

An 'NABH' Accredited Hospital CIN : U85100MH1946GAT005082 60-A, Bhulabhai Desai Road,Mumbai 400 026. € : 022 - 6919 7788, 022 - 6259 7788 © : 8657112952 ⊠ : info@breachcandyhospital.org @ : www.breachcandyhospital.org

Date: 23/06/25

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 '24

Dear Sir,

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Attached herewith the BMW annual report for January –December '24 of Breach Candy hospital Trust in the prescribed Format.

Kindly acknowledge receipt of same.

Regards,



Dr. Rohit Barman

Medical Director

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 - 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)]

	Particulars		
	Particulars of the Occupier	:	
	(i) Name of the authorized person (occupier or		Breach Candy Hospital Trust
ļ	operator of facility)	_	
	(ii) Name of HCF or CBMWTF	:	
	(iii) Address for Correspondence	:	60-A, Bhulabhai Desai Road, Mumbai –26.
ŀ	(iv) Address of Facility		Same as above
$\left \right $		+-	022-62597788.
	(v)Tel. No, Fax. No	:	Fax-23672666
l	(vi) E-mail ID	:	info@breachcandyhospital.org
ŀ	(vii) URL of Website		www.breachcandyhospital.org
ŀ	(viii) GPS coordinates of HCF or CBMWTF	+	Lat 18°58'21''N
L			Long. 72°48'17''E
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private on Semi Govt. or any other)- Charitable Trust
ŀ		-	Authorisation No:
L			UAN No. MPCB-CONSENT-
	x). Status of Authorisation under the Bio-Medical	:	0000183313/CO/2312001601
ľ	Waste (Management and Handling) Rules		valid up to: 31/05/2027
L	(xi). Status of Consents under Water Act and Air Act	:	Valid up to:31/05/2027
	Type of Health Care Facility		
ſ	(i) Bedded Hospital		No. of Beds:272
h	(ii) Non-bedded hospital (Clinic or Blood Bank or	-I'	1101 01 DCu3272
	Clinical Laboratory or Research Institute or Veterinary		
	lospital		NA
Γ			Reg no 887301347 & Reg no.
L	(iii) License number and its date of expiry		888023856 valid upto 31/03/2028

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3.	Details of CBMWTF			:	NA				
<u> </u>	(i) Number healthcare facilities covered	by							
	CBMWTF								
	(ii) No of beds covered by CBMWTF				NA				
					NA				
	(iii) Installed treatment and disposal capa	iii) Installed treatment and disposal capacity of			NA	Kg	per day		
	CBMWTF:								
					NA _Kg	/day			
	by CBMWTF				Yellow				
4.	uantity of waste generated or disposed in Kg per annum on monthly average basis)				category	/	:6893 kg/1	month	
4.					Red Cat				
					5828 kg/month				
					Others:	363 kg	/month		
					Blue		936		
					Categor		kg/month		
					General				
5	Details of the Storage, treatment, transportat	Details of the Storage, treatment, transportation, processing a				ility			
	Details of the onsite storage facility		Size:	: 520	sq ft appr	ox.			
						1			
	4		Capacity : A hospital	Adeq	Adequate for handling BMW waste of the				
			Provision	of	of on-site storage : (cold storage or				
			any other	provi	51011)				
			Type of tre	eatme	ent			Quantity	
	(ii)Disposal Facilities		equipment	ent		No of		treated or	
						units	Kg/day	disposed	
		:						in kg per annum	
		•	Incinerato	rs					
			Plasma Py	rolys	sis				
			Autoclaves Microwave Hydroclave Shredder		toclaves		85 lts each	Being done	
					-				
			Needle tip	ocutt	er or				
			destroyer					Being done	
			Sharps enc		lation or				
			concrete pi						
			Deep buri						
			Chemical						
			Any other	treat	ment				
	(;;;		equipment			1			
	 (iii Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum 	:	Red Categ	gory (like plasti	c, glass	etc.)		



