


Agenda Item No:	5	
Committee:	Cabinet	
Date:	13 December 2018	
Report Title:	Clinical Waste Solution	

Cover sheet:

1 Purpose / Summary

- For members to determine the future shape of domestic clinical waste collection and disposal in Fenland following changes to NHS provision in the East of England and approve the resulting changes to Fenland's Waste Service Standards.
- Following the lead of other areas, and through work in cooperation with the Cambridgeshire and Peterborough Waste Partnership, to consider providing sharps box drop-off points through local pharmacies, and where required at a small number of dispensing GP surgeries, by entering in to agreements with these local and national businesses.
- In association with establishing drop-off points in local communities, to determine the nature of the clinical waste door-step collection service offered and fee charged.

2 Key issues

- NHS England (Midlands & East) have advised the Council that from April 2019 they will no longer be arranging for the collection of returned domestic sharps boxes from local pharmacies.
- The NHS have informed the Cambridgeshire and Peterborough Waste Partnership (Recap) that there are 977,800 patients registered with GPs in Cambridgeshire and Peterborough and more than 43,000 of these patients are registered diabetics; 4% of the total registered patients, with 7,855 registered diabetics at Fenland GPs.
- The current cost per collection of clinical waste is £6.10 plus administration costs. Across Cambridgeshire and Peterborough the 35,000 prescribed sharps containers will cost £280,000 to collect each year and more than £1,000 a tonne for Peterborough and the County Council to dispose of. We are informed that in Fenland there were 7,138 sharps containers prescribed by GPs in 2017/18.
- The estimated cost to Fenland of not making other arrangements and providing sharps collections without charge is more than £60,000.
- As a result, Fenland and the other Cambridgeshire and Peterborough Waste Partnership authorities are working together with the NHS and Local Pharmaceutical Committee to develop workable options.
- Timescales and cost mean Household Waste Recycling Sites and Council premises have had to be discounted as options ahead of using the existing network of qualified and experienced professionals that customers are already using, and who they trust to deliver their healthcare needs with discretion.
- Diabetes UK support sharps box drop-off points such as pharmacies being provided and they recognise the financial climate is changing for local authorities, they are concerned that charges might prohibit customers from using a collection only service.

- Pharmacists represented by the Local Pharmaceutical Committee support the proposal to provide sharps box drop-off points through local pharmacies and dispensing GP surgeries when funded by the local authority.
- Even with a network of drop-off points the Council still has a duty to provide household collections where requested. A charge can be made for these collections protecting the authority from large unplanned expense, and where possible encourage the best use of any agreed sharps box drop-off points.
- As a result, the proposed service solution to the NHS changes is to provide a network of up to 20 free drop-off points across the area supported by the option of a door-step collection service at a fee. The fee will remain waived for those customers who through their medical needs require very regular collections (section 1.14 refers) and in cases of extreme hardship. These proposals will allow customers a choice of disposal options and protect the authority from an unplanned financial risk.

3 Recommendations

That Cabinet recommend for Council approval:

1. With effect from 1st April 2019, the introduction of free sharps box drop-off points in local pharmacies at a forecast cost to FDC of £18,000 and incorporated in the 2019/20 budget estimates.
2. With effect from 1st April 2019, the introduction of free collection points in dispensing GP Practices at a forecast cost to FDC of £2,000 and incorporated in the 2019/20 budget estimates.
3. Council to set the Fees and Charges for 2019/20 at an £8.00 fee for clinical waste collections ("Clinical and offensive waste from domestic households") to be reviewed thereafter annually as part of the usual Fees and Charges and Budget setting process.
4. To approve the proposed update to the Waste Services Standard 2018 as set out at Appendix Y;
5. To delegate to the Corporate Director (Environment and Leisure) in consultation with the Section 151 Officer all necessary authority to enter into the proposed agreement at Appendix Z with the relevant pharmacies and GP surgeries and to work with the relevant agencies and colleagues to publicise the services available.

Wards Affected	All
Forward Plan Reference	
Portfolio Holder(s)	Cllr Peter Murphy, Portfolio Holder for Environment
Report Originator(s)	Mark Mathews, Head of Environmental Services
Contact Officer(s)	Mark Mathews, Head of Environmental Services Richard Cassidy, Corporate Director
Background Paper(s)	

Report:

1 Background

- 1.1 The Council received notification earlier in the year of the NHS's intent to change the current arrangements for domestic sharps containers and point patients in the direction of their local council for the collection of this type of clinical waste.
- 1.2 Following discussions with representatives of NHS England, in August 2018 the Council received the timeline for these changes and along with the other Cambridgeshire and Peterborough authorities requested that the NHS hold off their plans until April 2019. This was agreed to by the NHS in November.
- 1.3 Under the Environmental Protection Act 1990, the Council is responsible for the collection of a range of waste types from domestic properties, including certain types of clinical waste where this is generated in a domestic household by the householder; although legislation (Controlled Waste Regulations (England) 2012) does allow for a charge to be made for the collection of some types of waste, such as Bulky Waste, Garden Waste, Commercial Waste and Clinical Waste.
- 1.4 Where the medical treatment is delivered by medical professionals, such as district nurses or GPs, in customers' own homes, the resulting waste remains the responsibility of the healthcare provider and they arrange for the collection of the waste.
- 1.5 NHS England (Midlands & East) have advised the Council that from April 2019 they will no longer be arranging for the collection of returned domestic sharps boxes from local pharmacies. As a result they have asked that we provide details of the arrangements that the Council will be putting in place for the collection of these materials before 4 February 2019 to allow for communications to be produced.

NHS Information Provided

- 1.6 There are a range of medicines prescribed that can be administered at home and produce needles/sharps, however we are informed that the great majority of needles and sharps are produced by customers living with diabetes.
- 1.7 The NHS have informed the Cambridgeshire and Peterborough Waste Partnership (Recap) that there are 977,800 patients registered with the 750 GPs in Cambridgeshire and Peterborough and more than 43,000 of these patients are registered diabetics; 4% of the total registered patients.
- 1.8 The NHS also informed us that around 50% of registered diabetics are likely to be producing needles from self-administering drugs at home, along with a small number of other patients using other medicines that produce sharps.
- 1.9 Of the diabetic patients in the Recap area, 7,855 are registered with GPs in Fenland; 18% of the registered diabetics.
- 1.10 Unfortunately, the NHS cannot provide figures for the numbers of sharps containers returned to pharmacies or surgeries because we are informed that they are collected with other medical waste and not recorded separately. This makes it difficult to estimate the scale of the issue created by the change.
- 1.11 We know from the County Council Public Health Team that in Fenland 7,138 sharps containers were prescribed by GPs in 2017/18, but we do not know how many of these were used and with GP boundaries not matching authority boundaries, we cannot accurately say where these customers live. **Appendix X** provides further details.

Current Collection System

- 1.12 The County Council has entered in to a contract for the collection and disposal of clinical waste in Cambridgeshire that, as a Recap member, Fenland has agreed to utilise for the collection of domestic clinical waste until October 2021.
- 1.13 Fenland has agreed fees in place for the collection of domestic and commercial clinical waste. These have been charged to schools and care homes where appropriate since 2015. Whilst there is a standing fee for domestic clinical waste, because customers have reasonable alternatives, there has never been a need to charge.
- 1.14 Within the fees and charges it was recognised that certain customers would not be charged. As a result, the Council currently has weekly collections of clinical waste from 9 customers who are home dialysis customers or generate large amounts of Infectious Waste. These types of waste are recognised as delivered without charge in the fees and charges and cost in the region of £3,000 per annum to deliver.
- 1.15 Very few customers have approached the Council for the collection of sharps containers over recent years implying that other options are being used.
- 1.16 It should be noted that the Council has customers who are cared for in their own home who produce non-infectious waste which is disposed of through usual waste collections (Hygiene Waste). For this sanitary type waste customers are provided with additional wheeled bin capacity if required for their usual 2 weekly refuse collections. The Council has around 100 customers who utilise this service. This waste type is defined in appendix C and does not contain sharps or infectious waste.

Diabetes UK Position Statement on Sharps Disposal

- 1.17 Recognising that the largest group of customers affected by this NHS change are diabetics, we contacted Diabetes UK for Eastern England and they provided their most up to date [position statement on Sharps](#) from February 2015. This recommends that:
 - Sharps should never be disposed of in domestic waste or recycling.
 - a free sharps collection service, from their home, or agreed alternative location, provided by their local authority or another appropriate body; and/or
 - alternative means of disposing of sharps locally, which are convenient and free to use, and take account of individual circumstances; and
 - Local authorities should provide accurate and easy to locate information about local collection/ disposal arrangements for sharps on their website.
 - Healthcare professionals should inform patients of local arrangements for sharps collection/disposal.
 - Sharps containers that are appropriate to their individual needs, and are available free of charge (on prescription or from a local authority);
- 1.18 The statement notes that "Financial pressures on local authorities and the NHS appear to be affecting sharps collection/disposal arrangements – possibly resulting in fewer services and/or fees being charged." And, "Although local authorities are permitted to charge for collecting clinical waste from domestic properties, we encourage them not to do so. This may be prohibitively expensive for many people with diabetes, and discourage them from using the [collection] service."

