

Unsafe Sharps Support Plan

Site Applicability

PHC: Acute Care Sites VCH: Acute Care Sites

Practice Level

Basic: RN, RPN, LPN

Need to Know

- **Clinical Indication:** Patients who are identified as having an <u>unsafe sharp</u> and for whom an *Unsafe Sharps Support Plan* (<u>Appendix A</u>) should be in place.
- The goal is to reduce the risk of unintended needle stick injury to any persons having contact with the patient or their belongings (e.g., nurses, allied health, housekeepers, dietary staff, physicians, and other patients).
- A harm reduction approach which aims to reduce harms related to substance use shall exist, which includes unsafe sharps.
- Nurses demonstrate a culturally safe approach, and consider a patient's physical, mental, emotional, spiritual, and cultural needs.
- Nurses practice Trauma Informed care by recognizing the potential for trauma in a patient's life (personal or intergenerational) and use a respectful approach, including seeking permission before engaging in assessments.
- When creating supportive plans of care, nurses use a relational approach, and include the patient, and their families as requested.

Guideline

Assessment and Interventions

If it is determined that a risk for unsafe sharps exists (e.g., **uncapped needles found**), the following actions should be taken:

- Discuss unsafe sharps concern with patient. Focus on the safety concern related to the
 uncapped needle on the syringe not on possession of the syringe itself. Reinforce that
 safe/sterile harm reduction supplies, including new needles and syringes, can be provided on
 request.
- Review safe disposal of sharps with patient. Provide a sharps container within reach of the bedside and in bathroom (e-PRO Item ID: 00132774/00003918).
- Create a patient-specific sharps support plan in collaboration with the Clinical Nurse Leader (CNL)/Patient Care Coordinator (PCC) or Charge Nurse (CN) (<u>Appendix A</u>: *Unsafe Sharps Support Plan*, found in FormFast).

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Tips and examples for care planning and promoting staff and patient safety:

- Ask all patients prior to providing care, if there are possible sharps hazards that you may encounter
- Provide safe/sterile harm reduction supplies (e.g., insulin/TB syringes, alcohol swabs, tourniquet) and an individual sharps container within reach of bedside and in bathroom (or contact your site's substance use/addiction service for support)
- Offer PRN medication for pain and withdrawal proactively (i.e., not waiting for patient to ask for PRN medication)
- Assess patient frequently for pain, withdrawal and cravings (e.g., if patient is agreeable, wake patient up at night for assessment and administration of medication)
- Remind patient of the importance of a self-check for sharps before staff perform care and following times or activities of potential risk (e.g., after a visitor leaves or patient returns from off unit)
- Offer training and dispense take home naloxone kit to patient
- Limit contact with patient belongings and use designated sharps gloves and tongs when available/appropriate (VCH – see <u>Safe Work Procedure Collection of Sharps</u>).
- Notify your site's substance use/addiction service (e.g., Addiction Medicine Consult Team, Complex Pain & Addictions Service, Drug and Alcohol Resource Team) of concern and *Unsafe Sharps Support Plan*.
- Place *Unsafe Sharps Support Plan* in patient's chart/chartlet for reference.
- Place sharps risk signage on patient's door and/or bedside (<u>Appendix B</u>).
- Review *Unsafe Sharps Support Plan* when changes are identified or at minimum annually for potential revisions or discontinuation of the plan/process alert in Cerner.
- Ensure awareness of support plan among those without chart access and that staff are aware of what the sign indicates (e.g., housekeeping, porter ward aides, dietary staff):
 - Ensure unsafe sharps precaution sign is clearly visible over patient's bedhead and/or door to alert other staff members (consider what is most appropriate when balancing discretion with staff safety)
 - Place an alert on patient chart/chartlet and add an "<u>Unsafe Sharps Risk</u>" process alert in Cerner.

Documentation

- Document unsafe sharps concern, actions taken, and corresponding sharps support plan on *Unsafe Sharps Support Plan* document.
- Document other assessments and interventions in nursing notes, site-specific documentation tools, or in Cerner as needed.

Patient and Family Education

 Provide education on safe disposal of sharps and inform patient that substances themselves should be stored with their personal belongings or in a bedside safe (where available). At VCH, refer to Secure Storage of Non-Prescribed Controlled Substances SOP.

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 Encourage patients to be open about their substance use, including letting their care team know when they are experiencing pain, withdrawal or cravings, and whether they intend to use and require safe/sterile supplies.

