INSTITUTE OF HUMAN BEHAVIOUR & ALLIED SCIENCES



Maspital based autonomous academic Institute, under Government of National Capital Ferritory of Delhi, dealing with

"Brain - Mind Problems & their Solutions"

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Dr. Deepak Kumar
M. D., D.N.B.(Psychiatry)
Associate Professor, Department of Psychiatry &
Dy. Med. Superintendent

F.No.35/BMW/IHBAS/2021/6 2

Date: 8/10/21

To.

The CMO (BMW-MGMT) DHS, F – 17, Swasthya Sewa Nideshalaya Bhawan Karkardooma Delhi 32

Subject: <u>Submission of Monthly report for the month of September 2021 regarding Bio</u> Medical Waste Management in our Institute.

Sir/ Madam,

With reference to your letter, herewith we are enclosing the Monthly Report for the month of September 2021 regarding Bio Medical Waste Management in our Institute.

(Dr. Deepak Kumar)

Copy to:-

- 1. OIC Computer with request to upload on website
- 2. OIC (BMW/HIC)
- 3. Assistant office of the Director

Form - IV (See rule 13) ANNUAL REPORT/ MONTHLY REPORT

SI. No	Particulars		2			
1	Particulars of the Occupier-					
	(i) Name of the authorised person	 :				
	(occupier or operator of		DR. N.G. DESAL CDIRECTOR)			
	facility)		The first position of			
	(ii) Name of HCF or CBMWTF		I.H.B.A.S,			
	(iii) Address for Correspondence	1	S. H.B. A.C., DELSHAD - GARDEN, DECHI -9			
9	(iv) Address of Facility	1	I.H.B.A.S., DILSHAD-GARDEN, DELHI-S			
	(v)Tel. No, Fax. No	1:	FAY NO. 22599227			
	(vi) E-mail ID	1: .	director office @ lhbas, orgo www.w.ihbas.delhigovt.hicim			
	(vii) URL of Website	1:	buble by ibbas, delbloove blake			
	(viii) GPS coordinates of HCF or CBMWTF	1:				
	(ix) Ownership of HCF or CBMWTF	.:	(State Government or Private or Semi Govt. or any other)			
	(x). Status of Authorisation under the Bio-	1:	Authorisation No.: AVTH 11995950			
	Medical Waste		l			
	(Management and Handling) Rules		valid up to			
	(xi). Status of Consents under Water Act	:	01-01-			
	and Air Act: Valid up to		9/06/2025			
	Type of Health Care Facility	7	No. of Beds23.6			
	(i) Bedded Hospital	1:	No. of Beds2.3.6			
	(ii) Non-bedded hospital		a a			
	(Clinic or Blood Bank or Clinical Laboratory		*			
	or Research					
	Institute or Veterinary Hospital or any		2 0			
	other)	-				
	(III) License number and its date of expiry					
	Details of CBMVVTF	<u> </u>				
	(i) Number healthcare facilities covered by CBMWTF	<u> </u>				
	(ii) No of beds covered by CBMWTF	1:.	Kg per day			
	(iii) Installed treatment and disposal	1:	Ng per day			
	capacity of		2			
	CBMWTF	-	Kg/day			
	(iv) Quantity of biomedical waste treated or	1	ixg/day			
	disposed by		, A			
	CBMWTF		Yellow Category:			
	Quantity of waste generated or disposed in	1	270118 Kg2,			
	Ka per annum		0			
	(on monthly average basis)	1				
		-	Red Category: 974,33kg			
		11	White: 8,416 kg/			
			Blue Category: 199 kg2.			
			Corneral Solid waste: 4580 Kg)			
	Details of the Storage, treatment, transportation, processing and Disposal Facility Size: 70,697mfs					
	Details of the Storage, treatment, transporta-	T P	Size: 70,64 mis			
	(i) Details of the on-site storage facility					
			Provision of on-site storage: (cold storage or any other			
		1				
			Capa Quantity fleatifier			
	(ii) disposal facilities	1	Type of treatment of city disposed in kg pe			
	and the second of	1	Units Kg/ annum			
	#S	1	Day			
9						
	2 10 (19) 1 10 (19)	1	Incinerators			

	4		Plasma Pyrolysis
1	***		Autoclaves
- 1			Microwave
1			Hydroclave
			Shredder
			M. H. H. H.
- 1			Needle tip cutter or — 25
-			Destroyer:
	10 ± 10 ± 10 ± 10 ± 10 ± 10 ± 10 ± 10 ±		Sharps encapsulation
			or concrete plt:
	a.		Deep burlal pits: - 02
9			Chemical disinfection:
	3.937 at		Any other treatment
			equipment:
-	(iii) Quantity of recyclable wastes sold to	-	Red Category (like plastic, glass etc.)
	authorized recyclers after treatment in kg		7,050 05059-1, (1112-1117)
	per annum	8	1 2 2 1 A
	(iv) No of vehicles used for collection and		BY SMS WATER GRACE PUT. LTD.
-	transportation of biomedical waste		Quantity Where
	(v) Details of incineration ash and ETP		Generated disposed
	sludge generated and disposed during the		The state of the s
	treatment of wastes in Kg per annum		Incineration Ash SENT To
		1	Ash SENT 10
	1		SMS WATER GRACE PUT. LTD
	(vi) Name of the Common Bio-Medical	1	
	Waste Treatment Facility Operator		OMS WATER GRACE PUT. LTD
	through which wastes are disposed of		
	(vii) List of member HCF not handed over	.:	
	bio-medical waste		
3	Do you have bio-medical waste		
	management committee? If yes, attach		4ES
	minutes of the meetings held during the		163
no.	reporting period		
7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW		06
	Management.		123
	(ii) number of personnel trained	-	
	(iii) number of personnel trained at the time	1	
	of induction " "	-	19-2
	(iv) number of personnel not undergone		4.
-	any training so far (v) whether standard manual for training is		Name of the Control o
			2
	available? (vi) any other information		
7	Details of the accident occurred during the	-	
8		1	
	year (I) Number of Accidents occurred		NLC
	(1) Number of Accidents occurred	-	
	(ii) Number of the persons affected		
	(iii) Remedial Action taken (Please attach		
-	details if any)		No
	(iv) Any Fatality occurred, details.	-	
1	Are you meeting the standards of air		
	Pollution from the incinerator? How many		N.A.
	times in last year could not met the		
	standards?	-	and the same of th
	Details of Continuous online emission		
	monitoring systems installed	-	CHEMICAL TREATMENT DONE BY NEUTRALIZE
		1	Cherry I were the state of the
10	Liquid waste generated and treatment	1	A THE LINE CHAPTER DEPLAY CONN
10	methods in place. How many times you		C SODIUM HYPOCHLORIDE OF DRACKS COIN
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? Is the disinfection method or sterilization		CHEMICAL TREATMENT DONE BY NEUTRALIA C SODIUM HYPOCHLORIDE OR DRAINS CONN TO E-TH. YES ALL STANDARDS MET

	times you have not met the standards in a year?	1	the bod with the
12	Any other relevant information	1:	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from	MONTH of	SEPTEMBER 2021

Date: Place Mary Cont

Name and Signature Head of the Institution