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Environmental Permitting (England and Wales) Regulations 2016

Variation to Standard Rules Permit

Permit Reference	**EPR/EP3490SD**
Date of Issue	**Feb 2023**
Version Number:	**2**
Report Reference	**SRCL_LIT_EP3490SD_Variation_App_Feb_2023**

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1. Introduction

This permit variation is being made to transfer the permit from a standard rules permit (SR2008 No 24) to a waste operation.

In this variation we are looking to

- increase the permitted hazardous waste storage
- include extra waste codes in the waste types that are permitted for repackaging into a bulk container
- inclusion of the activity for the light compaction of offensive waste

The revision of the standard rules permit defines repackaging as:

> "(i) taking a waste package for example a bag, drum or box out of one cart or bulk container (for example, skip) and placing it into another
> cart or bulk container
> (ii) taking a waste package from a cart or bulk container and placing it onto a pallet or vehicle
> (iii) taking a waste package from a pallet and placing it into a cart or bulk container"

2. Non-Technical Summary

The site comprises of a healthcare waste transfer station. The site will receive packaged healthcare and related wastes that are suitable for repackaging and or transfer off-site to other disposal or recovery facilities.

The transfer station consists of the following activities:

- Waste operation - the storage of hazardous wastes pending transfer off-site for disposal or recovery
- Waste operation - the storage of non-hazardous wastes pending transfer off-site for disposal or recovery
- Waste operation – repackaging of offensive waste (light compaction) pending transfer off site for disposal or recovery
- Waste operation – repackaging of hazardous and non-hazardous wastes pending transfer off site for disposal or recovery

The following are associated activities to the transfer station:

- Bin washing system for re-usable waste containers

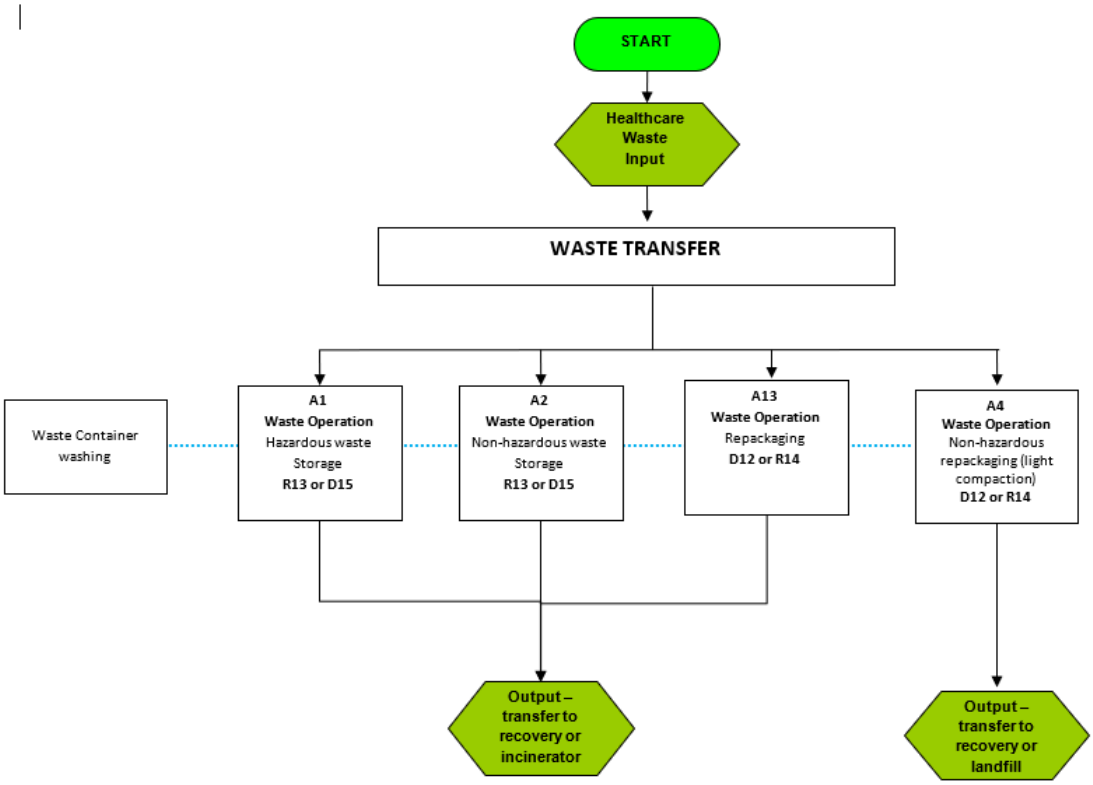
The main features of the facility are as follows:

There is an emission point to foul sewer for effluent arising from the container washing process. There are no emissions to air, ground or surface water arising from the activities at the site.

Waste is stored in designated storage areas inside the building. All designated storage areas have impermeable surfaces with sealed drainage and all waste is stored in fully enclosed, leakproof containers.

The site is operated in accordance with the company's Business Management System (BMS), which is certified to ISO 14001 and 9001. The management system includes policies, procedures and work instructions designed to ensure compliance with all permit conditions.

2.1. Activity Flowchart



An odour management plan has not been submitted with this application as, the appropriate measures guidance (point 19) requires an odour management plan where odour pollution is

expected a sensitive receptor(s). The facility has been in operation for over 13 years (since permit first issued 22/12/2009), for which no correspondence either to us or through the regulator has been received regard the operations, which would include odour. You will note that section 8.10 of our application provides detail on our odour management techniques employed at the facility to maintain this position. The addition of extra tonnage does not increase the risk of odour, the waste will still be storage/disposed of in accordance with the storage timeframes detailed in the appropriate measures guidance for healthcare waste. In addition to this our management system includes daily inspections of the storage areas which include amenity, which would prioritise the removal of waste. These measures are all detailed in section 8.10 of our application document. As such we do not believe that there is a requirement for the submission of an odour management plan.

2.2. Waste Operation Activities

Waste operation activities			
operation name	Description of the activity	Activity capacity	Annex IIA or IIB codes
A1 Transfer station – hazardous	Storage of hazardous waste prior to transfer	Max throughput 4,665 tonnes/year Max storage 15 tonnes	R13; D15
A2 Transfer station – Non-hazardous	Storage of non-hazardous waste prior to transfer	Max throughput 6,220 tonnes/year Max storage 20 tonnes	R13; D15
A3 Transfer station – haz/non-hazardous	Repackaging of clinical waste	Throughput <35 tonnes/day Included in the storage capacity for A1 & A2	R12; D14
A4 Transfer station – non-hazardous	Repackaging of offensive waste – light compaction	Throughput <20 tonnes/day Included in the storage capacity for A2	R12; D14

3. Activities

3.1. Light Compaction of offensive waste

In this variation we would like to include the activity for the light compaction of offensive. This activity is being carried out at other Stericycle facilities, with the agreement of the Environment Agency.

