



DATE: 28.05.2024.

TO,

The Environmental Engineer Regional Office. TSPCB Hyderabad.

Subject : - Annual Report Submission Year 2023 (Form - IV).

RF

Road No:1. Banjara Hills

ERAB

Dear Sir/Mam,

Please Find The Enclosed Annual Report Of Bio Medical Waste Management at CARE Hospitals, Road no 1, Banjara Hills, Hyderabad For The Period Of January 2023 to December 2023 in form IV along with MOM.

Please acknowledge the Same.

Thanking you,

With Regards,



Mr. Syed Kamran Mahmood Hussain HCOO Care Hospitals.



QUALITY CARE INDIA LIMITED

CIN: U85110TG1992PLC014728

evercare group

CARE HOSPITALS

Banjara Hills: 6-3-248/2, Road No.1, Hyderabad - 500034, Telangana, T: (040)-61656565, F: (040)-30418488 Banjara Hills - CARE Outpatient Centre: Road No 10, Hyderabad - 500034, Telangana, T: (040)-61656565, F: (040)-3931 0140 E: info@carehospitals.com | W: carehospitals.com

REGISTERED OFFICE

H.No. 6-3-248/2, Road No.1, Banjara Hills, Hyderabad - 500034, Telangana T: (040)-30418888, (040)-23234444 | F: 040-30418488 | E: info@carehospitals.com | W: carehospitals.com

CORPORATE OFFICE

H.No. 8-2-120/86/10, 1st Floor, Kohinoor building, Road No. 2, Banjara hills, Hyderabad -500 034, Telangana T : (040)-61806565 | E: info@carehospitals.com | W: carehospitals.com

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 (CBWTF)]

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S1.	Particulars		
No.			
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	M/S. CARE HOSPITAL (A unit of quality care India Ltd)
	(ii) Name of HCF or CBMWTF	:	CARE Hospitals
	(iii) Address for Correspondence	:	H No. 6-3-248/2 Rd. Number 1, Pren Nagar, Banjara Hills, Hyderabad, Telengana 500034.
	(iv) Address of Facility		H No. 6-3-248/2 Rd. Number 1, Prem Nagar, Banjara Hills, Hyderabad, Telengana 500034.
	(v)Tel. No, Fax. No	:	040-30418888
	(vi) E-mail ID	:	Subhendu.chakraborty@carehospitals.co m
	(vii) URL of Website		http://www.carehospitals.com
	(viii) GPS coordinates of HCF or CBMWTF		Latitude : 17.41321 Longitude : 78.450202
-	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: 208-HYD/TSPCB/ZOH/HCF/CFO/2 022-2108 valid up to : 31/03/2027.
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31/03/2027
2. /	Type of Health Care Facility	:	
(i) Bedded Hospital	•	No. of Beds : 414

	(ii) Non-bedded hospital	:			
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		NA		
	(iii) License number and its date of expiry		-		
3.	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.					
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 3622.02 Kgs.		
			Red Category: 3447.85 Kgs.		
			White: 153.80 Kgs		
			Blue Category : 287.87 Kgs.		
			General Solid waste: 9064.65 Kgs.		
5	Details of the Storage, treatment, transportation, proces	ssing a	und Disposal Facility		
	(i) Details of the on-site storage : Size		sq.ft. 3 cu.mt.		
	waste i	on of s store	on-site storage : (The biomedical d in designated storage room)		

disposal facilities		Type of treatr equipment	nent	No of unit s	Cap acit y Kg/ day	Quantity treatedo r disposed in kg per annum
		Incinerators Plasma Pyroly Autoclaves Microwave Hydroclave Shredder				
		Needle tip cut destroyer Sharps encapsulation concrete pit Deep burial pir Chemical disinfection: Any other treat equipment:	or ts:		-	
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (lik	e plasti	c, glass	etc.) :	NA
(iv) No of vehicles used for collection and transportation of biomedical waste	:		C	1		
(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		· Inci Ash	neration		nerated	disposed
(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	:	179 Nan	& 181,	Edulap	ally (V)	Lt. Sy. No.), ngareddy
(vii) List of member HCF not handed over bio-medical waste.				N	A	

6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Bio Medical Waste related issues are discussed in Hospital Infection Control Committee.
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	. 10
	(ii) number of personnel trained	224
	(iii) number of personnel trained at the time of induction	412
	(iv) number of personnel not undergone any training so far	0
	(v) whether standard manual for training is available?	. Yes
	(vi) any other information)	Nil
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)	Nil
	(iv) Any Fatality occurred, details.	NA
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	. NA
	Details of Continuous online emission monitoring systems installed	
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	STP & ETP for hospital waste water treatmenta available in HCF and periodically its been tested and ensured that it is meeting the standards.

