



Date:- April 09, 2019

To,
Maharashtra Pollution Control Board,
Kalpataru Point, 2nd-4th Floor,
Opp. Cine Planet Cinema,
Near Sion Circle, Sion (E)
Mumbai-400022

Sub:- Submission of Annual BMW report (Form_IV) for the calendar year 2018.

Respected sir,

Our MPCB Authorisation No is BO/CAC-Cell/CCA/CAC-1801000064 and it is valid up till March 31, 2020.

Please find attached annual report for Bio Medical Waste Generated during the year 2018.

Kindly acknowledge

Enclosed:

1. Minutes of Meeting of 4 quarter for the year 2018
2. Training Details
3. List of NSI incidents
4. Monthly waste generation

Thanking you.

Regards,
Authorized signatory




26/4/16
MAHARASHTRA POLLUTION CONTROL BOARD
Kalpataru Point, 3rd Floor, Sion Circle
Opp. Cine Planet Cinema, Sion (E),
Mumbai - 400 022.
Tel: 24010437 / 24020781

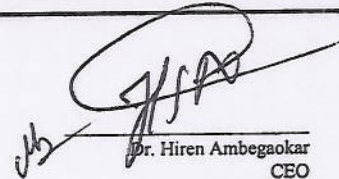
Form - IV (See rule 13) ANNUAL REPORT

[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 (CBMWTF)]

Sl. No.	Particulars				
1.	Particulars of the Occupier :				
	(i) Name of the authorised person (occupier or operator of facility)	: S. L. Raheja Hospital (A Fortis Associate)			
	(ii) Name of HCF or CBMWTF	: SMS Envoclean Pvt. Ltd.			
	(iii) Address for Correspondence	: Near Deonar Dumping Ground, Opp. Sathe Nagar, Ghatkopar- Mankhurd link Rd.			
	(iv) Address of Facility	: Raheja Rugnalaya Marg, Mahim (w), Mumbai-16			
	(v) Tel. No, Fax. No	: 022-66529999,022-24442486			
	(vi) E-mail ID	: info@rahejahospital.com			
	(vii) URL of Website	: www.rahejahospital.com & http://www.fortishealthcare.com/india/hospitals-in-maharashtra/s-l-raheja-hospital-mahim			
	(viii) GPS coordinates of HCF or CBMWTF	: CBMWTF			
	(ix) Ownership of HCF or CBMWTF	: Trust			
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	: Authorisation No.: BO/CAC-Cell/CCA/CAC-1801000064 Dated January 3, 2018 valid up to March 31, 2020			
(xi). Status of Consents under Water Act and Air Act	: Valid up to: March 31, 2020				
2	Type of Health Care Facility				
	(i) Bedded Hospital	: No. of Beds: 300			
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	: 27			
(iii) License number and its date of expiry	: 761416650 valid up-to 31st March 2019				
3	Details of CBMWTF *				
	(i) Number healthcare facilities covered by CBMWTF	:			
	(ii) No of beds covered by CBMWTF	:			
	(iii) Installed treatment and disposal capacity of CBMWTF:	: _____ Kg/day			
(iv) Quantity of biomedical waste treated or disposed by CBMWTF	: _____ Kg/day				
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow Category : 23956.75 Kg (1955.39 + 41.00 (cytotoxic)- Monthly Avg.)			
		Red Category : 30081.55 Kg, (2506.79 Monthly Avg)			
		White: 2035.95 Kg (169.66 Monthly Avg.)			
		Blue Category : 5826.25 Kg (485.52 Monthly Avg)			
		General Solid waste:---			
5	Details of the Storage, treatment, transportation, processing and Disposal Facility				
	#Interpretation – Only Point No. (vi) is to be filled by the (Hospital) Occupier (if waste is being handed over to the operator of common Bio-medical Waste treatment facility) & rest of the points are for the operator of common Bio-medical Waste treatment facility. *				
	(i) Details of the on-site storage facility	Size :			
		Capacity :			
		Provision of on-site storage : (cold storage or any other provision)			
	(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			
		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.)
	(iv) No of vehicles used for collection and transportation of biomedical waste	:
	(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
		ETP Sludge
	(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.	:
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	YES
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW/Management.	140
	(ii) number of personnel trained	1422
	(iii) number of personnel trained at the time of induction	107
	(iv) number of personnel not undergone any training so far	Nil
	(v) whether standard manual for training is available?	Yes
	(vi) any other information)	NA
8	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	Major accident: Nil NSI during the year: 29
	(ii) Number of the persons affected	Nil
	(iii) Remedial Action taken (Please attach details if any)	NA
	(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	NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Facial Coliform will be monitor w.e.f. April 2019
11	Is 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	: NA

Certified that the above report is for the period from January 2018 to December 2018


Dr. Hiren Ambegaokar
CEO
S. L. Raheja Hospital

Date: 1st April 2019.
Place: Mumbai

* Details related to CBMWTF is not available with HCF hence not updated in annual report.
Enclose:

1. Minutes of Meeting of 4 quarter of year 2018
2. training details
3. List of NSI incidents

Dr. Hiren Ambegaokar
CEO
S. L. Raheja (A Fortis Associate) Hospital

Training records of year 2018

Dept: HK

Sr.No	Name of Trainee	Designation	Name of Employer/Institute	Employer/Institute	Grade	Start Date	End Date	Duration (in months)	No. of Employees	Total Man hours	Total Fee
1	BMW	HK	Mohan thik	Internal	SLRH	05-Jan-18	05-Jan-18	0.5	7	3.5	0.875
2	BMW	HK	Sitaram more	Internal	SLRH	06-Jan-18	06-Jan-18	0.5	4	2	0.5
3	BMW	HK	Yallapa	Internal	SLRH	17-Jan-18	17-Jan-18	0.5	15	7.5	1.875
4	BMW	HK	Sitaram More	Internal	SLRH	20-Jan-18	20-Jan-18	0.5	7	3.5	0.875
5	BMW	HK	Yallapa	Internal	SLRH	24-Jan-18	24-Jan-18	0.5	9	4.5	1.125
6	BMW	HK	Sitaram More	Internal	SLRH	30-Jan-18	30-Jan-18	0.5	8	4	1
7	BMW	HK	Balram	Internal	SLRH	30-Jan-18	30-Jan-18	1	6	6	0.75
8	BMW/Grod	HK	Sitaram More / Santosh	Internal	SLRH	01-Feb-18	01-Feb-18	0.5	17	8.5	2.125
9	BMW	HK	Yallapa	Internal	SLRH	02-Feb-18	02-Feb-18	0.5	10	5	1.25
10	BMW	HK	Yallapa	Internal	SLRH	04-Feb-18	04-Feb-18	0.5	6	3	0.75
11	BMW	HK	Balram/Sitaram More	Internal	SLRH	08-Feb-18	08-Feb-18	1	9	9	1.125
12	BMW/Grod	HK	Sitaram More	Internal	SLRH	09-Feb-18	09-Feb-18	0.5	7	3.5	0.875
13	BMW/Grod	HK	Yallapa/Santosh	Internal	SLRH	12-Feb-18	12-Feb-18	0.5	11	5.5	1.375
14	BMW	HK	Sitaram More	Internal	SLRH	14-Feb-18	14-Feb-18	0.5	11	5.5	1.375
15	B.M.W	HK	Sitaram More	Internal	SLRH	17-Feb-18	17-Feb-18	0.5	13	6.5	1.625
16	B.M.W	HK	Sitaram More	Internal	SLRH	18-Feb-18	18-Feb-18	0.5	6	3	0.75
17	B.M.W	HK	Yallapa	Internal	SLRH	22-Feb-18	22-Feb-18	0.5	14	7	1.75
18	BMW	HK	Balram Kanojiya	Internal	SLRH	23-Feb-18	23-Feb-18	1	5	5	0.625
19	BMW	HK	Balram Kanojiya	Internal	SLRH	23-Feb-18	23-Feb-18	1	4	4	0.5
20	BMW	HK	Sitaram more	Internal	SLRH	27-Feb-18	27-Feb-18	0.5	10	5	1.25
21	BMW	HK	Sitaram more	Internal	SLRH	10-Mar-18	10-Mar-18	0.5	10	5	1.25
22	BMW	HK	Sitaram more	Internal	SLRH	12-Mar-18	12-Mar-18	0.5	7	3.5	0.875
23	BMW	HK	Balram/Sitaram more	Internal	SLRH	15-Mar-18	15-Mar-18	1	12	12	1.5
24	BMW	HK	Sitaram more	Internal	SLRH	17-Mar-18	17-Mar-18	0.5	7	3.5	0.875
25	BMW	HK	Yallapa	Internal	SLRH	18-Mar-18	18-Mar-18	0.5	10	5	1.25
26	BMW	HK	yallapa/Balram	Internal	SLRH	23-Mar-18	23-Mar-18	1	11	11	1.375
27	BMW	HK	Yallapa	Internal	SLRH	28-Mar-18	28-Mar-18	0.5	10	5	1.25
28	BMW	HK	Yallapa	Internal	SLRH	01-Apr-18	01-Apr-18	0.5	9	4.5	1.125
29	BMW	HK	Sitaram more	Internal	SLRH	07-Apr-18	08-Apr-18	0.5	6	3	0.75
30	BMW	HK	Yallapa/balram	Internal	SLRH	10-Apr-18	10-Apr-18	1	15	15	1.875
31	BMW	HK	Sitaram more	Internal	SLRH	13-Apr-18	13-Apr-18	0.5	5	2.5	0.625
32	BMW	HK	Sitaram more	Internal	SLRH	13-Apr-18	13-Apr-18	0.5	10	5	1.25
33	BMW	HK	Sitaram more	Internal	SLRH	18-Apr-18	18-Apr-18	0.5	6	3	0.75
34	BMW	HK	Sitaram more	Internal	SLRH	21-Apr-18	21-Apr-18	0.5	10	5	1.25
35	BMW /grod	HK	Balram/SUP/santosh	Internal	SLRH	21-Apr-18	21-Apr-18	1	8	8	1
36	BMW /grod	HK	Mahendra/Balram/Santosh	Internal	SLRH	26-Apr-18	26-Apr-18	1	5	5	0.625
37	BMW	HK	Sitaram more	Internal	SLRH	27-Apr-18	27-Apr-18	0.5	6	3	0.75
38	BMW	HK	Sitaram more	Internal	SLRH	29-Apr-18	29-Apr-18	0.5	3	1.5	0.375
39	BMW	HK	Sitaram more	Internal	SLRH	08-May-18	08-May-18	0.5	8	4	1
40	BMW	HK	Sitaram more	Internal	SLRH	17-May-18	17-May-18	0.5	11	5.5	1.375
41	BMW	HK	Sitaram more	Internal	SLRH	18-May-18	18-May-18	0.5	13	6.5	1.625
42	BMW	HK	Sitaram more	Internal	SLRH	27-May-18	27-May-18	0.5	4	2	0.5
43	BMW	HK	Sitaram more	Internal	SLRH	31-May-18	31-May-18	0.5	7	3.5	0.875
44	BMW	HK	Sitaram More	Internal	SLRH	23-Jun-18	23-Jun-18	0.5	2	1	0.25
45	BMW	HK	Sitaram More	Internal	SLRH	25-Jun-18	25-Jun-18	0.5	2	1	0.25
46	BMW	HK	Sitaram More	Internal	SLRH	26-Jun-18	26-Jun-18	0.5	13	6.5	1.625
47	BMW	HK	Sitaram more	Internal	SLRH	03-Jul-18	03-Jul-18	0.5	3	1.5	0.375
48	BMW	HK	BMW	Internal	SLRH	12-Jul-18	12-Jul-18	0.5	7	3.5	0.875
49	BMW	HK	Mahendra	Internal	SLRH	14-Jul-18	14-Jul-18	0.5	15	7.5	1.875
50	BMW	HK	sitaram/Balram	Internal	SLRH	21-Jul-18	21-Jul-18	1	9	9	1.125
51	BMW	HK	sitaram/Balram	Internal	SLRH	23-Jul-18	23-Jul-18	1	10	10	1.25
52	BMW	HK	Mahendra Ovhal	Internal	SLRH	28-Jul-18	28-Jul-18	0.5	11	5.5	1.375
53	BMW	HK	Mahendra / Balram	Internal	SLRH	31-Jul-18	31-Jul-18	1	9	9	1.125
54	BMW	HK	Mahendra	Internal	SLRH	02-Aug-18	02-Aug-18	0.5	9	4.5	1.125
55	BMW	HK	Mahendra	Internal	SLRH	02-Aug-18	02-Aug-18	0.5	10	5	1.25
56	BMW	HK	Sitaram more	Internal	SLRH	03-Aug-18	03-Aug-18	0.5	10	5	1.25
57	BMW	HK	Mahendra	Internal	SLRH	08-Aug-18	08-Aug-18	0.5	11	5.5	1.375
58	BMW	HK	Mahendra Ovhal	Internal	SLRH	10-Aug-18	10-Aug-18	0.5	10	5	1.25
59	BMW	HK	yallapa	Internal	SLRH	13-Aug-18	13-Aug-18	0.5	10	5	1.25
60	BMW	HK	Sitaram more	Internal	SLRH	18-Aug-18	18-Aug-18	0.5	9	4.5	1.125
61	BMW	HK	Sitaram more	Internal	SLRH	21-Aug-18	21-Aug-18	0.5	2	1	0.25
62	BMW	HK	Sitaram more	Internal	SLRH	21-Aug-18	21-Aug-18	0.5	7	3.5	0.875

