



STAGE 1 INSTRUMENT

HEALTH CARE WASTE ASSESSMENT INTERVIEW GUIDE

Identifying Data

Name [optional] _____ Age: _____ Sex: _____
 Designation / Position _____
 Department _____
 Length of service in hospital _____
 Length of service in current position _____
 Highest educational attainment _____

Guide Questions

1. What is the current structure and function of the waste management committee of your hospital?
2. What are the current programs of the waste management committee with regards to waste disposal?
3. How much medical waste does your hospital generate in a month?
4. What is your hospital's current method for the treatment and disposal of regulated medical waste? Please describe for each type of medical waste.
5. How are products for disposal / treatment handled outside of the hospital? Please describe in terms of: service providers, schedules, method of treatment and / or disposal, and sites / locations.
6. How much does the hospital spend in waste treatment and / or disposal in a month? [Secure copy of relevant financial statement, if possible.]
7. Has your hospital done a waste audit / assessment over the last three years?
8. Is there currently an internal system for auditing / assessing the medical waste generated by the hospital? [Ask for copies of supporting documents, if available.]
9. Does your hospital practice recycling? If so, what items are recycled?
10. How are recycled products handled outside of the hospital? Please describe, as far as you know of in terms of service providers, schedules, recycling method, and sites/ locations.
11. Does your hospital have a program in place to eliminate the use of mercury containing products? Please elaborate.
12. Does your hospital have a policy of reducing or phasing out #3 PVC packaging and containers? Please elaborate.
13. Please describe your hospital's procurement policy, if any.
14. Do you have a policy on reusing medical products and / or office supplies? If so, how is it practiced?

15. Please describe your employee education program on hospital and medical waste, if any. Can you describe your employees' level of awareness and dedication to the projects implemented by your office/ department?
16. Does your hospital have a system of accident reporting involving hospital / medical wastes? Please elaborate.
17. What would you say are the strengths of your current waste management system?
18. What would you describe as the problem areas or weaknesses of your current medical waste management system? How did you address these problem areas and weaknesses in the course of your work?
19. Which areas of the waste management system needs improvement?
20. What are the future plans or projects of the waste management committee?
21. What would you describe as the best practices evolved within your current medical waste management system?
22. What are your expectations from this project?



STAGE 1

Hospital _____
 Address _____

Licensing Category _____

Instructions: Kindly indicate the status of compliance by indicating a (√) on the corresponding column. Review important documents i.e., organizational structure, waste management plan, manual, etc. and make additional notes on a separate sheet of paper.

	Yes	No	Remarks
A. Organization and Planning			
1. Presence of an organized Health Care Waste Management Committee (HCWM)			_____
2. Health Care Waste Management Committee is included in the overall organizational structure of the hospital			_____
3. Health Care Waste Management Committee hold meetings regularly			_____
4. Presence of Hospital Waste Management Plan			_____
5. Hospital Waste Management Plan is regularly updated			_____
6. Annual Waste Management Assessment is being conducted			_____
7. Presence of Waste Management System/ Waste Management Flow			_____
B. Waste Management Policies			
1. Are there existing policies related to Health Care Waste Management			_____
2. Are there existing memorandum/ circulars on waste management			_____
3. Presence of Hospital's Waste Management Manual of Procedures or Standard Operating Procedures on Waste Management (aside from DOH – HCWM Manual)			_____
4. Presence of DOH-Health Care Waste Management Manual			_____
5. Is the Waste Management Manual readily available to all hospital departments			_____
6. Recycling is being practiced in the hospital			_____
7. Waste segregation is being implemented			_____
8. Safe packaging and adequate labeling of waste being practiced			_____
9. Appropriate color-coded receptacles/bins/bags are provided			_____
10. Are there sanctions for non-compliance on Waste Management policies			_____

C. Staff Development

1. Are there training modules developed on Health Care Waste Management
2. Are there existing trainings/ staff development related to Health Care Waste Management (HCWM)
3. Are there available information materials on HCWM given to hospital staff

D. Waste Storage Facility

1. Presence of a designated waste storage facility within the hospital's premises
2. Storage facility is properly marked with signage/warning signs
3. Storage facility has ample water supply and drainage
4. Storage facility is well maintained

Yes

No

Remarks

I. E. Waste Management Records

1. Presence of Daily Waste Collection Monitoring Records
 - a. Daily Waste segregation records
 - b. Monitoring of Weight of Daily Waste Collection
 - c. Monitoring of Daily Waste Transportation
2. Presence of Monthly Waste Collection Monitoring Records
 - a. Monthly waste segregation records
 - b. Monitoring of Weight of Monthly Waste Collection
 - c. Monitoring of Monthly Waste Transportation
3. Presence of Waste Collection Schedule

