

# J&K POLLUTION CONTROL COMMITTEE

Jammu/Kashmir (www.jkspcb.nic.in)

## FORM III see rule 10

Authorization No. JKPCC/digital/4117475

Dated 22-10-2024

## AUTHORIZATION (RENEWAL) FOR OPERATING A FACILITY FOR GENERATION, COLLECTION, RECEPTION, TREATMENT, STORAGE, TRANSPORT AND DISPOSAL OF BIO-MEDICAL WASTE

To

Smt. Franciscan Sister of Mary, M/s St. Joseph's Hospital. Baramulla, Kashmir (J&K)

The Committee has scrutinized the information furnished by you and the proposal for management & handling of Bio-Medical Waste generated at your location mentioned below. After a careful consideration, it has been decided to grant authorization under Bio-Medical Waste Management Rules, 2016 (herein after to be called as BMWM Rules) for a period and premises mentioned in this authorization

M/s St. Joseph's Hospital is hereby granted an authorization to operate a facility for generation, segregation, collection, storage, packaging, Pretreatment, Transport and disposal of Bio-Medical Waste in the hospital is as under:

Type of waste category	Qty. Handled
Yellow	26 Kg/day
Red	05 Kg/ day
Blue	02 Kg/day
White	01 Kg/day

This authorization (Renewal) shall be in force for a period upto October-2026.

This authorization is subject to the conditions stated below and to such other conditions as may be specified in the rules for the time being in force under the Environment (Protection), Act, 1986.

## Terms and Conditions of Authorization

- 1. The authorization shall comply with the provisions of the Environment (Protection) Act, 1986, and the rules made there under.
- The authorization or its renewals shall be produced for inspection at the request of an officer authorised by the prescribed authority.
- the person authorised shall constitute a breach of his authorization.

  The person authorised shall constitute a breach of his authorization.

  The person authorised person to take prior permission of the prescribed authority to close down the prescribed The person authorised shall not rent, lend, sell, transfer or otherwise transport the Bio-Medical Wastes

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# Additional Terms and Conditions of Authorization

- 6. Treatment & Disposal of Bio-Medical Waste.
  - 1) Waste shall be treated & disposed off in accordance with schedule-I of the rules and in compliance with the standards prescribed in Schedule-V of the rules.
  - 2) The applicant shall set up requisite Bio-Medical Waste treatment facilities like autoclave, microwave system etc. wherever required for the treatment of waste or ensure treatment of waste at a common waste facility or any other waste treatment facility.
  - 3) Standards for Incinerators:
    - a) Combustion efficiency shall be at least 99.00 %.
    - b) The temperature of the primary chamber shall be  $800 \pm 50$  °C.
    - c) The secondary chamber gas residence time shall be at least 1 (one) second at 1050± 50°C with minimum 3% oxygen in the stack gas.
    - d) Minimum Stack height 30 meters above ground. e) Emission standards should confirm to the following:

<u>Parameters</u>	Maximum Permissible Limit
Particulate matter	mg/Nm <sup>3</sup> at (12 % CO <sub>2</sub> correction)
Nitrogen Oxides	450
HCI	50

- a) Volatile organic compounds in ash shall not be more than 0.01%.
- b) Suitably designed air pollution control devices should be installed/retrofitted with the incinerator to achieve the above emission limits, if necessary.
- Waste to be incinerated shall not be chemically treated with any chlorinated\* disinfectants.
- d) Chlorinated plastics shall not be incinerated.
- e) Toxic metals in incineration ash shall be limited within the regulatory quantities as defined under the Hazardous Waste (Management & Handling) Rules, 1989.
- f) Only low sulphur fuels like L.D.O/L.S.H.S/Diesel shall be used as fuel in the incinerator.
- g) A logbook for the operation & maintenance of incinerators shall be maintained including details of waste received, waste incinerated, fuel consumption etc.
- 4) Standards for waste autoclaving, micro waving as well as deep burial shall be as per Schedule V of the rules.
- 5) Effluent Standards:

