

Section 4.13

Needle Stick and Body Fluids Safety

1. Purpose

The purpose of this procedure is to provide guidance on the safe handling of Needlestick and body fluids

2. Scope

The procedure applies in all high risk situations, which involve the handling, cleaning or inspection of body related substances including such activities as administering immunisations, animal handling, cleaning of public facilities, refuse management and premises inspections in all Council workplaces.

3. References

1. Occupational Health and Safety Act 2004
2. Code of Practice First Aid in the Workplace.
3. Immunisation Clinics – Prevention of Needlestick Injury

4. Responsibilities

Manager/Supervisor

Managers/Supervisors shall ensure that this procedure is implemented in all of the Council's workplaces:

- that workplace inspections are undertaken during specified periods using the **Workplace Inspection Checklist** (refer Section 3.06, *Hazard Identification Attachment 3*) to identify any workplace hazards;
- that a **Risk Assessment** (see 6.3) is undertaken of any identified hazards;
- To provide Immunisation to employees in high risk work areas.

Employees

Employees shall follow instruction in accordance with this procedure.

5. Definitions

Body substances – any substance (human or animal) that has the capacity to transmit infectious diseases and includes blood, sputum, semen, vomit, oral secretions, spinal fluid, urine and faeces.

Needlestick – an injury caused by a sharp implement where foreign body substances have penetrated the external layers of skin and includes:

- contamination by foreign body substances entering the external layers of skin as a result of an open cut or wound



- any method of transmittal of foreign substances through the external layers of skin, through eyes, through inhalation and/or ingestion

6. Method

General

All needles/blood spills/infectious waste must be treated as high risk and all body substances are potentially infectious and should be treated with appropriate safety precautions.

Employees working in high risk situations are encouraged to be immunised for Hepatitis B.

Safety Equipment

Employees working in high risk situations or in any situation involving exposure to body substances must have ready access to appropriate safety equipment including:

- gloves
- tongs
- disposable aprons
- safety goggles
- infectious waste bags
- “sharps” containers.

The location of “sharps” containers should be clearly displayed near all First Aid Kits.

Needlestick Hazard Removal

Where a syringe/needle has been located in the workplace, the following steps must be observed:

- (i) obtain a small “sharps” container, tongs, eye protection and gloves
- (ii) take the “sharps” container to the syringe/needle
- (iii) using the tongs pick up the needle by the blunt or barrel end and place the sharp end first into the container

DO NOT attempt to recap or bend the needle.

DO NOT touch the sharp end of the needle.



Examining High Risk Facilities

Employees involved in the examination or cleaning of high risk facilities (public or private) should have access to appropriate equipment, including suitable Personal Protective Equipment (PPE), including safety footwear.

Employees working in high risk areas must take appropriate care to minimise or preclude the possibility a needlestick injury or exposure to body substances occurring.

Reporting

All incidents involving body substances or needlestick accidents must be notified to the Human Resources Officer and an **Accident Report Form** must be completed. (Refer Section 3.07 – *Accident/Incident Reporting and Investigation*)

Protection/Prevention

Skin integrity should be maintained at all times with any breaks of the skin (cuts, scratches, abrasions etc) should be covered with a waterproof dressing prior to commencing work.

Care must be taken when using sharp instruments and equipment, which may penetrate or cause a break in the person's skin.

Good hygiene and infection control practices are all that is required to prevent the spread of infection.

Immunisation will be available to employees in high risk work areas and will be coordinated by the Council's Human Resources Officer. Such immunisation will be paid for by the Council. New employees in high risk work areas will be offered immunisation during the Induction process.

Other immunisation will be considered for approval by the OH&S Committee following a review and consideration of the circumstances.

7. Related Documents

1. Section 3.07, *Accident/Incident Reporting and Investigation*
2. Section 3.06, *Hazard Identification*
3. Section 4.16, *Alcohol and/or Drugs*

8. Attachments

1. Immunisation Clinics - Prevention of Needlestick Injury



IMMUNISATION CLINICS – PREVENTION OF NEEDLESTICK INJURY

It is a requirement of the Occupational Health & Safety Act that all persons in a work place be Informed, supervised, instructed and trained in the work they are performing.

The purpose of this document is to make persons working in the Council's Immunisation Clinics aware of precautions to be observed to prevent needle-stick injury whilst immunizing persons in a public clinic situation.

1. Be aware that some adults and older children you are consulting may be in a state of stress. It is important to maintain a calm composure at all times.
2. To prevent congestion in the area where immunisations are administered, staff not actively involved in administering the immunisations should not enter the area.
3. Members of the family of the child being immunised may be present in the area where the immunisations are administered. Be aware of the presence of those persons and if you believe they pose a danger discuss with another staff member ways to minimize the danger.
4. Where it is necessary to pass syringes with needles attached from one person to another the first person should place the syringe on a tray and then pass the tray to the next person.
5. Where two staff are immunising one on either side of a child ensure that two disposable containers are provided, one for each staff member, in a location that a staff member holding a syringe does not cross the path of the other person to reach the disposable container.
6. Ensure that other staff has their hands clear of the disposable container when placing used syringes in the container.
7. Children up to twelve months of age will generally be adequately restrained by the person holding the child. Be aware that any child may make a sudden movement whilst the vaccine is being administered. To minimise injuries in this situation it is suggested that the vaccine be administered with one hand and the other hand be used to hold the limb receiving the vaccine. .
8. Be aware that children in the four year and older group are more likely to make sudden or spontaneous type movements whilst the vaccine is being administered. Be prepared to take evasive action by way of with drawing the needle away immediately if the child struggles.
9. Do not proceed with the immunisation of any child or person if you have any doubts about your ability to administer the vaccine in a manner that is safe to yourself and the child or person.
