



POLICY & SOP OF WASTE MANAGEMENT POLICY

A. Purpose & Rational:

The Purpose of this procedure is to ensure that all waste from operational activities is controlled, handled and disposed of in an environmentally acceptable manner to reduce the risk of current and future liabilities, and to present a good hospital image.

B. Policy:

Keeping a clean and safe environment will be an important standard precaution, to decrease incidence of Healthcare Associated Infection (HAI).

C. Responsibilities:

WASTE MANAGEMENT TEAM:

- Consult Microbiologist (or his/ her designee)
- Infection Control Nurse
- Manager Engineering
- Manager Support Services
- Head of all Departments.
- Applies where hazardous waste is generated.

❖ Duties and Responsibilities of Waste Management Team:

- A waste management team shall be responsible for the preparation, monitoring, periodic review, revision or updating if necessary and implementation of the waste management plan and also supervises all the action taken.

❖ Meeting of waste Management Team:

Meeting shall be held six monthly, one third of the members shall constitute the quorum for meeting.

❖ Ditties and responsibilities of the Chairperson.

- Constitute the waste Management Team
- Designate the waste Management Personnel
- Facilitate meetings of the team and ensure implementation of its decisions.
- Supervise implementation, mentoring and review of the waste management plan ensure that it is kept updated.

D. Definition & Terms:

- ❖ Chemical Waste: inches chemicals from diagnostic and experimental work, cleaning process, housekeeping and disinfecting procedures. Mercury waste such as from broken clinical equipment and spillage.
- ❖ Hazardous waste: means waste contaminated by any type of pathogens such as bacteria, viruses, parasites or fungi and also including cultures from microbiological work, waste from surgeries, waste from infected patients and equipments and disposables which have been in contact with such patients.
- ❖ Non-hazardous waste: includes office waste which includes paper, cardboard, packing and foods etc.

- ❖ **Pathological waste:** includes tissues, organs, body parts, blood and body fluids.
- ❖ **Pharmaceutical waste:** includes expired or unused pharmaceutical product, spilled contaminated pharmaceutical products, surplus drugs, vaccines and discarded items used in handling pharmaceuticals such as bottles, boxes gloves, masks, tubes or vials.
- ❖ **Radioactive waste:** includes liquid, solid and gaseous waste contaminated with radionuclide generated from in vitro analysis of body tissue & fluids, in-vivo body organ imaging and investigation and therapeutic procedures.
- ❖ **Hazardous waste:** means infectious waste, pathological waste, sharps, pharmaceuticals waste, chemical waste and radioactive waste.
- ❖ **Sharp:** includes whether infected or not needles, syringes, scalpels, infusion sets, knives, blades, broken glass or any other item that could cut or puncture.
- ❖ **Waste management:** includes waste segregation, waste collection, waste transportation, waste storage and waste minimization and reuse

E. Applicability:

This procedure applies to the hospital operational activities and all personnel, and contractors, involved in the operations.

F. Procedure:

Waste Category/ Segregation:

Hazardous health care waste	Descriptions and examples	Waste Color Coding	Disposal Method
Sharps waste	Used or unused sharps (e.g. hypodermic, intravenous or other needles: auto-disable syringes: syringes with attached needles: infusion sets: scalpels: pipettes: knives: blades: broken glass)	Yellow Box	Steam Sterilization (Recommended Techniques for treatment of infectious waste) Reference: EPA 1986
Highly Hazardous Waste	Waste suspected to contain pathogens and that poses a risk of disease transmission laboratory cultures and microbiological stocks: waste including excreta and other materials that have been in contact with patients infected with highly infectious diseases in isolation wards)	Red	
Infection waste	Infection Waste bandages, gauze, cotton or any other object in contact with body fluid.	Yellow	
Pathological Waste	Human tissues, organs or fluids: body parts: fetuses: unused blood products	Red	
Pharmaceutical Waste	Pharmaceuticals that are expired or no longer needed: items contaminated or containing pharmaceuticals	Yellow	
Radioactive Waste	Waste containing radioactive substance (e. g. unused liquids from radiotherapy or laboratory research: contaminated glassware, packages or absorbent paper: urine and extra from patients treated or tested with unsealed radionuclide's: sealed sources)	Yellow	

Chemical Waste	Waste containing chemical substances (e. g. laboratory reagents: film developer: disinfectants that are expired or no longer needed: solvents: waste with high content of heavy metals, e.g. batteries: broken thermometers blood-pressure gauges)		Land Fill
Non-hazardous or general health-care Waste	Waste that does not pose any particular biological, chemical, radioactive or physical hazard	Green/ Black/ White	Land Fill

- **Procedure for Waste Collection:**

- Ensure internal collection of waste bags and waste containers to their transport to central storage facility of the hospital on daily basis.
- Lease with the supplies department to ensure that an adequate supply of waste bags, containers, protective clothing and collection trolleys available at all time
- Ensure that sanitary staff immediately replaces used bags and containers with the new bags and containers of the same type and also ensure cleaning of the container before a new bag is fitted therein,
- Directly supervise the housekeeping staff to collect and transport the waste.

- **Procedure for Waste Transportation:**

Housekeeping staff and them supervise are responsible for waste transportation.

- A Waste collection trolley shall be free of sharp edges, easy to load, unload and to clean.
- He trolley shall be cleaned regularly.
- The sealed waste bags shall be carefully loaded by hand onto the trolleys to minimize the risk of punctures or tears.
- Red-bagged risk waste and green-bagged own risk waste shall be collected on separate trolleys which shall be marked in the corresponding colors.
- The collection route shall be the most direct one from wards to central storage facility, and all the waste should be transported in lift # 2.
- The transportation of waste is properly documented.

- **Procedure for waste storage:**

- Ensure correct use of the central storage facility and that it is kept secured from unauthorized access.
- prevent unsupervised dumping of waste containers on the hospital premise, even for a short period of time,

- **Procedure for waste Disposal:**

- Depending upon the type and nature of the waste material and the organism in the waste, risk waste will be decontaminated by using thermal method in the waste management plant, and in case of

laboratory waste it should be decontaminate by using autoclave inside the laboratory and then transported in the red bag to the central storage facility to be handed to.....

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