

Statutory Notification (S.R.O.)
GOVERNMENT OF PAKISTAN
MINISTRY OF CLIMATE CHANGE

NOTIFICATION

Islamabad, August 2, 2022

S.R.O No. ()/2022. In exercise of the powers conferred by Section 31 read with sub-section (xxxiv) of Section 2 of the Pakistan Environmental Protection Act, 1997 (XXXIV of 1997), the Pakistan Environmental Protection Agency, with the approval of the Federal Government, is pleased to notify the following Regulations, namely: -

1. Short Title and Commencement. –

- (1) These rules may be called the Hospital Waste Management Rules, 2022.
- (2) These shall come into force at once.

2. Definitions; -

- (1) In these rules, unless there is anything repugnant in the subject or context, -
 - a) "**Act**" means the Pakistan Environmental Protection Act, 1997 (XXXIV of 1997);
 - b) "**Autoclave**" an autoclave is a machine that uses steam under pressure to kill harmful bacteria, viruses, fungi, and spores on items that are placed inside a pressure vessel. The items are heated to an appropriate sterilization temperature for a given amount of time
 - c) "**Chemical waste**" includes chemicals from diagnostic and experimental work, cleaning processes, housekeeping and disinfecting procedures, mercury waste such as from broken clinical equipment and spillage, and cadmium waste such as from discarded batteries;
 - d) "**Genotoxic waste**" includes cytotoxic drugs and outdated materials, vomitus, feces, or urine from patients treated with cytotoxic drugs or chemicals, and materials such as syringes and vials contaminated from the preparation and administration of such drugs;
 - e) "**Government**" means the Federal Government in which the hospital is located;
 - f) "**Health Officer**" means any person designated by the Federal Agency for these rules by notification in the official gazette.

- g) **“Healthcare professional”** means a medical practitioner and dentist registered with the Pakistan Medical Commission, nurse, midwife, community midwife, female family workers, or lady health visitor registered with the Pakistan Nursing Council, a Tabib registered with the National Council for Tibb or homeopathic practitioner registered with the National Council for Homeopathy or pharmacist registered under the Pharmacy Council of Pakistan Act, 1967 (XI of 1967) or paramedic, allied health professional or physiotherapist, psychologist or any other person qualified and permitted by law to provide any medical, surgical treatment, or other healthcare services as well as any a person qualified to perform any health-related test on the human body or test anybody fluid under a laboratory process and provide results of such test to confirm or determine any health condition or physical or mental ailment;
- h) **"Healthcare services"** include any medical, surgical, dental, or allied health. ambulatory, patient accommodation, screening or diagnostic services, treatment of persons suffering from or believed to be suffering from any disease, injury pain or disability of mind or body, burn or hurt treatment, wound dressing, physiotherapy, acupuncture, any service for curing or alleviating any abnormal condition of the human body or mind by application of any apparatus, equipment, instrument, or device or any other medical technique or method, hemodialysis treatment, preventive or promotive health treatment, services at healthcare establishments by healthcare professionals;
- i) **“Hospital”** includes a clinic, healthcare facility, laboratory, pathology lab, dispensary, pharmacy, nursing home, health unit, maternity center, blood bank, autopsy center, mortuary, hair surgery center, research institute dealing with living organisms, cosmetic surgery clinic, hair transplant, aesthetic clinic, and veterinary institutions, includes but not limited to any other facility involved in health care and biomedical activities;
- j) **"Hospital waste management"** includes but is not only limited to segregation, collection, transportation, storage, disposal, and minimization and reuse of hospital waste

