



## **Practical Guidance for Practices to support the Implementation of the EU Directive 2010/32/13 on the Prevention of Sharps Injuries in the Healthcare Sector**

**This information should be read in conjunction with the Health and Safety (Sharp Instruments in Healthcare) regulations 2013 ([www.hse.gov.uk/pubns/hsis7.htm](http://www.hse.gov.uk/pubns/hsis7.htm)) released by the Health and Safety Executive April 2013**

### ***What are sharps Injuries?***

A sharps injury refers to a cut or puncture wound to the skin from either a medical sharp e.g. needle, scalpel **or** if the skin is punctured/damaged as a result of a scratch/bite **or** if there is a splash of blood or other bodily fluids to the eyes or mucous membranes. If the injury is contaminated with blood or other bodily fluids such as saliva which contains traces of blood then there is a risk of transmitting viruses such as Hepatitis B or C and HIV. This is sometimes referred to as “occupational exposure” of a blood borne virus.

### ***Who is most at risk?***

Most of these injuries occur amongst those healthcare professionals undertaking procedures that involve the use of needles and other medical sharps e.g. nurses, doctors, HCA’s, paramedics and phlebotomists – anyone who uses sharps.

Unfortunately other staff such as domestic’s, waste contractors and maintenance staff are often exposed to sharps injuries because the primary user of the sharp has not disposed of the item correctly

### ***The risks of contracting an infection***

The number of health care workers who have acquired an infection as a result of this type of injury is small, 17 recorded cases of Hep Hepatitis C between 1997 and 2009, but to the individual the consequences can be extremely serious.

Many needle stick injuries are preventable and employers have a duty of care to ensure the safety of their employees. Employees have been protected under the:

- The Health and Safety at Work Act 1974
- The Control of Substances Hazardous to Health 2002
- The Management of Health and Safety Regulations 1999
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

In addition the Health and Safety (Sharps Instruments in Healthcare) regulations 2013 which will support the implementation of EU2010/32/EU and all members of the European Union are required to implement by May 2013.

This document is to help you understand your legal obligations, and provide specific detail on requirements that must be taken by Healthcare employees.



Employers must ensure that risks from sharps injuries are adequately assessed and control measures are in place.

This can be achieved by demonstrating an understanding of the factors that result in NSIs and sharps injuries and how the EU directive can be used to address these issues will help to create a safe working environment for healthcare professionals

### **Key Legislation**

Key requirements that need to be implemented include:

- Risk assessment – is there risk of exposure to a blood-borne pathogen from NSIs and sharps injuries? Can the risk be eliminated or minimised?
- Risk elimination and prevention – undertake a review of practice. Eliminate unnecessary use of sharps. Identify whether the risk of exposure can be reduced by using safety devices, improving education and awareness, reviewing staffing levels, and ensuring personal protective equipment and appropriate sharps disposal systems are available at the point of use. Ensure the organisation has developed an occupational exposure policy.
- Training – incorporate use, safe handling and disposal of sharps procedures, improve occupational exposure awareness such as risks associated with exposure to blood and body fluid, recognise the importance of hepatitis B immunisation and encourage occupational exposure reporting.
- Information – inoculation injuries should be reported promptly and appropriately, and risks identified following a root cause analysis of each case.
- Raising awareness and monitoring – employers are responsible for ensuring that all staff are aware of the risks associated with occupational exposure from inoculation injuries. Furthermore, health monitoring and vaccination should be provided where available.

The directive requires that healthcare providers undertake all that is reasonably practical to protect healthcare professionals and other staff from harm. Failure to implement the directive will be seen as a criminal offence.

### ***Take Action – what can you as an employer do?***

#### **Don't Panic**

Enclosed is a checklist (Appendix 1) the aim of which is to support you in reviewing sharps safety within your practice. By working through the following checklist in conjunction with the HSE Health and Safety (Sharp Instruments in Healthcare) Regulations 2013 you should be able to identify areas where the practice is already compliant and areas where further action is required.

I would advise that any areas identified as requiring attention be incorporated within an action plan e.g. Appendix 2 and addressed in a timely manner.



### **You are not on your own**

The enclosed links are to documents which will also support the practice throughout this process.

Advice and support may be sought from:

Health and Safety (Sharp Instruments in Healthcare) Regulations 2013

[www.hse.gov.uk/pubns/hsis7.htm](http://www.hse.gov.uk/pubns/hsis7.htm)

[www.hse.gov.uk/healthservices/index.htm](http://www.hse.gov.uk/healthservices/index.htm)

[http://www.rcn.org.uk/\\_data/assets/pdf\\_file/0008/418490/004135.pdf](http://www.rcn.org.uk/_data/assets/pdf_file/0008/418490/004135.pdf)

<http://www.hse.gov.uk/healthservices/needlesticks/eu-directive.htm>

[www.europeanbiosafetynetwork.eu](http://www.europeanbiosafetynetwork.eu)

This form was adapted from J Harries Infection Prevention Nurse, Solihull CCG.

