

FEHJ/ADMIN/2022/29

Dated: 09.06.2022

The Member Secretary
Rajasthan State Pollution Control Board
4, Institutional Area
Jhalana Doongri, Jaipur.

Subject: Submission of Annual Report in Form IV on Bio-medical Waste Generation for the period 1st January, 2021 to 31st December, 2021.

Dear Sir,


As per above subject, please find attached Annual Report in Form IV on Bio-medical Waste Generation of Fortis Escorts Hospital, 214, JLN Marg, Malviya Nagar, Jaipur (A Unit of Escorts Heart and Super Speciality Hospital Limited) for the period 1st January, 2021 to 31st December, 2021.

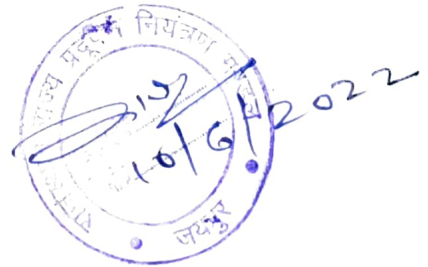
Please acknowledge the receipt of the same.

Thanking You.

Yours Faithfully,

For Escorts Heart and Super Speciality Hospital Limited


(Neerav Bansal)
Authorised Signatory



CC: The Regional Officer-Regional Office-Jaipur (South), Rajasthan State Pollution Control Board, 08/263, Housing Board, Malviya Nagar, Jaipur-302017.

Escorts Heart and Super Speciality Hospital Limited

CIN: U85110DL2003PLC120016

Registered Office: Escorts Heart Institute and Research Centre, Okhla Road, New Delhi - 110025 (India)
Tel: +91-11-2682 5000, Fax: +91-11-4162 8435

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 authorised person (occupier or operator of facility) | : | Mr. Neerav Bansal |
| | (ii) Name of HCF | : | Escorts Heart and Super Speciality Hospital Limited |
| | (iii) Address for Correspondence | : | 214, JLN Marg, Malviya Nagar, Jaipur-302017 |
| | (iv) Address of Facility | : | 214, JLN Marg, Malviya Nagar, Jaipur-302017 |
| | (v) Tel. No, Fax. No | : | 0141-2547000; 0141-2547002 |
| | (vi) E-mail ID | : | contactus.jaipur@fortishealthcare.com |
| | (vii) URL of Website | : | www.fortishealthcare.com |
| | (viii) GPS coordinates of HCF | : | NA |
| | (ix) Ownership of HCF | : | Private |
| | (x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules | : | F(BMW)/Jaipur(Jaipur)/296(1)/2010-2011/2625-2627; valid up to 29.02.2024. |
| | (xi) Status of Consents under Water Act and Air Act | : | F(BMW)/Jaipur(Jaipur)/296(1)/2010-2011/2628-2630; valid up to 29.02.2024. |

Neerav



| | | | |
|---|---|---|--------------------------|
| 2 | Type of Health Care Facility | : | |
| | (i) Bedded Hospital | : | No. of Beds: 275 |
| | (ii) Non-bedded hospital | : | |
| | (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | : | |
| (iii) License number and its date of expiry | : | F(BMW)/Jaipur(Jaipur)/296(1)/2010-2011/2628-2630; valid up to 29.02.2024. | |
| 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: 2664.12 |
| | | | Yellow Cytotoxic: 220.41 |
| | | | Red Category : 3942 |
| | | | White: 84.61 |
| | | | Blue Category : 809.78 |
| | | | General Solid waste: NA |
| 5 | Details of the Storage, treatment, transportation, processing and Disposal Facility | | |
| | (i) Details of the on-site storage facility | Size: | NA |
| | | Capacity : | NA |
| | | Provision of on-site storage: (cold storage or any other provision): NA | |

Neelam

| (ii)Details of the treatment or disposal facilities | Type of treatment equipment | No. of units | Capacity Kg/day | Quantity Treated or disposed in kg per annum |
|--|---|--------------------|-----------------|--|
| | Incinerators | | | NA |
| | Plasma Pyrolysis | | | |
| | Autoclaves | | | |
| | Microwave | | | |
| | Hydroclave | | | |
| | Shredder | | | |
| | Needle tip cutter or destroyer | | | |
| | 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.) - NA | | | |
| (iv) No of vehicles used for collection and transportation of biomedical waste | Only authorised vehicle is used for BMW. List of authorised vehicles is attached herewith. | | | |
| (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum | Incineration Ash ETP Sludge | Quantity generated | Where disposed | |
| | | NA | NA | |


