

COVID-19 waste management standard operating procedure

November 2021, Version 6

Updates from version 5 (published in April 2021) are highlighted in yellow

This document sets out the waste management approach for all healthcare facilities including primary care facilities and testing facilities in England.

It draws on the key principles of HTM 07-01, Safe Management of Healthcare waste to ensure that systems are in place to ensure that waste is managed in a safe manner and critical waste disposal resources are not exhausted during the COVID-19 emergency response.

We need to work together across organisations to collectively ensure waste management services during a period of expanded demand.

What does this mean for healthcare staff?

You must apply the [HTM 07-01](#) across your facilities when re-opening services for non-COVID-19 patients. The COVID-19 procedure below needs to be applied for COVID-19 areas.

The Advisory Committee on Dangerous Pathogens designates waste arising from COVID-19 patients as infectious clinical waste (EWC code 18 01 03*). It must be packaged in UN-approved orange bags in accordance with the safe management of healthcare waste (HTM 07-01). The transport categorisation for this waste is Category B. Sharps and pharmaceutically contaminated items should continue to be segregated into appropriate containers sent for incineration; these should not enter the orange bag stream.

In response, **all healthcare settings** should **make every effort** to ensure that:

- All outer **packaging** must be removed and recycled, **where possible**, before an item is taken onto any ward or clinical area.
- All waste produced in a healthcare setting should be correctly segregated.
- All **confidential waste** must be put into confidential **waste** bins.
- All **sharps and anatomical** waste must be put into the relevant receptacle with an appropriately coloured lid as per HTM 07-01, and these do not need to be put into an orange bag
[\(<https://www.gov.uk/government/publications/guidance-on-the-safe-management-of-healthcare-waste>\)](https://www.gov.uk/government/publications/guidance-on-the-safe-management-of-healthcare-waste)
- In summary, infectious clinical waste **including waste visibly contaminated with respiratory secretions (such as sputum or mucus from the mouth and nose) generated from an individual who had tested positive for COVID-19 and is still within their required isolation period**, should be treated like any other infectious clinical waste – that is, as it would be for TB, hepatitis, etc, following national **waste** regulations.

Hospitals in addition should **always** ensure that:

- All **food waste** must be disposed of in black bags/compostable bags.
- **Soiled linen** must be put into alginate bags and then into relevant outer bags (usually white according to local policy). Linen must not be put into waste streams.
- Non-ambulatory patients – **urine and faeces** to be **disposed of via** the sluice/toilet. Where no sluice/toilet is available, excreta may be **solidified with absorbent or gelling granules** and disposed of in an orange bag. If bed bound, urine from catheter taken to sluice/toilet. The use of **gelling** granules must be strictly controlled as described in this NHS National Patient Safety Alert; <https://www.england.nhs.uk/publication/patient-safety-alert-superabsorbent-polymer-gel-granules/>. Ambulatory patients can go to the toilet as normal where safe and feasible to do so.
- Where **medicines** are prepared in a clean area, pharmaceutical waste must be separated into the following receptacles:
 - Blue – non-hazardous healthcare medicines for incineration
 - Purple – waste contaminated with cytotoxic and cytostatic medicines for incineration.
- Waste should be bagged in the appropriate colour bag. Where clinical waste carts are used, the bagged waste must be put into **the** carts awaiting collection

and disposal. Please ensure that all bins are full before releasing them from site.

- Disposal of **waste contaminated respiratory secretions** related to possible or confirmed cases should be classified as infectious clinical waste suitable for alternative treatment and transported as category B, unless the waste has other properties that require it to be incinerated.
- No domestic waste is to be sent directly to landfill from acute hospital settings.
- Confidential waste generated on all wards (including isolation wards) must be disposed of via the existing confidential waste route.

