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1.0 **OBJECTIVE**

1.1 To establish a documented procedure on disposal of hospital waste.

2.0 SCOPE

2.1 This procedure covers the process involved from waste segregation up to disposal.

3.0 **POLICIES**

- 3.1 It is the policy of the department that all wastes generated by the hospital shall be properly segregated. FMD shall ensure collection by City Government Accredited hauler.
- 3.2 It is the responsibility of the assigned housekeeper to perform proper handling and conveying of all generated waste in color coded plastic bags.
- 3.3 It is the responsibility of all units to segregate all recyclables except patient rooms which will be handled by housekeeping. Recyclables shall be properly tagged and turned over to the recyclables committee.

4.0 RESPONSIBILITIES AND ACCOUNTABILITY

- 4.1 The Housekeeper is responsible for the proper dumping of garbage according to its classification.
- 4.2 The Housekeeper shall strictly implement the proper segregation of waste prior to conveying to storage facilities.
- 4.3 The CFMO and FMO (Civil Works and Hospital Operations) are responsible for its proper implementation and proper monitoring of this procedure.
- 4.4 The Housekeeper is responsible for Cleaning and Disinfecting of storage facilities.

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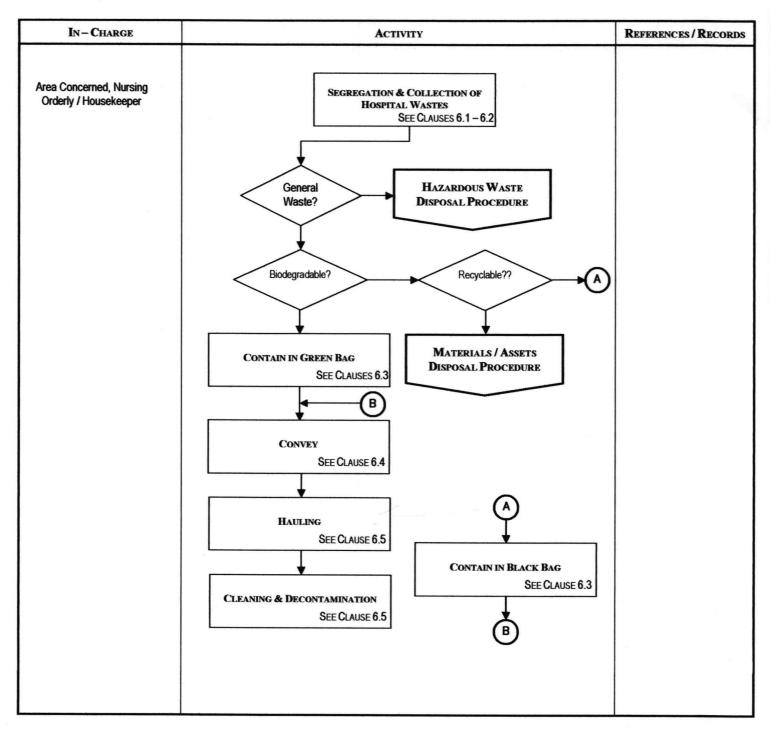
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5.0 PROCEDURE



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6.0 NOTES

- 6.1 The area concerned segregates generated waste using color coded trash bins:
 - 6.1.1 Black for general waste
 - 6.1.2 Green for biodegradable
 - 6.1.3 Yellow for hazardous
- 6.2 The assigned Nursing Orderly in special areas and Housekeeper classify and collect segregated hospital waste.
- Non-biodegradable waste shall be contained in black garbage bags while the biodegradable waste shall be contained in green garbage bags.
- 6.4 The Nursing Orderly / Housekeeper conveys the classified waste using cart to the storage facilities using Elevator No. 3 for Norberto Ty Medical Tower (NTMT), No. 5 for Main Building, and No. 7 for Doña Salustiana Medical Tower (DSMT).
- 6.5 The local city garbage collector hauls all general waste at storage facilities.
- 6.6 The Housekeeper cleans and decontaminates the storage facilities after each hauling activity in accordance with the *Policies and Procedures on Housekeeping Service*.
- 6.7 Records shall be kept and maintained in accordance with *Policies and Procedures on General Waste Management*.
- 6.8 All concerned personnel shall be adequately trained prior to the implementation of this document.

7.0 NON-ADHERENCE TO POLICIES AND PROCEDURES

- 7.1 A Corrective and Preventive Action Request (CPAR) shall be issued to any staff / unit not adhering to the *Policies and Procedures on General Waste Management*.
- 7.2 Staff with a single non-conformity but with detrimental repercussion to the hospital operation and/or with recurrent non-conformities to the *Policies and Procedures on General Waste Management* shall be subjected to disciplinary actions following existing hospital rules and regulations.

