To,

Date 14.06.2018

The Environmental Engineer, BMW Cell Delhi Pollution Control Committee, Department of Environment (Govt. of NCT of Delhi), 4th Floor, ISBT Building, Kashmere Gate Delhi-110006



Subject: Submission of Annual record of BIO MEDICAL WASTE (January 2017 to December 2017) of the hospital.

Sir/Madam,

Kindly find enclosed Annual Report of 2017 of Bio medical waste of the hospital.

Enclose:-

- a) Form-4
- b) Minutes of the BMW committee meeting (January to December 2017)

This is for information and records.

Thanks & Regards,

Poonam-Singh Sr Facility Manager

INDIAN SPINAL INJURIES CENTRE

VASANTKUNJ NEW DELHI 110070

Addl. Chief of Medical Administration INDIAN SPINAL INJURY CENTRE VASANTKUNINEWDELHI 110070

Addi: Chief of Medical Administration Indian Spinal Injuries Centre Sector-C. Vasant Kunj New Delhi - 110070 THE NE SOURCE





NABH & NABL Accredited Organization

#### Form - IV (See rule 13) ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

SI	No. Particulars				
1.	Particulars of the Occupier	-+			
	(i) Name of the authorised person (occupier		Indian Spinal Injuries Center		
]	or operator of facility) (ii) Name of HCF or CBMWTF	_			
			Indian Spinal Injuries Center		
	(iii) Address for Correspondence		Sector C1 vasant kunj New Delhi – 110064.		
	(iv) Address of Facility		Sector C1 vasant kunj New Delhi – 110064.		
	(v) Tel. No, Fax. No	+	011-42255302		
	(vi) E-mail ID	+	acma@isiconline.org		
	(vii) URL of Website	+	www.isiconline.org		
1	(viii) GPS coordinates of HCF or CBMWTF	-+-	WWW.isiconnine.org		
	(ix) Ownership of HCF or CBMWTF	-+:	Private Hospital		
1	(x) Status of Authorisation under the Bio-	+:			
	Medical Waste (Management and	'	DPCC/BMW/AUTH/NEWNo/2017/3291		
ļ	Handling) Rules		Valid upto - 04/03/2022		
	(xi) Status of Consents under Water Act and	1:	Valid up to - Consent Order No		
	Air Act		DPCC/WMC/2015/36425 Valid up		
			to 18-02-2020		
2.	Type of Health Care Facility	1:	Health care		
Ì	(i) Bedded Hospital	1:	No. of Beds: 178		
	(ii) Non-bedded hospital	$\top$			
1	(Clinic or Blood Bank or Clinical				
!	Laboratory or Research Institute or				
ļ	Veterinary Hospital or any other)				
	(iii) License number and its date of expiry	1:			
3.	Details of CBMWTF		Biotic Waste Solutions Pvt. Ltd		
		1	46, SSI Industrial Area		
			1		
	(i) Number healthcare facilities covered by		GT Karnal Road, Delhi – 110033.		
	CBMWTF	:	N.A		
	(ii) No of beds covered by CBMWTF	:	N.A		
	(iii) Installed treatment and disposal capacity of CBMWTF	:	N.A		
	(iv) Quantity of biomedical waste treated or	1	N.A		
4.	disposed by CBMWTF				
<b>→</b> .	Quantity of waste generated or disposed in Kg	:	Yellow Category :1861.64 (Avg. Per Month)		
	per annum (on monthly average basis)		Red Category :2599.10 (Avg. Per Month)		
			White: 567.63 (Avg. Per Month)		
			0		
5.	Details of the Storage treatment transportation		General Solid waste: 6966.35 (Avg. Per Month)		
<del></del>	Details of the Storage, treatment, transportation,  (i) Details of the on-site storage facility	hi.o(			
	(i) Details of the on-site storage facility	:	There is a separate storage area for bio medical waste.		
		[	Capacity:		
			Provision of on-site storage : (cold storage or		
			any other provision)		
	(ii) Details of the treatment or disposal facilities		Type of treatment equipment No of Capacity Quantity treated units Kg/day or disposed in		
		-	Incinerators kg per annum		
		L.,	Plasma Pyrolysis		
		1	Autoclaves		
		<u>-</u>	Microwave		
	,		lydroclave		
	!		phredder		
	'	1.			

