



Public – To be published on the Trust external website

Sharps – Safe use and disposal of

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Overarching policy: IPC

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1 Introduction

This procedure is critical to the delivery of our journey to change (OJTC) and our ambition to co-create safe and personalised care that improves the lives of people with mental health needs, a learning disability or autism. It helps us deliver our three strategic goals. Supporting the trust to co-create a great experience for all patients, carers and families from its diverse population by reducing the risks through implementation of best practice in relation to sharps meaning patients, families and carers experience outstanding and compassionate care.

This procedure supports the trust to co-create a great experience for our colleagues by ensuring staff and others are protected through the implementation of best practice in relation to sharps. Sharps are responsible for a significant number of injuries to staff each year. Safe use of sharps will help to reduce the risk of injury and the acquisition of blood-borne viruses by both staff and patients.

This procedure will ensure that risks from sharps injuries are adequately assessed and appropriate control measures are in place. The Sharps Regulations follow the principles of the hierarchy of preventative control measures, which are set out in the Control of Substances Hazardous to Health Regulations (COSHH). Specific sharps containers for the disposal of cytotoxic drugs are available and must be used when disposing of sharps contaminated with cytotoxic drugs. Refer to the waste management policy for further details.

2 Purpose

The purpose of this document is to:

- Ensure the safe use, disposal and transport of sharps;
- Prevent injury through use of sharps;

3 Who this procedure applies to

This procedure applies to all trust staff who may have an exposure risk to sharps

This procedure aligns with values as we listen to staff and respect their views. We ensure any member of staff who has difficulties with the measures in this procedure can discuss their needs so that standards are maintained while individual difference are recognised and supported.

4 Related documents

This procedure describes the management of Sharps – safe use and disposal of the Infection Prevention and Control Policy



The [Standard Precautions for Infection Prevention and Control](#) defines the universal standards for IPC which you **must** read, understand and be trained in before carrying out the procedures described in this document.

- ✓ [BBV Blood Borne Virus Procedure](#)
- ✓ [Health and Safety \(Sharp Instruments in Healthcare\) Regulations 2013](#)
- ✓ [Accidental Inoculation Procedure](#)
- ✓ [Waste management Policy](#)

5 Safe handling of sharps

- ✓ You **must** handle and dispose of sharps as outlined in this procedure.
- ✓ Safer sharp products should be used as per Trust standard, 'Safer sharps' do not necessarily remove all risks associated with the use of a sharp.
- ✓ Sharps should be single use only
- ✓ Sharps containers must conform to British Standard ISO 23907-1:2019 ([Compliance Standards for Sharps Containers](#))
- ✓ Each ward/department **must** have an arrangement in place for the removal of sharps containers at an agreed frequency, depending on usage.
- ✓ Use a sharps bin to dispose of used needles or sharps.

5.1 During use

- ✗ **Do not** bend or break needles.
- ✗ **Do not** remove used needles from disposable syringes before disposal.
- ✗ **Do not** leave sharps on a trolley, locker or any other unsupervised area.
- ✓ Only use approved integral safety needles.

5.2 After use

- ✗ **Do not** leave sharps for someone else to dispose of.
- ✗ **Do not** carry used sharps in foil, metal or pulp trays.
- ✓ **Do not** try and remove sharp after use.
- ✓ You **must** dispose of used sharps directly and immediately into a sharps container.
- ✓ Ensure re-usable trays are cleaned and dried after each use.
- ✓ Hands should be washed after handling any sharps and after removing gloves.

6 Sharps boxes

6.1 Do's

- ✓ You **must** follow manufacturer's instructions when assembling sharps containers, ensuring the lid is secure before use. See Appendix 4
- ✓ You **must** write the ward/department, your name and date on the box that you assembled.
- ✓ You **must** have a correctly colour coded sharps container readily available in any area where sharps are likely to be used. See Appendix 5
- ✓ You **must** lock the sharps container when ready for disposal using the locking mechanism.
- ✓ You **must** place sharps containers out of reach of children and where unauthorised people cannot gain access to when not in use.
- ✓ Always ensure you dispose of your used sharps at the point of use e.g. clinic or patients room.
- ✓ You **must** ensure temporary closure is in place when not in use.
- ✓ You **must** complete an In Phase report if an inoculation injury is sustained and seek advice from Occupational Health department.

