



# POLICY FOR THE PREVENTION OF INJURY BY SHARP INSTRUMENTS AND USE OF SAFETY DEVICES

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## Executive Summary

### Key Messages

- NHS Lothian recognises its responsibilities under Health and Safety Legislation and the duty to protect, so far as reasonably practicable, all patients, employees, contractors, students and pupils on placements, voluntary workers and visitors as well as members of the public from injury, resulting from inappropriate use or disposal of 'sharps'.
- NHS Lothian is committed to taking steps, as far as is reasonably practicable, to ensure the prevention of sharp injuries.
- Due to the wide distribution of sharps across NHS Lothian, this policy must be made available to all staff
- The use of 'safety devices' will be kept under review by the Health and Safety Committee taking forward further implementation based on the cost effectiveness and Risk Assessment process
- NHS Lothian will ensure that there is in place a Risk Assessment process to prevent/reduce the likelihood of sharp injuries
- All staff are accountable for their own actions and must follow all 'policies' and procedures designed to ensure safer ways of working including actions to prevent sharp injury which include the use of safety devices. Should a clinician or other user decide that other risk factors such as patient safety, comfort or clinical procedures outweigh the use of the safer device then they must conduct a risk assessment and record the agreement to detract from using the safety device.

### Minimum Implementation Standards

- Compliance with 'The Health and Safety (Sharp Instruments In Healthcare) Regulations 2013
- Department Heads will assess the policy for relevance to their staff groups
- Learnpro modules –  
NES: Needlestick Injury;  
Mandatory update - Occupational Health, Health and Safety, Infection Control

### Terminology

- "Medical Sharp" means an object or instrument which is used for carrying out activities specific to healthcare and which is able to cause injury by means of cutting or piercing the skin – The Health and Safety (Sharp Instruments In Healthcare) Regulations 2013
- 'Safety Device' means a device which has been safety engineered and are known generically as safer needle devices or safety devices. These have a built-in safety feature to reduce the risk of sharps injury before, during or after use. Devices can be passive or active. Passive devices have an automatic mechanism that is activated after use. Active devices need to be manually activated by the member of staff

## **Legislation and Standards**

This Policy was prepared for publication in January 2015. After this date, readers must ensure that they use the latest relevant legislation

Existing Health and Safety Legislation requires employers to protect workers from the risk of injury from medical sharps and exposure to biological agents:

- The Health and Safety at Work Act (1974)
- The Health and Safety (Sharp Instruments In Healthcare) Regulations 2013
- Control of Substances Hazardous to Health Regulations (2002)
- Management of Health and Safety at Work regulations (1999)
- Personal Protective Equipment at Work Regulations (1992)
- Provision and Use of Work Equipment Regulations (1998)
- Reporting of Injuries, Diseases and Dangerous Occurrences (2013)

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## **1.0 Introduction**

On the 10th May 2010 a European Directive was introduced to prevent injuries and blood-borne infections to hospital and healthcare workers from sharp instruments such as needles.

Member states, including the UK had until 11<sup>th</sup> May 2013 to ensure that the provisions of the Directive have been implemented into national legislation.

The directive states that where prevention of exposure is not possible, the risk must be minimised through:

- Keeping the number of workers likely to be exposed as low as possible
- The design of work processes and use of engineering control measures to avoid or minimise the release of biological agents into the workplace

NHS Lothian has introduced safety sharp devices across all its sites, with the aim to continue with replacement of sharps with safety devices.

The Management of Health and Safety at Work Regulations 1999, in accordance with the Health and Safety at Work Act 1974, include duties for people in control of workplaces to assess the risks associated with workplace environments or tasks. They require appropriate arrangements for effective planning, organisation, control, monitoring and review of any measures to safeguard health and safety. The Control of Substances Hazardous to Health Regulations, 2002 (as amended) also require that an employer must make a suitable and sufficient assessment of risk created by the work involving substances hazardous to health, in this instance, exposure to blood and blood borne virus.

## **2.0 Aim of the Policy**

2.1 All aims as stated in NHS Lothian Health and Safety Policy, where NHS Lothian recognises its responsibilities under The Health and Safety (Sharp Instruments In Healthcare) Regulations 2013 and the duty to provide, so far as is reasonably practicable, working environments that are safe and healthy for all employees, contractors, voluntary workers, visitors and members of the public.