Further details on how the activity is undertaken in accordance with the appropriate measures are provided as follows.
The appropriate measure guidance does not define what is considered light compaction other than the following:

- *The design and operation of the compaction process is unlikely to result in any bags splitting*
- *It is only carried out to move bags along a bulk container – for example, by operating at low hydraulic pressure*

Stericycle have detailed procedures on the compaction of offensive waste streams which detail the compaction rate set points which we consider 'light compaction'.

The compaction set points have been established by undertaking numerous trials on both static and mobile (RCV's) compactors to determine the most appropriate hydraulic force which reduces the risk of bag splitting, only moves bags along the bulk container and removes air pockets to ensure payloads are maximised. The trials were completed by gradually increasing the hydraulic force from its minimum setting upwards and monitoring each load being tipped at landfill to check the condition of the bags when unloaded. At the point where there was evidence of bags being split at the landfill the trial was stopped and the last setpoint where bags remained intact retained. These setpoints were then monitored to ensure the condition of the bags remained consistent on each tip. The hydraulic pressure setpoint is actively monitored via sensors on both the static and mobile compactors and when full, a lockout is initiated to prevent further bins being loaded, thus ensuring that the hydraulic compaction setpoint is not exceeded.
These setpoints are defined in our operating procedures for nationwide consistency and are actively monitored to ensure continued compliance. In the event of bags being split this would be reported back to Stericycle and an incident recorded. The incident would be investigated, and any setpoints reviewed as part of investigation process.

Appropriate measures to minimise risk of pollution

The appropriate measures guidance requires Stericycle to have measures in place to prevent pollution from, for example, odorous emissions to air, or releasing liquids to surface water. Detailed below are the infrastructure and Environmental Management System procedures that are in place to prevent pollution to air, ground and water.

Air

Offensive waste by its nature can be odorous. Stericycle ensures that offensive waste is processed and/or stored and transferred in the shortest possible timeframe to ensure odorous emissions are limited and contained. Offensive waste is stored only in 770L carts with closed and locked lids prior to decanting into a static or mobile compactor. The compactor unit has a leakproof seal and once loaded is more effective at containing odour than when stored in 770l carts. Once in the compactor skip, odorous emissions are contained, and quick turnover of the skips ensures that the waste is on site for the shortest possible timeframe. Site diaries are completed daily which include checks for odour. The compactor area is in scope for these checks.

Water (release of liquids)

The compactors are fitted with a leakproof seal and are designed for use in other 'wet waste' industries such as food wastes which are compacted to much higher compaction rates without releasing any fluids. Compactors are serviced regularly to ensure they remain in good condition. In the unlikely event of a spillage from the compactor, Stericycle's emergency response procedures would be enacted to contain and clean up any leaks before entering a drain. In addition, compaction only takes place in an area which drains to foul sewer so there is no possibility of liquids entering the surface water. Site diaries are completed daily which include checks for infrastructure and housekeeping, the compactor and compactor area is in scope for these checks.

Ground

In addition to the above, the compactor area is on an area of impermeable hard standing within the permit boundary which drains directly to the foul sewer. Site diaries are completed daily which include checks for infrastructure including surfacing, the compactor and compactor area is in scope for these checks.

Containment of body fluids, micro-organisms and liquid discharges

The equipment and infrastructure specified for this equipment ensure that there is adequate containment of body fluids, micro-organisms and liquid discharges. As discussed above, the compactor skip is fitted with a leak-proof seal and has been designed for 'wet waste' industries where much 'wetter' waste is compacted to higher compaction ratios than Stericycle's light compaction of offensive waste. The compactor is capable of containing all releases. In addition to this, daily monitoring is carried out via the site diary process which includes checks on infrastructure, equipment and housekeeping. The compactor and compactor area is in scope for these checks.

Fugitive bioaerosol emissions

It is our understanding that there is no methodology or requirement defined for the monitoring of fugitive bioaerosol emissions in the sector guidance as the light compaction is not classified as a treatment activity and only non-hazardous, non-infectious waste is subject to compaction. Stericycle are not claiming that the compaction falls under the definition of

heavier compaction to which would be classified as a D9 or R12 treatment operation and where emissions monitoring would be required.

Waste Process Acceptance and Waste Quarantine

is currently in the process of updating our offensive waste management procedure so the existing Waste Process Acceptance procedure is not attached however this can be supplied at a later date. This procedure details what can be accepted and what may require separation via the existing Waste Rejection and Quarantine Procedure (Appendix 1) which will be retained.

3.2. Repackaging of hazardous and non-hazardous waste

Repackaging of waste i.e. palletization of rigid units or 'bulking' of approved packages into a trailer is currently undertaken by Stericycle however is not included as a repacking activity within the permit as required by point 23 of waste storage, segregation and handling appropriate measures. Stericycle propose its inclusion under the review process.

It is condition 2.1.7 of the permit that we are seeking a waste operation permit now to increase the waste codes that are permitted for repackaging.

Repackaging into trailers

Both hazardous and non-hazardous waste streams (other than those outlined within point 9 of the waste storage, segregation and handling appropriate measures) are repacked into trailers. See section 6.3 for details on storage of waste in trailers. Trailers are loaded/unloaded on a loading bay door (within a building) and waste streams are appropriately segregated. Stericycle's loose waste handling procedure (WI6.02.06) (appendix 6) details how this process is carried out.

Repackaging onto pallets/pallet boxes

Rigid sealed units or approved cardboard boxes maybe palletized by removing them from carts, transferring them to pallets or pallet boxes to facilitate storage or third party disposal.

Pallets are shrink wrapped or strapped with units being stacked upright wherever possible. Pallets meet points 2, 3 and 19 of the waste storage, segregation and handling appropriate measures. This activity is always completed inside of a building.

3.3. Wheeled Cart Washing

After the contents of carts have been emptied for processing or transfer, the cart is the washed via a manual washing process, using a sanitizer detergent. The cart is then rinsed with clean water and drained before being returned to customers.

The area used for cart washing is fully bunded with appropriate drainage. The discharge from the cart washing is dilute and contains a trace of the biodegradable detergent. This is then discharged to foul sewer via an interceptor as trade effluent.

