

EMD/C-27/105 /2022 June 23, 2022

### **Member Secretary**

Jharkhand State Pollution Control Board T.A. Division Building HEC Campus, Dhurwa **RANCHI- 834 004** 

Subject: Submission of Annual Report for the calendar year 2021 of TMH Clinics (08 Nos.) Tata Steel Limited at Jamshedpur under Bio-Medical Waste Management Rules, 2016 & its amendment.

Reference:

	chee.					
1.	One-time	Authorization	vide	Ref	no.	JSPCB/RO/JSR/BMW-
	7446674/2	2020/2, dated 11	1/02/2	020.		
2.	One-time	Authorization	vide	Ref	no.	JSPCB/RO/JSR/BMW-
	7458029/2	2020/3, dated 1	1/02/2	020.		
3.	One-time	Authorization	vide	Ref	no.	JSPCB/RO/JSR/BMW-
	7457954/2	2020/4, dated 1	1/02/2	020.		
4.	One-time	Authorization	vide	Ref	no.	JSPCB/RO/JSR/BMW-
	7457992/2	2020/5, dated 11	1/02/2	020.		
5.	One-time	Authorization	vide	Ref	no.	JSPCB/RO/JSR/BMW-
	7457978/2	2020/6, dated 1	1/02/2	020.		
6.	One-time	Authorization	vide	Ref	no.	JSPCB/RO/JSR/BMW-
	7458106/2	2020/7, dated 1	1/02/2	020.		
7.	One-time	Authorization	vide	Ref	no.	JSPCB/RO/JSR/BMW-
	7458021/2	2020/8, dated 1	1/02/2	020.		
8.				Ref	no.	JSPCB/RO/JSR/BMW-
	7458061/2	2020/9, dated 1	1/02/2	020.		

Dear Sir,

This has reference to captioned subject that we are submitting herewith the Annual Report for the calendar year 2021 of TMH Clinics (08 Nos.) at Jamshedpur under rule of 13 of Bio-Medical Waste Management Rules, 2016 for your kind information and perusal please.

We trust you will find the report in order.

Thanking you

Yours faithfully, For Tata Steel Limited

Anop sivatava

Anoop Srivastava Head Environment Monitoring, Testing & Analysis (TSJ)

Enclosures as above

Regional Officer, Jharkhand State Pollution Control Board, Copy to: Jamshedpur

> Jamshedpur 831 001 India Registered Office Bombay House 24 Homi Mody Street Fort Mumbai 400 001 India Tel 91 22 66658282 Fax 91 22 66657724 Corporate Identity Number L27100MH1907PLC000260 Website www.tatasteel.com

#### TATA STEEL LIMITED

### Bio-Medical Waste Management Rules, 2016.

[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 2021, by the occupier of health care facility (HCF) or common bio medical waste treatment facility (CBWTF).

S.No.	Particulars											
1	a. Particulars of the Occupier											
	(i) Name of the authorized person (occupier or operator of the facility)	Mr. T V Narendran CEO & MD, Tata Steel										
	(ii) Name of HCF or CBMWTF	Tata Main Hospital, Kadı	ma Clinic									
	(iii) Address for Correspondence	Besides Rankini Mandir,	Jamshedpur-831001									
	(iv) Address of Facility	Tata Main Hospital, Tata	Steel Ltd., Jamshedpur.									
	(v)Tel. No, Fax. No	0657-2224559, 0657-24	23525									
	(vi) E-mail ID	anoop.srivastava@tatas	teel.com									
	(vii) URL of Website	www.tatamainhospital.com										
	(viii) GPS coordinates of HCF or CBMWTF	Latitude 22.801 Longitude 86.180										
	(ix) Ownership of HCF or CBMWTF	Private	(State Government or Private or Semi Govt. or any other)									
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	Valid	JSPCB/RO/JSR/BMW- 7464043/2020/1 11/02/2020									
	(xi). Status of Consents under Water Act and Air Act	Not Applicable	Not Applicable									
2	Type of Healthcare Facility	Consultation										
	(i) Bedded Hospital		No. of Beds: 0									
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	Steel Limited, Jamsheo Colony, Tin Plate Basti Note: Bio-Medical waste	I, Clinic, ADMH Complex, Tata Ipur, Medical Corridor, Tube of all non-bedded hospital I and then send for disposal to									

S.No.		Particulars						
	(iii) License number and its date of expiry	Clinical Establishment: SG31072/30414/2913 (BISTUPUR) 07.06.2025						
3	Details of CBMWTF	Not Applicable						
	(i) Number healthcare facilities							
	covered by CBMWTF (ii) No of beds covered by CBMWTF							
	(iii) Installed treatment and disposal capacity of		Kg Per day					
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF							
4	Quantity of waste generated or disposed in Kg per annum	Yellow Category: Monthly Average 1.2 kg	Yellow Category 14.0	kg				
	(on monthly average basis & Yearly)	Red Category: Monthly Average 0 kg	Red Category: 0 kg	*. * * *				
		White: Monthly Average 1.6 kg	White: 14 kg	•				
		Blue Category: Monthly	Blue Category: 0 kg					
1		Average 0 kg		: 				
5	Details of the Storage, treatment, transportation, processing and Disposal Facility	Color coded bins, covere Burner, ETP etc.	d trolley, Ash Pit, Need	le				
5		Color coded bins, covere	d trolley, Ash Pit, Need Not Applicable	le				
5	transportation, processing and Disposal Facility	Color coded bins, covere	[	le				
5	transportation, processing and Disposal Facility	Color coded bins, covere	[	le				
5	transportation, processing and Disposal Facility (i) Details of the on-site storage facility (ii) Disposal facilities	Color coded bins, covere Burner, ETP etc.	[	le				
5	transportation, processing and Disposal Facility (i) Details of the on-site storage facility (ii) Disposal facilities Type of treatment Equipment:	Color coded bins, covere Burner, ETP etc.	[					
5	transportation, processing and Disposal Facility (i) Details of the on-site storage facility (ii) Disposal facilities Type of treatment Equipment: No of units Capacity:	Color coded bins, covere Burner, ETP etc.	[					
5	transportation, processing and Disposal Facility (i) Details of the on-site storage facility (ii) Disposal facilities Type of treatment Equipment: No of units Capacity: Quantity Treated or disposed in kg per annum	Color coded bins, covere Burner, ETP etc.	[					
5	transportation, processing and Disposal Facility (i) Details of the on-site storage facility (ii) Disposal facilities Type of treatment Equipment: No of units Capacity: Quantity Treated or disposed in kg per	Color coded bins, covere Burner, ETP etc.	[					
5	transportation, processing and Disposal Facility (i) Details of the on-site storage facility (ii) Disposal facilities Type of treatment Equipment: No of units Capacity: Quantity Treated or disposed in kg per annum Incinerator ETP Plasma Pyrolysis	Color coded bins, covere Burner, ETP etc.	[					
5	transportation, processing and Disposal Facility (i) Details of the on-site storage facility (ii) Disposal facilities Type of treatment Equipment: No of units Capacity: Quantity Treated or disposed in kg per annum Incinerator ETP	Color coded bins, covere Burner, ETP etc.	[					
5	transportation, processing and Disposal Facility (i) Details of the on-site storage facility (ii) Disposal facilities Type of treatment Equipment: No of units Capacity: Quantity Treated or disposed in kg per annum Incinerator ETP Plasma Pyrolysis Autoclaves Microwave Shredder	Color coded bins, covere Burner, ETP etc.	[					
5	transportation, processing and Disposal Facility (i) Details of the on-site storage facility (ii) Disposal facilities Type of treatment Equipment: No of units Capacity: Quantity Treated or disposed in kg per annum Incinerator ETP Plasma Pyrolysis Autoclaves Microwave	Color coded bins, covere Burner, ETP etc. Not Applicable	[					

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S.No.	Particulars										
	Any other treatment										
	(iii) Quantity of recyclable wastes sold authorized recyclers after treatment in kg per annum		Red Category (like plastic, glass etc.) 0 Kg								
	(iv) No of vehicles used for collection and transportation of biomedical waste	One									
	v)Details of ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Not Applicable									
	(vi) Name of the Common Bio- Medical Waste — Treatment Facility Operator through which wastes are disposed of	Adityapur Waste Management Pvt. Ltd., (Seraikela Kharsawan)									
	(vii) List of members HCF not handed over Bio-medical waste	NA									
6	Do you have Bio-medical waste management? If yes, attach minutes of the meetings held during the reporting period	Yes	Minutes of Meeting attached. As Annexure-II								
7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management. (ii) number of personnel trained (iii) number of personnel trained at the time of induction (iv) number of personnel not undergone any training being conducted on monthly so far (v) whether standard manual for training is available? (vi) any other information)	12 nos. 16 BMVV Handlers trained (apart from all other staff) 100% induction to all staff joining organization Nil Yes, with Infection control committee									
8	Details of the accident occurred during the year (i) Number of Accidents occurred	Nil									
	(ii) Number of the persons affected	Nil	1								
	(iii) Remedial Action taken (Please attach details if any)	NA									
	(iv) Any Fatality occurred	Nil									
9	Are you meeting the standards of air pollution; from the incinerator, How many times in last year could not meet the standards?	NA, as we are sending all BWM to CBWMTF									

