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16 August 2021

9(2)(a)

RE Official Information Act request CDHB 10669

I refer to your email dated 20 July 2021 requesting the following information under the Official Information Act from Canterbury DHB. Specifically:

- **How much PPE (approximately) its hospitals had received and disposed of during the pandemic. Also, a breakdown of how that PPE is disposed of in the hospital.**

Please refer to **Table one** (below) for monthly usage rates for PPE items for the 2019, 2020 and 2021 calendar years to date for Canterbury DHB and West Coast DHB Hospitals and facilities. **Note:** West Coast DHB volumes are 5-10% of the volumes in the Table below.

PPE waste produced in the care of any patient being managed in transmission-based precautions for any infection in hospital is disposed of in the yellow medical waste stream. (please also refer to **Appendix 1** (attached) for our Healthcare Waste Policy).

Table one:

Device Category	PPE Product Description	Unit of Measure	2019 BAU* consumption Rate (per month) CDHB/WCDHB	2020 Consumption Rate (per month) CDHB/WCDHB	2021 Consumption Rate (per month) CDHB/WCDHB
PPE	N95 Mask (or equivalent)	each	5,800	1,370	8,005
PPE	Procedure Mask (or equivalent)	each	41,000	186,326	184,025
PPE	Isolation Gown (or equivalent)	each	8,900	10,375	18,420
PPE	Disposable Apron	each	53,000	55,100	55,300
PPE	Glasses (or equivalent) **	each	5	151	87
PPE	Face shield (or equivalent) **	each	0	324	82
PPE	Nitrile Gloves (all sizes)	pair	151,500	778,265	849,675

*BAU – Business as Usual

**One off stock requirement to allow for all healthcare workers, demand, will not be ongoing as product can be cleaned and reused.

*** At the Canterbury DHB most of our PPE use/waste in the past year (July 2020-July 2021) is related to BAU activities and not the pandemic as such (we have no COVID-19 community transmission events in past year):

- July 2020 to Dec 2020 we had x 39 admissions from MIQF (including a very small number of positive cases) AND
- January 2021 to July 2021 we have had x28 admissions from MIQF.
- To put this in context, we have roughly 82,000 admissions to Canterbury DHB facilities annually.

We would also advise you to contact MBIE (Ministry of Business, Innovation and Employment) who are responsible for the managed isolation facilities and also the Ministry of Health who are supplying these facilities with their PPE requirements from the central reserves.

Please also note, in 2020 under levels 3 and 4 Canterbury DHB provided Aged Residential Care (ARC) facilities with PPE from our stocks, however ARC facilities have now been set up to order directly from the Ministry of Health central supply under levels 3 and 4.

I trust that this satisfies your interest in this matter.

Please note that this response, or an edited version of this response, may be published on the Canterbury DHB website after your receipt of this response.

Yours sincerely

A handwritten signature in black ink, appearing to be 'Tracey Maisey', with a stylized, flowing script.

Tracey Maisey
Executive Director
Planning, Funding & Decision Support

Management of Healthcare Waste Policy**Contents**

Policy	1
Purpose	2
Scope/Audience.....	2
Definitions	2
Roles and responsibilities	4
Associated documents	5
Policy statement	7
1. Waste Management Requirements	7
1.1 Storage	7
1.2 Security.....	7
1.3 Design.....	7
1.4 Access.....	7
1.5 Lighting.....	7
1.6 Ventilation.....	7
1.7 Signage.....	7
1.8 Cleaning.....	8
1.9 Waste Tracking.....	8
1.10 Staff Responsibility.....	8
1.11 Transporter.....	8
1.12 Equipment for Waste Management.....	8
2. Procedure/Guidelines.....	9
2.1 Procedure for waste generated at point of use through to disposal:.....	9
2.2 Waste Bags.....	9
2.3 Sharps.....	9
2.4 Waste Tracking.....	10
2.5 Spills and other incidents or emergencies involving healthcare waste....	10
2.6 Sustainability.....	10
Table 1 - Waste Streams.....	12
Example – Dangerous Goods declaration Form.....	18

Policy

The Canterbury District Health Board (CDHB) shall:

- Be committed to the protection of the environment.
- Accept responsibility for and comply with all relevant environmental legislation.
- Actively promote environmental care throughout the CDHB.
- Be committed to the internationally recognised waste management practice of source reduction, reuse, recycling, resource recovery and environmentally safe residue disposal.

