

To,

Dated: 27th June 2025

The Sr. Environmental Engineer, WMC-I

Department of Environment,

Govt. of NCT of Delhi,

4th Floor, ISBT Building,

Kashmere Gate, Delhi-110006

Subject: Submission of Form- IV (Annual Report 1st January 2024 to 31st December 2024)

Dear Sir/Madam,

Please find attached herewith the duly filled **Form IV (Annual Report)** as per the set guidelines by DPCC for the duration from **1st January 2024 to 31st December 2024**.

This is for your information and records.

Thanks & Regards

Garima Prasad

(Ms. Garima Prasad)

Facility Director - Fortis LaFemme



Slip
(Ms. Shilpa Kapoor)
Unit Lead - Patient Experience



@ 27/06/25
(ENQUIRY CENTER)
DELHI POLLUTION CONTROL COMMITTEE
DEPARTMENT OF ENVIRONMENT
GOVT. OF NCT OF DELHI
4TH FLOOR, ISBT BUILDING,
KASHMERE GATE, DELHI-110006



Biomedical Waste Report 2024

Sr No	Date	Yellow Waste		Red Waste		White Waste		Blue Waste		Cytotoxic Waste		Total	
		Nos	Kg	Nos	Kg	Nos	Kg	Nos	Kg	Nos	Kg	Nos	Kg
1	Jan-24	148	999.000	110	478.830	34	022.040	24	075.888		000.000	316	1876.768
2	Feb-24	133	910.410	102	434.810	30	022.125	18	077.810		000.000	283	1445.155
3	Mar-24	134	889.878	97	437.460	33	020.722	18	077.860		000.000	282	1425.020
4	Apr-24	135	912.770	100	472.630	31	019.360	18	068.800		000.000	284	1471.500
5	May-24	152	999.160	113	517.470	37	026.540	23	100.590		000.000	325	1644.160
6	Jun-24	131	1040.991	104	500.480	36	023.170	21	091.860		000.000	292	1656.603
7	Jul-24	137	1032.801	101	476.430	38	030.490	16	069.170		000.000	292	1607.896
8	Aug-24	138	1089.091	103	526.540	33	020.850	25	105.060		000.000	299	1740.640
9	Sep-24	137	1094.801	105	506.510	43	025.370	26	096.800		000.000	311	1722.480
10	Oct-24	120	973.870	88	428.860	39	022.600	17	071.313		000.000	264	1496.633
11	Nov-24	124	1001.880	90	481.310	35	020.790	21	083.220		000.000	270	1589.180
12	Dec-24	133	999.410	101	464.720	33	019.820	18	065.620		000.000	285	1549.670

[Handwritten Signature]

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Gauria Prasad

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	:	Fortis Hospital Limited
	(i) Name of the authorised person (occupier or operator of facility)	:	Ms. Garima Prasad
	(ii) Name of HCF or CBMWTF	:	Fortis La Femme
	(iii) Address for Correspondence	:	S-549, Greater Kailash – 2, New Delhi – 110048
	(iv) Address of Facility	:	S-549, Greater Kailash – 2, New Delhi – 110048
	(v) Tel. No, Fax. No	:	Tel- 01140579400, Fax- 011-41436103
	(vi) E-mail ID	:	Contactus.tif@fortislafemme.in
	(vii) URL of Website	:	http://www.fortislafemme.in/delhi/
	(viii) GPS coordinates of HCF or CBMWTF	:	28.529-018,77,243843
	(ix) Ownership of HCF or CBMWTF	:	Private Limited
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: DPCC/(11)(5)(01)/2023/BMW/NST/ AUTH/3873349g valid up to 15.04.2027
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: NA
2.	Type of Health Care Facility	:	Single Specialty
	(i) Bedded Hospital	:	No. of Beds: 41
	(ii) Non-bedded hospital	:	NA
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	
	(iii) License number and its date of expiry	:	DHS/NH/710, Expiry- 31 st Mar 2026
3.	Details of CBMWTF	:	Biotic Waste Solutions Pvt. Ltd.
	(i) Number healthcare facilities covered by CBMWTF	:	To be submitted directly by waste management company
	(ii) No of beds covered by CBMWTF	:	To be submitted directly by waste management company
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	To be submitted directly by waste management company