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The effluent generated should conform to the following limits:

Parameters'	Maximum Permissible Limit
pH	6.5 to 9.0
Suspended Solids	100 mg/l
Oil & Grease	10 mg/l
BOD	30 mg/l
COD	250 mg/l
Bio-assay test	90%survival of fish after 96 hours in 100% effluent
Segregation & Storage of	Die Medie 1 W

- 6) Segregation & Storage of Bio-Medical Wastes:
  - a) Bio-Medical Waste shall not be mixed with other wastes.
  - b) Bio-Medical Waste shall be segregated into containers/bags at the point of generation in accordance with schedule II of the rules prior to its storage, transportation, treatment and disposal. The containers shall be labeled according to Schedule III of the rules.
  - c) At the storage site "Bio-Medical Waste Storage Site" & "Danger" sign Committees shall be prominently displayed.

d) The applicant shall take all steps to ensure that such Bio-Medical Waste is handled without any adverse effect to human health and the environment.

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- e) The containers for storing segregated wastes shall be clearly identifiable. Colour coding of waste categories with multiple treatment options as defined in Schedule I, shall be selected depending on treatment option chosen, which shall be as specified in Schedule I of the
- No untreated Bio-Medical Waste shall be kept stored beyond a period of 48 hours provided that if for any reason it becomes necessary to store the waste beyond such period, the authorised person must take permission of the prescribed authority and take measures to ensure that the waste does not adversely affect human health and the environment.

# 7. Transportation of Bio-Medical Waste:

i. If a container is transported from the premises where Bio-Medical Waste is generated to any waste treatment facility outside the premises, the container shall, apart from the label prescribed in Schedule III of the rules, also carry information prescribed in Schedule IV of the rules.

Untreated Bio-Medical Waste shall be transported only in such vehicles as may be authorised for the purpose by the competent authority. The transport vehicles shall be prominently labeled as per symbols shown in Schedule III of the rules.

#### 8. General Conditions:

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- When any accident occurs at any institution or facility or any other site where Bio-Medical Waste is handled or during-transportation of such waste the authorised person shall report the accident in Form . III of the rules to the Committee forthwith.
- ii. Every applicant shall maintain records related to the generation, collection, reception, storage, transportation, treatment, disposal and/or any form of handling of Bio-Medical Waste in accordance with these rules and any guidelines issued.
- iii. All records shall be subject to inspection and verification by the Committee at any time.
- iv. Every applicant shall submit an annual report in Form II by 31st January every year, which shall include information about the categories & quantities of Bio-Medical Waste handled during the preceding year.
- The applicant shall be further required to obtain the following from the Committee:
  - a) Consent under the Water (Prevention and Control of Pollution) Act, 1974.
  - b) Consent under the Air (Prevention and Control of Pollution) Act, 1981.
  - c) Authorization under the Hazardous Wastes (Management and Handling) Rules-1989.
  - d) Authorization to operate the DG Set.
- vi. The authorization granted shall lapse at any time if the facility does not demonstrate the parameters, as required under rules or any condition of this authorization order is not complied with.
- vii. The authority of hospital shall ensure the scientific disposal of Bio Medical waste generated by the hospital strictly as per BMW(M&H) rules 1998 as amended and through CBMWTF duly authorized by
- viii. Mercury generated due to the breakage of medical equipments such as thermometer, B.P apparatus etc. , should not be disposed off along with Bio-Medical or general Waste. It should be separately handled and disposed as per Hazardous Waste (Management & Handling ) Amendment Rules, 2003. Mercury and Mercury compounds waste with concentration limit equal to or more than 50 mg/Kg has to be disposed off as per the said rules.
- Proper labeling (Bio Hazardous ) should be done which should be non washable and permanently
- Mutilation & treatment should be given to waste sharps (cat 04) before it is sent to the Common Bio Medical Waste Treatment facility.
- The authority should apply 60 days in advance for renewal of authorization before expiry of same. or discharge of environmental pollutants from the hospital shall not exceed the relevant parameters and standards for the said hospital operation or process specified under respective schedules of the Environment (Protection) Rules, 1986 as amended from time to time.

