

13<sup>th</sup>, March, 2025The O.S.D (O&E Cell)  
West Bengal Pollution Control Board  
Camac Street Circle Office  
Paribesh Bhavan  
10A, Block -I, a sector -III  
Saltlake City  
Kolkata -700106


Dear Sir/Madam

Subject: Submission of Form-IV

Please find enclosed the "Annual Report" of Bio-Medical Waste generated and disposed of from Fortis Hospital & Kidney Institute at 111A, Rash Behari Avenue; Kolkata-700029, Kolkata for the year of 2024 as per the format specified by your Office.

Thanking You

For Fortis Hospitals Ltd, Kolkata

  
Baishpayan Mukherjee  
Facility Director

*Note: There was no occurrence of any type of incidents (minor/major) at Hospital during handling /transportation of BMW in the year 2024.*

**Form - IV**  
(See rule 13)  
**ANNUAL REPORT**

[To be submitted to the prescribed authority on or before 30<sup>th</sup> 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 BAISHPAYAN MUKHERJEE
	(ii) Name of HCF or CBMWTF	:	FORTIS HOSPITAL & KIDNEY INSTITUTE
	(iii) Address for Correspondence	:	FORTIS HOSPITAL & KIDNEY INSTITUTE 111A, RASH BEHARI AVENUE, KOLKATA- 700029, INDIA
	(iv) Address of Facility	:	111A, RASH BEHARI AVENUE, KOLKATA- 700029, INDIA
	(v) Tel. No, Fax. No	:	91 33 6627 6800 Fax.No : +91- 33-2463-4802
	(vi) E-mail ID	:	fhki@fortishealthcare.com
	(vii) URL of Website	:	<a href="http://www.fortishealthcare.com/india/hospitals-in-west-bengal/fortis-hospital-kidney-institute-kolkata/bmw">http://www.fortishealthcare.com/india/hospitals-in-west-bengal/fortis-hospital-kidney-institute-kolkata/bmw</a>
	(viii) GPS coordinates of HCF or CBMWTF	:	Latitude: 22.518463807088526, Longitude: 88.35614508201321
	(ix) Ownership of HCF or CBMWTF	:	Corporate
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: 144-SEE-CAMAC-WBPCB-BM-220-2015 valid up to 31.07.2027
(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31.07.2027	
2.	Type of Health Care Facility	:	Private Hospital
	(i) Bedded Hospital	:	No. of Beds:.....75
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	NA
	(iii) License number and its date of expiry	:	CE License No: <b>34245875</b> Validity - <b>21-06-2027</b>
3.	Details of CBMWTF	:	NA
	(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)	:	4313(Average-359.42 kg Per month) Yellow Category Red Category : 9158 (Average-763.17 Per month) White:599(49.92kg Per month) Blue Category : 841(Average - 70.08kg) Covid waste-16 kg General Solid waste:47674(Average 3973kg )																																								
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 NA)																																								
	(ii) Details of the treatment or disposal facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyerSharps encapsulation or concrete pit Deep burial pits:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	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 destroyerSharps encapsulation or concrete pit Deep burial pits:				Chemical disinfection:				Any other treatment equipment:			
Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum																																								
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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	:	NA																																								
	(v) Details of incineration ash and ETP sludge generated and disposed		<table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Quantity generated	Where disposed																																						
Quantity generated	Where disposed																																										

	during the treatment of wastes in Kg per annum	IncineratioAsh ETP Sludge
	(vi) Name of the Common Bio-Medical Waste Treatment Facility .Operator through which wastes are disposed of	Medicare Environmental Management (P) Ltd HMC Dumping site Belgachia F-Road Howrah-107
	(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 (Attached )
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	15(Sample copy Attached
	(ii) number of personnel trained	50
	(iii) number of personnel trained at the time of induction	8(Sample copy Attached )
	(iv) number of personnel not undergone any training so far	NIL
	(v) whether standard manual for training is available?	YES
	(vi) any other information)	N0
8	Details of the accident occurred during the year	NIL
	(i) Number of Accidents occurred	NIL
	(ii) Number of the persons affected	NA
	(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?	YES NOT A SINGLE TIME
11	Is the disinfection method or sterilization meeting the log 4	Yes, As per Standard

	standards? How many times you have not met the standards in a year?		
12	Any other relevant information	:	NIL

Certified that the above report is for the period from 1<sup>ST</sup> JAN2024 - 31<sup>ST</sup> Dec2024

*Baishpayan Mukherjee*  
Name and Signature of the Head of the Institution

Date: 13/03/2025

Place: Kolkata

NAME- MONISH DAS.