## **3.0 Scope of the Policy**

3.1 This policy applies to All NHS Lothian staff and to all individuals providing services on behalf of NHS Lothian. It applies to NHS staff working on both NHS property and property that is out with the remit of NHS Lothian, during the course of their undertakings.

## **4.0 Responsibilities and Organisational roles**

4.1 The over arching Health & Safety Policy for the organisation sets out the roles and responsibilities for NHS Lothian employees.

Additional responsibilities to enable the effective management of prevention of Sharp injuries are detailed below:

#### 4.2

Action	Persons Responsible
Receive assurance that the policy is appropriately implemented – internal audit, compliance system.	NHS Lothian Board
Ensuring that there are arrangements for identifying, evaluating and managing the risks associated with preventing /reducing Sharp Injuries	NHS Lothian Board
Review implementation process of safety devices across NHS Lothian and continue to support the replacement of sharp instruments with safety devices where reasonably practicable	NHS Lothian Board

#### 4.3

Action	Persons Responsible
Ensuring that there are arrangements for identifying, evaluating and managing the risks associated with preventing /reducing Sharp Injuries	NHS Lothian H&S Committee
Ensuring that incidents relating to deviation from use of safety devices are monitored and investigated by the Health and Safety Committees	NHS Lothian H&S Committee
Review the effectiveness of this policy on three yearly basis or if change in legislation or if issues identified in audit process	NHS Lothian H&S Committee
Ensure compliance with the Sharps Performance Standard (Appendix 4) evidenced by Senior Managers/Chief Nurses	NHS Lothian H&S Committee

#### 4.4

Action	Persons Responsible
Ensuring that all Managers are aware of this policy and the requirements within it	Senior Manager/Chief Nurse
If required, ensure that all Managers complete the opt out Risk Assessment for use of safety devices and sign off achieved by Chief Nurse/Medical Director.	Senior Manager/Chief Nurse
Ensuring the implementation of risk reduction strategies/procedures for eliminating sharp injuries and ensuring the processes are in place to monitor the effectiveness of such	Senior Manager/Chief Nurse
Ensuring that all aspects of NHS Lothian's Adverse Event Policy are implemented	Senior Manager/Chief Nurse
Promoting the implementation of post incident support strategies/procedures such as Post Exposure Prophylaxis (P.E.P.) and Counseling service.	Senior Manager/Chief Nurse

#### 4.5

Action	Persons Responsible
Ensuring that all Staff are aware of this policy and the requirements within it	Departmental Manager/CNM/CN/CM
When appropriate, completing Risk Assessments for opt out of safety devices specific to task and staff group within their department, involving both staff and Nominated Staff Side Partnership Representative in the process. With sign off from Chief Nurse/Clinical Director.	Departmental Managers/CNM/CN/CM
Implementing risk reduction controls identified as a result of risk assessment and ensuring that these controls are monitored and reviewed	Departmental Managers/CNM/CN/CM
Completing six monthly sharps audit as per infection control matrix	Departmental Managers /CN/CM
Completing question set in relation to Sharps use and disposal on PQI audit sheet	Departmental Managers/CNM/CN/CM
Communicating the results of Risk Assessments to ensure that staff are fully aware of the Hazards identified as a result of these and ensuring these assessments are monitored and reviewed	Departmental Managers/CNM/CN/CM
Ensuring that reports relating to the deviation of use of safety, including risks associated with particular locations, activities, patients and members of the public are recorded and communicated to others who may be exposed to the same risk	Departmental Managers/CNM/CN/CM
Implementing all aspects of NHS Lothian's Adverse Event Policy and ensuring that all incidents relating to sharps are reported using the Datix System and investigated in accordance with policy	Departmental Managers/CNM/CN/CM

#### 4.6

Action	Persons Responsible
Taking reasonable care of themselves, and any other people who may be affected by their actions	All staff/employees
Following all 'policies' and procedures designed to ensure safer ways of working including actions to prevent sharp injury (Appendix 1)	All staff/employees
Contribute to the risk assessment process and complete any training relating to minimising exposure to sharp injury	All staff/employees
Report all incidents and near misses that may affect the health and safety of themselves or others using the Datix system in line with the Adverse Event policy	All staff/employees

Report any hazards they identify or any concerns they might have in respect of the use and handling of sharps including risks associated with particular locations and activities	All staff/employees
Comply with the controls identified within the Risk Assessment, including wearing the identified Personal Protective Equipment (PPE)	All staff/employees
Complete learnpro modules to increase awareness and understanding of sharps injuries	All staff/employees

## 5.0 Risk Assessments

Managers within NHS Lothian will complete Risk Assessment to prevent deviation from use of safety devices following the steps below:-

### Step 1 Identify the Hazards

By considering the hazardous properties of contaminated sharps and the likelihood of them containing a blood borne virus and other contaminants. Guidance is available from sources such as the NHSL Health and Safety Intranet site and HSE website (see related documents). By considering those tasks that involve the use and handling of sharps, including clinical and non-clinical activities/tasks.