- 1.19 We will also be working with Diabetes UK, through their local volunteer group to assist with communications.

2 Cost Estimates and Options

- 2.1 Within the countywide contract each collection costs a minimum of £6.10 plus the costs of administration. Using the total number of prescribed sharps boxes (35,000) across Cambridgeshire and Peterborough (**appendix X**) the costs for collection alone for the Recap area are £280,000 per year, without the disposal costs at more than **£1,000** a tonne borne by both the County Council and Peterborough City Council.
- 2.2 It should be recognised that we have no data for under 18s, prescriptions from hospitals or out of hours surgeries, which along with the mismatch between GP boundaries and authority boundaries all affects our ability to accurately forecast the costs of this change and increases the risk to the individual Recap authorities, including Fenland.
- 2.3 For Fenland, if the public health team information (**appendix X**) is used as a measure of the scale of returned sharps boxes, 7,153 for Fenland, the maximum total cost of the NHS changes, if a free door-step collection service is offered without drop-off points, is more than £60,000 for adult prescriptions alone.
- 2.4 At its meeting on 13th September 2018, Full Council considered a public petition requesting that members reconsider the decision to charge private households for the collection of hygiene and clinical waste (C32/18 Petition - Clinical Waste Collection Charges). It was agreed by Council that there should be no charge for clinical waste collections until the matter has been returned to Full Council to discuss the options. This report comprises the options available and seeks Cabinet endorsement in its recommendations to Full Council.
- 2.5 The options that are now being presented for Fenland are intended to offer customers a choice. They include adopting the approach of other authorities across the country of working with the existing community pharmacy network to provide a continuation of the returns option by commissioning this service from the pharmacies alongside providing a door-step collection of clinical waste.
- 2.6 An example Recap agreement for the community pharmacies forms **appendix Z** of this report. In line with other areas operating similar systems, the proposal is that pharmacists are paid an annual fee to provide the service and the authority arranges the collection of the used sharps boxes from the premises.
- 2.7 The County Council were approached in relation to providing this service through their Household Waste and Recycling Sites, however their contract does not accommodate this type of waste and changes to the County Council's Waste PFI contract make this option unworkable in the timescale and prohibitively expensive.
- 2.8 Consideration was given to offering the service through the shops, hubs and premises operated by the Councils in the area, but given the nature of the materials, the training and systems required, it is considered preferable to approach the existing experts with relevant experience rather than discussing options of providing this service through local libraries or similar.
- 2.9 The cost estimates provided in this report do not include the existing costs of the clinical waste collections offered without charge; for dialysis and similar collections. It is not proposed to change this service provision and the cost of this element of the service, in the region of £3,000, is not included. Likewise these figures do not include the cost of providing the Hygiene Waste collection

service when incorporated within usual 2 weekly waste collections offered to those customers who are being cared for in their own home.

Cambridgeshire and Peterborough [Local Pharmaceutical Committee](#)

- 2.10 Discussion with the LPC, the community pharmacy association for the area, have been very positive and the local committee support the agreement attached, as outlined in their letter of support at **appendix D**, although it is accepted that it is down to company and local pharmacy managers to agree to provide the service.
- 2.11 The committee advised on several points: Customers develop relationships with their local pharmacist and customer choice is an important element of the NHS commissioning process. As such, the committee's advice was that all pharmacies and GP dispensaries were offered the service to allow customers to choose. Additionally, that the service provided should focus on the needs of the patient, and many customers will not want a door-step collection because they wish for their waste to be dealt with discreetly.
- 2.12 This presents a risk that some areas will be covered well and others might not be. We therefore need to agree that if the option is determined, and individual pharmacies cannot accommodate the service resulting in customers having no available disposal option, that then relevant GP practices will also be approached with the same offer.

Future Service Offer Options

Free Collection Points

- 2.13 Following the lead of other areas, the Recap authorities have been investigating if arrangements can be put in place to allow the existing pharmacy network to continue collecting sharps boxes from customers.
- 2.14 Where this works in other areas the local authorities pay the pharmacies a fixed annual fee and also arrange for the materials to be collected. Pharmacies hand out leaflets with sharps prescriptions that highlight how and where the boxes can be returned. A small number of pharmacies in the other areas have not agreed to these arrangements, normally based on space limitations, but the other authorities have been able to provide a suitable coverage of sharps box drop-off points. This approach is supported by Diabetes UK.
- 2.15 Appendix B provides the locations of the 19 pharmacies in Fenland. Chatteris has 2 registered pharmacies, March has 4, Parson Drove has 1, Walsoken has 1, Whittlesey has 3 and Wisbech has 9.
- 2.16 Should we provide the service through these pharmacies the cost would be in the region of £18,000 each year.

Area	FDC Funded Drop-off Points
Chatteris	2
Doddington	1
Manea	1
March	4
Parson Drove	1
Walsoken	1

Whittlesey	3
Wisbech	9

- 2.17 The same offer should be extended to dispensing GP surgeries (and pharmacies in GP practices) where there are no pharmacies; such as Doddington and Manea.
- 2.18 This level of service would provide all customers with easy access to sharps box drop-off points.
- 2.19 It is proposed that Cabinet recommends to Council that approval is given to providing free sharps box drop-off points in cooperation with local pharmacies and their representative association at the fees set out in the agreement.
- 2.20 Approval is also sought for officers to approach dispensing GP practices in Doddington and Manea using the same agreement and fee.
- 2.21 The pharmacies and relevant surgeries, whilst encouraging in discussions about this, are independent local or national businesses and enter in to an agreement with the council at their own discretion. The Council cannot therefore guarantee the level of take up or prevent these businesses from withdrawing their services in future.
- 2.22 The estimated cost of providing a free collection point network through the majority of the available pharmacies and a small number of GP surgeries is a maximum of £20,000. This cost is made up of the annual fee to each business and the estimated cost of collection for each premise. As a result these costs will rise in line with RPI each year.

Door-step Collections

- 2.23 As the pharmacies can opt in and out of the agreement set out in the appendices, the Council still bears the potential risk of delivering a large number of collections each year should the free drop-off point offer not be viable for any reason.
- 2.24 As previously outlined, with the available information, providing a free door-step collection service would open the authority to a previously unplanned cost of more than £60,000. Against the background of the medium term financial strategy it is becoming increasingly difficult for the authority to find such a sum without making largescale changes in other services.
- 2.25 The statement of the Diabetes UK and the customer petition was that free collection options should be provided and charges should not be prohibitively expensive for customers.
- 2.26 With an established network of funded collection points customers are provided with the choice of a free drop-off at a specified location or home collection service for a fee. To protect the authority from an unplanned financial risk, it is proposed to set the 2019/20 fee at £8.00.
- 2.27 The fee will remain per collection and (within reasonable limits) will be for any amount of clinical waste that customer wish to collect and present.
- 2.28 Usual fees and charges conditions of the relevant Director being able to waive fees in cases of extreme hardship apply along with the previously mentioned arrangements for customers who through their illness produce large amounts of clinical waste necessitating a weekly or similar collection; these are usually but not exclusively patients using home dialysis or producing infectious waste.

- 2.29 Customer will have the choice of using the free drop-off points when they collect their medicines and prescriptions, which will be advertised on the council's website and through the local pharmacies. Should they choose not to make use of these then the door-step collection can be booked online or through the contact centre or shop/hubs.
- 2.30 The financial risk that the authority is exposed to for the subsidised collections, with or without drop-off provisions, is difficult to forecast because the NHS cannot provide figures on current arrangements.

3 Communication Timeline

- 3.1 Following the decision of Council on the service design and adoption of the revised service standards the website and paperwork will be prepared to communicate the changes to customers beginning in January.
- 3.2 Local support associations, such as Diabetes UK, will be approached to also support ensuring that customers know where to look for advice and how the changes agreed might affect them.
- 3.3 Appendix A contains an outline timeline incorporating the NHS deadlines and communication opportunities.

4 Possible Impacts

- 4.1 The impact on customers of the NHS decision is that local services will cost more to deliver. The scale of the increased cost is dependent upon the option determined, but with financial pressures increasing on local authorities, whatever is spent delivering this change to service will increase pressure on the medium term financial plan.
- 4.2 The 2-4% of customers in the area who use the service will see little impact if the Council chooses to support the community pharmacy provision, because the majority of customers can continue to deliver their sharps boxes back to their pharmacy, or a nearby pharmacy, without issue.
- 4.3 Customers will receive information when sharps boxes are prescribed on where they can be returned, or customers can consult the Council and Recap websites which will list the pharmacies taking part.
- 4.4 The Recap Partnership aims to provide similar options across the area to provide customers with compatible solutions even where GP boundaries and district boundaries do not align.
- 4.5 It remains the case that customers requiring regular weekly or 2 weekly collections, such as those on home dialysis or producing a large amount of infectious waste will continue to be offered their collections without charge.
- 4.6 We understand that at present some surgeries take customers sharps boxes back for disposal. What the NHS has not made clear is if GP surgeries will continue to allow customers to return sharps boxes to them. The risk to the authorities is that if the NHS further tightens control over clinical waste that the local authorities are further exposed to the risk of increased costs.

