Centre for Health Research and Development, Society for Applied Studies (CHRD-SAS)

Proposal entitled Establishment of a new Demographic and Health Surveillance Site in an urban resettlement colony in Delhi with the aim to study disease specific epidemiology and conduct future vaccine trials

1. Institutional Arrangements

- (i) Brief description of the proposed activity- Establishment of a new Demographic and Health Surveillance Site in an urban resettlement colony in Delhi with the aim to study disease specific epidemiology and conduct future vaccine trials. This is a biomedical research activity.
- (ii) List of environments related regulatory clearances required for the activity- No environmental related regulatory clearances required for this activity.

Inst	itutional Arrangement				
		Yes	No	Details	Proposed Plan
1.	Is there a designated full-time staff for Environment Health and Safety (EHS) issues?	✓		Safety Committee has been designated for planning and implementing measures for	reviews the requirements regarding health and safety from time to time.
2.	Does the EHS staff handle the following?				The EHS staff will look after the issues and the activity is reviewed by the Institutional Bio-Safety Committee lead (Microbiologist)

	Occupational Health and Safety	√		Described above	
	Waste Management	√		Described above	
	List of consents and regulatory clearances	√		Described above	
	Record keeping of accidents and procedures	√		Described above	
	EHS trainings for staff		✓		Periodic staff
					training will be scheduled and
	Environment Management Framework compliance for Innovate in India Project		√		followed. The NBM BIRAC Environmental Management Framework will be followed.
3.	Is there a reporting structure in place regarding EHS issues?		✓	Describe:	A structured reporting system will be put in place for EHS issues.
		Yes	No	Details	Proposed Plan
4.	Are regular EHS trainings provided to staff?		√	Frequency:	Periodic staff training will be scheduled and followed. Frequency shall be as per guidelines of State pollution Control Board (SPCB).
5.	Institutional Bio-Safety Committee (IBSC)	>		Institutional Bio- Safety Committee has been designated for planning and implementing measures for Environmental- Occupational Health and Safety issues. The committee has 4 internal members, including Microbiologist, Deputy Director, Clinician and	

6.	Ethics Committee (EC)	√ V		Committee of CHRD-SAS has 14 members: 4 internal 10 external. The committee follows procedures as laid down in the Standard Operating Procedures	Quality Assurance team is in place to monitor project adherence with respect to the Standard Operating Procedures on regular basis.
	General Occupational			-	h
7.	Are there Standard Operating Procedures for accidents, hazards, and other emergencies (chemical spills, heat hazards, fire hazards, radioactive hazards etc.)?	*	C F a f s s e S F a	Operating Procedures address	Display of Procedures in prominent places in the sites.
8.	Are the following in place?				Appropriate SOPs
	Chemical spill kits	√	a v	Chemical spill kits are available in the vorking area	are in place to deal with such emergencies.
	Shower stations	√	s la a	Accessible eye wash tation in the aboratory working area Current research activities do not	
	First Aid Kit	√	ros F c n	equire shower tations First Aid Kit containing all necessary articles and nedicines accessible o all	

	Eine Endingerichen			— —	
	Fire Extinguishers	✓		Fire Extinguishers	
				placed at	
				appropriate	
				locations and	
				monitored regularly	
	Register of accidents and injuries	✓		Register for	
				documenting	
				accidents and	
				injuries available	
				with relevant	
		Yes	No	administrative staff Details	Proposed Plan
0	Ana manana si ana ao and atana ao avestana in		110		
9.	Are proper signage and storage system in place?	√			These would be
	place:			appropriate	regularly updated/
					replaced and
				access for storage	reviewed regularly.
				system are displayed	
	Display of Material Safety Data Sheet	✓		Available at relevant	
	(MSDS) where relevant			places	
	Display of emergency numbers and	✓		Displayed at all	
	procedures (Person to Contact, Doctor,			critical places	
	Ambulance, Fire Emergency, Police)			officer praces	
	displayed in all critical				
	Places				
	Signage across the facility (labs,	√		Appropriate	
	storage, hazardous areas, etc.)			signages displayed	
	Are flammable materials appropriately	√		Flammable	
	stored to prevent fire hazards?			materials	
	F			appropriately are	
				1 1 1	
				stored in fire safe	
10	Ana amala dataatana fina alamaa	/		cabinets	701 111
10.	Are smoke detectors, fire alarms,	✓			These would be
	automatic safety/shut off systems, overflow preventors,				regularly
					maintained.
	etc. in place and regularly			relevant places.	
11.	maintained? Are there control measures for VOC, air	✓		List: Operations	This would be
11.		Y		inside biosafety	This would be
	emissions, high operating temperatures, pathogens/vectors etc. in place?			cabinet equipped	reviewed
	pamogens/vectors etc. in prace?			with Hepa filters.	periodically.
12.	Are regular mock drills conducted	√		Frequency (type	
12.	for emergency preparedness and			wise): Every three	
	safety?			months.	
13.	Are staff provided with OHS training?		√	Describe:	OHS training will
15.	The stail provided with Otto training:			D 0501100.	I — — — — — — — — — — — — — — — — — — —
					be provided to all
	D'	disel	X7~-4	(DMW)	staff.
	Biome	aicai	vv aste	e (BMW)	

