Form - IV (See rule 13) ANNUAL REPORT

Bio-Medical Waste Management Rules, 2016.

[To be submitted to the prescribed authority on or before 30th June every year for the period from Januar to December of the preceding year 2023, by the occupier of health care facility (HCF)]

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			
	(iii) Address for Correspondence	Northern Town, Bistupur J	amshedpur	- 831001	
	(iv) Address of Facility	Tata Main Hospital, Tata S	teel Ltd., Ja	mshedpur	
	(v)Tel. No, Fax. No	0657-2224559, 0657- 2423	3525		
	(vi) E-mail ID	tsj.env@tatasteel.com			
	(vii) URL of Website	https://www.tatamainhospital.com/		·	
:	(viii) GPS coordinates of HCF or CBMWTF	Latitude - 22.801 E Longitude - 86.180 N			
	(ix) Ownership of HCF or CBMWTF	Private		ernment or Semi Govt. or	
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	Authorization No. JSPCB/HO/RNC/BMW-17: Dt. 22/12/2023 Valid upto		3/38	
	(xi). Status of Consents under Water Act and Air Act	Authorization No. JSPCB/HO/RNC/CTO-167 10-27 valid till 31.12.2025	19279/2023	3/1843 dt. 2023-	
2	Type of Healthcare Facility				
	(i) Bedded Hospital	No. of beds 983			
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	Not Applicable			

S.No.		Particulars					
	(iii) License number and its date of expiry	SG31072/30414/2	913 (BI	STUPUR) 0	7.06.2025		
3	Details of CBMWTF		····				
· · · · · · · · · · · · · · · · · · ·	(i) Number healthcare facilities						
	covered by CBMWTF (ii) No of beds covered by CBMWTF						
	(iii) Installed treatment and disposal capacity of						
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF						
4	Quantity of waste generated or disposed in Kg per annum	Yellow Category: N Average 3,734 kg	Yellow Category: Monthly Average 3,734 kg Yellow Category: 44,810 kg				
	(on monthly average basis & Yearly)			Red Cate 86,893 k			
		White: Monthly Ave	White: Monthly Average White: 5,8				
		Blue Category: Monthly Average 1,807 kg			egory : 21,694 kg		
5	Details of the Storage, treatment, transportation, processing and Disposal Facility						
	(i) Details of the on-site storage facility	Size: 92*48 FT (4,4					
		Capacity: 500 Kg/p					
		Provision of on-site	s shaded storage				
	(ii) (ii) Details of Disposal facilities	Type of treatment equipment	No of units	Capacity (kg/day)	Quantity treated or disposed in kg per annum		
		Incinerators	0	NA.	NA		
		Plasma Pyrolysis Autoclaves	0 2	NA 75 liters	NA NA		
4	·	Adiociares		(Chamber Volume) 98 liters (Chamber Volume)			
		Microwave	0	NA	NA NA		
		Hydroclave	0	NA	NA		
		Shredder	0	NA	NA		
		Needle tip cutter or Destroyer Sharps	0	· <u>-</u>	-		
		Encapsulation or	0	NA	NA		
İ		Concrete pit					
		Deep burial pits	0	NA 400 KLD	NA		
		Chemical	1	100 KLD	28,597 KL		

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S.No.		Particulars		
		Disinfection Any other treatment 0 equipment	NA NA	NA NA
	(iii) Quantity of recyclable wastes sold authorized recyclers after treatment in kg per annum		•	
	(iv) No of vehicles used for collection and transportation of biomedical waste	Five		
	v) Details of ETP sludge generated and disposed during the treatment of wastes in Kg per annum	242 Kg Disposed to M/s Pvt. Ltd.,	Adityapur Wa	ste Management
	(vi) Name of the Common Bio-Medical Waste — Treatment Facility Operator through which wastes are disposed of	M/s Adityapur Waste Management Pvt. Ltd., (Seraikella 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		the meeting as Annexure I
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)	(i) 22 (ii) 4571 BMW handlers trained (apart from other staff) (iii)100% induction to all staff joining organization (vi) Nil (v) Yes, with Infection control committee (vi) Nil		as Annexure II
8.	Details of the accident occurred during the year (i) Number of Accidents occurred	Nil		
	(ii) Number of the persons affected	Nil	:	to many many many many many many many many
	(iii) Remedial Action taken (Please attach details if any)	NA		
	(iv) Any Fatality occurred	Ņil		
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 BMW to CBWTF		To compare the second s

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?		28,597 KL. Liquid Waste generated that are treated in Effluent treatment plant. The treated effluent meets the prescribed standards.
12	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	NA	This is being done (Log 4 compliance) by CBMWTF
13	Any other relevant information	NA	NA

Certified that the above report is for the period from 01.01.2023 to 31.12.2023.