- Provide education on overdose prevention and harm reduction strategies if patient is receptive.
- Provide information on <u>overdose prevention sites and supervised consumption sites</u> in community, and the St. Paul's Hospital Overdose Prevention Site (SPH OPS) if patient is admitted to SPH.

Related Documents

PHC:

- Indigenous Cultural Safety B-00-11-10254
- Philosophy of Care for Patients and Residents Who Use Substances B-00-11-10125
- Possession of Controlled Substances for Personal Use B-00-11-10258

VCH:

- Safe Work Procedure for the Collection of Sharps D-00-16-30458
- Harm Reduction and Safety Planning in Acute Care D-00-07-30365
- Secure Storage of Non-Prescribed Controlled Substances in Acute and Long-term Care
- Indigenous Cultural Safety Policy D-00-11-30044
- Trauma Informed Practice Guideline BD-00-77-40107

PHC Additional Resources:

- Nurse Educator Substance Use at 236-838-1278, Nurse Educator 8A Urban Health at 236-858-1904, or unit Nurse Educator
- SPH Overdose Prevention Site (4th floor Providence Building by the cafeteria, open 1000 to 2000, local 63287)
- Addiction Medicine Consult Team, including the AMCT Liaison Nurse at 236-818-3125
- Rapid Access Addiction Clinic (RAAC) peer navigator for additional harm reduction supplies and/or guidance on harm reduction teaching, local 62679 or 236-889-2748

VCH Additional Resources:

- VA Complex Pain & Addictions Service Team RN at 604-984-5790 or Social Worker at 604-837-5361
- Richmond Drug and Alcohol Resource Team (DART) at 604-244-5396 or 604-250-8352
- Local Professional Practice Leader
- People Safety: PeopleSafety@VCH.ca
- VCH Regional Harm Reduction Website

References

Bahat, H., Hasidov-gafni, A., Youngster, I., Goldman, M., & Levtzion-korach, O. (2021). The
prevalence and underreporting of needlestick injuries among hospital workers: a cross-sectional
study. International Journal for Quality in Health Care, 33(1), 1–5.
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- BCCNM. (2022). Indigenous Cultural Safety, Cultural Humility, and Anti-Racism Practice Standard.
- 3. Mitchell, A. (2020). Sharps injury prevention. American Nurse Journal, 15(4), 38.
- 4. International Safety Center, & Sharps Injury Prevention Stakeholder group. (2020). Moving the Sharps Safety in Healthcare Agenda Forward in the United States: 2020 Consensus Statement and Call to Action.

Definitions

Unsafe sharps: uncapped needles that are left in precarious areas such as common areas (e.g., bathrooms), garbage cans, bedside tables, bed linens, or on their person poses a risk to health care staff and/or other patients. Broken glass (e.g., glass pipes used for inhalation) may also be included in the care plan if necessary.

Appendices

Appendix A: Unsafe Sharps Support Plan (form)

Appendix B: Unsafe Sharps Caution Sign (PHC order from Royal Printers, VCH Order from Printing Services)

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CNL / PCC / Educator signature

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GUIDELINE BD-00-07-41012

Appendix A: Unsafe Sharps Support Plan Place Patient Form Label Here **Providence** Vancouver / **Health Care** CoastalHealth **UNSAFE SHARPS** SUPPORT PLAN Interdisciplinary Care Plan Date: UNSAFE SHARPS CONCERN: ACTIONS TAKEN: Discussed unsafe sharps concern with patient ☐ Educated patient re: safe disposal of sharps Notified site-specific substance use/addictions bervice of concern and sharps support plan ☐ Created patient specific sharps support plan (see below) ☐ Provided information on Overdosc F. example of Provided Consumption Sites (where available) ☐ Placed sharps risk signage on patient's door and/ or over bed Alert placed on patient chan (raper) or Process Alert added (Cerner) SHARPS SUPPORT PLAN: (see guideline on SHOP for practice pointers) Staff signature Printed name

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Printed name

Date reviewed / revised (at minimum annually)

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Approved By:	PHC	VCH
(committee or position)	Professional Practice Standards Committee	VCH: (Regional DST Endorsement - 2nd Reading)
		Health Authority & Area Specific Interprofessional Advisory Council Chairs
		(HA/AIAC)
		Operations Directors
		Professional Practice Directors
		Final Sign Off:
		Vice President, Professional Practice & Chief Clinical Information Officer, VCH
Owners:	PHC	VCH
(optional)	Clinical Nurse Specialist, Substance Use	Practice Lead, VA

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