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BEFORE THE WASHINGTON UTILITIES  
AND TRANSPORTATION COMMISSION

In the Matter of the Application of:

WASTE MANAGEMENT OF  
WASHINGTON, INC. D/B/A WM  
HEALTHCARE SOLUTIONS OF  
WASHINGTON

Docket No. TG-110553

DECLARATION OF JEFF NORTON  
REGARDING WASTE  
MANAGEMENT'S FITNESS

For an Extension of Certificate G-237 for a  
Certificate of Public Convenience and Necessity  
to Operate Motor Vehicles in Furnishing Solid  
Waste Collection Service

I, Jeff Norton, declare as follows:

1. I am an Account Development Manager for WM Healthcare Solutions, Inc. and I  
make this declaration on personal knowledge.

2. I graduated from Central Washington University with a Bachelors Degree in  
Administrative Office Management in 1995. I worked as an Account Executive and Sales  
Solution Executive for BFI Medical Waste Systems starting in 1996 and then for Stericycle, Inc.,  
after Stericycle acquired BFI, from 1998 until I resigned at the end of 2008. In January of 2009,  
I began working as an Account Executive for Sterilmed, a medical device reprocessing and  
repair company. I left Sterilmed in July 2010 and began working for WM Healthcare Solutions  
as a Business Development Manager. Throughout the past 16 years (since starting with BFI

1 Medical Waste), I have generally covered the Pacific Northwest (Washington, Oregon, and  
2 Idaho) and Western Canada. I have been responsible for customer development, product  
3 development, training, consulting, sales and sales management for multiple types of healthcare  
4 wastes generated by healthcare facilities and/or medical devices used by the healthcare  
5 community.

6 3. My current role is to help develop Waste Management, Inc.'s healthcare waste  
7 business in the Pacific Northwest and Northern California including the business of Waste  
8 Management of Washington, Inc. ("Waste Management"). I currently provide sales, consulting  
9 for all waste streams and recyclables, and overall customer development of waste generators for  
10 my region.

11 4. Waste Management began providing regulated biomedical waste ("RMW")  
12 services to Washington customers in 2011 after its biomedical waste tariff took effect. RMW  
13 refers to waste saturated with enough blood or other potentially infectious materials that it could  
14 contaminate the environment or people if the container breaks and the contents are released. It  
15 includes syringes, needles, blades, scalpels, lancets, broken glass, lab waste, human surgery  
16 specimens, contaminated animals, blood or other bodily fluids, trace chemotherapy waste, and  
17 any other contaminated objects. Waste Management currently provides collection of RMW  
18 within its Certificate No. G-237 territory in Washington State. Waste Management provides  
19 multiple-sized containers for, and local processing of, RMW. Attached hereto as Exhibit 1 is a  
20 true and correct copy of Waste Management's Medical Waste Acceptance Protocol.

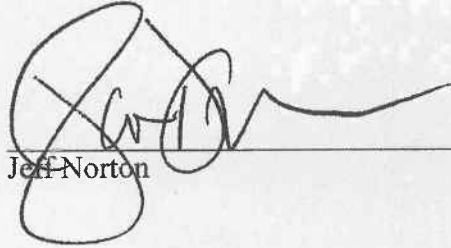
21 5. Waste Management presently provides RMW services to 220 customers  
22 throughout its Certificate No. G-237 territory. Waste Management's customers include  
23 individual hospitals, hospital chains, clinics, laboratories, dentists, veterinarians, and other  
24 generators of RMW. Four of Waste Management's RMW customers have operations both inside  
25 and outside the Certificate No. G-237 territory. Five of Waste Management's RMW customers  
26 have operations at multiple facilities.

1           6.       Waste Management also provides non-regulated services to its Washington RMW  
2 customers, including recycling services for multiple commodities (including plastic, paper, glass,  
3 aluminum, steel, and cardboard), pharmaceutical waste services (formulary analysis for all of a  
4 facility's pharmaceuticals to determine the specific chemical components of each pharmaceutical  
5 and categorize the waste), containerization, customer training, labeling, auditing, and disposal),  
6 hazardous waste disposal (waste profiling and disposal through a third-party), and organics  
7 services (managing and collecting food waste generated at a facility).

