Pondicherry Institute of Medical Sciences

Proposal entitled Community based surveillance for Dengue / DSS at the Urban and Rural Health Training Centres and Govt. Primary Health Centres in the field practice areas of Pondicherry Institute of Medical Sciences, Puducherry

Institutional Arrangements

- (i) Brief description of the proposed activity: The required biomedical specimens in the proposed research project of setting up a new DHS/DSS site would be collected and disposed as per the risk management plan described below
- (ii) List of environments related regulatory clearances required for the activity. The necessary environmental approval from the State Pollution Control Board (Puducherry) as applicable to the proposed research project is within the framework / guidelines / clearance given to Pondicherry Institute of Medical Sciences.

	Institutional Arrangement				
		Yes	No	Details	Proposed Plan
1.	Is there a designated full-time staff for Environment Health and Safety (EHS) issues?	Yes		requirements of	The Institute plans to coordinate with the Pollution Control and Engineering department of the Pondicherry University to make the institute a model eco-campus.
2.	Does the EHS staff handle the following?			Any other:	As per the Institute's
	Occupational Health and Safety	Yes			guidelines for
	Waste Management	Yes			Environment Health
	List of consents and regulatory clearances				and Safety (EHS).
	Record keeping of accidents and procedures	Yes			
	EHS trainings for staff	Yes			
	Environment Management Framework compliance for Innovate in India Project	Yes		The project site will follow the NBM BIRAC Environment Management Framework	
3.	Is there a reporting structure in place regarding EHS issues?	Yes		Describe: As per NABH guidelines	Will be regularly followed.
4.	Are regular EHS trainings provided to staff?	Yes		Frequency: Once in 6 months	This will be continued.
5.	Institutional Bio-Safety Committee (IBSC)	Yes		As per NABH guidelines	
6.	Ethics Committee (EC)	Yes		As per CDSCO/GoI guidelines	Meetings and reviews will be scheduled as and when required as per CDSCO/GoI

					guidelines.
	General Occupationa		lth and		
7.	for accidents, hazards, and other emergencies (chemical spills, heat hazards, fire hazards, radioactive hazards etc.)?	Yes		Sciences has a Ho Committee whice occupational Haze approved Institutio 2. Periodical inspectarried out to monate at the diagnostic fa	ards and follows the
8.	Are the following in place?				are in place to deal with
	Chemical spill kits	Yes		such emergencies	
	Eye wash	Yes			
	Shower stations	Yes			
	First Aid Kit	Yes			
	Fire Extinguishers	Yes			
	Register of accidents and injuries	Yes			
9.	Are proper signage and storage system in place?	Yes			These would be regularly updated/
	Display of Material Safety Data Sheet (MSDS) where relevant	Yes			replaced.
	Display of emergency numbers and procedures (Person to Contact, Doctor, Ambulance, Fire Emergency, Police) displayed in all critical places	Yes		required areas.	
	Signage across the facility (labs, storage, hazardous areas, etc.)	Yes			
	Are flammable materials appropriately stored to prevent fire hazards?	Yes			
10.	Are smoke detectors, fire alarms, automatic safety/shutoff systems, overflow preventors, etc. in place and regularly maintained?	Yes		List: Smoke detectors Fire alarms	These would be regularly maintained.
11.	Are there control measures for VOC, air emissions, high operating temperatures, pathogens/vectors etc. in place?	Yes		List: Vector control measures	This would be reviewed periodically.
12.	Are regular mock drills conducted for emergency preparedness and safety?	Yes		Frequency (type wise): Once in 6 months	This will be followed as per the schedule prepared by the Security Office.
13.	Are staff provided with OHS training?	Yes		Describe: The OHS training is being conducted periodically by	This will be regularly updated through Continuing Medical

