GUIDANCE FOR THE DISPOSAL AND DECOMMISSIONING OF COMMUNITY EQUIPMENT

Name of Originator(s) / Author(s)	• Wendy Ramsay, Pooled Fund Manager, ICES Partnership, Lincolnshire County Council (LCC) • Liz Dirjal, Health and Safety Advisor CMIOSH, Mouchel • Ray Wright, Waste Manager, Public Health Directorate, NHS Lincolnshire • Kevin Shaw, Clinical Surveillance Manager, Public Health, NHS Lincolnshire • Contributions from NRS
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Reviewed / Revised By	• Wendy Ramsay, Pooled Fund Manager, ICES Partnership • Matt Fenner, OT ICES Team • Natalie Liddle, Infection Control Lead, Public Health • Contributions from NRS
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CONTENTS

1. INTRODUCTION

Lincolnshire's Integrated Community Equipment Service (ICES) is jointly commissioned through partnership arrangements which currently involve Lincolnshire County Council (LCC), Lincolnshire Community Health Service NHS Trust (LCHS), United Lincolnshire Hospital NHS Trust (ULHT) and Lincolnshire Partnership Foundation NHS Trust (LPFT).

The service provider, NRS Healthcare Ltd (NRS), is responsible for all aspects of the operation of the service in line with legislative and contractual requirements and especially (in terms of this document) for the repair, refurbishment and recycling of equipment or alternative disposal / scrapping of items that are not safe, fit for purpose or where repair constitutes financial un-viability.

2. PURPOSE

NRS has developed and implemented its own Technical Manual and Scrapping Policy (NRS Technical Manual 26) to comply with legislative requirements and national guidelines which its staff are required to follow. Therefore, the purpose of this particular guidance is to provide supporting, complementary information and outline commissioners' general expectations with regards the condition of equipment that requires re-issue or scrapping.

Specifically, the content of this guidance aims to:

- Provide clarity in relation to the condition appraisal of community equipment stock whereby the likelihood of queries and debate regarding the condition of equipment available for reissue or disposal / scrapping are reduced as far as possible.
- Ensure a consistent approach is in operation in terms of the inspection, cleaning / decontamination, refurbishment, scrapping or alternative reissue of equipment which is agreed and understood by both NRS and commissioners.

The guidance will also be available to Health and Social Care practitioners, where required and requested, in order for them to have an understanding of the general expectation regarding the condition of pre-loaned equipment that is being re-issued to patients / customers.

3. BACKGROUND

Prior to producing this guidance, members of the ICES team examined items of equipment that NRS staff determined to be unfit for reissue. The ICES team then either authorised the disposal of the equipment or suggested that items should be reissued where only minor damage (ie scratches) were evident.

Through the implementation of this guidance, commissioners have agreed that individual items with a value of £50 and under will not require pre-disposal checks by the ICES team. The requirement is for equipment with a value over £50 to continue to be set aside in order for the ICES team to inspect the items and authorise the disposal of equipment that is unfit for re-issue.

These arrangements will be subject to systematic review by the ICES team and options / recommendations will be reported to the ICES Interagency Management group and Partnership Board. Therefore, there is the potential that commissioners agree in the future that the minimum value of items requiring pre-disposal checks by the ICES team be revised (ie increased). In such instances, decisions will be conveyed to NRS and this guidance revised accordingly.

4. LEGISLATIVE FRAMEWORK AND GUIDANCE

Community equipment services are required to comply with a range of legislative requirements and guidance including, but not limited to, the following list (also refer to Appendix 1):