Neelam

| | | |
|----|---|--|
| | (vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of | Instromedix Waste Management Private Limited |
| | (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, Minutes of the Meeting are attached herewith. |
| 7 | Details trainings conducted on BMW | |
| | (i) Number of trainings conducted on BMW Management. | 186 |
| | (ii) Number of personnel trained | 1538 |
| | (iii) Number of personnel trained at the time of induction | 332 |
| | (iv) Number of personnel not undergone any training so far | 40 |
| | (v) Whether standard manual for training is available? | Yes |
| | (vi) any other information | |
| 8 | Details of the accident occurred during the year | (NIL report in Form 1 is attached herewith) |
| | (i) Number of Accidents occurred | No |
| | (ii) Number of the persons affected | No |
| | (iii) Remedial Action taken (Please attach details if any) | No |
| | (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 met the standards? | NA |
| | Details of Continuous online emission monitoring systems installed | No such system installed |
| 10 | Liquid waste generated and treatment methods in place. How many times you have not met the standards in a | NA |

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| | | |
|----|---|-----|
| | year? | |
| 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 |
| 12 | Any other relevant information | No |

Certified that the above report is for the period from 01.01.2021 to 31.12.2021.



Neerav Bansal

Name and Signature of the Head of the Institution

Date: 09/06/2022

Place: Jaipur

FORM – I

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

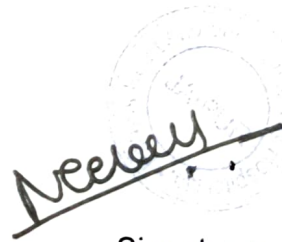
ACCIDENT REPORTING

Nil Report

1. Date and time of accident:
2. Type of Accident:
3. Sequence of events leading to accident:
4. Has the Authority been informed immediately:
5. The type of waste involved in accident:
6. Assessment 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 your facility have an Emergency Control policy? If yes give details:

Date: 09/06/2022

Place: Jaipur



Signature:

Designation: Authorized Signatory

MINUTES OF MEETING

Name of the Unit - Jaipur

Name of the Committee - Infection Control Committee

1. Date: 30 December 2021, Time 12.00 PM to 12.30 PM
2. No. of members in the committee: 27
3. No. of members attended the meeting: 20
4. Chairman, Convener and Mandatory members present: Yes
5. Details of essential members who neither attended nor sent a representative: none
6. Agenda circulated prior to meeting: Yes
7. Discussion on Action taken report on action items/recommendations from previous meeting: Yes
8. Details of action items open from previous meetings: 1
9. Details of action items open from previous two meeting: 0
10. Summary of Discussion on reports/documents of all essential Agenda items presented: As per the action points mentioned

Agenda and discussion

- Appointment of new chairperson for ICC
- Action taken report previous ICC meeting.
- HAI rates
- Hand hygiene Compliance and NSI Rate
- BMW Segregation Gap Analysis & Closures
- Status IC audits & Closures
- Environmental Surveillance Reports, Deviations & closures
- Update on Food Handler Screening Records
- BMW updates
- Engineering infection prevention measures
- Status updates surgical prophylaxis

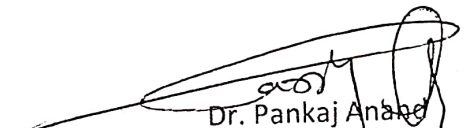
Discussion:

- ICC chairperson – Dr. Pankaj Anand has been appointed as chairperson with consensus of all ICC members.
- BMW - List of in charges has been prepared. Training regarding biomedical waste has been given to all the In charges by infection control team and trainers are giving training to all the staffs.
- CAUTI – CAUTI rate for Nov 2021 was zero. No further discussion.
- CLABSI
 - CLABSI rate for Nov 2021 was shared.
 - Requirement of portable USG machine for central line insertion was highlighted. Dr. Ashish agreed to provide dedicated USG machine for Central line insertion.
- VAP – VAP rate for Nov 2021 was zero. No further discussion.
- SSI – surgical site infection rate has been shared. 2 SSI (Deep 90 days) was there in Adult CTVS (Both are post CABG). It was shared that meeting with entire CTVS team along with infection control team was already done and training regarding pre-op bathing, intra op sugar management & post op wound dressing was already conducted.
- BMW audit - Biomedical waste audit gaps shared.
- NSI – needle stick injury rate was shared. It was highlighted that during audit it was found that staff were recapping the needle. Small size sharp containers were placed in each procedure tray.
- AMS – Surgical prophylaxis data shared.

