



**Infection.  
Prevention.  
Control.**  
You're in safe hands



## Community Infection Prevention and Control Policy for Care Home settings

# Safe disposal of waste, including sharps

**Version 4.00**  
**May 2025**

Please note that the internet version is the only version that is maintained. Any printed copies should, therefore, be viewed as 'uncontrolled' and as such, may not necessarily contain the latest updates and amendments.

### This Policy has been adopted by:

Organisation: .....

Signature: ..... Name: .....

Job title: .....

Adoption date: .....

Review date: .....

Any variation to this Policy should be risk assessed, evidence-based, authorised and documented below. The Community Infection Prevention and Control (IPC) Team, Harrogate and District NHS Foundation Trust, cannot endorse or be held responsible for any variations.

Community Infection Prevention and Control  
Harrogate and District NHS Foundation Trust  
Gibraltar House, Thurston Road  
Northallerton, North Yorkshire. DL6 2NA  
Tel: 01423 557340  
email: [infectionprevention.control@nhs.net](mailto:infectionprevention.control@nhs.net)  
[www.infectionpreventioncontrol.co.uk](http://www.infectionpreventioncontrol.co.uk)

These Policies contain public sector information licensed under the [Open Government Licence v3.0](#).

#### Legal disclaimer

This Policy produced by Harrogate and District NHS Foundation Trust is provided 'as is', without any representation endorsement made and without warranty of any kind whether express or implied, including but not limited to the implied warranties of satisfactory quality, fitness for a particular purpose, non-infringement, compatibility, security and accuracy.

These terms and conditions shall be governed by and construed in accordance with the laws of England and Wales. Any dispute arising under these terms and conditions shall be subject to the exclusive jurisdiction of the courts of England and Wales.

**Contents****Page**

1.	Introduction.....	4
2.	Responsibilities.....	4
3.	Principles of waste management, including sharps.....	5
4.	Assessing waste, including sharps, for segregation .....	6
5.	Evidence of good practice .....	8
6.	Infection Prevention and Control resources, education and training.....	8
7.	References .....	9
8.	Appendices.....	9
Appendix 1:	Safe disposal of waste, including sharps: Quick reference guide .....	10

# SAFE DISPOSAL OF WASTE, INCLUDING SHARPS

## 1. Introduction

NHS England recommends that organisations adopt the *National infection prevention and control manual (NIPCM) for England*, complemented by care setting specific Policies. This Policy has been produced in accordance with this recommendation and incorporates the *NIPCM* version as referenced in this Policy with detailed care home specific guidance.

This Policy is one of the 'Standard infection control precautions' (SICPs).

Waste management is important to ensure waste does not pose a risk of injury or infection. In addition to safe working practices, appropriate management of waste has additional benefits in terms of cost and lessening the environmental impact of waste.

Always use SICPs and, where required, 'Transmission based precautions' (TBPs), refer to the 'SICPs and TBPs Policy for Care Home settings'.

**When caring for residents in relation to any new or emerging infections, staff should refer to national infection prevention and control guidance.**

## 2. Responsibilities

Staff in care homes have a responsibility for ensuring that waste, including sharps, is dealt with appropriately from the point of generation to the point of final disposal. All staff should be trained and aware of waste procedures. It remains the legal responsibility of the care home, not the waste contractor, to ensure full compliance with environmental waste regulations. Waste, including sharps, should be:

- Correctly segregated
- Appropriately labelled
- Packaged appropriately for transportation
- Stored safely and in a secure place away from areas of public access within the premise
- Described accurately and fully on the accompanying documentation when removed from the premise
- Recorded and copies of the waste documentation retained, including record keeping
- Transferred to an authorised waste contractor for transport to an authorised waste disposal site
- Monitored, audited, and the way in which waste arrangements work should be reviewed

Contingency plans and emergency procedures should be place in the event of contamination from waste.

### 3. Principles of waste management, including sharps

*Health Technical Memorandum 07-01: Safe and sustainable management of healthcare waste* contains the regulatory waste management guidance for all health and care settings (NHS and non-NHS) in England and Wales, including waste classification, segregation, storage, packaging, transport, treatment and disposal.