	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge- NA
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	Biotic Waste Solutions Pvt Ltd
	(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	We have clubbed our Biomedical Waste Management committee with Infection Control Committee. The minutes have been attached for reference.
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	45
	(ii) number of personnel trained	192
	(iii) number of personnel trained at the time of induction	30
	(iv) number of personnel not undergone any training so far	Nil
	(v) whether standard manual for training is available?	Yes, BMW SOP is being followed
	(vi) any other information)	NA
8	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	NIL
	(ii) Number of the persons affected	NA
	(iii) Remedial Action taken (Please attach details if any)	No Incidents reported
	(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?	NA, we do not have incinerators
	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?	Since being under 50 bed, ETP is not required as it is not a mandate however we have a STP plant in place.
11	Is the disinfection method or sterilization meeting the log 4	Yes, Nil

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

Certified that the above report is for the period from 1st January 2024 till 31st December 2024.

Date: 27th June 2025

Place: New Delhi

Gaehna Prasad

Name and Signature of the Head of the Institution



Dated 11-06-2024

Shilpa 12/6/24

To,
 Delhi Pollution Control Committee
 Department of Environment (Govt. NCT Delhi)
 4th Floor ISBT Building Kashmiri Gate Delhi-110006

(ENQUIRY COUNTER)
 DELHI POLLUTION CONTROL COMMITTEE
 DEPARTMENT OF ENVIRONMENT
 GOVT. OF NCT OF DELHI
 4TH FLOOR, ISBT BUILDING,
 KASHMIRI GATE, DELHI-110006

Sub: - Acknowledgement of Authorized Bio Medical Waste Vehicle

With reference to attachment, biotic waste solution (46-47 SSI industrial area GT Karnal road New Delhi-110033) vendor is authorised to pick up bio medical waste from Fortis hospital Lafemme GK-2 New Delhi-110048.

Vehicle No. DL1LAB4251, DL1LAL2624, DL1LY1523, DL1LY4799, DL1LAB4599 is authorized by company for Bio Medical waste collection transportation generated by your hospital. This Vehicle is labeled as per BMW Rules 2016 and vehicle used are as per CPCB guidelines these vehicles attached with the GPS provision as per BMW Rules 2016. This is for your kind information.

DL1LV8844	DL1LAC4301	DL1LAB4586	DL1LV9243
DL1LAB4549	DL1LX1349	DL1LAE0358	DL1LAD9268
DL1LAD1257	DL1LAD1132	DL1LAB5167	DL1LAH4071
DL1LAB4599	DL1LV9304	DL1LR1879	DL1LAD1286
DL1LX1490	DL1LV9242	DL1LV8794	DL1LV0858
DL1LAD9277	DL1LAE0342	DL1LX3602	DL1LK8033
DL1LAB4544	DL1LAC4214	DL1LS8533	DL1LM1593
DL1LAB2286	DL1LR5013	DL1LAAS272	DL1LAC4338
DL1LA4536	DL1LAC4334	DL1LV8795	DL1LAH4071
DL1LX3384	DL1LS0435	DL1LV8843	DL1LAH4033
DL1LY1523	DL1LAE0426	DL1LV9305	
DL1LX3678	DL1LAH4780	DL1LX1398	
DL1LAD1107	DL1LAA6567		

This is for your information and record.

Thanks & Regards

Garima Prasad

(Ms. Garima Prasad)

Facility director Fortis La Femme

Shilpa

(Ms. Shilpa Kapoor)

Head Patient Experience



HOSPITAL INFECTION CONTROL COMMITTEE

1. Date: 23/1/2024 Time: 2:30 pm
2. Total no. of Members in the committee: 13
3. Number of members attended: 11
4. Chairman, convener & Mandatory Members present (Yes/No): **Yes**
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): **Yes**
7. Action Taken Report (ATR) of previous meeting

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	No action Pending					

8. 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 Partially applicable According to MOS Sop We don't have adult ICU because we are doing SSI & CAUTI			

		SSI – 100% CAUTI-99%			
2	CESC – HAI Score / trend / Analysis / Concerns	No			
3	BMW License / Vendor Agreement validity / regulatory reports status	1 June 2023 to 31 May 2024			
4	Needle Stick Injury data / concerns	No case needle stick injury last month		-	-
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians • Lab Technicians • GDA&HK 	Ongoing	ICN	
6	Surveillance reports (High Risk Areas)	<p>OPD, 3rd floor. Kitchen and EDR drinking water culture was done. all reports Negative except Kitchen drinking water</p> <p>OT, LDR, NICU and CSSD all swab cultures negative except LDR Bed</p>		ICN/ Mr. Kuldeep	-
7	Vaccination status update	All HCW are Vaccinated	-	-	-

