

# Waste Management Policy



Title:

## NHS Lothian Waste Management Policy

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# Waste Management Policy



## Version Control

Date	Author	Version/Page	Reason for change
Sept – Nov 2018	Head of Soft Facilities Management	v1.3-6	Under review. Formatting. Minor changes for clarification. Enhancements to align with Sustainable Development Action Plan. Amendments following discussion/agreement at the Facilities Policy Group
April 2020	Head of Soft Facilities Management	v1.7	Under review. Confidential Waste additions
May 2020	Head of Soft Facilities Management	v2.0	Approved by the Policy Approval Group
April 2023	Head of Risk Quality & Assurance	v2.1	Technical update due to Internal Audit recommendations
Aug 2023	Head of Risk Quality & Assurance, Head of Soft FM and Waste Assurance Manager	v2.2-3	Under review
Sept 2023	Head of Risk Quality & Assurance, Head of Soft FM and Waste Assurance Manager	v3.0	Approved by the Policy Approval Group

## Executive Summary

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This document sets out NHS Lothian's aims and objectives with regard to the systems and processes required for compliant waste management. Application of the policy will ensure that NHS Lothian meets its statutory duties and operates within approved safety standards, codes of practice and action plans (SEHD HDL (2002) 43, and NHS Scotland Waste Management Action Plan 2016-2020.) It also enhances our capability to discharge our responsibilities under climate change legislation and reporting requirements. Its application extends to:

1. Any client (NHS Lothian) /contractor relationship where both parties have duties under environmental and Health and Safety law.
2. Waste contractors where engaged across all services.
3. All NHS Lothian line managers who take responsibility for the disposal of waste from their area to ensure that measures are in place to ensure safety and compliance, and where necessary, to explain the responsibilities of all parties involved.

### Minimum Implementation Standards

1. The department/area manager has directed this policy and associated procedures to its managers and employees who are regularly involved in waste management activities.
2. The department has assurance from those employees that they have read and understood this policy and the associated procedures, work instructions etc and that they are clear as to the implementation of these.
3. All departments establish processes to provide assurance that these policy and procedures are implemented correctly, and that there is consistency in practice.

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## 1.0 Purpose

The purpose of this policy is to ensure that waste belonging to, or generated by, NHS Lothian is suitably segregated for the range of safe disposal technologies and complies, at all times, with current statutory requirements, industry recognised guidance and standards, as well as Scottish Government Health Directorate issued responsibilities and obligations (SEHD HDL (2002) 43 and NHS Scotland Waste Management Action Plan 2016-2020).

It is also intended that this policy reinforces the requirement for waste management processes and procedures used within NHS Lothian to be environmentally sustainable.

## 2.0 Policy statement

This policy sets out the commitment of NHS Lothian (NHSL) to provide a safe and secure environment for patients, visitors and staff. It applies to all persons who have access to, use of, or are responsible for, the maintenance of NHS Lothian premises.

This policy also provides guidance and references to assist in implementing the requirements set out within paragraph 1 above; principally [Scottish Health Technical Note 3: Waste Management \(SHTN3\)](#). It should also be read and implemented in conjunction with all other relevant policies; in particular those related to environmental sustainability. It provides the necessary approval for the procedures to be applied in order to minimise risk associated with the management of waste on sites, and to ensure compliance with all relevant waste, environmental and Health and Safety legislation, and any other associated NHS Lothian policies.

We have a duty of care to present materials in the appropriate receptacle, ensure we have control over our waste, prevent pollution or harm to human health, and to maintain records of waste transfer.

In order to ensure that the organisation achieves its objectives, with particular regard to national waste reduction targets, climate change legislation and our NHSL Sustainable Development Action Plan, it is crucial that we gather and manage the data from all waste generating activities as accurately and uniformly as possible, and therefore the use of an effective data management system is key to success.

## 3.0 Scope

This policy applies to all NHS Lothian premises, whether owned or occupied under lease or other Service Level Agreements (SLAs) and Private Finance Initiatives (PFI). Where the management of buildings/areas occupied by NHS Lothian staff and/or patients is carried-out by others, the requirements of this policy remain applicable, although implementation of the site specific risk management requirements may also be managed by local policies.

