## <u>Vaccination Subsidy Scheme (VSS) 2019/20</u> <u>Guidelines on How to Arrange Vaccination Activities at Non-Clinic Settings</u> <u>(updated on 10 Sept 2019)</u>

#### **Introduction**

Institutions and community groups planning to organise vaccination activities at non-clinics settings should note that vaccination is a medical procedure. The organiser and the doctor in-charge of the arrangement (the doctor) must give due consideration to safety and liability issues. In addition, organisers should stay clear of associating with any improper financial (or advantage) transactions with the doctor and participants of the activity.

## Outreach vaccination activities under the Vaccination Subsidy Scheme (VSS)

In 2019/20, two types of outreach vaccination activities to be arranged by institutions and community groups through VSS are as follows:

(i) VSS Vaccination at Non-clinic Settings – Seasonal influenza vaccination (SIV) and/ or pneumococcal vaccination are provided to eligible groups at non-clinic settings, for example, elderly centres, community halls, institutions serving persons with intellectual disabilities, schools, etc. The subsidy levels remain at HK\$210 per dose of SIV, HK\$250 per dose of 23-valent pneumococcal polysaccharide vaccine (23vPPV), and HK\$730 per dose of 13-valent pneumococcal conjugate vaccine (PCV13). The doctor may impose extra fees, some doctors may not charge extra fees. (ii) Vaccination Subsidy Scheme (VSS) School Outreach (Extra charge allowed) – Subsidized seasonal influenza vaccination are provided to students of primary schools, primary sections of special schools, kindergartens, kindergarten-cum-child care centres and child care centres that are not participating in the 2019/20 Seasonal Influenza Vaccination (SIV) School Outreach (Free of charge). All students of participating schools, irrespective of their Hong Kong resident status, are eligible. The Government will pay the doctor subsidy HK\$210 per dose of SIV. The doctor may impose extra fees, some doctors may not charge extra fees. In addition, the doctor needs to arrange and ensure the clinical waste is disposed properly. Persons other than students can also receive SIV but subsidies would only be provided to persons eligible under the Scheme.

The following paragraphs briefly describe the major steps to organise outreach vaccination activities under VSS.

### (I) Planning Phase

#### (1) Select a doctor to be in-charge of vaccination arrangements

- (i) The organiser can select any private doctor to arrange provision of vaccination.
- (ii) However, if participants wish to use Government subsidy, the organiser must select a private doctor who has enrolled in VSS and will provide outreach vaccination service at non-clinic settings.
- (iii) For VSS vaccination at non-clinic setting (including VSS school outreach (Extra charge allowed)), information of enrolled doctors are available at the Centre for Health Protection (CHP) website (https://www.chp.gov.hk/en/features/46428.html ).
- (iv) Moreover, the organiser can contact CHP. Section at 2125 2125 for information.

# (2) Obtain information on the service fees charged by the doctor and consider whether to conduct tendering or quotation

- (i) If doctors do not charge fees, organisers/ schools can consider not to go through tendering or quotation process. However, selection of enrolled VSS doctors should be fair and transparent. Selection criteria should be open and properly documented. Members responsible for selection should also declare any conflict of interest.
- (ii) If tendering/ quotation is required, CHP has prepared a "<u>Reference</u> <u>Information on the Service Requirements for Arrangement of</u> <u>Vaccination Activity at Non-Clinic Settings</u>" in Appendix 1 and 1(A) for reference when necessary.

#### (3) Liaise with the doctor about the terms of service

(i) Read carefully the terms of services provided by the doctor, including the doctor's liability, service fees, arrangements for persons absent for vaccination and 2<sup>nd</sup> dose vaccination for children.

(Note: children under the age of 9 who have never received any seasonal influenza vaccination before need to receive 2 doses, at least 4 weeks apart. If required, the organiser should liaise with the doctor on arrangement for vaccination of  $2^{nd}$  dose.)