- Be committed to the Treaty of Waitangi and its concern regarding the protection of the water bodies from contamination.
- Ensure that cultural groups are consulted.

Purpose

To maintain an appropriate waste management and disposal plan that minimises potential hazards to healthcare workers, public health and the environment.

To comply with the NZ Standard for Management of Health Care Waste (NZS 4304:2002) so that healthcare waste can be managed and disposed of in accordance with these standards.

Scope/Audience

All staff employed by the CDHB.

All facilities owned or leased by the CDHB.

All contractors employed by the CDHB

Definitions**Body parts**

Human or animal body parts, tissue and/or organs, fetuses and placentae.

Bund

Containment via a secure wall, ridge or depression of sufficient integrity to completely contain liquid within, or run-off from waste stored within its confines.

Collection

The aggregation of waste from primary sources or storage areas for movement to a waste holding area or from waste holding areas for movement to pre-disposal storage.

Controlled Waste

Healthcare waste that is recognisable as coming from a healthcare facility, suitable for disposal at a Sanitary Landfill, which:

- a) May be contaminated or soiled with potentially infectious human or animal body fluids which shall not be expressible under compaction; or
- b) Is not infectious but may be considered culturally or aesthetically offensive.

Cytotoxic waste

Waste cytotoxic drugs or material that is, or may be, contaminated with a cytotoxic drug. Cytotoxic drugs are toxic compounds known to have carcinogenic, mutagenic and/or teratogenic (causing foetal and/or neonatal abnormalities) potential.

Dangerous Goods

Substances having the properties described in Table A of the Land Transport Rule: Dangerous Goods and include packaging and empty containers that have not been cleaned after containing dangerous goods – refer to Appendix B of the New Zealand Standard Management of Healthcare Waste NZS 4304:2002.

General waste

Non-hazardous waste deemed disposable to Landfill without any controls.

Healthcare Waste

Waste generated by healthcare services.

Infectious Waste

Substances known to contain, or reasonably expected to contain, pathogens. Infectious waste includes, but is not limited to, the following:

- Discarded laboratory specimens, cultures and materials that have been in contact with them;
- Sharps other than those categorised as radioactive or cytotoxic;
- Receptacles containing body fluids;
- Waste containing expressible body fluids;
- Waste from isolation rooms that is deemed infectious;
- Any disposable article that is contaminated with expressible blood or body fluid.

Hazardous Waste

A component of the waste stream exhibiting characteristics posing a threat or risk to public health, safety or the environment.

Pathogens

Micro-organisms (including bacteria, viruses, rickettsiae, parasites, fungi) or recombinant micro-organisms (hybrid or mutant) capable of causing disease.

Personal Protective Equipment

Equipment provided by the employer to protect employees from identified potential hazards while performing employment duties, eg gloves, apron, goggles etc.

Radioactive waste

Material whatever its physical form, arising from the medical or research use of radionuclides and for which no further use is foreseen that contains radioactive substances and has an activity (or activity concentration) higher than the clearance level from regulatory authority

Recyclable

Non-hazardous waste, including any products, package or element thereof that can be diverted from Landfill and, through existing processes, be collected and processed to use in the form of raw materials or products.

Sanitary Landfill

A landfill that provides for disposing of solid waste on land in a manner that protects the environment e.g. compacting and layering and covering with soil by the end of each day and facilities that enable the evacuation of the gases produced.

Segregation

The process of separating wastes by waste category at their generation point, while keeping the different categories apart during handling, interim storage and transportation, prior to disposal.

Shall and Should

In this document, Shall is used in places where there is a requirement to achieve the desired result. It is used to alert the reader to the need for that element to be included. Should is used as a way of indicating a preference. It does not indicate a mandatory requirement as other alternatives could achieve an equivalent result.

Storage

The accumulation of waste, after segregation, in a specified container in a specific area.

Waste stream

A single or multiple selection of waste managed as a single entity rather than by components. A waste stream may comprise of waste from a subset of one category, waste from a single category, or waste from two or more categories. Where waste from two or more categories is managed as a single stream, the management controls shall be the most stringent requirements for all the categories present.

Roles and responsibilities**General**

Compliance with the waste management policy shall be audited by designated person/s.

