



Healthcare Risk Waste Consultation,  
Environmental Licensing Programme,  
Environmental Protection Agency,  
PO Box 3000,  
Johnstown Castle Estate,  
County Wexford.

19<sup>th</sup> September 2014

**Re: Healthcare Risk Waste Consultation**

Dear Sir/Madam,

The Irish Waste Management Association (IWMA) welcomes the opportunity to participate in the Healthcare Risk Waste Consultation. The IWMA is the voice of the private waste management industry in Ireland. IWMA members are active in every county in Ireland and contribute to the management of waste at each level of the waste hierarchy. Our membership includes small, medium and large companies, with some operating internationally, managing both hazardous and non-hazardous wastes.

1. Consultation Question 1

*The Agency is seeking views as to whether the deposit of waste at a hub location means that the location/hub where the waste is deposited is a waste facility requiring authorisation?*

The three specific examples given in the consultation have been dealt with separately below as they are describing very different scenarios.

- a. *Employees of the Health Service Executive or its healthcare contractors/agents (i.e. medical personnel), such as district nurses, generate healthcare risk waste as part of their normal activities in the community and carry it back to base or to a waste storage facility at a local hospital. Such carriage is normally in their own vehicles or those provided by their employers.*

It is the view of the IWMA that a hospital bin storage compound where waste from healthcare personnel's home/community visits is deposited should not require a waste facility authorisation. This scenario should be considered an exception to the general position which applies to the deposit of waste generally, and to examples (b) and (c) below. The requirement for such a bin storage compound to have an authorisation in this scenario would represent an unreasonable and disproportional level of regulation for such a small-scale service. The benefit of handling these small quantities as an exemption outweighs the logic of enforcing waste facility authorisations and waste collection permits.

- b. Commercial waste collectors are employed specifically and solely to carry healthcare risk waste from smaller facilities (clinics, nursing homes etc.) to a hub.*

In this circumstance it is the IWMA's view that the central healthcare risk waste storage area would require authorisation under the Waste Management Act as the facility would be effectively operating as a hazardous waste transfer station. The commercial waste collector is required to hold a valid waste collection permit under the Waste Management (Collection Permit) Regulations and is only permitted to deposit waste at an appropriately authorised waste facility. The commercial operator's principal business in this instance is in waste collection and they are solely operating for commercial gain. This type of facility must be controlled in the same way as any other hazardous waste transfer station in order to protect the environment.

There are risks involved in the storage of hazardous healthcare waste which must be controlled. The management of this waste must be regulated and therefore the facilities must be authorised under waste management legislation. The relaxation of this requirement would have a negative effect on waste management in all areas of the country and undermine the waste companies that are operating fully authorised waste management facilities.

- c. Certain healthcare contractors deliver healthcare supplies to housebound patients and, at the same time, take away used materials as part of the service to the patient. The used material (waste) is taken to the location that is the base of such operations.*

It is the view of the IWMA that the 'base' described in this example certainly requires authorisation under the Waste Management Act as the facility is operating as a hazardous waste transfer station. The collection of waste in this circumstance must be carried out in compliance with the Waste Management (Collection Permit) Regulations 2007 and the European Communities (Shipments of Hazardous Waste Exclusively within Ireland) Regulations 2011. The base at which this waste is deposited must also then have appropriate waste authorisation. The drivers of these vehicles are required to hold appropriate ADR driver training certificates.

Although in principle this example is the same as that discussed in section 2 (a) above, the IWMA believe that an exemption should be applied to scenario 2(a) as it will always be limited to small quantities of waste. In contrast, a healthcare contractor can be delivering supplies to numerous home patients on a particular route. They could essentially fill their van with waste for their return journey back to their warehouse or factory. Irrespective of the legal requirements, it is surely recognised that this base will not be a suitable location to store potentially infectious healthcare risk waste or other healthcare waste types.

The relaxation of this legislation for commercial operators would have a negative impact on waste management in Ireland and would undermine the waste companies that are operating compliantly. It would in effect open the doors to unregulated waste movements and waste storage operations in all industries. The healthcare waste activities in this example in particular must be controlled in order to prevent situations such as the build up of stockpiles of infectious healthcare waste in unsuitable industrial buildings throughout the country.

## 2. Consultation Question 2

*The Agency is seeking views on the appropriate level of regulation for such machines/activities and whether the current level of regulation (i.e. an EPA licence) is proportionate to the environmental risk posed by the machines/activities.*

The environmental risk posed by the machines/activities is heightened by their proximity to hospital patients and staff. These risks must be carefully controlled through the licensing regime in the same way that they would be at any other less sensitive location. An EPA Licence or similar licence/permit with the equivalent level of regulation is appropriate for such activities to ensure that the risks identified are controlled effectively.

There must be sufficient enforcement and monitoring of these activities on hospital sites in order to protect human health and the environment. This can only be achieved through the current EPA licensing process or equivalent. Controls would also be required to ensure that these machines do not become a disposal option for all waste produced by the hospitals. This would have a negative impact on segregation and recycling. Waste segregation practices will be required to be carefully controlled to prevent the mixing of hazardous waste during handling as prohibited under the European Communities (Waste Directive) Regulations 2011. The regulatory system controlling these operations must have the equivalent level of control as a waste licence to ensure responsible waste management and compliance with legal requirements. The Agency is currently the only regulatory body in the country that has expertise and experience in hazardous waste treatment operations of any kind. Healthcare risk waste in particular requires specific expertise.

