

# CARDIFF COUNCIL

## CODE OF GUIDANCE

### HANDLING AND DISPOSAL OF NEEDLES AND SYRINGES

This Code of Guidance provides advice on what to do to reduce the risk of needlestick injury and what to do in the event of an injury.

It addresses the following:

- 1.0 Definition of needlestick injury
- 2.0 Where needles and syringes have been found?
- 3.0 Employees more at risk.
- 4.0 Procedures to reduce risk of injury
- 5.0 Action on finding a syringe.
- 6.0 Action in the event of a needlestick injury.
- 7.0 Arrangements for disposal of needles and syringes

#### **1.0 Definition of Needlestick Injury**

1.1 A needlestick injury is the accidental piercing of the skin by the needle of a syringe.

- Used hypodermic needles and syringes must always be treated as being potentially contaminated.
- Should the skin be punctured or broken by a needle through careless handling or accidental contact, there is the potential for biological infection to occur, e.g. HIV/AIDS, Hepatitis B.

#### **2.0 Where needles and syringes have been found?**

2.1 Locations where needles and syringes have been found include:

- Parks / open spaces
- Public Buildings.
- Playgrounds / playing fields.
- Recreation / environmental areas.
- In litter.
- Litter bins.
- Sink U-bends.
- Bags of rubbish.
- Hedgerows.
- Public toilets.
- Drains.
- Letter box baskets.
- Ducting.
- Lift shafts.
- Vacant properties. (internal & external)

- Communal Areas (flats etc)

2.2 They have also been found concealed in:

- Cigarette packets.
- Toilet cisterns.
- Sweet papers.
- Furniture, bedding and clothing.
- Drinks cans.
- Undergrowth.
- Car seats.

### **3.0 Employees more at risk**

3.1 Certain groups of employees may be more likely to encounter potentially contaminated needles and syringes when carrying out their normal duties. These groups include:

- Street cleansing and Refuse Collectors
- Cleaners.
- Caretakers.
- Teaching staff / teaching assistants (e.g. Early Years, Foundation, Forest schools)
- Grounds maintenance personnel.
- Security personnel.
- Park rangers.
- Building maintenance staff.
- Care workers

### **4.0 Procedures to reduce risk of injury**

4.1 There is a general duty for safe systems of work to be put in place by employers in Section 2 of the Health and Safety at Work etc Act 1974. The issue should also be the subject of a suitable and sufficient risk assessment as required by the Management of Health and Safety at Work Regulations 1999. The diseases associated with used hypodermics are covered by the biological agents section of the Control of Substances Hazardous to Health Regulations 2002 (as amended).

#### **4.2 Control Measures**

- Wherever reasonably practicable, injuries must be prevented by removing the need for employees to handle or come into contact with potentially contaminated needles and syringes.
- Where an employee or group of employees have been identified as being at risk, controls must be implemented and information and instruction given to employees. These controls may include:

- i. Keeping the number of employees exposed or likely to be exposed as low as possible.
- ii. Implementing safe systems of work.
- iii. Making arrangements for the safe handling of potentially contaminated materials.
- iv. Instituting hygiene measures (washing facilities, prohibiting eating, drinking or smoking in areas where there is a risk of contamination).
- v. Providing suitable Personal Protective Equipment and other equipment.
- vi. Following risk assessment, provision of vaccination may be appropriate as a last resort. (It must be remembered that vaccinations can have side effects and do not protect against HIV) Vaccinations may be offered but an employee has a right to decline the offer.

#### 4.3 Prior to potential exposure to needles / syringes employees (more at risk) must:

- Be aware of the findings of the completed risk assessment and significant risks involved in the work.
- Have an understanding of the preventative measures in place.
- Have received appropriate personal protective equipment. e.g. gloves (puncture resistant).
- Have received appropriate equipment, e.g. tongs, sharps box, etc.
- Have received appropriate training and information on precautions, first aid measures and use of equipment, etc.
- Use equipment provided in accordance with the received training and information and as recorded on the risk assessment.
- Maintain a high standard of personal hygiene.

#### 4.4 Before starting work

If you are working in an area where it is known or likely that you will find discarded needles and syringes you must take the following precautions.