Is the disinfection method or sterilization meeting the log 4		NA
standards? How many times you have not met the standards in a year?		
Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from January 2023 till December 2023

Date: 28-05-2024. Place: HYDERABAD. Name and Signature of the Head Oct ARE Institution

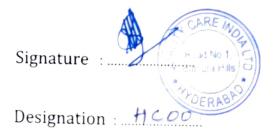
FORM - I [See rule 4 (0), 5(I) and 15(2)]

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 of been informed immediately	: NIL
5. The type of waste involved in accident	: NIL
Assesment of the effects of the accidents on human health and the environment	:
7. Emergency measures taken	:
8. Steps taken to alleviate the effects of accidents	:
9. Steps taken to prevent the recurrence of such an accident	:
10. Does you facility has Emergency Control policy If yes , give details	?

Date : 28-05-2024.

Place: HYDERABAD.



	ATTENDANCE SHEET							
e e	CARE HOSPITALS, BANJARA HILLS							
CAN			DATE : 28	12 23 .				
MEET	ING: HIC Committee	Meeting	TIME: 12	РМ.				
	NA DATE	DEPARTMNET	ERP.No	SIGNATURE				
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S.	Dr. BHAVANI PRASA) britical care	0.011	Komot .				
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MINUTES OF THE MEETING FOR IMPLEMENTATION

CARE H	OSPITALS BANJA	RAHILLS , HYDE	RABAD	Ver no 2
Committee : Hospital Infection Control Committee	Date 28/12/2023	Time:12 PM	Venue: BOARDROOM	Rev.No.1 F/QUA/COM/005

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Chairperson : Dr.Bhavani Prasad	
Member Present: Dr.Bhavani Prasad, ,Dr Sathish Raju, , Ms.Anitha,,Ms Shobha Rani, Mr Barun D, Ms.Elizabeth, Mr Sri Harsha(Mr. Pritish Tripathy) 	Invitees Present:Ms Sonal,Ms Swapna,Mr P Anandh , Ms Anandita Invitees absent :

S.No	Agenda	Key Discussion among members	Responsibility	Timeline
1.	Committee Minutes	1. The Infection Control Nurse was advised to talk to the ICU Consultants about the Clinical profile of the patients, and confirm the positive cultures as CAUTI, VAP and BSI. The same to be documented and presented in next meeting.	Infection Control Nurse	~
		2. The committee was not clear on the proper transportation process of Microbiology Samples	Medical Services	
		3. The highest Delayed transportation of cultures was 1 hour between COPC Block and IP Block.	Medical Services	
		4. The Committee recommended that 2 Phlebotomists to be trained on Pre Counselling for HIV Samples and the have to counsel the patients before taking the samples	Human Resource an	d .



MINUTES OF THE MEETING FOR IMPLEMENTATION

Committee : Hospital Infantia C	CARE HOSPITALS BANJARAHILLS , HYDERABAD					
Committee : Hospital Infection Control Committee		Time:12 PM	Venue: BOARDROOM	Ver no: 2		
	28/12/2023			Rev.No:1		
				F/QUA/COM/005		

		 Till the same time, the management to recruit a social worker. 5. The Medical Services Department to reinforce the High end Antibiotic Forms among Consultants. 6. The Medical Service Department to categorize the Health Care Professionals and suggest color coded scrubs for them. 	Medical Services
2	Outsourced Vendor Visits	1. Committee to discuss on the number of visits to be made to the outsourced vendor visits such as GJ Multiclave and Laundry Services.	Medical Services
		2. The Housekeeping Head was advised to sort out the issues between the organization and GJ Multiclave before conducting the outsourced vendor visit.	
3	Ultrasonic Washer Replacement	1. The Committee was informed about the nor functioning of the ultrasonic washer since the past month and the failure of the machine to pass the Vacuu	1 BIO Medical Engineering
		Leak Test. 2. The committee suggested to procure a new Ultraso Washer in the next financial year.	
		3. The committee advised the team to use the stand machine for CTOT, GOT, etc as the usage of previ- machine can lead to increase in infections.	
4	HIC Rounds	 Chairperson recommended the Infection Control N to report the observations during the rounds immedia on the WhatsApp group and ask for closures from 	itely