Timeline & responsibility

| Action point | Action item | Responsibility | Closure date | Interdependency |
|---------------------------------------|---|-------------------------------------|------------------|------------------------|
| 1. Appointment of New ICC chairperson | Dr. Pankaj Anand has been appointed as chairperson | ICC committee | Immediate effect | |
| 2. CLABSI | Dedicated USG machine for Central line insertion | Dr. Ashish P Yagnik | 31/01/2022 | |
| 3. Biomedical waste | Biomedical waste training will be provided to all in staff | Infection Control team & In charges | Ongoing | |
| 4. AMS | Duration of surgical prophylaxis will be discussed with consultants | Dr. Ashish P Yagnik | 31/01/2022 | Dr. Yogesh Kumar Gupta |


Dr. Yogesh Kr Gupta
Convener


Dr. Pankaj Anand
Chairman

MINUTES OF MEETING

Name of the Unit - Jaipur

Name of the Committee - Infection Control Committee

1. Date: 30 November 2021, Time 12.30 PM to 01.00 PM
2. No. of members in the committee: 27
3. No. of members attended the meeting: 20
4. Chairman, Convener and Mandatory members present: Yes
5. Details of essential members who neither attended nor sent a representative: none
6. Agenda circulated prior to meeting: Yes
7. Discussion on Action taken report on action items/recommendations from previous meeting: Yes
8. Details of action items open from previous meetings: 2
9. Details of action items open from previous two meeting: 0
10. Summary of Discussion on reports/documents of all essential Agenda items presented: As per the action points mentioned

Agenda and discussion

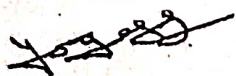
- Action taken report previous ICC meeting.
- HAI rates
- Hand hygiene Compliance and NSI Rate
- BMW Segregation Gap Analysis & Closures
- Status IC audits & Closures
- Environmental Surveillance Reports, Deviations & closures
- Update on Food Handler Screening Records
- BMW updates
- Covid-19 vaccination record
- Engineering Infection prevention measures
- Status updates surgical prophylaxis

Discussion:

- BMW - List of in charges has been prepared. Training regarding biomedical waste will be given to all the in charges by infection control team.
- CAUTI - Outside catheters will be changed at the time of admission or base line urine culture will be send.
- CLABSI
 - Issue in line maintenance has been highlight by infection control team. Continue training of all the staff will be given by infection control team and education team.
 - There is increase patient: nurse ratio has been highlighted. Medical director and CNO assure to recruit more number of nursing staff
- VAP – Meeting with radiology team regarding new VAP guideline has been done. Radiology team will report compared x ray report in ventilated patients.
- SSI – surgical site Infection rate has been shared.
- BMW audit
 - It was suggested to share the gaps found during audits with all the in charges
 - Biomedical waste training for all the in charges will be given by infection control team
- AMS – Surgical prophylaxis data shred. It was suggested to discuss with consultants regarding duration of surgical prophylaxis

Timeline & responsibility

| Action point | Action item | Responsibility | Closure date | Interdependency |
|---------------------|--|---|--------------|------------------------|
| 1. CLABSI | Education of nursing staff regarding central line maintenance | Infection control & education team | On going | |
| 2. SSI | Availability of cefuroxime (Surgical prophylaxis) on regular basis | Rajeev tutaja | On going | |
| 3. Biomedical waste | Biomedical waste training will be provided to all in charges | Infection Control team | 08/12/2021 | |
| 4. " | Annual biomedical waste training to all staff will be given by respective in charges | Dr. Ashish P Yagnik Dr. Jatinder monga Dr. Parul dutt Pradeep Sharma Shynu Koshy Bhanu Prakash | 15/12/21 | |
| 5. AMS | Duration of surgical prophylaxis will be discussed with consultants | Dr. Ashish P Yagnik | 15/12/21 | Dr. Yogesh Kumar Gupta |



