

MAKERERE UNIVERSITY

COLLEGE OF BUSINESS AND MANAGEMENT SCIENCES

SCHOOL OF BUSSINESS

**ANALYSIS OF HOSPITAL SOLID WASTE MANAGEMENT PRACTICES IN
UGANDA: A CASE STUDY OF MULAGO NATIONAL REFERRAL HOSPITAL**

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ABSTRACT

The study sought to analyze the status of hospital solid waste management practices in Mulago National Referral hospital.

Medical wastes are defined to include all types of waste produced by health facilities such as general hospital, medical centers and dispensaries. Medical wastes represent a small amount of total residues generated in a community. In Uganda, now days, Health care facilities (HCFs) are becoming serious, greater than ever, to address the basic health needs of the society and to achieve the Millennium Development Goals (MDGs) yet the medical waste management produced by the HCFs has not received sufficient attention.

Specifically, the study aimed to: Identify the sources of wastes in Mulago Hospital, Determine methods of waste segregation within the hospital, Examine how hospital solid waste is handled in Mulago Hospital and recommend strategies of waste disposal in Mulago Hospital.

The study applied both purposive and simple random sampling methods.

The study findings reveal that hospital wastes are generated from packing materials of drugs, and other related materials which may be classified as noninfectious including housekeeping, building and waste from ward sweepings and hospital compounds sweepings. Secondly, wastes are generated from kitchen, canteen, such as leftover foods and these are called wet wastes.

Furthermore, hospital waste is generated from medical, nursing, dental, laboratory, and pharmaceutical. The other source of hospital wastes is wastes from pathology which include human fetuses from surgical operation, biopsy, and autopsy organs, blood and body fluids usually coming from patients' services. Hospital waste is also generated from diagnosis and experimental section, cleaning and disinfecting a procedure which is classified as hazardous and nonhazardous in the form of gas, solid and liquid chemicals.

Findings from the nurses and waste handlers reveal that waste segregation is practiced in the wards and waste handlers' vicinities. The most (67%) asserted method of waste segregation among the nurses is separation of different type of waste at the point of generation whereas the waste handlers practice color coding. The findings show that majority (74%) of the respondents don't practice waste treatment prior to the disposal of infectious waste.

There is need to train both waste handlers and nursing on proper waste handling practices especially the segregation of medical wastes.

Waste handlers should be given equipment to use while collecting wastes.

There is need for the administrators and hospital waste manager to keep an updated waste management plan that is well supervised

There is need for allocation of financial resources to ensure efficient operation of the waste management plan

The hospital waste manager should prepare an annual report for the disposal of healthcare waste which provides data on waste generation, equipment requirements and its cost.