	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2b/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

1. Purpose of Work Instruction

- 1.1** To define the process for waste pre-acceptance including the frequency of pre-acceptance audit for each customer type, the process for audit review and corrective action, the maintenance of the pre-acceptance database, and subsequent customer account set-up and waste collection.
- 1.2** To detail the responsibilities of personnel with regard to waste pre-acceptance operations.
- 1.3** To specify the documentation and records required to ensure compliance with legislative and Company requirements.

2. Scope and Application

2.1 This work instruction applies to the Fornax Newton Aycliffe facility.

2.2 Failure to comply with the requirements of this procedure may result in investigation and subsequent formal action in line with the Company's Capability and Disciplinary procedures.

3. Responsibilities

3.1 Senior Management

- Are responsible for ensuring that all BM S requirements are established implemented maintained and continually improved in accordance with the standards to which the company subscribes and legislation relative to the company's operations.

3.2 Regulatory compliance managers


- Are responsible for monitoring and ensuring the implementation of all quality environmental safety and health policy procedure and work instruction.

3.3 Waste auditing an assessment advisor.

- Is responsible for reviewing pre acceptance audit information confirming acceptability and recording the information in the pre acceptance database.
- Is responsible for providing advice and guidance on any relevant matter pertaining to waste audits, waste segregation and technical assessments where required.

3.4 Waste audit specialist.



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

- Are responsible for maintenance of the pre acceptance database including uploading customer audits updating customer information and issuing reminders to the commercial team and to customers.

3.5 Commercial team

- Are responsible for ensuring all customer details are obtained.
They are responsible for offering the Fornax online audit service or third party consultant audit service to new customers and for ensuring that waste is only accepted once a satisfactory audit has been completed (by Fornax or otherwise)
- as customer facing employees for providing advice and guidance on any relevant matter pertaining to waste segregation and technical assessments were required with assistance from the waste auditing and assessment advisor

3.6 General /site/ plant and line managers

- Are responsible for the implementation and management of company policy and procedure ensuring that training is provided and that audits are completed

3.7 All personnel

- Are responsible for ensuring they understand company policy and procedures and always followed the process.

4. Process Overview

4.1 Waste pre-acceptance forms part of the commercial process operated by the Company. The procedure consists of several steps from sales enquiry through to commercial review. Completion of the required pre-acceptance is a mandatory stage in the commercial process.


4.2 Waste pre-acceptance is undertaken by one of two mechanisms:

- 4.2.1** Waste pre-acceptance audits – Are required for healthcare waste producers to demonstrate that their waste has been correctly segregated, consigned and described, such that an appropriate disposal route can be employed (see sections 9 to 15).
- 4.2.2** Waste assessments – Are required where the Company receives, chemical, pharmaceutical or other non-standard wastes, which by their nature may have an adverse effect on the operation of the plant, the safety of its employees or the environment (see sections 16 to 17).

4.3 A waste pre-acceptance audit is required from all producers of clinical waste with the following exceptions:

- 4.3.1** When the waste is produced by a householder at a domestic premises;



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

4.3.2 When the waste is produced by non-healthcare activities. For example where sharps waste is produced at a tattoo parlour or offensive waste is produced at a nursery.

4.4 A waste assessment is required for the following types of waste:

- 4.4.1** Ad hoc or one off services for the collection of chemical or pharmaceutical waste;
- 4.4.2** Any wastes requiring special handling (as defined in BMS/6.07 - Wastes Requiring Special Handling);
- 4.4.3** Any radioactive wastes (as defined in BMS/6.06 - Radioactive Waste Operations, refer to WI/3.01.05 - Commercial Process for Radioactive Substances);
- 4.4.4** Any other wastes that do not meet the Company's standard waste acceptance criteria (WAC).

4.5 When small quantities of commonly present chemicals or pharmaceuticals are disposed of within clinical waste that the Company normally collects a technical assessment is not usually required.

4.6 Waste pre-acceptance audit and assessment incorporates a number of stages which are detailed in the following sections.

4.7 As part of the initial sales enquiry the Commercial Team will ensure that the following information is gathered, (for further details please refer to BMS/3.01):

- 4.7.1** Details of the waste producer (including address, contact details etc);
- 4.7.2** The specific process from which the waste derives (e.g. hospital, vet, dentist etc);
- 4.7.3** Indication of the waste streams produced their quantity, physical form and packaging.

4.8 As part of providing an initial quotation the commercial team will ensure that the potential customer is aware of the Company's waste acceptance criteria and other related documents such as the Department of Health Safe Management of Healthcare Waste guidance (HTM 07.01) which is available for download on the Company's website (for further details please refer to BMS/3.01).


4.9 It is important to note that although pre-acceptance is aligned with commercial procedures, it is not undertaken by commercial personnel. The Company employs suitably trained, competent technical experts who undertake reviews of waste pre-acceptance audits and assessments in accordance with the Company's requirements.

4.10 Furthermore, it should be noted that the commercial process cannot proceed past this stage until waste pre-acceptance has been satisfactorily completed.