Document Review

When policies, systems, plans, codes of practice, training manuals and similar documents are written, reviewed and updated, waste management aspects should be considered and incorporated where possible.

The Waste Management policy shall be reviewed every two years.

Contracts

Contract documents for works and services should incorporate requirements for the protection of the environment in relation to waste management. Organisations that seek to supply the CDHB with goods, works and services should be made aware of the CDHB's Waste Management Policy.

Purchasing

The CDHB should implement, where appropriate, practical and cost effective purchasing strategies that are designed to choose environmentally friendly products, products that are reusable, (except where this would contravene the Single Use Instruments and Equipment Policy) products made with recycled materials, products designed to be recycled and products with minimal or returnable packaging.

Conservation of Energy

The CDHB should follow strategies that minimise energy consumption and minimise impacts on the environment.

Associated documents

CDHB Manuals

- [Canterbury District Health Board - Infection Prevention & Control Policies and Procedures](#)
- [Canterbury District Health Board - Clinical Manual \(Volume 11\)](#)

Human Tissue Disposal Procedure

- Volume 6 - Health and Safety
Personal Protective Equipment

Divisional Manuals

- [Christchurch Hospital The Hazardous Materials Response Plan](#)
- Canterbury Health Labs: Mercury Spills Procedure, CHL Sharepoint, Safety Manual.

Forms

- Safety 1st (electronic reporting system)
- Fixed Asset Disposal (FA3)

Legislation

- Waste Minimisation Act 2008 (reviewed 17/03/16)
- Resource Management Act 1991

- Hazardous Substances & New Organisms (HSNO) Act 1996
- Hazardous Substances (Disposal) Regulations 2001
- Radiation Protection Act 2016
- Radiation Protection Regulations 1982
- Ministry of Health - Codes of safe practices for radiation use CSP1 Unsealed Radioactive Materials.
- Biosecurity Act 1993
- Land Transport Rule, Dangerous Goods 2005
- Land Transport Act 1998
- Health and Safety in Employment Act 2015
- Building Regulations 1992 Schedule 1 (A-H)
- NZ Building Act 2004

Local Authority Regulation

- Christchurch City Council Trade waste by-law 2015

Standards

- NZS 4304:2002 Management of Healthcare Waste
- NZS 8134.3:2008 Infection Control
- NZS 5433:2005 Transportation of Dangerous Goods on Land
- AS/NZS 4452:1997 The Storage and Handling of Toxic Substances
- AS/NZS 4261:1994 Reusable Containers for the Collection of Sharp Items used in Human and Animal Medical Applications
- SAA/SNZ HB76:2010 Dangerous Goods - Initial Emergency Response Guide plus Amendments.
- NZS 7603:1979 Specifications for Refuse Bags

Guidelines

- OSH Guidelines for the Safe Handling of Pharmacy Drugs: June 2003

Approved Codes of Practice

- Management of Substances Hazardous to Health 2015

Other Documents/Links

- Emergency Flipcharts (Hazardous Substance Spill)
- CDHB Intranet – Wellbeing, Health & Safety/workplace safety/HSNO

www.chemwatch.net

Policy statement**1. Waste Management Requirements****1.1 Storage**

The CDHB waste storage areas shall comply with the following minimum requirements as set out in the NZS 4304:2002 (*Section 5*)

1.2 Security

Waste holding areas and pre-disposal areas shall be suitably sited, be enclosed and separated from habitable spaces, supply/store rooms and food preparation areas, easy to secure and access by the public must be restricted.

1.3 Design

The area shall be vermin proof with easily cleaned walls and floors. Walls and floors shall be of impervious material and floors bunded or graded to a valved sewer outlet. There must be easy access to materials for managing spills, suitable personal protective equipment and hand-washing facilities.

Note: all waste water from cleaning process shall be discharged into a sump and treated to the satisfaction of the local authority prior to being discharged into the sewer.

Cleaning and wash-down water shall not be discharged into storm water drains.

1.4 Access

There shall be adequate space for movement in the waste storage area. There shall be direct access for vehicles removing waste from the storage area and access should be limited to approved persons only.

1.5 Lighting

There shall be adequate lighting in compliance with New Zealand Building Code for cleaning effectively and reading information on containers and documents.

1.6 Ventilation

There shall be adequate ventilation in compliance with New Zealand Building Code to remove odours. Exhaust vents shall be sited to prevent exhaust entering public buildings or areas to which the public have access.