S.No.		Particulars					
10	Details of Continuous online emission monitoring systems installed	emission monitoring systems					
11	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Not Applicable				
12	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Meeting Standards				
13	Any other relevant information	NA	NA				

Date: 23-06-2022

Place: Jamshedpur

Encl: 1. Annexure-I

2. Annexure-II

29/6/22

						CALLAR A	JAUR	<u> </u>						
					тмн с	Clinic A	DMH C	omple	X				···	
Details of Bio Medical Waste Generation(2021)														
S. No	Category	Jan	Feb	Mar	Apr	Мау	Jun	Jül	Aug	Sep	Oct	Nov	Dec	Total
A	White	0.0	0.0	1.6	1. <del>9</del>	1.5	1.5	1.5	1.6	0.7	0.7	1.0	2.0	14.0
B	Yellow	0.0	0.0	1.4	1.1	-1.1	1.0	0.5	0.4	1.3	1.3	2.0	1.0	. : <b>11.1</b> .
С	Red	0.0	0:0	0:0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0,0
D	Blue	0.0	0.0	0.0	0.0	0.0	0.0	0,0	0.0	0.0	0.0	0.0	0.0	0.0
Total V	Naste (Kg)	0.0	0.0	3.0	3.0	2.6	2.5	2.0	2.0	2.0	2.0	3.0	3.0	25.1

### Annexure-I

### <u>Annexure – II</u>

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_		es of Mer		at., tr6	
	the Meeting : Biomedical Waste Managem	ent Com	mittee (TMH and C	linics)	
d On	: 25/12/21				
ne	: 17:00 - 17,30PM				
iember	<b>1</b> 51 -				
SI. N		Name	?		1
¥.	Chairman	Dr Su	idhir Mishra		]
2	Convener	Dr M	nakshi Gupla		
3			iirantan Bose		
4	Nursing Superintendent		iry Kutty Babu		
5	Sr Manager, Administration	Kuma	ir Lilanand		1
• G	uest – Mr Dipanand Pradhan				
Menute	5				
:					
SI.	Points / Issues		Action by	Completion	Status
No.				date by	Done
1	Review of current Biomedical Waste Mng		All	10/07/21	LOVE
·	policy, with emphasis on COVID requirem	nems	representatives		
2	Identifying gaps as per new policy		All	10/07/21	Done
			representatives Dr Snyidhva	·	Done
3	Revision of Manual			20/07/21	10010
3	E CARACONDES OF INSPECTOR		1 ET 14 Garden		
<u> </u>			Dr M Gupta		Done
. <u> </u>	Requirement/Feasibility of implementing	or of:		40.07/04	Done
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rathe	er at	Dr M Gupta All members	10 /07/21	Done
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rathe disposal site from hospital		All members		
. <u> </u>	Requirement/Feasibility of implementing barcoding at point of origin of waste, rathe disposal site from hospital Compliance to labelling waste bags at wa	ird level		10 /07/21 07/07/21	Done
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather disposal site from hospital Compliance to labelling waste bags at wa Visit to Adityapur facility, may be at 6 mor	ird level	All members Kumar Lilanand		Done Permission
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather disposal site from hospital Compliance to labelling waste bags at wa Visit to Adityapur facility, may be at 6 mor intervals to crosscheck compliance with s	ird level nthly lafe	All members Kumar Lilanand Dr Srividhya	07/07/21	Done Permission given by
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather disposal site from hospital Compliance to labelling waste bags at war Visit to Adityapur facility, may be at 6 mor intervals to crosscheck compliance with s disposal as per policy, approval to be take	ird level nthly lafe	All members Kumar Lilanand Dr Srividhya Dr M Gupta		Done Permission
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather disposal site from hospital Compliance to labelling waste bags at wa Visit to Adityapur facility, may be at 6 mor intervals to crosscheck compliance with s	ird level nthly lafe	All members Kumar Lilanand Dr Srividhya	07/07/21	Done Permission given by
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather disposal site from hospital Compliance to labelling waste bags at wa Visit to Adityapur facility, may be at 6 mor intervals to crosscheck compliance with s disposal as per policy, approval to be take Sr Mingment	ird level hthly iafo en from	All members Kumar Lilanand Dr Srividhya Dr M Gupta	07/07/21	Done Permission given by GMMS To be
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather disposal site from hospital Compliance to labelling waste bags at war Visit to Adityapur facility, may be at 6 mor intervals to crosscheck compliance with s disposal as per policy, approval to be take	ird level hthly iafo en from	All members Kumar Lilanand Dr Srividhya Dr M Gupta Kumar Lilanand	07/07/21	Done Permission given by GMMS To be discussed
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather disposal site from hospital Compliance to labelling waste bags at wa Visit to Adityapur facility, may be at 6 mor intervals to crosscheck compliance with s disposal as per policy, approval to be take Sr Mingment	ird level hthly iafo en from	All members Kumar Lilanand Dr Srividhya Dr M Gupta Kumar Lilanand Dr Sudhir	07/07/21	Done Permission given by GMMS To be discussed with GMMS
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rathe disposal site from hospital Compliance to labelling waste bags at wa Visit to Adityapur facility, may be at 6 mor intervals to crosscheck compliance with s disposal as per policy, approval to be take Sr Mngment Appointing designated Biomedical Nodal	ird level hthly afe en from Officer	All members Kumar Lilanand Dr Srividhya Dr M Gupta Kumar Lilanand Dr Sudhir Mishra Dr Chirantan	07/07/21	Done Permission given by GMMS To be discussed with GMMS Decision
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rathe disposal site from hospital Compliance to labelling waste bags at wa Visit to Adityapur facility, may be at 6 mor intervals to crosscheck compliance with s disposal as per policy, approval to be take Sr Mingment Appointing designated Biomedical Nodal Non-infectious waste to go into black in C	ird level hthly afe en from Officer	All members Kumar Lilanand Dr Srividhya Dr M Gupta Kumar Lilanand Dr Sudhir Mishra Dr Chirantan Dr Chirantan	07/07/21	Done Permission given by GMMS To be discussed with GMMS Decision pending
4 5. 7. 8	Requirement/Feasibility of implementing barcoding at point of origin of waste, rathe disposal site from hospital Compliance to labelling waste bags at wa Visit to Adityapur facility, may be at 6 mor intervals to crosscheck compliance with s disposal as per policy, approval to be take Sr Mngment Appointing designated Biomedical Nodal	ird level hthly afe en from Officer	All members Kumar Lilanand Dr Srividhya Dr M Gupta Kumar Lilanand Dr Sudhir Mishra Dr Chirantan	07/07/21	Done Permission given by GMMS To be discussed with GMMS Doctation pending To be taken
4 5. 7. 8	Requirement/Feasibility of implementing barcoding at point of origin of waste, rathe disposal site from hospital Compliance to labelling waste bags at wa Visit to Adityapur facility, may be at 6 mor intervals to crosscheck compliance with s disposal as per policy, approval to be take Sr Mingment Appointing designated Biomedical Nodal Non-infectious waste to go into black in C wards	ird level nthly afe en from Officer	All members Kumar Lilanand Dr Srividhya Dr M Gupta Kumar Lilanand Dr Sudhir Mishra Dr Chirantan Dr Chirantan Mr Lilanand	07/07/21	Done Permission given by GMMS To be discussed with GMMS Doctation pending To be taken with JUSCC
4 5. 7. 8	Requirement/Feasibility of implementing barcoding at point of origin of waste, rathe disposal site from hospital Compliance to labelling waste bags at wa Visit to Adityapur facility, may be at 6 mor intervals to crosscheck compliance with s disposal as per policy, approval to be take Sr Mingment Appointing designated Biomedical Nodal Non-infectious waste to go into black in C	ird level nthly afe en from Officer	All members Kumar Lilanand Dr Srividhya Dr M Gupta Kumar Lilanand Dr Sudhir Mishra Dr Chirantan Dr Chirantan	07/07/21	Done Permission given by GMMS To be discussed with GMMS Doctation pending To be taken

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A. Minuted by: -Name: - Dr Minakshi Gupta

### Bio-Medical Waste Management Rules, 2016.

[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 2021, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF).

