Vaccination Subsidy Scheme (VSS) 2021/22

Guidelines on How to Arrange Vaccination Activities at Non-Clinic Settings (updated on 20 August 2021)

Introduction

Institutions and community groups planning to organise vaccination activities at non-clinic 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) transaction with the doctor/ medical organisation and participants of the activity.

Outreach vaccination activities under VSS

In 2021/22, eligible groups under VSS include:

- persons aged 50 years or above,
- pregnant women,
- children aged 6 months to under 12 years (or aged 12 or above but studying in primary school in Hong Kong),
- persons with intellectual disability,
- persons receiving Disability Allowance; persons who are recipients of standard rate of "100% disabled" or "requiring constant attendance" under Comprehensive Social Security Assistance (CSSA) Scheme of the Social Welfare Department.

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 government will subsidise

- (a) HK\$240 per dose of SIV
- (b) HK\$300 per dose of 23-valent pneumococcal polysaccharide vaccine (23vPPV), and
- (c) HK\$760 per dose of 13-valent pneumococcal conjugate vaccine (PCV13).

The Government will directly reimburse the subsidy to doctors. The doctor may impose extra fee, some doctors may not charge extra fee.

(iii) Vaccination Subsidy Scheme (VSS) School Outreach (Extra charge allowed) — All students of participating schools (including primary schools, primary sections of special schools, kindergartens, kindergarten-cum-child care centres, child care centres and special child care centres) that are not participating in "2021/22 Seasonal Influenza Vaccination (SIV) School Outreach (Free of charge)", irrespective of their Hong Kong resident status, are eligible to receive subsidised seasonal influenza vaccination. The government will subsidise HK\$240 per dose of SIV. The Government will directly reimburse the subsidy to doctors. The doctor may impose extra fee, some doctors may not charge extra fee. The doctor needs to purchase and deliver vaccines and arrange disposal of clinical waste at their own cost. Persons other than students can also receive SIV in the activity but subsidies would only be provided to persons eligible under VSS. Ineligible persons can also receive vaccination at full price in the activity.

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) 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.
- (ii) Information of enrolled private doctors who will provide outreach vaccination service at non-clinic settings (including VSS School Outreach (Extra charge allowed)) are available at the Centre for Health Protection (CHP) website (https://www.chp.gov.hk/en/features/46428.html).
- (iii) The organiser may also search the List of Enrolled Healthcare Service Providers in the eHealth System (Subsidies) website at (https://apps.hcv.gov.hk/Public/en/SPS/Search) where one can input keyword "non-clinic" in the blank "Practice's Name", and sort the search result by service fee to select a doctor.
- (iv) The actual service fee charged by doctors may vary according to the requirement of outreach vaccination activity. The charges listed are for reference only, please contact doctors directly for the service fee to be charged.
- (v) The organiser can also contact CHP at 2125 2125 for information.

(2) Obtain information on service fee 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 Information on the Service Requirements for Arrangement of 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 (may refer to **Appendix 1**) provided by the doctor, including the doctor's liability, service fees, arrangements for persons absent for vaccination and 2nd 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 <u>Vaccination Activity at Non-Clinic Settings form</u> to the Centre for Health Protection (CHP) at least two weeks prior to the vaccination activity. One notification form will be needed for each outreach vaccination activity. CHP will notify Environmental Protection Department (EPD) the time and venue of outreach vaccination activity using this form.
- (iv) Remind the doctor to decide method of clinical waste collection and disposal. The doctor shall pre-arrange with licensed clinical waste collectors well before the vaccination activity for collection of clinical waste on the same day of the activity; or could choose to self-deliver the clinical waste to Chemical Waste Treatment Centre by private car. In case the clinical waste could not be collected on the activity day, the organiser and doctor shall pre-arrange a designated temporary storage area of clinical waste at the venue. Please refer to Appendix 2 for details.

