

HUNTINGDONSHIRE DISTRICT COUNCIL

Subject Matter:	Proposal for Clinical Waste Collections
Meeting/Date:	Cabinet – 21st March 2019
Executive Portfolio:	Marge Beuttell, Executive Cllr for Operations and Regulation.
Report by:	Recycling and Waste Operations Manager.
Ward(s) affected:	All Wards

Executive Summary:

This report sets out the alternative options for the collection and disposal of clinical sharps and the potential financial impact.

Huntingdonshire District Council (HDC), along with the other members of the Cambridgeshire and Peterborough Waste Partnership (RECAP) need to make suitable arrangements for the collection and disposal of clinical sharps following the withdrawal of arrangements by NHS England, which will impact residents in Cambridgeshire and Peterborough from April 2019.

NHS England is under no statutory obligation to maintain its current arrangements, whereby home-treating patients dispose of their clinical waste sharps through the local pharmacy network. These collection and disposal of these are then funded by NHS England.

Local Authorities are legally bound under the Controlled Waste (England and Wales) Regulations 2012(CWR) and the Environmental Protection Act 1990(EPA) to arrange collection of clinical waste from householders of self-treating patients on request and under the CWR and EPA they may make a reasonable charge for this service.

The majority of sharps use and disposal at Pharmacies arise from self-treating patients with diabetes. There are currently 9289 people registered with diabetes, and 8568 sharps box prescriptions were issued in Huntingdonshire in 2017/18.

HDC with the other members of RECAP have worked together to develop workable options to deliver this service.

RECOMMENDATION:

- Councillors evaluate the options based on patient benefits, cost, risk and impact
- Councillors recommend and endorse an option set out in this report to provide a sharps clinical waste and disposal service.

1. PURPOSE OF THE REPORT

- 1.1 For members to determine the most appropriate provision of domestic clinical waste collections in Huntingdonshire following the withdrawal of funding for current arrangements by NHS England in the East of England.

2. CURRENT HDC HOUSEHOLD CLINICAL COLLECTION SERVICE

- 2.1 HDC provides a free weekly clinical waste collection from residents' home addresses. Applications are made through our Customer Services Team. This is for infectious waste only (e.g. swabs, dressings and sharps). All applicants need to provide evidence and confirmation from either, a Clinical Commissioning Group, GP, or health care provider that they are treating themselves at home and the nature of the waste they are producing, before a clinical waste collection is arranged.
- 2.2 The current numbers of weekly collections are very low at only 13. With an even split between sharps and infectious clinical waste from dialysis. As a result of this low volume the service provision has been manageable at low overall cost in house at an annual cost of £10k per year.
- 2.3 Following a tender process conducted by Cambridgeshire County Council on behalf of RECAP, Novus Environmental Ltd was awarded the contract for the collection and disposal of clinical waste on behalf of the RECAP partners. This was seen to be a lower cost solution for HDC with a charge of £6.10 per collection irrespective of the volume of waste. This provided best value for money with an estimated annual cost of £4k per year, saving around £6k.

3. NHS ENGLAND CHANGES

- 3.1 Changes being implemented by NHS England will mean that from 1 April 2019, all local authorities in the East of England will be responsible for the collection of sharps from all self-medicating home patients.
- 3.2 This change relies on the Controlled Waste (England and Wales) Regulations 2012(CWR) and the Environmental Protection Act 1990(EPA) whereby Waste Collection Authorities were made responsible for ensuring collections of clinical waste from householders and self-treating patients on request. The NHS England funded solution was based on the return of this clinical waste to the Local Pharmacy network, often where the original prescription was prescribed.
- 3.3 It must be noted that the CWR and EPA allow local collection authorities to make a reasonable charge for this service, this could be cost recovery. This option may not be desirable as customers with a known disability (diabetes) would be required to pay for their clinical waste disposal.

4. IMPACT

- 4.1 The majority of clinical sharps arising from self-medication result from diabetes. There are currently 9289 people registered with diabetes in Huntingdonshire and 8568 prescriptions for sharps boxes (to safely dispose of the sharps) were issued in Huntingdonshire 2017/18.
- 4.2 The potential cost impact of converting all sharps boxes to a household collections service could be over £50,000 per year, a significant increase from the previously anticipated costs of £4,000 per year.

