A Product Stewardship Plan
For Unwanted Medicine from Households

Snohomish County, Washington
March 16, 2017
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I. Introduction

MED-Project LLC (“MED-Project”), on behalf of the participating companies identified in Appendix A, submits this Product Stewardship Plan (“Plan”) for Unwanted Medicine in compliance with the Secure Medicine Return Regulation in Snohomish County, Snohomish Health District Sanitary Code Chapter 15, Sections 3-21 (“Regulation”). The Regulation requires pharmaceutical Producers¹ to develop a Product Stewardship Program to finance and manage the collection, transportation, and disposal of Unwanted Medicine from County households. MED-Project is requesting standard plan status.

II. Contact Information

The primary contact person for the MED-Project is:

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¹ All capitalized terms used but not otherwise defined herein shall have their respective meanings set forth in the Regulation.
III. Plan Definitions

**Carrier** is United Parcel Service, Inc., the common carrier used by Vendor to transport Unwanted Medicine.

**County** means the unincorporated and incorporated areas of the County of Snohomish.

**DEA** is the U.S. Drug Enforcement Administration.


**Kiosk Drop-Off Site** is a location hosting a MED-Project kiosk for the collection of Unwanted Medicine.

**Kiosk Drop-Off Site Host** is the designated contact person or persons at the Kiosk Drop-Off Site.

**Law Enforcement Agency** or **LEA** is a federal, state, tribal, or local law enforcement office or agency.

**Mail-Back Distribution Location** is a facility, such as a town hall or LEA, that will provide MED-Project Mail-Back Packages.

**Mail-Back Services** is the provision of pre-paid, pre-addressed envelopes for the collection and disposal of Unwanted Medicine.

**Maintenance Technicians** are service personnel who are trained to provide services related to kiosks that are part of the Program. This includes, but is not limited to, responding to damaged kiosks. Maintenance Technicians will be directed by Vendor.

**Plan** or **Product Stewardship Plan** is the product stewardship plan presented in this submittal by MED-Project.

**Program** or **Product Stewardship Program** is the product stewardship program set forth in this Plan.

**Residents** or **Covered entities** mean human beings residing in the County. “Residents” does not include business generators of pharmaceutical waste, such as hospitals, clinics, doctor’s offices, veterinary clinics, pharmacies, or airport security and law enforcement drug seizures.

**Service Technicians** are service personnel trained to remove and transport the Unwanted Medicine from Program kiosks. Service Technicians will be managed by Vendor.

**Stewardship Organization** is an organization designated by a group of Producers to act as an agent on behalf of each Producer to operate a product stewardship program.

**Take-Back Event** is an event sponsored by MED-Project with oversight by law enforcement for the collection of Unwanted Medicine.

**Unwanted Medicine** is defined in Section IV of this Plan.

**Vendor** is Stericycle Specialty Waste Solutions, Inc. (“Stericycle”), the collection vendor for this Plan, and any other such vendor as retained by MED-Project to carry out its obligations under the Program.
IV. Unwanted Medicine

For the purposes of the Plan, “Unwanted Medicine” includes all materials identified as “Covered Drugs” under Regulation § 5.C that also qualify as “Unwanted Covered Drugs” under Regulation § 5(X). Per the Regulation, Covered Drugs means “a drug sold in any form and used by covered entities, including prescription and nonprescription drugs, brand name and generic drugs, drugs for veterinary use, and drugs in medical devices and combination products, including pre-filled injector products with a retractable or otherwise securely covered needle.” Regulation § 5(C)(1). Unwanted Medicine does not include the following:

i. Expired undispensed samples direct from physicians’ offices;

ii. Unused or expired drugs from hospitals and institutions;

iii. Bulk animal pharmaceuticals from farms (business use);

iv. Vitamins or supplements;

v. Herbal-based remedies and homeopathic drugs, products, or remedies;

vi. Cosmetics, shampoos, sunscreens, toothpaste, lip balm, antiperspirants, or other personal care products that are regulated as both cosmetics and nonprescription drugs under the federal Food, Drug, and Cosmetic Act (Title 21 U.S.C. Chapter 9);

vii. Hard surface and toilet disinfectant cleaners;

viii. Drugs administered in a healthcare setting;

ix. Drugs for which Producers provide a pharmaceutical product stewardship or take-back program as part of a federal Food and Drug Administration managed risk evaluation and mitigation strategy (Title 21 U.S.C. § 355-1);

x. Drugs that are biological products, meaning any virus, therapeutic serum, toxin, antitoxin, or analogous product applicable to the prevention, treatment or cure of diseases or injuries of man, as these terms are defined by 21 C.F.R. § 600.3(h), if the Producer already provides a pharmaceutical product stewardship or take-back program;

xi. Compressed cylinders, aerosols, and inhalers;

xii. Medical devices or their component parts or accessories;

xiii. Used, empty containers, vials, and pouches that do not contain a usable quantity of covered drugs;

xiv. Pre-loaded products with a sharp attached and combination products from which prescription or over the counter medications can be removed;

xv. Schedule I or other illicit drugs;

xvi. Iodine-containing medications and mercury containing thermometers;

xvii. Pet pesticide products contained in pet collars, powders, shampoos, topical applications, or other forms; and

xviii. Any other products excluded from the definition of Covered Drug under Regulation § 5(C).

See Section XIV.A for collection limitations imposed by the DEA Rule.
V. Collection of Unwanted Medicine

The MED-Project Plan provides services to collect Unwanted Medicine, including controlled substances, in any dosage form. The collection methods and any applicable legal requirements are described below.

A. Unwanted Medicine Collection Program Implementation

1. Outreach
Per Regulation § 6.D.2, MED-Project initially notified 155 pharmacy and 22 LEA locations of the opportunity to participate as a Kiosk Drop-Off Site. MED-Project continued outreach to these locations through calls and emails with the goal of establishing Kiosk Drop-Off Sites distributed as uniformly as possible throughout the County. As part of this outreach, MED-Project asked if the sites were interested in participating in the Program, whether the sites currently host a kiosk or other services for the disposal of residential Unwanted Medicine, whether pharmacies are DEA registrants, and if the sites would like more information regarding the Program.

LEAs and pharmacies that currently have drop-off sites may transition into the Program pending compliance with all Program requirements. Existing drop-off sites are available at many County and LEA locations.

2. Implementation
Upon Plan approval, MED-Project will work with LEAs and pharmacies identified during outreach (see Section V.A.1.) to obtain Kiosk Drop-Off Site Host signed agreements. Preparation for implementation will occur during the 90 days following Plan approval, during which time MED-Project will work to satisfy the service convenience requirement through signed agreements with Kiosk Drop-Off Site Hosts. Following this period of preparation, MED-Project will satisfy the service convenience requirement through Take-Back Events and the availability of Mail-Back Services if signed agreements have not been attained from the minimum number of Kiosk Drop-Off Site Hosts. See Sections V.C and V.D.1 for details of how MED-Project will satisfy the service convenience requirement after the first 90 days.

Participation in the Program is contingent upon compliance with all applicable laws, regulations, and other legal requirements and following the MED-Project collection processes provided in Section V.B.4., including the use of the MED-Project Vendor. More information on the agreements is provided in Section V.B.1.

Collection of Unwanted Medicine will begin at Kiosk Drop-Off Sites once agreements have been signed with each location, kiosks have been installed in compliance with the DEA Rule, site employees have been trained, and, in the case of pharmacies, all DEA and Washington State Pharmacy Quality Assurance Commission requirements have been met.

3. Convenience
Kiosk Drop-Off Sites will be strategically placed across the County to best meet the service convenience requirement established by the Regulation. This network will provide Residents many different outlets to participate in the Plan.
Per Regulation § 8.D.3, MED-Project will strive to establish a Kiosk Drop-Off Site in each city or town with a potential Authorized Collector, as well as an additional Kiosk Drop-Off Site for every 30,000 Residents at the locations of Potential Authorized Collectors. If the minimum number of Kiosk Drop-Off Sites cannot be established, Take-Back Events and/or Mail-Back Services shall be provided to supplement the disposal of Unwanted Medicine by Residents in those areas.

Mail-Back Services shall be available upon request for differentially-abled or homebound Residents, thereby offering more opportunities to dispose of Unwanted Medicine.

4. Flexible Expansion
MED-Project will continually assess performance, gauge feedback, and revise its approach as appropriate. As implementation proceeds, MED-Project shall continue to approach organizations that may be available as future Take-Back Event or Kiosk Drop-Off Site Hosts. These organizations are listed in Appendix B.

The Plan will be implemented in a flexible manner, offering coverage to Residents through a combination of Kiosk Drop-Off Sites, Take-Back Events, and Mail-Back Services. Current activities taking place prior to Plan approval include outreach to LEAs and pharmacies regarding their interest and ability to participate in the Program as Kiosk Drop-Off Sites and outreach to potential Take-Back Event Hosts. Over the course of implementation, additional Kiosk Drop-Off Sites will be established to the extent that (1) additional eligible LEAs and/or DEA-registered collector pharmacies agree to participate, and (2) contracts can be executed with such entities. MED-Project will conduct supplemental Take-Back Events and/or Mail-Back Services for underserved areas. For every engagement with LEAs and pharmacies, including the establishment of Kiosk Drop-Off Sites, Take-Back Events, or availability of Mail-Back Services, contracts outlining the responsibilities of all involved parties will be drafted, reviewed by appropriate entities, and signed by all parties before MED-Project installs kiosks, schedules Take-Back Events, or provides Mail-Back Services.2

Take-Back Events and/or Mail-Back Services shall supplement Kiosk Drop-Off Sites if the service convenience requirement is not met through signed agreements with Kiosk Drop-Off Site Hosts. As MED-Project obtains additional agreements with Kiosk Drop-Off Site Hosts, these supplemental services will decrease.

For more information regarding Take-Back Event scheduling, coverage, and frequency, see Section V.C.

Mail-Back Services will be available to differentially-abled and homebound Residents upon request and will be reviewed continuously for availability and effectiveness. Mail-Back Services may also be made available if agreements have been obtained from fewer than the required number of Kiosk Drop-Off Site Hosts. See Section V.D.1 for more information about the availability of Mail-Back Services.

Mail-Back Packages for pre-loaded products with a sharp attached and auto-injectors from which Unwanted Medicine cannot be removed will be available through the call center at all times.

2 MED-Project may determine that contracts are not necessary for certain Mail-Back Services.
B. Kiosk Drop-Off Sites
Kiosk Drop-Off Sites will be strategically placed across the County to best meet the service convenience requirement established by the Regulation. This network will provide Residents many different outlets to participate in the Plan. All Kiosk Drop-Off Site Hosts shall provide residents with access to Program kiosks during all regular business hours.

1. Kiosk Drop-Off Site Locations
MED-Project contacted 23 LEAs and 156 pharmacies located in the County about the opportunity to serve as a Kiosk Drop-Off Site Host. Of the locations contacted, 23 LEAs and 36 pharmacies expressed interest in participating in the Program. These interested Kiosk Drop-Off Site Hosts are identified in Appendix C. MED-Project will continue communicating with these locations during review of the Plan.

MED-Project has received expressions of interest from more potential Kiosk Drop-Off Site Hosts than required and will contract with each location after Plan approval.

A map of the interested and potential Kiosk Drop-Off Site Host locations is below.

MED-Project will continue outreach to potential Kiosk Drop-Off Site Hosts that had not expressed interest in Program participation as of Plan submission. These sites are listed in Appendix D.

In unincorporated areas where potential Kiosk Drop-Off Site Host is not available, MED-Project will work with LEAs to schedule Take-Back Events, seek to establish additional Kiosk Drop-Off Sites in nearby cities or towns, or provide Mail-Back Services. Additionally, within 120 days of Plan implementation, MED-Project will schedule Take-Back Events or establish Mail-Back Package Distribution Locations if fewer than the required number of interested Kiosk Drop-Off Site Hosts sign an agreement to participate in the
Program in any city or town. Currently MED-Project expects that Take-Back Events or Mail-Back Package Distribution Locations may be necessary for Marysville, Edmonds, Everett, Lake Stevens, and Lynnwood.

As required under Regulation § 8.D.2, within three months of their offer to participate (unless the collector requests a longer time-frame), the Plan will include as a Kiosk Drop-Off Site any retail pharmacy or LEA willing to serve voluntarily as a Kiosk Drop-Off Site for Unwanted Medicine and able to meet all applicable laws, regulations, and other legal requirements. Locations currently serving as a drop-off site may participate in the Program by signing an agreement with MED-Project and modifying their DEA registration if required. The process for modifying DEA registrations is outlined in Section XIV.A.1. MED-Project will work with the Kiosk Drop-Off Site Host to transition to the Program and Vendor.

See Section V.C for more information on Take-Back Events and Section V.D for Mail-Back Services.

