TITLE
WASTE MANAGEMENT

SCOPE
Provincial

APPROVAL AUTHORITY
Clinical Operations Executive Committee

SPONSOR
Nutrition, Food, Linen and Environmental Services

PARENT DOCUMENT TITLE, TYPE AND NUMBER
Not applicable

NOTE: The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

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OBJECTIVES

- To provide direction on the management of health care waste by Alberta Health Services (AHS).
- To establish an effective Waste Management System (WMS) that is safe, efficient, and practical and ensures compliance with all applicable legislation and government directives.

PRINCIPLES

AHS is committed to responsible and sustainable waste management and recognizes the importance of developing an effective and integrated WMS to:

- reduce our impact on the environment;
- promote safe practices which protect patients, residents, clients, the public, AHS People (including physicians, volunteers, and other contracted service providers) from waste related hazards;
- meet or exceed the requirements of all applicable legislation and recognized industry practice;
- demonstrate accountability and efficient use of health resources by containing or reducing costs;
- work collaboratively with all internal and external stakeholders to improve the WMS on a continual basis; and
- work towards becoming a leader in waste management.

All areas of AHS shall be responsible for familiarizing themselves with, and implementing, waste management procedures and programs for those waste streams that they impact.
AHS may be held legally responsible (liable) for improper handling of waste materials that may cause harm to others and the environment.

APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, Students, Volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).

ELEMENTS

1. Responsibilities

1.1 **AHS People** trained in handling, storage, or disposal of waste materials shall perform their duties in accordance with established procedures, legislation and training received. All AHS People involved in the handling, storage and disposal of waste materials shall participate in required training and refresher programs and/or retraining sessions related to new hazards, work processes, or equipment to perform their work pursuant to section 2.6 of this policy.

1.2 AHS People found to be responsible for improper handling of waste may be subject to disciplinary action up to and including termination of employment, privileges, contractual or other relationships with AHS.

1.3 The Linen and Environmental Services (LES) Department shall lead the development, implementation, management, communication, monitoring, and evaluation of associated strategies to establish a WMS within AHS in close collaboration with both internal and external stakeholders. Both LES provincial and zone based operations (including contracted service providers) shall work collaboratively in support of the WMS.

1.4 Senior leadership shall promote, endorse, and facilitate an organization-wide WMS.

1.5 AHS-owned or operated facilities, portfolios, and programs shall be compliant with the standards and criteria set out by the WMS and this policy. AHS shall work closely with wholly owned subsidiaries to ensure adequate resources and supports are provided to strive towards compliance and alignment of practice.

1.6 **AHS third party providers** are encouraged to align with the AHS WMS to ensure consistency across the health sector, but, at minimum, are recommended to have plans and procedures in place to mitigate their risks related to handling, storage and disposal of health care waste and to protect patients, families, and visitors.

1.7 Administration and management of the WMS shall be in accordance with this policy and its associated procedures.
2. Waste Management System

The WMS, and related programs and services, shall include, but are not limited to, the following elements:

2.1 Legislative Adherence

a) AHS shall act in accordance with legislation, related protocols, and governing professional bylaws and regulations.

2.2 Waste Streams

a) The WMS shall encompass health care waste streams, including (but not limited to):

   (i) Biomedical waste;
   (ii) Cytotoxic waste;
   (iii) Pharmaceutical waste;
   (iv) Hazardous medications;
   (v) Hazardous chemical waste;
   (vi) Radioactive waste;
   (vii) General waste (also known as municipal solid waste);
   (viii) Recycling waste; and
   (ix) Confidential paper waste.

b) Development of the governance, programs, services, and tools for each waste stream within the WMS should be prioritized by assessing the risk to the environment and to the organization.

2.3 Governance and Program Administration

a) Additional supporting documents, and educational tools may be developed, as required, to support programs and practices to manage health care waste materials at AHS sites.

b) Radioactive waste materials (radioactive waste stream) is governed and regulated by the Canadian Nuclear Safety Commission (CNSC).

2.4 Hazard Control

a) AHS shall utilize the Hazard Identification, Assessment and Control (HIAC) Process to develop preventative and protective measures for AHS
People who handle, store, and dispose of health care waste materials in accordance with the AHS Workplace Health & Safety policy (#1121).

2.5 Emergency Preparedness and Response
   a) In the event of a waste spill or other waste-related emergency, AHS People shall follow appropriate emergency response procedures as per AHS Emergency Response Codes policy (#1132) (Code Brown).
   b) In the event of a waste incident, all appropriate stakeholders including, but not limited to, LES, WHS, and any contracted service providers (where appropriate) shall work in collaboration to conduct the necessary investigation, follow-up, tracking and on-going surveillance of the waste related incident(s), in accordance with the WMS, this policy and associated waste management procedures, other applicable AHS governance documents, and the Incident Reporting and Investigation (#WHS-PCS-06).

2.6 Education and Training
   a) All AHS People required to handle, store, or dispose of waste materials shall be provided with training and information as part of the orientation process on the proper policies, procedures, hazards, and implemented controls.
   b) All AHS People required to handle, store hazardous waste materials shall have WHMIS training.
   c) All AHS People required to prepare hazardous waste for shipment shall have Transportation of Dangerous Goods (TDG) training.
   d) Training for applicable AHS People should occur prior to beginning the work and shall be repeated as per legislative requirements. If the training does not have a mandated re-training frequency, then the re-training should occur every three (3) years, or as soon as possible after:
      (i) new hazards have been identified through established processes such as waste audits, hazard reporting, incident reporting, and/or incident investigations; and/or,
      (ii) a new work process or equipment is introduced or an existing process or equipment has changed significantly.