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4. General Management appropriate measures

4.1. Management System

Stericycle operates an integrated environmental, quality and health & safety business management system (BMS). The system is externally certified by BSI to ISO14001 and ISO9001. The management system is in operation at all UK Stericycle facilities.

An overview of the management system structure is provided in the following table

Section No.	Section Name	Activities covered
0	BMS Manual	Includes an outline of the set up of the management system, the EHS policy and objectives and Targets.
4-100	EHS Management	Document control; record-keeping; audit; corrective & preventative action; planning & review; EHS communication; risk management; EHS team management; incident reporting & investigation; emergency management; and good catch reporting.
4-200	Health and Safety	H&S management; consultation, representation & information; managing contractors & visitors; safe maintenance; PPE; safe systems of work; control of harmful substances; provision and use of work equipment/machinery; managing traffic and vehicles on site; use of safety signs & signals; work at height and other key H&S principals.
4-300	Fleet Safety	Sales process including pre-acceptance
4-400	Environment	Operational management for all facilities including waste reception, acceptance, storage, rejection and quarantine; plant operating techniques; disposal of by-products; emissions monitoring; efficacy testing & validation; and permit compliance.
4-500	Security	Access control & facility security; CCTV policy; CCTV process and other key security principals.
4-600	Quality	Sales (including pre-acceptance); complaint management; disposal vendors; procurement & supply chain; and other key quality principals.

The procedures within the management system define out the roles and responsibilities of staff members, for which the receive training as outlined in section 4.2.

In addition to the external audits (certification, regulator and specialised external consultants) the site is also subject to internal audits; these audits are carried out at least annually or more frequently if dictated by a change to site management or a significant non-compliance found during a previous audit. The results of these internal audits are recorded

in the management system to show overall score and any non-compliance identified and any remedial actions required.

4.2. Staff Competence

All employees receive training in all aspects of the integrated business management systems and have access to the management system documentation and reporting tools this is made available to all managers and key employees via the SRCL intranet. This training includes documented working procedures, accident prevention and management arrangements and emergency response procedures. Training records are maintained for each individual.

All temporary workers on the site, such as contractors, receive inductions and training prior to commencing any work on site to make them aware of the site rules, potential hazards, and how their own activities might affect the environment as well as the H&S of other employees. All contractors work on the site under the terms of a Permit to Work, and for any significant or extended work the Plant Manager will carry out a risk assessment covering all the safety and environmental aspects of the work. Such contractors would also be requested to provide a Method Statement of the intended work before commencing work on the site.

The site is overseen by a site manager. The site manager also holds the appropriate Waste Management Industry Training and Advisory Board certificate.

4.3. Accident Management Plan / Accident Prevention Measures

The accident management plan has been developed in-line with the sector guidance, and includes the considerations given to the control measures in place. The main activities, potential releases and control / prevention measures are set out in the following table.

Aspect	**Consequence of release**	**Controls**
Receipt of Waste	Litter Contaminated land Surface water contamination	Secure storage in UN approved bags and secondary containment in leak-proof, lockable wheeled carts Containment e.g. fully concreted floors / tarmacadam site All drains to foul sewer Emergency procedures are also in place for any potential spillage
Storage	Litter Contaminated land Surface water contamination	Secure storage in UN approved bags and secondary containment in leak-proof, lockable wheeled carts Containment e.g. fully concreted floors / tarmacadam site All drains to foul sewer Emergency procedures are also in place for any potential spillage

Transfer of waste	Litter Contaminated land Surface water contamination	Secure storage in UN approved bags Containment e.g. fully concreted floors / tarmacadam site All drains to foul sewer Emergency procedures are also in place for any potential spillage
Transfer of Substances	Spillage failure of containment (for example, bund failure, or drainage sumps overfilling)	Emergency procedures and equipment in place for dealing with potential spillages are also in place Oils and chemicals are kept in bunded areas. Drip tray/catch pots at points of use/dispensing Containment e.g. fully concreted floors / tarmacadam site Activities on site reviewed throughout operation and recorded in shift log and site diary.
Fire	Release to air Fire	With regards to fire detection, firefighting equipment and housekeeping procedures to ensure fire risk is further minimised, the following measures will be in place: Emergency procedures in place, supported by training and provision of equipment (hose/extinguishers) Fire detection in office areas Fire call points in strategic locations across the site (as a minimum, by each exit door) Housekeeping procedures are implemented and checked daily to avoid build-up of loose combustible waste, dust and fluff. Wastes are kept in wheeled carts which can be readily moved to limit the potential of fire spread.
Fire	failure to contain firefighting water	Measures in place to minimise the potential for fires. Site infrastructure arrangements.
Wrong connection to drain	Contamination of water	Permit to work system in place EMS contains a procedure for process change to be followed before making any changes, which would capture this.
Incompatible substances	Release of fumes Fires	COSHH assessments of substances are available, and these substances are segregated. Any wastes arriving remaining in the same segregated state as from the customer.
Operator Error	Spillage Contamination of land Contamination of water	Training/guidance Supervised by experienced staff Subject to regular reviews/assessments Containment e.g. fully concreted floors / tarmacadam site All drains to foul sewer

Vandalism and Arson	Spillage Fire Contamination of land Contamination of water	Manned 24/7 Security/CCTV Doors kept shut during night shifts to prevent unauthorised access, with only one way entrance/exit Vehicles are only in yard for a few hours before shift changeover Containment e.g. fully concreted floors / tarmacadam site All drains to foul sewer
extreme weather conditions	flooding or very high winds	Signed up to flood warning systems (where applicable) Emergency response procedures in place Wastes are kept in wheeled carts or sealed units secured to pallets, which can moved in event of flood. Wheeled carts are stored with brakes applied and locked.
Checking the composition of an effluent before emission		Monitoring of emissions to sewer is undertaken during commissioning and validation of the treatment plant.

The control measures outlined within the report are subject to regular review through the planned, preventative maintenance system, which allows monitoring of infrastructure and any remedial work required to be undertaken, but also through system of audits both internal and external.

The facility does not currently comply in full with appropriate measures 4, 5, 6 & 8 relating to the prevention of accidental emissions as an assessment of the containment requirements for emergency firefighting water and storm water flows and associated buffer storage has not been conducted. In order to correct this we will conduct the necessary assessments (to be informed by the development of new infrastructure plans as stated in section 12) to determine whether any infrastructure upgrades are required (for example additional bunding and/or storage capacity) with a view to completing any infrastructure works within 3 years.

Further to this the site also operates a shift log where all activities relating to the site are recorded, which would include any issues identified during that shift. These are reviewed not only by the next shift, but also the site manager during working hours to ensure that any remedial actions required are undertaken.