63	BMW	HK	Sitaram more	Internal	SLRH	01-Sep-18	01-Sep-18	0.5	13	6.5	1.625
64	BMW	HK	Mahendra	Internal	SLRH	03-Sep-18	03-Sep-18	0.5	7	3.5	0.875
65	BMW	HK	Mahendra	Internal	SLRH	07-Sep-18	07-Sep-18	0.5	16	8	2
66	BMW	HK	Sitaram more	Internal	SLRH	09-Sep-18	09-Sep-18	0.5	12	6	1.5
67	BMW	HK	Sitaram more	Internal	SLRH	12-Sep-18	12-Sep-18	0.5	6	3	0.75
68	BMW	HK	Mahendra	Internal	SLRH	16-Sep-18	16-Sep-18	0.5	7	3.5	0.875
69	BMW	HK	Mahendra	Internal	SLRH	17-Sep-18	17-Sep-18	0.5	4	2	0.5
70	BMW	HK	Sitaram more	Internal	SLRH	17-Sep-18	17-Sep-18	0.5	2	1	0.25
71	BMW	HK	Sitaram more	Internal	SLRH	19-Sep-18	19-Sep-18	0.5	9	4.5	1.125
72	BMW	HK	sitaram /Balram	Internal	SLRH	22-Sep-18	22-Sep-18	1	16	16	2
73	BMW	HK	Mahendra	Internal	SLRH	22-Sep-18	22-Sep-18	0.5	10	10	1.25
74	BMW	HK	Mahendra	Internal	SLRH	24-Sep-18	24-Sep-18	0.5	8	4	1
75	BMW	HK	balram kanojiya	Internal	SLRH	26-Sep-18	26-Sep-18	0.5	7	3.5	0.875
76	BMW	HK	sitaram /sup	Internal	SLRH	28-Sep-18	28-Sep-18	0.5	6	3	0.75
77	BMW	HK	Mahendra	Internal	SLRH	30-Sep-18	30-Sep-18	0.5	9	4.5	1.125
78	BMW	HK	Sitaram more	Internal	SLRH	07-Oct-18	07-Oct-18	0.5	4	2	0.5
79	BMW	HK	Sitaram more / Balram /Amit	Internal	SLRH	09-Oct-18	09-Oct-18	0.5	9	4.5	1.125
80	BMW	HK	Sitaram more	Internal	SLRH	17-Oct-18	17-Oct-18	1	13	13	1.625
81	BMW	HK	Mahendra	Internal	SLRH	19-Oct-18	19-Oct-18	0.5	7	3.5	0.875
82	BMW	HK	Mahendra	Internal	SLRH	19-Oct-18	19-Oct-18	0.5	6	3	0.75
83	BMW	HK	Balram kanojiya	Internal	SLRH	19-Oct-18	19-Oct-18	0.5	7	3.5	0.875
84	BMW	HK	Mahendra	Internal	SLRH	22-Oct-18	22-Oct-18	0.5	7	3.5	0.875
85	BMW	HK	Mahendra	Internal	SLRH	23-Oct-18	23-Oct-18	0.5	9	4.5	1.125
86	BMW	HK	Sitaram More	Internal	SLRH	03-Nov-18	03-Nov-18	0.5	10	5	1.25
87	BMW	HK	Mohan thik	Internal	SLRH	06-Nov-18	06-Nov-18	0.5	5	2.5	0.625
88	BMW	HK	Mahendra	Internal	SLRH	07-Nov-18	07-Nov-18	0.5	7	3.5	0.875
89	BMW	HK	Mohan thik	Internal	SLRH	08-Nov-18	08-Nov-18	0.5	14	7	1.75
90	BMW	HK	Mahendra	Internal	SLRH	11-Nov-18	11-Nov-18	0.5	5	2.5	0.625
91	BMW	HK	Sitaram more	Internal	SLRH	12-Nov-18	12-Nov-18	0.5	10	5	1.25
92	BMW	HK	Mahendra	Internal	SLRH	12-Nov-18	12-Nov-18	0.5	4	2	0.5
93	BMW	HK	Mahendra	Internal	SLRH	13-Nov-18	13-Nov-18	0.5	4	2	0.5
94	BMW	HK	Mahendra	Internal	SLRH	16-Nov-18	16-Nov-18	0.5	5	2.5	0.625
95	BMW	HK	Balram k.	Internal	SLRH	16-Nov-18	16-Nov-18	1	4	4	0.5
96	BMW	HK	Sitaram More	Internal	SLRH	18-Nov-18	18-Nov-18	0.5	18	9	2.25
97	BMW	HK	Mahendra	Internal	SLRH	19-Nov-18	19-Nov-18	0.5	7	3.5	0.875
98	BMW	HK	Mahendra	Internal	SLRH	20-Nov-18	20-Nov-18	0.5	7	3.5	0.875
99	BMW	HK	Balram k. / Amit	Internal	SLRH	21-Nov-18	21-Nov-18	1	8	8	1
100	BMW	HK	Balram k.	Internal	SLRH	21-Nov-18	21-Nov-18	1	15	15	1.875
101	BMW	HK	Mahendra	Internal	SLRH	23-Nov-18	23-Nov-18	0.5	10	5	1.25
102	BMW	HK	Sitaram more	Internal	SLRH	01-Dec-18	01-Dec-18	0.5	9	4.5	1.125
103	BMW	HK	Amit Palav	Internal	SLRH	10-Dec-18	10-Dec-18	0.5	8	4	1
104	BMW	HK	Mahendra	Internal	SLRH	11-Dec-18	11-Dec-18	0.5	7	3.5	0.875
105	BMW	HK	Mahendra	Internal	SLRH	18-Dec-18	18-Dec-18	0.5	5	2.5	0.625
106	BMW	HK	Mahendra	Internal	SLRH	21-Dec-18	21-Dec-18	0.5	9	4.5	1.125
107	BMW	HK	Mahendra	Internal	SLRH	23-Dec-18	23-Dec-18	0.5	6	3	0.75
108	BMW	HK	Mahendra / Balram	Internal	SLRH	24-Dec-18	24-Dec-18	1	10	10	1.25
109	BMW	HK	Mahendra / Balram	Internal	SLRH	25-Dec-18	25-Dec-18	1	8	8	1
110	BMW	HK	sitaram more	Internal	SLRH	29-Dec-18	29-Dec-18	0.5	5	2.5	0.625
111	BMW	HK	Sitaram more	Internal	SLRH	31-Dec-18	31-Dec-18	0.5	8	4	1