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MINUTES OF THE MEETING FOR IMPLEMENTATION

CAREH	OSPITALS BANJA	RAHILLS , HYDE	RABAD Venue: BOARDROOM	Ver no: 2
Committee : Hospital Infection Control Committee	Date 28/12/2023	Time:12 PM	Venue: BOARDROOM	Rev.No:1 F/QUA/COM/005

		espective shareholders. 2. The Nursing Head recommended that the process of sealing the sharps before transporting be followed rigorously.	Housekeeping Head	
5		The committee advised the Nursing Head to compare the cost of procuring the Inlet IV Sets from the vendors and decide on the procurement of the same for the entire hospital.	Nursing Head	
6	Training	The Infection Control Nurse was advised on arranging the training of link nurses rigorously on their responsibilities. The training would be conducted by the Nursing Head.	Nursing Head and Infection Control Nurse	
7	CSSD Rounds	The committee recommended that Ms Swapna to visit the CSSD every alternate days for regular rounds.	Ms Swapna	
8	Integrating <u>Hitech</u> Machine with LIS	Mr Anand was given the deadline till January 2, 2024 to confirm if the integration between the culture machine and the LIS is possible or not.	Mr Anand	

Champerson Signature

Convenorsignature

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CARE HOSPITALS – BANJARA IP/OP

INTEROFFICE COMMUNICATION

From: Chairperson

To: All Concerned

19/05/ 2023

This is to inform you all that HOSPITAL INFECTION COMMITTEE will be held on

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)	Day & Date	:	Friday, 26/05/ 2023
-	Time	:	3.00 pm
)	Venue	:	Board Room

The following Agenda Points will be discussed

- 1. Review of minutes of previous meeting.
- 2. HK practices
- 3. Chemical change approval
- 4. HIC rounds
- 5. Any other point with the consent of the Chairperson. >

All concerned are requested to attend the meeting.

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Dr. Pavan Kumar Reddy Chairperson, HICC

Copy to: HCOO/MS/Head Operations All HICC members All FHAs All Nurse Incharges

ATTENDANCE SHEET CARE HOSPITALS, BANJARA HILLS

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CARI Committee : Hospital Infection Control Committee	Date 26.05.2023		: 3 PM	Venue: BOARD ROOM	Ver no: 2 Rev.No:1 F/QUA/COM/005
Chairperson : Dr. Pavan Kumar Reddy					
Member Present: Dr. Pavan Kumar Reddy, Dr. Krishr Dr. Shobhit, Dr. Sathish Raju, Dr. Rahul Agarwal, Ms. Murali Mohan, Mr. Pritish Tripathy,	ia Mohan, Dr. Ajit Sii Elizabeth, Ms. Anith	ngh, a, Mr.	Mr. Manjun	esent: Dr. Mamatha Reddy, ath, Mr. K Arun Kumar, Mr. B Shetty, Mr. Abdulla, Mr. Harsl	Suresh Reddy, Mr. S Ranjith,
Member Absent: Dr. Guruprasad, Ms. Sujatha Madd	uri, Mr. Narsaiah, Dr	r. Likhita	Invitees at		ia is

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S.No	Agenda	Key Discussion among members	Responsibility	
	Updated members	New Members has to be added in the list of HICC	Responsibility	Timeline
1.	list		Quality	w.i.e
2.	HK practices	Supervisor has to check the HK practices on daily basis and maintain check list accordingly,Patient care should not be deviated through housekeeping as it requires stringent monitoring from housekeeping supervisors and it should be informed	HK HOD	w.i.e
3.	HIC round	HIC Round shall be conducted by the Team as per the plan and report to be discussed during HIC Committee meeting. ICN to coordinate and execute the round along with HK Maintenance.		w.i.e
4.	Chemical change approval	Chemical change composition has to be approved by HICC chairperson		w.i.e

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MINUTES OF THE MEETING FOR IMPLEMENTATION

	nittee : Hospital Infection	Control Committee	Date 26.05.2023	ARAHILLS , HYE Time: 3 PM	Venue: BOARD ROOM	Ver no: 2 Rev.No:1 F/QUA/COM/005
5.	Ambulance meeting	Meeting with the outsource has to be scheduled ambulance,hand wash fa		aes in the	Dperations	w.i.e
6.	Scrub Suits	Scrub suits, shoe covers to be worn outside the h	, head caps, is hig ospital at any cost		MEDICAL SERVICES AND	- wie
7.	Antibiotic meeting	Meeting with surgeons I of antibiotic and to prese	has to be esheduly	ed for the usage	ICN,HK,NS,QUALITY NURSE	w.i.e
8	RO water culture	RO water culture metho 3 to 4 months, in house initiated	od is simulated outs sampling of cultur	side hospital from res has also to be	Maintenance	
9	Single use device	There shall be a coord MS to streamline pro Device. SUDs usage handover to Quality fo	cess of Reprocess tracking sheet to l	sing of Single Us	- Dr. Shobbit	120
10	Bio Waste	Foot operating bid recommended, in o accord to the occupa department dustbin of	p-waste bins ha rder to avoid cro	as to be high oss infections, a e requirement of t	ind	