S.No.	Particulars											
1.	a. Particulars of the Occupier											
	(i) Name of the authorized person (occupier or operator of the facility)	Mr. T V Narendran CEO & MD, Tata Steel										
	(ii) Name of HCF or CBMWTF	Tata Main Hospital, S	iakchi (	Clinic								
· ·	(iii) Address for Correspondence	Babri Road, Sakchi, J	Jamshe	edpur-831001								
	(iv) Address of Facility	Tata Main Hospital, T	ata St	eel Ltd., Jamshedpur.								
	(v)Tel. No, Fax. No	0657-2224559, 0657-	-24235	525								
	(vi) E-mail ID	anoop.srivastava@ta	tastee	l.com								
	(vii) URL of Website	www.tatamainhospital.com										
	(viii) GPS coordinates of HCF or CBMWTF	Latitude 22.801 Longitude 86.180										
	(ix) Ownership of HCF or CBMWTF	Private	State Government or Private r Semi Govt. or any other)									
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	Valid	SPCB/RO/JSR/BMW- 458029/2020/3 11/02/2020									
	(xi). Status of Consents under Water Act and Air Act	Not Applicable	1	Not Applicable								
2	Type of Healthcare Facility	Consultation										
	(i) Bedded Hospital			No. of Beds: 0								
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	1. TMH Clinic Sakchi Note: Bio-Medical waste of all non-bedded hospital comes centrally to TMH and then send for disposal to CBMWTF										
	(iii) License number and its date of expiry	SG31072/30414/291	3 (BIS	TUPUR) 07.06.2025								

S.No.		Particulars	
3	Details of CBMWTF	Not Applicable	
	(i) Number healthcare facilities		· · · · · · · · · · · · · · · · · · ·
	covered by CBMWTF (ii) No of beds covered by CBMWTF		
	(iii) Installed treatment and disposal capacity of		Kg Per day
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF		
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis & Yearly)	Yellow Category: Monthly Average 8.53 kg	Yellow Category 68 kg
		Red Category: Monthly Average 7.96 kg	Red Category: 64 kg
		White: Monthly Average 2.07 kg	White: 17 kg
		Blue Category: Monthly Average 0.92 kg	Blue Category: 5 kg
5	Details of the Storage, treatment, transportation, processing and Disposal Facility	Color coded bins, covere Burner, ETP etc.	d trolley, Ash Pit, Needle
	(i) Details of the on-site storage facility		Not Applicable
			· · · ·
	<ul><li>(ii) Disposal facilities</li><li>Type of treatment Equipment:</li></ul>	Not Applicable	
	No of units		• •. •
	Capacity:		
	Quantity Treated or disposed in kg per annum		
	Incinerator		
]	ETP Plasma Pyrolysis		
	Autoclaves		•
	Microwave	2	
	Shredder Needle tip cutter or destroyer	.2	:
	Sharps encapsulation or concrete pit -		
	Deep burial pits: Chemical disinfection: -		
	Any other treatment		·  ·

S.No.		Particulars							
	(iii) Quantity of recyclable wastes sold authorized recyclers after treatment in kg per annum		Red Category (like plastic, glass etc.) 0 Kg						
	(iv) No of vehicles used for collection and transportation of biomedical waste	One							
	v)Details of ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Not Applicable							
	(vi) Name of the Common Bio- Medical Waste — Treatment Facility Operator through which wastes are disposed of	Adityapur Waste Management Pvt. Ltd., (Seraikela Kharsawan)							
	(vii) List of members HCF not handed over Bio-medical waste	NA							
6	Do you have Bio-medical waste management? If yes, attach minutes of the meetings held during the reporting period	Yes	Minutes of Meeting attached. As Annexure-II						
7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management. (ii) number of personnel trained (iii) number of personnel trained at the time of induction (iv) number of personnel not undergone any training being conducted on monthly so far (v) whether standard manual for training is available? (vi) any other information)	12 nos. 16 BMW Handlers trained (apart from all other staff) 100% induction to all staff joining organization Nil Yes, with Infection control committee							
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	Nil							
9	Are you meeting the standards of air pollution; from the incinerator, How many times in last year could not meet the standards?	NA, as we are sending all BWM to CBWMTF							
10	Details of Continuous online emission monitoring systems installed	NA							

S.No.	Particulars							
11	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	2	Not Applicable					
12	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Meeting Standards					
13	Any other relevant information	NA	NA					

Date: 29/6/22

Place: Jamshedpur

Encl: 1. Annexure-I 2. Annexure-II

# Annexure-l

					тмн	l Clinic	Sakchi							
	Details of Bio Medical Waste Generation(2021)													
S. No	Category	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
A:	White	0	0	0	0	1	3	2	2	0	3	0	6	17
В	Yellow	0	0	0	0	3	7	12	6	6	3	5	28	68
Ċ	Red	0	Ö	0	0	3	7	13	4	3	3.	3	30	64
D	Blue	0	0	0	0	0	1	0	0	3	2	0	-0	5
	Total Waste (Kg)	0	0	Ó	0:	7	17	27	11	11	9	7	64	153

# <u>Annexure – II</u>

d On	the Meeting : Biomedical Waste Managemen : 25/12/21	at Come	nillee (TMH and C	línics)	
ie	: 17:00 - 17:30PM				
enter		- None			-1
SI.N	to. Designation / Appointment Chairman	Name Dr Su	ndhir Mishra		-
2	Convener		nakshi Gupta		4
	Head Admin		irantan Bose		1
- 4	Nursing Superintendent		ry Kutty Babu		1
5	Sr Manager, Administration	Kuma	ir Litanand		]
• Ģ	uest - Mr Dipanand Prachan				
Anute	\$ 			I Campletice	Ctatus
SI. No.	Points / Issues		Action by	Completion date by	Status
1	Review of current Biomedical Waste Mingm policy, with emphasis on COVID requirement		All representatives	10/07/21	Done
2	Identifying gaps as per new poacy		AE representatives	10/07/21	Done
3	Revision of Manual		Dr Snvidhya Dr M Gupta	20/07/21	Done
4	Requirement/Feasibility of Implementing barcoding at point of origin of waste, rather disposal site from hospital	at	All members	10 /07/21	Done
5.	Compliance to labelling waste bags at ward	i level	Kumar Lilanand	07/07/21	Done
7.	Visit to Adayapur facility, may be at 6 month intervals to crosscheck compliance with saf disposal as per policy, approval to be taken Sr Mngment	niy le	Or Srividhya Dr M Gupta Kumar Lilanand	10/07/21	Permission given by GMMS
8	Appointing designated Biomedical Nodal O	fficer	Dr Sudhir Mishra Dr Chirantan	15/12/21	To be discussed with GMMS
9	Non-infectious waste to go into black in CO wards	MD	Dr Chirantan Mr Ulanand		Decision pending To be taken with JUSCO
10	Training classes to be reemphasized and ta along with ICC classes for all	axen	Dr Minakshi Gupta Dr Srividhya		Ongoing

#### Bio-Medical Waste Management Rules, 2016.

[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 2021, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF).

S.No.	Particulars						
1	a. Particulars of the Occupier						
	(i) Name of the authorized person (occupier or operator of the facility)	ne of the authorized person Mr. T V Narendran bier or operator of the facility) CEO & MD, Tata Steel					
	(ii) Name of HCF or CBMWTF	Tata Main Hospital, Baridih Clinic					
	(iii) Address for Correspondence	ddress for Correspondence Near Baridih Recreation Club, Jamshedpur-831001					
	(iv) Address of Facility Tata Main Hospital, Tata Steel Ltd., Jamshedpur.						
	(v)Tel. No, Fax. No 0657-2224559, 0657-2423525						
	(vi) E-mail ID	anoop.srivastava@tatasteel.com					
	(vii) URL of Website	www.tatamainhospital.com					
	(viii) GPS coordinates of HCF or CBMWTF	Latitude 22.801 Longitude 86.180					
	(ix) Ownership of HCF or CBMWTF	Private	(State Government or Private or Semi Govt. or any other)				
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	Valid	JSPCB/RO/JSR/BMW- 7457954/2020/4 11/02/2020				
	(xi). Status of Consents under Water Act and Air Act	Not Applicable	Not Applicable				
2	Type of Healthcare Facility	Consultation					
<u></u>	(i) Bedded Hospital		No. of Beds: 0				
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	1. TMH Clinic Baridih Note: Bio-Medical waste of all non-bedded hospital comes centrally to TMH and then send for disposal CBMWTF					

