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REVIEW/REVISION HISTORY:

12/4/98
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10/15/12
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11/15/21

SUMMARY OF REVISION/REVIEW:

Updated terminology throughout I.A.1.a. - Removed unnecessary language

APPROVED:

Signature on file

CHERYL STRANGE, Secretary Department of Corrections 11/1/21

Date Signed

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REFERENCES:

DOC 100.100 is hereby incorporated into this policy; <u>RCW 18.64.610</u>; <u>RCW 70A.300</u>; <u>WAC 173-303</u>; DOC 410.390 Hazardous Material Emergency (RESTRICTED); DOC 650.055 Needles, Syringes, and Hazardous Medical and Dental Instruments (RESTRICTED); DOC 890.000 Safety Program; DOC 890.070 Chemical Control and HAZCOM; <u>29 CFR 1910</u>; <u>40 CFR 239-282</u>; <u>40 CFR 372</u>; <u>49 CFR 171</u>; <u>United States Department of Transportation Emergency Response Guidebook</u>

POLICY:

- I. The Department will:
 - A. Protect itself, the public, employees, individuals under Department jurisdiction, and the environment from the dangers associated with hazardous/dangerous waste.
 - B. Ensure facilities provide for an approved waste disposal system per federal, state, and local jurisdictions.
- II. Hazardous/dangerous waste emergencies will be handled per DOC 410.390 Hazardous Material Emergency (RESTRICTED).

DIRECTIVE:

- I. General Responsibilities
 - A. Hazardous/dangerous waste is defined and managed per WAC 173-303.
 - 1. Pharmaceutical waste will be managed in accordance with the Department of Ecology's <u>Dangerous Waste Pharmaceuticals Guide</u>, regardless of generator status.
 - a. Except Prisons, facilities/offices will manage pharmaceutical waste as household waste per WAC 173-303-071(3)(c).
 - 2. Resource Conservation and Recovery Act (RCRA) wastes are federally regulated, hazardous wastes.
 - Except Prisons, all other waste will be managed as household waste. Facilities/offices will consult the Headquarters Capital Programs and Development Environmental Manager if hazardous/dangerous waste is accumulated and requires disposal.

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- B. Facilities that generate waste must have a current Environmental Protection Agency (EPA)/State identification number.
- C. Each Superintendent/Reentry Center Community Corrections Supervisor (CCS) will designate a Hazardous Waste Coordinator to manage the storage and/or disposal of hazardous/dangerous waste. The Hazardous Waste Coordinator will be accountable for the solid waste stream (i.e., from the time waste is created until disposal) and must be informed of all new waste generating processes.
- D. Facilities will manage pharmaceutical waste in consultation with the Director of Pharmacy/designee.
 - 1. Pharmaceuticals are considered waste when they are non-creditable (i.e., cannot be used, sold, or returned to a manufacturer, wholesaler, or reverse distributor for credit).
 - 2. Creditable pharmaceuticals that have left the Pharmacy but have not left the control of health services employees/contract staff, will be returned to the Pharmacy to determine if the items are suitable for re-distribution per WAC 246-869-130.
 - a. Creditable controlled substances will not be returned to the Pharmacy.
- II. Generator Status
 - A. The Hazardous Waste Coordinator will determine the facility's generator status based on a review of the amount of dangerous waste generated each month and the aggregate volume of hazardous waste stored onsite at any one time.
 - 1. Large quantity generators produce more than 2,200 pounds of dangerous waste or 2.2 pounds of acute hazardous waste per month or hold more than 2,200 pounds of dangerous waste onsite at any one time.
 - 2. Medium quantity generators produce between 220 pounds and 2,200 pounds of dangerous waste per month and hold less than 2,200 pounds of dangerous waste onsite at any one time.
 - 3. Small quantity generators produce less than 220 pounds of dangerous waste or 2.2 pounds of acute hazardous waste per month.
 - B. Many state/federal regulations do not apply to small quantity generators. In these cases, the Hazardous Waste Coordinator, Superintendent/CCS, and the

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Director of Pharmacy will be responsible for ensuring that wastes are properly managed per local regulations and do not pose a health or environmental threat.

III. Handling

- A. Movement of hazardous/dangerous waste containers requires Hazardous Waste Coordinator approval.
 - 1. For medium and large quantity generators, containers will be moved to the facility's designated Accumulation and Transfer Site, which must be located outside of the building, within 3 days of total accumulation of 55 gallons.
 - a. The site must be well marked within the facility and in a secure place, restricted to authorized employees only.
 - b. Containers will be accompanied by DOC 16-333 Hazardous/ Dangerous Waste Inventory Log.
- B. Containers that hold hazardous/dangerous waste will be managed per WAC 173-303-630.
 - 1. Sharps containers will be handled as biohazardous medical waste per DOC 650.055 Needles, Syringes, and Hazardous Medical and Dental Instruments (RESTRICTED).
- C. Health Services will coordinate with the Hazardous Waste Coordinator prior to movement of RCRA pharmaceutical waste or removal of RCRA pharmaceutical waste by the Department authorized vendor.
- D. Oily/flammable rags will be properly stored in covered metal containers that are emptied daily. Contaminated flammable rags will be stored in a tight sealing, covered metal container at the Accumulation and Transfer Site.
- IV. Empty Container Management
 - A. Empty hazardous/dangerous waste containers will be managed per WAC 173-303-160.
 - B. Empty containers will be taken to the designated Accumulation and Transfer Site for disposition or disposal.
 - 1. Empty containers may be recycled or re-used provided they have been properly cleaned and rinsed, to prevent the mixing of incompatible materials, and all original identification labels have been removed.