- Health and Safety at Work Act 1974.
- Management of Health and Safety at Work Regulations 1999.
- Waste Framework Directive (Directive 2008/98/EC) 2008.
- Waste (England and Wales) Regulations 2011.
- The Hazardous Waste (England and Wales) Regulations 2005.
- Environment Protection Act 1990.
- Control of Substances Hazardous to Health Regulations (COSHH) 2002.
- Electricity at Work Regulations 1994 (22).
- Waste Electrical and Electronic Equipment Regulations..
- Electrical Equipment (Safety) Regulations 1994..
- General Product Safety Regulations 2005..
- Lifting Operations and Lifting Equipment Regulations (LOLER) 1998.
- Medical Devices Regulations 2002 (Amended 2003).
- MHRA Managing Medical Devices DB2006 (05) November 2006.
- Provision and Use of Work Equipment Regulations (PUWER) 1998.
- Sale and Supply of Goods Act 1994.
- Consumer Protection Act 1987 (Part 1).
- Manual Handling Operations Regulations 1992.
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995.
- The Revised Healthcare Cleaning Manual (NHS) June 2009.

5. GENERAL GUIDANCE ON DISPOSAL / SCRAPPING OF EQUIPMENT

In terms of general guidance, the underlying principle is that any equipment stored and available for issue or issued and on loan to service users must be safe and fit for purpose. Should any equipment not fulfil this fundamental requirement, it must be disposed of by NRS in line with legislative requirements, NRS 'Scrapping Criteria 2.1' and associated recommendations.

However, it is important to acknowledge that items of equipment may be re-issued to a number of patients / customers during its lifecycle. Therefore, the general condition of re-issued equipment is likely to show signs of use, such as scratches, and this is acceptable for most items as long as the minor flaws could not cause any injury or harm / infection or other risks to the user.

Prescriber Responsibilities:

Prescribers are required to inform individuals during the assessment process that the equipment to be delivered may not be a new item.

Patient / customer responsibilities[1] in terms of checking and maintaining the general condition of the equipment should also be reiterated to the user and / or family member(s). This includes the user / family member(s) / carer responsibilities regarding the thorough cleaning and drying of the equipment in line with the manufacturer's instructions (provided by NRS).

Equipment Warranties:

Some equipment will have warranties of between one to three years and NRS is expected to check whether equipment set aside for scrap is still under warranty and whether the damage to the equipment is due to a warranty issue.

Where equipment disposal is required, the expectation is that NRS will follow the Scrapping Criteria in '2.1 of Technical Manual 26', including clearly identifying the reasons for scrapping and recording this on 'Label 005 Reject Item Certificate'.

Where any queries on warranties, refurbishment and / or economical repair arise, NRS and the ICES team will be required to refer to the manufacturer's information or contact the manufacturer directly in order to seek further advice, guidance and direction.

[1] Ref: Service User Leaflet (revised January 2014 – subject to further revisions as required).

Decontamination:

In accordance with MDA DB2006 (05) and MDA DB 2003(06) and relevant legislation, any items of equipment subject to inspection, maintenance, repair or disposal must be decontaminated beforehand.

The ICES Partnership expects that the NRS decontamination process will be carried out in accordance with the equipment manufacturer's instructions and undertaken by appropriately trained and competent staff.

Observational checks on the equipment:

The initial inspection of the equipment will determine if any of the following defects are evident:

- Tears, splits, cracks.
- Loose nuts, bolts and / or screws.
- Leakage from hydraulics.
- Punctures to mattress protection and covers especially at wear / contact points.
- Bare wires on equipment.
- Bent metalwork or dents.
- Missing rubber stoppers / feet / ferrules.
- Any obvious visible defects e.g. rust, or scratches at touch points, especially high risk equipment from an infection control perspective such as commodes or other toileting aids. A small amount of surface rust in non-contact areas is acceptable providing it has no implications on the safe use of the equipment.
- Light scratches or rust at non-touch points are not an infection control concern.
- Frayed stitching eg slings (also refer to section 5 below).
- Also refer to DB 2006(06) v2.0 (ref: Section 6 Maintenance).

Manual inspection checks:

The general manual inspection will identify if there are any defects in terms of the following:

- Wheels – wheels do not move freely on beds / hoists / glider chairs / Zimmer frames etc.
- Brakes – do not work effectively on beds / hoists etc.
- Hydraulics – do not perform smoothly on beds / hoists.
- Electronic motors – do not work efficiently on specialised beds / specialised mattresses, mattress variators, bath lifters, hoists, suction machines.

