



THE REPUBLIC OF UGANDA

# Ministry of Health

## NATIONAL POLICY ON INJECTION SAFETY AND HEALTH CARE WASTE MANAGEMENT

*JULY 2004*

GOVERNMENT OF UGANDA  
MINISTRY OF HEALTH

NATIONAL POLICY  
ON  
INJECTION SAFETY  
AND HEALTH CARE WASTE MANAGEMENT

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*UGANDA NATIONAL INJECTION SAFETY TASK FORCE  
(UNISTAF)*



## TABLE OF CONTENT

<b>Foreword</b> .....	<b>II</b>
<b>1.0 Background</b> .....	<b>1</b>
1.1 Preamble.....	1
1.2 Situation Analysis.....	2
<b>2.0 Mission</b> .....	<b>3</b>
2.1 Overall Goal.....	3
2.2 Guiding Principles.....	4
<b>3.0 Communication and Behavior Change</b> .....	<b>4</b>
3.1 Policy Issues.....	4
3.2 Policy Objectives.....	5
3.3 Policy Strategies.....	5
<b>4.0 Health care waste management</b> .....	<b>6</b>
4.1 Policy Issue.....	6
4.2 Policy Objectives.....	7
4.3 Policy Strategies.....	7
<b>5.0 Logistics</b> .....	<b>8</b>
5.1 Policy Issue.....	8
5.2 Policy Objectives.....	9
5.3 Policy Strategies.....	9
<b>6.0 Human Resource Development</b> .....	<b>10</b>
6.1 Policy Issue.....	10
6.2 Policy Objectives.....	10
6.3 Policy Strategies.....	10
<b>7.0 Monitoring and Evaluation</b> .....	<b>11</b>
7.1 Policy Issue.....	11
7.2 Policy Objectives.....	11
7.3 Policy Strategies.....	12
<b>8.0 Institutional Framework</b> .....	<b>12</b>
<b>9.0 Regulation</b> .....	<b>13</b>
<b>10.0 Financial Implications</b> .....	<b>13</b>
<b>11.0 Environmental Protection</b> .....	<b>14</b>

## **FORWARD**

In Uganda injections are a common practice in the health care and community settings. A major part of the population receives at least one injection per year. It is known globally, about half of the injections are unsafe. Unsafe and unnecessarily injections also contribute to the spread of blood borne pathogens like Hepatitis B, HIV/AIDS, and injection abscesses and nerve damage.

The government of Uganda has developed the National Health Policy and the Health Sector Strategic Plan with the overall goal of reducing the burden of communicable diseases through the provision of the Package of Basic Health Services. Substantial achievements have been made in this during the last decade as evidenced by the reduction of HIV/AIDS prevalence, malaria control strategies, improvement of sanitation and nutrition, health education and promotion. There is also improvement in the supply of safe blood and increase in access to physical health facilities. In the second Health Sector Strategic Plan, these positive achievements must be consolidated.

In order to further reduce to the risk of these dangerous and communicable diseases in the health care practices, the Ministry of Health has developed the National Policy on Injection Safety and Health Care Waste Management. This should be able to provide safe injections for curative, preventative and other health care interventions.

I am sure the strategies put forward including adequate supply of safe injection devices, behavioural change and health care waste management will go along way to improving the situation.

I strongly request all the stakeholders in the health care delivery system to fully adopt this policy in all their activities especially the development partners, districts, regulatory authorities, health professionals councils, supply systems and the users.

This policy should contribute greatly to the safety of the patients, health workers and the community at large in Uganda.

I strongly recommend the use of this document in all health sector activities.



Brig Jim. K. Muhwezi, MP  
MINISTER OF HEALTH

## **1.0 BACKGROUND**

### **1.1 PREAMBLE:**

The Uganda National Injection Safety and Health Care Waste Management Policy sets out strategies for ensuring that patients, health workers, communities and the environment are protected from risks associated with unnecessary and unsafe injections. The policy also addresses improper disposal and destruction of injection materials and other health care waste. The document will achieve this objective by providing guiding principles for safe injection practice and proper management of all health care waste.

According to WHO standards for injection safety:

“Safe injections do not harm their recipients, do not expose the health care worker to any avoidable risk, and do not result in waste that is dangerous to the community.”

