

WILTSHIRE POLICE FORCE PROCEDURE



Clinical Waste

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PROCEDURE OVERVIEW

The objective of this procedural guide is to clearly define Wiltshire Police's procedures with regards to the management of clinical waste risks in the workplace and to ensuring legal compliance. This procedure also seeks to provide all managers and staff with appropriate guidance in order to ensure, as far as is reasonably practicable, that the risks associated with clinical waste are minimised and staff are aware of the safe working practices to follow when dealing with clinical waste.

GLOSSARY OF TERMS

| Term | Meaning |
|-----------------|--|
| PPE | Personal Protective Equipment |
| COSHH | Control of Substances Hazardous to Health |
| HSE | Health and Safety Executive |
| RIDDOR | Reporting of Injuries, Diseases and Dangerous Occurrences Regulations |
| Hazardous waste | Term used in England to describe waste with hazardous characteristics in line with the List of Wastes (LoW). |

RELATED POLICIES, PROCEDURES and OTHER DOCUMENTS

- Control of Substances Hazardous to Health (COSHH) Procedure
- GRA 176 Force Clinical Waste
- Safe System of Work – Clinical Waste
- Waste Classification – Guidance on the classification and assessment of waste (1st edition 2015) – Technical Guidance WM3

AUTHORISED PROFESSIONAL PRACTICE AREAS ASSOCIATED WITH THIS PROCEDURE

There are no associated Authorised Professional Practice areas at present.

DATA PROTECTION ACT 1998

Any information relating to an identified or identifiable living individual recorded as a consequence of this procedure will be processed in accordance with the Data Protection Act 2018, General Data Protection Regulations and the [Force Data Protection Policy](#).

FREEDOM OF INFORMATION ACT 2000

This document has been assessed as suitable for public release.

MONITORING and REVIEW

The Clinical Waste Procedure document will be monitored and reviewed every three years by the Force Head of Health and Safety and Head and Facilities and Supplies. The procedure will also be reviewed in light of legislative change, changes in procedures and relevant incidents relating to clinical waste. The Force Occupational Health and Safety Committee will be responsible for the approval and monitoring the procedure document on a regular basis. This includes regularly auditing the degree of Force compliance with this procedure through internal and external audit arrangements. The Health and Safety Section in conjunction with staff association representatives will also review the processes in place for the handling, temporary storage, transportation and disposal of clinical waste and sharps at individual stations.

WHO TO CONTACT ABOUT THIS PROCEDURE

Sarah Somers, Health and Safety Manager
Kim Glenister, Head of Facilities and Supplies

1. Legal Requirements

Health and Safety at Work etc Act 1974 requires every employer, so far as is reasonably practicable, to ensure the health, safety and welfare at work of their employees and anyone else affected by their undertakings.

Hazardous Waste (England and Wales) (Amendment) Regulations 2016 revokes Part 5 of the Hazardous Waste (England and Wales) Regulations 2005. The revocation means from 1st April 2016 there will be **no requirement** for businesses, in England, who produce or hold hazardous waste to register with the Environment Agency. Removing the need for premises to be registered means a change to consignment note codes. As of 1st April 2016 consignment notes must show the first 6 characters of the organisations name and 5 characters of the Forces (the Head of Facilities and Supplies on behalf of the Force) choosing in the second box. A consignment note must accompany hazardous waste when removed from any premises. Forces can no longer use 'EXEMPT' and all properties must comply with this new requirement regardless of the quantity of waste generated.

The change in the Hazardous Waste Regulations from 1st April 2016 specifying Standard Industrial Classification (SIC) 2007, matches the requirements for waste transfer notes (for non-hazardous waste).

For police forces the SIC code used on consignment notes and transfer notes should be 84.24 (public order). The Environment Agency has confirmed one code should be used for all buildings/activities within a Force.

Parts 1 to 3 of the Hazardous Waste Regulations 2005 (as amended 2009) define hazardous waste and set out how the regulations apply to that waste. Regulation 6 refers to the list of hazardous wastes, widely known as the European Waste Catalogue (EWC). The Regulations ban the mixing of hazardous waste, unless this is permitted as part of a disposal or recovery operation and impose a requirement to separate different categories of waste, where it is technically feasible.

