

Safer Work Practices For Nursing

Nursing interventions and care in long term or acute care settings encompass a wide variety of tasks, many of which involve personal contact and potential Blood and Body Fluid (BBF) contact.

While injections (SC or IM) or accessing IV lines or other specialty lines such as CVC's or PICC lines have identified risks, other tasks such as suctioning, dressing changes, bathing or assisting with toileting also have potential BBF exposure risks.

- All staff should follow general or common BBF precautions and general sharps container practices.
- Personal Protective Equipment (PPE) such as gloves, masks, gowns and face shields must be worn whenever there is a potential for a BBF exposure.
 - PPE must be readily available to staff.
 - Staff are expected to use the appropriate PPE and should remind co-workers to wear PPE when appropriate.
- Do not pass contaminated sharps from one person to another.
 - Single use sharps must be immediately disposed of (e.g. needle) at point of use.
- Handle all patient clothing, personal items and linen with care as they may contain hidden or unprotected sharps.

- Uncooperative or psychologically disturbed patients might be sedated or given pain medicine, if ordered and indicated, prior to invasive or painful procedures.
- Whenever possible, obtain assistance when starting an IV, giving an injection or drawing blood from an uncooperative, combative or confused patient.
- During codes or high stress situations try to keep calm. Communicate your actions to each other and properly dispose of sharps immediately after use rather than holding them in your hand or setting them on a table or bed.
- Be aware that a wide variety of things, even a sneeze or cough, can result in an unexpected movement.
- Consider safer alternatives of delivering care that are equally as effective with out using sharps, when appropriate. For example, can the medication be given by mouth, trans-dermal patch or through a needleless IV system rather than an injection?
- Before you begin a procedure with a sharp device, assure that a stable work surface and a needle disposal container are available.
- Proper disposal practices reduce exposure and BBF injuries to co-workers and other staff such as housekeeper and laundry workers.

- Butterfly needles are higher risk devices for needlesticks therefore:
 - limit the use of conventional devices;
 - always use a safety engineered butterfly where appropriate;
 - stretch out the butterfly tubing when removed from the package to reduce recoil;
 - use care when putting the needle in the disposal container as it can flip out of the container.
- Avoid handling needles or broken glass manually. Avoid direct contact, use forceps, brush and dust pan, or clamps and dispose into a proper container.
- Many high risk patients or chronically ill patients may have PICC lines or Porta-caths. If safer IV catheters and needle-free saline locks are used, the risk of needlesticks is decreased.
- When minor surgical procedures are performed outside of the surgical suite, the neutral or safe zone concept should be utilized.
 - Sharps are placed in a designated area to be retrieved by the user.
 - This avoids hand-to-hand transfer of sharps between personnel.

General Blood and Body Fluid Safe Work Practices

The purpose of safe work practices are to provide a safer work environment for health care workers who may be exposed to Blood and Body Fluids (BBF) by handling:

- Sharps
- Initiating intravenous or subcutaneous access
- Administering medication via IM, SC routes

Workers who may be exposed to other Blood and Body Fluids such as:

- Splashes
- Soiled laundry
- Bio-hazardous waste or
- Other body fluids.

By following appropriate procedures and practices you will have taken steps to improve the safety of co-workers, patients and your self.



Sharps Containers

- Only approved sharps / biohazard containers should be used.
- Containers should have a fixed top or lid that prevents the contents from spilling out if tipped or knocked over. Containers should have a means of “locking” or securing the lid to prevent access to the contents when full.
- Portable sharps containers should be used when a fixed container is not within close proximity.
- Fixed sharps containers should be placed just below the health care worker's eye level so the disposal slot can be seen before moving his/her hand towards it.
- Sharps containers must be replaced when they are $\frac{3}{4}$ full or the fill line is reached.
 - This helps to prevent over filling or the protrusion of sharps from the opening and / or the sides of the containers.
- Ensure that the correct type of sharps container is being used.
 - Some IV devices or needles have long guide wires, attached tubing or are longer than regular needles that are difficult to dispose of and need a deeper container (e.g. 5 gallon) so they do not spring out.

Sharps CARE

Nursing Safe Work Practices



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