5 Equality Impact Assessment (EIA)

- 5.1 A draft EIA based on the recommendations in this report is attached as **appendix W**.
- 5.2 Should the recommendations not be approved then the EIA would need updating to reflect this.

- 5.3 The benefit recognised of providing collection points is the choice to dispose of sharps boxes at specific and convenient locations free of charge and thus avoid incurring the need for home collections and charges.

6 TEEP Assessment (Technical, Environmental, Economic and Practicable)

- 6.1 The Council is required to consider if it is necessary to collect recyclable materials separately in order to achieve the quality requirements required by re-processors. This is called a TEEP assessment.
- 6.2 The Council's previously adopted TEEP Statement, previously published, has been considered as part of the development of this service and it is concluded that no change is required to the published statement as a result of implementing any of the options described within this paper.

7 Reviewed Waste Services Standards 2018

- 7.1 The service standards have been brought up to date to accommodate this change by the NHS and will reflect the option chosen by Cabinet and Council.
- 7.2 The service standards have also been brought up to date with relevant legislative changes since 2016, when they were last reviewed, namely Section 55(2)(a) of the Housing Act 2004 and the Licensing of Houses in Multiple Occupation (Mandatory Conditions of Licences) (England) Regulations 2018. These clarify how the existing waste standards apply to properties of multiple-occupancy.

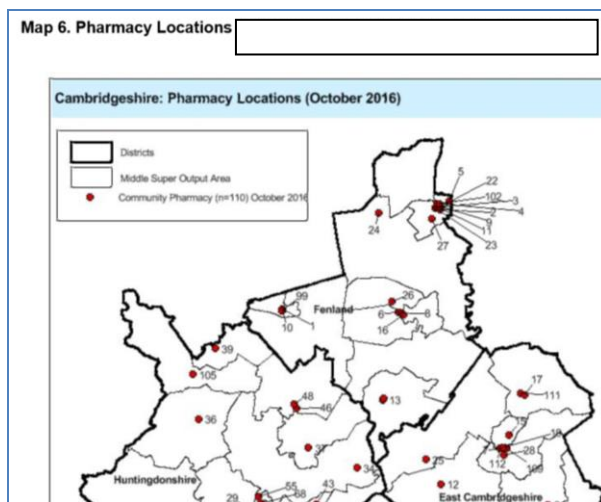
Appendices

A	Communications Timeline
B	Pharmacy and GP Surgery Locations
C	NHS Example of Clinical Waste Categories
D	Letter of Support Cambridgeshire and Peterborough LPC
W	Draft Equality Impact Assessment - Clinical and Hygiene Waste Service
X	Public Health Report - Recap Area Sharps Prescriptions Issued
Y	Revised Waste Service Standards 2018
Z	Draft Recap Pharmacy Agreement

Appendix A Outline Communications Timeline

Attend Cambridgeshire and Peterborough LPC to share draft agreement	20 November 2018
Approach Fenland Pharmacies and GPs with offer and support of LPC	4 January 2019
Diabetes UK local group approached to assist communications	January 2019
Provide NHS with details of webpages and arrangements	February 2019
NHS communicates with GPs and Pharmacies	February 2019
Press release and updated websites	March 2019
Information leaflets distributed by signed-up pharmacies	March 2019

Appendix B – Fenland Pharmacies and Dispensing GP Practices



Pharmacies in Fenland

102	Asda Pharmacy,	North End, Wisbech
8	Boots, (Boots UK Ltd),	Broad Street, March
9	Boots, (Boots UK Ltd),	Horsefair, Wisbech
1	Boots, (Boots UK Ltd),	Syers Lane, Whittlesey
2	Boots, (Boots UK Ltd),	Norfolk Street, Wisbech
3	Boots, (Boots UK Ltd),	Old Market, Wisbech
4	Boots, (Boots UK Ltd),	De Havilland Road, Wisbech
5	Boots, (Boots UK Ltd),	Kirkgate Street, Walsoken, Wisbech
6	Boots, (Boots UK Ltd),	Marylebone Road, March
10	Boots, (Boots UK Ltd),	High Causeway, Whittlesey
11	Fairbrother Pharmacy,	Church Terrace, Wisbech
13	Lloyds Pharmacy,	High Street, Chatteris
16	Lloyds Pharmacy,	Elwyn Road, March
20	Lloyds Pharmacy,	Swan Drive, Chatteris
24	Parson Drove Phrcy,	Wisbech
26	Tesco In-store Phrcy,	Hostmoor Avenue, March
27	Tesco In-store Phrcy,	Sandown Road, Wisbech
22	Well Pharmacy,	Augustine's Road, Wisbech
99	Whittlesey Pharmacy,	Whittlesey

100 hour pharmacies in Fenland

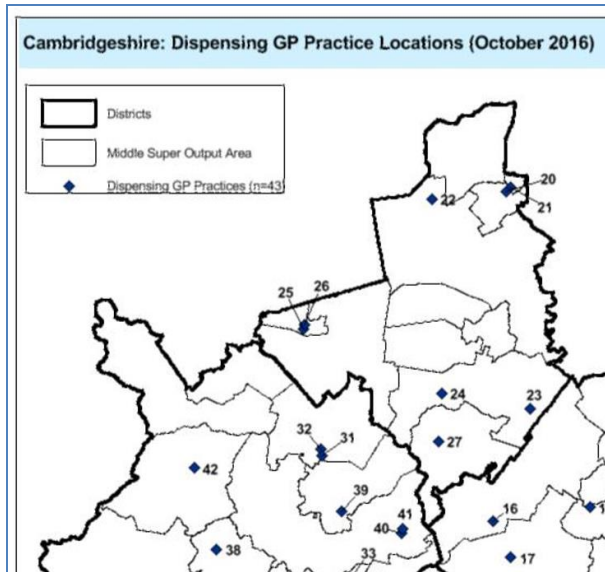
Tesco In-store Pharmacy, March

Asda Pharmacy, Wisbech

North Brink Pharmacy, Wisbech

Tesco Pharmacy, Wisbech





Whittlesey Pharmacy, Whittlesey



Dispensing GP Practices (Oct 2016) Source: NHS England East Anglia Area Team.

Practice Code	Practice Name	Map ID
D81011	Clarkson Surgery	21
D81071	Doddington Medical Centre	24
D81061	George Clare Surgery	27
D81039	Jenner Health Centre	25
D81611	Manea Surgery	23
D81046	The New Queen Street Surgery	26
D81008	The North Brink Practice	20
D81015	Parson Drove Surgery	22

Appendix C NHS Example of Clinical Waste Categories

Category of waste and colour of bag	Waste description and disposal/treatment type	Examples
Infectious (Yellow bag) 	Infectious waste which must be sent for incineration at a suitably authorised facility. It must not be sent for alternative treatment.	Waste which is classified as infectious (contaminated with bodily fluids where the assessment process leads you to believe the waste poses a potential infection risk, and there are also medicines or chemicals present). Examples are: <ul style="list-style-type: none"> • infectious waste contaminated with chemicals • chemically contaminated samples and diagnostic kits • infectious waste contaminated with medicines • laboratory specimens.
Infectious (Orange bag) 	Infectious waste which can be sent for alternative treatment to render it safe prior to disposal.	Waste which is classified as infectious (contaminated with bodily fluids where the assessment process leads you to believe the waste poses a potential infection risk), such as: <ul style="list-style-type: none"> • dressings • continence aids • bandages • protective clothing (for example, gloves or aprons).
Municipal and Recycling waste (Black bag) 	Domestic/municipal waste to be sent to energy from waste facilities or landfill.	Items which you would find in the normal household waste stream, such as: <ul style="list-style-type: none"> • food waste • tissues.
Offensive (Yellow with black stripe bag) 	Offensive/hygiene waste which may be sent for energy recovery at energy from waste facilities. These wastes can also be sent to landfill if no other recovery or recycling option is available.	Health care waste classified as non-hazardous, ie where the assessment process leads you to believe the waste does not pose an infection risk. These can be items contaminated with bodily fluids such as: <ul style="list-style-type: none"> • stoma or catheter bags • incontinence pads • hygiene waste • gloves, aprons, maternity waste where no infection risk exists • blood contaminated items from screened community.



We welcome the opportunity for community pharmacy to be considered as part of the solution to help with patients/customers disposing with their Clinical Sharps waste.

A single solution that can be applied across Cambridgeshire and Peterborough would offer a consistent service and message to our customers and service providers.

Community pharmacy can;

- provide patients with a safe and convenient route for the disposal of sharps,
- reduce the volume of sharps stored in patients' homes, by providing a convenient route for disposal, thus reducing the risk of accidental needle-stick injuries;
- reduce the environmental damage caused by the use of inappropriate disposal methods for sharps;
- improve the health of local communities by preventing the spread of blood-borne infections by ensuring the safe disposal of sharps;
- reduce the risk of needle stick injury in the community and inappropriate disposal of used injectable sharps.

There are 109 pharmacies across Cambridgeshire and 41 in Peterborough. They are located in busy high streets and the rural areas so patients/customers have reasonable access to pharmacy services. (Please see maps page 36 [Cambridgeshire PNA 2017](#) and page 40 [Peterborough PNA 2018](#)).

