

# SAFE WORKING PROCEDURE

## Contamination and Needlesticks Incidents

CORPORATE HEALTH & SAFETY | VERSION 1.06 | September 2023

### **STATEMENT:**

In order to comply with legislation and fulfil statutory responsibility, the Council must make sure that:

- They comply with The Control of Substances Hazardous to Health (COSHH) Regulations.
- They adequately advise and educate all employees at risk about the possible risks and consequences of occupational exposure and provide training to enable them to protect their health whilst at work.
- Prevention of avoidable exposure is of prime importance. Employees should be provided with safe systems of work and, if necessary, appropriate personal protective equipment (PPE).

### **SCOPE:**

This Safe Working Procedure applies to:

- All managers including headteachers referred to as managers herein.
- All employees of Southampton City Council.



## 1. Responsibilities

### Service Lead/Head Teachers are responsible for ensuring:

- 1.1. Task based risk assessments have been undertaken and appropriate controls in place to manage hazards at source in line with the hierarchy of risk controls (see [SWP Risk Assessment](#)).

### Managers are responsible for ensuring compliance with the SWP and must:

- 1.2. Carry out task based risk assessment, identifying and implementing controls to deal with hazards at source using the hierarchy of risk control in line with [SWP Risk Assessment](#) and other appropriate SWPs detailed below.
- 1.3. In preparing risk assessments, consider employees who may be exposed to risks associated with sharps injuries and body fluid or faecal contamination incidents noting any high risk activities and the possibility of contracting a serious infection such as HIV, Hepatitis, etc.
- 1.4. Offer employees the opportunity of being immunized against Hepatitis B and/or Hepatitis A if the risk assessment concludes that there is a significant risk.
- 1.5. Ensure this procedure is communicated and adhered to by staff.
- 1.6. Review and investigate all sharps injuries and body fluid or faecal contamination incidents within their area of responsibility as per SWP accident/incident reporting and investigation.
- 1.7. Implement appropriate measures to control or reduce the identified risk.
- 1.8. Ensure risk assessment documentation is kept and reviewed regularly or when there is a significant change.
- 1.9. Ensure that where indicated suitable and sufficient personal protective equipment is provided.
- 1.10. Ensure employees are aware through the provision of suitable and sufficient information and training of the actions required to protect their own health and safety.

### Employees must:

- 1.11. Report if they suffer an incident – needle stick; bite; spilled body fluids or contact with faecal matter – and suspect they have become infected. They must follow the procedure in the recommended course of action for contamination injuries chart in [Appendix 2](#), attending Accident and Emergency Dept without delay.
- 1.12. Carry a Needle stick Injury card to take with them to hospital if they have been identified as being at risk ([Appendix 4](#)).
- 1.13. Take due care of their own and their colleagues' health and safety at work.
- 1.14. Follow good practice concerning prevention of sharps, body fluid and faecal matter contamination.
- 1.15. Attend relevant training as required.
- 1.16. Use and maintain work equipment and personal protective equipment according to training and manufacturers' instructions.
- 1.17. Report incidents immediately, in accordance with [SWP Accident/Incident reporting and investigation](#).

## 2. Procedures

- 2.1. The Health and Safety Executive (HSE) and Public Health England (PHE) provide free downloadable guidance on dealing with the prevention and control of contamination incidents including needle sticks (see [Section 5](#)). The HSE have also produced guidance [INDG 342 Blood Borne Viruses in the Workplace](#). Managers should use these guides and other detailed guidance below to help inform the risk assessment process and management of the prevention and control of contamination incidents including needle sticks required by this procedure.
- 2.2. Clinical waste which consists of blood or other body fluids, dressings, needles or syringes is subject to strict controls in terms of collection, storage and disposal. All non-sharps waste that is contaminated by blood, bodily fluids or suspected infected faeces must be placed in a yellow clinical waste bag and sealed prior to collection by Environmental Health or other service provider. Small amounts of waste in the form of dressings etc. arising from first aid treatment are not subject to special controls (unless from a person with a known pre-existing serious infection such as HIV or Hepatitis). Advice can be obtained from Environmental Health Services on ext. 2323. All sharps waste should be placed in clearly marked and secure containers prior to collection by Environmental

Health or other service provider. Further information on what is classified as clinical waste can be found on [Direct.Gov Health Care and Related Wastes](#)

- 2.3. Cleaning of spillages of bodily fluids (blood, vomit etc.) other than small volumes require specialist cleaning ([Appendix 1](#)). Civic Buildings cleaners may be able to help with this in One Guildhall Square and Civic Centre. For other locations, Environmental Health can provide guidance and spill kits etc.
- 2.4. Southampton City Council uses the [SYPOL CMS online](#) system for risk assessments relating to the Control of Substances Hazardous to Health (COSHH). These assessments provide information of the correct PPE to use, see [SWP COSHH](#) for more information.