6. SPECIFIC EQUIPMENT

Under LOLER and PUWER, there are specific requirements regarding the inspection, thorough examination and maintenance of lifting equipment. NRS confirms compliance with these requirements through their maintenance programme and relevant policies and procedures.

Anyone using lifting equipment should be able to check prior to use, (via individual labelling and documented records for each piece of lifting equipment) that it has been thoroughly examined, maintained and is safe to use in accordance with LOLER requirements.

Lifting equipment (hoists) and accessories such as slings **must** be uniquely identifiable (NRS operates a unique ID labelling system / procedure ['NRS Technical Manual 04']).

Slings:

Slings should be uniquely identifiable with their own ID Label so that records of statutory examinations and inspection under LOLER can be traced.

Manufacturers often label slings with a serial number, which can fade over time or during laundering and some companies also provide space on the sling label for recording thorough examination dates.

It is generally acceptable for the label of the sling to be written on, but writing on other areas of the sling (i.e. load-bearing webbing) will require full inspection by the NRS LOLER technician to determine whether the sling can be made fit for re-issue. Any queries / concerns should be raised with the manufacturer and also discussed with the ICES team.

Additional labels that have been sewn onto the sling fabric by others (i.e. not stitched to the item by the manufacturer) or other attachments may weaken the integrity of the material. In such instances, the NRS LOLER technician will examine and assess whether the sling is safe. If necessary, the LOLER technician will liaise with the manufacturer to confirm whether the sling can be made fit for re-issue or requires disposal.

NRS is required to comply with LOLER requirements for the inspection of slings and follow the manufacturer's visual inspection instructions. Should any of the following defects be identified by the NRS competent person, the items must be disposed of:

- The sling label is missing or the information on the manufacturer's label is not clearly visible and the instructions are unreadable.

- The sling cannot be uniquely identified or information has been hand written onto the sling using a permanent marker.
- Obvious and significant fading or damage of the material.
- Stitching on the material is not intact (i.e. fraying, tearing, pulling, thinning of stitching and any other evidence of chemical or biological contamination), particularly stitching at the straps, hoops and where the straps are attached to the fabric. A few loose short threads are acceptable as long as the stitching at any loading point is not stretched, frayed, cut or worn or damaged in any way.
- If frayed edges or loose threads are there by design manufacture, then no further action is required.
- Sling clips show rust or metal fatigue.

If queries remain regarding the integrity of the equipment subject to examination, the NRS LOLER technician is expected to contact the manufacturer to obtain further information and to subsequently discuss the outcome of these investigations with the ICES Team to reach agreement on whether the equipment requires disposal or is suitable for re-issue.

NRS is required to clearly identify the reason(s) why a sling has been set aside for disposal and report these to the ICES Team (see 'NRS Policy 2.1' criteria).

If the ICES Team are unsure about the structural integrity and safety of any sling which has passed any NRS inspection and is awaiting re-issue, this equipment should be withdrawn from use and reviewed with the LOLER technician and / or manufacturer. This will also form part of the audit process.

Hoists:

All lifting equipment requires thorough examination and checks by a qualified technician / engineer on a six monthly basis and an annual service.

The general expectation is that hoists returned to the NRS warehouse will be examined / checked by a LOLER technician / other competent person. If the hoist is a non-contract item, this may require examination and servicing / maintenance directly by the supplier (rather than NRS). In such instances, NRS is expected to ensure that only trained and competent persons undertake the checks etc.

If a hoist is determined to be beyond repair and therefore requires disposal, the competent NRS technician should confirm the reasons for this decision with the ICES Team and document the details on the NRS 'Reject Item Certificate OO5' label.

In some instances, it may be obvious to the ICES team why the equipment has been scrapped i.e.:

- Verified under scrapping criteria in 'NRS policy 26'. section 2.1.
- Replacement parts are beyond economic repair (further work and / or repair, replacement parts etc exceeds 50% of the purchase price of the item) as per agreed disposal / scrapping criteria.
- Unable to identify the hoist manufacturer's and / or the NRS unique identifier label for the hoist.
- Significant damage to the hoist e.g. bent spreader bar or actual break in the main structure.
- Significant damage to any part of the equipment which may constitute an infection risk.
- Visible rust and metal fatigue.

