## GOVERNMENT OF PUDUCHERRY DEPARTMENT OF SCIENCE, TECHNOLOGY & ENVIRONMENT

## ACTION PLAN FOR COMPLIANCE OF THE PROVISIONS OF THE BIO-MEDICAL WASTE MANAGEMENT RULES, 2016





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Sl. No	Provisions of BMWM Rules, 2016	<b>Compliance Status</b>	Action Plan for compliance of non-compliance provisions of the Rules
Rule	-4: Duties of the Occupier		
(a)	Take all necessary steps to ensure that bio-medical waste is handled without any adverse effect to human health and the environment and in accordance with these rules;	All the Health Care Facilities (HCF) were directed vide No. 1/PPCC/BMW/JSA/2016/, dt 16.06.2016 to ensure handling of Bio-medical waste as per the provisions of BMW Rules, 2016. Awareness programmes are being organised to all the Health Care Staff.	Periodical inspections of all HCF will be carried out on time bound manner to ensure proper handling of BMW. (Action: Puducherry Pollution Control Committee (PPCC), Directorate of Medical Service (DMS), Local Administration Department (LAD), Time Limit: 3 months)
(b)	Bio-medical waste shall be treated and disposed of in accordance with Schedule I, and in compliance with the standards provided in Schedule-II by the health care facilities and common bio-medical waste treatment facility.	All the, HCFs are applied for authorisation under BMW Rules. All are entered agreement with Common Bio-medical Waste Treatment Facility (BMWTF) and disposing their BMW through CBMWTF.	Through surprise inspection in HCF, collection and segregation in stipulated colour bin will be ensured. Operating standards of the incinerator viz: combustion efficiency, Temperature of the Primary chamber and Secondary chamber will be ensured by deputing a person by Puducherry Pollution Control Committee (PPCC). Emissions standards will be ensured by conducting periodical monitoring by Central Pollution Control Board (CPCB), PPCC, NABL accredited Laboratory and Continuous Online Emission Monitoring System (COEMS). (Action: PPCC, CPCB, CBMWTF, Time Limit: 2 months).
(c)	Pre-treatment of Laboratory waste, microbiology waste, blood bags and blood samples through on-site disinfection or sterilization.	It is being ensured while inspection and a condition has been incorporated in the authorization in this regard.	Availabilityofrequiredinstrumentsforpre-treatmentinHCF will be ensured.(Action: PPCC, DMS, Time)

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(d)	Phasing out of chlorinated plastic bags, gloves and blood bags within two years.	A Circular has been sent on 16.06.2016 to the all HCFs. Due to non- availability of non- chlorinated plastic bags in the market, and its higher cost, only normal plastics bags are used for waste collection.	Action will be initiated to procure non-chlorinated bags from adjoining States and will be supplied to all the HCF through CBMWTF. (Action: PPCC, CBMWTF, Time limit: 2 months).
(e)	dispose of solid waste other than bio-medical waste in accordance with the provisions of respective waste management rules made under the relevant laws and amended from time to time;	Solid waste other than the Bio-medicate wastes are collected and disposed by the local bodies through M/s. Swachatha Corporation.	
(f)	not to give treated bio-medical waste with municipal solid waste;	Not allowed to mix Bio- medical waste with Municipal solid waste.	It is ensured by periodical inspection.
(g)	provide training to all its health care workers and others, involved in handling of bio medical waste at the time of induction and thereafter at least once every year and the details of training programmes conducted, number of personnel trained and number of personnel not undergone any training shall be provided in the Annual Report;	Training Programmes are being conducted in hospitals. So far, eight trainings programme were conducted by PPCC. Besides in-house training programmes are periodically organised by HCF.	Details of training programme conducted will be incorporated in the Annual Report for the years 2019 onwards. (Action: PPCC, All HCF, Time Limit: 3 months).
(h)	immunise all its health care workers and others, involved in handling of bio-medical waste for protection against diseases including Hepatitis B and Tetanus that are likely to be transmitted by handling of bio- medical waste, in the manner as prescribed in the National Immunisation Policy or the guidelines of the Ministry of Health and Family Welfare issued from time to time;	Immunizations of health care workers have been carried out by respective HCF and CBMWTF.	All the private HCF will be directed to maintain record of immunization provided. (Action: PPCC, HCF, Time Limit: 1 month).