Dr. Yogesh Kr Gupta
Convener

Dr Shabbar HK Joad
Chairman

MINUTES OF MEETING

Name of the Unit - Jaipur

Name of the Committee - Infection Control Committee

1. Date: 27 October 2021, Time 12.00 Noon to 12.30 PM
2. No. of members in the committee: 27
3. No. of members attended the meeting: 21
4. Chairman, Convener and Mandatory members present: Yes
5. Details of essential members who neither attended nor sent a representative: none
6. Agenda circulated prior to meeting: Yes
7. Discussion on Action taken report on action items/recommendations from previous meeting: Yes
8. Details of action items open from previous meetings: 0
9. Details of action items open from previous two meeting: 0
10. Summary of Discussion on reports/documents of all essential Agenda items presented: As per the action points mentioned

Agenda and discussion

- Action taken report previous ICC meeting.
- HAI rates
- Hand hygiene Compliance and NSI Rate
- BMW Segregation Gap Analysis & Closures
- Status IC audits & Closures
- Environmental Surveillance Reports, Deviations & closures
- Update on Food Handler Screening Records
- BMW updates
- Engineering infection prevention measures
- Status updates surgical prophylaxis

Timeline & responsibility

| Action point | Action item | Responsibility | Closure date | Interdependency |
|---------------------|--|---|--------------|-----------------|
| 1. CLABSI | Monitoring of central line insertion | Unit nursing in-charges | On going | |
| 2. VAP | Meeting with radiology team | ICO –Dr. Yogesh Kumar Gupta | 15/11/21 | |
| 3. SSI | Availability of cefuroxime. (Surgical prophylaxis) on regular basis | Rajeev tutaja | On going | |
| 4. Hand hygiene | Regular education reminders will be send to all staff | ICO –Dr. Yogesh Kumar Gupta | Ongoing | |
| 5. NSI | Detail discussed regarding NSI incident with doctor | ICO –Dr. Yogesh Kumar Gupta | 15/11/2021 | |
| 6. Biomedical waste | Educational poster to be prepared and circulated to housekeeping staff | Infection Control Nurse | 15/11/2021 | |
| 7. " | List of all in-charges (including outsource department) will be provided by HR | HR head | 31/10/21 | |
| 8. " | Biomedical waste training will be provided to all in charges | Infection control team | 15/11/21 | |
| 9. " | Annual biomedical waste training to all staff will be given by respective in charges | Dr. Ashish P Yagnik Dr. Jatinder monga Dr. Parul dutt Pradeep Sharma Shynu Koshy Bhanu Prakash | 20/11/21 | |


Dr. Yogesh Kr Gupta
Convener


Dr Shabbar HK Joad
Chairman

MINUTES OF MEETING

Name of the Unit - Jaipur

Name of the Committee - Infection Control Committee

1. Date: 24 Sep 2021, Time 12.00 Noon to 12.30 PM
2. No. of members in the committee: 30
3. No. of members attended the meeting: 19
4. Chairman, Convener and Mandatory members present: Yes
5. Details of essential members who neither attended nor sent a representative: none
6. Agenda circulated prior to meeting: Yes
7. Discussion on Action taken report on action items/recommendations from previous meeting: Yes
8. Details of action items open from previous meetings: 0
9. Details of action items open from previous two meeting: 0
10. Summary of Discussion on reports/documents of all essential Agenda items presented: As per the action points mentioned

Agenda and discussion

- Action taken report previous ICC meeting.
- HAI rates
- Hand hygiene Compliance and NSI Rate
- BMW Segregation Gap Analysis & Closures
- Status IC audits & Closures
- Environmental Surveillance-Reports, Deviations & closures
- Update on Food Handler Screening Records
- BMW updates
- Engineering infection prevention measures
- Status updates surgical prophylaxis

