



STANDARD OPERATING PROCEDURE INFECTIOUS AND NON-INFECTIOUS WASTE COLLECTION AT PRIMARY LEVEL

Effective Date: 01/01/2020



1. Purpose

To ensure waste segregation and collection at wards (primary level) according to Hospital Waste Management Rules, 2005 and Hospital Waste Management Plan.

2. Scope

This method will ensure segregation and collection of hospital waste at point of generation which will reduce health risk to health care workers, disposal cost and the costs of treatment.

3. Responsibilities

Sr. No	Action	Lead Role	Support Role
3.1.	Training	Ward Master	MS
3.2.	Leading of staff and Monitoring of Activity	Ward Master	MS
3.3.	Provision of color coded bags, bins and PPE	Ward Master	MS
3.4.	Collection and segregation of waste in color coded bags	Ward sweeper	Ward Master/ shift in-charge
3.5.	Waste collection from secondary point and transportation to final disposal point	Sweeper	Ward Master/ shift in-charge
3.6.	Proper handling of equipment and maintenance	Sweeper	Ward Master/ shift in-charge

4. Policy and Legal Requirements

- 4.1. Gilgit-Baltistan Environmental Protection Act 2014
- 4.2. Hospital Waste Management Rules 2005
- 4.3. Gilgit-Baltistan Hospital Waste Management Rules 2019 (Draft)
- 4.4. National Environmental Policy 2005
- 4.5. National Sanitation Policy 2006
- 4.6. National Environmental Quality Standards (NEQS)

5. General Requirements

- 5.1. Set of waste collection bins (Red, Yellow and Green);
- 5.2. Color coded plastic bags for waste collection (Red , Yellow and Green);
- 5.3. PPE (Gloves, coverall, long shoes, Glasses, Mask, Soap, Helmet);
- 5.4. Waste collection and transportation equipment.



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6. Procedure

Sr. No	Action	Responsibilities	
		Lead Role	Support Role
6.1.	Waste Collection		
6.1.1.	Installation of color coded waste bin in wards according to waste management plan	Ward Master	MS
6.1.2.	Place color coded bags in set of bins according to their color codes	Sweeper	Shift in-charge
6.1.3.	Collect and transport of waste generated at primary level to secondary collection points	Sweeper	Shift in-charge
6.1.4.	Ensure timely transport of waste from secondary collection points to final disposal point	Shift in-charge	Ward Master
6.2.	Protective Measures		
6.2.1.	Ensure provision of PPE (Gloves, Masks, Helmet and Coverall for sanitary staff)	Shift in-charge	Ward Master
6.2.2.	Ensure vaccination of sanitary staff especially Hepatitis A & B	Ward Master	MS
6.2.3.	Ensure personal hygiene practices especially washing hands after handling of waste	Shift in-charge	Ward Master
6.2.4.	Ensure provision of adequate quantity of bags in facility	Ward Master	MS

7. Waste Collection Methods

- 7.1. Bags must be replaced whenever they are quarterly filled;
- 7.2. Always seal the bags before putting them in secondary bins;
- 7.3. Grab bags from top and avoid holding them against body;
- 7.4. Don't pile bags or empty them.



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8. Definitions

<i>Categories of Waste</i>	<i>Description</i>
Risk waste (infectious)	<p><u>Infectious and Pathological Waste</u> Dressings, bandages and cotton contaminated with blood or body fluids, gloves and masks contaminated with blood or body fluids, suction canisters, tissues, organs, fetus, body parts, tubes and containers contaminated with blood or body fluids, microbiological culture/media.</p> <p><u>Sharps</u> Hypodermic needles, intravenous set needles, broken vials and ampoules, scalpels, blades, saws, petri dishes and cover slips, broken pipettes and syringes</p>
Special Waste	<p><u>Chemicals, Pharmaceutical and Cytotoxic Waste</u> Broken thermometers and blood-pressure gauges, spilt medicines, spent disinfectants waste anesthetics gases, fixative, formalin, xylene, toluene, methylene etc.</p>
Non-Risk Waste (General Waste)	<p><u>Non-Hazardous or General Waste</u> Packaging, food scraps, paper, flowers empty saline bottles, non- bloody diapers, non-bloody intravenous tubing and bags, uncontaminated gowns, gloves, masks, hats and shoe covers, plastic containers</p>