S.No.		Particulars	······································
	(iii) License number and its date of expiry	Clinical Establishment: S (BISTUPUR) 07.06.2025	
3	Details of CBMWTF	Not Applicable	
	(i) Number healthcare facilities		· · · · · · · · · · · · · · · · · · ·
	covered by CBMWTF (ii) No of beds covered by CBMWTF		
	(iii) Installed treatment and disposal capacity of		Kg Per day
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF		
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis & Yearly)	Yellow Category: Monthly Average 10.69 kg	Yellow Category 85.5 kg
		Red Category: Monthly Average 6.34 kg	Red Category: 50.7 kg
		White: Monthly Average 2.43 kg	White: 14.6 kg
		Blue Category: Monthly Average 0.6 kg	Blue Category: 3 kg
5	Details of the Storage, treatment, transportation, processing and Disposal Facility	Color coded bins, covere Burner, ETP etc.	ed trolley, Ash Pit, Needle
	(i) Details of the on-site storage facility		Not Applicable
	(ii) Disposal facilities Type of treatment Equipment:	Not Applicable	
	No of units	1	
9 <u>1</u>	Capacity		
	Quantity Treated or disposed in kg per annum		
	Incinerator ETP		· · · · ·
	Plasma Pyrolysis Autoclaves Microwave		
	Shredder Needle tip cutter or destroyer Sharps encapsulation or concrete pit – Deep burial pits:	2	

S.No.	Particulars							
	Chemical disinfection: - Any other treatment							
	(iii) Quantity of recyclable wastes sold authorized recyclers after treatment in kg per annum		Red Category (like plastic, glass etc.) 50.7 Kg					
	(iv) No of vehicles used for collection and transportation of biomedical waste	One						
	v)Details of ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Not Applicable						
4778	(vi) Name of the Common Bio- Medical Waste — Treatment Facility Operator through which wastes are disposed of	Adityapur Waste Management Pvt. Ltd., (Seraikela Kharsawan)						
	(vii) List of members HCF not handed over Bio-medical waste	NA						
6	Do you have Bio-medical waste management? If yes, attach minutes of the meetings held during the reporting period	Yes	Minutes of Meeting attached As Annexure-II					
7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management. (ii) number of personnel trained (iii) number of personnel trained at the time of induction (iv) number of personnel not undergone any training being conducted on monthly so far (v) whether standard manual for training is available? (vi) any other information)	12 nos. 16 BMW Handlers trained (apart from all other staff) 100% induction to all staff joining organization Nil Yes, with Infection control committee						
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	Nil						
.9	Are you meeting the standards of air pollution; from the incinerator, How many times in last year could not meet the standards?	NA, as we are sending all BWM to CBWMTF						

S.No.		Particulars		
10	Details of Continuous online emission monitoring systems installed	NA		
11	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Not Applicable	
12	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Meeting Standards	
13	Any other relevant information	NA	NA	

Date : 24-06-2022

Place: Jamshedpur

Encl: 1. Annexure-I 2. Annexure-II

29/6/22

	TMH Clinic Baridih													
Detailes of Bio Medical Waste Generation(2021)														
S. No	Category	Jan	Feb	Mar	Apr	May	Jun	lut	Àug	Sep	Oct	Nov	Dec	Total
A	White	0.0	0.0	0.0	0.0	0.0	3.0	Q.Q	3.6	0.0	1.0	1.0	6.0	14.6
В	Yellow	0.0	.0.0	-0.0	0.0	3.0	9.1	21.5	5.8	0.0	5.6	2.5	38.0	85.5
С	Red	0.0	0.0	0.0	0.0	2.0	7.5	10.5	2.5	3.5	3.5	1.2	20.0	50.7
D	Blue	0.0	0.0	0.0	0.0	0.0	1.0	0.0	2.0	0.0	0.0	0.0	0.0	3.0
Total W	aste (Kg)	0.0	0.0	0.0	0.0	5.0	20.6	32.0	13.9	3.5	10.1	4.7	64.0	153.8

### Annexure-l

# <u>Annexure – II</u>

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#### Minutes of Meeting

Name of the Meeting	: Biomedical Waste Management Committee (TMH and Clinics)
Held On	: 25/12/21
Time	: 17:00 - 17.30PM

Members: -

SL No.	Designation / Appointment	Name	
1	Chairman	Dr Sudhir Mishra	
2	Convener	Dr Mnakshi Gupta	
3	Head Admin	Dr Chirantan Bose	
4	Nursing Superintendent	Sr Mary Kutty Babu	
5	Sr Manager, Administration	Kumar Lilanand	

Guest – Mr Dipanand Pradhan

Minutes

SI. No.	Points / Issues	Action by	Completion date by	Status
1	Review of current Biomedical Waste Mngment policy, with emphasis on COVID requirements	All representatives	10 /07/21	Done
2	Identifying gaps as per new policy	All	10/07/21	Done
3	Revision of Manual	Dr Srividhya Dr M Gupta	20/07/21	Done
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather at disposal site from hospital	All members	10 /07/21	Done
5.	Compliance to labelling waste bags at ward level	Kumar Lilanand	07/07/21	Done
7.	Visit to Adityapur facility, may be at 6 monthly intervals to crosscheck compliance with safe disposal as per policy, approval to be taken from Sr Mingment	Dr Sriväthya Dr M Gupta Kumar Lianand	10/07/21	Permission given by GMMS
8	Appointing designated Biomedical Nodal Officer	Dr Sudhir Mishra Dr Chirantan	15/12/21	To be discussed with GMMS
9	Non-infectious waste to go into black in COVID wards	Dr Chirantan Mr Litanand		Decision pending To be taken with JUSCO
10	Training classes to be reemphasized and taken along with ICC classes for all	Or Minakste Gupta Dr Srividhya		Ongoing

A. Minuted by: -Name: - Dr Minakshi Gupta

### Bio-Medical Waste Management Rules, 2016.

[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 2021, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF).

S.No.		Particulars				
1	a. Particulars of the Occupier					
	(i) Name of the authorized person (occupier or operator of the facility)	Mr. T V Narendran CEO & MD, Tata Stee	əl			
	(ii) Name of HCF or CBMWTF	Tata Main Hospital, S	outh Park Clinic			
	(iii) Address for Correspondence	T.M.H. South Park Clinic, At- Q road, Near Reliance Fresh, Bistupur-831001 Jamshedpur-831001				
	(iv) Address of Facility		ata Steel Ltd., Jamshedpur.			
	(v)Tel. No, Fax. No	0657-2224559, 0657-2423525				
	(vi) E-mail ID	anoop.srivastava@tatasteel.com				
	(vii) URL of Website	www.tatamainhospital.com				
	(viii) GPS coordinates of HCF or CBMWTF	Latitude 22.801 Longitude 86.180				
	(ix) Ownership of HCF or CBMWTF	Private	(State Government or Private or Semi Govt. or any other)			
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	Valid	JSPCB/RO/JSR/BMW- 7457992/2020/5 11/02/2020			
	(xi). Status of Consents under Water Act and Air Act	Not Applicable	Not Applicable			
Ź	Type of Healthcare Facility	Consultation				
	(i) Bedded Hospital		No. of Beds: 0			
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	1. South Park Clinic Note: Bio-Medical waste of all non-bedded hospital comes centrally to TMH and then send for disposal CBMWTF				
	(iii) License number and its date of expiry	SG31072/30414/2913	3 (BISTUPUR) 07.06.2025			
3	Details of CBMWTF	Not Applicable				
	(i) Number healthcare facilities					
	covered by CBMWTF					

S.No.		Particulars		
	(ii) No of beds covered by CBMWTF			
	(iii) Installed treatment and disposal capacity of		Kg Per day	
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF			
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis & Yearly)	Yellow Category; Monthly Average 3.78 kg	Yellow Category 30 kg	
		Red Category: Monthly Average 2.85 kg	Red Category: 20 kg	
		White: Monthly Average 0.87 kg	White: 6 kg	
		Blue Category: Monthly Average 0.2 kg	Blue Category: 1 kg	
5	Details of the Storage, treatment, transportation, processing and Disposal Facility	Color coded bins, covere Burner, ETP etc.	d trolley, Ash Pit, Needle	
	(i) Details of the on-site storage facility		Not Applicable	
			· · · · · · · · · · · · · · · · · · ·	
	(ii) Disposal facilities Type of treatment Equipment;	Not Applicable		
	No of units			
	Capacity:			
	Quantity Treated or disposed in kg per annum Incinerator			
	ETP Plasma Pyrolysis Autoclaves			
	Microwave Shredder Needle tip cutter or destroyer Sharps encapsulation or concrete pit – Deep burial pits: Chemical disinfection: - Any other treatment	2		
	(iii) Quantity of recyclable wastes sold authorized recyclers after treatment in kg per annum		Red Category (like plastic glass etc.) 0 Kg	с,
	(iv) No of vehicles used for collection and transportation of biomedical waste	One	*. :	

