DYNAMICS OF HOSPITAL WASTE MANAGEMENT IN NASHIK

INTRODUCTION, IMPORTANCE, AND OBJECTIVES

Introduction

Nashik is one of the fastest developing city, not only in Maharashtra but ranks 16th fastest growing city in Asia. It forms important vertex of ‘Golden Triangle’ of Mumbai-Nashik-Pune being equidistant sides of isosceles triangle of development.

The population of Nashik has increased manifold in last 10 years and is approximately 15.90 lac as per latest statistics of Commissionerat Nashik. The growth has been in all directions, and in different magnitudes. Medical field is one of the fastest growing industry out of all, along with grape/wine/ education / IT fields.

There are Number of hospitals in Nashik. As per recorded documents with Medical Association of Nashik and Chief Medical Officer Nashik there are 1344 private and government hospitals/leprosy units/labs etc(upto2009).

All these medical units are generating 4500kg/day of waste (2005 data- MPCB Report,Para 26). There is no planning for hospital waste management as agreed in official document of Nasik Municipal Corporation official documents. Even Paper 12 of Hospital Management in Maharashtra University of Health Sciences, Nasik(MUHS) does not cater for Hospital Waste Management in its syllabus.

Nashik Municipal Corporation (NMC) was established in 1864. It boasts of being a leading municipal corporation in India, as far as disposal of waste and its management are concerned. Its Ghantagari project became world famous. Many Municipal Corporations from all over the country, and even few Asian countries came to study and co-opt ghantagari project.

This world class concept of Ghantagari is being continuously refined in Nashik. Proper place for waste disposal is not only earmarked; but also, a plant has been installed at khat prakalp in 2000(upgraded to 600 TPD now) to recycle and process bio-degradation of dry and wet waste separately.
Though hospital waste management is properly being stacked the NMC agrees in para last, page 12 of its official document that no much headway is made in Hospital Waste Management in Nashik. SMS Water Grace BWW Pvt Ltd, contractors to treat hospital waste centrally are handling this issue in their own way. Their facility is existing at Tapovan (opposite Mayur Tractors on Mumbai-Dhulia highway; Kammanwar bridge, Nasik). A survey of some of the cities was done in 2009, the comparative table shows Nashik is definitely leading in efforts towards Waste management in general.

**Importance:** Hospital waste disposal is scientific, costly, and exclusive procedure separate from disposal of generic waste disposal. In Nasik, and also in most cities, its clubbed with municipal generic waste management. Awareness levels at all levels are dangerously low in this regards. Very few hospitals have installed incinerators; but most are not operated properly, hence not functioning. Since there is, accepted gap in managing this facility in Nashik Division, It is utmost important to carry out a research on medical waste generated, collected, processed and recommend few models to NMC to see adoptability. This research is proposed to be done in following ways:-

(a) Firstly approach Health officer Nashik Municipal Corporation (NMC); obtain list of updated registered hospitals/labs/medical centres generating medical waste. Thus identifying scope of research. In this research it is possible to come across unregistered centres generating medical waste. Their details can be subsequently forwarded to NMC.

(b) Extensive research of methods of disposal of hospital waste by govt/ private hospitals in Nashik.

(c) Role and involvement of NMC, addressing this issue with priority that it needs.

(d) Any NGOs/other govt organizations like environment etc involved in this issue, and their degree of involvement.

(e) Role of media in highlighting importance and gravity of this silent but effective killer.