5. Waste Pre-acceptance Audits – New Customers

5.1 If an initial quotation has been accepted by the customer, the next stage is to determine if a waste pre-



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authored by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

acceptance audit is required. An audit is required from the following types of customers:

- 5.1.1** Hospitals;
- 5.1.2** Veterinary practices;
- 5.1.3** Dental practices;
- 5.1.4** General practices and health centres;
- 5.1.5** Community pharmacies;
- 5.1.6** Ambulance trusts;
- 5.1.7** Care Homes that provide medical or nursing care;
- 5.1.8** Research laboratories that produce clinical waste;
- 5.1.9** Any other medical practices;
- 5.1.10** Pharmaceutical manufacture and supply.

5.2 An audit is not required from:

- 5.2.1** Domestic premises;
- 5.2.2** Care homes that do not provide medical or nursing care;
- 5.2.3** Non-medical producers of clinical waste (for example, tattooists, body piercing, minor first aid and waste arising from substance abuse and other non-medical procedures in the hair and beauty industry).

5.3 The Commercial Team will communicate this requirement to the customer.


5.4 An audit can be undertaken by:

- 5.4.1** Completion of the Company's on-line waste audit tool (producers of less than 5 tonnes of clinical waste per annum only);
- 5.4.2** The customer's completion of a recognised, professional body's waste audit template (such as those of the BMA or BDA);
- 5.4.3** The customer undertaking an audit using their own waste audit template;
- 5.4.4** A third party consultant at the customer's premises;
- 5.4.5** Another waste contractor (where this contractor previously provided waste services to the customer)

5.5 An audit cannot be considered valid unless:

- 5.5.1** The customer produces more than 5 tonnes of clinical waste per annum and the audit is less than 12 months old, or;
- 5.5.2** The customer is a vet, dentist or research laboratory and the audit is less than 2 years old, or
- 5.5.3** For all other customers the audit is less than 5 years old, and;
- 5.5.4** Regardless of the date of the last audit the customer has made no significant changes to the



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

activities undertaken at their premises or the way in which they manage their waste.

5.6 The Commercial Team member will ask the customer how they intend to satisfy the audit requirement and will offer either:

- 5.6.1** Use of the Company's on-line audit system (for producers of less than 5 tonnes of clinical waste per annum);
- 5.6.2** A referral to a third party waste management consultant approved by the Company (for producers of over 5 tonnes of clinical waste per annum).

5.7 All audit reports will be requested in electronic format and must be submitted via e-mail to the audits to management.

6. Audit Receipt and Review

6.1 The Waste Audits Specialist monitors the audits mailbox on a daily basis to check for incoming audit reports. All audit reports received are uploaded to the Data recording (SF) waste audit tracking system allocated against the relevant customer-site number.

6.2 After upload to SF the Waste Audits Specialist completes an administrative review entering the following information onto the system:

- 6.2.1** The audit type (i.e. Company on-line audit, customer self-audit, third party consultant);
- 6.2.2** The audit completion date;
- 6.2.3** The date the audit was received;
- 6.2.4** The date the audit was uploaded and the admin review completed;
- 6.2.5** Confirmation that the admin review has been completed.

6.3 After completion of the admin review the audit status will automatically change to 'Technical Review' and will be added to the workflow queue for audits awaiting review.


6.4 The technical review is completed by either of the following means:

- 6.4.1** A full technical review undertaken by the Waste Auditing and Assessment Advisor;
- 6.4.2** A report findings review undertaken by the Waste Audits Specialist (audits completed using the Company on-line audit system only).

6.5 For audits completed using the Company on-line audit system a full technical review is not required as the system is designed to meet the requirements of HTM 07.01 and EPR 5.07, and generates a report listing the audit findings and any non-conformances and actions required. The report is automatically e-mailed to the customer.

6.6 To complete the report findings review for on-line audits the Waste Audits Specialist marks the



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

review as complete and confirms that the audit meets the requirements of EPR 5.07. The audit report is then checked to verify whether any major non-conformances (red flag issues) or minor non-conformances (amber flag issues) have been identified. The non-conformance status is then updated to either: Yes (Major), Yes (Minor) or No non-conformances.

6.7 To complete the full technical review the Waste Auditing and Assessment Advisor will record the customer details in section 1 of the waste audit review form (F3.01.06) and will then check to confirm that the following information is contained within the audit:

- 6.7.1** The date commencement and completion of the audit, and description of the audit, the procedures employed, the auditors and their affiliation;
- 6.7.2** A list (or diagram) of the different wards, departments, or functional areas that exist within the premises, identifying those that were included in the audit;
- 6.7.3** For each unit or area audited, identification of the waste items produced, the type (including colour), size and labelling of containers in-use, the segregation practices, contents of a representative number of each type of container, and therefore waste composition identified;
- 6.7.4** The hazardous properties associated with the waste and its components (medicines, chemicals etc);
- 6.7.5** Where relevant, the audit must include examination of the segregation of waste containers placed in departmental and main storage areas, and bulk containers (for example 770 litre carts);
- 6.7.6** A summary report indicating the findings for each area in the producer premises, each waste stream produced there, highlighting any issues identified, including proposed waste descriptions and classifications derived from the audit findings for each waste stream.

