



**UNITED NATIONS INDUSTRIAL DEVELOPMENT ORGANIZATION
ORGANISATION DES NATIONS UNIES POUR LE DEVELOPPEMENT INDUSTRIEL**

Progress Report
(01 July 2018 – 30 June 2019)

Name of country INDIA

Title¹	Environmentally Sound Management of Medical Waste in India
GEF ID:	3803
UNIDO SAP ID:	104160
GEF Replenishment Cycle:	GEF-4
GEF Focal Area:	Persistent Organic Pollutants (POPs)
Integrated Approach Pilot (IAP) Programs²:	(select)
GEF Project Size:	Full-Sized Project (FSP)
UNIDO PTC Department:	Department of Environment (ENV)
UNIDO Project Manager:	Ms. Erlinda Galvan

I. Brief description of the project

I.1 Objective: The project aim to reduce and ultimately eliminate the releases of unintentionally produced POPs (uPOPs) and other globally harmful pollutants into the environment, and assist India in implementing its relevant obligations under the Stockholm Convention on POPs. The overall objective can be achieved through private-public partnerships (PPPs) covering but not limited to the following approaches: segregation, decontamination and compaction of the medical wastes (MW); enhancing and optimization of incineration technologies; raising awareness and dissemination of know-how; incorporation of management systems; innovation and adaptation of appropriate and affordable technologies and techniques; introduction of participatory funding systems and enhancement of relevant existing laws and regulations. The project will create a unique opportunity for healthcare providers, policy makers, implementing agencies and service providers to come together on a single platform to create an enabling healthcare environment. The project further intends to promote the country-wide adoption of best available techniques/best environmental practices (BAT/BEP) in the healthcare institutions of widely differing in their complexity and size as well as in the evolving medical waste management infrastructure and industry in a manner that protects human health and reduces adverse environmental impacts.

[The answer to the question should include: (i) the project's objective consistent with the one introduced in the CEO Endorsement/Approval document and (ii) core indicators.

¹ As per approved CEO Endorsement document

² Only for **GEF-6 projects**, if applicable

Example:

The Project will focus on green and safe SHP upgrading/refurbishment. The main objective is to support the Ministry of Water Resources in introducing new measures to small hydropower (SHP) upgrading to ensure that SHP has less of an environmental impact and that safe production and management processes are introduced at the same time as reducing GHG emissions.]

Project Core Indicators		Expected at Endorsement/Approval stage
6	Greenhouse Gas Emissions Mitigated (metric tons of CO2e)	x
11	Number of direct beneficiaries disaggregated by gender as co-benefit of GEF investment	x
x	x	x

I.2 Baseline: A detailed situation analysis was carried out during the preparation phase in 5 selected states namely Gujarat, Karnataka, Maharashtra, Odisha and Punjab covering medical waste management in healthcare facilities (HCFs) and Common Biomedical Waste Treatment Facilities (CBWTFs). In the situation analysis carried out among 57 CBWTFs, which is 40% of total CBWTFs in the country, the amount of dioxin and furan emission was estimated to be 105.44 g ITEQ/y using the UNEP toolkit. By proper segregation and either by applying non-incineration techniques or upgrading existing incinerators in the 57 CBWTFs, 50.7 g I-TEQ/y dioxin/furan reduction can be achieved. Based on the above figures of the survey and with the successful implementation of the project, the estimated cost of avoided dioxin and furan emissions would be US\$ 7.6 million per year in 5 selected states, indicating high cost effectiveness of the project.

[Project manager is encouraged to use the baseline description from the earlier PIRs, if applicable, unless changes to the project's baseline have occurred during the reporting period.

Example:

There is a significant gap with current international green hydropower development. Because the relevant incentive measures and expertise are lacking, the SHP plant owners are unwilling to take initial measures to upgrade to green hydropower construction. Without GEF intervention this situation is unlikely to change. GEF funding is needed to cover the incremental costs related to the greening of the SHPs to ensure additional environmental and social benefits such as delivering water demand downstream, flood control, irrigation, water quality, and to increase the financial viability of the plants. Furthermore, the knowledge base on environmentally sound SHP retrofitting needs to be built in China.]

II. Targeted results and progress to-date

II.1 Describe in tabular form the project's progress made in achieving its outputs against key performance indicator's targets in the project's **M&E Plan/Log-Frame at the time of CEO Endorsement/Approval**. Please expand the table as needed.

Project Strategy	KPIs/Indicators	Target level	Progress to-date
Outcome 1: Enabling and harmonized environmental and health-care policy and regulatory instruments through appropriate networking for creation and promotion of environmentally sound management of medical waste, disposal sector and market			
Output 1.1: Augmented inter-ministerial network for Ministries of Environment and Forest, and Health for harmonizing environmental and health-care policy and regulatory instruments	<ul style="list-style-type: none"> ➢ Terms of Reference of inter-ministerial network for Ministries of Environment and Forest, and Health ➢ Terms of Reference of state level networking 		<ul style="list-style-type: none"> • National Committee constituted for framing of the revised Biomedical Waste Management (BMWM) Rules. • Revised BMWM Rules, 2016 notified the Ministry vide Gazette Notification No. G.S.R 343(E) dated 28th March 2016 in supersession of the Bio-Medical Waste (Management & Handling) Rules 1998. • Different national and state level committees have been constituted for implementation to the new rule for Environmentally Sound Management of Medical Waste

	<ul style="list-style-type: none"> ➤ Number of identified gaps between Stockholm Convention requirements and existing legal/regulatory framework ➤ Number of proposed new and/or revised laws, regulations and guidelines to implement Stockholm Convention requirements 		<ul style="list-style-type: none"> • Particular responsibilities assigned to the regulatory authorities • Gap analysis of the healthcare facilities (HFCs) vis-a-vis the Stockholm Convention requirements done by UNIDO in association with MSRMC&H. Survey of HCFs and Common biomedical waste treatment facilities (CBMWTFs) in the five (5) project states (Gujarat, Karnataka, Maharashtra, Odisha and Punjab) carried out. • Revised simplified colour categorization of BMW, phase out of use of Chlorinated Blood bags and Gloves and stringent emission standards for CBMWTFs has been notified, which will help in achieving the objectives of Stockholm Convention. • Stringent Dioxin and Furans emission standards has been included in the new BMWM Rules and compliance to the rule provisions is taken care of by the prescribed authorities at national and state level as per Rule 9 Schedule III of BMWM Rules, 2016. • Amendment of BMWM Rules, 2016 notified on 16 March 2018 and 2nd Amendment to BMWM Rules, 2016 notified on 20th February 2019.
Output 1.2: Regulatory, economic and market incentives introduced for creation and promotion of environmentally sound management of medical waste, disposal sector and market	<ul style="list-style-type: none"> ➤ Number of domestic and/or local vendors identified by the market analysis ➤ Number of incentives formulated 		<ul style="list-style-type: none"> • On 29th April 2019, the study on domestic market analysis has been awarded to M/s Think Through Consultancy (TTC), India after global bidding for outsourcing the activity. The findings would provide a platform, which identify best available techniques (BAT), established manufacturers / vendors of critical equipment needed for the management of pollution control, its market as well as new opportunities for the recycling industry. • Survey by TTC completed in Gujarat, Karnataka, Odisha and Punjab and being carried out in Maharashtra.
Output 1.3: Policy and regulatory enforcement mechanisms are in place	<ul style="list-style-type: none"> ➤ State enforcement of medical waste management and disposal related laws and regulations evaluated in 5 selected states ➤ Number of gaps identified in 5 selected states ➤ Number of new measures adopted and amount of medical waste managed and disposed of in environmentally sound manner in 5 selected states 		<ul style="list-style-type: none"> • State enforcement mechanisms well defined in the new BMWM Rules, 2016. • Guidelines on CBMWTFs, bar coding and implementation of BMWM Rules, 2016 published by Central Pollution Control Board (CPCB). • Guidelines for Bio-medical Waste Incinerator and Plasma Pyrolysis or Gasification System under finalization by CPCB. • Provision for new technologies such as microwaving, plasma pyrolysis and hydroclaving has been introduced for environmentally sound management (ESM) of medical waste • Stringent Dioxin and Furans emission standards included in the new BMWM Rules and compliance to the rule provisions taken care of by the prescribed authorities at national and state level as per Rule 9 Schedule III of BMWM Rules, 2016. • Secondary chamber of CBMWTFs in model districts upgraded ensuring 2 seconds of residence to reduce emission of dioxins and furans.
Outcome 2: Institutional capacity for environmentally sound management (ESM) of medical waste strengthened, in particular in large, medium and small health-care facilities			
Output 2.1: Enhanced existing institutional and technical capacity in	<ul style="list-style-type: none"> ➤ Situation analysis of medical waste management system 		<ul style="list-style-type: none"> • 28 HFCs identified in each 5 participating states where baseline assessment and gap analysis on MW management completed