It is the responsibility of senior management in NHS Lothian to ensure that the requirements of this policy are notified to and complied with by all. Staff at all levels are required to challenge incorrectly presented waste and promote the waste hierarchy where they can.

## 4.0 Definitions

**Management:** for the purposes of this policy, is defined as the owner, occupier, employer, general manager, chief executive or other person in a healthcare organisation, or their appointed responsible contractor, who is accountable for the premises and who is responsible for issuing or implementing a general policy statement under the regulations detailed in section 7 of this document: 'Evidence base'. As an activity, 'waste management' is defined as the actions necessary to achieve the aims of this policy.

**Waste Management:** There are 4 distinct categories of waste:

- **Clinical/healthcare waste** – arising directly from the delivery of healthcare by clinicians. This includes a wide range of controlled or “special” wastes **defined in this way in legislation (and listed in the European Waste Catalogue) due to ethics, risk of infection or containing hazardous substances** by class origins or properties including clinical waste, healthcare waste, special waste, hazardous waste and low-level radioactive waste.
- **Hazardous/special waste** – arising from the delivery of healthcare in both clinical and non-clinical settings but are not municipal (household/domestic) waste. This includes a very specific range of controlled wastes **defined in legislation due to containing dangerous/hazardous substances** by class, or properties – special waste and hazardous waste.
- **Municipal (household/domestic) waste** – arising ancillary to the delivery of healthcare in both clinical and non-clinical settings. This includes a wide range of controlled general wastes **defined in legislation due to minimal risk of infection or danger from hazardous substances** by origins – household waste, commercial waste, industrial waste, construction/demolition waste and non-hazardous waste including recyclable materials.
- **Confidential Waste**, as defined under Data Protection legislation, NHS Lothian Records Management Policy, and other organisational policy. This waste must have destruction certificates.

**A Specialist Waste Contractor:** is a currently accredited member of a Waste Industry Association (or other suitably recognised national federation) and has been licensed/approved by the Scottish Environment Protection Agency (SEPA) to receive, transport, treat and dispose of the relevant waste categories. Confidential Waste contractors, or sub-contractors, must have been audited and approved by the Data Protection Officer.

## 5.0 Implementation roles and responsibilities

### 5.1 Organisational

#### 5.1.1 Chief Executive, Chief Operating Officer, Directors and Management Teams

The Chief Executive, Chief Operating Officer, Directors and Management Teams are responsible for:

- Ensuring operational procedures and risk management arrangements to meet this policy are in place;
- Providing resources for implementing and maintaining this policy;
- Reviewing performance of this policy;
- Reviewing the effectiveness of this policy.

#### 5.1.2 Director of Operations (Estates & Facilities)

The Director of Operations (Estates & Facilities) is responsible for:

- The provision of adequate facilities and support arrangements to implement and maintain the environmental, uplift and disposal aspects of this policy.

#### 5.1.3 Head of Risk, Quality & Assurance

The Head of Risk, Quality & Assurance is responsible for:

- The escalation of any risks identified through audit or adverse event to the NHS Lothian Health and Safety Committee and the Pan Lothian Infection Control Committee

#### 5.1.4 Waste Management Officer (WMO) for NHS Lothian

The Waste Management Officer (WMO) for NHS Lothian is responsible for:

- The provision of waste management reports to the Chief Executive, Management Teams, NHS Lothian Waste Management Group, Sustainable Development Management Group and the Pan Lothian Infection Control Committee;
- Reviewing the implementation and effectiveness of the policy NHS Lothian wide;
- Presentation and interpretation of waste data;
- Waste management processes following the requirements of SEHD-HDL (2002) 43, SHTN3 NHS Scotland waste management guidance, CEL 2 (2008) Waste Management in NHS Scotland Action Plan;
- Ensure the availability of relevant and current training material.
- The provision of guidance on waste management arrangements, licensing, regulations and duty of care visits to premises that handle our waste

### 5.1.5 Waste Assurance Manager

The Waste Assurance Manager is responsible for:

- Ensuring the Pre-Acceptance Audits are completed and submitted to our Waste Contractor in a timely manner and with adherence to the annual risk planner
- Providing a quarterly report to the Waste Management Meeting
- Liaison with our Contractors to ensure ongoing regulatory compliance and adherence to service level agreements
- Ensure the availability of relevant and current training material.
- The provision of guidance on waste management arrangements, licensing, regulations etc