2. Drop-Off Site Kiosk Placement and Maintenance Program
Kiosk installation shall take place within 90 days of a signed agreement and shall be the responsibility of MED-Project at LEA and pharmacy Kiosk Drop-Off Sites if the Kiosk Drop-Off Site Host has identified a placement location. All kiosks in the Program must be securely placed and maintained inside a collector’s registered location or LEA’s physical location in accordance with DEA Rule §§ 1317.75(d)(1) and 1317.35(a). At pharmacies, kiosks will be placed in the immediate proximity of a designated area where controlled substances are stored and at which an employee is present (i.e., can be seen from the counter), pursuant to § 1317.75(d)(2). At a hospital or clinic with an on-site pharmacy, kiosks will be placed in an area regularly monitored by employees but not near areas of the facility where emergency care is provided. § 1317.75(d)(2)(i). Costs associated with installation and maintenance will be paid by MED-Project per the contracts with the Kiosk Drop-Off Sites.

The maintenance program will address items such as:

- Periodic inspection of kiosks to monitor general wear and tear;
- Service Technician access to the kiosks during the regularly scheduled service and notification of a Maintenance Technician if necessary; and
- Reporting of damage to a kiosk and maintenance service requests.

3. Kiosk Specifications
A kiosk will be offered to all eligible host locations. Pursuant to § 1317.75(e), MED-Project kiosks at pharmacies will:

- Be securely fastened to a permanent structure;
- Be securely locked, substantially constructed containers with a permanent outer container and removable inner liner;
- Include a small opening in the outer container that allows contents to be added to the inner liner, but does not allow removal of the inner liner’s contents;
- Prominently display a sign indicating that only Schedule II-V controlled and non-controlled substances are acceptable to be placed in the kiosk; and
- Have the small opening in the outer container locked or made inaccessible to the public when a Kiosk Drop-Off Site employee is not present.
The proposed design of the pharmacy kiosk and proposed signage (Appendix E) satisfies these requirements using heavy gauge steel; multiple locking mechanisms, including a locking mechanism on the drop slot; a tamper-proof slot; and commercial hinges. The design will increase the likelihood of consumer participation by providing easy access to wheelchair-bound users. The locking mechanism on the drop slot will prevent kiosk overflow once the container has reached its maximum level and is locked by the Kiosk Drop-Off Site Host. MED-Project pharmacy kiosks will come with appropriate regulatory signage and instructions, including an instruction to remove personal information from any Unwanted Medicine and packaging before depositing them and language required under the DEA Rule. Kiosk signage will provide information about what is and is not accepted in the kiosk.

Additionally, under § 1317.60(a), MED-Project kiosk inner liners will:

- Be waterproof, tamper-evident, and tear-resistant;
- Be removable and sealable immediately upon removal without emptying or touching kiosk contents;
- When sealed, make the contents of the inner liner not viewable from the outside;
- Clearly indicate the size of the inner liner; and
- Bear a permanent, unique identifier for tracking purposes.

While the DEA Rule does not require LEA kiosks to meet these same requirements, MED-Project will offer these kiosks and inner liners to LEAs. See DEA Rule at 53531.

4. Kiosk Collection
Under DEA Rule § 1317.05(c)(2)(iv), pharmacy Kiosk Drop-Off Site Hosts must dispose of sealed inner liners and their contents either on-site, through common or contract carrier delivery to, or pick-up by, a reverse distributor or distributor, or with DEA assistance.

Section 1317.75(c) prohibits the counting, sorting, inventorying, or individual handling of any substances deposited into a pharmacy kiosk. Additionally, § 1317.60 limits inner liner access to employees of the collector and requires two employees to immediately seal the inner liner upon its removal from the pharmacy kiosk’s permanent outer container. See § 1317.60(b), (c). Section 1317.75(g) provides that pharmacy kiosk inner liner installation or removal shall be performed “by or under the supervision of at least two employees of the authorized collector.” The pharmacy kiosk sealed inner liner must not be opened, x-rayed, analyzed, or otherwise penetrated. See § 1317.60(c).

At LEA Kiosk Drop-Off Sites, Vendor and the LEA will maintain any records of removal, storage, or destruction of the collected Unwanted Medicine in a manner consistent with the LEAs’ recordkeeping requirements for illicit controlled substances evidence pursuant to § 1317.35. Additionally, any Unwanted Medicine will be stored in a manner to prevent the diversion of controlled substances and consistent with the LEA’s standard procedures for storing illicit controlled substances. See § 1317.35. Collected Unwanted Medicine will be transferred to the disposal facility in a manner to prevent the diversion of Unwanted

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3 As discussed in Section XI, MED-Project will coordinate with other Product Stewardship Plans to develop clear standardized instructions for Residents to use kiosks and a consistent design. Appendix E provides the kiosk design and signage MED-Project expects to propose when coordinating with other Product Stewardship Plans.

4 Specifically, as required under § 1317.75(e)(4), all kiosks will prominently display a sign stating that: “Only Schedule II-V controlled and non-controlled substances that are lawfully possessed by the ultimate user are acceptable to be placed in the kiosk. Schedule I controlled substances, illicit or dangerous substances, and any controlled substances not lawfully possessed by the ultimate user may not be placed in the kiosk.”
Medicine and consistent with the LEA’s standard procedures for transferring illicit controlled substances. See § 1317.35.

MED-Project’s Kiosk Drop-Off Site collection system complies with DEA requirements for pharmacy and LEA Kiosk Drop-Off Sites. Vendor, pharmacies, and LEAs participating in the Plan will keep all records required under the DEA Rule, including those required under §§ 1304 and 1317.35. Pharmacy Kiosk Drop-Off Site Hosts and Vendor will be instructed never to count, sort, inventory, or individually handle kiosk contents.

Pharmacy kiosks will be located where an employee is present affording employees the opportunity to visually inspect Unwanted Medicines Residents attempt to deposit. See Section V.B.2. LEA kiosks will be located inside the LEA’s physical location. See Section V.B.2.

Pick-up of Unwanted Medicine collected at Kiosk Drop-Off Sites will be scheduled for all Kiosk Drop-Off Sites, year-round, based on their regular business hours and volume collected. When arriving at a Kiosk Drop-Off Site, the kiosk will be checked by the Service Technicians for any damage.

A Service Technician will arrive at the Kiosk Drop-Off Site with a pre-printed shipping label. Unwanted Medicine will be securely removed from the kiosk by Service Technicians and Kiosk Drop-Off Site employees following standard operating procedures meeting all DEA requirements. Specifically, two Kiosk Drop-Off Site employees will hold the two keys to unlock the kiosk. Once the kiosk is unlocked, the inner liner will be removed from the kiosk and immediately sealed, a new inner liner will be installed, and the two Kiosk Drop-Off Site employees will lock the kiosk. The inner liner provided in the kiosk will be opaque to prevent visual recognition of the contents. The sealed inner liner will not be opened, x-rayed, analyzed, or otherwise penetrated.

Under the supervision of two Kiosk Drop-Off Site employees, the Service Technicians will package the sealed inner liner for shipping. The unique identifier of the inner liner will be matched to the tracking number on the shipping label. The Service Technician will schedule a pickup from the Carrier to be completed within a few business days and leave the packaged, sealed inner liner with the Kiosk Drop-Off Site Host for storage until Carrier pickup.

Vendor will prepare the materials for shipment and perform applicable pre-transportation functions to comply with Department of Transportation (DOT) Hazardous Materials Regulations.

5. Frequency of Pick-Up
Initially, all Kiosk Drop-Off Sites will be scheduled for a monthly pick-up from the kiosk. Vendor will communicate with the Kiosk Drop-Off Site Host if the frequency of pick-up needs to be changed based on the volumes collected over time. Vendor will monitor the volumes per service to ensure that all sites are receiving the appropriate service frequency. Vendor will manage pick-up services as frequently as necessary to prevent overflow of the kiosk without providing unnecessary interruption to the participating Kiosk Drop-Off Site. Moreover, Vendor will monitor the weight of Unwanted Medicine generated at each participating Kiosk Drop-Off Site.
6. Procedures if a Kiosk is Full Prior to Scheduled Pick-Up
The kiosk provided to the Kiosk Drop-Off Site will contain a visual indicator to notify the Kiosk Drop-Off Site Host if the kiosk is almost full. When the kiosk is full, the Kiosk Drop-Off Site Host shall lock the drop-slot to the kiosk and notify Vendor of the need for service if prior to the scheduled service date.

Vendor shall provide a network of trained Service Technicians. Vendor will communicate service requests to field managers responsible for Service Technicians. Vendor will direct service to a trained Service Technician who is in closest proximity to the Kiosk Drop-Off Site requesting the service. This process provides for a timely response to Kiosk Drop-Off Sites requiring service prior to the scheduled date.

Service timelines will be assessed based on the specific characteristics of the Kiosk Drop-Off Site’s need. If necessary, Vendor will be able to respond within hours of the request. If the request does not require an urgent response, Vendor will plan the response within two to three business days of the request. Vendor will not exceed one business week from the initial request. In the interim, pharmacy Kiosk Drop-Off Site Hosts shall be instructed to secure the kiosk and its contents in accordance with DEA requirements.

7. Unplanned Event Preparedness
Vendor maintains a network of emergency responders that can be contacted in the case of an emergency or spill incident. Vendor ensures service providers operate in compliance with all applicable laws, regulations, and other legal requirements through a qualification process. This process reviews the compliance history, management structure, financial stability, and other key indicators of a reliable emergency response service provider. This system ensures that all participating vendors in the Program will meet the requirements as outlined in the Regulation. Emergency responders will bring all necessary equipment to manage the specific needs of the Kiosk Drop-Off Site requiring an emergency response.

A major event, such as a flood, earthquake or fire, may require a response by a service team. This event can jeopardize the security characteristics of the kiosk as well as the structural integrity of the participating location. The team will assess the safety of the area along with the locations to be serviced. Once it is determined the area is safe for access, the team will work to secure the kiosk and remove its contents.

Along with major event preparedness, Vendor provides timely responses to events that may cause an inconvenience to the Kiosk Drop-Off Site Hosts. An example of this kind of event would be if the kiosk is giving off an odor prior to the scheduled service date. The Kiosk Drop-Off Site Host will place a service request via the dedicated phone number (See Appendix E). Vendor is able to respond within two to three hours in most cases when notified of a need for emergency response. If the request is not an emergency that poses an immediate threat to the environment or health, Vendor will typically respond to a service location within two to three business days of the event.

Personal items inadvertently dropped into the kiosk (i.e. dentistry, watch, keys, wallet, etc.) will not be retrieved.
C. Take-Back Events

90 days after Plan approval, MED-Project will conduct a gap assessment of signed agreements with Kiosk Drop-Off Site Hosts. 30 days after the gap assessment, MED-Project will schedule quarterly Take-Back Events and/or provide Mail-Back Services if the service convenience requirement is not met through signed Kiosk Drop-Off Site agreements.

If scheduling Take-Back Events, MED-Project will confirm to the County the locations and dates once contracts with supervising LEAs have been fully executed. Targeted events can be viewed in Appendix F. Federal, state, tribal, or local law enforcement shall attend all Take-Back Events. In general, MED-Project will work to conduct the Take-Back Events in coordination with other scheduled events (i.e., Earth Day celebrations, Health and Wellness Fairs) to maximize convenience to Residents. In situations where a location in the community cannot be secured, MED-Project will work with the participating LEA to host the event at the precinct or other County facilities.

Due to the continuously changing schedule of Take-Back Events, the list of take-back dates and locations will be maintained on the MED-Project website as events are scheduled.

1. Method

The hosting of Take-Back Events is contingent upon participation and oversight by contracted LEAs. MED-Project will work with participating LEAs to ensure Take-Back Events are compliant and successful. Events will be promoted and communicated to the public through local communication channels as outlined in Appendix G.

The process of conducting Take-Back Events will meet all applicable laws, regulations, and other legal requirements. MED-Project will contract with LEAs to conduct Take-Back Events. These contracts will provide for the collection, transportation, and disposal of Unwanted Medicine from Take-Back Events and ensure that all requirements of participating LEAs are met. MED-Project will work with LEAs to accommodate any reasonable requirements.

2. Procedures

MED-Project will partner with LEAs to ensure that at least one law enforcement officer oversees collection at all Take-Back Events pursuant to DEA Rule § 1317.65(a), (b). The law enforcement officers will maintain control and custody of all Unwanted Medicine collected at Take-Back Events from collection until secure transfer, storage, or destruction of the Unwanted Medicine, as required by § 1317.65(b). Only ultimate users and persons authorized to dispose of an ultimate user decedent’s property in lawful possession of controlled substances in Schedules II-V may transfer these substances to the LEA during the event. § 1317.65(e). No other person will handle controlled substances at Take-Back Events under § 1317.65(e); however, Vendor may assist LEAs in the collection of Unwanted Medicine at Take-Back Events. See DEA Rule at 53539.

