

Indraprastha Medical Corporation Limited

(Indraprastha Apollo Hospitals, New Delhi - A Joint Sector Venture of Govt. of Delhi)

Regd. Office : Sarita Vihar, Delhi-Mathura Road, New Delhi-110 076 (India)

Corporate Identity Number : L24232DL1988PLC030958

Phones : 91-11-26925858, 26925801, Fax : 91-11-26823629

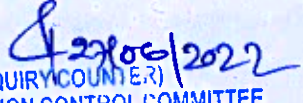
E-mail : imcl@apollohospitals.com, Website : <https://delhi.apollohospitals.com>

Engg/CE/BMW/2022/11

June 20, 2022

Delhi Pollution Control Committee

Bio-Medical Waste Cell,
4th Floor, ISBT Building,
Kashmere Gate, Delhi-06.



(ENQUIRY COUNTER)
DELHI POLLUTION CONTROL COMMITTEE
DEPARTMENT OF ENVIRONMENT
GOVT. OF NCT OF DELHI
4TH FLOOR, ISBT BUILDING,
KASHMERE GATE, DELHI-110006

Sub: Annual Report (Form- IV) for the year 2021 under Bio-Medical Waste Rule 2016

Please Find enclosed the Annual Report for the year 2021 as per Bio- Medical Waste Management & Handling Rules, 2016.

Thanking You

For INDRAPRASTHA MEDICAL CORPORATION LTD.


Viyom Kumar-Gupta
Chief Engineer

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)	:	P. Shivakumar
	(ii) Name of HCF or CBMWTF	:	Indraprastha Medical Corporation Ltd
	(iii) Address for Correspondence	:	Sarita Vihar, Delhi Mathura Road , New Delhi 110076
	(iv) Address of Facility	:	Same as above
	(v) Tel. No, Fax. No	:	011-71791918/ Fax 71795600
	(vi) E-mail ID	:	Viyom_g@apollohospitalsdelhi.com
	(vii) URL of Website	:	www.apollohospitalsdelhi.com
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other) – Private in collaboration with Delhi Govt
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	BMW Authorisation No. DPCC/BMW/AUTH/NEWNo/2019/04628
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: Consent # DPCC/WMC/2018/42638 valid upto 22.01.2023
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:....718
	(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	:	Not Applicable
	(i) Number healthcare facilities covered by CBMWTF	:	Not Applicable
	(ii) No of beds covered by CBMWTF	:	Not Applicable
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	_____ Kg per day - Not Applicable

