow and black non-hazardous (offensive) bin and incontinence pad bucket from room & decontaminate. Arrange for housekeeper to carry out a steam clean of the bins before putting in storage. Also remove the household waste receptacle
- ✓ ALL WASTE FROM THIS ROOM MUST BE DISPOSED OF IN ORANGE BAGS
- ✓ Please note orange bags must be labelled with date and room number and closed up with a sequentially numbered tag

- $\checkmark$  Inform Support Services that patient is being barrier nursed
- ✓ Waste should be taken to external bins in the wheeled bin & unloaded there