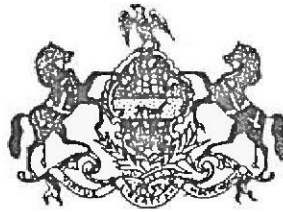


JAMES H. CLARK, MEMBER
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HARRISBURG, PENNSYLVANIA 17120-0028
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COMMITTEES

APPROPRIATIONS
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HOUSE OF REPRESENTATIVES
COMMONWEALTH OF PENNSYLVANIA
HARRISBURG

Ladies and Gentleman in an effort to better understand the *immediate* reasons for the introduction of this legislation by Rep. Hagaraty and myself, it may be useful to summarize the events and circumstances surrounding the conflict over the improper incineration of waste under a type O burning permit at Lankenau Hospital. As early as 1987, DER's involvement with Lankenau Hospital through inspections was producing conflicting evidence. In 1987, DER inspected the incineration plant of the hospital, focusing only on the operational parameters of the burning unit, not on the content of the waste being incinerated. At the time, the incineration was found to be in technical compliance. In a personal meeting with Mr. Leon Gonshur, Regional Director of DER in Norristown, we were informed that these 1987 inspections revealed evidence that the hospital had in fact burned pathological waste in the past. Although Mr. Gonshur was unable to cite how this evidence was obtained, he candidly admitted that the 1987 and subsequent inspections should have focused on the content of waste matter and not just on the technical aspects of operation. Despite the fact that evidence existed of a violation by the hospital of their Type O permit, no penalties or formal compliance action was taken. Instead, DER chose to agree with the

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hospital that Lankenau would not burn pathological waste in the future.

In November of 1988, following mounting criticism and complaints by area residents, township commissioners, and other appointed officials, another technical inspection was taken. Despite the problems voiced by these groups, the hospital was again found to be in technical compliance. Finally, in December of 1988 a joint air quality and technical inspection was done. At this point, DER admitted to evidence of the burning of infectious waste and the hospital was notified that they were not in compliance with their permit. Shortly before DER suspended the hospital's burning permit, Lankenau officials themselves volunteered to cease operation of the incinerator. At this point the incinerator remains closed pending submission of a multi-faceted plan for proper waste segregation, monitored operation of an improved burning unit and increased compliance measures.

While acknowledging such problems as DER understaffing, it is most upsetting to Rep. Hagarty and myself that such important differences between the Solid Waste Division of DER and the Air Quality Division as to what does or does not constitute legal burning

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cannot produce a concensus for the benefit of health and safety for the area residents. As early as 1987, written evidence existed, which was voluntarily submitted by the hospital to DER listing the details of exactly what was being burned on a daily and weekly basis at Lankenau Hospital. In summary it seems to us that the community's concern regarding risks to their health cannot be adequately addressed by an investigation by the same agency that has shown no inclination in the past to enforce the law in this episode. We feel that ~~the~~ ^{HB 1175} ~~legislation outlined here today~~, is absolutely to ensure that circumstances such as the violations at Lankenau Hospital will not occur over such a prolonged period time in other areas in our Commonwealth.

The Lankenau Hospital

Lancaster Avenue west of City Line • Philadelphia, Pennsylvania 19151

215-645-2000

RECEIVED
NORRISTOWN
JAN 16 1987

January 14, 1987

Commonwealth of PA
Department of Environmental Resources
1875 New Hope Street
Norristown, PA 19401

Attention: Mr. Philip Bedein, P.E.

RE: INCINERATOR

Dear Mr. Bedein:

As a follow up to our letter of January 12, and in accordance with your request, we are listing below some of the items which make up the infectious waste which is incinerated daily at the hospital:

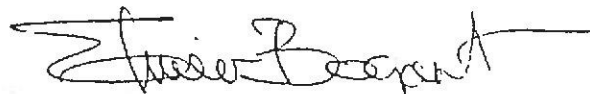
- Dressings
- Sharps
- Membrane oxygenators
- Disposable mattress pads
- Dialysis unit wastes
- Blood and blood products
- Isolation wastes
- Cultures and stocks of etiologic agents
- Contaminated laboratory wastes
- Contaminated food and other products

These wastes are placed in red plastic bags, to distinguish them from other hospital waste, and transported in special carts to the incinerator.

We are enclosing copies of letters sent to Lower Merion Township and Montgomery County Planning Commission, along with proof of delivery slips.

If anything further is required, please let me know.

Very truly yours,



ELMER J. BOGART
Director of Maintenance/
Plant Facilities