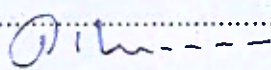
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF :	_____Kg/day - Not Applicable																																								
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis) – As per details attached in Annexure I (Jan 2021 – December 2021)	Yellow Category : 6641.45 Kg (Average per month)																																								
		Red Category : 17298.46 (Average/ month)																																								
		White: 429.72 (Average/ month)																																								
		Blue Category 2417.23 kg (Average per month)																																								
		General Solid waste:																																								
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																									
	(i) Details of the on-site storage facility :	Size : 830 Sqft Capacity : Provision of on-site storage : (cold storage or any other provision) - NO																																								
	(ii) Details of the treatment or disposal facilities :	<table border="0"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/</th> <th>Quantity treated or disposed day in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Autoclaves</td> <td>2 Nos</td> <td>972 ltrs</td> <td></td> </tr> <tr> <td></td> <td></td> <td>432 ltrs</td> <td></td> </tr> <tr> <td>Microwave Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td>1 Nos</td> <td>50 KG</td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td>Yes</td> <td></td> <td></td> </tr> <tr> <td>Sharps encapsulation or pit</td> <td></td> <td></td> <td>- concrete</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/	Quantity treated or disposed day in kg per annum	Autoclaves	2 Nos	972 ltrs				432 ltrs		Microwave Hydroclave				Shredder	1 Nos	50 KG		Needle tip cutter or destroyer	Yes			Sharps encapsulation or pit			- concrete	Deep burial pits:				Chemical disinfection:				Any other treatment equipment:			
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Chemical disinfection:																																										
Any other treatment equipment:																																										
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	Not applicable																																								
	(iv) No of vehicles used for collection and transportation of biomedical waste	Nos 1 - Twice a day																																								
	(v) Details of incineration ash and ETP sludge generated and disposed	<table border="0"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Quantity generated	Where disposed																																						
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	during the treatment of wastes in Kg per annum	Incineration Ash STP/ETP Sludge – sent to Common bio medical waste treatment facility
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	M/s Biotic waste solutions pvt ltd.
	(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, copy of minutes attached in Annexure II
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	General Induction Program: 29 Session Contract Induction Program: 50 Session On-site Training on Bio-Medical Waste : 47 Session Departmental Training Session : 142 Session As a part of JCI Refresher Course: 69 Session Total : 337 Session
	(ii) number of personnel trained	General Induction Program: 976 Contract Induction Program: 873 On-site Session : 886 Departmental Training Session : 2286 As a part of JCI Refresher : 2649 Total: 7670
	(iii) number of personnel trained at the time of induction	General Induction Program: 976 Contract Induction Program: 873 Total: General Induction Program: 976 Contract Induction Program: 873
	(iv) number of personnel not undergone any training so far	All new entrants are covered in Induction Programs
	(v) Whether standard manual for training is available?	YES
	(vi) any other information)	
8	Details of the accident occurred during the year	NIL
	(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?		Not applicable
	Details of Continuous online emission monitoring systems installed		Not applicable
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Liquid waste treatment by STP. Have been meeting standards
11	Is the disinfection method or sterilization meeting the log 4		Autoclaving is being done
	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) – Not Applicable.

Certified that the above report is for the period from (January – December)

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P. SHIVAKUMAR
Name and Signature of the Head of the Institution
MANAGING DIRECTOR

Date: 20/06/22
Place NEW DELHI

Annexure II

TOTAL QUANTITY OF BIO MEDICAL WASTE GENERATED /KG/ANNUM

MONTH - 21	Autoclavable (Kg.) (Red Bags)	Autoclavable (Kg.) (BlueBags)	Incinerable (Kg.) (Yellow Bags)	B.D Boxes (Sharp Containers)	Cyto	Sludge (Kg) w.e.f
JANUARY	16050.9	2498.2	6543.2	452.7		386.4
FEBRUARY	15822.18	2135.5	6667.5	497.15	0.72	377.5
MARCH	18428.6	2492.6	7536.8	543	216.8	361.3
APRIL	12688.6	1814.3	5596.19	409.7	180.4	418.8
MAY	9732	1340.9	4243	377	423.8	
JUNE	17772.68	2613.5	7679.37	714.8	251.7	
JULY	18832.82	2859.5	8033.5	676.3	171.2	
AUGUST	18994.09	2887.8	7929.5	707.8	227.3	
SEPTEMBER	20269.66	2638.2	8549.1	782.3	48.23	
OCTOBER	20362.5	2817.9	9069.9	599.5	83.6	
NOVEMBER	18119.3	2199.2	7083.7	550.7	198.8	
DECEMBER	20508.13	2709.13	8445	564.5	265.11	
TOTAL	207581.46	29006.73	79697.39	6875.45	2067.66	1544
Average / month	17298.46	2417.23	6641.45	429.72	129.23	96.50
Average / day (30 days)	576.62	80.57	221.38	14.32	4.31	3.22



FORM I

(See rule 4(O), 5(i) and 15(2))

ACCIDENT REPORTING

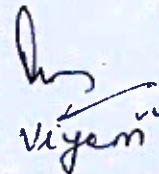
1. Date and time of accident : NIL
2. Type of Accident : No such incident
3. Sequence of events leading to accident : No such incident
4. Has the Authority been informed immediately : No such incident
5. The type of waste involved in accident: : No such incident
6. Assessment of the effects of the accidents on human health and environment : NIL
7. Emergency measures taken : No such incident
8. Steps take to alleviate the effects of accidents : No such incident
9. Steps taken to prevent the recurrence of such an accident : No such incident
10. Does your facility has an Emergency control policy? If yes give details