Many pharmacies are open long hours and at weekends. Patients who need sharps bins, will be collecting them along with their other dispensed medication from the pharmacy of their choice. It would ideal if they could return their filled and sealed sharps bins to the same pharmacy.

The LPC will work with colleagues in the local authority and local pharmacies to implement a solution for our population.

Rita Bali (B. Pharm).

Executive Officer.

Cambridgeshire and Peterborough Local Pharmaceutical Committee.

Assessing Equality – The Equality Act 2010 DRAFT - Customer Impact Assessment

Appendix W

This impact assessment is draft and unpublished. The assessment is determined by decisions made by Cabinet and Council on 13 December 2018.

This assessment is based on agreement to free collection points and a self-funding home collection fee. Should this not be agreed then this draft assessment will need to be reviewed and updated.

Clinical and Hygiene Waste Service.

Hygiene Waste

The Council offers a free 2 weekly collection of Hygiene Waste (non-infectious sanitary or incontinence waste) where customers are cared for in their own home through the supply of wheeled bins specifically for this purpose as part of routine collections.

Clinical Waste (Sharps and Infectious Waste)

The Council supplies a free service to customer using home dialysis or conditions where large amounts of clinical waste require frequent collections. This regular and scheduled service is provided without charge.

The Council has worked with the Local Pharmacy Committee and Recap (Peterborough and Cambridgeshire Waste Partnership) to provide a network of free disposal locations for remaining customers.

The option of entering in to an agreement to deliver this service for the authority has been offered to all pharmacies in the area to up take with the aim of providing customers with a as broad and convenient a network as possible. It is down to the individual companies to determine if they wish to enter the agreement and provide the service, and thus the locations are outside of the control of the Council.

Clinical waste is by its nature expensive waste to collect requiring specialist equipment, transportation, training and containers; additionally it is very expensive waste to dispose of. The Council has the legal right to charge for the collection of Clinical Waste in line with other wastes already charged for, such as Garden Waste, Bulky Waste, Commercial Waste and waste from Educational Establishments and Care Homes.

Any charge covers the collection cost element only and the County Council remains responsible for the disposal costs.

Members agreed in 2015 that customers requiring regular (weekly or two weekly) collections of clinical waste (such as dialysis customers) would be provided with the service without charge. This will include customers being cared for in their own home who require regular collections as a result of infectious dressings and similar. The council has for a long period of time had only a small number of customers with these requirements.

Where customers are being cared for by NHS staff then these staff will be required to remove all clinical waste and not pass this burden to the customer or authority.

Customers who request collections as a result of Hygiene Waste (sanitary waste, nappies etc.) will if required be offered additional containers to allow this waste to be collected within normal waste collections.

Where customers require home collections, the local NHS partners will be encouraged to provide their patients with larger sharps bins where this is acceptable to the customer to allow for a reduced frequency of collections and customers can for the single fee present (within reasonable limits) as many sharps boxes as they wish for the single collection fee.

Where customers request a collection of clinical waste and do not want to utilise the free collection points provided, this service is provided on an at cost basis to form a self-funding service. Collections are provided by an external contractor and scheduled on an agreed day usually within 9 working days of the request.

Consultation

The fee was originally established through the council's overview and scrutiny processes as with all fees and then agreed by Cabinet and Council in 2015.

The fee has not previously been in use because customers have alternative arrangements and are not requesting collections from the council. The changes proposed by the NHS from April 2019 will have an impact on producers of sharps if the Council does not adjust the current policy. Consultation of the users of these NHS services has not been possible within the timeframe.

A public petition was received calling for the council to reconsider introduce a charge in response to the NHS changes.

	Could particularly benefit	Neutral	May adversely impact	Explanations	Is action possible or required?	Details of actions or explanations if actions are not possible Please note details of any actions to be placed in your Service Plan
Race	<input type="checkbox"/>	Y	<input type="checkbox"/>	Diabetic customers form a large proportion of the 2% of customers who produce sharps. Assisted collection available	Y / N	Work with partners and NHS to establish free collection points for the collection of sharps boxes.
Sex	<input type="checkbox"/>	Y	<input type="checkbox"/>		Y / N	
Gender reassignment	<input type="checkbox"/>	Y	<input type="checkbox"/>		Y / N	
Disability	<input type="checkbox"/>	<input type="checkbox"/>	Y		Y / N	
Age	<input type="checkbox"/>	Y	<input type="checkbox"/>		Y / N	
Sexual orientation	<input type="checkbox"/>	Y	<input type="checkbox"/>		Y / N	
Religion or belief	<input type="checkbox"/>	Y	<input type="checkbox"/>		Y / N	
Pregnancy & maternity	<input type="checkbox"/>	Y	<input type="checkbox"/>		Y / N	

Assessing Equality – The Equality Act 2010

Appendix W

Marriage & civil partnership	<input type="checkbox"/>	Y	<input type="checkbox"/>	Short-term assisted an option	Y / N	
Human Rights	<input type="checkbox"/>	Y	<input type="checkbox"/>		Y / N	
Socio Economic	<input type="checkbox"/>	<input type="checkbox"/>	Y	The cost of a regular weekly or two weekly collection may be of concern for some	Y	<p>Dialysis and conditions where large amounts of clinical waste require frequent collections are provided without charge</p> <p>Work with partners to establish community collection points where possible.</p> <p>At-cost fee for collection of clinical waste.</p> <p>Fee can be waived by Director in cases of extreme hardship.</p>
Multiple/ Cross Cutting	<input type="checkbox"/>	Y	<input type="checkbox"/>		Y / N	

Outcome(s) of customer analysis

Will the policy/ procedure impact on the whole population of Fenland and/ or identified groups within the population; neutral ■

A range of free collection points will be made available to customer in order the replicate the existing arrangements. With current arrangements customers do not request home collections.

There is an at-cost charge for those who wish to have clinical or hygiene waste collected from their property using the clinical waste collections.

Overview and scrutiny, cabinet and council agreed the exception to the fees and usual director discretion applies for cases of extreme hardship.

Assessing Equality – The Equality Act 2010

Appendix W

The fee for collections protects the tax payer from the potential cost of fulfilling the duty to collect all clinical waste upon request from domestic premises should the NHS further change their current arrangements.

No major change needed Adjust the policy Adverse impact but continue Stop and remove / reconsider policy

Arrangements for future monitoring:

Review at point agreements expire or collection contracts are updated.

Details of any data/ Research used (both FDC & Partners):

Outlined in Cabinet and Council Report 13 December 2018

Completed by:

Name: Mark Mathews

Position: Head of Environmental Services

Approved by (manager signature):

Date published: This should be the date the analysis was published on the website

Details of any Committee approved by (if applicable):

Date endorsed by Members if applicable:

Appendix X

Title	Household generated sharps clinical waste – key data for Cambridgeshire and Peterborough (adapted)
Author	Katie Johnson, Consultant in Public Health Cambridgeshire County Council & Peterborough City Council Katie.johnson@cambridgeshire.gov.uk
Date	12 September 2018

Key findings:

- Just under 35,000 sharps disposal items were prescribed by GPs in Cambridgeshire and Peterborough in 2017/18.
- 97% of these were 1 litre sharps bins.
- Huntingdonshire had the greatest number of items prescribed (8,568) and Cambridge City had the least (3,534).
- There are over 43,000 patients with diabetes registered with GPs in Cambridgeshire and Peterborough.
- Peterborough has the greatest number of patients with diabetes (10,684) and East Cambridgeshire (4,635) has the least.

1. Number of sharps disposal items prescribed

Using GP prescribing data, information on the number of sharps bins that are prescribed was collated. This can be used as a marker of the scope of the service that will be needed. The NHS Electronic Drug Tariff, part IXA appliances, lists the various sharps appliances that can be prescribed. A search for the number of these appliances that are prescribed within the Cambridgeshire and Peterborough CCG was completed using Openprescribing.net.

The number of appliances prescribed was then categorised by the local authority (district and unitary level) which the postcode of the GP practice lies within. This data therefore presents an *estimate* only of the bins prescribed to residents living within the six local authorities within Cambridgeshire and Peterborough. The practices within these districts may prescribe bins to those living outside of the authorities' boundaries, and residents living within these areas may be prescribed sharps bins by GP practices which are located outside of the authorities' boundaries. **GPs which are part of the Cambridgeshire and Peterborough CCG but not located within the authorities' boundaries are not included in the data below.**

Figure 1 presents the total number of sharps bins prescribed for each local authority for the financial year 2017/18. This includes data on the following items in various sizes:

- Needle Clipping (Chopping Device)
- Sharpsafe (1L, 1.8L, 4L, 7L, 9L)
- Sharpsafety (8L)
- Sharpsguard (1L, 5L)

Figure 1 shows that **34,966** items were prescribed by general practices within the boundaries of the Cambridgeshire and Peterborough local authorities in 2017/18. Huntingdonshire had the greatest number of items prescribed (8,568) and Cambridge City had the least (3,534). This is likely to reflect the size, age and health of the population, as well as prescribing practices.

