

MSSH/N-110/156

June 12, 2020

Delhi Pollution Control Committee
4th Floor, ISBT Main Building
Kashmere Gate
Delhi - 110006.

Sw
12/6/20
(ENQUIRY COUNTER)
POLLUTION CONTROL COMMITTEE
DEPARTMENT OF ENVIRONMENT
GOVT. OF NCT OF DELHI
4TH FLOOR, ISBT BUILDING,
KASHMERE GATE, DELHI-110006

Subject : BMW Annual Report.

Dear Sir,

We are enclosing herewith Annual Report in Form-II pertaining to generation and disposal of Bio-Medical Waste at our hospital, Max Multi Speciality Centre (a unit of Max Healthcare Institute Ltd.), N-110 Panchsheel Park, New Delhi-110017 for the period from 01.01.2019 to 31.12.2019.

We are also enclosing herewith original Yearly Collection Report for the year 2019 issued by _____.

Thanking you

Heena G.
Yours faithfully
For Max Multi Speciality Centre
(a unit of Max Healthcare Institute Limited)

Encl. : as above



Form - IV
(See rule 13)
ANNUAL REPORT

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

S No	Particulars																																					
1	Particulars of the Occupier																																					
	(i) Name of the authorised person (occupier or operator of facility)	Shilpa Gopalka																																				
	(ii) Name of HCF or CBMWTF	Max Multi Speciality Centre																																				
	(iii) Address for Correspondence	N-110, Panchsheel Park, Delhi -110017																																				
	(iv) Address of Facility	N-110, Panchsheel Park, Delhi -110017																																				
	(v) Tel. No, Fax. No	01146097200																																				
	(vi) E-mail ID	Ramachandran T. <ramachandran@maxhealthcare.com>																																				
	(vii) URL of Website																																					
	(viii) GPS coordinates of HCF or CBMWTF																																					
	(ix) Ownership of HCF or CBMWTF	Private Hospital																																				
	(x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	Authorisation No. DPCC/BMW/AUTH/NEWNo/2017/03352 Valid up to 03-05-2022																																				
	(xi) Status of Consents under Water Act and Air Act	Pending																																				
2	Type of Health Care Facility																																					
	(i) Bedded Hospital	No. of Beds 07																																				
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)																																					
3	(iii) License number and its date of expiry	463, 31-03-2020																																				
	Details of CBMWTF																																					
	(i) Number healthcare facilities covered by CBMWTF	NA																																				
	(ii) No of beds covered by CBMWTF	NA																																				
	(iii) Installed treatment and disposal capacity of CBMWTF	NA																																				
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	NA																																				
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow Category : 838.79 kg Red Category : 1741.04 kg White : 549.44 kg Blue Category : 910.49 kg General Solid waste : 5337 kg																																				
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																					
	(i) Details of the on-site storage facility	Size : 7'x8' Capacity : Provision of on-site storage : (cold storage or any other provision)																																				
	(ii) Details of the treatment or disposal facilities	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th><th>No of units</th><th>Capacity Kg/ day</th><th>Quantity treated or disposed in kg per annum</th></tr> </thead> <tbody> <tr><td>Incinerators</td><td>-</td><td></td><td></td></tr> <tr><td>Plasma Pyrolysis</td><td>-</td><td></td><td></td></tr> <tr><td>Autoclaves</td><td>-</td><td></td><td></td></tr> <tr><td>Microwave</td><td>-</td><td></td><td></td></tr> <tr><td>Hydroclave</td><td>-</td><td></td><td></td></tr> <tr><td>Shredder</td><td>-</td><td></td><td></td></tr> <tr><td>Needle tip cutter or destroyer</td><td>-</td><td></td><td></td></tr> <tr><td>Sharps encapsulation or concrete pit</td><td>-</td><td></td><td></td></tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/ day	Quantity treated or disposed in kg per annum	Incinerators	-			Plasma Pyrolysis	-			Autoclaves	-			Microwave	-			Hydroclave	-			Shredder	-			Needle tip cutter or destroyer	-			Sharps encapsulation or concrete pit	-		
Type of treatment equipment	No of units	Capacity Kg/ day	Quantity treated or disposed in kg per annum																																			
Incinerators	-																																					
Plasma Pyrolysis	-																																					
Autoclaves	-																																					
Microwave	-																																					
Hydroclave	-																																					
Shredder	-																																					
Needle tip cutter or destroyer	-																																					
Sharps encapsulation or concrete pit	-																																					