8	AMS status & concerns	No point			
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	Monthly swab culture and environment culture report all negative Temp /pressure/ humidity are maintained then HEPA Filters integrity Test half yearly doing			
11	CSSD Indicators	All indicators are ok no issue			
12	Construction / Repair planned	Yes, in process			
13	Any new products for Approval	No new product approval			

D Other Agenda Item

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
1.	Biotech site visit pending	23/1/2024	Immediate	Mr. Naveen	30 Jan 2024



Signature of Convener

Dr. Vinish Srivastava

Signature of Chairman

Dr. Madhu Goel

MISGG/HCC/MOM/20220401

HOSPITAL INFECTION CONTROL COMMITTEE

1. Date: 27/2/2024 Time: 2:30 pm
2. Total no. of Members in the committee: 13
3. Number of members attended: 11
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes
7. Action Taken Report (ATR) of previous meeting

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.	No action Pending					

8. 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 Partially applicable According to MOS Sep We don't have adult ICU because we are doing SSI & CAUTI			

		SSI – 100% CAUTI-99%			
2	CEC – HAI Score / trend / Analysis / Concerns	No			
3	BMW License / Vendor Agreement validity / regulatory reports status	1 June 2023 to 31 May 2024			
4	Needle Stick Injury data / concerns	No case needle stick injury last month			
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians • Lab Technicians • GDA&HK 	Ongoing	ICN	
6	Surveillance reports (High Risk Areas)	<p>OPD, 3rd floor, Kitchen and EDR drinking water culture was done, all reports Negative</p> <p>OT, LDR, NICU and CSSD all swab cultures negative.</p>		ICN/ Mr. Kuldeep	
7	Vaccination status update	All HCW are Vaccinated	-	-	-

8	AMS status & concerns	No point			
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	Monthly swab culture and environment culture report all negative Temp /pressure/ humidity are maintained then HEPA Filters integrity Test half yearly doing			
11	CSSD Indicators	All indicators are ok no issue			
12	Construction / Repair planned	Yes, in process			
13	Any new products for Approval	No new product approval			

D Other Agenda Item

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
1	Need to improved liner washing	27/2/2024	Immediate	Mr. Naveen	5/4/2024

lafemme

Signature of Convener



Dr. Vinish Srivastava



Signature of Chairman

Dr. Madhu Goel

MSDG/HDC/MOH/20220401

HOSPITAL INFECTION CONTROL COMMITTEE

1. Date 21/3/2024 Time: 2:30 pm
2. Total no. of Members in the committee: 13
3. Number of members attended: 9
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes
7. Action Taken Report (ATR) of previous meeting

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	Need to improve linen washing	27/2/2024	Mr. Naveen/ Shilpa Kapoor	Ongoing		

8. 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 Partially applicable According to MOS Sop We don't have adult ICU because we are doing SSI & CAUTI			

		SSI - 100% CAUTI-99%			
2	CEC - HAI Score / trend / Analysis / Concerns	No			
3	BMW License / Vendor Agreement validity / regulatory reports status	1 June 2023 to 31 May 2024			
4	Needle Stick Injury data / concerns	No case needle stick injury last month			
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians • Lab Technicians • GDA&HK 	Ongoing	ICN	
6	Surveillance reports (High Risk Areas)	<p>OPD, 3rd floor, Kitchen and EDR drinking water culture was done, all reports Negative</p> <p>OT, LDR, NICU and CSSD all swab cultures negative.</p>		ICN/ Mr. Kuldeep	
7	Vaccination status update	All HCW are Vaccinated			

8	AMIS status & concerns	No point			
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	Monthly swab culture and environment culture report all negative Temp /pressure/ humidity are maintained then HEPA Filters integrity Test half yearly doing			
11	CSSD Indicators	All indicators are ok no issue			
12	Construction / Repair planned	Yes, in process			
13	Any new products for Approval	No new product approval			