Department : LAB

Sr. No.	DATE	NAME OF TRAINER	Count of NAME
1	13/12/2018	GEETANJALI	7
2	15/10/2018	Dr DHRUV	9
3	16/2/2018	YAMINI	14
4	18/6/2018	Dr DHRUV	8
5	20/8/2018	Dr DHRUV	4
			42

Department : Nrsing

Sr.No	Date (From)	Name of Trainer / Faculty	Count of Emp Name
Jan	26/01/2018	Mini Blaze Thomas	10
	28/01/2018	Mini Blaza Thomas	10
Mar	26/3/2018	Kerolin M	9
April	04/04/2018	Geetanjali	36
	20/04/2018	Sr.Kalpana	10
May	11/05/2018	Prema	17
	26/05/2018	Sr. Geetanjali	39
June	6/12/218	Prema	17
	04/06/2018	sr.Geetanjali	34
	06/06/2018	Geetanjali	70
	25/06/2018	Prema/Geetan	28
	26/06/2018	Prema	21
Jul	03/07/2018	Geetanjali	26
	17/07/2018	Geetanjali	9
Aug	03/08/2018	Sr. Eliza	10
	14/08/2018	Sr. Eliza	9
Oct	27/10/2018	Sr Suchita	18
	10/09/2018	Sr Suchita	16
Nov	11/01/2018	Sr.Basanti	16
	12/11/2018	Sr.Kerolin	8
	23/11/2018	Sr.Amita	5
Dec	12/01/2018	Suchita	8
	12/11/2018	Sr. Basanti	14
Sept	30/9/18	Suchita	7
			24
			447