Take-Back Events will typically be staffed by at least two Vendor employees. Vendor will work in coordination with MED-Project and LEAs to monitor and ensure collection of all material at Take-Back Events is compliant with all applicable laws, regulations, and other legal requirements and meets the expectations of the planned event. Vendor will work in conjunction with local law enforcement and MED-Project to ensure all material is placed in a compliant collection receptacle and securely shipped to meet all applicable laws, regulations, and other legal requirements. Any material that is not Unwanted Medicine or does not meet legal requirements will be rejected.
Vendor and the LEA will maintain all records of removal, storage, or destruction of the collected Unwanted Medicine in a manner consistent with the LEA’s recordkeeping requirements for illicit controlled substances evidence pursuant to § 1317.35. Any collected Unwanted Medicine will be stored to prevent the diversion of controlled substances and consistent with the LEA’s standard procedures for storing illicit controlled substances. Any storage of Unwanted Medicine by Vendor will also comply with the applicable security requirements of §§ 1301 and 1317, including the requirement that Unwanted Medicine is securely stored in a manner consistent with the security requirements for Schedule II controlled substances.

Vendor will package Unwanted Medicine inner liners, match the unique inner liner identifier to shipping labels, and prepare the inner liners for shipment in compliance with all applicable laws, regulations, and other legal requirements. Collected material will be weighed following the completion of each event. With the sealed inner liners remaining under the control and custody of the LEA, Vendor will assist the LEA with the transportation of the sealed inner liners to the LEA’s facility. Vendor will schedule a pickup from the LEA facility to take place within a few business days of the event. Vendor will transport the sealed inner liners to the LEA facility for storage in compliance with DEA regulations until the Carrier completes the pickup.

3. Fees and Costs
MED-Project shall pay all administrative and operational costs and fees associated with the Take-Back Events.

D. Disposal of Unwanted Medicine
Vendor and Carrier shall manage the Unwanted Medicine from Kiosk Drop-Off Sites and Take-Back Events in compliance with all applicable laws, regulations, and other legal requirements. Carrier shall deliver Unwanted Medicine collected from Kiosk Drop-Off Sites and Take-Back Events to the reverse distributor facility identified in Section X.B.1.

All Unwanted Medicine will be destroyed no later than 30 calendar days after receipt at the reverse distributor facility from the Carrier. See Section X.B. for additional details.

All inner liners will be destroyed in accordance with all applicable laws, regulations, and other legal requirements at a disposal facility identified in Section X.B. Following disposal, a Certificate of Disposal (“COD”) will be retained via electronic copy.

E. Mail-Back Services
MED-Project will provide Mail-Back Services for Unwanted Medicine at no cost to differentially-abled and homebound Residents. Mail-Back Packages will be pre-paid and pre-addressed, and Mail-Back Services shall comply with all applicable laws, regulations, and other legal requirements. Pursuant to DEA Rule § 1317.70(c), the Mail-Back Packages will be:

• Nondescript and without any markings or information potentially indicating that they contain Unwanted Medicine, including controlled substances;
• Water and spill-proof, tamper-evident, tear-resistant, and sealable;
• Pre-addressed with and delivered to Vendor’s registered address;
• Pre-paid;
• Provided with a unique identifier enabling tracking; and
• Provided with instructions indicating the process for mailing back the packages, accepted substances, a notice about mailing restrictions, and a notice that only packages provided by Vendor will be accepted for destruction.

Ultimate users and persons lawfully entitled to dispose of an ultimate user decedent’s property will not be required to provide any personally identifiable information when mailing back mail-back packages. See § 1317.70(d). As required under § 1317.70(e), Vendor will only accept Unwanted Medicine Mail-Back Packages it made available (or packages lawfully forwarded under DEA requirements). Within three business days of receipt, Vendor will notify the DEA if it receives Unwanted Medicine Mail-Back Packages likely containing controlled substances that Vendor did not make available or did not agree to receive pursuant to DEA requirements. In accordance with § 1317.70(f), when Unwanted Medicine Mail-Back Packages are received, only Vendor employees will handle the Unwanted Medicine Mail-Back Packages. Unwanted Medicine Mail-Back Packages will not be opened, x-rayed, analyzed, or otherwise penetrated upon receipt by Vendor. See § 1317.70(f). Vendor and MED-Project will keep all records required under the DEA Rule, including those identified in § 1304.22(f).

MED-Project will also make Mail-Back Packages available for pre-loaded products with a sharp attached and auto-injectors if Unwanted Medicine cannot be removed from these products.

MED-Project will offer residents a choice of Sharps mail-back options for these products:

1. A red FDA-approved Sharps container and a pre-paid, pre-addressed Mail-Back Package for returning the Sharps container; or
2. A Sharps clipper and a pre-paid, pre-addressed Mail-Back Package for returning the Sharps clipper.

An instruction sheet describing how to properly dispose of Sharps that explains what materials may be placed in a Sharps container or Sharps clipper, how to use the Sharps container/clipper, and how to return the Sharps Mail-Back Package will be included with the Mail-Back Package.

See Appendix H for a sample package and package specifications.

1. Mail-Back Package Availability
Differentially-abled or homebound Residents may request Mail-Back Packages by calling the call center or through a link on the MED-Project website. Home healthcare professionals providing services to differently-abled or homebound Residents may also request Mail-Back Packages on behalf of a County resident through the call center or through a link on the MED-Project website. Upon such request, Residents will be provided Mail-Back Packages complying with DEA requirements.

Each Mail-Back Package will contain an insert with instructions for use and information about other options for disposing of Unwanted Medicine in English and Spanish. See Appendix I for a sample package.

Mail-Back Packages for pre-loaded products with a sharp attached and combination products from which prescription or over the counter medications cannot be removed will be available through the call center.
90 days after Plan approval, MED-Project will conduct a gap assessment of established Kiosk Drop-Off Sites. If fewer than the required number of sites have been obtained through agreements signed by Kiosk Drop-Off Site Hosts, MED-Project will supplement Kiosk Drop-Off Sites through the establishment of distribution locations for Unwanted Medicine Mail-Back Packages or the scheduling of Take-Back Events. Mail-Back Package Distribution Locations will be established for each missing Kiosk Drop-Off Site. MED-Project will work with County facilities, such as a town hall, or law enforcement agencies to provide Mail-Back Packages at centralized locations.

2. Mail-Back Package Collection and Disposal
Requests to receive Mail-Back Packages will be taken through the call center or a link on the MED-Project website. All Unwanted Medicine packages shall be logged upon shipment to Residents as well as upon delivery at the approved disposal facility using a unique identifier. Residents will be directed to follow the instructions provided in the Mail-Back Package and to place their Unwanted Medicine in the pre-addressed/pre-paid package. The USPS estimates up to three business days for delivery of First Class Mail. The Mail-Back Package shall be sent to one of the approved disposal facilities listed in section X.D or XI.E. Upon arriving at the disposal facility, Unwanted Medicine Mail-Back Packages shall be scanned for receipt verification. Mail-Back Packages are then rendered non-retrievable and, after this destruction, any remaining Unwanted Medicine Mail-Back Package materials are incinerated at the disposal facility listed in section X.D. Any storage of filled Mail-Back Packages by Vendor will comply with the applicable security requirements of DEA Rule Section 1317, including the requirement that Unwanted Medicine is securely stored in a manner consistent with the security requirements for Schedule II controlled substances. All Unwanted Medicine will be destroyed promptly. Sharps returned in Mail-Back Packages are sterilized using high heat sterilization and disposed of at the facilities identified in section X.E. See Appendix I for more details.

VI. Plan and Collection Goals
The short- and long-term goals of the Plan are described generally as follows. Additional detail on implementation is provided in Section V.A.2.

MED-Project anticipates that establishment of Kiosk Drop-Off Sites will begin in June of 2017 and continue throughout the year. Due to the shortened year, the Program expects to collect approximately half of the normal volume of Unwanted Medicine during 2017. Once all drop-off locations are fully operational, the program expects to collect approximately 480 pounds per Kiosk Drop-Off Site during the calendar year. Assuming 29 Kiosk Drop-Off Sites are operational for the full year, MED-Project anticipates collecting approximately 12,000 pounds of Unwanted Medicine from Kiosk Drop-Off Sites in 2018. See section V.B. for more information about Kiosk Drop-Off Site collection.

MED-Project anticipates a need in 2017 to supplement Kiosk Drop-Off Sites through Take-Back Events and Mail-Back Services. Based on Take-Back Event collection totals in Alameda County, MED-Project anticipates the collection of approximately 140 pounds of Unwanted Medicine per Take-Back Event.

MED-Project Mail-Back Packages have a capacity of 8 oz. per package. Due to the targeted distribution of Mail-Back Packages to differentially-abled and homebound Residents and a lack of information available from current MED-Project Programs, Med-Project’s estimated collection totals in 2016 could vary based on actual usage. Collection in 2017 will be used to adjust subsequent years’ collection goals.

Data from 2017 will be utilized to establish baseline collection and estimate collection goals for future years.
Anticipated Collection Amounts (Lbs.):

<table>
<thead>
<tr>
<th>Collection Method</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kiosk Drop-Off Sites</td>
<td>6,960</td>
<td>13,920</td>
</tr>
<tr>
<td>Take-Back Events</td>
<td>500</td>
<td>0</td>
</tr>
<tr>
<td>Pounds Collected</td>
<td>7,420</td>
<td>13,920</td>
</tr>
</tbody>
</table>

Goal Area | Short-Term | Long-Term |
---|---|---|
Collection | Approximately 7,420 pounds of Unwanted Medicine collected through Kiosk Drop-Off Sites, Take-Back Events, and Mail-Back Services. | Approximately 14,000 pounds of Unwanted Medicine collected through Kiosk Drop-Off Sites and Mail-Back Services. Increased reliance on established Kiosk Drop-Off Sites and a limited amount of collection through Take-Back Events, and Mail-Back Services. |
Education & Public Outreach | Develop baseline number of website page views or unique visitors. Establish a baseline of LEAs; retail pharmacies; other pharmacies (healthcare, etc.); community groups; and other third parties contacted, and report appropriate statistics as outlined in the Survey and Annual Report sections of this Plan. Establish a baseline number of media outlets receiving press advisory, with a minimum of five outlets. Establish a baseline percentage of community centers reached. Establish a baseline number of messages returned by MED-Project within predetermined timeframe. | On an ongoing basis, MED-Project may revise and/or add communications materials based on changes to the Plan. MED-Project will evaluate media and public outreach as well as collect feedback by survey to adjust and improve the Program. The review will measure percent awareness of the Stewardship Plan, assess to what extent Kiosk Drop-Off Sites and other collection methods are convenient and easy to use, and assess knowledge and attitudes about risks of abuse, poisonings, and overdoses from prescription and nonprescription medicines used in the home. Results of the review will be published on the website established under Section XII.D.2. |
Collector Outreach | Contact LEAs and retail pharmacies and invite them to participate in the Plan. Set targets for LEAs and retail pharmacies. | Ongoing communication with pharmacies and LEAs. Continuous evaluation of Kiosk Drop-Off Sites against the service convenience requirement. |

VII. Patient Privacy

Instructions at each kiosk will inform people who deposit Unwanted Medicine that they should completely cross out, remove, or otherwise make unreadable all personally identifiable information on the drug containers and packaging before depositing them in the kiosk. In cases where people follow the instructions, there will be no personally identifiable information.

In addition to kiosk signage, all MED-Project promotional and educational materials encourage residents to protect their information by ensuring that personally identifiable information is not present when depositing Unwanted Medicine into kiosks. Examples of the MED-Project brochures, signage, and website material are available in Appendix E and Appendix K.
Vendor has additional protections available for keeping personally identifiable information safe and secure. Service Technicians are well trained in managing items containing sensitive patient information. Privacy training is part of a Service Technician’s prerequisite for field services. As added protection, the liners for the kiosk will be opaque rather than clear, in compliance with the DEA Rule. This will prevent anyone, including the Service Technician, from seeing any information on the containers placed in the kiosks.

Materials that Residents can use to cross out any personally identifiable information will also be available at the event. This will ensure any patient information on drug packaging will be unreadable.

**VIII. Call Center**

Questions from Residents will be managed by a call center with an interactive voice response (IVR) system and the support of an operator available during business hours of 9:00am to 5:00pm PST Monday through Friday. If the operator is unavailable, a caller will be able to leave a message to which the operator will respond. All operators would be trained to respond based on the requirements set by MED-Project.

The IVR will answer general questions, including questions on the following topics:

1. Items that can be disposed of;
2. Disposal options;
3. Direction to the Program website for additional information; and
4. Requests for Mail-Back Packages.

Since the list of Kiosk Drop-Off Sites is subject to change, residents will be directed to the MED-Project website or to an operator for detailed information about kiosk locations and service hours.

Currently, MED-Project is unaware of any other Stewardship Organizations that intend to submit a Stewardship Plan in the County. Per Regulation § 9.B, MED-Project will operate a call center jointly with all other Stewardship Programs should other Stewardship Plans be approved by the County.

**IX. Training**

Operational procedures, including training, are the responsibility of the Kiosk Drop-Off Site Host. MED-Project will support training from Vendor if agreed to with the Kiosk Drop-Off Site. Additionally, Vendor will manage a support hotline to answer questions and monitor comments for participating Kiosk Drop-Off Sites.