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(i)	Establish a Bar-Code System for bags or containers containing bio-medical waste to be sent out of the premises or place for any purpose within one year from the date of the notification of these rules;	A brain storm session was conducted on 27.03.2018 to all the HCF and CBMWTF about Bar- Code System. It is yet to be adopted	All the HCF and CBMWTF will be again directed to adopt Bar- Code System at the earliest. PPCC will facilitate in this regard. (Action: PPCC, Time Limit: 3 months).
(j)	Ensure segregation of liquid chemical waste at source and ensure pre-treatment or neutralisation prior to mixing with other effluent generated from health care facilities;	Segregation of liquid chemical waste at source is ensured during inspection and a condition in this regard is incorporated in the authorisation issued.	Frequent inspection of HCF will be undertaken. (Action: PPCC, Time Limit: Continuous process).
(k)	Ensure treatment and disposal of liquid waste in accordance with the Water (Prevention and Control of Pollution) Act,1974 (6 of 1974)	All the major hospital and Medical Colleges are provided ETP Effluent sampling are carried out to ensure standard compliance: Periodical third party monitoring are also being carried out. Direction under Section 33(A) of Water Act is issued to violating HCF.	All the above 50 bedded HCF will be directed to provide ETP/STP within 3 months. (Action: PPCC, Time Limit: 3 months).
(1)	Ensure occupational safety of all its health care workers and others involved in handling of bio-medical waste by providing appropriate and adequate personal protective equipments;	All the health care worker involved in handling of Bio-medical waste are provided with mask, gloves, and boots.	ë i
(m)	Conduct health check up at the time of induction and at least once in a year for all its health care workers and others involved in handling of bio- medical waste and maintain the records for the same;	Health checkup is being conducted once in a year.	Register will be maintained in this regard. (Action: HCF).
(n)	Maintain and update on day to day basis the bio-medical waste management register and display the monthly record on its website according to the bio- medical waste generated in terms of category and colour coding as specified in Schedule I	Currently records on generation of BMW are maintained.	All the HCF will be directed to host the details on their website. (Action: PPCC, HCF, Time Limit: 1 month).

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(0)	Report major accidents including accidents caused by fire hazards, blasts during handling of bio-medical waste and the remedial action taken and the records relevant thereto, (including nil report) in Form I to the prescribed authority and also along with the annual report;	No such report has been received.	All the HCF will be directed to submit Form-I along with Annual Report. (Action: PPCC, Time Limit: 1 month).
(p)	Make available the annual report on its web-site and all the health care facilities shall make own website within two years from the date of notification of these rules;	Annual report is available on the PPCC Website: https://dste.py.gov.in	All the HCF will be directed to upload their Annual Report in their website. (Action: PPCC, HCF, Time Limit: 3 months).
(q)	Inform the prescribed authority immediately in case the operator of a facility does not collect the bio-medical waste within the intended time or as per the agreed time;	Few incidents of not collection of BMW were reported to PPCC. Action was taken to collect it immediately.	A good communication system will be establish to redress the issue. (Action: PPCC, CBMWTF, Time Limit: 2 months).
(r)	Establish a system to review and monitor the activities related to bio-medical waste management, either through an existing committee or by forming a new committee and the Committee shall meet once in every six	State Advisory Committee (SAC) is being constituted. It will review and monitored the activities related to Bio-medical Waste Management.	SAC will meet once in 6 months and assess the waste management system.
	months and the record of the minutes of the meetings of this committee shall be submitted along with the annual report to the prescribed authority and the healthcare establishments having less than thirty beds shall designate a qualified person to review and monitor the activities relating to bio-medical waste management within that establishment and submit the annual report;		(Action: DMS).
(s)	Maintain all record for operation of incineration, hydro or autoclaving etc., for a period of five years;	No captive incinerator exists in the U.T. Puducherry except Mahe. Record is maintained for	Available records will be examined once in 6 months.

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		the operation of incinerator.	(Action: PPCC).
(t)	Existing incinerators to achieve the standards for treatment and disposal of bio-medical waste as specified in Schedule II for retention time in secondary chamber and Dioxin and Furans within two years from the date of this notification.	Only one incinerator is available in CBMWTF. One of the pollutant parameter i.e. $PM_{10}$ exceeded the prescribed standard. Bank Guarantee of Rs. 2 lakhs given by the occupier of the facility had been forfeited for non compliance.	upgraded inorder to meet retention time. (Action: CBMWTF, Time
Rule -	- 5: Duties of the operator of a comm	on bio-medical waste treatmer	nt and disposal facility:-
(a)	Take all necessary steps to ensure that the bio-medical waste collected from the occupier is transported, handled, stored, treated and disposed of, without any adverse effect to the human health and the environment, in accordance with these rules and guidelines issued by the Central Government or, as the case may be, the central pollution control board from time to time;	Bio-medical waste collected from the HCF is transported, treated and disposal by the CBMWTF without any adverse impact to human health and environment.	Periodical inspection will be carried out to ensure the compliance. (Action: CPCB, PPCC).
(b)	Ensure timely collection of bio- medical waste from the occupier as prescribed under these rules;	hours, BMW are collected and disposal by CBMWTF. During maintenance time the waste is disposed in CBMWTF located in Tamil Nadu.	(Action: CBMWTF, PPCC).
(c)	Establish bar coding and global positioning system for handling of bio- medical waste within one year;	GPS has been fixed in all the vehicles.	<ul><li>Bar Coding system will be implemented at the earliest.</li><li>(Action: CBMWTF, Time Limit: 2 months).</li></ul>
(d)	Inform the prescribed authority immediately regarding the occupiers which are not handing over the segregated bio-medical waste in accordance with these rules;	Occupier of CBMWTF informing PPCC about non segregated waste of HCF.	An effective communication network will be established to redress the issue. (Action: CBMWTF, PPCC, Time Limt: 1 month).

