

Waste Management Plan - Mounties Care Expansion

This Plan details the management of waste during the demolition, construction and occupation phases for the proposed Health Facility project located within the redeveloped Harbord Diggers.

The proposed Health Facility is intended to comprise of two of the existing suites MS5 & MS6 located along the Porte Cohere of the Club. One of the rooms, MS6 is a cold shell ready for construction phase and approved under DA2020/1238 for subject use. The other, MS5, contains a basic fitout from a previous tenancy of flooring and internal wall structure. The internal intertenancy wall dividing the existing suites will be demolished if it cannot be remodelled with an approach to adaptive reuse.

The aim of this Plan is to ensure that all waste resulting from demolition, construction and occupation phases of the Health Facility is managed in an effective and environmentally aware manner.

Demolition & Construction Phases

The existing internal fixtures will be reused where possible. There is no hazardous material, and it is estimated there will be less than 10 cubic meters of waste generated during the demolition & construction phases.

The quantity of waste materials to be generated onsite are estimates. Active site management during the demolition and construction phases between the Harbord Diggers Facility Management Team and appointed builder will ensure all waste/recyclable materials are disposed of appropriately and that all waste receptacles are of sufficient capacity to manage onsite activities. Any adaptive reuse will be considered and actioned whenever possible.

The following waste hierarchy will be used as guiding principle:



Avoid and Reduce

Minimise the production of waste materials in the demolition & construction phases by:

- Architectural design consideration of existing structures.
- Assessing and taking into consideration the resultant waste from different design and construction options.
- Purchasing materials that will result in less waste, which have minimal packaging, are pre-cut or fabricated.
- Not over ordering products and materials.

Reuse

Ensure that wherever possible, materials are reused either on site or can be identified for use at another of the Mounties Group venues

- Identify all waste products that can be reused.
- Put systems in place to separate and store reusable items.
- Identify the potential applications for reuse both onsite and offsite and facilitate reuse.

Recycling

Identify all recyclable waste products to be produced on site

- Provide systems for separating and stockpiling of recyclables.
- Provide clear signage to ensure recyclable materials are separated.
- Process the material for recycling either onsite or offsite.

Disposal

Waste products which cannot be reused or recycled will be removed and disposed of. The following will need to be considered:

- Ensure the chosen waste disposal contractor complies with Occupational and Environmental Health (OEH) requirements.
- Implement regular collection of bins.

It should be noted that there may be multiple offsite recycling/disposal facilities available for the appropriate processing of the materials detailed below and the facility choice will depend largely on the waste contractor/supplier engaged. The Kimbriki Resource Recovery Centre is located in relatively close proximity to the Harbord Diggers site and provides recycling/disposal services for most materials. The SITA Resource Recovery Centre at Belrose is another alternative in close proximity.

Types of Waste Material	Estimated Volume (m3) or weight (t)	ONSITE (RE-USE or RECYCLE)	OFFSITE (RECYCLING)
Excavated Material	NA		
Garden Organics	NA		
Bricks	NA		
Tiles	<1	Kept for replacement	
Concrete	<1		
Timber	<1	Separated for Reuse or offsite recycling on site for odd jobs	
Plasterboard	3		
Metals	4		
Asbestos	NA		
Other Waste			

Estimated Total Recovered			
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Occupation Phase

The proposed site will be operated as a health hub and contain up to six (6) consulting rooms. A variety of healthcare specialists performing one on one or small group private consultation, non-surgical medical procedures and General Practitioners performing non-surgical and minor surgical procedures will share the rooms meeting the health needs of members.

Whilst it is envisioned that for the most part there will be very little waste produced as face-to-face or telehealth consultations will make up the majority of service offering, there will be some medical waste produced and must be accounted for.

Waste in medical practices is categorised as:

- general
- clinical
- pharmaceutical.

General waste means includes items that are not recyclable or hazardous.

- Items such as gloves and gowns worn to attend to patient care, that do not have any blood or body fluid on them are included in this category of waste.

Clinical waste means any waste resulting from medical, nursing, dental, pharmaceutical, skin penetration or other related clinical activity, being waste that has the potential to cause injury, infection or offence, and includes waste containing any of the following:

- § human tissue (other than hair, teeth and nails)*
- § bulk body fluids or blood
- § visibly blood-stained body fluids, materials or equipment
- § laboratory specimens or cultures

This category includes pathological specimens, biopsy specimens and tissue taken during surgery or autopsy. This does not include corpses, for which there are separate regulatory requirements for disposal.

*Human tissues include tissue, organs, limbs, free-flowing or expressible blood, and other body fluids that are removed during surgery, birth and autopsy, and exclude teeth, hair, nails, urine and faeces.

Pharmaceutical waste includes expired, unused, spilt and contaminated or hazardous pharmaceutical products, drugs and vaccines other than scheduled and dangerous goods. The pharmaceutical waste stream includes residual medicines which may be contained in:

- Partly emptied bottles or glass vials
- Prescription drugs (hard capsule or tablet medication)
- Broken ampoules
- Drawing up needles
- Connecting tubing

A **Waste Management Committee** will be appointed and include key stakeholders from both the Harbord Diggers Corporate Services Department and the medical consultatory firm engaged to manage the Health Consulting Rooms or provide advice on best practice. Together a full Waste Management Plan will be documented and reviewed annually. Implementation of the Plan will include training so that all persons working within the Health Consulting Rooms understand their responsibilities.