F. Waste Processing

1. Waste Treatment (on-site)
 - a. Delay to decay
 - b. Chemical disinfection
 - c. Autoclave
 - d. Microwave
 - e. Pyrolysis
 - f. Others, please specify
2. Waste Treatment (off-site)
 - a. Delay to decay

- b. Chemical disinfection
- c. Autoclave
- d. Microwave
- e. Pyrolysis
- f. Others, please specify _____

- 3. Waste Collection and Transport (on-site)
 - a. Collection is done daily
 - b. Wheeled trolleys or carts are being used

- 4. Waste Collection and Transport (off-site)
 - a. Collection of hospital waste is done regularly (kindly specify frequency)
 - b. Waste collection is done by a DENR accredited transporter or carrier
 - c. Waste collection is done by the Local Government Unit Solid Waste Collection and Transport System
 - d. Waste collection is done by the health care facility (waste generator)

Yes

No

Remarks

- 5. Waste Disposal
 - a. Sanitary landfill (privately owned/ operated)
 - b. Sanitary landfill (LGU operated)
 - c. Controlled Dumpsite (privately owned/operated)
 - d. Controlled Dumpsite (LGU operated)
 - e. Others, please specify _____

- 6. Health and Safety Practices
 - a. Workers are provided with appropriate Personal Protective Equipment (PPE)
 - b. Workers are given immunization regularly (kindly specify frequency)



Purpose/Goals:

The primary purpose of this stage is to make a preliminary assessment of the waste systems in the facility. The goal is to gather information that can make the later stages as comprehensive, time-efficient and non-intensive as possible.

1. Complete profile of hospital
2. Make a thorough assessment of existing waste management procedures through document review (see list)
3. Get a clear grasp of how the senior management views their current waste management system.

Primary Concerns

(while conducting Stage 1 in the hospitals and while consolidating the data, we need to come up with the designs for Stages 2 & 3):

1. Look out for issues and areas that need to be prioritized in the latter stages.
2. Be on the lookout for documents / reports that might make the work in the latter stages easier.
3. Be familiar with the people who know the waste management system best and be sure to involve them in your work.
4. Visualized stages 2 & 3 while conducting stage 1 to reveal issues that we might have missed, take notes & pictures whenever we can (without disturbing anyone of course)

Stage 1 Kit

(MUST bring documents/materials every time you visit the hospital under study)

1. Hospital Profile (current)
2. Hospital profile completion form
3. DOH Manual
4. Memorandum of Agreement (Annex: Research Design, Project Stages, List of Documents Needed)
5. Checklist of Documents of Request
6. Preliminary Walkthrough Checklist
7. HCWH hand-outs Mercury, PVC, DEHP, Dioxin etc.
8. HCWH ID

9. Micro Tape for documentation (be sure to have extra tapes)
10. Notebook and pen
11. Video Camera (extra video tape)

Stage 1: Preliminary Interview Protocol

Protocol questions and answers:

- Is there anything I need to do/know before conducting the interview?
- How should interviews be conducted?
- What types of questions are most useful for this particular hospital and our purposes?
- What types of questions should be avoided?
- How do I analyze responses?
- How do we interpret our findings?

Conducting the Interview:

1. Review all the information you have on the hospital you are about to visit.
2. Look your best.
3. Show up a few minutes early. It will give you time to relax before interview starts.
4. Don't smoke cigarettes or chew gum.
5. Introduce yourself. When you arrive for the interview, say to the person at the front desk, "Hello, my name is [first name and last names] and I'm here to see [Ms./Mrs./Mr. whoever]"
6. When you enter the interviewer's office, give her/him a friendly smile and shake hands if you can. If you're still standing, wait until he/she asks you to sit.
7. Relax but don't slump in your chair or lean on the desk. Be sure to look as directly as possible at the person you're talking when speaking.
8. Before the start of the interview, explain how this interview fits in the whole project scheme.
9. Be candid while conducting the interview. Try to maintain a respectful but relaxed atmosphere. Engage the interviewee in a conversation, don't just ask standard questions and listen for answers, might as well just have them answer a questionnaire if you can on doing that.
10. After the interview. Express your gratitude. Firm handshake. Give your card (use both hands).