- k) **"Healthcare facility"** means an office, premises, or institution providing care or treatment of diseases, whether physical, mental, or emotional, or other medical, physiological, or psychological conditions, including but not limited to, hospitals, rehabilitation hospitals or other clinics, including weight control clinics, nursing homes, homes for the aging or chronically ill, laboratories, and offices of surgeons, chiropractors, physical therapists, physicians, dentists, and all specialists within these professions. This definition shall include all waiting rooms, hallways, private rooms, semiprivate rooms, and wards within health care facilities.
- l) **"Incinerator"** is an instrument or apparatus for burning hazardous waste material, especially hospital waste, at high temperatures being operated by the hospital at not less than 1100 degrees until it is reduced to ash.
- m) **"Infectious waste"** means waste contaminated by any type of pathogens such as bacteria, viruses, parasites, or fungi and includes cultures from laboratory work, waste from surgeries, autopsies, infected patients, discarded or disposable materials and equipment which have been in contact with such patients and infected animals from healthcare facilities;
- n) **"Inspection"** means the inspection and examination of the healthcare facilities by an inspection team;
- o) **"Inspection team"** means a team comprising of authorized persons and any other persons having relevant qualifications and experience constituted by the Federal Agency;
- p) **"Local council"** means a local council in the geographical limits of which the hospital is located;
- q) **"Medical Superintendent"** means the Head of the hospital by whatever designation called and includes but is not limited to Chief Executive Officer / Managing Director / Executive Director;
- r) **"Pharmaceutical waste"** includes expired or unused pharmaceutical products, spilled contaminated pharmaceutical products, surplus drugs, vaccines or sera, and discarded items used in handling pharmaceuticals such as bottles, boxes, gloves, masks, tubes, or vials and any discharge from pharmaceutical facility;
- s) **"Radioactive waste"** includes liquid, solid and gaseous waste contaminated with radionuclides generated from in-vitro analysis of body tissue and fluid, in-vivo body organ imaging and tumor localization, and investigation and therapeutic procedures;

- t) **“Registration”** means the registration of any hospital or healthcare facility which is producing hospital waste to be registered with a federal Agency under these rules;

(2) The words and expressions used but not defined in these rules shall have the same meaning as are assigned to them in the Act.

3. Responsibility for Hospital Waste Management. –

Every Medical Superintendent of a Hospital or healthcare facility shall be responsible for the proper management of hospital waste generated by its facility till its final disposal in accordance with the provisions of the Act and Rules 16 to 22.

4. Hospital Waste Management Team. –

(1) The Medical Superintendent shall constitute a Waste Management Team comprising the following by whatever designation called namely: -

(a) Medical Superintendent	Chairperson
(b) Chief Pharmacist	Member
(c) Pathologist / Infection Control Officer	Member
(d) Radiologist	Member
(e) Senior Matron	Member
(f) Head of Administration	Member
(g) Hospital Engineer	Member
(h) Head of the sanitation staff	Member
(i) Other staff members as the Medical Superintendent may designate	Member
(j) A representative of a hospital nominated by the Federal Agency	Member

- (2) In a hospital/health care service where the posts under sub-rule (1) do not exist, the Medical Superintendent shall designate another staff member to perform the duties and responsibilities of the holder of such posts under rules 8 to 14.
- (3) The members of the hospital waste management team shall be informed in writing of their duties and responsibilities as provided under rules 8 to 14.
- (4) One of the members of the hospital waste management team shall be designated by the Medical Superintendent as the waste management officer, who shall act as the Secretary of the hospital waste management team.

5. Duties and Responsibilities of the Hospital Waste Management Team. –

A hospital waste management team shall be responsible for the preparation, monitoring, periodic review, revision, or updating, if necessary, and implementation of the hospital waste management plan, and for supervision of all actions taken in compliance with the provisions of these rules.

6. Meetings of Hospital Waste Management Team.

- (1) The meeting of a hospital waste management team shall be held at least once a month.
- (2) One-third of the members of the hospital waste management team shall constitute the quorum for a meeting.

7. Duties and responsibilities of Medical Superintendent -,

The medical superintendent shall perform the following duties;

- (a) constitute the hospital waste, management team;
- (b) designate the waste management officer;
- (c) facilitate meetings of the hospital waste management team and ensure I implementation of its decisions;
- (d) supervise implementation, monitoring, and review of the hospital waste management plan and ensure that it is kept updated;
- (e) arrange for a waste audit of the hospital/healthcare facility by an external agency as may be designated for the Government, involving analysis of the existing waste stream and assessment of existing waste management practices;
- (f) allocate sufficient financial and manpower resources to ensure efficient and effective implementation of the hospital waste management plan; and
- (g) ensure adequate training and refresher courses for the concerned hospital staff.