Date: 4 4 15

Place: Jamshedpur

Encl: 1. Annexure - I

2. Annexure - II

Dr. Vinita Singh

General Manager (Medical Services)

Tata Steel Limited

Name of the Meeting : Biomedical Waste Management Committee

Held On : 19/01/23

: 12;00 - 12.30PM Time

Agenda:

Members: -

Sl. No.	Designation / Appointment	Name	
1	Chairman (CMSS)	Dr Ashok Chattoraj	
2	Convener	Dr Minakshi Gupta	
3	Head Admin	Dr Chirantan Bose*	
4	Nursing Superintendent	Sr Mary Kutty Babu*	
5	Sr Manager, Administration	Kumar Lilanand	
6	Chairman ICC	Dr Srividhya*	
7	Sr Rita Giri	Nodal Officer BMW*	
8	TMH Clinics I/C	Dr Suravi Mohapatra	
9	Baridih	Dr Suparna Paul	
10	Sonari	Dr Vishakha Verma	
11	Uliyan	Dr Niloy Sen*	
12	Tubes	Dr Atul Chabbra	
13	Sidhgora	Dr Subha Dey*	
14	South Park	Dr Latika*	
15	Kadma	Dr Durgesh Nandini	
16	Sakch	Dr Seema Gupta	

Absent

Minutes	Responsibility	Date of Completion	Status
1.Compliance to BMW handling shared with members- audit findings of Infection control rounds given by ICNs	Dr Minakshi Gupta	19/01/23	Closed
2.Bags were not marked with ward names/source of generation uniformily throughout the hospital, Admin to give necessary instructions for compliance	Mr Lilanand	22/01/23	Open
3.Members informed about implementation of Barcoding system, availability of consumables and training to Clinics, like that of TMH	Mr Lilanand	19/01/23	Closed
4. Inhouse generated cartons to be used for glass waste disposal- consensus decision by Committee	All Members	19/01/23	Closed

Shared with-All Attendees

Minuted By-Dr Minakshi Gupta

Dept. of Pathology & Laboratory Science TMH Code - 441
Reg. No. - 3797 (Jharkhand)
Reg. No. - MAIN HOSPITAL, Jamshedpur

Name of the Meeting : Biomedical Waste Management Committee

Held On

: 22/04/23

Time

: 05;00 - 05.30PM

Agenda:

1. Revised circular of BMW Committee.

2. Any other issue

Members: -

Sl. No.	Designation / Appointment	Name	
1	Chairman (CMSS)	Dr Ashok Chattoraj*	
2	Convener	Dr Minakshi Gupta	
3	Head Admin	Dr Chirantan Bose	
4	Nursing Superintendent	Sr Mary Kutty Babu*	
5	Sr Manager, Administration	Kumar Lilanand	
6	Chairman ICC	Dr Srividhya	
7	Sr Rita Giri	Nodal Officer BMW*	
8	Dr Suravi Mohapatra	TMH Clinics I/C	
9	Dr Suparna Paul	Baridih	
10	Dr Vishakha Verma	Sonari	
11	Dr Poonam	Uliyan	
12	Dr Atul Chabbra	Tubes	
13	Dr Subha Dey	Sidhgora	
14	Dr Latika	South Park	
15	Dr Durgesh Nandini	Kadma*	
16	Dr Seema Gupta	Sakchi	

Absent

Minutes	Responsibility	Date of Completion	Status
1.BMW Compliance monitored ward wise as a part of IC audit tool, shared with members for the month of Jan, Feb and March	Dr Minakshi Gupta	22/04/23	Closed
2.Functioning of new autoclave for blood bag sterilisation and QC checks discussed with members	Dr Srividhya	22/04/23	Closed
3.Reconstitution of BMW Committee	Dr Minakshi Gupta	22/04/23	Open
4.Issue of sharp waste disposal raised in patient safety audit- Non-availability of white plastic- to be discussed during NABH committee presentation on 29 th Apr	Dr Srividhya Dr Minakshi Gupta	29/04/23	Open
Minutes	Responsibility	Date of Completion	Status
5 SOP Revisit and revision if required	Dr Minakshi Gupta	07/05/23 ^{iology}	Open

Shared with-All Attendees

Minuted By-Dr Minakshi Guptance
Or. Minakshi Guptance
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Dept. of Palint Uhakhand)
Dept. of Palint Uhakhand)
MAIN HOSPITAL, Jamshedpur

Name of the Meeting : Biomedical Waste Management Committee

Held On

: 29/06/23

Time

: 12;30 - 01.00PM

Agenda:

Members:

Sl. No.	Daginger	4 '	
31. NO.	Designation / Appointment	Name	
1	Chairman (CMSS)	Dr Mamta Rath Datta	
2	Convener	Dr Minakshi Gupta	
3	Head Admin	Dr Chirantan Bose*	
4	Nursing Superintendent	Sr Mary Kutty Babu*	
5 .	Sr Manager, Administration	Kumar Lilanand	
6	Chairman ICC	Dr Srividhya	
7	Sr Rita Giri	Nodal Officer BMW	
8	TMH Clinics I/C	Dr Suravi Mohapatra	
9	Baridih	Dr Suparna Paul	
10	Sonari	Dr Vishakha Verma	
11	Uliyan	Dr Niloy Sen*	
12	Tubes	Dr Atul Chabbra	
13	Sidhgora	Dr Subha Dey*	
14	South Park	Dr Latika	
15	Kadma		
16	Sakch	Dr Durgesh Nandini Dr Seema Gupta*	

Absent

Minutes	Responsibility	Date of Completion	Status
1.Compliance %age to BMW shared with members.	Dr Minakshi Gupta	29/06/23	Closed
2.Biomedical waste management committee reconstituted on 29/04/23	-Dr Minakshi Gupta	29/06/23	Closed (Dr Mamta Rath Datta - Chairman)
3. BMW Posters checked throughout the hospital as was instructed in NABH Committee presentation in SCG on 29 th Apr, for correct display of sharp waste; Patient safety audit checklist needs amendment	Dr Minakshi Gupta	15/05/23	Closed
4.Observations during visit to Adityapur waste treatment facility discussed with members- CTO shared was expired; Chairman instructed to send mail communication regarding this	Mr Lilanand Dr Minakshi Gupta	30/06/23	Open

Dr. Minakshi Gupta, MD, Microbiology
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Minutes	Responsibility	Date of Completion	Status
5 Issue of Biomedical waste autoclave breakdown informed to members; Sterilisation of discarded blood bags done through backup autoclave from Virology section of pathlab; Instruemnt under warranty and to be repaired by OEM	Biomedical Engn Dr Minakshi Gupta (to follow)	15/07/23	Open

Shared to-All members

Minuted By- Dr Minakshi Gupta

Dr. Minakshi Gupta, MD, Microbiology

Dr. Minakshi Gupta, MD, Microbiology

Dr. Minakshi Gupta, MD, Microbiology

Consultant

Name of the Meeting : Biomedical Waste Management Committee

Held On

: 14/10/23

Time

: 12;30 - 01.00PM

Members;

Sl. No.	Designation / Appointment	Name	
1	Chairman (CMSS)	Dr Mamta Rath Datta	
2	Convener	Dr Minakshi Gupta	
3	Head Admin	Dr Chirantan Bose*	
4	Nursing Superintendent	Sr Mary Kutty Babu	
5	Sr Manager, Administration	Kumar Lilanand	
6	Chairman ICC	Dr Srividhya	
7	Sr Rita Giri	Nodal Officer BMW	
8	TMH Clinics I/C	Dr Suravi Mohapatra	
9	Baridih	Dr Suparna Paul	
10	Sonari	Dr Vishakha Verma*	
11	Uliyan	Dr Niloy Sen*	
12	Tubes	Dr Atul Chabbra	
13	Sidhgora	Dr Subha Dey	
14	South Park	Dr Latika	
15	Kadma	Dr Durgesh Nandini	
16	Sakch	Dr Seema Gupta	
17	Invited Member	Prashant Ku Bhakat	

Absent

Minutes	Responsibility	Date of Completion	Status
1.Compliance monitoring to BMW discussed with members	Dr Minakshi Gupta	14/10/23	Closed
2.Mom of last BMW meeting discussed- BMW signages checked for sharp disposal, no change was done in SOP	Dr Srividhya	14/10/23	Closed
3.Document of CTO from Adityapur facility was received, information given to all members	Mr Prashant	14/10/23	Closed
4.Members informed about irregular pick- up of waste from Dispensaries by Adityapur, mail communication and laisoning to be done	Mr Prashant Mr Lilanand	16/10/23	Open

Shared with - All members

Minuted By-Dr Minakshi Gupta

SUMMARY IN HOUSE TRAINING RECORDS Jan'23 to Dec'23

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RARE HOSPITALITY & SERVICES PVT. LTD. CONTROLLED Rare Hospitality & Services Pvt. Ltd. Document no: Revision No: 01 RHS/OPS/01: Revision Date: 01/11/08 TRAINING RECORD SHEET DATE: 16-11-9023 LIDON WZAM ATAL TIME: FROM 1:20ph 0 2:05 ph TRAINER: TOPICS COVERED: MASTE Manage ment SL NO NAME OF TRAINEE SIGNATURE OF TRAINEE REMARKS Kyelhush . २ जि १ १ २ वि प 1. Chundranas' Munker Amal Day Craft Walson Lucal 5 Mara how coma Des Sma 's' MUZE' 8 TWW NA Tunging CYSTIPPI XXXI 10 3 allo Kany 11 Samuel 12 Valour K 13 Villelia 14 BIBLA Fruhni 15 Hemin nevi Cheels child mermy 17 Noana Lucia Ree.MA 18 TRAINER SIGNATURE 19 CUENT SIGNATURE: SITE IN CHARGE SIGNATURE:

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