Vendor will comply with all applicable laws, regulations, and other legal requirements. Vendor’s internal training process will address the following:

- Onboarding & on-truck observation of job functions – five days
- United States Department of Transportation (“DOT”) Training – two days
- DEA Training – one day
- United States Environmental Protection Agency (“EPA”) Waste Characterization – one day
- Occupational Safety and Health Administration (“OSHA”) Training – one day
- Waste Handling Demo – one day
- Truck Operation – one day
- DEA Handling Demo – one day
- Review & Written Test – one day
• Perform work under supervision to demonstrate proficiency prior to certification to service client accounts – ten days

A. Service Technician Training
The Service Technicians collecting and transporting the Unwanted Medicine will complete an initial two-week program of comprehensive in-house classroom and hands-on training under the direction of a Certified Hazardous Materials Manager certified Senior Environmental Health and Safety Manager. This training includes instruction on:

• DOT hazardous materials requirements;
• EPA waste characterization requirements;
• Resource Conservation and Recovery Act (“RCRA”) hazardous waste requirements;
• DEA controlled substances transfer protocols;
• OSHA requirements; and
• Health Insurance Portability and Accountability Act (“HIPAA”) requirements.

Service Technicians must complete a 24 or 40-hour Hazardous Waste Operations and Emergency Response Standard (“HAZWOPER”) course. Additionally, Service Technicians must complete annual refresher training that includes an 8-hour training on DOT, HAZWOPER, HIPAA, OSHA, RCRA, and Safety and Security training. Finally, Service Technicians receive ongoing training in the form of daily “tips”, weekly meetings, and online refresher courses. All Vendor employees servicing Take-Back Events, Kiosk Drop-Off Sites, or mail-back collection will have a training base like that of Service Technicians, with customized training as needed.

B. Kiosk Drop-Off Site Host Training
Kiosks Drop-Off Site Host employees will receive training on kiosk operation and at the time of kiosk placement. Kiosk Drop-Off Site Host training will include:

• Kiosk functionality training;
• Kiosk usage training; and
• Kiosk collection procedures training.

Kiosk Drop-Off Site Host employees are able to contact MED-Project with questions about kiosk usage and collection, or to submit a kiosk service request. It is the responsibility of the Kiosk Drop-Off Site Host to comply with all rules and regulations pertaining to maintaining an authorized collector registration with the DEA.
X. Transporter and Disposal Facility Information

A. Vendor
- Name: **Stericycle Specialty Waste Solutions, Inc** will service Kiosk Drop-Off Sites and Take-Back Events.
- Address: 2850 100th Court NE Blaine, MN 55449
- Phone: 612-285-9865
- Website: [www.stericycleenvironmental.com](http://www.stericycleenvironmental.com)
- DOT ID Number: MNS 000 110 924
- US DOT Number: 1348411
- Permit Status: All relevant permits are active and in good standing. Available upon request.

B. Transporter of Unwanted Medicine from Kiosk Drop-Off Sites and Take-Back Events
1. Carrier
   - Name: **United Parcel Service, Inc.** will transport the Unwanted Medicine to the reverse distributor facility.
   - Address: 55 Glenlake Parkway NE, Atlanta, GA, 30328
   - Phone: 800-PICK-UPS
   - Website: [www.UPS.com](http://www.UPS.com/)
   - Type: Common Carrier
   - U.S. Small Package DOT number: 21800
   - U.S. Freight DOT number: 121058

2. Transporter
   - Name: **Heritage Transport** will transport Unwanted Medicine from the reverse distributor facility to the disposal facility.
   - Address: 1626 Research Way, Indianapolis, IN 46231
   - Phone: (317) 486-2973
   - Website: [http://www.heritage-enviro.com/](http://www.heritage-enviro.com/)
   - EPA ID#: IND 058 484 114
   - US DOT Number: 314460
   - Permit Status: All relevant permits are active and in good standing. Available upon request.

C. Disposal Facility for Unwanted Medicine from Kiosk Drop-Off Sites and Take-Back Events
1. Reverse Distributor Facility
   - Name: **Stericycle, Inc., Indianapolis, Indiana Facility** ("Stericycle Facility") will be utilized to received Unwanted Medicine from the Carrier.
   - Addresses: 2670 Executive Drive, Suite A, Indianapolis, IN 46241-9901
   - Phone: 317-275-7530
   - Website: [www.stericycleenvironmental.com](http://www.stericycleenvironmental.com)
   - Type: DEA-compliant and registered collector facility
   - DEA Registration No.: RS0331607
   - RCRA Permit No: INR000110197
     - Permit Status:
2. Disposal Facility

- **Name:** Heritage Thermal Services – Ohio will be utilized to incinerate Unwanted Medicine recovered from Kiosk Drop-Off Sites and Take-Back Events.
- **Addresses:** 1250 Saint George Street, East Liverpool, Ohio, 43920
- **Phone:** 800-545-7655
- **Website:** [http://www.heritage-thermal.com/](http://www.heritage-thermal.com/)
- **Type:** Permitted Hazardous Waste Incinerator
- **DEA Registration No.:** RH0387628
- **RCRA Permit No.:** OHD980613541
- **Permit Status:** Active

D. Disposal Facility for Unwanted Medicine from Mail-Back Services

1. Primary Disposal Facility

- **Name:** Stericycle Facility will be utilized to render Mail-Back Packages and the potential controlled substances therein non-retrievable.
- **Addresses:** 2670 Executive Drive, Suite A, Indianapolis, IN 46241-9901
- **Phone:** 317-275-7530
- **Website:** [www.stericycleenvironmental.com](http://www.stericycleenvironmental.com)
- **Type:** DEA-compliant and registered collector facility
- **DEA Registration No.:** RS0331607
- **RCRA Permit No.:** INR001110197
- **Permit Status:**

2. Secondary Disposal Facility

- **Name:** Covanta Indianapolis Inc., Indianapolis Resource Recovery Facility (“Covanta Facility”) will be utilized to incinerate non-retrievable materials from the Stericycle Facility.
- **Address:** 2320 S. Harding St., Indianapolis, IN 46221
- **Phone Number:** (317) 634-7367
- **Type:** Municipal Waste Combustor
- **Title V Air Permit No.:** T097-5985-00123
- **Industrial Wastewater Discharge Permit No.:** 495301
- **Solid Waste Permit No.:** 49-13
- **Permit Status:** All permits are current
MED-Project’s request for approval to use a two-phase process for Mail-Back Package disposal resulting in destruction at a municipal waste combustor was submitted in conjunction with the Plan on December 14, 2016 (see Appendix I).

E. Disposal Facilities for Sharps from Mail-Back Services

1. Primary Autoclave Facility
   - Name: Stericycle, Inc.
   - Addresses: 540 Rivergate Rd., Memphis, TN 38109
   - Phone: (901) 984-1131
   - Website: http://www.stericycle.com/solution/waste-services/
   - Type: Medical Waste Facility
   - State Permit No: SWP-79-106-0213
   - Permit Status: All permits current

2. Primary Disposal Facility
   - Name: South Shelby Landfill
   - Addresses: 5494 Malone Rd, Memphis, TN 38188
   - Phone: (901) 794-8071
   - Type: Medical Waste Facility
   - State Permit No: SNL 79-0135
   - Permit Status: All permits current

3. Secondary Autoclave Facility
   - Name: Stericycle, Inc.
   - Addresses: 4726 Loma Vista Avenue, Vernon, CA 90058
   - Phone: (323) 589-5156
   - Website: http://www.stericycle.com/solution/waste-services/
   - Type: Medical Waste Facility
   - State Permit No: TS/OST 75
   - Permit Status: All permits current

4. Secondary Disposal Facility
   - Name: Sunshine Canyon North Valley Landfill
   - Addresses: 14747 San Fernando Rd, Sylmar, CA 91342
   - Phone: (818) 362-2124
   - Website: http://sunshinecanyonlandfill.com/
   - State Permit No: 19-AA-2000
   - Permit Status: All permits current

5. Tertiary Autoclave Facility
   - Name: Stericycle, Inc.
   - Addresses: 4403 Republic Drive, Concord, NC 28027-7722
   - Phone: (704) 795-1125
   - Website: http://www.stericycle.com/solution/waste-services/
   - Type: Medical Waste Facility
   - State Permit No: NCDENR #13-05-TP
   - Permit Status: All permits current
6. Tertiary Disposal Facility
- Name: BFI Waste Systems of North America, LLC (Republic Services Charlotte Motor Speedway Landfill)
- Addresses: 5105 Morehead Rd, Concord, NC 28027
- Phone: (704) 782-2004
- Website: http://site.republicservices.com/corporate/planet/sustainabilityprojects/charlotte.aspx
- Facility State Permit No: Permit 13-04
- Permit Status: All permits current

XI. Unwanted Medicine Educational and Outreach Programming

A. Overview
The following communications plan includes a description of the public education and outreach efforts that MED-Project will undertake to educate Residents about the collection and disposal of Unwanted Medicine from households.

While MED-Project operates an education and outreach program specific to each individual Plan, MED-Project websites, signage, and printed material will provide consistent branding across all counties to the extent possible.

MED-Project is unaware currently of any other Stewardship Organizations that intend to submit a Stewardship Plan in the County. As required by Regulation § 9.B, MED-Project will seek to coordinate with other Stewardship Programs to develop a single system of promotion if other Stewardship Plans are approved by the County.

B. Audiences
To effectively educate the public about the Plan, MED-Project has developed a comprehensive communications campaign featuring both broad communications tactics (e.g., media advisories, etc.) as well as targeted outreach to audiences directly involved in the distribution and use of medicines to Residents. These audiences include:

- General public;
- Pharmacies, including education for dispensers of Covered Drugs;
- Retailers of Covered Drugs;
- Health care providers and their patients;
- Veterinary facilities and veterinary hospitals;
- Public health facilities; and
- Law enforcement agencies

This Plan details Program efforts to reach the varied cultural, linguistic, geographic, and age demographics, including through outreach to ethnic, community, and alternate-language media (Appendix G); outreach to community organizations serving a broad range of audiences (Appendix B); availability of alternate language phone lines (Section X.D.1.); and availability of educational information through a broad range of channels, including toll-free telephone lines, broadcast media, and the internet.
Demographic information, including race/ethnicity, language, age, and geographic data, will be analyzed to appropriately direct outreach and create educational materials to best serve the unique needs of all identified demographics. Efforts to ensure that materials are appropriately targeted, translated, and available to these populations will be pursued with associations, agencies, and organizations that can be viewed in Appendix B.

C. Messages
MED-Project messaging will focus on two main goals:

- Educating Residents about the appropriate use, storage, and disposal of Unwanted Medicine, and;
- Providing Residents with clear steps to properly manage the disposal of their Unwanted Medicine, including following instructions found on the medicine label, use of Kiosk Drop-Off Sites, participation in Take-Back Events, and use of Mail-Back Services.

Key points of emphasis will include:
- The importance of taking medicines as prescribed by your health care provider;
- The importance of adhering to and completing your provider-prescribed therapy;
- The importance of properly and securely storing medicines;
- The importance of promptly and properly disposing of Unwanted Medicine;
- How to find and use Kiosk Drop-Off Sites;
- How to properly dispose of Unwanted Medicine; and
- Privacy issues (removing personally identifiable information from labeled prescription containers).

D. Tools/Communications Channels
The MED-Project Program will include several components designed to reach consumers and provide consistent access to timely and relevant information. Tools and communication channels will include:

1. Phone
MED-Project will provide a toll-free telephone number (1-844-MED-Proj) for Residents to obtain information about Kiosk Drop-Off Sites, educational materials, and other aspects of the Plan for Unwanted Medicine from households. The toll-free number will provide:

- IVR support in English and Spanish. The telephone line will also provide an option for callers to be transferred to a staffed call center;
- Basic information about how the Plan works, where to obtain more information (e.g., the website), and an option to talk with an operator in English or Spanish to find a Kiosk Drop-Off Site or Take-Back Event in the caller’s ZIP code or local area; and
- A recorded call script directing callers with medical emergencies to call 911 and directing patients with medication-related questions to contact their health care provider(s).

Please see Appendix J for a sample template of the recorded call script.
2. Website
Upon Plan approval, MED-Project will develop a mobile-friendly website. Information available to users will include locations of Kiosk Drop-Off Sites, educational materials, frequently asked questions and responses, Take-Back Event dates and locations, Mail-Back Distribution Locations, and results of the most recent survey of Plan awareness.

- The website will be available within 60 days of Plan approval. The Plan currently includes a sample mockup of the website and its supporting pages. Appendix K provides a proof of concept for each page;
- The website will also include access to a public relations toolkit in a downloadable format (see Section XIII.D.3) and contact information for Residents. A toolkit available on the website includes a flyer/brochure and a frequently asked questions (FAQ) document (Appendix L) which will be reviewed and updated periodically. Translations of the brochure and FAQ will be available in English and Spanish; and
- Community and government organizations and other public interest groups seeking materials to promote the Program will be encouraged to access these resources.