### Step 2 Decide who might be Harmed and How

By considering who will be involved in the use of sharps, the environments in which sharps are used or handled, including methods of transportation, methods of disposal of sharps, etc. as to whether individuals and/or others are at risk.

### Step 3 Evaluate the Risk

By considering the precautions already in place and assessing whether they adequately deal with the risks.

### Step 4 Record the Findings

Using NHS Lothian Risk Assessment process and form.

### Step 5 Review Assessments

If there is any significant change or otherwise, the risk assessment must be reviewed to evaluate whether precautions are still adequate. Assessments must always be reviewed after an incident involving sharps.

## 5.1 Opting out of using Safety Devices

The form in Appendix 3 must be completed and submitted to the Health and Safety Department, once signed off by Medical Director/Chief Nurse for service. It **must** be submitted electronically.



## **6.0 Risk Reduction Controls**

6.1 Following an assessment of the risks, risk reduction controls must be implemented where possible to reduce the likelihood and/or severity of incidents resulting from exposure to contaminated sharps.

6.2 Risk Reduction controls should be based on having in place effective and efficient systems of control, communication, competence and cooperation:

### **Control includes;**

- Risk assessment - site and staff group specific
- Safe Working Practice (Appendix 1)
- Review risk assessments after reports of sharps incident

### **Communication includes;**

- Tool box talks/Safety Briefing on Medical Sharps
- Policy awareness and legislative compliance
- Risk assessment and procedure awareness
- Benefits of vaccination – NHS Lothian Working with Blood Borne Viruses Policy
- Use of staff counselling service, if indicated
- Evaluating effectiveness of risk reduction controls

### **Competence:**

- Training – to include awareness of the risk to person, safe procedure for use and disposal; reporting of injuries. Learnpro modules to be completed by all staff as listed in Related Documents (Section 9). Nursing Clinical Staff - Use of equipment – provided by Practice Education Facilitators (P.E.F.'s). Records of this training certified and held in personal files

### **Cooperation**

- Review the approach in the light of experience by looking at adverse event investigation and inspection reports. Discuss exposure risks with safety representatives. Investigation, in partnership, reviewing current practice and procedures.
- Re-train staff if required and read available policies and strategies/procedures
- Assist in trials of new products, set up by procurement
- Consult with others that share premises with NHS Lothian

## **7.0 Reporting and Monitoring**

### **Reactive**

7.1 All incidents (including near misses) must be reported using the Datix system in line with NHS Lothian Adverse Event Policy (see related documents). If the source is known and from a high risk group (a carrier of a Blood Borne Virus), this **must be** reported to the HSE under RIDDOR.

7.2 Line managers must ensure that a review and investigation of sharp exposure incidents is carried out and recorded. Harm to staff incidents will be investigated as a significant adverse event as per the Adverse Event Policy and Procedure.

7.2 In order to ensure the implementation and effectiveness of this policy and associated local controls, local statistics and incident reports should be reviewed regularly by relevant management groups and H&S Committees.

7.3 All accidents and incidents are monitored by the local Health and Safety Committees; any sharp incidents, which are not deemed to have been managed appropriately are subject to further investigation by these Committees. Sharp incident trends are monitored by the NHS Lothian Health and Safety Committee.

### **Proactive**

7.4 Each Clinical area completes a self audit of sharps for their area and submits electronically every six months as per the infection control matrix.

7.5 As part of the Healthcare Environmental Inspection audit.

7.6 Managers/Charge Nurses will undertake monitoring of tasks where Sharps are involved to ensure compliance with procedures – PQI audit.

## **8.0 Audit**

The effectiveness of this policy across the organisation will be undertaken

- By the H&S team, during the audit process, as per NHS Lothian Health and Safety Action Plan. Areas identified as High Risk were targeted for this snap shot audit in quarter 3, 2014. Further future audits will occur as appropriate.
- By site committees reporting into the NHS Lothian Health and Safety Committee as part of the Quarterly review process. (Appendix 2 demonstrates the question set used at department level).