## 5.2 Departmental

### 5.2.1 Estates & Facilities Area Manager for premises/site(s)

- The Area Managers for Soft and Hard Facilities Management have overall authority and responsibility for waste and environmental management activities within the premises for which they are responsible. They have a duty to ensure compliance with the general policy statement on waste management, including the procedures and local arrangements for carrying out that policy in relation to the delivery of their services.
- In the case of some specific and specialist waste streams e.g. IT waste, or radioactive waste, which may be wholly or partially separate from the general waste management arrangements, the service lead or advisor for the area is responsible. Advice on the segregation and disposal of all waste streams can be sought from the Waste Management Officer or Facilities Managers if required.

### 5.2.2 Departmental/Line Managers are responsible for:

Departmental/Line Managers are responsible for:

- Making sure that all staff are aware of this policy and the relevant procedures and protocol framework associated with the disposal of segregated wastes;
- Putting into practice within the protocol framework, the local procedures and safe systems of work which are designed to reduce risks from production to final disposal;
- Ensuring that all staff and workers engaged in healthcare and in waste management have adequate information, training, instruction, supervision and support. This includes refreshing staff knowledge and skills at regular frequencies;
- Monitoring the effectiveness of local procedures and safe systems of work, with annual review of occurrence, recording investigation and management inspections;

- Ensuring that local policies and procedural guidelines are developed and maintained;
- Ensuring staff receive suitable and effective support following any accidents or incidents involving waste;
- Ensuring that specialist arrangements for the disposal of medicinal products (medicines) including cytotoxic and cytostatic products are co-ordinated with Pharmacy and the associated policies;
- Ensuring that specialist arrangements for specimens and potentially infectious substances are co-ordinated with Laboratory services and the associated policies.
- The maintenance and use of waste management data to promote the overall reduction in waste levels, and the implementation of sustainable waste management systems.
- Completion of any actions arising out of waste audits that are conducted within their area of responsibility

### 5.2.3 All staff

All staff and workers engaged in healthcare and in waste management are responsible for:

- Taking precautions and reasonable care of themselves and any other persons who may be affected by their actions and the environment;
- Co-operating with policy, procedures and safe systems of work that are in place to minimise risk to persons and the environment;
- Reporting of all incidents, including near misses that arise;
- Attending the appropriate training and instruction and ensuring practical skills are regularly refreshed;
- Assisting managers with the identification of any risks arising from waste management.
- Correct segregation and identification of waste to ensure compliance and conformance with environmentally sustainable practices.
- Correct and safe presentation of waste for collection and disposal

## 5.3 Audits and risk assessment

- NHS Lothian will, with the assistance of other relevant organisations, carry out audits and risk assessments of all its waste management activities including general compliance with recognised and applicable standards, general condition of equipment, segregation and storage arrangements, and arrangements for communication and training. Information gained from this exercise will be used in the preparation of an on-going plan for service improvements.
- The audits and risk assessments will be reviewed annually.
- Where appropriate, closing of actions arising out of these audits will be the responsibility of the manager of the local service producing the waste. This

manager will also be responsible for reporting and affirming completion and close out within the local health and safety reporting framework arrangements, or directly with the auditor.

- Without this feedback loop from auditor-waste producer-health and safety committee/auditor; there could be a gap in our confirmation to our Waste Contractor that we are adhering to contract requirements.
- NHS Lothian Waste Transfer Station Management will also be audited and assured under the Critical Systems Review Group frameworks.

## 5.4 Waste Management Training

- A [LearnPro](#) e-learning module has been developed and is available for all staff to access
- Key Facilities staff (operational and assurance managers) have undertaken the industry standard competency training -CIWM/WAMITAB in order to provide competence and resilience in waste management procedures.

## 5.5 Data management

- The maintenance, presentation and interpretation of accurate and uniform data on waste levels and costs is fundamental to the success of this area of business and all managers should have systems in place to enable this.
- In addition, each batch of Confidential Waste uplifted from our sites must have a valid destruction certificate.

## 6.0 Associated materials

This Waste Management Policy should be read in conjunction with other technical documents where waste may be generated.

