WASTE MANAGEMENT PLAN

PROPOSED MEDICAL CENTRE DEVELOPMENT

31-33 HIGH STREET, ASHWOOD

24 JANUARY 2023

31-33 HIGH STREET ROAD, ASHWOOD

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CONTENTS

1	INTRODUCTION	1
2	EXISTING CONDITIONS	1
3	THE PROPOSAL	3
4	WASTE STREAMS	3
5	WASTE GENERATION	5
6	BIN REQUIREMENTS	5
7	WASTE COLLECTION ARRANGEMENTS	10
8	COUNCIL INFORMATION	11
APPENDIX A		12
APPENDIX B		15

1 INTRODUCTION

O'Brien Traffic has been engaged by ZC Wood Pty Ltd to prepare a Waste Management Plan for a proposed medical centre development at 31-33 High Street Road, Ashwood.

In the course of preparing this Plan, plans and relevant documentation have been examined, including:

- The Environmental Protection Agency (EPA)'s *Clinical and Related Waste – Operational Guidance*;
- City of Monash Multi-Unit and Commercial Developments Waste Management Plan Guide for Applicants; and
- Council's RFI letter for TPA/54467 dated 23 December 2022.

2 EXISTING CONDITIONS

2.1 LOCATION AND LAND USE

The site, which is zoned *General Residential Zone 3* (GRZ3) under the Monash Planning Scheme, has a frontage of approximately 37 metres to High Street Road and 36 metres to Kennett Street. The location of the subject site is shown in **Figure 1**.

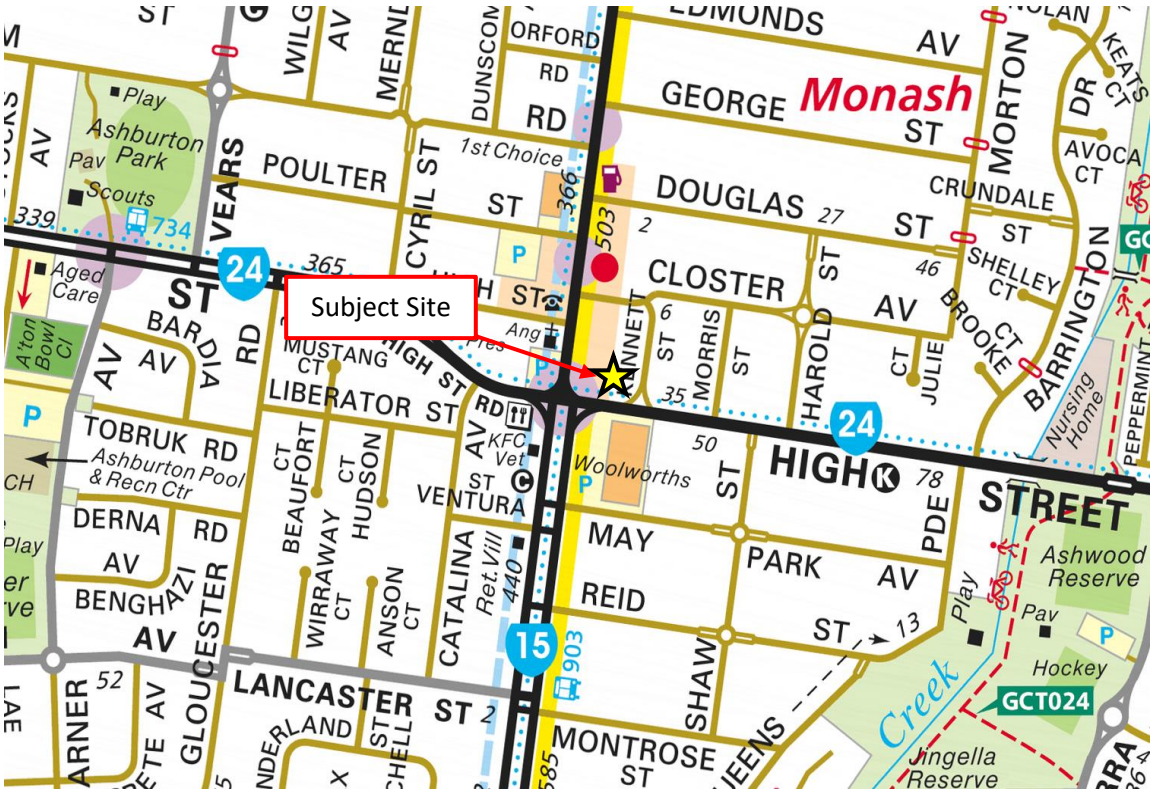

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FIGURE 1: LOCATION OF SUBJECT SITE