1.7 Signage

The area shall be identified with signs appropriate to the categories of waste stored in that area as per New Zealand Building Code requirements. Also refer to [Signage Requirements - Hazardous Substances \(Identification\) Regulations](#)

1.8 Cleaning

The area shall have readily accessible materials for cleaning any spills. Refer to [Wellbeing, Health & Safety Management Systems](#) on the intranet

The area shall be equipped with suitable personal protective equipment and hand-washing facilities.

Refer to [Standard Precautions Policy](#) on the intranet

1.9 Waste Tracking

The waste transporter and waste generator shall put in place a means of tracking hazardous and controlled waste complying with NZS 4304:2002.

See below: 2 Procedure/Guidelines.

1.10 Staff Responsibility

All employees involved with transporting and disposing of infectious waste shall be trained in the requirements of the NZS 4304:2002. This education should be documented.

Individual managers are responsible for ensuring that all waste generated in their area is disposed of in line with this policy.

1.11 Transporter

The transporter shall meet the requirements out in section 6, Transporters' Responsibilities of NZS 4303:2002 (Ref Appendix B).

1.12 Equipment for Waste Management

Transport trolleys

Spill kits – mercury, cytotoxic substances, blood & body fluids and general waste spills

Personal Protective Equipment

Waste transport labels

Appropriate waste containers/bags/trays

High strength ratchet ties

Sharps containers

Waste Bags

Recycle bags

Recycle paper trays

Mobile garbage bins

Appropriate waste signage

Waste forms and log book

Appropriate Material Safety Data Sheet (for Chemical waste)

2. Procedure/Guidelines**2.1 Procedure for waste generated at point of use through to disposal:**

1. Standard precautions apply when dealing with waste. Hand hygiene must be performed after handling all waste categories. Refer to CDHB Standard Precautions on the intranet
2. Personal Protective Equipment (PPE) should be used/worn when handling waste. (Determined by the nature of the waste)
3. Waste shall be separated into categories by the waste generator and placed in bags/containers/bins at point of generation and identified as per waste stream (*table 1*)
4. Tie off waste bags with ratchet ties to ensure that bags remain tied securely during handling and transport.
5. Waste bags/containers should be picked up by designated staff from an interim storage area and placed in a hard-shell container/bin or on a designated waste trolley and moved at times that do not coincide with the transportation of clean materials or food to a central waste storage area.
6. Waste bags/containers should be transported to pose minimum risk of damage or leakage. Bags/containers should be kept upright at all times.
7. Transport trolleys should be capable of containing accidental leakage from waste bags/containers.
8. Hazardous Waste collection trolleys shall not be left unattended in public areas.
9. Segregation of hazardous, controlled and non-hazardous waste shall be maintained during the movement and handling of waste. If waste is mixed or loses identification during movement, it shall be uniformly treated at the highest level of risk category for that load.
10. Waste bags/containers shall be placed according to their category in the appropriate central storage area.

2.2 Waste Bags

Waste bags should:

- not be moved unless secured or sealed correctly.
- not be carried against the body.
- not be sealed with staples.
- not be supported by hand underneath.
- not be more than two-thirds full.

2.3 Sharps

Sharps shall:

- be collected and transported in sharps hard-shell containers.
- be kept out of infectious waste bags/bins.

- not be moved unless sealed or secured correctly.
- not be carried against the body.
- not be past the maximum full level.

2.4 Waste Tracking

A Waste Tracking log book for hazardous and controlled waste should be completed and signed by the contractor at pick up.

Volumes should then be reconciled against charges made by the contractor.

Dangerous Goods Forms shall be completed appropriately and provided to transport contractor at pick up to convey waste to processing/disposal site.

Waste contractor shall return to the generator (designated person), documentation verifying that waste has been disposed of in the agreed manner. The waste generator shall file documentation confirming waste disposal and records shall be kept for ten years.

2.5 Spills and other incidents or emergencies involving healthcare waste

Spill kits shall be readily available to clean up related waste spills.

