



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

**HEALTH SERVICE EXECUTIVE
WASTE POLICY**

2016

1.0 HEALTH SERVICE EXECUTIVE WASTE POLICY

Mission Statement:

“The Health Services Executive is committed to maintaining a waste management system that is safe, efficient, cost effective and respectful of the environment”

AIMS:

- To protect public health and safety.
- To provide a safe working environment for staff.
- To minimise the environmental impact of waste generation; transport, treatment and recovery.
- Reduce waste management costs without compromising health care standards.

OBJECTIVES:

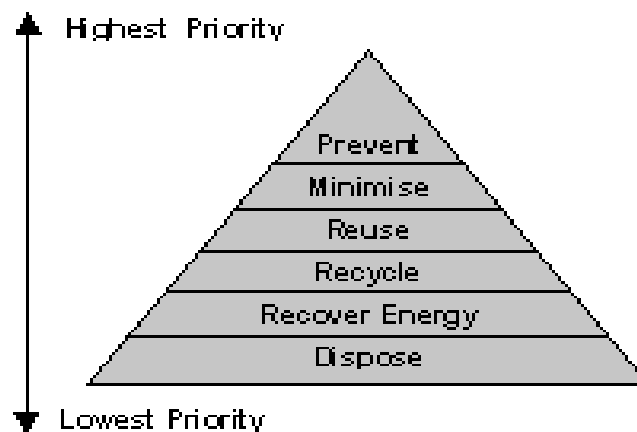
- Foster commitment from all staff and management to actively participate in
 1. Waste avoidance
 2. Waste reduction
 3. Waste reuse
 4. Waste recycling programs
- To comply with Environmental, Safety and Welfare legislation and Policies.
- To adopt and implement the Waste Management Policy throughout the HSE
- To monitor performance and review Waste Management practises at least annually
- Develop practical guidelines for :
 1. Waste minimisation
 2. Use of returnable packaging
 3. Re-usable products
 4. Recycling equipment within purchasing guidelines
- Introduce a continuing waste management education program for all staff to increase awareness of Occupational Health & Safety issues and waste minimisation principles.
- Adopt policies and procedures to minimise the environmental impact of waste treatment and recovery.

2.0 Purpose

The Health Service Executive (HSE) waste policy facilitates clarity in the management of healthcare waste. Healthcare institutions should take the principals outlined in this waste policy to develop clear plans for the correct management of healthcare waste.

Meeting the demands emanating from environmental, health and safety legislation requires continuous improvement in work practices. Conformity to statutory regulations is not a matter of discretion but implementation of higher standards. Working to an agreed policy offers a consistent approach as well as ensuring a high degree of compliance with new standards.

The HSE waste policy is firmly grounded in the internationally recognized hierarchy of waste management options; prevention, minimisation, reuse, recycling, energy recovery and finally environmentally sustainable waste recovery. The basis of the policy is waste management principles and practice currently being employed in Ireland and Europe.



The Waste Management Act 1996 and its amendments are the legislative basis for waste management in Ireland. The HSE's waste policy also reflects the technical guidance contained in the Department of Health & Children's - Segregation, Packaging and Storage Guidelines for Healthcare Risk Waste, 2010.

The primary aim of the HSE's waste policy is to bring about safe working conditions for those handling healthcare waste, and to minimise the impact healthcare waste has on the environment. The secondary aims of the policy are:

- (a) to ensure that the most appropriate treatment and recovery methods are applied to healthcare waste.
- (b) to ensure that there is integration of service to minimise costs and optimise resources
- (c) to ensure that consistent standards are applied across the health services
- (d) to assist in the smooth implementation of new Regulations and European Directives

3.0 Scope

The Health Service Executive's waste policy should be integrated into routine HSE employee training, continuing education, hygiene management and evaluation processes. The national Health Information & Quality Authority (HIQA) Hygiene Services Assessment Scheme for healthcare facilities, examine that the handling, storage, and recovery of sharps and healthcare waste are in accordance with best practice and legislation. Health service providers, as waste producers are responsible for compliance with legislation reflecting health, safety and environmental concerns.

While this policy refers to healthcare waste generally, it is particularly aimed at the segregation, handling, storage and treatment of healthcare waste. It excludes radioactive wastes which are subject to specific regulations enforced by the RPII. The principles outlined are intended to reinforce the protective aims of waste legislation. It is intended that the principles should apply to all agencies funded by the Health Service Executive. The principles themselves should not be seen as mandatory but it is expected that any healthcare waste producer should be able to comply. Within the health services the pre-eminent needs of patient care are paramount.