6.8 After completion of the information check the details will be recorded in section 2 of the waste audit review form (F3.01.06) and the system will be updated to state Yes (all required information included in the audit report), Part (more information needed) or No (negligible amount of required information included in the audit report). In the event that some of the required information is missing or invalid a note will be added to the form and the system to provide an explanation.


6.9 After completion of the audit information check the Waste Auditing and Assessment Advisor will carry out a detailed review of the findings of the audit. The assessment will determine whether the customer's waste has been segregated, described and consigned in such a way as to ensure that it can be satisfactorily treated at a Company facility in accordance with its environmental permit.

6.10 As part of the detailed review the following shall be determined:

- 6.10.1** Where the customer produces less than 5 tonnes per annum of clinical waste the entire facility has been audited;
- 6.10.2** Where the customer produces 5 tonnes or more of clinical waste the entire facility has been audited when this is the first audit of the facility or a subsequent audit following on from an audit identifying major non-conformances;

6.11 Where the customer produces 5 tonnes or more of clinical waste at least one third of the



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authored by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

facility has been audited when this is the second or subsequent annual audit..

- 6.12** The detailed review will determine if the following are produced by the customer, what container type they are placed in and a comparison with proposed waste classifications and descriptions:

Cytotoxic and cytostatic contaminated material;
Other pharmaceuticals or pharmaceutically contaminated material (for example medicinally contaminated syringes, I.V. bags, tubing, bottles vials and ampoules, and so on);
Waste chemicals (for example laboratory reagents, auto-analyser bottles, diagnostic kits, disinfectant hand gels, and so on.);
Human or animal tissue, and associated chemical preservatives;
Sharps, and whether they are contaminated with medicines (even if fully discharged);
Other infectious wastes;
Dental amalgam;
Non-hazardous wastes including municipal wastes (paper, magazines, food wrappers, Hand towels etc), offensive wastes, and autoclaved laboratory wastes;
Gypsum wastes (plastercasts, dental and podiatry moulds) other than the small proportion that can correctly be described as infectious.

- 6.13** When reviewing the information specified in 10.11 the following key issues must be considered:


- 6.13.1** Has the medical practice implemented a definition of cytotoxic and cytostatic from technical guidance WM3 / HTM 07.01, does the unit produce any of this waste, and if so is that definition in use for segregation in that unit?
- 6.13.2** Has the medical practice implemented an offensive hygiene waste stream for healthcare waste (rather than municipal wastes from lavatories) in that unit?
- 6.13.3** Has the waste been appropriately packaged and labelled?

- 6.14** When reviewing the audit it shall be determined whether each element of the completed audit demonstrates use of the following techniques in each unit area or department:

- 6.14.1** Observation and recording of practice including examination of raw materials, equipment and stores to help identify what waste items may be produced;
- 6.14.2** Observation of in use waste receptacle contents;
- 6.14.3** Questioning of staff (for example nursing staff) who produce the waste, that considers the waste items and types produced, the container types these are placed in, and elements of practice. This questioning can be undertaken verbally with the auditor recording the answers.

- 6.15** In addition it may include;



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

6.15.1 For pure product chemicals, laboratory smalls, or pharmaceutical waste containers, reference to product data sheets or an extrapolation of information on product data sheets.

6.15.2 Any preservation techniques used (for example cold storage, or freezing);

6.15.3 Any changes implemented as a result of issues identified with confirmatory evidence to demonstrate that this has occurred;

6.15.4 Information on waste policies, staff training, internal audit regimes, and environmental management systems.

6.16 After completion of the detailed review the Waste Auditing and Assessment Advisor will determine the wastes suitability for treatment at the nominated Company facility. The findings of the review including detail of any major and minor non-conformances and actions to be taken will be recorded in section 3 of the waste audit review form (F3.01.06) onto the system.

6.17 Major and minor non-conformances will be defined as follows:

6.17.1 Major non-conformance - adverse audit findings that could potentially render any portion of the waste stream unsuitable for treatment at the nominated Company facility (e.g. packaging of medicinal wastes into orange bags destined for alternative treatment).

6.17.2 Minor non-conformance – adverse audit findings that would not normally render any portion of the waste stream unsuitable for treatment at the nominated Company facility (e.g. occasional mis-segregation of municipal type waste).


6.18 After completion of both the information review and the detailed review the completed waste audit review form (F3.01.06) will be uploaded to the system and the audit status will be updated in accordance with the following table:

Information – meets EPR 5.07 Requirements	Major non-conformances identified	Audit Status
Yes	No	Valid
No	No	Awaiting Response
Yes	Yes	Awaiting Response
No	Yes	Awaiting Response

6.19 Only those audits that meet the requirements of EPR 5.07 and contain no major non-conformances will be classified as valid.