A recent aerial photo of the subject site and surrounds is provided in **Figure 2.**

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FIGURE 2: AERIAL PHOTO OF SUBJECT SITE (WEDNESDAY, 14 SEPTEMBER 2022)

The subject site is rectangular in shape with a frontage of approximately 37.4 metres to High Street Road, a frontage of 36.6 metres to Kennett Street and with a total site area of approximately 1,491.6 m^2. The site also has a frontage to an unnamed right-of-way to the west of 38.1 metres.

The site is currently occupied by two single dwellings. Vehicle access is via a crossover to High Street Road and a crossover to Kennett Street.

The site is located in a *General Residential Zone* (GRZ3) Monash Planning Scheme.

2.2 ROAD NETWORK

High Street Road is a state arterial road under the control of the Department of Transport. High Street Road provides a pavement width of approximately 19.6m, with two traffic lanes in each direction and separate right and left turning lanes in the vicinity of the subject site.

On-street parking is prohibited on the northern side of High Street Road adjacent the subject site. East of Kennett Street, on-street parking is restricted by a Clearway 4pm-6:30pm Monday-Friday. On the southern side of High Street Road in the vicinity of the subject site parking is restricted by a Clearway 7am-9am Monday-Friday. The posted speed limit in the vicinity of the site is 60 km/h.

Kennett Street is a local access street under the control of Council. It runs in a north-south orientation between High Street Road and Closter Avenue. It provides a pavement width of approximately 6.7m, allowing for two-way traffic. Parking along the western kerb is restricted to No stopping 8am to 6pm Monday to Friday and 8am-1pm Saturday, while the eastern side of Kennett Street provides unrestricted on-street parking. The intersection of Kennett Street and High Street Road is restricted to left in and left out movements only.

The unnamed Right-of Way (ROW) is under the control of Council. It runs in a north-south orientation between High Street Road and Closter Avenue. It provides a pavement width of approximately 3 metres. The intersection of the ROW with High Street Road is restricted to left out movements only, no access via High Street Road is allowed.

3 THE PROPOSAL

It is proposed to construct a three-storey medical centre building on the subject site comprising a total floor area of 1,882m^2 and a leasable floor area of 1,258m^2.

Private waste collection is proposed for non-medical waste.

Medical waste will be collected by an EPA Victoria permitted transporter (www.epa.vic.gov.au/PIWdb).

4 WASTE STREAMS

Staff may sort waste on-site into the following streams:

- General Waste;
- Commingled Recycling;
- Biohazardous Waste; and
- Cytotoxic Waste.

4.1 GENERAL WASTE

The medical centre would be provided with lined bins for the temporary holding of general non-biohazardous waste. Staff would then tie the plastic bags and place them in the marked bin in the bin storage area within the High Street Road frontage.

4.2 COMMINGLED RECYCLING

The medical centre would be provided with unlined bins for the temporary holding of commingled recycling, including paper and cardboard. Staff would empty these bins into the marked bin in the bin storage area. Large cardboard shall be broken down by staff and disposed of in the marked bin in the bin storage area.

4.3 HARD WASTE

The medical centre will be responsible for arranging a on-site private contractor to collect Hard Waste that is generated by the medical centre.

4.4 BIOHAZARDOUS WASTE

The majority of medical waste that will be generated by the development will be biohazardous waste. All non-cytotoxic biohazardous waste must be segregated into:

- items that must be incinerated, which must be contained in a yellow container with an orange lid. This includes human tissue and pharmaceutical waste;
- items that can be treated by incineration and/or other technologies, which must be contained in a yellow container with a yellow lid. This includes most general clinical waste;
- all sharps must be stored in an appropriate container that meets Australian Standard requirements;

A full breakdown of treatment processes for each type of medical waste is provided in the Environmental Protection Agency (EPA)'s *Clinical and Related Waste – Operational Guidance*.

Small, individual waste receptacles shall be provided in each consulting office where such waste would be generated. Staff would empty these receptacles into the main bin for each waste stream as required. Bins would be stored in the bin storage area.

