



Sustainable Hospitals Program

A Project of the Lowell Center for Sustainable Production, University of Massachusetts Lowell

How to Develop a Sharps Policy for Your Facility

Why you need one and what it might look like

Most hospitals and healthcare providers have no clear policy that describes their commitment to purchase and use safety sharps in their facility. However a sharps policy can be a powerful tool to complement your existing sharps injury prevention plan.

What is a sharps policy? In its simplest form, a sharps policy is a statement of commitment to:

- Using non-sharp alternatives wherever possible
- Using sharps with engineered safety features
- Banning the use of conventional sharps except for unusual and clearly stated cases. (*Note: in this fact sheet, the terms "conventional" and "standard" refer to older device designs lacking an integral safety feature to protect against sticks or blood exposures*)
- Communicating to vendors that conventional sharps will only come into the facility by exception and with the written authorization of the healthcare facility

Why is a policy needed? Our work with hospitals has shown:

- Suppliers are in a key position to ensure that the devices entering your facility have integral safety features.
- Facilities continue to reorder old-style sharps devices that lack an integral sharps injury prevention (safety) feature. This is often unintentional and happens because there is no easy way of recognizing which products are safety devices and which are conventional devices.
- For many injuries, it was only after a needlestick injury occurred that administrators realized a conventional device was still being used. 61% of the injuries reported to the Massachusetts Sharps Injury Surveillance System in 2003 involved standard devices without an engineered sharps injury prevention feature.
- In cases where a conventional device was flagged because of an injury, it was often found that manufacturers had a similar, readily available, user-friendly device with an engineered safety feature built in to the product.

These observations send a clear message that healthcare facilities need to have a systematic way to ensure that they are purchasing and using up-to-date, safe, appropriate products.

What are the benefits to the hospital? Developing and maintaining a sharps policy can augment your existing sharps injury prevention program and serve as a tool to help you:

- Comply with federal and state laws. For example, Massachusetts hospitals must obtain an exemption from the Department of Public Health to use devices without an integral safety feature. A sharps policy assists in controlling the use of conventional sharps devices that lack an integral safety feature.
- Support a culture of proactive injury prevention.
- Clearly communicate your hospital's commitment to safety device use.

How can we get started?

- Form a team (or incorporate this into an existing team such as the Safety Committee) to develop a policy for your hospital. Ensure that key committees and departments are represented, including Materials Management, Safety Committee, Product Evaluation Committee and staff who use the devices, to gain their input and support.

- Consider the sample policy shown on the following pages and tailor it to your facility. Note that while the sample policy references Massachusetts regulations, your state may have other requirements.
- Work with your clinicians to understand why conventional devices are still used. In some cases, there may be no viable alternatives. For these cases, ensure that you have properly documented your exceptions to OSHA and obtained any necessary waivers for the use of conventional devices. (E.g. In Massachusetts, hospitals must obtain an exemption from the Department of Public Health to use devices without an integral safety feature).
- Include your vendors, GPOs and other suppliers (such as contracted service providers) in this effort, to communicate the hospital's requirements for safety devices and to utilize their knowledge and support.

Other tools and information on prevention of sharps injuries can be found on the Sustainable Hospitals Program website at www.sustainablehospitals.org or by contacting the program at shp@uml.edu or 978-934-3386. Related fact sheets include:

How to Make an Inventory List of Sharps Devices for Your Facility

How (and Why) to Make a Display Board of Sharps Devices

Sample Policy and Procedure for Use of Conventional Sharps Devices at (Massachusetts Hospital Name)

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Acknowledgement: This sample is modeled on the document "EXAMPLE STANDARD OPERATING PROCEDURE; Hospital Mercury Reduction" developed for mercury management by the Mercury Work Group of the Massachusetts Water Resource Authority (MWRA) and MASCO (Medical Academic and Scientific Community Organization, Inc. of Boston's Longwood Medical and Academic Area).

(Reference: "MERCURY MANAGEMENT GUIDEBOOK"; Appendix A: Example Standard Operating Procedure; May 1999, <http://www.masco.org/mercury/phase2/index.html>)

PURPOSE:

To enable the Hospital to meet bloodborne pathogen requirements established by federal and state agencies and to provide a systematic way to ensure the purchase and use of up-to-date, safe, appropriate products.

DEFINITIONS:

Conventional device or standard device refers to older device designs lacking an integral safety feature to protect against sticks or blood exposures.