DATE OF JOINING – 02-02-2024

## INDUCTION TRAINING SCHEDULE

SL NO	SUBJECT	TRAINING DATE	ATTENDANT SIGNATURE
1	Induction about hospital facility & service	02-02-2024	Monish Das
2	Basic cleaning protocol & knowledge of chemicals & disinfectant chemical in use	02-02-2024	Monish Das
3	About PPE, Biomedical Waste segregation, Bio hazard sticker.	02-02-2024	Monish Das
4	Needle stick injury, Spillage management & Hand hygiene	03-02-2024	Monish Das
5	Grooming standards, basic hygiene, soft skills on behavioural and ethical standards	03-02-2024	Monish Das
6	How to handle infected & normal linen? Process and protocol for handling vulnerable patients	04-02-2024	Monish Das
7	Firefighting training	04-02-2024	Monish Das
8	Our hospital emergency codes. Code Red, Blue, Orange, Purple, Pink & Grey with contact numbers	04-02-2024	Monish Das

Monish Das

Employee Signature

Pampa Das  
Signature of HK In charge



NAME- SANCHARITA DAS.

DATE OF JOINING – 11/11/2024

## INDUCTION TRAINING SCHEDULE

SL NO	SUBJECT	TRAINING DATE	ATTENDANT SIGNATURE
1	Induction about hospital facility & service	11-11-2024	Sancharita Das
2	Basic cleaning protocol & knowledge of chemicals & disinfectant chemical in use	11-11-2024	Sancharita Das
3	About PPE, Biomedical Waste segregation, Bio hazard sticker.	11-11-2024	Sancharita Das
4	Needle stick injury, Spillage management & Hand hygiene	12-11-2024	Sancharita Das
5	Grooming standards, basic hygiene, soft skills on behavioural and ethical standards	12-11-2024	Sancharita Das
6	How to handle infected & normal linen? Process and protocol for handling vulnerable patients	12-11-2024	Sancharita Das
7	Firefighting training	13-11-2024	Sancharita Das
8	Our hospital emergency codes. Code Red, Blue, Orange, Purple, Pink & Grey with contact numbers	13-11-2024	Sancharita Das

Employee Signature

Sancharita Das

Signature of HK In charge



NAME- BISWAJIT NAIYA.

DATE OF JOINING – 11/11/2024

### INDUCTION TRAINING SCHEDULE

SL NO	SUBJECT	TRAINING DATE	ATTENDANT SIGNATURE
1	Induction about hospital facility & service	11-11-2024	Biswajit Naiya
2	Basic cleaning protocol & knowledge of chemicals & disinfectant chemical in use	11-11-2024.	Biswajit Naiya
3	About PPE, Biomedical Waste segregation, Bio hazard sticker.	11-11-2024.	Biswajit Naiya
4	Needle stick injury, Spillage management & Hand hygiene	12-11-2024.	Biswajit Naiya
5	Grooming standards, basic hygiene, soft skills on behavioural and ethical standards	12-11-2024.	Biswajit Naiya
6	How to handle infected & normal linen? Process and protocol for handling vulnerable patients	12-11-2024.	Biswajit Naiya
7	Firefighting training	13-11-2024.	Biswajit Naiya
8	Our hospital emergency codes. Code Red, Blue, Orange, Purple, Pink & Grey with contact numbers	13-11-2024.	Biswajit Naiya

Employee Signature

Biswajit Naiya

Pampa Dm  
Signature of HK In charge



NAME- PARAMITA MONDAL.

DATE OF JOINING – 23/12/2024.

### INDUCTION TRAINING SCHEDULE

SL NO	SUBJECT	TRAINING DATE	ATTENDANT SIGNATURE
1	Induction about hospital facility & service	23-12-2024	Paramita mondal
2	Basic cleaning protocol & knowledge of chemicals & disinfectant chemical in use	23-12-2024	Paramita mondal
3	About PPE, Biomedical Waste segregation, Bio hazard sticker.	23-12-2024	Paramita mondal
4	Needle stick injury, Spillage management & Hand hygiene	24-12-2024	Paramita mondal
5	Grooming standards, basic hygiene, soft skills on behavioural and ethical standards	24-12-2024	Paramita mondal
6	How to handle infected & normal linen? Process and protocol for handling vulnerable patients	24-12-2024	Paramita mondal
7	Firefighting training	25-12-2024	Paramita mondal
8	Our hospital emergency codes. Code Red, Blue, Orange, Purple, Pink & Grey with contact numbers	25-12-2024.	Paramita mondal

Paramita mondal  
Employee Signature

Pampa Das  
Signature of HR In charge



# Fortis Hospital & Kidney Institute

111A, Rash Behari Avenue,  
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Tel. : +91 33 6627 6800, Fax : +91 33 2463 4802  
E-mail : fhki@fortishealthcare.com, Web : www.fortishealthcare.com



## Training

Department : Housekeeping

Subject : Bio medical waste segregation and handling.