- Systems should be in place to ensure that waste is managed in a safe manner. Expensive waste streams, e.g. infectious, should only be used where indicated.
- When handling waste, appropriate personal protective equipment (PPE) should be worn, and hands cleaned after removal.
- Waste, including sharps, should be correctly segregated (see Section 4).
- All outer packaging should be removed and recycled, where possible.
- Liquid waste, e.g. urine, faeces, vomit, should be correctly disposed of into a sluice or toilet, or alternatively can be absorbed with disposable cloths or paper towels and placed into the appropriate waste stream.
- Waste bags must be no more than 2/3 full and no more than the UN approved weight and must be securely tied using a plastic tie or secure knot using a 'swan neck' to close.
- Waste must be traceable back to the care home, this may be achieved by writing on bags (prior to use), attaching labels or uniquely numbered tags with the post code on them (some waste contractors may undertake this).
- Sharps should not be disposed of into waste bags.
- Waste bins in clinical areas, resident's rooms and toilets should be clean, in good condition, foot pedal operated with a lid and a liner. Where available, always use the foot pedal to open the lid to prevent hand contamination. If a foot pedal operated waste bin is used by the resident, a risk assessment should be undertaken.
- Waste bins in other areas, e.g. office, should have a liner, but do not need to have a lid.
- Avoid expelling air from a waste bag as harmful microorganisms, such as bacteria and viruses, may be released into the air.
- When handling tied waste bags, only hold the bag by the neck and keep at arms length to reduce the risk of contaminating your uniform/workwear or injury in case a sharp has been inappropriately disposed of in the bag.
- If a waste bag awaiting collection is torn, the torn bag and contents should be placed inside a new waste bag.
- The correct size of the sharps container to be used should be determined according to the volume of sharps generated.
- Sharps containers must be correctly assembled, with the lid securely fastened to the

base and dated, signed and location recorded when assembled.

- Sharps containers must be located in a safe position. Containers should be taken to the point of use, and the temporary closure mechanism used when not in use.
- At no time should a sharps container be placed on the floor.
- Sharps containers should have a handle (small containers do not require a handle).
- In rooms or areas where sharps containers do not need to be moved, they should be wall-mounted near the point of use, i.e. where the sharp is used.
- Whoever uses a sharp is responsible for its disposal, e.g. the resident if self-injecting, or the care worker if they used the sharp on the resident.
- Waste involving sharps, such as lancets used for checking blood sugar levels, should always be disposed of in a sharps container.
- Only sharps waste should be disposed of in a sharps container, e.g. no packaging, wrappers, cotton wool, gauze.
- Sharps containers must be disposed of when the 'fill line' has been reached. The previous NICE statement to dispose of sharps containers at '3 months' is no longer a requirement.
- Never press down the contents to make more room or attempt to retrieve an item from the sharps container.
- The opening must be 'locked' prior to disposal.
- The sharps container should be disposed of as per local arrangement, e.g. returned to the GP surgery or pharmacy. They should not be disposed of in bin bags/wheelie bins.
- Further information on the safe use and disposal of sharps can be found in the 'Safe management of sharps and inoculation injuries Policy'.
- Sharps containers must be dated and signed when locked and disposed of.
- Hands should be cleaned after handling waste, including sharps.
- Store all waste in a designated, safe, lockable area, while awaiting collection. Collection schedules must be acceptable to the care home and there should be no build-up of waste receptacles.

## 4. Assessing waste, including sharps, for segregation

### Definitions

**Clinical waste means waste from a healthcare activity that:**

- Contains viable microorganisms or their toxins which are known or reliably believed to cause disease in humans or other living organisms. For example, if a resident is confirmed or suspected to be infected or colonised by an infectious agent. Clinical judgement should be applied in the assessment of waste and should consider the infection status of a resident and the item of waste produced
- Is a sharp or a body fluid or other biological material (including human and animal

tissue) containing or contaminated with a dangerous substance within the meaning of Regulation (EC) No 1272/2008 of the European Parliament and of the Council on classification, labelling and packaging of substances and mixtures, as amended from time to time

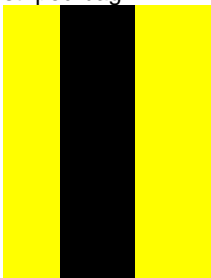


#### Offensive waste is waste that:

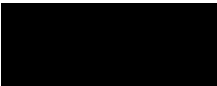

- Is not clinical waste
- Is not infectious, but may contain body fluids, secretions or excretions
- Is non-hazardous

#### Waste segregation

Waste, including sharps, should be assessed by the member of staff at the time it is produced and segregated in the correct colour waste stream identified below. Best practice is to have a waste stream guide poster.

Further information can be found in the *Health Technical Memorandum 07-01: Safe and sustainable management of healthcare waste*.