D) Other Agenda Item

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
1.	Need to improved linen washing	27/2/2024	Immediate	Mr. Naveen	5/4/2024

lafemme

Signature of Convener



Dr. Vinitish Srivastava



Signature of Chairman

Dr. Madhu Goel

MSOG/HCC/OM/2022/001

HOSPITAL INFECTION CONTROL COMMITTEE

1. Date 23/4/2024 Time: 2:30 pm
2. Total no. of Members in the committee: 13
3. Number of members attended: 10
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes
7. Action Taken Report (ATR) of previous meeting

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	Need to improved linen washing	27/2/2024	Mr. Naveen/ Shilpa Kapoor	Ongoing		

8. 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 Partially applicable According to MOS Sop We don't have adult ICU because we are doing SSI & CAUTI			

		SSI – 100% CAUTI-99%			
2	CEC – HAI Score / trend / Analysis / Concerns	No			
3	BMW License / Vendor Agreement validity / regulatory reports status	1 June 2023 to 31 May 2024			
4	Needle Stick Injury data / concerns	No case needle stick injury last month			
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians • Lab Technicians • GDA&HK 	Ongoing	ICN	
6	Surveillance reports (High Risk Areas)	<p>OPD, 3rd floor, Kitchen and EDR drinking water culture was done, all reports Negative</p> <p>OT, LDR, NICU and CSSD all swab cultures negative.</p>		ICN/ Mr. Kuldeep	
7	Vaccination status update	All HCW are Vaccinated			

8	AMS status & concerns	No point			
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	Monthly swab culture and environment culture report all negative Temp /pressure/ humidity are maintained then HEPA Filters integrity Test half yearly doing			
11	CSSD Indicators	All indicators are ok no issue			
12	Construction / Repair planned	Yes. in process			
13	Any new products for Approval	No new product approval			

D Other Agenda Item

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
1.	Need to improved linen washing	27/2/2024	Immediate	Mr. Naveen	31 May 2024



Signature of Convener

Vinish

Dr. Vinish Srivastava

Signature of Chairman

Madhu

Dr. Madhu Goel

MS00/HCC/MOW/20220401

HOSPITAL INFECTION CONTROL COMMITTEE

1. Date 21/5/2024 Time: 2:30 pm
2. Total no. of Members in the committee: 13
3. Number of members attended: 10
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes
7. Action Taken Report (ATR) of previous meeting

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	Need to improved linen washing	27/2/2024	Mr. Naveen/ Shilpa Kapoor	Ongoing		

8. 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 Partially applicable According to MOS Sop We don't have adult ICU because we are doing SSI & CAUTI			

		SSI – 100% CAUTI-99%			
2	CEC – HAI Score / trend / Analysis / Concerns	No			
3	BMW License / Vendor Agreement validity / regulatory reports status	1 June 2023 to 31 May 2024			
4	Needle Stick Injury data / concerns	No case needle stick injury last month		-	-
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians • Lab Technicians • GDA&HK 	Ongoing	ICN	
6	Surveillance reports (High Risk Areas)	<p>OPD, 3rd floor, Kitchen and EDR drinking water culture was done, all reports Negative</p> <p>OT, LDR, NICU and CSSD all swab cultures negative.</p>		ICN/ Mr. Kuldeep	-
7	Vaccination status update	All HCW are Vaccinated	-	-	-

8	AMS status & concerns	No point			
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	Monthly swab culture and environment culture report all negative Temp /pressure/ humidity are maintained then HEPA Filters integrity Test half yearly doing			
11	CSSD Indicators	All indicators are ok no issue			
12	Construction / Repair planned	Yes, in process			
13	Any new products for Approval	No new product approval			

D Other Agenda Item

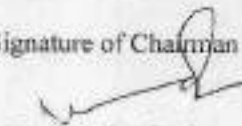
S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
1.	No action Pending				

Signature of Convener



Dr. Vinish Srivastava

Signature of Chairman



Dr. Madhu Goel

HOSPITAL INFECTION CONTROL COMMITTEE

1. Date 25/6/2024 Time: 2:30 pm
2. Total no. of Members in the committee: 13
3. Number of members attended: 11
4. Chairman, convener & Mandatory Members present (Yes/No): **Yes**
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): **Yes**
7. Action Taken Report (ATR) of previous meeting

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.	Need to improve Linen Washing	27/2/2024	Mr. Naveen	Ongoing process		