- (ii) Liaise with the doctor to arrange the venue and dates of the first and second dose vaccination.
- (iii) Once confirmed, remind the doctor to submit the completed <u>Notification</u> on Vaccination Activity at Non-Clinic Settings form to the Department of Health at least two weeks prior to the vaccination activity. Department of Health will notify Environmental Protection Department (EPD) about the time and venue of vaccination activity at non-clinic setting using this form. One notification form will be needed for each outreach vaccination activity.

# (4) Follow up with the doctor on preparation work of the vaccination <u>activity</u>

The doctor should provide the following services on the day of vaccination:

- (i) Provide safe and quality vaccination service to vaccine recipients.
- (ii) Participating **doctors are highly preferred to be present** at the vaccination venue and should be **personally and physically reachable** in case of emergency.
- (iii) Arrange sufficient number of **qualified / trained healthcare personnel** to provide service and medical support. The personnel should be trained in emergency management of severe adverse reactions and should prepare the **equipment**.
- (iv) Exercise effective supervision over the trained personnel who cover his duty; and retain personal responsibility for the treatment of the patients.
- (v) Give personal supervision to trained personnel or arrange qualified health care professionals to administer the vaccinations.
- (vi) Arrange health care professionals to assess participant's suitability to receive vaccination.
- (vii) Ensure all personnel comply with **infection control** guidelines.
- (viii) Ensure that the <u>Consent To Use Vaccination Subsidy Form</u> are duly completed and signed and verify the vaccine recipient's eligibility for subsidy and check vaccination records at the eHealth System (Subsidies) to prevent duplicated dose.
- (ix) For 13-valent pneumococcal conjugate vaccination for the elderly, the doctor should pre-arrange health assessments to confirm whether the elderly has high-risk conditions, and should complete and sign on relevant parts of the *Consent To Use Vaccination Subsidy Form*.
- (x) Properly handle clinical wastes (e.g., needles, intranasal sprayer, syringes and cotton wool balls fully soaked with blood, etc.).

#### (5) Venue Arrangement

- (i) Find out if the venue's Terms of Use have any restrictions on outreach vaccination activities.
- (ii) The vaccination venue should be well lit, ventilated and clean. Adequate and separate areas should be arranged for the vaccine recipients (1) to wait, (2) to register, (3) to receive vaccination, (4) to stay and remain under observation after vaccination, and (5) to provide emergency treatment if necessary.
- (iii) The vaccination venue should have a suitable place for temporary storage of the clinical waste which cannot be collected immediately after the vaccination activities. Please refer to the "<u>Guideline for Temporary</u> <u>Storage of Clinical Waste Generated in Outreach Vaccination Activities</u>" in Appendix 2.

## (6) Provide sufficient information to participants or parents/guardians of participants who are under the age of 18 or mentally incapacitated

- (i) Assist the doctor to distribute essential information (about VSS and the vaccines to be provided) to recipients/ parents/ guardians. Information leaflet can be downloaded from CHP website (<u>https://www.chp.gov.hk/en/features/46530.html</u>) or be obtained from CHP (Tel. 2125 2125).
- (ii) Inform participants the service fee, if any, for each type of vaccine for each target groups, charged by the doctor.
- (iii) Ensure that recipients understand that participation in VSS is voluntary. Allow sufficient time for them to decide if they wish to join VSS or not.
- (iv) Request healthcare providers to arrange health talk about seasonal influenza vaccination and/ or pneumococcal vaccination.
- (v) Request healthcare providers to provide a telephone number to recipients/ parents/ guardians for enquiries concerning vaccination.
- (vi) Inform participants that the Department of Health may contact randomly selected recipients or their parents / guardians for information verification.