8           7.       Waste Management is conducting a pilot recycling program with one Washington  
9 customer. I was responsible for working with the customer to set up and monitor this pilot  
10 project. Through the Becton Dickinson ecoFinity program, Waste Management collects  
11 uniquely marked, reusable, lined tubs filled with sharps containers. Once these tubs are received  
12 at Waste Management's Seattle processing plant, the tubs are loaded onto trailers and transported  
13 to WM Healthcare Solution's Vernon, California facility. There, the tubs are processed in a Red  
14 Bag Solutions ("RBS") system designed to safely, efficiently, and effectively sterilize and grind  
15 medical waste. By exposing infectious medical waste to superheated water and steam (272°F)  
16 and simultaneously employing a proprietary cutting system, the RBS renders infectious medical  
17 waste non-infectious, non-hazardous, and non-recognizable. Once processed through the RBS,  
18 the non-infectious medical waste is sent to Talco Plastics in Corona, California where the non-  
19 infectious ground sharps are processed and the metals and plastics separated utilizing float/sink  
20 technology. The recovered plastics are pelletized at Talco and sent to Becton Dickinson to be  
21 manufactured into BD Recykleen products. In May and June 2012, recycled sharps and sharps  
22 containers collected by Waste Management yielded between 17% and 28% of the original  
23 product collected from Waste Management's customer. A true and correct copy of a flyer  
24 describing the ecoFinity program is attached hereto as Exhibit 2.

1 I declare under penalty of perjury that the foregoing is true and correct to the best of my  
2 knowledge and belief.

3 DATED this 28<sup>th</sup> day of September, 2012, at Las Vegas, Nevada.

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Jeff Norton



**CERTIFICATE OF SERVICE**

I hereby certify that I have this day served this document upon all parties of record in this proceeding, by the method indicated below, pursuant to WAC 480-07-150.

Washington Utilities and Transportation Commission 1300 S. Evergreen Park Dr. SW PO Box 47250 Olympia, WA 98504-7250 360-664-1160 records@utc.wa.gov	<input type="checkbox"/> Via Legal Messenger <input type="checkbox"/> Via Facsimile <input checked="" type="checkbox"/> Via Federal Express <input checked="" type="checkbox"/> Via Email
Gregory J. Kopta Administrative Law Judge Washington Utilities and Transportation Commission gkopta@utc.wa.gov	<input type="checkbox"/> Via Legal Messenger <input type="checkbox"/> Via Facsimile <input type="checkbox"/> Via U.S. Mail <input checked="" type="checkbox"/> Via Email
Fronda Woods Attorney General's Office of Washington PO Box 40128 Olympia, WA 98504 (360) 664-1225 fwoods@utc.wa.gov bdemarco@utc.wa.gov	<input type="checkbox"/> Via Legal Messenger <input type="checkbox"/> Via Facsimile <input type="checkbox"/> Via U.S. Mail <input checked="" type="checkbox"/> Via Email
Stephen B. Johnson Jared Van Kirk Garvey Schubert Barer 1191 Second Avenue, Suite 1800 Seattle, WA 98101 (206) 464-3939 sjohnson@gsblaw.com jvankirk@gsblaw.com voben@gsblaw.com dbarrientes@gsblaw.com <i>Attorneys for Stericycle of Washington, Inc.</i>	<input type="checkbox"/> Via Legal Messenger <input type="checkbox"/> Via Facsimile <input type="checkbox"/> Via U.S. Mail <input checked="" type="checkbox"/> Via Email
James K. Sells 3110 Judson Street Gig Harbor, WA 98335 (360) 981-0168 jamesells@comcast.net cheryls@rsulaw.com <i>Attorney for Protestant WRRRA, Rubatino, Consolidated,                  Murrey's, and Pullman</i>	<input type="checkbox"/> Via Legal Messenger <input type="checkbox"/> Via Facsimile <input type="checkbox"/> Via U.S. Mail <input checked="" type="checkbox"/> Via Email

DATED at Seattle, Washington, this 1<sup>st</sup> day of October, 2012.

