

NSLHN Waste Management & Resource Recovery Plan

Remember the three R's.....

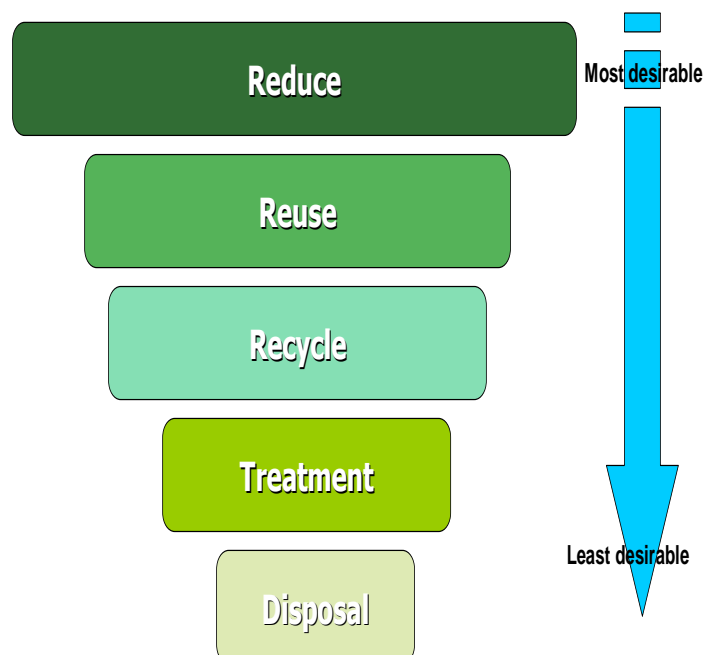


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1. GENERAL INFORMATION

1.1 NSLHN Waste Management & Resource Recovery Policy

NSLHN Hospitals are committed to develop, implement and maintain a waste management and resource recovery system throughout all levels of the business, which:

- supports the NSLHN Environmental Management Policy, available at http://intranet.nscchahs.nswhealth.net/AreaGov/NSGovSys/AreaPPGLibrary/Environmental%20-%20Cleaning%20-%20Linen%20-%20Waste/PO2009_010.pdf
- avoids waste production through purchasing strategies, reuse, maximised recycling and proper handling and disposal of the remaining refuse
- complies with all relevant legislation relating to waste and resource recovery, environmental protection, and occupational health and safety, NSW Government Waste Reduction and Purchasing Policy, NSW Health Infection Control Policy and the NSW Health Waste Management Guidelines for Health Care Facilities, Aug. 1998
- is based on measurable objectives and continual improvement methods, and
- will provide a safe work environment and protect the our environment from damage

1.2 Waste Management & Resource Recovery Policy Objectives

Our objective is to:

- Maintain the standards set by relevant professional and statutory bodies, ACHS Equip 3.2.3 , NSW DOH Waste Reduction and Purchasing Policy, and other regulatory / legislative requirements
- Determine and meet the waste management requirements of all departments through structured and continued feedback
- Foster commitment from all staff and management to actively participate in waste avoidance, reduction, reuse and recycling programs
- Provide a continuing waste and resource management education program for staff to increase awareness of waste minimisation principles, Occupational Health and Safety issues and quality improvement ethics
- Establish and maintain effective mechanisms to monitor, review, analyse and evaluate the waste management system and enable its continual improvement
- Reports and Statistical data published on the intranet for Stakeholders.
- Develop benchmarking partnerships with facilities within and beyond NSLHN.
- Provide a point of contact for Area Corporate Services quality improvement activities
- Promote a working relationship with preferred suppliers of Area Corporate Services products and services
- Manage the services within available resources
- Implement the Waste Management and Resource Recovery Operating Procedures and Work Instructions, throughout each facility to minimise the environmental impact of waste treatment and disposal

1.3 Targets

- Waste streams are 90% correctly segregated
- No clinical waste corruption in any other waste stream
- To treat the NSLHN General Waste to reduce the amount that goes to landfill.