- For Mercury spills in Hospital locations: refer to your Division specific Emergency Flipchart (Hazardous Substance Spills) Management of healthcare waste2
- For Mercury spills in Canterbury Health Labs refer to the Mercury Spills Procedure, CHL Sharepoint, Safety Manual.
- See related document Chemwatch SDS Mercury
- [Hazardous Substances & New Organisms \(HSNO\)](#)
- For cytotoxic spills refer to [Procedures - Spill Management - Spill Management Procedure](#) on the intranet
- For radioactive spills, call Radiation Advisory Officer, Medical Physics, Christchurch Hospital

For all the above spill types a CDHB Safety 1st entry must be completed.

2.6 Sustainability

CDHB supports sustainable practices wherever possible and measures to reduce waste to landfill must be implemented where facilities permit.

As a minimum all areas must provide waste facilities that enable paper, cardboard, plastic, glass and can recycling.

In office areas central waste areas are to be provided for all waste streams, under desk bins are not permitted.

Policy Owner	Support Services Manager
Policy Authoriser	EMT
Date of Authorisation	November 2017

RELEASED UNDER THE OFFICIAL INFORMATION ACT

Management of Healthcare Waste Policy

Table 1 - Waste Streams

Waste Category	Stream	Example	Bag/Container /Collection	Protocol/Referrals	Disposal Method
General	NON HAZARDOUS	Healthcare waste including <ul style="list-style-type: none"> Paper and Plastic (not suitable for recycling) Wrappings Paper hand towels Other items that are not suitable for recycling Food scraps Broken glass/crockery, securely wrapped Flowers 	Black Plastic Bag Bags/containers shall meet the required specification (available through Supply Department)	Seal with ratchet ties. Bags shall not be filled past the 2/3 mark	Compacted and buried at Landfill Via Transfer Station
Recyclables	RECYCLE	Paper - (non confidential) Box packaging Cardboard	Recycling trays. Green wheelie bins.	Contact Support Services Department for further information	Recycled
		Milk Containers Plastics Plastic drinking cups Aluminium Cans Glass	Milk Crates White-opaque or clear liners for plastics and all recyclables including plastics, cans and unbroken glass Orderly/designated person to collect	Note: All recyclable material in this category must be rinsed/clean and not contaminated with food/drink or toxic chemicals etc.	

Management of Healthcare Waste Policy

Waste Category	Stream	Example	Bag/Container /Collection	Protocol/Referrals	Disposal Method
Recyclables	RECYCLE	<p>Toner Cartridges <i>Metal*</i> <i>Heavy metal*</i> Steel cans Aerosol cans Gas Cylinders <i>Electronic waste (old PCs etc)*</i></p> <p><i>Instruments/implants that have been sterilised*</i></p> <p><i>Healthcare domestic equipment*</i></p>	<p>Collection bins/boxes (labelled)</p> <p>Orderly/designated person to collect or via site maintenance</p> <p>Instruments for disposal should be sent to Sterile Services via the blue bin and clearly labelled "for disposal"</p>	<p><i>* Confirm if item requires a Fixed Asset Disposal Form (FA3) before discarding.</i></p> <p>Contact Support Services for further information</p> <p>Christchurch/Burwood Operating Theatre and Home Dialysis have specific recycling programmes for Single Use Medical Devices, PVC products, clean Kimguard and Peritoneal Dialysis waste – refer to department location documents.</p>	Parts recycled at various outlets.
Recyclables	RECYCLE	Confidential Documents	<p>Blue document destruction bins for shredding.</p> <p>Bins collected by Orderly/designated person.</p>	<p>Patient and health information should be disposed of in a manner ensuring confidentiality.</p> <p>Any confidential correspondence, old labels or other documentation identifying patients, authorised to be discarded, should go in the blue security bins to be shredded.</p>	Shredded and recycled.