## **9.0 Review**

The Director of HR/OD in conjunction with the Director of Occupational Health and Safety and the Head of Health and Safety will review this policy every 3 years or following any significant change and recommend changes as required to the NHS Lothian Health and Safety Committee.

## **10.0 Related Documents**

1. The Directive is published in the Official Journal of European Union
2. NHS Lothian Working with Blood Borne Viruses Policy
3. Public Health Response For Incidents Involving Potential Exposure to Blood borne Viruses through Needlestick Injuries and other Non- sexual exposures (SOP)
4. Eye of the Needle – DoH report – December 2012
5. NHS Lothian Adverse Event Policy and Procedure
6. NHS Lothian Infection Control Audit tool – Sharps
7. NHS Lothian Waste Management Policy
8. Health and Safety (Sharp Instruments in Healthcare) Regulations 2013 Guidance for Employers and Employees (HSE Information Sheet 7)

This policy will be accessed from the Intranet available on

- Health and Safety home page;
- Prevention of Infection home page

## **11.0 Equality and Diversity**

This policy was reviewed by the Head of Equality & Diversity to assess whether there was any likelihood of equality impacts and none were identified, therefore no equality impact assessment is required. Health and Safety issues are a concern for all staff and groups of users of NHS Lothian's services and premises. The equality & diversity page on the intranet includes a wide range of information about the issues and how these might be addressed: Consideration must be given to particular groups who may be affected by more local policies and procedures.

## **12.0 References/bibliography**

1. Lothian Health and Safety Website/health and Safety Homepage: Estates and Facilities Alert. Ref: EFA/2013/001  
Department of Health January 2013
2. HSE website: [www.hse.gov.uk](http://www.hse.gov.uk)  
Blood-borne viruses in the workplace - Guidance for employers and employees (HSE leaflet INDG342)  
Biological agents: Managing the risks in laboratories and healthcare premises (Advisory Committee on Dangerous Pathogens)  
Safety in Health Services Laboratories: Safe working and prevention of infection in clinical laboratories (HSC Health Services Advisory Committee)
3. World web  
Sharps safety. RCN guidance to support implementation of the EU Directive 2012/32/EU n the prevention of sharps injuries in the health care sector
4. European Biosafety Network: Toolkit for the Implementation of European Directive on Prevention of Sharp Injuries (Council Directive 2010/32/EU) in member states (2010)

## APPENDIX 1. SAFE WORKING PRACTICE

These can be divided into 3 stages

### Prior to Use

- Follow correct method to ensure safe clinical practice when assembling the sharps bin – bin must comply with British Standard BS7320.
- Ensure that date of assembly and name of assembler is clearly identified on the sharps bin
- Ensure sharp bins are situated in suitable locations
- Ensure there are adequate sharps bins of appropriate sizes in your department
- Choose the safest device in relation to the task to be undertaken Use needle less/safety devices where appropriate - – if not using a Safety device, the department must complete a Risk Assessment to demonstrate controls in place to reduce risk to staff.
- Always take the sharps bins to the point of use and place it on a hard surface
- Always keep sharps bins out of the way of children and other vulnerable people

### During Use

- Wear appropriate Personal Protective Equipment – non latex gloves, apron
- Carefully assemble the device to be used
- **Do not** bend needle
- **Do not** resheath needle
- Use tray system to carry sharps devices
- **Do not** use foil/cardboard trays
- Never carry sharps in your hand or pocket
- Activate temporary closure mechanism on sharps bin between use
- Never move an open sharps bin
- Always carry the sharps bin by the handle
- Be especially careful of sharps risks during emergency procedures
- Never overfill sharps bins
- Never try to retrieve anything from a sharps bin

### After Use

- Safe disposal of sharp is the responsibility of the user
- Dispose of sharps directly into a sharps bin **at the point of use**
- Dispose of sharps bins when  $\frac{3}{4}$  full or when sharps bin is a month old following the date of assembly. Lock securely
- Date and signature on closing must be completed on sharps box
- When ready for disposal, the sharps bin is ratchet tagged
- Dispose of sharps bin securely as per waste management policy/procedure
- The porter/transport driver **will not** uplift any sharps containers which do not have appropriate boxes completed or if not sealed.