8. 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	All MOS Parameter Update CAUTI-100% CLABSI-100%			

		VAP- No case last month SSI-100%			
2	CESC – HAI Score / trend / Analysis / Concerns	No			
3	BMW License / Vendor Agreement validity / regulatory reports status	1 June 2024 to 31 May 2025			
4	Needle Stick Injury data / concerns	No Needle stick injury last month			
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians • Lab Technicians • GDA&HK 	Ongoing	ICN	
6	Surveillance reports (High Risk Areas)	<p>OPD, 3rd floor, Kitchen and EDR drinking water culture was done, all reports Negative except 3rd floor</p> <p>OT, LDR, NICU and CSSD all swab cultures negative.</p>	Immediate	ICN/ Mr. Kuldeep	
7	Vaccination status update	All HCW are Vaccinated	-	-	-

8	AMS status & concerns	No point			
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	Monthly swab culture and environment culture report all negative Temp /pressure/ humidity are maintained then HEPA Filters integrity Test half yearly doing			
11	CSSD Indicators	All indicators are ok no issue			
12	Construction / Repair planned	Room no. 160 plan for Renovation			
13	Any new products for Approval	No new product approval			

D Other Agenda Item

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
1.	NABH Audit Observation point surgical site infection prevention safety bundle not documented in each surgery patient file.	25/06/2024	In process	Viney	15/07/2024
2	Organisation not provide adequate space and appropriate zoning for sterilization activities?	25/06/2024	In process	CSSD in charge/Dr. Meeta	15/07/2024

3.	Cleaning, packing, disinfection and/or sterilization, storage and issue of items not done as per the written guidance	25/06/2024	In process	CSSD in charge/Dr. Meeta	15/07/2024
4.	Reprocessing of single-use instruments, equipment and devices as per written guidance not documented.	25/06/2024	In process	Vincy/CSSD in charge	15/07/2024

Signature of Convener



Dr. Vinish Srivastava

Signature of Chairman



Dr. Madhu Goel

HOSPITAL INFECTION CONTROL COMMITTEE

1. Date: 25/7/2024 Time: 2:30 pm
2. Total no. of Members in the committee: 13
3. Number of members attended: 9
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes
7. Action Taken Report (ATR) of previous meeting

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.	Need to improve Linen Washing	27/2/2024	Mr. Naveen	Ongoing process		
2.	BMW Site Visit due on July-2024		Mrs. Shilpa/Mr.Naveen	31/07/2024	Closed on 17/07/2024	
3.	NABH Audit Observation point surgical site infection prevention safety bundle not documented in each surgery patient file.	25/06/2024	Viney	15/07/2024	Closed on 5/07/2024	

4.	Reprocessing of single-use instruments, equipment and devices as per written guidance not documented.	25/06/2024	ICN/CSSD in charge	15/07/2024	Closed on 13/07/2024
5.	Organisation not provide adequate space and appropriate zoning for sterilization activities?	25/06/2024	CSSD in charge/Dr. Meeta	15/07/2024	Pending
6.	Cleaning, packing, disinfection and/or sterilization, storage and issue of items not done as per the written guidance.	25/06/2024	CSSD in charge/Dr. Meeta	15/07/2024	Pending

8. 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	All MOS Parameter Update CAUTI-100% CLABSI- No case last month VAP-100% SSI-99%		ICN	
2	CESC - HAI Score / trend / Analysis / Concerns	No		ICN	
3	BMW License / Vendor Agreement	1 June 2024 to 31 May 2025		Mr. Naveen/ Mrs. Shilpa	


	validity / regulatory reports status				
4	Needle Stick injury data / concerns	No Needle stick injury last month		ICN	
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians • Lab Technicians • GDA&HK 	Ongoing	ICN	
6	Surveillance reports (High Risk Areas)	<p>OPD, 3rd floor, Kitchen and EDR drinking water culture was done, all reports Negative.</p> <p>OT, LDR, NICU, Kitchen and CSSD all swab cultures negative.</p>	-	ICN/ Mr. Kuldeep	-
7	Vaccination status update	All HCW are Vaccinated	-	ICN	-
8	AMS status & concerns	No point			
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	<p>Monthly swab culture and environment culture report all negative</p> <p>Temp / pressure / humidity are maintained then HEPA Filters integrity Test half yearly doing</p>		ICN/ Mr. Kuldeep	

