

OA Reablement service	OA Day Care	OA Residential Care	DMH Day Services	DMH Supported Living	DMH Residential Services	EIA'd
✓	✓	✓	✓	✓	✓	✓

C13

CLINICAL WASTE DISPOSAL

(Healthcare waste)

POLICY

To ensure the correct disposal of clinical and hazardous waste and that all legislative criteria under the Department of Health's Environment and Sustainability Policy Safe Management of Healthcare Waste is met.

PROCEDURE

Appropriate Personal Protective Equipment must be used at all times when assisting with personal care needs.

WHAT IS CLINICAL WASTE?

Clinical waste is any waste produced whilst assisting service users with personal care needs. Clinical waste falls into two categories that are detailed below:

Offensive waste - Yellow tiger sack

Includes the following:

- Any incontinence aids e.g. catheter / stoma bags.
- Equipment used whilst assisting a service user with personal care e.g. gloves / aprons
- Incontinence pads



Hazardous Waste – Orange sack



Hazardous waste includes any of the above where the service user is known to have or is suspected to have a disease or an infection and where the waste is likely to contain infectious agents or toxins.

- Dressings
- Infectious dressings
- MRSA

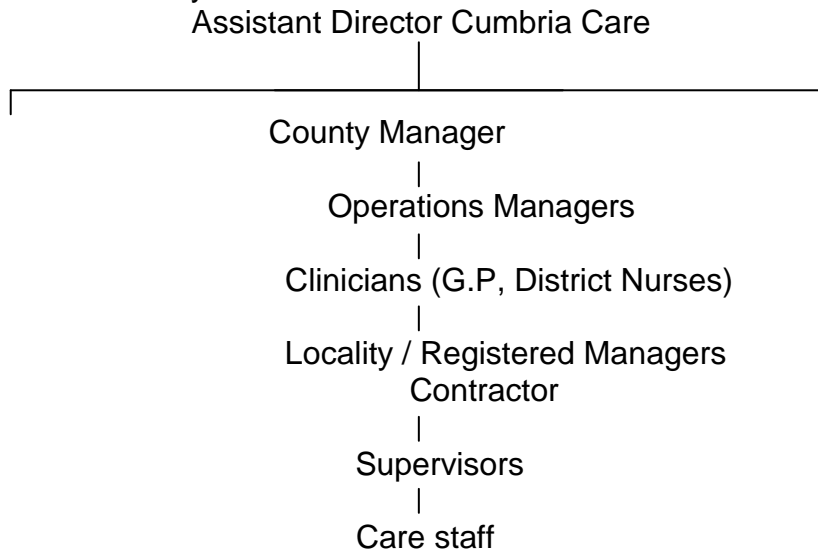
Date Reviewed	18/02/11	12/09/12	01/08/17				Issue date
Amendment	1	2	3				27/02/08 P&P

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ROLES AND RESPONSIBILITIES

1. It is the head of service's legal obligation to ensure that each manager takes responsibility for the annual completion of the Clinical Waste Declaration Form provided by the contractor in line with the Department of Health's Healthcare Waste Policy and the letter of delegation. However, the ultimate responsibility for the disposal of waste is everyone's business to ensure all aspects of waste management is handled correctly.



2. The implementation process for this policy will be conducted through the accommodations manager to the operations managers who will issue the procedure to the locality / registered managers. It is the responsibility of the locality / registered managers to ensure all levels of care staff are made fully aware of their responsibility within the waste management chain. New employees will be introduced to this policy through induction and in house training.
3. The manager must ensure under The Department of Health's Environment Policy that the establishment is registered with the Environment Agency if more than 200kg of **hazardous waste** (see definition) is produced in any 12-month period. This registration number must be inserted onto the Clinical Waste declaration form, Section 1 Segregate Waste. The declaration form must be completed annually and the original form sent to the address on the bottom of the form and a copy kept for audit purposes. The form can be accessed through the accommodations manager. Registration will be carried out by the accommodation manager as a "Bulk Registration" each year on the 1st of April. All establishment managers will have to inform the accommodation manager by 1st March each year whether their site requires to be registered.

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4. The manager must ensure there are clear and open communication lines with the contractor and all other people involved in the waste management chain at all times to ensure full compliance.
5. Once the policy is in place it will form part of the policies and procedures audit schedule, which is produced annually. The manager and the operations manager must audit this procedure ensuring it is in place and is working successfully. The quality and performance team will also audit this procedure annually along with the accommodations manager.
6. The accommodations manager will monitor the use of clinical waste on a regular basis.

Disposal of offensive waste – Tiger sack (Yellow with black stripe down middle)

1. All offensive waste must be placed in an appropriate nappy sack / bag and double bagged immediately and discreetly transferred to the internal offensive waste bin which is lined with the yellow tiger sack.
2. For catheter care you must follow the C7 catheter care procedure. When disposing of a night catheter bag, the bag must be taken to the sluice, the top corner cut diagonally and contents emptied. If the service user is using a catheter bag without a valve the bag should be carefully cut close to the tube to empty before disposal. A pair of scissors should be kept and used solely for this purpose.
3. All catheter bags, gloves and aprons used during catheter care must be disposed of in an appropriate offensive / hazardous waste bag. Offensive waste must be placed in an appropriate nappy sack / bag and transferred into a yellow tiger sack. Hazardous waste must be disposed of in an orange sack and placed in the hazardous waste bin. This is in line with C13 Clinical Waste Disposal policy.
4. The internal offensive waste bin should be sited in a sluice room if available or in an appropriately designated area.
5. The internal offensive waste bin must be emptied at a minimum of once per day or more frequently if the volume of waste dictates by conducting a risk assessment. In all cases the bin must be emptied and the sack securely tied when three quarters full and removed to the external lockable offensive waste bin.

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5. A manual handling risk assessment must be in place for carrying and disposing of offensive waste sacks. This must be completed by a competent trained person
6. The manager must consult with the appropriate disposal provider for the most cost effective service. This will include size of bin and frequency of emptying.

Disposal of hazardous waste

1. Hazardous waste must be disposed of separately in an orange sack, which is then placed in the internal hazardous waste bin.
2. The manager / supervisor must carry out an assessment to identify the volume of hazardous waste to be disposed of. This will determine the frequency of collection of the bins.
3. The internal hazardous waste bin must be emptied at a minimum of once per day or more frequently if the volume of waste dictates. In all cases the bin must be emptied and the sack securely tied when three quarters full and removed to the external lockable hazardous waste bin.
4. A manual handling risk assessment must be in place for carrying and disposing of hazardous waste sacks. This must be completed by a competent trained person.
5. The manager must consult with the appropriate disposal provider for the most cost effective service. This will include size of bin and frequency of emptying.

Non-residential services (where appropriate)

1. All offensive waste must be placed in an appropriate nappy sack / bag and double bagged immediately and discreetly transferred to the appropriate bin.

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