

Recycling IQ Kit Assessment Tool

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Please answer the following questions regarding your state of readiness to fight contamination in your recycling stream using the Massachusetts Department of Environmental Protection's Recycling IQ Kit.

GENERAL ASSESSMENT

Before applying for a quality improvement grant and/or deploying the full approach in the Recycling IQ Kit, you must be able to answer "Yes" to all of the following questions:

	YES	NO
1. Is increasing recycling participation and quality a priority for your community?	<input type="checkbox"/>	<input type="checkbox"/>
Why? _____		

2. Do you have buy-in from elected officials and department leadership?	<input type="checkbox"/>	<input type="checkbox"/>
3. Are you ready to launch an intensive, three month, targeted program to decrease contamination?	<input type="checkbox"/>	<input type="checkbox"/>
4. Are you ready to maintain subsequent quality control operating procedures – continuing dialog with your MRF and hauler, spot checking recycling containers, and communicating about the most problematic materials?	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you have staff willing and able to enforce, communicate and reject at the curb or drop-off centers?	<input type="checkbox"/>	<input type="checkbox"/>
6. Are you already working with your MRF on identifying and addressing quality issues?	<input type="checkbox"/>	<input type="checkbox"/>
7. MEASUREMENT		
Are you willing to work with your MRF to measure contamination?	<input type="checkbox"/>	<input type="checkbox"/>
Are you willing to measure other relevant metrics, possibly including set-out rates and tagging rates for curbside programs, or visitation/participation rates for drop-off centers?	<input type="checkbox"/>	<input type="checkbox"/>
8. CURBSIDE PROGRAMS ONLY:		
Do you have political will to enforce and reject carts at the curb?	<input type="checkbox"/>	<input type="checkbox"/>
Is your hauler willing to enforce, communicate and reject at the curb?	<input type="checkbox"/>	<input type="checkbox"/>
9. DROP-OFF PROGRAMS ONLY:		
Do you have political will to enforce and reject for contamination at the site?	<input type="checkbox"/>	<input type="checkbox"/>



Please answer the following questions to the best of your ability. Your responses will inform the type and scale of your approach to fighting contamination.

1. What is your average program contamination rate? *(Talk to your MRF. Please provide a percentage or brief description.)* _____

2. Top prohibitive materials? *(Talk to your MRF; See page 5 of the **MRF SURVEY**.)*

- | | |
|---|---|
| <input type="checkbox"/> Plastic bags | <input type="checkbox"/> Tanglers: hoses, wires, chains, or electronics |
| <input type="checkbox"/> Food or liquid | <input type="checkbox"/> Big Items: wood, plastic, furniture, or metal |
| <input type="checkbox"/> Clothing or linens | <input type="checkbox"/> Other _____ |

3. Does your contract with your hauler include language about material audits, education, and/or enforcement?

YES ☐ NO ☐

If yes, please explain.

4. What are your goals in addressing contamination? **Prioritize these by marking your top goal with “1”, your next most important goal with “2”, third most important with “3”, and least important with “4”.**

- _____ Reduce weight of contaminants as a whole
- _____ Reduce a specific contaminant that is causing the MRF particular issues
- _____ Reduce number of households producing contaminated loads
- _____ Tightly define specific households that do not recycle properly, allowing for very targeted education or action

5. To date, have you taken any actions to address contamination? **Check all that apply.**

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Drivers check carts | <input type="checkbox"/> Education |
| <input type="checkbox"/> Enforcement Officers checking carts | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Tag and fine carts | |

6. How many households do you serve with your recycling program? _____

7. Type of recycling stream

- ☐ Single stream ☐ Dual stream ☐ Source separated



PROGRAM SPECIFICS CONT. (PAGE 3 of 3)

8. Type of recycling program:

☐ Curbside carts ☐ Curbside bins ☐ Curbside bags ☐ Drop-off center

9. **IF CURBSIDE:**

☐ Fully automated collection ☐ Semi-automated collection ☐ Private hauler ☐ Self-haul

of routes _____

Average number of homes on route _____

of heavily contaminated routes? *(Talk to your hauler and MRF.)* _____

10. **IF DROP-OFF:**

☐ Site takes MSW and recycling

☐ Fenced in and able to lock

☐ Always open to the public

☐ Staff on site

☐ Signage on each container

11. Annual residential recycling tonnage? _____

12. Annual MSW tonnage? _____

13. What is your annual outreach and education budget? _____

14. Briefly describe any recycling-related outreach you do annually. _____

15. **WEBSITE:**

When was the last time you updated your website? _____

Do you have the ability to edit the contents of your website? _____

16. How often do you talk to your hauler? _____

17. How often do you talk to your MRF? _____