Primary care services

- Waste generated in general practice or primary care dental settings from a person who has been confirmed or is suspected to have COVID-19 must be disposed of as Category B waste. The transport of Category B waste is described in [Health Technical Memorandum 07-01: Safe management of healthcare waste](#).
- 'Social distancing' waste, eg facemasks or gloves generated in community pharmacy and primary care optical settings from a face-to-face consultation, should be disposed of as normal domestic residual waste. All other waste should be managed as described in [Health Technical Memorandum 07-01: Safe management of healthcare waste](#).
- Medicines returned to a community pharmacy by a patient should be segregated as per usual requirements, and then placed directly in the appropriate waste medicines container. Unwanted controlled drugs (CDs) should be placed in the CD cabinet for three days before denaturing as per the usual pharmacy process.

Community patients/clinical staff working in people's homes

- Where clinical staff are providing services in the home of a patient who has **tested positive for COVID-19 and is still in their isolation period, then PPE can be left behind in a bag. Waste should only be considered infectious clinical waste if it is visibly contaminated with respiratory secretions such as sputum or mucus from the mouth and nose. If the patient's bin is due to be collected in the next 72 hours, the contaminated waste should be put in a bag and put out after the bin has been collected.**
- Community teams advising relatives caring for patients in their own homes are advised to follow the same guidelines.

- Guidance can be found at <https://www.gov.uk/guidance/coronavirus-covid-19-disposing-of-waste-for-waste-management-from-non-healthcare-premises>

NHS ambulance trusts

- The above principles should be applied across the ambulance sector.
- Patient transport service (PTS) crews should dispose of their food and packaging waste in general domestic waste bins.
- To minimise the risk of infection, staff and volunteers supporting the transport of patients with a confirmed or suspected diagnosis of COVID-19 should implement current guidance for the NHS on appropriate and proportionate use of PPE and decontamination of vehicles. The latest guidance for the conveyance of suspected or confirmed COVID-19 patients can be found at: <https://www.gov.uk/government/publications/covid-19-guidance-for-ambulance-trusts/covid-19-guidance-for-ambulance-trusts>.

Key point for non-COVID-19 areas

You must apply the HTM 07-01 and the correct segregation in line with infectious and non-infectious protocols.

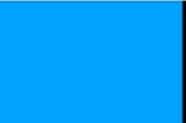
Segregation of waste

The simple guides below – which should be used across your facilities – will help staff correctly segregate waste in all areas, staff offices, public areas, and entrances and exits.

Segregation guidance is provided for staff areas, public areas and healthcare setting entrances and exits to deal with the specific issues arising from the new requirement for all staff (clinical and non-clinical); patients and visitors are to wear masks or face coverings throughout NHS hospitals, or [advised to wear face masks/face coverings in primary care](#).

- Where areas are COVID-19 secure, eg offices and food preparation areas, masks and face coverings **should be** discarded in the domestic waste stream if no longer required.
- Masks and face coverings worn by patients, visitors and non-clinical staff who have entered a clinical area should be discarded in the offensive waste stream if no longer required. Bins for these should be located at the entrances and exits where masks are given to those who do not have them.
- Clinical staff should dispose of the surgical face mask in the offensive or infectious waste streams, depending on the procedures they undertook while wearing the mask.

NHS SOP Waste Segregation Guide

Colour Code	Waste Type	General Description	Receptacle
	Offensive Waste	Including non Infectious Soiled dressings, swabs, vomit bowls, incontinence pads. PPE	Tiger stripe bags
	Known infectious Waste	Known Infectious inc COVID-19 Soiled dressings, swabs, vomit bowls, incontinence pads. PPE	Bags & sharps boxes not contaminated with medicines
	Infectious Healthcare / Sharps	Infectious Healthcare Waste inc Needles, sharps contaminated with pharmaceuticals & Cat A	Bags, sharps boxes & rigid containers contaminated with medicines
	Cytotoxic Cytostatic Waste	Any waste contaminated with Cytotoxic / Cytostatic medications	Bags, sharps boxes & rigid containers
	Anatomical Waste	Recognisable Human tissue	Rigid containers
	Medicinal Waste	Time expired, surplus medicines and pharmaceuticals inc bottles & blister packs	Rigid containers
	Domestic Waste	Non-Recyclable items	Bins / Bags
	Recyclable Waste	Cardboard , outer packaging & other recyclable items.	Bins / Bags
	Confidential Waste	Identifiable Patient Data	Bins / Bags