**APPENDIX 2  
 QUESTION SET TAKEN FROM HEALTH AND SAFETY MANAGEMENT  
 QUARTERLY REVIEW PROCESS, QUARTER THREE 2014**

<b><i>Clinical Sharps</i></b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<i>Have you undertaken a risk assessment on the use of clinical sharps?</i>			
<i>Have the risk assessment findings been communicated to all staff?</i>			
<i>Are staff aware of and using clinical sharps procedures?</i>			
<i>Are all clinical sharps safety devices?</i>			
<i>If you stated 'no' to any question, please expand here:</i>			

**To be completed by H&S**

RA database reference number:

**RISK ASSESSMENT FOR THE USE OF NON SAFETY SHARP DEVICES**

**Site:**

**Department:**

**Name and Designation of Applicant:**

Once Risk Assessment is completed in full, please complete this proforma on line and submit electronically to:  
[healthandsafety.service@nhslothian.scot.nhs.uk](mailto:healthandsafety.service@nhslothian.scot.nhs.uk)

Risk Assessment undertaken on behalf of: specific team department procedure

Please mark X against all that apply and describe fully below:

*Description of team, department, procedure*

*Please explain the rationale that the clinical procedure/risk to patient outweighs the reduction of risk to staff and others by employing safety engineered sharps*

*Make and model of safety engineered sharp device supplied for use by NHS Lothian*

*I am aware of 'The Health and Safety (Sharps Injuries in Healthcare) Regulations 2013*  
<http://www.legislation.gov.uk/ukxi/2013/645/contents/made> Yes/No

*I am aware of NHS Lothian Policy for the Prevention of Injury by Sharp Instruments and Use of Safety Devices Yes/No*

*Name of Clinical Director or Clinical Nurse Manager for Service:*

*Signature of Clinical Director or Clinical Nurse Manager for Service:*

*Date:*

*Name of H&S Partnership Representative:*

*Signature of H&S Partnership Representative:*

*Date:*



## Hazardous substances

Management of sharps Performance Standard.			
Standard	Employers have effective arrangements in place to manage the risks from sharps injuries. This should be read in conjunction with the hazardous substances standard.		
Rationale	Sharps injuries are a well-known risk in the health and social care sector. Sharps contaminated with an infected patient's blood can transmit more than 20 diseases, including hepatitis B, C and human immunodeficiency virus (HIV). Because of this transmission risk, sharps injuries can cause worry and stress to the many thousands who receive them.		
Legal Reference	The Health and Safety at Work etc Act 1974 The Management of Health and Safety at Work Regulations 1999 Control of Substances Hazardous to Health Regulations 2002 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 Health and Safety (Sharps Instruments in Healthcare) Regulations 2013 (Sharp Regulations)		
Criteria	Evidence	Legal References	Observations
The organisation has suitable sharps management policies and procedures in place.	Policies and procedures	Management of Health and Safety at work Regulation 1999, Regulation 10	
Suitable and sufficient risk assessments have been completed.  These risks are reflected in the corporate and local risk register.	Risk register Generic and local risk assessments Local procedures	Control of Substances Hazardous to Health Regulations 2002, Regulation 6  Management of Health and Safety at work Regulation 1999, Regulation 3	

Management of sharps			
Criteria	Evidence	Legal References	Observations
<p>The organisation has taken steps to prevent or adequately control exposure to substances hazardous to health using risk hierarchies.</p> <p>Specific consideration is given to the additional risk controls including:</p> <ul style="list-style-type: none"> <li>• when sharps are used at work, safer sharps are used so far as is reasonably practicable</li> <li>• needles must not be recapped unless risk assessment has identified risks of not recapping are greater than recapping</li> <li>• if recapping is assessed as necessary the risk of injury is effectively controlled by use of a suitable appliance, tool or other equipment</li> <li>• clearly marked and secure containers are placed close to where sharps are used.</li> </ul>	<p>Risk assessments                      Procedures / systems of work                      Risk registers                      Training                      Internal / external audit reports</p>	<p>Health and Safety (Sharps Instruments in Healthcare) Regulations 2013, Regulation 4</p> <p>Control of Substances Hazardous to Health Regulations 2002 Regulation 7</p> <p>Management of Health and Safety at Work Regulations 1999, Regulation 3,4 and 5</p>	