2.7 Procurement and Contracting
   a) Procuring of goods and services related to waste management should be done in accordance Procurement and Contracting Business Practices (#1152).

2.8 Monitoring and Measurement
Verification of services received by vendors shall be performed by the area LES manager before vendor invoices are approved for payment. Verification should primarily be completed by weighing the waste before the vendor picks it up and transports it for final disposal. Where it is not possible to weigh the waste (i.e. the site does not have access to an appropriate scale), the containers should be counted by type and size and an estimated volume range should be calculated.

In accordance with the office of the Auditor General requirements key performance measurements such as biomedical waste costs, volumes, monitoring compliance related to health care waste though audits shall be monitored by LES to determine trends and inform future waste management strategies and initiatives.

2.9 Compliance Assurance

LES shall audit operations and facilities to ensure adherence to the principles of this policy and associated procedures, according to the WMS Compliance Assurance process(es) and plan(s).

Compliance monitoring findings should be shared, periodically, with Internal Audit, relevant AHS Senior Leaders, and Alberta Health or other federal and provincial government departments (as appropriate).

The WMS is subject to audits by AHS Internal Audit department and the Government of Alberta’s Auditor General.

AHS shall work proactively with suppliers to comply with the WMS requirements as set out in this policy and related procedures.

3. Records Retention

Information pertaining to the Waste Management policy shall be maintained in accordance with the AHS Records Management policy (#1133).

DEFINITIONS

AHS third party providers mean health care providers in Alberta that AHS may be affiliated with, but are not legally or operationally responsible for, e.g. Bethany Care Group.

Biomedical waste means solids, liquids, laboratory waste and sharps that are generated within a health care facility, and that require special handling and disposal because they represent a risk of disease transmission.

Confidential paper waste means any record or information that relates to or identifies patients, staff, volunteers or students with Alberta Health Services sites or facilities.

Contracted service providers means any non-AHS or wholly owned subsidiary that are contracted to provide direct patient care services.
**General waste** means any waste material that is not hazardous, does not contain an infectious substance, and which can be safely disposed of into a Class II landfill site.

**Hazardous medication(s)** means medications that may pose a health risk from exposure in the workplace due to the medications inherent toxicity.

**Hazardous chemical waste** means unwanted substances that have the potential to harm life, property or the environment; and/or contains one or a mixture of chemical compounds (e.g. solvents, reagents, paints, fuels) and is classified as hazardous. Examples of hazardous waste include, but are not limited to:

- Toxic;
- Corrosive (pH 1 - 12 pH);
- Flammable;
- Reactive (explosive, water reactive, shock sensitive);
- Genotoxic (carcinogenic, mutagenic, teratogenic, or otherwise capable of altering genetic material)

**Health care waste** means waste that is generated by health care facilities.

**Pharmaceutical waste** means drugs, and medicinal chemicals that are no longer usable; have become outdated or contaminated; have been stored improperly; or are no longer required.

**Radioactive waste** means a liquid, gaseous, or solid material that contains a radioactive nuclear substance as defined by the regulatory authority and that the owner has declared to be waste.

**Recycling waste** mean glass, paper, batteries, beverage containers, cardboard, etc. that can be treated or converted into reusable material.

**Senior leadership** means the President and Chief Executive Officer, all executive positions that report directly to the President and Chief Executive Officer, and any other positions so designated by the President and Chief Executive Officer.

**Sustainable waste management** means being responsible to reduce environment impacts associated with the generation, handling and disposal of waste materials in order to ensure the benefit of future generations.

**Vendor** means a company who is contracted to provide a service to AHS, e.g. Sodexo.

**Waste management system** means a system for the management and oversight of health care waste for AHS. The system includes, but is not limited to governance documents, standards, criteria, programs and tools.

**Waste stream** means the flow of waste material from generation to its final disposal. Waste is segregated into different waste streams according to the type, or classification of the waste items, such as General Waste, Recycling, Biomedical Waste, Confidential Waste, Hazardous Chemical Waste, etc.
REFERENCES

- Alberta Health Services Governance Documents:
  - Biomedical Waste Procedure (#ESM-01-01)
  - Emergency Response Codes Policy (#1132)
  - Hazardous Chemical Waste Procedure (#ESM-01-02)
  - Procurement and Contracting Business Practices (#1152)
  - Records Management Policy (#1133)
  - Workplace Health & Safety Policy (#1121)

- Alberta Health Services Resources:
  - Hazardous Medications Personal Protective Equipment (PPE Guide)
  - AHS Hazard Identification, Assessment and Control ("HIAC") Process, AHS Workplace Health & Safety policy (#1121)
  - Transportation of Dangerous Goods

- Non-Alberta Health Services Resources:
  - Canadian Environmental Protection Act
  - Transportation of Dangerous Goods Act (Canada)
  - Environmental Protection and Enhancement Act (Alberta): Waste Control Regulation
  - Public Health Act (Alberta): Nuisance and General Sanitation Regulation

VERSION HISTORY

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