It is important to examine how these activities are regulated in England, as a comparison, when deciding on the appropriate level of regulation in Ireland. In England, the same activities on hospital sites will be controlled by an Environment Agency (EA) Standard Rules Permit which will contain the same basic requirements as the bespoke permit issued to a commercial operator of a larger scale healthcare risk waste treatment plant. It is acknowledged there, that although the activities on the hospital site are on a smaller scale, the risks are increased due to the sensitivity of the location and therefore a similar level of authorisation is appropriate.

### 3. Consultation Question 3

The statutory cost of applying for a licence involving the disposal of hazardous waste is €30,000. The Agency is seeking views on whether such costs will have an impact on the development of new technologies.

The IWMA believe that the statutory cost of €30,000 for an application for a hazardous waste disposal licence does have an impact on the development of new technologies. The costs also have an impact on companies with proven technologies.

A tiered system based on waste quantities and risk may be more appropriate. The Agency must ensure that the application fee covers the cost of a full and detailed assessment of the application. The fee should also be high enough so as to discourage incomplete applications or applications lacking detail or clarity.

### 4. Consultation Question 4

The Agency is seeking views as to whether certain healthcare risk waste storage and treatment facilities/activities should be regulated by local authorities, reflecting the following factors which may be applicable:

- the level of environmental risk posed by the activities
  - their relatively small scale, and
- a. *The storage of healthcare risk waste in hubs where healthcare risk waste is accepted for storage from other healthcare facilities; subject to a maximum storage capacity of 20 tonnes would require a facility permit from a local authority.*

The level of environmental risk posed by these transfer stations or 'hubs' is the same as at the two healthcare waste facilities currently operating under IED Licences in Ireland. In reality, the risk may be higher depending on the location of these hubs. The environmental risk associated with these activities cannot therefore be a factor in changing the regulations around the authorisation to local authority permitted sites. The existing local authority permitting system would not provide appropriate control nor do the local authorities currently have sufficient expertise and resources to regulate such facilities.

A proportion of healthcare risk waste is putrescible and can cause odour and attract vermin. The waste licence for such facilities should include conditions to control storage and handling, tracking, incident response plans, fire prevention plans, environmental liability risk assessments and other requirements that would all be necessary at these transfer stations.

These types of facilities are permitted under the EA Standard rules permit SR2008 No.25 in England. They are limited to a maximum quantity of 10 tonnes per day of hazardous waste for storage. This is exactly half of the tonnage that the facilities described in this consultation would be permitted to accept. The standard rules permit in England still contains all of the same requirements as a bespoke permit for a larger facility and they are regulated by the EA. Therefore the storage of 20 tonnes of healthcare risk waste would not fit the description of relatively small scale and must be regulated in the same way as any

other hazardous waste transfer station. In the absence of extensive investment in training and resources, local authority regulation would represent an unacceptable level of regulatory control.

- b. *The treatment of infectious or potentially infectious healthcare risk waste in machines at the hospital. The proposed maximum aggregate treatment capacity of (all) treatment machines at the facility is 1 tonne per day.*

The environmental risks associated with the operation of these machines are heightened where the treatment is taking place on a hospital site in close proximity to patients and staff. There is potential for exposure if anyone is resident or working close to a room containing a unit. These risks need to be carefully controlled through the licensing regime which applies to the same activities on any other less sensitive location. A waste licence or equivalent, regulated by the EPA or similarly experienced and qualified body, is the only appropriate level of regulation for such activities to ensure that the risks identified are controlled effectively.

The consultation is referring to treatment operations at machines in hospitals of up to 1 tonne per day, which is over three times the limit of the EA standard rules permit SR2013 No 1. Therefore the treatment of 1 tonne of healthcare risk waste per day would not fit the description of relatively small scale. These facilities in England will also be regulated by the EA and must comply with the same strict monitoring and efficacy testing regimes as a waste treatment plant with a bespoke environmental permit. The EA are the regulators of all hazardous waste treatment operations in England and they have the experience and expertise to regulate these processes. Similarly in Ireland, the EPA is the regulator of hazardous waste treatment including the two clinical waste treatment plants in Dublin. Local authorities have no past experience in the regulation of hazardous waste treatment facilities of any type. Healthcare risk waste treatment in particular requires specialist expertise making local authority regulation acutely inappropriate without significant investment in training and resources.

- *Sensitivity to the high costs associated with applying for and maintaining an EPA licence.*

The environmental risks of the operations described in this consultation are sufficient to warrant a waste licence. If there is concern that it is unfair to charge a smaller facility the same amount as a much larger one, then the Agency can arrange their charges on a sliding scale, rather than change the regulatory control of these operations.

The Agency's enforcement charges are based on site specific factors, mainly environmental risk. The Agency must examine the risks of these activities on a site by site basis and determine what the minimum enforcement charge can be. This will be the minimum charge that makes the regulation of the activities feasible. This structure should not be ignored on the grounds that a company is sensitive to the costs that have been calculated as a result of it. It is the view of the IWMA that reducing the level of enforcement of these facilities in highly sensitive locations to local authority permitted sites on the basis that they are cheaper would be an unacceptable option. If the cost of maintaining the licence is too high to make the activities viable then they are not a realistic option for waste management.

5. Consultation Question 5

*The Agency is seeking views on what is the appropriate level of regulation for autoclaves used in laboratories for the treatment of laboratory waste.*

The IWMA's view is in support of the EA's position in England. The IWMA do not believe that treatment of microbiological laboratory waste in a laboratory autoclave in the premises where it is produced is an activity requiring waste authorisation.

I hope the above comments are helpful in your decision making on this subject. We are available to meet to further engage on the subject should you wish to do so.

Yours Sincerely,



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