<p>4 large health-care facilities in each of the 5 selected states namely Gujarat, Karnataka, Maharashtra, Orissa and Punjab</p>	<ul style="list-style-type: none"> ➤ Situation analysis and evaluation of Common Biomedical Waste Treatment Facilities (CBMWTFs) ➤ Number of stakeholders identified ➤ Stakeholders capacity building needs identified ➤ Training workshops held in each of 5 selected states 		<ul style="list-style-type: none"> • Baseline survey and Gap Analysis completed for the identified four (4) large HFCs in each of the 5 project States. • Gap Analysis Report and Action Plan submitted by the state partners. • Technical Working Group constituted for looking into the technical matters of the project. • Based on the gap analysis report, capacity building and strengthening of the HCFs carried out. • Five (5) CBMWTFs (one in each of the model district of the 5 project States) identified as • End to End Survey for 5 of the identified CBMWTFs carried out by National Environmental Engineering Research Institute (NEERI), Nagpur from February 2017 – September 2018. • CBMWTFs in Gujarat, Odisha and Punjab upgraded. CBMWTF in Karnataka is in progress. • A total of 3899 persons were trained under the training program in the 5 project states.
<p>Output 2.2: Institutional capacity building in 8 medium and 16 small health-care facilities in each of 5 selected states</p>	<ul style="list-style-type: none"> ➤ Review of training requirements ➤ Training materials prepared ➤ Number of workshops and participants Number of individuals trained 		<ul style="list-style-type: none"> • Areas of concerns and Training Need Assessment (TNA) identified during gap analysis of the HCFs. • Nodal training institutions identified in each of the 5 project States for sustainable training activity • In March 2016, proposals for the Training component under the project attracted six (6) bidders. After the technical evaluation of the bids, the contract awarded to MS Ramaiah College & Hospitals (MSRMC&H), Bangalore and the Training Programme officially launched on 29th November 2016. • Following training materials prepared : <ul style="list-style-type: none"> a) Trainer's Guide b) Training Manual for Doctors and Nurses c) Training Manual for Administrators d) Training Manual for Waste Handlers • Standard Operative Procedures (SOPs) prepared by training partner - MSRMC&H • A website was prepared and the video depicting the appropriate management of bio-medical waste uploaded in the website along with the SOP manual. The training documents also uploaded in this website • Trainer of Trainers "TOTs" conducted in all the five (5) participating states where a total of 304 trainers trained. • Training Documents also uploaded on MoEFCC and UNIDO website. • Quarterly bulletins on the training programme released and circulated to all stakeholders.
<p>Output 2.3: Strengthened technical capabilities for ESM of medical wastes in 8 medium and 16 small health-care facilities in each of 5 selected states (Gujarat, Karnataka, Maharashtra, Orissa and Punjab</p>	<ul style="list-style-type: none"> ➤ Review of training requirements ➤ Training materials prepared ➤ Number of workshops and participants 		<ul style="list-style-type: none"> • Training requirements identified in each of the 5 project States and training materials prepared in regional languages of the 5 States • Detailed training may please be seen at https://www.biomedicalwastemanagementinindia.in/training_in_hcf.html • Continuous training provided to project HFCs by concerned State Pollution Control Boards (SPCBs) of the four (4) project States and the Health department of Karnataka.

<p>Output 2.4: Five (5) targeted awareness raising campaigns for the least educated through their community leaders in 5 selected states</p>	<ul style="list-style-type: none"> ➤ Awareness raising materials formulated ➤ 5 awareness raising reports prepared ➤ Number covered member of Standing Committee – Health and Zilla Panchayath and Town/ City Municipality/ Corporation where demonstration sites and CTFs are located 		<ul style="list-style-type: none"> • Awareness raising materials developed • Training manuals and SOPs has been translated in the regional languages of the 5 project States.
<p>Outcome 3: Facilitating and promoting PPP to improve support and supply capacities in medical waste management within the health-care facility perimeter</p>			
<p>Output 3.1: Specific training curriculum on medical wastes management for 150,000 medical students of 297 medical colleges spread over 4.5 years of the course</p>	<ul style="list-style-type: none"> ➤ Curriculum and training modules prepared ➤ Practical training course materials prepared ➤ Medical curriculum ➤ Number of students trained ➤ Number of medical colleges involved 		<ul style="list-style-type: none"> • The Ministry of Health and Family Welfare (MoH&FW) has developed three (3) training modules targeted at Doctors, Nurses and Class IV employees based on the BMWM Rules, 1998. The modules submitted by MoH&FW to Medical Council of India (MCI) and Nursing Council of India (NCI) for inclusion in the curriculum for doctors and nurses respectively. (Draft modules attached – Annex II) • Health departments in coordination with Indira Gandhi National Open University (IGNOU) has developed curriculum on Medical Waste Management.
<p>Output 3.2: Enhanced effectiveness and efficiency of segregation of medical wastes at source</p>	<ul style="list-style-type: none"> ➤ Protocols developed on segregation of medical waste at source ➤ Regulations on use of standardized color codes for medical waste collection are in effect 		<ul style="list-style-type: none"> • Global tendering for procurement of colour coded bins and waste trolleys conducted in April 2016. After the technical / commercial evaluation of bids from seven (7) bidders, the contract was awarded to American Procurement Services LLC (APSCO), USA, which has a manufacturing counterpart in India (Avishkar International). • In October 2016, the delivery of standardized color-coded bins and covered waste trolleys made for 144 participating HFCs in 5 project states as follows: Gujarat (739-Bins of R,Y,B,G,W-t /232-Trolleys); Karnataka (821-Bins of R,Y,B,G,W-t/175-Trolleys); Maharashtra (682-Bins of R,Y,B,G,W-t /79-Trolleys), Odisha (666-Bins of R,Y,B,G & W /240-Trolleys) and Punjab (1250-Bins of R,Y,B,G/1244 W-t /52-Trolleys) • Temporary storage area for various category of waste has been constructed with respective color coding in the HCFs.
<p>Output 3.3: Established protocols for medical waste movement in health-care facilities from source to collection points</p>	<ul style="list-style-type: none"> ➤ SOPs prepared for waste identification ➤ SOPs prepared for waste tracking ➤ Number of personnel trained ➤ Number of health-care facilities participated ➤ SOPs prepared for waste collection and transport ➤ SOPs prepared for waste storage 		<ul style="list-style-type: none"> • MSRMC&H, Bangalore contracted to develop Standard Operating Protocols (SOPs) for identification of MW in HFCs, MW collection and transport within HCFs to collection points, tracking and record keeping of MW in HFCs, cleaning and maintaining MW storage in HFCs as well as development of PPP for provision of uninterrupted services and supplies in MW management • Video on BMW management, SOP manual and training documents uploaded on the UNIDO & MoEFCC website. • Link for the conducted trainings/workshops are given in Output 2.3 above
<p>Output 3.4: Five (5) PPPs (one in each selected states) promoted to provide uninterrupted</p>	<ul style="list-style-type: none"> ➤ PPP agreements developed and signed in 5 relevant areas ➤ List of PPP partners 		<ul style="list-style-type: none"> • Five (5) CBMWTFs (one in each of the model district of the 5 project States) identified as pilots for this Output namely: <ul style="list-style-type: none"> ▪ Ecoli Waste Management Pvt. Ltd., Ahmedabad, Gujarat

