

# Handling needles in the waste and recycling industry

This 'good practice' was written in consultation and with the support of the Waste Industry Safety and Health Forum (WISH). It does not aim to be comprehensive but gives examples of good practice within the industry.

It is for managers and employees working in the waste management and recycling industry, and aims to reduce the risks of blood-borne virus infection from syringe needles (often referred to as 'sharps' or 'needlestick injuries'), which form part of drug-related litter.

The Management of Health and Safety at Work Regulations 1999 make it a legal requirement for employers to carry out a risk assessment of their activities. This should identify the measures they need to have in place to comply with their duties under health and safety law.

## Background

Waste and recycling workers can be exposed to needles in the material they handle during the course of their work. Needle injuries occur when a needle punctures the skin. Needles have been found in:

- black bags/sacks of rubbish (sometimes needles are pushed through tied knots in black bags);
- bedding, clothing, soft furnishings, car seats and green waste;
- public toilets;
- recreation areas (parks, landscaping, children's playgrounds, subways etc);
- discarded litter/litter bins (inside cigarette packets, sweet packaging, drinks cans);
- sink U-bends/drains;
- letter box baskets/door locks/floorboards/walls;
- lift shafts/ducting;
- end-of-life vehicles; and
- demolition materials.

## Risks

Risks include:

- blood-borne diseases<sup>1</sup> (eg hepatitis and HIV/AIDS);
- direct exposure can happen through accidental contamination from discarded needles. The actual risk of infection depends on:
  - if the needle user was infected with hepatitis or HIV viruses;
  - how much infected material enters the bloodstream – a needle attached to a syringe containing blood is likely to be a higher risk than a detached needle; and

- how infective the material is;
- there may also be a risk of tetanus.

## Assessing the risk

Risk assessment<sup>2,3</sup> means looking for hazards and controlling the risks involved in the work that you do. Decide whether existing precautions are adequate or if more should be done. Discuss health and safety issues with your staff and safety representatives. They know what actually goes on during collections and can help develop practical solutions to problems:

- Have a needle finds reporting system. This will help you gain a true picture of the problem, identify the most likely places/locations where the risks are highest, and where additional precautions and controls may be required. Information on needle finds is essential for an effective policy.
- Decide who could be harmed and how – which employees (and others) might be exposed to contaminated needles and how this might happen (eg handling items for disposal).
- Assess the likelihood of exposure to contaminated needles and decide if existing precautions are enough or whether more should be done. Think about existing relevant accident information reported in the workplace and the quality of precautions taken and preventive/protective measures used.
- Record your findings.
- Review and revise your risk assessment if necessary.

## Preventing or controlling the risk

Consider the following comments and precautions, and adapt them to your local circumstances to establish a safe system of work:

- Take the view that all needles found could be potentially infected, therefore the risk will need to be managed.
- Employees who service areas used by the general public (eg refuse/recycling collectors/loaders, street sweepers etc) may be at risk. Adopting control measures can reduce the risk. Some organisations offer immunisation against blood-borne diseases and tetanus. You can contact your organisation's occupational health physician/advisor and the Employment Medical Advisory Service<sup>4</sup> for advice.
- The introduction of 'sharp-resistant containers' (eg wheelie bins) to replace plastic sacks on domestic rounds can reduce sharps injuries to waste collectors.
- Ensure that employees and line management understand the risks through proper:
  - information/instruction;
  - training; and
  - supervision.
- They need to understand:
  - the risks involved;
  - what to do if they find needles; and
  - your reporting procedures.
- Provide appropriate equipment for handling and disposal of sharps, eg:
  - tools for picking up needles eg pincer tools/tongs/litter picker/tweezers/dustpan and hand brush;
  - sharps boxes (capable of safely containing needles);<sup>5</sup> and
  - gloves.

- Suitable gloves should always be used when using tools to move needles. Gloves should be selected to give a high degree of puncture resistance.<sup>6</sup> Remember that gloves should not be relied upon to give adequate protection on their own, but used as secondary protection in the case of accidental contact/puncture wounds.
- Arms are vulnerable when throwing bags into collection vehicles, and needles in black bags (being carried) banging against legs can cause injuries. Consider providing suitable puncture/cut-resistant clothing to help protect limbs (especially if collecting from known high-risk areas).
- Provide adequate first-aid equipment, including clean water and/or sterile wipes for cleaning wounds, and a supply of sterile, waterproof, adhesive dressings.
- Think again about your equipment and procedures – they will not be used or followed if they are not practical.