Appendix X

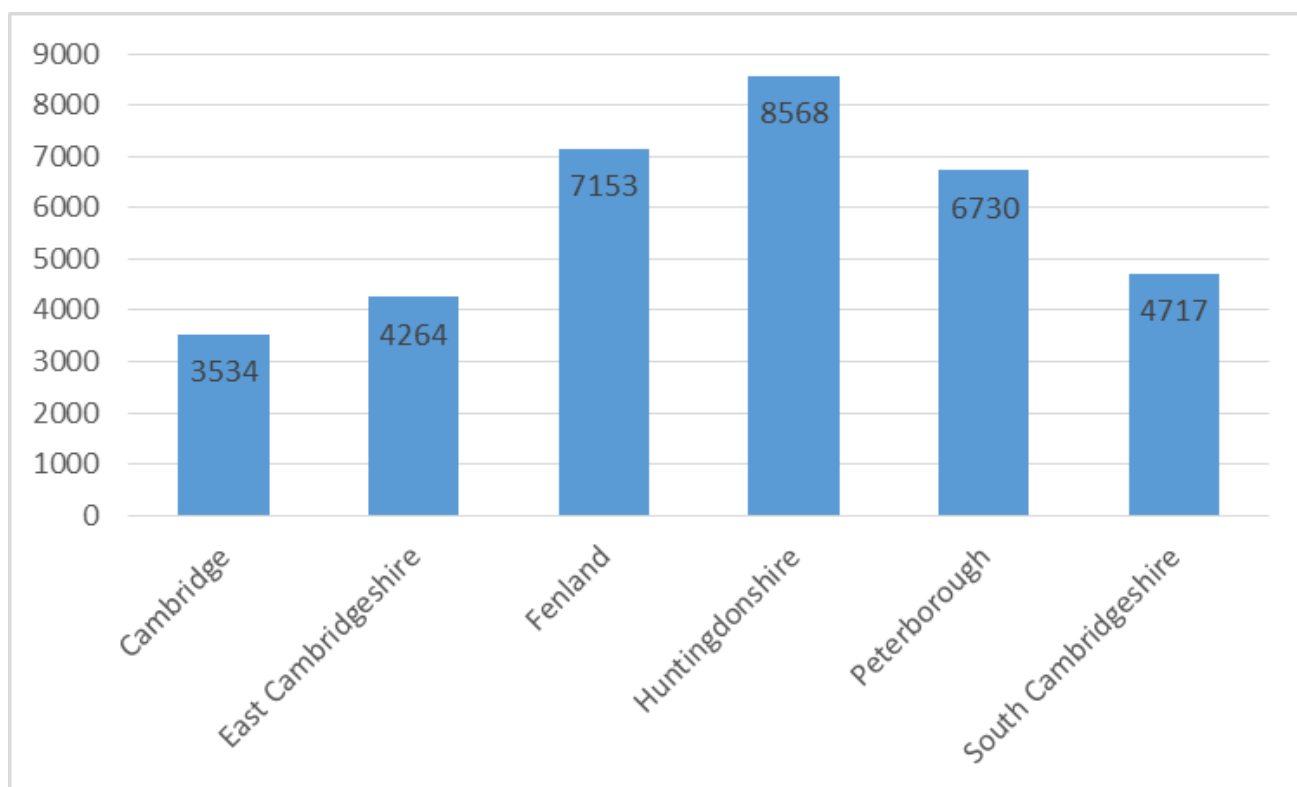


Figure 1: Total sharps bins prescribed, by local authority, 2017/18 (Source: OpenPrescribing.net, [EBM DataLab](http://EBM>DataLab), University of Oxford, 2017)

Table 1 below shows the breakdown of the number of items by size of item and local authority for the financial year 2017/18. It shows that the majority of items were sized 1 litre, which accounted for **33,981 items** or **97% of the total number of items**.

TABLE 1: Number of sharps items prescribed by type of item and local authority, 2017/18 (Source: OpenPrescribing.net, [EBM DataLab](http://EBM>DataLab), University of Oxford, 2017)

	Needle clipping	1L	1.8L	4L	5L	7L	9L	Total
Cambridge	34	3373	30	36	29	29	3	3534
East Cambridgeshire	19	4176	11	21	32	5	0	4264
South Cambridgeshire	25	4506	65	36	49	35	1	4717
Peterborough	14	6583	47	27	47	9	2	6729
Fenland	15	7066	28	17	23	3	1	7153
Huntingdonshire	99	8277	45	70	60	16	1	8568
Total	206	33981	226	207	240	97	8	34965

2. Number of patients with diabetes

Diabetes is a disease that causes inadequate blood glucose control due to a lack of insulin. Patients with diabetes generate sharps waste through blood glucose monitoring and the use of needles for treatment with insulin injections. Figure 2 shows the number of people **aged 17 years and over** who were registered as having diabetes with their GP in 2016/17.

Appendix X

It is important to note that not all patients with diabetes inject insulin and patients with conditions other than diabetes may also generate sharps waste. However, diabetic patients are likely to be a significant contributor to the generation of sharps waste and so figure 2 below adds to our understanding of the number of patients generating household sharps waste.

The data used in figure 2 is once again practice level data that has been aggregated to district level by the postcode of the main surgery, and therefore the caveats described above also apply to this data.

Figure 2 shows that in 2016/17, there were **43,113 patients with diabetes** registered with general practices within the Cambridgeshire and Peterborough local authority boundaries. Peterborough has the greatest number of patients with diabetes (10,684) and East Cambridgeshire (4,635) has the least. This is likely to reflect the size, age and health of the population, as well as variation in diagnosis rates.

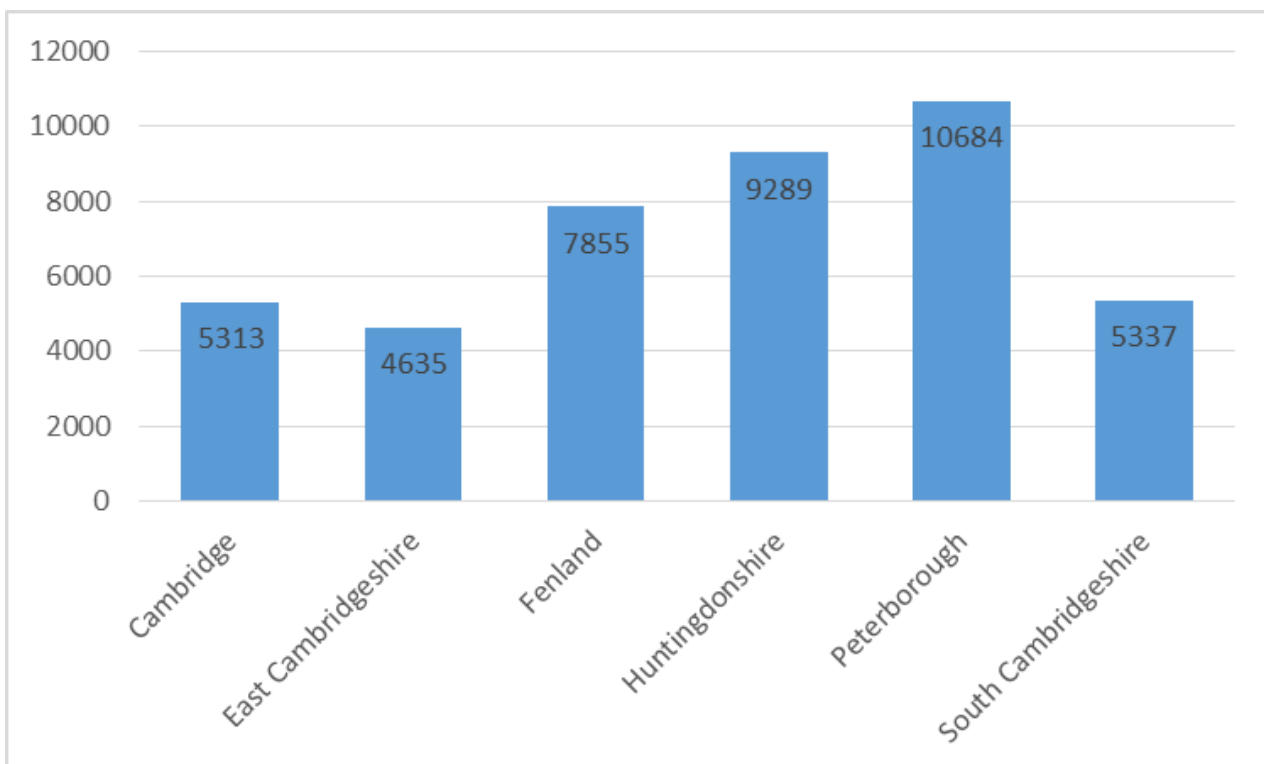


Figure 2: Number of patients aged 17+ with diabetes, 2016/17 (Source: Quality and Outcome Framework (QOF) data)

3. Acknowledgements

This report mirrors a previous report produced by the Norfolk County Council public health team who analysed Norfolk data on sharps bins and diabetic patients.

Appendix Y - Waste Service Standards 2018

Fenland District Council provides an integrated refuse and recycling service that includes the collection of a broad range of dry recycling materials and garden waste. The Garden Waste Service is a subscription only service.

Points of note, supplementary service standards 2018 for Clinical Waste Service changes and Houses of Multiple Occupancy (HMO) legislative update.