Timeline & responsibility

| Action point | Action Item | Responsibility | Closure date | Interdependency |
|----------------------|---|-----------------------------|--------------|------------------------|
| 1. CLABSI | Training of Transit ICU nursing staff for central line maintenance. | CNO – Jiji mol James | 25/10/2021 | |
| 2. SSI | Observation of pre-op bathing in CTVS patients | ICO –Dr. Yogesh Kumar Gupta | Ongoing | |
| 3. SSI | Discussion with CTVS team | Infection Control Nurse | 25/10/2021 | |
| 4. NSI | Register to be prepared and signed by in charge | Infection Control Nurse | 25/10/2021 | |
| 5. Biomedical waste | Gaps to be intimate to incharges on daily basis | Infection Control Nurse | 25/10/2021 | |
| 6. Covid vaccination | Staff vaccination list to be updated | MD- Shrikant Swami | 25/10/2021 | Dr. Yogesh Kumar Gupta |
| 7. Audit | Infection control audit for HR to be conducted | HR head Subrata Das | 25/10/2021 | MD- Shrikant Swami |


Dr. Yogesh Kr Gupta
Convener


Dr Shabbar HK Joad
Chairman

MINUTES OF MEETING

Name of the Unit - Jaipur

Name of the Committee - Infection Control Committee

1. Date: 26 Aug 2021, Time 3.00 PM – 3.30 PM
2. No. of members in the committee: 30
3. No. of members attended the meeting: 20
4. Chairman, Convener and Mandatory members present: Yes
5. Details of essential members who neither attended nor sent a representative: none
6. Agenda circulated prior to meeting: Yes
7. Discussion on Action taken report on action items/recommendations from previous meeting: Yes
8. Details of action items open from previous meetings: 3
9. Details of action items open from previous two meeting: 3

| Action point | Action item | Responsibility |
|-----------------|--|------------------------|
| 1. Sharp Injury | Induction for resident doctor will be schedule | DMS – Dr.Ashish |
| 2. CLABSI | Training of resident doctor for central line insertion training. | DMS – Dr.Ashish |
| 3. Audit | Infection control audit for HR to be conducted | HR head Subrata Das |

10. Summary of Discussion on reports/documents of all essential Agenda items presented: As per the action points mentioned


Agenda and discussion

- Action taken report previous ICC meeting.
- HAI rates
- Hand hygiene Compliance and NSI Rate
- BMW Segregation Gap Analysis & Closures
- Status IC audits & Closures
- Environmental Surveillance Reports Deviations & closures
- Update on Food Handler Screening Records
- BMW updates
- Engineering Infection prevention measures
- Status updates surgical prophylaxis

Timeline & responsibility

| Action point | Action Item | Responsibility | Closure date | Interdependency |
|------------------------------|---|--|--------------|------------------------|
| 1. Sharp Injury | Induction for resident doctor will be schedule | DMS – Dr. Ashish | 15/9/2021 | Dr. Yogesh Kumar Gupta |
| 2. AMS | AMS working group meeting to be organized | Dr. Yogesh Kumar Gupta | 7/8/2021 | MD- Dr. Shrikant Swami |
| 3. CLABSI | Training of resident doctor for central line insertion training. | DMS – Dr. Ashish | 15/9/2021 | Dr. Shabbar H K Joad |
| 4. CLABSI | Meeting with Dr. Pankaj Anand regarding central line maintenance issue in Transit ICU | Dr. Yogesh Kumar Gupta Dr. Shabbar H K Joad | 15/9/2021 | |
| 5. Dialysis | Regular compliance monitoring for Infection control checklist in dialysis area | Infection Control Nurse | 15/9/2021 | Dr. Yogesh Kumar Gupta |
| 6. Audit | Infection control audit for HR to be conducted | HR head Subrata Das | 15/9/2021 | |
| 7. Biomedical waste training | Annual biomedical waste training for all healthcare workers | HR head Subrata Das | 30/9/21 | Dr. Yogesh Kumar Gupta |
| 8. Infectious disease data | Verification of regular infectious disease data submission to IDSP | Dr. Yogesh Kumar Gupta | 15/9/2021 | |


Dr. Yogesh Kr Gupta
Convener


Dr Shabbar HK Joad
Chairman

MINUTES OF MEETING

Name of the Unit - Jaipur

Name of the Committee - Infection Control Committee

1. Date: 24 July 2021, Time 1.00 PM – 1.300 PM
2. No. of members in the committee: 30
3. No. of members attended the meeting: 20
4. Chairman, Convener and Mandatory members present: Yes
5. Details of essential members who neither attended nor sent a representative: none
6. Agenda circulated prior to meeting: Yes
7. Discussion on Action taken report on action items/recommendations from previous meeting: Yes
8. Details of action items open from previous meetings: 2
9. Details of action items open from previous two meetings: 0
10. Summary of Discussion on reports/documents of all essential Agenda items presented: As per the action points mentioned

