



COMPLIANCE EVALUATION INSPECTION REPORT

FACILITY INFORMATION:

Facility Name: **VIDANT CHOWAN HOSPITAL**

EPA ID Number: **NCD986188175**

Type of Facility: **Conditionally Exempt Small Quantity Generator**

Facility Location/Mailing Address: **211 Virginia Road, Edenton NC 27932
Chowan County**

Telephone Number: **252-482-6760**

Property Owner: **Chowan County**

Property Owner Address: **PO Box 1030 Edenton, NC 27932**

Legal Owner of Business: **East Carolina Health-Chowan, Inc.**

FACILITY CONTACT:

Phone Number: **Amanda Hoggard, EVS Manager
252-339-7255 (mobile)**

Email Address: **Amanda.hoggard@vidanthealth.com**

PARTICIPANTS:

Representing Vidant Chowan Hospital: **Amanda Hoggard, Mary Parks**

Representing NCDENR: **William Hunneke**

DATE OF SITE VISIT: December 2, 2014 onsite: 1000 hrs. offsite: 1320 hrs.

PURPOSE OF SITE VISIT:

Compliance Evaluation Inspection to determine compliance with regulations described at 40 CFR 261, 262, 265, 268, 273 and 279. According to the files, this facility has never undergone a comprehensive hazardous waste inspection for compliance with the aforementioned rules. A Compliance Assistance Evaluation was performed for the facility on October 8, 2013.

FACILITY DESCRIPTION:

Vidant Chowan Hospital was built in 1969 and opened at the 17.7 acre site in 1970. Currently, the hospital building is approximately 102,000 square feet in size with some renovations having been accomplished in the last year. The hospital is licensed for 25 beds. Three hundred and fifty individuals are employed at the hospital. East Carolina Health-Chowan, Inc. operates the facility under a long-term lease with the County. ECH-Chowan has an option to purchase at the end of the lease. Water and sewer service are provided to the facility by the Town of Edenton/Chowan County. There is one non-potable water well onsite. The distance to the nearest offsite well is unknown and the distance to the nearest residence is less than one eighth of a mile.

WASTE STREAMS INCLUDE:

Hazardous waste streams and waste codes generated by the hospital include:

- Waste medicine, liquid, (flammable, toxic) D001; D005; D006; D007; D009; D016
- Waste Aerosols D001
- Waste Nicotine P075
- Waste Warfarin/Coumadin P001

The facility is segregating and accounting for P-listed waste it generates through detailed formulary dispensing records, inventory control, and downstream hazardous waste generation accounting.

Other waste streams generated at the hospital include: used oil; used lamps; used batteries; electronic waste; and scrap metal all of which are recycled. Unused medications are returned for reverse distribution. They do not constitute a waste as they are returned for credit.

AREAS OF REVIEW AND INSPECTION:

Emergency Preparedness/Arrangements with Local Authorities:

The facility is operated to minimize the possibility of a fire or any unplanned sudden or non-sudden release of hazardous waste that threatens health or environment. The Edenton Fire Department visits annually and the facility maintains its own Police/Security Department on site. The Hospital conducts training for approximately thirteen individuals on hazardous and pharmaceutical waste awareness and safe handling practices.

Manifests / LDR:

Manifests were reviewed from 9/24/2013 through 10/14/2014 (the last shipment). Mary Parks signs the manifests. The hospital appears to have a good handle on its P-listed waste generation rates and is operating as a conditionally exempt small quantity generator of hazardous waste (CESQG).

Transporters:

Clean Harbors Environmental Services MAD039322250

TSD's:

Clean Harbors – El Dorado LLC ARD069748192

Inspection Records (storage):

Inspections are conducted weekly on all satellite accumulation containers. Documented inspections were reviewed from October 2013 through the present. A form is used to document the inspections but there are some items that are inspected that are not on the inspection form. According to facility personnel completing the inspections, the inspectors review the type of waste going into the container (to ensure the proper waste is going into the proper container), container closure, and labeling. While facility personnel visually inspect the hospital's hazardous waste storage areas daily, it is recommended that the weekly inspection form document inspections of the two hazardous waste storage areas (FBC Janitorial Closet and the Corral) by adding them to the weekly inspection log. Hazardous waste storage containers should be inspected for leaking containers and to ensure containers are in good condition, and that containers are properly closed, labeled and dated.

Accumulation Areas:

The hospital collects hazardous waste primarily in two types of containers, 8-gallon black plastic pails with snap on trap door type lids and smaller recycled 2-quart "cabbie wipe" containers also with snap on lids. Cabbie wipe containers are used exclusively to collect P-listed waste and the 8-gallon containers are designated for all other hazardous waste streams with the exception of trace chemotherapy wastes which are collected in yellow 8-gallon containers. The facility does not use arsenic trioxide in chemotherapy formulations as a rule. At each location listed below, the P-listed accumulation containers were opened

and their contents inspected. Without exception, all P-listed waste containers observed on the day of the inspection had the proper waste inside (primarily nicotine and Warfarin derived wastes), were free of extraneous (non-P-listed) wastes, and contained minimal amounts of P-listed waste. On the day of the inspection, the following hazardous waste satellite accumulation areas (SAAs) were visited:

Emergency Department

One 8-gallon black plastic hazardous waste container, one 2-quart "P-listed only" cabbie wipe container and one small container of spent alkaline batteries were observed. All containers were observed to be properly closed and labeled.