1.4 Key Features of the Waste Management & Resource Recovery System

- Waste stream segregation at the point of generation is achieved in order to constrain waste disposal costs, maximise reuse and recycling, and limit the impact on the environment
- Waste and recyclable items are to be handled in accordance with the **Work Instructions** and **Operating Procedures** listed on the intranet located at Environmental Services – Waste Management
- Where ever possible, waste and recyclable items are collected and transported in Mobile Garbage Bins (MGB's) to the waste and recycling collection points on site. Mobile Garbage bins are used to enhance health and safety by reducing the risk of needle stick injuries and spillage
- The Mobile Garbage Bins and / or their labels are colour coded where possible for each waste stream to assist the process of waste segregation
- MGB's, and smaller bags and bins are conveniently located in or near each department and point of generation to enable segregation of all waste and recyclable resources into the appropriate streams. Offices are supplied with recycle paper bins.
- Separate programs have been developed for the collection and disposal of the following waste and recyclable items:

Hazardous Substances

- Clinical Waste
- Sharps (clinical waste)
- Anatomical waste
- Cytotoxic Waste
- Pharmaceutical Waste
- Chemicals & other hazardous substances
- Radioactive Wastes
- Fluorescent light tubes

Non-Hazardous

- General Waste
- Sanitary Waste

Recyclable Resources

- Paper & paper towel
- Confidential Paper
- Cardboard
- Plastic & Aluminium
- Glass
- Tin Cans and steel
- Toner Cartridges
- Furniture & Equipment
- Grease Trap Waste

- External Contractors remove the majority of waste and recyclable resources from the hospital sites for processing or disposal
- Charts and labels are provided to assist understanding of streaming requirements and available equipment including the following:

'Waste Container types, colours, areas allocated & collection process' at

<http://intranet.nscchahs.nswhealth.net/corpsupport/environmental/wastemgt/Documents/Supporting%20Documents/Waste%20Container%20Types%20WM-SD-06.doc>

Disposal Guideline charts are available for:

General and Patient care areas at

[http://intranet.nscchahs.nswhealth.net/corpsupport/environmental/wastemgt/Documents/Supporting%20Documents/Waste%20Disposal%20Guidelines,%20Generic%20\(CC\)%20WM-SD-09.doc](http://intranet.nscchahs.nswhealth.net/corpsupport/environmental/wastemgt/Documents/Supporting%20Documents/Waste%20Disposal%20Guidelines,%20Generic%20(CC)%20WM-SD-09.doc)

Pharmacies

<http://intranet.nscchahs.nswhealth.net/corpsupport/environmental/wastemgt/Documents/Supporting%20>

[Documents/Waste%20Disposal%20Guidelines,%20Pharmacy%20WM-SD-14.doc](#)

Laboratory Areas

<http://intranet.nscchahs.nswhealth.net/corpsupport/environmental/wastemgt/Documents/Supporting%20Documents/Waste%20Disposal%20Guidelines,%20Laboratory%20WM-SD-11.doc>

Asset Services

<http://intranet.nscchahs.nswhealth.net/corpsupport/environmental/wastemgt/Documents/Supporting%20Documents/Waste%20Disposal%20Guidelines,%20Asset%20Services%20WM-SD-07.doc>