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(e)	Provide training for all its workers involved in handling of bio-medical waste at the time of induction and at least once a year thereafter;	Periodical training is being imparted to all the workers.	CBMWTF will submit the details of the programme to PPCC. (Action: CBMWTF, PPCC).
(f)	Assist the occupier in training conducted by them for bio- medical waste management;	Technical persons of CBMWTF are assisting the HCF in conducting training programme.	CBMWTF will submit quarterly report in this regard. (Action: CBMWTF).
(g)	Undertake appropriate medical examination at the time of induction and at least once in a year and immunise all its workers involved in handling of bio-medical waste for protection	Medical Checkup of the worker is conducted annually.	Register shall be maintained in this regard and will be verified by PPCC.
	against diseases, including Hepatitis B and Tetanus, that are likely to be transmitted while handling bio-medical waste and maintain the records for the same;		(Action: CBMWTF, PPCC).
(h)	Ensure occupational safety of all its workers involved in handling of bio-medical waste by providing appropriate and adequate personal protective equipment;	All the workers have been provided with mask, gloves and boots.	
(i)	Report major accidents including accidents caused by fire hazards, blasts during handling of biomedical waste and the remedial action taken and the records relevant thereto, (including nil report) in Form I to the prescribed authority <b>and</b> <b>also</b> along with the annual report;	No accidents in the CBMWTF occurred so far.	
(j)	Maintain a log book for each of its treatment equipment according to weight of batch; categories of waste treated; time, date and duration of treatment cycle and total hours of operation;	Log book is being maintained.	

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(k)	Allow occupier, who are giving waste for treatment to the operator, to see whether the treatment is carried out as per the rules;	Yes, occupier are inspecting the facility.	Details of occupier visit will be maintain in register.
(1)	Shall display details of authorisation, treatment, annual report etc on its web-site;	Displayed on CBMWTF website.	
(m)	After ensuring treatment by autoclaving or microwaving followed by mutilation or shredding, whichever is applicable, the recyclables from the treated bio-medical wastes such as plastics and glass, shall be given to recyclers having valid consent or authorisation or registration from the respective State Pollution Control Board or Pollution Control Committee;	Yes complied with	Details of plastic waste generated and disposal agency will be submitted to PPCC. (Action: CBMWTF).
(n)	Supply non-chlorinated plastic coloured bags to the occupier on chargeable basis, if required;	Will be supplied	The CBMWTF supplies plastic bags for BMW collection only for four healthcare facilities in Puducherry and Karaikal. Since local vendors for supply of non- chlorinated plastic bags are not available, the operator will find vendors from other states and inform all healthcare facilities within 30 days. (Action: CBMWTF, HCF).
(0)	Common bio-medical waste treatment facility shall ensure collection of biomedical waste on holidays also;	Yes, it is collected during holidays also.	(
(p)	Maintain all record for operation of incineration, hydro or autoclaving for a period of five years;	Records are maintained	Records are verified during inspection.
(q)	Upgrade existing incinerators to achieve the standards for retention time in secondary chamber and Dioxin and Furans	Incinerators will be upgraded.	The BMW Incinerator at the CBMWTF was constructed as per American Incineration Institute Standards with a baffle

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	within two years from the date of this notification.	The Incinerator was recently modified to have Primary Chamber with a crate area of 2.06 m <sup>2</sup> (Primary Chamber has an effective volume of 1.235 m <sup>3</sup> considering a BMW charging height of 0.6m) and new Secondary Chamber with a baffle wall is having an effective volume of 10.2 m <sup>3</sup> This ensures a residence time of 2 seconds in the Secondary Chamber which	wall in the secondary chamber. The Incinerator was recently modified to have Primary Chamber with a crate area of 2.06 m <sup>2</sup> (Primary Chamber has an effective volume of 1.235 m <sup>3</sup> considering a BMW charging height of 0.6m) and new Secondary Chamber with a baffle wall is having an effective volume of 10.2 m <sup>3</sup> This ensures a residence time of 2 seconds in the Secondary Chamber which prevent Dioxin and Furans emission.
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5	- 6. Duties of Authorities Schedule		4 A J
(i)	State Government of Health or To ensure implementation of the rule in all health care facilities or occupiers	Implemented BMWM Rules in all Govt. & Private Hospitals along with enforcing the Clinical Establishment Act, 2010.	State Advisory Committee will monitor implementation of Bio- medical Waste Management Rules, 2016.
(ii)	Allocation of adequate funds to Government health care facilities for bio-medical waste management.	Necessary funds have been allotted by Govt. for implementing BMWM.	Fund allocation will be ensured.
(iii)	Procurement and allocation of treatment equipments and make provision for consumables for bio-medical waste management in Government health care facilities.	Necessary funds has been allocated every year by the Health Dept. for Procurement and allocation of treatment equipments and consumables for bio- medical waste management in Government health care facilities.	Availability of necessary instruments for treatment of BMW would be ensured.
(iv)	Constitute State or District Level Advisory Committees under the District Magistrate or Additional District Magistrate to oversee the bio-medical waste management in the Districts.	State or District Level Advisory Committees formation is under process.	Proposal of constitution of State Level Advisory Committee has been submitted to Election Department for concurrence.