Stage 1 Schedule:

1. Complete Hospital Profile, have preliminary questionnaire answered, schedule preliminary interview, schedule orientation
2. Complete hospital profile, conduct preliminary interview
3. Conduct orientation, start document procurement
4. Document procurement, preliminary walkthrough (get acquainted)
5. Finish document procurement

6. Consolidate data

PRELIMINARY WALK THROUGH ASSESSMENT**NAME OF HOSPITAL:** _____

Kindly put a (√) on the items and write your comments/remarks on the space provided or on a separate sheet of paper.

	Name of Ward				
A. Waste Systems- General Features					
1. Are waste containers uniform in:					
a. color					
b. shape					
c. size					
d. location					
2. Does container location make sense? E.g. trash cans beside handwashing sinks, recycling bins beside copiers					
a. visibility of the container					
b. accessibility of the container					
3. Are signs present instructing waste generators on proper disposal?					
4. Are sharp containers located to prevent accidental disposal of sharps in regular trash or red bags?					
5. Are waste collection schedules					

adequate to avoid overflowing and heavy waste loads?					
6. Are staff discarding of wastes in the appropriate containers?					
B. Waste Systems – Documenting programs for consistent management	Name of Ward				
1. Is there a locator sheet to monitor the trash bins?					
2. Is there a system for documenting sharps container in every unit?					
3. Is there a system for documenting special handling of chemicals?					
4. Is there a system for documenting mercury disposal?					
5. Is there a system for documenting recycling practices?					
6. Is there a system for documenting segregation practices?					

STAGE 2 INSTRUMENTS

Health Care Waste Assessment Project

Health Care Without Harm – South East Asia

I. Focus Group Discussion

- Focus Group Interviews are focused discussions led by a moderator and involving eight to twelve participants each. It is a form of qualitative research.
- Focus Group interviews help us to explore the feelings that people have for a given product, service or idea. They help us to understand the language people use to express those feelings.
- Group interviews tend to have a synergistic effect on how individuals respond. The group interaction typically stimulates a broader range and sometimes a greater depth of response than one would get from individual interviews.

Introduction of the Participants

- Brief introduction of the HCWH staff and their role in the current project
- Brief orientation/ introduction of the Health Care Waste Assessment Project
- Brief introduction of the participants and their role in the hospital/ department

Rules

- Raise hand to be acknowledged
- Please speak up -- only one person should talk at a time. Discussions will be tape-recorded during the entire session in order not to miss any of the comments. If several are talking at the same time, the tape will be difficult to transcribe and comments might be missed.
- It is proper to let the person finish his/her piece first before proceeding to the next speaker/participant
- Participants will be called on a first name basis.
- Participants are assured of complete confidentiality of the discussion.
- There are no right or wrong answers and the group is interested in both positive and negative comments.
- The session will last about an hour and we will not be taking a formal break.

Physical location

- A pleasant, quiet room in a relaxed setting is suitable for the group discussion.
(Ex. Conference rooms, quiet restaurant, etc.)

Length and time of interview

- The length of the discussion will only be 1 hour.
- The time keeper will monitor the allotted time for each group

Participants

- The participants should be homogeneous (same sex, same discipline or profession, age group, etc.)

II. General Questions:

1. Are you aware of the functions and composition of the Waste Management Committee in your hospital?
2. What are the current programs of the waste management committee with regards to waste disposal? Are the activities/ programs of the committee being properly implemented?
3. Are you involve in the meetings/ discussion of the waste management committee?
4. Do the members of the committee give orientation on proper waste disposal and segregation?

III. Questions pertaining to the systems and processes of waste disposal:

1. Do you have an idea on how much medical waste does your hospital generate in a month? (in your respective department/ areas)
2. How much does the hospital spend in waste treatment and / or disposal in a month?
3. Does your hospital practice segregation? What are the items being segregated? Describe the process of segregation
4. Does your hospital practice recycling? If so, what items are recycled? Describe process of recycling.
5. Do you have a policy on reusing medical products and / or office supplies? If so, how is it practiced?
6. What is your hospital's current method for the treatment and disposal of regulated medical waste? Please describe for each type of medical waste.
 - What type of pre-treatment is being used?
7. What is the hospital's protocol with regards to mercury spillage/ disposal?
8. Please describe your employee education program on hospital and medical waste, if any. Can you describe your employees' level of awareness and dedication to the projects implemented by your office/ department?
9. Does your hospital have a system of accident reporting involving hospital / medical wastes? Are there accidents related to needle stick injury about waste collection/ disposal? Please elaborate.
10. Do you have any immunization? What type of vaccine is given? How frequent?

