



OFFICE OF THE BLOCK PUBLIC HEALTH OFFICER
BLOCK PROGRAMME MANAGEMENT AND SUPPORTING UNIT
CHC PARLA, DIST: KALAHANDI, ODISHA, PIN-766103
Ph.No.9439980413, E-mail-bpmuparla11@gmail.com



Letter No:- 558

Date:- 18/03/2024

To
**The Regional Officer,
State Pollution Control Board, Rayagada
Odisha.**

Sub:- Submission of BMW Annual Report of CHC Parla for the Year 2023
i.e from Dtd.01.01.2023 to Dtd.31.12.2023.

Sir,

In inviting a reference to the subject cited above , I am to submit here
with the Annual Report for the year 2023 i.e from **Dtd.01.01.2023** to
Dtd.31.12.2023 of CHC Parla ,Kalahandi.

Yours Faithfully,


Block Public Health ,Officer
CHC ,Parla

Memo No.: 559 Date 18/03/2024

Copy submitted to State Pollution Control Board, Odisha, Paribesh
Bhawan, A/118, Nilakanthanagar, UNIT-VIII, Bhubaneswar, Kalahandi for
favour of information and necessary action.


Block Public Health ,Officer
CHC ,Parla

Memo No.: 560 Date: 18/03/2024

Copy submitted to the CDM&PHO,Kalahandi for favour of kind
information.


Block Public Health ,Officer
CHC ,Parla


Block Public Health Officer
CHC, PARLA

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	: BPHO, CHC PARLA
	(i) Name of the authorised person (occupier or operator of facility)	: Dr. Gouranga Charan Giri
	(ii) Name of HCF or CBMWTF	: CHC, PARLA
	(iii) Address for Correspondence	: AT- PARLA, PO- PARLA
	(iv) Address of Facility	: DHARAMGARH, KALAHANDI
	(v) Tel. No, Fax. No	:
	(vi) E-mail ID	: bpmuparla11@gmail.com
	(vii) URL of Website	:
	(viii) GPS coordinates of HCF or CBMWTF	:
	(ix) Ownership of HCF or CBMWTF	: (State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	: Authorisation No.: 67.10/S.P.C.B.....valid up to 31.03.23
(xi). Status of Consents under Water Act and Air Act	: Valid up to:	
2.	Type of Health Care Facility	:
	(i) Bedded Hospital	: No. of Beds:.....06
	(ii) Non-bedded hospital	:
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:
3.	Details of CBMWTF	:
	(i) Number healthcare facilities covered by CBMWTF	:
	(ii) No of beds covered by CBMWTF	: 06
	(iii) Installed treatment and disposal capacity of CBMWTF:	: _____ Kg per day
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	: _____ Kg/day
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	: Yellow Category : 218 kg. 05 l
		: Red Category : 207 kg. 130 gm
		: White: 1 kg. 921 gm.
		: Blue Category : 188 kg. 435 gm
		: General Solid waste: 326 kg. 801 gm
5	Details of the Storage, treatment, transportation, processing and Disposal Facility	
	(i) Details of the on-site storage facility	: Size : 21 X 18 Sqft.
		: Capacity :
	Provision of on-site storage : (cold storage or any other provision)	

disposal facilities		Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)	-		
(iv) No of vehicles used for collection and transportation of biomedical waste	:		-		
(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum			Quantity generated	Where disposed	
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	Incineration Ash ETP Sludge			
(vii) List of member HCF not handed over bio-medical waste.					
6 Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period					
7 Details trainings conducted on BMW					
(i) Number of trainings conducted on BMW Management.		01			

	(ii) number of personnel trained		59
	(iii) number of personnel trained at the time of induction		
	(iv) number of personnel not undergone any training so far		
	(v) whether standard manual for training is available?		Yes
	(vi) any other information		
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		
	(ii) Number of the persons affected		
	(iii) Remedial Action taken (Please attach details if any)		
	(iv) Any Fatality occurred, details.		
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		
	Details of Continuous online emission monitoring systems installed		
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		
11	Is the disinfection method or sterilization meeting the log 4 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)

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

2023

[Signature] / 18-3-24
 Name and Signature of the Head of the Institution
Block Public Health Officer
GHC, PARLA

Date: 18.03.24
 Place: CHC PARLA

**MONTH WISE DETAILS OF THE WASTE GENERATED FROM DIFFERENT COLOURED BINS
DURING THE YEAR-2023**

MONTH	Quantity of wastes generated from different bins in kg				
	From Black Bin	From Yellow Bin	From Red Bin	From Blue Bin	From Zerikane
Jan-23	35.7	9.156	8.44	10.4	0.148
Feb-23	32.3	10.41	9.48	9.92	0.123
Mar-23	34.8	9.93	11.32	8.7	0.166
Apr-23	34	9.96	9.1	9.51	0.131
May-23	24	10.35	12.52	10.11	0.174
Jun-23	23	7.57	8.58	7.74	0.125
Jul-23	28	20	18.325	8.935	0.178
Aug-23	30	21.65	23.59	21.93	0.14
Sep-23	20	28.395	26.425	23.55	0.142
Oct-23	22	30.44	23.35	27.12	0.174
Nov-23	18	31.53	28.92	25.61	0.216
Dec-23	25	28.66	27.08	24.91	0.204
Total	326.8	218.051	207.13	188.435	1.921


 Block Public Health Officer
 CHC, PARLA
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