Re-use of injection devices without proper sterilization and exposure to contaminated sharps and waste increases the risk of transmission of blood-borne pathogens including hepatitis B virus, hepatitis C virus and the human immunodeficiency virus.

Existing guidelines addressing injection safety and management of health care waste in Uganda are limited in scope, fragmented, and insufficient to protect all concerned. Furthermore, the monitoring and evaluation system was unable to ensure that health facilities lived up to expected injection safety and waste disposal standards of practice.

Like most African countries, Uganda does not have a policy on injection safety and health care waste management, and yet a lot of waste is being generated from injection use, laboratory and

surgical procedures as well as other medical practices. Recent surveys have also established that health care providers and consumers are confronted with significant environmental hazards due to improper and/or delayed disposal and destruction of injection and other health care waste.

Given these concerns, the Ministry of Health through a task force conducted an assessment of the injection and health care waste management practices. The baseline data from the assessment was used to develop this policy.

## **1.2 SITUATION ANALYSIS**

A national cross-sectional survey of injection safety practices in health facilities was conducted under the auspices of the Uganda National Injection Safety Taskforce (UNISTAF) from June to July of 2003. The study indicated that the most prominent factors contributing to unsafe injection practices include:-

- 1.2.1 Over-prescription of injections.
- 1.2.2 Limited availability of guidelines for health workers on injection safety practices including needle stick injuries at all health care levels.
- 1.2.3 Inadequate supply of injection materials leading to reuse of injection supplies without sterilization.
- 1.2.4 Inadequate facilities for sterilization, and
- 1.2.5 Lack of adequate facilities for collection and disposal of injection wastes.

The survey showed that over 70% of the respondents received more than three injections per year, putting Uganda among the group of countries in the sub-Saharan region with the highest use of injections. The majority (65%) of surveyed health facilities reported having experienced a shortage of disposable injection supplies in the 12 months prior to the survey. This was an issue particularly in the curative sector. This might be a reflection of current less-than-optimal logistics system (e.g. forecasting and distribution mechanisms). Furthermore, improper management of health care wastes was observed in an estimated 60% of health facilities.

The findings of this survey are consistent with the results of previous surveys which showed that children under five years received more than 10 injections per child per year. Earlier studies showed that 82% and 63% of households had syringes for family use in Mbarara and Busoga regions respectively . Practices of indiscriminate dumping, burning and burying are prevalent in a significant number of health facilities. Incineration facilities are limited, and where available, they tend to be improperly utilized. The situation is influenced by the absence of adequate health policy addressing the safe use of injections.

## **2.0 MISSION**

The mission of this policy is to minimize the risks due to unsafe injection and health care waste management practices to the patient, health workers, community and the environment.

### **2.1 OVERALL GOAL**

This policy aims at ensuring safe injection practices and proper management of health care waste. This will be achieved through appropriate procurement, distribution and monitoring of equipment and supplies, improved injection practices including management of health care waste, and increased awareness.

## **2.2 GUIDING PRINCIPLES**

- 2.2.1 Behaviors of the patients, health workers and the community significantly affect injection and waste management practices.
- 2.2.2 Appropriate procurement, distribution and monitoring of injection equipment and related supplies.
- 2.2.3 Minimal risks to patients, health workers, communities and the environment.
- 2.2.4 Capacity building for safe use of injection materials and appropriate waste management as well as supervision and monitoring of health facilities.

## **3.0 COMMUNICATION AND BEHAVIOR CHANGE.**

### **3.1 POLICY ISSUES:**

- 3.1.1 There is a high rate of irrational prescription of injections by health workers partly caused by high demand from patients.
- 3.1.2 There is a significant amount of risk to health workers due to inadequate provision of protective supplies as well as current improper practices including recapping of needles after use and inadequate disinfection of used equipment prior to sterilization.
- 3.1.3 There is a significant risk due to re-use of disposable injection materials, including sharing of injection materials by families.

3.1.4 There is indiscriminate dumping/disposal of health care waste in Health Institutions, municipalities and communities.

### **3.2 POLICY STATEMENTS:**

- Educational programs will be designed and implemented by the Ministry focusing on rational prescription of injections and reducing demand for unnecessary injections.
- Advocacy for adequate budgetary allocation for injection materials will be conducted at all levels.
- Awareness programs will be conducted through mass media and interpersonal communication emphasizing the importance of not re-using equipment and appropriate waste disposal.