8. Duties and Responsibilities of the Heads of Departments. –

The Heads of Departments shall be responsible for the proper management of waste generated in their respective departments, and in particular, shall,-

- (a) ensure that all doctors, nurses, clinical and staff in their respective departments are aware of, and where required properly trained, in waste management procedures;
- (b) arrange proper supervision of the sanitary staff and sweepers to ensure that they always comply with hospital waste management procedures; and
- (c) liaise with the hospital waste management officer for effective monitoring and reporting of mistakes and errors in the implementation of the Waste Management Plan.

9. Duties and Responsibilities of Pathologist or Infection Control Officer-

A pathology or infection control officer shall be responsible for,-

- (a) giving advice regarding the control of infectious diseases and the standards of the waste disposal system;
- (b) identifying training requirements for each category of staff; and
- (c) organization of training and refreshers courses on safe waste management procedures.

10. Duties and Responsibilities of the Chief Pharmacist. –

A chief pharmacist shall be responsible for the sound management of pharmaceutical stores and in particular shall, -

- (a) advising on the formulation of appropriate procedures for the management of pharmaceutical waste, and coordinating the implementation of these procedures; and

- (b) ensure that the concerned hospital staff members receive adequate training in pharmaceutical hospital waste management procedures.

11. Duties and Responsibilities of a Radiologist. –

A radiologist shall be responsible for the sound management of radioactive waste and in particular shall, -

- (a) advising on the formulation of the appropriate procedure for the management of radioactive waste and coordinating the implementation of these procedures; and
- (b) ensure that the concerned hospital staff members receive adequate training in radioactive waste management procedures.

12. Duties and Responsibilities of Senior Matron and Head of Administration.-

A senior matron and head of administration shall be responsible for ensuring the training of nursing staff, laboratory staff, medical assistants, and sanitary staff and sweepers in hospital waste management procedures and basic personal hygiene.

13. Duties and Responsibilities of Hospital Engineer. –

A hospital engineer shall be responsible for the installation, maintenance, and safe operation of waste storage facilities and waste handling equipment and installed the hospital incinerator and shall ensure that the concerned hospital staff members are properly trained for these purposes.

14. Duties and Responsibilities of Hospital Waste Management Officer. –

A hospital waste management officer shall, in addition to his duties and responsibilities, be responsible for the day-to-day implementation and monitoring of the hospital waste management plan and in particular, shall,-

(a) for waste collection, -

- (i) ensure internal collection of waste bags and waste containers and their transport to a central storage facility of the hospital on daily basis;
- (ii) liaise with the supplies department to ensure that an adequate supply of waste bags, containers, protective clothing, and collection trolleys are available at all times;
- (iii) ensure that sanitary staff and sweepers immediately replace used bags and containers with the new bags and containers of the same type and where a waste bag is removed from containers, is properly cleaned before a new bag is fitted therein; and
- (iv) directly supervise the hospital sweepers assigned to collect and transport the waste;

(b) for waste storage, -

- (i) ensure the correct use of the central storage facility and that it is kept secure from unauthorized access; and
- (ii) prevent unsupervised dumping of waste bags and waste containers on the hospital premises, even for a short period;

(c) for waste disposal, -

- (i) co-ordinate and monitor all waste disposal operations, and for this purpose meet regularly with the concerned representative of the local council;
- (ii) ensure that the correct methods of transportation of waste are used on-site to the central storage facility or incinerator if installed, and off-site by the local council; and
- (iii) ensure that the waste is not stored on the hospital premises for longer than twenty-four hours, by coordinating with the incinerator operations and with the local council;

(d) for staff training and information, -

- (i) liaise with the heads of departments, head of administration, and senior matron to ensure that all doctors, clinical, staff, nursing staff, laboratory staff, and medical assistants are fully aware of their duties and responsibilities under the hospital waste management plan; and
- (ii) ensure that sanitary staff and sweepers are not involved in waste segregation and that they only correctly handle waste bags and containers; and

(e) for incident management and control, -

- (i) ensure that emergency procedures are available at all times and that all staff members are aware of the action to be taken by them;
- (ii) investigate, record, and review all incidents reports regarding hospital waste management; and
- (iii) record the quantities of waste generated by each department every week.