In addition to the control measures above the site also maintains an incident response plan, developed from the Emergency Preparedness and Response section of the company Business Management System (BMS). This plan contains relevant site information such as drainage and utility isolation points as well as key contacts and actions to take in the event of an Emergency.

4.4. Fire Prevention Plan

Incompatible substances

Segregation of wastes according to compatibility is discussed in section 6.7 and 6.9 of this report.

Combustible Wastes & Fire Prevention Plan

The clinical waste sector is not in scope for the Environment Agency's fire prevention plan guidance (as defined in section 2. Who this guidance applies to), and as such Stericycle do not intend on creating a FPP.

The Environmental Risk assessment (appendix 3) deems the fire risk on site to be very low and historically Stericycle have not had any fires occur at treatment plant facilities or transfer stations. Incident response plans and emergency procedures will be in place at the facility in line with Stericycle's BMS requirements. All of the waste streams are containerized whilst in storage and do not constitute the definition of waste in containers or waste in piles as outlined within the Fire Prevention Plan (FPP) Guidance. The risk of self-combustion is negligible.

Emergency procedures/Housekeeping procedures

With regards to fire detection, firefighting equipment and housekeeping procedures to ensure fire risk is further minimised, the following measures will be in place:

- Fire detection in office areas
- Fire call points in strategic locations across the site (as a minimum, by each exit door)
- Provision of fire fighting equipment such as extinguishers in strategic locations across the site (as a minimum, by each exit door and in areas containing electrical equipment)
- Housekeeping procedures are implemented, checked and recorded daily to avoid the build-up of loose combustible waste, dust and fluff. These include:
    - Daily localised housekeeping regime led by shift managers/team leaders i.e. around work stations, auger, compactor skips etc.
    - Weekly housekeeping regime led by the plant manager which includes litter picks, clean down of maintenance areas etc
    - Housekeeping standards and requirements are recorded on the site diaries and any areas requiring attention are dealt with promptly
    - A deep clean of high-level areas is undertaken annually as part of the site maintenance strategy

4.5. Contingency plans and Procedures

The company has documents in place for the acceptance of waste on site in accordance with the capacity of the site, as well as contingency plans for network plant breakdowns, staff

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shortages etc. This excludes planned network maintenance/shutdowns as these periods are coordinated by a central support function within the company.

4.6. Site Infrastructure

Due to the differing age of Stericycle's sites and the permitting regime they were permitted under, infrastructure plans vary. See section 12 which outlines our plan to update these in accordance with the section 2 of the guidance – general management appropriate measures. See appendix 5 for current plans.

4.7. Site Condition Report

See appendix 2.

4.8. Inventory of emissions to air and water

There are no emissions to air.

See section 7 & appendix 4 for water inventory.

4.9. Residues management plan

The residue management plan is included in the company Business Management System (BMS).

4.10. Odour management plan, if required

See comments in section 8.10.

4.11. Noise and vibration management plan, if required

Not required, the item was screened out in the Environmental Risk Assessment (appendix 3).

4.12. Dust management plan, if required

Not required, the item was screened out in the Environmental Risk Assessment (appendix 3).

4.13. Pest management plan, if required

Not required, the item was screened out in the Environmental Risk Assessment (appendix 3).

4.14. Climate change risk assessment

This is not required, see section 10.3 for further details.

5. Waste pre-acceptance, acceptance and waste tracking appropriate measures

5.1 Waste Pre-acceptance and Acceptance

Waste pre-acceptance data will be obtained prior to acceptance of wastes from all waste producing sites. In practice the waste producers whose waste will be received at the facility will already have provided Stericycle with suitable pre-acceptance data as they are already Stericycle customers whose waste is currently received at other facilities.

The pre-acceptance system operated by Stericycle conforms with the requirements set out in the appropriate measures guidance, is fully documented in the company business management system and is already in operation.

Waste acceptance checks are undertaken on site to verify that the packaging conforms with the description of the waste, this process is fully documented in the company business management system and is already in operation (and has therefore been subject to regulatory audit and inspection) at 17 other permitted facilities operated by Stericycle in England.

This includes a visual check of waste types pending transfer to ensure that the waste type contained within the cart is as per the identifiable tab on the exterior of the cart.

A waste quarantine and rejection procedure is in effect for the handling and reporting of non-conformant wastes.

5.2 Waste tracking

Stericycle operates a proprietary waste tracking system that requires all waste carts, pallets or other secondary containers to be labelled with bar-coded tags that hold all relevant information pertaining to the waste in the container. All waste received is weighed on receipt and again before processing through the treatment plant or transfer off-site. This system enables the following:

- Maintenance of waste segregation as required by the appropriate measures guidance
- Management of waste stocks to comply with permitted limits
- Management of waste stocks to ensure routine and efficient turnover of waste, thus minimising the risk of odour or other problems
- Record keeping of tonnage throughputs to comply with permitted limits
- Only wastes permitted for treatment can be processed through the treatment plant (barcode labels for transfer only wastes cannot be scanned into the processing system)

This system is in operation and has therefore been subject to regulatory audit and inspection at all Stericycle facilities in England.

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The facility does not currently comply in full with appropriate measures 21 & 22 relating to waste acceptance and 6 relating to waste tracking. The specific part of these measures which the facility is not in compliance with is the requirement to mark or label every individual waste package that is either collected individually or removed from a cart, and for each individual package to be recorded in the tracking system.

Stericycle believes that this requirement is impractical for an individual operator to achieve and that the same level of environmental protection can be achieved by alternative means. The challenges with the appropriate measures are as follows:

- The purpose of full traceability is to ensure that a package can be traced to source in the event that either the waste in the package is found to be non-conforming or that the package itself is found in an inappropriate location (abandoned, not on a permitted site etc). In the event that a package is identified in such circumstances the easiest way to trace it is for it to be tagged, labelled or marked in some way by the producer (for example using marker pen or numbered tags issued to an individual department within a hospital). Identification of the waste packages by a producer forms part of their duty of care. Placing this requirement on the waste operator may actually reduce traceability as the waste operator cannot identify the individual wards or departments within a large producer premises. In the event that an individual package is found that needs to be traced, there is also very little benefit to having this information in a tracking system as opposed to simply having the package itself marked with the relevant information.
- Significant quantities of bagged waste is routinely removed from carts for transport in bulk to achieve the most efficient and environmentally beneficial means of transportation when waste is transferred to disposal sites. An average bulk trailer load of bags contains in the region of 2000 bags. The additional resources needed (in terms of time, human resource and raw materials) to individually label each bag would be substantial and would significantly outweigh any benefits (including in environmental terms given the need to use some form of tag or label with a raw material impact).
- Significant quantities of bagged waste is transferred between operators, without a consistent format for labelling and interoperability between each operators tracking system, this requirement cannot be complied with in full.
- The UK regulators, sponsored by DEFRA, are already in the development stage for a national waste tracking service that when launched may be mandatory. Compliance with these proposed measures would necessitate significant investment by healthcare waste operators on upgrading tracking systems to accommodate tracking of primary packages as opposed to bulk containers. Further investment is also likely to be needed to upgrade systems functionality for the national waste tracking service.