3. Materials
Educational materials about the Program and describing how to properly dispose of Unwanted Medicine will be available through the website, at Take-Back Events, through potential third-party partners, community organizations, and at Kiosk Drop-Off Sites. These partners will include pharmacies, health care facilities, and veterinary facilities. MED-Project will also provide local governments with materials covering the proper disposal of Unwanted Medicine.

The Plan includes a sample of the educational brochure (Appendix L) and media advisory promoting Take-Back Events (Appendix M). Upon Plan approval, MED-Project will translate all materials to English and Spanish. Educational materials use plain language and explanatory images to promote consumer education and collection options to Residents.

4. Media Outreach
The MED-Project Program will conduct public outreach through mediums such as traditional and social media, posting of educational signage, and at community events. Outreach efforts will encourage media outlets and third party groups to download and use the toolkit. MED-Project will coordinate outreach for scheduled Take-Back Events to promote participation. The following materials support the Unwanted Medicine educational and outreach programming:

- Please see Appendix J for a sample education and outreach call script with the toolkit including flyers in Appendix L and website information included in Appendix K.
- Please see Appendix G for a sample list of key media outlets.
- Please see Appendix N for a sample list of social media outlets.
- Please see Appendix M for a sample template media advisory announcing Take-Back Events.
E. Collaboration with County Officials and Community Organizations

MED-Project will work in collaboration with the County as appropriate to build on existing community outreach resources, such as local organizations, media lists, available public media outlets, etc. The following will be initiated upon Plan approval:

- Briefing Materials Provided to Support Coordination with County Officials:
  - MED-Project will provide access to Educational and Outreach Programming materials, including the sample brochure (see Appendix L), to relevant departments and officials.

- Outreach through Community Organizations:
  - MED-Project will further promote the Plan by engaging relevant stakeholders and community organizations, for example, by providing community organizations identified in Appendix B with the toolkit included in Appendix L.

F. Disclaimer

The written and verbal educational materials and public outreach tools that are required by the Regulation and disseminated under this Product Stewardship Plan will include a disclaimer similar to the following: “This material has been provided for the purposes of compliance with legislation and does not necessarily reflect the views of the MED-Project or the Producers participating in the MED-Project Product Stewardship Plan.”

XII. Survey

Per Regulation § 9.A.6, MED-Project will conduct a biennial survey of Residents, pharmacists, veterinarians, and health professionals who interact with members of the community after the first full year the Stewardship Plans are operating.

Survey questions will be designed to measure, at a minimum, (1) percent awareness of the Plans, (2) whether drop-off sites and other collection methods are convenient and easy to use, and (3) knowledge and attitudes about risks of abuse, poisonings, and overdoses from prescription and nonprescription drugs used in the home. As required by Regulation § 9.A.6, draft survey questions will be submitted to the Director for review and comment thirty days prior to distribution. Results of the survey will be reported to the Director and made public within 90 days of the end of the survey period on the website described under Section X.D.2. The privacy of all survey respondents will be maintained.

MED-Project is unaware currently of any other Stewardship Organizations that intend to submit a Stewardship Plan in the County. Per Regulation § 9.B, MED-Project will seek to coordinate with other Stewardship Programs to conduct the survey if other Stewardship Plans are approved by the County.

XIII. Packaging

The Regulation requires that a Plan consider, “separating covered drugs from packaging to the extent possible to reduce transportation and disposal costs; and . . . Recycling of drug packaging to the extent feasible.” Regulation § 7.H.2 and 7.H.3.

MED-Project has considered and evaluated options for the separation and recycling of drug packaging. Separating and recycling drug packaging collected under the Plan would require the management of separate waste streams at Kiosk Drop-Off Sites and Take-Back Events: a waste stream for drug packaging and a waste stream for the drugs themselves.
While drug packaging is expected to constitute a significant amount of the waste incinerated under the Plan, MED-Project has concluded that separation of inner and/or outer packaging from Unwanted Medicine or recycling would raise three significant concerns:

1. Separating and recycling drug packaging could result in the disclosure of confidential patient information appearing on prescription drug packaging;
2. Separating and recycling drug packaging could increase the potential of releases and leakage of Unwanted Medicine; and
3. Separating and recycling drug packaging could increase diversion risks by adding additional steps to the collection process and because drug packaging is used in drug counterfeiting and would be a diversion target itself.

For these reasons, the Plan does not provide for the separation and recycling of packaging from Unwanted Medicine.

XIV. Compliance with Applicable Laws, Regulations, and Other Legal Requirements

The Regulation requires that a Product Stewardship Plan describe how all entities participating in the Plan will “operate under” all applicable laws, regulations, and other legal requirements. Regulation § 7.D. As described in more detail below, the Plan is designed such that all entities participating in the Plan shall comply with all applicable laws, regulations, and other legal requirements.

A. DEA Controlled Substances Act and Implementing Regulations

On October 12, 2010, the United States Congress enacted the Secure and Responsible Drug Disposal Act of 2010 (“Disposal Act”) as amendments to the Controlled Substances Act (“CSA”). The Disposal Act amended the CSA to allow for the expansion of entities to which users can deliver pharmaceutical controlled substances for disposal, subject to regulations to be promulgated. On September 9, 2014, the DEA adopted a rule entitled “Disposal of Controlled Substances” to implement the Disposal Act.

Under the DEA Rule, collection of controlled substances is limited to Schedule II, III, IV, or V controlled substances that are lawfully possessed by an ultimate user or person entitled to dispose of an ultimate user decedent’s property. See DEA Rule §§ 1317.75(b) (Kiosk Drop-Off Sites); 1317.65(d) (Take-Back Events); 1317.70(b) (Mail-Back Services). Schedule I controlled substances, controlled substances that are not lawfully possessed as described above, and other illicit or dangerous substances will not be collected. Additionally, as these provisions of the DEA Rule limit collection of controlled substances to those lawfully possessed by an ultimate user or certain other persons, pharmacies are prohibited from disposing of their own inventory or stock through the MED-Project Program. See also § 1317.05.

For Kiosk Drop-Off Site collection, only certain substances “that are lawfully possessed by an ultimate user or other authorized non-registrant person may be collected.” §1317.75(b). This language is similar to, but slightly different than, provisions limiting collection at Take-Back Events and through Mail-Back Services to ultimate users or other persons (lawfully) entitled to dispose of an ultimate user decedent’s property. See §§ 1317.65(d); 1317.70(b).
The DEA Rule provides that LEAs can continue to accept controlled substances for disposal. However, the DEA Rule also provides that pharmacies, reverse distributors, hospitals/clinics with on-site pharmacies as well as certain long-term care facilities, and certain other entities, can register with the DEA as “collectors” and become authorized at their discretion on a voluntary basis to accept controlled substances. The DEA Rule:

- Provides for the collection of controlled substances at Kiosk Drop-Off Sites at LEAs, pharmacies, and hospitals or clinics with on-site pharmacies;
- Provides for collection of controlled substances at Take-Back Events;
- Provides for the use of mail-back programs to collect controlled substances;
- Allows for the commingling of controlled and non-controlled substances;
- Establishes detailed collection, recordkeeping, security, and other measures for all approved collection methods; and
- Provides that all collected pharmaceutical products be destroyed so that the products are rendered non-retrievable.

The MED-Project Product Stewardship Plan is designed such that all entities that are part of the Plan, including Vendor, are individually responsible for complying with their respective compliance obligations under the DEA Rule.

Controlled substances collected pursuant to the Plan may be commingled with non-controlled substances at Kiosk Drop-Off Sites, Take-Back Events, and through Mail-Back Services per the DEA Rule. See §§ 1317.75(b) (Kiosk Drop-Off Sites); 1317.65(d) (Take-Back Events); 1317.70(b) (Mail-Back Services).

1. **DEA Registration Modification**

Pursuant to 21 C.F.R. § 1301.51(b), pharmacies may modify their registrations to become authorized collectors by submitting a written request to the DEA or online at www.DEAdiversion.usdoj.gov. This request must contain:

- The registrant’s name, address, and registration number (as printed on the registration certificate);
- The collection methods the registrant intends to conduct; and
- A signature in accordance with § 1301.13(j).

See § 1301.51(b). MED-Project will consult with participating pharmacies, as requested, regarding how to modify their DEA registration to become authorized collectors.

B. **United States Department of Transportation (USDOT)**

When transporting Unwanted Medicine, Vendor will ensure compliance with the USDOT Hazardous Materials Regulations (HMR).

C. **Washington State Pharmacy Quality Assurance Commission (WSPQAC)**

The Regulation requires that a Plan describe “how any pharmacy drop-off site will operate under applicable regulations and guidances of the Washington State Pharmacy Quality Assurance Commission.” Regulation § 7.D. On March 3, 2016, WSPQAC published, “Pharmacy Quality Assurance Commission Guidance Document: Secure and Responsible Drug Disposal Program.” As required by the Regulation, participating pharmacies will comply with this guidance document, which, among other things, requests that pharmacies notify WSPQAC upon obtaining DEA authorized collector status.
XV. Annual Report

An annual report will be provided to the Director within six months after the end of the first twelve-month period of operation and annually thereafter. Regulation § 12.A. This report will be provided in the format required by the Regulation.

For the reporting period, the report will include:

- A list of producers participating in the Plan;
- The amount, by weight, of Unwanted Medicine collected from Kiosk Drop-Off Sires and Take-Back Events. For Mail-Back Services, MED-Project will identify the number of mail-back packages destroyed;
- A list of Kiosk Drop-Off Sites;
- The number of mailers provided for differentially-abled and home-bound Residents, and the zip codes where mailers were provided;
- The dates and locations of Take-Back Events held;
- Transporters and disposal facilities used;
- Whether any safety or security problems occurred during collection, transportation, or disposal of Unwanted Medicine and, if so, what changes have or will be made to policies, procedures or tracking mechanisms to alleviate the problem and improve safety and security;
- A description of public education, outreach, and evaluation activities implemented;
- A description of how collected packaging was recycled to the extent feasible, including the recycling facility or facilities used;
- A summary of the Product Stewardship Plan’s goals, the degree of success meeting these goals in the past year, and how these goals will be achieved in the next year if they were not met; and
- The Plan’s total expenditures.
Appendix A

MED-Project Participants

The Pharmaceutical Product Stewardship Work Group (“PPSWG”), a group of pharmaceutical Producers, has established a limited liability company, MED-Project LLC (“MED-Project”), as the Stewardship Organization for the Plan. The Participants in MED-Project are provided to the County on an on-going basis. The list was last submitted on February 10, 2017.
Appendix B
Sample Contact List for Outreach and Education to the Community

The following are Associations, Agencies, and Organizations that will be contacted for assistance with outreach and education to the community. They will also be contacted to participate as potential Kiosk Drop-Off Sites or Take-Back Event sponsors.

**Health Systems & Clinics:**
Cascade Valley Hospital
Community Health Center of Snohomish County (CHC)
Group Health Everett Medical Center
Pavilion for Women & Children
Providence Mill Creek Walk-in Clinic
Providence Regional Medical Center
Swedish Medical Center: Mill Creek Campus
Valley General Hospital
Virginia Mason Lynnwood Medical Center

**Health Associations and Societies:**
American Board of Medical Specialties
American Medical Association
COLA – National healthcare accrediting organization.
Joint Commission on Accreditation of Healthcare Organizations (JCAHO)
Medical Group Management Association
National Committee for Quality Assurance
Washington State Medical Association
Washington State Medical Group Management Association

**Organizations, Districts, and Agencies:**
Snohomish County Health District
Snohomish Seniors
Snohomish County Mental Health
Sunrise Services
NAMI
Citrine Health
Brookdale Monroe
Brookdale Arbor Place
Centers for Disease Control
Washington State Department of Health
Food and Drug Administration
Centers for Medicare and Medicaid Services
Office of the Inspector General
Office of the Insurance Commissioner
Veterinary Services
Mountain View Animal Hospital
Kraft Mobile Veterinary Service
Cedarbrook Veterinary Care
Alpine View Veterinary Hospital
Pilchuck Veterinary Hospital
Snohomish Station Animal Hospital
Northwest Animal Care Hospital
Companion Vet Clinic
VCA Veterinary Specialty Center of Snohomish County
Value Vet Animal Clinic
Animal Hospital at Murphy’s Corner
Broadway Animal Hospital
Cascade Animal Clinic
Clearview Animal Hospital
Advanced Care Animal Clinic
Animal Dermatology Service
Diamond Veterinary Associates
Helping Hands Veterinary Clinic
Perrinville Animal Hospital
Frontier Village Veterinary Clinic
North Creek Pet Hospital
Kindness Animal Clinic
Sultan Veterinary Clinic
Evergreen Holistic Veterinary Care
Appendix C

Kiosk Drop-Off Sites with Expressions of Interest

MED-Project will provide the County with a list of participating Kiosk Drop-Off Sites on an on-going basis.