1. Updated standards for Clinical Waste collection from April 2019 following NHS changes
2. Recognise that waste produced by the occupants of HMOs is domestic waste and waste produced in the management of the property is commercial waste.
3. Landlords of HMOs are responsible for ensuring that waste is managed appropriately by their tenants and in line with the service standards set out here.

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
1	<p>Bin¹ out and no record on in-cab system of reason for non-collection, and in the case of Garden Waste Service, that there is a valid subscription for the bin.</p> <p>“Missed Bin”</p>	<p>Following customer contact –</p> <ul style="list-style-type: none"> • A return collection will be offered same or next day at the request of customer up to four working days from the day of collection <p>In cases of non-residual waste:</p> <ul style="list-style-type: none"> • Customer made aware that recycling cannot be guaranteed and materials might be sent for treatment at Mechanical Biological Treatment (MBT) plant with residual waste • Sacks offered as additional storage where customer does not want recycling disposed of at MBT plant <p>In cases of Garden Waste Service</p> <ul style="list-style-type: none"> • Subscription application details sent to customer where a subscription is not in place • Garden Waste collected on missed collections will be collected separately from other materials and will be processed for composting 	<ul style="list-style-type: none"> • Collection² same or next working day • Deliver by post, 2 appropriate sacks and system highlighted for collection on next scheduled collection • Advise customer that excess will be allowed at the next collection as an exception to our normal policy on additional waste • Garden Waste Service, check bin clearly displays subscription sticker and property in on collection record 	<ul style="list-style-type: none"> • Waste removed in a timely fashion • Responsive service delivery for customer • Efficient collection system • Customer ownership of bin collection system • Improved customer awareness of services • Encourage participation in Garden Waste Service

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
2	Bin reported via in-cab system ³ as not at point of collection prior to time of collection. "Bin Not Out"	<ul style="list-style-type: none"> No repeat collection provided <p>Following customer contact –</p> <ul style="list-style-type: none"> Customer made aware that general waste can be taken to HWRC for disposal Sacks offered where customer will need to contain extra recycling or refuse until the next collection Bin can be presented on next scheduled collection. 	<ul style="list-style-type: none"> Record made on in-cab system Bin emptied on next scheduled collection day for that bin Deliver by post 2 clear or black sacks and system highlighted for collection on next scheduled collection 	<ul style="list-style-type: none"> Encourages responsible use of the refuse/recycling service Improved education and awareness about the service Effective use of resources Prevents misuse of the Garden Waste Service
3	Wrongly sorted ⁵ recycling or composting bin identified prior to collection	<ul style="list-style-type: none"> No repeat collection provided Information in relation to reason for non-collection attached to bin <p>Following customer contact –</p> <ul style="list-style-type: none"> Customer made aware that general waste can be taken to HWRC for disposal Sacks offered where customer will need to contain extra recycling Contaminated non-subscription brown bins removed within 5 working days 	<ul style="list-style-type: none"> Record made on in-cab system with detail of issue Educational leaflet or letter produced and sent where appropriate Bin emptied on next scheduled collection day for that bin Deliver by post, 2 recycling sacks and system highlighted for collection on next scheduled collection Arrange removal of any non-subscription bins identified and reported as presented and containing incorrect materials Educational visit offered where more than 2 occasions 	<ul style="list-style-type: none"> Encourages responsible use of the refuse/recycling service Maintains awareness about the service and value of recycling/composting Reduces chance of rejected loads at transfer station at a cost of ~£1000 per load. Removes unused brown bins from circulation

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
			<p>in 6 months.</p> <ul style="list-style-type: none"> Repeat occasions and deliberate misuse referred for enforcement 	
4	Wrongly sorted recycling or composting bin identified after collection	<ul style="list-style-type: none"> Customer made aware of issue with materials presented via letter, leaflet, card or personal visit 	<ul style="list-style-type: none"> Record made on in-cab system Educational letter produced and sent next working day Educational visit offered where more than 2 occasions in 6 months. Repeat occasions and deliberate misuse referred for enforcement 	<ul style="list-style-type: none"> Encourages responsible use of the refuse/recycling service Maintains awareness about the service and value of recycling/composting Reduces chance of refused loads at transfer station at a cost of ~£1000 per load.
5	Customer identified by crew as not making effective use of recycling system	<ul style="list-style-type: none"> Bin emptied Customer made aware of issue with materials presented via letter, leaflet, card or personal visit 	<ul style="list-style-type: none"> Driver request Recycling Support visit in case of serious or repeat issues Educational visit offered where more than 2 occasions in 6 months. Repeat occasions and deliberate misuse referred for enforcement 	<ul style="list-style-type: none"> Enforces responsible use of the refuse/recycling service Improved education and awareness about the service Increased efficiency
6	Bin deemed to be beyond a reasonable weight by collection team "Heavy Bin"	<ul style="list-style-type: none"> No repeat collection provided Information in relation to reason for non-collection attached to bin <p>Following customer contact –</p> <ul style="list-style-type: none"> Customer made aware that 	<ul style="list-style-type: none"> Record made on in-cab system with detail of issue Educational letter produced and sent where appropriate Bin emptied on next scheduled collection day for that bin if heavy items removed Deliver by post, 2 appropriate 	<ul style="list-style-type: none"> Safe manual handling Reduced potential for injury and compliance with local risk assessments and Health & Safety obligations

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
		<p>weight of bin needs reducing and that general waste can be taken to HWRC for disposal</p> <ul style="list-style-type: none"> • Sacks offered where customer will need to contain extra recycling or refuse 	<p>sacks and system highlighted for collection on next scheduled collection</p>	
7	Bin reported by customer as damaged	<ul style="list-style-type: none"> • Bin replaced once fee paid. • Where bin damaged as the result of arson, this information will be shared with local fire safety team • Sacks offered where customer will need to contain extra waste or recycling • Bin replaced free of charge if damaged during collection and reported by crew 	<ul style="list-style-type: none"> • Crew record any issues on in-cab system • Replacement delivered within 5 working days following day of payment • New subscription issued where required 	<ul style="list-style-type: none"> • Maintain customer satisfaction with service • Continuity of service following damage to containers
8	Bin lost or Stolen	<ul style="list-style-type: none"> • Customer asked to complete form after bin remains lost for two weeks • Bin replaced for fee after such time • Sacks offered where customer will need to contain extra waste, recycling 	<ul style="list-style-type: none"> • Letter, bags and form delivered to customer for completion • Collection via bags arranged for subsequent two collections • Bin delivered 5 working days following return of payment 	<ul style="list-style-type: none"> • Maintain customer satisfaction with service • Reduce likelihood of unnecessary bin deliveries via two week wait
9	Waste in addition to the standard bins provided (or their sack equivalent). "Side Waste"	<ul style="list-style-type: none"> • Waste will not be collected unless contained within appropriate and approved bins supplied and authorised by this council • Information stickers attached to unauthorised containers¹ of 	<ul style="list-style-type: none"> • Exception – where cases 2,3,4 6, 7 or 8 above result in authorised sacks being used for one week only • Record of additional waste kept on in-cab system 	<ul style="list-style-type: none"> • Manual handling • Health & safety • Resident responsibility • Promotion of safe working practice

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
		<p>additional waste</p> <p>Following customer contact –</p> <ul style="list-style-type: none"> • Customer made aware that general waste can be taken to HWRC for disposal • Customer made aware that additional blue bins are available for larger families who meet the criteria • Additional Residual bins for households of 6 or more who are recycling actively and cannot contain residual waste in bins supplied. Delivery charges apply. • Garden Waste Only See No.15 	<ul style="list-style-type: none"> • Information letter sent to customer where appropriate, including options around garden waste disposal • Additional and unauthorised containers will be removed and disposed of 	
10	Bin lid not closed to a reasonable degree	<ul style="list-style-type: none"> • Bin emptied where safe to do so • It may be appropriate to treat bags presented on top of wheeled bin, with lid open or closed as per additional waste (9) 	<ul style="list-style-type: none"> • Information letter sent to customer where appropriate • Driver request Recycling Support visit in case of serious or repeat issues 	<ul style="list-style-type: none"> • Health & safety compliance • Promotion of safe working practice • Prevent damage to bin
11	Street level access issue	<ul style="list-style-type: none"> • Every effort will be made by collection team to collect obstructed bins • Collection team return later same day to review access • Where feasible, bins will be walked to and collected 	<ul style="list-style-type: none"> • Arrangements made for return next working day upon failed second attempt • Where road construction or planned works prevents normal collection then temporary arrangements will 	<ul style="list-style-type: none"> • Maintain customer satisfaction with service

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
		<ul style="list-style-type: none"> • Upon failed later attempts record made on in-cab system <p>Vehicular obstruction</p> <ul style="list-style-type: none"> • Notice left with vehicles that regularly cause an issue for collection teams • Support for regular issues will be sought via local Police 	<p>be made and customers affected informed by letter</p>	
12	<p>Arrangements where customer cannot manage to move bins themselves.</p> <p>“Assisted Collection”</p>	<ul style="list-style-type: none"> • Assisted collection provided from an agreed location on customer's property • Application form to be completed • Service commences week following first point of contact for a period of four weeks without completed application • Bins will be collected, emptied and returned to the agreed point of collection • Assisted collections will be reviewed a maximum of once every eighteen months via reapplication • The council reserves the right to remove/refuse this service where other occupiers of the property can facilitate the presentation of waste • An assisted collection can be 	<ul style="list-style-type: none"> • Assisted collection recorded on in-cab system • Crews can report requirement of and non requirement of service via in-cab system 	<ul style="list-style-type: none"> • Maintains customer's ability to live independently in their own home

