

O/C

To

Date – 10/06/22

The Secretary

Polution Control Board

Bhubaneswar

Sub – Submission of BMW Annual report 2021

Dear Sir/ Madam

Please find enclosed the annual report of Bio medical waste generation for the period January 2021 to December 2021 of CARE Hospital ,Prachi Enclave , Chandrasekharpur , Bhubaneswar.

Your Sincerely



Sanjeev Rudra

AGM Hospitality

CARE Hospital

Mob – 9937280323



Encl : BMW Annual Report 2021



**Form - IV**  
(See rule 13)  
**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)]

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Mr Kislay Anand
	(ii) Name of HCF or CBMWTF	:	CARE Hospital Bhubaneswar
	(iii) Address for Correspondence	:	Plot no. 325 Prachi Enclave Chandrasekharpur, Bhubaneswar, Odisha – 751016
	(iv) Address of Facility	:	As Above
	(v) Tel. No, Fax. No	:	0674-6565656
	(vi) E-mail ID	:	feedbackbbsr@carehospitals.com
	(vii) URL of Website	:	www.carehospitals.com
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	Private
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: ...4027/SPCB/Authorisation/31.3. 2020/IND-IV-BW- 2644..... .....valid up to .....31.03.2025.....
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to:
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: ...230..
	(ii) Non-bedded hospital	:	
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	
	(iii) License number and its date of expiry	:	
3.	Details of CBMWTF	:	NA
	(i) Number healthcare facilities covered by CBMWTF	:	
	(ii) No of beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of	:	_____ Kg per day





CBMWTF:

	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day			
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 3945.136 Red Category : 4480.11 White: 416.319 Blue Category : 1756.924 General Solid waste:			
5	Details of the Storage, treatment, transportation, processing and Disposal Facility					
	(i) Details of the on-site storage Facility	:	Size : NA Capacity : Provision of on-site storage : (cold storage or any other provision)			
	(ii) Details of the treatment or disposal facilities	:	Type of treatment equipment  Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer Sharps encapsulation or concrete pit Deep burial pits: Chemical disinfection: Any other treatment equipment:	No Of unit S  - - -	Cap acit y Kg/ day  NA	Quantity treatedo R disposed in kg Per annum
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.) NA			
	(iv) No of vehicles used for collection and transportation of biomedical Waste	:	NA			
	(v) Details of incineration ash and ETP sludge generated and disposed		Quantity Generated	Where Disposed		



	during the treatment of wastes in Kg per annum		Incineration Ash ETP Sludge	NA
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:		Saniclean
	(vii) List of member HCF not handed over bio-medical waste.			NA
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period			Yes
7	Details trainings conducted on BMW			
	(i) Number of trainings conducted on BMW Management.			33
	(ii) number of personnel trained			968
	(iii) number of personnel trained at the time of induction			968
	(iv) number of personnel not undergone any training so far			None
	(v) whether standard manual for training is available?			Yes
	(vi) any other information)			
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 year could not met the standards?			NA
	Details of Continuous online emission monitoring systems installed			NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?			Yes. Always in limit
11	Is the disinfection method or sterilization meeting the log 4			Yes. Always met the standards.





	standards? How many times you have not met the standards in a year?		
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

.....  
 .....Jan 2021 – to Dec 2021.....  
 .....

*M/s. Quality Care India Ltd.*

Name and Signature of the Head of the  
 Institution  
**Authorised Signatory**

Date:09/06/2022  
 Place Bhubaneswar



Butterfly

# BMW Received At Store (S2) (Year Wise) in Kgs

## HCF DETAILS

Code 111969 Name Quality Care India Limited

M/S SANI CLEAN  
PRIVATE LIMITE

Cat BEDDED HOSPITAL Beds 230 CBWTF D

## CONTACT PERSON

Name Mr Sanjeev Rudra Mobile 9937280323

Tele 9937280323 Email info@carehospitals.com

Period of Report: 2021 to 2021 ; Report Generated by: Quality Care India Limited ; Date of Report: 09 JUN 2022 / 12:30

