

BREACH CANDY HOSPITAL TRUST

CIN : U85100MH1946GAT005082

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

Telephone : 2366-7788, 2367-1888 / 2888, 6919 7788 Fax : 2367-2666

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

Date: 28/06/2024

To,
Maharashtra Pollution Control Board,
Kalpataru Point,
1st Floor, Road No 8,
Opp PVR Theatre,
Sion Circle,
Mumbai – 400022.


Sub: Submission of BMW Annual Report for Jan – Dec'23.

Dear Sir,

Attached herewith the annual report for January to December, 2023 of Breach Candy Hospital Trust in the prescribed format.

Kindly acknowledge receipt.

Regards,


Dr. Rohit Barman
Medical Director.



Dshindp
28/6/24
Maharashtra Pollution Control Board
Regional Office, Mumbai
Kalpataru Point, 2nd Floor,
Near Sion Circle, In Front of Movie Max Theatre,
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 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)	:	Breach Candy Hospital Trust
	(ii) Name of HCF or CBMWTF	:	Breach Candy Hospital Trust
	(iii) Address for Correspondence	:	60-A, Bhulabhai Desai Road, Mumbai -26.
	(iv) Address of Facility	:	Same as above
	(v) Tel. No, Fax. No	:	022-62597788. 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)- Charitable Trust
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No: UAN No. MPCB-CONSENT- 0000183313/CO/2312001601 valid up to: 31/05/2027
	(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:--272
	(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	:	Reg no 887301347 & Reg no. 888023856 valid upto 31/03/2025



3.	Details of CBMWTF	:	NA																																
	(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 Kg per day																																
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	NA Kg/day																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : ~ 4597 kg/ month Red Category : ~ 4127 kg/month Others: ~ 208 kg/month ~ 746kg/mont Blue Category :h General Solid waste:																																
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																		
	(i) Details of the on-site storage facility	:	Size : 520 sq.ft.approx Adequate for handling BMW waste of the hospital Capacity : Provision of on-site storage : (cold storage or any other provision)																																
	(ii) 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>2</td> <td>85lt each</td> <td>Being done</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>Being done</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	2	85lt each	Being done	Microwave	-	-	-	Hydroclave	-	-	-	Shredder	-	-	-	Needle tip cutter or destroyer	-	-	Being done
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Needle tip cutter or destroyer	-	-	Being done																																

Handwritten signature



		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.)		
	(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		Incineration Ash	Quantity generated	Where disposed
				NA	
			ETP Sludge	ETP is only for laundry. Sludge is not generated	
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	SMS Envoclean 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. Biomedical waste management committee is a part of Hospital Infection Control Committee. Minutes of the meeting attached.		
7	Details trainings conducted on BMW				
	(i) Number of trainings conducted on BMW Management.		66		
	(ii) number of personnel trained		1640		
	(iii) number of personnel trained at the time of induction		253		
	(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		10
	(ii) Number of the persons affected		10
	(iii) Remedial Action taken (Please attach details if any)		Training of HCWs on BMW & 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?		We don't have an incinerator
	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 been transfer to STP- It is MBBR type 400 M3 Cap.STP discharge water parameters are 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	:	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from
1st January 2023 to 31st December'2023.



Name and Signature of the Head of the Institution

Date:
Place: Mumbai



DR. ROHIT BARMAN
MBBS, FMGEMS (USA)
MMC No. 47420
MEDICAL DIRECTOR
BREACH CANDY HOSPITAL TRUST
60-A, BHULABHAI DESAI ROAD
MUMBAI - 400 026

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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 your facility have an Emergency Control policy? If yes give details: NA

Date: 28.6.24

Place: Mumbai

Signature 

Designation



DR. ROHIT BARMAN
MBBS, FMGEMS (USA)
MMC No. 47420
MEDICAL DIRECTOR
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60-A, BHULABHAI DESAI ROAD
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Extracts from the minutes of the Hospital Infection Control Committee meeting conducted on 05-12-2023 at 2.00 pm in the Auditorium.

Points Discussed:

Dr. Seema informed that compliance with pre-exposure prophylaxis has improved, and EMS will support Hepatitis B vaccination for temporary staff if their vaccination is due and they are going on leave. Dr. Priyanka expressed gratitude to all nurses and the IC team for their efforts.

There was one case of needle stick injury due to recapping. The NSI protocol was followed. Dr. Seema and Dr. Priyanka reiterated the importance of sharp safety to prevent such incidents.

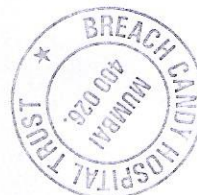
BMW issues: No New issues

Needles stick injuries: 1 incident (Nurse)

Exposure to blood & body fluids: 0 incidents

Audits:

HH audit, Line care audit, Catheter insertion audit, tracheostomy audit, CSSD audit, BMW audit, Central waste area audit, Safe infusion practice audit



Seema
Priyanka

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Extracts from the minutes of the Hospital Infection Control Committee meeting conducted on 07-02-2023 at 2.00 pm in the Auditorium.

Points Discussed:

There was one incident of Needlestick injury (NSI). NSI injury protocol was followed for HCW. Dr. Seema reiterated to be careful while handling sharps. Dr. Priyanka emphasized appropriate segregation and discard of biomedical waste, especially sharps.

BMW issues: No New issues

Needles stick injuries: 1 incident (Nurse-during suturing)

Exposure to blood & body fluids: 0 incidents

Seema