The attached check list (Appendix 1) will support you in identifying areas where improvements may be required to meet the new regulations. Completing and addressing your areas of concerns on your action plan (see appendix 2) will provide evidence you will require to demonstrate compliance.



**Appendix 1**

**Sharps Safety Checklist**

Throughout this check list “regulation” refers to the regulations within the Sharps Regulations (Health and Safety (Sharps Instruments in Healthcare) Regulations 2013

1. Complete the checklist to establish your compliance with Health and Safety Sharps Regulations (Health and Safety (Sharps Instruments in Healthcare) Regulations 2013 document to support you
2. Involve members of staff who use “sharp” equipment/instruments when undertaking the review
3. Any box ticked with an asterix (\*) action will be required and should be entered into the action plan (appendix 2)
4. Complete the action plan to include realistic timelines and named leads (When completing the action plan once again it is important to include users of the equipment)
5. Review sharps use within your practice on a regular basis and update risk register, action plan accordingly
6. I would advise that the points raised in the regulations are considered as part of any future new services undertaken within the practice

***Any boxes marked with an asterix (\*) that are ticked will be require action and as such should be entered into the action plan***

<b>1. Who should take action?</b>		
<b>Regulation 3 &amp; 4 of Sharps Regulations (Health and Safety (Sharps Instruments in Healthcare) Regulations 2013</b>		
<b>If the answer to the statement/statements below is “yes” then you are advised to review the handling of and disposal of sharps within the practice</b>		
	Yes ✓	No ✓
1. As an employer your primary work activity is to you manage, organise or provide healthcare	*	
2. You are a contractor working for a healthcare employer whose staff may be at risk of a sharps injury	*	



<b>2. How might the Sharps Regulations (2013) change the practice's responsibilities for managing the risks from the use of sharps?</b> <b>Although the regulations build on existing Health &amp; Safety law, COSHH regulations the new regulations encourage further assessment of the risks involved in the use of sharps. Think about:</b>			
		Yes ✓	No ✓
1. The services you provide that may expose any individual to the risk of a sharps injury	Phlebotomy	*	
	Vaccination/Immunisation	*	
	Acupuncture	*	
	Surgical procedures	*	
	Ancillary services (cleaning staff)	*	
	Patients(e.g. return of sharps boxes)	*	
	Other	*	
		Yes ✓	No ✓
2. Which medical sharps are used within your practice?	Hollow bore hypodermic needles	*	
	Scalpels	*	
	Phlebotomy devices	*	
	Butterfly needles	*	
	Lancets for INR/Glucose monitoring	*	
	Other (state & address an action plan)	*	
			Yes ✓
3. Are you able to eliminate any of these sharps/is their use unnecessary? (regulation 5 (1)(a))	Hollow bore hypodermic needles		*
	Scalpels		*
	Phlebotomy devices		*
	Butterfly needles		*
	Lancets for INR/Glucose monitoring		*
	Other		*



		Yes ✓	No ✓
Do any staff re-cap needles following use? (regulation 5 (1) (c)* This is a particularly high risk practice, needles must never be recapped as a used needle will be contaminated with blood. Please refer to column 2 page 2 of Health and Safety (Sharps Instruments in Healthcare) Regulations 2013 <a href="http://www.hse.gov.uk/pubns/hsis7.htm">www.hse.gov.uk/pubns/hsis7.htm</a> for further clarification		*	
		Yes ✓	No ✓
Are sharps bins placed close to the area where medical sharps are used to enable staff to dispose of immediately following use (regulation 5 (1)(d) and COSHH regulation 7(6)(c)			*
<ul style="list-style-type: none"> <li>• Sharps bin manufacturer have undertake a site visit of your premises to provide advice</li> <li>• Are there any systems to support this practice e.g. wall mounting bins, trays to contain sharps bins</li> <li>• Are safe working practices for the disposal of/transport of sharps in/from a patients home in place.</li> </ul>			
		Yes ✓	No ✓
Are instructions for the safe disposal of medical sharps available in areas where sharps bins are in use			*
		Yes ✓	No ✓
4. Is the following information available to employees (regulation 6)	The risks from injuries involving medical sharps		*
	The relevant legal duties on employers and workers		*
	Good practice in preventing injuries		*
	The benefits and drawbacks of vaccination		*
	Support available to an injured person		*
		Yes ✓	No ✓
5. Employee training must cover: (regulation 6(4)	The correct use of safer sharps		*
	Safe use and disposal of medical sharps		*
	What to do in the event of a sharps injury		*
	The employers arrangements for health surveillance and other procedures		*