- Colour coded bin labels for waste streams are provided as required
- All documents are controlled through the Area Environmental Support Team to ensure they are reviewed regularly and current
- To facilitate access by those that need it, documents are available on the Environmental Services Intranet via links provided, or the Environmental Services shared computer drive .Comprehensive waste minimisation and management training is available in a number of forms for different audiences
- A process for training competency development and assessment is in place to ensure correct implementation of the work instructions and procedures
- Three key performance indicators have been set:
 - 90% of the waste stream is correctly segregated
 - No clinical waste is to be in any other waste stream
 - To treat the NSLHN General Waste to reduce the amount that goes to landfill.
- Cleaning staff that empty the bins and remove the wastes to central locations for disposal regularly monitor the waste streams to verify the Waste Management Service Plan. Poor segregation practices are documented following the Waste Segregation Compliance Procedure at <http://intranet.nscchahs.nswhealth.net/corpsupport/environmental/adminmgt/Documents/Work%20Instructions/Waste,%20Segregation%20Compliance%20ADMIN-WI-07.doc>
- Waste weight and cost statistics are regularly kept and reviewed
- The Area Environmental Support Team monitors and reviews the waste management process, recommends changes, and amendments to Policy, Operating Procedures and Work Instructions.
- Benchmarking between the facilities is undertaken to assess progress
- Avoidance strategies are encouraged through purchasing and reuse strategies:
 - Choosing products with reduced packaging
 - Choosing re-useable products in preference to disposable products
 - Minimising draft printing
 - Using electronic media eg., e-mail instead of paper
 - Printing on both sides of paper
 - Reusing backs of paper for draft copy printing
 - Converting used paper to note pads
 - Reusing Sterile wrap (Kimguard) as drop sheets, table covers etc.

2. KEY RESPONSIBILITIES

2.1 Employer's Legal Responsibilities

Employers have a number of legal responsibilities, which include:

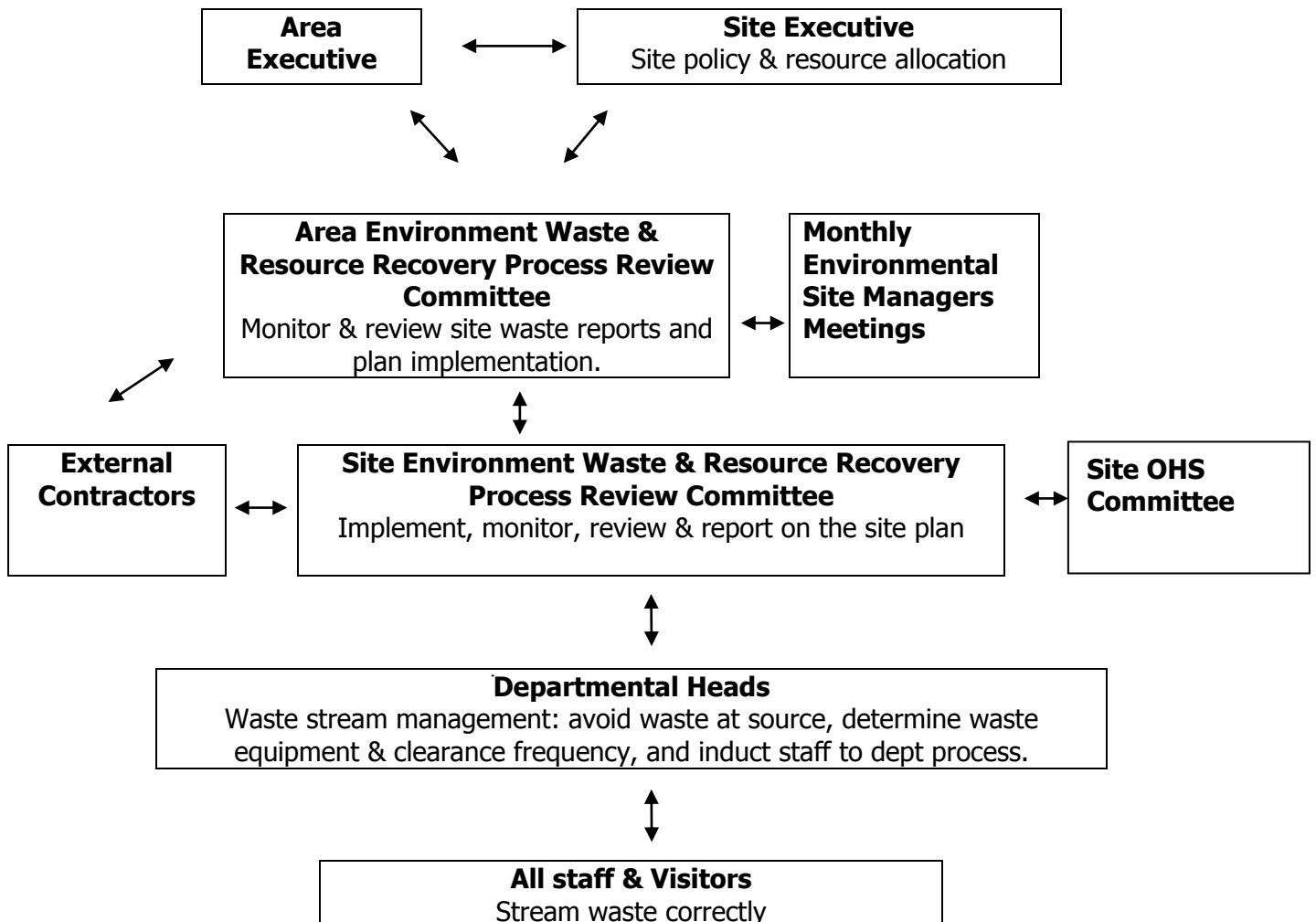
- developing and maintaining a safe work environment and safe work practices
- ensuring hospital activities do not breach environmental standards prescribed in the State and Federal legislation
- providing staff training and education for the safe handling of waste