#### (7) Checking eligibility and obtaining consent

- (i) Assist the doctor to distribute and collect the <u>Consent To Use Vaccination</u> <u>Subsidy Form.</u>
- (ii) Ensure that vaccine recipients and parents / guardians acting on behalf of vaccine recipients who are under the age of 18 or mentally incapacitated must :
  - (a) **Complete legibly a** <u>*Consent To Use Vaccination Subsidy Form*</u> for themselves or for the recipients; and
  - (b) Show documentary poof of **Hong Kong resident status** and other document(s) for certifying the eligibility as necessary, and
  - (c) Show their vaccination record cards, if any.
- (iii) Return the duly signed and completed <u>Consent To Use Vaccination</u> <u>Subsidy Form</u> to the doctor so that the doctor could verify the vaccine recipient's eligibility for subsidy and check vaccination records at the eHealth System (Subsidies) to prevent duplicated dose.
- (iv) Assist the doctor to distribute and collect the filled <u>Health Assessment</u>
  <u>Form</u> so that the doctor could assess the vaccine recipient's health status for vaccination. A sample of the health assessment form is uploaded to the CHP website (<u>https://www.chp.gov.hk/en/features/46428.html</u>)

## (II) On Vaccination Day

## (8) Assist to arrange those who have provided the signed and completed Consent To Use Vaccination Subsidy Form to receive vaccination

- (i) In case of schools, inform the health care providers the list of students who are absent from school or have fever or illness, so that health care providers would not provide vaccination on-site and would make necessary arrangement for these students.
- (ii) Maintain the order of recipients. For those walk-in persons, the organiser and the doctor should consider whether to accept walk-in application and how to handle.

### (9) After Vaccination

- (i) After vaccination, keep the recipients under direct observation for at least 15 minutes.
- (ii) If recipients have adverse reactions after vaccination, immediately inform the healthcare providers to assess and provide treatment to them.
- (iii) Ensure the healthcare providers have recorded vaccine information (including name of recipient, name of vaccine, date of vaccination and name of service provider) on recipients' self-held vaccination record cards for recipients' or their parents' / guardians' keeping.
- (iv) The organiser should also keep a record (log) that clearly shows whether a recipient named in the <u>Consent To Use Vaccination Subsidy Form</u> has actually received the vaccination on the scheduled day for future inspection.
- (v) Inform/ remind parents/ guardians about the arrangement of the second dose for children under the age of 9 who have never received any seasonal influenza vaccination before.

#### (10) Clinical Waste Handling and Disposal

- (i) Healthcare providers should properly pack, store and dispose of their clinical waste generated in the vaccination activities according to the Environmental Protection Department's "<u>Code of Practice for the Management of Clinical Waste Small Clinical Waste Producers</u>" (http://www.epd.gov.hk/epd/clinicalwaste/file/doc06\_en.pdf).
- (ii) Healthcare providers should follow Appendix 2: "<u>Guideline for Temporary</u> <u>Storage of Clinical Waste Generated in Outreach Vaccination Activities</u>" to dispose of clinical waste properly.
- (iii) Healthcare providers should arrange disposal of clinical waste on the same day, for example, arrange the licensed clinical waste collector to collect the clinical waste. If collection of clinical waste cannot be arranged on the same day, the organiser may have to store the clinical waste in a **temporary storage area** (as stipulated in the Code of Practice of the Environmental Health Department).

(The organiser may obtain information beforehand from the doctor on how to prepare the temporary storage area in case it is required.)

The above notes are by no means exhaustive. Please refer to Centre for Health Protection website (<u>https://www.chp.gov.hk/en/features/17980.html</u>) for more information regarding VSS.

Department of Health September 2019

#### **Appendix 1**

### <u>Reference Information on the Service Requirements</u> for the Arrangement of Vaccination Activity at Non-Clinic Settings

Some organisations and schools have indicated that they may consider tendering/ quotation when needed. The information in **Appendix 1 and 1a** is prepared for organisations' and schools' reference if necessary.

It should be noted that vaccination is medical procedure. The organiser and the doctor in-charge of the arrangement (the doctor) must give due consideration to safety and liability issues when organising vaccination service at non-clinic settings.