11	CSSD Indicators	All indicators are ok no issue		CSSD in charge	
12	Construction / Repair planned	No Planned, Room no. 160 under the Renovation		Mr. Kuldeep	
13	Any new products for Approval	No new product approval		ICN	

D Other Agenda Item

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
1	NABH Audit Observation point Organisation not provide adequate space and appropriate zoning for sterilization activities?	25/06/2024	Immediate	CSSD in charge/Dr. Meeta	31/07/2024
2	Cleaning, pecking, disinfection and/or sterilization, storage and issue of items not done as per the written guidance	25/06/2024	Immediate	CSSD in charge/Dr. Meeta	31/07/2024


Signature of Convener
Dr. Vinish Srivastava


Signature of Chairman
Dr. Madhu Goel

HOSPITAL INFECTION CONTROL COMMITTEE

1. Date **22/08/2024** Time: **2:00 pm**
2. Total no. of Members in the committee: **13**
3. Number of members attended:**10**
4. Chairman, convener & Mandatory Members present (Yes/No): **Yes**
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): **Yes**
7. Action Taken Report (ATR) of previous meeting

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.	Need to improve Linen Washing	27/2/2024	Mr. Naveen	Ongoing process		
2	NABH Audit Observation point Organisation not provide adequate space and appropriate zoning for sterilization activities	25/06/2024	CSSD in charge/Dr. Meeta	15/07/2024	Closed on 28/07/2024	

Cleaning, packing, disinfection and/or sterilization, storage and issue of items not done as per the written guidance	25/06/2024	CSSD in charge/Dr. Meeta	15/07/2024	Closed on 28/07/2024	
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8. 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	All MOS Parameter Update CAUTI -100% CLABSI -100% VAP -100% SSI -99%		ICN	
2	CESC – HAI Score / trend / Analysis / Concerns	No		ICN	
3	BMW License / Vendor Agreement validity / regulatory reports status	1 June 2023 to 31 May 2024		Ms. Shilpa	
4	Needle Stick Injury data / concerns	No Needle stick injury in last month		ICN	
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians 	No due in last month. 38 staff trained in last month	ICN	


		<ul style="list-style-type: none"> • Lab Technicians • GDA&HK 			
6	Surveillance reports (High Risk Areas)	<p>OPD, 3rd floor, Kitchen and EDR drinking water culture was done, all reports Negative</p> <p>OT, LDR, NICU and CSSD all swab cultures negative.</p>		ICN/ Mr. Kuldeep	-
7	Vaccination status update	All HCW are Vaccinated	3due in last month, all vaccinated	ICN/HR	-
8	AMS status & concerns	No point			
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	<p>Monthly swab culture and environment culture report all negative</p> <p>Temp /pressure/ humidity are maintained then HEPA Filters integrity Test half yearly doing</p>		ICN/ Mr. Kuldeep	
11	CSSD Indicators	All indicators are ok no issue		CSSD in charge	

12	Construction / Repair planned	No construction planned		Mr. Kuldeep	
13	Any new products for Approval	No new product approval		ICN	


D Other Agenda Item

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
1.	No Action Point	-	-	-	-

Signature of Convener



 Dr. Vinish Srivastava



 Signature of Chairman

Dr. Madhu Goel

HOSPITAL INFECTION CONTROL COMMITTEE

1. Date 25/9/2024 Time: 2:30 pm
2. Total no. of Members in the committee: 13
3. Number of members attended: 11
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes
7. Action Taken Report (ATR) of previous meeting

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.	No action points					

8. 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	All MOS Parameter Update CAUTI -100% CLABSI -100% VAP -100% SSI -100%		ICN	
2	CESC – HAI Score / trend /	No		ICN	

	Analysis / Concerns				
3	BMW License / Vendor Agreement validity / regulatory reports status	1 June 2024 to 31 May 2025		HK Supervisor/Admin head	
4	Needle Stick Injury data / concerns	1 Needle stick injury last month	Staff vaccinated and Hepatitis titer >1000, blood investigation done. Counselling and training given.	ICN	-
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians • Lab Technicians • GDA&HK 	Ongoing	ICN	
6	Surveillance reports (High Risk Areas)	OPD, 3 rd floor, Kitchen and Basement drinking water and kitchen chopping board culture was done, all reports negative except basement and kitchen OT, LDR, NICU and CSSD all swab cultures negative.	Dispenser deep cleaning done and repeat sample taken. Report negative	ICN/ Maintenance Head /Admin Head	-
7	Vaccination status update	All HCW are Vaccinated	-	HR/ICN	-

