

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

| Sl. No. | Particulars | | |
|---|--|--|---|
| 1 | Particulars of the Occupier | : | |
| | (i) Name of the authorized person (occupier or operator of facility) | : | Prof. (Dr) Nalin Mehta |
| | (ii) Name of HCF or CBMWTF | : | NEIGRIHMS |
| | (iii) Address for Correspondence | : | P/O Maudiangdiang, Shillong, 18 |
| | (iv) Address of Facility | : | -do- |
| | (v) Tel. No, Fax. No | : | 0364 - 2538013 |
| | (vi) E-mail ID | : | director-neigrhms@gov.in |
| | (vii) URL of Website | : | |
| | (viii) GPS coordinates of HCF or CBMWTF | : | |
| | (ix) Ownership of HCF or CBMWTF | : | (State Government or Private or Semi Govt. or any other) Govt. of India |
| | (x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules | : | Authorisation No. : MPCB/BMWTF - 411/2020/2021-2022/20 |
| (xi) Status of Consents under Water Act and Air Act | : | Valid up to: 31 st March 2024 | |
| 2 | Type of Health Care Facility | : | Secondary Care Institute |
| | (i) Bedded Hospital | : | No. of Beds: 594 Beds |
| | (ii) Non-bedded hospital (Clinical or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | : | N/A |
| | (iii) License number and its date of expiry | : | N/A |
| 3 | Details of CBMWTF | : | N/A |
| | (i) Number of health care facilities : covered by CBMWTF | : | N/A |
| | (ii) No. of Beds covered by CBMWTF | : | - |
| | (iii) Installed treatment and disposal capacity of CBMWTF; | : | _____ Kg / day |
| | (iv) Quantity of bio medical 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: | 42,599.66kg |
| | | Red Category: | 66,912.67kg |
| | | White: | 1,837.6kg |
| | | Blue Category: | 6,994.8kg |
| | | General Solid Waste: | 2,57,015.14kg |
| | | | |

| | | | | | |
|--|---|--|----------------|-----------------|--|
| 5 | Details of the Storage, Treatment, Transportation, Processing and Disposal Facility | | | | |
| (i) Details of the on-site storage facility | Size: | | 13X 26 ft | | |
| | Capacity: | | Adequate | | |
| | Provision of on-site storage : Normal protected (Cold storage or any other provision) Storage | | | | |
| | (ii) Disposal facilities | Type of treatment equipment | No of Units | Capacity Kg/day | Quantity Treated or disposed in Kg per annum |
| | | Incinerators | — | — | — |
| | | Plasma Pyrolysis | — | — | — |
| | | Autoclaves | 2 | 7kg | 155.7kg |
| | | Microwave | 1 | 60kg | 22980kg |
| | | Hydroclave | — | — | — |
| | | Shredder | 1 | 50kg | 66912.66kg |
| | | Needle tip cutter or destroyer | 57 | — | 1837.6kg |
| | | Sharps Encapsulation or concrete pit | | | |
| | | Deep burial pits | — | — | — |
| Chemical disinfection: | | 5 units | 80ltr | 50,750.63 | |
| 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.) 14,501 kg | | | | |
| (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 | 136.57 | | | |
| (vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of | Shillong Municipal Board. | | | | |
| (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 | Details of the accident occurred during the year | | | |
| | (i) Number of trainings conducted on BMW Management | 52 | | | |
| | (ii) Number of personnel trained | 1193 | | | |

| | | | |
|----|---|--|--|
| | (iii) Number of personnel trained at the time of induction | | — |
| | (iv) Number of personnel not undergone any training so far | | — |
| | (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 | | 42 nos |
| | (ii) Number of persons affected | | 42 personnel |
| | (iii) Remedial Action taken (Please attach details if any) | | Post - exposure prophylaxis given and Counselling done. |
| | (iv) Any Fatality occurred, details | | Nil- |
| 9 | Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards? | | Incinerator under repair |
| | Details of Continuous online emission monitoring systems installed | | — |
| 10 | Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? | | Yes, Nil |
| 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 Biological Indicator test for microwave disinfection device was done on 11.5.2022, 18.6.2022, 27.7.2022, 19.11.2022 and 20.12.2022 and the result found to be satisfactory |
| 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 2022 to 31st December 2022

Name and Signature of the Head of the Institution

प्रोफेसर (डॉ.) नलिन मेहता
Prof. (Dr.) Nalin Mehta
 निदेशक / Director
 नीग्रिम्स, शिलांग-18
 NEIGRIHMS, Shillong-18

Date:
Place:

11th May 2023
 Shillong

The following is the detail of bio-medical waste generate by the hospitals during COVID-19:

| Months | Yellow Category(Kg) | Red Category (Kg) | CBB Category (Kg) | PPC Category (Kg) |
|----------------|---------------------|-------------------|-------------------|-------------------|
| January 2022 | 635.3 | 423.3 | 0 | 0.5 |
| February 2022 | 810 | 389.5 | 0 | 0 |
| March 2022 | 692.9 | 390.7 | 12.1 | 1.4 |
| April 2022 | 290.6 | 186.6 | 0 | 0.4 |
| May 2022 | 274.8 | 215.3 | 0 | 0 |
| June 2022 | 85.4 | 90.9 | 0 | 0 |
| July 2022 | 42.36 | 34.7 | 7.9 | 0.9 |
| August 2022 | 142.7 | 116.6 | 5 | 0 |
| September 2022 | 111.7 | 68.2 | 0 | 0 |
| October 2022 | -Nil- | | | |
| November 2022 | -Nil- | | | |
| December 2022 | -Nil- | | | |
| Total | 3085.76 | 1915.8 | 25 | 3.2 |