Environmental Protection Act 1990 (EPA) define that organisations have a duty to ensure that waste is stored, handled, transported, treated and disposed of without causing damage to the environment or harm to human health. It is unlawful to deposit, recover or dispose of controlled (including clinical) waste without a waste management license, contrary to the conditions of a license or the terms of an exemption, or in a way which causes pollution of the environment or harm to human health. Contravention of waste controls is a criminal offence.

The Controlled Waste (England and Wales) Regulations 2012 defines waste into categories of household, commercial and industrial waste but has a separate means of classification by the a) place of production and b) nature of the waste or activity producing the waste. These Regulations define clinical waste as:

- a) contains viable micro-organisms or their toxins which are known or reliably believed to cause disease in humans or other living organisms,
- b) contains or is contaminated with a medicine that contains a biologically active pharmaceutical agent, or
- c) 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 Council Directive 67/548/EEC on the approximation of laws, regulations and administrative provisions relating to the classification, packaging and labelling of dangerous substances,

and waste of a similar nature from a non-healthcare activity;

EU Waste Framework Directive provides the legislative framework for the collection, transport, recovery and disposal of waste, and includes a common definition of waste.

2. Clinical Waste Definition

The definition of clinical waste is given in the list of Legal Requirement under the Controlled Waste (England and Wales) Regulations 2012 the below is a simplified list for easy reference:

Clinical waste is waste which consists wholly or partly of:

- human or animal tissue
- blood or other bodily fluids
- bodily excretions
- drugs or other pharmaceutical products (exemptions are cytotoxic and cytostatic medications)
- swabs or dressings
- syringes, needles or other sharp instruments
- any waste from the above which unless rendered safe may prove hazardous to any person coming into contact with it.

Note: Drugs or pharmaceutical must not be deposited in the Forces clinical waste bins. The handling, storage and disposal of drugs or pharmaceuticals is therefore not included in this procedure.

Clinical waste should not be confused with 'offensive waste' which relates to waste which is unpleasant and may cause offence to those coming into contact with it such as nappies and sanitary protection.

3. Clinical Waste within Wiltshire Police

Wiltshire Police produce low volumes of clinical waste from a number of different sources this includes;

- Custody
- Special Property
- Occupational Health Unit
- Crime Scene Investigation
- Searches
- Contaminated Uniform and Equipment
- Weapons Amnesty
- Operational Vehicle Sharps containers

Consideration must also be given to including clinical waste and sharps hazards and risk management as part of the planning process for pre planned police operations and training. The result of which must be documented on the appropriate operational risk assessment.

4. Responsibilities

Head of Facilities and Supplies / Head of Health and Safety

The Head of Facilities and Supplies and Head of Health and Safety are the appointed Responsible Persons who jointly act as the Wiltshire Police Clinical Waste Co-ordinators. The role includes the provision of specific guidance and advice on environmental legislation, pollution control and waste management, in particular statutory compliance which includes arrangements for the safe handling, segregation, storage, collection, transportation and disposal of all clinical waste produced during the course of work within Wiltshire Police. They are jointly responsible for monitoring the organisations arrangements for the management of clinical waste.

Regional Procurement Manager

The Force and Regional Procurement Managers are responsible for the selection and appointment of suitable hazardous waste contractors in accordance with the Management of Contractors Procedure. They are also responsible for ensuring only Hazardous Waste Contractors who are registered with the Environment Agency as transporters/disposers of hazardous clinical waste and able to dispose of Force clinical waste/sharps by incineration are appointed.

Appointed Waste Contractor

The Waste Contractor appointed by Regional Procurement is responsible for providing the Head of Facilities and Supplies with up to date (current and future) legislative guidance on the disposal of hazardous and non-hazardous soft and sharp clinical waste from Force premises including identifying and providing the correct clinical waste bags and sharps bins. The Waste Contractor is also responsible for ensuring all Force clinical waste, including sharps, is disposed of by incineration.

Note: The PFI at Gablecross have confirmed their clinical waste is incinerated. Wiltshire Council have also confirmed clinical waste from Bourne Hill is incinerated.

People Development Trainers/Health and Safety Advisor

To ensure all staff receive, as part of their police staff induction / police probationary training, basic information on the hazards posed by clinical waste including sharps, how to handle safely and the procedure to follow if a contamination injury is known or suspected.

