



## HEALTH & SAFETY ASSURANCE COMMITTEE PWYLLGOR ANSAWDD IECHYD A DIOGELWCH

<b>DYDDIAD Y CYFARFOD:</b> <b>DATE OF MEETING:</b>	07 September 2020
<b>TEITL YR ADRODDIAD:</b> <b>TITLE OF REPORT:</b>	Process for Needle Stick Injuries
<b>CYFARWYDDWR ARWEINIOL:</b> <b>LEAD DIRECTOR:</b>	Mandy Rayani, Director of Nursing, Quality and Patient Experience
<b>SWYDDOG ADRODD:</b> <b>REPORTING OFFICER:</b>	Tim Harrison, Head of Health, Safety and Security

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

This paper is presented to the Health and Safety Assurance Committee (HSAC) in order to provide assurance on the process in place to manage the risk of needle stick or other sharps injuries.

This follows a concern raised by the Health and Safety Executive (HSE) during their inspection in July 2019 and subsequent formal notice of improvement being served. The Improvement Notice stated that in order to comply, HDdUHB should:

1. Implement an effective management system to ensure all incidents where employees and others (such as Agency staff) have suffered an injury from a medical sharp are fully recorded and investigated. This system should also be used to manage any remedial actions required to ensure ongoing risks are mitigated.
2. Implement a suitable follow up monitoring system for managing employees and others (e.g. Agency workers) post injury (caused by a medical sharp) that exposed, or may have exposed, the person to a biological agent, to ensure they receive appropriate medical advice, treatment and counselling.

#### Cefndir / Background

The Health Board has existing policies covering this subject including the reporting of adverse incidents, near misses and hazards which must be reported through the electronic reporting mechanisms (DATIX) in place. In addition to a specific policy relating to 'Exposure Management including Needle stick (Sharps) Injuries Policy and Procedure', this was approved in November 2019 with a review due in November 2022.

Occupational exposure management, including needle stick (or "sharps") injury, is one of the elements of Standard Infection Prevention & Control Precautions, which must be applied in all healthcare settings. All staff have a responsibility to ensure safe practices to avoid needle stick (or "sharps") injuries, and know how to manage such injuries in themselves and others, should they occur.

The main objective of the policy is to prevent the acquisition of a Blood Borne Virus (BBV). This will be achieved by a number of factors including:

- Ensuring staff are aware of the procedure to be followed should an exposure incident occur to themselves or to a colleague.
- Ensure the Emergency Department, Occupational Health, BBV service and Sexual Health service, together with all other relevant parties have a clear understanding of their role both in the treatment of staff and members of the general public.
- Ensuring the correct management and control of the exposure injury whether it be an occupational injury or sexual exposure to a BBV.
- Ensuring that staff and members of the public receive prompt and adequate care in the Emergency Department and appropriate follow up when discharged.

### **Asesiad / Assessment**

Whilst the Health Board has been proactive with the introduction of many safer sharps devices, and having appropriate policies and procedures in place including a robust incident reporting mechanism, it is both disappointing and worrying that sharps incidents still occur.

Sharps safety incident investigation is an integral part of the planned Health and Safety training programme to improve the awareness around incident investigation and the role and expectation of managers and supervisors. It is therefore anticipated that with increased awareness, the quality of incident investigation will improve.

A specific concern raised by the HSE involved the HM Inspector observing a venepuncture training session where the clinical trainer was overheard advising employees that the use of gloves was not mandatory. Whilst this particular issue has not been cited in the Improvement Notice schedule, Clinical Skills Training now advises that gloves for venepuncture are mandatory. The training also includes reference to the Infection, Prevention & Control (IP&C) Policy to 'Always wear gloves when there is a potential to come into contact with blood, bodily fluids and chemicals'. Their use is further rationalised by emphasising that even though the equipment used is designed to minimise blood exposure, there is a high chance that blood could transfer to hands should things go wrong.

Following COVID-19, Clinical Skills Training now teaches glove use for the entire procedure (examination and preparation, as well as for the actual bleed. This has been evidenced at the testing centres by staff wearing gloves.

Sharps safety is also emphasised as being paramount, including the use of the needle cover as a routine, to develop habitual practice, and the non-reuse of needles if, for example, the vein is missed, where needles must be changed before making a second attempt.

Several examples of where practice has gone wrong, taken from previous Datix reported incidents, are used to illustrate where this has occurred, resulting in needle stick injury with contaminated needles.

In addition, a working group has been established to develop alternative working strategies for phlebotomy services, and part of this work is to develop a venepuncture/phlebotomy policy.

### **Follow Up**

Following a needle stick or sharps injury, staff are advised to report and attend their nearest Emergency Department as well as notifying the Occupational Health Team. Urgency is important in these situations given that post exposure prophylaxis (PEP) for human immunodeficiency virus (HIV) or other treatments may be required.

Although the Emergency Department will undertake the initial risk assessment and immediate action, all staff who sustain an occupational injury must report to Occupational Health at the earliest opportunity after being treated.

#### **Argymhelliad / Recommendation**

For the Health and Safety Assurance Committee to take assurance from this report that the required work is being undertaken towards improving how sharps incidents are investigated and that venepuncture training is delivered in line with HDdUHB's Infection Prevention & Control Policy.

#### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	5.8 Ensure there is a process of review of findings of safety management system audits and seek assurance that corrective actions are put in place.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	2.1 Managing Risk and Promoting Health and Safety
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	Focus On What Matters To Patients, Service users, Their Families and Carers, and Our Staff
Amcanion Strategol y BIP: UHB Strategic Objectives:	2. Living and working well.
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018- 2019</a>	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

#### **Gwybodaeth Ychwanegol:**

#### **Further Information:**

Ar sail tystiolaeth: Evidence Base:	Improvement Notices Material Breaches
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch:	Task & Finish Groups

Parties / Committees consulted prior to Health and Safety Assurance Committee:	
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<b>Effaith: (rhaid cwblhau)</b> <b>Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian:</b> <b>Financial / Service:</b>	There is an immediate financial impact in relation to the Fee for Intervention costs that HSE have ordered to date of £40k
<b>Ansawdd / Gofal Claf:</b> <b>Quality / Patient Care:</b>	N/A
<b>Gweithlu:</b> <b>Workforce:</b>	N/A
<b>Risg:</b> <b>Risk:</b>	Detailed action plan produced highlighting the mitigation of these identified risks.
<b>Cyfreithiol:</b> <b>Legal:</b>	Breaches of Health and Safety at Work Act 1974 potential for fines if not complied with within specified timescale.
<b>Enw Da:</b> <b>Reputational:</b>	Potential for political or media interest if compliance or further enforcement action is served.
<b>Gyfrinachedd:</b> <b>Privacy:</b>	N/A
<b>Cydraddoldeb:</b> <b>Equality:</b>	<ul style="list-style-type: none"> <li>Has EqlA screening been undertaken? No</li> <li>Has a full EqlA been undertaken? No</li> </ul>