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<u> </u>	(iv) No of vehicles used for collection	:	one		
	transportation of biomedicalwaste	1 C S.			
	(v) Details of incineration ash and			Quantity generate	Where
	ETP sludge generated and disposed during the treatment of wastes in Kg per			d	disposed
	annum		Incineration Ash	NA	
			ETP Sludge	ETP is only Laundry Sludge is not generated	
	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of (vii) List of member HCF not handed		SMS Envoclean Pvt	Ltd	
	over bio-medical waste.		NA		
6	Do you have bio-medical waste management committee? If yes, attach		YES . Biomedical wa	ent committee is a part	
	minutes of the meetings held during the reporting period		of Hospital Infection Minutes of the meet	n Control Con	nmittee.
7	Details trainings conducted on BMW				
	(i) Number of trainings conducted on BMW Management.		65		
	(ii) number of personnel trained		1580		
	(iii) number of personnel trained at the time of induction		335		
	(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		21		
	(ii) Number of the persons affected		21		
	(iii) Remedial Action taken (Please		NON HOSO		

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	attach details if any)		Training of HCWs on BMW and sharps safety practices
	(iv) Any Fatality occurred, details.		NO
9.	Are you meeting the standards of air Pollution from the incinerator? How		We don't have an incinerator
	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 been transfer to STP – It is MBBR type 400M3 Cap STP discharge water parameters are within MPCNB limits
11	Is the disinfection method or sterilization meeting the log 4	i i	Yes, we put biological indicator s every week
	standards? How many times you have not met the standards in a year?		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 2024 to 31st December'2024.

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Name and Signature of the Head of the Institution

Date: 23/06/25 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(0), 5(i) and 15 (2)] ACCIDENT REPORTING

- 1. Date and time of accident: No major accident reported during this 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:23/06/25.....

Place: MUMBAI

Signature

HOS MUMBA 400 026

Designation

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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Extracts from the minutes of the Hospital Infection Control Committee meeting conducted on 09-01-2024 at 2.00 pm in the Auditorium.

Points Discussed:

• Dr. Priyanka inquired about the transport of biomedical waste and dirty linen from New Tower. CEO Sir suggested using the dumbwaiter exclusively for the transport of biomedical waste. It was decided together in presence of Head personnel-Mr. Dogra to designate one person 24/7 in the ground floor biomedical waste receiving area of the new tower to collect the waste. Dirty linen will be transported by laundry personnel during non-peak/non-visiting hours through the lifts in closed containers, either once or more in a day, depending on the need.

Needles stick injuries: 1 incident (Ward boy)

• Exposure to blood & body fluids: 0 incidents • Audits: HH audit ,Line care management audit ,Isolation precautions audit ,BMW audit , Safe infusion practices, Injection trolley audit, Antibiotic audit, Kidney center audit



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Extracts from the minutes of the Hospital Infection Control Committee meeting conducted on 10-09-2024 at 2.00 pm in the Auditorium.

Points Discussed:

• There were three incidents of needle stick (sharp) injury (NSI). The protocol for needle stick injuries was followed for all healthcare workers involved. Dr. Priyanka reiterated the safety measures that one has to follow to prevent sharp injury. She further added that BMW stickers are also made available for lids in clinical areas to ensure appropriate segregation of waste is being done at source. Sr. Sneha reiterated about the NSI incident report form, which should be kept in each department to ensure source details are available when the HCW visits the EMS after an NSI.

BMW: BMW Stickers are available for lids. No new issues
 Needles stick injuries: 3 incidents

• Exposure to blood & body fluids: 0 incidents • Audits: HH audit , Device maintenance audit, Line care, Laundry audit, BMW audit



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Medical Director

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Maharashtra Pollution Control Board Kalpataru Point, 2nd Floor, Sion Circle, Opp. Cine Planet, Sion (East), Mumbai - 400 022. Tel. 24010437 / 24020781. Website : www.mpcb.gov.in