Managers' Responsibilities

All managers are responsible for ensuring that where there is a clinical waste hazard or infection control processes are present in their areas of responsibility that they put in place appropriate arrangements to ensure that the requirements of this procedure are satisfactorily implemented. Where managers have identified that their staff could be exposed to clinical waste, role generic risk assessments (GRA's) must reflect this hazard and the measures taken to either avoid or reduce any risk must be stated on the assessment.

Employees' Responsibilities

Employees are responsible for handling clinical waste and contaminated sharps carefully and safely to avoid injury and/or the risk of infection/contamination to themselves or others and to protect the environment. Employees must follow information, instruction and training advice and read and adhere to guidelines in the Force Clinical Waste Procedure, GRA 176 Force Clinical Waste, the GRA relevant to their role and the Safe System of Work – Clinical Waste prior to handling clinical waste. All Force documents relating to clinical waste, other than the procedure which is in the Policy and Procedure section on Firstpoint, are available in the Health and Safety portal site.

Use of Prescribed Medication which generates Clinical Waste / Sharps in the Workplace

Members of staff who need to use prescribed medication in the workplace which generates clinical waste, including sharps, will generally receive these products from the NHS or other registered service provider. Training in the use of these prescribed medications and disposal of any clinical waste and sharps resulting from their use and ongoing support will have been provided to the staff member under the service providers Duty of Care. This Duty of Care will usually provide a staff member using sharps with a small, personal issue, sharps bin for use in the workplace which can be left secured in a workplace locker and easily transportable between home and the workplace. Once the sharps bin is full, it will be sealed and collected from the home location by the supplier who will arrange disposal. Members of staff who require support in these circumstances should liaise with

their Line Manager in order a Personal Risk Assessment is produced to assist in managing their needs. This may identify an action to liaise with the OHU and Facilities Departments.

5. Risk Assessment

Generic Risk Assessment

Wiltshire Police have carried out a suitable and sufficient generic risk assessment for the management of clinical waste and sharps which includes information on the collection, transportation, temporary storage and handling of clinical waste. Please refer to GRA 176 Clinical Waste available to all employees via the Health and Safety portal site. GRA's for roles which include the handling of clinical waste or sharps such as Special Property Officers and Vehicle Workshop should include a section on the risks and control measures for clinical waste.

Operational Policing

Due to the nature of policing, officers and operational police staff may come into contact with clinical waste, including sharps, some of which may be hazardous, during their routine activities/duties or pre planned operations. Police officers and operational police staff must carry out a suitable dynamic risk assessment for each incident involving clinical waste and sharps. Operational risk assessments should identify the risks from clinical waste and contaminated sharps where they are known or suspected to be present. Operational advice and guidance is available through the Force Health and Safety section as required.

6. Information, Instruction and Training

All staff are provided with basic information and guidance on clinical waste, including sharps, as part of their induction / probationary training. Staff known to handle clinical waste and contaminated sharps and staff who are at high risk from clinical waste and contaminated sharps will receive additional relevant and sufficient information, instruction and training to ensure they are aware of the risks associated with clinical waste and contaminated sharps and are able to take appropriate safety measures when undertaking work involving clinical waste and contaminated sharps. All staff at risk from clinical waste and contaminated sharps will also be provided with a copy of the Force Blood Borne Virus Aide Memoir.

7. Segregation of Waste

In accordance with legislation clinical waste and sharps must be segregated from other waste streams and not packaged with other wastes.

8. Handling and Packaging of Clinical Waste and Sharps

Staff must handle clinical waste and sharps in accordance with the advice and guidance provided during induction and training. The following guidance should be adhered to when packaging clinical waste and sharps. Inappropriately packaged clinical waste and sharps pose a hazard to all staff and contractors and will not be accepted for transportation by the Waste Contractor.