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8.0 DEFINITION OF TERMS

- 8.1 **Biodegradable** refers to substances which can be broken down by nature.
- 8.2 *Collection* refers to the act of removing waste from storage area.
- 8.3 Convey refers to movement of waste from point of origin to storage facilities.
- 8.4 **Disposal** refers to the act of disposing of anything; arrangement; orderly distribution.
- 8.5 General Waste refers to wastes that do not pose a special handling problem or hazard to human health or environment.
- 8.6 *Hazardous Waste* refers to toxic, corrosive (acids with pH<2 and bases>12), flammable, reactive (explosive, water reactive, shock sensitive), genotoxic (carcinogenic, mutagenic, teratogenic or other waste altering genetic material).
- 8.7 *Non-biodegradable* refers to the inability of a substance to be broken down, retaining its form for an extended period of time.
- 8.8 Non-hazardous refers to waste consisting of chemicals other that those stated above such as sugars, aminoacids, and certain organic and inorganic salts.
- 8.9 **Segregation** refers to a health care practice of separating different waste materials found in health acre establishments in order to promote recycling and re-use of resources to reduce the volume of waste collection.

9.0 REFERENCES

- 9.1 ISO 9000:2000 Standard
- 9.2 ISO 9001:2000 Standard
- 9.3 ISO 9001:2008 Standard
- 9.4 PhilHealth Benchbook Safe Practice and Environment
- 9.5 Accreditation Canada International Required Organizational Practices
- 9.6 Manila Doctors Hospital Quality Manual
- 9.7 Policies and Procedures on Housekeeping Service

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10.0 **ATTACHMENT**

10.1 Annex A: QUALITY RECORDS

No. RECORDS LOCATION		RETENTIO	RETENTION PERIOD		
110.	RECORDS	LOCATION	ACTIVE	ARCHIVE	METHOD
1)	N/A	N/A	N/A	N/A	N/A

Annex B: QUALITY PLAN AND RISK MANAGEMENT 10.2

PROCESS FLOW OF KEY ACTIVITIES	CONTROL OR QUALITY PARAMETER/STANDARDS	PERSON RESPONSIBLE	CHECKPOINT/SAMPLING POINT / FREQUENCY	RECORDS OF IMPLEMENTATION	
1.0 Segregation and Collection of Hospital Waste	Check compliance of Unit	Nursing Orderly / Housekeeper	Upon Hauling	N/A	
2.0 Convey	Check compliance of Unit	Nursing Orderly / Housekeeper	Upon Hauling	N/A	
3.0 Hauling	Check Hauling Schedule	Local City Garbage Collector	Upon Hauling	Security Logbook	
4.0 Cleaning and Decontamination	Check Compliance	Housekeeper	Right after hauling	Housekeeping Guidelines	

	WHAT ARE THE SEVERITY OF		OCCURRENCE	RISK LEVEL	CORRECTIVE ACTION IN CASE OF NON CONFORMANCE	EXISTING CONTROL MEASURES
1.	Wastes will build- up and possible contamination and spread of bacteria	3	3	9	Notification to Linen and Housekeeping Service	Close coordination with Linen and Housekeeping Service
2.	Waste will not be hauled by local city hauler	2	2	4	Notice of Explanation from Linen and Housekeeping Service	Close coordination with Linen and Housekeeping Service
3.	Storage facility will be filled with garbage and will spill over to the driveway	1	1	1	Call up local city government to notify non-hauling	Monitoring of hauling schedule

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Dirty storage Close monitoring of Notice to Explain to facility and compliance with Linen 2 2 4 Linen and Housekeeping possible spread and Housekeeping Service of disease Service

LEGEND: Risk Level: A x B

22 - 25 16 - 22 Action must be taken immediately

Area supervisor must be informed before the end

of that working day

Action needs to be taken the earliest opportunity 1 - 15

> 10.3 Annex C: REVISION HISTORY

ISSUE		REVISION HISTORY				
REVISION No.	CLAUSE NO.	ADDITION [A] OR DELETION [D]	AFFECTED PAGES	DESCRIPTION OF CHANGE	ORIGINATOR	EFFECTIVITY DATE
ΑØ	N/A	N/A	N/A	New Document	REN L. REYES	October 30, 2015

End of procedure 🛎

Environment and Waste Management Committee	ORIGINATED BY:	REVIEWED BY:	APPROVED BY:
Unit	REN L. REYES	ENGR. RIZALDY P. MENBOZA	TERRENCE L. CHAM, MD
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