		Yellow		Red		Blue		White		△ Cyto		Others		Totals	
		Bag s	Weight	Bag s	Weight	Bag s	Weight	Bag s	Weight	Bag s	Weigh t	Bag s	Weigh t	Bag s	Weight
REPORT TOTAL →		958	3945.13 6	1034	4480.11 1	368	1756.92 4	353	416.31 9	0	0.000	0	0.000	2713	10598.49 0
S No.	Year ↓														
1	2021	958	3945.13 6	1034	4480.11 1	368	1756.92 4	353	416.31 9	0	0.000	0	0.000	2713	10598.49 0



Action Taken Report of HICC Meeting held on 29.09.21

From – HIC Committee

To: All Concerned

Attendees- Dr.S.Misra , Mr.Kislay Anand,  
Dr.Smita.Padhi,Dr.M.Mishra,Dr.M.Padhi,Dr.Ritesh,Ms.Saudamini Sahu, Mrs.Ambika Mohapatra,Ms Sonali,  
Sr.Subhashree Das ,Ms Rashmita,Dr Sreinivas ,Dr prangyan ,Sis Upasana,Sis Sibani,S,Sis Trupti,Sis  
Jayaprada,Sis Jyostna ,Ms Subhananda

Sl. No	Tasks Discussed	Action Plan	Responsibility	Action Taken
1	Improvement of Hand Hygiene	To ensure that random audit to be done on Hand Hygiene.	ICN INCHARGES SUPERVISORS	CONTINUOUS PROCESS
2.	Training on BMW	To ensure that Klebsiella pneumonia culture positive patient to be isolated and single allocation to be given.	ICN INCHARGES SUPERVISORS	CONTINUOUS PROCESS

HICC Chairperson  
Dr. Sudhiranjan Misra





**From – HIC Committee**

**To: All Concerned**

Attendees- Dr.S.Mishra , Mr.Kislay Anand,

Dr.M.Padhi, Dr. Ritesh, Ms.Saudamini Sahu, Ms Sonali, Sr.Subhashree Das ,Ms Rashmita,Dr Sreinivas ,Dr prangyan ,Sis Sibani,S,Sis Trupti,Sis Jayaprada,Sis Jyostna ,Br.Ashok

Sl. No	Tasks Discussed	Action Plan	Responsibility	Target Date
1	Training for New Joinee	To ensure that bedside training is provided to all new staffs on Care of Invasive lines and catheters at patient care areas.	DOCTORS ICN NURSING INCHARGES	Immediate
2.	Training on BMW	To ensure that awareness program on BMW management for all department.	ICN NURSING INCHARGES	Immediate

HICC Chairperson  
Dr.Sudhiranjan Misra





Minutes of HICC Meeting held on 28.5.2021

From – HIC Committee

To: All Concerned

Attendees- Dr.S.Misra , Dr.Smita.Padhi,Dr.M.Padhi,Dr.Ritesh,Ms.Saudamini Sahu, Mrs.Ambika Mohapatra, Sr.Subhashree Das ,Dr Sreinivas ,Dr prangyan ,Sis Sulochana,Sis Upasana,Sis Sibani,Br Subrat,Sis Priyambada,Sis Trupti,Sis Sunayani,Sis Jharana,Sis Sasmita,Br Chitta ranjan,Sis Mamata,Sis Rashmi ,Br Ashok,Sis anusaya,Sis Tulasi Nayak, Ms Subhananda,Ms Sonali, Mr Mihir

Sl. No	Tasks Discussed	Action Plan	Responsibility	Target Date
1	Revised Antibiotics policy	To ensure that PTCA meeting will be called to revise the Antibiotic policy.	Quality	Immediate
2.	Prevention of sharp injury	To ensure that ampule cutter should be available at all nursing station for use.	ICN CDS	Immediate
3.	Doffing of PPE	To ensure that after removing PPE it should be disposed individually in yellow polythene.	All Employees	Immediate
4.	Capturing of phlebitis	Frequency of changing IV cannula to be audited	ICN	Immediate

HICC Chairperson  
Dr.Sudhiranjan Misra