Needle tip cutter or destroyer		 l	
Sharps encapsulation or concrete pit	†	 j	
Deep burial pits: Chemical disinfection		+	
Any other treatment equipment		<del> </del>	

	(iii) Quantity of recyclable wastes sold to	Т	N.A		
	authorized recyclers after treatment in kg pe annum.	r			
	(iv) No of vehicles used for collection and transportation of bio medical waste	1	N.A		
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatmen		N.A	Quantity	Where disposed
	of wastes in Kg per annum	It	Incineration	generated	
			Ash		
	(vi) Name of the Common Bio Medical Waste	1:	ETP Sludge  Biotic Waste So	olutions Pyt	I td
	Treatment Facility Operator through which wastes are disposed of			THE TOTAL TOTAL	Dia.
	(vii) List of member HCF not handed over bio- medical waste	1:	N.A		
6.	Do you have bio-medical waste management committee? If yes, attach minutes of the	:	We have a separa committee and B	ate environme	nt management
7.	meetings held during the reporting period Details training conducted on BMW	+	management is co		
	(i) Number of training conducted on BMW Management.	-	86		
	(ii) Number of personnel trained	1:	1025	· · · · · · · · · · · · · · · · · · ·	
	(iii) Number of personnel trained at the time of induction	:	196		
	(iv) Number of personnel not undergone any training so far	:	Nil		
l	(v) Whether standard manual for training is available?	:	Yes		
	(vi) Any other information		NA		
8.	Details of the accident occurred during the year	:	None		
	(i) Number of Accidents occurred	: -			
	(ii) Number of the persons affected	:			
	(iii) Remedial Action taken (Please attach details if any)	:			
	(iv) Any Fatality occurred, details.	:			
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last	:	Not applicable		
10.	year could not met the standards?  Details of Continuous online emission monitoring systems installed	:	Not applicable		
11.	Liquid waste generated and treatment methods	-+	Details on PTP & S	то	
	In place. How many times you have not met the		Capacity-PTP-40 KLD		
	standards in a year?		In place- Chemical process		
		- [1	Met all standards.		
		19	Capacity-STP-250 H	KLD	
	·	- [ [	MBBR technology		ļ
2.	Is the disinfection method or sterilization meeting:	Met all standard sterilization meeting: N.A			
	the log 4 standards? How many times you have	-   '	<b>4.7</b> V		
	not met the standards in a year?				į
.3.	Any other relevant information.				

Certified that the above report is for the period from 01.01.2017 to 31.12.2017.

Date: 13/6/2018

Name and Signature of the Head of the Institution

Dr. K. PREETHAM
Addl. Chief of Medical Administration
Indian Spinal Injuries Centre
Sector-C, Vasant Kunj
New Delhi - 110070
DMC No. 30049

To,

The Environmental Engineer, BMW Cell Delhi Pollution Control Committee, Department of Environment (Govt. of NCT of Delhi), 4th Floor, ISBT Building, Kashmeregate Delhi-110006

Date 14.06.2018

Subject: Regarding frequency of environment management committee meeting

Sir/Madam,

It is for your kind information that from Jan 2017 frequency of environment management committee meeting was monthly as it was covered under IPCEMC (Infection prevention Control and environment management committee)

From May 2017 on wards it was made bimonthly and it became an independent committee.

Thanks & Regards,

Poonam Singh

Sr Facility Manager

INDIAN SPINAL INJURIES CENTRE

VASANTKUNJ 110070

Addl. Chief of Medical Administration INDIAN SPÍNAL INJURIES CENTRE

VASANTKUNJ 110070

for Menne Adm of Gal Injusted Centre

India: Gal Injude: C Second Vasam Kont Novel Call - 11007



(MINUTES OF THE MEETING)

Date: 10th February 2017

Meeting Place: Conference Room

Attended by: Dr. Preetham, Dr. Sunil Sharma, Dr. Pallavi Banerjee, Ms. Nidhi Yadav, Ms. Poonam Singh, Ms. Neetu Maitra, Ms. Priyanka Anchalia, Ms. Natasha Roberts, Ms. Usha Gopinath, Ms.