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(v)	Advise State Pollution Control Boards or Pollution Control Committees on implementation of these rules.	In coordination with Puducherry Pollution Control Committee many brainstorming programms were conducted on the provisions of BMW Rules, 2016 It is being implemented effectively.	Through periodical interaction sessions and Advisory Committee meetings, effective implementation of the provisions of BMW Rules, 2016 will be ensured.
(vi)	Implementation of recommendations of the Advisory Committee in all the health care facilities.	The recommendations of the Advisory Committee will be followed after the formation of State Advisory Committees. At present BMWM Rules is implemented along with the Clinical Establishment Act ,2010.	The recommendations of the Advisory Committee will be followed after the formation of the State Advisory Committees.
6	State Pollution Control Boards		ttees
(i)	Inventorisation of Occupiers and data on bio-medical waste generation, treatment & disposal.	Details of BMW generation, treatment and disposal are available. Comprehensive invent irrigation yet to be prepared.	stakeholders and will be send to
(ii)	Compilation of data and submission of the same in annual report to Central Pollution Control Board within the stipulated time period.	submitted to CPCB for the	
(iii)	Grant and renewal, suspension or refusal cancellation or of authorisation under these rules (Rule 7, 8 and 10).	Authorisation under BMW Rules, 2016 for all the HCF who had entered an agreement for CBMWTF are granted / renewed.	Authorisation to all have the HCF, will be granted who complied with the provision of BMWM Rules, 2016. (Action: PPCC, Time Limit: 2 months).
(iv)	Monitoring of compliance of various provisions and conditions of authorisation.	It is being monitored while issue/renewal of authorisation.	
(v)	Action against health care facilities or common bio- medical waste treatment facilities for violation of these rules (Rule 18).	If non-compliance is observed direction/show cause notice is being issued to the HCFs & CBMWTF. Rs. 2.0 lakhs was forfeited from	

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		CBMWTF for non- compliance of emission standard of Bio-medical Waste Management Rules, 2016. PPCC has filed 3 cases under Section 19 of Environment (Protection) Act, 1986 before Judicial Magistrate, Puducherry against the following Medical Colleges and Hospitals for violation of Bio-medical Waste (Management & Handling )Rules, 1998. M/s. Mahatma Gandhi Medical College & Research Institute M/s. Arupadai Veedu Medical College & Hospital and M/s.AG Padmavathi's Hospital.	HCF will be initiated including disconnection of power and filing of case under provision of
(vi)	Organizing training prgrammes to staff of health care facilities and common bio-medical waste treatment facilities and State Pollution Control Boards or Pollution Control Committees Staff on segregation, collection, storage, transportation, treatment and disposal of bio-medical waste.	First training programme was conducted on 08.07.2016 and 29.03.2018 to the	Periodical Training Programme will be organised to different level stakeholders. (Action: PPCC, Time Limit: Continuous activity).
(vii)	Undertake or support research or operational research regarding bio-medical waste management.	Will be carried out	In collaboration with academic institution, research on BMW management will be under taken. (Action: PPCC, Time Limit: 6 months).
(viii)	Any other function under these rules assigned by Ministry of Environment, Forest and Climate Change or Central Pollution Control Board from time to time.	NA	

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(ix)	ImplementationofrecommendationsofAdvisory Committee.	Advisory Committee is being constituted.	
(x)	Publish the list of Registered or Authorised plastic recyclers.	List of Registered/Authorised plastic Recycler has been hosted in PPCC Website: https://dste.py.gov.in	
(xi)	Undertake and support third party audits of the Common bio- medical waste treatment facilities in their state.	Third party monitoring is being carried out through NABL accredited laboratory.	
7	Municipalities or Corporations	, Urban Local Bodies and	Gram Panchayats
(i)	Provide or allocate suitable land for development of common bio-medical waste treatment facilities in their respective jurisdictions as per the guidelines of Central Pollution Control Board.		Suitable land will be allocated if necessary arise.
(ii)	Collect other solid waste (other than the bio-medical waste) from the health care facilities as per the Municipal Solid Waste (Management and handling) Rules, 2000 or as amended time to time.	Local Bodies are collecting solid waste stored in black bags on payment basis.	Local Bodies will continue to collect solid waste from HCF.
(iii)	Any other function stipulated under these Rules.	Director, Local Administration Department is a member in the Advisory Committee to be constituted as per the BMWM Rules.	As a member of the Advisory Committee, Director, LAD, will contribute technical input for the effective enforcement of the provisions of the Rules.
	7:Treatment and disposal		
(1)	Bio-medical waste shall be treated and disposed of in accordance with Schedule I, and in compliance with the standards provided in Schedule-II by the health care facilities and common bio-medical waste	BMW are segregated in different color coded bins. It is collected transported and disposed by CBMWTF. This facility is being monitoring by PPCC, CPCB and NABL	