Training conducted by : Pampa Das, Haridas Nath, Ninceleshana Bisha.

Date : 14.03.2024.

Sl. No.	NAME OF THE STAFF	SIGANTURE
1.	Sarabanti Saha.	Shrabanti Saha
2.	Mina Haldan.	Mina Haldan
3.	Preetam Banerjee.	Preetam Banerjee
4.	Bappa Goswami.	Bappa Goswami
5.	Pinki Das.	Pinki Das
6.	Monish Das.	Monish Das.
7.	Sunait Haldan.	Sunait Haldan
8.	Tapas Mondal.	Tapas Mondal
9.	Jhuma Mondal.	Jhuma Mondal
10.	Pampa Mondal.	Pampa Mondal
11.	Manju Das.	Manju Das.
12.	Amalendu Santui.	Amalendu Santui
13.	Lakshmi Mondal.	Lakshmi Mondal.
14.	Dina Haldan.	Dina Haldan
15.	Sima Dutta.	Sima Dutta
16.	Suma Mahanta.	Suma Mahanta
17.	Manjula Patra.	Manjula Patra
18.	Dilip Sandan.	Dilip Sandan
19.	Kalpana Sandan.	Kalpana Sandan
20.	Shambu Nath Chandra.	Shambu Nath Chandra



Pampa Das  
Signature of HK in charge

H. Nath  
14-03-2024  
NSB  
14/3/24

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## Training

Department : Housekeeping

Subject : Bio medical waste segregation and handling.

Training conducted by : Pampa Das, Haridas Nandan, Nireekshana Bisha.

Date : 02.09.2024.

Sl. No.	NAME OF THE STAFF	SIGANTURE
1.	Subrata Dasg.	Subrata Dasg.
2.	Monish Das	Monish Das.
3.	Bappa Goswami.	Bappa Goswami
4.	Puspa Adak.	PADAK
5.	Tumpa Sandan.	Tumpa Sandan
6.	Manojan Haldan.	Kanchan Halder
7.	Sumit Shinge sv	Sumit
8.	Bijob Sandan.	B. Sandan
9.	Preetam Barick	Preetam Barick
10.	Lakshmi Mondal.	Lakshmi Mondal.
11.	Aman An. Routh.	Aman An. Routh.
12.	Subrata Sandan.	Subrata Sandan
13.	Shruti Mondal.	Shruti Mondal
14.	Harmohan Manishi.	H. M. Kanyeri
15.	Pampa Mondal.	Pampa Mondal
16.	Hiranmay Mondal.	Hiranmay Mondal.
17.	Badal Das.	BADAL DAS
18.	Ratishamal Sandan.	Ratishamal Sandan
19.	Sumadip Haldan.	Sumadip Halder
20.	Aflab Alam.	AFLABALAM
21.	Rudradab Ghosh. sv	Rudradab Ghosh



Signature of HK in charge

H. Nandan  
02-09-2024

Nireekshana  
21/9/24

# Fortis Hospital & Kidney Institute

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## Training

Department : Housekeeping

Subject : Bio medical waste segregation and handling.

Training conducted by : Pampa Das, Manidas Nandan, Nincekhan Das.

Date : 04-09-2024.

Sl. No.	NAME OF THE STAFF	SIGANTURE
1.	Joseph Paul.	
2.	Uma Nandan.	
3.	Manju Das.	Manju Das
4.	Tumpa Sandan.	Tumpa Sandan
5.	Monish Das.	Monish Das
6.	Suma Mahato.	
7.	Haromohan Manchand.	H. M. Kansury
8.	Rajkumar Manmahan.	Rajkumar Karmakar
9.	Bappa Goswami.	Bappa Goswami
10.	Tapas Mondal.	Tapas Mondal
11.	Aman K. Routh.	Aman K. Routh
12.	Pracetam Bandyop.	Pracetam Bandyop
13.	Kanchan Nandan.	Kanchan Nandan
14.	Hiranmoy Mondal.	Hiranmoy Mondal
15.	Shambhu Nath Khanra.	Shambhu Nath Khanra
16.	Rakhi Ghosh.	Rakhi Ghosh
17.	Rafiqulamat Sandan.	Rafiqulamat Sandan
18.	Buddhadab Ghosh.	Buddhadab Ghosh
19.	Sumit Shenge.	
20.	Soyandip Das.	Soyandip Das