  
 Lisa Tardiff

# Exhibit 1



# Medical Waste Acceptance Protocol

Pacific North West / British Columbia Market Area

**Medical Waste Acceptance Protocol  
(MWAP)**

WM HEALTHCARE SOLUTIONS accepts those wastes that are generated in the diagnosis, treatment, or immunization of humans or animals or related research, in the production/testing of biologicals (vaccines), and in the preparation and administration of chemotherapy agents. Acceptance practices are subject to those wastes defined by federal, state, and local laws as medical (Biohazardous, biomedical, and infectious) waste.

1) **Acceptable Wastes** at WM HEALTHCARE SOLUTIONS

- a) Medical and related byproducts associated with health care, research and development companies.
- b) Biohazardous Waste, Including Pathological Waste:
- c) Laboratory waste including:
  - i. Human or animal cultures
  - ii. Culture/stocks of infectious agents
  - iii. Bacteria, viruses, spores, vaccines and related waste generated in the production thereof Microbiologic specimens and related waste
- d) Surgical tissues/tissues, contaminated animal parts, tissues, carcasses, or body fluids (pathological waste exclusive of preservative agents)
- e) Fluid blood/blood products, containers/equipment and articles contaminated with blood/blood products.
- f) Medical waste contaminated with excretions, exudates, secretions, body fluids including, but not limited to, isolation waste.
- g) Sharps Waste – including but not limited to:
  - Needles, syringes, blades, needles with attached tubing disposable surgical instruments.
  - Medical/laboratory glassware including slides, pipettes, blood tubes, blood vials, contaminated broken glass.
- h) Upon approval of WM HEALTHCARE SOLUTIONS, other medical waste as required by the infection control staff, a physician, a veterinarian, or local health officer to be isolated and handled as regulated medical waste.



**2) Pharmaceutical Waste (not hazardous)**

- a) Pharmaceutical waste means a prescription or over the counter human or veterinary drug, including but not limited to a drug as defined in Section 109925 or the Federal Food, Drug and Cosmetic Act as amended, (21 U.S.C.A. Sec. 321(g)(1)).

**3) Trace Chemotherapy Waste (Antineoplastic / Cytotoxic Drugs):**

- a) Such as IV tubing and bags/bottles which are being discarded and are considered incidental to preparation and administration of the drugs. Intravenous tubing, bags, bottles vials and syringes used in chemotherapy preparation and administration must be “empty” containing only residual amounts of antineoplastic drugs. It is recommended that each client contact WM HEALTHCARE SOLUTIONS, for guidance on the proper management of these items defined as “Empty” or “Trace”. State or local regulatory agencies also provide direction for hazardous waste compliance regulations.

**4) Medical waste contaminated with low-level Radioactive Waste**

- a) Under no circumstances will WM HEALTHCARE SOLUTIONS accept any medical waste contaminated with low-level radioactive waste. The facility will maintain monitoring equipment to ensure compliance. Any container reflecting a level above three times background will be rejected. It is recommended that each client contact WM HEALTHCARE SOLUTIONS for guidance on the proper management of these items.

**5) Segregation and Packaging of Waste:**

- a) Biohazardous Waste:
  - i) Waste material must be segregated at the point of origin and placed in at least one red biohazard bag, which meets the requirements of MWMA CHSC section 117630. Bags must be tied or otherwise secured to prevent leakage or expulsion of contents. Prior to use, bags must be labeled with, generators name, address and phone number.
  - ii) Sharp Waste – Needles, blades, syringes, broken medical glassware
    - (1) These wastes must be segregated at the point of use and placed in rigid, puncture-resistant containers which when sealed are leak resistant and cannot be easily opened.