* All sharps to be placed in tested / approved sharps bins

Non-clinical/staff only areas waste segregation

Colour Code			
Waste Type	Domestic Waste	Recyclable Waste	Confidential Waste
General Description	Non-recyclable items - PPE	Cardboard , outer packaging & other recyclable items.	Identifiable Patient Data
Receptacle	Bins / Bags	Bins / Bags	Bins / Bags

Non-clinical public area waste segregation

Colour Code		
Waste Type	Domestic Waste	Recyclable Waste
General Description	Non-recyclable items -	Cardboard , outer packaging & other recyclable items.
Receptacle	Bins / Bags	Bins / Bags

Entrances and exits waste segregation

Colour Code						
Waste Type	Offensive Waste					
General Description	PPE / Face Coverings					
Receptacle	Bag					

Vaccination programmes

Classification

Vaccination waste is classified differently depending on where the vaccination is delivered:

1. Vaccinations delivered in hospitals or GP surgeries: classification of **the sharps and vials** is 18 01 03*/18 01 09.
2. Vaccinations delivered in mass vaccination sites, in the community and in care homes: classification of the sharps and vials is 18 01 01/18 01 09. Note: this is **non-hazardous waste** and waste can be moved **with a duty of care waste transfer note**. The sharps waste while non-hazardous must still be disposed of at a hazardous waste/clinical waste incinerator or other suitably permitted facility.

Outer and secondary **vaccine** packaging poses a **significant security risk** from theft and therefore must be destroyed through the confidential waste stream:

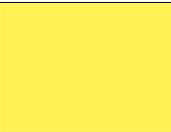
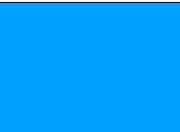
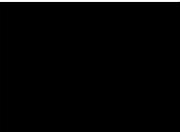
1. For hospitals and GP surgeries: this should be done via your existing confidential waste streams. Note: the packaging can be flattened easily.
2. For mass vaccination sites: this must be stored in a secure container(s) and shredded on site or consigned with a registered confidential waste contractor for off-site shredding, and a certificate of destruction must be supplied monthly as a minimum.

All PPE must be consigned as offensive waste no matter the site of delivery.

Please refer to the charts below for the different waste classifications at vaccination sites.

Vaccination sites

Table 1: Vaccination sites – provided by the healthcare professional

Colour Code						
Waste Type	Offensive Waste	Infectious Healthcare Sharps	Medicinal Waste	Domestic Waste	Recyclable Waste	Confidential Waste
General Description	Non Infectious swabs, vomit bowls, PPE	Needles, sharps contaminated with pharmaceuticals & COVID-19 Vaccine Vial.	Vaccine Vial	Non-recyclable items	Cardboard	Identifiable Patient Data & branded vaccine packaging
Receptacle	Bags	Sharps boxes (Reusable or rigid containers)	Rigid/ Reusable Containers	Bins / Bags	Bins / Bags	Bins / Bags

- All sharps to be placed in tested / approved sharps bins
- Medicinal waste needs to be risk assessed. If COVID -19 vials can be accessed then these need to be disposed of in the infectious healthcare sharps (Yellow Sharps Bins)

Healthcare professional testing

PCR and LFT undertaken by healthcare professionals in testing locations such as:

- acute and community hospitals
- general practitioner surgery
- outpatient clinics
- hospices
- social care (adult nursing care).

Healthcare professionals must follow their own healthcare establishment's waste management policy. Each establishment must ensure that its policy complies with the requirements for segregation of waste as set out in this SOP.

Working across government agencies

NHS England and NHS Improvement is working closely with the Environment Agency (EA) and Natural Resources Wales (NRW) to ensure **healthcare waste** is processed in line with legislative requirements. We will continue to work with the EA, NRW and other critical agencies, such as the Department for Transport (DfT), to ensure waste flows from healthcare premises to the relevant treatment facilities. Updates on Regulatory Position Statements (RPS) and/or relevant transport authorisations will be posted on the NHS Estates Collaboration Hub.