8	AMS status & concerns	No point		Pharmacist	
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	Monthly swab culture and environment culture report all negative Temp /pressure/ humidity are maintained then HEPA Filters integrity Test half yearly doing		Maintenance Head	
11	CSSD Indicators	All indicators are ok no issue		CSSD Head	
12	Construction / Repair planned	No Plan		Admin	
13	Any new products for Approval	No new product approval		ICN	

D Other Agenda Item

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
1.	Need to Improve Cleaning Process a	25/09/2024	Immediate	Head Admin/ HK Supervisor	15/10/2024
2.	Maintain enough disinfectant solution and cleaning equipments	25/09/2024	Immediate	Head Admin/ HK Supervisor	15/10/2024

Signature of Convener

Dr. Vinish Srivastava

Signature of Chairman

Dr. Madhu Goel

MSOG/HCC/MOM/20220401

HOSPITAL INFECTION CONTROL COMMITTEE

1. Date: 22/10/2024 Time: 2:30 pm
2. Total no. of Members in the committee: 13
3. Number of members attended: 9
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes
7. Action Taken Report (ATR) of previous meeting

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.	Need to Improve Cleaning Process a	25/09/2024	Head Admin/ HK Supervisor	Immediate	On going	
	Maintain enough disinfectant solution and cleaning equipments	25/09/2024	Head Admin/ HK Supervisor	Immediate	Closed 15/10/2024	

8. 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	All MOS Parameter Update CAUTI -100% CLABSI -100% VAP -100% SSI -100%		ICN	
2	CESC – HAI Score / trend / Analysis / Concerns	No		ICN	
3	BMW License / Vendor Agreement validity / regulatory reports status	1 June 2024 to 31 May 2025		HK Supervisor/Admin head	
4	Needle Stick Injury data / concerns	1 Needle stick injury last month	Staff vaccinated not and Hepatitis titer < 2. Vaccination started blood investigation done. Counselling and training given.	ICN	
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians • Lab Technicians • GDA&HK 	Ongoing	ICN	


6	Surveillance reports (High Risk Areas)	OPD, 3 rd floor, Kitchen and Basement drinking water and kitchen chopping board culture was done, all reports negative except basement and kitchen OT, LDR, NICU and CSSD all swab cultures negative.	Dispenser deep cleaning done and repeat sample taken and Report negative. Repeatedly two months same dispenser water culture positive, Special action taken: Frequency of cleaning schedule increased.	ICN/ Maintenance Head /Admin Head	-
7	Vaccination status update	All HCW are Vaccinated	-	HR/ICN	-
8	AMS status & concerns	No point		Pharmacist	
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	Monthly swab culture and environment culture report all negative Temp /pressure/ humidity are maintained then HEPA Filters integrity Test half yearly doing		ICN/Maintenance Head	
11	CSSD Indicators	All indicators are ok no issue		CSSD Head	
12	Construction / Repair planned	No Plan		Head Admin	
13	Any new products for Approval	Yes, 1 new product (High level disinfectant -Oxivir plus)		ICN/Head Admin	

D Other Agenda Item

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
1.	1 new product introduced for OT cleaning (High level disinfectant -Oxivir plus)	22/10/2024	HIC Team Approved Purchasing pending	Head Admin	31/10/2024


Signature of Convener

Dr. Vinish Srivastava


Signature of Chairman

Dr. Madhu Goel

HOSPITAL INFECTION CONTROL COMMITTEE

1. Date 29/11/2024 Time: 2:30 pm
2. Total no. of Members in the committee: 13
3. Number of members attended: 9
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes
7. Action Taken Report (ATR) of previous meeting

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	Need to Improve Cleaning Process a	25/09/2024	Head Admin/ HK Supervisor	Immediate	On going	
	A new product introduced for OT cleaning (High level disinfection -Oxivir plus)	25/09/2024	Head Admin/ HK Supervisor	Immediate	Closed 30/10/2024	