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S.No.	Particulars								
	v)Details of ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Not Applicable							
	(vi) Name of the Common Bio- Medical Waste — Treatment Facility Operator through which wastes are disposed of	Adityapur Waste Management Pvt. Ltd., (Seraikela Kharsawan)							
	(vii) List of members HCF not handed over Bio-medical waste	NA							
6	Do you have Bio-medical waste management? If yes, attach minutes of the meetings held during the reporting period	Yes	Minutes of Meeting attached. As Annexure-II						
7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management. (ii) number of personnel trained. (iii) number of personnel trained at the time of induction (iv) number of personnel not undergone any training being conducted on monthly so far (v) whether standard manual for training is available? (vi) any other information)	12 nos. 16 BMW Handlers trained (apart from all other staff) 100% induction to all staff joining organization Nil Yes, with Infection control committee							
8	Details of the accident occurred during the year (i) Number of Accidents occurred	Nil	_						
	(ii) Number of the persons affected	NI							
	(iii) Remedial Action taken (Please attach details if any)	NA							
	(iv) Any Fatality occurred	Nil							
9	Are you meeting the standards of air pollution; from the incinerator, How many times in last year could not meet the standards?	NA, as we are sending all BWM to CBWMTF							
10	Details of Continuous online emission monitoring systems installed	NA							
11.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Not Applicable						

S.No.	Particulars					
12	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Meeting Standards	2		
13	Any other relevant information	NA	NA			

Date: 2 G 6122

Place: Jamshedpur

Encl: 1. Annexure-I 2. Annexure-II

					TMH C	linic So	uth Par	'k						
			Detail	ls of Bio	o Medi	cal Was	ste Gen	eratio	n(2021)	)				
S. No	Category	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
A	White	<u>0</u>	0	0	Q.	0	1	1.	2	0	1	Ö	1	6
В	Yellow	0	0	0	0	6	1	6	5	4	5	3	1	30
С	Red	0	0	0	0	0	2	8	4	3	3	0	1	20
D	Blue	0	0	0.	0	0	0	0	0	0	0	0	1	1
	Total Waste (Kg)	0	0	0	0	6	5	15	10	6	.8	3	4	58

## <u>Annexure-l</u>

### <u>Annexure – II</u>

 Name of the Meeting
 : Biomedical Waste Management Committee (TMH and Clinics)

 Held On
 : 25/12/21

 Time
 : 17:00 - 17:30PM

SI. NO.	Designation / Appointment	Name
1	Chairman	Dr Sudhir Mishra
2	Convener	Dr Minakshi Gupta
3	Head Admin	Dr Chirantan Bose
4	Nursing Superintendent	Sr Mary Kutty Babu
5	Sr Manager, Administration	Kumar Lilanand

Guest – Mr Dipanand Prachan

#### Minutes

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Sł. No.	Points / issues	Action by	Completion date by	Status
1	Review of current Biomedical Waste Magment policy, with emphasis on COVID requirements	All representatives	10/07/21	Done
2	Identifying gaps as per new policy	Ali representatives	10/07/21	Done
3	Revision of Manual	Dr Srividhya Dr M Gupta	20/07/21	Done
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather at disposal site from hospital	All members	10 /07/21	Done
5.	Compliance to labelling waste bags at ward level	Kumar Lilanand	07/07/21	Done
7.	Visit to Adhyapur facility, may be at 6 monthly intervals to crosscheck compliance with sale disposal as per policy, approval to be taken from Sr Magment	Dr Snivelnya Dr M Gupta Kumar Lilânand	10/07/21	Permission given by GMMS
8	Appointing designated Biomedical Nodal Officer	Dr Sudhir Mishra Dr Chirantan	15/12/21	To be discussed with GMMS
9	Non-infectious waste to go into black in COVID wards	Dr Chirantan Mr Lilanand		Decision pending To be taken with JUSCC
10	Training classes to be reemphasized and taken along with ICC classes for all	Dr Minakshi Gupta Dr Srividhya		Ongoing

### Bio-Medical Waste Management Rules, 2016.

[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 2021, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF).

S.No.	Particulars							
1	a. Particulars of the Occupier							
	(i) Name of the authorized person (occupier or operator of the facility)	Mr. T V Narendran CEO & MD, Tata Ste						
	(ii) Name of HCF or CBMWTF	Tata Main Hospital, Sonari Clinic						
	(iii) Address for Correspondence	Sonari, Jamshedpur-831001						
	(iv) Address of Facility	Tata Main Hospital, Tata Steel Ltd., Jamshedp						
	(v)Tel. No, Fax. No	0657-2224559, 0657	-24235	25				
	(vi) E-mail ID	anoop.srivastava@tatasteel.com						
	(vii) URL of Website							
	(viii) GPS coordinates of HCF or CBMWTF	Latitude 22.801 Longitude 86.180						
	(ix) Ownership of HCF or CBMWTF	Private		State Government or Private r Semi Govt. or any other)				
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	Valid	JSPCB/RO/JSR/BMW- 7457978/2020/6 11/02/2020					
	(xi). Status of Consents under Water Act and Air Act	Not Applicable	N	lot Applicable				
2 .	Type of Healthcare Facility	Consultation						
	(i) Bedded Hospital			No. of Beds: 0				
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	1. TMH Clinic Sonari Note: Bio-Medical wa comes centrally to TI CBMWTF	aste of	all non-bedded hospital d then send for disposal to				
	(iii) License number and its date of expiry	SG31072/30414/291	3 (BIS	TUPUR) 07.06.2025				

S.No.	Particulars									
3	Details of CBMWTF	Not Applicable								
	(i) Number healthcare facilities									
	covered by CBMWTF (ii) No of beds covered by CBMWTF									
	(iii) Installed treatment and disposal capacity of		Kg Per day	· · · · · · · · · · · · · · · · · · ·						
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF									
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis & Yearly)	Yellow Category: Monthly Average 9.33 kg	Yellow Category 74.7	kg						
		Red Category: Monthly Average 6.30 kg	Red Category: 50.46	kg						
		White: Monthly Average 0.66 kg	White: 3.3 kg	• : ::						
		Blue Category: Monthly Average 2.22 kg	Blue Category: 17.8 k	g						
5	Details of the Storage, treatment, transportation, processing and Disposal Facility	Color coded bins, covere Burner, ETP etc.	d trolley, Ash Pit, Need	le						
	(i) Details of the on-site storage facility		Not Applicable	: •.						
				:. :.						
	(ii) Disposal facilities Type of treatment Equipment:	Not Applicable		:.						
	No of units			·. I. 						
	Capacity:			:. .:						
	Quantity Treated or disposed in kg per annum Incinerator ETP									
	Plasma Pyrolysis Autoclaves Microwave Shredder	2		· · · · ·						
	Needle tip cutter or destroyer Sharps encapsulation or concrete pit – Deep burial pits: Chemical disinfection: - Any other treatment	2								

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S.No.	Particulars								
	(iii) Quantity of recyclable wastes sold authorized recyclers after treatment in kg per annum		Red Category (like plastic, glass etc.) 0 Kg						
	(iv) No of vehicles used for collection and transportation of biomedical waste	One							
	v)Details of ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Not Applicable							
	(vi) Name of the Common Bio- Medical Waste — Treatment Facility Operator through which wastes are disposed of	Adityapur Waste Management Pvt. Ltd., (Seraikela Kharsawan)							
	(vii) List of members HCF not handed over Bio-medical waste	NA							
6	Do you have Bio-medical waste management? If yes, attach minutes of the meetings held during the reporting period	Yes	Minutes of Meeting attached. As Annexure-II						
7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management. (ii) number of personnel trained (iii) number of personnel trained at the time of induction (iv) number of personnel not undergone any training being conducted on monthly so far (v) whether standard manual for training is available? (vi) any other information)	12 nos. 16 BMW Handlers trained (apart from all other staff) 100% induction to all staff joining organization Nil Yes, with Infection control committee							
8	Details of the accident occurred during the year (i) Number of Accidents occurred	Niİ							
-	(ii) Number of the persons affected	Nil							
	(iii) Remedial Action taken (Please attach details if any)	NA							
	(iv) Any Fatality occurred	Nit							
9	Are you meeting the standards of air pollution; from the incinerator, How many times in last year could not meet the standards?	NA, as we are sending all BWM to CBWMTF							
10	Details of Continuous online emission monitoring systems installed	NA .							

