

Notes for Non-Healthcare Businesses Handling Hypodermic Needles

These notes have been provided in conjunction with the presentation on April 16, 2019, by John Stebbins of DOSH Standards and Technical Services through Washington Retail Services.

Preventing exposures to bloodborne pathogens

There is an ongoing issue for many businesses dealing with needles or other materials that are found at their establishment, but are not part of their business. This can be from illicit drug use, but may also be from employees using medication in the workplace and for first aid responders.

This document provides information on reducing the hazards from found needles and how to set up a program to be in compliance with Chapter 296-823 WAC, Occupational Exposure to Bloodborne Pathogens.

Preventing loose needles

The following actions may eliminate or reduce the number of needles found in and around the establishment.

- Work with employees using needles for personal medical purposes to make sure they have the resources to properly handle and dispose of needles. They may talk to their healthcare provider or the local county health department regarding rules for their personal medical equipment. Rules for household disposal often differ from those for commercial establishments, so it may be easier for them to keep the needles and dispose them as an individual. Providing conveniently located sharps containers may help with managing the needles as well.
- Where illicit drug use is the issue, the establishment may want to work with local law enforcement and other community leaders to address the situation. Eliminating secluded gathering places or changing traffic patterns around the establishment may address this issue in part. Having problem areas patrolled regularly may be another option.
- Handling trash is a common task which results in needle sticks. No worker should compress garbage with their hand. Using hard sided trash bins and carts can protect workers. The full liner should be lifted so that it does not rest against the workers body and placed into a cart or can that will prevent needles poking through.
- Have workers avoid touching needles. Specify which workers should pick up and dispose of needles and provide them tool, such as tongs and hard containers, so they can avoid handling the needles with their hands.

Exposure Control Plan: Identifying employees at risk of exposure

Employees may be at risk of exposure to needles if they do housekeeping or grounds maintenance work. Emptying trash containers in restrooms or other private spaces is a common task that results in exposure. Needle sticks have also been common in seating areas when workers need to clean under and around cushions.

In non-healthcare settings, the primary exposure is to stray needles. Cleaning up urine, vomit, or feces may involve exposure, but usually there is no blood involved. If there is red staining in these substances then there may be an issue. If blood is found (for example due to a cut) then it is considered a risk if it is still liquid or has dried and can be flaked off. Blood that is absorbed into cloth or paper and cannot drip

or flake off is not a significant risk. Any blood or blood containing material can be treated with disinfectants (such as bleach solutions) to reduce the exposure prior to handling or cleaning.

In your exposure control plan you must identify which jobs will require all employees to be covered by the program. Other jobs may be listed if only some workers may be exposed. For example, a janitor position may always involve handling trash and may therefore require that all janitors be covered by the program. Other jobs, such as a clerk, may only have exposure on certain shifts. For example, during the day you may have a janitor handling trash, but ask that clerks working at night take out the trash before closing.

In addition to these divisions, it may be useful to specify jobs that are not expected to handle needles or other materials but may encounter them on occasion. As an example, a clerk position that does not handle trash but only has the publicly available restroom available may encounter a needle left in the trash or restroom. These workers should be trained on avoidance of the hazard and appropriate follow up procedures if there is an exposure.

Jobs that have first aid response as part of their duties should also be identified.

Exposure Control Plan: Personal protective equipment

For most non-healthcare settings providing nitrile gloves, safety glasses and a face shield will be adequate. These may be useful for other cleaning tasks as well or provided for other purposes. Specify which equipment is expected to be used for the purpose of this program.

Exposure Control Plan: Controlling employee exposure

Infection control systems are a set of general procedures used in the healthcare industry. These are sets of work practices and controls that can limit worker exposure to bloodborne pathogens and other hazards and also provide protection for patients.

In non-healthcare industry settings the appropriate control strategy is avoiding contact. No needle or other substance should be handled directly. Disinfection or used of handling tools should always be applied prior to handling or cleanup.

The section of the program on safer medical devices is not relevant for non-healthcare employers except providing sharps containers. Location and handling procedures should be given. If no sharps containers are provided, then a description of the handling procedures should be given. Handling of sharps containers needs to be consistent with the policies of your trash collection company. You may also contact the local health department for additional options for disposal.

Exposure Control Plan: Non-healthcare Work Practice Examples

- Emptying trash:
 - All trash cans will be lined.
 - Use the provided hard sided trash bin or cart when emptying trash.
 - If trash is emptied from the can to the cart, hold the can by the sides and do not let trash contact your hands during the transfer.
 - If the trash is removed with the liner, examine the trash at the top and gather the liner above the trash level. Do not compact the trash with your hands, use a pressing tool if

necessary. Hold the bag away from your body and hold it by the gathered material at the top. Place the bag in the bin or cart.

- When emptying the bin or cart, hold it with handles or on the sides to prevent contact with the trash. Use a lift for emptying the cart if provided.
- Picking up needles:
 - Use the provided tongs and sharps container.
 - Do not touch the needle with your hands.
 - Use the tongs to lift the needle and place it into the sharps container.
 - Return the sharps container to the storage location or dispose of it as
- Cleaning blood and other bodily fluids:
 - Use gloves, eye protection, and face protection as appropriate.
 - Use the provided disinfectant to sanitize the area. Spray the sanitizer on the spill and allow it to sit for two minutes (or as directed by the sanitizer label).
 - Use a mop, sponge or cleaning rags to minimize contact with the material being cleaned up. Have a trash receptacle handy and place any disposable materials promptly in the trash.
 - Clean the bulk of the material and remove it.
 - Wipe down the area a final time with a clean mop, sponge or rag and be sure to wipe up all traces of the disinfectant.

For non-healthcare settings, the establishment safety committee or meetings are the time to review work practices and make improvements.

Hepatitis B Vaccinations

Workers who are exposed regularly to bloodborne pathogens must be offered medical counselling and hepatitis B vaccinations. Workers without regular exposure, such as first aid responders, are not required to be provided medical services unless there is an exposure incident.

The medical consultation will determine if the worker may have already been vaccinated or has medical reasons to not be vaccinated. Workers may also decline vaccination. A report must be on file from the medical provider indicating that the worker is being vaccinated, should not be vaccinated, or has declined vaccination. In the latter case, a declination form signed by the employee must be included.

The medical provider may recommend other vaccinations. Any vaccinations provided must be done at no cost to the employee. In many cases these vaccinations may be generally recommended and may be covered by medical insurance.