

INNOVATE IN INDIA FOR INCLUSIVENESS (I 3)

ENVIRONMENTAL HEALTH RISK MANAGEMENT PLAN (EHRMP) FORMAT

- (i) Brief description of the proposed activity: The proposed Technology transfer office to be setup at FITT and supported under the National Biopharma Mission, will be involved in IPR management and Technology Transfer, for Incubators and Institutions across the northern states of the country. The office shall also help in product development, industry mapping, and conduct training programs etc. No Scientific experiments will be performed at this office.
- (ii) List of environments related regulatory clearances required for the activity: The institute has the requisite EHS clearances in place, and for the TTO, a separate EHS plan may not be required as the TTO Shall be functioning at the Institute and the proposed work does not involve occupational hazards.

| | | Institutional Arrangement | | Proposed Plan |
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| | | Yes | No | |
| 1. | Is there a designated full-time staff for Environment Health and Safety (EHS) issues? | Yes | | The institute has the required EHS staff and statutory clearances. It is not required separately for the TTO to be established at FITT. |
| 2. | Does the EHS staff handle the following? | | | Any other: |
| | Occupational Health and Safety | Yes | | |
| | Waste Management | | NA | |
| | List of consents and regulatory clearances | | NA | |
| | Record keeping of accidents and procedures | | NA | |
| | EHS trainings for staff | Yes | | |
| | Environment Management Framework compliance for Innovate in India Project | | NA | |
| 4. | Is there a reporting structure in place regarding EHS issues? | | | Describe: |
| 5. | Are regular EHS trainings provided to staff? | Yes | | Frequency: |
| General Occupational Health and Safety | | | | |
| 6. | Are there Standard Operating Procedures for accidents, hazards, and other emergencies (chemical spills, heat hazards, fire hazards, radioactive hazards etc.)? | | | Not required for the TTO Office |
| 7. | Are the following in place? | | NA | |
| | Chemical spill kits | | NA | |
| | Eye wash | | NA | |
| | Shower stations | | NA | |
| | First Aid Kit | | Yes | |
| | Fire Extinguishers | | Yes | |
| | Register of accidents and injuries | | NA | |

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| 8. | Are proper signage and storage system in place? | NA | |
| | Display of Material Safety Data Sheet (MSDS) where relevant | NA | |
| | Display of emergency numbers and procedures (Person to Contact, Doctor, Ambulance, Fire Emergency, Police) displayed in all critical places | NA | |
| | Signage across the facility (labs, storage, hazardous areas, etc.) | NA | |
| | Are flammable materials appropriately stored to prevent fire hazards? | NA | |
| 9. | Are smoke detectors, fire alarms, automatic safety/shut off systems, overflow preventors, etc. in place and regularly maintained? | NA | List: |
| 10. | Are there control measures for VOC, air emissions, high operating temperatures, pathogens/vectors etc. in place? | NA | List: |
| 11. | Are regular mock drills conducted for emergency preparedness and safety? | NA | Frequency (type wise): |
| 12. | Are staff provided with OHS training? | NA | Describe: |
| Biomedical Waste (BMW) | | | |
| 13. | Is there generation of biomedical waste (as described in Bio-Medical Waste Management Rules, 2016) in the grantee? | NA | If Yes, provide a list of biomedical waste produced in the facility If No, provide a list of all waste produced in the facility. |
| 14. | Is there trained staff to handle biomedical waste in the grantee? | NA | |
| 15. | Has the grantee obtained authorization from State Pollution Control Board /Pollution Control Committee? | NA | |
| 16. | Is the biomedical waste segregated at point of generation in the facility and stored in suitable containers? | NA | Yellow |
| | | NA | Red |
| | | NA | White |
| | | | Blue |
| 17. | Is the bar code system for the segregated waste in place? | NA | |

Not required for the TTO.

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| 18. | Is the biomedical waste being sent to an authorized? common BMW facility? | NA | Name and address of CBMWF: Distance from facility: Frequency and Mode of transport: Who transports? |
| 19. | Does the grantee have an in-house BMW treatment facility? | NA | Reason: |
| | Is the treatment facility own (individual)? | NA | Authorization: |
| | Is the treatment facility a shared facility in an industrial park? | NA | Distance of nearest CBWM from facility: Types of treatment: |
| 20. | Are lab waste, microbiological waste and chemical liquid waste pre-treated before storing and sending to treatment facilities according to guidelines prescribed in BWM, 2016 regulations? | NA | Types of treatment: |
| 21. | Is the liquid waste checked for active cells before sending to treatment plant? | NA | |
| 22. | Are necessary waste pre-treatment equipment in place? | NA | List of equipment (autoclaves, shredders, incinerators, etc.): |
| | Do the equipment adhere to prescribed norms by State Pollution Control Board (SPCB)? | NA | Details of waste pre-treatment: |
| 23. | Are non-chlorinated plastic gloves and bags phased out in the grantee? | NA | |
| 24. | Are grantee's personnel involved in handling BMW provided with regular training? | | Frequency: Trainer: |

