

Abstract

Study was conducted in six primary care units (PCUs) in Phrom Buri District, Sing Buri Province. The objective was to examine the current situation of infectious waste management including separation, storage, transportation and disposal. Twenty three of health officers and four housekeepers were taken into account. The data were collected through field observation, face to face interview and questionnaire, and then were analyzed using descriptive statistics.

The average rate of infectious waste generated from each PCU was 316.9 grams per day. The major component of infectious waste (78.36%) was medical waste such as cotton balls, gauzes, clothes and rubber hose.

All primary care units were found to be not completely executed conforming to the ministerial regulations on infectious waste management issued in 2545 B.E. Thailand, especially the separation and disposal practices. The infectious waste including sharp medical devices were disposed along with the general waste without properly separating them. Of 27 respondents, 66.7 % stated that the medical waste was sent off and disposed by the local administrative organizations. However, 23.3% revealed that the waste was incinerated together with the general waste by the PCUs themselves using simple non-standard incinerator. The problems and obstacles of infectious waste management were no policy and lack of budget and equipment. In addition, currently, there was no infectious waste management training program provided to the staffs of the PCUs.

To obtain a participatory agreement on the appropriate solutions to mitigate these problems, this study was presented to the Phrom Buri's PCU monthly meeting. As a result, the appropriate management was performed. These were : 1) establishing the infectious waste management policy and management plan; 2) identifying a key person to monitor and evaluate the plan; 3) conducting a work instruction of infectious waste management, particularly separation and collection procedures; 4) reviewing and revising the management context ; 5) providing a training program to all health officers and housekeepers; 6) building a collaboration with the contracting unit for primary care

(Phrom Buri hospital) to handle infectious waste including transportation and disposal; and 7) allocating and utilizing budget for essential equipment and instruments to manage the infectious waste.