<p>services and supplies, supporting and meeting demands of medical waste management in health-care facilities</p>			<ul style="list-style-type: none"> ▪ M/s Shree Consultants Private Ltd, Mysuru, Karnataka ▪ M/S Watergrace Products, Nashik, Maharashtra ▪ Sani Clean Private Limited, Bhubaneswar, Odisha ▪ Medicare Environmental Management Pvt. Ltd of Ramky group
<p>Output 3.5: Significant reduction of volume of medical wastes at source by introducing alternative techniques</p>	<ul style="list-style-type: none"> ➤ Percentage of medical waste segregated and disinfected / decontaminated ➤ Percentage of medical waste disinfected / decontaminated, destructured and reprocessed ➤ Percentage of medical waste compacted ➤ Number of personnel trained ➤ Number of healthcare facilities participated 		<ul style="list-style-type: none"> • Thermal Disinfection of medical waste using microwave technology implemented under the project as best available technology (BAT) reducing volume of medical wastes disposed of in CBMWTFs. • Technical Working Group (TWG) agreed to procure 20 microwave units for four (4) large HFCs each in the 5 project States. • Global tendering initiated in April 2017 for the procurement of 20 microwave units. After the technical / commercial evaluation of the proposals from six (6) bidders, the contract awarded to METEKA GmbH, Austria in August 2017. • Due to the Goods and Services Tax (GST) imposed by the Government of India in 2017, delivery, installation and commissioning of the nineteen (19) microwave equipment completed only in February 2019 in Gujarat, Karnataka, Odisha and Punjab while in Maharashtra, installation/commissioning in one HFC is in progress. • The Microwave equipment installed in 19 out of 20 large HFCs were found fully operational • Personnel trained in operation and maintenance of Microwave systems in all the HFCs provided with the equipment.
<p>Outcome 4: Facilitating and promoting PPP to improve local technological and manufacturing capacities in medical waste transport and disposal sectors with specific reference to avoid generation of PCDD/PCDF and other unintentionally produced POPs releases by applying BAT/BEP measures</p>			
<p>Output 4.1: Five (5) PPPs promoted (one in each selected states) to enhance new domestic technological and manufacturing capacities in medical waste transport and disposal sectors</p>	<ul style="list-style-type: none"> ➤ PPP agreements developed and signed in 5 relevant areas ➤ List of PPP partners 		<ul style="list-style-type: none"> • The domestic market analysis (DMA) completed in Gujarat, Karnataka, Odisha and Punjab while in progress in Maharashtra. • The PPP model will be determined only after DMA is completed as this component of PPP is for strengthening of the indigenous technological manufacturing capacity. • After survey is completed and complete report is submitted by TTC, this output would be achieved.
<p>Output 4.2: Enhanced environmental protection standards for medical waste disposal technologies complying with BAT/BEP requirements</p>	<ul style="list-style-type: none"> ➤ Environmental protection protocols issued ➤ Occupational safety protocols issued ➤ Using PPE made mandatory ➤ Number of personnel trained ➤ Number of health-care facilities participated 		<ul style="list-style-type: none"> • Use of PPEs made mandatory as per BMW Rules, 2016. • PPEs procured and used by all project HFCs. • This is a continuous process and ongoing in all the identified HFCs • A well-planned training programme developed and conducted by M.S. Ramaiah Medical College and Hospitals in all participating HFCs and CBMWTFs for compliance with BAT/BE requirements. • Under the training component, a total of 151 trainings have been carried out in the 5 project states where 3,899 medical personnel were trained. Train of Trainers (TOTs) has been conducted in all the 5 project States giving training to 304 trainers to further provide trainings to all relevant stakeholders.
<p>Output 4.3: Established achievable release limits of</p>	<ul style="list-style-type: none"> ➤ Description of optimized BAT technology 		<ul style="list-style-type: none"> • In each of the HFCs, several routes for the transportation of the wastes using the covered trolleys were made. This has significantly improved avoidance of cross contamination and spread of diseases to

<p>PCDD/PCDF in respect of medical waste disposal technologies</p>	<ul style="list-style-type: none"> ➤ Monitoring programs developed ➤ Results of PCDD/PCDF measurements ➤ PCDD/PCDF release limits established ➤ Number of CTFs participated ➤ Number of technical personnel trained 		<p>patients and the helpers.</p> <ul style="list-style-type: none"> • Five (5) CBMWTFs identified in the model districts of project States where taken up for the upgradation of the secondary chamber needed for increasing the residence time from 1 sec to 2 secs. • PCDD/F emission norms of 0.1 ng/Nm³ TEQ (at 11% O₂) notified in BMWM Rules, 2016. • Upgradation for incinerators carried out in Gujarat, Odisha and Punjab to have residence time of two seconds in the secondary chamber as per BMWM Rules, 2016 in order to comply with PCDD/F emission norms. • Emission of PCDD/F from BMW incinerators were measured post-upgradation and found to be 0.006 ng/Nm³ TEQ (at 11% O₂), thus complying as per BMWM Rules, 2016. The sampling and Analysis was carried out by Vimta Labs, Hyderabad.
<p>Output 4.4: Significant reduction of volume of medical wastes by introducing alternative BAT/BEP compliance technologies</p>	<ul style="list-style-type: none"> ➤ Volume reduction achieved by medical waste decontamination ➤ Volume reduction achieved by medical waste Volume reduction achieved by medical waste compacting ➤ Number of technical staff trained on alternative techniques shredding 		<ul style="list-style-type: none"> • With the provision of BAT/BEP such as colour coded bins and waste trolleys, elaborative trainings and training materials to all project HFCs, proper segregation of medical wastes were practiced thus reducing the volume of infected waste mixed with the general waste. • The provision of thermal disinfection unit using microwave system has also contributed towards the reduction of volume of medical waste disposed of.
<p>Outcome 5: Demonstration of participatory funded and integrated systems for medical waste management and disposal in 5 selected states</p>			
<p>Output 5.1: Established participatory funding system for medical waste management and disposal</p>	<ul style="list-style-type: none"> ➤ Five MOUs prepared and signed for participatory funding ➤ Annual progress reports on demonstration activities prepared 		<p>SPMU established in each of the 5 project States has signed an MoU as given below, which include their commitment for cash and in-kind contribution to the project:</p> <ul style="list-style-type: none"> • Gujarat: Ref. No. ENV-10-2008-1483-E, dated 11.5.2011 • Karnataka: D.O. No.FEE 76 EPC 2009, dated 19.7.2011 • Maharashtra: No. B-2051, dated 18.3.2010 • Odisha: No.233/ENV 1-5/2008, dated 5.6.2010 • Punjab: D.O. No.10/128/09/4358/3050, dated 2.8.2010 <p>Annual Progress Reports regularly submitted by SPMUs</p>
<p>Output 5.2: Established integrated system for medical waste management and disposal</p>	<ul style="list-style-type: none"> ➤ TORs of integrated medical waste management and disposal systems prepared ➤ 5 integrated systems established and operational 		<ul style="list-style-type: none"> • Model District has been identified in each of the 5 project States. • Waste tracking by GPS along with barcoding implemented and practiced in Gujrat, Maharashtra, Odisha and Punjab. In Karnataka, provision of bar coding is in progress. Tender has been floated for procurement of the bar coding software. • Model District Nashik launched on 08 December 2017 with inauguration of waste tracking system for HFCs, waste transportation Vehicles and the CTFs with GPS enabled real time tracking of waste movement. • Maharashtra Pollution Control Board (MPCB) has developed a GPS enabled android phone application, which will give comfortable functioning of the entire collection and transportation system. Through this apps the concerned official can register their request for waste pickup, thus providing timely assistance and

			<p>accessibility to the CBMWTFs.</p> <ul style="list-style-type: none"> An integrated system for tracking, transportation, treatment and disposal of the BMW is set up in the identified model districts.
<p>Output 5.3: Guidance manual developed for district administrators on integrated system for medical waste management and disposal</p>	<ul style="list-style-type: none"> ➤ Guidance manuals formulated ➤ Training modules prepared ➤ Number of district administrators trained 		<ul style="list-style-type: none"> The training partner, MSRMC&H has developed and prepared the following training materials: <ul style="list-style-type: none"> a) Trainer's Guide b) Training Manual for Doctors and Nurses c) Training Manual for Administrators d) Training Manual for Waste Handlers The Standard Operative Procedures (SOPs) were also prepared by MSRMC&H. A training website launched and the video depicting the appropriate management of bio-medical waste, SOP manual and training documents uploaded in the website. Quarterly bulletins on the training programme released and circulated to all stakeholders. A total of 3,899 personnel including district administrators were trained.
<p>Output 5.4: Demonstration of participatory funded and integrated system for medical waste management and disposal in 5 selected states</p>	<ul style="list-style-type: none"> ➤ Annual progress reports on demonstration in each 5 selected states prepared 		<ul style="list-style-type: none"> A Model District in 5 project States has been identified as follows: <ul style="list-style-type: none"> a) Gujarat: Gandhinagar b) Karnataka: Mysuru c) Maharashtra: Nashik d) Odisha: Cuttak e) Punjab: Ludhiana Nine (9) HFCs participating in the model district Colour-coded bins and waste collection trolleys have been provided to the identified facilities. Microwaves system has been provided to the large HFC in the model district Bar-coding and waste tracking established in the model districts of the 4 project States and procurement in Karnataka is in progress CBMWTFs will be provided with microwave system to properly decontaminate medical wastes received from medium and small-sized HFCs reducing the volume of infected wastes that goes for incineration.
<p>Output 5.5: Country-wide dissemination of experience gained and lessons learned through extensive communication and demonstration programme</p>	<ul style="list-style-type: none"> ➤ Action plan for country-wide dissemination prepared ➤ Five workshop reports ➤ Five demonstration program report 		<ul style="list-style-type: none"> State level workshops conducted in Karnataka extending the coverage also to non-participating HFCs. A video depicting the appropriate management of bio-medical waste developed and uploaded in the website along with the SOP manual and training documents. Quarterly bulletins on the training programme released and circulated to all stakeholders. A national workshop planned to take place in Delhi in October 2019 to disseminate experience and lessons learned under the project. State level workshops to be conducted in September / October 2019. A national television advertisement of the environmentally sound management of BMW based on the project experience will be organized.
<p>Outcome 6: Project management and monitoring & evaluation</p>			
<p>Output 6.1: Project management structure</p>	<ul style="list-style-type: none"> ➤ NPCU established and staffed ➤ PSC augmented 		<ul style="list-style-type: none"> National project management unit (NPMU) established at MoEFCC where Joint Secretary, MoEFCC as the National Project Director (NPD) and Director,