IV. Best Practices/ Problems encountered

1. What would you say are the strengths of your current waste management system?
2. What would you describe as the problem areas or weaknesses of your current medical waste management system? How did you address these problem areas and weaknesses in the course of your work?
3. Which areas of the waste management system need improvement?
4. What are your expectations from this project?
5. Are there any other things related to waste management you wish to share to the group?

STAGE 3 INSTRUMENTS

Health Care Waste Assessment Project Health Care Without Harm – South East Asia

STAGE 3 GUIDE

I. STAGE 3 Objectives:

The actual walk thru aims to:

1. Identify the types of wastes generated by the participating hospitals
2. Identify the volume of wastes generated by the hospital per day/ week.
3. Directly observe the practice/ process of waste disposal of the hospital staff and patients
4. Directly observe the waste management process of the hospital

II. STAGE 3 PROCESS:

1. Researchers will be assigned 2-3 particular wards/ department which they will monitor during the scheduled walk thru. In two days, 4-6 wards / department will be handled/ monitored by one researcher. For three researchers, we will be able to monitor at least 12-18 wards/ departments per hospital.
2. Each researcher will accompany the assigned housekeeper/ waste collector per ward/ department and observe the actual waste collection, segregation, transport to the storage area, actual weighing and actual collection by the service provider.
3. Pertinent observations will be recorded and forms for Stage 3 will be utilized.

III. MATERIALS NEEDED:

Stage 3 kit – which includes forms, stage 3 guide, schedule, copies of written communication with the hospital and consolidated stage 1 and 2 data of the hospital under study.

Clip boards – 3 pieces

Calculators

Scrub suits which includes head cap and mask

Gloves – c/o hospital

Tongs/ Forceps – c/o hospital

Disposable masks – c/o hospital

Digital camera

Microcassette recorder

Micro tapes

Video cam (optional)

Weighing scale

Others

IV. OBSERVATION OF WASTE FLOW/ PROCESS:

Preparation for Actual Waste Collection

Please see checklist for actual waste collection, Form #1.

Waste collectors wearing personal protective equipments

- Heavy duty gloves
- Masks
- Tongs
- Goggles
- Hairnet/ Cap

Waste collected daily

- Time of waste collection is at the start of every shift
- Frequency of waste collection is once every shift
- Trash bags or containers are labeled (hospital ward/ department) and contents specified.
- Bags or containers are replaced immediately with new ones and of the same type
- Fresh or new collection bags or containers should be readily available at all locations where waste is generated.

Waste Segregation

Please see checklist for segregated materials, Form #2.

- Trash bins lined with black bag
- Trash bins lined with green bag
- Trash bins lined with yellow bag
- Sharps container
- Others
- Container for vials
- Container for used syringes
- Container for used plastic bottles
- Container for used glass bottles

Recycled Materials

Please see checklist for recycled materials, Form #3.

Check the following materials if they are being recycled by the hospital:

1. Cartons or used boxes
2. Papers
3. Newspaper
4. Phone Directories
5. Aluminum cans/ softdrink cans
6. Ink cartridges
7. Batteries
8. Fluorescent lamps
9. Light ballasts

10. X-ray films
11. Used woods
12. Kitchen cooking oil
13. Food wastes/ slops
14. Plastic bottles
 - a. plastic #1 PETE or Polyethylene terephthalate (soda bottles, salad dressing bottles, food service containers, packaging, etc.)
 - b. plastic #2 HDPE or High Density Polyethylene (narrow neck plastic bottles e.g., shampoo bottles, liquid dish soap bottles, plastic bags, medicine containers, etc.)
 - c. plastic #3 PVC or Polyvinyl Chloride (IV bags, pipings or tubings, etc.)
 - d. plastic #4 LDPE or Low Density Polyethylene (stretch wrap, films, packaging, etc.)
 - e. plastic #5 PP or Polypropylene (sterilization wraps, irrigation fluid containers, pitchers)
 - f. plastic #6 PS or Polystyrene (disposable dishware, utensils, carry out containers, packaging such as syringe wrappers, foam packaging peanuts)
 - g. plastic, mixed

Re-Used Materials

Please see checklist for re-used materials, Form #4.

