

**Infection Control Audit Tool for safe handling & disposal of sharps**

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Standard: Sharps will be handled safely to prevent the risk of needlestick injury

Date: ......................................... Ward............................................ Auditor: ...............................................................................................

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| **(a)** | **All Sharps bin** | **Yes** | **No** | **N/A** | **Comments/Action** |
| 1. | The bins in use comply with national standards (UN 3291, BS 7320) |  |  |  |  |
| 2. | Bins have not been filled above the fill line |  |  |  |  |
| 3. | Bins should be closed when meeting the fill line or has been open for 3 months |  |  |  |  |
| 4. | Bins are free from protruding sharps |  |  |  |  |
| 5. | All bins have been assembled correctly |  |  |  |  |
| 6. | All Sharps bins are labelled and signed according to the local policy with base, date of setting up and permanently closed |  |  |  |  |
| 7. | Sharps bins are stored safely, away from public and out of reach of children |  |  |  |  |
| 8. | Bins are stored appropriately off the floor |  |  |  |  |
| 9. | Sharps bins are used in accordance with ergonomic manual handling principles i.e. using brackets |  |  |  |  |
| 10. | The temporary closure mechanism is used when bins are not in use |  |  |  |  |
| 11. | Once full the bin aperture is locked |  |  |  |  |
| 12. | Sealed and locked bins are stored in a locked room, cupboard or container, away from public access |  |  |  |  |

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| **(b)** | **Safe Practice** | **Yes** | **No** | **N/A** | **Comments/Action** |
| 13. | An empty sharps bin is available on the cardiac arrest trolley |  |  |  |  |
| 14. | The sharps bin on the cardiac arrest trolley is stored safely |  |  |  |  |
| 15 | Sharps trays with integral sharps bins are available for use |  |  |  |  |
| 16. | Sharps trays are compatible with the sharps bins in use |  |  |  |  |
| 17. | Sharps trays in use are visibly clean |  |  |  |  |
| 18. | Sharps are disposed of directly into a sharps bin at the point of use (i.e. medicine trolleys and laboratory equipment) |  |  |  |  |
| 19. | Inappropriate re-sheathing of needles does not occur.  Observe or question a member of staff |  |  |  |  |
| 20. | Needles and syringes are discarded into a sharps bin as one unit |  |  |  |  |
| **(c)** | **Policy awareness** | **Yes** | **No** | **N/A** | **Comments/Action** |
| 21. | Nurse/Clinical manager in charge is aware of the action required following an inoculation injury. They should include immediate first aid, informing the manager, occupational health or A&E, completion of an incident form and describe the action for high risk injuries involving blood borne viruses (Question the nurse/clinical manager in charge) |  |  |  |  |
| 22. | Medical staff are aware of the action required following an inoculation injury as above (Question a member of medical staff) |  |  |  |  |
| 23. | Allied Health Care Professionals are aware of the first aid action required following an inoculation injury (Question a member of AHP staff) |  |  |  |  |
| 24. | Ancillary staff are aware of the first aid action required following an inoculation injury (Question a member of Ancillary staff) |  |  |  |  |
| 25. | Students are aware of the action required following an inoculation injury. (Question a member of staff) |  |  |  |  |
| 26. | Staff can identify where the safe handling of sharps policy is located |  |  |  |  |
| 27. | There is a policy and or poster available for the management of an inoculation injury |  |  |  |  |