



DATE: 28.05.2024.

TO,

The Environmental Engineer
Regional Office,
TSPCB Hyderabad.

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

Dear Sir/Mam,

Please Find The Enclosed Annual Report Of Bio Medical Waste Management at CARE Hospitals, Road no 10 , 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

From -IV
(See rule 13)
ANNUAL REPORT

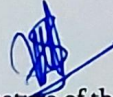
[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the Occupier of Health Care Facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

Sl.No	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorized person (occupier or operator of facility)	:	M/S CARE HOSPITAL (A unit of quality care India Ltd)
	(ii) Name of HCF or CBMWTF	:	CARE Out Patient Centre
	(iii) Address for Correspondence	:	Care Hospitals Out Patient Centre, Babukhan Chambers, Road No 10, Avenue 4, Banjara Hills, Hyderabad, Telangana-50003
	(i) Address of Facility	:	Sy.No. 179 & 181, Edulapally (V), Nandigam Shadnagar, Ranga Reddy.
	(ii) Tel. No. Fax. No.	:	040-68106589
	(V) E-mail ID	:	info@carehospitals.com
	(i) URL of Website	:	http://www.carehospitals.com
	(ii) GPS coordinates of HCF or CBMWTF	:	CBMWTF
	(iii) Ownership of HCF of CBMWTF	:	(State Government or Private or Semi Govt. Or any other)
	(iv) Status of Authorization under the Bio-Medical Waste (Management and Handing) Rules.	:	Authorization No.: 326/HYD/TSPCB/ZOH/BMWA/2023-1918. Valid up to: 31.05.2032.
	(v) Status of Consents under Water Act and Air Act.	:	Valid up to: 31.05.2032.
2.	Type of Health Care Facility	:	Tertiary Health Care Facility
	(i) Bedded Hospital	:	No. of Beds: 30
	(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 if CBMWTF	:	
	(i) Number healthcare facilities	:	NA

	covered by CBMWTF																																																		
	(ii) No. of beds covered by CBMWTF	:	NA																																																
	(iii) Installed treatment and disposal capacity of CBMWTF	:	NA																																																
	(iv) Quantity of biomedical waste treated or disposal by CBMWTF	:	NA																																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category: 847.19 Kg /Annum																																																
			Red Category: 1033.114 Kg /Annum																																																
			White: 59.7133 Kg/Annum																																																
			Blue Category: 128.1466 Kg/Annum																																																
			General Solid Waste: 9661.0358 Kg /Annum																																																
5.	Details of the Storage , treatment, transportation, processing and Disposal Facility																																																		
	(i) Details of the on-site storage facility	:	Size :--																																																
			Capacity:																																																
			Provision of on-site storage : The Biomedical waste is stored in color coded bins in air conditioned rooms for not more than 48 hours																																																
	(ii) Disposal Facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment of 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 Paralysis</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> <tr> <td>Deep Burial pits:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td></td> <td></td> <td>----</td> </tr> <tr> <td>Any other treatment equipment:</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment of Equipment	No of Units	Capacity Kg/day	Quantity treated or disposed In Kg per Annum	Incinerators				Plasma Paralysis				Autoclaves				Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer			---	Sharps encapsulation or concrete pit		----		Deep Burial pits:				Chemical disinfection:			----	Any other treatment equipment:			
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	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	NA																																																
	(iv) No of vehicles used for collection and transportation of biomedical waste.	:	01																																																
	(v) Details of incineration ash and		Quantity Generated Where disposal																																																

	during the treatment of wastes in Kg per annum)		Incineration Ash NA ETP Sludge
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	G J Multiclave (India) Pvt. Ltd. Sy. No. 179 & 181, Edulapally (V), Nandigam Shad Nagar .Ranga Reddy .Telangana
	(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.	:	Bio medical related issues are discussed in Hospital infection control committee meetings.
7.	Detail trainings conducted on BMW		
	(i) Number of training conducted on BMW Management.		9
	(ii) Number of personnel trained		286
	(iii) Number of personnel trained at the time of induction		45
	(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		Nil
	(i) Number of Accidents occurred		Nil
	(ii) Number of the persons affected		Nil
	(iii) Remedial Action taken (Please attach details if any)		As per infection control protocols immediate investigation were conducted and results were non reactive.
	(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		Out Sourced
10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year.		NA
11.	It the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		NA
12.	Any other relevant information		Nil

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



Name and Signature of the Head of the Institution

Date: 28-05-2024.


