



STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS

APPLICABILITY
DEPARTMENT WIDE
FACILITY/SPANISH MANUAL

REVISION DATE
4/15/26

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1 of 8

NUMBER
DOC 890.030

POLICY

TITLE
HAZARDOUS/DANGEROUS WASTE MANAGEMENT

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SUMMARY OF REVISION/REVIEW:

Major changes. Read carefully!


APPROVED:

Signature on file

TIM LANG, Secretary
 Department of Corrections

3/11/26

 Date Signed

 <p>STATE OF WASHINGTON DEPARTMENT OF CORRECTIONS</p> <p>POLICY</p>	APPLICABILITY DEPARTMENT WIDE FACILITY/SPANISH MANUAL		
	REVISION DATE 4/15/26	PAGE NUMBER 2 of 8	NUMBER DOC 890.030
	TITLE HAZARDOUS/DANGEROUS WASTE MANAGEMENT		

REFERENCES:

DOC 100.100 is hereby incorporated into this policy; [RCW 18.64.610](#); [RCW 70A.300](#); [WAC 173-303](#); [WAC 246-945](#); DOC 650.055 Needles, Syringes, and Hazardous Medical and Dental Instruments (RESTRICTED); DOC 890.000 Safety Program; DOC 890.070 Chemical Control and HAZCOM; [29 CFR 1910](#); [40 CFR 239-282](#); [40 CFR 372](#); [49 CFR 171](#); [United States Department of Transportation Emergency Response Guidebook](#)

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 890.070 Chemical Control and HAZCOM.

DIRECTIVE:

- I. General Requirements
 - A. Hazardous/dangerous waste is defined and managed per WAC 173-303.
 1. Resource Conservation and Recovery Act (RCRA) wastes are federally regulated, hazardous wastes.
 - B. Pharmaceutical waste will be managed per the Department of Ecology's [Dangerous Waste Pharmaceuticals Guide](#), regardless of generator status, and in consultation with the Director of Pharmacy/designee and Department of Ecology.
 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 246-945.
 3. Creditable controlled substances will not be returned to The Pharmacy.



STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS

APPLICABILITY
DEPARTMENT WIDE
FACILITY/SPANISH MANUAL

REVISION DATE
4/15/26

PAGE NUMBER
3 of 8

NUMBER
DOC 890.030

POLICY

TITLE
HAZARDOUS/DANGEROUS WASTE MANAGEMENT


- C. Facilities that generate waste must have a current Environmental Protection Agency (EPA)/State identification number.
- D. Reentry Centers and Field Offices will manage hazardous/dangerous waste and pharmaceutical waste as household waste.
 - 1. The Capital Programs and Development Environmental Manager will be consulted if hazardous/dangerous waste is accumulated and requires disposal.

II. General Responsibilities

- A. Each Superintendent will designate a Hazardous Waste Coordinator to be accountable for the solid waste stream (i.e., from the time waste is created until disposal).
- B. The Hazardous Waste Coordinator will:
 - 1. Be informed of all new waste generating processes,
 - 2. Manage the storage and/or disposal of hazardous/dangerous waste, and
 - 3. Determine the facility's generator status (i.e., small, medium, or large quantity generator) 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 per WAC 173-303.
- C. The Hazardous Waste Coordinator, Appointing Authority, and Director of Pharmacy/designee will ensure wastes are properly managed per local regulations and do not pose a health or environmental threat.

III. Handling

- A. Facilities will designate a site to store containers for pharmaceutical waste and an Accumulation and Transfer Site for hazardous/dangerous waste.
 - 1. The site must be well marked within the facility and in a secure place, restricted to authorized employees only.
 - 2. Containers will remain at the designated site until transferred for disposal.
- B. Contaminated solvent wipes will be properly stored in covered metal containers and emptied daily.
- C. RCRA wastes must be segregated from other wastes per 40 CFR 239-282.

 <p>STATE OF WASHINGTON DEPARTMENT OF CORRECTIONS</p> <p>POLICY</p>	APPLICABILITY DEPARTMENT WIDE FACILITY/SPANISH MANUAL		
	REVISION DATE 4/15/26	PAGE NUMBER 4 of 8	NUMBER DOC 890.030
	TITLE HAZARDOUS/DANGEROUS WASTE MANAGEMENT		

1. A sample list of RCRA pharmaceutical waste is available on The Pharmacy SharePoint site.
- D. Movement of hazardous/dangerous waste containers requires Hazardous Waste Coordinator approval.
1. For medium and large quantity generators, containers will be moved to the Accumulation and Transfer Site within 3 days of total accumulation of 55 gallons.
 2. Health Services will coordinate with the Director of Pharmacy/designee and Hazardous Waste Coordinator prior to movement or removal of RCRA pharmaceutical waste.
- E. Sharps containers will be handled as biohazardous medical waste per DOC 650.055 Needles, Syringes, and Hazardous Medical and Dental Instruments (RESTRICTED).
- F. Empty containers may only be recycled or reused if they have been properly cleaned, rinsed, and all original identification labels have been removed.
- G. Accumulation and Transfer Sites will be routinely inspected using the inspection checklist for hazardous/dangerous waste provided by the Capital Programs and Development Environmental Manager.
1. Inspections are required weekly for medium and large quantity generators.
- IV. Documenting Known Hazardous/Dangerous Waste
- A. Hazardous/dangerous waste placed into containers will be:
1. Documented on an inventory log provided by the Capital Programs and Development Environmental Manager, and
 2. Stored with the appropriate waste and risk labels (e.g., "Ignitable", "Corrosive", "Toxic").
 - a. Labels will include the appropriate dangerous, RCRA, and state-only dangerous waste codes as defined per WAC 173-303.
 - b. Labels are available on the Department of Ecology website at: http://www.ecy.wa.gov/programs/hwtr/hw_labels/.
- B. Inventory logs will be placed on or adjacent to the containers. Only the Hazardous Waste Coordinator can authorize changes to the inventory log.



STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS

APPLICABILITY
DEPARTMENT WIDE
FACILITY/SPANISH MANUAL

REVISION DATE
4/15/26


PAGE NUMBER
5 of 8

NUMBER
DOC 890.030

POLICY

TITLE
HAZARDOUS/DANGEROUS WASTE MANAGEMENT


1. Loose pills, not designated as RCRA waste, will be stored in a container approved by the Director of Pharmacy/designee but do not need to be logged.
- C. Supervisors/managers, in conjunction with the Hazardous Waste Coordinator, will label the container prior to adding waste to avoid mixing incompatible substances.
 1. The accumulation start date will be immediately documented on the label when accumulation limits are met, or the container is moved to the Accumulation and Transfer Site.
- D. Names of individuals under Department jurisdiction will not be listed on any inventory log or label.
- E. 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.
- V. 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.
 - 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: <https://fortress.wa.gov/ecy/laboratorysearch/>
 - 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:

 <p>STATE OF WASHINGTON DEPARTMENT OF CORRECTIONS</p> <p>POLICY</p>	APPLICABILITY DEPARTMENT WIDE FACILITY/SPANISH MANUAL		
	REVISION DATE 4/15/26	PAGE NUMBER 6 of 8	NUMBER DOC 890.030
	TITLE HAZARDOUS/DANGEROUS WASTE MANAGEMENT		

- 1) State-only toxic dangerous waste (e.g., Aquatic Bioassay),
 - 2) State-only persistent dangerous waste, and
 - 3) Characteristics of ignitability, corrosivity, reactivity, toxicity, and federal hazardous.
2. Upon receipt of laboratory results, properly designate the waste and label and manage the container.

VI. 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 before reaching the facility's designated weight limit (i.e., generator status).
- B. Medium and large quantity generators will ship dangerous pharmaceutical waste to a RCRA-permitted incinerator within one year of the initial accumulation start date, regardless of accumulation weight.
- C. Small quantity generators will coordinate with Pharmacy employees/contract staff to transport dangerous pharmaceutical waste to The Pharmacy for disposal within 180 days of the accumulation start date.
1. Waste will not be shipped via courier (e.g., U.S. Postal Service, FedEx).
 2. Waste will be collected in plastic bags and packaged in boxes with a plastic bag liner using a dual witness.
 - 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.
 - 3) A copy of the completed dangerous pharmaceutical waste log is in the box.

 <p>STATE OF WASHINGTON DEPARTMENT OF CORRECTIONS</p> <p>POLICY</p>	<p>APPLICABILITY DEPARTMENT WIDE FACILITY/SPANISH MANUAL</p>		
	<p>REVISION DATE 4/15/26</p>	<p>PAGE NUMBER 7 of 8</p>	<p>NUMBER DOC 890.030</p>
	<p>TITLE HAZARDOUS/DANGEROUS WASTE MANAGEMENT</p>		

c. Box labels will only include the quantity of boxes sent (e.g., 1/1, 1/2, 2/2).

3. The Pharmacy will email the generating facility confirmation of the receiving shipment and segregate the waste for destruction.

D. The EPA/State identification number will be documented on all transportation bills of lading and manifests.

E. 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.

F. Medium and large quantity generators will complete [EPA Form 8700-22 Uniform Hazardous Waste Manifest](#) before shipment of hazardous/dangerous wastes.

1. The generating facility will retain one signed copy of the manifest, and the remaining signed copies will be provided to 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.

VII. Reporting and Recordkeeping

A. The following records will be retained for a minimum of 5 years, unless specified per WAC 173-303:

1. Copies of manifests/bills of lading, by date,

2. Copies of 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 logs, and



STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS

APPLICABILITY
DEPARTMENT WIDE
FACILITY/SPANISH MANUAL

REVISION DATE
4/15/26

PAGE NUMBER
8 of 8

NUMBER
DOC 890.030

POLICY

TITLE
HAZARDOUS/DANGEROUS WASTE MANAGEMENT

- 5. Reverse distributor receipts, invoices, and credits.
- B. Records will be retained by:
 - 1. The Hazardous Waste Coordinator for hazardous/dangerous waste.
 - 2. Health Services at the generating facility for pharmaceutical waste.
- C. Facilities will submit an annual report to the Department of Ecology no later than March 1st.

VIII. 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:

None