



TSL/SPCB/BS-39/2024-01/405 January 19, 2024

The Member Secretary
State Pollution Control Board, Odisha
Parivesh Bhawan, A/118,
Nilakantha Nagar, Unit-VIII
Bhubaneswar -751 012

Subject: Submission of annual report under Bio-Medical Waste (Management and

Handling) Rules, 2016

Reference: Authorization No. 3932/IND-IV-BW-2151, dated. 27.03.2020

Dear Sir,

With reference to aforesaid subject and cited reference, please find herewith enclosed Biomedical Waste Annual Report for the period from January 2023 to December 2023 under the Bio-Medical Waste (Management and Handling) Rules, 2016 with necessary relevant documents enclosed as Annexure-I.

Hope, the information furnished is in line with the requirement.

Thanking you,

Yours faithfully,

For Tata Steel Limited

Anoop Srivastava

Chief Environment - TSM

Enclosed: As above

Copy to: The Regional Officer, State Pollution Control Board, Odisha, Angul.

Form-IV (See rule 13) ANNUAL REPORT

(To be submitted to the prescribed 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))

SI.	Parti	cu	lars			
no. 1.	Particulars of the Occupier					
	(i) Name of the authorized person (occupier or operator of facility)	•	Sri Subodh Pandey (VP Operation, TSM)			
	(ii) Name of HCF or CBMWTF	:	Tata Steel Limited, Meramandali			
	(iii) Address for Correspondence		Tata Steel Limited Narendrapur, Kusupanga, Meramandali, Dhenkanal-759121			
	(iv) Address of Facility	:	Same as point No. iii.			
	(v) Tel.No, fax. No.	:	91-6764-229800,229853			
	(vi) E-mail ID	:	anoop.srivastava@tatasteel.com			
	(vii) URL of Website	:	www.tatasteel.com			
	(viii)GPS coordinates of HCF or CBMWTF		20° 48' 30.11" N 85° 15' 12.62" E			
	(ix) Ownership of HCF or CBMWTF	:	Private			
	(x) Status of Authorization under the Bio- medical waste (Management and Handling Rules)	:	Authorization no.3932/IND-IV-BM-2151 dated 27.03.2020, Valid up to 31.03.2025			
	(xi) Status of Consents under Water Act and Air Act	:	No.4463/IND-I-CON-5440 dated 23.03.2023 valid up to 31.03.2025			
2.	Type of Health Care Facility	:	Primary Health Care Facility			
	(i) Bedded Hospital	:	No. of beds:5 nos.			
	(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	:	DL-95 dated 16.11.2016 Valid up to 31.12.2031 (Factory License)			
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	:	Yellow Category :53.487 kg						
	per annum (on monthly average basis)	:	Red Category	У	:257.124 k	g			
		:	White Catego	ory	:32.505 kg]			
		:	Blue Categor	у	:2.503 kg				
5.	Details of the Storage,treatment,transportation	,pr	rocessing and disposal facility						
	(i) Details of the on-site storage facility		Size : 5'	dia,12' d	depth				
		:	Capacity : 6.6	3 m ³					
			Provision of c	n-site s	torage: NA				
	(ii)Disposal facility		Type of treatment equipment	No. of units	Capacity Kg/day	Quantity treated or disposed in kg per annum			
			Incinerators	-		-			
			Plasma		_				
			Pyrolysis						
			Autoclaves	3	Potable Steel autoclave	-			
			Microwave	-	-	-			
			Hydro-clave		-	-			
		:	Shredder	-		-			
			Needle tip cutter or destroyer Sharps	4	Manual				
			Encapsulati on or concrete pit	Sind	-	-			
			Deep burial pits	3	2m dia,2m depth				
			ChemicalDi sinfection	01	-				

			Any other treatment			-
:			equipment			
	(iii) Quality of recyclable wastes sold to authorized recyclers after treatment in kg per annum	•		1	Nil	
	(iv) No of vehicle used for collection and transportation of biomedical waste	:		•	Nil	
	(v) Details of incineration ash and ETP sludge			i	uantity	Where
	generated and disposed during the		1	gei	nerated	disposed
	treatment of wastes in kg per annum	:	Incineration			•••
			Ash		edit	•••
			ETP Sludge		_	
	(vi) Name of the common Bio-medical waste Treatment facility Operator through which wastes are disposed of		M/s. San	i Clean	Pvt. Ltd., Kl	nurdha
	(vii) List of member HCF not handed over bio- medical waste	:		ľ	NA	
6.	Do you have bio-medical waste management committee? Yes/No	•		Y	'es	
7.	Details training conducted on BWM					
	(i) Number of trainings conducted on BMW management.	:		Quarte	rly Once	
	(ii) Number of personnel trained	:			54	
	(iii) Number of personnel trained at the time of induction	••		10	00%	
	(iv) Number of personnel not undergone any training so for	:	All the paran		staffs and h	
	(v) Whether standard manual for training is available?	*			'es	
	(vi) Any other information	:				
8.	Details of the accident occurred during the year	u		1	10	
	(i) Number of accidents occurred	:			Nil	
	(ii) Number of Persons affected	:			Nil	
	(iii) Remedial Action taken (Please attach details if any)	••				
	(iv) Any Fatality occurred, details	:			-	
1	Are you meeting the standards of air pollution from the incinerator? How many time in last year could not met the standards. Details of			١	NA	

10.	continuous online emission monitoring system installed Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	:	Yes (Liquid waste generated from testing lab is being disinfected by Sodium hypochlorite and discharge into soak pit)
	Is the disinfection method of sterilizer meeting the log 4 standards? How many times you have not met the standards in a year?	:	Yes
12.	Any other relevant information		-

Certified that the above report is for the period from January 2023 to December 2023.