Organisers may take reference to information in this appendix when preparing the tendering/ quotation documents for vaccination activity at non-clinic settings. The content of this appendix is not meant to be exhaustive. The organisers should add their own requirements, amend and delete the inappropriate clauses as necessary. The Department of Health will not have or accept any liability, obligation or responsibility whatsoever for any loss, destruction or damage (including without limitation consequential loss, destruction or damage) however arising from any use / misuse of or reliance on the reference materials.

### <u>Proposed Service Requirements for the Arrangement of Vaccination Activity</u> <u>at Non-Clinic Settings</u>

The organiser should specify the following particulars when selecting a service provider to arrange an activity for seasonal influenza vaccination and/ or pneumococcal vaccination (for elderly):

- (i) Target group
- (ii) Age range of the recipients
- (iii) Number of estimated recipients
- (iv) Type (or name) of vaccines
- (v) Venue of the activity
- (vi) Address of the venue
- (vii) Proposed date and timing of the activity

#### **Proposed service requirement**

1. The service provider shall be or arrange a private doctor (the doctor in-charge) who has enrolled in the Vaccination Subsidy Scheme (VSS), to take charge of vaccination activity and to provide the following services:

#### A) Arrangement of outreach vaccination activity

The service provider should

- (i) Provide safe and quality vaccination service.
- (ii) The VSS doctor is highly preferred to be present at the vaccination venue and should be personally and physically reachable in case of emergency.
- (iii) Exercise effective supervision over the trained personnel who cover the doctor's duty and retain personal responsibility for the treatment of the patients.
- (iv) Arrange sufficient number of **qualified/ trained healthcare personnel** to provide service. The personnel should be trained in emergency management of severe immediate adverse reactions and prepare the equipment.
- (v) Provide the name and the type of vaccine which they would use, e.g. trivalent seasonal influenza vaccine and/ or quadrivalent seasonal influenza vaccine, 23-valent pneumococcal vaccine (for elderly) and/ or 13-valent pneumococcal vaccine (for elderly with high-risk conditions); and ensure the composition of the vaccine is under the coverage of VSS.
- (vi) Strictly follow vaccine manufacturers' recommendation on storage of individual vaccines. Purpose-built vaccine refrigerators (PBVR) are the preferred means of storage for vaccines in clinic. Cold boxes, equipped with ice packs, maximum-minimum thermometers, insulating materials, etc. should be used for transport of vaccines to the vaccination venue. The temperature of the vaccines should be monitored regularly with the thermometer to maintain cold chain at 2-8°C during transport and before administration of vaccines.

## B) Provide sufficient information to vaccine recipients, parents / guardians of vaccine recipients who are under the age of 18 or mentally incapacitated

The service provider should

- (i) Provide essential information on VSS and the vaccines to be provided.It is preferable to provide health talks on the relevant information.
- (ii) Inform the participants the service fee of each type of vaccine for each target groups, if any, charged by the doctor.
- (iii) Provide a telephone number to vaccine recipients or their parents / guardians for enquiries.
- (iv) Ensure participation understand that participation in the Government's

VSS is voluntary.

- (v) Allow sufficient time for participants to decide if they wish to join VSS.
- (vi) Inform participants that the Department of Health may contact randomly selected recipients or their parents / guardians for information verification.