Management of Healthcare Waste Policy

Waste Category	Stream	Example	Bag/Container /Collection	Protocol/Referrals	Disposal Method
Medical / Infectious	HAZARDOUS	<ul style="list-style-type: none"> Intravenous tubing, oxygen masks & tubing. Disposable personal protective equipment. Empty drainage bags. Disposable sheeting. Disposable patient care equipment. Patient dressings Discarded medical prosthetics (ie hip joints) 	<p>Yellow Plastic Bag - 3 sizes Small, Medium, & Large</p> <p>Bags collected by Orderly/designated person.</p> <p>Bags/containers shall meet the approved specifications (available through Supply Department)</p>	<p>Refer to NZS 4304:2002</p> <p>Waste in this category should be secured in a lidded receptacle.</p> <p>Christchurch/Burwood Operating Theatre and Home Dialysis have specific recycling programmes for Single Use Medical Devices, PVC products, clean Kimguard and Peritoneal Dialysis waste – refer to department location documents.</p>	Autoclaved and buried at Sanitary Landfill.
	HAZARDOUS	<p>Dressings heavily soiled with expressible blood or body fluids</p> <p>Any body fluid receptacles, liners that cannot be emptied safely i.e. drainage bottles & disposable suction.</p> <p>Blood giving set tubing if the spike is contained within the blood bag.</p> <p>All infectious isolation room waste.</p> <p>Unidentifiable tissue.</p>		<p>Bag shall not be filled past the 2/3 mark</p> <p>Seal with ratchet ties.</p> <p>Waste in this category should be secured in a hazardous bin designated for infectious waste.</p> <p>Dangerous Goods Declaration Form completed</p>	

Management of Healthcare Waste Policy

Waste Category	Stream	Example	Bag/Container /Collection	Protocol/Referrals	Disposal Method
Body Parts	HAZARDOUS (FOR CREMATION)	Limbs and identifiable body parts for cremation, except for body parts that are to be returned to the patient/whanau. For parts that are requested to be cremated on an individual basis, see 'Disposal or Return of Body/Tissue Parts' policy.	Yellow bin with red lid. Containers collected by Orderly/designated person. Containers shall meet approved specification (available through Supply Department).	All items in this category shall be documented. Refer to Human Tissue Disposal Protocol for documentation requirements. NB: for return of body parts to patient/whanau, refer to 'Return of Body/Tissue Parts' Policy Dangerous Goods Declaration Form completed	Cremated and ashes sent to Sanitary Landfill.
Sharp Waste	HAZARDOUS	Any sharp instrument (needles, giving set spikes etc). Glass IV bottles containing residue drug activities Rubber topped vials with medication residue Sharp waste should not include any bulky metal items that cannot be ground	Yellow hard shell sharps container - various sizes. Containers collected by Orderly/designated person. Keep sharp containers separate from infectious waste, i.e. do not put into yellow wheelie bin. Bags/containers shall meet the approved specifications (available through Supply Department)	Container shall be sealed shut prior to disposal. Container shall not be filled past the 2/3 mark or designated fill line. Sharps containers should be placed in designated hard shell hazardous waste container. Dangerous Goods Declaration Form completed	Autoclaved, ground and buried at Sanitary Landfill

Management of Healthcare Waste Policy

Waste Category	Stream	Example	Bag/Container /Collection	Protocol/Referrals	Disposal Method
Cytotoxic Waste	HAZARDOUS	Waste from cytotoxic drug therapy. Sharps from cytotoxic drug therapy.	Purple plastic bag. Purple sharps Container. Containers collected by Orderly/designated person. Containers shall meet approved specification (available through Supply Department).	All procedures for the handling of cytotoxic waste shall comply with the OSH Guidelines for the Safe Handling of Cytotoxic Drugs: Guidelines for safe handling of cytotoxic drugs and related waste - 13 Sept 2013 and NZS 5433:1999 Transport of Dangerous Goods on Land. Dangerous Goods Declaration Form completed	Packed and Shipped to Specialist Disposal Plant off shore
Hazardous Chemical Waste	HAZARDOUS	Pharmaceutical or laboratory waste. Substances which may be toxic, mutagenic, carcinogenic, teratogenic, explosive, flammable, corrosive, oxidising or radioactive.	Storage shall be in an appropriate area (e.g. flammables cupboard, dangerous goods store, Hot Lab) away from incompatible chemicals. Containers shall meet approved specification (available through Supply Department).	Disposal of hazardous substances shall be in accordance with the Hazardous Substances (Disposal) Regulations 2001 and through a registered waste disposal company. Refer to NZS 5433:1999, NRL C3, OHS Approved Code of Practice for the Management of Substances Hazardous to Health (1997). Refer to the product's Material Safety Data Sheet and/or manufacturer. Dangerous Goods Declaration Form completed	Where applicable, some substances may be disposed of through the sewer within the limits of the discharge agreement with the local Council. Otherwise through a registered waste disposal company

