



Community Infection Prevention and Control Policy for General Practice

(also suitable for adoption by other healthcare providers, e.g. Dental Practice, Podiatry)

Safe disposal of waste

GP 15

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Signed:
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Date Adopted:
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If your organisation would like to exclude or include any additional points to this document, please include below. Please note, the Community IPC Team cannot endorse or be held responsible for any addendums.

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SAFE DISPOSAL OF WASTE

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1. Introduction

This Policy is one of the 'Standard infection control precautions' (SICPs) referred to as 'Safe disposal of waste (including sharps)' by NHS England and NHS Improvement.

The management of healthcare waste is an essential part of ensuring that General Practice activities do not pose a risk or potential risk of infection and are appropriately managed. Waste is potentially hazardous and if not disposed of correctly can result in injury or infection.

All staff are responsible for the safe management and disposal of waste and should understand how waste should be segregated and stored prior to collection or disposal. This is driven by the need to reduce environmental impact, comply with waste regulations and other national guidance such as *The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance*, and reduce costs associated with waste management.

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

Always use standard infection control precautions and, where required, transmission based precautions (SICPs and TBPs), refer to the 'SCIPs and TBPs Policy for General Practice'.

When caring for patients in relation to COVID-19 or any other new emerging infections, staff should refer to national infection prevention and control guidance on the disposal of waste.

2. Responsibilities

Staff in General Practice have a responsibility for ensuring that waste 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 General Practice, not the waste contractor, to ensure full compliance with environmental waste regulations. Waste 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

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

3. Disposal of waste

- All waste should be segregated correctly (see Section 4) as per your local policy and in accordance with your waste contractor.
- When handling waste, appropriate personal protective equipment (PPE) should be worn, and hands cleaned after removing PPE.
- All waste bags should be no more than 3/4 full. This allows enough space for the bag to be tied using a suitable plastic zip tie or secure knot.
- Waste bags should be labelled with the address and date prior to collection by the waste contractor (some waste contractors may undertake this) to ensure traceability if an incident occurs.
- When handling tied waste bags, only hold the bag by the neck and keep at arm's length to reduce the risk of injury in case a sharp item 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.
- Waste bins in clinical areas and toilets should be lined and foot pedal operated with a lid. Always use the foot operated mechanism to open the lid to prevent hand contamination.
- Waste bins in other areas, e.g. office, should have a liner, but do not need to have a lid.

4. Assessing waste for segregation

Waste should be assessed by the member of staff at the time the waste is produced and segregated in the correct colour waste stream identified below. Further information can be found in the *Environment and sustainability Health*

Technical Memorandum 07-01: Safe management of healthcare waste.

Yellow: Yellow bag or yellow lidded sharps container	For incineration in a suitably permitted or licensed facility (must not be sen for alternative treatment)	
Orange: Orange bag or orange lidded sharps container	Can be sent for treatment to render it safe prior to disposal or incinerated in	
	a permitted or licensed facility	
	Orange bag or orange lidded sharps	

Guide for correct colour waste streams				
Colour waste stream and description	Container type	Disposal type		
Offensive/hygiene waste General Practices will generate two different offensive waste streams which should be segregated.	Yellow and black striped: Yellow and black striped bag	May be landfilled in a permitted or licenced waste facility		
Domestic-type waste Note: if the total quantity in a collection interval is less than 7kg, this waste can be placed in the black bag (municipal/ domestic) waste stream.				
Examples are:Feminine hygiene wastes from toilets				
Nappies from otherwise healthy children, etc				
Healthcare-type waste Waste from patients with no confirmed or suspected infection which may be contaminated with body fluids.				
Examples are: • Gloves, aprons				
Uncontaminated dressings				
• Empty non-medicated infusion bags				
Stoma or catheter bags*				
Cardboard vomit/urine bowls*				
Incontinence pads				
Female hygiene waste, nappies				
*Note: Liquids, e.g. urine, faeces, vomit, should not be placed in this waste stream and may need to be discarded to foul sewer before containers are discarded				
Mixing of waste is prohibited - offensive waste must be separated from the clinical waste stream				

SAFE DISPOSAL OF WASTE

Colour waste stream and description	Container type	Disposal type
Cytotoxic or cytostatic medicine waste Waste classified as hazardous consisting of, or contaminated with, cytotoxic and/or cytostatic medicines. Examples are: • Medicine containers with residues of cytotoxic or cytostatic medicines (bottles, infusion bags or syringe barrels)	Purple: Purple bag or yellow and purple striped bag. Purple lidded sharps container	Must be sent for incineration in a permitted or licenced waste facility
• Items contaminated with cytotoxic or cytostatic medicines, e.g. swabs		
Used sharps from treatment using cytotoxic or cytostatic medicines		
Medicinal waste classed as non-hazardous Non-infectious, non-cytotoxic or cytostatic.	Blue: Blue lidded sharps container	For incineration in a permitted of licenced waste facility
Examples are:Unused medicines in original packages		
 Part empty containers containing residues of medicines 		
Empty medicine bottles		
 Medicated, e.g. antibiotic, infusion bags 		
Medicines in aerosol form, e.g. betadine iodine, cryogenic sprays, asthma medication, must be segregated from other medicines, or their presence identified on the accompanying waste documentation		

Guide for correct colour waste streams

Colour waste stream and description	Container type	Disposal type
Municipal/domestic waste Non-hazardous paper, includes items normally found in household waste. Examples are:	Black: Black bag (clear or opaque bags	For landfill at a suitable permitted facility
Newspapers	may be used)	
Food wastePaper towels from handwashing		
Uncontaminated couch roll		
Packaging		

5. Infection Prevention and Control resources, education and training

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

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

- 25 IPC Policy documents for General Practice
- 'Preventing Infection Workbook: Guidance for General Practice'
- 'IPC CQC inspection preparation Pack for General Practice'
- IPC audit tools, posters, leaflets and factsheets
- 'IPC Bulletin for GP Practice Staff'

In addition, we hold educational study events in North Yorkshire and York and can arrange bespoke training packages and 'Mock IPC CQC Inspections'. Prices vary depending on your requirements and location.

Further information on these high quality evidence-based resources is available at <u>www.infectionpreventioncontrol.co.uk</u>.

6. References

Department of Health (2015) *The Health and Social Act 2008: Code of Practice on the prevention and control of infections and related guidance*

Department of Health (2013) *Environment and sustainability Health Technical Memorandum 07-01: Safe management of healthcare waste*

Department of Health (2011) Safe management of healthcare waste Version 2.0: England

Royal College of Nursing (2014) The management of waste from health, social and personal care RCN guidance