Mr. John DeSoto
Councilmember and Vice-Chair
City Council
City and County of Honolulu
530 South King Street
Honolulu, Hawaii 96813

Dear Mr. DeSoto:

Response to July 12, 1990 Letter
Medical Waste Disposal at Waimanalo Gulch Landfill

In response to your request we have reviewed the Department of Health's (DOH) guidelines and rules for Management and Disposal of Infectious Waste with the assistance of Roger Fujioka, School of Public Health; Roy Takekawa, Environmental Health and Safety Office; and Environmental Center staff members, Jacquelin Miller and William Grannis.

Our reviewers concurred that the DOH rules as set forth in Title 11, Chapter 104, adequately provide for effective management and disposal of infectious wastes in Hawaii. If infectious wastes are handled following the DOH guidelines, their final disposal in an approved landfill is acceptable. Although medical waste generators in other areas frequently rely on incineration for disposal, reports of inadequate emission controls associated with private incinerators on the mainland suggest that incineration is not categorically preferable to landfill disposal.

Potential safety risks to handlers of infectious waste, particularly sharps, promote the advisability of autoclaving infectious wastes and segregating sharps prior to transport to an incineration facility such as Oahu's H-Power. We have outlined below some of our reviewers other suggestions regarding proper handling, enforcement and monitoring of infectious wastes.

Proper Handling

Emphasis should be placed on ensuring that waste handlers are properly trained. Supervisors of infectious waste generating facilities should be accountable for ensuring that all workers comply with proper procedures. The DOH should provide educational information to all infectious waste generators in the form of pamphlets, videos, etc...
Enforcement

We recommend that the penalty for improper handling of infectious wastes be increased over the "not to exceed one thousand dollars for each separate offense" as stated in Chapter 104, reflecting the great potential danger associated with mishandling of infectious waste. Such an increase would be an additional disincentive to anyone inclined to cut corners to save on disposal costs.

Monitoring

There are two dimensions to the disposal of infectious waste: (1) regulatory concerns for management of long term effects of normal disposal practices as dealt with in Chapter 104; and, (2) public health concerns associated with extraordinary situations. Infectious waste management should accommodate both normal operating procedures and emergency situations. Our reviewers have stated that disposal of blood, blood products, body fluids and pathological wastes in approved waste water disposal systems is satisfactory from a public health perspective as long as DOH rules are followed. In cases such as the recently disclosed raw sewage discharges at the Hawaii Kai Sewage Treatment Plant, the possibility of public health hazard posed by infectious waste in the sewage may be increased significantly. One way to compensate for the breakdown of regulatory safeguards due to such non-compliance is to implement a monitoring program like the Blue Water Program proposed by the DOH which would establish 200 water quality monitoring stations statewide.

We hope our response sufficiently addresses your concerns.

Your truly,

John T. Harrison, Ph.D.
Environmental Coordinator

cc: Bruce Anderson, DOH
  L. Stephen Lau
  Roy Takekawa
  Roger Fujioka
  Harlan Hashimoto
  Jacquelin Miller
  William Grannis