2.2 Employees Responsibilities

Employees also have responsibilities, which include:

- complying with safety instructions and use safe work practices for their own protection and for the protection of other staff and the public
- actively supporting environmental initiatives
- complying with the requirements for the handling of hazardous substances according to Material Safety Data Sheets (MSDS)

2.3 Waste Minimisation & Management Responsibility Structure



2.4 Area Environment, Waste & Resource Recovery Process Review Committee

Terms of reference

The terms of reference cover strategic planning and development, linkages with other organisations such as DOH, Area Health Services, and EPA.

Role

The Area Environment, Waste & Resource Recovery Process Review Committee is responsible for strategic development of waste minimisation and resource recovery activities. The Committee will work with the Site Environmental Managers, OH&S, Infection Control, External Contractors and the Waste & Resource Recovery Process Review Committee to implement the policy and plan.

2.5 Site Environment, Waste & Resource Recovery Process Review Committee

Terms of reference

The terms of reference cover implementation, monitoring, analysis, review and continuous improvement of the Waste Minimisation and Resource Recovery Plan, Policy and Procedures.

Role

The Site Environment, Waste & Resource Recovery Process Review Committee is responsible for the development, implementation and evaluation of effective waste minimisation and resource recovery activities. The Committee will review the following topics and initiate / recommend action to achieve best practice in waste management within available resources. Without limiting the scope of the Committee, the role of the Committee is to:

- Review the Waste Management and Resource Recovery system, Policy and Procedures, including the waste management structure, performance management, the waste stream definitions and strategies, procedural guidelines and reporting procedures.
- Review waste handling, containment and transportation, including handling procedure, separation of waste streams, microbiological and pathological waste housekeeping, waste bags, trolleys, bins, holding areas, motor vehicle transport and tracking.
- Support implementation of ongoing waste reduction initiatives including re-use, recycling and minimisation;
- Review occupational health and safety issues including hygiene, manual handling, personal protective equipment provision and use, sharps injuries and vaccination programs.
- Undertake audits and review audit procedures and results
- Liaise closely with the Occupational Health and Safety Committee, Infection Control Committee and Product Evaluation Committee on Waste Management Issues
- Review literature and implement Standards for waste management
- Review cost effectiveness of waste minimisation and management strategies
- Review costs and HIE reports

3. WASTE STREAM QUALITY ASSURANCE

3.1 Auditing

Waste Quality Assurance Inspection Report

Audits of the various waste streams are undertaken by the Environmental Services Department to determine waste management performance, confirm waste segregation practice and benchmark against waste targets and other hospitals. Audits take a range of forms.