Below is a list of locations that have expressed interest in participating as a Kiosk Drop-Off Site. The pharmacy and LEA responses below reflect information provided by the sites surveyed as of December 12, 2016. Chain pharmacy interest expressed was at the local pharmacy level. Chain pharmacy participation could be contingent upon agreement with regional and national offices. MED-Project will continue to outreach and work within the corporate structure where applicable.

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<thead>
<tr>
<th>SITE NAME</th>
<th>ADDRESS</th>
<th>CITY</th>
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<tr>
<td>Arlington CHC Pharmacy</td>
<td>326 S Stillaguamish Ave</td>
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**LEAs**

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### Appendix D

**Potential Kiosk Drop-Off Sites**

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<td>19191 N Kelsey St</td>
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Appendix E

Picture of Kiosk Prototype

The kiosk is approximately 47” tall x 19” wide x 20” deep (without handle).

The design of the kiosk recognizes the paramount importance of security using heavy gauge steel, multiple locking mechanisms, tamper-proof slot, and commercial hinges, meeting the stringent requirements under the law. At the same time, the design provides accessibility and ease of use.
Sample Kiosk Signage

Front Panel Kiosk Art

**SAFELY DISPOSE OF UNWANTED & EXPIRED MEDICINES**

1. Cross out or remove personal identifying information from the medicine bottle.
2. Leave the product in its original container or place solid medicines in a sealed plastic bag.
3. Put medicine in the kiosk.

**ACCEPTED:** Medications in any dosage form, except for those listed below, in their original container or sealed bag.

**NOT ACCEPTED:** Herbal remedies, vitamins, supplements, cosmetics, other personal care products, compressed cylinders, aerosols, inhalers, medical devices, pet pesticide products, sharps, illicit drugs, iodine-containing medications.

Only Schedule II-V Controlled and Non-Controlled Substances that are lawfully possessed by the ultimate user are acceptable to be placed in the kiosk. Schedule I Controlled Substances, illicit or dangerous substances, and any controlled substances not lawfully possessed by the ultimate user may not be placed in the kiosk.

For more information about the MED-Project program, please go to www.med-project.org or call (800) MED-Proj.
Sample – Not for Distribution. All text subject to change pending review and approval by Snohomish County.

Sample Kiosk Signage

Side Panel Kiosk Art

SAFELY
DISPOSE OF
UNWANTED & EXPIRED
MEDICINES

To request kiosk service, call (844) 677-6532 or visit www.med-project.org/locations/snohomish/contact.

MED-Project™
Medication Education & Disposal
Sample Kiosk Signage

Top of Kiosk Art

**ACCEPTED**: Medications in any dosage form, except for those listed below, in their original container or sealed bag.

**NOT ACCEPTED**: Herbal remedies, vitamins, supplements, cosmetics, other personal care products, compressed cylinders, aerosols, inhalers, medical devices, pet pesticide products, sharps, illicit drugs, iodine-containing medications.
Appendix F

Past or Current Community Events That May Serve as Future Take-Back Events

The following are examples of events that will be targeted for future Take-Back Events based on timing and geographic needs:


Festivals and Community Events

- Snohomish-Groundfrog Day- 12th Anniversary Celebration
  January 28, 2017 11:00 AM- 1:00 PM
- Arlington-Stillaguamish Eagle Festival
  February 3 – February 4, 2017
- Sultan – Shindig
  July 7 – July 9, 2017
- Marysville-Strawberry Festival
  June 10 – June 18, 2017
- Mill Creek Festival
  July 8 – July 9, 2017
- Gold Bar- Gold Dust Days
  July 21 – July 23, 2017
  3:00 PM- 8:00 PM
- Lake Stevens – Aquafest
  July 29-31, 2017
- Darrington- Meltdown Festival
  August 10-13, 2017
- Monroe- The Evergreen State Fair
  August 25 to September 3, 2017
- Everett-Schack-toberfest
  October 19 – October 28, 2017
  5:00 PM- 9:00 PM
- Edmonds- Tree Lighting Ceremony
  November 25, 2017
  4:30 PM- 6:00 PM
- Snohomish Valley Festival of Pumpkins
  October 1 – October 31, 2017
Appendix G
Sample Media List

The following is a representative list of key media outlets to help educate Residents about proper disposal of expired or Unwanted Medicines. The list includes local print, online, television and radio outlets, as well as outlets specifically targeting the diverse demographic communities within the County.

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<tr>
<th>Print Outlets</th>
<th>City/Coverage Area</th>
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<tr>
<td>The Everett Herald</td>
<td>Everett Snohomish County</td>
<td><a href="http://www.heraldnet.com/">http://www.heraldnet.com/</a></td>
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<tr>
<td>Seattle Post-Intelligencer</td>
<td>Greater Seattle NW Region</td>
<td><a href="http://www.seattlepi.com/">http://www.seattlepi.com/</a></td>
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<tr>
<td>Seattle Times</td>
<td>Greater Seattle NW Region</td>
<td><a href="http://www.seattletimes.com/">http://www.seattletimes.com/</a></td>
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<td>Arlington Times</td>
<td>City of Arlington</td>
<td><a href="http://www.arlingtontimes.com/">http://www.arlingtontimes.com/</a></td>
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<td>The Edmonds Beacon</td>
<td>City of Edmonds</td>
<td><a href="http://edmondsbeacon.villagesoup.com/">http://edmondsbeacon.villagesoup.com/</a></td>
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<td>Marysville Globe</td>
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<td>Mukilteo Beacon</td>
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Appendix H

A. Sample Unwanted Medicine Mail-Back Package

Description:
Plastic Package with Merchandise Return Label and instructional flyer

Page Size:
Package: Outer Dimension: 8.25” x 12”; Inner Dimension: 7.375” x 10.375”, 2” flap (Hot Melt Tape- Tamper Evident)
Merchandise Return Label: 4” x 4”
Instructional Sheet: 5” x 7”

Paper Stock:
Package: 4mil white/ silver poly mailer w/sequential barcode
Return Label: 60# uncoated label stock
Instructional Sheet: 80# Gloss Text

Color:
Package: 5/3 Print: Silver, white, white, + 2 PMS on clear web; Silver + 2 PMS on white web
Return Label: K/0 no bleeds (personalized barcode)
Instructional sheet: K/K
**Sample Sharps Mail-Back Package**

**Description:**
1 quart Sharps waste mail-back system

**Package Size:**
1 Quart One Pack. . . . . . . . . (1Q1V4)
Single quart container, 3 3/4” x 3 1/2” x 8”
Also available in five pack (1Q5V4).

Stericycle mail-back solutions are complete, turnkey systems to provide for the safe and compliant return of Sharps waste through the United States Postal Service. All solutions are tested and permitted to USPS specification as outlined in USPS Publication 52.
Appendix I
Request for Approval for Mail-Back Package Disposal

MED-PROJECT REQUEST FOR APPROVAL OF MAIL-BACK PACKAGE DISPOSAL PROCESS

MED-Project
Medication Education & Disposal

December 14, 2016
MED-PROJECT REQUEST FOR APPROVAL OF MAIL-BACK PACKAGE DISPOSAL PROCESS

Pursuant to Secure Medicine Return Regulation in Snohomish County (“Regulation”) § 10, MED-Project LLC (“MED-Project”) requests the Health Officer of the Snohomish Health District’s (the “Director’s”) approval to use the Covanta Indianapolis Inc., Indianapolis Resource Recovery Facility (the “Covanta Facility”), via the Stericycle, Inc., Indianapolis, Indiana Facility (the “Stericycle Facility”), for the disposal of mail-back packages. As described below, conflicting United States Drug Enforcement Administration (“DEA”) and Resource Conservation and Recovery Act (“RCRA”) or similar state requirements and an inchoate market for mail-back package disposal make disposal of mail-back packages at permitted hazardous waste facilities not feasible at this time based on cost, logistics, or other considerations.

To dispose of mail-back packages under these constraints, MED-Project is proposing a two-phase disposal process. In phase one, the Stericycle Facility accepts mail-back packages (including any controlled substances therein) and renders them non-retrievable in compliance with DEA requirements. In phase two, the Covanta Facility incinerates any remaining non-retrievable materials from the Stericycle Facility. This two-phase process allows MED-Project to dispose of mail-back packages in compliance with all DEA and RCRA requirements at a municipal waste combustor. Given existing barriers rendering disposal at permitted hazardous waste facilities not feasible, MED-Project’s proposed Stericycle Facility and Covanta Facility two-phase process should be approved.

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1 The term “mail-back packages” as used in this submission means both the mail-back envelope itself and the contents therein.
I. THE STERICYCLE FACILITY AND COVANTA FACILITY TWO-PHASE PROCESS FOR THE DISPOSAL OF MAIL-BACK PACKAGES

Under the MED-Project Product Stewardship Plan’s (the “Plan’s”) mail-back program, Snohomish County residents can request a mail-back envelope by calling the MED-Project call center or using the MED-Project website. When MED-Project receives a request, MED-Project provides residents a pre-addressed, prepaid mail-back envelope. Residents fill the mail-back envelope according to provided instructions and return the mail-back package via United States Postal Service First Class Mail to the Stericycle Facility. See Plan § VI.E. MED-Project proposes the following two-phase process for managing and disposing of these mail-back packages.

A. Phase I – The Stericycle Facility Accepts Mail-back Packages from Snohomish County Residents and Renders Them Non-Retrievable Pursuant to DEA Requirements

Phase one of the proposed two-phase disposal process is the acceptance of mail-back packages at the Stericycle Facility. The Stericycle Facility is a DEA registered collector and complies with all applicable DEA and RCRA requirements. As required by 21 C.F.R. §§ 1317.05(c) and 1317.70(a), the Stericycle Facility uses an on-site method to promptly render mail-back packages non-retrievable. Mail-back packages remain sealed throughout the destruction process.

The attached Standard Operating Procedures provides a step-by-step description of the Stericycle Facility mail-back package destruction process. Generally, when the Stericycle Facility receives mail-back packages, Stericycle Environmental Solutions, Inc. (“Stericycle”) scans the mail-back packages’ unique barcode to record receipt and then takes the mail-back packages to a DEA vault for controlled substance storage. Approximately once per week (depending on volume received), Stericycle removes mail-back packages from the DEA vault for destruction and re-scans the mail-back packages to record their unique identifiers and destruction date.

Before destroying the mail-back packages, Stericycle passes all mail-back packages through a metallic screening process necessary to protect Stericycle employee safety and equipment. Stericycle then loads the mail-back packages into a container no larger than thirty gallons. The contents of this container are fed into the mechanical process. The end product of this mechanical process falls into a steel drum filled with fifteen gallons of an activated carbon-based solution that renders the remaining contents “non-retrievable,” as defined in 21 C.F.R. § 1300.05(b). As needed, Stericycle agitates the fifty-five gallon drum’s contents to ensure all mail-back packages are exposed to the activated carbon-based solution. Through this process, the Stericycle Facility renders all mail-back packages (and any contents therein) non-retrievable.

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2 The Stericycle Facility’s mailing address is Stericycle Inc., 2670 Executive Drive, Suite A, Indianapolis, IN 46241-9901.
3 The Stericycle Facility’s DEA Registration Number is RS0331607; its RCRA Permit Number is INR000110197.
4 If metal is found and does not appear consistent with a pharmaceutical product (i.e., an inhaler), the mail-back package is segregated and returned to storage. These segregated mail-back packages are held pending notification to the DEA Field Division Office for further direction regarding the receipt of an envelope that likely contains materials Stericycle did not agree to receive. See 21 C.F.R. § 1317.70.
The end product from the mechanical process is “pea sized.” Stericycle seals these remaining non-retrievable mail-back package materials in the fifty-five gallon drum for secure transportation to the Covanta Facility. Stericycle places a security seal on the trailer transporting the non-retrievable materials and verifies this seal upon arrival at the Covanta Facility. A Stericycle witness follows the non-retrievable materials to the Covanta Facility and witnesses their incineration.

B. **Phase II – The Covanta Facility Incinerates the Non-Retrievable Materials**

Phase-two of MED-Project’s mail-back package destruction process is incineration of the non-retrievable materials from the Stericycle Facility, including mail-back packages and their contents, at the Covanta Facility. As the Covanta Facility is not registered with the DEA, it cannot receive mail-back packages until they are first rendered non-retrievable at the Stericycle Facility. *See 21 C.F.R. § 1317.70(a).*

The Covanta Facility is a permitted large municipal waste combustor.⁶ An “energy-from-waste” facility, the Covanta Facility uses municipal solid waste, like non-retrievable mail-back packages, to generate renewable energy. Steam recovered from incineration at the Covanta Facility helps power the Indianapolis downtown heating loop, which includes Indiana University and Purdue University’s Indianapolis campus. *See Covanta, Covanta Indianapolis,* [https://www.covanta.com/Our-Facilities/Covanta-Indianapolis](https://www.covanta.com/Our-Facilities/Covanta-Indianapolis).