Total Participant	1422
Total training	140

NSI incident - year 2018

MONTH	DESIGNATION	SOURCE	TOTAL
January	nurses	insulin pen	3
	nurses	insulinpen	
	nurses	needle	
February	housekeeping	veinflow	1
March	housekeeping	needle	5
	nurse	neoflow cannula	
	nurse	recappig needle	
	doctor	suturing needle	
	doctor	veinflow	
April	nil	0	0
May	infection control assistant	needle during bmw collection	2
	housekeeping	needle	
June	housekeeping	scalp vein	4
	housekeeping	needle during emptying the bag	
	housekeeping	needle	
	doctor	needle puncturing blister	
July	nil	0	0
August	infection control assistant	insulin syringe during bmw collection	1
September	nurse	recappig insulin syringe	3
	nurse	needle	
	doctor	suturing needle	
October	nurse	recappig insulin pen	6
	housekeeping	needle	
	housekeeping	needle	
	doctor	surgical blade	
	doctor	suturing needle	
	doctor	suturing needle	
November	doctor	needle	2
	nurse	needle	
December	lab technician	recappig needle	2
	nurse	haemorrhectomy stapler	

FORMAT FOR RECORDING MINUTES OF MEETING

NAME OF UNIT – **S.L.RAHEJA (FORTIS ASSOCIATE) HOSPITAL**

NAME OF COMMITTEE – **HOSPITAL INFECTION CONTROL COMMITTEE**

1. Date & Time: **30/3/2018 Auditorium 12:00 PM to 2 PM**
2. Total no. of Members in the committee: (Mandatory-7)
3. Number of members attended (attach attendance sheet):
4. Chairman, convener & Mandatory Members present (Yes/No): **YES**
5. Details of essential members who neither attended nor sent a representative: **Nil**
6. Details of essential members who neither attended but sent a representative: **Yes. Dr Shanthi and Dr Neha were not present. However Dr Bipin sir (CEO) and shweta from medical services attended meeting. Sukhmani did not attend however head admin Mr. Ajay and Mr. Vikash attended meeting.**
7. Agenda circulated prior to meeting (Yes/No): **YES**
8. Discussion on Action Taken Report on action items / recommendations from previous Meeting (Yes/No): **Yes**
9. Details of action items open from previous meeting – **No**
10. Details of action item open from previous two meeting: **no**
11. Time lines & responsibility

Action Item	Responsibility	Expected Closure Date	Inter dependencies
<p>Regarding discussion on biomedical waste disposal guidelines 2016 implementation.</p> <p>BMW limit is exceeding and new license do not show increased limits as per application. PCB authorities are informed every quarterly for same. Dr Dhruv highlighted likely changes in biomedical waste amendments in</p>	<p>Sukhmani, Kiran Tanawade for update and communication to PCB.</p> <p>Organization will be waiting till gazette update on 2016 rules amendments of 2018 before doing anything further for biomedical waste as till date hospital has participated and complied on 2016 rules.</p>	On going	Head admin, MS

2018 as per the discussion held at Delhi in biomedical waste conference organized at safdarjung hospital.			
AMS discussion was done and dr sanjith highlighted updating antibiotic policy for 2018.	ICO, Dr sanjith and Dr Nikhil	15 days	MS, AMS
Review on Vaccination policy and protocol as per vaccination SOP for doctors and email alerts to be sent to all.	HR along with infection control team	1 month	MS, AMS, HR head
Hand hygiene audit data was questioned as too high compliance was shown. The team needs implementation of shadow auditors for hand hygiene and repeat compliance needs to be monitored.	ICNs, ICAs and designate shadow auditors	1 month	MS, AMS
OT complex discussion was done & Reuse policy revision needs to be done in view of high cost of few of items which are provided as kits e.g. guide wire. Some of the difficulties faced were highlighted by consultants.	ICO, Dr. Sanjith, ICNs and user departments	1 month	MS, AMS
OT premises staff will be allowed only after changing clothes.	HICC member	Ongoing and continuous	MS, AMS
Clinical pharmacist highlighted that surgical prophylaxis reduced compliance was because of new department of	Clinical pharmacist to speak to consultants and ensure that continuous compliance to surgical prophylaxis	Ongoing and continuous	MS, AMS

neurosurgery.	is there.		
New members of HICC were introduced Clinical pharmacist and New ICN.	All HICC members	Nil	Nil
VAP protocol and surveillance audit in ICU to be revised as per Probable, possible, definitive and IVAC as per CDC guidelines.	Dr sanjith, Dr Dhruv and ICNs	15 days	MS, AMS
AMS contact person for MSD will be sister geetanjali .	Sister geetanjali	Nil	ICO
Global PPS program to be tabled to IEC and approval to be sent to central committee	ICO, ICN	1 month	MS, AMS
Dr Dhruv appreciated members of AMS team as there was appreciation from NABH and AMS implementation was presented as poster in first NHQC held at Delhi. Dr Dhruv, Dr Shanthi and Dr Ananya participated for same.	All HICC members	Nil	Nil
Dr Dhruv highlighted importance of training records, SOP revision for NABH surveillance audit	Infection control team to update SOP in a month's time and training records of all staff to updated by HR	1 month	MS, AMS, HR head, Admin Head.
Gazette notification for Tuberculosis was discussed and all cases of TB will be notified by SLRH to DTO.	ICO and ICNs will be contact person. Report will be emailed on weekly basis.	Ongoing and continuous	MS and AMS

12. Signature of Chairman and Convener:





FORMAT FOR RECORDING MINUTES OF MEETING

NAME OF UNIT – S.L.RAHEJA (FORTIS ASSOCIATE) HOSPITAL

NAME OF COMMITTEE – HOSPITAL INFECTION CONTROL COMMITTEE

1. Date & Time: 29/6/2018 Auditorium 12:30 PM to 2:00 PM
2. Total no. of Members in the committee: (Mandatory-7)
3. Number of members attended (attach attendance sheet):
4. Chairman, convener & Mandatory Members present (Yes/No): YES
5. Details of essential members who neither attended nor sent a representative: Nil
6. Details of essential members who neither attended but sent a representative: No
7. Agenda circulated prior to meeting (Yes/No): YES
8. Discussion on Action Taken Report on action items / recommendations from previous Meeting (Yes/No): Yes
9. Details of action items open from previous meeting –No
10. Details of action item open from previous two meeting: no
11. Time lines & responsibility

