## **Quality Care India Limited**





Date: 18/01/2020

To

The Environmental Engineer,

Regional Office,

Telangana State Pollution Control Board (TSPCB),

4<sup>th</sup> Floor, Hyderabad District Collector's Office Complex,

Nampally, Hyderabad - Telangana - 500 001.

Respected sir,

Sub: Submission of Environmental statement Form No IV for the year January 2019 to December 2019.

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We are here with submitting the Environmental statement Form No. IV for the year January 2019 to December 2019.

Kindly receive the same and acknowledge please.

For Quality Care India limited (CARE Hospitals, Nampally)

Mr. Satyam Dheeraj

HCOO

CARE Hospitals,

Nampally - Telangana - 500 001.

Encl: Form No. IV

HICC minutes of the meeting.

BMW Annual Report (Form No. II)

Inward No.

#### Form – IV (See rule13) ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30<sup>th</sup> 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)]

		T	
Sl.			
No.	Particulars		
1.	Particulars of the Occupier	:	<u> </u>
	(i) Name of the authorised person (occupier or : operator of facility)		Mr. Satyam Dheeraj HCOO
	(ii) Name of HCF or CBMWTF	:	Care Hospitals - Nampally Hyderabad- 500001
	(iii) Address for Correspondence	;	5-4-199, J.N. Road, M.J. Market Nampally, Hyderabad- 500001
	(iv) Address of Facility		5-4-199, J.N. Road , M.J. Market Nampally, Hyderabad- 500001
	(v)Tel. No, Fax. No	:	040-67106565 040-67106505
	(vi) E-mail ID	;	info@carehospitals.com
	(vii) URL of Website		www.carehospitals.com
	(viii) GPS coordinates of HCF or CBMWTF	_	TSPCB/600/BMWM/CBMWTF/755
	(ix) Ownership of HCF or CBMWTF	:	(State Government or <u><b>Private</b></u> or Semi Govt. or any other)
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No.: TSPCB/BMWA/ HYD/2017/1324.valid up to 30/06/2022
·	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: Every month ambient air quality & water analysis reports submitted
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 305
	(ii) Non-bedded hospital	;	

	Laboratory (Clinic or Blood Bank or Cli Research Institute or Veterinary Hospital other)	nical or or any			
	(iii) License number and its date of expiry	1		07F-APMC-0093 18.12.2019 submitted for renewal	
3.	Details of CBMWTF	Details of CBMWTF			
	(i) Number healthcare facilities con CBMWTF	vered by	:		
	(ii) No of beds covered by CBMWTF	<del>,</del>	:		
	(iii) Installed treatment and disposal capa of CBMWTF:	:	Kg per day		
	(iv) Quantity of biomedical waste treated disposed by CBMWTF	:	Kg/day		
4.	Quantity of waste generated or disposed in Kg per		:	Yellow Category :1932.1 kgs	
	annum (on monthly average basis)			Red Category :2212.5kgs	
				White: 33.85 kgs	
	, rea	,		Blue Category: 186.77 kgs	
.				General Solid waste: 88,000 kgs	
5	Details of the Storage, treatment, transportation, processing and Disposal Facility				
	(i) Details of the site storage : facility	Size	:	5 X 5 – 25 Sft each room	
		Capacity: 200 Bags in each room			
		Provision any oth		on-site storage: (cold storage or vision)	

\*

	disposal facilities		Type of treatment equipment	No of unit s	Cap acit y Kg/ day	Quantity treatedo r disposed in kg per
			Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer Sharps encapsulation or concrete pit Deep burial pits:		-	annum
			Chemical disinfection: Any other treatment equipment: By G J MULTI CLAVE INDIA PVT LTD		-	
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plast	ic, glas	s etc.)	
•	(iv) No of vehicles used for collection and transportation of biomedical waste	:	Two			
-	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Quanti genera Incineration Ash ETP Sludge	•	Wh disp	ere oosed
	(vi) Name of the Common Bio-: Medical Waste Treatment Facility Operator through which wastes are disposed of					
	(vii) List of member HCF not handed over bio-medical waste.					
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		YES			

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7.	Details trainings conducted on BMW		18 Nursing	52 HK
	[i] Number of traings conducted on BMW Management.		Bed side teaching by t Staff	he INC to the House Keeping
	(ii) number of personnel trained		326	210
	(iii) number of personnel trained at the time of induction		94	65
	(iv) number of personnel not undergone any training so far			
	(v) whether standard manual for Training is available?		YES	
	(vi) any other information)			
8	Details of the accident occurred during the year			
	(i) Number of Accidents occurred		NIL	
	(ii) Number of the persons affected		NIL	
	(iii) Remedial Action taken (Please attach details if any)		NA	
	(iv) Any Fatality occurred, details.		NA	
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?			
	Details of Continuous online emission monitoring systems installed			
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		STP in Plac	e
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?			
. 12	Any other relevant information	:	(Air Pollution Control Incinerator)	Devices attached with the

Certified that the above report is for the period from : Jan 2019 to Dec 2019

Name and Signature of the Head of the Institution

H.C.O.O.