II. **STANDARDS FOR SNOHOMISH COUNTY TO APPROVE A MUNICIPAL WASTE COMBUSTOR FOR THE DISPOSAL OF MAIL-BACK PACKAGES**

Under the Regulation:

The director may grant approval for a producer or group of producers participating in the standard stewardship plan or an independent stewardship plan to dispose of some or all collected covered drugs at a permitted large municipal waste combustor, as defined by the United States Environmental Protection Agency under 40 CFR parts 60 and 62, if use of a hazardous waste disposal facility described under subsection A. of this section is deemed not feasible for the stewardship plan based on cost, logistics or other considerations.

Regulation § 10(B). As described below, MED-Project proposes to use the Stericycle Facility and Covanta Facility two-phase process because disposal of mail-back packages at permitted hazardous waste disposal facilities is not feasible at this time due to cost, logistics, or other considerations.

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5 Stericycle is a DEA-registered collector. *See supra note 3.*
III. THE STERICYCLE FACILITY AND COVANTA FACILITY TWO-PHASE PROCESS SHOULD BE APPROVED UNDER REGULATION § 10 BECAUSE DISPOSAL AT PERMITTED HAZARDOUS WASTE FACILITIES IS NOT FEASIBLE

MED-Project and its vendor, Stericycle, spent months attempting to identify a permitted hazardous waste facility capable of disposing mail-back packages in compliance with all DEA and RCRA requirements. This effort remains ongoing. Unfortunately, this investigation identified barriers to destroying mail-back packages at permitted hazardous waste facilities.

Under DEA regulations, only law enforcement or certain DEA registrants may conduct mail-back programs. See 21 C.F.R. § 1317.70(a). MED-Project is only aware of a few hazardous waste facilities that have a DEA registration. Unfortunately, hazardous waste facility RCRA permits typically require the sampling and/or inspection of controlled substances before destruction. Such sampling or inspection is prohibited by DEA regulations, which state that “[u]pon receipt of a mail-back package by a collector conducting a mail-back program, the package shall not be opened . . . .” 21 C.F.R. § 1317.70(f). These conflicting DEA and RCRA regulatory regimes make it not feasible for MED-Project to dispose of mail-back packages at a permitted hazardous waste facility in compliance with “all applicable federal and state laws, regulations and guidelines, including those of the United States Drug Enforcement Administration . . . .” Regulation § 7(D).

The market for mail-back package disposal is still developing following the passage of the DEA final rule, Disposal of Controlled Substances, 79 Fed. Reg. 53520, in September 2014. As a result, MED-Project is aware of few (if any) permitted hazardous waste facilities available to destroy mail-back packages in compliance with DEA and RCRA requirements at this time. MED-Project and Stericycle will continue exploring mail-back package disposal at permitted hazardous waste facilities as such options become available. However, current regulatory and market barriers make disposal of mail-back packages at a permitted hazardous waste facility, at minimum, “not feasible . . . based on cost, logistics or other considerations.” Regulation § 10(B). The only disposal method for mail-back packages complying with all DEA and RCRA requirements and available to MED-Project and Stericycle at this time is the two-phase disposal process proposed above. Accordingly, the Director should approve the disposal of mail-back packages via the Stericycle Facility and Covanta Facility two phase process as proposed by MED-Project under Regulations § 10(B). 7

IV. CONCLUSION

For the foregoing reasons, MED-Project’s proposed Stericycle Facility and Covanta Facility two-phase process for the disposal of mail-back packages should be approved.

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7 MED-Project Plans approved in other counties use this same disposal process. See, e.g., Approved Standard Stewardship Plan, Secure Medicine Return Regulations King County, Washington, https://kingcountysecuremedicinereturn.org/standard-stewardship-plan-2/ (King County MED-Project Plan § VIII.C.).
Appendix A: Stericycle Facility Standard Operating Procedures

This SOP explains Stericycle’s Seal & Send pharmaceutical Mail Back envelope service.

**Scope and Applicability**

This SOP applies to all Stericycle Environmental Solutions Team Members who are considered a Subject Matter Expert (SME) for the Seal & Send pharmaceutical Mail Back envelope service.

**Process Flow**
**Procedure**

**Part 1 Envelope Reception**

1a) The Seal&Send envelopes shall be received at the Stericycle facility in Indianapolis, via mail, and will be scanned into a tracking spreadsheet. The envelopes shall remain sealed and closed at all times.

   i) Seal&Send envelopes sorted out from all packages received at the Indianapolis facility.

   ii) Barcode scanner captures data:
       - Unique identifier
       - Date that the envelope is received

   iii) Data captured and is maintained in an internal system

1b) The envelopes will be transported by Stericycle Team Members to the DEA vault where all controlled substances are held prior to destruction.

   i) DEA vault inventory recorded and captured in internal system.

**Part 2 Envelope Destruction**

2a) Bi-weekly or as necessary, the envelopes will be “scanned out” for destruction.

   i) Barcode scanner captures data:
       - Unique identifier
       - Date that the envelope is destroyed

2b) Site Preparation

   i) A new or properly reconditioned 55g steel drum, open top, properly rated for the hazard of the product being used to render the pharmaceuticals non-retrievable, shall be placed at the end of the conveyor where the end product will be accumulated. The 55g steel drum shall be properly marked and labeled in accord with all federal and state regulations.

   ii) The accumulation drum will be filled with 15 gallons of the carbon-based solution being used to render the pharmaceuticals non-retrievable.
iii) A plastic table or desk that contains no metal will be placed next to the mechanical process to perform metallic screening prior to feeding any material into the mechanical process.

2c) Metallic Screening

i) A team member shall place the envelopes on the plastic table or desk.

ii) The team member will use a strong metal detector tool to screen each envelope for metal objects to protect employee safety and company equipment.

2d) Mechanical Process Loading

i) No medicine containers are removed from MailBack envelopes before destruction (and thus no medicines are removed from medicine containers before destruction).

ii) Envelopes will then be loaded into a small container, no larger than 30 gallons capacity, prior to loading into the mechanical process.

iii) Once the 30g container is full, it can be dumped into the chute of the mechanical process.

iv) Alternately, a conveyor belt shall be placed next to the mechanical process to allow envelopes to be placed onto it for conveyance up to the chute above the mechanical process, where they will be dropped by conveyor belt into the mechanical process.

v) Stericycle team members will monitor the end product material drum, the conveyor line, and monitor for fires. As the mechanical process is underway, if necessary, Stericycle team members will also use a manual agitator to mix the contents of the drum to ensure all product is in contact with the solvent. The end product of envelopes and their contents that go through the mechanical process is pea sized. Any medicine containers (whether containing drugs or not) that residents may have returned inside a MailBack envelope are also destroyed to a pea size.

vi) The mechanical process shall be stopped if the accumulation drum fills past 9/10ths full.

vii) Once mechanical process operations stop, the end product material drum contents are stirred to ensure that the solvent mixes with the pharmaceuticals and renders them ‘non retrievable’.

viii) Once the container is filled, mechanical process operations shall stop until the end product material drum is sealed and a replacement container is prepared, following the requirements in the site preparation section of this SOP.
2c) Post-Destruction Process

i) Once all mechanical process activities have been completed for the shift, the remaining end product material drum shall be closed and sealed according to the container’s closure specifications as detailed by the container manufacturer.

ii) This container shall be marked with a numerical seal and noted on a log present in the area to ensure the container is not reopened.

iii) After all mechanical process operations are complete, the team members working the mechanical process shall ensure the working area is cleaned up and tidy, so that the next shift operating the mechanical process finds everything in clean and working order.

Part 3 Post-Destruction Reporting

3a) Tracking

i) Date of destruction is recorded for each envelope in an internal system and linked to its original location by linking the unique tracking number.
Appendix J
Sample Template: Education and Outreach Call Script [1-844-MED-PROJ]

Thank you for calling the information line for the Medication Education and Disposal Project, or MED-Proj

Call Script:

- If you are experiencing a medical emergency, please hang up and dial 9-1-1.
- If you are experiencing a non-emergency but suspect that you or a family member has ingested something poisonous, please call Washington Poison Center at 800-222-1222.
- Kiosks are located throughout the County and provide convenient options for returning expired or unwanted medicines. Press 3 for more information about convenient kiosks.
- Take-back events are scheduled throughout the year and offer residents a free and convenient way to dispose of expired or unwanted medicines. Press 4 for more information.
- Mail-back services are available to County residents. Press 5 for more information.
- You may press 0 at any time to speak with an operator about disposal options.
• MED-Project is a consumer education campaign dedicated to proper medication use and consumer disposal.
• MED-Project reminds you that taking your medicine as directed by your health care provider is critically important to your health.
• If you have questions about your medication, please hang up and dial your health care provider.
• For additional questions about the proper disposal of expired or unwanted medications from households, please go to www.med-project.org or press 0 to talk to an operator.
• To hear this menu again, please press 1.
• Thank you for calling MED-Project.

Kiosk Script for when 3 is selected:

• Kiosks to collect expired and unwanted medicine are located conveniently through the County. To locate the kiosk site nearest you, or for precise information about kiosk hours of operation, press 0 to speak with an operator or visit http://www.med-project.org to search by your zip code.
• Kiosks accept medications in any dosage form in their original container or sealed bag. No herbal remedies, vitamins, supplements, cosmetics or other personal care products; compressed cylinders, aerosols, and inhalers; medical devices; pet pesticide products; sharps; illicit drugs; or iodine-containing medications will be accepted.
• If you do transfer your medications to a sealed bag, please be sure to recycle all remaining packaging.
• To protect your privacy, remove or black out all personally identifiable information before disposing of your medications or recycling your drug packaging.
• To repeat this information, press 3.
• To return to the main menu, please press 1.
• Thank you for calling MED-Project.

Take-back Script for when 4 is selected:

• MED-Project is working with local law enforcement and other community organizations to offer regular expired and unwanted medicine take-back events. For a complete list of take-back events, please press 0 to speak to the operator or visit: www.med-project.org.
• Take-back events accept medications in any dosage form in their original container or sealed bag. No herbal remedies, vitamins, supplements, cosmetics or other personal care products; compressed cylinders, aerosols, and inhalers; medical devices; pet pesticide products; sharps; illicit drugs; or iodine-containing medications will be accepted.
• If you transfer your medications to a sealed bag, please be sure to recycle all remaining packaging.
• To protect your privacy, remove or black out all personally identifiable information before disposing of your medications or recycling your drug packaging.
• To repeat this information, press 4.
• To return to the main menu, please press 1.
• Thank you for calling MED-Project.
Mail-Back Package Script for when 5 is selected:

- Mail-back services are available to residents who are home-bound or differentially-abled or home healthcare professionals providing services to differentially-abled or home-bound residents. Additionally, Mail-Back Packages for pre-loaded products with a sharp attached and auto-injectors from which Unwanted Medicine cannot be separated are also available.
- To request a Mail-Back Package, please press 0 to talk to the operator or visit www.med-project.org.
- Mail-Back Packages for unwanted medication accept medications in any dosage form in their original container or sealed bag. No herbal remedies, vitamins, supplements, cosmetics or other personal care products; compressed cylinders, aerosols, and inhalers; medical devices; pet pesticide products; sharps; illicit drugs; or iodine-containing medications will be accepted.
- If you transfer your medications to a sealed bag, please be sure to recycle all remaining packaging.
- To protect your privacy, remove or black out all personally identifiable information before disposing of your medications or recycling your drug packaging.
- To repeat this information, press 5.
- To return to the main menu, please press 1.
- Thank you for calling MED-Project.
Appendix K

MED-Project Website

What should you do with your unwanted and expired medication?

Safe Storage and Disposal  About PPSWG  About the Pharmaceutical Industry

Brought to you by the Pharmaceutical Product Stewardship Work Group (PPSWG)

This communication was created for the purpose of compliance with legislation and does not necessarily reflect the views of the MED-Project or the Producers participating in the MED-Project Product Stewardship Plan.

© PPSWG 2016
Medicines help treat diseases, manage chronic conditions, and improve health and well-being for millions of Americans. It's vitally important that patients take their medicines as prescribed by their health care provider. However, if you have expired or unwanted medication, proper disposal is important and easy.

CLICK ON ANY OF THE RECOMMENDED DISPOSAL OPTIONS BELOW TO LEARN MORE

CHECK THE PACKAGE  TAKE-BACK EVENTS  CONVENIENT KIOSKS  MAIL-BACK

This material has been provided for the purpose of compliance with legislation and does not necessarily reflect the views of the MED-Project or the Providers participating in the MED-Project Product Stewardship Plan.
Sample – Not for Distribution. All text subject to change pending review and approval by Snohomish County.

CHECK THE PACKAGE

If there are specific instructions for disposal on the label, package or package insert, please follow those instructions. Do not flush drugs down the toilet unless specifically instructed to do so.

Pharmaceutical wastes including expired, unused or contaminated drugs and vaccines are not accepted at Snohomish County owned and operated solid waste disposal system facilities under Snohomish County Code § 7.41.050(7).

To protect your privacy, consumers are reminded to remove all personally identifiable information on medication labels or packaging before disposing of unwanted medicine.