S.No.	Particulars					
11	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Not Applicable			
12	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Meeting Standards			
13	Any other relevant information	NA	NA			

Date: 29/6/22

Place: Jamshedpur

Encl: 1. Annexure-I 2. Annexure-II

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# <u>Annexure-l</u>

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					TMF	I Clinic	Sonari							
			Detai	s of Bio	o Medi	cal Was	ste Gen	eratio	n <b>(2021</b>	)			. ··	
S. No	Category	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
А	White	0	0	0	.0	0	0	0	2	0	0	0	1	3
В	Yeilow	0	0	0	0	7	9	8	7	1	4	5	36	75
C	Red	0	0	0	0	5	8	8	5	9	5	Q	12	50
D	Blue	0	0	Ō	0	2	1	1	6	0	.3	4	1	18
	Total Waste (Kg)	0	0	Q	Ó	13	17	17	19	10	11	9	50	146

# <u>Annexure – II</u>

d On e	the Meeting : Biomedical Waste Management : 25/12/21 : 17:00 17:30PM	<b>O</b> VISH			
mbe	R5: -				_
SI.N		Name			]
1			dhir Mishra		_
2			akshi Gupta		4
3			rantan Bose ry Kutty Babu		4
<u>4</u> 5			r Litanand		-
	uest Mr Dipanand Pradhan	rearing	1 Page an in		4
linute SI. No.	s Points / Issues		Action by	Completion date by	Status
1	Review of current Biomedical Waste Mngme policy, with emphasis on COVID requirement		All representatives	10 /07/21	Done
2	Identifying gaps as per new policy		All representatives	10/07/21	Dane.
3	Revision of Manual		Dr Srividhya Dr M Gupta	20/07/21	Done
-4	Requirement/reastbility of implementing barcoding at point of origin of waste, rather a disposal site from hospital	at	All members	10 /07/21	Done
5	Compliance to labelling waste bags at ward	ievei	Kumar Lilanand	07/07/21	Done
7.	Visit to Addivatur facility, may be at 6 month intervals to crosscheck compliance with safe disposal as per policy, approval to be taken Sr Mingment		Dr Snividhya Dr M Gupta Kumar Lilanand	10/07/21	Permission given by GMMS
8	Appointing designated Biomedical Nodal Off	ficer	Dr Sudhir Mishra Dr Chirantan	15/12/21	To be discussed with GMMS
9	Non-infectious waste to go into black in COV wards	٨D	Dr Chirantan Mr Lilanand		Decision pending To be taken with JUSCO
10	Training classes to be reemphasized and tal along with ICC classes for all	ken	Or Minakshi Gupta Or Srividhya		Ongoing

# Bio-Medical Waste Management Rules, 2016.

[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 2021, by the occupier of health care facility (HCF) or common bio medical waste treatment facility (CBWTF).

S.No.		Particulars				
1	a. Particulars of the Occupier					
	(i) Name of the authorized person (occupier or operator of the facility)	Mr. T V Narendran CEO & MD, Tata Steel				
	(ii) Name of HCF or CBMWTF	M/s Tata Main Hospital, Clinic , Uliyan,				
	(iii) Address for Correspondence	T.M.H. Tata Main Ho Jamshedpur	ospital, Clinic , Uliyan,,-831005			
	(iv) Address of Facility	Tata Main Hospital, T	ata Steel Ltd., Jamshedpur.			
	(v)Tel. No, Fax. No 0657-2224559, 0657-2423525					
	(vi) E-mail ID	anoop.srivastava@tatasteel.com				
	(vii) URL of Website	www.tatamainhospital.com				
	(viii) GPS coordinates of HCF or CBMWTF	Latitude 22,801 Longitude 86.180				
	(ix) Ownership of HCF or CBMWTF	Private	(State Government or Private or Semi Govt. or any other)			
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	Valid	JSPCB/RO/JSR/BMW- 7458106/2020/7 11/02/2020			
	(xi). Status of Consents under Water Act and Air Act	Not Applicable	Not Applicable			
2	Type of Healthcare Facility	Consultation				
	(i) Bedded Hospital		No. of Beds: 0			
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	1. Uliyan, Clinic Note: Bio-Medical waste of all non-bedded hospital comes centrally to TMH and then send for disposal t CBMWTF				
	(iii) License number and its date of expiry	SG31072/30414/291	3 (BISTUPUR) 07.06.2025			
3	Details of CBMWTF	Not Applicable				
	(i) Number healthcare facilities					
	covered by CBMWTF		······			

No of beds covered by TF alled treatment and disposal y of antity of biomedical waste or disposed by CBMWTF ty of waste generated or ed in Kg per annum nthly average basis & Yearly)	Particulars	Kg Per day
TF alled treatment and disposal y of antity of biomedical waste or disposed by CBMWTF ty of waste generated or ed in Kg per annum		
TF alled treatment and disposal y of antity of biomedical waste or disposed by CBMWTF ty of waste generated or ed in Kg per annum		
TF alled treatment and disposal y of antity of biomedical waste or disposed by CBMWTF ty of waste generated or ed in Kg per annum		
TF alled treatment and disposal y of antity of biomedical waste or disposed by CBMWTF ty of waste generated or ed in Kg per annum		
TF alled treatment and disposal y of antity of biomedical waste or disposed by CBMWTF ty of waste generated or ed in Kg per annum	Yellow Category:	Kg Per day
y of antity of biomedical waste or disposed by CBMWTF ty of waste generated or ed in Kg per annum	Yellow Category:	Kg Per day
or disposed by CBMWTF ty of waste generated or ed in Kg per annum	Yellow Category:	
ed in Kg per annum	Yellow Category:	
	Monthly Average 6.9 kg	Yellow Category 48.3 kg
	Red Category: Monthly Average 2.81 kg	Red Category: 19.7 kg
	White: Monthly Average 0.35 kg	White: 2.5 kg
	Blue Category: Monthly Average 8.28 kg	Blue Category: 58 kg
tation, processing and	Color coded bins, covere Burner, ETP etc.	d trolley, Ash Pit, Needle
		Not Applicable
anal facilitica	Not Analisählia	i. 
	NotApplicable	
nits		
<b>y</b> :		
ves		
	2	
tip cutter or destroyer		
al disinfection: -		
Quantity of recyclable wastes horized recyclers after		Red Category (like plastic, glass etc.) 0 Kg
No of vehicles used for in and transportation of	One	
	of the Storage, treatment, rtation, processing and al Facility ils of the on-site storage facility osal facilities treatment Equipment: hits y: y Treated or disposed in kg per tor Pyrolysis ves ave er tip cutter or destroyer encapsulation or concrete pit – urial pits: al disinfection: - her treatment Quantity of recyclable wastes horized recyclers after nt in kg per annum No of vehicles used for in and transportation of cal waste	Average 8.28 kg         of the Storage, treatment,         rtation, processing and         al Facility         ils of the on-site storage facility         osal facilities         treatment Equipment:         hits         y:         y Treated or disposed in kg per         tor         Pyrolysis         ves         ave         er         tip cutter or destroyer         encapsulation or concrete pit –         urial pits:         al disinfection: -         her treatment         Quantity of recyclable wastes         horized recyclers after         nt in kg per annum         No of vehicles used for         on and transportation of

S.No.	Particulars										
	v)Details of ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Not Applicable									
	(vi) Name of the Common Bio- Medical Waste — Treatment Facility Operator through which wastes are disposed of	Adityapur Waste Management Pvt. Ltd., (Seraikela Kharsawan)									
	(vii) List of members HCF not handed over Bio-medical waste	NA									
6	Do you have Bio-medical waste management? If yes, attach minutes of the meetings held during the reporting period	Yes	Minutes of Meeting attached. As Annexure-II								
7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management. (ii) number of personnel trained (iii) number of personnel trained at the time of induction (iv) number of personnel not undergone any training being conducted on monthly so far (v) whether standard manual for training is available? (vi) any other information)	12 nos. 16 BMW Handlers trained (apart from all other staff) 100% induction to all staff joining organization Nil Yes, with Infection control committee									
8	Details of the accident occurred during the year (i) Number of Accidents occurred	Nif									
	(ii) Number of the persons affected	Nið									
	(iii) Remedial Action taken (Please attach details if any)	NA									
	(iv) Any Fatality occurred	Nil									
9.	Are you meeting the standards of air pollution; from the incinerator, How many times in last year could not meet the standards?	NA, as we are sending all BWM to CBWMTF									
10	Details of Continuous online emission monitoring systems installed	NA									
11	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Not Applicable								