Place: HYDERABAD.

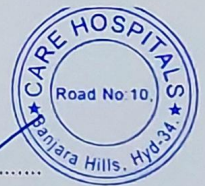
FORM - I
[See rule 4 (o), 5 (I) and 15(2)]

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 of been informed immediately : NIL
5. The type of waste involved in accident : NIL
6. 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 .

Signature : 



Place : HYDERABAD .

Designation : HCOO .

MINUTES OF THE MEETING FOR IMPLEMENTATION

CARE HOSPITALS BANJARAHILLS, HYDERABAD

Committee : Hospital Infection Control Committee	Date 26.03.2023	Time: 3 PM	Venue: BOARD ROOM	Ver no: 2 Rev.No:1 FIQUA/COM/005
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Chairperson : Dr. Pavan Kumar Reddy

Member Present: Dr. Pavan Kumar Reddy, Dr. Krishna Mohan, Dr. Ajit Singh, Dr. Shobhit, Dr. Sathish Raju, Dr. Rahul Agarwal, Ms. Elizabeth, Ms. Anitha, Mr. Murali Mohan, Mr. Pritish Tripathy, Mr. Rufus Manjda, Mr. Laddaf Saddam Hussain, Durgam Jagadish

Member Absent: Dr. Guruprasad, Ms. Sujatha Madduri, Mr. Narsaiah, Dr. Likhita

Invitees Present: Dr. Mamatha Reddy, Ms. Reeja, Ms. Sonal, Mr. Manjunath, Mr. K Arun Kumar, Mr. B Suresh Reddy, Mr. S Ranjith, Mr. Manoj Shetty, Mr. Abdulla, Mr. Harsha

Invitees absent :

S.No	Agenda	Key Discussion among members	Responsibility	Timeline
1.	Updated members list	New Members has to be added in the list of HICC	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.	ICN	w.i.e
4.	Chemical change approval	Chemical change composition has to be approved by HICC chairperson	HK HOD	w.i.e

MINUTES OF THE MEETING FOR IMPLEMENTATION

CARE HOSPITALS BANJARAHILLS, HYDERABAD

Committee : Hospital Infection Control Committee

Date
26.03.2023

Time: 3 PM

Venue: BOARD ROOM

Ver no: 2
Rev.No:1
FI/QUA/COM/005

5.	Ambulance Meeting	Meeting with the outsourced ambulance and hospital staff has to be scheduled for few changes in the ambulance.	Quality	w.i.e
6.	Scrub Suits	Scrub suits, shoe covers, head caps, is highly restricted to be worn outside the hospital at any cost	MEDICAL SERVICES AND ICN, HK, NS, QUALITY NURSE	w.i.e
7.	Antibiotic dosage	Dosage of the antibiotic has to be mentioned along with the department	Clinical Pharmacologist	w.i.e
8	Antibiotic Meeting	Meeting with surgeons has to schedule for the usage of antibiotics and to present the data.	Medical Services	
9	Single use device	There shall be a coordination meeting with CSSD, NS and MS to streamline process of Reprocessing of Single Use Device. SUDs usage tracking sheet to be maintained and handover to Quality for random audit of process	Dr. Shobhit NS	
10	Bio Waste	Foot operating bio-waste bins has to be highly recommended, in order to avoid cross infections, and accord to the occupancy and as per the requirement of the department dustbin capacity to be increased	HK	

