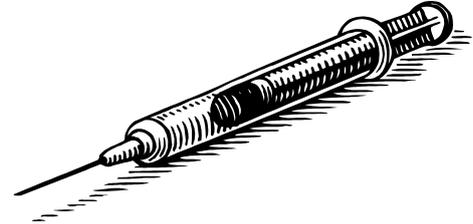


For: Heads of all Establishments/Settings
OCC Managers
Governors/Management Committees
Trade Union Safety Representatives
Employee Notice Boards
Intranet



NEEDLESTICK INJURY

LEGISLATION

The Health & Safety at Work etc Act 1974

Management of Health & Safety at Work Regulations 1999 (as amended)

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

Please Note: Oxfordshire Fire and Rescue Service have policy and procedure in place which details further information specifically for their service.

Purpose

Needlestick injuries are punctures to the skin caused by hypodermic needles. Accidental injuries from needlesticks or 'sharps' are a common risk in the health care environment, education establishments, playgrounds and other locations such as backyards and alleyways attached to premises, but can also occur maliciously or through careless handling.

This policy concentrates on the measures to prevent injury and infection that arise from:

- needles being carelessly disposed of or maliciously placed;
- injury to employees in the course of their duties, for example in home care settings

It lists some of the places where needles tend to be found and gives advice on protecting against needlestick injury and coping afterwards should an injury occur.

Scope

This policy applies to all managers and employees.

The risks

The main risk from needlestick injuries is the transfer of blood borne viruses such as Hepatitis B and C and HIV viruses. The Hepatitis viruses are more infectious than HIV. The level of risk of infection will be dependent upon:

- Whether the needle was used by a person infected with either Hepatitis or HIV viruses

Issued by the Health, Safety and Wellbeing Team, Shared Services, Unipart House, Garsington Road, OXFORD, OX4 2GQ

- How much material enters the blood-stream - a needle attached to a syringe containing blood is likely to present a higher risk than a detached needle
- Time since the needle was discarded – **The Hepatitis B and HIV viruses can survive for weeks or months if not dried out.**
- In the case of Hepatitis B, whether or not the injured person is immune, Hepatitis B vaccinations are available for those considered most at risk. There are currently no vaccinations available to prevent Hepatitis C or HIV.
- There is also a risk of tetanus, especially if the needle has been in contact with the ground.

Counselling and support

A further risk to employees suffering a needlestick injury is anxiety, therefore, the Council will ensure that confidential counselling is openly accessible through the Occupational Health Service.

Managers' Responsibilities

In order to **prevent** the risk of needlestick injuries as far as possible managers must:

Assess the risk of needlestick injuries for individual tasks

Employees who clean or service public areas are likely to be at risk as well as employees whose work involves the use of syringes and also employees working in the private homes of those who use them. Any information of previous finds and care plans should be relevant to the assessment. See the table below for those occupations identified as being at risk from carelessly discarded needles. Managers with employees in these areas should ensure that the occupational risk assessment identifies the hazard from a needlestick injury and recommends appropriate control measures to minimise the level of risk.

Instruction and training

Where contact with a discarded needle is identified as a hazard, managers must ensure that their employees are aware of the hazard, the safe system of work, the reporting procedure and any emergency procedures in the event of an injury.

Locations	People most at risk
Toilets (including sanitary bins)	Cleaners, waste handlers, people using the toilet
Litterbins	Cleansing workers
Refuse plastic sacks	Cleansing workers
Disused / empty buildings	Housing managers, surveyors, cleansing workers, fire fighters
Backyards/ alleyways	Housing managers, surveyors, cleansing workers, fire fighters
Educational Establishments/Settings	Teachers, support staff, pupils, maintenance and cleaning staff, fire fighters, visitors
Schools playing fields, playgrounds and nursery play areas	Site maintenance operatives, teachers, support staff, pupils
Parks/ Countryside workers	Grounds maintenance operatives, Rangers, members of the public
Lift shafts	Maintenance engineers

Locations	People most at risk
Sewers and gullies	Drainage operatives and cleansing workers
Public playgrounds	Cleansing, playground inspectors, children, members of the public
Care centres/ care settings	Care and ancillary workers, home support workers, service users
Libraries	Library staff, cleaners, members of the public
Anywhere where there is evidence of drug taking	Any staff and members of the public
Private homes - client's houses where syringes are used	Care workers, home support workers, service users

NB: The HSE have advised that discarded needles in children's play areas are often deliberately placed e.g. wedged in slides or in sandpits.