Action Item	Responsibility	Expected Closure Date	Inter dependencies
ICO discussed about world hand hygiene day celebration & workshop activities conducted in May 2018	Nil	Nil	Nil
High alert vigilance for OT is closed.	OT staff, Consultants, engineering and maintenance	Nil	ICO, MS, AMS.
Issues related to OT temperature and humidity monitoring in OT discussed at length. NABH recommendation for OT temperature and humidity to be followed by Engineering department	Engineering and maintenance to follow same	Nil	Head admin.
Budget for HIC and trainings for staff in view of NABH audit were discussed.	ICO, CON, quality and all respective departments	Nil	MS, AMS.

blood bags to be discarded after autoclaving as per compliance to BMW SOP	All staff	Nil	MS, AMS, CON
A discussion on feasibility of needleless system introduction to prevent NSI was discussed.	All members	Nil	MS, AMS.
All staff to ensure that no sharps are discarded in biomedical waste bags as one incident related to same was highlighted.	All staff members	Ongoing and continuous	MS, AMS, Head admin, CON, ICO, ICN.
Central line study to be initiated after obtaining ethical clearance	ICO, ICN, Dr. Sanjith	Nil	MS, AMS, CON.
AMS mobile launch program is pending due to no representative from MSD and same is conveyed to fortis office. Updated Policy is under review.	ICO, ICN	Nil	MS, AMS.
Green OT certification was done for OT and all members congratulated team	All team members	Nil	Nil

12. Signature of Chairman and Convener:

Dhruv *[Signature]*

29/6/2018 Band Run.

(h.s.c June 2018)



Hospital Infection Control Committee

MEMBERS (last updated in March 2018)

HICC members		Designation	Name	Designation	Signature
S. No.					
1	Chairman	Senior Clinician	Dr Nilkhi Kulkarni	Chairperson	
2	Convener	Infection Control Officer	Dr Dhruv Mamtara	Microbiologist	
3	Member	MS	Dr Shanthi	MS	
4	Member	Head Admin	Ajay Brahma	Head Admin	
5	Member	CON	Sunita Dsouza	CON	
6	Member	Infection Control Nurse	G. Celanah / Prens	ICN	
7	Member	Head ER	Dr Amit Nabar	Head ER	
8	Member	Head Anaesthesiology	Dr Mandhar	Consultant Anaesthesiology	
9	Member	Head, Critical Care	Dr Sanjith Saseedharan	Head Critical Care	
10	Member	Head Quality	Dr Ananya	Head Quality	
11	Member	Biomedical Engineer	Hitesh & team	BME	
12	Member	Head Engineering	Vikash Kumar	Engg.	
13	Member	Head Housekeeping & support services	Ms. Sukhmani	Head support services	
14	Member	HODs / Senior Clinicians of Clinical Specialities including CLG Leads & AMS Champion	Dr Sunil Vaze	Consultant, Gen. Surgery	
15	Member	Senior Clinicians of Clinical Specialities	Dr Alka Kumar	Consultant, Gynaecology	
16	Member	Senior Clinicians of Clinical Specialities	Dr Lalit Panchal	Consultant, Orthopedics	
17	Member	Senior Clinicians of Clinical Specialities	Dr Asmita Mahajan	Consultant, Pediatrics	
18	Member	Senior Clinicians of Clinical Specialities	Dr P Jagannath	Consultant, Surgical Oncology	
19	Member	Senior Clinicians of Clinical Specialities	Dr Paritosh Baghel	Consultant, Internal medicine	
20	Member	CEO	Dr Brjpn devede		
21	Member	Med. Co-ord.	Raspari S.		

Hospital Infection Control Committee

MEMBERS (last updated in March 2018)

		HICC members			
S. No.	Member	Designation	Name	Designation	Signature
22	Member		Shweta Pandey	Dep. Mgr	
23	Member		Dr. Jyoti Ann	Clinical Pharmacist	
24	Member				
25	Member				
26	Member				
27	Member				
28	Member				
29	Member				
30	Member				
31	Member				
32	Member				
33	Member				
34	Member				
35	Member				
36	Member				
37	Member				
38	Member				
39	Member				
40	Member				
41	Member				
42	Member				

FORMAT FOR RECORDING MINUTES OF MEETING

NAME OF UNIT – S.L.RAHEJA (FORTIS ASSOCIATE) HOSPITAL

NAME OF COMMITTEE – HOSPITAL INFECTION CONTROL COMMITTEE

1. Date & Time: 22/8/2018 Auditorium 12:00 PM to 1:30 PM
2. Total no. of Members in the committee: (Mandatory-7)
3. Number of members attended (attach attendance sheet):
4. Chairman, convener & Mandatory Members present (Yes/No): YES
5. Details of essential members who neither attended nor sent a representative: No
6. Details of essential members who neither attended but sent a representative: Yes. Head admin sent Sukhmani and vikash kumar.
7. Agenda circulated prior to meeting (Yes/No): YES
8. Discussion on Action Taken Report on action items / recommendations from previous Meeting (Yes/No): Yes
9. Details of action items open from previous meeting – No
10. Details of action item open from previous two meeting: no
11. Time lines & responsibility