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| 25. | Are medical examination provided to personnel involved in BMW waste handling and are they provided with relevant immunization like Hepatitis B and Tetanus? | NA | Frequency of medical examination: |
| 26. | Is a daily register for biomedical waste maintained including accident reporting record? | NA | |
| 27. | Are annual reports on BWM submitted to SPCB as per required form (see Bio-Medical Waste Rules 2016)? | NA | |
| Hazardous Waste (HW) | | | |
| 28. | Is there generation of hazardous waste (as per Hazardous Waste Rules, 2016) in the grantee? | NA | If Yes, provide a list of hazardous waste produced in the facility If No, provide a list of all waste produced in the facility. |
| 29. | Is there trained staff in the facility to identify and handle hazardous waste? | NA | |
| 30. | Does the grantee have authorization from SPCB for hazardous waste? | NA | |
| 31. | Is there a secure location for storage of HW with proper signage? | NA | Describe how each item is stored – |
| | Are hazardous waste stored for more than 90 days in the grantee's premises? | NA | platforms, distances from critical installations/movement areas, spill collectors, gas escape facility, etc. |
| 33. | Is the hazardous being send to an authorized disposal facility or user? | NA | Name and address of facility: |
| | Is the disposal facility in house? | NA | |
| | Is the disposal facility external/outsourced? | NA | |
| 34. | Is a register maintained on production and treatment, and a manifest system followed for transport of hazardous waste from the grantee to treatment facility? | NA | |

E-Waste and Batteries

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| 35. | Does the grantee generate e-waste, produce or manufacture electrical and electronic equipment? | | No production of electrical or electronic equipment, the e-waste can be generated from procured items to be used in office. | |
| 36. | Has the grantee obtained SPCB authorization on e-waste? | Yes | Yes, The Institute has standard procedures for disposal of E-waste | |
| 37. | Does the grantee channelize the e-waste to authorized recycling or disposal facility? | Yes | Name and address of disposal facility/recycler: Inhouse or outsourced Facility: | The E-waste is handed over to Chintan Environmental research and action group. Outsourced Facility |
| 38. | Does the manufacturing grantee have Extended Producer Responsibility system and EPR-authorization in place? | NA | Describe: | No Manufacturing Done |
| 39. | Does the grantee practice reduction in the usage of hazardous substances in the manufacture of electrical and electronic equipment and its parts? | NA | | No Manufacturing Done |
| 40. | Does the grantee provide detailed information on the constituents of the equipment and their components/spares and declaration of conformation to Reduction in Hazardous Substances in the product user documentation? | NA | | No Manufacturing Done |
| 40. | Does the grantee maintain a record of collection, storage, sale and transport of e-waste? | NA | | Done by collection agency. |
| 41. | Does the grantee submit annual reports on e-waste to SPCB? | NA | | Done by collection agency. |
| 42. | Is there accident reporting and records in place? | Yes | | |
| 43. | Are PPEs available to staff? | NA | | |
| 44. | Is the grantee involved in manufacture of batteries? | No | | |
| 45. | Does the grantee generate battery waste? | Yes | | |
| 46. | Does the grantee deposit the battery waste to registered recycler/dealer/manufacture/reconditioner/collection center? | Yes | Name and address of battery waste receiving entity: | Chintan Environmental research and action group. 238, Sidhartha Enclave, New Delhi, India - 110014 |
| 47. | In case of manufacturing, does the grantee comply to Battery Management Rules 2000 and ensure collection of old batteries? | NA | | |

Other

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| 48. | Does the grantee use any radioactive materials (isotopes tracers, radiation equipment, etc)? | NA | Not required for the TTO. |
| | Does the grantee have appropriate radioactive material and waste storage and disposal system in place? | NA | Describe: |
| | Are radioactive warning signs in place? | NA | |
| 49. | Is the lab/room air regularly checked for microbial contamination? | NA | |
| 50. | Are there any odor control measures in place? | NA | |
| 51. | Are fume hoods and exhausts regularly checked and maintained? | NA | |
| 52. | Does the grantee use DG set > 15 KVA? | NA | |
| | Does the grantee have consent for DG > 15 KVA? | NA | |
| | Are emissions from boilers and DG sets regularly monitored to be within the prescribed norms? | NA | |
| 53. | 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? | NA | Describe |
| 54. | Is wastewater treated separately by the grantee? (Liquid waste from laboratory, chemicals, fluids, solvents, medium and cultures, coolants, etc.) | NA | Types of wastewater: |
| | | | Treatment of wastewater: |
| | | | Chemical management in wastewater treatment plants: |
| | Are there sludge management and cut off drains in place for wastewater? | NA | |
| 55. | Are necessary provisions for noise cancellation in place? | | Describe: |
| 56. | Are there any settlements, water bodies, cultivated land, or any other eco-sensitive areas near the grantee's premises? | | Describe: |
| | | | Distance from premises: |
| 57. | Are there any buffers, fire vehicle routes in the grantee's premises? | | |