



Acacium Group

Needlestick Injury Acute Setting

Procedure Reference | SOP INF CONT 10

Version | v2.0

Procedure Name	Needlestick Injury Acute Setting
Purpose of Document	To ensure all Acacium Group healthcare workers are aware of safe practice principles when using sharps and how to proceed if a sharps injury occurs.
Target Audience	All Acacium Group workers in the Acute setting
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Equality Impact Assessment (EIA) Form	Acacium Group is committed to Equality, Diversity and Inclusion and in line with our values, we strive to ensure that everyone that is part of the Acacium community is not disadvantaged or discriminated against given their individual need or characteristics. To support this, an Equality Impact Assessment has been undertaken on this policy/procedure. This information is held centrally and can be requested from the Clinical Governance Team.
About Acacium Group	Details of all Acacium Group trading companies that this policy applies to are detailed within Appendix A

Document History

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1. Introduction

This SOP has been developed to inform Acacium Group workers of the correct way to manage Needle stick/sharps injuries and contamination incidents and in doing so, to improve the safety and wellbeing of both workers and staff and clients.

It is also important to emphasize that prevention of these injuries by safe handling and disposal of sharps and the use of other relevant infection control procedures, appropriate hand hygiene and use of personal protective equipment.

Prevention of sharps injuries and contamination incidents is extremely important. Hepatitis B (HBV), Hepatitis C (HCV) and Human Immunodeficiency Virus (HIV) can be transmitted by percutaneous injury e.g., where the skin is cut or penetrated by needles or other sharp objects (a Needlestick/'sharps' injury); or mucocutaneous injury (splash to mucous membranes or broken skin) from patients to health care workers. Therefore, Needlestick/sharps injuries and contamination incidents must be managed correctly.

2. Aim

For all workers to be informed through this SOP of the risks and procedures to follow for safe practice and to take into account the Acacium Group Infection Prevention and Control Policy.

3. Definitions

Topic	Definition
Sharp	Is any object, which can puncture the skin and may be contaminated by blood or body fluids. This might include the following: hypodermic needles, suture needles, scalpel, blades, pieces of bone, teeth splinters, glass ampoules.
NSI	Needlestick injury or injury from a 'sharps' source.
Blood Borne Virus (BBV)	A virus which is carried in the blood of an infected individual and which can be transmitted to another person exposed to the individual's blood.
HBV	Hepatitis B Virus
HCV	Hepatitis C Virus
HIV	Human Immunodeficiency Virus
HIV PEP (Post Exposure Prophylaxis)	HIV treatment medication given after a NSI / sharps injury from a known or high-risk HIV positive source patient to reduce the risk of seroconversion.
HSE	Health and Safety Executive - The Health and Safety Executive is a UK government agency responsible for the encouragement, regulation and enforcement of workplace health, safety and welfare, and for research into occupational risks in Great Britain.

4. Safe sharps practice

The use of sharps should be avoided where possible. When their use is essential, particular care is required in handling and disposal.

Sharps must only be disposed of in designated sharps bins which should be assembled and labelled correctly.

When a sharps bin has reached the capacity indicated on the side of the bin, it should be closed correctly and disposed of as indicated within the client's care plan. DO not overfill a sharps bin. Ensure this is always a spare sharps bin available for use.

5. Needlestic/Sharps Injury Process

Working Within the Acute Setting

When working in the acute setting, a worker should follow Trust guidelines for ANY needlestick injury.

The worker will need an appointment with the Trust Occupational Health department.

Acacium Group Worker Actions

- Worker Actions/Flow
- Follow Trust guidelines for ANY workers suffering a needlestick injury
- Encourage the wound to gently bleed, ideally holding it under running water
- Wash the wound using running water and plenty of soap
- Do not scrub the wound while you are washing it
- Do not suck the wound
- Dry the wound and cover it with a waterproof plaster or dressing
- Seek urgent medical advice from the Trust Occupational Health Service. If the Trust refuse you access to Trust Occupational Health Service, then attend the Trust A&E department immediately.
- If there is no A&E department then attend GP /Drop in clinic
- Make appointment for follow up bloods 6 weeks, 12 weeks, and 24 weeks
- Report injury to employer
- If the Trust are not able to follow the bloods up, candidates will have to make alternative arrangements to have these bloods done via GP in the first instance or a clinic.

The protocol for bloods/follow up stated is as follows:

6 weeks	12 Weeks	24 Weeks
<ul style="list-style-type: none"> ● HBsAg – if a known non responder (2 full courses of vaccine) or not immunised ● HCV RNA 	<ul style="list-style-type: none"> ● HBsAg – if a known non responder (2 full courses of vaccine) or not immunised ● HCV RNA ● HIV antibody 	<ul style="list-style-type: none"> ● HBsAg if a known non responder (2 full courses of vaccine) or not immunised ● HCV RNA antibody ● HIV antibody

Difficulties in Obtaining Blood Tests following Sharps/Needlestic Injury

If attendance at the Occupational Health Department and the A and E department is denied to the worker, they should try one of the following clinics or their GP.

A list of clinics which may be of use are below, alternatively, they could speak with her GP to see if this is a service they provide.

- <https://www.masta-travel-health.com/FindAClinic>
- <https://samedaydoctor.org/book-now/>
- <https://healthclinics.superdrug.com/services>

- <https://www.boots.com/health-pharmacy-advice/vaccinations/travelvaccination-health-advice-service>
- <https://www.citydoc.org.uk/make-an-appointment/>
- <https://tdlpathology.com/>
- <https://nationwidepathology.co.uk/>

Workers should be provided with support to access blood tests as it is of upmost importance to their welfare and to the welfare of others.

Acacium Group Operational Teams

The sharps/needlestick injury should be reported as an incident in line with Acacium Group's Incident Reporting Policy and an entry completed on DATIX. The details of the worker's attendance to OH or A&E should be recorded on the worker's file.

Details of the Employees Assistance programme should be sent to the worker.

As part of the Incident management process, the worker should be asked to complete a reflection on the cause of the injury and steps taken to ensure future risk is reduced.

The worker should be called for welfare check at 6 weeks and 12 weeks and then 6 months after the final welfare check and any update.

If no further actions to report, the incident management/Datix entry can be closed.

6. Associated Policies / SOPs

Policies

ORG 03 Health and Safety Policy

CLIN 07 Infection Prevention and Control Policy

ORG 04 Incident Reporting Policy

CLIN 06 Consent

7. References

- Health and Safety (Sharp Instruments in Healthcare) regulations 2013. Guidance for employers and employees.
- Control of Substances Hazardous to Health (COSHH) Regulations (2002)
- Health & Social Care Act (DH, 2008) Code of Practice for health and adult social care on the prevention and control of infections and related guidance.
- NHS Employer-Managing the risk of sharps injuries framework (2015)

Appendix A: About Acacium Group

Acacium Group consists of a number of trading companies, each providing services within core niche areas of the health and social care industries. Therefore, as this document is a Group Policy, the Policy herein applies to all trading companies detailed below:

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