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(4) Follow up with the doctor on preparation work of the vaccination activity

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 have prepared the emergency equipment.
- (iv) Exercise effective supervision over the trained personnel who cover his duty; and retain personal responsibility for the treatment of the patients.
- (v) Arrange health care professionals to assess participant's suitability to receive vaccination.
- (vi) Ensure all personnel comply with **infection control** guidelines.
- (vii) Ensure that the <u>Consent To Use Vaccination Subsidy Form</u> are duly completed and signed and check the eHealth System (Subsidies) to verify the vaccine recipient's eligibility for subsidy and check vaccination records/ cards (if any) to prevent duplicated dose.
- (viii) For 13-valent pneumococcal conjugate vaccination for the elderly, the doctor should pre-arrange health assessments to confirm the elderly has high-risk conditions, and should complete and sign on relevant parts of the *Consent To Use Vaccination Subsidy Form*.
- (ix) Give personal supervision to trained personnel or arrange qualified health care professionals to administer the vaccinations.
- (x) Properly handle and dispose 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 vaccine recipients (1) to wait, (2) to register, (3) to receive vaccination, (4) to rest and stay under observation after vaccination, and (5) to provide emergency treatment if necessary.
- (iii) The vaccination venue has to provide a suitable place for temporary storage if clinical waste cannot be collected immediately after the vaccination activity. Please refer to "<u>Guideline for Temporary Storage of Clinical</u> Waste Generated in Outreach Vaccination Activities" in **Appendix 2**.

Infection prevention

- (iv) During Coronavirus Disease 2019 (COVID-19) pandemic, social distancing measures implemented at that time, including Prevention and Control of Disease (Prohibition on Group Gathering) Regulation, should be observed. Please refer to the website of the Government (https://www.coronavirus.gov.hk/eng/reduce-gatherings.html) and (https://www.coronavirus.gov.hk/eng/social distancing-faq.html#FAQC4).
- (v) To prevent COVID-19, all participants should wear a mask and practice hand hygiene, keep appropriate distancing (i.e. at least 1 metre) at waiting area, vaccination area, queue and other activities if any. Temperature checking for participants should be in place before entering the premises for vaccination. The venue for vaccination should be kept well ventilated.
- (vi) To prevent COVID-19, the outreach vaccination venue should be cleaned and disinfected after every morning, afternoon or evening sections, with 1 in 99 diluted household bleach (mixing 1 part of household bleach containing 5.25% sodium hypochlorite with 99 parts of water), left for 15-30 minutes, and then rinsed with water and wiped dry. For metallic surface, disinfect with 70% alcohol.
- (vii) For vaccination at schools, please refer to the "Health Advice to Schools for the Prevention of Coronavirus disease (COVID-19)" in the CHP website (https://www.chp.gov.hk/files/pdf/advice_to_school_on_prevention_of_nid_eng.pdf).
- (viii)For precautionary measures at workplace to minimize the risk of contracting and spreading COVID-19, please refer to the "Health Advice on Prevention of Coronavirus disease (COVID-19) in Workplace" (https://www.chp.gov.hk/en/resources/346/index.html?f=466)

(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 (https://www.chp.gov.hk/en/features/46530.html) 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) If practicable, invite healthcare provider to explain information about seasonal influenza vaccination and/ or pneumococcal vaccination.
- (v) Request healthcare provider to provide contact telephone number to recipients/parents/guardians for enquiries concerning vaccination.
- (vi) Inform participants that Centre for Health Protection of 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) Bring along documentary poof of **Hong Kong resident status** and other document(s) for certifying the eligibility as necessary (please check with the doctor for the necessary documents), and
 - (c) Bring along previous 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 for verifying 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> for the doctor to assess the vaccine recipient's health status for vaccination. A sample of the health assessment form is available at the CHP website (https://www.chp.gov.hk/en/features/46428.html)

(II) On Vaccination Day

(8) Prevent infections, assist to arrange those who have provided the signed and completed Consent To Use Vaccination Subsidy Form to receive vaccination

