Budget Option 2019/20 - 2020/21

Cumulative Net Savings

Reference: RE 15

| 2018/19 | 2019/20 | 2020/21 |
|---------|---------|---------|
| £'000 | £'000 | £'000 |
| 0 | 10 | 10 |

| Director Responsible for Delivery | Strategic Director Regeneration and Environment |
|--------------------------------------|---|
| Cabinet Portfolio Holder | Cllr Hoddinott |
| Finance Business Partner | Jon Baggaley |
| Proposal Description Review of | f Clinical Waste Operation |

Details of Proposal (including implications on service delivery)

The proposal is to review the current operational / financial structure of the Clinical Waste collection service. Clinical Waste is legally defined as controlled waste, and is therefore a waste that Local Authorities can exert a charge for. The duty of care for the control and disposal of clinical waste resides with the producer of the waste. Where residents are under the care of a healthcare provider, the healthcare provider is therefore legally responsible for the collection and disposal of clinical waste. The Local Authority is therefore able to charge the collection of this service to the healthcare provider, or advise that the healthcare provider needs to put their own collection processes in place to discharge their duty of care.

Given the above, the net cost of the Clinical Waste service should be as close to zero as possible. The current budget is a net deficit of £20k. Around half of the income currently received is derived from other Council services. Any increases on these charges would therefore not deliver a saving.

The service will therefore consider the following under this proposal:

 A review of income received from the NHS to provide the service will be undertaken to ensure that the Council's costs are being reasonably recovered.

| Implications on other | At present the service calculates that it is under- recovering around £10k per year of income on this element of the service. 2) The service will consider stopping provision of clinical waste collections altogether, given we have no statutory responsibility to undertake the service. However, given the use of the service by a number of internal Council services, and the potentially significantly higher costs of commissioning external services to provide this service, this is unlikely to yield any additional savings on a Council wide basis. 3) Based on the outcomes of the above, a review of the current service operating structure would also be undertaken which may yield potential additional savings. |
|---|--|
| Implications on other Services (identify which services and possible impact) | Impact of service provided by NHS If Council ceases to provide the service this may impact on other Council service if there is an ongoing requirement as would need to procure externally. |
| Support required from Corporate Services – Finance, HR, Legal, ICT (please specify) | Finance / HR |
| Reduction in Staffing Posts (FTEs) | Should option 1 be delivered – 0 FTE Should option 2 be delivered - 2 FTE |
| Reduction in Head Count | Should option 1 be delivered – 0 FTE Should option 2 be delivered - 2 Operatives |

| Decision Maker : | |
|---|--|
| Either Cabinet or Officer/Management Action | |
| Action | |