The [Waste, Segregation Compliance ADMIN-FM-43](#) form is used to report the waste stream practices when a problem has been observed with the segregation or disposal process. Members of the Environmental Services complete the form and copies are kept in each Department in the Cleaners room. Incorrect items observed for the waste stream are identified by placing a tick in the box next to items found which should have been placed in another waste stream. The comment box is used to identify other issues about the waste stream such as overflowing or broken bins. The form is given to the Environmental Services Manager or to the team / shift supervisor who will forward it to the Environmental Services Manager. The Environmental Services Manager will provide copies to the Dept Manager and ensure that the follow up action is implemented and the process is signed off following completion.

Clinical Waste Segregation Audits

Audits are undertaken by the external clinical waste contractor. The aim of the audit is to measure the amount of improperly disposed of waste items and obtain corrective action from staff at the point of waste generation. Compliance reports identifying the various departments are submitted to Environmental Support Team and published on the Environmental Services intranet site. Copies are also given to the site Environmental Services Manager for redistribution to the audited departments.

Environmental Risk Assessment Report

The Manager should use the document located at; <http://intranet.nscchahs.nswhealth.net/corpsupport/environmental/adminmgt/Documents/ADMIN%20Forms/Environmental%20Risk%20Assessment%20Report%20ADMIN-FM-13.doc> to review, assess and document any hazards, risks or issues in their area, make recommendations, and direct the information to those people who are able to fix the problem. If the problem cannot be fixed locally the report is directed to whoever must accept the risk and responsibility for not fixing it. Copies should be provided to the Site Waste & Resource Recovery Process Review Committee for action. A risk or hazard is anything that is likely to cause injury or damage to people or the environment. This may include unsafe work practices, dangerous goods or equipment, chemicals that could cause harm, poor waste management, water or energy wastage, poor purchasing practices etc.

3.2 Reporting

Waste Data Reports.....

Statistics and weights are provided by the External contractors for all waste streams. These statistics are used for reporting of waste KPI's and published on the intranet on the Environmental Services site.

3.3 Benchmarking

KPIs are published on the Environmental Services intranet site allowing sites and departments to benchmark against each other.

NSLHN also participates in a benchmarking exercise comparing waste KPIs from Royal North Shore Hospital with those from other tertiary (teaching) Hospitals in NSW.

4. EDUCATION AND TRAINING

4.1 Waste Handling Training & Management Resources

The resources available to managers and staff for training include the following:

- [PO2009 010 Waste Management and Resource Recovery Policy - NSCCAHS](#)
- [Waste Container Types WM-SD-06](#)
- [Waste Disposal Guidelines, Pharmacy WM-SD-14](#)
- [Waste Disposal Guidelines, Laboratory WM-SD-11](#)
- [Waste Disposal Guidelines, Asset Services WM-SD-07](#)
- [Waste Segregation Type WM-SD-15](#)
- [Waste Disposal Guidelines, Generic \(CC\) WM-SD-09](#)
- [Waste, Segregation Compliance ADMIN-FM-43](#)

5. SPECIFIC WASTE STREAM PRACTICES

5.1 General Information for Handling Waste

Hygiene

- ALL staff who handle waste are to wash hands thoroughly after collection
- All transport trolleys, garbage room, and truck to be cleaned when soiled

Occupational Health & Safety Precautions

Copies of the Occupational Health and Safety Act and Regulations are available through Workforce. All staff who handle waste and recyclable materials:

- Receive training in all relevant Work Instructions and Operating Procedures. Training includes infection control, personal hygiene, safe handling techniques, correct use of Personal Protective Equipment, spill management procedures and the requirements of the Occupational Health and Safety Act 2000.
- Are issued with a comprehensive statement of duties and standard operating procedures and work instructions
- Are issued with appropriate Person Protective Equipment and compelled to wear it while handling waste
- Have access to equipment and facilities that minimise manual handling and promote personal hygiene
- Have access to and are familiar with Material Safety Data Sheets (MSDS) for all chemicals used
- Are aware of the requirements of the Infection Control Policy (02/45)
- Are offered appropriate vaccination. Staff vaccination records are kept by Staff Health

Staff are required to:

- Carry out their work in accordance with the Work Instructions and Operating Procedures
- Immediately report all waste handling injuries and incidents to the individual's supervisor
- Incidents and injuries are recorded on an Accident / Incident report form and investigated by the relevant supervisor / manager of the injured person. Preventive action will be initiated as soon as practical and a report submitted to the Occupational Health and Safety Committee)
- Handle all waste as if potentially hazardous
- Wear gloves when handling waste
- Report any problems with equipment such as garbage trolleys and MGB's so they can be maintained in good working order
- Ensure garbage trolleys are not overloaded
- Transport general waste and clinical waste separately
- Strictly follow all manual handling and back care practices

Cleaning of Waste Collection Areas and Equipment

- Garbage or waste containers should be cleaned in hot soapy water and dried
- The waste collection areas must be kept free from vermin ie. flies, rats, cockroaches etc.
- The presence of vermin must be reported immediately to the Environmental Services Supervisor, the Infection Control Clinical Nurse Consultant and the Maintenance Department

5.2 Emergency Procedures and Incidents

Incident reporting

In the event of the following occurrence an Incident / Accident report form should be completed and the Environmental Services Manager notified immediately:

In case of spillage

- If sharps or contaminated objects are found in the incorrect waste stream
- If sharps or non-contaminated waste is found in contaminated waste bins
- If sharps containers are found with the inappropriate objects
- If an injury occurs

The application of appropriate precautions for each of these incidents should be included in the response to the above incidents. Follow up Procedures for anyone who has received a needle stick injury are contained in the Policy for Needlestick Injury or Blood and /or Body Fluid Exposure.

Incorrect Segregation of Clinical waste into the General Waste Stream

If clinical waste is found to be in the general waste stream the bin and/or waste compactor should be isolated immediately and Environmental Services contacted. The contract provider will then be contacted for further action.

5.3 Clinical Waste

Clinical waste is waste that has the potential to cause infection or offence. When packaged and disposed of appropriately, there is virtually no public health significance. Clinical waste contains the following:

- human tissue (excluding hair, teeth and nails)
- bulk body fluids and blood **
- visibly blood stained body fluids and visibly blood stained disposable material and equipment
- laboratory specimens and cultures
- animal tissues, carcasses or other waste arising from laboratory investigation or for medical

** **Bulk:** Free flowing liquids normally contained within a disposable vessel or tubing, not capable of being safely drained to the sewer.

Waste removal

Waste should be removed in accordance with the following Work Instructions;

- [Emptying Small General Waste, Recyclable Waste and Clinical Waste Bins \(MDH\) WM-WI-13](#)
- [Anatomical / Clinical / Cytotoxic Waste Collection WM-WI-00](#)

Spill Kits

A Spill Kit is to be maintained at the Clinical Waste Collection Point containing:

- Broom, mop and mop bucket
- a large (10 litre) reusable plastic container or bucket with fitted lid, containing
- 2 plastic general waste garbage bags for the disposal of any general waste
- 2 Clinical waste bags for the disposal of Clinical waste
- a pan and scraper
- disposable rubber gloves suitable for cleaning
- neutral detergent
- disposable cloths and sponges
- disposable overalls
- heavy duty gloves suitable for handling Clinical waste
- eye protection
- a plastic apron
- a mask (for protection against inhalation of powder from disinfectants, or aerosols generated from the spills).
- incident report form
- waste spill sign

5.4 Sharps (Clinical Waste)

Sharps are classified as any object capable of inflicting a penetrating injury, which may or may not be contaminated with blood and / or body substances. This includes needles and any other sharp objects or instruments designed to perform penetrating procedures.

Waste removal

Waste should be removed in accordance with the following Work Instructions;

- Sharps Containers, Safe Handling and Removal and / or Disposal of WM-WI-23

Storage of clinical and sharp waste after removal from clinical areas

- The storage area is to be locked
- The presence of vermin must be reported immediately to the Supervisor of Cleaning Services, the Infection Control Clinical Nurse Consultant and the Maintenance Department
- A record shall be kept of the collection dates and names of transportees in respect of contaminated waste for a period of twelve (12) months

Tracking

Although Sharps are a form of Clinical / hazardous Waste, at this stage the EPA does not require the sharps waste to be tracked.

