Appendix 4

Control of Substances Hazardous to Health Regulations 1989 (COSHH)

General rules for Primary care personnel.

The control of substances hazardous to health regulations 1989 (COSHH), were established to make employers consider more carefully the health problems caused by work activities.

Therefore an employer should not carry out any work which is liable to expose employees to any substances hazardous to health unless:

- They have made a suitable and sufficient assessment of the risks created by the work to the health of those employees.
- Documented the steps needed to be made to reach the requirements of these regulations.

For primary care personnel undertaking laboratory procedures the following SOP has been produced to ensure safe practice and adherence to the COSHH regulations.

Deification of any substances hazardous to patients or researchers

- Whole blood – patients samples – risk of needle stick injury to researchers
- Lyophilised plasma samples – risk of contamination onto skin, eyes and mouth

Potential Hazard

Contact with dangerous micro-organisms including Hepatitis B and HIV

Instructions to protect researchers and patients

- No eating or drinking in the area where blood test or quality control procedures are being performed.
- Ensure that any cuts or grazes on hands are covered by a waterproof dressing.
- Patients must wash and dry hands thoroughly prior to performing finger prick blood test.
- If assisting patients with finger prick blood test one should wear protective gloves to avoid contact with the patients blood.
- Change protective gloves and wash hands between patients to ensure no contamination between patients.

Cleaning, Storage and Disposal

- Any spillages of blood must be cleaned up immediately.
- All tissues / cotton wool used to clean up blood should be disposed of in a clinical waste bag.
- All used sharps must be disposed of immediately in the sharps bins provided.
- All test strips should be disposed of in the sharps bin provided.
- All EQA equipment including used pipettes and glass vials should be disposed of in the sharps bin.
- All surfaces used for training should be washed down at the end of each training session.
- All sharps bins should be locked shut when the contents reach the manufacturers recommended level.
Emergency procedures for needle-stick or contamination injuries

**These include:**
- Puncture of the skin with a dirty needle
- Exposure to blood or blood product through cuts or breaks in the skin.
- Splashes of blood or blood products in the eye or mouth. E.g. during pipetting of human plasma (EQA)

**For a Wound**
- Encourage bleeding by gently squeezing the site. **DO NOT SUCK.**
- Wash in warm running water with soap for at least three minutes and dry.
- Apply a waterproof dressing.

**For a Splash in the Eye**
- Irrigate thoroughly for at least five minutes with eyewash or sterile water if available (if not available use tap water). Remove contact lenses.

**For a Splash in the Mouth**
- Irrigate thoroughly for at least five minute with drinking water. Do not swallow this water.

All of the above injuries should be reported to:

- Health & Safety Officer, using an Accident / Information report form, Line Manager.
- If patient is known to be HIV or Hepatitis B positive contact an Occupational Health adviser immediately for advice.
- All Primary Care Personnel must be immunised for Hepatitis B. If unsure of current status with regard to Hepatitis B, the Occupational Health Adviser should be contacted for advice.