15. Hospital Waste Management Plan. -

(1). A hospital waste management plan shall be prepared by a hospital or health care facility for approval by the hospital waste management team and shall be based on international practices **inconsistent with Act**.

(2). The hospital waste management plan shall include,-

- (a) a plan of the hospital showing the waste generation points for every ward and department, indicating whether each point is for infectious and non-infectious waste,

and showing the sites of the central storage facility for risk waste and the central storage facility for non-risk waste;

(b) details of the types, numbers, and estimated costs of containers, waste bags, and trolleys required annually;

(c) timetables including frequency of waste collection from each ward and department;

(d) duties and responsibilities for each of the different categories of the hospital staff members who shall generate hospital waste and be involved in the management of the waste;

(e) an estimate of the number of staff members required for waste collection;

(f) procedures for the management of waste requiring special treatment such as autoclaving before final disposal;

(g) contingency plans for storage or disposal of risk waste in the event of breakdowns of incinerators, or of maintenance or collection arrangements

(h) training courses and programs on waste management; and

(i) emergency procedures.

(3) A representative of a local council responsible for the collection and disposal of waste from the hospital shall be consulted in preparing and finalization of the hospital waste management plan.

(4) The hospital waste management plan shall be regularly monitored, reviewed, revised, and updated by the hospital waste management team as and when necessary.

16. Hospital Waste Segregation. –

(1) Hazardous waste shall be separated from waste at the ward bedside, operation theatre, laboratory, or any other room in the hospital where the waste is generated by a doctor, nurse, or other person generating the waste.

(2) All disposal of medical equipment and supplies including syringes, needles, plastic bottles, drips, and infusion bags shall be cut or broken and rendered non-reusable at the point of use by the person using the same, or in case any such used by such person.

(3) All hazardous waste other than sharps, large quantities of pharmaceuticals, or chemicals, waste with a high content of mercury or cadmium such as broken thermometers or used batteries, or radioactive waste shall be placed in a suitable container made of metal or tough plastic, with a pedal type or swing lid, lined with a strong yellow waste bag. The bags shall be removed when it is not more than three-quarters full and sealed, preferably with self-locking Plastic sealing tags and not by stapling. Each bag shall be labeled, indicating the date, point of production, ward, and hospital, quantity, and description of the waste and prominently displaying the biohazard symbol. The bags removed should be immediately replaced with a new one of the same type.

- (4) Sharps including the cut or broken syringes and needles shall be placed in metal or high-density plastic containers resistant to penetration and leakage designed so that items can be dropped in using one hand and no item can be removed. The containers shall be colored yellow and marked "DANGER! CONTAMINATED SHARPS". The sharp container shall be closed when three-quarters full. If the sharp container is to be incinerated, it shall be placed in the yellow waste bag with the other risk waste.
- (5) Large quantities of pharmaceutical waste shall be returned to the suppliers. Small quantities shall be placed in a yellow waste bag preferably after being crushed, where this can be done safely. Large quantities of chemical waste and waste with a high content of mercury or cadmium shall not be incinerated but shall be placed in chemical-resistant containers and sent to specialized treatment facilities.
- (6) Other than hazardous waste shall be placed in a suitable container lined with a white waste bag. Adequate numbers of non-risk waste containers shall be placed in all areas of the hospital and notices affixed to encourage visitors to use them.

17. Hospital Waste Collection. –

- (1) Waste shall be collected by the schedules specified in the hospital waste management plan.
- (2) Sanitary staff and sweepers shall, when handling waste, wear protective clothing at all times including face masks, industrial aprons, leg protectors, industrial boots, and disposable or heavy-duty gloves, as required.
- (3) Sanitary staff and sweepers shall ensure that,
 - (a) waste is collected at least once daily;
 - (b) all waste bags are labeled before removal, indicating the point of production, ward, hospital, and contents;
 - (c) the removed waste bags and containers are immediately replaced with new ones of the same type; and
 - (d) where a waste bag is removed from a container, the container is properly cleaned before a new bag is fitted therein.

