Form – IV (See rule 13) ANNUAL REPORT

PSingl 19/4/2021

[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

	Particulars			
\Box	Particulare	 	-	11.3
	sub-a Occupier	<u> </u>	1	s. Rubindes kaus (occupier)
	Particulars of the Occupier (i) Name of the authorized person (occupier	\ :	175	ry health life courses (1) Ltd.
	(i) Name of the authorized po	-	10	1 Louth life Chances 17
		1:	1+12	
	THE OF LAIVING	1:	4	Scho, 21, Maga / Scho, 21, Maga / 122-5044333
	(iii) Address for Correspondent	1:-	+-	Scho, 71, Model 172-2170000, 0172-5044333
	(IV) Address of Facility	:	ه ا	1 1 Q by hastitel can
_	(v)Tel. No, Fax. No	:	19	mo mobal @ wy haspital can
_	(vi) E-mail ID	T:_		HA ALNUMBER OF THE PROPERTY OF
_	(vii) URL of Website	1:	W	State Government or Private or Semi Govt.
_	(vii) URL of Website (viii) GPS coordinates of HCF or CBMWTF	1:	1 (State Government
_	(Vini) C.	11 ,	C	or any other)
	(ix) Ownership of HCF or CBMWTF	1:	1	Authorisation No.: 12/2/2/77 Malan (SAS) 12/2/2/77 Valid upto: 3/23 2023
_	(ix) Ownership of HCF of Communication (x). Status of Authorization under the Blo-		1	Valid upto: 31/03.122
	Medical Handling Rules			Valid upto: Air > 31/03/2022
	Medical Waste (Management and Handling) Rules Waste (Management under Water Act a	nd :	7	
	Waste (Management and Handling) (xi). Status of Consents under Water Act a		- 1	Water - 31/03/2022
	Air	.	1	- Water
	1	一:		the of Bods: 180
_	Type of Health Care Facility	-+:	$\overline{}$	No. of Beds: 180
2_	(i) Redded Hospital		- ; ,	
	(ii) Non-bedded hospital	1		8
	(II) Non-Belle	or		
	Clinical Laboratory or Research Institute	٠.		2022 885
ì	Veterinary Hospital or any other)	,	:	4/65A> 39 33 885
_	(iii) License number and its date of expin	-	:	N.A
_	Details of CBMWTF	-	:	N.A
3	W Number of fleatill colo	11 1	-	
	covered by CBMWTF	-	:	N.A
	(ii) No. of Beds covered by CBMWTF		÷	Kg/day NoA
. [capacity of CBMWTF;		-	Kg/day N.A
1	capacity of CBMW11, (iv) Quantity of bio medical waste	-	:	
1	(iv) Quantity of bio medical recommendation (iv) Quantity of bio m		+	Yellow Category: 437 is affactif
	treated or disposed by Colving treated or disposed by Colving quantity of waste generated or dispose quantity of waste generated or disposed by Colving quantity of waste generated by Colving qu	ed in	1.	Red Category: 457 15 948641
1	Quantity of waste generated of disper- Kg per Annum (on monthly average ba	sis)		White:
1"	. Va per Annulli (on		1	
			1.	General Solid Waste:
1			1	Description and Disposal Facility (Otal Malune)
-		nsport	ation	Blue Category. General Solid Waste: A, Processing and Disposal Facility Total Values Size: Size: Red - loxy' - 3" Height.
1	5 Details of the Storage, Treatment, 112	ge	:	Size: Red - 10x4'-9"] Height -
-	5 Details of the on-site stora	0-		Ked - loxy -3 Height-