Agenda and discussion

- Action taken report previous ICC meeting.
- HAI rates
- Hand hygiene Compliance and NSI Rate
- BMW Segregation Gap Analysis & Closures
- Status IC audits & Closures
- Environmental Surveillance Reports, Deviations & closures
- Update on Food Handler Screening Records
- BMW updates
- Engineering infection prevention measures
- Status updates surgical prophylaxis

| Action point | Action item | Responsibility | Closure date | Interdependency |
|---------------------|---|---------------------------------|--------------|----------------------|
| 1. Sharp Injury | Induction for resident doctor will be schedule | DMS – Dr.Ashish | 7/8/2021 | ICO – Dr.Yogesh |
| 2. AMS | A dedicated staff for AMS will be provided | MD- Dr. Shrikant Swami | 7/8/2021 | |
| 3. CLABSI | Training of resident doctor for central line insertion training. | DMS – Dr.Ashish | 7/8/2021 | Dr. Shabbar H K Joad |
| 4. | Central line insertion checklist to be modified | Dr. Shabbar H K Joad | 7/8/2021 | ICO – Dr.Yogesh |
| 5. | Training of dialysis staff regarding maintenance of HD catheter | DCNO Pradeep Sharma | 31/7/21 | |
| 6. Sharp Injury | Observation of sharp handling practices in vaccination area | Education team | 7/8/2021 | DCNO Pradeep Sharma |
| 7. Biomedical waste | Regular biomedical waste audits also be done by Mr. Pradeep & Shynu koshy | DCNO Pradeep & ACNO Shynu koshy | 7/8/2021 | |
| 8. Audit | Infection control audit for HR to be conducted | HR head Subrata Das | 7/8/2021 | |
| 9. | Laundry audit closure will be provided | HK Head Bhanu Shrivastava | 7/8/2021 | |


Dr. Yogesh Kr Gupta
Convener


Dr Shabbar HK Joad
Chairman

MINUTES OF MEETING

Name of the Unit - Jaipur

Name of the Committee - Infection Control Committee

1. Date: 25 Feb 2021, Time 12.30 PM – 1.30 PM
2. No. of members in the committee: 30
3. No. of members attended the meeting: 18
4. Chairman, Convener and Mandatory members present: Yes
5. Details of essential members who neither attended nor sent a representative: none
6. Agenda circulated prior to meeting: Yes
7. Discussion on Action taken report on action items/recommendations from previous meeting: Yes
8. Details of action items open from previous meetings: 0
9. Details of action items open from previous two meeting: 0
10. Summary of Discussion on reports/documents of all essential Agenda items presented: As per the action points mentioned

Agenda and discussion


Agenda for meeting

- Action taken report previous ICC meeting.
- HAI rates
- Hand hygiene Compliance and NSI Rate
- BMW Segregation Gap Analysis & Closures
- Status IC audits & Closures
- Environmental Surveillance Reports, Deviations & closures
- Update on Food Handler Screening Records
- BMW updates
- Engineering infection prevention measures
- Status updates surgical prophylaxis

Timeline & responsibility

| Action point | Action item | Responsibility | Closure date | Interdependency |
|----------------------------|---|-------------------------|--------------|------------------------|
| 1. CAUTI | Continue training on catheter insertion and maintenance | Infection control team | Ongoing | |
| 2. CLABSI | Training of dialysis staff regarding filling of HD catheter insertion & maintenance checklist | Infection control team | 15/3/2021 | |
| 3. VAP | Discussion with critical care team, pulmonologist & radiologist regarding updated guideline for VAP. | Dr. Yogesh kumar Gupta | 15/3/2021 | Infection control team |
| 4. Sharp Injury | Education on needle stick injury prevention | Nursing team | Ongoing | Infection control team |
| 5. Surgical site infection | Cases to be discussed with surgeon | Dr. Yogesh kumar Gupta | Ongoing | |
| 6. Hand hygiene compliance | Continuous education to all healthcare workers | Infection control nurse | Ongoing | Dr. Yogesh Kumar Gupta |
| 7. Biomedical waste | Biomedical waste weekly and monthly audit report shared. Regular training regarding biomedical waste management | Infection control nurse | Ongoing | Dr. Yogesh Kumar gupta |