Managers who are responsible for the day to day use and the maintenance of playgrounds must ensure that there is a **recorded inspection regime in place**. The Council has a duty of care to protect the health and safety of the pupils and public using its facilities.

Prevent exposure wherever reasonably practicable

- Use wheelie bins instead of refuse sacks;
- Use litter picking equipment;
- Ensure people wear sturdy gloves with a high level of puncture resistance when collecting litter;
- Avoid unblocking toilets without suitable hand protection.



Control the risk in all other circumstances

Employees required to dispose of discarded needles must be trained in a safe system of work and provided with suitable personal protective equipment such as puncture resistant gloves, a sharps collection box and disposable tongs.

An incident report form (Annex 1) must be completed for each identified needlestick. A copy should remain with the Directorate involved and further copies submitted to the Occupational Health Service and Health, Safety & Wellbeing Team. **In the event of any puncture wound or other injury, complete an online incident/accident report form.**

The Health, Safety & Wellbeing Team will maintain an Accident\Incident database for the location of needlestick incidents as they are reported. In time this will enable the Council to identify those areas where individuals and groups of employees may be at greater risk and control measures may need to be reviewed.

Information for Employees

First aid treatment for needlestick injuries

1. DO NOT SUCK THE WOUND
2. Wash well under cold running water (with soap if available). **Do not rub hands**
3. Encourage the wound to bleed by gently squeezing it

4. Cover with a dry dressing
5. Make the sharp safe or notify someone trained to deal with sharps
6. Notify your line manager
7. Ask for the incident to be reported if it is an occupational injury
8. **Go to Accident & Emergency as soon as you can.** Tell A&E as much as you can about how you were injured, and why you think a needle caused the injury, show them Annex 1.

A&E may provide treatment and take blood tests after taking advice from the Local Health Protection Unit (HPU), the microbiologists at the John Radcliffe Hospital and the Infectious Disease doctors at the Churchill Hospital.

NB: A protective injection against Hepatitis B can be given but this must be done within 48 hours after the injury.

Occupational Health Service

Where an employee is injured by a discarded needle contact the Occupational Health Service who will discuss the case with the Local Health Protection Agency and the person's GP, providing details of current Hepatitis B immunisation status and records of all vaccinations.

The GP and Occupational Health Service will then provide ongoing support including confidential counselling where needed.

For further information and advice:		
	email and web addresses	
Specialist:		
Occupational Health Service	Email: occupational.health@oxfordshire.gov.uk Web address: http://intranet.oxfordshire.gov.uk/links/intranet/occupationalhealth	01865 815421
Thames Valley Health Protection Unit	Email: tvhpu@hpa.org.uk Out of hours Public Health Doctor: 0870 238 5155	0845 279 9879
Accident & Emergency Units	John Radcliffe Hospital, Oxford Headley Way, Headington, OX3 9DU Patient advice and Liaison Service: email: PALSJR@orh.nhs.uk	01865 741166
	Horton Hospital, Banbury Oxford Road, Banbury, OX16 9AL	01295 275500
Infectious diseases specialists	The Churchill Hospital, Oxford Old Road, Headington, OX3 7LJ	01865 41841
Health Protection Agency	Web address: www.hpa.org.uk	08452 799879

Oxfordshire County Council:		
H&S Training Learning & Development	email: LandD.sharedservices@oxfordshire.gov.uk	01865 797123
General:		
Health, Safety & Wellbeing Team	email: healthandsafetyhelp@oxfordshire.gov.uk web address: http://intranet.oxfordshire.gov.uk/links/intranet/healthandsafety	01865 797222
Human Resources	Web address: http://intranet.oxfordshire.gov.uk/wps/portal/insite	
Staff Care Services	Email: staffsupport@oxfordshire.gov.uk Web address: http://intranet.oxfordshire.gov.uk/wps/wcm/connect/occ/Insite/HR/Staff+Care+Services/	01865 815505