WASTE SEGREGATION POLICY

The Health Consulting Rooms Waste Management Plan will include a waste segregation policy that all clinicians and specialists practicing within the rooms must follow. The policy will include:

Definition

Waste segregation is the practice of classifying waste and placing it into the appropriate waste container immediately after the waste is generated. Effective segregation will reduce costs, promote recycling, and protect the health and safety of all.

Objective

Waste should be accurately segregated to protect personnel from injury and infection by preventing hazardous waste entering inappropriate waste streams and divert problematic waste from incorrect waste streams.

Correct segregation

- Is necessary to ensure that materials which are reusable, or recyclable are not discarded.
- Correct segregation and containment of all wastes are required to comply with the provisions of the Waste Regulation.
- The mixing of wastes is not permitted.
- If mixing occurs, wastes containing more than 200g of hazardous waste are to be classified as hazardous.
- Clinical waste needs to be placed into yellow biohazard bags and disposed of according to environmental legislation

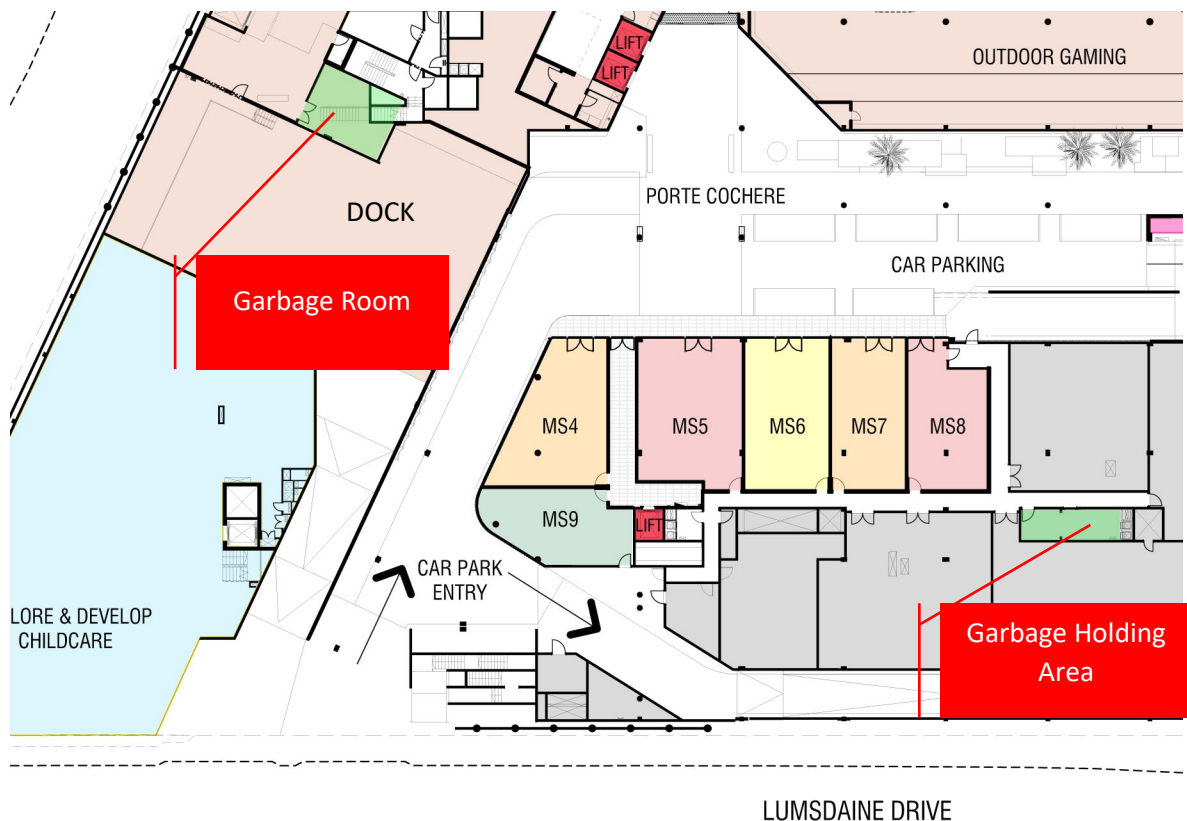
Effective segregation can be best achieved through:

- providing education and training programs to all personnel who generate waste
- identification of material composition (Material Safety Data Sheet)
- establishing identifiable colour coding, and labelling
- providing suitable containers in appropriate and suitable locations
- incorporating quick and efficient waste disposal methods into patient care procedures. This may require the design and organisation of procedure trolleys and working environments
- ensuring all waste can be easily, safely, and properly segregated at the point of generation

The Waste Management document will also include guidelines for the disposal of waste, of which will become clearer as the use of each room is clearly defined. In General, the following is understood:

Disposal of General Waste

These items will be disposed of daily through end of shift collection, into the Garbage Holding Area. Bins are collected daily by the facilities team from the Garbage Holding Area and taken to the Garbage Room where all garbage is managed and removed according to the Harbord Diggers Waste Management Plan.



Disposal of Clinical & Pharmaceutical Waste

Harbord Diggers will devise a Clinical Waste & Pharmaceutical Disposal policy that all clinicians and specialists practicing within the rooms must follow. This will be conducted in consultation with medical professionals once engaged and prior to the opening of the Health Hub. All Health Hub policies will follow NSW Health guidelines outlined in the [Clinical and Related Waste Management for Health Services PD2017 026](#).

The Harbord Diggers will engage a suitably qualified Waste Management Company that can provide a comprehensive range of clinical & pharmaceutical waste services (e.g., Cleanaway or JJ Richards and Sons Pty Ltd) to dispose of all clinical & pharmaceutical waste compliant to mandated regulations above and the site Waste Management Document.