6.20 For all audits with non-conformities (both minor and major) the Company will communicate in writing (normally within 28 days) via post or e-mail to the customer to confirm the outcome of the audit review, the actions necessary and the timeframes for completion. Such communications arising from on-line audits are generated automatically. All other communications will be made by the Waste Auditing and Assessment Advisor with support when required from the relevant commercial team member.



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

6.21 All audits with a status of 'Awaiting Response' (due to the audit failing to meet EPR 5.07 requirements or identifying major non-conformities) will remain in the awaiting response workflow queue until a satisfactory response has been received from the customer (to either provide additional information or provide evidence that the required actions have been completed). Where the non-conformities identified are only minor the audit status will remain valid (where EPR 5.07 requirements have been met) but customer responses will be recorded onto the system on receipt.

6.22 Customer responses can be submitted via directly to the Waste Auditing and Assessment Advisor or can be entered directly onto the on-line audit system (Company on-line audits only).

6.23 All responses and additional information received from customers will be subject to a further technical review by the Waste Auditing and Assessment Advisor who will determine whether the response is satisfactory. If the response is satisfactory the audit status will be updated to 'Valid'. If the response is not satisfactory then further communication will be made with the customer to achieve a resolution, with the audit status remaining as 'awaiting response' in the interim.

6.24 All communication and correspondence with customers relating to additional audit information and the completion of actions will be uploaded to and stored on the Data recording waste audits system.

6.25 If any of the waste types produced by the customer do not meet the Company's standard waste acceptance criteria an additional waste technical assessment will be made by the Waste Auditing and Assessment Advisor, see Section 12.


7. Waste Pre-acceptance Audits – Renewal

7.1 When pre-acceptance audits are approaching their expiry date the Waste Audits Specialist is responsible for contacting customers to request a new audit in advance of the due date.

7.2 The Data recording waste audits system holds the audit expiry dates and automatically changes the status of audits approaching expiry in accordance with the following table:

Time until audit expiry	Audit Status	External Action
4 months to 1 month	Reminder	Reminder communication (letter or e-mail) sent to customer and/or Account Manager notified
1 month to due date	Warning	Reminder communication (letter or e-mail) sent to customer and/or Account Manager notified



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL			
		Version: 1 Effective: DRAFT			
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:			
Date: March 2025		Review date:			
<table border="1"> <tr> <td>Due date and past</td><td>Overdue</td><td>Extension offer letter sent to customer and Account Manager notified</td></tr> </table>			Due date and past	Overdue	Extension offer letter sent to customer and Account Manager notified
Due date and past	Overdue	Extension offer letter sent to customer and Account Manager notified			

7.3 Reminder communications are dispatched on a monthly basis to all customers whose audit status has changed to Reminder or Warning, and to customers eligible for the online audit system (those producing under 5 tonnes per annum) with an audit status of Overdue.

7.4 In addition to the communications dispatched by the Waste Audits Specialist the Account Managers also have responsibility for requesting and chasing audits from their customers, and should communicate information on audits that are due to or have expired not less than monthly.

7.5 When an audit is overdue a formal extension will be offered to customers who are ineligible for the online audit system (those producing over 5 tonnes per annum). Formal extensions will not normally be offered to customers eligible for the online audit system as the system facilitates the quick and easy completion of small site audits without the need for significant additional time. Formal extensions are permitted for a duration of up to 92 days from the signing of the extension declaration.

7.6 In order to grant a formal extension the following process must be followed:


- 7.6.1** The Company will write to the customer offering a formal extension stating the reason for the extension offer, the duration of the extension and the potential consequences if an audit has not been supplied by the end of the agreed extension period.
- 7.6.2** The written extension offer will include a declaration form for completion by the customer. The declaration form will clearly state the Company name, the customer name and site address to which the extension refers, the customer-site number, the date of issue and expiry date of the extension.
- 7.6.3** The producer must sign the extension declaration agreeing to the terms of the extension and return it to the Company within 7 working days.
- 7.6.4** Extensions will only become valid on receipt of a signed declaration within the required timescale.

7.7 On receipt of a signed extension declaration this will be uploaded to the system and the audit status updated to 'Extension'.

7.8 In the event that the customer does not respond to an extension offer or has failed to submit an audit within the agreed extension period a final warning letter will be issued and the audit status will be amended to 'Final Warning'.

7.9 In the event that a customer whose audit is Overdue and who is eligible for the online audit system has failed to submit an audit within 3 months of the due date the audit status will be amended to 'Final Warning'.



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

7.10 A report listing all customers with the status of 'Final Warning' will be circulated by the Waste Audits Specialist to the following persons on a monthly basis:


District Sales and Marketing Managers;
District Business Managers;
Environmental Managers.

7.11 The list will be reviewed and a decision made as to any additional sanctions required (for example additional telephone communication or site visits, notification of the regulator or as a final resort suspension of service).

