



20 JUN 2005

The fully integrated healthcare waste management system

Ms Noeleen Keavey
Licensing Unit
office of Licensing and Guidance
Environmental Protection Agency
PO Box 3000
Johnstown Castle Estate
Co Wexford.



17 June 2005.

Dear Ms Keavey

Re: Licence Review Application 55-2

Further to my telephone conversation with Clara Maxwell of 16 June, please find enclosed information in support of the licence review application 55-1 for Sterile Technologies Group.

The information sent is the relevant page of the original tender specification detailing the excluded waste types in 1996 and specifying identifiable anatomical waste as body parts and organs.

The second page relates to the 2003 tender specification which detailed the requirement for recycling 25% of the treated waste within three years of the contract commencement.

If you require any further information, please contact me.

Yours sincerely

Vivienne Gillen

Commercial Director.

Sterile Technologies Group

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Member of

ISWA

Specification for the Transport Treatment & Disposal of
Clinical/Healthcare Risk Waste

4. Categories of Clinical/Healthcare Risk Waste Unsuitable for Treatment by the Main Process.

There are five main categories of clinical/healthcare risk waste which, either because of their content or because of their hazardous nature, need special handling and treatment in their transport, treatment and disposal. The categories are:

- (a) Waste cytotoxic drugs and materials contaminated by such products. These products are toxic as well as potentially hazardous as clinical/healthcare risk waste.
- (b) Hazardous chemicals.
- (c) Pharmaceuticals.
- (d) Identifiable body parts such as organs and amputations.
- (e) Blood Products

The quantity of clinical/healthcare risk waste in the above categories is expected to be small relative to the main bulk of clinical/healthcare risk waste generated. It is estimated that the quantity of waste in these categories may vary in time but should not exceed about 5% of the present total of clinical/healthcare risk waste.

The Contractor is required to provide, as part of his service, a complete disposal Service for each of these categories of clinical/healthcare risk waste. It is recommended that cytotoxic waste, hazardous chemical waste and pharmaceutical waste be disposed of by incineration in suitable incinerators licensed to burn such wastes. Alternatively, chemical denaturing or some other appropriate process may be used provided that the nature of the waste is taken into account fully in the process and the specific approval of the Joint Waste Management Board and regulatory authorities has been obtained in advance.

Identifiable body parts such as organs and amputations shall be handled sensitively and treated respectfully. Disposal shall be by incineration, cremation or other suitable process in properly licensed facilities. Interment may also be used as an option in some circumstances. The method of disposal of these wastes shall be subject to the prior approval of the Authorities.

Note regarding radioactive wastes: In both jurisdictions the use of radioactive substances and sources, in sealed and unsealed forms, together with the accumulation and disposal of radioactive waste, in hospitals is controlled by conditions laid down under licence issued by the respective statutory radiological protection bodies. Used and unwanted sealed sources, must be returned to the supplier or authorised bodies under the terms of the licence. The unsealed substances are usually short-lived and it is normally permissible to store waste arising, under controlled conditions, until its activity has decayed to such a level, that it may be safely disposed of as ordinary waste. It is generally permissible to dispose of waste material, such as paper towels or empty vials contaminated with small quantities of short-lived radioactive substances,

Specification for Collection, Transportation, Treatment & Disposal of
Clinical/Healthcare Risk Waste

replenish the agreed stock of clean empty bins within the agreed time limits and day), the Contractor may be subject to a financial penalty under the terms for performance management detailed in the Conditions of Contract.

44. Recycling/Recovery and Proposed Incentive Scheme.

The Contractor shall target the maximum practicable rate of material recycling and/or recovery throughout the period of the contract. A recycling and/ or recovery rate not less than 25% by weight of the waste collected would be expected by the third year of this contract.

The contractor shall provide details in the tender submission of how these requirements will be met.

In addition the JWMB intends to develop an incentive scheme with the successful tenderer, for quantities above the target of 25% by weight of waste collected. The JWMB is committed to the principles of recycling and reducing the dependency on landfill capacity. With this commitment the JWMB will develop with the successful tenderer a payment structure which will reward the reduction of landfill costs to the client.

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