5.5 Anatomical Waste

Anatomical waste comprises human tissue and body part waste arising from theatre, the mortuary or laboratory investigations. Within NSH Anatomical waste is separated from other clinical wastes for incineration.

Waste removal

Waste should be removed in accordance with the following Work Instruction:

- [Anatomical / Clinical / Cytotoxic Waste Collection WM-WI-00](#)

5.6 Cytotoxic Waste

Cytotoxic waste means material contaminated with residues or preparations containing materials toxic to cells, principally through action on cell reproduction. This includes any residual cytotoxic drug, and any discarded material associated with the preparation or administration of cytotoxic drugs.

Waste removal

Waste should be removed in accordance with the following Work Instruction:

- [Anatomical / Clinical / Cytotoxic Waste Collection WM-WI-00](#)

5.7 Pharmaceutical Waste

Consists of pharmaceutical or other chemical substances specified in the Poisons List under the Poisons and Therapeutic Goods Act 1966. Pharmaceutical substances include expired or discarded pharmaceuticals, filters or other materials contaminated by pharmaceutical products.

Waste removal

Waste should be removed in accordance with the [Waste Disposal Guidelines, Pharmacy WM-SD-14](#)

5.8 Hazardous Substances

Chemical waste is generated from the use of chemicals in medical applications, domestic services, maintenance, and laboratories, during sterilisation processes and research. It includes mercury, cyanide, azide, formalin, and solvents, which are subject to special disposal requirements. Chemical wastes included in the Dangerous Goods Regulations and Poisons and Therapeutic Goods Act are also included in this stream.

Disposal

Reference should be made to the Material Safety Data Sheet, which can be obtained, from the manufacturer and supplier for handling precautions, instructions and the person protective equipment, which is necessary for staff protection. A register of MSDS is held in the Emergency Department and MSDSs are obtainable from ChemAlert on the intranet.

WorkCover and the EPA can be contacted for information regarding specific chemicals. Reference should also be made to the Australian Code for the Transport of Dangerous Goods by Road and Rail.

Waste removal

Waste chemicals should be removed in accordance with the following:

- [Chemical Waste Collection Requirements WM-FM-00](#)

5.9 Radioactive Waste

Radioactive waste is material contaminated with radioactive substances which arises from medical or research use of radionuclides. It is produced, for example, during nuclear medicine, radioimmunoassay and bacteriological procedures, and may be in a solid liquid or gaseous form and includes the body waste of patients under treatment. Reference should be made to the *Radiation Control Act 1990* and the Radiation Control Regulation 1993.

Radioactive waste, once lead shielded and allowed to decay to a safe level as set by the regulatory authority, is no longer deemed to be radioactive waste. Certain radioactive wastes are classified as hazardous waste in the Waste Regulation.

5.10 Paper & Paper Towel and Cardboard

Includes used paper hand towel, office paper, newspapers, magazines (staples and clips included), shredded paper and cardboard boxes.

5.11 Confidential Paper

Any paper item that contains patient identifying information, commercial in confidence information, human resource records.

5.12 Co-Mingle

- Plastics for recycling include items with numbers 1,2,3,4 or 5 on the base usually with a recycling symbol also.
 - 1 – PET Polyethylene Tetraphthalate – soft drink, water, juice, detergent, turps, meths, kero clear and coloured bottles, blister pack food trays.
 - 2 – HDPE Hi-density Polyethylene – milk bottles, sauce cordial and juice bottles; margarine containers; shampoo, conditioner bottles; food trays and toner bottles; cleaner, disinfectant & detergent bottles and drums; medical bottles.
 - 3 – PVC Poly Vinyl Chloride – plumbing pipes & fittings, cordial & juice bottles, blister packs
 - 4 – LDPE Low density Polyethylene – garbage bins, black irrigation tubes, ice cream and other lids, soft plastic bottles
 - 5 – PP Polypropylene – plastics suitable for microwave use, ice cream containers, baby baths, plastic hinged lunch boxes, juice and sauce bottles; cleaning liquids; wrapping plastics excluding chip packets and other wrappers.
- Aluminium items including soft drink cans, foils and trays.
- All Glass containers clear and coloured.
- All tin cans, including those from kitchens that have been emptied and rinsed.