7.12 All audit reports will be requested in electronic format and must be submitted via e-mail to management.

7.13 On receipt of an audit report the review process will be completed as specified in section 10 of this procedure.




	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

8. Waste Pre-acceptance Audits – Third Parties

- 8.1** The Company is responsible for ensuring that pre-acceptance checks and subsequent assessments are conducted on each producer whose waste is received at a Company site including third party customers (i.e. waste carrier and those customers that deliver their own waste).
- 8.2** These checks are to be conducted prior to the first delivery of waste from the third party customer and then as a minimum annually thereafter except that a check shall be completed:
- 8.2.1** When there has been a significant change to the number or nature of waste transfer stations operated by the third party customer, or;
 - 8.2.2** When there has been a significant incident at a Company facility as a result of waste from a third party which has resulted in or which had the potential to result in significant environmental harm.
- 8.3** Where waste is received from a third party customer the following information is required:
- 8.3.1** Details of the content of any audit tools and/or methodologies used by the third party to audit their and their customers waste, and;
 - 8.3.2** Details of the assessment criteria used by that party to assess their waste pre-acceptance audits,
 - 8.3.3** A summary report from the third party on their waste pre-acceptance status.
- 8.4** On receipt of the above information from the third party customer the Waste Auditing and Assessment Advisor shall:
- 8.4.1** Review the waste audit tool and/or methodology to confirm that they meet the standards set in the Environment Agency guidance;
 - 8.4.2** Review the assessment criteria used by the third party to confirm that they meet the standards set in the Environment Agency guidance.
- 8.5** In addition the Waste Auditing and Assessment Advisor shall review the waste pre-acceptance summary report and confirm that as a minimum that:
- 8.5.1** Confirm the producer types, waste types, containers etc;
 - 8.5.2** Confirm a composite waste classification/description/composition/properties for each waste stream and container type destined for that site/activity, derived from each of the pre-acceptance audits and the permitted wastes for that site;
 - 8.5.3** Confirm any issues that have been identified and what action has been taken with regard to the producers and wastes affected.




	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authored by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

8.6 In addition to the above the Waste Auditing and Assessment Advisor shall periodically review a random and representative cross-section of the third party's waste pre-acceptance audits to ensure:

- 8.6.1** The quality of pre-acceptance audits;
- 8.6.2** That the third party is undertaking assessments of the waste audits received and have communicated to their customers any appropriate remedial actions;



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

8.6.3 That the third party and their customers are have correctly segregated, classified and described all the waste to be disposed of at a Company facility.

8.7 The Waste Auditing and Assessment Advisor shall record their findings on the Data recording waste audits system against the customer number for the third party company, and shall upload all related documentation and correspondence to the system.

8.8 The Waste Auditing and Assessment Advisor shall bring to the attention of the Senior Environmental Manager, the Operations Director and the Head of Clinical Waste Sales any potential significant non-conformances identified which could result in a breach of the Company's environmental permits. Where such a potential significant non-conformance is identified the Senior Environmental Manager and the Head of Clinical Waste Sales will immediately contact the third party customer to resolve the matter.

9. Waste Audits System – Database Management

9.1 All information, records, documentation and correspondence pertaining to waste pre- acceptance audits shall be recorded and retained in the waste audits system.

9.2 Current audits are marked on each customer site view with a green tick. Previous audits also are also retained and accessible in the system.

9.3 The system is based within the Company's core data application and as such is routinely and automatically updated with live customer information and waste data. This ensures the following:

9.3.1 That new customers are automatically entered onto the pre-acceptance database when the account set-up process is completed;

9.3.2 That customers whose accounts are closed are automatically removed from the pre-acceptance database;

9.3.3 That changes to customer contact details are automatically updated in the pre-acceptance database, ensuring that all communications are sent to the relevant people;


9.3.4 That the audit status information is always up to date for all customers, enabling real time audit status assessment by customer type, disposal site and account manager;

9.3.5 That up to date waste tonnage data is available in the system, enabling automatic update of required audit frequencies and online audit eligibility (above and below the 5 tonne threshold rule).