Sharps shall be stored within a suitable container in each relevant consulting office and not moved until collection.

4.5 CYTOTOXIC WASTE

Cytotoxic waste is extremely hazardous and consists of items that are capable of impairing, injuring or killing cells, generally resulting in toxic and/or allergic reactions. All cytotoxic waste, including contaminated sharps, must be segregated from the general biohazardous waste streams and contained in a purple container for specialist collection and disposal.

5 WASTE GENERATION

The anticipated waste generation for the proposed development is shown below in **Table 1**. Waste generation figures are based off 5-day operation of the medical centre.

SIZE	NUMBER	L/DAY/100M²			WASTE/WEEK		
		GENERAL WASTE	RECYCLING	MEDICAL WASTE	GENERAL WASTE	RECYCLING	MEDICAL WASTE
Medical centre	1,258m²	10L	10L	15L	629L	629L	944L
					629L	**629L**	**944L**

WASTE FIGURES BASED ON A 5 DAY WORKING WEEK

TABLE 1: WASTE GENERATION ASSESSMENT – MEDICAL CENTRE

Note these values are estimates only and should be adjusted by the Practice Manager as required.

6 BIN REQUIREMENTS

6.1 BIN QUANITY, SIZE, COLLECTION FREQUENCY AND COLOUR

The bin quantity, size and collection frequency are shown in **Table 2** below.

Cytotoxic waste and sharps shall be collected on an as-needed basis.

WASTE STREAM	TOTAL WASTE /WEEK	BIN SIZE	BIN QUANTITY	CAPACITY / WEEK	COLLECTION FREQUENCY
General Waste	629L	660L	1 bin	660L	Weekly
Recycling	629L	660L	1 bin	660L	Weekly
Biohazardous Waste (incineration only)	944L	1100L	1 bin	1,100L	Weekly
Biohazardous Waste (sharps)		50L[1]	1 bin for each relevant consulting office	-	As required
Biohazardous Waste (all treatment technologies)		1100L	1 bin	1,100L	Weekly
Cytotoxic Waste		50L[2]	1 bin for each relevant consulting office	-	As required

1. EXACT SIZE IS DEPENDANT ON BIN PROVIDER.
2. EXACT SIZE IS DEPENDANT ON BIN PROVIDER. 12.5L MINIMUM CONTAINER SIZE.

TABLE 2: BIN QUANTITY, SIZE AND COLLECTION FREQUENCY

The standard approximate dimensions and colours of bins are provided in **Table 3.**

WASTE STREAM	BIN SIZE	WIDTH (M)	DEPTH (M)	HEIGHT (M)	COLOUR	
					LID	BODY
General Waste	660L	1.26	0.78	1.33	Red	Dark green
Recycling	660L	1.26	0.78	1.33	Blue	Dark green
Biohazardous Waste (incineration only)	1100L	1.24	1.07	1.33	Yellow	Orange
Biohazardous Waste (sharps)	50L[1]	0.41	0.445	0.725	Red	Yellow
Biohazardous Waste (all treatment technologies)	1100L	1.24	1.07	1.33	Yellow	Yellow
Cytotoxic Waste	50L[1]	0.41	0.445	0.725	Purple	Purple

1. EXACT SIZE IS DEPENDANT ON BIN PROVIDER

TABLE 3: STANDARD BIN SPECIFICATIONS (AS PER SULO MGB AUSTRALIA AND ACEWASTE AUSTRALIA)

6.2 BIN STORAGE

6.2.1 Bin Storage Area

The required areas for the bins are indicated in **Table 4**.

WASTE STREAM	AREA REQUIRED (EXCL. CIRCULATION)
General Waste	1 * 0.98m^2
Recycling	1 * 0.98m^2
Biohazardous Waste (incineration only)	1 * 1.33m^2
Biohazardous Waste (sharps)	Tabletop
Biohazardous Waste (all treatment technologies)	1 * 1.33m^2
Cytotoxic Waste	Tabletop
TOTAL	**4.62M^2**

TABLE 4: REQUIRED WASTE STORAGE AREA

General and Recycle Waste should be stored in the allocated bin storage area on the ground level. The plans in **Appendix A** indicate that the proposed "bin storage area" has sufficient area to store the required bins.

Biohazardous Waste bins should be stored in a secure location and this is recommended to be within the basement. The plans in **Appendix A** indicate that the proposed "services" room in the northeast corner of the basement has more than sufficient area to store the required bins.