Stericycle is there proposing the following alternative measures for waste acceptance points 21 & 22, and waste tracking point 6.

- Waste producers must label or tag each primary package to ensure that it can be traced to source. This is already a best practice requirement that is checked during pre-acceptance audits.
- When primary packages are collected individually from a producer they are placed into bulk containers (usually carts but also pallets for rigid containers) and the bulk container is tagged with a barcoded tag which is scanned into the tracking system). The barcoded tags can then be used to identify the bulk container in the tracking system and the route that the waste in the cart was received on.
- The primary packages within the cart are therefore traceable in the tracking system to the waste producers on that route, and each individual package can then be traced to the specific source using the tag, label or marking applied by the producer.
- When primary packages are removed from a cart for bulk transportation, the barcoded tags on those carts are assigned to a 'trailer subload' in the tracking system. The subload record can then be used to identify the carts that were emptied into the trailer, and therefore the individual producers or routes that the waste in those carts came from.
- The primary packages within the trailer are therefore traceable in the tracking system to this group of waste producers, and each individual package can then be traced to the specific source using the tag, label or marking applied by the producer.

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6. Waste storage, segregation and handling appropriate measure

6.1 Waste Storage Techniques

Waste will be received into the site in 770l carts, on secured pallets, in other approved containers or loose either directly from producers, third parties or other Stericycle facilities. All waste is received, unloaded, loaded, handled and stored in the designated areas with impermeable surfaces and sealed drainage systems.

Waste will be received into the site in 770l carts, on secured pallets, in other approved containers or loose either directly from producers, third parties or other Stericycle facilities. All waste is received, unloaded, loaded, handled and stored in designated areas with impermeable surfaces and sealed drainage systems.

All healthcare wastes received on site will be stored by one of the following means:

- In 770ltr wheeled carts that are lockable, fully enclosed and leak-proof
- On pallets (or TFS overpack boxes on pallets) in UN approved primary packages are stacked upright and secured
- In other approved containers such as re-usable sharps containers with their associated carts/cages
- In a designated, storage area inside the building (Dental amalgam, x-ray fixer and developer, lead foils only).
- In trailers
- In open top or closed top skips (non-hazardous pharmaceutical or non-hazardous offensive waste only)
- In a fully enclosed, leak-proof static or mobile compactor (non-hazardous offensive waste only).

Waste operation residues will be stored by the following means:

- In compactor skips/mobile compactor skips sealed and held within the designated storage area.

6.2 Storage of waste in trailers

- Waste will be stored on trailers in accordance with appropriate measure 13 relating to storage of vehicle trailers. (Stored for no longer than 24 hours during the week and 72 hours over the weekend)
- Waste packages will be inspected when loaded onto the trailer, and will be inspected again when removed from the trailer for processing. This ensures that waste loaded in trailers is inspected more frequently than waste retained in carts.
- The trailers will be fully enclosed and leak-proof by design, and will conform to the BK2 specification for the bulk carriage of UN3291 clinical waste by road.

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- Records will be kept of the waste types and quantities that have been loaded onto a trailer. This will include traceability for the waste loaded onto the trailer (as defined in section 5.2 of this report) including cross-reference to a unique reference number for the trailer itself.
- Trailers will only be stored on permitted sites, on impermeable surfaces with sealed drainage systems.

6.3 Storage area designation

Area	Corresponding activities	Capacity	Description
Waste received in at the facility			
A	A1, A3	15 tonnes total	Internal storage area for storage of waste Storage area has a designated, signed quarantine area for the temporary quarantine storage of up to 3 waste carts (approx. 0.1 tonne). These areas are labelled Q on the site plan.
A	A2, A4	20 tonnes	Internal storage area for storage of waste Storage area has a designated, signed quarantine area for the temporary quarantine storage of up to 3 waste carts (approx. 0.1 tonne). These areas are labelled Q on the site plan
The aggregated maximum storage capacity of all of the above is 35 tonnes which consists of hazardous and non-hazardous waste streams.			
The maximum storage capacity for hazardous waste on site shall not exceed 15 tonnes.			
The maximum storage capacity for non-hazardous waste on site shall not exceed 20 tonnes.			
Storage of repackaged offensive waste			
B	A4	Included in 20 tonnes listed in area B above	Treated offensive waste (skips, compactor or RCV)

6.4 Storage timescales

Waste received onto site are transferred within the quickest possible timescales. In some abnormal situations i.e. major plant shutdowns in the network, waste timescales may extend those outlined below however during these periods Stericycle endeavor to find alternative outlet routes as far as reasonably practicable.

All waste received onto site will be stored for no longer than the timescales prescribed in the table below.

Waste Type	Normal Operational Storage timescales
Infectious clinical waste (contaminated which chemicals)	Up to 14 days inside a building or 7 days outside
Offensive waste	Up to 14 days inside a building or 7 days outside
Anatomical waste	24 hours (no longer than 72 over weekends)
Cytotoxic and cytostatic drugs	Up to 6 months
Other medicines or drugs (non-haz pharmaceuticals)	Up to 6 months
Dental amalgam	Up to 6 months
Other chemicals or other wastes	Up to 6 months
Trailers	Up to 24 hours (72 hours over the weekend)

6.5 Storage area schematic

Permit boundary
Waste operation
Waste storage area boundary
Quarantine area
Bin Wash Station
Compaction area

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6.6 Storage areas – Segregation/leak containment

Segregation of incompatible materials or those that could potentially contaminate each other are segregated through the method of the 770l cart. All materials accepted into the facility will be packaged in approved UN containers which are then put into 770l UN approved carts. This cart offers the physical separation for the different waste streams such as anatomical wastes, clinical bagged wastes, cytotoxic medicines etc.

Any waste types stored in approved container that do not offer secondary containment will be segregated by waste type i.e. incineration, heat treatable, cytotoxic, medicines in the approved container.

Segregation of incompatible materials or those that could potentially contaminate each other will be via a 1m segregation gap. As there is no secondary containment for primary packages stored on pallets, different waste types will always be separated by a physical gap in addition to the inspection isles.