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- V. Labeling of Known Hazardous/Dangerous Waste Materials
 - A. Hazardous/dangerous waste labels and risk labels (e.g., "Ignitable", "Corrosive", "Toxic") are available on the Department of Ecology website at: http://www.ecy.wa.gov/programs/hwtr/hw_labels/
 - B. Supervisors/managers, in conjunction with the Hazardous Waste Coordinator, will label the container prior to adding waste to avoid mixing incompatible substances. Names of individuals under Department jurisdiction will not be listed on any inventory log or label.
 - Medium and large quantity generators will use a hazardous/dangerous waste label and an associated risk label for each container per WAC 173-303-200(1)(c) and WAC 173-303-200(1)(d). The accumulation start date will be documented on the label when the container is moved to the Accumulation and Transfer Site.
 - 2. RCRA wastes must be segregated from other wastes per 40 CFR 239-282 and will be stored in a container with the major risk label and the accumulation start date.
 - a. In addition, RCRA pharmaceutical wastes will be labeled "Hazardous Pharmaceutical Waste."
 - 1) A sample list of RCRA pharmaceutical waste is available on the Pharmacy SharePoint site.
 - 3. Hazardous/dangerous waste placed into containers will be documented on DOC 16-333 Hazardous/Dangerous Waste Inventory Log. Only the Hazardous Waste Coordinator can authorize changes to the inventory log.
 - 4. Conditionally excluded dangerous pharmaceutical wastes will be stored in a container labeled "Dangerous Pharmaceutical Waste" and documented on DOC 16-334 Conditionally Excluded Dangerous Pharmaceutical Waste Log.
 - a. In addition, the accumulation start date and the major risk label will be documented on the container.
 - b. Loose pills, not designated as RCRA waste, may be included in the container in a zip-locked bag but do not need to be logged.
 - 5. Inventory logs will be placed on or adjacent to the containers.

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- 6. Labels will include the appropriate waste codes.
 - a. Dangerous waste codes are defined per WAC 173-303-100.
 - b. RCRA waste codes are defined per WAC 173-303-80 and WAC 173-303-090.
 - c. State-only dangerous waste codes are defined per WAC 173-303-104.
- C. Containers will remain at the Accumulation and Transfer Site with limited access until transferred to the Treatment, Storage, and Disposal facility.
- D. Health services employees/contract staff will coordinate with the Hazardous Waste Coordinator to designate pharmaceutical waste or other chemicals purchased from sources other than the Pharmacy or authorized external pharmacies.
- VI. Identification and Labeling of Unknown Hazardous/Dangerous Waste
 - A. All unknown substances will be treated as hazardous/dangerous waste until they have been identified per WAC 173-303-90 and WAC 173-303-100.
 - B. Supervisors/managers, in conjunction with the Hazardous Waste Coordinator, will:
 - 1. Test all containers of unknown substances as follows:
 - a. Label each container "Waste Pending Analysis" with the discovery or accumulation date.
 - b. Consult a Department of Ecology certified laboratory on the sample volume needed to accurately identify the waste. Certified laboratories are located on the Department of Ecology website at: <u>https://fortress.wa.gov/ecy/laboratorysearch/</u>
 - c. Label the sample jar with the sample date and identification number used on the container and complete the chain of custody form provided by the laboratory or vendor.
 - d. Send the sample to a certified laboratory, requesting the following tests:
 - 1) Characteristics of ignitability, corrosivity, reactivity, toxicity, and federal hazardous,

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- 2) State-only toxic dangerous waste (e.g., Aquatic Bioassay), and
- 3) State-only persistent dangerous waste.
- 2. Upon receipt of laboratory results, properly designate the waste and label and manage the container.
- VII. Shipping and Disposal
 - A. Hazardous/dangerous waste, except conditionally excluded dangerous pharmaceutical waste, will be shipped to a Treatment, Storage, and Disposal facility by a Department authorized vendor.
 - 1. Accumulation time limits for dangerous waste must be shipped off-site within 90 days for large quantity generators and 180 days for medium quantity generators, or when the waste has reached the facility's designated weight limit (i.e., generator status).
 - 2. RCRA pharmaceutical waste must be shipped off-site within 180 days, regardless of accumulation weight, to an RCRA permitted incinerator.
 - 3. Pharmacy employees/contract staff will transport conditionally excluded dangerous pharmaceutical waste to an incinerator meeting the requirements per WAC 173-303-071(3)(nn).
 - B. Conditionally excluded dangerous pharmaceutical waste will be shipped to the Pharmacy for disposal within 180 days of the accumulation start date. The waste will be collected in plastic bags and packaged in boxes using a dual witness process for accountability purposes and to ensure RCRA waste is not included. Boxes will not be sent without a plastic bag liner.
 - 1. Boxes will be shipped by the Department authorized shipping vendor. Shipment will not be made through the U.S. Postal Service.
 - a. Liquid medications must be packaged in a way to avoid breakage and leaks.
 - b. Before sealing each box, the generating facility will ensure:
 - 1) The box is not marked waste and does not include any RCRA waste, including loose pills.
 - 2) Weight does not exceed 20 pounds.

