

Meeting date: 19 December 2022

Report to: Cabinet Member for Environment and Infrastructure

Report title: Household Collection of Sharps - Update

Report from: Head of Waste and Recycling

Report author/lead contact officer: Kalen Wood – Head of Waste and Recycling

Wards affected:

- All Wards | Bickenhill | Blythe | Castle Bromwich | Chelmsley Wood |
 Dorridge/Hockley Heath | Elmdon | Kingshurst/Fordbridge | Knowle |
 Lyndon | Meriden | Olton | Shirley East | Shirley South |
 Shirley West | Silhill | Smith's Wood | St Alphege
-

Public/private report: Public

Exempt by virtue of paragraph: N/A

1. Executive Summary

- 1.1 In September 2021, Solihull MBC agreed to take on responsibility for the collection of used prescribed needles (Sharps) from householders living in Solihull.
- 1.2 Before this, patients were required to return their full sharps boxes to their GP surgery or healthcare provider for safe disposal.
- 1.3 The service provides for the collection of sharps on an ad-hoc request basis with the provision of a replacement empty container.
- 1.4 The council has a legal duty to collect sharps if requested, however the council can also charge for the service and it is not obligated to provide replacement containers.
- 1.5 Demand for the service has significantly exceeded our expectations and is being delivered at a significant un-budgeted cost to the council.
- 1.6 As the service has been in operation for over a year, a review of service provision has been carried out with a view to simplifying the service and operating more cost

effectively.

2. Decision(s) Recommended

2.1 The Cabinet Member is requested to support the following options for refining the sharps collection service.

- a. The provision of a sharps collection service only.
- b. Replacement containers to be provided/prescribed by the patients GP or healthcare provider.
- c. Reserve the right to charge for return visits if the container is not available for collection on the scheduled collection date.

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3. Matters for Consideration

- 3.1 Before September 2021, prescribed used needles (Sharps), were managed via GP surgeries where patients returned their used Sharps boxes to their Surgery for safe disposal.
- 3.2 The Clinical Commissioning Group (CCG) for the region was aware of this arrangement and had supported this approach for the collection of Sharps for over 10 years.
- 3.3 At regular intervals we had been approached by GP practices to take on responsibility for the collection of Sharps but the CCG had continued to support the historic arrangement for the management of Sharps via GP practices.
- 3.4 Under the Controlled Waste Regulations 2012, Clinical Waste (which includes Sharps) is classified as Household Waste which a Waste Authority has an obligation to collect if requested to do so. The Regulations, also allow Authorities to charge for the collection of Clinical Waste/Sharps.
- 3.5 In early 2021, we were approached by a group representing Solihull GPs about taking on the responsibility for Sharps and we agreed to enter into discussions around this.
- 3.6 Unlike some other authority areas – there is not an established network of Pharmacies in Solihull that would be willing to act as a collection point for Sharps, so we agreed that we would offer a request -based collection service for Solihull residents.
- 3.7 As part of the discussions with the GP representative we asked for figures on users of sharps and estimated renewal frequencies to enable us to project future demand and costs. Unfortunately, this information was unavailable, so we were provided with an indicative estimate based on the lead GP's practice figures.

It was agreed with the GP group that the Authority would take over the collection of Sharps. The change was advertised via posters and leaflets that were distributed via the GP surgeries.

4. What options have been considered and what is the evidence telling us about them?

- 4.1 In September 2021, the council started collecting Sharps. A company called Citron Hygiene was appointed to collect Sharps on an interim basis from September 2021 until March 2022. From April 2022. this service has been provided by Veolia through the Strategic Environment Contract.
- 4.2 The current service includes the removal and disposal of the full sharps container and the provision of an empty replacement container.
- 4.3 The CCG agreed to cover the cost of replacement containers and we have re-charged them for the cost of providing containers from September 2021 until March 2022.
- 4.4 From 1 September 2021 until 30 March 2022, Citron carried out 1,760 collections at a

cost of £80,000. This far exceeded our expectations and the initial indicative estimates provided by the GP's group representative.

- 4.5 Since April 2022 we have carried out a further 1,863 collections and have removed 3,269 containers at a cost of £69,000 – based on these levels, we are projecting an annual expenditure in the region of £138,000 if we continue with current collection method and levels.
- 4.6 As we now have over 12 months of collection data we have carried out a benchmarking exercise with other local authorities to see how their service provision compares to Solihull.
- 4.7 Following the benchmarking exercise we have reviewed a number of options to simplify the process and to potentially reduce the cost of collecting sharps.
- 4.8 **Option 1 – Provision of sharps collection only**
- 4.9 We are not obligated to provide a replacement sharps container and could require the patient to obtain a replacement container via prescription from their GP or healthcare provider. This would be the same process that patients had to follow when they returned their containers directly to their GP surgeries. The advantage of this option is that we do not have to pay for replacement containers or recharge the CCG for the cost of container provision. The provision of the service would also be simpler for our contractor, as they will only be required to collect the containers presented and not leave a like for like replacement.
- 4.10 From a collection perspective the potential disadvantage would be that smaller 1 litre containers could be prescribed which would lead to more frequent collections – however ultimately our aim is to move to regular scheduled collections for frequent users of the service which would be a more cost-effective method of collecting sharps than the current ad-hoc request collection.
- 4.11 **Option 2 – Provision of sharps collection and standard replacement container**
- 4.12 A 5-litre yellow lidded container would be provided as standard. If a patient required a different container they would need to arrange this via a prescription from their GP or healthcare provider.
- 4.13 It would still be necessary to reclaim the cost of container provision from the CCG but would simplify deliveries for the collection crew. Providing a larger replacement container could also result in fewer overall collections for some patients.
- 4.14 The following table provides a summary of the two options.