If queries remain regarding the integrity of the hoists subject to examination, the NRS LOLER technician is expected to obtain further information and advice from the manufacturer and to subsequently discuss the outcome of these investigations with the ICES Contract team in order to reach agreement on whether the equipment requires disposal or is suitable for re-issue.

Commodes:

Commodes and other toileting aids are potentially high-risk because they can readily become contaminated by harmful bacteria. Visible scratches can be readily impregnated by harmful bacteria and difficult to decontaminate compared to smooth surfaces. In such cases, the equipment will require disposal.

Scratches to toileting aids at touch points preventing thorough decontamination pose a significant infection control risks. Similar scratches at non-touch points pose a lesser risk and are therefore acceptable.

Equipment with metal parts (i.e. walking frames, crutches):

Problem areas:

Rust

- Rust can cause infections. If there are very visible rust spots and patches, the item should be scrapped / disposed of. Often if rust appears in the internal parts of the product (i.e. rust in the tubing), it is likely to be a cause for concern as this could affect the overall integrity of the equipment.
- Surface rust at touch points on equipment can be difficult to decontaminate because its rough surface allows harmful micro-organisms to be protected from the cleaning process. This will allow these micro-organisms to thrive and potentially cause serious infections.

Bent / Mis-shaped Products

- Softer metals such as aluminium has a tendency to bend when put under pressure.
- In most cases, defects will be obvious and routine monitoring by NRS / commissioners is required.
- Bent / distorted equipment will be disposed of in line with NRS policies and procedures.

Breakages

- Again stresses and strains on softer metals like aluminium can cause them to break at weak points (near joins).
- If cracks are evident, this could be a sign of an impending break and the equipment is likely to require disposal.

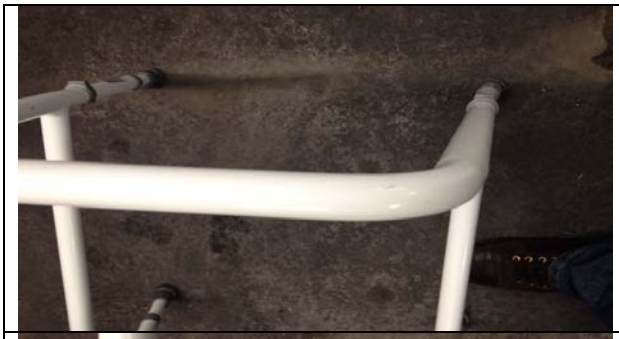
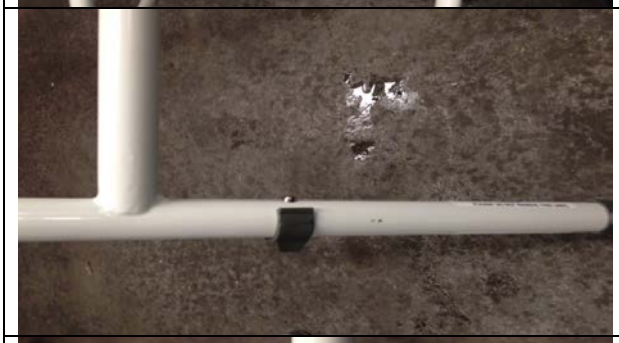
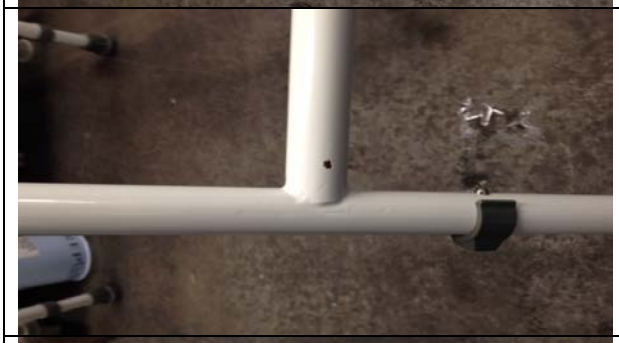
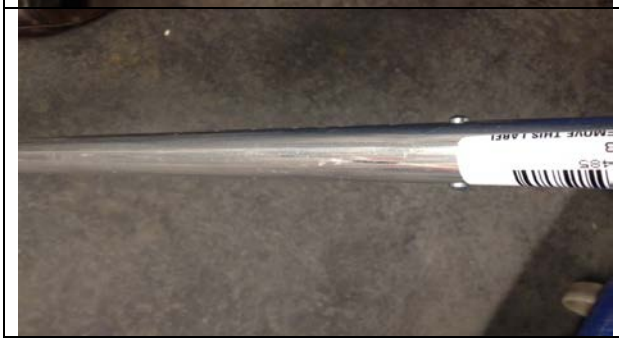
Discolouration

