

19-06-2023

To
The Environmental Engineer
Regional Office
Telangana Pollution Control Board(TSPCB)
Nampally,
Hyderabad.

Sub: Submission of Annual Report for Biowaste Generation of M/S Guru Nanak Care Hospital Musheerabad, 500020.

We are from Guru Nanak Care Hospital Submitting Annual Report Biowaste Generation for the 2022. Kindly acknowledge the same.

Thanking you

Yours Truly
M/ S Guru Nanak Care Hospital,
Musheerabad.



Authorized Signatory



Enclosed Form IV

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)]

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorized person (occupier or operator of facility)	:	Dr. MOHD ABDUL NAFEH
	(ii) Name of HCF or CBMWTF	:	GURU NANAK CARE HOSPITAL
	(iii) Address for Correspondence	:	1-4-908/7/1, Musheerabad Main Rd, near Raja Deluxe Theatre, Musheerabad, Bakaram, Kavadiguda, Hyderabad, Telangana 500020
	(iv) Address of Facility	:	Sy No 179 & 181 Edupally (V) Nandigam, Shad Nagar, RR Dist
	(v) Tel. No, Fax. No	:	040 68106589
	(vi) E-mail ID	:	dr.abdulnafeh.mohd@carehospitals.com
	(vii) URL of Website	:	www.carehospitals.com
	(viii) GPS coordinates of HCF or CBMWTF	:	CBMWTF
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No: <u>TSPCB/BWMA/HYD - 3700178 /HO/ 2022 - 592</u> valid up to <u>31-03-2032</u>
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31-03-2032
2.	Type of Health Care Facility	:	PRIVATE
	(i) Bedded Hospital	:	No. of Beds: <u>100</u>
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	NA
	(iii) License number and its date of expiry	:	-
3.	Details of CBMWTF	:	
	(i) Number healthcare facilities covered by CBMWTF	:	NA
	(ii) No of beds covered by CBMWTF	:	100
	(iii) Installed treatment and disposal capacity of	:	_____ Kg per day

	CBMWTF:																																										
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	45 Kg/day																																								
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category: 6465 Red Category : 8477 White: 558.5 Blue Category :936 General Solid waste: 15971																																								
415	Details of the Storage, treatment, transportation, processing and Disposal Facility																																										
	(i) Details of the on-site storage facility	:	Size : - Capacity : 0.3 cu meter Provision of on-site storage : (cold storage or any other provision)																																								
	disposal facilities		<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/yr</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators Plasma</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Pyrolysis Autoclaves</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hydroclave Shredder</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/yr	Quantity treated or disposed in kg per annum	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:			
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	(iii) Quantity of recyclable wastes sold to authorized recycles 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	:	1																																								

(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Quantity Where generated disposed
		<p style="text-align: center;">I n c i n e r a t i o n</p> <p>Ash ETP Sludge NA NA</p>
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	GJ Multiclave (India Private. Limited) Sy No 179 & 181 Edupally (V) Nandigam, Shad Nagar, RR Dist
(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		Monthly Once
(i) Number of trainings conducted on BMW Management.		80
(ii) number of personnel trained		80
(iii) number of personnel trained at the time of induction		0
(iv) number of personnel not undergone any training so far		YES
(v) whether standard manual for training is available?		NIL
(vi) any other information)		NIL
8 Details of the accident occurred during the year		NIL
(i) Number of Accidents occurred		NIL

	(ii) Number of the persons affected		NIL
	(iii) Remedial Action taken (Please attach details if any)		NIL
	(iv) Any Fatality occurred, details.		NIL
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		OUTSOURCED
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		YES
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		NA
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator) NA

Certified that the above report is for the period from

January 2022 to December 2022




Name and Signature of the Head of the Institution

Date: 19-06-2023
Place: Hyderabad

FORM – I
[(See rule 4(o), 5(i) and

15 (2)] ACCIDENT

REPORTING

1. Date and time of accident : No incidents
2. Type of Accident : NIL
3. Sequence of events leading to accident : NIL
4. Has the Authority been informed immediately : No incidents
5. The type of waste involved in accident : NIL
6. Assessment of the effects of the accidents on human health and the environment: NIL
7. Emergency measures taken : No incidents
8. Steps taken to alleviate the effects of accidents : No incidents
9. Steps taken to prevent the recurrence of such an accident : No incidents
10. Does your facility have an Emergency Control policy? If yes give details:
 - 1) Biomedical waste policy
 - 2) NSI Policy
 - 3) Spill Management Policy
 - 4) Disaster management Policy

Date : 19-06-2023

Place: Hyderabad

Signature Glen Thomas

Designation ICN.....



