



Response of

Association of Independent Multiple Pharmacies;

Community Pharmacy Wales;

Company Chemists' Association;

National Pharmacy Association;

Pharmaceutical Services Negotiating Committee;

&

Royal Pharmaceutical Society of Great Britain

To

**DEFRA Consultation on proposed
amendments to the Hazardous Waste
(England and Wales) Regulations 2005**

February 2009

Our organisations, which represent pharmacy businesses (see respective remits at the end of this document) welcome the opportunity of responding to the DEFRA consultation on amendments to the Hazardous Waste (England and Wales) Regulations 2005.

We have considered the numbered sections of the consultation document and respond to those which we believe are relevant to retail pharmacy premises.

Section 6

We support the proposal in section 6 to increase the threshold below which a producer of hazardous waste is exempted from the need to notify premises.

Many retail pharmacy premises already fall below the exemption limit of 200kg of hazardous waste per 12 month period, as the hazardous waste produced consists of small quantities of medicines containing hazardous waste returned to the pharmacy by householders for safe disposal. Although many pharmacies would be exempt from notification, there is a natural caution about relying on the exemption, because the pharmacy owner is unable to predict with confidence, the total amount of hazardous waste that might be handed in at the pharmacy, and so notification is sometimes undertaken as a precaution. Increasing the limit to 500kg will in almost all cases, result in retail pharmacies being confident that they will not exceed the limit, and so notification can be avoided.

Section 7

The proposal in section 7 to reduce the amount of information that the Environment Agency is compelled to disclose is also supported. Although retail pharmacy premises are, if the proposals in section 6 are adopted, unlikely to need to notify the Environment Agency that they are a producer of hazardous waste, it is beneficial to those businesses that do notify, not to have unnecessary and commercially sensitive details related to their notification disclosed to third parties.

Section 9

The amendment of Regulation 38 concerning multiple collection consignment notes may cause some difficulties. Many retail pharmacy premises have their hazardous and non hazardous waste removed together, by an authorised waste contractor, operating a multiple collection, contracted by the local NHS Primary Care Trust. The waste contractor may visit a number of pharmacies but be unsure until he arrives, whether there is hazardous waste to be collected (the presence of hazardous waste will depend on whether householders have handed in unwanted medicines containing hazardous waste, prior to the visit). The pharmacist at the retail pharmacy premises may anticipate the visit, and if there is hazardous waste may complete a consignment note so that the authorised waste contractor is not delayed. The proposal to require only a multiple collection consignment note rather than allowing a collection of individually prepared consignment notes as part of a multiple collection seems to be an administrative matter that could undermine efficient administration for consignors of hazardous waste. In a pharmacy it may mean that the pharmacist cannot complete a consignment note in anticipation of a visit unless the format of the multiple collection consignment note allows separate sheets to be produced. Our organisations request that care is taken to ensure that it is possible for blank templates of parts of a multiple collection consignment note to be used, so that unnecessary delays do not occur when authorised waste contractors visit pharmacies to collect householder's returned medicines that contain hazardous waste.

Organisation Remit

Association of Independent Multiple Pharmacies

The Association of Independent Multiples (AIMp) has over 1200 pharmacies in membership and represents the interests of the independent multiple sector. Its members have between 5 and 300 shops, and include: Day Lewis, HI Weldrick Ltd and PCT Healthcare.

Community Pharmacy Wales

Community Pharmacy Wales is the body that represents community pharmacy on NHS matters and seeks to secure the best possible NHS services provided by pharmacy contractors in Wales. It is the body recognised by the Welsh Assembly Government in accordance with ss 83 and 85 National Health Service (Wales) Act 2006 as representative of persons providing pharmaceutical services.

Company Chemists Association

Through the CCA, its member companies work together to create an environment where community pharmacy can flourish, and where pharmacy contractors compete in a fair and equitable way. Our nine companies – Alliance Boots, Co-operative Group Pharmacy, Lloydspharmacy, Tesco, J Sainsbury, Wm Morrison Supermarkets, Asda Wal-Mart, Rowlands Pharmacy and Superdrug – together operate over 6,000 pharmacies in the United Kingdom.

National Pharmacy Association (NPA)

The NPA has, in voluntary membership, the vast majority of the UK's community pharmacy owners. The NPA provides a representative voice for its members as well providing members with a range of commercial and professional services to help them maintain and improve the health of the communities they serve.

Pharmaceutical Services Negotiating Committee

The Pharmaceutical Services Negotiating Committee (PSNC) is the body that represents community pharmacy on NHS matters and seeks to secure the best possible NHS services provided by pharmacy contractors in England. It is the body recognised by the Secretary of State, in accordance with s165(1)(a) National Health Service Act 2006 as representative of persons to whose remuneration any determination made by the Secretary of State would relate.

Royal Pharmaceutical Society of Great Britain

The Royal Pharmaceutical Society of Great Britain (RPSGB) is the professional and regulatory body for pharmacists in England, Scotland and Wales. It also regulates pharmacy technicians on a voluntary basis, a role that is expected to become statutory under forthcoming legislation. The primary objectives of the RPSGB are to lead, regulate, develop and represent the profession of pharmacy.

The RPSGB leads and supports the development of the profession within the context of the public benefit. This includes the advancement of science, practice, education and knowledge in pharmacy. In addition, it promotes the profession's policies and views to a range of external stakeholders in a number of different forums.

Following the publication in 2007 of the Government White Paper *Trust, Assurance and Safety - The Regulation of Health Professionals in the 21st Century*, the Society is working towards the demerger of its regulatory and professional roles. This will see the establishment of a new General Pharmaceutical Council and a new professional body for pharmacy in 2010