### **3.3 POLICY OBJECTIVES:**

- 3.3.1 To reduce demand for injections and instead promote use of non-injectables especially for first-line treatment.
- 3.3.2 To advocate for qualified service providers who will follow the Uganda Clinical Guidelines and safe handling procedures to protect themselves and their clients.
- 3.3.3 To minimize the practice of re-using disposable needles & syringes, including sharing of devices among family members.
- 3.3.4 To provide guidelines for health workers (in both public and private sectors) and communities to avoid the danger from improper waste management practices.

### **3.4 POLICY STRATEGIES:**

- 3.3.1 Implement effective behavioral change, approaches to injection safety, targeting both health workers and communities through effective advocacy, community mobilization, communication, and creation of an enabling environment.
- 3.3.2 Training of health care workers in injection safety issues and appropriate waste disposal practices.
- 3.3.3 Educate/encourage patients to seek treatment only from qualified providers.
- 3.3.4 Support supervision of health care workers involved in administration of injections and in the process of disposal and destruction of health care waste.
- 3.3.5 Use of behavioral trials to model effective behavior change approaches for clients and health workers; to reduce unnecessary injections, reduce re-use of injection materials, discourage sharing injection materials among family members, and to safely dispose of waste immediately and destroy it within the weeks.

## **4.0 HEALTH CARE WASTE MANAGEMENT**

### **4.1 POLICY ISSUE:**

There is lack of an adequate health care waste management system for health facilities and the community.

## **POLICY STATEMENTS.**

- Every health facility shall have some one in-charge of health care waste management.
- Waste management guidelines shall be made available to health workers.
- All health workers will follow waste guidelines as elaborated in the national infection prevention and control guidelines.
- Health care waste shall be segregated at the source into pre-color coded containers.
- Sharps shall be collected into secure sharps containers or safety boxes immediately after use.
- Sharps containers will be disposed of when 3/4 full.
- The recommended final disposal method is incineration. Where Incinerators are not available; the sharps' containers shall be burnt followed by burying.

## **4.2 POLICY OBJECTIVES:**

- To provide guidelines for management of injection and other health care waste to all health facilities.
- To ensure that all health facilities have easy access to appropriate injection and other health care waste destruction facilities.
- To establish a system that ensures that proper injection and other health care waste management practices are observed at all health facilities and in the community.

### **4.3 POLICY STRATEGIES:**

- Establishment and implementation of a system for ensuring that injection and other health care waste is properly managed by the persons/facilities generating it both in the formal health sector and communities.
- Development and dissemination of guidelines for injection and other health care waste management
- Construction/installation of injection and other health care waste disposal and destruction facilities, and
- Exploration of alternative environmentally friendly technologies for destruction of these wastes.

### **5.0 LOGISTICS**

#### **5.1 POLICY ISSUE:**

Logistics functions, among which are forecasting, device selection, and distribution are inadequately addressed leading to shortages and stock-outs.

#### **5.2 POLICY STATEMENTS:**

- The ministry of health will select and specify the different injection devices that will be used at the different levels of service delivery. All devices used during service delivery will conform to the specifications above.
- Managers of facilities will enforce the timely forecasting of required injection commodities and will develop realistic budgets to support safe injection practices including safe disposal on sharps' waste.

- Auto disable syringes are mandatory for all immunization injections. Syringes with re-use prevention features will be used for all curative injections except where the ADs may not be appropriate for the procedure to be done.
- Disposable injection equipment shall not be re-used at all; neither on the same patient nor on another person.

### **5.3 POLICY OBJECTIVES:**

- 5.3.1 To ensure adequate and continuous full supply of safe injection consumables and other related medical supplies.
- 5.3.2 To, ensure safe collection, segregation, storage and transportation of sharps' injection materials and other health care waste.
- 5.3.3 To ensure safe, efficient and effective disposal of all health care waste.

### **5.4 POLICY STRATEGIES:**

- 5.4.1 Appropriate, adequate and safe product selection.
- 5.4.2 Establishment and maintenance of a secure, cost-effective safety supplies logistics system to ensure adequate supply of all necessary injection safety materials.
- 5.4.3 Strengthening and maintaining an efficient and effective logistics management information system.
- 5.4.4 Provision of appropriate logistics for safe collection, segregation, storage and transportation equipments for sharps, injection materials and other health care waste.