S.No.	Particulars						
12	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Meeting Standards				
13	Any other relevant information	NA	NA				

Date: 29/6/22

Place: Jamshedpur

Encl: 1. Annexure-I 2. Annexure-II

	·····-				TA 611									
						l Clinic	Uliyan							
			Detail	ls of Bi	o Medi	cal Wa	ste Gen	eratio	n(2021)	)				
S. No	Category	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Noy	Déc	Total
A	White	0	0	Ó	0	Ó	1	0	0	0	0	2	<u>0</u>	3
В	Yellow	0	0	0	0	0	6	6	4	0	1	6	26	48
Ç.	Red	C	0	0	0	0	2	.5.	3	7	1	3	0	20
D	Blue	0	0	Ó	Q	0	1	1	-56	0	0	0	Ó	58
	Total Waste (Kg)	0	D	0	0	0	10	12	62	7	1	10	26	129

## Annexure-l

# <u>Annexure – II</u>

me of i Id On ne	the Meeting : Biomedical Waste Managem : 25/12/21 : 17:00 - 17:30PM	ent Com	mittee (TMH and C	linics)	
ember	SI -				
SL N	o. Designation / Appointment	Name	3		<u>]</u> .
1	Chairman		ichir Mishra		]
2	Convener	Dr M	naicshi Gupta		1
3	Head Admin		irantan Bose		1
4	Nursing Superintendent		ary Kutty Babu		-4
5	Sr Manager, Administration uest – Mr Dicanand Pradhan	Kum	ar Lilanand		4
• G Vinute SI,	5			Completion	Status
No.	Points / Issues		Action by	date by	
1	Review of current Biomedical Waste Migil policy, with emphasis on COVID requirem		All representatives 10 /07/21		Done
2	Identifying gaps as per new policy		All representatives	10 /07/21	Done
3	Revision of Manual		Dr Snvidhya Dr M Gupta	20/07/21	Done
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rathe disposal site from hospital	er at	All members	Done	
5.	Compliance to labelling waste bags at wa	rd level	Kumar Lilanand	Done	
7.	Visit to Adhyapur facility, may be at 6 mor intervals to crosscheck compliance with s disposal as per policy, approval to be take Sr Migment	ithly afe	Dr Srividhya Dr M Gupta Kumar Lilanand	10/07/21	Permasion given by GMMS
8	Appointing designaled Blomedical Nodal	Officer	Dr Sudhir Mishra Dr Chirantan	15/12/21	To be discussed with GMMS
9	Non-Infectious waste to go into black in C wards	OVID	Dr Ghirantan Mr Lilanand		Decision pending To be taken with JUSCO
10	Training classes to be reemphasized and along with ICC classes for all	taken	Dr Minakshi Gupta Dr Srividhya		Ongoing

#### Bio-Medical Waste Management Rules, 2016.

[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 2021, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF).

S.No.		Particulars							
1	a. Particulars of the Occupier								
	(i) Name of the authorized person (occupier or operator of the facility)	Mr. T V Narendran CEO & MD, Tata Steel							
	(ii) Name of HCF or CBMWTF	Tata Main Hospital, Tubes	Clinic						
	(iii) Address for Correspondence	T.M.H. Clinic, Burmamines, Tubes Jamshedpur- 831001							
	(iv) Address of Facility	Tata Main Hospital, Tata S	Steel Ltd., Jamshedpur.						
	(v)Tel. No, Fax. No	0657-2224559, 0657-2423525							
	(vi) E-mail ID	anoop.srivastava@tatasteel.com							
	(vii) URL of Website	www.tatamainhospital.com							
	(viii) GPS coordinates of HCF or CBMWTF	Latitude 22.801 Longitude 86.180							
	(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		JSPCB/RO/JSR/BMW- 7458021/2020/8 11/02/2020						
	(xi). Status of Consents under Water Act and Air Act	Not Applicable	Not Applicable						
.2	Type of Healthcare Facility	Consultation							
	(i) Bedded Hospital		No. of Beds: 0						
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	1. TMH Clinic Tubes Note: Bio-Medical waste c comes centrally to TMH an CBMWTF	f all non-bedded hospital nd then send for disposal to						

	*		
S.No.		Particulars	······································
	(iii) License number and its date of expiry	SG31072/30414/2913 (E	BISTUPUR) 07.06.2025
3	Details of CBMWTF	Not Applicable	
	(i) Number healthcare facilities		
	covered by CBMWTF (ii) No of beds covered by CBMWTF		
	(iii) Installed treatment and disposal capacity of		Kg Per day
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF		
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis & Yearly)	Yellow Category: Monthly Average 4.06 kg	Yellow Category 20.3 kg
		Red Category: Monthly Average 1.71 kg	Red Category: 8.6 kg
		White: Monthly Average 0 kg	White: 0 kg
		Blue Category: Monthly Average 0 kg	Blue Category: 0 kg
.5	Details of the Storage, treatment, transportation, processing and Disposal Facility	Color coded bins, covere Burner, ETP etc.	ed trolley, Ash Pit, Needle
	(i) Details of the on-site storage facility	·	Not Applicable
			· · · · · · · · · · · · · · · · · · ·
	(ii) Disposal facilities	Not Applicable	· · · · · · · · · · · · · · · · · · ·
	Type of treatment Equipment:		
	No of units		
	Capacity:		
	Quantity Treated or disposed in kg per		
	annum		
	Incinerator ETP		3 
	Plasma Pyrolysis		
	Autoclaves Microwave		· · ·
	Shredder	3	- -
	Needle tip cutter or destroyer Sharps encapsulation or concrete pit – Deep burial pits:		
	Chemical disinfection: -		· · · · · · · · · · · · · · · · · · ·

· · ·

S.No.	Particulars									
	Any other treatment									
	(iii) Quantity of recyclable wastes sold authorized recyclers after treatment in kg per annum		Red Category (like plastic, glass etc.) 0 Kg							
	(iv) No of vehicles used for collection and transportation of biomedical waste	One .								
	v)Details of ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Not Applicable								
	(vi) Name of the Common Bio- Medical Waste — Treatment Facility Operator through which wastes are disposed of	Adityapur Waste Management Pvt. Ltd., (Seraikela Kharsawan)								
	(vii) List of members HCF not handed over Bio-medical waste	NA								
6	Do you have Bio-medical waste management? If yes, attach minutes of the meetings held during the reporting period	Yes	Minutes of Meeting attached. As Annexure-II							
7	Details trainings conducted on BMW (I) Number of trainings conducted on BMW Management. (ii) number of personnel trained (iii) number of personnel trained at the time of induction (iv) number of personnel not undergone any training being conducted on monthly so far (v) whether standard manual for training is available? (vi) any other information)	12 nos. 16 BMW Handlers trained (apart from all other staff) 100% induction to all staff joining organization Nil Yes, with Infection control committee								
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	Nil								
9	Are you meeting the standards of air pollution; from the incinerator; How many times in last year could not meet the standards?	NA, as we are sending all BWM to CBWMTF								

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S.No.	Particulars								
10	Details of Continuous online emission monitoring systems installed	NA							
11	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Not Applicable						
12	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Meeting Standards						
13	Any other relevant information	NA	NA						

Date: 29/6/22

Place: Jamshedpur

Encl: 1. Annexure-I 2. Annexure-II

					T	MH Clinic	: Tubes	;						
	i	<b>.</b>	Det	ailes o	f Bio M	edical W	aste G	enerat	ion(20	21)		1	T	
S. No	Category	Jan	Feb	Mar	Арг	May	Jun	jul	Aug	Sep	Oct	Nov	Dec	Total
A	White	Q	0	.0	0	0	.0	0	0	0	0	0	0	0.
B	Yellow	0	0	0	0	0	O	0	5	2	7	3	4	20
C	Red	0	0	0	0	0	0	Ó	2	2	3	2	1	9
D	Blue	0	0	0	D	0	D	0	0	0	0	0	0	0
Total W	aste (Kg)	0	Ö	0	0	0	0	0	6	4	9	6	4	29

## Annexure-I

#### <u> Annexure – II</u>

Minutes of	Meeting

 Name of the Meeting
 : Biomedical Waste Management Committee (TMH and Clinics)

 Held On
 : 25/12/21

 Time
 : 17:00 - 17:30PM

Members: -

SI. NO.	Designation / Appointment	Name
1	Chairman	Dr Sudhir Mishra
2	Convener	Dr Minakshi Gupta
3	Head Admin	Dr Chirantan Bose
4	Nursing Superintendent	Sr Mary Kutty Babu
5	Sr Manager, Administration	Kumar Lilanand
A	Manager Discourses	