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
		<p>refused where the nature or length of the surface over which the bin needs to be moved is considered unreasonable or unsafe. See Nos.18 and 21.</p> <ul style="list-style-type: none"> • A reasonable limit will be placed on the number of garden waste subscription bins per property 		
13	Bins (and uncollected waste) not removed from collection point following collection	<ul style="list-style-type: none"> • Bins/waste should be removed from the collection point by the end of the day following collection • Information letters sent to repeat issues • Bins removed and replaced with alternative arrangements where persistent problems are identified 	<ul style="list-style-type: none"> • Letter sent to property and landlord where appropriate • Officer visit as required • Removal of bins a last resort solution 	<ul style="list-style-type: none"> • Encourages responsible use of the refuse/recycling service • Improved education and awareness about the service • Increased efficiency
14	Bank holiday collection arrangements	<ul style="list-style-type: none"> • One day holidays will usually result in the collection being performed one day in arrears unless other arrangements prove to be beneficial • Arrangements for the Christmas and New Year will be advised each year 	<ul style="list-style-type: none"> • Customers informed via website and delivery of bank holiday information. 	<ul style="list-style-type: none"> • Customer well informed and confident with collection arrangements • Effective service delivery
15	Request for extra waste containment	<ul style="list-style-type: none"> • Families of five or more will be entitled to an additional blue bin upon application • Unused or abused bins will be removed • Additional clear sacks for recycling can be requested and 	<ul style="list-style-type: none"> • Additional blue and green bins can be supplied upon criteria being met • Blue bin supply is expected to take precedence over green bin. • A record will be kept of such 	<ul style="list-style-type: none"> • Increase recycling where possible • Reduce impact of additional waste on local environmental quality • Option of additional

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
		<p>presented next to blue bins</p> <ul style="list-style-type: none"> • Garden Waste Only bins can be supplied and charged in line with Fees and Charges • Home composting promoted • Unauthorised bins will not be emptied and will be removed and disposed of. 	<p>bins supplied and regularly reviewed</p> <ul style="list-style-type: none"> • Annual charges will need to be paid in advance or bins will not be collected • Where bins are presented and not identified as authorised on the system then a record will be made on the in-cab system, the bins will be removed and an information letter will be sent to customer 	<p>waste collection for properties of multiple occupancy</p> <ul style="list-style-type: none"> • Demonstrate changes to policy as a result of customer request • To adhere to the objective of increasing recycling and reducing waste to landfill
16	Private access driveways	<ul style="list-style-type: none"> • With the exception of existing custom and practice collections are made at the Highway boundary with each property • New dwellings where this might be an issue will be considered on their individual merits and where possible, agreement sought with developer to resolve any potential issues at the planning stages in line with Recap waste guidelines • With the authority of all concerned parties and receipt of suitable indemnity appropriate private roads can be included within collections • Where access is narrow or not appropriate then an agreed point of collection will be 	<ul style="list-style-type: none"> • Supervisors will visit • General principle adhered to is that we offer a collection from the boundary of private property with the Highway, but each case is examined on its merits 	<ul style="list-style-type: none"> • Waste collection issues planned out of future developments • Service provided where possible and suitable

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
		established		
17	Clinical Waste Collection Service	<ul style="list-style-type: none"> Local collection points will be advertised through shops, website and with local healthcare professionals. Where a customer qualifies for a Clinical (Hygiene) Waste Collection on medical grounds then this will be provided in addition to the standard three bin system collections. Service implemented upon request within 5 working days Service commenced for a period of three weeks prior to receipt of qualification materials Clinical Waste does not include offensive waste (Hygiene Waste) which can reasonably be accommodated with other residual waste services offered. As set out in 22 below, charges can be made for the collection of Clinical Waste. 	<ul style="list-style-type: none"> Qualification criteria may be required Weekly collection of waste in specific clinical waste containers/bins Service implemented at request within 5 working days of request Clinical Waste resulting from treatment by medical professionals will not be collected Customer offered option of an additional residual waste container where required to contain Hygiene Waste. Where charges apply, these will be waived where customers, through care in their own home, require collection of large amounts of Clinical Waste on a weekly or two-weekly basis. 	<ul style="list-style-type: none"> Compliance with duty of care Equality of service provision Enable care within their own home for those who require it Efficient and effective Clinical Waste Service Work in partnership with local business to provide the best service options
18	Bin not presented in appropriate location for collection	<ul style="list-style-type: none"> Recorded on system as 'not on boundary' One courtesy collection possible same or next working day Further occasions will result in non-collection of bin 	<ul style="list-style-type: none"> Information letter sent Location of collection to be agreed by supervisor 	<ul style="list-style-type: none"> Service efficiency

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
19	Bins not present at property at change of occupier	<ul style="list-style-type: none"> Where bins have previously been delivered to a property and one or more is missing following a change of occupier then replacements will be charged for at a set fee. Current fee is set out in Fees and Charges New builds and first sets of bins are supplied at reasonable charge or purchased and provided by the developer 	<ul style="list-style-type: none"> Letter sent to new occupier Bin delivered five working days from day of payment receipt Details of Garden Waste subscription sent 	<ul style="list-style-type: none"> Reduce incidence of bins being removed from properties as customers move within or outside of the district Increased efficiencies Promote Garden Waste Service
20	Change of occupier waste issues	<ul style="list-style-type: none"> A one off courtesy collection for new occupiers is available where customers find bins full following a change of occupier at a property. 	<ul style="list-style-type: none"> Collection provided same or next working day of suitable contents of approved bins at property all waste sent for processing at Mechanical Biological Treatment plant Local household waste recycling centres will take a range of household waste delivered by householder Courtesy collection available only to property occupiers and reasonable limits apply 	<ul style="list-style-type: none"> Maintain customer satisfaction with service
21	Collections from properties on or near poor quality or extraordinary roadways including isolated and inaccessible properties	<ul style="list-style-type: none"> Where roadway, adopted or otherwise, present a risk to staff; an exceptional cost or could damage council vehicles, then the roadway will not be utilised. 	<ul style="list-style-type: none"> Alternative locations for collection will be given to customers by supervisors. 	<ul style="list-style-type: none"> Reduced risk of accident Providing an efficient and effective service to all customers

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
22	Charges for waste collection	<ul style="list-style-type: none"> Where the Controlled Waste Regulations, as adopted by County Council and Fenland District Council, allow then charges will be applied and identified in Fees and Charges. 	<ul style="list-style-type: none"> Garden (organic) Waste Bulky Waste Commercial Waste Clinical Waste 	<ul style="list-style-type: none"> Service efficiency Reduced costs of collection Users of service pay for those services
23	Waste generated by Houses of Multiple Occupancy (HMO) ⁸	<ul style="list-style-type: none"> In keeping with the Council's support of recycling and the waste hierarchy, and in keeping with the license for the property, landlords of HMOs must ensure that their tenants understand and comply with the waste collection arrangements at their property, as set out within these service standards. As set out in 3, 4, 6, 9 and 10 of these service standards, waste must be contained in the containers provided and sorted and presented to allow for the maximum amount of recycling to be achieved. In line with 15 of these service standards, household of five or more will be entitled to an additional blue bin upon application and unused or abused [recycling] bins will be removed. In line with 9 of these service standards, households of 6 or 	<ul style="list-style-type: none"> Additional blue and green bins can be supplied upon criteria being met Blue bin (recycling) supply is expected to take precedence over residual waste bin A record will be kept of such bins supplied and regularly reviewed Where bins are presented and not identified as authorised on the system then a record will be made on the in-cab system, the bins will be removed 	<ul style="list-style-type: none"> Increase recycling where possible Reduce impact of additional waste on local environmental quality Option of additional waste collection for properties of multiple occupancy Provide clarity to landlords on their responsibilities To adhere to the objective of increasing recycling and reducing waste to landfill Ensure domestic waste and waste as a result of commercial activities is separate and appropriately disposed of.

	SERVICE ISSUE	SERVICE STANDARD	ACTION	CUSTOMER IMPACT
		<p>more who are recycling actively and cannot contain residual waste in bins will be supplied with an additional residual waste bin. Delivery charges apply.</p> <ul style="list-style-type: none">• Waste accumulations at properties, waste outside of these service standards, construction waste and waste generated as property occupier(s) change are not domestic waste and will need collection by approved waste carriers at the instruction of the landlord.		