6.2 Don'ts

- ✗ **Do not** leave sharps unattended. The container must remain in the designated place except when being used by a health care worker and is therefore under supervision.
- ✗ **Do not** store sharps containers on the floor.
- ✗ **Do not** leave sharps protruding from, left on top or lying around the container.
- ✗ **Do not** attempt to retrieve items from a sharp's container.
- ✗ **Do not** fill sharps containers above the manufacturer's marked line.
- ✗ **Do not** attempt to press down the contents to make room.
- ✗ **Do not** place used sharps containers in clinical waste bags for disposal.

7 Disposal

- ✓ You have responsibility (as the user) to dispose of the sharp safely immediately after use.
- ✓ Complete the label attached to the front of the sharp's containers prior to disposal with date sharp box locked
- ✓ Locked sharps boxes should be stored safely and securely prior to their collection



The user could be patient, e.g. diabetic using insulin. The patient is then under the supervision of a nurse who would be responsible for ensuring the medication is administered and the equipment disposed of correctly.

8 Transportation of sharps containers

- ✓ You **must** carry sharps containers by the handle where available.
- ✓ You **must** transport sharps containers through the Trust premises in a safe and secure manner.
- ✓ You **must** keep sharps containers awaiting removal at an identified secure collection point that is not accessible to the public.
- ✓ Portering and ancillary staff retain responsibility for the safe condition and security of sharps containers between the points of collection and disposal.
- ✓ Sharps boxes being transported by community staff, **must** be designated for this task and must be kept out of sight and locked in the boot of the car.
- ✗ You **must not** throw or drop sharps containers during transportation or removal.

9 Definitions

Term	Definition
Sharp(s)	<ul style="list-style-type: none"> • Anything which may puncture the skin and which may be contaminated with blood or other body fluids. • Commonly used sharps include hypodermic needles, scalpel and lancet blades. <p>Other sharps include teeth, glass ampoules, razor blades and scissors.</p>

10 How this procedure will be implemented

- This procedure will be published on the Trust's intranet and external website.
- Training will be included in the IPC mandatory training package both face to face and via E-Learning

10.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
All staff	On line IPC training	On line training 1 hour	yearly

11 How the implementation of this procedure will be monitored

Number	Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	IPC quarterly report	IPC	IPCC
2	Number of Sharps related In Phase incident reports raised	Monthly/ In Phase report / IPC lead nurse	IPCC
3	% completion of trust sharps training (part of IPC mand and stat) by all clinical staff	Monthly/ IIC dashboard / IPC lead nurse	IPCC

12 References and further reading

UK Health Departments AIDS / HIV Infection Health Care Workers: Guidance on the Management of Infected Health Care Workers and Patient Notification. HSC 1998 / 226.

DoH (2017). Guidance for Clinical Health Care Workers: Protection against Infection with Blood Borne Viruses. HMSO

DoH (2006) Essential steps to safe, clean care. Reducing healthcare-associated infections in Primary Care Trusts; Mental Health Trusts; Learning disability organisations; Independent healthcare; Care Homes; Hospices; GP practices and Ambulance Services.

Health and Safety (Sharp Instruments in Healthcare) Regulations 2013 Guidance for Employers and Employees. Health and Safety Executive.