- Aluminium does not rust but it does discolour and fade. Whilst this is not so obvious, it can mean that the item of equipment could be liable to breaking or cracking.
- Any decolouration will be identified in the final inspection phase of the refurbishment.
- Any equipment identified as liable to break will be disposed of.

Scratches/Marks

- If an item is heavily scratched or marked (especially if rough) then it will likely be scrapped.
- If the item is only slightly marked (i.e. surface scratches) and non-high risk, or non-touch point scratched / marked, then it can go back through cleaning and decontamination to be stocked (also refer above re: Commodes and Rust).
- Examples of the type of scratching readily observed is shown below:

	Light scratches to metal work where no rusting or abrasion has developed should not automatically be scrapped and may be suitable for re issue where deemed safe to do so.

	Light scratches to metal work where no rusting or rough has developed should not automatically be scrapped, even if the abrasion occurs in high contact areas, and equipment may be suitable for re issue where deemed safe to do so.
	Light scratches to metal work where no rusting or abrasion has developed should not automatically be scrapped and may be suitable for re issue where deemed safe to do so.
	Deeper scratches/ damage to pain work may present as a more significant infection risk however, equipment presenting with such surface damage will not automatically be scrapped and may also be suitable for reissue is deemed safe to do so.
	Light scratches to metal work where no rusting or abrasion has developed should not automatically be scrapped and may be suitable for re issue where deemed safe to do so.

<u>Equipment with wheels (i.e. rollators, frames, mobile commodes):</u>

Braking mechanism

- The majority of equipment (with the exception of walking frames with wheels) that is mobile will have some sort of braking mechanism – these may be defective. If so, NRS will check to see if equipment is under warranty or within economical repair. If not, the item should be scrapped.

Wheel wear

- As with car tyres, checks will be carried out to confirm the condition of the wheels. If heavily worn and BER, then the equipment should be scrapped. If replacement wheels are available, the item can be refurbished.

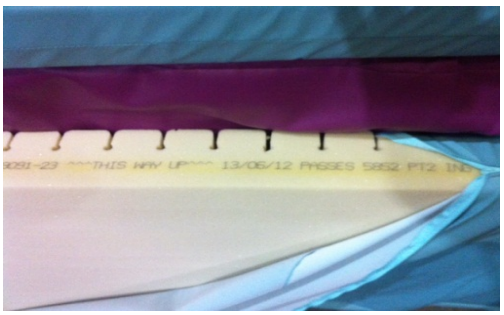
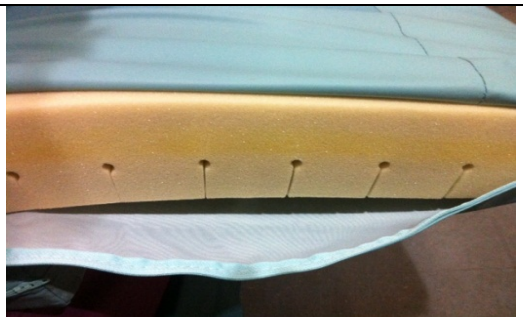
Mattresses and Pressure Relieving Cushions:

Rips

- Probably the most common fault to a mattress is a rip or tear. Due to mattresses being high-level Health equipment, rips could cause infection as the foam section is not properly protected.
- Any mattress which are damaged through a rip or tear can be scrapped.