1		100	10	apacity: Su	Kent .	Story a	party for	cepy
	fac	ility	1	rovision of on-	site sto	storage or		
				ny other provis	ion)			
(ii)	Di	sposal facilities		Type of treatment equipment	No of Units	Capacity Kg/day	Quantity Treatedor disposed in kg per annum	
			T	Incinerators		-		
				Plasma Pyrolysis		_	-	
			Ì	Autoclaves		1-501	1.0	
			1	Microwave			-	
				Hydroclave				
				Shredder		ļ	-	
				Needle tip cutter or destroyer		50		11 =
				Sharps		-		1
				Encapsulation or concrete		_		-
			,	pit Deep burial pits		_		
		-		Chemical disinfection:			-	
				Any other treatment equipment:		-		
	(iii)	Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum	:	Red Category	(like p	lastic, glass,	etc.)	
	(iv)	No. of Vehicles used for collection and transportation of biomedical waste	:	Com		acility v		
-	(v)	Details of incineration ash and				antity enerated	Where disposed	
	(-)	FTP sludge generated and		Incineration	_	nerated	C	
		disposed during the treatment of		Ash	-		_	
		wastes in Kg per annum		ETP Sludge		529	hanky	4
	100	(the Common Rios	+	9.1	9,,	fronment	DA. 17d.	
	(vi)	Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	/	Vilage B	alyali	, SAD NO	goo Model	
+	(vii)	List of member HCF not handed over bio-medical waste.		1	N-A			-
		ave bio-medical waste ment committee? If yes, attach of the meetings held during the		Yes	- M	oh is a	Hached.	-

	Details trainings conducted on BMW	1	You -list is offschool
V	(i) Number of trainings conducted on BMW Management		t/
	(ii) Number of personnel trained		
1	(iii) Number of personnel trained at the time of induction		4
Ti.	(iv) Number of personnel not undergone any training so far		4
	(v) Whether standard manual for training is available?	1 :	u
	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		N-A
	(ii) Number of persons affected		N-A
	(iii) Remedial Action taken (Please attach details if any)		VI-A
	(iv) Any Fatality occurred, details		N'A
	Are you meeting the standards of air Pollution from the Incinerator? How many times in last year could not met the standards?	W. ¹²	4. k
	Details of Continuous online emission monitoring systems installed		N·A
.0	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	398	N.A STP Glack - 210 KL AVI. Not not Shedreds _ 2000 Daily Bregissy of cleck (ster treat
1	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Daily Society of Server Crists were
2	Any other relevant information	1	Air Pollution Control Devices attached with he Incinerator)

Certified that the a	bove report is for the period from	cambor 2020
		HOSPIGS
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		K, Rival Law
	, ·	Name and Signature of the Head of the Institution

Date: 16/04/21
Place: Mohadi



Ivy Hospital
Superspeciality Healthcare
Sector- 71, Mohali

Bio Medical Waste Committee Meeting

te -	17th Non 2020.	Time - 1; ου Ρ.
.No	Name	Signature
1	Dr. Mulcos L	ME
d	Dr Wiehal	West
2	RUPINDER (amo)	M
· U	Manpreet Kaur (1130).	A Kaur 1130 Ans.
5	Jasucen (5165) P3A	jasury
<u>ے</u> کی	Sumon (16/014) (PD)	Jan 2/
7	John 2 (831)	05062
8	Annader Cour (Pr)	Jaro Ine
<u> </u>	Sokhwandr awit	QU 7661
	Shufha 4338 Cerwy	(133x
	Januar Jun 1442 (CCU)	You tot
-11	Kamal 4009 CTVS	Caughor
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13	Raupt Kann 3529	Tey ly
14		AVE
15	De Runer Kaus.	Pkam.
16	Rajbin	Rajbir

MINUTES OF BIO MEDICAL WASTE COMMITTEE MEETING

Date:- 17th Nov 2020 Time:-1:00pm-1:30pm Venue:-Seminar Hall

The BMW committee members are as follows:-

0	GMO(Chairperson)
0	Clinical Microbiologist/ Infection Control Officer
0	Medical administrator
0	Manager Facilities
٥	Head Nursing
0	Infection Control Nurse's (ICN)
0	Quality Manager
0	Link nurses

Frequency of Meeting

The BMW Committee meets on six monthly basis and bio medical waste management is the fixed agenda of every infection control committee meeting.

Sr. No.	Agenda /	Discussion	Responsibility
1.	Subject Labeling of BMW	Labeling of the BMW i.e mentioning of ward name and date to be done before fixing the bags in the dustbins. Same labeling to be checked before transportation of bags to storage area.	unit incharge/shift incharge
2.	Blue marking of the cardboard boxes	Blue marking to be ensured on the cardboard boxes in the areas	unit incharge/shift incharge
3.	Stickers	Dustbins where stickers are torn needs to be replaced	HK Incharge
4.	Paint	Walls around BMW bins where paint is required to be painted Cleaning of the area below and around dustbins to be	Maintenance HK Incharge
5.	Cleaning	done on frequent basis, atleast once in a week.	