Management of Healthcare Waste Policy

Waste Category	Stream	Example	Bag/Container /Collection	Protocol/Referrals	Disposal Method
Radioactive Waste	HAZARDOUS	Waste from laboratory procedures involving radioisotopes, waste from patients undergoing radioisotope therapy (<i>not</i> Nuclear Medicine scan patients).	Yellow plastic bag or hard shell labelled as radioactive material. Containers shall meet approved specification (available through Supply Department).	Disposal shall comply with NRL C1 Code of safe practice for the use of unsealed radioactive materials, National Radiation Laboratory, 1996. Contact Radiation Advisory Officer, Medical Physics Dept for advice. (If unavailable, contact Nuclear Medicine Dept.).	Autoclaved and buried when activity reaches approved levels.
Important Note: A Controlled Waste stream is not functional on CDHB premises					

Policy Owner	Support Services
Policy Authoriser	EMT
Date of Authorisation	13 January 2005 12 July 2006 November 2017
Date of next review	December 2009 October 2019

Management of Healthcare Waste Policy

Example – Dangerous Goods declaration Form

DANGEROUS GOODS DECLARATION				
Proper Shipping Name: (a) Clinical Waste, Unspecified, N.O.S. (b) Toxins, Extracted from Living Sources N.O.S. (Waste)		Class: (a) 6.2 (b) 6.1		UN Number: (a) 3291 (b) 3172
Technical Name: (a) Hazardous and / or Controlled Medical Waste as defined in NZS 4304 (2002) (b) Cytotoxic Waste as defined in NZS 4304 (2002)		Packing Group: (a) II (b) II		Hazchem code: (a) 2X (b) 2X
QUANTITY: EITHER OR BOTH CLASSES OF DANGEROUS GOODS (a) or (b) MAY BE DECLARED HEREIN: TO DETERMINE WHICH CLASS/ES ARE BEING CARRIED, AND THE QUANTITY OF EACH, REFER TO: "NUMBER & KIND OF PACKAGES" LISTED BELOW				
Number	Container Description	Total Volume/weight:		
	Class 6.2 660 Litre Wheeled Trolley Bin X 660 Litres =			
	Class 6.1 240 Litre Wheeled Trolley Bin X 240 Litres =			
	Class 6.2 240 Litre Wheeled Trolley Bin X 240 Litres =			
NUMBER OF CONTAINERS plus CALCULATED volume / weight, must be recorded in the shaded areas.				
Additional information: DO NOT OPEN Secure Transport Units (STU's) contains: CLASS 6.2 INFECTIOUS SUBSTANCES Yellow containers contain: CLASS 6.2 INFECTIOUS SUBSTANCES Purple Containers contain: CLASS 6.1 TOXIC SUBSTANCES Containers, Bins & STU's (secure transport units) contain Toxic or Infectious Medical Waste as documented above. * Clinical Waste Bags are transported in yellow Class 6.2 bins. ALL the shaded areas below here MUST be accurately filled out without exception.				
Shipper / Consignor: Name & address: Christchurch Public Hospital Riccarton Avenue Christchurch		Phone: 03 364 0630 Fax: 03 364 0646		
Receiver / Consignee: Name & address: Interwaste Limited 23 Kilbirnie Place Christchurch		Phone: (03) 344 5000 Fax: (03) 344 5005		
24 HOUR EMERGENCY TELEPHONE NUMBER: 0800 10 21 31		Carrier: Interwaste		
EMERGENCY PROCEDURE GUIDE 1. IN THE CASE OF AN EMERGENCY: DIAL 111, ASK FOR: FIRE OR AMBULANCE OR POLICE 2. CLEAR THE AREA: 3. ISOLATE THE SITE: In case of contact with the material: Immediately wash contacted area thoroughly and flush with running water for at least 15 minutes. Seek medical advice. Refer SAA/SNZ HB 76: 2003 "Dangerous Goods Initial Emergency Response Guide", "Guide # 41 for Class 6.2 Infectious Substances" and "Guide # 36 for Class 6.1 Toxics".				
Consignor's Dangerous Goods Declaration: I hereby declare that the contents of this consignment are fully and accurately described above by the Proper Shipping Name and are classified, packaged, marked & labeled, and are in all respects in proper condition for transport according to the Land Transport Rule, Dangerous Goods 1999: Rule 45a(1).				
Name: Alan Kenney		Date of Consignment: 1/1/17		
Title: Charge Orderly				
Company: Christchurch Public Hospital				
Location: Riccarton Avenue				
Signature:				