

1F, RAJA S.C. MULLICK ROAD, JADAVPUR, KOLKATA-700 032

Call: 033 6621-1700 / 4044-9700 Click: www.kpcmedicalcollege.org



To

The Chief Engineer,
(Waste Management Cell),
West Bengal Pollution Control Board,
Paribesh Bhaban 10 A,
Block LA, Sector III
Salt Lake City, Kolkata – 700098



Date: 30 -06-2022

Sub: Submission of Annual Report – Form IV for the year 2021

Dear Sir,

Please find enclosed herewith above Annual Report Form IV of our KPC Medical College & Hospital, Jadavpur, as per requirement under the provision Rule 13 of Bio-Medical Waste Management Rules, 2016.

Thanking you,

Yours faithfully

Kriehner Das

Krishna Das Secretary

KPC Medical College & Hospital, Jadavpur

Sedical Collings

Encl: 1. Annual Report (Form IV)

2. Minutes of Meeting of BMW Committee

FORM IV (See Rule 3) ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

S.No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	MRS. KRISHNA DAS
	(ii) Name of HCF or CBMWTF	:	KPC MEDICAL COLLEGE & HOSPITAL, JADAVPUR
	(iii) Address for Correspondence	:	1F,RAJA S.C. MULLICK ROAD, KOLKATA-700032
	(iv) Address of Facility	:	MEDICARE ENVIRONMENT MANAGEMENT PVT. LTD.
	(v) Tel. No, Fax. No	:	03326516209 FAX-913326516207
	(vi) E-mail ID	:	bmwcare@ramky.com
	(vii) URL of Website	:	www.kpcmedicalcollege.org
	(viii) GPS coordinates of HCF or CBMWTF	:	Lattitude-22°29'38.25" N and Longitude-88°22'23.91" E
	(ix) Ownership of HCF or CBMWTF	:	Private
	(x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules		Authorisation No.: Memo no.34/25(BM)-2173/2007 Dt. 31/07/2019valid up to 30/04/2024
	(xi) Status of Consents under Water Act and Air Act		: Valid up to: N.A.
2.	Type of Health Care Facility		: Private Medical College & Hospital
	(i) Bedded Hospital		: No. of beds: - 750 (*Interpretation - Census or Registered Beds)
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		Blood Bank Licence is valid upto 20.08.2022
	(iii) License number and its date of expiry		: DL 123MB/SLA/CLAA/WB DT. 20.08.2022
3.	Details of CBMWTF		:



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	(i) Number healthcare facilities covered by CBMWTF	:	
	(ii) No. of beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	<u>179.92</u> Kg/day
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis) (#Interpretation – Month wise and Total Annual Quantity)	:	Yellow Category: 31588.2 kg p.a. (2632.35 kg pm) Red Category: 31277.00 kg p.a. (2606.42 kg pm) White: 2536.00 kg p.a. (211.33 kg pm) Blue Category: 272.00 kg p.a. (22.66 kg pm) General Solid waste:
5.	Details of the Storage, treatment, transportation, processing and Disposal Facility #Interpretation - Only Point No. (vi) is to be filled by the (Hospital) Occupier (if waste is being handed over to the operator of common Bio-medical Waste treatment facility) & rest of the points are for the operator of common Bio-medical Waste treatment facility.		
	(2) De la contracto etempo	$\overline{\mathbf{T}}$	Size: 2 Rooms each of 3m W x 3m L x 3m height.