Waste stream guide for Care Home settings	
Colour*	Description
<b>Yellow and black striped:</b> Yellow and black striped bag 	<b>Offensive waste (non-infectious)</b> Waste from residents with no confirmed or suspected infection which may be contaminated with body fluids. May be land filled in a permitted or licensed waste facility. Examples are non-infectious: <ul style="list-style-type: none"> <li>• Gloves, aprons, facial protection</li> <li>• Dressings</li> <li>• Stoma or catheter bags<sup>1</sup></li> <li>• Cardboard vomit/urine bowls<sup>1</sup></li> <li>• Incontinence pads</li> <li>• Female hygiene waste, nappies</li> </ul> <sup>1</sup> Liquids, e.g. urine, faeces, vomit, should be discarded into a foul sewer (sluice or toilet). They can, however, be absorbed onto a disposable cloth, e.g. paper towel, and placed in the offensive waste stream, ensuring there is no free-flowing liquid present.
<b>Orange:</b> Orange bag or orange lidded sharps container 	<b>Clinical waste (infectious only)</b> Waste from residents with a confirmed or suspected infection, but <b>not</b> contaminated with medicines or chemicals. May be treated to render it safe prior to disposal, or alternatively incinerated in a licensed facility. Examples are infectious: <ul style="list-style-type: none"> <li>• Contaminated PPE, e.g. gloves, aprons, facial protection</li> <li>• Items contaminated with urine, faeces, vomit, sputum, pus or wound exudate, e.g. continence pads, urine bags, single use items, single use bowls</li> <li>• Dressings that do not contain an active pharmaceutical product</li> <li>• Waste from blood and/or body fluid spillages</li> <li>• Syringes contaminated with body fluids, but not contaminated with medicines</li> <li>• Used phlebotomy needles and syringe bodies</li> </ul>
<b>Yellow:</b> Yellow lidded sharps container 	<b>Waste contaminated with non-hazardous pharmaceuticals or chemicals</b> Sharps waste contaminated with medicines. May be incinerated or undergo alternative treatment in a permitted or licensed facility. Examples are: <ul style="list-style-type: none"> <li>• Items contaminated with non-hazardous medicines</li> <li>• Used sharps from treatment with non-hazardous medicines</li> </ul>

<b>Black:</b> Black bag (clear or opaque bags may be used) 	<b>Domestic waste</b> Waste includes items normally found in household waste. May be land filled in a permitted or licensed facility. Examples are: <ul style="list-style-type: none"> <li>• Newspapers</li> <li>• Paper towels from handwashing</li> <li>• Food waste</li> <li>• Packaging</li> </ul> Recycling options should be considered where available.
<b>Purple:</b> Purple bag or purple lidded sharps container 	<b>Cytotoxic and cytostatic waste</b> Waste classified as hazardous consisting of, or contaminated with, cytotoxic and/or cytostatic medicines. Must be sent for incineration in a permitted or licensed waste facility. This waste stream is rarely used in care home settings.

## 5. Evidence of good practice

It is recommended that, for assurance purposes, 'Safe disposal of waste, including sharps' is audited. This can be achieved by completing the 'SICPs Assurance: Annual IPC Audit Tool for Care Homes' available to download at [www.infectionpreventioncontrol.co.uk/resources/sicps-assurance-annual-ipc-audit-tool-for-care-homes/](http://www.infectionpreventioncontrol.co.uk/resources/sicps-assurance-annual-ipc-audit-tool-for-care-homes/)

Following completion of the audit, an 'Action plan' should be drawn up and implemented to demonstrate continuous improvement.

## 6. Infection Prevention and Control resources, education and training

See Appendix 1 for the 'Safe disposal of waste, including sharps: Quick reference guide'.

The Community Infection Prevention and Control (IPC) Team have produced a wide range of innovative educational and IPC resources designed to assist your Care Home in achieving compliance with the *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related resources* and CQC registration requirements.

These resources are either free to download from the website or available at a minimal cost covering administration and printing:

- 30 IPC Policy documents for Care Home settings
- Preventing Infection Workbook: Guidance for Care Homes
- IPC CQC inspection preparation Pack for Care Homes
- IPC audit tools, posters, leaflets and factsheets
- IPC Bulletin for Care Homes

In addition, we hold IPC educational training events in North Yorkshire.



Further information on these high quality evidence-based resources is available at [www.infectionpreventioncontrol.co.uk](http://www.infectionpreventioncontrol.co.uk).