established	<ul style="list-style-type: none"> ➤ NSC established ➤ SSC established and nodal officers identified in each 5 selected states ➤ Project experts recruited ➤ Project Management training held ➤ Stakeholder SPMUs established and staffed ➤ MIS established 		<p>MoEFCC as National Project Coordinator (NPC)</p> <ul style="list-style-type: none"> • Project Steering Committee (PSC) consists of National Project Management Unit (NPMU) at MoEFCC, State Project Management Unit (SPMU) at state level and UNIDO • National Steering Committee (NSC) established at MoEFCC • State Steering Committee (SSC) established in each of the five (5) participating states. • Executing agencies in the 5 states are the State Department of Environment and Forests in Gujarat, Maharashtra, Odisha and Punjab and Directorate of Health and Family Welfare in Karnataka. • State Technical Advisor (STA) recruited in Gujarat, Karnataka, Maharashtra, Odisha and Punjab. However, STAs for Gujarat, Maharashtra and Odisha resigned and STAs in Karnataka and Punjab currently on board. • Project management staff has been trained spontaneously with project implementation • SPMU established in each of the 5 participating states and MoU has been signed in 2010 and 2011 • In collaboration with WHO, the impact assessment of the project will be carried out through outsourcing.
Output 6.2: An M&E mechanism designed and implemented according	<ul style="list-style-type: none"> ➤ Inception Workshop held ➤ Detailed workplan prepared ➤ Updated impact indicators ➤ Financial audit completed ➤ Annual reports and PIRs completed ➤ Annual TPR meetings held ➤ Mid-term evaluation completed ➤ Bi-annual NSC meeting held ➤ Final external evaluation held ➤ Project Terminal Report completed 		<ul style="list-style-type: none"> • Inception workshop conducted in Delhi on 18-19 May, 2012 where project workplan agreed • Implementation status monitoring carried out in project States (Gujarat, Karnataka, Maharashtra, Odisha and Punjab). • SOP monitoring in the HCFs in the 5 project States is being carried out by MSRMC&H. • Mid-term evaluation carried out by external evaluators in February to April 2016 where extension of the project for two (2) years (up to October 2019) has been recommended. • Terminal evaluation planned to take place in August to October 2019.

III. Project Risk Management

III.1 Please indicate the overall risk management: (i) as identified in the CEO Endorsement document, and (ii) progress to-date.

[Describe in tabular form the priority activities undertaken during the reporting period in line with the project document. **Note** that risks, risk level and mitigations measures should be consistent with the ones identified in the CEO Endorsement/Approval document.]

Risks	Level	Mitigation measures	Progress to-date	New defined risk ³
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³ New risk added in reporting period. Check only if applicable.

<ul style="list-style-type: none"> ➤ Laws and regulations are not communicated properly among stakeholders at central and state governments level to appropriate authorities 	Moderate	Ensure laws and regulations are reasonable, sound, enforceable and supported with institutional	<ul style="list-style-type: none"> • Through the project, the Bio-medical Waste (Management & Handling) Rules, 1998 was comprehensively revised by MoEF&CC where draft Rules were published in June 2015 inviting 	
<ul style="list-style-type: none"> ➤ Enforcement mechanisms are not effective due to the lack of adequate number of professional staff 		capacity building and training with particular reference to creating new professional posts at SPCBs for monitoring segregation of MW at healthcare institutions and dioxin releases at CBWTFs	<ul style="list-style-type: none"> • As a result, the Ministry notified the BMW Rules, 2016 in supersession of the BMW (Management & Handling) Rules, 1998. • Further, two (2) amendments (notifications dated 16 March 2018 and 20 February 2019) on the Bio-Medical Waste Management Rules, 2016 published. • Compliance with the BMW Rules 2016 evident in participating HFCs and CBWTFs in all 5 States • Continuous monitoring of medical waste handling and management by the SPMUs. • Records well maintained in the participating HCFs for waste data, training, waste tracking and immunizations. 	
<ul style="list-style-type: none"> ➤ Level of capacity and technical capabilities at institutional level is underestimated ➤ Lack of institutional commitment 	Low	Carry out regular basic and refreshing training courses for healthcare personnel and focus on targeted awareness raising of stakeholders as a priority	<ul style="list-style-type: none"> • Satisfactorily achieved. • Continuous training imparted through the project including the trainings provided by SPMUs and the HCFs in compliance to the national legislations. • The Central Monitoring Committee (CMC) constituted by MoEFCC to keep track of status of implementation of the BMW Rules, 2016. • Extensive training programs carried out and training materials published. 	–
<ul style="list-style-type: none"> ➤ Lack of infrastructure and geographical remoteness coupled with human resources pressure impede the efficiency of PPP 	Low	Develop specific plans and methodologies that take into account these challenges by bringing in the concept of program ownership	<ul style="list-style-type: none"> • 20 large HFCs in the five (5) States identified for demonstration of BAT and BEP. These HFCs (government and private) confirmed their commitment for operation and maintenance of the BAT thus leading to PPP • Other PPP initiatives are involved in up gradation of CBMWTFs for indigenous capacity building 	–
<ul style="list-style-type: none"> ➤ Differing stakeholders' priorities compounded with conflicting industrial sector interests and their possible low interest level due to uncertainty about PPP's commercial and market prospects 	➤ Low	Government generates incentives that promotes interest in alternative technologies with particular reference to technologies in compliance with BAT/BEP	<ul style="list-style-type: none"> • Stakeholders are self-driven and willingly coming forth for implementation of BMW Rules including various innovative technologies, which caters to BAT/BEP such as microwaves, recycling infrastructure, etc. As such, lack of motivation is not the determining factor in current scenario. As per Central Pollution Control Board's annual report of 2018, approximately 97% of the BMW generated is effectively treated and disposed of. • Further, prospects for incentivization may be decided by MoEFCC, Gol, once the activity of domestic market analysis is completed (refer to Output 2.1) 	–
<ul style="list-style-type: none"> ➤ Inability to collect participatory funding 	➤ Moderate	Targeted training programs	<ul style="list-style-type: none"> • There is considerable co-funding from 	–

resulting in low motivation of health-care institutions to operate hospital waste management system effectively and efficiently		designed to identify weaknesses and improve effectiveness and efficiency	the State Health and Environment departments. <ul style="list-style-type: none"> • Extensive training programmes and awareness raising have been conducted for various level of stakeholders in the 5 States which includes Administrators, Doctors, Nurses, Paramedical staff, Waste Handlers and CTF operators to facilitate the effective implementation of the national regulation (BMWM Rules, 2016). 	
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III.2 If the project received a sub-optimal risk rating (H, S) in the previous reporting period, please state the actions taken since then to mitigate the relevant risks.

Not applicable as risk rating in previous PIR is low (L)

IV Environmental and Social Safeguards (ESS) & Stakeholder Engagement

IV.1 As part of the requirements for **projects from GEF-6 onwards**, and based on the screening as per the UNIDO Environmental and Social Safeguards Policies and Procedures (ESSPP), which category is the project?

- Category A project
- Category B project
- Category C project

- Please refer to the UNIDO Environmental and Social Safeguards Policies and Procedures (ESSPP) on how to report on E&S issues.]

