Chapter 7

Recommendations
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RECOMMENDATIONS

After an in-depth analysis of the findings the following recommendations are proposed.

1. The Government hospital is not aware of the harmful impact of recycling and selling of the waste. There is a need to improve medical waste handling and disposal at government and even in private hospitals.

2. Periodical biomedical waste education programme encompassing collection, segregation, transportation and disposal of biomedical waste has to be undertaken for all the hospital personnel with special emphasis on nursing and class IV personnel.

3. A sewage treatment plant has to be set-up or some precautionary measures have to be taken to reduce the BOD of sewage at the source before discharging the waste into the sewage system.

4. The incinerator ash of the biomedical waste is stored in big gunny bags. This is against the norms of management and handling of biomedical waste. Hence, proper direction has to be given to the consultants collecting the waste and incinerating it away from the city.

5. Precautionary measures backed with protective gears to be adopted for all the trained biomedical waste handlers.

6. Health awareness programme, preventive health checkup and curative health intervention programme for the hospital staff involved in BMW management to be conducted periodically.
7. Waste management tools like shredder / mutilator to be adopted to prevent the risk and waste volume reduction.

8. Use of PVC products has to be substituted for non PVC products in the hospitals.

9. Non-burn technology has to be followed for the safe disposal of biomedical waste.

10. To save landfill space, to preserve natural resources and to reduce expensive disposal cost of medical wastes, recycling of plastic should be increased.

11. Waste minimization can be achieved by purchasing reusable items made of glass and metal which can be disinfected and reused. Efforts have to be made for minimization of waste.

12. Mercury waste minimization is possible by eliminating mercury containing instruments totally. Substituting solid state electronic sensing devices for mercury based thermometers and blood pressure instruments have to be set-up in the hospitals.

13. Waste reduction should be attempted by reducing the use of disposables and recycling the waste to the extent possible by establishing clear-cut guidelines for a sound product purchase and investment policy.

14. Periodical review or waste audit must be initiated to monitor the efficiency of the waste management programme.

15. For the successful initiatives in hospital waste management a sound legal / regulatory framework has to be used in conjunction with scientific judgement about particular technologies that would be most compatible with prevailing situation in a region so as to make the initiative sustainable in the long run.
16. For the optimal management of hospital waste continuous ongoing training and evaluation processes should be made mandatory.

17. The notification of Biomedical Waste Handling and Management Rules, 1998, by Government of India, is a step in the right direction for making health care settings accountable in their activities. This should be followed by strict and transparent enforcement.

18. Open discussion among technical experts and representatives for evolving strategy and methods for proper disposal of BMW on safe management of hospital waste has to be launched.