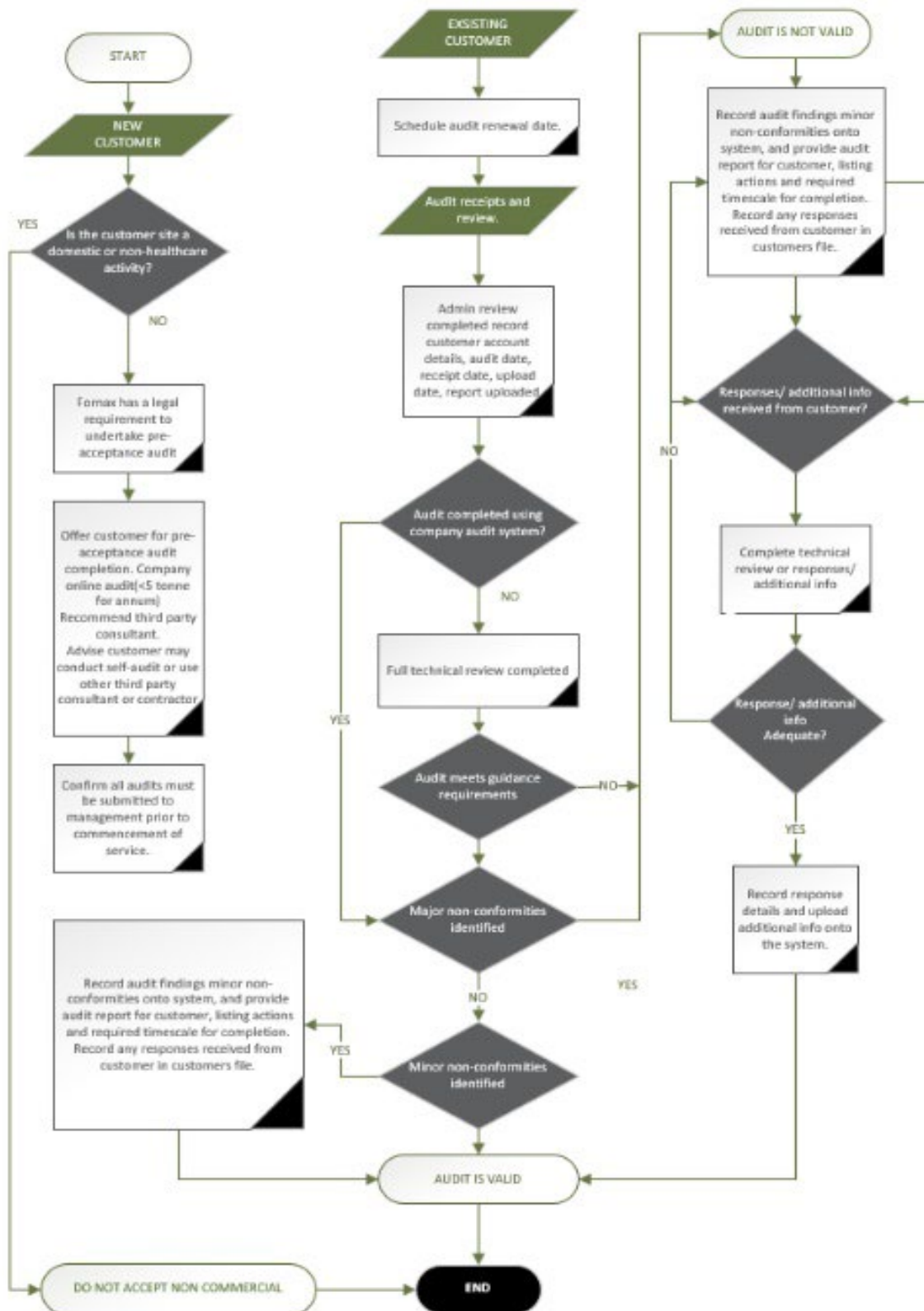
9.4 Access to amend audit review and status information in the system is restricted to the Waste Audits Specialist, the Waste Auditing and Assessment Advisor, and the Environmental Manager. Other employees have view and reporting access only as required for operational and commercial purposes.


9.5 Database maintenance is undertaken on a monthly basis to sanity check changes made in the previous month prior to dispatch of the audit reminder and extension letters.