Rajinder Kaur, Mr. Baban Rai, Ms. Deepu Vijay, Ms. Hatnuthem Haokip

Absentees: Dr. Sanjeev Gupta

S. No	Activity	Discussion	Responsibility	Status .
1.	Bio-medical Waste Report and its minimization	Ms Poonam presented the biomedical waste report for the month of January 2017.  ACMA emphasized on minimization of biomedical waste generated in the hospital. It was suggested by Dr. Pallavi suggested to explore the possibility of inhouse treatment of biodegradable kitchen waste at ISIC.	Ms. Poonam  Infection Control Team &	
2.	Impact of improper segregation of hospital waste	It was discussed regarding impact of improper segregation of hospital waste on environment and also importance of educating people down the line regarding the same.	All concerned	·
3.	Reduction on Paper Usage	It was discussed that the paper usage should be reduced in all the departments. It was suggested that all the Circulars, Minutes of Meetings, Approvals, Weekly reports etc. Shall be sent in soft-copies only. A circular regarding the same needs to be circulated from CMA Office. It was also proposed to review the monthly paper rim consumption by each department.	Quality Manager	-

Dr. Sanjeev Gupta Chief of Medical Administration

Ms. Nidhi Yadav Quality Manager

To: All Concerned



(MINUTES OF THE MEETING)

Date: 10th March 2017

Meeting Place: Conference Room

Attended by: Dr. Sanjeev Gupta, Dr. Preetham, Dr. Sunil Sharma, Dr. Pallavi Banerjee, Ms. Nidhi Yadav, Ms. Poonam Singh, Ms. Neetu Maitra, Ms. Priyanka Anchalia, Ms. Usha Gopinath, Ms.

Rajinder Kaur, Mr. Babbn Rai, Ms. Deepu Vijay, Mr. Rajkumar, Mr. V.P.Singh, Col. N.K. Bhimwal

Absentees: Ms. Natasha Roberts, Ms. Hatnuthem Haokip

S. No	Activity	Discussion	Responsibility	Status
1.	Bio-medical Waste Report and its minimization	Ms Poonam presented the biomedical waste report for the month of February 2017.	Ms. Poonam	Outus
2.	STP waste management	CMA emphasized on adequate management of sludge generated from STP Mr. R. Yadav to coordinate with STP vendor for the same. Ms. Poonam to coordinate for collection of sludge.	Mr. R.Yadav & Dr. Pallavi	
3.	Water logging across the hospital		Ms. Poonam	•
1.	DG set and boiler upkeep	CMA emphasized on daily visit of maintenance department to these areas. Mr. R. Yadav to follow up with concerned authority for noise control monitoring.	Mr. R.Yadav	
5.	Active construction in hospital	CMA thrust-ed on following safe practices w.r.t active construction going on in the hospital. Leakage in ceiling of OT 5 to rectified at the earliest	Mr. R.Yadav	
i.	Reduction on Paper Usage	Reduction on stationary consumption was re-emphasized.	All concerned	

Dr. Sanjeev Gupta Chief of Medical Administration

Ms. Nidhi Yadav Quality Manager

To: All Concerned



(MINUTES OF THE MEETING)

Date: 11th April 2017

Meeting Place: Conference Room

Attended by: Dr. Sanjeev Gupta (Chairperson), Ms. Nidhi Yadav (Member Secretary) Dr. Preetham,

Dr. Sunil Sharma, Dr. Pallavi Banerjee, Dr. Arun Sharma, , Ms. Poonam Singh, Ms. Neetu Maitra, Ms.

Natasha Roberts, Ms. Hatnuthem Haokip, Mr. Baban Rai, Ms. Deepu Vijay, Mr. Rajkumar, Mr.