General advice from the Environment Agency (EA)

The EA is working closely with NHS England and NHS Improvement **and the UK Health Security Agency** to review options as the incident progresses. Its strategy (alongside managing other wastes) relies on you meeting all the above NHS requirements. It will continue to provide support via its local officers and/or centrally via the National Performance Advisory Group Best Value Group, and link with the below central waste co-ordination function.

- **Pre-acceptance audits:** when waste is swapped between contractors there will be no requirement to produce a new pre-acceptance audit during contingency arrangements.
- **Expiring pre-acceptance audits:** the EA **require** that the pre-acceptance waste audits are still completed and **up to date**. However, desktop audits for COVID-19 areas will be accepted to demonstrate compliance.

Central waste co-ordination function for NHS trusts

To support organisations during this time we have established a central waste co-ordination function. This will:

1. Co-ordinate daily operational activity across the supplier base. Supported by the Cabinet Office, we are working with all suppliers to ensure healthcare facilities are serviced no matter who the contract holder is.
2. Co-ordinate weekly cross-government communication, including from DHSC, Cabinet Office and DEFRA, and link in with the devolved nations, the **Healthcare Waste Management Association (HWMA)** and key regulatory authorities, to discuss matters of escalation and resolution.
3. Be a point of escalation for healthcare organisations needing assistance.

The central waste co-ordination function key duties are:

- be a central point for direct reporting across government, ensuring **business continuity plans** are delivered.
- manage the **national waste co-ordination function**
- co-ordinate operational requirements from health care facilities with the suppliers and planning collections
- support the NHS in ensuring the **standard operating procedure** is being applied. Communication of all waste matters to the NHS and back to the logistics teams for divert support for waste collections.

The team can be contacted at england.wastemanagement@nhs.net

Primary care services should continue to contact their local commissioner in the first instance.

Useful links

Hospitals and healthcare facilities:

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control>

<https://www.england.nhs.uk/coronavirus/publication/dental-standard-operating-procedure-transition-to-recovery/>

Householders who are self-isolating with suspected COVID-19:

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance>

Community nursing:

<https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings>

Primary care:

<https://www.england.nhs.uk/coronavirus/primary-care/>

Admission and care of people in care homes

<https://www.gov.uk/government/publications/coronavirus-covid-19-admission-and-care-of-people-in-care-homes>

Advice to local authorities on prioritising waste collections:

<https://www.gov.uk/government/publications/coronavirus-covid-19-advice-to-local-authorities-on-prioritising-waste-collections>

Contracting

NHS organisations will not be expected to amend their contract with their existing supplier. A reconciliation process is currently being agreed for England across the supplier base. A process will be defined alongside the Cabinet Office, the NHS England and NHS Improvement Commercial team and Deloitte. This will be offered to NHS Wales also. Further guidance will follow.

The Government has produced two guidance notes in respect of payments to suppliers and retendering and extensions of contracts:

- <https://www.gov.uk/government/publications/procurement-policy-note-0120-responding-to-covid-19>
- https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/874178/PPN_02_20_Supplier_Relief_due_to_Covid19.pdf

NHS organisations should consider this guidance in respect of waste contracts and, as far as possible, use the flexibilities in line with this guidance.

NHS organisations are advised that there is unlikely to be a stable market to retender contracts during the COVID-19 emergency response and therefore they should carefully consider grounds for extension of existing contracts where these are due to expire imminently. NHS organisations should work with suppliers and, if appropriate, provide relief against current contractual terms (eg KPIs and service credits) to maintain business and service continuity. Please let us know immediately if you are experiencing any issues.

If you have any queries or questions, then please contact our logistics cell's dedicated waste management team at: england.wastemanagement@nhs.net.

Queries relating to primary care services may be directed to: england.wastepc@nhs.net.