18. Hospital Waste Transportation. –

- (1) For on-site transportation, a waste collection trolley shall be free of sharp edges, easy to load, unload, and clean, and preferably a stable three or four-wheeled design with high sides. The trolley shall be cleaned regularly.
- (2) The sealed waste bags shall be carefully loaded by hand onto the trolley to minimize the risks of punctures or tears.
- (3) Yellow-bagged infectious waste and white-bagged non-infectious waste shall be collected on separate trolleys which shall be painted or marked in the corresponding colors.
- (4) The collection route shall be the most direct one from the final collection point to the central storage facility designated in the waste management plan. The collected waste shall not be left even temporarily anywhere other than at the designated central storage facility.
- (5) Transportation off-site shall unless otherwise agreed, be the responsibility of the local council which shall ensure that,-

- (a) all yellow-bagged infectious waste is collected at least once daily;
- (b) all staff members handling yellow-bagged infectious waste wear protective clothing;
- (c) yellow-bagged infectious waste is transported separately from all other waste;
- (d) vehicles or skips are only used for the carriage of yellow-bagged infectious waste and are free of sharp edges, easy to load and unload by hand, easy to clean and disinfect, and fully enclosed, preferably with hinged and lockable shutters or lids, to prevent any spillage in the hospital premises or on the highway during transportation;
- (e) all concerned staff members are properly trained in the handling, loading, unloading, transportation, and disposal of yellow-bagged infectious waste, and are fully aware of emergency procedures for dealing with accidents and spillages;
- (f) all vehicles carry an adequate supply of empty waste bags, protective clothing, cleaning tools, and disinfectants to clean and disinfect any spillage;
- (g) the transportation of waste is properly documented, and all vehicles carry a consignment note from the point of collection to the incinerator or landfill or other final disposal facilities; and
- (h) all vehicles are cleaned and disinfected after use.

19. Hospital Waste Storage. –

(1) A separate central storage facility shall be provided for yellow-bagged infectious waste with a sign prominently displaying the biohazard symbol and mentioning the facility stores hazardous waste.

(2) The designated central storage facility shall, -

- be located within the hospital premises close to the incinerator, if installed, but away from food storage or food preparation areas;
- be large enough to contain all the risk waste produced by the hospital with spare capacity to cater for collection or incinerator breakdowns;
- be easy to clean and disinfect with an impermeable hard-standing base, plentiful water supply, and good drainage, lighting, and ventilation;
- have adequate cleaning equipment, protective clothing, waste bags, and containers located nearby; and
- be easily accessible to collection vehicles and authorized staff, but enclosed and secure from unauthorized access including inaccessible to animals, insects and birds.

- (3) No materials other than yellow-bagged waste shall be stored in the central storage facility.
- (4) No waste shall be stored at the central storage facility for more than twenty-four hours: Provided that in case of an emergency where infectious waste is required to be stored for more than twenty-four hours, it shall be refrigerated at a temperature of 3⁰ C to 8⁰ C.
- (5) Containers with radioactive waste shall be stored in a specifically marked area in a lead-shielded storage room.
- (6) Containers with chemical waste which are to be specialized treatment facilities shall also be stored in a separate room.
- (7) The central storage facility shall be thoroughly cleaned in accordance with procedures stipulated in the hospital waste management plan.

20. Hospital Waste Disposal. –

- (1) Depending upon the type and nature of the waste material and the organisms in the waste, infectious waste shall be inactivated or rendered safe before final disposal by a suitable thermal, chemical, irradiation incineration, filtration, or other treatment methods, or by a combination of such methods involving proper validation and monitoring procedures. Effluent from the waste treatment methods shall also be periodically tested to verify that it conforms to the National Environmental Quality Standards before it is discharged into the sewerage system.
- (2) Yellow-bagged infectious waste shall be disposed of by burning in an incinerator, by burial in a landfill, or by any other method of disposal approved by the Federal Agency.
- (3) Sharps containers that have not been placed in yellow waste bags for the incinerator, shall be disposed of by encapsulation or other methods of disposal approved by the Federal Agency.
- (4) The method of disposal, whether by burning in an incinerator or by burial in a landfill or otherwise, shall be operated by a hospital only after approval of its Environmental Impact Assessment in accordance with the provisions of section 12:
Provided that hospitals, local councils, or other persons already using an incinerator or landfill on the date of commencement of these rules shall submit an Initial Environmental Examination in respect thereof to the Federal Agency or a Provincial Agency concerned within two months from the said date and may continue to use the incinerator or landfill pending decision on the EIA.
- (5) All hazardous waste delivered to an incinerator shall be burned within twenty-four hours.
- (6) Ash and residues from incineration and other methods shall be placed in robust, non-combustible containers and shall be sent to the local council's / civic authority's designated infectious waste landfill site.
- (7) Landfills shall be located at sites with minimal risk of pollution of groundwater and rivers. Access to the site shall be restricted to authorized personnel only. Risk waste shall be buried in a separate area of the landfill under a layer of earth or non-infectious waste of at least one-meter depth which shall then be compacted. The landfill shall be regularly monitored by the local council/civic authority to check groundwater

