I nfection Prevention Guidelines
Safe Use, Handling & Disposal of Sharps

Summary
This guideline aims to provide all Trust Staff with the relevant information about the safe use, handling and disposal of sharps.
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1 Introduction & Scope

This guideline applies to all Trust Staff. It addresses the requirements of the Trust in relation to the Health and Social Care Act 2008 criterion 8 regarding safe handling and disposal of sharps including:

- Assembling, storage and disposal of sharps bins
- Preventing sharps’ injuries

Needlestick and injury from a sharp object can occur in clinical and non clinical settings. They are avoidable when good practice and procedure are employed during the handling and disposal of sharps.

For the management of sharps' injuries refer to the Occupational Health Policy ‘Needlestick/ Accidental Contamination’ policy.

2 Definitions

Sharps – Any object that has an edge or point that could penetrate, puncture or lacerate skin. This includes needles, broken glass, surgical instruments, scalpels and body parts such as broken bones and teeth. Sharps can be clean or contaminated with blood or body fluid.

Sharps Injury – When sharps penetrate the skin.

Needlestick Injury – Where the sharps injury is caused by hollow bore or solid needle.

Hollow Bore Needle – Needle with a lumen and bevelled edge used for collecting blood, or for the administration of parenteral substances. This includes peripheral cannula, butterfly, injection needles, and venepuncture needles. Hollow-bore needles carry a larger volume of blood than needles without a lumen (e.g. suture needles) therefore there is greater risk of blood borne virus transfer.

- Sharps Bin – Approved container with specific coloured lid used for safe disposal of sharps. Bins must conform to British Standard: BS EN ISO 23907
3 Overview

The incorrect use, handling and disposal of sharps can place the individual at risk of a sharps injury and potential exposure to blood borne viral infection. Correct use, handling and disposal of sharps can reduce the potential risks to the individual.

Process for Monitoring Compliance & Effectiveness

This guideline will be monitored for compliance with the minimum requirements outlined below.

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Standards/Key Performance Indicators

Occupational Health Needlestick/ Accidental contamination policy

Annual Trust Wide Sharps Audits

4 Trust Associated Documentation
5 External References

Epic 3 - 
http://www.his.org.uk/files/3113/8693/4808/epic3_National_Evidence-Based_Guidelines_for_Preventing_HCAI_in_NHSE.pdf


Health and Social Care Act (Hygiene Code) 2008 criterion 8
Appendices

Appendix A  Prior to Using Sharps
Appendix B  During Use of Sharps
Appendix C  After Use of Sharps
Appendix D  In the event of a Sharps Injury
Appendix E  Sharps Waste Disposal Poster
Appendix A  Prior to Using Sharps

- Sharps bins must conform to British Standard: BS EN ISO 23907
- Assemble sharps bins according to the manufacturer’s instructions on the bin. The lid must be securely fixed to the base following assembly.
- Enter the assembly date, location and name of assembler on the sharps bin in the place provided.
- Ensure the sharps bin is of a suitable size for the needs/ use of the area.
- Place sharps bins out of reach of children and vulnerable adults – ideally wall mounted. Bins must not be located on the floor.
- Wall and trolley mounted sharps bins must be at a safe user height – the aperture must be visible. Only use wall and trolley fixtures that are designed for the sharps bins in use.

Appendix B  During Use of Sharps

- During assembly never attach needles to syringes while the needle is unsheathed.
- Use needleless or retractable devices when possible.
- Avoid transporting sharps from one place to another wherever possible.
- Always carry or transfer sharps in a sharps tray, trolley or receptacle that can be cleaned/disinfected.
- Never pass sharps from person to person by hand – use a sharps tray or receptacle.
- Activate the temporary closure lid on the sharps bin before moving the bin and always ensure this is in place between uses.
- Always get help when using sharps with a confused or agitated patient.
Appendix C  After Use of Sharps

- **Never** re-sheath the needle.

- For **blood gas** syringes – wear protective equipment (gloves and apron), remove the needle using the needle remover on the sharps’ bin lid and fit the bung supplied in the pack to transport the specimen to the analyser – **do not re-sheathe the needle or transport the syringe with the needle attached.** Use blood gas transport pods.

- **Always dispose of sharps into a sharps bin at the point of use.** Transport the sharps bin safely using a sharps tray, wheeled holder (i.e. for large bins) or trolley mounted fixture.

- Always close the temporary sliding closure following sharps disposal.

- **Safe disposal is the responsibility of the user.**

- Dispose of sharps bins when ¾ full. Lock aperture securely before disposal.

- Complete the label on the sharps bin.

- Dispose of as clinical waste. Do not place in a clinical waste bag.

- Used sharps bins must be removed from the ward/department and stored in a locked, segregated area designated for waste/sharps disposal.
Appendix D  In the event of a Sharps Injury

Refer to the Occupational Health Policy: Needlestick/ Accidental contamination policy

Report all injuries to:-

- The Occupational Health and Wellbeing Department during normal working hours or the Emergency Department out of hours.
- Via DATIX online incident reporting system.