## **6.0 HUMAN RESOURCE DEVELOPMENT**

### **6.1 POLICY ISSUE:**

There are insufficient numbers of trained health workers and inadequate information available to those in practice on the subject of safe injection practices and health care waste management.

### **6.2 POLICY STATEMENTS:**

- The Ministry of health will ensure that enough health workers are trained and updated on safe injection administration and appropriate waste management.
- The trained health workers will be appropriately deployed.
- Injections will only be given by trained health workers.

### **6.3 POLICY OBJECTIVES:**

- 6.3.1 To re-orient health care workers on injection safety and health care waste management.
- 6.3.2 To ensure that adequate numbers of health workers are trained and appropriately deployed.

### **6.4 POLICY STRATEGIES:**

- 6.4.1 Re-orient practicing health workers at all relevant levels in injection safety and health care waste management through in-service training and supervision.

6.4.2 Train adequate numbers of health workers and deploy them appropriately at all levels of the health system including public and private sector.

## **7.0 MONITORING AND EVALUATION**

### **7.1 POLICY ISSUE:**

There is inadequate monitoring and evaluation both in the public and private sectors regarding injection safety and health care waste management.

### **POLICY STATEMENTS:**

The ministry will regularly supervise all health facilities both government and non government to ensure that safe injection and health care waste disposal practices are adhered to. Where necessary refresher courses will be recommended for some of the health workers.

### **7.2 POLICY OBJECTIVES:**

7.2.1 To develop and implement mechanisms for monitoring and evaluation in both public and private health care facilities.

7.2.2 To use the monitoring and evaluation data for decision making on injection safety and health care waste management.

7.2.3 To enforce established monitoring and evaluation mechanisms.

7.2.4 Establish a system for detection, investigation and management of Adverse Events Following Injections (AEFI).

### **7.3 POLICY STRATEGIES:**

- 7.3.1 To develop monitoring and evaluation mechanisms for both public and private health care facilities.
- 7.3.2 To promote participation in monitoring and evaluation mechanisms in both the public and private health care facilities.
- 7.3.3 To train supervisors to analyze and use data from monitoring and evaluation activities.
- 7.3.4 Build capacity for detection, investigation and management of AEFI.

### **8.0 INSTITUTIONAL FRAMEWORK**

This policy will be implemented within the National Health Policy framework. In this context, the Ministry of Health will be responsible for: dissemination, resource mobilization, coordination, supervision of implementation, monitoring and evaluation. The Directorate of Clinical and Community Health of the Ministry of Health will be the central co-ordination point. In addition, the infection control units of the National referral hospitals shall be responsible for implementing this policy.

At the district level, the directorate of health services shall serve as the responsible coordinating body for ensuring the implementation of this policy in all health facilities. At all levels national interests will be taken care of both in the public and private sector in the delivery of health care.

At the health sub-district, the Department of Community Health shall be responsible for ensuring implementation in all health facilities and the community.

All professional and non-professional, health-related organizations, as well as practitioners in the private sector shall be responsible for ensuring that their members comply with this policy.

## **9.0 REGULATION**

The National Drug Authority shall ensure that health commodities and their waste management comply with national regulations and standards.

National Environmental Management Authority (NEMA) will be responsible for advisory and regulatory matters related to environmental control standards associated with management of injection and other health care waste.

## **10.0 FINANCIAL IMPLICATIONS**

Ministry of Health, development partners, bilateral Agencies, local governments, and NGOs will finance the implementation of this policy. The Ministry of Health and its services at all levels, as well as its development partners, including public, private and NGO sectors shall include injection safety and injection waste strategies in their budgets. These budgets should include adequate costs for to support the implementation of this policy in the following areas:

10.1 Communication and behavior change.

10.2 Waste management, including waste destruction units appropriate for each level, as well as necessary transportation costs for distribution to sub-units under their jurisdiction.

10.3 Logistics, including transport costs.

10.4 Human Resource Development, and

10.5 Monitoring and Evaluation.

## **11.0 ENVIRONMENTAL PROTECTION**

The management of injection waste shall be consistent with environmental control standards, with efforts specifically made to minimize the contamination of underground water resources and the emission of organic pollutants such as Dioxin and Furan.