Staining / Discolouration

- Mattresses may suffer staining and discolouration may be present and are not removable, despite going through the cleaning process.
- Subject to the following and dependent upon the level of staining / discolouration, the mattresses and pressure relieving cushions could either be re-issued or require disposal:

	Foam with this level of Phenolic staining should not automatically be scrapped and therefore may be issued if the product is safe, clean and fit for re-issue and use.
	Foam with this level of Phenolic staining should not automatically be scrapped and therefore may be issued if the product is safe, clean and fit for re-issue and use.

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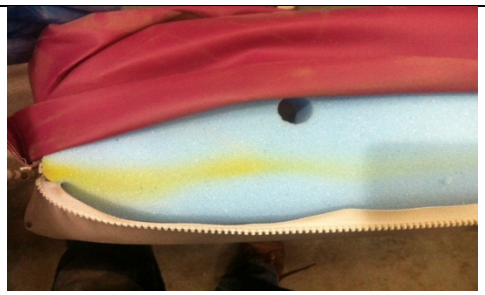	Whilst more severe Phenolic staining may only affect the aesthetic properties of the foam, wider consideration must be given to the age of the product and whether its general condition is fit for use. This is particularly pertinent in relation to mattresses with an age of two years+.
	Whilst more severe Phenolic staining may only affect the aesthetic properties of the foam, wider consideration must be given to the age of the product and whether its general condition is fit for use. This is particularly pertinent in relation to mattresses with an age of two years+.

- Where concerns / queries are raised regarding whether to re-issue or dispose of a product, NRS and the ICES team should seek advice and guidance from the manufacturer and Infection Control leads within the statutory authority.
- NRS is expected to check the age of the product and its warranty where there is the potential that the equipment could be replaced in line with warranty requirements.

Bad Odour

- Mattresses may emit unpleasant odours which cannot be removed, despite going through the cleaning process.
- Some mattresses with 'cells' are difficult to clean. Where there are evident strong odours, the items should be scrapped.

'Bottomed out' Pressure Relieving Products

- Mattresses and cushions that have been used excessively can 'bottom out', meaning that they have indentations which would make it uncomfortable for another patient / customer. In such instances, the items should be scrapped.
- Where it is not clearly evident that the equipment has 'bottomed out', reference should be made to the manufacturer in order to identify and clarify whether the equipment can be re-issued or must be disposed of.

Bath and Shower Boards:

Caps missing

- Boards tend to have plastic caps / stoppers. If these are missing, then water has managed to get into the wooden frame of the bath board, which will therefore need to be scrapped.

Scratches / Marks

- Severe scratches to the surface of the plastic could lead to injury or get impregnated by harmful bacteria (therefore difficult to decontaminate), so these should be scrapped. Also check for severe watermarks (also refer to Rust section above)

Chair Raisers:

Broken wooden panels

- The older style MPS have wooden panels which are liable to breakages, and these cannot be replaced. Damaged wooden panels require disposal.
- Note: The newer versions have plastic panels which are less likely to be scrapped.

Raised Toilet Seats:

Dirt in seal

- This is an indication that harmful bacteria may have impregnated the seal. All debris in seals should be removed during the decontamination process.

Scratches

- All toileting aids are potentially high-risk because they can quickly become contaminated by harmful bacteria.
- Visible scratches can be readily impregnated by harmful bacteria and difficult to decontaminate compared to smooth surfaces. Scratches to toileting aids at contact and splash points preventing thorough decontamination pose significant infection control risks and must therefore be disposed of.
- Similarly, constant use can lead to the seals splitting or gaps appearing in the seal where the two sections of plastic moulding on the raised toilet seat fit

together. In this instance, they are very difficult to decontaminate and could lead to infection control issues, therefore they should be disposed of.