MINUTES OF MEETING



Minutes of the Hospital Infection Control Committee held on **19th May 2022** in Conference Hall from 03:00 pm to 04:00 Pm

Committee Members

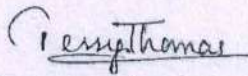
Dr. Surya Prakash, Dr. Srilatha, Dr. Archana, Dr. Imran, Ms. Meenakshi, Mr. Upendra, Ms. Asiya, Ms. Tessy, Mrs. Joamma, Mr. Rajender, Nursing in charges as Additional Members.

Action taken report of pervious meeting: Mar 2022

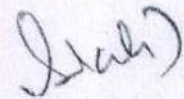
Agenda Point	Action Taken Report	Process Ownership	Status
Training on policies	All the staff including in charges retrained on hospital policies special on Foleys catheter insertion and BMW Management.	Nursing superintendent, ICN	Closed
As per Water Tank cleaning	Water sample to be sent for the testing, report should be shown to microbiologist.	Maintenance , ICN	Closed
Patient privacy	Patient attendants were showing objection to occupy bed no 4 due to main BMW Segregation area and wash room close to the patient bed.	Maintenance	Closed

2. Discussions: - (April 2022)

No	Agenda Point	Discussed Point	Process Owner	Deadlines
1	NSI	Needle stick injury RCA was presented and the same was discussed upon. The incident was of nurse getting a prick with venflon stylet. All the post exposure protocols were followed.	ICN , In charges	-
2	Prophylactic antibiotic	Discussed on Prophylactic antibiotic to be given before 30-60mint of incision .Audit to be done in OT.	ICN , OT In charges	Immediately
3	VAP Bundle compliance	VAP Bundle compliance was discussed. It was observed that the compliance was good. Training of new staff to be carried out.	ICN	Next month
4	Policy & Biomedical waste management	Transportation container used for transporting waste has been indented & requested housekeeping Incharge to deploy a dedicated person for internal BMW transportation.	ICN,Housekeeping manager	Next month



Prepared by
Tessy Thomas
ICN



Review by
Dr Srilatha
Chairperson

MINUTES OF MEETING



Minutes of the Hospital Infection Control Committee held on **19th Jan 2023** in Conference Hall from 03:00 pm to 04:00 Pm

Committee Members

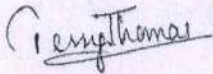
Dr. Surya Prakash, Dr. Srilatha, Dr. Archana, Dr. Imran, Dr. Abdul Nafeh, Ms. Asiya, Ms. Tessy, Mrs. Joamma, Mr. Rajender, Mr. Nageshwar rao, Ms. Latha, Nursing in charges as Additional Members.

1. Action taken report of previous meeting **Nov 2022** (with actions carried forward)

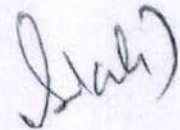
Agenda Point	Discussed points	Action Taken Report	Process Ownership	Status
Accidental removal of tubes	Discuss about high chances of removal of tubes by irritable patients so be more attentive with those patients to prevent such errors.	Training given on nursing assessment to the concern staff to monitor patient closely to prevent accidental removal of tubes	ICN Nursing Incharges Staff nurses Supervisors	Closed
Training	Discuss on training effectiveness of BMW, Handling of needles, Hand hygiene, Safe injection practices	Interview the staff on their knowledge on Infection control practices	ICN	Closed

2. Discussions: - (Dec 2022)

No	Agenda Point	Discussed Point	Process Owner	Deadlines
1	Overhead tank cleaning.	Periodical tank cleanings to be continued Mr. Joseph to talk to HA sir and take the approval.	ICN Mr. Joseph / Quality	One week
2	OT a/c Duct swabs to be send before & after cleaning.	Before & After swab sent to testing Reports pending.	OT in charge / ICN	One week
3	Staff Vaccination	Vaccination to be provided to all new employees	ICN, Logistics	15 days
4	Biomedical waste	Proper discarding of IV fluids & urobags in Red Bin	All Nursing incharges and nursing staff ,ICN	Immediately
5	NSI	Discuss on awareness week celebration for Nursing, HK, Technician	ICN	Immediately



Prepared by
Tessy Thomas
ICN



Review by
Dr. Srilatha
Chairperson