Sau
[Signature]
13/10/21
mspc

No: MPCB/BMW-411/2020/2021-2022/20

Dtd. Shillong, the 13th Sept, 2021

**RENEWAL OF THE AUTHORISATION UNDER THE BIO-MEDICAL WASTE
MANAGEMENT RULES, 2016**

Authorisation under Rule 10 of the Bio-Medical Waste Management Rules, 2016, is hereby granted North Eastern Indira Gandhi Regional Institute of Health and Medical Science (NEIGRIHMS), SHILLONG with a capacity of 554 (Five Hundred and Fifty Four) beds for generating, collecting, receiving, storing, transporting, treatment or processing or conversion, recycling, disposing or destruction, use, offering for sale, transfer and/or handling bio-medical waste in any manner, and which expires on 31st March, 2021 is hereby renewed for period of 3 (three) years, i.e., the Authorization shall be valid up to 31st March, 2024.

This Authorisation shall be produced for inspection at the request of the officer authorised by the Prescribed Authority, i.e. Meghalaya State Pollution Control Board and is subjected to the conditions stated below and to such other conditions as may be specified in the Rules, for the time being, in force under the Environment (Protection) Act, 1986.

TERMS AND CONDITIONS OF AUTHORISATION

1. The Authorised person/institution shall comply with the provision of the Environment (Protection) Act, 1986 and the relevant Rules made there under.
2. The Authorised person/institution shall not rent, lend, sell, transfer or otherwise transport the bio-medical wastes without obtaining the prior permission of the Prescribed Authority, i.e. Meghalaya State Pollution Control Board.
3. Any unauthorised change in the mode of handling, treatment or disposal as mentioned in the application by the Authorised person / institution shall constitute a breach of this Authorisation.
4. It is the duty of the authorised person to take prior permission of the prescribed authority to close down the facility and such other terms and conditions may be stipulated by the prescribed authority.
5. Bio-medical waste shall be segregated into containers/bags at the point of generation in accordance with Schedule-I. The containers/bags shall be labelled according to Schedule-IV Part-A.
6. Containers transported from the premises where bio-medical waste is generated to the waste treatment facility shall, apart from the label prescribed in Schedule-IV Part-A, also carry information prescribed in Schedule-IV Part-B.
7. The bio-medical waste shall be transported in covered vehicles which shall be labelled according to Schedule-IV Part-A.
8. No untreated bio-medical waste shall be kept / stored beyond a period of 48 hours.
9. Electric needle-destroyers shall have to be provided at all points of generation, preferably at every Nurses' Duty Room. Needles are to be destroyed immediately after use. Plastic syringe bodies shall be stored in a chemical disinfectant, in puncture proof containers, at the point of generation till their collection and transport for final treatment.

Sanitation
officer
(D/DA)

[Handwritten initials]

5/10/2021

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5/10/21

[Handwritten signatures and initials]
EPA
BOCA
EPC



Meghalaya State Pollution Control Board
Forests & Environment Department, Government of Meghalaya
'ARDEN' Lumpyngngad, Shillong-793014
Website: <http://megspcb.gov.in>




- All other incinerable bio-medical waste shall be disposed off by incineration at the Common Bio-medical Waste Incinerator installed by the Shillong Municipal Board at Mawiong.
11. Bio-medical waste shall be treated and disposed off in accordance with Schedule I and in compliance with the Standards prescribed in Schedule II.
 12. Chemically disinfected waste sharps shall be disposed of in a specially constructed sharps pit within the hospital premises.
 13. A waste autoclave shall have to be provided to disinfect all contaminated solid and soiled bio-medical waste, which cannot be incinerated, including the plastic syringe bodies.
 14. Liquid and chemical waste shall be neutralized and disinfected before discharge into public drains.
 15. Protective clothing like gloves, masks, overalls and rubber boots shall be provided to staff handling bio-medical waste.
 16. The Authorised person / institution shall submit an Annual Report in prescribed Form-IV on or before 30th June every year for the period from January to December of the preceding year, and shall report any accident in Form-I immediately.
 17. The Authorised person / institution shall apply for renewal of the Authorisation in prescribed Form-II if the facility is upgraded to bedded health care facility.
 18. Appropriate Effluent Treatment Plant should be installed to ensure the effluent is within the prescribed standards as per Scheduled II.

PARAMETERS

pH
Suspended solids
Oil and grease
BOD
COD
Bio-assay test

PERMISSIBLE LIMITS

6.5 - 9.0
100 mg/l
10 mg/l
30 mg/l
250 mg/l
90% survival of fish after 96 hours in
100% effluent.


MEMBER SECRETARY
Meghalaya State Pollution Control Board
Shillong

Copy to:-

1. The Director of Health Services (MI), Meghalaya, Shillong for information.
2. The Chief Executive Officer, Shillong Municipal Board, Shillong for information.
3. The Assistant Accounts Officer, I/C NEIGRIHMS, Director's Block, Mawdiangdiang, Shillong-793018, East Khasi Hills District for information and necessary action.