Waste Contract and Disposal Record

Document control | WST-FRM-001 | New

Field	Content
Title	Waste Contract and Disposal Record
Document ID	{{facility.code}}-WST-FRM-001
Version and status	1.0 | Approved by the ASF Expert Committee
Prepared by	{{roles.quality_lead.name}}, Quality lead
Reviewed by	{{roles.clinical_director.name}}, Clinical director date: _____
Approver and signature	{{roles.clinical_director.name}}, clinical director Signature: _____ Date: _____
Effective date	{{document.effective_date}}
Next review	{{document.review_date}} (12 months after effective date)
Supersedes	None (new document)
Standards and criteria supported	Standard 1, criterion 2B.5
Evidence basis	E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

1. Purpose

Record of each collection of clinical waste by the licensed contractor.

2. How to use

Complete one form per patient, per area or per period, as the purpose states. Tick Yes, No or N/A. Any No is actioned at once and reported to the person named in the procedure.

3. Items

#	Item to check	Standard [evidence]	Yes	No	N/A	Action if No
1	Contractor licence number and contract date	Recorded [EC]	[ ]	[ ]	[ ]	Action and who to tell
2	Date and weight or volume collected	Recorded [EC]	[ ]	[ ]	[ ]	Action and who to tell
3	Disposal certificate or manifest received	Yes [EC]	[ ]	[ ]	[ ]	Action and who to tell
4	Any missed collection and action taken	Recorded [EC]	[ ]	[ ]	[ ]	Action and who to tell

Completed by (name and role): _____ Date/time: _____ Signature: _____

Retention: {{facility.records_retention_years}} years, filed as set in the retention schedule (REC-POL-001).

4. Evidence

ID	Source	Link / status
E-009	ASF Expert Committee consensus.	see source

EC = ASF Expert Committee consensus.