Yes, the organization has a protocol on management of Needle Stick injury, accident, inoculation and percutaneous, mucus, membrane, exposure to blood and body fluid. (P.50 Infection Control Manual)

Date

20/06/22

Signature


Vijay Gupta

Place

New Delhi

Designation

Sr. GM. Engineering

Indraprastha Medical Corporation Limited

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April, 2022

CIRCULAR

This is for the information of all concerned as addition of new member in new Bio Medical waste management committee per requirement of Bio Medical Waste Management Rule 2016. The list of members is as following:

S.No	Name	Designation
1.	Mr. P. Shivakumar	Managing Director
2	Dr. Shanti Bansal	Director Medical Services
3	Dr (Brig.) Amit Roy	Deputy Director Medical Services
4	Dr. Ritu Rawat	Dy. Director Medical Services (Compliance)
5	Dr. Gaurav Katyal	V.P Operations
6	Mr. Rohit Kapoor	Vice President - Human Resources
7	MR. Viyom Gupta	Senior GM Engineering
8	Dr. Leena Mendiratta	Infection Control Head
9	Mr. Sachin Patidar	Senior GM Materials
10	Sister Gracy Phillip	Asst. Director Nursing
11	Satish Kumar	Chief Quality Officer
12	Ms. Sarla Kachroo	Dy. GM Housekeeping
13	Dr. Priti Bansal	Dy. Medical Superintendent
14	Aarti Kalia	Engineering
15	Sonia Bhatia	Training Cell
16	Gursharan Singh	Engineering



Audit Observations - Minutes of the Committee Meeting

Date 01.06.2022

BMW Audit : Areas : BMW Storage area (lower basement), GLMICU & 2nd Floor General Ward

Mr. Saitsh Kumar (Quality), Mr. Ankit Abrol (HK), Ams Anuradha(HK), Ms Reena Singh & Shivani Sharma (Infection Control), Sister Lialamma Chacko (Nursing), Mr. Gursharan & Ms. Aarti (Engineering)

	Points	Responsibility	Action / Plan
	Lower Basement (Waste Storage Area)		
1	Remove material lying in PPE disposal area)	HK	
2	Trolley washing area - drain chocked and the waste lying outside	HK/Engg	
3	Calibration Sticker of weighing scale - no date mentioned	Engg	
	GLMICU		
1	Needle cutter box to be replaced in one of the medicine trolley	Engg	
2	Nursing & HK Staff was well aware of the guidelines and protocols		
	2nd Floor General Ward		
1	Waste Mixing - Food tray found in yellow bag	Nursing	
2	Hematology lab trolley - needle cutter to be replaced	Engg	

Additional Points discussed - To be taken up for committee discussion

1. The needle stick injury cases are not reported in AIRS portal
2. While tying and lifting the bag filled from waste bin, HK staff is getting needle stick injuries even after using the gloves.

ATTENDANCE SHEET

DEPARTMENT:

PROGRAM:

TRAINER:

DATE :

TIME :

Bio Medical Waste Mgmt Audit Records

S.NO.	CL.NO	NAME	SIGNATURE	SCORES
1	1055402	REENA LIGIN	Reena	INFECTION CONTROL
2	1056436	Shirani Sharma	Shirani	"
3	1054185	LIALAMMA CHACKO	L1054185	MURBINGU
4	1081085	ANKIT ASROL	ANKIT	H.K.
5	1128443	Satish Kumar	Satish	Quality
6	1054016	Ganeshwar Singh	Ganeshwar	Engg.
7	1074730	Anuradha	A. Anuradha	H.K.
8	1374	Haris	Haris	H.K.
9	1054106	Anita Kalia	Anita	Engg.
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