Raghubir Mishra

Special Invitee: Ms. Sheetal Sharma, Ms. Ritu Kalra

Absentees: Ms. Priyanka Anchalia, Ms. Rajinder Kaur, Ms. Usha Gopinath,

S. No	Activity	Discussion	Responsibility	Status
1.	Bio-medical Waste Report and its minimization	Ms Poonam presented the biomedical waste report for the month of March 2017.	Ms. Poonam	
2.	STP waste management	CMA asked Dr. Pallavi to write to DPCC regarding disposal of sludge generated from STP.	Dr. Pallavi	
<b>3</b> .	Prevention of water logging across the hospital	CMA emphasized on	Ms. Poonam & Mr. Ravinder Yadav	
4.	Reduction on Paper Usage	Emphasis was laid on "Go Green" initiative hence reduction in stationary consumption was re-emphasized. Ms. Sheetal to explore the option of sending patient bills to CGHS/ ECHS etc through email.	Ms. Sheetal  All concerned	·

Dr. Sanjeev Gupta Chief of Medical Administration

Ms. Nidhi Yadav Quality Manager

To: All Concerned



(MINUTES OF THE MEETING)

Date: 8th June 2017

Meeting Place: Conference Room

Attended by: Dr.K.Preetham (Chairperson), Ms. Nidhi Yadav (Member Secretary), Dr. Pallavi Banerjee, Dr. Smita Korde, Dr. H.K.Mahajan, Ms. Poonam Singh, Ms. Mariamma Titus, Ms. Natasha Roberts, Mr. Baban Rai, Ms. Deepu Vijay, Mr. Ravinder Yadav, Ms. Rajinder Kaur, Ms. Resmi

Mohanan

Absentees: Ms. Usha Gopinath, Dr. Sunil Sharma, Ms. Neetu Maitra, Ms. Priyanka Anchalia

S. No	Activity	Discussion	Responsibility	Status
1.	Bio-medical Waste Report and its minimization	Ms Poonam presented the biomedical waste report for the month of April and May 2017.	Ms. Poonam	Juitus
<u>-</u> .	STP waste management	It was decided that Ms. Poonam will discuss the matter regarding disposal of sludge generated from STP with concerned officer in the upcoming meeting with DPCC.	Ms. Poonam	
3.	Prevention of water logging across the hospital	Emphasis was laid on  ✓ Preventing water logging across hospital  ✓ Following safe practices w.r.t active construction going on in the hospital	Ms. Poonam & Mr. Ravinder Yadav	-
4.	Reduction on Paper Usage	Emphasis was laid on "Go Green" initiative hence reduction in stationary consumption was re-emphasized. Ms. Sheetal to explore the option of sending patient bills to CGHS/ ECHS etc through email.	Ms. Sheetal  All concerned	

Dr. K.Preetham Addl. Chief of Medical Administration

Ms. Nidhi Yadav Quality Manager

To: All Concerned



(MINUTES OF THE MEETING)

Date: 21st September 2017

Meeting Place: Conference Room

Attended by: Dr.K.Preetham (Chairperson), Ms. Nidhi Yadav (Member Secretary), Ms. Usha

Gopinath, Dr. Sunil Sharma, Dr. Pallavi Banerjee, Dr. H.K.Mahajan, Ms. Poonam Singh, Ms. Deepu

Vijay, Mr. Ravinder Yadav, Ms. Rajinder Kaur, Ms. Neetu Maitra

Absentees: nil

S. No	Activity	Discussion	Responsibility	Status
1.	Bio-medical Waste Report and its minimization	Ms Poonam presented the biomedical waste report for the month of September and October 2017.	Ms. Poonam	
2.	STP waste management	of water which leads to less sludge production ACMA suggested that we may talk to other laboratories for analysis of sludge and based on it decision on disposal of sludge generated from STP can be taken. Mr. Ravinder to do the needful	Mr. Ravinder Yadav	
3.	Safety issue and Go Green initiative	•	Ms. Poonam & Mr. R Yadav All concerned	
4.	Drinking water quality across hospital	In lieu of poor quality of drinking water Dr. Sunil Sharma asked Mr.R. Yadav to find out costing of water softner for hospital usage	Mr.R. Yadav	

Dr. K.Preetham Addl. Chief of Medical Administration

Ms. Nidhi Yadav Quality Manager

To: All Concerned