#### C) Vaccination procedures

The service provider should

- (i) Give supervision to trained personnel or arrange qualified health care professionals to administer the vaccination.
- (ii) Arrange health care professionals to assess the suitability of each individual recipient for vaccination before administration of vaccine. They should check the health assessment form and body temperature of the recipient.
- (iii) Ensure that the <u>Consent To Use Vaccination Subsidy Form</u> are duly completed and signed and verify the vaccine recipient's eligibility for subsidy and check vaccination records at the eHealth System (Subsidies) to prevent duplicated dose.
- (iv) For PCV13 vaccination for elderly, the service providers need to prearrange health assessment to confirm the presence of high-risk conditions, to complete and sign on relevant parts of the <u>Consent To Use</u> <u>Vaccination Subsidy Form</u>.
- (v) Ensure all personnel comply with infection control guidelines. Hand hygiene protocol must be strictly followed before and after administering vaccination to a vaccine recipient.
- (vi) Properly follow 3 checks (check when taking out the vaccine from the storage; check before preparing the vaccine; check before administering the vaccine) and 7 rights (right person; right drug; right dose; right time; right route; right site; right documentation) for vaccine administration.
- (vii) Keep vaccinated persons under direct observation in the venue for at least 15 minutes, to provide treatment if an immediate adverse event occurs.
- (viii) For eligible children under the age of 9 who have never received any seasonal influenza vaccination before, arrange vaccination of a 2nd dose at least four weeks later.
- (ix) Properly pack, store and dispose of their clinical waste generated in the vaccination activities in accordance with the Environmental Protection Department's Code of Practice (CoP) for the Management of Clinical

Waste (Small Clinical Waste Producers) (http://www.epd.gov.hk/epd/clinicalwaste/file/doc06\_en.pdf) and the Guideline for Temporary Storage of Clinical Waste Generated in Outreach Vaccination Activities provided by the Environmental Protection Department in Appendix 2.

#### D) Provide proper documentations for the vaccination

The service provider should

- Record vaccination information (including name of recipient, type/ name of vaccine, date of vaccination and name of service provider) on recipients' self-held vaccination record cards for recipients' or their parents' / guardians' keeping.
- (ii) Document on a vaccination record (log) all vaccinations given, including the name of vaccine, lot number and expiry date, document the name of personnel who administered the injection and the doctor responsible. The record should be kept in a database for inspection in the future.
- 2. All bidders are required to fill in the information as attached in **Appendix 1(A)**.

## **Bidders please provide detailed information on the following service items:**

Service	Information				
Doctor in charge					
	Name :				
	Medical Organisation :				
Types/ names of vaccines	Name	Expiry Date	Service Fees	Service Fee	
and service fees charged			(using subsid	y) (no subsidy)	
Inactivated quadrivalent					
injectable seasonal					
influenza vaccine					
Inactivated trivalent					
injectable seasonal					
influenza vaccine					
Live attenuated					
quadrivalent nasal					
seasonal influenza vaccine				- <u></u>	
Pneumococcal vaccine					
(23vPPV)					
(for elderly)					
Pneumococcal vaccine					
(PCV13)					
(for elderly with high-risk conditions)					
Method of vaccine storage	□ Stored in purpose-built vaccine refrigerators				
in doctor's clinic and	Stored in domestic refrigerator with regular checking of temperature				
transportation of vaccines	Transported in cold boxes with regular checking of temperature				
to vaccination venue	□ Others, please specify:				
(put a ✓ as appropriate)					
Qualification and number	Qualification of th	e on-site staff		Number	
of on-site staff provided on					
day of vaccination (e.g.					
doctor/ registered nurse/					

enrolled nurse / supportive	Total		
staff)			
Would provide Health	□ Yes □ No		
Talk(s) or not	(put a ✓ as appropriate)		
	(Qualification of the speaker:)		
Would provide Enquiry	□ Yes □ No		
Phone number or not	(put a ✓ as appropriate)		
	(Enquiry Phone Number :)		
	(Operating hours of the Enquiry Phone Number :		
	)		

#### Appendix 2

#### Vaccination Subsidy Scheme Guideline for Temporary Storage of Clinical Waste Generated in <u>Outreach Vaccination Activities</u> (Provided by the Environmental Protection Department)