contamination and air pollution. The local council or civic authority shall also ensure that the landfill operators are properly trained, especially in safe disposal procedures, use of protective equipment, hygiene, and emergency response procedures.

- (8) Daily collection of infectious waste from hospitals shall be taken by the vehicles of the local council immediately to the designated landfill site or incinerator by the most direct route in accordance with prior scheduling of collection times and journey times.
- (9) Radioactive waste which has decayed to background level shall either be buried in the landfill site or incinerated in accordance with the procedure prescribed by PNRA.

Explanation. –

An incineration facility for radioactive waste shall require, in addition to approval of its EIA by the Federal agency, registration with and the issue of license by PNRA, and reconciliation with the requirements of the Pakistan Nuclear Regulatory Authority Ordinance 2001 (III of 2001) and the guidelines made thereunder in connection with management and disposal of radioactive waste.

- (10) All liquid infectious waste shall be discharged into the sewerage system only after being properly treated and disinfected.

Explanation I.-

Liquid radioactive waste shall be discharged into the sewerage system only after it has decayed to the background level and after it has been ensured that the radioactive materials are soluble and dispersible in water, failing which it shall be filtered.

Explanation II.-

Radioactive waste containing Tritium and Carbon-14 isotopes shall be stored separately and shipped to the disposal site of the Pakistan Atomic Energy Commission, Karachi Nuclear Power Plant (KANUPP), Karachi, or Pakistan Institute of Science & Technology (PINSTECH), Islamabad.

- (11) In the case of gaseous radioactive waste, portable filter assemblies shall be used to extract iodine and xenon. The used filters shall be treated as solid radioactive waste.

21. Accidents and Spillages. –

- (1) In case of accidents or spillages, the following action shall be taken, namely:-

- (a) the emergency procedures mentioned in the hospital waste management plan shall be implemented immediately;
 - (b) the contaminated area shall be immediately evacuated if required;
 - (c) the contaminated area shall be cleared and, if necessary, disinfected;
 - (d) exposure of staff members shall be limited to the extent possible during the clean-up operation, and appropriate immunization may be carried out, as required; and
- (2) any emergency equipment used shall be immediately replaced in the same location from which it was taken. All hospital staff members shall be properly trained and prepared for emergency response including procedures for the treatment of injuries, clean-up of the contaminated area, and prompt reporting of all incidents of accidents, spillages, and

near-misses.

- (3) A Waste Management Officer shall immediately investigate, record, and review all such incidents to establish causes and shall submit his report to a Waste Management Team.
- (4) The Waste Management Team shall review the report, and where necessary shall amend the Waste Management Plan to prevent the recurrence of such incidents and take further action as may be required.

22. Waste Minimization and Reuse. –

(1) To minimize hospital waste, each hospital shall introduce,-

- (e) purchasing and stock control, involving careful management of the ordering process to avoid overstocking, particularly about date-limited pharmaceutical and other products, and to accord preference to products involving low amounts of packaging;
- (f) waste recycling programmes involve the return of unused or waste chemicals in quantity to the supplier for reprocessing, return of pressurized gas cylinders to suppliers for refilling and reuse, sale of materials such as mercury, cadmium, nickel, and lead acid to specialized recyclers, and transportation of high-level radioactive waste to the original supplier; and
- (g) waste reduction practices in all hospital departments.

