INFECTION PREVENTION AND CONTROL
SAFE USE AND DISPOSAL OF SHARPS
## INFECTION PREVENTION AND CONTROL – SAFE USE AND DISPOSAL OF SHARPS

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### Membership of the policy development/review team
- IPC Staff

### Consultation
- IPC Champions, Matrons, Estates and Facilities staff, IPC Committee members and Clinical Governance staff

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Further copies of this document can be found on the Foundation Trust intranet.
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Infection Prevention and Control – Safe use and disposal of sharps

1. Introduction

A sharp may be any item which can puncture/cut the skin and may or may not be contaminated with blood or body fluid, e.g. hypodermic needle, blades, cannula, razors, instruments, glass ampoules, suture needles.

Sharps injuries therefore include wounds which may be sliced, punctured or pierced and may be caused by a variety of items.

2. Responsibilities

It is the responsibility of the clinician using the sharp device to ensure that it is disposed of correctly and safely. This will also include the clinician disposing of the device on behalf of the patient, razors for example.

The disposal of a sharp device must not risk harming others

Every employee has a duty under the Health and Safety at Work Act not to act in such a way as to endanger the health, safety or welfare of others and as such sharps devices must be disposed of safely. Qualified clinicians also have a responsibility and accountability under their professional codes to practice in a manner that promotes safety.

It is the responsibility of the Infection Prevention and Control Team provide training in a variety of formats about sharp safety. It is also their responsibility to ensure that the training complies with legislation and best practice.

3. General principles of safe handling and disposal of sharps

All sharps bins used within the NHS must comply with British standards and therefore offer the product user and the person disposing of it protection from the contents, both in terms of the structure of the bins walls and the lid and locking mechanism.

To ensure that protection is maintained all sharps bins must be correctly assembled, they must be signed, dated and labelled with the area/team that will be using the sharps placed in the bin.
The sharps bin should be available at the point of use of the sharp, this may not always be possible, for example in cases of rapid tranquilisation, in those circumstances an injection tray should be used to carry the used sharps devices.

Sharps bins should be wall mounted or if using a small box should be used within an injection tray to ensure that they do not fall over during use.

Sharps must not be left for other staff members to dispose of.

Sharps bins have a fill line and must not be filled above that line, therefore nothing should be protruding from the sharps bin.

Unless supplied by the manufacturer with a non-needle safe device all sharps used within the Trust are needle-safe to comply with the 2013 Sharp Safety Legislation.

Therefore needles should never be re-sheathed, needles and syringes should not be dismantled following use nor should needles be removed or bent or distorted in any way following their use.

When placing sharps into the sharps bins hands and fingers should stay well outside the bin – do not put them past the lid into the bin.

Once the fill line has been reached the sharps bin should be locked shut, signed and dated. An identification tag should be attached and the bin placed in a secure place to await collection.

4 Community Settings

In a community or domiciliary setting the health care worker must dispose of the sharp in an approved container, and it must be transported to the closest point of safe collection (i.e. a team base).

5 Sharps Containers

All Sharps containers must conform to BS 7320; i.e. they must:
- Be resistant to penetration or leakage
- Have a biological hazard sign
- Be labelled "DANGER, CONTAMINATED SHARPS ONLY, TO BE INCINERATED"
- Have a handle and a lid
- Have a closure that prevents spillage when not in use
- Possess an aperture which prevents any removal of contents
6 Colour Coding of Sharps Bins

Sharps bins are colour coded to ensure that they comply with waste disposal legislation, they must only contain the sharps that they are designed to take.

- Yellow lidded bins are for sharps contaminated with medicines
- Orange lidded bins are for sharps contaminated with blood – no medicines
- Purple lidded bins are for sharps that are contaminated with cytotoxic or cytostatic medicinal waste only
- When sharps are contaminated with both blood and medicinal products then a yellow lidded bin should be used

7 Collection of sharps bins

The Trust will ensure that a satisfactory collection system is operational and sharps bins will be collected from all Trust premises by the waste contractor. All sharps bins will be kept in a locked area aware from the public prior to collection. The waste contractor will then take the sharps away to be incinerated.

8 Sharps Injuries

The Occupational Health Department through a service level agreement will provide Hepatitis B immunisations to all staff that may come into contact with contaminated sharps.

For information following a sharps injury, bite or scratch or other exposure to blood see the Sharps Injury Policy or contact Occupational Health. For ease of reference the Sharps Injury flow chart is attached at Appendix 1.
Appendix 1 – Sharps Injury Poster

- C&I process to be followed (in summary as below)
  - Injury/exposure occurs
  - First Aid provided as appropriate
  - Insured employee to complete staff incident form (Datis)
  - Risk Assessment to be conducted by manager (employee if manager not available)

**Employee to call PAM 24/7 Needlestick Line Tel: 03 63 660 0365**
- Call asap after injury/treatment and completion of Risk Assessment
- If cannot contact needlestick line and Risk Assessment has identified as High Risk, attend A&E without delay

- PAM needlestick line will ask if Risk Assessment (RA) has been completed and advise one needs to be completed if not a copy can be found Trust intranet (search ‘needlestick’ on the home page)
- PAM will ask if RA has identified injury as high or low risk. If high risk employee will be advised to attend A&E
- PAM will signpost to KAP for counselling/amotional support
- PAM Needlestick Line will notify PAM Client Services of incident for follow up

**High Risk Cases – to attend A&E ASAP**
- Employee to attend A&E without delay and take Risk Assessment with them
- Advise A&E have sustained a BBV exposure incident and require emergency treatment
- A&E will provide any further action necessary using Rapid PEP Assessment form and Flow Chart (organise follow up in GUM for those on PEP)
- GUM organises PEP follow up

**Low and High Risk Cases - PAM Clinician conducts Telephone Consultation**
- Welfare/follow-up call made to employee by clinician (usually within 1 working day and arranged by PAM Client Services direct with employee. Email notification of appointment sent to assigned OH/OH manager)
- For high risk cases next steps for follow-up blood testing as advised by A&E/GUM
- For low risk cases – no further OH action required
- Outcome Report produced and uploaded to OH/OH for Manager

**High Risk Cases - Follow Up Blood Testing**
- PAM CS will create Health Surveillance referral and arrange face to face appointment for follow up bloods as advised by A&E/GUM.
- Appointment notification sent and report uploaded to OH/OH manager for each appointment.
- Any positive results will be advised direct to the employee by PAM
INFECTION PREVENTION AND CONTROL – SAFE USE AND DISPOSAL OF SHARPS

SHARP SAFETY POSTER

2013 Legislation requires employers to reduce sharps injuries by replacing traditional sharps with needle/sharp safe devices. The Trust has been fully sharp safe since 2017 and staff must only use safety devices unless the injectable medication is pre-loaded without a safety needle. (Injectable medication must not be decanted from the original packaging)

Always engage the temporary closure mechanism when the bin is not in use

Yellow lidded sharps bins for sharps contaminated with medication
Orange lidded sharps bins for sharps contaminated with blood but no medicinal products
Purple lidded bins for sharps contaminated with cytotoxic and cytostatic waste
Yellow lidded bins may be used for sharps contaminated with blood and medicines

Top tips
Dispose of the sharp as soon as possible.
Know how to use sharp safe devices.
Secure the sharps bin to the wall or use a tray to secure the sharps bin.
Do not attempt to catch a falling sharp.

Complete the label when starting to use the bin. Complete the rest of the label when closing the bin

If sharps bins need to be taken to the patient then use an injection tray to prevent the sharps bin from falling over

For any queries over collection of sharps contact Engie via email