Deep burial pits:	-		
Chemical disinfection			

	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)	
	(iv) No of vehicles used for collection and transportation of biomedical waste	:	1	
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Quantity generated	Where disposed
			Incineration	-
			Ash	-
			ETP Sludge	-
	(vi) Name of the Common Biomedical Waste Treatment Facility Operator through which wastes are disposed of	:	Biotic waste solutions Pvt. Ltd	
	(vii) List of member HCF not handed over bio-medical waste	:	NA	
6.	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	:	Yes	
7.	Details trainings conducted on BMW			
	(i) Number of trainings conducted on BMW Management.	:	15	
	(ii) Number of personnel trained	:	19	
	(iii) Number of personnel trained at the time of induction	:	20	
	(iv) Number of personnel not undergone any training so far	:	Nil	
	(v) Whether standard manual for training is available?	:	Yes	
	(vi) Any other information	:		
8.	Details of the accident occurred during the year	:	NIL	
	(i) Number of Accidents occurred	:		
	(ii) Number of the persons affected	:		
	(iii) Remedial Action taken (Please attach details if any)	:		
	(iv) Any Fatality occurred, details.	:	Nil	
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	:	NA	
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?	:	Nil	
12.	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	:		
13.	Any other relevant information.	:	(Air Pollution Control Devices attached with the Incinerator)	
			Any other treatment equipment	-

Certified that the above report is for the period from 01.01.2019 to 31.12.2019

Name of the Head of the Institution - Shilpa Gopalka

Date: 12-06-2020

Place: New Delhi

Designation of the Head of the Institution-General Manager Operation

ANNUAL REPORT 2019.

NAME:- Max Multi Speciality Center (Pancsheel Park)

Address:- N-110, Pancsheel Park

Month	Yellow- Incineration (Anatomical Waste & Soiled Waste)		Red Autoclave (Infected Plastic Waste)		Blue Autoclave (Glass- Bottles)		Yellow Cytotoxic- Incineration (Cytotoxic Contaminated Items)		White- Sharp		Total Bags	Total Weight
	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight in KG's		
	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight in KG's		
19-Jan	45	72.78	58	131.53	41	78.39	0	0	37	39.48	181	322.18
19-Feb	36	65.62	54	146.81	31	70.66	0	0	28	33.4	149	316.13
19-Mar	33	74.55	49	172.62	31	87.28	0	0	34	44.14	147	378.59
19-Apr	33	56.50	41	136.21	30	75.09	0	0	32	44.11	136	311.91
19-May	34	69.69	46	155.86	31	96.25	0	0	33	43.44	144	359.24
19-Jun	31	54.72	42	138.34	29	57.93	0	0	31	38.72	133	289.71
19-Jul	35	72.26	51	185.87	32	74.02	0	0	34	55.99	152	388.14
19-Aug	34	58.05	48	168.27	31	92.42	0	0	33	44.25	146	362.99
19-Sep	39	69.79	59	138.64	35	71.4	0	0	39	55.36	172	335.19
19-Oct	35	57.36	46	97.57	30	60.67	0	0	32	49.06	143	264.66
19-Nov	38	53.46	44	121.1	33	86.07	0	0	33	41.4	148	302.03
19-Dec	61	134.01	82	148.22	56	60.31	0	0	53	60.09	252	402.63

Date 12th Jun 2020

Max Multi Specialty Centre,
N - 110, Panchsheel Park
New Delhi-110017
Ph. No-01146097200

To,
The Environmental Engineer (BMWCELL)
Delhi Pollution Control Committee,
Department of Environment (Govt. of NCT of Delhi)
4th Floor, ISBT building Kashmiri gate
Delhi-110006

Subject- Accident report

Dear Sir/ Madam,

We are enclosing herewith Accident report in Form-1 pertaining to generation and disposal of bio-medical waste at our hospital, Max Multi specialty Center (A unit of Max Healthcare Institute Ltd.) N-110 Panchsheel Park, New Delhi-110017 for the period from 01.01.2019 to 31.12 2019

Thanking you,

Your Faithfully


Shilpa Gopalka

(GM- Operations)

For Max Multi specialty Center

(A unit of Max Healthcare Institute Ltd.)

