

WORK HEALTH AND SAFETY PROCEDURE	
Reference Number	WHS-ID 761175
Responsible Business Unit	Organisation Development
Responsible Officer	General Manager Corporate Services
Legislation	Local Government Act 1999
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Version Number	3

## 1. INTRODUCTION

This has been formulated to provide information to workers on procedures to prevent contamination, which could cause infectious diseases.

In accordance with Council's Policy to provide a safe workplace for all workers, all personnel who are directly exposed to the hazards presented by "sharps" will be offered Hepatitis B and tetanus vaccinations.

The type of exposure that may be significant includes needle stick and/or any cut by a sharp instrument of unknown origin.

Human Resources will keep a record of the dates of the vaccinations for each worker.

## 2. PROCEDURE FOR SAFE DISPOSAL OF NEEDLES

The following has been reprinted with appropriate modifications from information supplied by the Commonwealth Department of Community Services and Health:

*"Occupational groups which may face some risk of infection as a result of a needle stick injury are: garbage workers, street sweepers, toilet cleaners, general inspectors, parks and garden staff, plumbers and sewerage workers and pre-school, child care and nursing staff."*

### Reporting Hazards

Where a needle and/or syringe is reported to Council, the Council Officers taking that report must ensure that they get adequate information on the location of the object and this should include a contact name, phone number and an exact location using markers or reference points to ensure that the hazard can be found and disposed of.

All irresponsibly discarded needles and/or syringes which are reported to or collected by council should be reported to the Environmental Health Officers and the information documented.

### Safe way to collect needles and syringes that have been carelessly thrown away

Wherever possible, they should be collected using tools such as un-sprung tongs, and deposited directly into a rigid walled, wide mouthed, puncture resistant container, which should be clearly labelled. Arrangements should be made for the correct disposal of these containers when full. No attempt should ever be made to recap or re-sheath the needle, or to break, bend or otherwise render it useless.

If collection is by hand, sturdy puncture-resistant gloves should always be worn. Unprotected hands should not be placed where they cannot be clearly seen such as inside a full garbage bin, behind cisterns or toilet bowls.

Council's policy is to provide a sharps container, puncture resistance gloves and un-sprung tongs to appropriate vehicles. Under no circumstances are needles to be picked up unless this equipment is used. Sharps containers are to be taken to the hospital for disposal once used.

## **Procedure for exposure to blood and body fluids including needle stick and sharp injury**

Wash area immediately with soap and water. If this is not available, alcohol could be substituted.

If blood gets on the skin, irrespective of whether there are cuts or abrasions, wash well with soap and/or water.

If the eyes are contaminated, rinse the area gently but thoroughly with water or normal saline, while the eyes are open.

If blood gets in the mouth, spit it out and then rinse the mouth with water several times.

If a needle/syringe was involved, place it in a rigid-walled container such as a lunch box. Take it with you to the doctor. Do not attempt to cover the needle because you run the risk of further injury.

The incident is to be reported immediately to the appropriate Business Unit Manager or Team Leader and an Accident Investigation/Personal Injury Report completed.

The employee is to be referred to his or her local doctor within 24 hours of the accident/incident taking place.

In the event of an exposure to blood or body fluid from an individual who has been previously tested and confirmed as HIV antibody positive, the exposure should immediately be evaluated by a physician with experience in the management of HIV infection, at a teaching hospital or STD clinic.

The employee will be counselled on possible transmission of HIV, Hepatitis B or Tetanus.

During this follow-up period, especially the first 6-12 weeks, when most infected individuals are expected to develop HIV antibodies, exposed staff members will receive counselling about the risk of infection and prevent transmission of HIV infection by:

- Refraining from donating plasma or blood, body tissue, milk or sperm.
- Protecting sexual partners from contact with body fluids (blood, semen or vaginal fluids) by using condoms during sexual intercourse.
- Avoiding pregnancy until HIV status is known.

Hepatitis B preventative treatment will be undertaken as soon as possible upon advice of a Medical Practitioner.

## **3. REVIEW**

The Needle, Stick & Sharps Injuries Procedure should be reviewed by the Executive Leadership Team and Management Team, in consultation with workers or their representatives, every forty eight (48) months or more frequently if legislation or Council needs change.



# WHS PROCEDURE NEEDLE STICK & SHARPS INJURIES



## 4. LERWIN EMPLOYEES

Refer to Lerwin's Management Systems Manual (MSP 039 and WI 007), in particular the Infection Control Policy and Procedure, Sharps and Waste Management instructions.

### SIGNATURES

SIGNED:		
	CEO	Chairperson, HS Committee
	Date: 23 / 08 / 2022	Date: 23 / 08 / 2022