#### 1. Preamble

- 1.1 The aim of this document is to provide guidance to healthcare workers, organisers and the designated person of the venue amongst outreach vaccination activities, for proper and safe handling and temporary storage of clinical waste generated in outreach vaccination activities.
- 2. Responsibilities of Healthcare Workers, Organisers and Designated Person of the Venue
- 2.1 According to the Waste Disposal (Clinical Waste) (General) Regulation (the Regulation), healthcare workers, organisers and designated person of the venue involving in outreach vaccination activities should handle the clinical waste properly. They shall take all necessary precautions to prevent danger to public health and safety, pollution to the environment and nuisance to the neighbouring area. <u>Appendix 2(A)</u> illustrates different ways to handle clinical waste generated in the outreach vaccination activities.
- 2.2 Before the outreach vaccination activities, healthcare workers and organisers should pre-arrange with licensed clinical waste collectors<sup>\*</sup> to collect the clinical waste on the same day of the activities. Healthcare workers could also choose to self-deliver their clinical waste to the Chemical Waste Treatment Centre at Tsing Yi by private car on the same day after the event. A note on self-delivery can be found in <u>Appendix 2(B)</u>.
- 2.3 In case the clinical waste could not be collected on the same day (e.g. outreach vaccination activities conducted in the evening or public holidays), healthcare workers and organisers should pre-arrange with designated person of the venue to store the clinical waste temporarily at the venues for the licensed collectors to collect as soon as possible or the healthcare professionals to self-deliver. If no suitable storage area could be provided, healthcare workers and organisers should identify another suitable venue for outreach vaccination activities.

<sup>\*</sup> List of licensed clinical waste collectors : <u>http://epic.epd.gov.hk/EPICDI/clinicalwaste/list/</u>

- 2.4 The healthcare workers should affix a label on each clinical waste container requiring temporary storage (see <u>Appendix 2(C)</u>). The label should clearly display (1) the name of the responsible healthcare worker, (2) name of his/her organisation, (3) emergency contact number, (4) address of waste generation (i.e. the venue address) and (5) the date of sealing. After the sealed container is handed to the venue for temporary storage, it is the responsibility of the designated person of the venue to store the clinical waste properly before collection by licensed collector.
- 2.5 When the licensed collector comes to collect clinical waste stored on-site, the designated person of the venue should sign the trip ticket and forward the pink copy of the trip ticket to the healthcare worker for record.
- 2.6 According to the Regulation, except to the Chemical Waste Treatment Centre direct, delivery of clinical waste to any other places by healthcare workers (including to their own clinics) is not permitted.

#### 3. Requirements of Temporary Storage Area

- 3.1 The temporary storage area of clinical waste should meet the following requirements and specifications:
  - (a) the storage area should be an independent lockable storage cabinet, locker or drawer, and keep away from the area of food preparation and storage;
  - (b) a warning sign and a label comprising (1) the name of the responsible healthcare worker, (2) name of his/her organisation and (3) emergency contact number should be affixed on the door of the storage area (see <u>Appendix 2(C)</u>). The warning sign can be obtained from the Environmental Protection Department free of charge;
  - (c) the storage area should only be used for storage of clinical waste; and
  - (d) any unauthorised access to the temporary storage area should be prohibited.

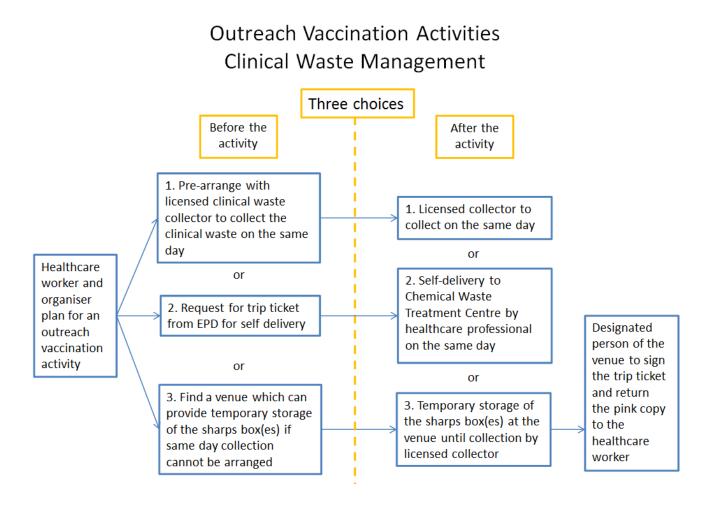
#### 4. Further Enquiry

4.1 For any enquiries, please contact Ms. Choi of the Environmental Protection Department at 3178 9356.

Environmental Protection Department August 2019

## Appendix 2(A)

Different ways of handling clinical waste generated in the outreach vaccination activities