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xiii. This authorization is issued with the condition that proof of ETP and self monitoring report shall be submitted within three months along with proof of Solid Waste disposal facility under SWM Rules , progress of phasing out use of chlorinated plastic bags , gloves and blood bags , proof of digital weighing machine and scanner , log book of BMW and bar code management software working and receipt of data and reflection on to the website , annual report , insurance cover of waste handlers and training given to such hospital staff etc.

## **Specific Conditions**

- The Hospital Management has to operate all requisite pollution control devices in the Hospital as envisaged under Bio-Medical Waste Management & Handling Rules.
- The Hospital Management shall adhere to general terms and conditions of Water (Prevention and Control of Pollution) Act, 1974 and Air (Prevention and Control of Pollution) Act, 1981 and ensure compliance of environment standards as per EP Act 1986 and as amendments made thereof.
- 3. The Hospital Management shall handover the waste generated to CBMWTSDF.
- 4. The Hospital Management shall install Color coding bins with proper labeling in the hospital. Segregation of waste must be done at sources.
- The Hospital Management shall renew its MOU with CBWTF, shall regularly update its logbooks and Website And shall promptly abide by decisions of JKPCC about EC.
- The unit holder shall comply with the Hon'ble NGT direction in OA No. 438/2018 with regard to permission from Central Ground Authority / Jal Shakti Department for extraction of water.
- 7. The Hospital Management shall carry out the monitoring of ETP / APCDs from the JKPCC lab once in a year besides SMR which shall be verified by the JKPCC Lab.
- 8. Periodic Inspection by Divisional Officer, PCC as per schedule for Orange category units.
- 9. The Hospital Management shall remain under surveillance of the JKPCC regularly.
- 10. The Hospital Management shall all Plastic Waste Products be disposed in accordance with Plastic Waste Management Rules.

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Penalty Provisions:

If the applicant fails to comply with the terms and conditions and other directives issued by this Committee as laid down in this order, the applicancies liable for prosecution under Section 15 of the Environment (Protection) Act 1986 and other penal provisions of the Act and shall on conviction be liable for punishment and imprisonment as provided in the said Act.

(J N Sharma) Environmental Engineer

Copy to the:-

1. Regional Director, J&K PCC Kashmir for information.

2. Director, Health Department, Kashmir for infromation.

3. District Officer, PCC, Baramulla for information.

4. P.A to Chairman J&K PCC for the information of Chairman.

5. M/s St. Joseph's Hospital, Baramulla, Kashmir for information

6. Office File

The unit holder may download the list of standards from website jkspcb.nic.in and cpcb.nic.in to be complied under the Environment Protection Act, 1986 read with Water (Prevention & Control of Pollution) Act, 1974 & Air (Prevention & Control of Pollution) Act, 1981.



# **J&K Pollution Control Committee** Jammu/Kashmir (www.jkspeb.nic.in)

#### Consent Order

Consent No.:- PCC/digital/ 24064131473 of 2024

Date: - 05/08/2024

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Consent To Operate (Renewal) under Section 25/26 of the Water (Prevention & Control Pollution) Act, 1974 and under section 21 of the Air (Prevention & Control of Pollution) Act, 1981, as amended is granted in favour of

> Franciscan sisters of Mary M/s St.Joseph's Hospital Baramulla, Boniyar, Kashmir (DRA Baramulla Registration no. 0100800069 dated: 20/09/2023)

for a period upto October- 2025 for ORANGE category of HCF as per revised classification of industrialsector, subject to the following terms and conditions in a time bound manner:

- The consent granted by the Committee is restricted to Prevention and Control of Pollution only and shall 1. notbe treated as substitute of permission required under other laws of the land.
- The consent is granted valid for Operate of Health Care Facility (HCF) for indoor patients with capital 2. investment of Rs. 29.00 lakhs (as per Schedule II):