Dental wastes are stored in a separate are than all other waste streams and are segregated on separate designated bunds.

6.7 Storage areas – supplementary information

Anatomical waste
Anatomical waste is not refrigerated however our procedures ensure that waste is moved to an incinerator within 24 hours (up to a maximum of 72 hours over weekends). This procedure is also followed for high intervention waste such as Genetically Modified Organism (GMO) or Human Tissue Act (HTA) wastes which are prioritised for transfer to an Stericycle incinerator before any other waste types.

Dental waste
All dental waste stored in the building and will be segregated accordingly, either on directly on bunds or in open top IBC's stored on bunds. The intention is to have a minimum of four bunds categorised as follows:

EWC	Dental Waste Type	Storage/bund arrangement
18 01 10*	amalgam waste from dental care	Original package put into an open top IBC on top of a 240l bund. Maximum volumetric capacity of IBC is 1000l of which there will be a maximum volumetric capacity of must less in primary packaging (estimated 700l). is likely to be liquid.
09 01 01*	water-based developer and activator solutions	Most commonly accepted in 5l containers. 40 containers per layer fit on a pallet. Each layer is shrunk swapped and can be stacked 3 layers high. Pallets are placed on
09 01 02*	water-based offset plate developer solutions	
09 01 03*	solvent-based developer solutions	

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		a 240l bund. Maximum Maximum 600l per pallet.
09 01 04*	fixer solutions	As per the above for developer solutions
09 01 05*	bleach solutions and bleach fixer solutions	
15 01 10*	packaging containing residues of or contaminated by dangerous substances (lead foils from dental care)	As per the above for amalgam waste

Additional bunds will be added if required however will not exceed the maximum storage capacity or the designated area.

The above method of storage is designed to comply with the Control of Pollution (oil storage) (England) Regulations 2001. i.e. secondary containment for multiple containers as either:

- One quarter of the combined capacity of all the containers
- 110% of the capacity of the largest container

An example of a 240l bund is shown on the photo below.

Source: /www.buckandhickman.com

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7. Waste Treatment appropriate measure

Not applicable. There is no waste treatment on site, other than the light compaction of non-hazardous offensive waste.

7.1 H1 Assessment

Not applicable.

8. Emission control appropriate measure

8.1 Overview

The facility has one emission point to foul sewer for effluent generated by bin washing.

8.2 Point source emissions to air

There is no point source emission to air.

8.3 Point source emissions to foul sewer

There is an effluent arising from the directly associated activity of container washing but the are transferred directly to foul sewer. The Company holds a trade effluent discharge consent with the sewerage undertaker for this activity.

8.4 Other point source emissions

There is no point source emissions to groundwater, surface water or land as a result of the activities at the site. See Groundwater and soil risk assessment (Appendix 9).

8.5 Fugitive emissions

The measures in place for the storage of waste at the facility will ensure that the risk of spillage resulting in fugitive emission of any waste material to any medium is minimised as far as reasonably possible. The fugitive emission of odour is controlled by the measures for waste storage and measures set out in the odour management measures in section 8.11.

8.6 Waste transfers off-site

Compacted offensive waste will be transferred off-site for recovery or disposal. The pre-acceptance and acceptance measures in place will ensure that the offensive waste contains no hazardous components and will not have any adverse impact on land or groundwater.

8.7 Location of point source discharge points

Interceptor

Trade Effleunt Discharge Point

8.8 Waste pre-acceptance and acceptance

The procedures for waste pre-acceptance and acceptance ensure that only those wastes that are permitted for storage at the facility are received.

8.9 Waste storage

The waste storage measures in place ensure that all wastes are stored and handled only on impermeable surfaces with sealed drainage. This ensures that in the event of a spillage there is no risk of emission to land or surface waters, and that emissions to foul sewer are controlled.

The waste storage measures in place also ensure that all wastes are stored in secure, fully enclosed, leak-proof containers or on bunds for liquid wastes. This minimises the risk of odour, litter and pest infestation; and also further reduces the risk of spillage or emissions arising from a spillage.

8.10 Odour Management

Stericycle has the following control measures which include:

Normal Operation

Odour source	Pathway/Location	Control measure	Responsible
Clinical waste storage pending transfer	Loading bay doors during delivery or trailer loading periods Externally within designated storage area	• Appropriately packaged wastes and storage when accepted into the facility • Limited storage and transfer timescales • Odorous material is prioritised for transfer • Regular housekeeping checks and inspections • Loading bay doors kept closed when not being used for ingress/egress/loading/unloading • Trailers are loaded as quickly as reasonably practical and rear doors are closed when loading/unloading is not taking place • Routine and efficient turnover of waste (rotation) • Waste in trailers (externally) which is designated as in transit are checked to ensure appropriate storage, no leaks and no odour issues	All operational staff
The compaction of offensive waste & residues pending disposal	Externally	• Appropriately packaged wastes and storage when accepted into the facility • Limited storage and transfer timescales • Regular housekeeping checks and inspections • Routine and efficient turnover of waste (rotation) • Static skip or mobile compaction vehicle are completely sealed and leak proof	All operational staff

Abnormal Operation

Event	Pathway/Location	Likely effect on emissions	Response measures	Responsible
Quarantined wastes	Loading bay doors during delivery or trailer loading periods	Outside of normal acceptance requirements, thus potential to produce an unintended odour	• Remove or treat waste within EMS timeframe • Use deodouriser where odour is significant	All operational staff Plant Manager

Waste spillages	Externally or internally within the site boundary	Potential to produce an unintended odour Potential to increase odour risk to local sensitive receptors	• Implement EMS emergency response for healthcare waste spill	All operational staff
Roller shutter door failure	Loading bay doors	Potential to increase odour risk to local sensitive receptors	• Increase odour monitoring frequency though housekeeping regime • Use deodouriser where odour is significant	Maintenance Staff Plant Manager General Manager
Extreme weather – Heat	Loading bay doors during delivery or trailer loading periods	Potential to increase odour risk to local sensitive receptors	• Increase odour monitoring frequency though housekeeping regime • Use deodouriser where odour is significant	All operational staff Plant Manager
Extreme weather - Wind	Loading bay doors during delivery or trailer loading periods	Potential to increase odour risk to local sensitive receptors	• Increase odour monitoring frequency though housekeeping regime • Use deodouriser where odour is significant	All operational staff Plant Manager

9. Emission monitoring and limits appropriate measure

9.1 Emissions to air and surfaces

Not applicable, there are no point source emissions to air or surface.