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	treatment facility.	accredited Laboratory for compliance of various standards.	
(2)	Occupier shall hand over segregated waste as per the Schedule-I to common bio- medical waste treatment facility for treatment, processing and final disposal: Provided that the lab and highly infectious bio- medical waste generated shall be pre-treated by equipment like autoclave or microwave.	All the HCF are disposing BMW through CBMWTF. All the 50 and above bedded HCF are having Autoclave for pre- treatment.	All the HCF will be ensured to have pre-treatment equipment. (Action: PPCC, HCF, Time Limit: 6 months).
(3)	No occupier shall establish on- site treatment and disposal facility, if a service of ` common biomedical waste treatment facility is available at a distance of seventy-five kilometer.	As one CBMWTF is available at Thuthipet, Villianur Commune Panchayat, no HCF is having on site treatment and disposal facility.	
(4)	In cases where service of the common bio-medical waste treatment facility is not available, the Occupiers shall set up requisite biomedical waste treatment equipment like incinerator, autoclave or microwave, shredder prior to commencement of its operation, as per the authorisation given by the prescribed authority.	Service of CBMWTF is not available in Mahe region of U.T. of Puducherry. Hence, BMW are disposed in an incinerator available in general hospital Mahe.	
(5)	Any person including an occupier or operator of a common bio medical waste treatment facility, intending to use new technologies for treatment of bio medical waste other than those listed in Schedule I shall request the Central Government for laying down parameter the standards or operating parameters.	65	
(6)	On receipt of a request referred to in sub-rule (5), the Central Government may determine the standards and operating parameters for new technology	NA	

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	which may be published in Gazette by the Central Government.		
(7)	Every operator of common bio- medical waste treatment facility shall set up requisite biomedical waste treatment equipments like incinerator, autoclave or microwave, shredder and effluent treatment plant as a part of treatment, prior to commencement of its operation.	M/s. Pondicherry Solid Waste Management Company Pvt. Ltd, the Common Biomedical Waste Treatment Facility has installed all the required treatment equipments like incinerator, autoclave or microwave, shredder and effluent treatment plant as a part of treatment.	
(8)	Every occupier shall phase out use of non-chlorinated plastic bags within two years from the date of publication of these rules and after two years from such publication of these rules, the chlorinated plastic bags shall not be used for storing and transporting of bio-medical waste and the occupier or operator of a common bio- medical waste treatment facility shall not dispose of such plastics by incineration and the bags used for storing and transporting biomedical waste shall be in compliance with the Bureau of Indian Standards. Till the Standards are published, the carry bags shall be as per the Plastic Waste Management	Due to non-availability of non-chlorinated plastic bag in the market, it yet to be replaced the existing plastic bag. The carry bag currently being used is as per the provision of Plastic Waste Management Rules, 2016.	All the HCF and CBMWTF will be directed to shift to non- chlorinated plastic bag with one month. PPCC will facilitate for the availability of these bag from neighbouring States. (Action: PPCC, CBMWTF, HCF, Time Limit: 2 months.)
(9)	Rules, 2011. After ensuring treatment by autoclaving or microwaving followed by mutilation or shredding, whichever is applicable, the recyclables from the treated bio-medical wastes	Yes, CBMWTF after disinfection by autoclave, the treated BMW plastic & glass waste are given to the registered recyclers.	CBMWTF is directed to submit quarterly report in this regard to PPCC.
	such as plastics and glass shall be given to such recyclers having valid authorisation or		(Action: PPCC, CBMWTF, Time Limit: 1 month).