			Hospital Education. Infection Control Committee (HICC)
	Biome	edical	Waste (BMW)
14.	Is there generation of biomedical waste (as described in Bio-Medical Waste Management Rules, 2016) in the grantee?	Yes	If Yes, provide a list of biomedical waste produced in the facility The following categories of Biomedical Wastes are produced in the facility — Anatomical waste, Animal waste, Microbiological waste, waste sharps, discarded medicines, soiled wastes, solid wastes, liquid wastes, chemical wastes etc.
15.	Is there trained staff to handle biomedical waste in the grantee?	Yes	Hospital Infection It will be carried on in Control future. Committee (HICC) is also responsible for this training.
16.	Has the grantee obtained authorization from State Pollution Control Board /Pollution Control Committee?	Yes	Pollution Control Committee as per timelines. Certificate No.18/PPCC/BM W/AUTHO/JSA(PPCC)/2019/132 2 Yellow Yes As per Bio-Medical
17.	Is the biomedical waste segregated at	Yes	Yellow Yes As per Bio-Medical

	point of generation in the facility and				Yes	Waste Management
	stored in suitable containers?				Yes	(Amendment) Rules,
18.	Is the bar code system for the segregated waste in place?	Yes		Bar cod	gregated is to	2018 Bar coding will be regularly updated as per policy guidelines.
19.	Is the biomedical waste being sent to an authorized common BMW facility?	Yes		Name address CBMWF: Pondicher Waste	and of	
				Managem Company	Pvt huthipet,	
				Distance facility: 2 Frequency Mode transport: By truck	y and of	
				Who trans		
20.	Does the grantee have an in-house BMW treatment facility?		No	Reason: Authoriza	ation:	It will be taken care by the outsourced agency, Pondicherry Solid Waste Management
				Distance nearest from facil	CBWM	Pvt. Ltd. Company.
				Types treatment	of :	
	Is the treatment facility own (individual)? Is the treatment facility a shared facility in an industrial park?		No No			
21.	Are lab waste, microbiological waste and chemical liquid waste pre-treated before	Yes		Types treatment		Compliance calendar shall be maintained.

	storing and sending to treatment facilities according to guidelines prescribed in BWM, 2016 regulations?			Autoclave and decontamination	
22.	Is the liquid waste checked for active cells before sending to treatment plant?		No		
23.	Are necessary waste pre-treatment equipment in place?	Yes		List of equipment (autoclaves, shredders, incinerators, etc.): Autoclave	Regular monitoring shall be undertaken
				pre- treatment:	
	Do the equipment adhere to prescribed norms by State Pollution Control Board (SPCB)?	Yes			
24.	Are chlorinated plastic gloves and bags phased out in the grantee?	Yes			
25.	Are grantee's personnel involved in handling BMW provided with regular training?	Yes		Frequency: Once in 6 months	Requirement as per NABH accreditation.
				Trainer: HICC team	
26.	Are medical examination provided to personnel involved in BMW waste handling and are they provided with relevant immunization like Hepatitis B and Tetanus?	Yes		Frequency of medical examination: Annual Health Checkup done	This practice will be checked periodically
27.	Is a daily register for biomedical waste maintained including accident reporting record?	Yes		Register is maintained as per the SOP.	This practice would be followed.
28.	Are annual reports on BWM submitted to SPCB as per required form (see Bio-Medical Waste Rules 2016)?	Yes		-	This practice would be followed.
	Hazardous V	Vaste	(HW)		
29.	Is there generation of hazardous waste (as per Hazardous Waste Rules, 2016) in the grantee?		No	list of hazardous waste produced in the facility If No, provide a list of all waste	The following categories of Biomedical Wastes are produced in the facility – Anatomical waste, Animal waste, Microbiological waste, waste sharps, discarded medicines, soiled wastes, solid wastes, liquid wastes, chemical wastes etc