4.3 The potential financial impact on HDC depends upon the actual number of collections. At present the frequency of these is unknown as NHS England has not been able to fully determine this. It is therefore proposed to highlight this as a potential financial risk to the recycling and waste budget for 2019/20. Once the actual impact is known, if required an unavoidable growth bid will be proposed.

5. OPTIONS

All the models below will require the option of offering some residents free collections due to poor health entitlement/mobility issues. This would be assessed on a case by case basis.

5.1 **Do Nothing:** Collection of all self-administered sharps and clinical waste from the household at no cost to the household.

Impact – estimated cost of over £50,000 based on 2017/18 sharps box prescription levels.

This is regarded as undesirable on the grounds of cost and safety. Sharps boxes left out for collect present a significant health risk as they may be taken/prised open for access to individuals wishing to re-use the needles.

5.2 **Charge in Full:** Collection of all self-administered sharps and clinical waste from the household, charged at the cost of service. A charge of £8 per collection would cover the contractor cost and associated booking arrangements/administration.

Impact – no additional cost to HDC.

This is regarded as undesirable as a charge is likely to result in customers disposing of sharps in normal household waste collections to avoid the charge. The charge would also be applied largely to diabetes patients who are registered disabled and could regard the charge as an unfair tax on an underlying health condition.

5.3 **Copy Current NHS England Model (free to patient):** Local pharmacies are paid to act as a disposal point with larger, less frequent collections from local pharmacies by the appointed clinical waste contractor. This approach has been developed by RECAP in conjunction with the Local Pharmacy Commission (LPC).

Impact – An annual cost of approximately £18,000 (£600 across 30 Pharmacies in Huntingdonshire) plus a collection and disposal cost from the Pharmacies of £12,000 by our clinical waste contractor.

This is regarded as a desirable option as it mimics the current service, controls future growth so a widespread demand for a household collection service for clinical waste is not generated. The relationship between dispensing chemist and patient is retained along with privacy of disposal. Advice from the LPC is that most customers will not want a visible clinical collection and that this increases the risk of other models resulting in sharps being incorrectly disposed of in household waste, causing significant contamination. This model would allow for a single approach across Peterborough and Cambridgeshire.

5.4 **Pharmacy Model with Charged Household Collections:** As 5.3 but supplemented with a paid for service at £8 per collection if required.

This option would provide the customer with additional choice, of a free to use Pharmacy option or a doorstep collection with full cost recovery. This may give rise to some confusion as two systems will be available.

5.5 Working in Partnership

Whilst the decision to cease funding the current arrangements has been taken by NHS England, given the potential impact of the change, it is proposed that a report is taken to the Cambridgeshire Public Sector Board from the RECAP Partnership to raise concerns around the approach, system costs and impact on residents across Cambridgeshire and Peterborough.

RECAP has worked collaboratively with the LPC to broker a solution to best support our residents. The paper will seek a wider partnership approach in the future that may benefit all parties, particularly retaining the important level of resident service and support the current NHS England funded solution enables. The adoption of this approach is not compulsory and not all Council's within RECAP may adopt this approach. Currently Fenland, East Cambridgeshire District and Peterborough City Councils have opted in.

6. COMMENTS OF OVERVIEW & SCRUTINY

- 6.1 The Overview and Scrutiny Panel (Customer and Partnerships) considered the report at their meeting on 7th March 2019. Members expressed support for the maintenance of a pharmacy based solution as a replication of the current service, with minimal impact on the customer. However, concern was expressed regarding the recommended option of inclusion of a charged household collection service for clinical waste due to the risks associated with the potential budget implications as NHS England had been unable to provide details of the likely frequency of collections.
- 6.2 Members of the Panel requested that Cabinet consider adopting the current NHS England Model only and further review implementing the charged household collection at a later date when required to do so by legislation. They further requested that a progress report be presented to them at their meeting in September 2019 to consider progress and any further implications.