Dr. Yogesh Kr Gupta
Convener


Dr Shabbir HK Joad
Chairman

MINUTES OF MEETING

Name of the Unit - Jaipur

Name of the Committee - Infection Control Committee

1. Date: 31 May 2021, Time 2.30 PM – 3.30 PM
2. No. of members In the committee: 30
3. No. of members attended the meeting:18
4. Chairman, Convener and Mandatory members present: Yes
5. Details of essential members who neither attended nor sent a representative: none
6. Agenda circulated prior to meeting: Yes
7. Discussion on Action taken report on action items/recommendations from previous meeting: Yes
8. Details of action items open from previous meetings: 0
9. Details of action items open from previous two meeting: 0
10. Summary of Discussion on reports/documents of all essential Agenda items presented: As per the action points mentioned

Agenda and discussion

- Action taken report previous ICC meeting.
- Covid 19 Updates
- HAI rates
- Hand hygiene Compliance and NSI Rate
- BMW Segregation Gap Analysis & Closures
- Status IC audits & Closures
- Environmental Surveillance Reports, Deviations & closures
- Update on Food Handler Screening Records
- BMW updates
- Engineering Infection prevention measures
- Status updates surgical prophylaxis

Timeline & responsibility

| Action point | Action Item | Responsibility | Closure date | Interdependency |
|----------------------------|---|--|--------------|------------------------|
| 1. CAUTI | Continue training on catheter Insertion and maintenance | Infection control team | Ongoing | |
| 2. CLABSI | Central line maintenance monitoring will be done by link nurse | CNO - Jijimol james | 15/6/2021 | |
| 3. VAP | Continue training on VAP bundle | Infection control team | Ongoing | |
| 4. Sharp Injury | Induction for resident doctor will be schedule | DMS – Dr.Ashish | 15/6/2021 | ICO – Dr.Yogesh |
| | Monitoring of staff practices | Respective area in charge & Supervisor | 15/6/2021 | CNO - Jijimol James |
| | Creation of NSI group | CNO - Jijimol James | Immediately | |
| 5. Surgical site infection | Cases to be discussed with surgeon | Dr. Yogesh kumar Gupta | Ongoing | |
| 6. Hand hygiene compliance | Continuous education to all healthcare workers | Infection control nurse | Ongoing | Dr. Yogesh Kumar Gupta |
| 7. Biomedical waste | Biomedical waste weekly and monthly audit report shared. Regular training regarding biomedical waste management | Infection control nurse | Ongoing | Dr. Yogesh Kumar Gupta |
| 8. AMS | A dedicated staff for AMS will be provided | MD- Dr. Shrikant Swami | 15/6/2021 | |
| 9. Covid updates | Details of staff vaccinated for Covid-19 will be provided | Dr Ashish / Triage team | 15/6/2021 | |
| 10. | Details of staff positive for Covid-19 will to be provided | CNO - Jijimol James | 15/6/2021 | |


Dr. Yogesh Kr Gupta
Convener


Dr Shabbar H. Joad
Chairman

Dear Team

we would like to inform you that following vehicle will visit your hospital for collection of Bio Medical Waste:

| Authorized Vehicle Number |
|---------------------------|
| RJ -14- GE-0250 |
| RJ -14- GE-7821 |
| RJ -14-GD-7316 |
| RJ-14-GD-2062 |
| RJ-14-GC-7155 |
| RJ-14-GF-6244 |
| RJ-14-GB-3716 |
| RJ-14-GF-3267 |
| RJ-14-GF-5331 |
| RJ-14-GB-5267 |

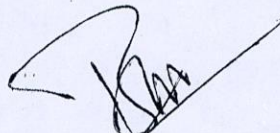
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Thanks & Regards

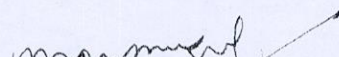
S K Choudhary

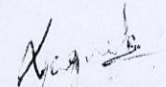
Account Department : Instromedix India Pvt Ltd

9772-123-777


HK HEAD


CSO


HEAD ADMIN


MS / DMS