5.13 Toner cartridges

Waste removal

Toner cartridges are removed in accordance with the following Work Instruction:

- [Cartridge - Ink Printer / Copier Collection WM-WI-08](#)

5.14 Furniture and Equipment

Waste furniture and equipment is split into two categories: Junk or broken furniture and equipment that is collected for transport to the tip; and obsolete surplus or out of date furniture and equipment which is in working order but which cannot be used in Australia, is collected for use overseas.

Waste removal

Waste should be removed in accordance with the following Work Instruction:

[Waste, Furniture / Equipment Collection WM-WI-27](#)

5.15 General Waste

According to the EPA and NSW DOH general waste is defined as any waste not included above, which is not capable of being composted, recycled, reprocessed or re-used. The NSW Health Dept. Guidelines include incontinence pads, sanitary waste and disposable nappies in this category.

Waste generated in the kitchens, maintenance, engineering and office areas within the health industry, is accepted at the transfer station by NSW Waste Services.

Waste removal

Waste should be removed in accordance with the following Work Instruction as appropriate;

[General and Health Care Facility \(HCF\) Waste Collection WM-WI-14](#)

5.16 Liquid Waste

Liquid wastes are defined in the Waste Regulation. These wastes include grease trap waste, used lubricating oil and waste normally discharged to the sewer.

Grease traps may be serviced with biodegrading systems. Pump out of traps is in accordance with the following schedule: **To be filled out by Maintenance Department.**

Location	Bio system Company	Cost	Pumpout Service	Cost	EPA Licence Number

Schedule of Contractors for Each Waste Stream

Waste Type	Name of Contractor and/or Transporters	Contract Expiry	Contact Phone	Method of Treatment	Notes
General Waste	SITA	31/09/2014	131315	Treated	Advanced Waste Treatment, residual to landfill
Clinical Waste	Sterihealth	Off contract	02 9748 4552	Autoclaving	Residual to landfill
Sharps	Sterihealth	Off contract	02 9748 4552	Incineration	Residual to landfill
Cytotoxic/Anatomical	Sterihealth	Off contract	02 9748 4552	Incineration	Residual to landfill
Grease Trap	Veolia			Reuse	Refer to Maintenance Operations
Hazardous Chemicals	Chemsal Pty Ltd		02 9833 4399	Mixed	
Pharmaceutical	Sterihealth	Off contract	02 9748 4552	Incineration	Residual to landfill
Radioactive	Chemsal Pty Ltd		02 98334399	Storage/decay	Residual to landfill
Lead	Chemsal Pty Ltd		02 9833 4399	Recycling	
Paper	SITA	31/09/2014	131315	Recycling	Co-mingled recycling
Cardboard	SITA	31/09/2014	131315	Recycling	Co-mingled recycling
Plastics & Aluminium	SITA	31/09/2014	131315	Recycling	Co-mingled recycling
Glass	SITA	31/09/2014	131315	Recycling	Co-mingled recycling
Food Waste	SITA	31/09/2014	131315	Recycling	Co-mingled recycling
Tin Cans	SITA	31/09/2014	131315	Recycling	Co-mingled recycling
Mercury / amalgam	Chemsal Pty Ltd		02 9833 4399	Recycling	
x-ray film				Recycling	Refer to Medical Imaging
Batteries	SITA	31/09/2014	131315	None	
Silver	Chemsal			Recycling	
Out of date equip. etc	AFAP			Reuse OS, schools, etc	Reuse
Junk equipment	Any Private Contractors		Any	None	Disposal to landfill
Computers	IM&T				Refer to IM&T
Others	SITA	31/09/2014			Refer to Environmental Services for advice