The cytotoxic waste bin (if required) would need to be securely stored within the building until collection. This is recommended to be within the basement with the Biohazardous Waste bins. Sharps bins shall be provided in each relevant consulting office. Storage area for the 50L bins for Cytotoxic and Biohazardous Waste (Sharps) is shown in **Appendix A**.

6.2.2 Washing, Stormwater Pollution Prevention & Vermin Prevention

An appropriately graded and drained wash down area would be normally be provided for non-medical waste bins. Non-medical waste bins are to be washed regularly by the waste contractor. Alternatively, a bin washing company can be engaged to perform this service. Medical waste bins are to be cleaned by a suitably qualified contractor on a regular basis.

The waste contractor is required to clean-up any spills that might occur when collecting bins.

Bins shall be kept closed when not in use to prevent vermin.

6.2.3 Noise Management

Waste collection by private contractors shall be as per Council's local laws and EPA guidelines.

Waste collection for general and recycling bins shall occur Tuesday-Friday 8am-6pm.

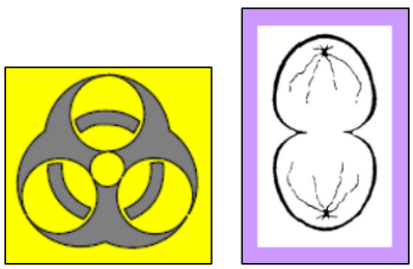
Medical waste collection shall occur on Saturdays 12pm-1pm.

6.3 SIGNAGE

Non-medical bins will be clearly marked and signed with standard signage approved. Examples of typical signage recommended by Sustainability Victoria are illustrated in Error! Reference source not found..

FIGURE 3: NON-MEDICAL WASTE SIGNAGE

Medical bins shall be clearly marked and signed in accordance with EPA's *Clinical and Related Waste – Operational Guidance* as illustrated in **Figure 4.**



Clinical waste Cytotoxic waste

FIGURE 4: MEDICAL WASTE SIGNAGE

Biohazardous Waste sharp bin shall be clearly marked and signed with standard signage approved. A typical example is illustrated in

.

FIGURE 5: BIOHAZARDOUS WASTE SHARP SIGNAGE

6.4 COMMUNICATIONS STRATEGY

It is recommended that the medical centre educates all medical centre employees, on all bin locations, as well as providing information around the medical centre relating to what waste should be placed in each bin.

All tenants will be provided with a copy of the approved WMP as part of their site induction.

Staff will be allocated to place general and recycling bins at the kerbside designated place in Kennett Street for collection and to return bins to the storage area.

7 WASTE COLLECTION ARRANGEMENTS

7.1 NON-MEDICAL WASTE

Bins will be collected on a weekly basis for general waste and fortnightly basis for recycling by the engaged private waste contractor.

A Local Contextual Analysis Plan for the waste collection arrangements for non-medical waste is shown in **Figure 5**.

FIGURE 6: LOCAL CONTEXTUAL ANALYSIS PLAN

A private waste collector is required as the medical centre is already engaging a private contractor to collect medical waste, and private collection will allow for general and recycle bins be collected from the kerbside on alternate days to the Council kerbside collections days on Kennett Street.

The engaged private waste contractor must clearly mark bins with the details of the collection company to avoid confusion with Council services.

Private collection will occur on an alternate day to the Council kerbside collection on Kennett Street, which is on Monday's. On collection days medical staff members will take general and recycling waste from the bin storage area and place the bins on the western kerb of Kennett Street for collection.

An assessment of the OH&S risk to staff has been undertaken. No frequent or likely probability of occurrence risks were identified. The only occasional risk identified was the risk of a trip or fall while wheeling a waste bin and the severity was rated as minor. This risk will be managed by staff being made aware of the path to follow between the bin storage area and the bin collection point using the public footpath and being directed to take due care.

On collection days, non-medical waste trucks should access Kennett Street via turning left from High Street Road, to travel north along Kennett Street. A 6.4m or 8.8m waste vehicle would collect bins from the kerb. The waste vehicle would travel north along Kennett Street to exit the location.

Waste collection will only occur from 8am to 6pm on Monday-Friday as during these times no parking is not permitted on the western side of Kennett Street, allowing the waste truck to utilise the vacant kerbside spaces for collection.