Signature of HK in charge

Manidas Nandan  
04/09/2024

# Fortis Hospital & Kidney Institute

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## Training

Department : Housekeeping

Subject : Bio Medical Waste Segregation and handling .  
Training conducted by : Pampa Das, Haridas Dasgupta, Nireekshana Ghosh.

Date : 04.09.2024.

Sl. No.	NAME OF THE STAFF	SIGANTURE
1.	Rajkumar Manmatan.	Rajkumar Manmatan
2.	Biplab Sanyal.	Biplab Sanyal
3.	Badal Das.	BADAL DAS
4.	Jyotsna Ghosh.	Jyotsna Ghosh
5.	Subrata Sanyal.	Subrata Sanyal
6.	Biplab Roy.	B. R
7.	Prishita Das.	Prishita Das
8.	Mamoni Sanyal.	Mamoni Sanyal
9.	Pinki Das.	Pinki Das
10.	Hiranmoy Mondal.	Hiranmoy Mondal.
11.	Mahanta Halder.	Mahanta Halder
12.	Susanta Das.	Susanta Das
13.	Manju Das.	Manju Das
14.	Tumpa Sanyal.	Tumpa Sanyal
15.	Deepti Das.	DEEPTI DAS
16.	Khokan Sanyal.	Khokan Sanyal
17.	Mina Halder.	Mina Halder
18.	Manchao Halder.	Manchao Halder
19.	Prosperit Halder.	Prosperit Halder
20.	Pratim Barick	Pratim Barick
21.	Aftab Alam.	AFTABALAM

Pampa Das  
Signature of HK in charge

H. Dasgupta  
24.09.2024

Nireekshana Ghosh  
24/9/24



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## Training

Department : Housekeeping

Subject : Bio medical waste segregation and handling.

Training conducted by : Pampa Das, Hamidas Nandan, Anireekshana Ghosh.

Date : 19-09-2024.

Sl. No.	NAME OF THE STAFF	SIGNATURE
1.	Subrata Sandan.	Subrata Sandan
2.	Bappa Goswami.	Bappa Goswami
3.	Rajkumar Manmalyan.	Rajkumar Karmakar
4.	Pritham Barick	Pritham Barick
5.	Dina Haldan.	S. Das
6.	Subrata Das	S. Das
7.	Sima Dutta.	Sima Dutta
8.	Manash Hazra.	Manash Hazra
9.	Prishtha Bag.	Prishtha Bag
10.	Ria Chakraborty.	Ria Chakraborty
11.	Susanta Das.	Susanta Das
12.	Monju Das.	Monju Das
13.	Mamoni Sanpui.	Mamoni Sanpui
14.	Mohanta Haldan.	Mohanta Haldan
15.	Harmoni Manish.	H. M. Kansari
16.	Shrabonti Saha.	S. Saha
17.	Somir Das.	Somir Das
18.	Buddhadab Ghosh.	Buddhadab Ghosh
19.		
20.		

Pampa Das

Signature of HK in charge



M. Das  
19/09/24

M. Das  
19/09/2024

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## Training

Department : Housekeeping

Subject : Bio Medical waste segregation and handling.

Training conducted by : Pampa Das, Manidas Nandan, Nivedyashana Elisha.

Date : 28-09-2024.

Sl. No.	NAME OF THE STAFF	SIGANTURE
1.	Jyoshna Ghosh.	Jyoshna Ghosh
2.	Shrabanti Saha.	Shrabanti Saha
3.	Pinki Das.	Pinki Das
4.	Ramesh Paul	Ramesh Paul
5.	Prasanta Haldan.	Prasanta Haldan
6.	Lakshmi Mondal.	Lakshmi Mondal
7.	Kartick Patra.	Kartick Patra
8.	Jhuma Mondal.	Jhuma Mondal
9.	Dilip Sarda.	Dilip Sarda
10.	Sunil Haldan.	Sunil Haldan
11.	Suma Mahato.	Suma Mahato
12.	Tapas Mondal.	Tapas Mondal
13.	Bhadra Das.	Bhadra Das
14.	Subrata Sarda.	Subrata Sarda
15.	Bappa Goswami.	Bappa Goswami
16.	Pampa Mondal.	Pampa Mondal
17.	Hiranmay Mondal.	Hiranmay Mondal
18.	Monish Das.	Monish Das
19.	Tumpa Sarda.	Tumpa Sarda
20.	Shyamli Das. s/v	Shyamli Das
21.	Samir Das s/v.	Samir Das