## **Disposal of sharps**

Sharps should be disposed of in an appropriate, secure container.<sup>5</sup>

Arrangements should be made for sharps containers to be disposed of securely and safely. Your sharps policy/safe system of work should set out your procedure together with relevant contact details and numbers.

Many local authorities operate specialist services with dedicated teams or a member of staff to deal with needle finds.

Specialist hazardous waste companies collect and dispose of sharps bins routinely or by appointment.

Other government departments/agencies able to provide details of companies licensed to collect and dispose of this type of waste include the Environment Agency in England and Wales ([www.environment-agency.gov.uk/subjects/waste/](http://www.environment-agency.gov.uk/subjects/waste/)) and the Scottish Environment Protection Agency in Scotland ([www.sepa.org.uk/](http://www.sepa.org.uk/)).

## **Reporting incidents**

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)<sup>7</sup> require that puncture wounds from contaminated needles should be reported as dangerous occurrences to the relevant enforcing authority (HSE or your local authority).

It is essential that employees report all needle finds to their managers (as set out in the company's safety policy/safe system of work). This will help employers identify high-risk areas that may require special attention, eg the need for a needle exchange facility and/or fixed sharps containers/bins.

## Information for employees

### *Disposal of needles*

- Be alert! Look for obvious needles before handling waste.
- Always wear suitable gloves – even when using tools to move needles. Gloves should not be relied on to give total protection, but they can help resist punctures in case of accidental contact:
  - sweep up needles with a dust pan and brush; or
  - use a pincer tool.
- Do not try to re-sheath needles.
- Place needles in a sharps box – take the sharps box to the needle, not the needle to the sharp box (where possible). Try to put the sharps box on an even surface before opening it to deposit the needle.
- Do not overfill sharps boxes or try to push the contents down. Before disposal, seal boxes and dispose of in accordance with your organisation's instructions.
- Inform your line managers of any needles found as soon as possible.

### *Action following a puncture wound from a needle*

- Encourage the wound to bleed, do not suck the wound – rinse thoroughly under running water. If water is not available, cleansing wipes provided in first aid kits should be used. Cover the wound with a dry plaster/dressing.
- Formally record the incident including details of the action taken.
- Seek medical advice and treatment immediately – contact the nearest Accident and Emergency department.

## References and further reading

1 *Blood-borne viruses in the workplace: Guidance for employers and employees* Leaflet INDG342 HSE Books 2001 (single copy free or priced packs of 10 ISBN 978 0 7176 2062 3) [www.hse.gov.uk/pubns/indg342.pdf](http://www.hse.gov.uk/pubns/indg342.pdf)

2 HSE's risk assessment web pages: [www.hse.gov.uk/risk](http://www.hse.gov.uk/risk), and

3 *Five steps to risk assessment* Leaflet INDG163(rev2) HSE Books 2006 (single copy free or priced packs of 10 ISBN 978 0 7176 6189 3)  
Web version: [www.hse.gov.uk/pubns/indg163.pdf](http://www.hse.gov.uk/pubns/indg163.pdf)

4 [www.hse.gov.uk/forms/heath/emasoffices.htm](http://www.hse.gov.uk/forms/heath/emasoffices.htm)

5 BS 7320: 1990 *Specification for sharps containers* British Standards Institution

6 EN 388: 2003 *Protective gloves against mechanical risks* British Standards Institution

7 [www.hse.gov.uk/riddor](http://www.hse.gov.uk/riddor)

*A step by step guide to COSHH assessment HSG97* (Second edition) HSE Books 2004 ISBN 978 0 7176 2785 1

*Tackling drug related litter. Guidance and good practice* Defra October 2005  
[www.defra.gov.uk](http://www.defra.gov.uk)

The Waste Industry Safety and Health Forum (WISH) exists to communicate and consult with key stakeholders, including local and national government bodies, equipment manufacturers, trade associations, professional associations and trades unions. The aim of WISH is to identify, devise and promote activities that can improve industry health and safety performance.

## **Further information**

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**This document contains notes on good practice which are not compulsory but which you may find helpful in considering what you need to do.**

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