14.	Is there generation of biomedical waste (as described in Bio-Medical Waste Management Rules, 2016) in the grantee?		List of biomedical waste produced in the facility coded bags and surgical gloves Mask as per the Cotton swabs Biomedical Waste Syringes Rules, 2016 and Needles Pipette Tips Blood culture bottles Microbiological culture plates Blood products SST Vacutainers Expired medicines List of biomedical waste generated and segregated in colour coded bags and specified containers as per the Biomedical Waste Rules, 2016 and collected by the authorized agency, Cultures, fluids and media are treated separately. They are sterilized by autoclaving before handing over to the contracted authorized agency (Biotic Waste Solutions Pvt Ltd)
		Yes	
15.	Is there trained staff to handle biomedical waste in the grantee?	V	Concerned staff This is an ongoing appropriately trained process. to handle biomedical waste. Refresher trainings provided periodically
16.	Has the grantee obtained authorization from State Pollution Control Board /Pollution Control Committee?	NA	Disposal of Biotic Waste Biomedical waste is by an agency authorized by the State Pollution Control Board 110033 Email: info@biotic.co.in
17.	Is the biomedical waste segregated at point of generation in the facility and stored in suitable containers?	*	Yellow Cotton swabs, discarded reagents, disinfecta nts, microbiol ogical culture plates,

				petri	
				dishes,	
				discarded	
				linen,	
				expired	
				medicines	
				, masks,	
				plastic	
				ampoules	
				ampoules and vials.	
				and viais.	
			Red	Crimin and	
			Red	Syringes	
				without	
				needles	
				and	
			TT 71 .	Gloves.	
			White	Needles,	
				Syringes	
				with	
				Needles,	
				Needles	
				from	
				needle tip	
				cutter/Bur	
				ner,	
				Scalpels,	
				Blades.	
			Blue	Blood	
				culture	
				bottles,	
				contamin	
				ated	
				broken	
				and	
				discarded	
				glass,	
				vials,	
				ampoules	
				and	
				microsco	
10			_	pic slides.	
18.	Is the bar code system for the segregated	✓	Currently		Will follow the as
	waste in place?		external a		per Bio-Medical
			not provid		Waste Management
			code syste		(Amendment) Rules,
			segregated	l waste that	2018

				they collect	
	Is the biomedical waste being sent to an authorized common BMW facility?	✓		Name and address of CBMWF: Biotic Waste Solutions Pvt Ltd. 46-47, SSI Industrial Area, GT Karnal Road, Delhi-110033 Email: info@biotic.co.in Distance from facility: 1.5 hours(40 kms) Frequency and	
				Mode of transport: Three times a week Transportation vehicle	
				Who transports? Biotic Waste Solutions	
20	Does the grantee have an in-house BMW treatment facility?		√		As the organization
	Is the treatment facility own (individual)?		√		outsources the
	Is the treatment facility a shared facility in an industrial park?		√		entire BMW to external authorized agency, there is no plan to establish in-house facility currently
21	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?	√		Types of treatment: Moist- Sterilization (Autoclaving)	
. 22	Is the liquid waste checked for active cells before sending to treatment plant?	✓		All liquid waste is sterilized before sending to	

				treatment plant.	
23	Are necessary waste pre-treatment equipment in place?	V		List of equipment (autoclaves, shredders, incinerators, etc.): Autoclave	Details of waste pre- treatment: Blood culture bottles Microbiological culture plates and tubes
	Do the equipment adhere to prescribed norms by State Pollution Control Board (SPCB)?	√			
24	Are chlorinated plastic gloves and bags phased out in the grantee?	√		Chlorinated plastic gloves and bags not used for any project activity.	
25.	Are grantee's personnel involved in handling BMW provided with regular training?	✓		Frequency: Yearly Trainer: Microbiologist, Lab lead	
26.	Are medical examination provided to personnel involved in BMW waste handling and are they provided with relevant immunization like Hepatitis B and Tetanus?	V		Frequency of medical examination: Yearly	Routinely done.
27.	Is a daily register for biomedical waste maintained including accident reporting record?	√		A register for biomedical waste is maintained in addition to the accident reporting register	This practice would be followed and checked periodically.
28.	Are annual reports on BWM submitted to SPCB as per required form (see Bio-Medical Waste Rules 2016)?		√		Annual report forms IV will be submitted to SPCB as per the biomedical waste management rules.
	Hazardous V		` ′		Duomagad Di
29.	Is there generation of hazardous waste (as per Hazardous Waste Rules, 2016) in the grantee?	Yes		Details List of waste produced in the facility All biomedical waste generated and segregated in colour	Proposed Plan