Sharps with engineered sharps injury protections means a non-needle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident. (Ref: OSHA Bloodborne Pathogen Standard, online at http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=10051)

BACKGROUND:

Federal and state initiatives provide regulatory mandates for protecting workers against exposure to bloodborne pathogens from sharps injuries or other blood exposures.

In 1991, OSHA issued the Bloodborne Pathogens Standard to protect workers from this risk. In 2001, in response to the Needlestick Safety and Prevention Act, OSHA revised the Bloodborne Pathogens Standard 29 CFR 1910.1030. The revised standard clarifies the need for employers to select safer needle devices and to involve employees in identifying and choosing these devices. The updated standard also requires employers to maintain a log of injuries from contaminated sharps. References:

General description: <http://www.osha.gov/SLTC/bloodbornepathogens/>

OSHA Bloodborne Pathogen Standard:

http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=10051

Needlestick Safety and Prevention Act:

http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=106_cong_public_laws&docid=f:publ430.106

In 2000, under the Massachusetts law "An Act Relative to Needlestick Injury Prevention" (Chapter 252 of the Acts of 2000, Massachusetts General Law Section 53D of Chapter 111) the Massachusetts Department of Public Health (MDPH) promulgated regulations requiring hospitals to use only such devices that minimize the risk of injury to health care workers from needlesticks and sharps. Each Hospital, therefore, must attempt to prevent injury by the thoughtful selection and use of devices with engineering safety features. The regulations included a provision for circumstances in which the technology does not promote safety or it interferes with a medical procedure.

Reference: <http://www.mass.gov/legis/laws/mgl/111-53d.htm>

From: General Laws of Massachusetts, Chapter 111: Section 53D

(2) Sharps injury prevention technology shall be included as engineering or work practice controls, except in cases where the employer or other appropriate party can demonstrate circumstances in which the technology does not promote employee or patient safety or

More information is available on the SHP Website:
<http://www.sustainablehospitals.org>

3

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Sharps Policy, 12/14/05

interferes with a medical procedure. Those circumstances shall be specified by the employer and shall include, but not be limited to, circumstances where the technology is medically contraindicated or not more effective than alternative measures used by the employer to prevent exposure incidents. In all cases the department shall make the final determination as to whether an employer or other appropriate party has demonstrated in a satisfactory manner circumstances which warrant an exemption from the inclusion of sharps injury prevention technology.

POLICY STATEMENT: Conventional sharps and needle devices will not be used in any manner on the Hospital campus, including within the Hospital buildings and medical office buildings, unless no reasonable alternatives, as determined by Hospital Administration and approved by the Massachusetts Department of Public Health, are available. When use of a conventional sharp product is permitted, measures will be taken to avoid injury from the device.

APPLICABILITY: Compliance with this policy and its procedures is a condition of employment and of clinical privileges and the use of any property on the Hospital campus. The Hospital reserves the right to take any and all actions, including to seek injunctive relief, to prevent violation of this policy by any party.

PROCEDURES

1. The Hospital's medical departments will work together to identify product(s) or procedure(s) in which conventional sharps devices are currently in use within the Hospital campus and to identify acceptable alternatives. A list of such products/processes and their alternatives will be presented to the Safety Committee that will arrange for its distribution throughout the Hospital community. The list will be reviewed, updated, and distributed at least once per year. Ideally, the list will be available online to staff members.
2. When conventional sharps products or procedures are identified, the manager(s) for the department(s) using such products/procedures will develop a plan to include a.) plans for prevention of injury, b.) a schedule for the elimination of the use of these products/procedures or, in the alternative, the rationale (including information required below at 4.) for continued use of such products/procedures. The manager(s) will present the plan to the Safety Committee for review and approval.
3. The Safety Committee will review all plans for the use of conventional sharps devices and may approve the plans as submitted or with modification. Upon approval, the affected departmental manager(s) will implement the plans.
4. Managers of departments using conventional sharps products/procedures will maintain a readily retrievable log of the conventional sharps products/processes, the approved use(s), the alternatives considered, the reasons such alternatives were deemed unacceptable, and a schedule for reconsideration of available alternatives.
5. The Materials Management Department will establish purchase agreements that specify the requirement for sharps with engineered sharps injury protection features. Under the agreement, suppliers will quote and deliver safety devices, except as specifically identified and signed off by the hospital Safety Committee.
6. In case of an injury, employees and physicians will follow the hospital procedures for a sharps injury.
7. All employees and physicians will refrain from using conventional sharps devices on the Hospital campus unless such use has been approved according to this policy.
8. All employees and physicians are encouraged to present suggestions for eliminating conventional sharps products or procedures from the Hospital to the Hospital Safety Committee.