y itai 6.	Trainings	Regular trainings to be given to staff regarding Bio	Infection control		
. !		medical management to avoid BMW mixing	team		
7.	BMW Rooms	Outside of BMW storage area to be painted as there is requirement of paint in that area.	Manager maintenance		
8.	Paint Handwashing	Handwashing facility to be provided close to main storage area as current handwashing facility is little	Manager maintenance		
	facility	far.	Manager		
9.	Cementing	Cementing of foot step required near main storage area	maintenance		
10.	Locking of BMW room	BMW rooms to be ensured to be locked all the times.	Manager admin		

Prepared By:-Infection control cell



Ivy Hospital
Superspeciality Healthcare
Sector- 71, Mohali

Bio Medical Waste Committee Meeting

No .	· え・ & b & o Name	Signature
.140	Atmine	N.
1	Dr Visial Baneal	(hel)
2	RUPINDER (GMO)	GAP
3	Dr. Mukesh	
4	Romandap Cour (P2) Manpaceet Kaus (1130)	Com The
	Manpaceet Kaus (1130)	M Kau Jugans
6	January S165-M- PSA	
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10	Paul 1 2509	hy
	The 7001	40AS
15	11CM	Shean

MINUTES OF BIO MEDICAL WASTE COMMITTEE MEETING

Date:-5th February 2020 Time:-1:00pm-1:30pm Venue:-Seminar Hall

The BMW committee members are as follows:-

0	GMO(Chairperson)
0	Clinical Microbiologist/ Infection Control Officer
0	Medical administrator
0	Manager Facilities
0	Head Nursing
0	Infection Control Nurse's (ICN)
0	Quality Manager
0	Link nurses

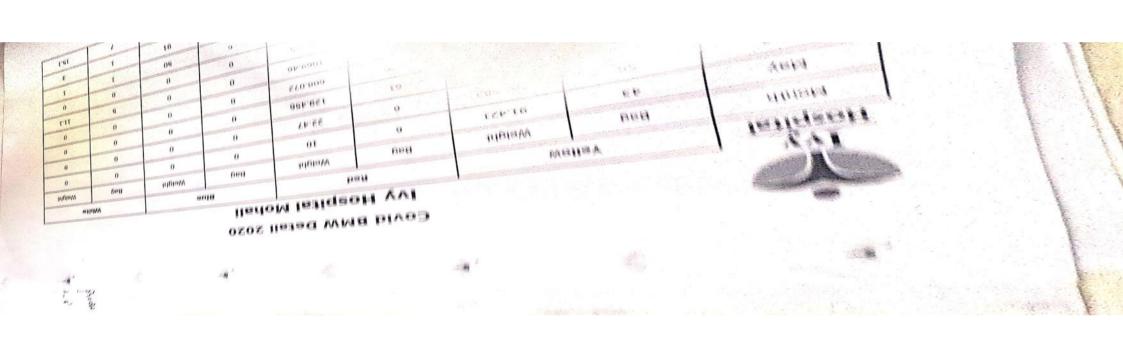
Frequency of Meeting

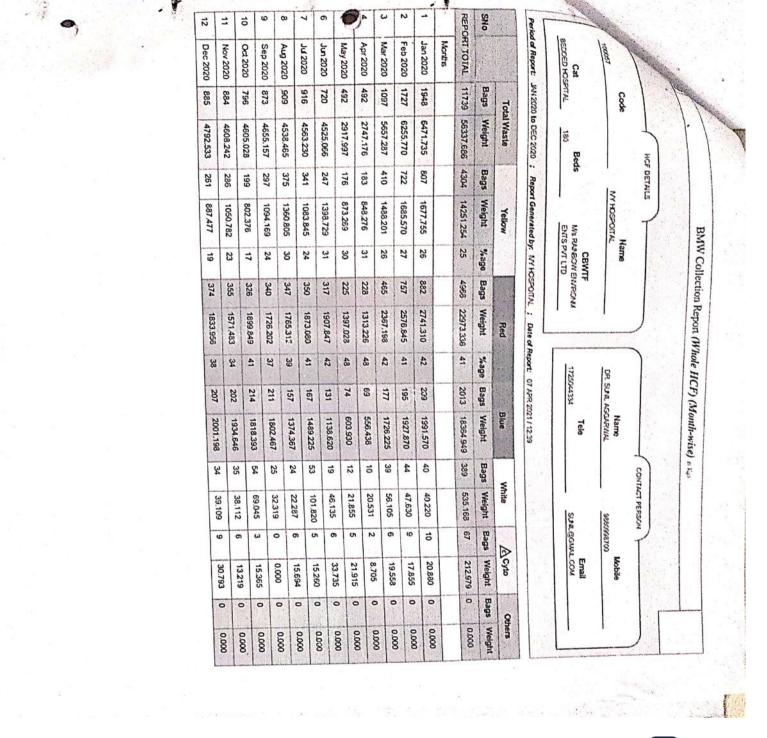
The BMW Committee meets on six monthly basis and bio medical waste management is the fixed agenda of every infection control committee meeting.