- (i) Please refer to paragraph (5) Venue Arrangement of section (I) Planning Stage in this guideline for the introduction of infection prevention measures.
- (ii) For vaccination at schools, please refer to "Health Advice to Schools for the Prevention of Coronavirus disease (COVID-19)" in the CHP website (https://www.chp.gov.hk/files/pdf/advice_to_school_on_prevention_of_nid_eng.pdf).
- (iii) For vaccination at schools, please inform the health care providers the list of students who are absent from school or have fever or illness, so that healthcare providers would not provide vaccination on-site and would make necessary arrangement for these students.
- (iv) 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 at the site for rest and **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 seasonal influenza vaccination before.

(10) Clinical Waste Handling and Disposal

- (i) Healthcare providers should **properly pack, store and dispose of clinical waste generated in the vaccination activities** according to the
 Environmental Protection Department (EPD)'s "Code of Practice for the

 Management of Clinical Waste Small Clinical Waste Producers"

 (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 cannot be arranged on the same day, the organiser may have to store the clinical waste in a **temporary storage area.**

(The organiser may obtain information in advance 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 (https://www.chp.gov.hk/en/features/17980.html) for more information regarding VSS.

Department of Health July 2021

<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 Appendix 1A** is prepared for organisations' and schools' reference if necessary.

It should be noted 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 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 **Appendix 1** and **Appendix 1(A)** are not meant to be exhaustive. 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 but not limited to 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> at Non-Clinic Settings

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 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 time of the activity

Proposed service requirement

1. The service provider shall be or arrange a private doctor 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 have the emergency equipment prepared.
- (v) Provide the name and the type of vaccine which they would use, e.g. quadrivalent seasonal influenza vaccine, 23-valent pneumococcal vaccine (23vPPV) (for elderly) and/ or 13-valent pneumococcal vaccine (PCV13) (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.
- (vii) Pre-arrange proper clinical waste disposal method (refer to **Appendix 2**). Prior booking with licensed clinical waste collector is highly preferred for collection of the anticipated clinical waste once the venue and date of vaccination activity is confirmed.

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 arrange health talks to provide 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 contact telephone number to vaccine recipients or their parents

- / guardians for enquiries.
- (iv) Ensure participants 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 Centre for Health Protection of 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 before administration of vaccine by checking 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, check the eHealth System (Subsidies) to verify the vaccine recipient's eligibility for subsidy and to check the vaccination record/ cards (if any) 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 *Consent To Use Vaccination Subsidy Form*.
- (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 for rest and 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 seasonal influenza vaccination before, arrange vaccination of a second dose at least four weeks later.
- (ix) Properly pack, store and dispose of 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

- (i) 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 vaccine 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)**.

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 Fee	Service Fee	
and service fees charged	(Subsidised person)	(Non-subsidised person)	
Inactivated quadrivalent			
injectable <u>seasonal</u>			
influenza vaccine		_	
Live attenuated			
quadrivalent nasal seasonal influenza vaccine			
seasonai mituenza vaccine			
Recombinant quadrivalent			
injectable <u>seasonal</u>			
influenza vaccine			
imitaenza vaceme			
Pneumococcal vaccine			
(23vPPV)			
(for elderly)			
Pneumococcal vaccine			
(PCV13)			
(for elderly with high-risk conditions)		_	
Qualification and number	Qualification of the on-site staff	Number	
of on-site staff on day of	Doctor		
vaccination (e.g. doctor/	Registered Nurse		
registered nurse/enrolled	Enrolled Nurse		
nurse / supportive staff)	Clinic Staff		
	Other Supporting Staff		
	Total		
Vaccine Storage	Purpose-built vaccine refrigerator	1	
Equipment	Domestic frost-free refrigerator (with or without freezer		
(Put a "✓" as appropriate)	compartment)		
	Others, please specify:	(Type, brand & model)	