9.2 Emissions to sewer

Monitoring of emissions to sewer (emission point S1) is undertaken internally. Annual monitoring of the following parameters is undertaken:

- pH
- Chemical oxygen demand (COD)
- Biological oxygen demand (BOD)
- Separable grease and oil
- Suspended solids

A copy of the discharge consent is attached (appendix 7).

The samples are sent to an independent UKAS accredited laboratory for analysis.

9.3 Emissions Inventory

A detailed emissions inventory is attached (appendix 8).

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10. Process Efficiency appropriate measure

10.1. Raw materials

The site does not use any raw materials in significant quantities. Those raw materials that may be stored in quantities in excess of 200 litres are listed in the following table. Raw materials stored in smaller quantities are used on site for a range of general domestic purposes (for example kitchen cleaning products).

Activity	Description of raw material and composition material	Maximum amount on site	Annual throughput	How material used
Container washing	Water	n/a	Approx. 150 m^3	To supply the boiler and the container washer
Service related				
Service vehicles	Ad-blue	1000 litres	6000 litres	Diesel service vehicles
Service vehicles	Screenwash	250 litres	50 litres	All service vehicles

All liquid raw materials will be stored appropriately on bunds, and COSHH and MSDS sheets will be obtained and retained on file for the specific products to be used. The site emergency response plan will also list the quantity and location of chemicals and oils held on site.

10.2. Energy efficiency

The facility is subject to Stericycle's standard process for improving energy efficiency. The facility is required to review energy efficiency on an annual basis by comparing monthly energy usage data for the preceding twelve months against the same data for the twelve months preceding that. The site will also be included in any improvements identified through ESOS.

The facility must then identify any measures for further improvement and record them on a documented energy efficiency plan. The plan and usage data are then subject to review on a periodic basis.

Other than any incremental improvements brought about by this process we do not anticipate any other changes to the energy used by the activities.

10.3. Climate change

The site has not entered into a climate change levy agreement, and there are currently no proposals for an agreement to be entered into.

The impact that the site activities have on climate change is monitored through the energy efficiency improvement process as described above. To enable analysis of trends data on gas and electricity usage is converted into corresponding figures for carbon and greenhouse gas emissions.

A climate change risk screening has also been conducted for the site, summary included below, screening out the need for any further assessment.

Category	Screening Questions	Score	Your Score
1) Timescales	How long will a permit be required for this site/activity?		1
	5years or less of operation. No need to fill in the rest of the screening. You do not need to fill in a risk assessment.	0	
	Less than 20 years of operation	1	
	Until between 2040 and 2060 (20 and 40 years from now)	3	
	Until 2060 or beyond (more than 40 years)	5	
2) Flooding	What is your site's risk of flooding from rivers or the sea? https://check-long-term-flood-risk.service.gov.uk/postcode		2
	Not in a flood risk zone	0	
	Very low or low	1	
	Medium	2	
	High	5	
3) Water use	If you use water for your site operation or fire prevention, what is the source of your water?		1
	Water not required	0	
	Mains water	1	
	Surface water or groundwater abstraction	5	
		Total Screening Score	4

10.4. Justification for use of raw materials

Water use is minimised as far as possible.

Electricity use is used for lighting and other office activities. There is no alternative to this however any incremental improvements possible will be made using the energy efficiency process described above.

All other raw materials used are off the shelf products used for cleaning or maintenance purposes.

10.5. Avoidance of waste production

Use of raw materials at the facility will be minimized throughout the operation of the site and the focus is on customer waste production and container usage. The company management system includes objectives and targets relating to this, specifically:

- A target for zero waste to landfill
- A target for the reduction in the amount of virgin plastic purchased and used

A range of initiatives are underway to achieve these objectives, including the following:

- Diversion of treatment residues (floc) from landfill to recovery as a solid recovered fuel.
- Diversion of offensive healthcare waste from landfill by mechanically processing and combining with the flock for use as a solid recovered fuel.
- Diversion of healthcare waste metals from incineration or treatment to treatment and recycling options
- Promoting the use of re-usable sharps containers, including the installation of a second re-usable sharps container washing system at a Stericycle facility in SE England to provide additional capacity to the existing facility in Leeds.
- Promoting the use of cardboard single use containers in place of plastic single use containers.

Progress against objectives and targets is tracked through management system reviews, audits and KPI monitoring.

11. Hazardous Substance release

There is no release of hazardous substances as defined in Article 3(18) of the Industrial Emission Directive. The site has impermeable surfaces and sealed drainage to prevent any releases to either groundwater or soil. See Groundwater and soil risk assessment (Appendix 9).

12. Site Infrastructure plan

Site plans are available which maintain the relevant details.

Currently the site infrastructure plans differ depending on the age of the facility, we are currently engaging in a tender process to standardise the plans and get full visibility of infrastructure requirements across our portfolio.

Surveys have been completed at the facility, and is currently being used to inform whether we need to make further investment to ensure compliance with the general management

appropriate measures (for example investment on infrastructure for the management of accidental emissions, fire water containment or flood prevention). Once the infrastructure plans have been produced Stericycle will produce an action plan for the implementation phase in 2022/23.

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13. Waste Types

13.1. Permitted Wastes

Waste types permitted for storage and transfer – activities A1 and A2	
Maximum quantity	35 tonnes total storage capacity (max 15 tonnes hazardous at any one time) (max 20 tonnes non hazardous at any one time) <10,885 tones/annum throughput
Hazard properties	HP3, HP4, HP5, HP6, HP7, HP8, HP9, HP10, HP11
Waste Code	Description
18	WASTES FROM HUMAN OR ANIMAL HEALTH CARE AND/OR RELATED RESEARCH (except kitchen and restaurant wastes not arising from immediate health care)
18 01	*wastes from natal care, diagnosis, treatment or prevention of disease in humans*
18 01 01	sharps (except 18 01 03)
18 01 02	body parts and organs including blood bags and blood preserves (except 18 01 03)
18 01 03*	wastes whose collection and disposal is subject to special requirements in order to prevent infection
18 01 04	wastes whose collection and disposal is not subject to special requirements in order to prevent infection (for example dressings, plaster casts, linen, disposable clothing, diapers)
18 01 06*	chemicals consisting of or containing dangerous substances
18 01 07	chemicals other than those mentioned in 18 01 06
18 01 08*	cytotoxic and cytostatic medicines
18 01 09	medicines other than those mentioned in 18 01 08
18 01 10*	amalgam waste from dental care
18 02	*wastes from research, diagnosis, treatment or prevention of disease involving animals*
18 02 01	sharps (except 18 02 02)
18 02 02*	wastes whose collection and disposal is subject to special requirements in order to prevent infection
18 02 03	wastes whose collection and disposal is not subject to special requirements in order to prevent infection
18 02 05*	chemicals consisting of or containing dangerous substances
18 02 06	chemicals other than those mentioned in 18 02 05
18 02 07*	cytotoxic and cytostatic medicines
18 02 08	medicines other than those mentioned in 18 02 07