Management of sharps			
Criteria	Evidence	Legal References	Observations
<p>Information, instruction and training is provided to those likely to be exposed to a risk of injury from a sharps instrument.</p> <p>Schedule 1 &amp; 2 of the Sharps Regulations must be followed.</p>	<p>Policies and procedures</p> <p>Training syllabus</p> <p>Training records</p>	<p>Health and Safety (Sharps Instruments in Healthcare) Regulations 2013, Regulations 4(d)(1) 5(1)</p> <p>Management of Health and Safety at Work Regulations 1999, Regulation 10 and 13</p>	
<p>There is a sufficiently robust system in place to allow employees to report incidents.</p> <p>Employee training includes the requirement for them to report all sharps injuries as soon as reasonably practicable.</p>	<p>Reporting systems</p> <p>Monitoring of incidents</p>	<p>Health and Safety (Sharps Instruments in Healthcare) Regulations 2013, Regulation 7</p>	
<p>When informed of a sharps injury the organisations has arrangements in place to:</p> <ul style="list-style-type: none"> <li>• record the incident</li> <li>• investigate the circumstances and cause</li> <li>• take any necessary to prevent recurrence.</li> </ul>	<p>Recording documents</p> <p>Investigation reports</p> <p>Review of assessments</p>	<p>Health and Safety (Sharps Instruments in Healthcare) Regulations 2013, Regulation 6(1)</p>	

Management of sharps			
Criteria	Evidence	Legal References	Observations
<p>The organisation provides appropriate treatment and follow-up after a sharps injury. This includes:</p> <ul style="list-style-type: none"> <li>• immediate access to medical advice</li> <li>• offered post-exposure prophylaxis</li> <li>• considering providing counselling.</li> </ul>	<p>Policies and procedures Monitoring of incidents</p>	<p>Health and Safety (Sharps Instruments in Healthcare) Regulations 2013, Regulation 6(2)</p>	
<p>Procedures to control the risks are reviewed at suitable intervals to ensure their continuing effectiveness</p>	<p>Staff meetings Health and safety committee</p>	<p>Health and Safety (Sharps Instruments in Healthcare) Regulations 2013, Regulation 4(2)</p>	
<p>The organisation consults and involves staff and safety representatives at all stages of risk assessment, planning and implementation.</p>	<p>Risk assessments meeting minutes Safety Reps documentation</p>	<p>Health and Safety (Sharps Instruments in Healthcare) Regulations 2013, Regulations 5(2) &amp; 5(3)</p> <p>Management Health and Safety at Work Regulations 1999</p> <p>Safety Representatives and Safety Committees Regulations 1977</p>	
<p>There is regular monitoring of compliance with the sharps policy and procedures.</p>	<p>Inspection reports Staff meetings</p>	<p>Management of Health and Safety at Work Regulations 1999, Regulation 5</p>	

### Management of sharps – Further guidance: Regulations, Approved Code of Practice and Guidance

- [The Control of Substances Hazardous to Health Regulations 2002 \(as amended\)](#) – Approved Code of Practice and guidance
- [Health and Safety at Work etc Act 1974](#)
- [Management of Health and Safety at Work Regulations 1999](#)
- [Health and Safety \(Sharps Instruments in Healthcare\) Regulations 2013](#)

### HSE guidance

This is a short list of some of the guidance available from HSE, for more information visit HSE's website on Management of sharps

- [Health and Safety \(Sharps Instruments in Healthcare\) Regulations 2013 – Guidance for employers and employees](#)
- [Blood-borne viruses in the workplace - Guidance for employers and employees.](#)
- [Biological Agents: Managing the risks in laboratories and healthcare premises: Advisory Committee on Dangerous Pathogens.](#)
- [Safety in Health Services Laboratories: Safe working and prevention of infection in clinical laboratories](#)

### General guidance

- [Guidance for Clinical Health Care Workers: Protection Against Infection with Blood-borne Viruses; Recommendations of the Expert Advisory Group on AIDS and the Advisory Group on Hepatitis.](#)
- [The Health and Social Care Act 2008: Code of Practice for health and adult social care on the prevention and control of infections and related guidance](#)
- [EU Directive Council Directive 2010/32/EU \(2010\) Implementing the Framework Agreement on Prevention from Sharps Injuries in the Hospital and Healthcare Sector Concluded by HOSPEEM and EPSU. Official Journal of European Union](#)
- [Health Protection Agency. Blood Borne Viruses and Occupational Exposure](#)
- [NHS Employers Health and Safety Essential Guides](#)
- [European Bio Safety Network Toolkit](#)