Guest – Mr Dipanand Pradhan

#### Minutes

SI. No.	Points / Issues	Action by	Completion date by	Status
1	Review of current Biomedical Waste Mngment policy, with emphasis on COVID requirements	All representatives	10 /07/21	Done
2	Identifying gaps as per new policy	Ali representatives	10/07/21	Done
3	Revision of Manual	Or Srividhya Dr M Gupta	20 /07/21	Done
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather at disposal site from hospital	All members	10/07/21	Done
5.	Compliance to labelling waste bags at ward level	Kumar Lilanand	07/07/21	Done
7.	Visit to Adilyapur facility, may be at 6 monthly intervals to crosscheck compliance with safe disposal as per policy, approval to be taken from Sr Mngment	Dr Srividhya Dr M Gupta Kumar Lilanand	10/07/21	Permission given by GMMS
8	Appointing designated Biomedical Nodal Officer	Dr Sudhir Mishra Dr Chirantan	15/12/21	To be discussed with GMMS
9	Non-infectious waste to go into black in COVID wards	Dr Chirantan Mr Lilanand		Decision pending To be taken with JUSCO
10	Training classes to be reemphasized and taken along with ICC classes for all	Dr Minakshi Gupta Dr Srividhya		Ongoing

A. Minuted by: -Name: - Dr Minakshi Gupta

#### Bio-Medical Waste Management Rules, 2016.

[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 2021, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF).

S.No.	Particulars						
1	a. Particulars of the Occupier						
	(i) Name of the authorized person (occupier or operator of the facility)Mr. T V Narendran CEO & MD, Tata Steel						
	(ii) Name of HCF or CBMWTF	Tata Main Hospital, Sidhgora Clinic					
	(iii) Address for Correspondence	T.M.H. Clinic, Cross Road Market, Near Ramkrishna Jamshedpur-831001					
(IV) Address of Facility Tata Main Hospital, Ta			teel Ltd., Jamshedpur.				
	(v)Tel. No, Fax. No	0657-2224559, 0657-2423	525				
	(vi) E-mail (D	anoop.srivastava@tatasteel.com					
	(vii) URL of Website	www.tatamainhospital.com	]				
	(viii) GPS coordinates of HCF or Latitude 22.801 CBMWTF Longitude 86.180						
	(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	· · · · · · · · · · · · · · · · · · ·	ISPCB/RO/JSR/BMW- 7458061/2020/9 11/02/2020				
	(xi). Status of Consents under Water Act and Air Act	Not Applicable	Not Applicable				
2	Type of Healthcare Facility	Consultation					
	(i) Bedded Hospital		No. of Beds: 0				
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	1. TMH Clinic Sidhgora Note: Bio-Medical waste of all non-bedded hospital comes centrally to TMH and then send for disposal to CBMWTF					

.No.		Particulars			
	(iii) License number and its date of expiry	SG31072/30414/2913 (B	SISTUPUR) 07.06.2025		
3	Details of CBMWTF	Not Applicable			
	(i) Number healthcare facilities				
	covered by CBMWTF (ii) No of beds covered by CBMWTF				
	(iii) Installed treatment and disposal capacity of		Kg Per day		
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF				
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis & Yearly)	Yellow Category: Monthly Average 10.95 kg	Yellow Category 77 kg		
		Red Category: Monthly Average 7.2 kg	Red Category: 50.4 kg		
		White: Monthly Average 0 kg	White: 0 kg		
		Blue Category: Monthly Average 0.33 kg	Blue Category: 2 kg		
5	Details of the Storage, treatment, transportation, processing and Disposal Facility	Color coded bins, covere Burner, ETP etc.	olor coded bins, covered trolley, Ash Pit, Needle Irner, ETP etc.		
	(i) Details of the on-site storage facility		Not Applicable		
			·		
	(ii) Disposal facilities	Not Applicable			
	Type of treatment Equipment:				
	No of units				
	Capacity:		· · · · · · · · · · · · · · · · · · ·		
	Quantity Treated or disposed in kg per		· · · · · · · · · · · · · · · · · · ·		
	annum				
	i EIP				
	ETP Plasma Pyrolysis				
	Plasma Pyrolysis Autoclaves				
	Plasma Pyrolysis	4			
	Plasma Pyrolysis Autoclaves Microwave Shredder Needle tip cutter or destroyer	4			
	Plasma Pyrolysis Autoclaves Microwave Shredder	4			

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S.No.		Particulars	
	Any other treatment		
	(iii) Quantity of recyclable wastes sold authorized recyclers after treatment in kg per annum		Red Category (like plastic, glass etc.) 0 Kg
	(iv) No of vehicles used for collection and transportation of biomedical waste	One	
	v)Details of ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Not Applicable	
	(vi) Name of the Common Bio- Medical Waste — Treatment Facility Operator through which wastes are disposed of	Adityapur Waste Management Pvt. Ltd., (Seraikela Kharsawan)	
	(vii) List of members HCF not handed over Bio-medical waste	NA	
6	Do you have Bio-medical waste management? If yes, attach minutes of the meetings held during the reporting period	Yes	Minutes of Meeting attached. As Annexure-II
7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management. (ii) number of personnel trained (iii) number of personnel trained at the time of induction (iv) number of personnel not undergone any training being conducted on monthly so far (v) whether standard manual for training is available? (vi) any other information)	12 nos. 16 BMW Handlers trained (apart from all other staff) 100% induction to all staff joining organization Nil Yes, with Infection control committee	
8	Details of the accident occurred during the year (i) Number of Accidents occurred	Nil	
	(ii) Number of the persons affected	Nil	1
	(iii) Remedial Action taken (Please attach details if any)	NA	
	(iv) Any Fatality occurred	Nil	
9	Are you meeting the standards of air pollution; from the incinerator, How many times in last year could not meet the standards?	NA, as we are sending all BWM to CBWMTF	

S.No.		Particulars	
10	Details of Continuous online emission monitoring systems installed	NA	
11	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Not Applicable
12	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Meeting Standards
13	Any other relevant information	NA	NA

Date: 29/6/22 Place: Jamshedpur

Encl: 1. Annexure-I 2. Annexure-II

### Annexure-I

	TMH Clinic Sidhgora													
Details of Bio Medical Waste Generation(2021)														
S. No	Category	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Α	White	0	0	0	0	0	0	0	0	0	0	0	0	0
B	Yellow	0	0	0	0	13	29	6	-6	0	4	20	0	77
С	Red	Q	0	0	0	9	13	4	4	4	2	16	0	50
D	Blue	0	Q	Ö	0	1	0	0	Ó	0	0	1	0	2
	Total Waste (Kg)	0	0	0	0	23	42	9	.9	4	5	.37	:0	129

# <u>Annexure – II</u>

.

	MANUS OF MEETING
Heid On	: Biomedical Waste Management Committee (TMH and Clinics) : 25/12/21 : 17:00 – 17.30PM

Vembers: -		
SI. No.	Designation / Appointment	Name
1.	Chaimian	Dr Sudhir Mishra
2	Convener	Dr Minakshi Gupta
3	Head Admin	Dr Chirantan Bose
4	Nursing Superintendent	St Mary Kutty Babu
.5	Sr Manager, Administration	Kumar Litanand

Minutes of Meeting

Guest - Mr Dipanand Prachan

Mandes

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SI. No.	Points / Issues	Action by	Completion date by	Status
1	Review of current Blomedical Waste Mingment policy, with emphasis on COVID requirements	All representatives	10/07/21	Done
2	Identifying gaps as per new policy	All representatives	10/07/21	Done
3	Revision of Manual	Dr Srividnya Dr M Gupta	20/07/21	Done
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather at disposal site from hospital	Allmembers	10/07/21	Done
5.	Compliance to labelling waste bags at ward level	Kumar Lilanand	07/07/21	Dane
7,	Visit to Adityapur facility, may be at 6 monthly intervals to crosscheck compliance with safe disposal as per policy, approval to be taken from Sr Magment	Dr Srividhya Dr M Gupla Kumar Lilanand	10/07/21	Permission given by GMMS
8	Appointing designated Biomedical Nodal Officer	Dr Sudhir Mishra Dr Chirantan	15/12/21	To be discussed with GMMS
9	Non-infectious waste to go into black in COVID wards	Dr Chiranlan Mr Lilanand		Decision pending To be taken with JUSCC
10	Training classes to be reemphasized and taken along with ICC classes for all	Dr Minakshi Gupta Dr Srividhya		Ongoing