7. HIGH VALUE EQUIPMENT

Beds:

Any malfunction with bed stock would need to be checked to see if it is still under warranty as this stock is expensive. NRS will check warranty and 2.1 criteria before scrapping.

NRS will refer to the manufacturer if queries arise, or can seek further advice from infection control (Public Health).

Non-Contract Specials:

NRS will follow scrapping criteria as per 2.1 in the policy in relation to 'non-contract specials' and contact the manufacturer or infection control (Public Health) for further advice where necessary.

8. DECOMMISSIONING

Decommissioning and disposal of equipment is covered under NRS 'Technical Manual 26 section 2.6', to ensure that the risks to anyone disposing of or trying to salvage the equipment are minimised. The policy states equipment sent for scrapping 'Must be rendered unusable by severe physical damage thus preventing repair and subsequent resale or re-use'. This is in line with MHRA Guidance - Managing Medical Devices 2006 (05) Section 10.3 Decommissioning,

NRS is responsible for ensuring that scrapped items cannot be reused or present risk of harm to other persons.

When decommissioning equipment NRS will ensure compliance with all relevant environmental and waste regulations. The ICES team can obtain on-going advice and support from Public Health on specific requirements.

9. RECORD KEEPING / REPORTING

For low value equipment (£50.00 and below), the condition appraisals in 'Technical Manual 26, 2.1 scrapping criteria' plus the agreed principles for disposal and decommissioning in this guidance will apply.

Full records will be maintained by NRS which detail all items (including low value equipment) that have been scrapped on a weekly basis. Data related to equipment

that has been scrapped will be available for monitoring and review by the ICES team.

All equipment (including non-contract specials) will be inspected in accordance with the NRS policy and agreed principles in this guidance. Specific advice from the manufacturer will be requested where necessary.

If high value equipment is rejected and scrapped, the item will be issued with 'Label 005 Reject Item Certificate' (TM 26 Appendix 2) clearly identifying the reason for disposal and signed / dated by the NRS technician responsible.

10. AUDIT AND REVIEW

NRS will be responsible for carrying out their own Quality Assurance and periodic audits to ensure staff compliance with their own Scrapping Policy and associated policies.

Representatives from the ICES Partnership will also carry out periodic announced and ad hoc inspections / audits, as agreed with NRS management.

Through contract management and risk assessment arrangements, commissioners will monitor the effectiveness of quality assurance and disposal of equipment procedures.

This guidance to be subject to on-going review by the ICES Interagency Management Group or their delegate sub-working group, in consultation with NRS, in line with timescales identified on the front page of the document.

APPENDIX 1 – LEGISLATIVE FRAMEWORKS AND GUIDELINES FOR COMMUNITY EQUIPMENT

Medical Devices Regulations 2002 (amended 2003)

- Certain duties must be followed by manufacturers in line with Medical Devices Regulations e.g. CE Marking, performance and safety standards.

MHRA Managing Medical Devices, DB2006 (05), November 2006

This guidance covers all aspects of managing medical devices, including medical device management. Sections 8, 9 and 10 are particularly pertinent to the inspection of community equipment in terms of, for example:

- Management policy for medical devices.
- Choosing appropriate maintenance and repair services (including training of repair and maintenance staff), plus routine and planned preventive maintenance.
- Decontamination procedures.
- Removal of medical devices from the service.

Lifting Operations and Lifting Equipment Regulations 1998 (LOLER)

- LOLER regulations require inspections and servicing of work equipment supplied for lifting or lowering loads such as hoists and any accompanying attachments that anchor, fix or support the equipment.
- The regulations also require LOLER to be of adequate strength and stability for its purpose of use, correctly positioned and installed, marked appropriately (i.e. safe working loads etc.), and any defects to be reported appropriately.

Health and Safety at Work Act 1974:

- Employers have a duty to ensure, as far as possible, the health, safety and welfare at work of all employees.
- Sections 3 of the Act – employers are responsible for ensuring that persons not in their employment are not exposed to risks to their health and safety (as far as is reasonably practicable) i.e. inspecting, recording, training, maintenance, repair and replacement of equipment.