4.0 DEFINITION OF HEALTHCARE WASTE

The Department of Health & Children's - Segregation, Packaging and Storage Guidelines for Healthcare Risk Waste (2010) defines Healthcare Waste as solid or liquid waste arising from healthcare. The definition took the European Waste Catalogue (EWC) refer to www.epa.ie) as a basis for classification of healthcare waste.

Healthcare Risk Waste is defined as:

- * Biological (recognisable anatomical waste)
- * Infectious
- * Chemical, toxic or pharmaceutical including cytotoxins
- * Sharps (e.g. needles, scalpels, sharp broken materials)
- * Radioactive (refer to Radioactive Waste Directive(s))

5.0 WASTE PRINCIPLES

All healthcare waste should be managed with the following principles and producers of healthcare waste should have in place written waste management procedures covering all aspects of the waste related activities.

Hazardous waste and healthcare risk waste are sub-sets of healthcare waste and, as such, are covered by the principles. Hazardous waste and healthcare risk waste are also covered by further more specific clauses which take into account their potentially hazardous nature.

5.1 Producer Responsibilities

The producer is responsible for the proper handling, storage and recovery of all wastes generated. The producer is also responsible for the safety of staff, contractors and public who may be exposed to the waste. In this regard recovery means the acceptance of the waste by a local authority or private contractor licensed/permitted treat such healthcare wastes.

5.2 Minimise the amount of waste produced.

Prevention is the best waste Management option. Procurement of alternative products entailing less waste should be considered. The merits of re-usable products should be weighed against disposables. Excessive packaging should be discouraged and suppliers should use returnable and re-usable containers. Generation of waste should be examined to identify opportunities to prevent this waste.

5.3 Preference given to Green Procurement.

Green Public Procurement is the approach by which public bodies integrate environmental criteria into all stages of their procurement process. Refer to the HSE Procurement policy. HSE have a socially responsible procurement policy which states that “minimising the need to purchase is the most direct way to cut procurement costs and achieve environmental savings”. Materials purchased should be examined from the point of view of the overall life cycle cost of the product which includes energy consumption, water use, reuse and recycling potential and waste recovery costs. The EU has identified the following product groups as priority which are suitable for 'greening' in the framework of Green Public Procurement.

1. Construction
2. Energy
3. Transport Services
4. Catering Products/Services
5. Cleaning Products/Services
6. Uniforms and textiles
7. Office Paper and printing services
8. ICT Products & Services.

Refer to HSE Procurement Policy & the EU Environment Website
http://ec.europa.eu/environment/gpp/training_toolkit_en.htm

5.4 Maximize Waste Recycling

The following waste streams should be segregated and collected for recycling/reuse as an alternative to landfill; packaging, paper, cardboard, plastic, glass, biodegradable waste, vegetable oils, metals, timber, construction and demolition waste etc.

5.5 Waste Storage

Waste containers should be clean, in good repair, covered and provide adequate manual handling protection. Where appropriate the contents should be identifiable by the use of labeling. UN approved containers are required for healthcare risk waste.

5.6 Waste Transportation

Transportation of wastes should be in appropriate vehicles and not cause nuisance. Any contractor collecting healthcare waste should have a valid permit under the Waste Management Collection (Permit) Regulations 2007.

5.7 Waste Recovery

Final recovery should only be at a facility licensed by the Environmental Protection Agency (or European equivalent) using best practicable environmental option.

6.0 HAZARDOUS HEALTHCARE WASTE

The general principles outlined above are further elaborated below for hazardous healthcare waste. Hazardous wastes, other than healthcare risk waste, are covered by specific requirements under health and safety as well as waste regulations and it is incumbent on healthcare waste producers to observe legal obligations under such regulations. Anatomical substances, healthcare and other risk wastes, the constituents of which include infectious substances, are classified as hazardous and, as such, will be handled and treated in accordance with the relevant hazardous waste regulations.

6.1 REDUCTION, ELIMINATION AND SUBSTITUTION

The principles of waste minimisation and reduction apply particularly to healthcare risk waste. Treatment and final recovery of healthcare risk wastes is 10 times more expensive than other healthcare waste and so reduction can be of considerable benefit both environmentally and economically. Products which can cause environmental

hazards in disposal should be eliminated wherever possible. Where these products cannot be easily eliminated, alternative less damaging, recovery methods should be considered.