## Environmental Protection Department Notes to Healthcare Professionals on the Delivery of Clinical Waste to the <u>Chemical Waste Treatment Centre (CWTC)</u>

A healthcare professional (HCP)<sup>1</sup> may directly deliver clinical waste to the CWTC<sup>2</sup> for disposal but his/her liabilities under the Waste Disposal (Clinical Waste) (General) Regulation (the Regulation) will not be discharged unless the delivery of clinical waste is completed safely and properly. This includes:

- Clinical waste carried is not more than 5 kg and is not Group 4 waste;
- Clinical waste is packaged in an appropriate type of container, sealed and labelled properly;
- Only private car is used for the delivery.

The full requirements are stated in Section 4 of the Regulation and Section 6 of the Codes of Practice.

To self-deliver the clinical waste, the HCP must:

- provide a **clinical waste trip ticket**<sup>3</sup> filled with relevant information, such as the name of the HCP, his/her HCP body registration number and the assigned **premises code**<sup>4</sup> of the clinical waste producer;
- show his/her identity card and HCP registration number at the CWTC. For the sake of convenience, copies of HCP registration document is accepted;
- arrive CWTC during reception hours

The reception hours for receiving clinical waste delivered by HCP at the CWTC are 9:00 a.m. - 12:00 noon and 1:00 p.m. - 4:30 p.m. on Monday to Friday (except for public holiday). No prior appointment is required. For special circumstances and upon request with **3-day advance notice** with CWTC site office (tel: 2434 6372), the reception hour can be extended to 5:30 p.m.

A charge at \$2,715 per 1,000 kg (or \$2.715 per kg)<sup>5</sup> will be levied on the clinical waste as received and treated at the CWTC. The amount to be paid depends upon the weight of clinical waste received and <u>only cash is accepted</u>.

For any enquiries, please contact Ms. Choi of the Environmental Protection Department at 3178 9356 or visit the webpage <a href="https://www.epd.gov.hk/epd/clinicalwaste/en/index.html">https://www.epd.gov.hk/epd/clinicalwaste/en/index.html</a>.

#### Footnote

- Healthcare professionals include registered medical practitioners, dentists and veterinary surgeons, registered or listed Chinese medicine practitioners, and registered or enrolled nurses as defined in the Regulation.
- 2. CWTC is located at 51 Tsing Yi Road South, Tsing Yi, New Territories, Hong Kong.
- 3. Blank clinical waste trip tickets can be obtained from EPD by submitting the Request Form for Clinical Waste Trip Tickets. A set of 10 blank trip tickets will be distributed for each request. https://www.epd.gov.hk/epd/clinicalwaste/file/Request%20Form%20for%20Clinical%20Waste%20Trip%20Tickets\_en.pdf
- 4. Premises code can be obtained from EPD by submitting the Premises Code Request Form, on which 'outreach service' should be annotated in the Producer Name for outreach vaccination activities: https://www.epd.gov.hk/epd/clinicalwaste/file/Premises%20Code%20Request%20Form%20(Eng).pdf
- 5 The charge is stipulated under the Waste Disposal (Charges for Disposal of Clinical Waste) Regulation.

## Appendix 2(C)

- LOT 11030901 ROL = XXH
  - Name of organisations/ ABC Clinic/ healthcare worker Dr Chan Tai-man 9123 4567 Emergency contact no. Address of DEF Elderly Centre, clinical waste G/F, XX House, XX Estate generation 25/11/2019 Date of sealing
- 2. Example of warning sign and label on a temporary storage cabinet



Name of organisations/	ABC Clinic/
healthcare worker	Dr Chan Tai-man
Emergency contact no.	9123 4567

1. Example of a labelled clinical waste container