Option	Summary	Advantages	Disadvantages
Option 1	<ul style="list-style-type: none"> Collection of containers only Replacement containers prescribed by GP or healthcare provider 	<ul style="list-style-type: none"> Simple process Easier for collection crew Reduced cost 	<ul style="list-style-type: none"> Onus on patient to replace container Potential for more collections due to smaller containers being prescribed
Option 2	<ul style="list-style-type: none"> Provide a single 5 litre container as standard 	<ul style="list-style-type: none"> Simpler process 	<ul style="list-style-type: none"> Cost of providing containers falls to

	<ul style="list-style-type: none"> • Other containers provided by GP or healthcare provider 	<ul style="list-style-type: none"> • Easier for collection crew 	<p>council – albeit potential to claim cost back from CCG</p> <ul style="list-style-type: none"> • Additional administration • Mixed message for patients
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4.15 The Authority can charge for collecting clinical waste. At this stage we are not proposing to introduce a charge for the collection of sharps, however we would like to reserve the right to charge for collections if residents repeatedly fail to leave their containers out for collection resulting in a wasted visit.

4.16 The Authority still incurs a charge if the collection crew visit a property and no containers are presented for collection. Non- presentation of containers on the allocated delivery date is an increasing problem and to date we have recorded 25 properties that have failed to put their containers out on two or more occasions which has resulted in 56 wasted visits.

4.17 We appreciate that some of these may have been for a genuine reason so we are proposing that a collection fee will only be incurred if there are two consecutive missed collections.

4.18 The fee will reflect the cost of the collection and an administrative charge to process the transaction and we estimate that it would be more than £30 per collection.

5. **Reasons for recommending preferred option**

5.1 We have benchmarked our service against 27 other local authorities that provide a service for sharps and out of the 27 only three provide containers for sharps – the remainder require the patient to provide their own containers via their GP or healthcare provider.

5.2 One of the authorities providing containers is Birmingham City Council and with a shared CCG there may be a preference for Solihull to continue to provide a similar level of service. However, securing a replacement container via a repeat prescription is a straightforward process which patients would have done prior to the council providing collections for sharps. Therefore, we believe that changes to container provision will have minimal impact on patients, with the focus of the service being to provide patients with an efficient, safe and reliable disposal route for their sharps.

5.3 Taking into consideration the advantages and disadvantages of the different collection options our preference is for Option 1 –Provision of sharps collections only, the reason for this is that the correct container for the patients clinical condition will be provided and it reduces the administration required to reclaim the cost of containers from the CCG.

5.4 It is also easier for our collection crew as they are only responsible for collecting the containers presented. There is also the potential in future to schedule regular sharps collections for repeat users of the service, therefore reducing the need to book ad-hoc

collections which will be more efficient and cost effective for the council.

- 5.5 Taking these factors into consideration, the Cabinet Member is asked to support the following changes to the current sharps collection process. The changes will be incorporated into the Councils existing Waste Collection Policy:
- a) The provision of a sharps collection service only.
 - b) Replacement containers to be provided/prescribed by the patients GP or healthcare provider.
 - c) Reserve the right to charge for return visits if the container is not available for collection on the scheduled collection date.
- 5.6 Before making any changes to collections we will notify the Solihull GPs group and the CCG. We will also produce a leaflet that will be provided to users of the service to inform them of the service changes.

6. Implications and Considerations

6.1 State how the proposals in this report contribute to the priorities in the [Council Plan](#):

Priority:	Contribution:
<p>People and Communities:</p> <ol style="list-style-type: none"> 1. Improving outcomes for children and young people in Solihull. 2. Good quality, responsive, and dignified care and support for Adults in Solihull when they need it. 3. Take action to improve life chances and health outcomes in our most disadvantaged communities. 4. Enable communities to thrive. 	<p>Provision of a safe and reliable collection service for a hazardous material.</p>
<p>Economy:</p> <ol style="list-style-type: none"> 5. Develop and promote the borough's economy, with a focus on revitalising our town and local centres. 6. Maximising the opportunities of UK Central and HS2. 7. Increase the supply of affordable and social housing that is environmentally sustainable. 	<p>Not applicable</p>
<p>Environment:</p>	<p>Provision of a safe and reliable collection service for a hazardous material.</p>

Priority:	Contribution:
8. Enhance our natural environment, improve air quality and reduce net carbon emissions.	
9. Promote employee wellbeing	Not applicable

6.2 Consultation and Scrutiny:

6.2.1 This report has not been through scrutiny or a formal consultation.

6.3 Financial implications:

6.3.1 Since responsibility for it was taken on by the Council in September 2021 the provision of the Sharps collection service has cost more than originally expected which is resulting in additional unexpected cost pressures on the Waste Collection, Disposal and Recycling budget. Based on activity to date and the arrangements in place during the first few months of operation the service is costing around £138,000 per year to provide.

6.3.2 Moving to the arrangements set out in the preferred Option 1 could save in the region of around £42,000 per year, based on current projections.

6.4 Legal implications:

6.4.1 There are no legal implications resulting from this report

6.5 Risk implications, including Risk Appetite:

6.5.1 There are no notable risks resulting from this report

6.6 Equality implications:

6.6.1 There are no notable equality impacts resulting from this report

6.7 Linkages to our work with the West Midlands Combined Authority (WMCA), Local

Enterprise Partnership or the Birmingham & Solihull Integrated Care System (ICS):

6.7.1 Not applicable

7. List of appendices referred to

7.1 None

8. Background papers used to compile this report

8.1 None

9. List of Other Relevant Documents

9.1 None