Pampa Das  
Signature of HK in charge

Manidas Nandan  
28/09/2024



MINUTES OF HOSPITAL INFECTION CONTROL COMMITTEE

NAME OF UNIT: FHKI Hospital, Kolkata-29

1. Date & Time: 18.04.2024 4.00 pm
2. Total no. of Members in the committee: 16
3. Number of members attended: 13
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative: No
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes.
7. Action Taken Report (ATR) of previous meeting :Yes.

S. No.	Actionable Item from previous meeting	Date when the actionable was first decided	Responsibility	Timeline	Remarks on closure with date when closed	Remarks on escalation to next higher committee (if the point was open for previous two meetings)
1	Expiratory cassettes are being ETOed currently. Added options – using a filter at the expiratory tubing.	20.03.2024	ICU in-charge ICN Purchase team	30.06.2024	Filters at the expiratory circuit may reduce soiling of the expiratory cassettes. Available products may	--



					be checked for usability and cost to decide upon one for purchase.	
--	--	--	--	--	--	--

Summary of discussion on Reports / documents of all essential Agenda items presented.

S. No.	Agenda Item	Updates / Points	Actionable	Responsibility	Timeline
1	MOS - HAI Concerns / Scores	MOS overall compliance: 99%	PPE compliance during invasive procedures – to be ensured.  Urinary bags to be emptied when more than 2/3 <sup>rd</sup> full and bag lids to be kept closed all the time.  Ensure 2x CHG baths for pts planned for transplant.	Nursing  Infection control team  Housekeeping	Immediately and ongoing compliance required
2	CESSC – HAI Score / trend / Analysis / Concerns	VAP- 0 SSI- 0 CLABSI- 0 CAUTI: 0 HAI rate: 0	Continue training and awareness raising sessions with all staffs.  Be careful about infection surveillance activity to not miss any possible HAI cases.	ICN ICO	ongoing compliance required
3	BMW License / Vendor Agreement validity / regulatory reports status	All updated	--	Head-Admin & HK.	To be updated when next due.



4	Needle Stick Injury data / concerns	Sharp injury-1 / BBF -0	Continue follow up of affected staff for a period of 6 months as prescribed in SOP. Continue training and awareness raising sessions to cut down on preventable incidences.  Try raising awareness regarding self-reporting of blood/body fluid exposures if happening.	ICN Nursing in-charges CON	Continuous compliance required
5	Infection Control & BMW Trainings update	Improper disposal of biomedical waste in some areas.	Regular training to be continued; emphasis on training on biomedical waste management during induction training. Spot teaching during Audit. Show the areas with repeated mistakes and their progress.	HK team Team-Education, ICN.	20.05.2024 And Continuous training and monitoring
6	Surveillance reports	No remarkable growths anywhere this month.	ICN to follow frequency of surveillance activities as per respective SOPs to be compliant and cost effective.	ICN CON Quality	With immediate effect
7	Vaccination status update	Updated (4 staffs jabbed) – 100%	--	HR & ICN.	Ongoing process
8	AMS status & concerns	Issues with duration of pre-surgical prophylaxis.  Antibiogram & DDD 2023 presented and explained.  RAJF filling was at 100%, but mostly filled by Dr Mustafa/Ramandeep.	The AMS team will work on raising awareness about AMS policies and ensure higher number of deescalations in culture-negative group.  Encourage urology team to fill RAJF actively.	AMS WG AMS Nurse ICO MS	31.05.2024



9	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters.	OT surveillance plan changed.  Biological Indicator (BI) policy changed	OT surveillance to be done as per SOP.  HEPA filter DOP tests to be performed biannually.  CSSD to immediately start following new BI policy for autoclaves.	OT team  ICN  CSSD Team	30.04.2024, ideally with immediate effect
10	Construction / Repair planned	--	--	--	--

A. Other Agenda Items

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline

Signature of Convener



Signature of Chairman




## MINUTES OF HOSPITAL INFECTION CONTROL COMMITTEE

NAME OF UNIT: FHKI Hospital, Kolkata-29

1. Date & Time: 22.08.2024 from 4-5:30 pm
2. Total no. of Members in the committee: 16
3. Number of members attended: 16
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative: No
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes.
7. Action Taken Report (ATR) of previous meeting :Yes.