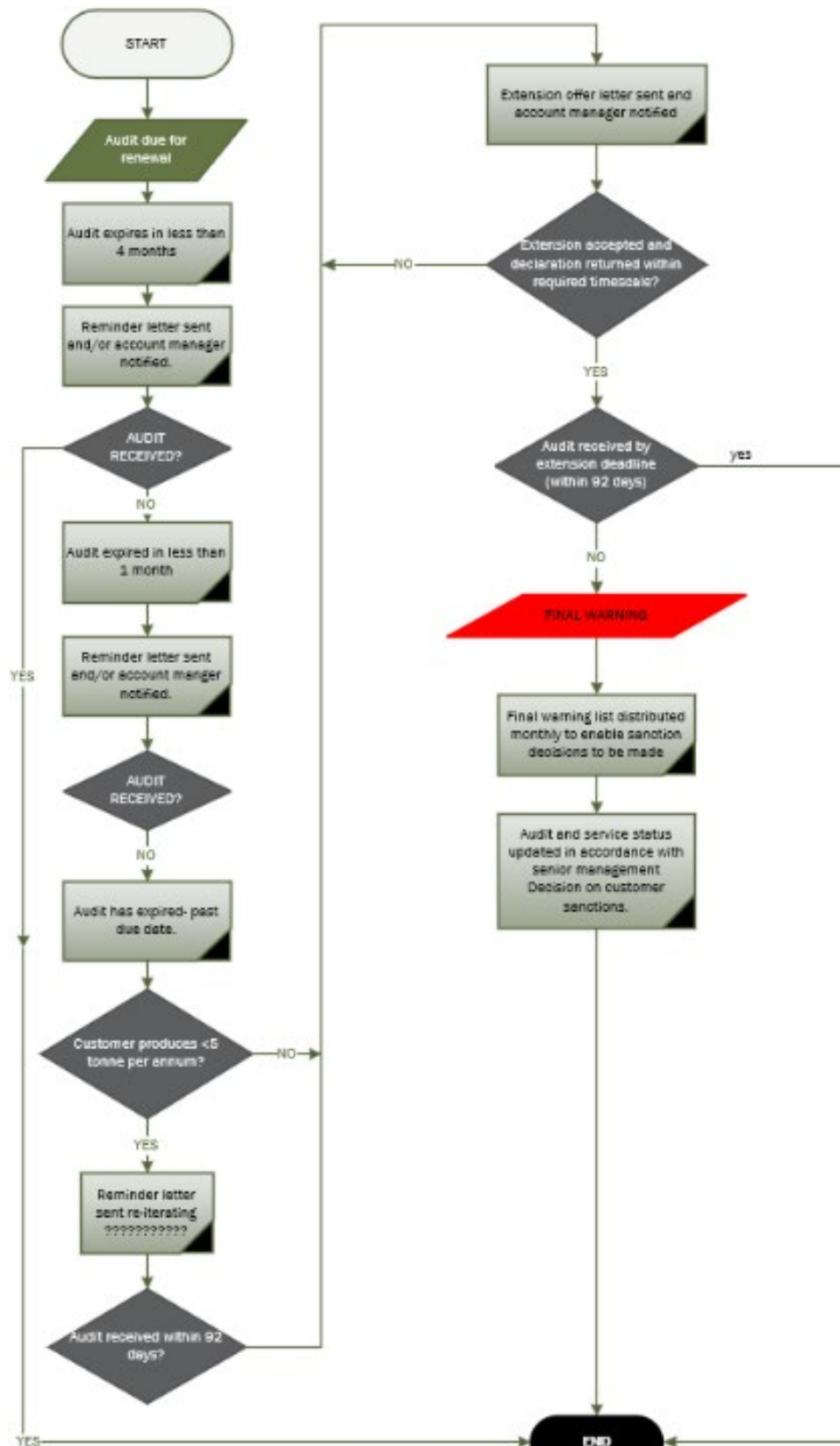
	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:


10. Waste Pre-acceptance Audit. -- Key Steps for audit receipt and review.



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

Key steps for Audit expiry and renewal.



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical	SOP: 3.2.1/WPACL
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

11. Waste technical Assessment

11.1 A waste assessment is required for the following types of waste:

- 11.1.1** Ad hoc or one off services for the collection of chemical or pharmaceutical waste;
- 11.1.2** Any wastes requiring special handling
- 11.1.3** Any other wastes that do not meet the Company's standard waste acceptance criteria (WAC).

11.2 All waste assessment requests will be recorded on to the Data recording system by the person receiving the enquiry (usually field sales, account management or customer services personnel) and submitted to the Regulatory Compliance Data recording inbox for consideration.

11.3 Waste assessment enquiries can be submitted on Data recording by one of two means depending on the nature of the enquiry. A specific technical assessment module is available for the following types of enquiry:

- 11.3.1** Technical assessment for chemical/pharmaceutical wastes;
- 11.3.2** Technical assessment for radioactive wastes;
- 11.3.3** Technical assessment for microbiological wastes.

For enquiries relating to waste types other than the above a standard Data recording case should be submitted.


11.4 All waste assessment requests should include relevant information pertaining to the waste, including but not limited to:

- 11.4.1** Customer name, address and contact details;
- 11.4.2** Description and classification of the waste;
- 11.4.3** Source of the waste (e.g. reason for its production – hospital healthcare);
- 11.4.4** Information on the quantity of waste (e.g. package size/container volume and number);
- 11.4.5** Information on the physical characteristics of the waste (e.g. liquid or solid);
- 11.4.6** Information on the packaging of the waste (e.g. rigid containers or plastic drums);
- 11.4.7** Information on the chemical composition/concentration of the waste, including any material safety data sheets (MSDS);
- 11.4.8** Information on the waste hazards (e.g. flammable or infectious);
- 11.4.9** Any other relevant information.

11.5 The Waste Auditing and Assessment Advisor will monitor the Regulatory Compliance Data recording inbox for incoming enquiries. On receipt of an enquiry the information presented will be reviewed to determine whether the assessment can be completed and appropriate guidance provided.

11.6 In the event that insufficient information has been provided the enquiry will be sent back to the person requesting the assessment to request the additional information.



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical Waste	SOP: 3.2/WPA
		Version: 1 Effective: DRAFT
Authorized by: OCL	Reviewed by: Julie Hudson	Approved by:
Date: March 2025		Review date:

11.7 When sufficient information has been provided to complete the assessment the information will be reviewed and the assessment completed. Relevant reputable data sources will be used as required, such as the Company waste acceptance criteria and the online CHIP database.

11.8 The completed assessment will be used to respond to the enquiry, and will generally involve determination of the following information:

11.8.1 If the waste can be accepted for transfer, treatment or incineration at any of the Company's facilities;


11.8.2 If the waste can be accepted, at which facilities and under which waste code;

11.8.3 Any specific restrictions required to ensure that the waste is handled and processed compliantly, e.g. controlled burn at set throughput, change of packaging, max weight per container or segregation of incompatible items.