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	registration from the respective prescribed authority.		
(10)	The Occupier or Operator of a common bio-medical waste treatment facility shall maintain a record of recyclable wastes referred to in sub-rule (9) which are auctioned or sold and the same shall be submitted to the prescribed authority as part of its annual report. The record shall be open for inspection by the prescribed authorities.	Record is not maintained.	Record will be maintained. (Action: CBMWTF, Time Limit: 1 month).
(11)	The handling and disposal of all the mercury waste and lead waste shall be in accordance with the respective rules and regulations.	Currently mercury & lead waste are stored insitu.	Action will be taken to enter agreement with TSDF of adjoining States for the disposal of Mercury & Lead Waste. (Action: PPCC, CBMWTF, Time Limit: 2 months).
Rule-8	8: Segregation, packaging, transporta	ation and storage	
(1)	No untreated bio-medical waste shall be mixed with other wastes.	This is ensured by the local bodies and CBMWTF, while collecting the respective waste.	
(2)	The bio-medical waste shall be segregated into containers or bags at the point of generation in accordance with Schedule I prior to its storage, transportation, treatment and disposal.	It is being ensured before issue of authorisation by way of inspection.	Periodical inspection will be carried out to ensure proper segregation. (Action: PPCC).
(3)	The containers or bags referred to in sub-rule (2) shall be labeled as specified in Schedule IV.	Yes, proper labelling is in place in all the HCF.	
(4)	Bar code and global positioning system shall be added by the Occupier and common bio- medical waste treatment facility in one year time.	GPS has been fixed in all the vehicles of CBMWTF.	The CBMWTF has been directed to provide bar code within 15 days. (Action: CBMWTF).
(5)	The operator of common bio- medical waste treatment facility shall transport the bio-medical waste from the premises of an	Yes, it is followed by CBMWTF in the form of card system.	

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	occupier to any off-site bio- medical waste treatment facility only in the vehicles having label as provided in part 'A' of the Schedule IV along with necessary information as specified in part 'B' of the Schedule IV.		
(6)	The vehicles used for transportation of bio-medical waste shall comply with the conditions if any stipulated by the State Pollution Control Board or Pollution Control Committee in addition to the requirement contained in the Motor Vehicles Act, 1988 (59 of 1988), if any or the rules made there under for transportation of such infectious waste.	PPCC stipulated to have dedicated vehicle with proper labelling for transport of BMW. CBMWTF is having 5 vehicles for transportation of BMW. GPS has been fixed in all the 5 vehicles.	GPS connectivity will be given to PPCC portal. (Action: CBMWTF, Time Limit: 1 month).
(7)	Untreated human anatomical waste, animal anatomical waste, soiled waste and, biotechnology waste shall not be stored beyond a period of forty–eight hours: Provided that in case for any reason it becomes necessary to store such waste beyond such a period, the occupier shall take appropriate measures to ensure that the waste does not adversely affect human health and the environment and inform the prescribed authority along with the reasons for doing so.	CBMWTF is collecting and transporting BMW everyday even on Sundays. If any break down or shutdown of CBMWTF, PPCC is being informed and the waste are disposed in other CBMWTF located in Tamil Nadu.	Agreement in this regard shall be made with CBMWTF of Tamil Nadu. (Action: CBMWTF, Time Limit: 2 months).
(8)	Microbiology waste and all other clinical laboratory waste shall be pre-treated by sterilisation to Log 6 or disinfection to Log 4, as per the World Health Organisation guidelines before packing and sending to the common bio-medical waste treatment facility.	Laboratory waste is disinfected before handling over to CBMWTF.	

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Rule-	9: Prescribed authority	·	
(1)	The prescribed authority for implementation of the provisions of these rules shall be the State Pollution Control Boards in respect of States and Pollution Control Committees in respect of Union territories.	Puducherry Pollution Control Committee act as prescribed authority for implementation of provision of this rules.	
(2)	The prescribed authority for enforcement of the provisions of these rules in respect of all health care establishments including hospitals, nursing homes, clinics, dispensaries, veterinary institutions, animal houses, pathological laboratories and blood banks of the Armed Forces under the Ministry of Defence shall be the Director General, Armed Forces Medical Services, who shall function under the supervision and control of the Ministry of Defence. The prescribed authorities shall	NA	
(3)	comply with the responsibilities as stipulated in Schedule III of these rules.	NA	
Rule	-10: Procedure for authorisation		
	(Every occupier or operator handling bio-medical waste, irrespective of the quantity shall make an application in Form II to the prescribed authority i.e. State PCB and PCC, as the case may be, for grant of authorisation and the prescribed authority shall grant the provisional authorisation in Form III and the validity of such authorisation for bedded health care facility and operator of a common facility shall be synchronised with the validity of the consents).	CTE & Authorisation are being issued to the HCFs, independently. Synchronisation of consent & authorisation is yet to be followed.	Online Consent Management & Monitoring System (OCMMS) is in near completion. Synchronisation of consent and authorisation will be executed once OCMS get implemented. (Action: PPCC, Time Limit: 3 months)