2063 Medication Room – Hall B

One 8-gallon black plastic hazardous waste container and one 2-quart "P-listed only" cabbie wipe container was observed. Both containers were observed to be properly closed and labeled.

Family Birthing Center

One 8-gallon black plastic hazardous waste container, observed to be properly closed and labeled.

Intensive Care Unit (ICU)

One 8-gallon black plastic hazardous waste container, and one 2-quart "P-listed only" container observed to be properly closed and labeled.

Pharmacy- Chemo Room

One 8-gallon black plastic hazardous waste container and one 8-gallon yellow plastic hazardous waste container (bulk and trace chemo waste respectively). Both containers were observed to be properly closed and labeled.

Radiology 2

One 8-gallon black plastic hazardous waste container, observed to be properly closed and labeled.

Radiology C/T

One 8-gallon black plastic hazardous waste container, observed to be properly closed and labeled.

Laboratory

No hazardous waste is stored in the lab. Two hematology machines drain down the sink. Gram staining is done over the sink and waste Wright stain likewise is exhausted down the sink. The facility must submit to the local Publically Owned Treatment Works (POTW) a list of all wastes that are discharged to the city sewer and request a letter of approval for any waste discharged. This was a recommendation in the previously issued compliance assistance evaluation report that ought to have rather been expressed as an action item. Ms. Hoggard indicated that the letter was being drafted.

Chemo Suite

One 8-gallon black plastic hazardous waste container, locked inside a cabinet was not inspected because the key to the cabinet was not immediately available.

Outpatient Chemo Mix Room

One 8-gallon black plastic hazardous waste container, observed to be properly closed and labeled.

Med/Surge Unit – Med Room

One 8-gallon black plastic hazardous waste container was observed properly closed and labeled.

Pharmacy

One 8-gallon black plastic hazardous waste container, one 1-gallon jug for used aerosol containers and one 2-quart "P-listed only" container were observed to be properly closed and labeled. The hospital ceased using the Guaranteed Returns Company as its reverse distribution pharmaceutical contractor and is presently pursuing a reverse distribution arrangement with EXP Pharmaceutical Services Corporation.

Facilities Services

Used lamps and used batteries are accumulated in this area prior to shipment. Used oil is generated in small quantities from the servicing of small engines and generators and disposed of immediately. Large generators and facility vehicles are on service contracts and used oil generated from their maintenance is removed by the contractors. The area was observed to be equipped with a fire extinguisher, spill kit and mercury spill kit. On the day of the inspection, used lamps, used nickel cadmium and used lithium batteries were observed to be in separate containers which were properly closed labeled and dated. The facility must ensure that universal waste lamps are stored in containers that are always kept closed.

Storage Areas:

The hospital has two hazardous waste storage areas, one inside referred to as "The Janitor's Closet" where waste is consolidated from the SAAs all over the hospital prior to being moved outside to the other hazardous waste storage area referred to as "The Coral" where it is staged for shipment. The outside "Corral" area is also used as an overflow hazardous waste storage area if need be.

Janitor's Closet

Located in the Family Birthing Center (FBC), the indoor hazardous waste storage area was observed to be holding no hazardous waste containers on the day of the inspection due to the fact that they had been moved to the coral on the previous day. Recommend that a fire extinguisher and spill kit be located in the immediate vicinity of this area.

The Coral

Located away from the hospital building, The Coral is a secure, gated concrete pad containing a 35-cubic yard compactor for recycled material and a 6-cubic yard compactor for solid waste. Hazardous waste is stored and staged here prior to shipment. The area is equipped with a fire extinguisher; spill kit and eye wash station. Communication in the area is provided by mobile phone or two-way radio. On the day of the evaluation, one partially full drum hazardous waste was observed in the Coral properly closed, labeled and dated.

External Condition of Facility:

The facility appeared well managed, neat and orderly. No adverse conditions were observed.

WASTE MINIMIZATION:

The facility has a robust waste minimization/recycling strategy, currently recycling approximately 22% of its solid waste stream. Batteries are recycled by Call 2 Recycle, used lamps are recycled by Veolia, electronic waste is recycled by Metech Recycling, and scrap metal is recycled by Chowan Metal recycling.

ACTION ITEMS:

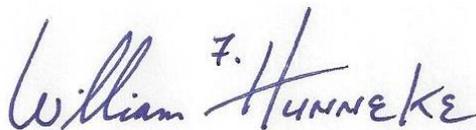
The facility must submit to the local Publically Owned Treatment Works (POTW) a list of all wastes that are discharged to the city sewer and request a letter of approval for any waste discharged.

RECOMENDATIONS:

- Recommended that the weekly hazardous waste inspection form document inspections of the two hazardous waste storage areas (FBC Janitorial Closet and the Corral) by adding them to the weekly inspection log. Hazardous waste storage containers should be inspected for leaking containers and containers in condition, containers properly closed, labeled and dated.
- Recommend a fire extinguisher and Spill kit be located at the Janitor's Closet.

SITE DEFICIENCIES:

No site deficiencies are indicated as the facility is operating at conditionally exempt small quantity generator status. If the facility status increases, the recommended items become regulations.



William Hunneke
Environmental Senior Specialist, NCDENR

December 10, 2014
Date

Copy of report provided to facility contact