Action Item	Responsibility	Expected Closure Date	Inter dependencies
Detailed agenda and MOM of previous Meeting were discussed.	Nil	Nil	Nil
Discussion was done about 4 SSI in clean cases of Orthopedic by ICO and all members. Following are points which were discussed for Surgical safety.	Nil	Nil	Nil
1. Engineering to strictly implement temperature and humidity control in OT and calibration work by vendor to be finished at earliest.	Engineering	1 week	Admin head
2. ICNs to take daily rounds to each OT and highlight compliance to OT protocols.	ICNs,	1 month	ICO

3. Discharge summary of OT patient to be communicated to consultants by email/message.	RMOs, Registrars, Consultants	1 month to implement and ongoing followed by that	MS, AMS
4. OT discipline to be maintained by all members of OT	ALL OT STAFF	Continuous and ongoing	MS, AMS, Head admin, ICO.
5. OT 4 and 5 to be used for Joint replacement surgeries	OT staff, admission, OT 'booking, consultants, Nursing staff.	1 month	MS, AMS, head admin.
6. Cleaning time in between two surgeries will be 30 minutes	OT staff, Housekeeping	Ongoing and continuous	Head admin, MS. AMS.
7. Hand hygiene to be followed by all staff.	OT staff	Ongoing and continuous	MS, AMS, ICO.
8. Scrub suit for OT to be changed after transfer of patient to ICU/ward.	OT staff	Ongoing and continuous	MS, AMS.
9. OT in-charge sister to inform respective authorities in view of non compliance to OT discipline	OT in charge, ICNs	Ongoing and continuous	MS, AMS
10. Housekeeping cleaning to be supervised and ICAs to be supervised by infection control.	ICNs, ICO	1 month	MS, AMS.
11. Class V indicator from CSSD to be stapled behind SSCL as patient record	OT team	Ongoing and continuous	MS, AMS
12. Prefer morning time for clean surgeries	OT staff, OT booking.	Ongoing and continuous	MS, AMS
13. Sugar monitoring and monitoring normo thermia should be documented in OT records	OT staff, Anesthetists	Ongoing and continuous	MS, AMS.

14. Condition of wound should be written in discharge summary & discharge summary should be given in typed format.	Consultants, RMOs	Ongoing and continuous	MS, AMS.
15. Engineering team to ensure that fluctuations in temperature do not occur while surgery is undergoing and temperature and humidity at time of surgery to be documented by OT team to ensure same.	Engineering and maintenance, OT staff	Ongoing and continuous	MS, AMS, Head admin.
16. Traffic in OT area to be controlled and frequent door opening should be avoided by staff members, operating team and anesthetists.	All OT staff	Ongoing and continuous	AMS, MS, Head admin.
17. Chairman highlighted need for revising surgical prophylaxis and highlighted introduction of MRSA screening in pre operative period.	ICO, ICN to check feasibility along with Chairman and Chief of critical care.	1 month	MS, AMS.

12. Signature of Chairman and Convener:




Attendance Sheet

Name Of Session: HICC Meeting

Date: 22/8/18

Facilitator: Dr Dhruv Mantra Sharma

Venue and Location: Board Room

Sr No	Emp Code	Name	Designation	Department	Attendee
1	309	Purna	ICN	Nsg	
2	1871	Geetanjali .A.	ICN	Nsg	
3	1898	Dr. Asmita Mahajan	consultant Neonatology	Hicu, PICU	
4	3472	Sunita. Dsouza.	CNO	NURSING	
5		D. chandheni Mahol.	HUD Neurology	Neurology	
6					
7		Lalit Kaulal	Ortho	Ortho	
8		Manoj Kumar	Anesth	OT	
9	3590	Dr. Ananya Joshi	USH	Pharmacy	
10	3778	Dr. Anup Chatterpadhyay	AMS	Medical Services	
11		Dr NS Kulkarni			
12	0906	Roopali S.	Med. coord.	M.S.	
	0277	Sunita Rego	DICU	Nsg	
	3555	Hiten B.	Biomedical		
	3167	Vikash Kumar	CE	Engineer	
	3206	Dr. Shantini R	Head-Medical Services	Medical Services	
	0125	Sr. Pratibha Shinde	S/I	OT	
	0257	Sr. S/M Anjali Bait	Sr. S/M	OT	
	1730	Sukhmani	Manager sup.	Admin Dept	
	3022	Dr Dhruv Mantra	ICU	Lab	

FORMAT FOR RECORDING MINUTES OF MEETING

NAME OF UNIT – S.L.RAHEJA (FORTIS ASSOCIATE) HOSPITAL

NAME OF COMMITTEE – HOSPITAL INFECTION CONTROL COMMITTEE

1. Date & Time: 21/11/2018 Auditorium 12:00 PM to 1:20 PM
2. Total no. of Members in the committee: (Mandatory-7)
3. Number of members attended (attach attendance sheet):
4. Chairman, convener & Mandatory Members present (Yes/No): YES
5. Details of essential members who neither attended nor sent a representative: No
6. Details of essential members who neither attended but sent a representative: No
7. Agenda circulated prior to meeting (Yes/No): YES
8. Discussion on Action Taken Report on action items / recommendations from previous Meeting (Yes/No): Yes
9. Details of action items open from previous meeting – No
10. Details of action item open from previous two meeting: no
11. Time lines & responsibility