S. No.	Actionable Item from previous meeting	Date when the actionable was first decided	Responsibility	Timeline	Remarks on closure with date when closed	Remarks on escalation to next higher committee (if the point was open for previous two meetings)
1.	Infection control round findings in the Pathology Lab and Phlebotomy area	21.06.2024	Lab manager Quality Head	Immediate effect	Basic PPE provided in phlebotomy room and lab. Appropriate disinfectant for surfaces is being	30.09.2024



					discussed as per SOP.	
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Summary of discussion on Reports / documents of all essential Agenda items presented.

S. No.	Agenda Item	Updates / Points	Actionable	Responsibility	Timeline
1	MOS - HAI Concerns / Scores	MOS compliance: CAUTI- 99% CLABSI – 99%, VAP, SSI – 100%.	Urinary bags to be emptied when more than 2/3 <sup>rd</sup> full and bag lids to be kept closed all the time.	Nursing Infection control team Housekeeping Lab manager	Immediately and ongoing compliance required
2	CESC – HAI Score / trend / Analysis / Concerns	VAP- 0 SSI- 0 CLABSI- 0 CAUTI: 0 HAI rate: 0	HAI prevention bundle to be followed strictly with emphasis on hand hygiene, proper maintenance, and early removal of device.  Continue training and awareness sessions for all staffs regarding standard precautions and bundle care.  Surveillance method and reporting of HAI to be monitored.	ICN ICO	Ongoing compliance required
3	BMW License / Vendor Agreement validity /	All updated	ICN to supervise schedules and reports when available.	Head-Admin & HK. ICN	To be updated when next-due.



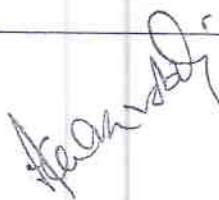
	regulatory reports status				
4	Needle Stick Injury data / concerns	Sharp injury-1 (0.06%) / BBF – 0	<p>Use of thumb forceps for recapping insulin and other needles when required.</p> <p>To reduce burden of sharps, increased use of blunt-cut needles for medicine reconstitution to be ensure at all levels.</p> <p>Few auto-sealed sharp jars showed some defect. The jars to come with upper half sealed to the bottom part. Vendor to be requested for this.</p> <p>Awareness for self-reporting of blood/body fluid exposure incidents to be raised among staffs through frequent sessions of training and counselling.</p>	ICN Purchase Housekeeping	30.09.2024 & Continuous compliance required.
5	Infection Control & BMW Trainings update	Improper disposal of biomedical waste in some areas.	Regular training of all staffs to continue with emphasis on biomedical waste disposal. Spot teaching during audit and notifying areas with repeated noncompliance.	HK team ICN.	Continuous training and monitoring
6	Surveillance reports	No remarkable growths anywhere this month.	<p>Surveillance activities to continue as per SOPs.</p> <p>ICN to supervise the schedule and monitor all reports and do CAPA whenever applicable.</p>	ICN CON Quality	Continuous training and monitoring
7	Vaccination status update	Updated (3/5 staffs jabbed) – 40%	Hepatitis B vaccine availability: Pharmacy to discuss with ANP pharmacy or escalate to the CASC/CIPACC/MSOG if doses are not available.	HR & ICN Pharmacy	Ongoing process



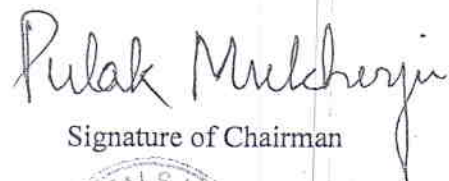
			Three due vaccinations to be completed immediately with available stock.		
8	AMS status & concerns	Improvement noted in duration of surgical antimicrobial prophylaxis although a BL-BLI was the most used agent. Timing of injection worsened to 80% from 94%.	New staffs in OT to be trained about correct time of prophylaxis dose.  Session on AMS policies for doctors/nurses to continue at regular interval.	AMS Nurse Quality Head ICO MS	30.09.2024
9	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters.	Next round of scheduled HEPA filter testing to be planned.	ICN to supervise HEPA filter maintenance and changing schedules and update HIPACC.  Sterilizer indicators to be monitored and cross-checked by ICN regularly.	Maintenance team ICN	Continuous compliance and follow up.

A. Other Agenda Items

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline



Signature of Convener



Signature of Chairman