(By selecting Category C, I confirm that the E&S risks of the project have not been escalated to Category A or B).

[Notes on new risks:

- If **new risks** have been identified during implementation due to changes in, i.e. project design or context, these should also be listed in (ii) below.
- If these new/additional risks are related to Operational Safeguards # 2, 3, 5, 6, or 8, please consult with UNIDO GEF Coordination to discuss next steps.

	E&S risk	Mitigation measures undertaken during the reporting period	Monitoring methods and procedures used in the reporting period
(i) Risks identified in ESMP at time of CEO Endorsement			
(ii) New risks identified during project implementation (if not applicable, please insert 'NA' in each box)			

IV.2 Please provide any feedback submitted by co-financiers, and other Partners/Stakeholders of the project (e.g. private sector, CSOs, NGOs, etc.).

Feedback by the beneficiary HCFs – The HCFs have reported of much better practices in MW management after bins trolleys and trainings provided.

IV.3 Please provide any **relevant stakeholder consultation documents**:

[Examples: *Project Steering Committee minutes, Aide Memoire, Meeting Agenda, etc.*
All attachments are to be named as per the GEF required format, i.e.: “GEFID_Document Title”]

1. 3803 – Minutes of Meeting for project review at MoEFCC, 26 June 2018
2. 3803 – Maharashtra MoM for SPSC, 22 January 2019
3. 3803 – BMWM (Amendment) Rules 2019
4. 3803 – Minutes of consultation meeting with TTC, 30th May 2019
5. 3803 – Toolkit for Domestic Market Analysis: assessment of HFCs, CBWTF operators, DoHFW officials, municipal corporation and SPCB officials
6. 3803 – SOP Monitoring Toolkit
7. 3803 – Photographs for training
8. 3803 – Photographs on CBWTFs under upgradation

V Knowledge Management

V.1 Please provide any **relevant knowledge management mechanisms / tools** that the project has generated:

[Examples: *online information exchange/sharing platforms, relevant technical reports, UNIDO Indicator Tracking Tools, GEF Tracking Tools/Core Indicators, project websites, videos, publications, flyers, etc.*
All attachments are to be named as per the GEF required format, i.e.: “GEFID_Document Title”]

A. The link to Training Manuals on MoEFCC site :

- <http://moef.gov.in/division/environment-divisions/hazardous-substances-management-hsm/publications/>
- ✓ SOPs : <http://moef.gov.in/wp-content/uploads/2019/05/1.-SOP-calendar.pdf>
 - ✓ Trainer's Guide <http://moef.gov.in/wp-content/uploads/2019/05/2.-Trainer-guide-Final.pdf>
 - ✓ Administrator's Manual : <http://moef.gov.in/wp-content/uploads/2019/05/3.-Admin-Manual-Final.pdf>
 - ✓ Docros & Nurses : <http://moef.gov.in/wp-content/uploads/2019/05/4.-doctorss-manual.pdf>
 - ✓ Waste Handlers : http://moef.gov.in/wp-content/uploads/2019/05/5.-Waste-handlers-manual_FLIP-CHART.pdf

B. The link on MS Ramaiah Website :

- <https://www.biomedicalwastemanagementinindia.in/index.html>
- ✓ Training Manuals : https://www.biomedicalwastemanagementinindia.in/training_manuals.html
 - ✓ SOPs : <https://www.biomedicalwastemanagementinindia.in/sops.html>
 - ✓ Training video : <https://www.biomedicalwastemanagementinindia.in/videos.html>

C. The Brochure for COP

VI Financial report

VI.1 Financial implementation of the project:

[Provide a description of the main expenditures as of 30 June 2019 (by major outputs and budget line, etc.) during the reporting - (attach copy of the latest FPCS report for more detailed information). Also describe the current status of funds mobilization activities and their implications for programme implementation.]

 PROJECT DELIVERY REPORT		Project:	104160 - ENVIRONMENTALLY SOUND MANAGEMENT OF MEDICAL WASTES IN INDIA		Project Manager:	Erinda Galvan	Project Validity: Status:	02.12.2011 - 31.10.2019 Implement			
Reporting Period:	03.01.2011 - 30.06.2019		Project Theme:	Energy and Environment		Country:	India	Region:	Asia and Pacific		
Sponsor Nr.	Sponsor	Grant	Grant Description	Fund	Currency	Grant Status	Grant Validity				
400150	Global Environment Facility	200000252	GFIND11004	GF	USD	Authority to implement	03.11.2011 - 31.10.2019				
	Description	Released Budget Current Year (a)	Obligations Current Year (b)	Disbursements Current Year (c)	Expenditures Current Year (d=b+c)	Total Agreement Budget (e)	Released Budget (f)	Obligations + Disbursements (g)	Funds Available* (h=f-g)	Support Cost (i)	Total Expenditures (j=g+i)
200000252											
104160-1-01-01	GFIND11004	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	6,838.92	6,838.92	6,838.92	0.00	0.00	6,838.92
1500	Local travel	0.00	0.00	0.00	0.00	19,969.60	19,969.60	19,969.60	0.00	0.00	19,969.60
1700	Nat. Consult./Staff	0.00	0.00	0.00	0.00	87,669.98	87,669.98	87,669.98	0.00	0.00	87,669.98
2100	Contractual Services	(21.12)	0.00	(21.12)	(21.12)	1,650,330.52	1,650,330.52	1,650,330.52	0.00	0.00	1,650,330.52
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4300	Premises	6.75	0.00	0.00	0.00	13.50	13.50	6.75	6.75	0.00	6.75
4500	Equipment	0.00	0.00	0.00	0.00	2,650.86	2,650.86	2,650.86	0.00	0.00	2,650.86
5100	Other Direct Costs	(68.86)	(1,853.50)	1,784.64	(68.86)	50,258.06	50,258.06	50,258.06	0.00	0.00	50,258.06
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	186,661.38	186,661.38
104160-1-01-01	Total	(83.23)	(1,853.50)	1,763.52	(89.98)	1,817,731.44	1,817,731.44	1,817,724.69	6.75	186,661.38	2,004,386.07
104160-1-02-01											
104160-1-02-01	1.1 Augmented Ministerial Network	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	13,539.19	13,539.19	13,539.19	0.00	0.00	13,539.19
1500	Local travel	0.00	0.00	0.00	0.00	775.43	775.43	775.43	0.00	0.00	775.43
1700	Nat. Consult./Staff	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2100	Contractual Services	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	13,471.48	13,471.48	13,471.48	0.00	0.00	13,471.48
5100	Other Direct Costs	0.00	0.00	0.00	0.00	495.07	495.07	495.07	0.00	0.00	495.07
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(492.85)	(492.85)
104160-1-02-01	Total	0.00	0.00	0.00	0.00	28,281.17	28,281.17	28,281.17	0.00	(492.85)	27,788.32

* Does not include Unapproved Obligations

 PROJECT DELIVERY REPORT		Project:	104160 - ENVIRONMENTALLY SOUND MANAGEMENT OF MEDICAL WASTES IN INDIA		Project Manager:	Erlinda Galvan	Project Validity Status:	02.12.2011 - 31.10.2019 Implement			
Reporting Period:	03.01.2011 - 30.06.2019		Project Theme:	Energy and Environment	Country:	India	Region	Asia and Pacific			
Sponsor Nr.	Sponsor	Grant	Grant Description	Fund	Currency	Grant status	Grant Validity				
400150	Global Environment Facility	20000252	GFIND11004	GF	USD	Authority to implement	03.11.2011 - 31.10.2019				
	Description	Released Budget Current Year (a)	Obligations Current Year (b)	Disbursements Current Year (c)	Expenditures Current Year (d=b+c)	Total Agreement Budget (e)	Released Budget (f)	Obligations + Disbursements (g)	Funds Available* (h=f-g)	Support Cost (i)	Total Expenditure (j=g+i)
104160-1-02-02	1.2 Regulatory/Economic/Market Incentive	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1500	Local travel	985.18	0.00	986.40	986.40	1,303.51	1,303.51	1,304.73	(1.22)	0.00	1,304.73
2100	Contractual Services	83,429.66	83,429.66	0.00	83,429.66	83,429.66	83,429.66	83,429.66	0.00	0.00	83,429.66
5100	Other Direct Costs	(22.54)	0.00	(23.45)	(23.45)	(22.54)	(22.54)	(23.45)	0.91	0.00	(23.45)
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,471.07	8,471.07
104160-1-02-02	Total	84,352.30	83,429.66	962.95	84,352.61	84,710.63	84,710.63	84,710.54	(0.31)	8,471.07	93,182.01
104160-1-02-03	1.3 Policy/Regulatory Enforcement	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1500	Local travel	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1700	Nat. Consult./Staff	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3500	International Meetings	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
104160-1-02-03	Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
104160-1-03-01	2.1 Enhance 4 Healthcare Facilities	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	37,330.53	37,330.53	37,330.53	0.00	0.00	37,330.53
1500	Local travel	0.00	0.00	0.00	0.00	7,497.98	7,497.98	7,497.98	0.00	0.00	7,497.98
1700	Nat. Consult./Staff	17.20	0.00	0.00	0.00	22,258.07	22,258.07	22,240.87	17.20	0.00	22,240.87
2100	Contractual Services	133,000.00	0.00	0.00	0.00	136,220.38	136,220.38	3,220.38	133,000.00	0.00	3,220.38
4300	Premises	12,267.40	1,211.82	5,348.24	6,560.08	123,205.96	123,205.96	117,498.62	5,707.34	0.00	117,498.62
4500	Equipment	27,079.48	0.00	0.00	0.00	975,494.92	975,494.92	948,415.44	27,079.48	0.00	948,415.44
5100	Other Direct Costs	1,424.55	(344.85)	487.90	143.05	6,360.31	6,360.31	5,078.81	1,281.50	0.00	5,078.81
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	113,304.71	113,304.71
104160-1-03-01	Total	173,788.63	866.97	5,836.14	6,703.11	1,308,368.15	1,308,368.15	1,141,282.63	167,085.52	113,304.71	1,254,587.34
104160-1-03-02	2.2 Enhance 8 medium & 16 Healthcare F.	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
104160-1-03-02	Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