		1		
			coded bags and	
			specified containers	
			as per the	
			Biomedical Waste	
			Rules, 2016 and	
			collected by the	
			authorized agency,	
			Cultures, fluids and	
			media are treated	
			separately. They are	
			autoclaving before	
			handing over to the	
			contracted	
			authorized agency	
			(Biotic Waste	
			Solutions Pvt Ltd)	
20	Is there a secure location for storage of	D.T.A	 	
30.	Is there a secure location for storage of	NA	Describe how each	
	HW with proper signage?		item is stored –	
	Are hazardous waste stored for more	NA	platforms, distances	
	than 90 days in the grantee's premises?		from critical	
			installations/movem	
			ent areas, spill	
			_	
			collectors, gas	
	E Woot	o and	collectors, gas escape facility, etc.	
	E-Wast		collectors, gas escape facility, etc. Batteries	
		e and Yes	collectors, gas escape facility, etc. Batteries No Details Proposed Plan	
32	Does the grantee generate e-waste,		collectors, gas escape facility, etc. Batteries No Details Proposed Plan ✓ Our organization -	
32	Does the grantee generate e-waste, produce or manufacture electrical		collectors, gas escape facility, etc. Batteries No Details Proposed Plan	
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	Does the grantee generate e-waste, produce or manufacture electrical		collectors, gas escape facility, etc. Batteries No Details Proposed Plan ✓ Our organization does not produce or manufacture	
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	Does the grantee generate e-waste, produce or manufacture electrical		collectors, gas escape facility, etc. Batteries No Details Proposed Plan ✓ Our organization does not produce or manufacture electronic or electrical equipment. In case any e-waste is generated during project activities, it will be disposed	
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	Does the grantee generate e-waste, produce or manufacture electrical		collectors, gas escape facility, etc. Batteries No Details Proposed Plan ✓ Our organization does not produce or manufacture electronic or electrical equipment. In case any e-waste is generated during project activities, it will be disposed using a certified data sanitation	
	Does the grantee generate e-waste, produce or manufacture electrical and electronic equipment?	Yes	collectors, gas escape facility, etc. Batteries No Details Proposed Plan ✓ Our organization does not produce or manufacture electronic or electrical equipment. In case any e-waste is generated during project activities, it will be disposed using a certified data sanitation service provider	
	Does the grantee generate e-waste, produce or manufacture electrical		collectors, gas escape facility, etc. Batteries No	
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				1	
				nonfunctional	
				batteries at the end	
				of their life span.	
34	Does the grantee deposit the battery waste	√		Expired batteries are	
	to registered recycler	•		handed over to the	
•	/dealer/manufacturer /reconditionner			authorized dealer.	
	/collection center?			dumonized dedien.	
	/collection center?			Name and address:	
				GR Power Shoppe	
				Block H Lajpat	
				Nagar 2 Rd,	
				Jangpura Extension,	
				F Block, Lajpat	
				Nagar I, Lajpat	
				Nagar, New Delhi,	
				Delhi 110024	
	Community Health ar	nd Saf	ety a	nd risk mitigation	
35	Emergency preparedness and participation		✓		Emergency
	of local authorities and potentially				preparedness plan
	affected communities				will be developed
					and followed as and
					when needed.
26		Othe		— — — — — — — — — — — — — — — — — — —	
36.	Is the lab/room air regularly	✓		Done Periodically	
	checked for microbial				
27	contamination?				
37.	3	✓		Adequate	Routinely
	place?			ventilation and	monitored.
				exhaust fans in	
				place. Air	
				Fresheners used	
				regularly	
38.	Are fume hoods and exhausts	√			
50.		*		Regularly checked	
20	regularly checked and maintained?			and maintained	****
39.	Does the grantee use DG set > 15 KVA?	✓		,	When used it will
				used in compliance	be in compliance to
				to the State National	the Sate National
				Green Tribunal Act	Green Tribunal Act
				requirements	requirements and
				1	regular monitoring
	Does the grantee have consent for DG >	NA		Not Applicable	rogular monitoring
	15 KVA?	INA		Not Applicable	
	Are emissions from boilers and		✓		Regular monitoring
	DG sets regularly monitored to be				of emissions from
	within the prescribed norms?				and DG sets will be
	-				initiated
1					muateu

40.	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?		Describe: All generated waste is segregated at source. The solid waste generated is collected by the authorized personnel from the Municipal Corporation of Delhi and processed and disposed through their system. A compost generation unit, the AGGA decomposer is installed in the central office for processing the kitchen waste generated in the organizational kitchen. All biomedical waste is segregated in color coded bins and bags. It is collected, transported, treated and disposed by M/S Biotic Waste Solutions which is a common biomedical waste management facility authorized by the Delhi Pollution Control Committee.
41.	Is wastewater treated separately by the grantee? (Liquid waste from laboratory, chemicals, fluids, solvents, medium and cultures, coolants, etc.)	✓	Cultures, fluids and media are treated separately. They are sterilized by autoclaving before handing over to the contracted authorized agency (Biotic Waste Solutions Pvt Ltd)
42.	Are necessary provisions for noise cancellation in place?	✓	Describe: Appropriate solid be monitored and be partitions are in place to curtail noise pollution. The noise levels will be monitored and be maintained periodically.
43.	Are there any buffers, fire vehicle routes in the grantee's premises?	✓	The grantee's premises have a big

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	gate, ramp and
	accessible roads for
	reaching the premises

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.