Action Item	Responsibility	Expected Closure Date	Inter dependencies
Detailed agenda and MOM of previous Meeting were discussed.	Nil	Nil	Nil
Discussion was done about OT temperature fluctuation and humidity maintenance.	Engineering and maintenance	1 month	Head admin
New Members of HICC are as follows and were welcomed. 1. Head engineering 2. Sister eliza 3. Pediatric cardiac intensivist Dr. Sachin Deshpande	Nil	Nil	Nil
ICO and NICU incharge and intensive care expert highlighted and emphasized on cleaning aspect to housekeeping supervisors and admin staff.	Housekeeping staff, supervisors	Ongoing and continuous	Head admin, MS

ICAs to supervise and improvise in cleaning equipments in NICU	ICAs, ICNs	Ongoing and continuous	ICO, MS, CON
Dr. Lalit panchal told about SSI follow up which for one patient who is lost for follow up since few weeks.	Dr. Aruna Dangle and Physiotherapy team to call patient and inform about her condition	1 week	MS, AMS
Oral care to be carried out in every shift in ICU	ICU staff, ICNs	Ongoing and continuous	MS, AMS
NSIs were highlighted by ICO and training session for doctors and staff needs to be conducted.	ICO, ICNs and Head quality	1 month	MS, AMS, CON
Practice of recapping should be discontinued for insulin syringes	All staff	Ongoing and continuous	MS, AMS, ICO
Discussion was about ICU entry with shoes on was discussed at length. There is no special requirement as per committee decision and patient education needs to be given. Some display of poster outside ICU was highlighted by team where if found suitable will be implemented.	All staff	Ongoing and continuous	MS, AMS, CON
Nurse educator was introduced to all members and ICO highlighted need of training for BMW, surveillance and other Infection control topics for staff including NSIs.	Nursing educator	Ongoing and continuous	MS, AMS and CON
Biomedical waste audits to be done strictly in view of NSIs from red bags so also ICO highlighted use of PPE suitable for housekeeping outsourced staff who are involved in handling biomedical waste	All staff to adhere to guidelines and SOP for biomedical waste	Ongoing and continuous	MS, AMS and CON

in hospital.			
Further discussion about OT issues was discussed with consultants and they highlighted following issues. 1. Temperature fluctuations 2. Humidity 3. OT slippers	All OT staff and engineering and maintenance to adhere to SOP	Ongoing and continuous	MS, AMS, CON
OT Consultant gave positive feedback for improvements in OT and all team members appreciated same.	Nil	Nil	Nil
ICO raised concerns over HAIs as per CESC data but on further enquiry the patient condition and other factors which are non modifiable was discussed at length.	Nil	Nil	Nil
Housekeeping staff needs training for High risk areas of hospital	Supervisor, Sukhmani, balram	1 month	Head admin
MRSA screening feasibility for other areas of hospital was discussed and priority list needs to be prepared.	ICO and ICNs	1 month	MS, AMS
AMS policy mobile app launch is pending. Committee decided to launch in January 2019 as there is only one month time for 2018.	ICO and AMS team	By jan 2019 end.	AMS, MS.

12. Signature of Chairman and Convener:


M. S. U.

Attendance Sheet

Name Of Session:

HICC Meeting

Date:

21/11/18 at 12pm.

Facilitator:

Dr. Shiv. (ICU)

Venue and Location:

Auditorium.

Sr No	Emp Code	Name	Designation	Department	Attended
1	2754	Eliza S B	OT	Nsg	<input checked="" type="checkbox"/>
2	1871	Geetanjali B	ICU	Nsg	<input checked="" type="checkbox"/>
3	—	Dr. SACHIN DESHPANDE	Panel coord ICU	PCICU	<input checked="" type="checkbox"/>
4	3206	Dr. Shantini Balhakishan	Head-MI	Medical Services	<input checked="" type="checkbox"/>
5	1898	Dr Asmita Mahajan	Consultant NICU & Peds	NICU / PICU	<input checked="" type="checkbox"/>
6	162C	Balram K.	Asst. Manager	HR	<input checked="" type="checkbox"/>
7	3833	Dr. Nousheen Sufi	Clinical Pharm	Medical Service	<input checked="" type="checkbox"/>
8	0906	Roopali S.	Med. Coord.	M.S.	<input checked="" type="checkbox"/>
9		Dr. Lalit Pandey	Consultant	ortho	<input checked="" type="checkbox"/>
10	3143	Shweta Pandey	Dep. Mgr.	Med. Serv.	<input checked="" type="checkbox"/>
11	1730	Sukhmani	Admin Sup	Admin Dep	<input checked="" type="checkbox"/>
12		Dr. Pratik Bapat	Consultant	Medicine	<input checked="" type="checkbox"/>
13	1779	Dr. Amit Nalwa	Consultant	Emergency	<input checked="" type="checkbox"/>
14	3864	Rohit Salgal	Head Engg.	Engineering	<input checked="" type="checkbox"/>
15	0583	sandeep chadga	Asst. Mgr.	Admin	<input checked="" type="checkbox"/>
16	0123	Pratibha Shinde	Dr. Incharge	OT	<input checked="" type="checkbox"/>
17		Sunita D'Souza	CNO	Nursing	<input checked="" type="checkbox"/>
18		Mr. N S Kulkarni	Chairman		<input checked="" type="checkbox"/>
19	2022	Dr. Dhruv Manta	Coordinator	ICU	<input checked="" type="checkbox"/>
20	3448	Dr. Ananya C.	Asst. Med. Sect.	Med Services	<input checked="" type="checkbox"/>
21	3559	Dr. Arun Dangle	D.H	med. serv	<input checked="" type="checkbox"/>
	3590	Dr. Ananya Jais	Quality		<input checked="" type="checkbox"/>

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