* Does not include Unapproved Obligations

		PROJECT DELIVERY REPORT		Project:	104160 - ENVIRONMENTALLY SOUND MANAGEMENT OF MEDICAL WASTES IN INDIA	Project Manager:	Erlinda Galvan	Project Validity Status:	02.12.2011 - 31.10.2019 Implement
Reporting Period:	03.01.2011 - 30.06.2019	Project Theme:	Energy and Environment	Country:	India	Region:	Asia and Pacific		
Sponsor Nr.	Sponsor	Grant	Grant Description	Fund	Currency	Grant Status	Grant Validity		
400150	Global Environment Facility	200000252	GFIND11004	GF	USD	Authority to implement	03.11.2011 - 31.10.2019		

	Description	Released Budget Current Year (a)	Obligations Current Year (b)	Disbursements Current Year (c)	Expenditures Current Year (d=b+c)	Total Agreement Budget (e)	Released Budget (f)	Obligations + Disbursements (g)	Funds Available* (h=f-g)	Support Cost (i)	Total Expenditures (j=g+i)
104160-1-03-03	2.3 ESM of Medical Wastes	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	12,092.78	12,092.78	12,092.78	0.00	0.00	12,092.78
1500	Local travel	0.00	0.00	0.00	0.00	4,310.53	4,310.53	4,310.53	0.00	0.00	4,310.53
2100	Contractual Services	0.00	0.00	0.00	0.00	284,790.76	284,790.76	284,790.76	0.00	0.00	284,790.76
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4500	Equipment	378,638.27	0.00	0.00	0.00	378,638.27	378,638.27	0.00	378,638.27	0.00	0.00
5100	Other Direct Costs	0.00	0.00	0.00	0.00	77.24	77.24	77.24	0.00	0.00	77.24
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,127.16	30,127.16
104160-1-03-03	Total	378,638.27	0.00	0.00	0.00	679,905.58	679,905.58	301,271.31	378,638.27	30,127.16	351,358.47

104160-1-03-04	2.4 Targeted Awareness Raising	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1500	Local travel	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2100	Contractual Services	42,755.50	42,755.50	0.00	42,755.50	42,755.50	42,755.50	42,755.50	0.00	0.00	42,755.50
3500	International Meetings	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5100	Other Direct Costs	0.00	0.00	0.00	0.00	193.95	193.95	193.95	0.00	0.00	193.95
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,294.95	4,294.95
104160-1-03-04	Total	42,755.50	42,755.50	0.00	42,755.50	42,949.45	42,949.45	42,949.45	0.00	4,294.95	47,244.40

104160-1-04-01	3.1 Training Curriculum on Medical Waste	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1500	Local travel	0.00	0.00	0.00	0.00	7,967.27	7,967.27	7,967.27	0.00	0.00	7,967.27
1700	Nat.Consult./Staff	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2100	Contractual Services	42,755.50	42,755.50	0.00	42,755.50	274,389.98	274,389.98	274,389.98	0.00	0.00	274,389.98
5100	Other Direct Costs	1,361.46	0.00	0.00	0.00	2,789.50	2,789.50	1,428.04	1,361.46	0.00	1,428.04
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,378.54	28,378.54
104160-1-04-01	Total	44,116.96	42,755.50	0.00	42,755.50	285,146.75	285,146.75	283,785.29	1,361.46	28,378.54	312,163.83

104160-1-04-03	3.3 Protocols for Medical Waste	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
2100	Contractual Services	0.00	0.00	0.00	0.00	86,688.71	86,688.71	86,688.71	0.00	0.00	86,688.71
4500	Equipment	33,311.29	0.00	0.00	0.00	33,311.29	33,311.29	0.00	33,311.29	0.00	0.00
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,668.87	8,668.87
104160-1-04-03	Total	33,311.29	0.00	0.00	0.00	120,000.00	120,000.00	86,688.71	33,311.29	8,668.87	95,357.58

		PROJECT DELIVERY REPORT		Project:	104160 - ENVIRONMENTALLY SOUND MANAGEMENT OF MEDICAL WASTES IN INDIA	Project Manager:	Erlinda Galvan	Project Validity Status:	02.12.2011 - 31.10.2019 Implement
Reporting Period:	03.01.2011 - 30.06.2019	Project Theme:	Energy and Environment	Country:	India	Region:	Asia and Pacific		
Sponsor Nr.	Sponsor	Grant	Grant Description	Fund	Currency	Grant Status	Grant Validity		
400150	Global Environment Facility	200000252	GFIND11004	GF	USD	Authority to implement	03.11.2011 - 31.10.2019		

	Description	Released Budget Current Year (a)	Obligations Current Year (b)	Disbursements Current Year (c)	Expenditures Current Year (d=b+c)	Total Agreement Budget (e)	Released Budget (f)	Obligations + Disbursements (g)	Funds Available* (h=f-g)	Support Cost (i)	Total Expenditures (j=g+i)
104160-1-04-04	3.4 PPPs promoted in 5 States	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	1,608.02	1,608.02	1,608.02	0.00	0.00	1,608.02
1500	Local travel	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1700	Nat.Consult./Staff	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4500	Equipment	35,345.86	0.00	0.00	0.00	35,345.86	35,345.86	0.00	35,345.86	0.00	0.00
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	160.80	160.80
104160-1-04-04	Total	35,345.86	0.00	0.00	0.00	36,953.88	36,953.88	1,608.02	35,345.86	160.80	1,768.82

104160-1-04-05	3.5 Volume of Medical Waste reduced	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	4,037.14	4,037.14	4,037.14	0.00	0.00	4,037.14
1500	Local travel	533.94	0.00	533.94	533.94	828.44	828.44	828.44	0.00	0.00	828.44
1700	Nat.Consult./Staff	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4300	Premises	0.00	0.00	0.00	0.00	32.35	32.35	32.35	0.00	0.00	32.35
4500	Equipment	55,806.12	0.00	0.00	0.00	128,505.55	128,505.55	72,699.43	55,806.12	0.00	72,699.43
5100	Other Direct Costs	497.68	0.00	497.68	497.68	851.52	851.52	851.52	0.00	0.00	851.52
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,844.98	7,844.98
104160-1-04-05	Total	56,837.74	0.00	1,031.62	1,031.62	134,255.00	134,255.00	78,448.88	55,806.12	7,844.98	86,293.86

104160-1-05-01	4.1 Five PPPs promoted	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	24,833.65	24,833.65	24,833.65	0.00	0.00	24,833.65
1500	Local travel	0.00	(159.34)	106.88	(52.46)	3,565.80	3,565.80	3,513.34	52.46	0.00	3,513.34
1700	Nat.Consult./Staff	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4500	Equipment	133,863.19	0.00	0.00	0.00	695,570.59	695,570.59	561,707.40	133,863.19	0.00	561,707.40
5100	Other Direct Costs	0.00	0.00	0.00	0.00	2,256.98	2,256.98	2,256.98	0.00	0.00	2,256.98
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	59,211.22	59,211.22
104160-1-05-01	Total	133,863.19	(159.34)	106.88	(52.46)	726,027.02	726,027.02	592,111.37	133,915.65	59,211.22	651,322.59