Once emptied, medical staff members would then return the bins back to the bin storage area on the same day.

7.2 MEDICAL WASTE

A permit is required for vehicles used to transport prescribed (clinical and related) waste. The permit specifies particular conditions that must be met. A list of EPA Victoria permitted transporters is available at www.epa.vic.gov.au/PIWdb.

The engaged medical waste contractor must clearly mark bins with the details of the collection company to avoid confusion with council services.

Collection for biohazardous medical waste would be conducted once a week by a permitted transporter. Waste collection would occur outside of the normal operating hours of the centre to ensure that car parking spaces required for truck turning would be vacant.

Medical waste collection should occur on Saturdays 12pm-1pm to utilise the vacant kerbside parking spaces, and outside of peak operating periods of the medical centre.

On collection days the waste vehicle will access Kennett Street via Closter Avenue. A waste vehicle up to 6.4m long (likely a smaller van or service vehicle) would enter the basement and it is recommended to utilise vacant spaces 1 or 2 as shown in the Swept Paths in **Appendix B**. The transporter would then collect the relevant bins from the allocated bin storage area and transfer them to the waste collection vehicle. The bins would then be returned to their secure storage location. The waste vehicle would then turn around within the site and exit in a forward direction.

A similar process would be conducted for the collection of sharps and cytotoxic waste, on an as-needed basis as determined by the Practice Manager.