Hospital Administration
Care Hospital, Nampally,
Hyderabad - 500 001. T.S.

Date:

Place



#### **Hospital Infection Control Committee**

Date:- 21/11/19

Infection control team conducted a meeting on implementations of BMW rules with concerned departments on 21/11/17 at 11.00am in C1 C.

Members present:- Dr. Mustafa Afzal, Dr. Sushma, Sr. Jayasree, Sr. Manju, Mrs. Sravanthi, Mrs. Padma, Mr. Naveed, Mr. Kishore babu, Mr. Navesh, Mr. Sreenivas.

Observations	Action Plan	Responsibility	Time
Provision of BMW Final storage room.	<ul> <li>The following things has to be checked in existing rooms.</li> <li>Bags to be stored according to the colour codes in the rooms.</li> <li>Check for the display of hazardous labels on the doors, painting requirements, need for closing loopholes for preventing entry of rats, rodents, cats and dogs into that premises.</li> <li>After handovering the waste bags to the G.J. Multiclave vehicle bio waste storage rooms to be washed with hypochlorite and should kept under lock.</li> <li>Do not permitt to park any vehicles in front of bio waste rooms all the time.</li> </ul>	Mrs. Sravanthi and all housekeeping supervisors.	1 week
nitiation of training classes or housekeeping staff and naintaining training	Schedule to be given for conducting training classes to all housekeeping supervisors.	Mrs. Sravanthi & Sr. Jayasree	2 days
cords.	Training calendar to be prepared for housekeeping staff.	Mrs. Sravanth	From Dec-19 onwards.
munization of TT and patitis-B for usekeeping staff.	Monthly List of new joinees of both contracts has to be submit to infection control department before 5 <sup>th</sup> of every month.  Vaccine pending list to be	Mrs. Sravanth	Before 5 <sup>th</sup> of every month.  Before 5 <sup>th</sup> of
<i>a</i> *1	handovered to housekeeping department for sending the housekeeping staff intime for vaccination as per schedule to the infection control department.	:	every month

Estate			2 days
the bags.	Bar coded labels to be described on the large bags (Red and a Fow) at the stores before distributing to all departments.	Mrs Sravanthi	Zuay
App	While recording the weight of the bags housekeeping supercusors should check for the display of	Housekeeping supervisors on duty at weighing the bags.	Daily
Appropriate and adequate PPE.	Proper PPE to be provided to the housekeeping staff while handling with the bio waste and other cleaning practices and observations to be done on the same.	Housekeeping supervisors of their concerned areas.	Daily
	Industrial gloves, caps, mask, apron, gum boots, hand washing solutions and facility to be provided to the housekeeping staff at main segregation areas.	Mrs. Sravanthi	
Annual health checkup pending for Housekeeping staff.	It was discussed and decided to include the annual health check up for all housekeeping staff and the investigations to be included CBP and physician consultation in the check-up.	Mrs. Sravanthi	Before 10/12/19
Display of BMW weighing records.	Weighing of the bags to be done from all areas of the hospital without missing.	Housekeeping supervisors.	Daily
1	On duty housekeeping supervisor should mention the Quantity and weight of the bags in the checklist as per the schedule time 5-6 morning and evening time.	Housekeeping supervisors.	Daily
4 *	Filled checklist to be submit to the infection control department by 10am daily in the morning.	Housekeepin supervisors.	From Dec- 19 onwards.
· 1	Central waste collection system through the bio waste trolleys at each floor to be restarted like previous.		