Sl. No	Provisions of BMWM Rules, 2016	Compliance Status	Action Plan for compliance of non-compliance provisions of the Rules
(1)	The authorisation shall be one time for non-bedded occupiers and the authorisation in such cases shall be deemed to have been granted, if not objected by the prescribed authority within a period of ninety days from the date of receipt of duly completed application along with such necessary documents.	Yes, For non-bedded HCFS, one-time registration is being issued.	
(2)	In case of refusal of renewal, cancellation or suspension of the authorisation by the prescribed authority, the reasons shall be recorded in writing: Provided that the prescribed authority	No such cases arise.	Provisions of the rules will be followed in case of refused or cancellation of authorisation.
	shall give an opportunity of being heard to the applicant before such refusal of the authorisation.		(Action: PPCC).
(3)	Every application for authorisation shall be disposed of by the prescribed authority within a period of ninety days from the date of receipt of duly completed application along with such necessary documents,	Generally all the completed Applications are being disposed on time.	Pendency status of issue of authorisation will be assessed and disposed at the earliest. (Action: PPCC, Time Limit: 3
	failing which it shall be deemed that the authorisation is granted under these rules.		months).
(4)	In case of any change in the bio- medical waste generation, handling, treatment and disposal for which authorisation was earlier granted, the occupier or operator shall intimate to the prescribed authority about the change or variation in the activity and shall submit a fresh	HCFs are following this provisions and informing the PPCC about the changes in the authorisation.	This provision will be put in PPCC website for the information of the HCF.
	application in Form II for modification of the conditions of authorisation.		(Action: PPCC, Time Limit: 1 week).

Sl. No	Provisions of BMWM Rules, 2016	Compliance Status	Action Plan for compliance of non-compliance provisions of the Rules
Rule-1	11: Advisory Committee		
(1)	Every State Government or	Advisory Committee is bein	g constituted.
	Union territory Administration shall constitute an Advisory Committee for the respective State or Union territory under	Proposal has been sent concurrence as Model Condu	to Election Commission for uct Code is in force.
	the chairmanship of the respective health secretary to oversee the implementation of		
	the rules in the respective state and to advice any improvements and the Advisory Committee shall include representatives		
	from the Departments of Health, Environment, Urban		
	Development, Animal Husbandry and Veterinary Sciences of that State		
	Government or Union territory Administration, State Pollution		
	Control Board or Pollution Control Committee, urban local		
	bodiesorlocalbodiesorMunicipalCorporation,representativesfromIndian		
	Medical Association, common bio-medical waste treatment		
	facility and non-governmental organisation.		
(2)	Notwithstanding anything contained in sub-rule (1), the Ministry of Defence shall constitute the Advisory Committee (Defence) under the		
	chairmanship of Director General of Health Services of Armed Forces consisting of representatives from the Ministry of Defence, Ministry of Environment, Forest and	NA	
	Climate Change, Central		

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	PollutionControlBoard,Ministry of Health and FamilyWelfare, Armed Forces MedicalCollege or Command Hospital.		
(3)	The Advisory Committee constituted under sub-rule (1) and (2) shall meet at least once in six months and review all matters related to implementation of the provisions of these rules in the State and Armed Forces Health Care Facilities, as the case may be.	Will be complied with	Once Election Commission give its assent, Advisory Committee will be notified and review meeting will be held.
(4)	The Ministry of Health and Defence may co-opt representatives from the other Governmental and non- governmental organisations having expertise in the field of bio-medical waste management.	NA	
Rule-1	12: Monitoring of implementation of	the rules in health care faciliti	es
(1)	The Ministry of Environment, Forest and Climate Change shall review the implementation of the rules in the country once in a year through the State Health Secretaries and Chairmen or Member Secretary of State Pollution Control Boards and Central Pollution Control Board and the Ministry may also invite experts in the field of bio- medical waste management, if required.	In the Conference of Chairman/Member Secretary, State Pollution Control Boards / Committee the implementation status is reviewed.	
(2)	The Central Pollution Control Board shall monitor the implementation of these rules in respect of all the Armed Forces health care establishments under the Ministry of Defence.	NA	
(3)	The Central Pollution Control Board along with one or more representatives of the Advisory Committee constituted under	NA	

SI. No	Provisions of BMWM Rules, 2016	<b>Compliance Status</b>	Action Plan for compliance of non-compliance provisions of the Rules
	sub-rule (2) of rule 11, may inspect any Armed Forces health care establishments after prior intimation to the Director General Armed Forces Medical Services.		
(4)	Every State Government or Union territory Administration shall constitute District Level Monitoring Committee in the districts under the chairmanship of District Collector or District Magistrate or Deputy Commissioner or Additional District Magistrate to monitor the compliance of the provisions of these rules in the health care facilities generating bio-medical waste and in the common bio- medical waste treatment and disposal facilities, where the bio- medical waste is treated and disposed of.		
(5)	The District Level Monitoring Committee constituted under sub-rule (4) shall submit its report once in six months to the State Advisory Committee and a copy thereof shall also be forwarded to State Pollution Control Board or Pollution Control Committee concerned for taking further necessary action.	Yet to be constituted.	District Level Monitoring Committee will be constituted for Karaikal District with prescribed members. (Action: DMS, Time Limit: 2 months).
(6)	The District Level Monitoring Committee shall comprise of District Medical Officer or District Health Officer, representatives from State Pollution Control Board or Pollution Control Committee, Public Health Engineering Department, local bodies or municipal corporation, Indian Medical Association, common bio-medical waste treatment		