07	WASTES FROM ORGANIC CHEMICAL PROCESSES
07 05	*wastes from the MFSU of pharmaceuticals*
07 05 13*	solid wastes containing dangerous substances
07 05 14	solid wastes other than those mentioned in 07 05 13
09	WASTES FROM THE PHOTOGRAPHIC INDUSTRY
09 01	*wastes from the photographic industry*
09 01 01*	water-based developer and activator solutions
09 01 02*	water-based offset plate developer solutions
09 01 03*	solvent-based developer solutions
09 01 04*	fixer solutions
09 01 05*	bleach solutions and bleach fixer solutions
09 01 07	photographic film and paper containing silver or silver compounds
09 01 08	photographic film and paper free of silver or silver compounds
15	WASTE PACKAGING; ABSORBENTS, WIPING CLOTHS, FILTER MATERIALS AND PROTECTIVE CLOTHING NOT OTHERWISE SPECIFIED
15 01	*packaging (including separately collected municipal packaging waste)*
15 01 10*	packaging containing residues of or contaminated by dangerous substances (lead foils from dental care)
20	MUNICIPAL WASTES (HOUSEHOLD WASTE AND SIMILAR COMMERCIAL, INDUSTRIAL AND INSTITUTIONAL WASTES) INCLUDING SEPARATELY COLLECTED FRACTIONS
20 01	separately collected fractions (except 15 01)
20 01 31*	Cytotoxic and cytostatic medicines
20 01 32	Medicines other than those mentioned in 20 01 31
20 01 99	other fractions not otherwise specified (comprising of separately collected fractions of municipal clinical waste (not arising from healthcare and/or related research i.e. not including waste from natal care, diagnosis, treatment or prevention of disease) which is subject to special requirements in order to prevent infection).

Waste types permitted for repackaging – activities A3 & A4	
Maximum quantity	Included in storage and transfer activities A1 & A2 Throughput <35 tonnes/day
Hazard properties	N/A
Waste Code	Description
18	WASTES FROM HUMAN OR ANIMAL HEALTH CARE AND/OR RELATED RESEARCH (except kitchen and restaurant wastes not arising from immediate health care)

18 01	*wastes from natal care, diagnosis, treatment or prevention of disease in humans*
18 01 01	sharps (except 18 01 03)
18 01 03*	wastes whose collection and disposal is subject to special requirements in order to prevent infection
18 01 04	wastes whose collection and disposal is not subject to special requirements in order to prevent infection (for example dressings, plaster casts, linen, disposable clothing, diapers)
18 01 08*	cytotoxic and cytostatic medicines
18 01 09	medicines other than those mentioned in 18 01 08
18 02	*wastes from research, diagnosis, treatment or prevention of disease involving animals*
18 02 01	sharps (except 18 02 02)
18 02 02*	wastes whose collection and disposal is subject to special requirements in order to prevent infection
18 02 03	wastes whose collection and disposal is not subject to special requirements in order to prevent infection
18 02 07*	cytotoxic and cytostatic medicines
18 02 08	medicines other than those mentioned in 18 02 07
07	WASTES FROM ORGANIC CHEMICAL PROCESSES
07 05	*wastes from the MFSU of pharmaceuticals*
07 05 13*	solid wastes containing dangerous substances
07 05 14	solid wastes other than those mentioned in 07 05 13
20	MUNICIPAL WASTES (HOUSEHOLD WASTE AND SIMILAR COMMERCIAL, INDUSTRIAL AND INSTITUTIONAL WASTES) INCLUDING SEPARATELY COLLECTED FRACTIONS
20 01	separately collected fractions (except 15 01)
20 01 31*	Cytotoxic and cytostatic medicines
20 01 32	Medicines other than those mentioned in 20 01 31
20 01 99	other fractions not otherwise specified (comprising of separately collected fractions of municipal clinical waste (not arising from healthcare and/or related research i.e. not including waste from natal care, diagnosis, treatment or prevention of disease) which is subject to special requirements in order to prevent infection).

13.2. BAT and supplementary Information

All waste codes are in the scope of the appropriate measures' guidance except for the following which are included in activities A1-A3 above:

Waste Code	Description
07	WASTES FROM ORGANIC CHEMICAL PROCESSES
07 05	*wastes from the MFSU of pharmaceuticals*

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07 05 13*	solid wastes containing dangerous substances
07 05 14	solid wastes other than those mentioned in 07 05 13
15	WASTE PACKAGING; ABSORBENTS, WIPING CLOTHS, FILTER MATERIALS AND PROTECTIVE CLOTHING NOT OTHERWISE SPECIFIED
15 01	*packaging (including separately collected municipal packaging waste)*
15 01 10*	packaging containing residues of or contaminated by dangerous substances (lead foils from dental care)

Stericycle request for these waste codes are included for the following reasons:

07 05 13* and 07 05 14 (hazardous and non-hazardous medicines) are commonly collected commercial pharmaceutical industries who require the disposal of off specification or contaminated medicines. The composition of these waste streams is largely the same as 18 01 08* or 18 01 09 just originating from industry opposed to natal care.

15 01 10* lead foils are collected as part of Stericycle's dental waste collection service offering. These waste streams are typically created in the same locations as other dental wastes such as 18 01 10* dental amalgam and pose no additional risk than other dental wastes.

14. Existing Pre-operational Conditions

Not applicable. This variation is for the change from standard rules permit to a waste operation.

15. Existing Improvement Conditions

Not applicable. This variation is for the change from standard rules permit to a waste operation.

16. Appendices

Appendix reference	**Document**	**Relevant report section**
Appendix 1	WI6.03.02 Waste Rejection and Quarantine Procedure	3.3
Appendix 2	Site Condition Report.	4.7
Appendix 3	Environmental Risk Assessment	4.4, 4.11, 4.12, 4.13
Appendix 4	Appendix reference not used.	N/A
Appendix 5	Infrastructure plans	4.6 & 12
Appendix 6	WI6.03.06 Loose Waste Handling	3.5
Appendix 7	Discharge consent	9.2
Appendix 8	Emissions Inventory	9.3

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Appendix 9	Groundwater and soil risk assessment	8.4

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