Prior to use, sharps containers must be labeled with, generators name, address and phone number.

- b) Body fluids, suctioned fluids and other non-chemical fluids
  - i) Any volume of fluids which are not absorbed within other waste materials such as sponges or dressings must be within leak-resistant, break resistant containers that are tightly lidded to prevent leakage.
  - ii) The discharge of liquid and semi-liquid wastes other than hazardous waste, laboratory waste, and microbiological specimens to a public sewage system is acceptable under the California Medical Waste Management Act, if performed in a manner which does not pose an occupational hazard per Cal/OSHA Standards and is approved by the local sewer entity, when applicable.

**6) Containment, Labeling, and Marking:**

a) Biohazardous and Sharps Waste

Medical waste must be placed by the client in to properly lidded and secured containers meeting the requirements of Section 118280 of the MWMA. Only containers provided by WM HEALTHCARE SOLUTIONS are approved for transportation. Transport containers for these wastes are red or gray in color. Biohazardous waste/sharps wastes are acceptable for steam autoclave processing, incineration, or CDPH approved alternative treatment.

b) Other Medical Wastes

- i) **“Trace” chemotherapy waste** must be segregated and packaged into appropriate containers, separated from other Biohazardous waste and sharps waste. Refer to WM HEALTHCARE SOLUTIONS packaging guide for specific requirements. Transport containers for these wastes are yellow in color labeled, Chemotherapy waste or Chemo, “For incineration only”.
- ii) **Pathological waste** must be segregated and packaged into appropriate containers, separated from other Biohazardous waste and sharps waste. Refer to WM HEALTHCARE SOLUTIONS packaging guide for specific requirements. Transport containers for these wastes are white or red (with special labeling) in color labeled, Pathology waste or Path, “For incineration only”.

- iii) **Pharmaceutical waste** must be segregated and packaged into appropriate containers, separated from other Biohazardous waste and sharps waste. Refer to WM HEALTHCARE SOLUTIONS packaging guide for specific requirements. Transport containers for these wastes are typically blue in color and/or labeled “Pharm for incineration only”.
- iv) **Animal waste** must be segregated and packaged into appropriate containers, separated from other Biohazardous waste and sharps waste. Refer to WM HEALTHCARE SOLUTIONS packaging guide for specific requirements. Transport containers for these wastes are white or red (with special labeling) in color labeled, Pathology waste or Path, “For incineration only”.

In order to insure that safe handling and proper treatment and appropriate clean up techniques are followed in the event of a spill, WM HEALTHCARE SOLUTIONS requires that all Other Medical Waste for incineration be segregated from medical waste for autoclaving and labeled as such.

c) Optional Secondary Containers

- i) Optional containers such as disposable cartons, fiber drums, sharps containers or reusable plastic tubs must be approved by WM HEALTHCARE SOLUTIONS prior to packaging these materials. It is the clients’ responsibility to assure that all containers and containment systems meet state and local regulations along with this MWAP.

# Exhibit 2

# BD ecoFinity™

## Life Cycle Solution

Powered by an alliance with Waste Management®



## Now single-use can be both safe and sustainable

Every year, US hospitals use billions of BD syringes, catheters and other single-use medical devices to treat patients safely. Until now, there has not been an environmentally sustainable way to manage the disposal of these devices.

The BD ecoFinity Life Cycle Solution can help hospitals achieve their sustainability goals by safely and economically recycling 70% or more of their sharps waste stream.\*



\*Data on file at BD.

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# BD ecoFinity™

## Life Cycle Solution

Powered by an alliance with Waste Management®

**Waste diverted. No compromise.**

How **BD ecoFinity™** Life Cycle Solution works:



To learn more about how this healthcare sustainability solution can benefit your organization, call 1.866.803.7554 or visit [www.bd.com/ecoFinity](http://www.bd.com/ecoFinity).



Helping all people  
live healthy lives

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