S. No.	Facility	Capacity of Beds
1	Health Care Facility (HCF)	39
		39

Any change / enhancement in HCF shall have to be intimated to the Committee and the HCF authority has to apply afresh for the same

#### Compliance under Water Act: 3.

a) Trade Effluent: The HCF has to install and maintain continuous operation of a comprehensive effluent treatment system consisting of Primary / Secondary / Tertiary treatment so as to achieve the quality of the treated effluent to the following standards of discharge outlet

## Standards of Discharge for Trade Effluent:

Compulsory Parameters	Conc. in mg/l except for pH
pH	6.5-8.5
Suspended Solids	100
BOD(3 days at 27 degree celsius)	30
Oil & Grease	10

b) Sewage Effluent - The HCF has to install and maintain continuous operation of a comprehensive treatment system as is warranted with reference to effluent quality and operate and maintain the same continuously so as to achieve the quality to treated effluent to the following standards before dis anda Kashin & Kashin

Standards of discharge for Sewage disposal:

Parameters	Range	Conc. in mg/l except for pH
pH	between	6-9
Suspended Solids	Not to exceed	100
BOD(3 days at 27 degree celsius)	not to exceed	30

c) Water consumption & Disposal

i. The daily quantity of water consumption shall not exceed 10 KLD.

ii. The daily quantity of sewage effluent from the unit shall not exceed 4 KLD

iii. Waste water generated from the unit shall be disposed through ETP

## 4. Complance under Air Act:

- a. The HCF shall comply to National Ambient Air Quality Standards as per EP Act 1986 (refer rule 3(3B). b. The HCF authority has to operate stack (s) of the specification defined in various environmental laws.
- c. The HCF has to install and maintain continuous operation of a comprehensive air pollution control system including the following pollution control devices to achieve the quality of emissions within the tolerance limits as prescribed under the environment protection act 1986:

S.No.	Pollution Control Equipments
1	Exhaust Fans, Fire Extinguishers, Effluent Treatment Plant, Pollution Control Devices as applicable under Environment Protection Act, Color coding bins, good houses, Septic Tank& Sokage Pit,

- 5. The HCF shall comply to the Solid Waste Management Rules 2016 dated 8-4-2016
- 6. Under the Noise Pollution (Regulation and Control) Rules 2000, the HCF shall take adequate measures for control of noise from its own sources within the premises so as to maintain ambient air quality standards in respect of noise to less than 75dB(A) during day time and 70 dB(A) during night time. Daytime is reckoned in between 6 am to 10 pm and night time is 10 pm to 6 am
- 7. The HCF shall comply to the Plastic Waste Management Rules 2016 dated 18-3-2016
- 8. Self Monitoring Schedule:
  The HCF shall have to get the samples of emission/Effluents analysed from the laboratory of J&K PCC or laboratories approved by J&K PCC once a year to the check the efficacy of Pollution Control Devices (PCDs) installed in the unit
- 9. The HCF shall comply with the additional conditions as stipulated below:-
- i. The Consent is valid for the operation of HCF only. Any change are upgraded the HCF, shall have to be intimated to the JKPCC. For any enhancement of the above, fresh consent has to be obtained from J & K Pollution Control Committee.
- ii. The HCF has to keep a record of the environmental data monitored regularly with regard to operationand maintenance of pollution control devices viz Air Pollution and Water Pollution Control to achieve the desired standards notified in EP Act.
- iii. Pollution Control Devices (ETP/ECD) as contemplated to achieve the quality of effluent emission within the tolerance limits prescribed, shall have to be operational during the course of production. The effluent/emission shall not contain constituents in excess of the tolerance limits as laid down by J & K Pollution Control Committee.
- iv. The HCF shall be liable to pay compensation in case any damage is caused to the environment.
- v. The HCF shall abide by the directions of the Committee which will be issued from time to time. Any infringement/violation or trangression of the statutory enactments of pollution control acts by the unit, shall be sufficient cause to prosecute the violator in conformity with relevant section of Air/Water Acts and Environment Protection Act in force.
- vi. The HCF be under surveillance monitoring of J & K Pollution Control Committee
- vii. The HCF shall provide adequate arrangement for fighting the accidental leakages discharge of any air pollutant/gas/liquid from the vessel, machinery etc. which are likely to cause fire hazard including environmental pollution.
- wiii. The HCF shall adhere to general standards terms and conditions of Water / environment standards as per environment protection act 1986.