7. RISKS

- 7.1 Without a pharmacy based solution, the changes will mean clinical waste collection costs will increase in terms of administration, costs of collection and disposal.
- 7.2 There is a 3 month break clause on either side within the agreement with the Pharmacies such that if trialed for one year, notice may be given to cease any arrangement.
- 7.3 There is a significant potential reputation damage as any charges associated with clinical waste collections service could be seen as profiteering from those with a disability or with a health need.
- 7.4 Clinical waste sharps could find their way into the general refuse waste stream if a fully chargeable service was introduced. Any such contamination could have an impact on the Cambridgeshire and Peterborough waste disposal contracts.
- 7.5 Recently released national figures for those impacted by diabetes have doubled in the last 10 years; this trajectory is not anticipated to change, highlighting this

as a growing problem.

- 7.6 Public Health England estimates that around 8% of the NHS Cambridgeshire and Peterborough Clinical Commissioning Group's (CCG) population have either been diagnosed with diabetes or are living with it undiagnosed.
- 7.7 NHS England can provide no information regarding the volume or frequency of sharps boxes being presented to Pharmacies. It must also be noted that the figures of sharps boxes prescribed is an estimate as this was collated using postcode data which does not correspond exactly to the boundaries between districts.
- 7.8 There is often an historic or ongoing relationship between home patients and their pharmacy. HDC arranging collections of clinical waste directly from households may inadvertently sever this relationship which could have a wider impact on the home patients' wellbeing.
- 7.9 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 offer at pharmacies not be viable for any reason.

8. RECOMMENDATIONS

- 8.1 **Pharmacy Model (free to customer) with Charged Household Collection Option:** This will provide the customer with greater choice, of having to either return sharps boxes back through the local pharmacy network **free of charge**, or arranging a doorstep collection from the household at a charge of £8 per collection based on full cost recovery for HDC.
- 8.2 **Budget Risk:** That the recycling and waste service progress with the solution selected within 2019/20 on the basis that there is a potential adverse budget impact of £50,000 resulting from the requirement to operate a clinical sharps collection and disposal service. Once the actual costs are better known an unavoidable growth bid will be prepared.
- 8.3 **Partnership Paper:** That RECAP provide a paper to CPSB in order to highlight the issues and attempt to secure a wider partnership approach in the future.

9. REASON FOR RECOMMENDATIONS

- 8.1 This report set out the options and costs left to HDC to manage its responsibilities under the Controlled Waste (England and Wales) Regulations 2012(CWR) and the Environmental Protection Act 1990(EPA) whereby Waste Collection Authorities were made responsible for ensuring collections of clinical waste from householders and self-treating patients on request.

The proposal enables:

- Delivery of a clinical sharps collection and disposal service that meets the current and future needs of the patients in Huntingdonshire.
- Provides the greatest level of cost control for HDC.
- Provides the lowest risk of clinical waste entering the refuse waste stream.
- Greatest operational efficiency.
- Gives more choice for the patient on the services they receive.

10. TIMETABLE FOR IMPLEMENTATION

12 December 2018	Community Pharmacy Agreement and location of collection points discussed at Ops Panel.
7 January 2019	Send agreed list of Local Pharmacies an expression of interest.
21 January 2019	Local Pharmacy responses to expression of interest.
22 January 2019	Present Community Pharmacy Agreement to RECAP Board for approval.
23 January 2019	Pharmacies sent Community Pharmacy Agreement to sign.
30 January 2019	Community Pharmacy Agreement signed by both pharmacy and Local authorities.
1 February 2019	Provide NHS on RECAP clinical waste services for inclusion in signposting documents.
2 February 2019	NHS starts producing signposting documents.
1 April 2019	NHS stops delivering the service and local authorities start collections.

11. LINK TO THE CORPORATE PLAN, STRATEGIC PRIORITIES AND / OR CORPORATE OBJECTIVES

Our corporate plan sets out our ambition to **Support people to improve their health and wellbeing.**



The Corporate Plan shows you our objectives, the work programme we have put in place, the actions we will take and how we will measure our performance

12. BACKGROUND DOCUMENTS

Clinical Waste update letter NHS England.
 Clinical Waste data
 Huntingdonshire pharmacy list
 Huntingdonshire pharmacy map

Clinical sharps disposal partnership
Pharmacy specific agreement template.
Public service health contract

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