Vaccine Transport to	By vaccine supplier	
Venue (Put a "✓" as appropriate)	By enrolled doctor/medical organization: in cold box(es), with ice	
	packs, insulating materials, etc. and continuous temperature monitoring	
	Others, please specify:	
Would provide Health	☐ Yes ☐ No	
Talk(s) or not	(Qualification of the speaker:)	
Would provide Enquiry	☐ Yes ☐ No	
Phone number or not	(Enquiry Phone Number:)	
	(Operating hours of the Enquiry Phone Number:)	

Vaccination Subsidy Scheme Guideline for Temporary Storage of Clinical Waste Generated in Outreach Vaccination Activities (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. Appendix 2(A) 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* 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.

^{*} List of licensed clinical waste collectors: http://epic.epd.gov.hk/EPICDI/clinicalwaste/list/

- 2.4 If healthcare workers do not have a clinical waste producer premises code for outreach services, they should obtain one from EPD. Since one outreach service premises code can be used for different outreach locations, one does not need to re-apply for outreach service premises code if already have one.
- 2.5 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) premises code and (6) 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.
- 2.6 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.
- 2.7 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 organization, (3) emergency contact number and (4) premises code 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) any unauthorised access to the temporary storage area should be prohibited.

4. Further Enquiry

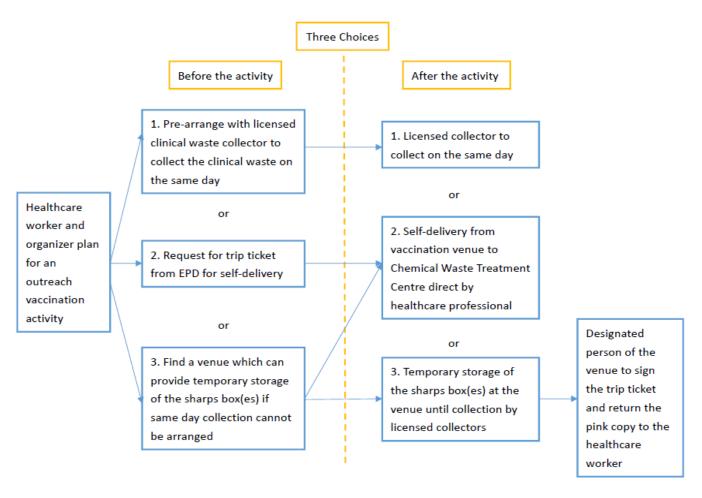
4.1 For any enquiries, please contact Mr. Wong of the Environmental Protection Department at 3178 9356.

Environmental Protection Department August 2021

Appendix 2(A)

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

Outreach Vaccination Activities Clinical Waste Management



Environmental Protection Department Notes to Healthcare Professionals on the Delivery of Clinical Waste to the Chemical Waste Treatment Centre (CWTC)

A healthcare professional (HCP)¹ may directly deliver clinical waste to the CWTC² 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 ticket³ filled with relevant information, such as the name of the HCP, his/her HCP body registration number and the assigned premises code⁴ 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 and reception services on Saturday from 1:00 pm to 5:30 pm can be provided (no reception services before 1:00 pm).

A charge at \$2,715 per 1,000 kg (or \$2.715 per kg)⁵ 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 only cash is accepted.

For any enquiries, please contact Mr. Wong of the Environmental Protection Department at 3178 9356 or visit the webpage https://www.epd.gov.hk/epd/clinicalwaste/en/index.html.

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%2
 OTickets 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)

1. Example of a labelled clinical waste container



Name of organisations/	ABC Clinic/
healthcare worker	Dr Chan Tai-man
Emergency contact no.	9123 4567
Address of	DEF Elderly Centre,
clinical waste	G/F, XX House,
generation	XX Estate
Premises code	PC02/XX/XXXXXXXX
Date of sealing	25/11/2020

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
Premises code	PC02/XX/XXXXXXXX