### 3. Safe Working Procedures Relevant to This Document

- 3.1 [Risk Assessment](#)
- 3.2 [Control of Substances Hazardous to Health](#)
- 3.3 [Accident/Incident Reporting and Investigation](#)
- 3.4 [Personal Protective Equipment](#)

Note: Other safe working procedures may apply and the assessor should consult the SWPs. An A-Z is available on the Council's [Health and Safety Intranet](#). Forms can be found in [Forms Library](#).

### 4. Main Legislation Relevant to This Document

- 4.1 [Health and Safety at Work etc Act](#)
- 4.2 [The Management of Health and Safety at Work Regulations](#)
- 4.3 [The Control of Substances hazardous to Health Regulations](#)
- 4.4 [The Hazardous Waste Regulations](#)
- 4.5 [Reporting of Injuries, Diseases and Dangerous Occurrences 2013](#)
- 4.6 [The Health and Safety \(Sharp Instruments in Healthcare\) Regulations](#)

### 5. Contact Address's and Guidance Links

- 5.1 Health and Safety Executive  
[www.hse.gov.uk](http://www.hse.gov.uk)
  - 5.1.1. [Blood Borne Viruses in the Workplace](#)
  - 5.1.2. [Health services needlesticks](#) – Microsite
  - 5.1.3. [Handling Needle sticks in the waste industry](#)
  - 5.1.4. [OCE23- Cleaning up body fluids](#)
  - 5.1.5. [INDG198 - Working with sewage](#)
  - 5.1.6. [INDG197 – Working with Sewage; the health hazards](#)
- 5.2 Public Health England  
[Public health England](#)
  - 5.2.1. [Infectious Diseases Infections AZ Blood borne Viruses And Occupational Exposure Guidelines](#)
  - 5.2.2. [Guidance on Infection Control in Schools and Childcare Settings](#)
- 5.3 British Safety Industry Federation  
[www.bsif.co.uk](http://www.bsif.co.uk)
- 5.4 Royal Society for the Prevention of Accidents  
[www.rospa.com](http://www.rospa.com)
- 5.5 Institute of Occupational Safety and Health  
[www.iosh.co.uk/](http://www.iosh.co.uk/)
- 5.6 Corporate Health and Safety Service  
[Health and Safety Intranet](#)  
[School Health and Safety](#)

## Procedure for the Decontamination of Surfaces/Equipment To Be Carried Out by Trained Persons

### Spillages of Body Fluids (i.e. blood, urine, vomit) or faeces on *Hard Floors*

#### Using Presept Granules

1. Cordon area off and display warning signs if required.
2. Disposable latex free or nitrile gloves, plastic aprons and any other PPE identified in the relevant risk assessment **MUST** be worn before commencing the clean-up procedure. Ensure that all cuts and abrasions are covered with a waterproof dressing.
3. Wipe up any excess bodily fluids/faeces with disposable paper towels.
4. Using Presept granules, sprinkle over the remaining body fluid - sufficient to solidify and disinfect the spillage.
5. Cover with paper towels and leave for 10 minutes.
6. Mop up the jellified material and clean the area with soap and hot water.

**All** items used in this process **must** be disposed of in yellow biohazard bags.

Environmental Health must collect the biohazard bag for incineration.  
Contact Tel: 02380 83 2531

### Spillages of Body Fluids (i.e. blood, urine, vomit) or faeces on *Carpets*

#### Using Sanitaire Powder

1. Cordon area off and display warning signs if required.
2. Disposable latex free or nitrile gloves, plastic aprons and any other PPE identified in the relevant risk assessment **MUST** be worn before commencing the clean-up procedure. Ensure that all cuts and abrasions are covered with a waterproof dressing.
3. Wipe up any excess bodily fluids/faeces with disposable paper towels
4. Using Sanitaire granules, sprinkle over the remaining body fluid (sufficient to solidify and disinfect the spillage). Cover with paper towels and leave for 10 minutes.
5. Mop up the jellified material and clean the area with soap and hot water
6. For dry contamination the sanitaire should be sprinkled over the area, covered with paper towels and left for 10 minutes (as for body fluids). It should then be swept up with a stiff brush into a suitable container before cleaning the area with soap and hot water.
7. In the event of experiencing any difficulties in the removal of powder residue (e.g., from Loop Pile Fibre) – apply Enhance Spot Remover to the area in order to break the gel down and wipe clean.