Date :19.01.2023

Place: Meramandali

Name and Signature

Dr. AVINASH DASH (MBBS, AFIH) Sr. Registrar (MBBS) 16 NO. 2167812016 Reg. CTEST MERAMANDALI

Minutes of the meeting:

Date of the meeting: 09th June 2023

Meeting attended by:

- 1. Discussions pertaining to the waste segregation was done, it was observed that there were particulars gaps in the process of segregation. As, the BMW is generated in the phlebotomy area, the lab area & the OT area, particular emphasis must be given to the personnel handling the waste in the areas.
- It was discussed that there is need for staff training & sensitisation of the staff regarding waste segregation.
- 3. It was also discussed that though there is provision for liquid waste management, the records for the same are not being maintained. So, it was decided that the facility for the same has to be created.
- 4. It was also decided the waste burial area need to be improved as per the BMW protocols.
- A need for the health check-ups & vaccination of all the employees who are handling the BMW was planned to be done.
- 6. BMW segregation, Transportation and disposal is done & also record keeping is done.
- 7. BMW audit is done.

Members

SLNO	Members Name	Designation	Signature
Î.	Dr. Ashish Mahapatra	Consultant, Medical Services	
2	Mr. Rajesh Kumar Shah	Hospital Administrator	14 L
3	Dr. Avinash Dask	Medical Officer Sv. Rosh	pash
4	Dr. Soumya Smruti Parida	Medical Officer	1 line
5	Jashobanta Pany	BMW Operator	Ar)
- 6	Rajashree Behera	Staff Nurse	fularmen
7	Sujata Mohanty	Staff Nurse	July A.
8	Nrushima Thara	EMD Sr.Manager	Tales:
9	Dr. Girlja Shankar Mohanty	EMD Officer	G.S. Mokanty

Minutes of the meeting:

Date of the meeting: 13th Dec 2023

Meeting attended by:

- Discussions pertaining to the waste segregation was done, it was observed process of segregation. As, the BMW is generated in the phlebotomy area, the lab area & the OT area, particular continuous emphasis must be given to the personnel handling the waste in the areas.
- 2. As discussed in previous meeting regular training was given to all staffs (Nurses, Housekeeping staffs)
- 3. As lab has closed so no liquid waste created though we are giving training to staffs.
- 4. BMW waste storage are being done.
- 5. A need for the health check-ups & vaccination of all the employees who are handling the BMW was done.
- 6. BMW segregation, Transportation and disposal is done & also record keeping is done.
- 7. BMW audit is done.

Members

SLNO	Members Name	Designation	Signature
1.	Dr. Ashish Mahapatra	Consultant, Medical Services	All the second s
2	Mr. Rajesh Kumar Shah	Hospital Administrator	Ask
	Dr. Avinash Dash	Medical Officer/Sv. Rgoh.	pash-
4	Dr. Soumya Smruti Parida	Medical Officer	, ly
	Dr. Virnal Kumar Ammasi	Medical Officer	3647.
6	Jashobanta Pany	BMW Operator	
18 7 3	Rajashree Behera	Staff Nurse	Rolphines
8	Sujata Mohanty	Staff Nurse	Engeth A.
9	Nrushima Thara	EMD Sr. Manager	Jolej:
10	Dr. Girija Shankar Mohanty	EMD Officer	G. S. MALKINTY

BMW Training

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	AT	TENDANCE SHEET	AND	ALVA
NAME OF THE PROGRAMM	The second secon			
	DATE: 14/7/2			VENUE:
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		ATTENDAN	CE SHEET			
NAME O	F THE PROGRAMME	BMW Training	Trainer-Mn. Rajesh shoth			
DATE:	08.09.23	VENUE: DHC.				
SL NO	EMP CODE	NAME	DESIGNATION	DEPT	SIGNATURE	
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ATTENDANCE SHEET

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ATE:	10.10.2023	VENUE: DH L			The second secon
: NO	EMP CODE	NAME	DESIGNATION	DEPT	SIGNATURE
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DATE:	18.11.2023	VENUE: DHC				
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Annual data of BMW generation'2023 OHC, Tata Steel Limited, Meramandali, Dhenkanal-759121								
		Cate	gory					
MONTH	Yellow Category	Red Category	Blue Category	White Category				
JANUARY	4.065	25.700	3.970	0.239				
FEBRUARY	5.563	18.295	4.362	0.181				
MARCH	3.577	13.026	2.025	0.156				
APRIL	1.522	10.525	1.567	0.124				
MAY	1.653	12.546	1.739	0.127				
JUNE	1.797	26.542	2.410	0.151				
JULY	12.490	45.470	3.127	0.355				
AUGUST	9.850	32.270	4.105	0.35				
SEPTEMBER	4.320	22.810	1.135	0.215				
OCTOBER	3.000	16.390	2.500	0.250				
NOVEMBER	4.500	21.300	3.000	0.2				
DECEMBER	1.150	12.250	2.565	0.155				
Total	53.487	257.124	32.505	2.503				

Note: All Figures in KG