1. Papers
2. Folders
3. Envelopes
4. Linens
5. Vials
6. Gloves
7. Tubings
8. Ink cartridges
9. Surgical gowns/ patient gowns
10. Pillows
11. Vaginal speculums
12. Sharp containers
13. Test tubes
14. Laboratory glasswares
15. Plastic bottles
 - a. plastic #1 PETE or Polyethylene terephthalate (soda bottles, salad dressing bottles, food service containers, packaging, etc.)
 - b. plastic #2 HDPE or High Density Polyethylene (narrow neck plastic bottles e.g., shampoo bottles, liquid dish soap bottles, plastic bags, medicine containers, etc.)
 - c. plastic #3 PVC or Polyvinyl Chloride (IV bags, pipings or tubings, etc.)
 - d. plastic #4 LDPE or Low Density Polyethylene (stretch wrap, films, packaging, etc.)
 - e. plastic #5 PP or Polypropylene (sterilization wraps, irrigation fluid containers, pitchers)
 - f. plastic #6 PS or Polystyrene (disposable dishware, utensils, carry out containers, packaging such as syringe wrappers, foam packaging peanuts)
 - g. plastic, mixed

Hazardous Materials

Please see checklist for recycle of hazardous materials, Form #5.

1. Solvent recovery and recycling for materials such as xylene, toluene
2. Formalin recovery

3. Alcohol recovery for various alcohol
4. Silver recovery for waste silver from radiology (film, fixer/ developer)
5. Fluorescent lamp recovery

Waste Transport to Hospital Storage Area

Please see checklist for waste transport, Form #6.

Waste Storage

Please see checklist for requirements for storage facilities, Form #7.

Pre-Treatment of Wastes

Please see Notes for Pre-Treatment of Wastes, Form #8.

Take note of the process/ practice on pre-treatment of waste. Identify what type of chemicals or disinfecting agent is used and on what instances or occasion it is used.

Actual Weighing of Wastes

Please see Table for Actual Weighing of Wastes, Form #9.

Off-Site Transport

Please see Notes for Off-Site Transport of Wastes, Form #10.

Take note of the process/ practice of the service provider while loading the trash bins, their protocols on weighing of wastes, documents given to the hospital, amount per kilo of wastes, etc.

Type of Waste Treatment Utilized by the Service Provider

Please take note of the type of Waste Treatment being used by the service provider and know the actual process.

Final Disposal

Please take note of the final disposal process of the wastes.

Form#1 ACTUAL WASTE COLLECTION CHECKLIST

Kindly put a (√) if being practiced and (x) if not.

PRACTICES	(√) or (x)	REMARKS
Waste collectors wearing personal protective equipments		
i. Heavy duty gloves		
ii. Masks		
iii. Tongs		
iv. Goggles		
v. Hairnet/ Cap		
Waste collected daily		
i. Time of waste collection is at the start of every shift		
ii. Frequency of waste collection is once every shift		
c. Trash bags or containers are labeled (hospital ward/ department) and contents specified		
d. Bags or containers are replaced immediately with new ones and of the same type		
f. Fresh or new collection bags or containers should be readily available at all locations where waste is generated.		

Form#2 WASTE SEGREGATION

Kindly put a (√) if being practiced and (x) if not.

PRACTICES	(√) or (x)	REMARKS
a. Trash bins lined with black bag for non-infectious dry waste		
b. Trash bins lined with green bag for non-infectious wet waste (kitchen, dietary, etc.)		
c. Trash bins lined with yellow bag for infectious and pathological wastes		
d. Yellow bags with black band for chemical waste including heavy metals		
e. Orange bag for radioactive waste		
f. Sharps container		
- puncture proof		
- improvised container (description of material)		
g. Container for vials		
h. Container for used syringes		
i. Container for used plastic bottles		
j. Container for used glass bottles		
l. Does not attempt to correct or remove items from the yellow bag and transfer it to the other bags		

Other Notes:

Form#3 CHECKLIST FOR RECYCLED MATERIALS

Kindly put a (√) if being practiced and (x) if not.

ITEMS	(√) or (x)	REMARKS
1. Cartons or used boxes		
2. Papers		
3. Newspaper		
4. Phone Directories		
5. Aluminum cans/ softdrink cans		
6. Ink cartridges		
7. Batteries		
8. Fluorescent lamps		
9. Light ballasts		
10. X-ray films		
11. Used woods		
12. Kitchen cooking oil		
13. Food wastes/ slops		
14. Plastic bottles		
a. plastic #1 PETE or Polyethylene terephthalate (soda bottles, salad dressing bottles, food service containers, packaging, etc.)		
b. plastic #2 HDPE or High Density Polyethylene (narrow neck plastic bottles e.g., shampoo bottles, liquid dish soap bottles, plastic bags, medicine containers, etc.)		
c. plastic #3 PVC or Polyvinyl Chloride (IV bags, pipings or tubings, etc.)		
d. plastic #4 LDPE or Low Density Polyethylene (stretch wrap, films, packaging, etc.)		
e. plastic #5 PP or Polypropylene (sterilization wraps, irrigation fluid containers, pitchers)		
f. plastic #6 PS or Polystyrene (disposable dishware, utensils, carry out containers, packaging such as syringe wrappers, foam packaging peanuts)		
g. plastic, mixed		

Form#4 CHECKLIST FOR RE-USED MATERIALS

Kindly put a (√) if being practiced and (x) if not.