- Ensure that you have appropriate equipment readily available (sharps box, gloves, first aid kit, etc.)
- Check your skin and cover any cuts and abrasions with a waterproof covering (e.g. waterproof plaster).
- Broken skin on your hands (e.g. eczema) can be covered with waterproof gloves.
- Wear appropriate Personal Protective Equipment
- Look for needles in the area you will be working.
- But DO NOT use your hands to feel for needles.

#### 5.0 Action on finding a syringe.

- If needles **have** to be picked up, they should be picked up: (in order of preference)

- with a pincer tool (tongs/litter picker/'helping hand'),
  - shovels, dustpans/gloves or tweezers, be aware that if you use a hand brush to guide a syringe onto a shovel or dustpan, the bristles may flick the syringe making it airborne and potentially cause it to stick into the hand.
  - or where necessary by gloved hand (anti-syringe gloves).
- Never attempt to re-sheath needles.
  - Dispose of and store needles in an approved 'sharps box'. In exceptional circumstances where there is an immediate danger to vulnerable people (e.g. children's playground) and a sharps box is not available a rigid container (e.g. drinks can or glass bottle) may be used for the temporary collection (but not storage) of needles.
  - Always take the sharps box to the needle, not the needle to the sharps box.
  - Place the sharps box on an even surface and open the sharps box before transporting the needle.
  - If the needle has to be picked up by hand always pick it up by the blunt end (the plastic fitting where it is fixed onto a syringe). If there is more than one needle, pick them up carefully one at a time.
  - Do not overfill sharps boxes. When  $\frac{3}{4}$  full, sharps containers must be sealed and disposed of as hazardous waste via a licensed hazardous waste carrier.
  - Ensure that your line manager is informed as soon as possible of any needles and syringes that you find.

NB City Services ( Waste Management ) **do not** provide a collection and disposal service for "sharps boxes".

## 6.0 Action in the event of a needlestick injury.

### 6.1 What to do if you are injured by a needle

- Encourage the wound to bleed for 1 to 2 minutes by squeezing the area of the wound. DO NOT suck the wound.
- Wash the area of the injury with soap and water. If soap and water is not available, the alcohol-free cleansing wipes provided in first aid kits should be used to wipe away any blood.
- Cover the wound with a plaster.
- Keep the needle/syringe in a suitable container and take to the Accident and Emergency Department.

### 6.2 Follow up actions

- Immediately inform your manager of any needlestick injury and complete an Employee Accident/Dangerous Occurrence Reporting Form. (4.C.043).
- The manager will need to ensure that the individual who sustained the needlestick injury completes a Blood Borne Infection – Potential Exposure Record (1.CM.179). This form will need to be taken to the Accident and

Emergency Department for medical information to be recorded and then forwarded to the Council's Occupational Health Service.

- Your manager will arrange for you to attend the Accident and Emergency Department of the University of Wales Hospital. You should attend the hospital within 12 hours of exposure. The Accident and Emergency Department can provide post exposure immunisation if it is deemed appropriate.
- The retained needle/syringe (in a suitable container) should be taken to the Accident and Emergency Department for testing.
- Counselling and advice will also be offered to you via the Council's Occupational Health Service.
- The line manager should investigate the incident, to identify how further needlestick injuries can be prevented.
- Under certain circumstances the manager will need to ensure that the incident is reported to the Health and Safety Executive under RIDDOR, refer to Code of Guidance – Accident Reporting (1.CM.012) for advice on reporting to HSE.

## **7.0 Arrangements for Disposal of Needles and Syringes**

7.1 Appropriate arrangements must be made with a **Licensed Hazardous Waste Carrier** for the disposal of sharps containers.

7.2 Any licensed carrier used must be listed on the Council's Corporate Supplier Directory.

7.3 Sharps containers must be kept in a secure location until collection is undertaken.

### **Further information:**

Blood Borne Infections Potential Exposure Procedure and Record (1.CM.179)  
Code of Guidance - Vaccinations/Immunisations against Infectious Diseases (1.CM.183)

Health and Safety Advisers, Corporate Services 029 2087 2635  
Occupational Health Service 029 2078 8546