 PROJECT DELIVERY REPORT		Project: 104160 - ENVIRONMENTALLY SOUND MANAGEMENT OF MEDICAL WASTES IN INDIA	Project Manager: Erlinda Galvan	Project Validity Status: 02.12.2011 - 31.10.2019 Implement
Reporting Period: 03.01.2011 - 30.06.2019	Project Theme: Energy and Environment	Country: India	Region: Asia and Pacific	
Sponsor Nr.: 400150	Sponsor: Global Environment Facility	Grant: 200000252	Grant Description: GFIND11004	Fund: GF
			Currency: USD	Grant Status: Authority to implement
				Grant Validity: 03.11.2011 - 31.10.2019

	Description	Released Budget Current Year (a)	Obligations Current Year (b)	Disbursements Current Year (c)	Expenditures Current Year (F+B+C)	Total Agreement Budget (e)	Released Budget (f)	Obligations + Disbursements (g)	Funds Available* (H=F-G)	Support Cost (I)	Total Expenditures (J=H+I)
104160-1-05-02	4.2 Medwaste Disposal Technologies	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1500	Local travel	1,258.70	(1,600.00)	2,858.70	1,258.70	10,235.48	10,235.48	10,235.48	0.00	0.00	10,235.48
2100	Contractual Services	1,387.08	0.00	1,387.08	1,387.08	1,387.08	1,387.08	1,387.08	0.00	0.00	1,387.08
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	10,461.67	10,461.67	10,461.67	0.00	0.00	10,461.67
4500	Equipment	36,507.11	0.00	0.00	0.00	287,670.79	287,670.79	251,163.68	36,507.11	0.00	251,163.68
5100	Other Direct Costs	408.25	0.00	(42.90)	(42.90)	1,157.80	1,157.80	706.65	451.15	0.00	706.65
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,349.27	26,349.27
104160-1-05-02	Total	39,561.14	(1,600.00)	4,202.88	2,602.88	310,912.82	310,912.82	273,354.56	36,558.26	26,349.27	300,303.83
104160-1-05-03	4.3 Release Limits of PCDD/F	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1500	Local travel	1,380.40	(608.09)	1,958.66	1,350.57	33,109.77	33,109.77	33,079.94	29.83	0.00	33,079.94
1700	Nat. Consult./Staff	10,662.33	5,781.55	4,861.17	10,642.72	30,746.18	30,746.18	30,726.57	19.61	0.00	30,726.57
2100	Contractual Services	0.00	0.00	0.00	0.00	74,464.30	74,464.30	74,464.30	0.00	0.00	74,464.30
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3500	International Meetings	0.00	0.00	0.00	0.00	751.47	751.47	751.47	0.00	0.00	751.47
4500	Equipment	150,124.60	0.00	0.00	0.00	150,124.60	150,124.60	0.00	150,124.60	0.00	0.00
5100	Other Direct Costs	1.75	0.00	1.75	1.75	456.04	456.04	456.04	0.00	0.00	456.04
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,947.92	13,947.92
104160-1-05-03	Total	162,169.08	5,173.46	6,821.58	11,995.04	289,652.36	289,652.36	139,478.32	150,174.04	13,947.92	153,426.24
104160-1-05-04	4.4 Introduce BAT/BEP Compliance	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	13,006.28	13,006.28	13,006.28	0.00	0.00	13,006.28
1500	Local travel	0.00	0.00	0.00	0.00	13,049.92	13,049.92	13,049.92	0.00	0.00	13,049.92
1700	Nat. Consult./Staff	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3500	International Meetings	0.00	0.00	0.00	0.00	453.93	453.93	453.93	0.00	0.00	453.93
4500	Equipment	153,516.59	0.00	0.00	0.00	770,468.20	770,468.20	616,951.61	153,516.59	0.00	616,951.61
5100	Other Direct Costs	0.00	0.00	0.00	0.00	21.67	21.67	21.67	0.00	0.00	21.67
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	64,348.36	64,348.36
104160-1-05-04	Total	153,516.59	0.00	0.00	0.00	797,000.00	797,000.00	643,483.41	153,516.59	64,348.36	707,831.77

* Does not include Unapproved Obligations

 PROJECT DELIVERY REPORT		Project: 104160 - ENVIRONMENTALLY SOUND MANAGEMENT OF MEDICAL WASTES IN INDIA	Project Manager: Erlinda Galvan	Project Validity Status: 02.12.2011 - 31.10.2019 Implement
Reporting Period: 03.01.2011 - 30.06.2019	Project Theme: Energy and Environment	Country: India	Region: Asia and Pacific	
Sponsor Nr.: 400150	Sponsor: Global Environment Facility	Grant: 200000252	Grant Description: GFIND11004	Fund: GF
			Currency: USD	Grant Status: Authority to implement
				Grant Validity: 03.11.2011 - 31.10.2019

	Description	Released Budget Current Year (a)	Obligations Current Year (b)	Disbursements Current Year (c)	Expenditures Current Year (F+B+C)	Total Agreement Budget (e)	Released Budget (f)	Obligations + Disbursements (g)	Funds Available* (H=F-G)	Support Cost (I)	Total Expenditures (J=H+I)
104160-1-06-01	5.1 Participatory Funding System	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1500	Local travel	0.00	0.00	0.00	0.00	251.65	251.65	251.65	0.00	0.00	251.65
1700	Nat. Consult./Staff	(334.79)	(1,388.00)	1,053.21	(334.79)	16,521.72	16,521.72	16,521.72	0.00	0.00	16,521.72
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5100	Other Direct Costs	0.00	0.00	0.00	0.00	(36.10)	(36.10)	(36.10)	0.00	0.00	(36.10)
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,673.74	1,673.74
104160-1-06-01	Total	(334.79)	(1,388.00)	1,053.21	(334.79)	16,737.27	16,737.27	16,737.27	0.00	1,673.74	18,411.01
104160-1-06-02	5.2 Integrated System for Medwaste	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	15.34	15.34	15.34	0.00	0.00	15.34
1500	Local travel	1,588.66	253.63	1,335.03	1,588.66	1,588.66	1,588.66	1,588.66	0.00	0.00	1,588.66
1700	Nat. Consult./Staff	21,205.24	6,544.83	1,053.21	7,597.84	36,194.20	36,194.20	22,586.80	13,607.40	0.00	22,586.80
2100	Contractual Services	52,000.00	28,862.00	12,390.00	41,272.00	52,000.00	52,000.00	41,272.00	10,728.00	0.00	41,272.00
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5100	Other Direct Costs	2,000.00	0.00	467.35	467.35	2,027.73	2,027.73	495.08	1,532.65	0.00	495.08
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,595.80	6,595.80
104160-1-06-02	Total	76,793.90	35,660.26	15,245.59	50,925.85	91,825.53	91,825.53	65,957.88	25,867.65	6,595.80	72,553.68
104160-1-06-03	5.3 Guidance Manual developed	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1500	Local travel	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1700	Nat. Consult./Staff	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2100	Contractual Services	33,000.00	0.00	0.00	0.00	33,000.00	33,000.00	0.00	33,000.00	0.00	0.00
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
104160-1-06-03	Total	33,000.00	0.00	0.00	0.00	33,000.00	33,000.00	0.00	33,000.00	0.00	0.00

* Does not include Unapproved Obligations

 PROJECT DELIVERY REPORT		Project:	104160 - ENVIRONMENTALLY SOUND MANAGEMENT OF MEDICAL WASTES IN INDIA	Project Manager:	Erlinda Galvan	Project Validity Status:	02.12.2011 - 31.10.2019 Implement
Reporting Period:	03.01.2011 - 30.06.2019	Project Theme:	Energy and Environment	Country:	India	Region:	Asia and Pacific
Sponsor Nr.	400150	Sponsor	Global Environment Facility	Grant	200000252	Grant Description	GFIND11004
				Fund	GF	Currency	USD
				Grant Status	Authority to implement	Grant Validity	03.11.2011 - 31.10.2019

