

# Safe Disposal of Clinical Waste

The source information was extracted from a booklet from the Health Services Advisory Committee entitled "Safe Disposal of Clinical Waste"

## Categorisation of Clinical Waste

Waste Group	Type of clinical waste	
Group A	Includes the following items: identifiable human tissue,* blood, animal carcasses and tissue from veterinary centres, hospitals or laboratories. Soiled surgical dressings, swabs and other similar soiled waste. Other waste materials, for example from infectious disease cases, excluding any in Groups B-E.	<ul style="list-style-type: none"><li>• is safe and non-infectious; and</li><li>• cannot be distinguished from other similar non-clinical wastes.</li></ul> <p>In these circumstances, the waste may be classed as non-clinical waste. The most effective kind of evidence is documentary proof that the waste has been suitably and successfully treated to ensure the removal of any hazard to anyone who may come into contact with it.</p>
Group B	Discarded syringe needles, cartridges, broken glass and any other contaminated disposable sharp instruments or items.	
Group C	Microbiological cultures and potentially infected waste from pathology departments and other clinical or research laboratories.	<b>Special Waste</b> <p>Some clinical waste is also classified as 'special waste', and subject to controls under the Special Waste Regulations 1996. These apply over and above other waste management controls. The Agencies have assessed types of clinical waste, and their view is that only the following will be subject to the Special Waste Regulations 1996.</p> <ul style="list-style-type: none"><li>• waste containing Advisory Committee on Dangerous Pathogens (ACDP) Hazard Group 4 biological agents. It is rare that any untreated pathogens in this category are transported. An example of where clinical waste needs to be consigned for disposal as special waste is waste from a viral haemorrhagic fever patient, cared for initially at premises where there are no facilities for autoclaving. This waste must be treated as special waste; and</li><li>• waste containing or consisting of prescription-only medicines.</li></ul>
Group D	Drugs or other pharmaceutical products.	
Group E	Items used to dispose of urine, faeces and other bodily secretions or excretions which do not fall within Group A. This includes used disposable bed pans or bed liners, incontinence pads, stoma bags, and urine containers.†	

\* All identifiable human tissue, whether infected or not, may only be disposed of by incineration.

† Where the risk assessment shows there is no infection risk, Group E wastes are not clinical waste as defined.

## Treated Waste

Producers of treated waste who do not want to treat it as clinical waste under environmental legislation, need to be able to show the Environment Agency or the Scottish Environment Protection Agency ('the Agencies') that it:

Some waste from human hygiene may carry micro-organisms. Examples include:

- sanitary towels;
- tampons;
- nappies;

- stoma bags;
- incontinence pads; and
- other similar wastes, provided that they do not contain sharps.

The following wastes may also contain micro-organisms:

- pregnancy kits;
- blood cholesterol testing devices; and
- condoms.

When such waste is generated in the home, the source populations is generally healthy, and the waste is not considered to be either infectious or clinical waste. The householder may put it into the domestic waste, provided it is adequately wrapped and free of excess liquid.

Similar wastes may also be generated in the home by people who are undergoing medical treatment. In these cases, the patient's general practitioner may, in consultation with the local Consultant for Communicable Disease Control, identify a specific risk associated with the illness, and make appropriate arrangements for disposal of the waste. If there is no specific risk associated with the patient's illness, then such wastes are not clinical waste, since they do not present a significant risk, either to family members or others. The householder may put such waste into the domestic waste, provided it is adequately wrapped and free of excess liquid.

Human hygiene waste is also generated in, for example:

- child care centres;
- schools;
- nurseries;
- motorway service areas;
- airports;
- shopping malls;
- offices;
- factories; and
- sports complexes.

Here again, the usual assumption is that such waste is not clinical waste, since the source population is essentially healthy, and the risk of infection is no greater than that from domestic waste. However, those doing the risk assessment may have local knowledge which means they cannot make this assumption.

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\* In Scotland, Consultant in Public Health Medicine (Communicable Disease and Environment Health)

Although human hygiene wastes from these sources may be non-clinical wastes, in quantity they can be offensive and cause handling problems, particularly on collection. In order to assist producers and those collecting waste in meeting the requirements of the duty of care, it is considered appropriate to package human hygiene waste separately from other waste streams, where the premises generate more than one standard bag/container of this waste, over the normal collection interval. An example of a commonly used colour coding system is given in paragraph 72. Such wastes may still be collected and disposed of as part of the municipal waste stream.

Residential homes<sup>\*\*</sup> and nursing homes<sup>†</sup> cannot assume a healthy source population. Risk assessment will show that their waste falls into two groups:

- those items or categories of items, that represent a significant risk of infection; and
- those that do not.

Those in the first group are clinical waste and should be treated as such, while those in the second group may be treated as domestic waste. However, the offensiveness of substantial quantities of non-infectious waste needs to be taken into account when deciding on how to package the waste.

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\*\* Residential homes are premises registered under the Registered Homes Act 1984 Part 1 Residential Care Homes and in Scotland, under the Social Work (Scotland) Act 1968 as amended.

† Nursing homes (including acute independent hospitals) are premises registered under the terms of the Registered Homes Act 1984 Part 2 Nursing Homes and Mental Nursing Homes, and in Scotland, the Nursing Homes Registration (Scotland) Act 1938.