Medical Devices Agency (2001) Reducing Needlestick and sharps injuries DoH, London

[Compliance Standards for Reusable Sharps Containers](#)

13 Document control (external)

Date of approval	08 July 2025
Next review date	08 July 2028
This document replaces	IPC-0001-014 v3.1 Sharps – Safe use and disposal of
This document was approved by	IPCC (virtual)
This document was approved	08 July 2025
This document was ratified by	n/a
This document was ratified	n/a
An equality analysis was completed on this policy on	30 May 2025
Document type	Public
FOI Clause (Private documents only)	n/a

Change record

Version	Date	Amendment details	Status
3.2	08 July /2025	<p>Reference to Standard Precautions Procedure updated to remove word (universal). British Standard compliance reference insert (point 5) Datix changed to In Phase (point 6.1) Use of different colour lidded boxes mentioned (point 6.1) Further information details updated Appendix 5 added with lidded boxes picture</p> <p>Note: received IPCC virtual approval on 08 July 2025, pending retrospective formal recording on minutes of IPCC 01 Oct 2025 minutes.</p>	Approved (virtual)

Appendix 1- Approval Checklist

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
1.	Title		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2.	Rationale		
	Are reasons for development of the document stated?	Yes	
3.	Development Process		
	Are people involved in the development identified?	Yes	
	Has relevant expertise has been sought/used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
	Have any related documents or documents that are impacted by this change been identified and updated?	Yes	
4.	Content		
	Is the objective of the document clear?	Yes	
	Is the target population clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
	Are the statements clear and unambiguous?	Yes	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
	Are supporting documents referenced?	Yes	
6.	Training		
	Have training needs been considered?	Yes	
	Are training needs included in the document?	Yes	

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
7.	Implementation and monitoring		
	Does the document identify how it will be implemented and monitored?	Yes	
8.	Equality analysis		
	Has an equality analysis been completed for the document?	Yes	
	Have Equality and Diversity reviewed and approved the equality analysis?	Yes	E&D approval 30th May 2025
9.	Approval		
	Does the document identify which committee/group will approve it?	Yes	
10.	Publication		
	Has the document been reviewed for harm?	Yes	
	Does the document identify whether it is private or public?	Yes	Public
	If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	N/A	

Appendix 2 - Further Support, Information & Advice

Person(s)	Address	Phone No.
Occupational Health	Optima	01618 319701 0330 008 5969 (out of hours)
Infection Control Team	Generic Email: TEWV.IPC@nhs.net	0191 333 3584

Appendix 3 - Equality Impact Assessment Screening Form

Please note: The [Equality Impact Assessment Policy](#) and [Equality Impact Assessment Guidance](#) can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	IPC Team
Title	Sharps Safe use and disposal of procedure
Type	Procedure
Geographical area covered	Trust wide
Aims and objectives	<ul style="list-style-type: none"> • Ensure the safe use, disposal and transport of sharps; • Prevent injury through use of sharps;
Start date of Equality Analysis Screening	14 May 2025
End date of Equality Analysis Screening	29 May 2025

Section 2	Impacts
Who does the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	Trust staff and patients
Will the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?	<ul style="list-style-type: none"> • Race (including Gypsy and Traveller) NO • Disability (includes physical, learning, mental health, sensory and medical disabilities) NO • Sex (Men and women) NO • Gender reassignment (Transgender and gender identity) NO • Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO • Age (includes, young people, older people – people of all ages) NO • Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO • Pregnancy and Maternity (includes pregnancy, women / people who are breastfeeding, women / people accessing perinatal services, women / people on maternity leave) NO • Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO • Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) NO • Human Rights Implications NO (Human Rights - easy read)
Describe any negative impacts / Human Rights Implications	
Describe any positive impacts / Human Rights Implications	No barriers to access or implementing this policy

Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	See references section
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	No
If you answered Yes above, describe the engagement and involvement that has taken place	
If you answered No above, describe future plans that you may have to engage and involve people from different groups	No, minor changes only at this version

Section 4	Training needs
As part of this equality impact assessment have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	n/a
Describe any training needs for patients	n/a
Describe any training needs for contractors or other outside agencies	n/a

Check the information you have provided and ensure additional evidence can be provided if asked

Appendix 4 - Correct Assembly of Sharps Box



Appendix 5 – Healthcare Waste Colour Coding (Rigid Containers)

- Yellow** - Pharmaceutical Sharps
- Orange** - Blood or Bodily Fluid Sharps
- Purple** - Cytotoxic Pharmaceutical Sharps
- Blue** - Solid Medicinal Items (Contaminated Used Blister Packs)