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ix. The HCF should apply 60 days in advance for renewal of consent before expiry the date of this Consent Order.

## Specific Conditions:-

1. The Hospital Management has to operate all requisite pollution control devices in the Hospital as envisaged under Bio-Medical Waste Management & Handling Rules.

 The Hospital Management shall adhere to general terms and conditions of Water (Prevention and Control of Pollution) Act, 1974 and Air (Prevention and Control of Pollution) Act, 1981 and ensure compliance of environment standards as per EP Act 1986 and as per amendments made thereof.

3. The Hospital Management shall handover the Bio Medical waste generated to authorized CBMWTF.

4. The Hospital Management shall install Color coding bins with proper labelling in the hospital. Segregation of waste must be done at source.

5. The unit shall be checked in detail after six months to ensure that all PCMs / ETP are working as per norms along with mandatory Annual Maintenance contract (AMC) of the ETP for smooth and continuous operation of ETP and maintain the log book of ETP and log book of Bio-Medical Waste (BMW) generation.

6. Periodic Inspection by Divisional Officer, PCC as per schedule for Orange category units.

7. The unit shall remain under surveillance of the JKPCC regularly.

- 8. The Hospital Management shall operate ETP properly and shall ensure that environment laws, and consent conditions are followed in letter and spirit.
- 9. The unit holder shall comply with the Hon'ble NGT direction in OA No. 438/2018 with regard to permission from Central Ground Authority / Jal Shakti Department for extraction of water.
- 10. The unit will continue to operate on Zero liquid Discharge (ZLD) policy, all the treated water shall be reused in the process again.
- 11. The unit hold Hospital Management er has to setup of adequate capacity of ETP having ZLD and adopt retro device with the proposed DG Set and shall adopted proper disposal of Municipal Solid Waste / Hazardous Waste.
- 12. The unit hold Hospital Management er provide specific water / Air Pollution control equipments as per the conditions of EP Act, 1986 and rule made there under from time to time.
- 13. The Hospital Management shall obtain necessary prior permission for providing additional control equipment with necessary specifications and operation thereof alternation or replacementeration well before its life come to an end or erection of new pollution control equipment.
- 14. The Board reserves its rights to vary all or any of the conditions in the consent, if due to any technological improvement or otherwise such variation (including the charge of any control equipment, other in whole or in part is necessary).
- x. In case of violation of above mentioned conditions or any public complaint the consent shall be withdraw.

\* This consent is issued purely from environmental angle and the Committee shall not be responsible for any claim, counter claim, ownership, partnership etc of the unit.

(J N Sharma)

'By Order'

Member Secretary 7-8-24.

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Environmental Engineer

## Copy to the:

- 1. Regional Director PCC Kashmir for information and ensure the implementation of conditions as above.
- 2. Director, Health Service Kashmir for information.
- 3. General Manager DIC, Baramulla for information.
- 4. D.O PCC Baramulla for the direction to monitor the conditions of the consent stated about POLLUTION

5. P.A. to Chairman, J&K PCC for information of the Chairman.

6. M/s St. Joseph's Hospital Baramulla, Boniyar, Kashmir, Kashmir for compliance of abovesaid condition

7. Office file

The unit holder shall comply to environment standards as notified under the environment protection Act 1986, read with

Pollution) Act 1974 & Air (Prevention & Control of Pollution) Act, 1981 which can also be downloaded from the

www.cpcb.nic.in

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