

Version: 4 FOI Status: Public	DSG Safety Guidance – The Prevention of Needle Stick Injuries	Issued: January 2018 Review Due: January 2021
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Introduction

This document provides guidance on managing the risks of injury from contact with sharps (needles, syringes etc.) and the associated risks of infections from blood-borne viruses.

Adult Care staff can come in contact with sharps by assisting a person to self-administer their medication or when undertaking work with people who use recreational drugs intravenously.

The introduction of the Health and Safety (Sharp Instruments in Healthcare) Regulations 2013, place duties on all employers whose primary work activity is the management, organisation or provision of healthcare.

The regulations build on existing health and safety legislation in particular, the needs to assess the risk, provide appropriate information and training and consult with employees.

Carrying out a Risk Assessment

A risk assessment must be carried out for all activities which expose staff to the risk of needle stick injuries. These will largely fall into two groups

- those providing assistance with prescribed medication
- those providing support for people who use recreational drugs intravenously.

These staff should also be considered for Hepatitis B vaccinations or vaccinations that are available for other blood borne viruses. Please see Adult Care Infection Control Policy for further information.

Consider

Staff assisting with prescribed medication

- Identify the staff (group or individuals) carrying out the task.

Examples of how staff could receive a needle stick injury?

- Whilst handing the sharp to the client to take their medication
- Receiving the used sharp from the client for disposal
- Whilst assisting clients to declutter their home

This list is not exhaustive.

Possible Control Measures

- Avoid the unnecessary use of sharps – consult with GP or other medical professional whether the medication can be administered by another method e.g. tablets, liquid medicine etc
- If the above is not possible consult with GP or other medical professional whether a 'safer sharp' can be used e.g. a needle with a shield or cover that slides or pivots to cover the needle after use
- Staff must not remove the protective cover from the sharp

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- Staff to hand the unused sharp to the client with protective cover still in position
- Staff to place a 'sharps box' close to the client
- After use the client to place the sharp directly in the sharps box
- Staff to be provided with appropriate training/information on the above risks, control measures and safe systems of work.

N.B. staff must not attempt to recap the needle or place their hand inside the sharps box

This list is not exhaustive.

Staff providing support for people who use recreational drugs intravenously

- Identify the staff (group or individuals) carrying out the task.

Staff must be made aware that needle stick injuries can occur from unprotected needles discarded around the room, building or furniture or hidden in clothing or bedding.

Possible Control Measures

- Staff must be made aware of possibility of discarded sharps where this information is available to the manager
- Provision of equipment to remove discarded needles e.g. litter picker
- Provision of anti-syringe gloves
- Provision of sharps box
- Where appropriate staff to place a 'sharps box' close to the client
- Client to place the sharp directly in the sharps box
- Where staff need to pick up the syringe the preferred method is to use the litter-picker and place the syringe directly into the sharps box
- Searches of rooms, bedding, clothing etc. must only be carried out where there is no alternative
- Where staff have to search through or move items of bedding, clothing or other general debris and there is potential for hidden syringes to be found, tools such as a broom handle or litter picker must be used to handle the items and anti-syringe gloves worn. Substantial footwear e.g. fully covered flat heeled shoe with substantial soles must be worn.

If a needle stick injury does occur:

- Encourage the wound to gently bleed, ideally holding it under running water
- Wash the wound using running water and plenty of soap
- Don't scrub the wound whilst you are washing it
- Don't suck the wound
- Dry the wound and cover it with a waterproof plaster or dressing
- Seek urgent medical advice
- Report the injury to your employer.

For guidance on reporting needle stick injuries refer to the [Accident and Assault Reporting and Investigation](#) Procedure.

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For those who sustain a puncture injury at work e.g. needle stick, bite, scratches etc. which has drawn blood, post incident counselling can be provided by the Occupational Health Unit for Chesterfield Hospitals 01246 515696. This can cost from £60 - £240. The most common cost will be £60 - £100 as the majority of incidents will be low risk. In the case of higher risk incidents, blood tests and drug treatment may be required which will increase costs. This counselling is required optimally within 24 hours – 48 hours of the incident.

Establishment/Area budgets are responsible for the costs and a cost code should be provided for the invoice.