8. 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	All MOS Parameter Update CAUTI -100% CLABSI -100% VAP - Nil SSI -100%		ICN	
2	CESC - HAI Score / trend / Analysis / Concerns	No		ICN	
3	BMW License / Vendor Agreement validity / regulatory reports status	1 June 2024 to 31 May 2025		HK Supervisor/Admin head	
4	Needle Stick Injury data / concerns	No		ICN	
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians • Lab Technicians • GDA&HK 	Ongoing	ICN	
6	Surveillance reports (High Risk Areas)	OPD, 3 rd floor, Kitchen and Basement drinking water and kitchen chopping board culture was done, all reports negative. OT, LDR, NICU and CSSD all swab cultures negative.		ICN/ Maintenance Head /Admin Head	


7	Vaccination status update	All HCW are Vaccinated	-	HR/ICN	
8	AMS status & concerns	No point		Pharmacist	
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	Monthly swab culture and environment culture report all negative Temp /pressure/ humidity are maintained then HEPA Filters integrity Test half yearly doing		ICN/Maintenance Head	
11	CSSD Indicators	All indicators are ok no issue		CSSD Head	
12	Construction / Repair planned	No Plan		Head Admin	
13	Any new products for Approval	No		ICN/Head Admin	

D Other Agenda Item


S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
1.	Need to improve cleaning process and training of housekeeping staff	29/10/2024	Immediate	Head Admin/Housekeeping supervisor	15/12/2024
2.	Vaccination policy strictly adheres to F&B staff	29/10/2024	Immediate	Head Admin	15/12/2024
3.	There is no need for environmental surveillance surface	29/10/2024	HIC Team Approved	ICN	Closed

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sampling according to Infection Prevention control central manual					
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Signature of Convener

Dr. Vinish Srivastava


Signature of Chairman

Dr. Madhu Goel

HOSPITAL INFECTION CONTROL COMMITTEE

1. Date **17/12/2024** Time: **2:30 pm**
2. Total no. of Members in the committee: **13**
3. Number of members attended: **9**
4. Chairman, convener & Mandatory Members present (Yes/No): **Yes**
5. Details of essential members who neither attended nor sent a representative:
6. Agenda circulated 3 days prior to meeting (Yes/No): **Yes**
7. Action Taken Report (ATR) of previous meeting

S. No.	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.	Need to Improve cleaning process and training of housekeeping staff	Head Admin/Housekeeping supervisor	15/12/2024	On going	
2.	Vaccination policy strictly adheres to F&B staff	Head Admin	15/12/2024	On going	
3.	There is no need for environmental surveillance surface sampling according to Infection Prevention control central manual	ICN	15/12/2024	Closed on 29/11/2024	

8. 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	All MOS Parameter Update CAUTI -100% CLABSI -100% VAP - Nil SSI -100%		ICN	
2	CFSC – HAI Score / trend / Analysis / Concerns	No		ICN	
3	BMW License / Vendor Agreement validity / regulatory reports status	1 June 2024 to 31 May 2025		HK Supervisor/Admin head	
4	Needle Stick Injury data / concerns	No		ICN	
5	Infection Control & BMW Trainings update	<ul style="list-style-type: none"> • Doctors • Nurses • OT Technicians • Lab Technicians 	Ongoing	ICN	

		• GDA&HK			
6	Surveillance reports (High Risk Areas)	OPD, 3 rd floor, Kitchen and Basement drinking water and kitchen chopping board culture was done, all reports negative.		ICN/ Maintenance Head /Admin Head	
7	Vaccination status update	All HCW are Vaccinated		HR/ICN	
8	AMS status & concerns	No point		Pharmacist	
9	Data Validation Report	No point			
10	Key concerns - OT C/S Report, environment surveillance (Temp / Pressure / Humidity), HEPA Filters	Random environment swab culture report all negative Temp /pressure/ humidity are maintained then HEPA Filters integrity Test half yearly doing		ICN/Maintenance Head	
11	CSSD Indicators	All indicators are ok no issue		CSSD Head	
12	Construction / Repair planned	No Plan		Head Admin	
13	Any new products for Approval	No		ICN/Head Admin	

D Other Agenda Item

S. No.	Agenda Item	Discussion	Actionable	Responsibility	Timeline
	No Action point				

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Signature of Convener

Dr. Vinish Srivastava

Signature of Chairman

Dr. Madhu Goel