November, 2009

Impact Evaluation of Health Care Waste Management

Final Report

For

Rajasthan Health Systems Development Project (RHSDP)

By



State Institute of Health & Family Welfare, Jaipur



SIHFW: an ISO 9001:2008 certified institution Health Care Waste Management: Evaluation Study: November 2009

Executive summary

The State Health Systems Project in Rajasthan with support from World Bank addressed to the issue of Bio Medical Waste management in secondary level health care institutions across the State by way of improving Infrastructure, Logistics, Trainings and IEC.

In line with Bank's mandatory requirement, it was prudently visualized at RHSDP to have the impact of all the inputs and efforts made by the project, evaluated by an external agency who could point out the achievements and punctuations hitherto, besides making suggestions for the efforts required henceforth.

The independent evaluation, based on the RFP and Inception report submitted by State Institute of Health & Family Welfare was awarded to SIHFW with explicitly laid out scope of work and deliverables. The study was undertaken from June 8 to August 21, 2009 and included Preparatory work, Interaction with client organization, Procuring documents, Identification of consultants, Orientation of staff and consultants, Route and facility mapping, Travel itineraries, Communication to and with DPC/ CMHO/ Field officers, Desk review, Protocol development, Tabulation plan, Data Collection, Software development, Data entry, Data analysis & interpretation, Draft report writing.

The process terminated into submission of draft report and apropos to the comments from the client organization the draft has been revised before final report printing and dissemination of the findings.

The study team visited 8 CTF, 2 District Hospitals, 4 Sub-District facilities, eight 50-bedded units, sixteen 30-bedded health centers, 6 non project facilities, 7 units of Rajasthan Pollution control Board, 2 outreach camps and Officials of RHSDP & NRHM (8) and interacted with 409 administrators, Medical officer, Nursing and support staff, involved directly or indirectly with HCWM from planning to execution.

Virtually all the PMOs and HCWM in-charges were conversant with the kind of waste generated in the facility. A total of 13178 staff were found trained in 2nd & 3rd years of RHSDP, as reported from the project authorities, is an appreciable achievement by any standard. The knowledge regarding the Black, Red, Yellow and Red bag contents was very good (average 95%) amongst all categories of respondents.

Out of 30 PMOs/ MO I/C from the project facilities under study 63.3% had copies of BMW rules. Initially every facility applied and got authorization. Only 60% of those facilities who initially got the authorization have it valid as on date, while 40% are still waiting for authorization to be renewed.

The average quantity of Bio-Medical waste generated at the facilities ranged between 0.18 Kg to 0.26 Kg per bed per day. The observed quantum of waste at the facilities is not in consonance to the averages, per se. Segregation practices were not up to the mark at majority of the facilities but for district hospital. This concern was also voiced by CTF administrators.



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Majority of respondents in PF facilities said that the bags were being tied & labeled, somehow the observation fails to vouch that as none of the bags at any of the facility was found labeled according to provisions of Bio Medical Waste Management & Handling Rules. 80% of the PMOs said that waste was collected once in a day in contradiction to their own statement regarding frequency of change of bags,

30 facilities surveyed, 29 had functional HSIT committees (except Mandore) and there was a regular interaction between committee members, where monthly review of HCWM practices is undertaken at facility level. Similarly, the monitoring at districts is entrusted with HSIC's. However; it is felt that there is an urgent need for strengthening and effective transfer of ownership from project to Directorate.