MINUTES OF THE MEETING FOR IMPLEMENTATION

CARE HOSPITALS BANJARAHILLS, HYDERABAD

Committee : Hospital Infection Control Committee

Date
26.03.2023

Time: 3 PM

Venue: BOARD ROOM

Ver no: 2
Rev.No:1
F/QUACOM/005

11	MDR	In the MDR data, it should reflected with the information of total cultures sent, total positive patient admitted along with the date of admission	MICROBIOLOGY	
12	Validation and calibration	Validation and calibration of C-PAP machine count to be totally calculated of both admissions and IP based	BIOMEDICAL	
13	SMS sheets	Material of SMS sheets of CSSD and OT areas should be changed without fail	PURCHASE AND CSSD	

Chairperson Signature

Convenor signature

**MINUTES OF THE MEETING FOR IMPLEMENTATION
CARE HOSPITALS BANJARAHILLS, HYDERABAD**

Committee : Hospital Infection Control Committee

Date
26.08.2023

Time: 3 PM

Venue: BOARD ROOM

Ver no: 2
Rev.No:1
FIQUA/COM/005

Chairperson : Dr. Pavan Kumar Reddy

Member Present: Dr. Pavan Kumar Reddy, Dr. Krishna Mohan, Dr. Ajit Singh, Dr. Shobhit, Dr. Sathish Raju, Dr. Rahul Agarwal, Ms. Elizabeth, Ms. Anitha, Mr. Murali Mohan, Mr. Pritish Tripathy, Mr. Rufus Manda, Mr. Laddaf Saddam Hussain, Durgam Jagadish

Invitees Present: Dr. Mamatha Reddy, Ms. Reeja, Ms. Sonal, Mr. Manjunath, Mr. K Arun Kumar, Mr. B Suresh Reddy, Mr. S Ranjith, Mr. Manoj Shetty, Mr. Abdulla, Mr. Harsha

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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.	ICN	w.i.e
4.	Chemical change approval	Chemical change composition has to be approved by HICC chairperson	HK HOD	w.i.e

MINUTES OF THE MEETING FOR IMPLEMENTATION

CARE HOSPITALS BANJARAHILLS, HYDERABAD

Committee : Hospital Infection Control Committee

Date
26.08.2023

Time: 3 PM

Venue: BOARD ROOM

Ver no: 2
Rev No:1
F/QUACC/005

5.	Ambulance meeting	Meeting with the outsourced ambulance and hospital staff has to be scheduled for few changes in the ambulance, hand wash facility	Operations	w/e
6.	Scrub Suits	Scrub suits, shoe covers, head caps, is highly restricted to be worn outside the hospital at any cost	MEDICAL SERVICES AND ICN, HK, NS, QUALITY NURSE	w/e
7.	Microbiology Indicators	A detailed discussion on microbiology indicators were discussed in the meeting Total no of positive cultures = 197 Total no of XDR's = 29/197 = 14.7% Total no of MDRO's = 52/197 = 26.3%	NA	NA
8	RO water culture	RO water culture method is simulated outside hospital from 3 to 4 months, in house sampling of cultures has also to be initiated	Maintenance	
9	Antibiotic Profoma	Committee suggested to the medical services to inform all the consultants to write the High End Antibiotic Profoma and send the form along with the indent/inform the IT department to create any high alert colour to this. To identify that this is a high level antibiotics	Medical Services IT	
10	Bio Waste	Foot operating bio-waste bins is highly recommended to avoid cross infections, and accord to the occupancy and as per the requirement of the department dustbin capacity to be increased	HK	

MINUTES OF THE MEETING FOR IMPLEMENTATION

CARE HOSPITALS BANJARAHILLS, HYDERABAD

Committee Hospital Infection Control Committee

Date
26.08.2023

Time: 3 PM

Venue: BOARD ROOM

Ver no: 2
Rev.No:1
FIQUACOM/005

11 MDR	In the MDR data, it should reflected with the information of total cultures sent, total positive patient admitted along with the date of admission	MICROBIOLOGY	
12 Validation and calibration	Validation and calibration of C-PAP machine count to be totally calculated of both admissions and IP based	BIOMEDICAL	
13 SMS sheets	Material of SMS sheets of CSSD and OT areas should be changed without fail	PURCHASE AND CSSD	

Chairperson Signature

Convenor signature