(Source: U.S. Food and Drug Administration)

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Sample – Not for Distribution. All text subject to change pending review and approval by Snohomish County.
TAKE-BACK EVENTS

Local take-back events offer residents a free and convenient way to dispose of expired or unwanted medicines. The local authorities and MED-Project may also sponsor drug take-back events in your area.

MATERIALS ACCEPTED FOR TAKE-BACK

ACCEPTED: Medications in any dosage form, except for those listed below, in their original container or sealed bag.*

*If transferring medications to a sealed bag, please be sure to recycle all remaining packaging.

NOT ACCEPTED: Herbal remedies, vitamins, supplements, cosmetics, other personal care products, compressed cylinders, aerosols, inhalers, medical devices, pet pesticide products, sharps, illicit drugs and iodine-containing medications.

JULY 2017

CALENDAR OF LOCAL TAKE-BACK EVENTS
Friday, July 21, 2017
TAKE-BACK DAY
Gold Bar - Gold Dust Days
3:00 PM - 8:00 PM

This material has been provided for the purpose of compliance with legislation and does not necessarily reflect the views of the MED-Project or the Producers participating in the MED-Project Product Stewardship Plan.
CONVENIENT KIOSKS

Community kiosk drop-off sites allow residents to bring expired or unwanted medicines to a convenient, centralized location for proper disposal.

MATERIALS ACCEPTED FOR TAKE-BACK

ACCEPTED: Medications in any dosage form, except for those listed below, in their original container or sealed bag.*

*If transferring medications to a sealed bag, please be sure to recycle all remaining packaging.

NOT ACCEPTED: Herbal remedies, vitamins, supplements, cosmetics, other personal care products, compressed cylinders, aerosols, inhalers, medical devices, pet pesticide products, sharps, illicit drugs and iodine-containing medications.

To find the nearest disposal location, enter your zip code below.
CONTACT

If you are experiencing a medical emergency, please dial 9-1-1. If you are experiencing a non-emergency but suspect that you or a family member has ingested something poisonous, please call Poison Control at 800-222-1222. If you have questions about your medication, please dial your health care provider.

For answers to some frequently asked questions about MED-Project, click here.

Pharmacies and Law Enforcement Offices
If you are a retail pharmacy, hospital/clinic pharmacy, or law enforcement agency requiring a kiosk service or interested in hosting a drop-box, contact:

Dr. Victoria Travis, PharmD, MS, MBA
National Program Director
MED-Project LLC
Phone: (844) 677-6532
Fax: (510) 686-8837
Email: snohomishcounty@med-project.org

Drug Producers
If you are a drug producer interested in participating in a MED-Project stewardship plan, contact:

Phone: (202) 495-3131
Email: compliance@med-project.org

This material has been provided for the purpose of compliance with legislation and does not necessarily reflect the views of the MED-Project or the Producers participating in the MED-Project Product Stewardship Plan.
What is the MED-Project?

MED-Project is the entity implementing the County Product Stewardship Plan, including education and outreach programming.

What should I do if I am having a medical emergency?

What should I do if I think I have ingested something poisonous?

What should I do if my pet has ingested medication?

Where should I call with a question about my medication?

Where can I find information about the safe storage of medication?

Where can I find information about California’s Prop 69?

Can I flush my medication down the toilet?

Should I remove my personal information before disposing of my medication?

Where are the MED-Project disposal locations nearest me?

Will it cost me anything to dispose of my expired or unwanted medications?

What items can I dispose of in the MED-Project kiosks?

Will there be any take-back events in my area?

I am differentially-abled or home-bound and unable to go to a kiosk or attend a take-back event. How can I dispose of my expired or unwanted medications?

Where else can I find information about the safe disposal of expired or unwanted medicines?

I have a question not answered by this website. Is there someone I can contact with a question about MED-Project?

What is recommended for safe disposal of expired or unwanted medicine in my area?
Medicines help treat diseases, manage chronic conditions, and improve health and well-being for millions of Americans. It’s vitally important that patients take their medicines as prescribed by their health care provider and as indicated on the label or packaging. It’s also important to be sure to store medications securely to prevent accidental ingestion or misuse by others in your household, especially children.

There are a number of ways to dispose of expired or unwanted medicines. To protect your privacy, consumers are reminded to remove all personally identifiable information on prescription labels or materials before using any of the available disposal options.

For additional information on the program, MED-Project has developed an educational toolkit, including:

- Brochure
- Frequently Asked Questions

If you would like any of these materials emailed to you, contact snohomishcounty@med-project.org.

This material has been provided for the purpose of compliance with legislation and does not necessarily reflect the views of the MED-Project or the Producers participating in the MED-Project Product Stewardship Plan.
Sample – Not for Distribution. All text subject to change pending review and approval by Snohomish County.

Appendix L

Brochure/Flyer Mockup

WHAT SHOULD YOU DO WITH YOUR UNWANTED OR EXPIRED MEDICINES?

SAFELY DISPOSE OF UNWANTED & EXPIRED MEDICINES

MED-Project
Medication Education & Disposal

There are a number of ways to dispose of expired or unwanted medicines.

Medicines help treat diseases, manage chronic conditions, and improve health and well-being for millions of Americans. It’s vitally important that patients take their medicine as prescribed by their health care provider and as indicated on the label or packaging. It’s also important to be sure to store medications securely to prevent accidental ingestion or misuse by others in your household, especially children.

If you have expired or unwanted medication, proper disposal is easy. To protect your privacy, consumers are reminded to remove all personally identifiable information on prescription labels or materials before using any of the following disposal options.

(Source: U.S. Food and Drug Administration)

For more information about the MED-Project program, go to www.med-project.org or call 1-844-MED-Proj

What should you do with your expired or unwanted medicines?

This material has been provided for the purpose of compliance with legislation and does not necessarily reflect the views of the MED-Project or the Producers participating in the MED-Project Product Stewardship Plan.

MED-Project
Medication Education & Disposal
www.med-project.org
Sample – Not for Distribution. All text subject to change pending review and approval by Snohomish County.

**DISPOSAL OPTIONS**

**1. CHECK THE PACKAGE**

If there are specific instructions for disposal on the label, package or package insert please follow those instructions. Do not flush drugs down the toilet unless specifically instructed to do so.

**2. CONVENIENT KIOSKS**

To find convenient kiosks in your area, visit www.med-project.org for more information. Mail-back package distribution locations may also be available in your area.

**What items can I dispose of?**

**ACCEPTED:**
MEDICATIONS IN ANY DOSAGE FORM, EXCEPT FOR THOSE LISTED BELOW, IN THEIR ORIGINAL CONTAINER SEALED BAG.

**NOT ACCEPTED:**
HERBAL REMEDIES, VITAMINS, SUPPLEMENTS, COSMETICS, OTHER PERSONAL CARE PRODUCTS, COMPRESSED CYLINDERS, AEROSOLS, INHALERS, MEDICAL DEVICES, PET PESTICIDE PRODUCTS, SHARPS, ILLICIT DRUGS, IODINE-CONTAINING MEDICATIONS.

**DISPOSAL OPTIONS**

**3. MAIL-BACK**

Mail-back services for unwanted medicine are available to residents upon request. Visit www.med-project.org to order a mail-back package.

**4. TAKE-BACK EVENTS**

Local take-back events offer residents a free and convenient way to dispose of expired or unwanted medicines. Visit www.med-project.org for information on events in your area.

To protect your privacy, consumers are reminded to remove all personally identifiable information on prescription labels or materials before using any of the disposal options listed above.
FAQ Outline

The following are suggested questions to be addressed by the “Frequently Asked Questions” section of the MED-Project website/public relations toolkit. All text is subject to change pending review and approval.

What is the MED-Project?
MED-Project is the entity implementing the Product Stewardship Plan for unwanted medicine in Snohomish County, including the education and outreach programming.

What should I do if I am having a medical emergency?
If you are having a medical emergency, contact emergency medical services immediately by dialing 911.

What should I do if I think I have ingested something poisonous?
If you think you have ingested something poisonous, contact emergency services immediately. Please dial 911 or contact your local poison control center.

What should I do if my pet has ingested medication?
If you believe your pet may have ingested human or animal medication not intended for consumption by your pet, please contact your veterinarian or local animal poison control hotline.

Whom should I call with a question about my medication?
Please direct all questions about your medication to your health care provider.

Where can I find information about the safe storage of medication?
You should follow any storage instructions provided by your healthcare provider and any written instructions provided with your medication or listed on its packaging.

In addition, many government agencies provide information regarding safe storage of medication. Possible sources include the National Institutes of Health’s information page and the Center for Disease Control’s information page.

Can I flush my medication down the toilet?
Do not flush medications down the toilet unless the information on the label, package, or package insert specifically instructs you to do so.

Should I remove my personal information before disposing of my medication?
Please remove all personal and identifying information from your medication labels and/or its packaging before disposal.

Where are the MED-Project disposal locations nearest me?
MED-Project is providing disposal locations throughout the County. For more information about the location nearest to you, please visit the “Convenient Kiosks” portion of the MED-Project website, or call the hotline at 1-844-MED-PROJ.

Will it cost me anything to dispose of my expired or unwanted medications?
There will be no fee for medication disposal charged at the point of collection.
What items can I dispose of in the MED-Project kiosks?
Kiosks accept medications in any dosage form in their original container or sealed bag. No herbal remedies, vitamins, supplements, cosmetics or other personal care products; compressed cylinders, aerosols, and inhalers; medical devices; pet pesticide products; sharps; illicit drugs; or iodine-containing medications will be accepted.

If you do transfer your medications to a sealed bag, please be sure to recycle all remaining packaging.

Will there be a take-back event in my area?
Please visit the MED-Project website or dial the hotline at 1-844-MED-PROJ to learn about take-back events in your area.

I am differentially-abled or home-bound and unable to go to a kiosk or attend a take-back event. How can I dispose of my expired or unwanted medicine?
Please dial the hotline at 1-844-MED-PROJ or visit the mail-back page of the MED-Project website to request a pre-paid envelope to return your unwanted or expired medicine. Home healthcare professionals providing services to differentially-abled or home-bound residents may also request an envelope on behalf of differentially-abled or homebound residents.

Where else can I find information about the safe disposal of expired or unwanted medicines?
Several government agencies provide information regarding safe disposal of medication. Please refer to the FDA's website for more information.

I have a question not answered by this website. Is there someone I can contact with a question about MED-Project?
For more information, please dial the hotline at 1-844-MED-PROJ.

What is recommended for safe disposal of expired or unwanted medicine?
The United States Food and Drug Administration developed the following guidelines to encourage the proper disposal of medicines and help reduce harm from accidental exposure or intentional misuse after they are no longer needed:

Check the Package: Follow any specific disposal instructions on the prescription drug labeling or patient information that accompanies the medicine. Do not flush medicines down the sink or toilet unless this information specifically instructs you to do so.

Take-Back Events: Take advantage of programs that allow the public to take unused drugs to a central location for proper disposal. Call your local law enforcement agencies to see if they sponsor medicine take-back programs in your community. Contact your city’s or county government’s household trash and recycling service to learn about medication disposal options and guidelines for your area.

Convenient Kiosks: Transfer unused medicines to collectors registered with the Drug Enforcement Administration (DEA). Authorized sites may be retail, hospital or clinic pharmacies, and law enforcement locations. Some offer mail-back programs or collection receptacles ("kiosks"). Visit the DEA’s website or call 1-800-882-9539 for more information and to find an authorized collector in your community.

Mail-Back Packages: Please dial the hotline at 1-844-MED-PROJ or visit the mail-back page of the MED-Project website to request a pre-paid envelope to return your unwanted or expired medicine. Home healthcare professionals providing services to differentially-abled or homebound residents may also request an envelope on behalf of differentially-abled or homebound residents.

Snohomish County, Washington, [Date] – The Medication Education & Disposal Project (MED-Project), a consumer education campaign dedicated to responsible medication use and disposal, announced today that it will be supporting a medication take-back event supervised by a local law enforcement agency for consumers in [town] on [date]. All Snohomish residents are invited to bring their expired or unwanted medications for disposal. The service is free. [Insert information for residents about what can be collected]. To protect privacy, consumers are reminded to remove all personally identifiable information on prescription labels or materials which are brought to this take-back event.

What: MED-Project Medication Take-Back Event – bring your expired or unwanted medicines for disposal

When: [Date], [Time]

Where: [Location]

For more information about disposal options for expired or Unwanted Medicine, visit www.med-project.org.

###

Contact:
MED-Project Public Affairs at (844) 677-6532 (844-6PROJECT)
# Appendix N

## Sample Digital and Local Social Networks

The following is a representative list of local organizations and their social media networks in the County. MED-Project will reach out to relevant groups to help promote Take-Back Events.

<table>
<thead>
<tr>
<th>Outlet</th>
<th>Facebook</th>
<th>Twitter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Snohomish County</td>
<td><a href="https://www.facebook.com/SnohomishCountyWA">https://www.facebook.com/SnohomishCountyWA</a></td>
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