## 7. References

Department of Health and Social Care (2024) *Infection prevention and control: resource for adult social care*

Department of Health and Social Care (Updated December 2022) *Health and Social Care Act 2008: code of practice on the prevention and control of infections and related guidance*

Department of Health (2022) *Health Technical Memorandum 07-01: Safe and sustainable management of healthcare waste*

National Institute for Health and Care Excellence (Updated February 2017) *Healthcare-associated infections: prevention and control in primary and community care Clinical Guidelines 139*

NHS England (Updated 2025) *National infection prevention and control manual (NIPCM) for England*

## 8. Appendices

Appendix 1: Safe disposal of waste, including sharps: Quick reference guide

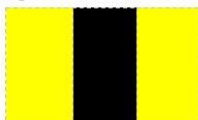
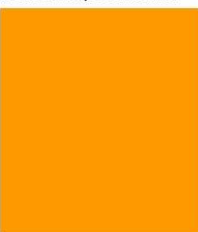



## Safe disposal of waste, including sharps: Quick reference guide

### Key principles

- All staff in care homes are responsible for the safe management and disposal of waste.
- When handling waste, appropriate PPE should be worn and hands cleaned after removal.
- Waste bags should be no more than 2/3 full and no more than the UN approved weight.
- Waste bags should be securely tied using a plastic tie or secure knot using a swan neck.
- Waste must be traceable back to the care home.
- When handling tied waste bags, only hold by the neck of the bag and keep at arms length.



### Waste stream guide for Care Home settings

Colour*	Description
<b>Yellow and black striped:</b> Yellow and black striped bag 	<b>Offensive waste (non-infectious)</b> Waste from residents with no confirmed or suspected infection which may be contaminated with body fluids. May be land filled in a permitted or licensed waste facility. Examples are non-infectious: <ul style="list-style-type: none"> <li>• Gloves, aprons, facial protection</li> <li>• Dressings</li> <li>• Stoma or catheter bags<sup>1</sup></li> <li>• Cardboard vomit/urine bowls<sup>1</sup></li> <li>• Incontinence pads</li> <li>• Female hygiene waste, nappies</li> </ul> <sup>1</sup> Liquids, e.g. urine, faeces, vomit, should be discarded into a foul sewer (sluice or toilet). They can, however, be absorbed onto a disposable cloth, e.g. paper towel, and placed in the offensive waste stream, ensuring there is no free-flowing liquid present.
<b>Orange:</b> Orange bag or orange lidded sharps container 	<b>Clinical waste (infectious only)</b> Waste from residents with a confirmed or suspected infection, but <b>not</b> contaminated with medicines or chemicals. May be treated to render it safe prior to disposal, or alternatively incinerated in a licensed facility. Examples are infectious: <ul style="list-style-type: none"> <li>• Contaminated PPE, e.g. gloves, aprons, facial protection</li> <li>• Items contaminated with urine, faeces, vomit, sputum, pus or wound exudate, e.g. continence pads, urine bags, single use items, single use bowls</li> <li>• Dressings that do not contain an active pharmaceutical product</li> <li>• Waste from blood and/or body fluid spillages</li> <li>• Syringes contaminated with body fluids, but not contaminated with medicines</li> <li>• Used phlebotomy needles and syringe bodies</li> </ul>
<b>Yellow:</b> Yellow lidded sharps container 	<b>Waste contaminated with non-hazardous pharmaceuticals or chemicals</b> Sharps waste contaminated with medicines. May be incinerated or undergo alternative treatment in a permitted or licensed facility. Examples are: <ul style="list-style-type: none"> <li>• Items contaminated with non-hazardous medicines</li> <li>• Used sharps from treatment with non-hazardous medicines</li> </ul>
<b>Black:</b> Black bag (clear or opaque bags may be used) 	<b>Domestic waste</b> Waste includes items normally found in household waste. May be land filled in a permitted or licensed facility. Examples are: <ul style="list-style-type: none"> <li>• Newspapers</li> <li>• Paper towels from handwashing</li> <li>• Food waste</li> <li>• Packaging</li> </ul> Recycling options should be considered where available.
<b>Purple:</b> Purple bag or purple lidded sharps container 	<b>Cytotoxic and cytostatic waste</b> Waste classified as hazardous consisting of, or contaminated with, cytotoxic and/or cytostatic medicines. Must be sent for incineration in a permitted or licensed waste facility. This waste stream is rarely used in care home settings.

\* Colour waste streams may vary depending on waste contractors - check with your local contractor.

For further information, please refer to the full Policy which can be found at [www.infectionpreventioncontrol.co.uk/care-homes/policies/](http://www.infectionpreventioncontrol.co.uk/care-homes/policies/)

© Harrogate and District NHS Foundation Trust  
Community Infection Prevention and Control  
[www.infectionpreventioncontrol.co.uk](http://www.infectionpreventioncontrol.co.uk) May 2025