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- A copy of the completed DOC 16-334 Conditionally Excluded Dangerous Pharmaceutical Waste Log is in the box.
- c. Box labels will only include the following address and the quantity of boxes sent (e.g., 1/1, 1/2, 2/2):

DOC Pharmacy Services Attn: Destruction 20311 Old Hwy 9 SW Centralia, WA 98531

- 2. The generating facility will email the completed DOC 16-334 Conditionally Excluded Dangerous Pharmaceutical Waste Log to <u>DOC Pharmacy</u> <u>Destruction</u> with the subject line "Conditionally Excluded Dangerous Pharmaceutical Waste," the number of boxes, and the facility name.
- 3. The Pharmacy will email the generating facility confirmation of the receiving shipment and segregate the waste for destruction.
- C. The EPA/State identification number will be documented on all transportation bills of lading and manifests.
- D. Only a reverse distributor (i.e., vendor that may accept creditable pharmaceuticals in exchange for credit) will be authorized to manage destruction/return of creditable pharmaceuticals and non-creditable controlled substances.
 - 1. Employees/contract staff will consult with the Director of Pharmacy/designee prior to contacting the reverse distributor.
 - 2. A complete list of conditionally excluded dangerous pharmaceutical waste will be provided to the reverse distributor at the time of disposal.
 - 3. The reverse distributor will provide the generating facility with documentation of manufacturer credit and/or a manifest/bill of lading certifying destruction within 20 days of receiving the pharmaceuticals or controlled substances.
- E. The Hazardous Waste Coordinator will prepare <u>EPA Form 8700-22 Uniform</u> <u>Hazardous Waste Manifest</u> per WAC 173-303-180 for shipment of hazardous/ dangerous wastes from medium and large quantity generators. All sections of the shipping manifest will be completed as required.

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- 1. The generating facility will retain one signed copy of the manifest and the remaining signed copies are sent with the vendor.
- 2. If the manifest is not received within 45 days of shipment, the Hazardous Waste Coordinator must submit an exception report to the Department of Ecology, including a copy of the original manifest and the date disposal or storage was to occur.
- VIII. Inspection Requirements
 - A. Each facility will routinely inspect Accumulation and Transfer Sites using DOC 16-349 Weekly Inspection Checklist for Hazardous/Dangerous Waste.
 - 1. Inspections are required weekly per WAC 173-303-630(6) for medium and large quantity generators.
 - B. Each facility will routinely inspect satellite accumulation areas.
- IX. Reporting and Recordkeeping
 - A. The following records pertaining to hazardous/dangerous waste will be retained for a minimum of 5 years, unless otherwise specified per WAC 173-303-210 and WAC 173-303-630(6):
 - 1. Copies of all manifests/bills of lading, by date,
 - 2. Copies of all laboratory test results,
 - 3. Records of any onsite visits by the Department of Ecology or other agencies reviewing hazardous/dangerous waste material activities,
 - 4. Completed DOC 16-333 Hazardous/Dangerous Waste Inventory Log,
 - 5. Completed DOC 16-334 Conditionally Excluded Dangerous Pharmaceutical Waste Log, and
 - 6. Reverse distributor receipts, invoices, and credits.
 - B. The Hazardous Waste Coordinator will retain records pertaining to hazardous/ dangerous waste. Pharmaceutical waste records will be retained by health services employees/contract staff at the generating facility.
 - C. Facilities will submit an annual report to the Department of Ecology per WAC 173-303-230 no later than March 1st.
 - D. The Hazardous Waste Coordinator will annually verify with the Department of Ecology the Treatment, Storage, and Disposal facility is in compliance with all applicable regulations.

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- X. Training
 - A. Safety training will be provided per DOC 890.000 Safety Program.
 - B. HAZCOM training will be provided per DOC 890.070 Chemical Control and HAZCOM.
 - C. Additional training for persons handling hazardous/dangerous waste will include:
 - 1. Overview on manifesting,
 - 2. Contingency plan in case of a spill, and
 - 3. Waste designation.

DEFINITIONS:

Words/terms appearing in this policy may be defined in the glossary section of the Policy Manual.

ATTACHMENTS:

None

DOC FORMS:

DOC 16-333 Hazardous/Dangerous Waste Inventory Log

DOC 16-334 Conditionally Excluded Dangerous Pharmaceutical Waste Log

DOC 16-349 Weekly Inspection Checklist for Hazardous/Dangerous Waste