ITEMS	(√) or (x)	REMARKS
1. Papers		
2. Folders		
3. Envelopes		
4. Linens		
5. Vials		
6. Ink cartridges		
7. Tubings		
8. Surgical / patient gowns		
9. Pillows		
10. Vaginal speculums		
11. Sharp containers		
12. Laboratory glasswares		
13. Zonrox containers		
14. Test tubes		
15. Batteries		
16. X-ray films		
17. Kitchen cooking oil		
18. Plastic bottles		
a. plastic #1 PETE or Polyethylene terephthalate (soda bottles, salad dressing bottles, food service containers, packaging, etc.)		
b. plastic #2 HDPE or High Density Polyethylene (narrow neck plastic bottles e.g., shampoo bottles, liquid dish soap bottles, plastic bags, medicine containers, etc.)		
c. plastic #3 PVC or Polyvinyl Chloride (IV bags, pipings or tubings, etc.)		
d. plastic #4 LDPE or Low Density Polyethylene (stretch wrap, films, packaging, etc.)		
e. plastic #5 PP or Polypropylene (sterilization wraps, irrigation fluid containers, pitchers)		
f. plastic #6 PS or Polystyrene (disposable dishware, utensils, carry out containers, packaging such as syringe wrappers, foam packaging peanuts)		

Form#5 CHECKLIST FOR HAZARDOUS MATERIALS

Kindly put a (√) if being practiced and (x) if not.

PRACTICES	(√) or (x)	REMARKS
a. Solvent recovery and recycling for materials such as xylene, toluene		
b. Formalin recovery		
c. Alcohol recovery for various alcohol		
d. Silver recovery for waste silver from radiology (film, fixer/ developer)		
e. Fluorescent lamp recovery		

Other Notes:

Form#6 CHECKLIST FOR WASTE TRANSPORT

Kindly put a (√) if being practiced and (x) if not.

PRACTICES	(√) or (x)	REMARKS
a. Utilizes wheeled trolleys, containers or carts for waste collection and transport		
b. On-site transportation vehicle is:		
- easy to load and unload		
- no sharp edges that could damage the waste bags or containers during loading and unloading		
- easy to clean		
c. The vehicle is cleaned and disinfected daily with disinfectant (please note the type of disinfectant)		

Other Notes:

Form#7 REQUIREMENTS FOR WASTE STORAGE FACILITIES

Kindly put a (√) if present and (x) if not.

ITEMS	(√) or (x)	REMARKS
a. The storage area has impermeable, hard standing floor with good drainage		
b. Should be easy to clean		
c. Should allow easy access for staff in charge of handling the waste		
d. Should be possible to lock the storage area to prevent access by unauthorized person		
e. Easy access for waste collection vehicle		
f. Should have protection from the sun, rain, strong winds, etc.		
g. Should be inaccessible to animals, insects and birds		
h. Should have good lighting and ventilation		
i. Should not be located near fresh food stores or food preparation areas		
j. Supply for cleaning equipment, protective clothing, waste bags or containers should be located near the storage area		
k. Floors, walls and ceilings of the storage area should be cleaned daily		
l. Biodegradable general and hazardous wastes should not be stored longer than 2 days to minimize microbial growth (should apply chemical disinfection if wastes are stored more than 2 days)		

Other Notes:

Form#8 PRE-TREATMENT OF WASTES

Take note of the process/ practice on pre-treatment of waste. Identify what type of chemicals or disinfecting agent is used and on what instances or occasion it is used.

Form#9 OFF-SITE TRANSPORT/ TYPE OF WASTE TREATMENT/ FINAL DISPOSAL

Take note of the process/ practice of the service provider while loading the trash bins, their protocols on weighing of wastes, documents given to the hospital, amount per kilo of wastes, etc.

Please take note of the type of Waste Treatment being used by the service provider and know the actual process.

Please take note of the final disposal process of the wastes.