30.	Is there trained staff in the facility to identify and handle hazardous waste?		No		PIMS may appoint designated personnel as and when need arises for the Project.
31.	Does the grantee have authorization from SPCB for hazardous waste?		No		If it is required in the future it can be implemented in consultation with BIRAC
32.	Is there a secure location for storage of HW with proper signage?		No	Describe how each item is	
	Are hazardous waste stored for more than 90 days in the grantee's premises?		No	stored – platforms, distances from critical installations/mo vement areas, spill collectors, gas escape facility, etc.	
	E-Was	te and	d Batt	eries	
35.	Does the grantee generate e- waste, produce or manufacture electrical and electronic equipment?	Yes		Minimal e-waste is generated	The very minimal amount of e-waste generated if required PIMS can implement certain process for it in consultation with BIRAC.
36.	Has the grantee obtained SPCB authorization on e-waste?		No		
37.	Does the grantee channelize the e-waste to authorized recycling or disposal facility?		No	Name and address of disposal facility/ recycler: Inhouse or outsourced Facility:	
41.	Does the grantee maintain a record of collection, storage, sale and transport of e-waste?	Yes			
42.	Does the grantee submit annual reports on e-waste to SPCB?		No		
43.	Is there accident reporting and records in place?	Yes			
44.	Are PPEs available to staff?	Yes			

45.	Is the grantee involved in manufacture of batteries?		No		
46.	Does the grantee generate battery waste?	Yes			
47.	Does the grantee deposit the battery waste to registered recycler/dealer/manufacturer/reconditio ner/collection center?		No	Name and address of battery waste receiving entity:	
	Community Health a	nd S	afety a		
49.	Safety Transportation Management System (for transport of hazardous material)	Yes		-	This contract will be renewed annually through a Memorandum of Understanding.
50.	Emergency preparedness and participation of local authorities and potentially affected communities	Yes		Co-ordination meetings with the local community and state health authorities is regularly conducted	The team of investigators would continue to work with the disaster preparedness plan of the locality.
		Oth	er		
52.	Is the lab/room air regularly checked for microbial contamination?	Yes		Monthly surveillance	As per Hospital Infection control policy
53	Are there any odor control measures in place?	Yes		Routine monitorin department.	g by the housekeeping
54.	Are fume hoods and exhausts regularly checked and maintained?	Yes		Regularly maintain Engineering depart	ned by the Maintenance ment.
55.	Does the grantee use DG set > 15 KVA? Does the grantee have consent for DG > 15 KVA?	Yes Yes		The Electrical E monitors and main	Ingineering department tains it.
	Are emissions from boilers and DG sets regularly monitored to be within the prescribed norms?	Yes			
56.	Does the grantee have proper disposal process for solid and plastic waste in compliance to Solid Waste Management Rules, 2016 and Plastic Waste Management Rules, 2016?	Yes		Describe: Green wastes disposed for composting. Other solid wastes collected by Municipality	This will be routinely monitored.

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57.	Is wastewater treated separately by the grantee? (Liquid waste from laboratory, chemicals, fluids, solvents, medium and cultures, coolants, etc.)	Yes	Types of wastewater: Sewage Treatment of wastewater: Sewage Treatment Plant is in place.
			Chemical management in wastewater treatment plants: Treated water is certified as safe and used in gardens
	Are there sludge management and cut off drains in place for wastewater?	Yes	Regular maintenance done by Civil Engineering department.
58.	Are necessary provisions for noise cancellation in place?	Yes	Describe: Vehicle drivers are discouraged from honking inside the campus. Campus is located 1km away from the main road.
59.	Are there any settlements, water bodies, cultivated land, or any other ecosensitive areas near the grantee's premises?	Yes	Describe: Cultivable land present at a distance of 1kilometer from the campus. Distance from premises:
60.	Are there any buffers, fire vehicle routes in the grantee's premises?	Yes	The fire station is located at 2 kilometers distance

Notwithstanding the above other risk (relevant to the project activities) that will be identified in the course shall be addressed as per standard mitigation monitoring parameters and manner of records keeping shall be in accordance to the recommendations of the project monitoring committee on subject experts engaged by BIRAC.