Management of Health and Safety at Work Regulations 1999:

- The regulations include the following; 'Every employer shall make a suitable and sufficient assessment of …. (b) the risks to the health and safety of persons not in his employment arising out of or in connection by him of his undertaking'.
- The regulations also require employers and with regards community equipment, commissioners to plan, organise, monitor and review work procedures and assess risks to employees and others (i.e. service users) that may be affected by health and safety failures.

General Product Safety Regulations 2005

- The regulations require producers and distributors to supply products that are safe in normal or reasonable foreseeable use i.e. issued community equipment must be safe.

Provision and Use of Work Equipment Regulations 1998 (PUWER)
PUWER requires all equipment used by employees, users, carers and clinical staff etc. under S3 of the Health and Safety at Work Act to be:

- suitable for the intended use and for conditions in which it is used;
- safe, maintained, inspected to ensure it continues to be safe;
- used only by the people who have received adequate information, instruction and training; and, accompanied with suitable safety measures, e.g. protective devices, markings, warnings.

It is the employer's responsibility to ensure that work equipment is constructed or adapted to be suitable for the purpose for which it is used or provided i.e. the equipment must be maintained in an efficient state, efficient working order and in good repair.

Sale and Supply of Goods Act 1994

- Suppliers of services are required to carry out that service with reasonable care and skill, and any goods supplied in the course of the service must be as described and fit for purpose.

Environment Protection Act 1990

- The Duty of Care is an important requirement of this Act which requires that a waste holder (producer, carrier or disposer) takes all reasonable steps to ensure there is no unauthorised deposit, treatment, keeping or disposal of controlled wastes. The main way in which this is achieved is by providing sufficient information to enable subsequent holders to manage the waste without threat to the environment or human health.

Control of Substances Hazardous to Health Regulations 2002 (COSHH)

- In addition to the usual requirements within the workplace under this regulation (e.g. the management of chemicals or detergents), NRS is required to strictly adhere to this regulation in relation to the control of biological agents such as bacteria and other dangerous micro-organisms.
- This regulation especially relates to infected or contaminated equipment. There should be clear policies, procedures and control guidance in place to ensure potential infectious diseases are kept under control e.g. protective clothing, decontamination/infection.

2008 Waste Framework Directive (Directive 2008/98/EC)
From a legislative perspective, a substance or object becomes waste when it is **discarded.** It includes the disposal of a substance or object and also its recovery or recycling. Whether a substance / object is being discarded has to be decided on a case-by-case basis, taking account of all the circumstances to ensure the aims of the Waste Framework Directive (WFD) (i.e. protection of the environment and human health) are not undermined.

Further important points to note in terms of the 2008 Waste Framework Directive include:

- Waste items require decontaminating in line with the manufacturer's guidance and a certificate of decontamination (Section 3.2 of MHRA DB2003(6), September 2003).
- Waste transfer documentation is required for all waste transfers and this paperwork is required to be archived by NRS for reference purposes to evidence, where required, that the waste has been passed on to an appropriate person.

Waste (England and Wales) Regulations 2011

- There are new obligations to apply the waste hierarchy to your decisions on waste management options when you transfer waste and to declare on transfer notes that you have done so. Transfer notes will also have to include a Standard Industry Classification (SIC) code for your business sector. For more details see:
- http://www.defra.gov.uk/environment/waste/legislation/waste-hierarchy/

The Hazardous Waste (England and Wales) Regulations 2005

Anyone producing, transport, or receive hazardous waste is required to comply with the Hazardous Waste Regulations. The Environment Agency (EA) has produced detailed technical guidance on assessing and classifying hazardous waste can be found in a document called WM2 “Hazardous waste: Interpretation of the definition and classification of hazardous waste”. WM2 gives comprehensive information to decide if a waste is hazardous. Any wastes produced that are regarded as hazardous wastes must be transferred in compliance with these regulations and full guidance can be found on the EAs website: http://www.environment-agency.gov.uk/business/topics/waste/