8 COUNCIL INFORMATION

City of Monash Council - Ph: (03) 9518 3555

APPENDIX

DEVELOPMENT PLAN

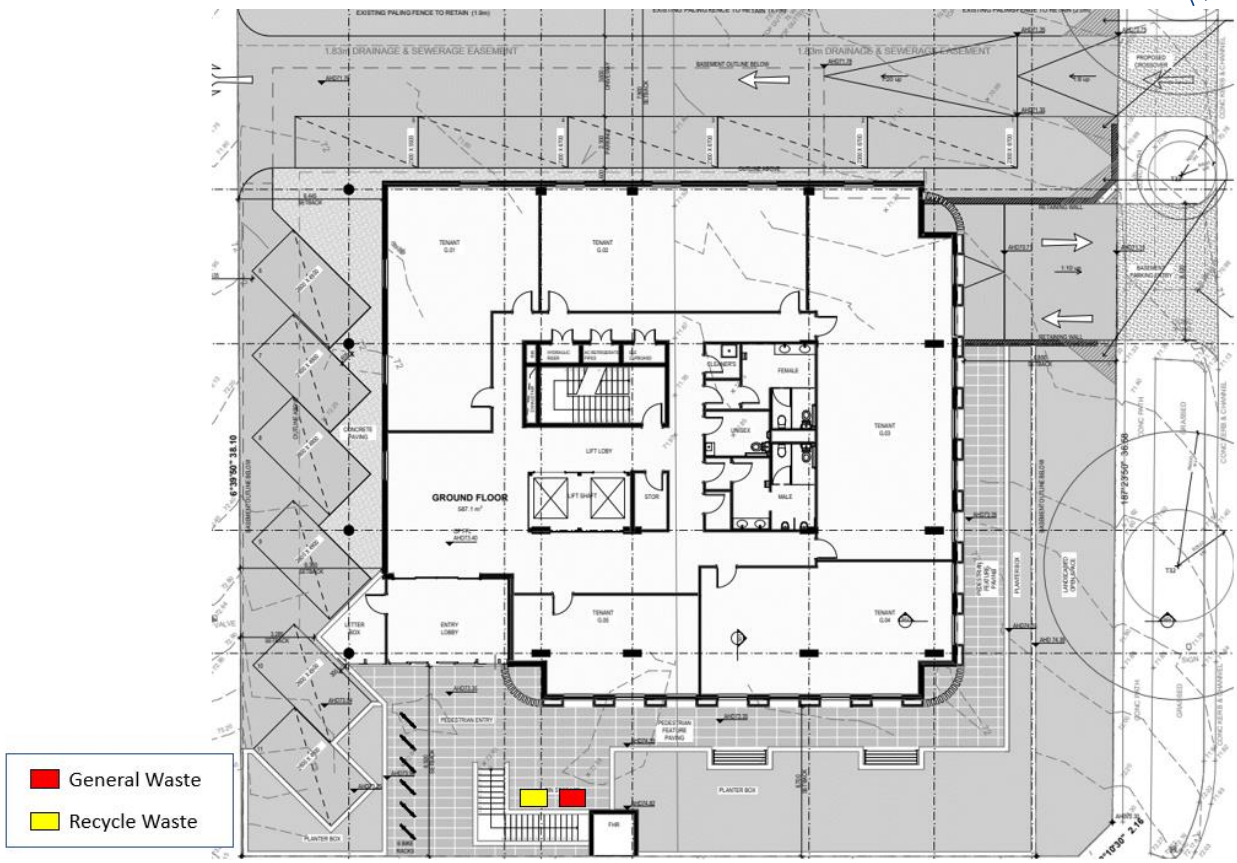


FIGURE A1: BIN STORAGE PLAN: GENERAL WASTE

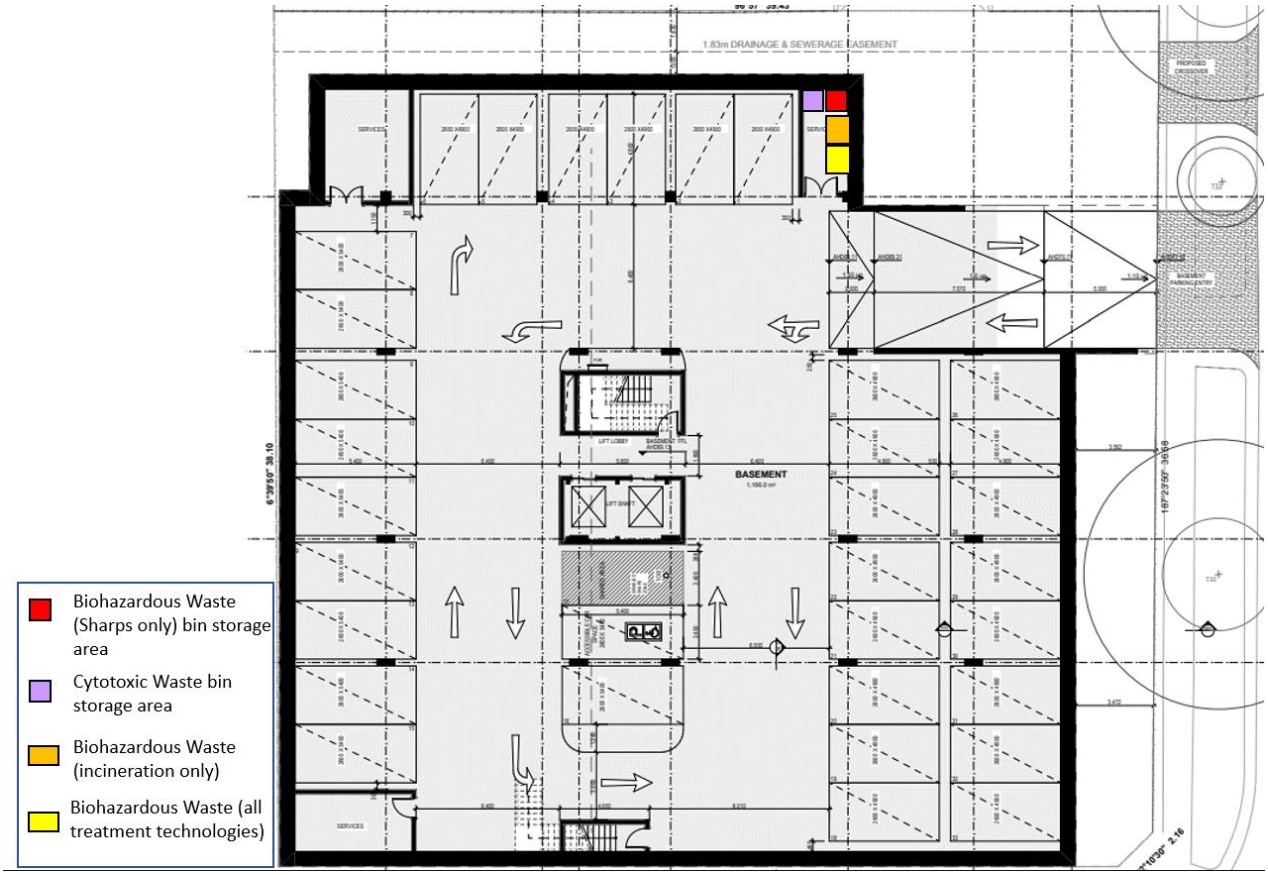
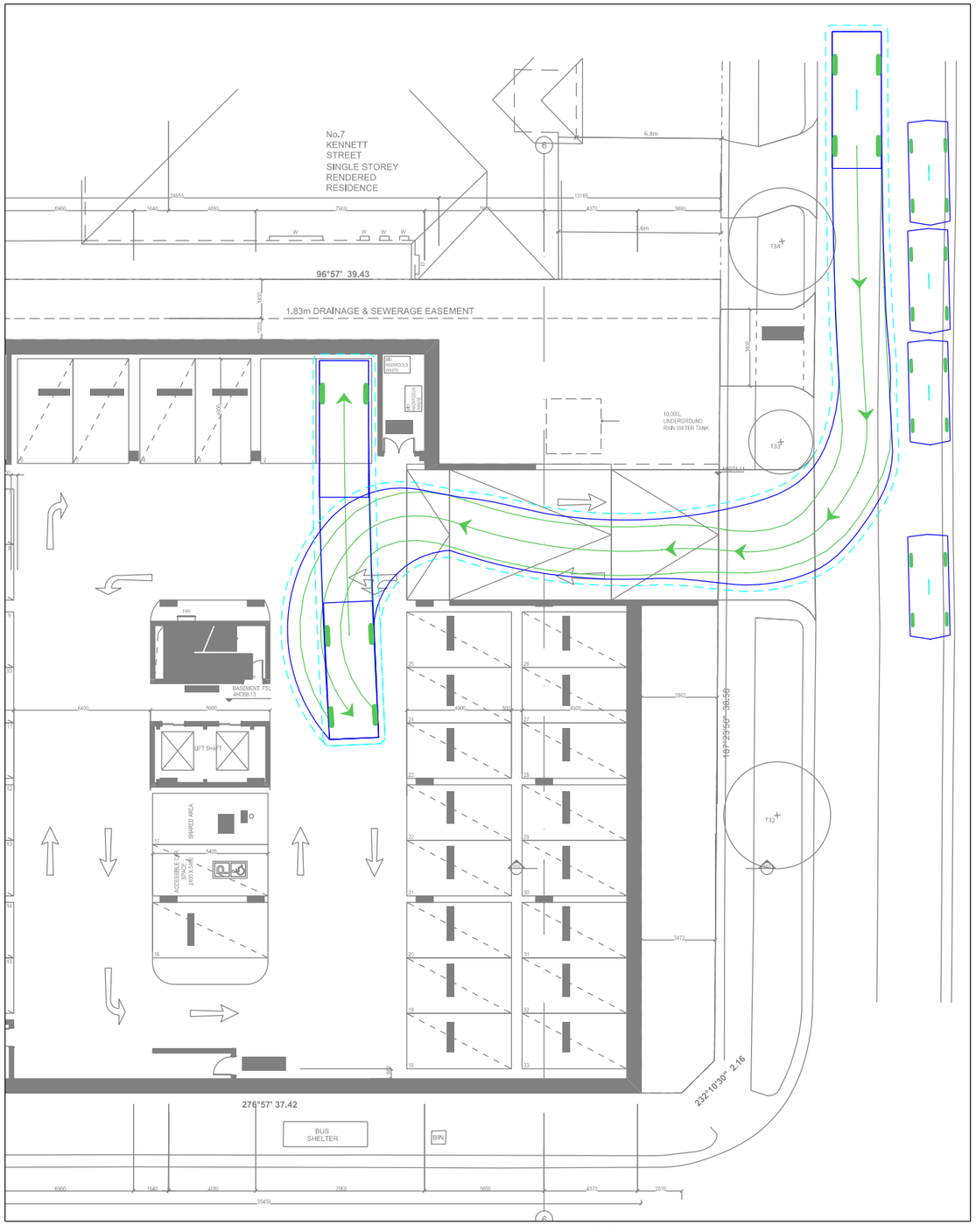
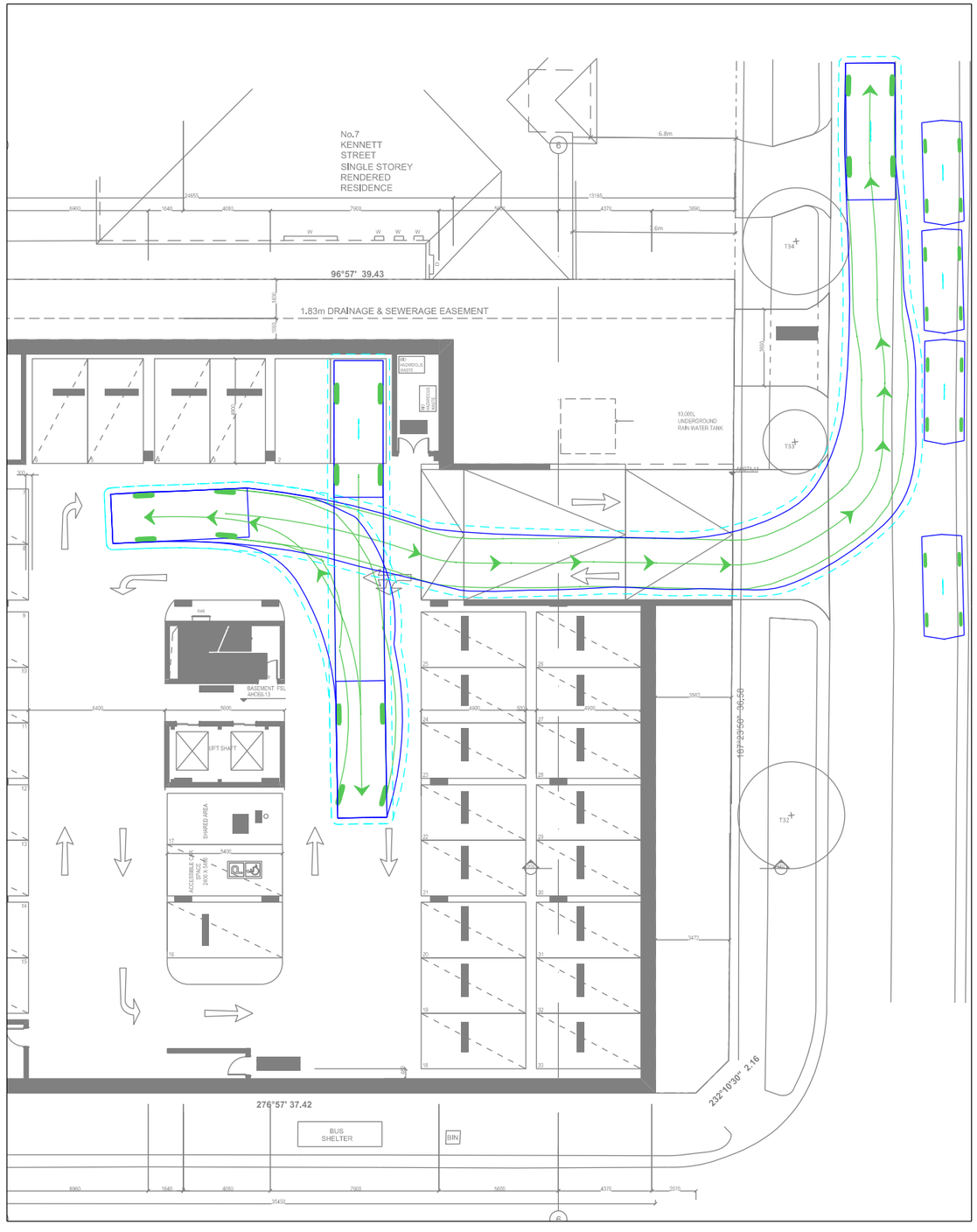


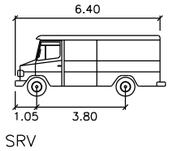
FIGURE A1: BIN STORAGE PLAN: BIOHAZARDOUS WASTE

APPENDIX B

SWEPT PATH ANALYSIS







SRV

	meters
Width	: 2.30
Track	: 2.30
Lock to Lock Time	: 6.0
Steering Angle	: 38.0

NOT FOR CONSTRUCTION

6.4m SRV
ENTRY/EXIT

31-33 High Street Road, Ashwood
1:250 @ A3 18/01/23
DWG NO: 23416001

KEY

- CENTRE LINE OF FRONT WHEELS
- WHEEL PATH
- VEHICLE BODY
- VEHICLE CLEARANCE LINE (300mm FROM VEHICLE BODY)

• Traffic Planning • Transport Planning
• Traffic Engineering • Road Safety
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