FORM - I



[(See rule 4(o), 5(i) and 15 (2))]

ACCIDENT REPORTING

1. Date and time of accident : Nil
2. Type of Accident : Nil
3. Sequence of events leading to accident : Nil
4. Has the Authority been informed immediately : NA
5. The type of waste involved in accident : NA
6. Assessment of the effects of the accidents on human health and the environment: NA
7. Emergency measures taken : NA
8. Steps taken to alleviate the effects of accidents : NA
9. Steps taken to prevent the recurrence of such an accident: NA
10. Does your facility has an Emergency Control policy? If yes give details: Yes

Date : 12/6/202

Signature

Place: New Delhi

Designation



Date 31/10/2019

Minutes- Infection Control Committee Meeting

Attendees – Dr Monica, Dr Manish Rai, Dr Sapna, Ram Rattan, Sheetal, Maya, Devnath, Laxmikant, Parineeta, Shubham, Pobby, Sazid

Agenda-

1. Follow-up on last Infection Control Meeting minutes
2. Discussion on Infection control Quality Indicators
3. Any other points raised by the members

S. No.	Agenda	Responsibility	Time line
1.	The ATR of the last meeting were discussed		
2.	Extra pairs of goggles available in OT to be given to dental department	Shusmita/Pobby	15 days
3.	Hand wash video to be shared on the training group for availability to all employees	Sheetal	15 days
4.	Hand wash posters to be made available in Hindi for HK staff	Sheetal	1 month
5.	Unsterile gloves of all sizes to be made available in ER	Maya/Ajay	15 days
6.	Influenza vaccination of the staff needs to be done.	Sheetal	15 Days

Emergency Codes Response

MAX

CODE	SITUATION	DIAL EXT NO.	RESPONSE TEAM	MESSAGE
CODE RED	Fire	55	Duty Manager, Security Supervisor, Shift Engineer, EMO, Nursing Team Leader	CODE RED - at "<Location>"
CODE BLACK	Bomb Threat	55	Security Supervisor, Shift Engineer, EMO, Nursing Team Leader, Housekeeping Supervisor	CODE BLACK - Bomb Security Control Room
CODE BLUE	Cardio-Pulmonary Arrest	55	EMO, Triage Nurse, Intensivist, Nursing Team Leader, ANS, Duty Manager, Security Supervisor	CODE BLUE at "<Location>" Respond Immediately
RRT (ONLY ONE)	Any Alarming Situation EXCEPT CP Arrest	55	EMO, Triage Nurse, Intensivist, Floor-EMO, Team Leader	RRT required at "<Location>" Respond Immediately
CODE PINK	Missing Patient	55	Duty Manager, Security Supervisor, Nursing Supervisor/Team Leader, SR-Pediatric	CODE PINK "<Location>" CLOSE ALL EXITS & INITIATE SEARCH.
CODE YELLOW	External Disaster	55	Duty Manager, EMO, Security Supervisor, ANS, Nursing Team Leader, DMS, Shift Engineer, Housekeeping Supervisor	CODE YELLOW-Active command center
CODE VIOLET	Violent Patient/Attendant	55	Security Supervisor, Duty Manager, DMS, Nursing Team Leader/ANS, Shift Engineer, EMO	CODE VIOLET - at "<Location>" Reach Immediately
CODE GREY	Clinical/ Non clinical Adverse event	55	Medical Admin (MS), Duty Manager, Nursing Supervisor, Security Supervisor	CMT required at "<Location>" Respond immediately No PA Announcement
CODE T	Terrorist attack	55	EMO, Nursing Supervisor, Security Supervisor, Duty Manager, BME, Engineering	Code T at "<Location>"
CODE EARTHQUAKE	Earthquake	55	EMO on duty, Nursing Supervisor, Security Supervisor, Duty Manager, BME	Code Earthquake