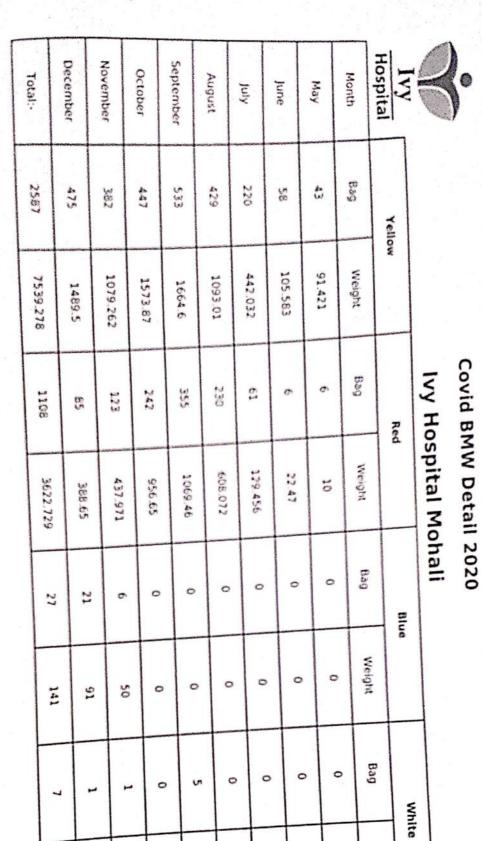
Sr.	Agenda / Subject	Discussion	Responsibility			
No.	Bio medical waste collection	Biomedical waste collection from area will be done as per schedule. Schedule will be Morning:7:00AM Afternoon:2:00PM Evening:6:00PM	Housekeeping Supervisor			
la	Bio medical waste collection	Collection to be done in the presence of Housekeeping supervisor only	Housekeeping Supervisor			
2	Tagging of BMW	Every biomedical waste bag will be tied with tags before taking it out from that area	Housekeeping Supervisor			
2a	Tagging of BMW	All the bags to be tied in the presence of unit incharge/shift incharge	unit incharge/shift incharge			
3	Labelling of BMW	A label will be put on every biomedical waste bag before taking it out of the area with following 1. Name of the area 2. Date	unit incharge/shift incharge Housekeeping Supervisor			

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		10			9		∞		7	•	۷					8	- -	4	
	vaccination	Нер В			Trainings		BMW Rooms	BMW vehicle	Supervision of	Red bags	Weighing of			hours	of Bags in odd	Transportation	bags	ng of BMW	
due staff is done	vaccination. ICN to ensure that vaccination of all the	Pending staff to be vaccinated against Hep B	ensure BMW disposal as per PPCB guidelines	medical management to avoid BMW mixing and to	Regular trainings given to staff regarding Bio	keys to be kept with housekeeping supervisor	Final storage area for BMW to be kept locked and	facility in presence of Housekeeping supervisor, security and Infection Control Nurse.	Biomedical waste to be handed over to the outsourced	storage facility apart from rainbow environments.	Wheighing of the Double act to be done area wise at waste	unit is full, housekeeping supervisor to be called upon	In case the bags are full, or temporary storage area of the	any other staff.	the storage facility to be done by Housekeeping staff or	No unscheduled dropping of Biomedical waste bags to		No bags from different areas to be mixed together	
11 th and 25 th .	team	Infection control		team	Infection control	(Daily basis)	HK Supervisors	Supervisor Security ICN	Housekeeping	Supervisor	Housekeeping	1	Supervisor	Housekeeping	incharge	unit incharge/shift	Supervisor	Housekeeping	

repared By:-Infection control cel







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