Soft Clinical Waste - Non Sharps

- place in an approved clinical waste bag with bio hazard markings on the outside. (*Clinical waste bags are available from the Facilities Assistants and Supplies Department. There should also be a supply nearby all contractors' clinical waste containers.*)
- securely seal the approved clinical waste bag when no more than three quarters full and double bag if necessary to ensure the contents are contained
- write the date and name of the department producing on the approved clinical waste bag in permanent marker
- deposit in your nearest contractors clinical waste container

Do not place the below in a clinical waste bag:

- sharp objects which may puncture the bag
- sharps bins
- anatomical waste
- pharmaceutical waste
- liquid waste

Sharps – Needlesticks, Knives, Glass etc

- place in an approved puncture proof sharps bin. (*Sharps bins are available from the Facilities Assistants and Supplies Department.*)
- securely seal when no more than three quarters full to ensure safe retention and disposal – recheck the sharps bin is sealed
- write the date and name of the department producing on the sharps bin in permanent marker
- deposit in your nearest contractors clinical waste container

Large Items of Clinical Waste

Departments who may on occasion handle items of clinical waste, including sharps, which are too large to fit into an approved clinical waste bag or standard sharps bin should contact the Facilities Department for advice.

Note: Wiltshire Police prohibit the purchase and use of compactors on their premises.

9. Storage of Clinical Waste and Sharps

Clinical waste and contaminated sharps awaiting disposal should be appropriately packaged and deposited in their nearest contractor's clinical waste container as soon as possible.

All CPT premises, other than Devizes Borough and Warminster, have contractors clinical waste containers on site. An additional contractor's clinical waste container is sited at Special Property, Old Sarum. All locations are listed below:

- Police Headquarters, Devizes
- Amesbury Police Station
- Melksham Police Station
- Swindon Police Station, Gablecross
- Trowbridge Police Stations
- Special Property, Old Sarum – *use restricted to Special Property only*

Clinical waste and contaminated sharps from Devizes Borough and Warminster CPT and shared premises should be deposited in the nearest contractor's clinical waste container as below:

- Bourne Hill – the council provide a clinical waste service through Initial
- Devizes Borough – staff to take their clinical waste to Headquarters
- Monkton Park – staff to take their clinical waste to Melksham
- Warminster – staff to take their clinical waste to Trowbridge

The contractor's clinical waste containers will be of an appropriate size for the amount of waste being produced and stored at that site. These containers will be yellow, rigid and lidded, leak proof, lockable, easily cleansable and labelled Clinical Waste with a Bio Hazard sign.

The containers must be sited in an area which is:

- secure and not accessible to the public
- away from staff routes and working areas
- not near food preparation or consumption areas
- segregated from other waste streams
- away from ignition sources
- appropriately lit and ventilated
- easily accessible to staff at all times
- signed 'clinical waste'
- monitored by an appropriate person e.g. Facilities Caretaker
- accessible to contractors and their vehicles, where appropriate

Note: The contractor's clinical waste container at Gablecross is managed by the PFI on site. The PFI looks after Gablecross, North, West and Town Centre Police Points and will only accept, store and dispose of clinical waste from these premises plus sharps bins from Swindon Custody and VPU departments. All other clinical waste and sharps bins must be transferred to one of the other contractor's clinical waste container.

Sharps Containers in Police Vehicles

Operational police vehicles are provided with small sharps containers. These should be used and disposed of in accordance with this procedure. Replacement vehicle sharps containers can be obtained from the local Facilities Assistants and Supplies Department.

Spillages and Spill Kits

Spill kits, with instruction for use, suitable for cleaning up small spills of clinical waste are available on all Force premises with a contractor's clinical waste containers on site. In the event of a small spillage of clinical waste staff may with extreme care and using appropriate PPE (e.g. gloves, overalls and appropriate handling tools) clean up and repackage spilt clinical waste into a yellow clinical waste bag or sharps containers in order it be placed in a contractors clinical waste container. Large spills should be reported to the Facilities Department in order suitable cleaning arrangements be made. Any injuries or near misses involving clinical waste or contaminated sharps must be reported and investigated as per the Force Accident and Near Miss Reporting Procedures.

Prohibited from Clinical Waste and Sharps Storage

Drugs and Pharmaceuticals

Drugs and pharmaceuticals **must not** be deposited in any of the contractor's clinical waste bins. Specialist departments involved in the handling, storage and disposal of drugs and pharmaceuticals are responsible for their own disposal procedures and safe systems of work. Employees who occasionally receive or handle drugs and pharmaceuticals as a result of their work activity, but are not based in a specialist department handling and disposing of such items, should contact a relevant department or the Health and Safety Department for advice.

