



# BREACH CANDY HOSPITAL TRUST

CIN : U85100MH1946GAP005082

60-A, Bhulabhai Desai Road, Mumbai 400 026.

Telephone : 2366-7788, 2367-1888 / 2888, Fax : 2367-2666

Email : info@breachcandyhospital.org; www.breachcandyhospital.org

Date: 14/06/2023

To,  
Maharashtra Pollution Control Board,  
Kalpataru Point,  
1<sup>st</sup> floor, Road No. 8,  
Opp. PVR Theatre,  
Sion Circle,  
Mumbai - 400022

Subject: Submission of BMW Annual Report for 2022

Respected Sir,

Attached herewith is the annual report for January – December 2022 of Breach Candy Hospital Trust in the prescribed format.

Kindly acknowledge the receipt.

Thank you.

Regards,

*Pooja Kelshikar*  
14/6/2023



Dr. Pooja Kelshikar  
Asst. Manager-Medical Admin

*D. Shinde*  
14/6/2023  
Maharashtra Pollution Control Board  
Regional Office, Mumbai  
Kalpataru Point, 1st Floor,  
Sion Circle, In Front of Cine Planet Theater,  
Shiv (East), Mumbai - 400 022.



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**Form - IV**  
**(See rule 13)**  
**ANNUAL REPORT**

[To be submitted to the prescribed authority on or before 30<sup>th</sup> 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)	:	Breach Candy Hospital Trust
	(ii) Name of HCF or CBMWTF	:	Same as above
	(iii) Address for Correspondence	:	60-A, Bhulabhai Desai Road, Mumbai -26.
	(iv) Address of Facility	:	Same as above
	(v) Tel. No, Fax. No	:	23671888/23672888. Fax-23672666
	(vi) E-mail ID	:	info@breachcandyhospital.org
	(vii) URL of Website	:	www.breachcandyhospital.org
	(viii) GPS coordinates of HCF or CBMWTF	:	Lat. 18°58'21"N Long. 72°48'17"E
	(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: RED/L.S.I No:- Format 1.0/CAC/ UAN No. 0000146574/CR/2301002218 valid up to: 31.05.2027

*[Handwritten signature]*

	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31.05.2027
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:--213
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital	:	NA
	(iii) License number and its date of expiry	:	License No. 887301347 valid upto 31.03.2025
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.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : ~ 6,000 kgs/month Red Category : ~ 5,500 kgs/month Others: ~ 420 kgs/month Blue Category : ~ 720 kgs/month General Solid waste: ~2000 kgs/month
5	Details of the Storage, treatment, transportation, processing and Disposal Facility		
	(i) Details of the on-site storage facility	:	Size : ~ 500 sq. ft. Capacity : 1000 kgs Provision of on-site storage (cold storage or any other provision) : No

*Chh*

(ii) Disposal Facilities	:	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	--	--	Being done
		Sharps 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 plastic, glass etc.) Being collected by authorized agency SMS Envoclean			
(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	NA		
		ETP Sludge	ETP is only for laundry. The sludge is not generated		
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	SMS Envoclean Private Limited			

*Handwritten signature*

	(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. Bio Medical Waste Committee is a part of Hospital Infection Control Committee. Minutes of the meeting are attached.
7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management.		126
	(ii) number of personnel trained		2560
	(iii) number of personnel trained at the time of induction		420
	(iv) number of personnel not undergone any training so far		0
	(v) whether standard manual for training is available?		Yes
	(vi) any other information)		
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		4
	(ii) Number of the persons affected		4
	(iii) Remedial Action taken (Please attach details if any)		Training of healthcare workers on BMW and sharp safety practices.
	(iv) Any Fatality occurred, details.		No
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not meet the standards?		
	Details of Continuous online emission monitoring systems installed		NA

10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		ETP – for laundry effluent. After treatment it is being transferred to STP – It is MBBR type 400M3 Cap. STP discharge water parameters are always within MPCB limits
11.	Is the disinfection method or sterilization meeting the log. 4 standards? How many times you have not met the standards in a year?		Yes, we put biological indicators every week.
			No
12.	Any other relevant information	:	

Certified that the above report is for the period from  
1<sup>st</sup> January 2022 to 31<sup>st</sup> December 2022.

Name and Signature of the Head of the  
Institution



Date: 07/06/2023

Place: Mumbai



**DR. ANIRUDH KOHLI**  
**MD.DNB., D.M.R.D.**  
 MMC No. 51942  
**MEDICAL DIRECTOR**  
**BREACH CANDY HOSPITAL TRUST**  
 60 - A, BHULABHAI DESAI ROAD,  
 MUMBAI - 400026





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## FORM - I

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

### ACCIDENT REPORTING

1. Date and time of accident: No major accident during the year
2. Type of Accident : NA
3. Sequence of events leading to accident: NA
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 you facility have an Emergency Control policy? If yes give details: NA

Date: 07/06/2023

Place: Mumbai

Signature .....

Designation .....



DR. ANIRUDH KOHLI

MD.DNB., D.M.R.D.

MMC No. 51942

MEDICAL DIRECTOR

BREACH CANDY HOSPITAL TRUST

60 - A, BHULABHAI DESAI ROAD,

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Extracts from the minutes of the Hospital Infection Control Committee meeting conducted on 06/04/2022 at 2:00 pm in the Auditorium.

## Points Discussed:

Dr. Priyanka presented HAIs and indicators for the month of March 2022. There was no case of device-associated infections. There was no case of clean and clean-contaminated SSI. There was one case of contaminated SSI. Dir (N). appreciated the clinical team and support staff for their efforts in safe handling and disposal of sharps and diligently following IPC practices. To motivate HCWs, Dir. (N) suggested sharing salient points of achievement with the nursing team during morning huddle sessions.

**BMW issues:** No New issues

**Needles stick injuries:** 1 incident (doctor)

**Exposure to blood & body fluids:** 0 incidents

**Audits:** Hand hygiene audit, Isolation audit, Invasive devices audit, BMW management audit, CWC area audit

*[Signature]*  
7/6/23





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Extracts from the minutes of the Hospital Infection Control Committee meeting conducted on 12/12/2022 at 2:00 pm in the Auditorium.

## **Points Discussed:**

There were two incidents of Needle stick injury (NSI). NSI protocol was followed for both the HCWS. Root cause analysis was done. One injury occurred at the time of handling the sharp and the other while disposing of the sharp. NSI prevention practices were emphasized to both HCWs.

**BMW issues:** No new issues

**Needles stick injuries:** 2 incidents (Technician & Sweeper)

**Exposure to blood & body fluids:** 0 incidents

## **Audits:**

- SPOT audit of ALL clinical areas:  
BMW, Vaccination record, Knowledge check-care bundle, VIP scoring, Spill Management, Medication administration, Cleaning & disinfection, Hand hygiene.
- Isolation audit

*Subo*  
7/6/23