(2) To encourage reuse, each hospital shall separately collect and sterilize, either thermally or chemically in accordance with approved procedures, surgical equipment, and other items which are designed for reuse and are resistant to the sterilization process.

23. Inspection. –

- (1) A health officer may inspect any hospital, incinerator, or landfill located within the area of his jurisdiction to check that the provisions of these rules are being complied.
- (2) The Government shall constitute a hospital complaint scrutiny committee for Islamabad Capital Territory, comprising two medical superintendents of hospitals owned by the Government, one of which shall be the chairman of the committee, and one of a private sector hospital:
- (3) If a health officer discovers any contravention of any provision of these rules, he shall report the same to the concerned hospital complaint scrutiny committee.
- (4) The hospital complaint scrutiny committee shall review details of the contravention reported by the health officer and after giving an opportunity of being heard to the duly authorized representative of the hospital or incinerator or landfill, recommend, -
 - (a) that no further action be taken in the circumstances of the case;
 - (b) that another inspection be carried out within a specified period not exceeding one month, if the hospital or incinerator or landfill has taken steps to comply with the rules contravened;
 - (c) that action is initiated against the person responsible through the District Health Officer or a local council or the Federal agency or the Provincial agency concerned as the case may be.

24. Registration of Hospital/Healthcare Facility.-

(1). No hospital or healthcare facility shall render any healthcare service unless it is registered with the Federal Agency as provided under regulations.

(2) The registration/renewal shall be valid for 3 years from the date of issuance of registration/renewal.

25. Registration / Renewal Fee. –

The registration /renewal fee shall be deposited in the “Clean Environment Fund” as prescribed under regulations.

26. Compliance Monitoring. –

All hospitals and healthcare facilities shall submit compliance monitoring reports to Federal Agency every quarter in accordance with Act, Rules, and regulations on a prescribed proforma.

27. Environmental Audit:

Federal Government shall authorize any other Government institution to conduct an environmental audit of such health care service in consultation with the Federal Agency in compliance with clause (I) of sub-section (1) of Section 6 of the Act.

28. Hospital Waste Management Advisory Committee. –

(1). The Federal Government shall by notification in the official Gazette, constitute a hospital waste management advisory committee for the Islamabad Capital Territory comprising,-

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| (a) Secretary, Ministry of Health or nominated officer no below Additional Secretary | Chairman |
| (b) Director General, Environment Cell, CDA | Member |
| (c) Director-General, Federal Agency | Member |
| (d) President, Pakistan Medical Association or his representative | Member |
| (e) Executive Director, Pakistan Institute of Medical Sciences | Member |
| (f) Medical Superintendent, Federal Government Services Hospital | Member |
| (g) Director, Health Services Academy | Member |
| (h) Chief Executives of two hospitals in the private sector. | Members |
| (i) Representative of two non-government organizations | Members |
| (j) Director (Lab/NEQS), Pak-EPA. | Member/ Secretary |

(2) The hospital waste management advisory committee shall,-

- (a) periodically review the implementation of the rules and recommend amendments thereto; and
- (b) recommend adoption of such policy measures, plans, and projects as it may consider necessary for the effective management of hospital waste in the Islamabad Capital Territory and Provinces, as the case may be.

29. Non-compliance. –

Subject to Section 17 of the Act, non-compliance with these rules is punishable as prescribed.

30. Phased implementation. –

The Federal Government may, by notification in the official Gazette, exempt any class of hospital or healthcare facility from all or any of the provisions of these rules.

31. Applicability of section 14.-

Each hospital generating hazardous waste shall apply to the Federal Agency for issuance of a license for handling hazardous substances and the provision of section 14 shall apply for granting such license.

32. Repeal, Savings, and Succession. –

(1) The Hospital Waste Management Rules, 2005 have been repealed herewith.

(2) Notwithstanding the repeal of the Hospital Waste Management Rules, 2005, any orders passed, notification issued, approval granted, action taken, proceeding commenced, right acquired liabilities incurred, penalties, rates, fee or charges levied, things done, or action taken under any provision of that Rules shall, so far as they are not inconsistent with the provision of these Rules, be deemed to have been made, passed, issued, approval granted, commenced, acquired, incurred, levied, done or taken under these Rules.