	(ii) Details of the on-site storage facility (ii) Disposal facilities	Size: 2 Rooms each of 3m W x 3m L x 3m height. Capacity: 25m. cube approximately		
		Provision of on-site storage: (cold storage or any other provision) N.A.		
		Type of treatment of city treated or equipment units Kg/d disposed in kg per		
		Incinerators		
		Plasma		
		Autoclaves		
		Microwave		
		Hydroclave		
		Shredder		
		Needle tip cutter		
		Sharps encapsulation or concrete		
		pit		



Chemical disinfecti Anyother treatment equipmen t: (iii)Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum. (iv) No of vehicles used for collection and transportation of biomedical waste (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum (vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of (vii) List of member HCF not handed over bio-medical waste	1		Deep
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management committee? If yes, attach minutes of the meetings held during the reporting period 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 so far (v) whether standard manual for training is available? Minutes Attached Minutes Attached Minutes Attached Minutes Attached Ninutes Attached Minutes Attached		()	
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(iii) number of personnel trained at the time of induction (iv) number of personnel not undergone any training so far (v) whether standard manual for training is available? Yes		conducted on BMW	6 items in a year
the time of induction (iv) number of personnel not undergone any training so far (v) whether standard manual for training is available? Yes		(ii) number of personnel trained	60
undergone any training so far (v) whether standard manual for training is available? Yes			4
training is available?			Nil
(vi) any other information)			Yes
		(vi) any other information)	

3.	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)	Nil
	(iv) Any Fatality occurred, details	Nil
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	N.A.
	Details of Continuous online emission monitoring systems installed	N.A.
10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Average 400m3/day sewage Arobic treatment plant with tab reactor Tube settler.
11.	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	Nil
12.	Any other relevant information	Air Pollution Control Devices attached with the Incinerator

Certified that the above report is for the period from 1st JANUARY 2021 TO 31ST DECEMBER 2021

Krishna Das
SECRETARY

KPC MEDICAL COLLEGE & HOSPITAL, JADAVPUR

Name and Signature of the Head of the Institution

Place: Kolkata

Date: 30-06-2022

Minutes of the meeting of the Pollution Control Board of KPC Medical College & Hospital held on 06-08-2021 at Council Hall. The following members were present.

- 1. Dr. Arabinda Ray Medical Superintendent
- 2. Mrs. Jaya Paul Dy Nursing Director
- 3. Mr. Rajat Roy Assistant Secretary KPCMCH Society
- 4. Mr. Bimal Karmakar General Manager Administration
- 5. Mr. Ranen Chakraborty House Keeping Incharge
- 6. Mr. Subhasish Dasgupta Central Laboratory In charge
- 7. Mr. Anjan Gopal Saha Sanitary Inspector Community Medicine
- 8. Mrs. Nilima Guha Infection Control Nurse as Invitee.

Medical Superintendent, Dr. Arabinda Roy took the chair and meeting started at 12.00 noon.

Mr. Bimal Karmakar informed the house that we had been going through NABH Assessment procedure since January 2021. Presently we are about to face onsite assessment any time within few weeks. We applied for desktop assessment on 17th January 2021. Thereafter, in the last month we have cleared all the non compliance and finally waiting for on-site assessment. He also informed us that during this period from January 2021 we have trained more than 50 housekeeping staff about Biomedical Waste handling as well as trained more than 100 staff on different safety measures like fire, needle prick, handling of hazardous material etc.

Mr. Ranen Chakraborty informed the house that disposal process of Covid 19 waste was being regularly monitored by our General Manager as usual. Owing to NABH assessment in progress we have fixed different Signages including new posters of BMW guidance at various wards, laboratory, blood center, OPD etc. Mr. Chakraborty added that he himself also is looking after the segregation process of BMW at different Non-Covid wards, Laboratories, Operation Theaters etc.

Mr. Karmakar added that with the guidance of Infection Control Nurse, Mrs Nilima Guha we are able to stream line the system of disinfection of Biomedical Store Rooms, Mortuary, Laboratories and ICU/wards etc on daily basis and proper records are being maintained.

As a part of regular training all ward sisters have been informed about the importance of handling of syringe and needle from its use to disposal. Moreover, every GDA staff has been asked to follow the process of handling the BMW as instructed in various training.

There was no matter to discuss further and meeting ended with vote of thanks to the chair.

Dr. Arabinda Ray

Chairman of the Meeting