- [Scottish Health Technical Note 3 NHS Scotland Waste Management Guidance](#), parts A-D and Segregation Chart.
- [Clinical Waste Segregation Poster, NHS Lothian Facilities](#) v2.2, December 2019 (please contact the Waste Assurance Manager for copies)
- [Domestic Waste – A4 poster, NHS Lothian Facilities](#) NHS Lothian Facilities, April 2019 (please contact the Waste Assurance Manager for copies)
- [Recycling leaflet, Biffa](#)
- [Yellow Bin Instructions, NHS Lothian Facilities](#), June 2019 (please contact the Waste Assurance Manager for copies)
- [Waste Management in NHS Scotland Action Plan 2016 to 2020](#), NHS Assure
- [Making Things Last: A Circular Economy Strategy for Scotland](#), key reference for waste recycling, produced by Zero Waste Scotland, February 2016

- [NHS Lothian Confidentiality of Personal Health Information Policy](#), approved by the Information Governance Sub-committee, date April 2018
- [NHS Lothian Radiation Protection Policy](#), approved by the NHS Lothian Policy Approval Group, June 2023
- [NHS Lothian Health and Safety, Clinical Sharps Devices Procedure](#), approved by NHS Lothian Health & Safety Committee, August 2019
- [NHS Lothian Control of Substances Hazardous to Health \(COSHH\) Policy](#), approved by the NHS Lothian Policy Approval Group, March 2023
- Local risk assessments
- [LearnPro](#) Waste Management Module

## 7.0 Evidence base

- [Health and Safety at Work Act 1974](#)
- [Scottish Health Technical Note 3: Waste Management \(SHTN3\)](#) provides comprehensive guidance on all aspects of waste management from the development of policies and procedures through to segregation and waste audits.
- [The Waste \(Scotland\) Regulation 2012](#)
- The [Duty of Care – A Code of Practice](#) guidance provides information in meeting the regulatory requirements, including an explanation of the ‘waste hierarchy’, a tool for management of all waste
- [The Climate Change \(Scotland\) Act 2009](#)
- [The Climate Change \(Duties of Public Bodies: Reporting Requirements\) \(Scotland\) Order 2015](#)
- [The Procurement Reform \(Scotland\) Act 2014](#)
- [The Safeguarding Scotland’s Resources](#)
- [Waste Management in NHS Scotland Action Plan 2016 to 2020](#)
- [The Management of Health and Safety at Work Regulations 1999](#)
- [The Provision and Use of Work Equipment Regulations 1998](#)
- [The Control of Substances Hazardous to Health Regulations 2002](#)
- [The Health and Safety \(Safety Signs and Signals\) Regulations 1996](#)
- [Personal Protective Equipment at Work \(3rd edition\)](#)
- [Protecting Lone Workers; How to manage the risks of working alone](#)

## 8.0 Stakeholder consultation

The Board is committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff reflects their individual needs and does not discriminate against individuals or groups on any grounds.

This document has been discussed and reviewed by the Area Managers Soft and Hard FM, NHS Lothian Waste Management Group, Sustainable Development Management Group, and Facilities Policy Review Group.

## 9.0 Monitoring and review

This policy will be subject to review three years from the date of approval, or sooner if an audit or review has identified significant gaps, failures or omissions.

Good practice requires regular and frequent audits of compliance with this policy. These will be undertaken as part of the requirements from our waste contractors and SEPA.

These are Pre Acceptance Audits (PAA's) and are carried out by Soft FM Operational Staff in conjunction with ward and department managers.

All actions must be closed out either by Facilities or the relevant department before being reviewed by the Waste Assurance Manager and then forwarded on to our waste contractor.

SEPA will also review these audits and where not satisfied that we are compliant will report this to the waste contractor who may decide to temporarily (or permanently) suspend uplift of our waste streams; until we are compliant again.

The effectiveness of this policy may also be monitored and evaluated using the outputs from:

- SAE Reviews
- DATIX investigations
- Complaint investigations/improvement plans
- Health & Safety Quarterly Reports (compliance with relevant policies/risk assessments)

This policy will be reviewed, as a minimum, every three years, but may be subject to earlier review in the event of changes in best practice, guidance or legislation, results from performance reviews and audits, or any other factors that may render the policy in need of review.