10. Contamination of Clothing, Appointments and Equipment

Force personal issue clothing, clothing worn by plain clothes officers and appointments which become contaminated with body fluids during work activities **must** immediately be placed within an approved clinical waste bag and deposited in the nearest clinical waste container and not taken to the Supplies Department. Any appointments with sharp edges should be placed in an appropriately sized sharps bin and securely sealed before depositing in the nearest clinical waste container and not taken to the Supplies Department.

Specialist Equipment

All contaminated specialist equipment should be taken out of use until appropriately cleaned or replenished in line with manufacturer's advice and department manager's instructions.

Contamination of Cells, Vehicles and Offices

Managers of departments who are known to experience contamination of cells, vehicles and offices to ensure they have a system in place for Contractors to Deep Clean Vehicles or Location.

11. Transportation of Clinical Waste within Force

Only waste contractors who are licenced with the Environment Agency to collect and dispose of clinical waste, including sharps, and who have been appointed by the Regional Procurement Managers are authorised to collect clinical waste from their contractor's clinical waste containers for incinerated disposal at an Environment Agency authorised, registered and licensed waste incineration facility. The frequency of collection of clinical waste shall be determined by the Facilities Department and agreed corporately with the licensed waste contractor.

12. Disposal of Clinical Waste and Sharps

All clinical waste and sharps produced by Wiltshire Police must be disposed of by incineration. The waste contractor appointed by Regional Procurement Manager will be contracted to do so. The Facilities Department to arrange with the PFI in Swindon and Wiltshire Council in Bourne Hill shared premises.

13. Monitoring of Clinical Waste Containers

All Clinical Waste Containers are to be monitored on a regular basis by designated responsible persons eg Facilities Caretakers. In addition all areas will be audited as part of the Force's active monitoring system. This will include monitoring local arrangements including the:

- Arrangements for the safe handling of clinical waste.
- Standards for the initial storage of clinical waste.
- Systems for the segregation of the types of clinical waste.
- Systems for the collection of clinical waste by licensed waste contractors
- Arrangements for the transportation and disposal of clinical waste.

Any significant issues identified during the active monitoring will be referred to local responsible persons for initial action and any developing or consistent trends or issues in relation to clinical waste will be reported within the annual performance review report.

14. Record Keeping

The Hazardous Waste (England and Wales) Regulations require hazardous waste contractors to provide consignment notes for each collection of hazardous clinical waste (consignment notes to be signed by hazardous waste contractor collecting for disposal and organisation releasing clinical waste to the waste contractor for disposal) and quarterly return notes. The Facilities Department have arranged for both consignment notes and quarterly returns to be submitted to their department electronically and will retain for a minimum period of 2 years for auditing purposes and in line with legal requirements. The folders will be audited by the Health and Safety Department on a regular basis.

DOCUMENT ADMINISTRATION

Ownership:

Department Responsible: Health and Safety / Facilities and Supplies
Procedure Owner/Author: Sarah Somers, Head of Health and Safety /
Kim Glenister, Head of Facilities and Supplies
Technical Author:
Senior Officer/Manager Sponsor: ACO Business & People Development

Revision History:

| Revision Date | Version | Summary of Changes |
|---------------|---------|---|
| 09/06/2016 | 2.0 | Three yearly review and update |
| 16.11.2017 | 3.0 | Standard review – no significant changes therefore approval not required through OH&S Committee |
| | | |
| | | |

Approvals:

This document requires the following approvals:

| Name & Title | Date of Approval | Version |
|---|------------------|---------|
| Continuous Improvement Team | Not required | 4.0 |
| Occupational Health and Safety Committee (CC chair) | Not required | 4.0 |
| JNCC (Not required for all procedures) | N/A | |

Distribution:

This document has been distributed via:

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| E-Brief | - | |
| Email to relevant affected Staff/Officers | - | |
| Other: <i>(state method here)</i> | - | |

Diversity Impact Assessment:

| | |
|--|---|
| Has a DIA been completed? If no, please indicate the date by which it will be completed. If yes, please send a copy of the DIA with the procedure. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date: 16.11.2017 |
|--|---|

Consultation:

List below who you have consulted with on this procedure (incl. committees, groups, etc):

| Name & Title | Date Consulted | Version |
|--|----------------|---------|
| Occupational Health and Safety Committee | Not Required | |
| | | |

Implications of the Procedure:

Training Requirements

Clinical Waste Awareness Training for staff at high risk from clinical waste and contaminated sharps.

IT Infrastructure

None