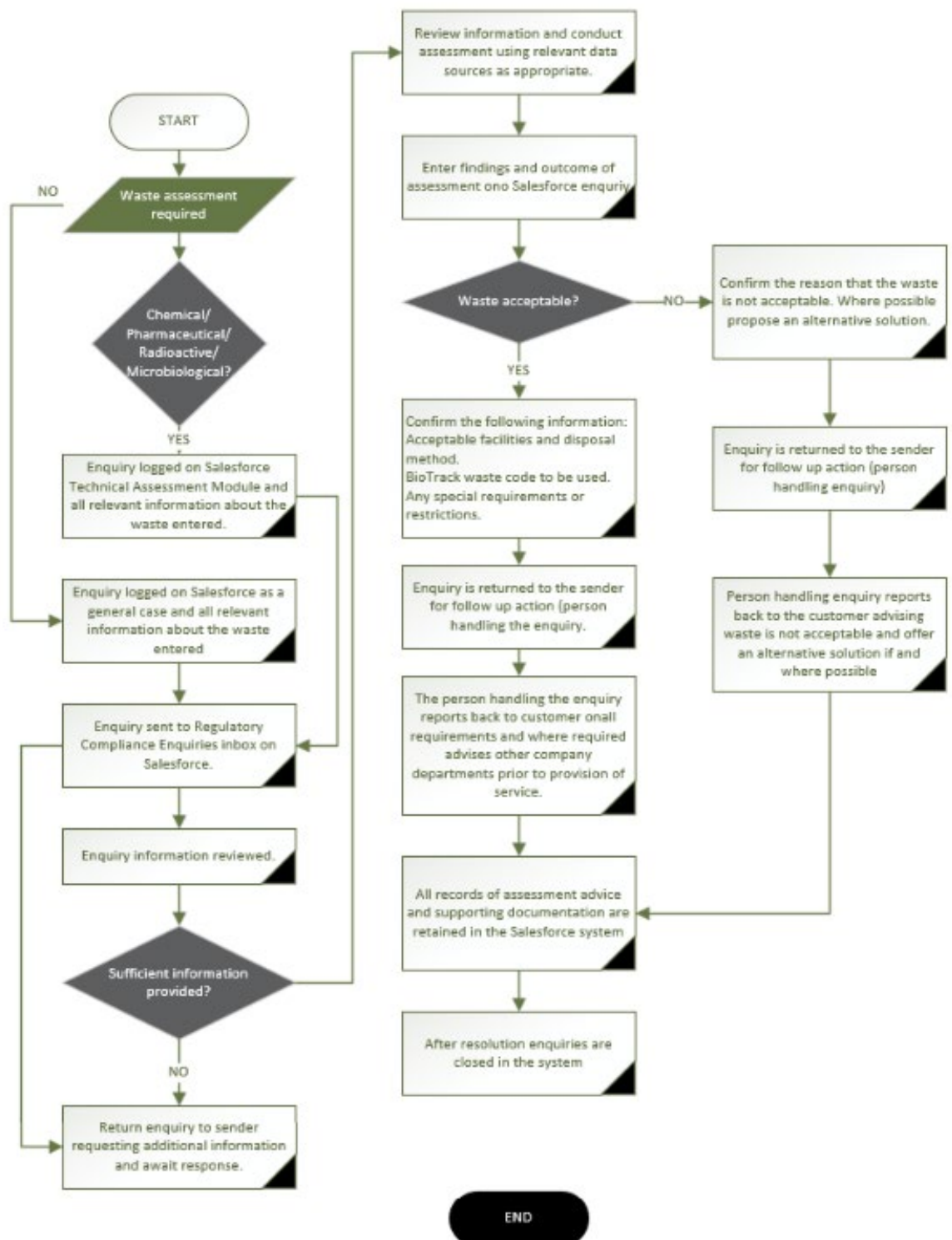
11.9 The outcome of the assessment and the information specified under step 16.8 will be recorded on the Data recording technical assessment record or Data recording case which is then returned to the person requesting the assessment.


11.10 The person requesting the assessment will respond to the customer advising that either the waste cannot be accepted or the waste can be accepted. If the waste can be accepted they will advise at which facilities, under which track waste code and of any special restrictions or requirements.

11.11 In the event that there are special restrictions or requirements to be adhered to by the Company (e.g. transport only in wheeled carts or controlled burn incineration) the person requesting the assessment will provide the details to the relevant department by sending them the enquiry on the Data recording system.

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		Version: 1 Effective: DRAFT
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Key steps for Waste Technical Assessment



	STANDARD OPERATIONS PROCEDURE Waste Pre Acceptance Procedure Clinical Waste	SOP: 3.2/WPA
		Version: 1 Effective: DRAFT
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1.0 CIRCULATION LIST

Job Title	Job holder at time of issue

2.0 REVISION HISTORY 4

Version	Reason for Revision	Supersedes Document Dated	Signature of Site Supervisor
1.0	Original	N/A	

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