6.2 SEGREGATION

Proper waste segregation is the most important practice to guard the occupational health & safety of healthcare workers and contractors. It is critical that healthcare risk wastes are segregated (preferably at the point of generation) prior to collection for treatment and recovery. Employees handling and disposing of healthcare risk waste are at potential risk of exposure to infection from sharp injuries or spillages. The most immediate threat to patients, healthcare workers and the public is the indiscriminate recovery of sharps i.e. needles, syringes, lancets and other invasive tools. Proper segregation of sharps into rigid UN approved puncture proof containers is the highest priority in any healthcare institution.

6.3 WASTE HANDLING

The producers of waste are required to take responsibility for ensuring that staff are adequately trained and equipped in safe and hygienic waste manual handling techniques. This includes collection, storage, and transportation of waste. Particular attention should be paid to the adequacy of UN approved containers and packaging for healthcare risk waste. Waste storage areas should be safe and secure. Producers are responsible for ensuring that all healthcare risk waste is easily identified, with a labeling or tagging system in place.

6.4 RECOVERY METHODS

Appropriate licensed waste recovery methods should be employed which take account of the nature of the waste, regulatory requirements and the safe recovery of all healthcare wastes.

7.0 PERFORMANCE BASED WASTE MANAGEMENT PLANS

All producers of healthcare risk waste are required to have in place a formal written waste management plan which gives effect to the principles outlined in this policy. The plan should cover all aspects of the producer's healthcare waste related activities and clearly lay down the responsibilities of those involved with the activities. Monitoring a small number of Key Performance indicators would significantly improve the ability to manage waste output, and develop strategies to ensure safety, reduce environmental impacts and make financial savings. These include the following key performance indicators recommended by the Comptrollers & Auditor General;

- Incidence of waste related health & safety incidents
- Total amount (by weight) of waste produced per service unit (bed day used)
- Amount of risk waste (by weight) produced per service unit (bed day used)
- Percentage % Risk waste exported for incineration versus steam sterilization
- Percentage % Healthcare waste recycled versus landfilled
- Total direct costs of healthcare waste
- Average direct cost of containing risk waste (per tonne)
- Average direct cost of removal of non risk waste (per tonne)
- Expenditure on other waste related overheads i.e. equipment etc.

7.1 GUIDELINES FOR HEALTHCARE WASTE MANAGEMENT PLANS

The waste management plan of individual healthcare facilities will vary depending on the size and nature of the services provided. The responsibility for all waste operations and for the implementation of the plan is with the facility manager. Plans should be reviewed and updated on a regular basis with compliance to their aims being verified and assessed as necessary. Small healthcare waste producers may not require a written plan but they should be aware of any waste hazards, proper packaging and recovery procedures for the wastes generated.

Each healthcare waste management plan should include the following elements:

- (a) Strategies to minimise the quantities of healthcare waste generated.

- (b) Methods of segregating, packaging, labeling, storing, and transporting each waste type, both on-site and off- site.
- (c) Methods for keeping records of the quantities and type of waste. Records should include local Authority (Waste Transfer Forms) and Certificates of Waste Recovery/Destruction.
- (d) Copies of the waste collection permits, waste facility permits/licenses for all waste contractors provided by the local authority or the Environmental Protection Agency.
- (e) A list of those responsible for managing healthcare risk waste in the event of an accident or spill.
- (f) Provision for regular, ongoing staff training on the management of healthcare risk waste.

8.0. OCCUPATIONAL HEALTH AND SAFETY

The provisions of the Safety, Health and Welfare at Work Act (2005) apply to those involved in the handling of healthcare waste. Employees should be trained and provided with adequate and sufficient equipment and protective clothing to enable them to perform waste related activities in a safe and hygienic way. Steps should be taken to reduce the risk of exposure to infection by establishing written procedures based on occupational health and safety information. Employee training programmes must emphasize the following:

- nature of risk waste and the potential hazards
- hygienic waste handling procedures
- correct and proper use of protective clothing and equipment
- procedures for reduction, segregation, collection, packaging, color-coding, labeling, storage of waste.
- knowledge required for the operation of waste equipment
- action to be taken and who should be notified of accident or spill.

9.0 REFERENCES

Segregation, Packaging and Storage Guidelines for Health Care Risk Waste, Department of Health & Children, 2010 www.dohc.ie

Comptroller & Auditor General Report on Value for Money Examination – Waste Management in Hospitals, 2005. www.audgen.gov.ie