SI. No	Provisions of BMWM Rules, 2016	Compliance Status	Action Plan for compliance of non-compliance provisions of the Rules
	facility and registered nongovernmental organisations working in the field of bio- medical waste management and the Committee may co-opt other members and experts, if necessary and the District Medical Officer shall be the Member Secretary of this Committee.		
Rule-	13: Annual report		
(1)	Every occupier or operator of common bio-medical waste treatment facility shall submit an annual report to the prescribed authority in Form-IV, on or before the 30th June of every year.	in Form-IV.	bmitting Annual Report to PPCC,
(2)	The prescribed authority shall compile, review and analyse the information received and send this information to the Central Pollution Control Board on or before the 31st July of every year.	Annual Report for the year 02.01.2019.	2017-2018 was sent to CPCB on
(3)	The Central Pollution Control Board shall compile, review and analyse the information received and send this information, along with its comments or suggestions or observations to the Ministry of Environment, Forest and Climate Change on or before 31st August every year.	NA	
(4)	The Annual Reports shall also be available online on the websites of Occupiers, State Pollution Control Boards and Central Pollution Control Board.	PPCC has uploaded the Annual Report for the year 2017-2018 in the website. HCF yet to host in their website.	All the HCF will be directed to host their Annual Report in their website. (Action: PPCC, Time Limit: 1 month).

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Rule-	14: Maintenance of records		
(1)	Every authorised person shall maintain records related to the generation, collection, reception, storage, transportation, treatment, disposal or any other form of handling of bio-medical waste, for a period of five years, in accordance with these rules and guidelines issued by the Central Government or the Central Pollution Control Board or the prescribed authority as the case may be.	HCFs & CBMWTF are maintaining records on BMWM.	
(2)	All records shall be subject to inspection and verification by the prescribed authority or the Ministry of Environment, Forest and Climate Change at any time.		
Rule-	15: Accident reporting	<u> </u>	
(1)	In case of any major accident at any institution or facility or any other site while handling bio- medical waste, the authorised person shall intimate immediately to the prescribed authority about such accident and forward a report within twenty-four hours in writing regarding the remedial steps taken in Form I. Information regarding all other accidents and remedial steps taken shall be provided in the annual report in accordance with rule 13 by the occupier.	No accident has been reported so far.	Occupier are advised to submit Form-I in the Authorisation issued.
Rule-	-16: Appeal	1	1
(1)	Any person aggrieved by an order made by the prescribed authority under these rules may, within a period of thirty days from the date on which the order		

SI. No	Provisions of BMWM Rules, 2016	Compliance Status	Action Plan for compliance of non-compliance provisions of the Rules
	is communicated to him, prefer an appeal in Form V to the Secretary (Environment) of the State Government or Union territory administration.		
(2)	Any person aggrieved by an order of the Director General Armed Forces Medical Services under these rules may, within thirty days from the date on which the order is communicated to him, prefer an appeal in Form V to the Secretary, Ministry of Environment, Forest and Climate Change.		This provision of the Rules will be incorporated in the Authorisation issued.
(3)	The authority referred to in sub- para (1) and (2) as the case may be, may entertain the appeal after the expiry of the said period of thirty days, if it is satisfied that the appellant was prevented by sufficient cause from filing the appeal in time.		(Action: PPCC).
(4)	The appeal shall be disposed of within a period of ninety days from the date of its filing.		
Rule-	17: Site for common bio-medical	waste treatment and disposa	l facility
(1)	Without prejudice to rule 5 of these rules, the department in the business allocation of land assignment shall be responsible for providing suitable site for setting up of common biomedical waste treatment and disposal facility in the State Government or Union territory Administration.	Already a CBMWTF has proponent M/s. Pondiche Company Pvt. Ltd., and it	been established by a private erry Solid Waste Management is in operation since 2011. It is al waste generated in Puducherry.
(2)	The selection of site for setting up of such facility shall be made in consultation with the prescribed authority, other	M/s. Pondicherry Solid W Ltd., has obtained all the sta	aste Management Company Pvt. tuary clearance.

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	stakeholders and in accordance with guidelines published by the Ministry of Environment, Forest and Climate Change or Central Pollution Control Board.		
Rule-	18: Liability of the occupier, oper	ator of a facility	
(1)	The occupier or an operator of a common bio-medical waste treatment facility shall be liable for all the damages caused to the environment or the public due to improper handling of bio-medical wastes.	Action has been initiated against M/s. Pondicherry Solid Waste Management	deemed fit in case of any
(2)	The occupier or operator of common bio-medical waste treatment facility shall be liable for action under section 5 and section 15 of the Act, in case of any violation.	conditions like forfeiting of bank guarantee etc.	