	Description	Released Budget Current Year (a)	Obligations Current Year (b)	Disbursements Current Year (c)	Expenditures Current Year (d=B+C)	Total Agreement Budget (e)	Released Budget (f)	Obligations + Disbursements (g)	Funds Available* (h=f-g)	Support Cost (i)	Total Expenditures (j=g+i)
104160-1-06-04	5.4 Five Demo Districts	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	17.14	0.00	0.00	0.00	3,479.99	3,479.99	3,462.85	17.14	0.00	3,462.85
1500	Local travel	(730.72)	(1,224.00)	624.53	(599.47)	8,824.93	8,824.93	8,956.18	(131.25)	0.00	8,956.18
1700	Nat. Consult./Staff	13,964.95	6,416.79	7,513.43	13,930.22	24,881.65	24,881.65	24,846.92	34.73	0.00	24,846.92
4500	Equipment	326,051.43	(706,015.20)	705,664.09	(351.11)	2,462,378.80	2,462,378.80	2,135,976.26	326,402.54	0.00	2,135,976.26
5100	Other Direct Costs	3.96	0.00	3.93	3.93	216.53	216.53	216.50	0.03	0.00	216.50
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	217,345.97	217,345.97
104160-1-06-04	Total	333,306.76	(706,822.41)	713,805.98	12,983.57	2,499,781.90	2,499,781.90	2,173,458.71	326,323.19	217,345.97	2,390,804.68

104160-1-06-05	5.5 Lessons Learned disseminated	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1500	Local travel	13,474.77	5,086.14	8,388.63	13,474.77	13,474.77	13,474.77	13,474.77	0.00	0.00	13,474.77
1700	Nat. Consult./Staff	15,000.00	0.00	0.00	0.00	15,000.00	15,000.00	0.00	15,000.00	0.00	0.00
2100	Contractual Services	85,511.00	85,511.00	0.00	85,511.00	85,511.00	85,511.00	85,511.00	0.00	0.00	85,511.00
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3500	International Meetings	37,514.23	0.00	0.00	0.00	37,514.23	37,514.23	0.00	37,514.23	0.00	0.00
5100	Other Direct Costs	5,000.00	0.00	80.79	80.79	5,000.00	5,000.00	80.79	4,919.21	0.00	80.79
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,906.66	9,906.66
104160-1-06-05	Total	156,500.00	90,597.14	8,469.42	93,066.56	156,500.00	156,500.00	93,066.56	57,433.44	9,906.66	108,973.22

104160-1-07-01	6.1 Project Management Structure	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	9,383.58	9,383.58	9,383.58	0.00	0.00	9,383.58
1500	Local travel	(300.00)	(300.00)	0.00	(300.00)	20,204.58	20,204.58	20,204.58	0.00	0.00	20,204.58
1700	Nat. Consult./Staff	19,904.92	7,755.01	12,168.74	19,923.75	183,079.88	183,079.88	183,098.71	(18.83)	0.00	183,098.71
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	210.71	210.71	210.71	0.00	0.00	210.71
5100	Other Direct Costs	229.51	0.00	3.12	3.12	(653.40)	(653.40)	(679.79)	226.39	0.00	(679.79)
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,918.76	20,918.76
104160-1-07-01	Total	19,834.43	7,455.01	12,171.86	19,626.87	212,225.35	212,225.35	212,017.79	207.56	20,918.76	232,936.55

* Does not include Unapproved Obligations

 PROJECT DELIVERY REPORT		Project:	104160 - ENVIRONMENTALLY SOUND MANAGEMENT OF MEDICAL WASTES IN INDIA	Project Manager:	Erlinda Galvan	Project Validity Status:	02.12.2011 - 31.10.2019 Implement
Reporting Period:	03.01.2011 - 30.06.2019	Project Theme:	Energy and Environment	Country:	India	Region:	Asia and Pacific
Sponsor Nr.	400150	Sponsor	Global Environment Facility	Grant	200000252	Grant Description	GFIND11004
				Fund	GF	Currency	USD
				Grant Status	Authority to implement	Grant Validity	03.11.2011 - 31.10.2019

	Description	Released Budget Current Year (a)	Obligations Current Year (b)	Disbursements Current Year (c)	Expenditures Current Year (d=B+C)	Total Agreement Budget (e)	Released Budget (f)	Obligations + Disbursements (g)	Funds Available* (h=f-g)	Support Cost (i)	Total Expenditures (j=g+i)
104160-1-07-02	6.2 M&E Mechanism	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	19,464.81	19,464.81	19,464.81	0.00	0.00	19,464.81
1500	Local travel	2,875.01	(362.45)	2,011.37	1,648.92	49,424.63	49,424.63	48,196.54	1,228.09	0.00	48,196.54
1700	Nat. Consult./Staff	38,687.97	19,862.30	18,771.17	38,633.47	92,847.49	92,847.49	92,792.99	54.50	0.00	92,792.99
3000	Train/Fellowship/Study	0.00	0.00	0.00	0.00	144.12	144.12	144.12	0.00	0.00	144.12
3500	International Meetings	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4300	Premises	4,785.99	1,309.56	3,476.43	4,785.99	5,587.22	5,587.22	5,587.22	0.00	0.00	5,587.22
4500	Equipment	0.00	0.00	0.00	0.00	5,539.04	5,539.04	5,539.04	0.00	0.00	5,539.04
5100	Other Direct Costs	1,743.02	1,609.94	80.66	1,690.60	21,877.09	21,877.09	21,824.67	52.42	0.00	21,824.67
9300	Support Cost IDC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,355.28	19,355.28
104160-1-07-02	Total	48,091.99	22,419.35	24,338.63	46,758.58	194,884.40	194,884.40	193,551.39	1,333.01	19,355.28	212,906.67

104160-1-07-04	6.3 Mid-term & Final Evaluations	USD									
1100	Staff & Intern Consultants	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
104160-1-07-04	Total	0.00									

104160-1-53-01	Evaluation	USD	USD	USD	USD	USD	USD	USD	USD	USD	USD
1100	Staff & Intern Consultants	63,000.00	84,751.00	0.00	84,751.00	78,450.00	78,450.00	100,201.00	(21,751.00)	0.00	100,201.00
1500	Local travel	26,936.08	0.00	0.00	0.00	44,696.90	44,696.90	17,760.82	26,936.08	0.00	17,760.82
1700	Nat. Consult./Staff	10,000.00	11,759.07	0.00	11,759.07	10,000.00	10,000.00	11,759.07	(1,759.07)	0.00	11,759.07
5100	Other Direct Costs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
104160-1-53-01	Total	99,936.08	96,510.07	0.00	96,510.07	133,146.90	133,146.90	129,720.89	3,426.01	0.00	129,720.89

200000252	Total	2,111,341.63	(278,180.33)	795,811.26	517,630.53	10,000,000.00	10,000,000.00	8,406,289.24	1,593,710.76	827,072.59	5,233,361.83
104160	USD Total	2,111,341.63	(278,180.33)	795,811.26	517,630.53	10,000,000.00	10,000,000.00	8,406,289.24	1,593,710.76	827,072.59	5,233,361.83

* Does not include Unapproved Obligations

VII Work Plan and Budget

VII.1 Please provide **an updated project work plan and budget** for the remaining duration of the project, as per last approved project extension. Please expand/modify the table as needed.

Outputs by Project Component	Year 7				Year 8				Year 9				GEF Grant Budget Available (US\$)
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Outcome 1 – Enabling and harmonized environmental and health-care policy and regulatory instruments through appropriate networking for creation and promotion of environmentally sound management of medical waste, disposal sector and market													
Output 1.1: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 1.2:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
Output 1.1: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Outcome 2: Institutional capacity for environmentally sound management (ESM) of medical waste strengthened, in particular in large, medium and small health-care facilities													
Output 2.1:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 2.2: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 2.3: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 2.4:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Outcome 3: Facilitating and promoting PPP to improve support and supply capacities in medical waste management within the healthcare facility perimeter													
Output 3.1: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 3.2: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 3.3: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 3.4:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 3.5: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Outcome 4: Facilitating and promoting PPP to improve local technological and manufacturing capacities in medical waste transport and disposal sectors with specific reference to avoid generation of PCDD/PCDF and other unintentionally produced POPs releases by applying BAT/BEP measures													
Output 4.1:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
Output 4.2: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 4.3:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 4.4:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Outcome 5: Demonstration of participatory funded and integrated systems for medical waste													
Output 5.1:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 5.2: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 5.3: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Output 5.4:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
Output 5.5:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
Outcome 6: Demonstration of participatory funded and integrated systems for medical waste													
Output 6.1: completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Output 6.2:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>									
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VIII Synergies

VIII.1 Synergies achieved:

[Describe potential synergies arising out of closer integration of the service modules within the project or cooperation with (external) multilateral and bilateral projects/programmes.]