<b>3. How might the Sharps Regulations change the practice's responsibilities in the event of an injury?</b> <b>The Sharps Regulations require employers to take specific actions in the event of a sharps injury. Does the practice have the following procedures in place? Refer to Health and Safety (Sharps Instruments in Healthcare) Regulations 2013 <a href="http://www.hse.gov.uk/pubns/hsis7.htm">www.hse.gov.uk/pubns/hsis7.htm</a></b>				
			Yes ✓	No ✓
1. Are employees aware that they have a duty to inform their employer in the event a sharps injury occurs and the information required in order to fully investigating? (regulation 8) Is there a protocol in place Names to include that of patient if known whilst maintain patient confidentiality Dates and times Details of how the incident occurred <b>*please note the above is not an exhaustive list</b>				*
2. Does the practice have robust arrangements in place to ensure injuries are able to be reported in a timely manner to include: <ul style="list-style-type: none"> <li>• What happens if the incident happens in a patient's home?</li> <li>• What happens if the accident happens "out of hours"</li> <li>• How do they notify their employer</li> <li>• Who do they have to notify</li> </ul>				*
3. Do incidents records include: (regulation 7 (1)) <ul style="list-style-type: none"> <li>• The injury and when/where it occurred</li> <li>• The type of sharp involved</li> <li>• The procedure and at what stage of the procedure it occurred</li> <li>• Whether the incident has been investigated</li> <li>• An action plan to prevent reoccurrence</li> </ul> *The purpose of this is to establish if existing risk control measures are adequate using an accident prevention approach, not placing any blame, involving relevant specialists				*



<b>4. How will the Sharps Regulations change the practices responsibilities towards treatment?</b> <b>The practice must consider the possible exposure of staff to a blood borne virus, therefore:</b> <b>Refer to Health and Safety (Sharps Instruments in Healthcare) Regulations 2013 <a href="http://www.hse.gov.uk/pubns/hsis7.htm">www.hse.gov.uk/pubns/hsis7.htm</a> column 1 page 4</b>		
	Yes ✓	No ✓
1. Has the employee immediate access to Occupational Health arrangements or robust arrangements for medical advice		*
2. Is the employee able to access/be offered post exposure prophylaxis and any other medical treatment required?		*
3. Is counselling available if required or appropriate for the employee?		*
<b>The Sharps Regulations anticipate that systems in place will be reviewed regularly (regulation 5(2))</b> <b>Refer to Health and Safety (Sharps Instruments in Healthcare) Regulations 2013 <a href="http://www.hse.gov.uk/pubns/hsis7.htm">www.hse.gov.uk/pubns/hsis7.htm</a> column 1 page 4</b>		
	Yes ✓	No ✓
1. To review the need to use a medical sharp. Are you able to eliminate any of these sharps/is their use unnecessary? (regulation 5 (1)(a))		*
2. Is a medical sharp required in the workplace - consider its replacement with a safer sharps if reasonably practicable		*
3. Are medical sharps re-capped following use	*	
4. All medical sharps are able to be disposed of safely		*
5. Are instructions for disposal available		*
6. Are clearly labelled sharps containers available at the point of use		*
<b>4. Where it is not reasonably practicable to avoid the use of a medical sharps employers are required to review and implement engineering controls e.g :</b> <b>Provide/use safer sharps which incorporates protection mechanisms (regulation 5 (1) (b) and ensure staff are adequately trained</b> <b>Refer to Health and Safety (Sharps Instruments in Healthcare) Regulations 2013 <a href="http://www.hse.gov.uk/pubns/hsis7.htm">www.hse.gov.uk/pubns/hsis7.htm</a></b>		
	Yes ✓	No ✓
1. Is it reasonably practicable to replace the following with a “safer sharp”	Hollow bore hypodermic needles	* *
	Scalpels	* *
	Phlebotomy devices	* *
	Butterfly needles	* *
	Lancets for INR/Glucose monitoring	* *
	Other	* *
	Yes ✓	No ✓
2. Have staff been trained in the use of these devices?		*





Appendix 2

**European Sharps Regulations Action Plan**

<b>Issue Identified</b>	<b>Action Required</b>	<b>By Whom – to include Practice Manager, GP, Nurses and other clinicians/users</b>	<b>Date to be completed by</b>