Footnotes –

1. **Bins** – this term is to include all types of refuse containment approved by FDC for customer use in this system; normally historically 240lt and 140lt wheeled bins, or 90lt sacks, and can include 180lt or other size containers as the preferred waste container size. In relation to the subscription garden waste service, the container is a 240lt wheeled bin only.
2. **Collection** – attend property or normal collection point or the purpose of collecting waste as presented. The collection will be considered as having been completed by attendance regardless of whether waste is presented or not.
3. **In-cab system** – primarily on board electronic systems for the recording of events and property attributes, although the term to also include back-up paper based systems.
4. **Offensive Waste** – a category of waste including sanitary waste, nappies and incontinence pads.
5. **Wrongly sorted** – also known as incorrectly sorted and contaminated. This is to be any material deemed by the collection staff to be outside of the materials suitable for collection in the supplied container, and as a result designates the entire contents of the bin as wrongly sorted. Collection staff will use their best judgement in determining sensible levels, but will act to preserve the quality of the materials collected.
6. **Containers** – bins, sacks, boxes or otherwise that are used with or without authority to contain and present waste.
7. **Subscription** – refers to the charge identified within Fees and Charges for the collection of brown bins as part of the Fenland Garden Waste Service.
8. **HMOs** - are subject to mandatory licensing in line with section 55(2)(a) of the Housing Act 2004 and the Licensing of Houses in Multiple Occupation (Mandatory Conditions of Licences) (England) Regulations 2018. As defined in legislation, an HMO (including flats) is a property occupied by five or more persons, from two or more separate households.

«Title» «Last_Name»
«Pharmacy_Name» «Company_Name»
«Address_Line_1»
«Address_Line_2»
«City»
«State»
«ZIP_Code»

Mark Mathews
Tel: 01354 602164
Email: mmathews@fenland.gov.uk

21 November 2018

Our Ref: MM/SE

Dear «Title» «Last_Name»

Community Pharmacy Enhanced Service for Domestic Returned Used Sharps

Following changes to the NHS contract and the collection of used sharps from pharmacies there is a potential issue for patients on how best to safely dispose of their used sharps.

As you will be aware, the storage, carriage and supply of waste are all subject to stringent controls designed to minimise the negative effects of waste on the environment, the public and people required to handle the waste. All community pharmacies provide patients with a service to dispose of unwanted medicines as part of the NHS contractual framework; this does not however cover the disposal of sharps generated by self-medicating patients who use lancets for blood testing, or needles and syringes for the administration of parenteral medicines.

It is important for sharps to be disposed of safely, as inappropriate disposal methods create a risk of accidental needle-stick injuries to pharmacy staff, people handling the waste and members of the public, potentially leading to infection with blood-borne diseases.

Local authorities are obliged to collect clinical waste from householders on request and under section 45(3)(b) of the Environmental Protection Act 1990 they may make a reasonable charge for this service.

The authorities represented by the Recap (Cambridgeshire and Peterborough) Waste Partnership wish to make arrangements for a collection and disposal service for self-medicating patients prescribed with sharps in order to facilitate safe disposal. The details are provided within the attached agreement which will run for 3 years, upon agreement from the pharmacy manager/pharmacist and the relevant local authority and will attract an annual payment for the service provided. The collection and the disposal of the returned sharps containers will be the responsibility of the local authority at a frequency decided in cooperation with the pharmacy manager/pharmacist locally.

Mark Mathews
Head of Environmental Services

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Enhanced Service in Community Pharmacy

Disposal of Used Sharps

1. Service Description

- 1.1 Community pharmacies will continue to supply sharps bins to patients in the usual manner when presented with a valid prescription from a prescriber. This service does not propose to circumvent this means of supply
- 1.2 Community pharmacies will subsequently provide a collection point service for these self-medicating patients generated sharps in order to facilitate its safe disposal. Self-medicating patients will return filled and sealed sharps bins to the pharmacy.
- 1.3 The community pharmacy will safely store the returned sealed sharps bins in a storage container provided by «Authority_Name» until the collection by the nominated waste disposal collection company.
- 1.4 A licensed waste management contractor has been commissioned by Cambridgeshire County Council and will collect on a regular / agreed basis. In cases of increased demand then arrangements will be put in place for increased frequency or collections upon agreement.

2. Service Aims

- 2.1 To provide self-medicating patients with a safe and convenient route for the disposal of sharps.
- 2.2 To support Cambridgeshire and Peterborough self-medicating patients to remain in their own homes and the NHS in reducing costs and patient journeys to centres of treatment.
- 2.3 To reduce the potential environmental damage and risk to public health caused by the use of inappropriate disposal methods for sharps.
- 2.4 To ensure customers understand the correct means of sharps disposal and reduce the risk of sharps being disposed of within unsuitable waste streams.
- 2.5 To reduce the volume of sharps stored in patients' homes, by providing convenient route for disposal, thus reducing the risk of accidental needle-stick injuries.
- 2.6 To improve the health of people within the waste industry locally and local communities by preventing the potential spread of blood-borne infections by enabling the safe disposal of sharps.

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- 2.7 To reduce the risk of needle stick injury in the community and inappropriate disposal of used injectable sharps.

3. Agreement Period

- 3.1 This agreement is between the Pharmacy Contractor and «Authority_Name» and will commence on «Contract_Start_Date» and will continue indefinitely provided the service continues to be commissioned.
- 3.2 It will be subject to a review on a 3 year basis by The Authority and Community Pharmacy Cambridgeshire and Peterborough.
- 3.3 The agreement may be terminated, without penalty, if the Pharmacy or The Authority provides the other with 3 months' notice in writing.
- 3.4 The frequency of waste collection by the waste disposal contractor will be on a regular / agreed basis to ensure there is not an unacceptable build-up of sharps on the pharmacy premises. The Pharmacy Contractor can request additional waste collections if there is an unexpected rise in patient returns.
- 3.5 The Pharmacy Contractor has a duty to ensure that pharmacists and staff involved in the provision of the service have relevant knowledge and are appropriately trained in the operation of the service, including sensitive, client-centred communication skills and data protection duties.
- 3.6 Whilst maintaining the confidentiality of the service users, the Pharmacy Contractor will maintain adequate records of sharps bins supplied, sharps bins returned, and sharps bins consigned for collection and disposal. As it will not be possible to assess the risk of infection from the sharps, all returned sharps containers will be consigned as hazardous waste.
- 3.7 The Pharmacy Contractor will comply with all relevant waste management legislation and its requirements; including Hazardous Waste Consignment Notes, and Consignee Returns to the producer where required.
- 3.8 The Pharmacy Contractor will have a standard operating procedure in place for this service. The Pharmacy Contractor has a duty to ensure that pharmacists and staff are aware of and operate within national and locally agreed protocols.
- 3.9 The Pharmacy Contractor will nominate a named individual to act as the lead for the service, who will oversee compliance with health and safety waste and environmental legislation.
- 3.10 The Pharmacy Contractor will ensure that their staff are made aware of the risk associated with the handling of returned used equipment and the correct procedures used to minimise those risks.
- 3.11 A needle stick injury procedure will be in place.
- 3.12 The Pharmacy Contractor will maintain appropriate records to ensure effective

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ongoing service delivery and audit.

- 3.13 Appropriate protective equipment, including gloves, overalls and materials to deal with spillages will be readily available close to the storage site.
- 3.14 The Pharmacy Contractor will complete required risk assessments and ensure adequate controls are in place, which may include provision of Hepatitis B injections for all staff involved in the handling of presented sharps containers, the safe storage of returned bins, and recording the transfer of bins to the disposal collection company.
- 3.15 Where required, and not covered by existing contracts or arrangements, «Authority_Name» will pay £120 towards required immunisations, records of which should be kept for the period of the agreement by the Pharmacy Contractor.
- 3.16 The Pharmacy Contractor provider of this service will comply with the General Pharmaceutical Council Standards of Conduct, ethics and performance at all times.

4. Training

- 4.1 The Pharmacy Contractor has a duty to ensure that pharmacists and staff involved in the provision of the service have relevant knowledge and are appropriately trained in the operation of the service.
- 4.2 This training must be recorded and updated annually. Evidence is to be recorded.
- 4.3 All Pharmacy Contractor staff will have read and signed the SOP, and reviewed annually.
- 4.4 All pharmacy contractor staff will have signed the needle stick injury policy, and reviewed annually.

5. Record Keeping

- 5.1 The Pharmacy Contractor will maintain records as specified by «Authority_Name» either in paper or electronic format and provide access to the records when reasonably requested to.
- 5.2 The Pharmacy Contractor will comply with any legal reporting requirements as required under the Health Technical Memorandum (HTM) 07-01, and retain consignment notes from the waste collection contractor. These should be retained and remain accessible for 5 years.

6. Quality Indicators

- 6.1 The Pharmacy Contractor will review its standard operating procedures and the referral pathways for the service on an annual basis.
- 6.2 The Pharmacy Contractor participates in a Recap authority audit of service

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provision.

7. Financial Details

The Pharmacy Contractor commissioned to provide this service will receive an **annual fee of £600** for each full year.

Bank	
Address	
Sort Code	
Account Number	

This will be paid by BACS by «Authority_Name» within the first quarter of each service year running from 1st April to 31st March each year (or 1/12 of the agreed annual fee for months forming part of an agreed year).

Authorisation

This document constitutes the agreement between the Pharmacy Contractor and «Authority_Name» in regards to the above service level agreement.

We agree to abide by the conditions laid out in the agreement:

Name of Pharmacy Contractor		
Address		
Signature on behalf of the Pharmacy Contractor	Name (please print)	Date
Signature of behalf of «Authority_Name»	Name (please print)	Date