Note: The Enhance Spot Remover is available from HCC Supplies and the relevant COSHH assessments from the Corporate Health & Safety Service.

**All** items used in this process **must** be disposed of in yellow biohazard bags.

Environmental Health must collect the biohazard bag for incineration.  
Contact Tel: 02380 83 2531

### Cleaning of Surfaces

1. Dissolve Presept tablet /s in water (see table 1 'Dilution instruction' for Presept disinfectant tablets).
2. Wearing disposable latex free or nitrile gloves, wipe down contaminated areas with disposable disinfectant- saturated cloth soaked in Presept solution.
3. Disposable disinfectant-saturated cloth, gloves, etc, **must** be disposed of in a yellow biohazard bag.
4. Biohazard bags **must** be collected by Environmental Health for incineration.

For further advice/information, telephone the Corporate Health and Safety Service on 023 8083 4271

For the collection and disposal of biohazard bags and associated sharps, telephone Environmental Health on 02380 83 2531.

**Table 1 Dilution instructions for Presept Disinfectant Tablets**

**Note:** The Presept solution should not be used on carpets or on soft furnishings, as this will cause the material to be stained).

Disinfection of	Required concentration of available chlorine	Dilution rate	Additional instructions
Blood spillage	10,000 ppm	7 x 2.5 gram tablets in 1 litre of water	Pour over the blood-stained area. Using gloves, wipe up with disinfectant- saturated disposable cloth.
General environmental use	1,000 ppm	4 x 2.5 gram tablets in 5 litres of water	Wipe down surfaces with disposable disinfectant- saturated cloth
Work surfaces, cupboards, floors etc	140 ppm	1 x 2.5 gram tablet in 10 litres of water	Wash down

### For large sewage spillages

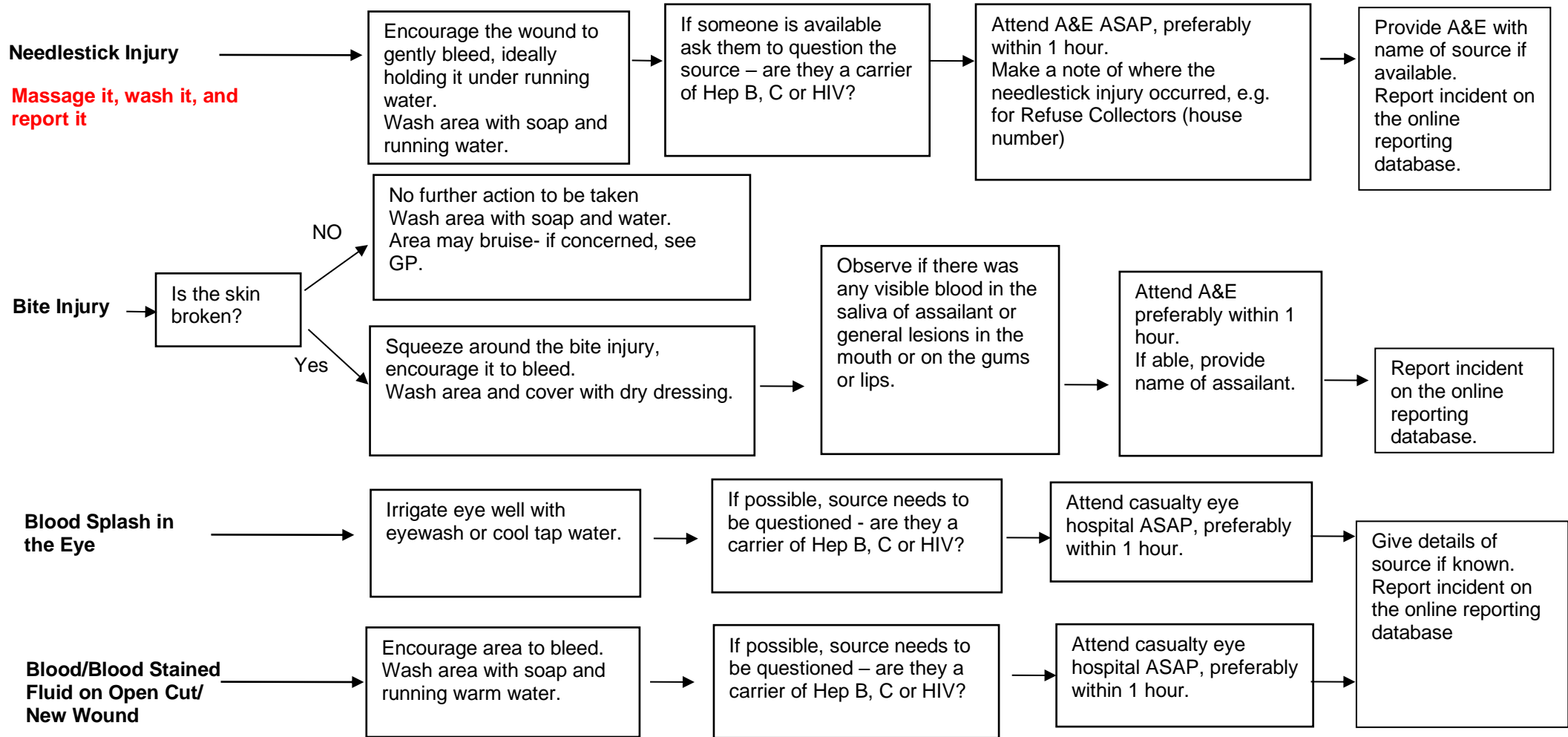
Do not attempt to clean large sewage spillages unless specially trained.