Reporting incidents	The following incidents to be			
	observed and to be reported			
	reported to the infection control		Whenever	
	department.	Mrs. Sravanthi	noticed	
		and all	HOtics-	
	Needle stick injuries of the	Housekeeping		
	housekeeping staff walle	supervisors.		
	handling with biowaste.			
	<ul> <li>Major accidents, hazardous</li> </ul>			
	spills at hospital premises while			
	transporting biowaste.			
	<ul> <li>Delay of the G.J. (Authorizon)</li> </ul>			
	vehicle timings for collecting			
	biowaste from the hospital			
	premises or any day if vehicle			
	not come to collect the waste			
	(Daily Waste to be cleared			
	before 7am in the morning from			
	hospital premises.			
	<ul> <li>Non compliance on biowaste</li> </ul>			1
	segregation policy which are			
	observed during rounds at their			
	concerned areas.		20th	+
Annual report to be submit	Mrs. Sravanthi and Mr. Dhanunjai to	Mrs. Sravanth	ni Before 30 <sup>th</sup>	
to the prescribed authority	submit the annual report in form IV	& Mr.	June every	
		Dhanunjai	year.	1
n form IV BEFORE 30TH	Every year.			1
une of every year for the				
period of January to				
December.			THE RESIDENCE PROPERTY.	

Infection control nurse Incharge

Copy to: Satyam Dheeraj - HCOO - For information please \_

Dr. Sushma - DMS - For information please -

Dr. B.K.S.Sastry - Chairperson - HICC - For information please-

Mr. Ramakrishna - AGM - Administration -

Mrs. Sravanthi - HOD Hospitality \_

MR. Dhanunjai - HOD Security services -

All housekeeping supervisors

Dr. Mustafa Afzal Co chairperson HICC

soil forware







# **Hospital Infection Control Committee**

Date:- 1/2/19

Infection control team conducted a meeting on BMW rules with concerned departments on 30/1/19 at 1pm in Housekeeping Department.

Members present: Sr Ja

O D S C I VALIDITS	ree, Mr.,Sagar, Mrs. Padma, Mr. N Action Plan	Responsibility	Status
Annual health check-up pending for housekeeping staff.	Health check up process to be start and reports to be handover to Infection control department.	Mr. Sagar	Completed.
Housekeeping staff coming to the infection control department for vaccination other than the fixed vaccination timining.	Housekeeping supervisors should inform the vaccination timings to all ayahs and ward boys.	Mr. Sagar	Information given during classes to all housekeeping staff.
Newly joined housekeeping staff not aware on handling of hazardous spills.	Mrs. Padma should arrange a class to new staff in co-ordiantion with infection control nurses.	Mrs. Padma	Class taken on 7- 2-19.

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Infection control nurse Incharge

Dr. Musiafa Afzal Co chair person HICC

Copy to: Dr. D.N.Kumar - Medical Director

Dr. B.K.S.Sastry -- Chairperson -- HCC , Mail forwards

Mr. Sagar – HOD Housekeeping

Mr. Kushal - Quality department

Mr. Anil – HR Department

### FORM - II

## (See rule10)

## ANNUAL REPORT FOR THE PERIOD OF 01/01/2019 TO 31/12/2019

1. Particulars of the applicant:	
(i) Name of the authorized person ( o	ccupier / operator ): Mr. Satyam Dheeraj
(ii) Name of the institutions : CARE	Hospitals( A unit of Quality Care India Limited )
Address: D.N.No: 5-4-199, J.N. Road Tel. No: 040 - 67106565	d, Nampally, Hyderabad - 500 001, Telangana.
2. Categories of waste generated and	quantity on a monthly average basis
Category 1,3 x 6 (Yellow Bags) Category 4 (PPC) Category 8 & 10 (liquid waste): Category 7 (Red Bags)	: 1932.1 kgs. : 33.85 kgs. : 580 liters. : 2212.5 kgs.
3. Brief details of the treatment facilit	ty: (in case of off site facility)
(i) Name of operator (ii) Name and address of the facility	<ul> <li>G.J. MULTICLAVE (INDIA) PVT LTD</li> <li>Sy. No 179 &amp; 181, Edulapally Village, Kothur Mandal. Mahaboobnagar Dist. 040 - 23756925, Fax: 23756926</li> </ul>
4. Category wise quantity of waste tre	eated:
Category 1,3 & $6 = 1932.1 \text{ kgs.}$ Category 7 = 2212.5 kgs.	
5. Mode of treatment with details	: Details incineration Autoclaving, Chemical Disinfection, Shredding, secured, filling & and ETP
б. Any other information	: - Nil-
7. Certified that the above reports is for	or the period from <u>01/01/2019</u> to <u>31/12/2019</u>
Date:	Signature: Savanth & Casms
Place: Nampally Hyderabad	Designation: Sr. Manager

Hospitality Services.