



Position Statement Safety Needles and Safety Lancets

Safety Pen Needles and Lancets

Safety pen needles and lancets incorporate a safety device to cover the sharp after use. They should be used by all **healthcare professionals** and **employees in the healthcare sector** when administering diabetes injections or checking blood glucose levels, to avoid contamination by needlestick. There are two different types of safety needle, depending on the mechanism used to cover the used sharp: active or passive devices. All the safety needles in this guidance have a 'passive' mechanism i.e. the sharp automatically retracts following injection without the user having to manually activate the safety mechanism. This is the system that most health and care workers will be familiar with, however it is important that staff and people with diabetes, are provided training on the use of the safety engineered devices they are using, as there may be differences in use and injection technique.

In line with the Health and Safety (Sharp Instruments in Healthcare) Regulations 2013, where a safety needle is required by a healthcare worker, this should be **provided by the health care workers' employer (both public and private sectors)**¹. Therefore, healthcare organisations should ensure that they have processes in place to source safety needles and lancets, for use by their employees. Employers are responsible for providing the appropriate safety devices and ensuring staff are adequately trained on their use.

Implications

 Safety needles and lancets should **NOT** be prescribed on prescription for use by healthcare professionals and employees, it is their employer's responsibility to supply these directly to their staff.

Exceptional Circumstances

Safety needles and lancets are significantly more expensive than standard needles and lancets and should only be prescribed on FP10 in **exceptional** circumstances, such as in the circumstances below.

- Where diabetes injectable medication is administered by a non-healthcare worker such as a carer or relative (i.e. not employed) AND the person with diabetes is known to have a bloodborne disease e.g. seropositive for Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV) or Hepatitis C Virus (HCV)
- Where there is a danger of needle-stick injury to a non-healthcare worker e.g. children injecting at school or where safe disposal of sharps may be a problem
- Prisoners who are self-injecting diabetes medication
- Rarely, a few people who self-administer their injections are prescribed safety
 needles as a reasonable adjustment, e.g. where genuine needle phobia is an issue,
 or for people with a visual impairment. Providing safety needles in these rarer
 situations may support independence and offers empowerment to the person with
 diabetes and remains at the clinician's discretion. The ongoing need for safety
 sharps should be reviewed at the annual diabetes review.
- Prescribing for use in a domiciliary care setting, where a non-professional healthcare worker e.g. carer, has delegated insulin administration responsibility.

In all cases the needle with the lowest acquisition cost should be used first-line line where possible, such as **Apollo Pro-Shield Safety 4mm/30g.**

- Health and Safety (Sharp Instruments in Healthcare) Regulations 2013; Guidance for employers and employees. Published by the Health and Safety Executive http://www.hse.gov.uk/pubns/hsis7.htm
- 2. Handling sharps in adult social care Care Quality Commission