Seek help and advice from the SCC Action line.

Telephone: 023 8083 3006 (option 2) 8:30am - 5:00p.m

Out of hours service Telephone: 023 8023 3344

## Recommended Course of Action for Contamination Injuries



- Telephone A&E to inform them that you are en-route.
- If you feel shaky, telephone for a taxi/ ask a First Aider to accompany you.
- If you have had a needlestick injury, please follow instructions above & ensure that you take the Needlestick Injury card with you to A&E.
- Counselling is available if required.

**Contact with sewage or faeces:** For Concerns regarding contact with sewage or faeces from a person suspected of having Hepatitis A - see GP.

## Appendix 3

# Standard Precautions

All employees who come into contact with human blood or bodily fluids may be exposed to risk of catching blood borne viral infections such as HIV or Hepatitis B.

The most likely means of transmission is through a needlestick injury where the needle penetrates the skin or by blood splashing onto broken skin or mucous membranes.

Since it is unknown who may have HIV or Hepatitis B, it is recommended that every person is regarded as a potential carrier.

Hepatitis A is primarily spread when a person ingests food or water that is contaminated with the faeces of an infected person, or through direct contact with an infected person.

Therefore, all employees should routinely, as a matter of good practice, use appropriate barrier methods to prevent contamination by blood/bodily fluids or faeces and take the standard precautions listed below.

- **Wash hands** before and after every patient/client contact, and immediately if in direct contact with blood or body fluids, avoiding hand to mouth/eye contact.
- **Wear latex free or nitrile gloves** when contact with blood or body fluids, mucous membranes or non-intact skin is anticipated and wash hands after their removing them.
- **Prevent puncture wounds**, cuts and abrasions in the presence of blood and body fluids.
- **Protect skin lesions and existing wounds** by means of waterproof dressings and/or gloves.
- **Avoid use of, or exposure to, sharps and sharp** objects when possible but, where unavoidable, take particular care in their handling and disposal.
- **Protect the eyes and mouth** by means of a visor, goggles or safety spectacles, and a mask wherever spraying is a possibility.
- **Avoid contamination of the person** by use of waterproof or water-resistant clothing, plastic apron, etc.
- **Wear rubber boots or plastic disposable overshoes** when the floor or ground is likely to be contaminated.
- **Control surface contamination** by blood and body fluids through containment and appropriate decontamination procedures.
- **Disposal of all contaminated waste and linen safely.**



## Appendix 4

### Needlestick Injury Card

This card is for your protection. It is recommended that you keep it on your person.

If needlestick injury occurs follow the first aid procedure and attend Accident and Emergency within one hour. Record injuries on the injury online database (HSMS) then contact Occupational Health.

The blood borne diseases of Hepatitis B, Hepatitis C and HIV can be contracted through a needlestick injury, although risks are low.

Employees need to be aware that discarded needles have been found in bins, toilets, parks, playgrounds, soft furnishings etc. It is necessary to remain alert to this risk and not put hands anywhere, or grip anything without first checking.

Should a needlestick injury occur you should:

- **Massage or bleed the wound to encourage infected blood to come out. DO NOT suck or scrub the wound.**
- **Wash well with soap and water.**
- **Attend Accident and Emergency preferable within 1 hour, where you will be given further advice.**

If you know who the needle belongs to or if the person has told you that they are a carrier of Hepatitis B, Hepatitis C or HIV you should inform Accident and Emergency.

If you become unwell or experience any of the other following symptoms within 3 months, you should contact your GP: Jaundice, Headaches, Nausea or Vomiting, Persistent Cough, Raised Temperature, Abdominal Pain, Change in Stool colour or odour.