

Sharps Handling And Disposal

Business Name:		ABN:	
Business Address:			
Contact Person:	Phone:	Email:	

THIS RISK ASSESSMENT IS APPROVED BY THE PCBU ON THIS PROJECT

Under the Work Health and Safety Regulation (WHS Regulation), a person conducting a business or undertaking (PCBU) is required to ensure that a RISK ASSESSMENT is prepared before the proposed work starts.

Full Name:		
Signature:	Title:	Date:

CLIENT OR PRINCIPAL CONTRACTOR DETAILS

Client:	SCOPE OF WORKS
Project Name:	
Project Address:	
Project Manager:	
Contact Phone:	
Date Risk Assessment supplied to Project Manager:	



RISK MATRIX									
LIKELIHOOD	INSIGNIFICANT	MINOR	MODERATE	MAJOR	CATASTROPHIC	SCORE	ACTION	HIERARCHY OF CONTROLS	
ALMOST CERTAIN	3 HIGH	3 HIGH	4 ACUTE	4 ACUTE	4 ACUTE			Elimination Remove the hazard.	
LIKELY	2 MODERATE	3 HIGH	3 HIGH	4 ACUTE	4 ACUTE	4A ACUTE	DO NOT PROCEED	Substitution Replace the hazard.	
POSSIBLE	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	4 ACUTE	3H HIGH	Review before work starts.	Isolation Isolate People from the hazard	
UNLIKELY	1 LOW	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	2M MODERATE	Ensure control measures in place.	Engineering Isolate the hazard	
RARE	1 LOW	1 LOW	2 MODERATE	3 HIGH	3 HIGH	1L LOW	Monitor and keep records.	Administrative Change PPE	

Risk Rating & Required Action:	
4A	Stop work. The risk is intolerable. Eliminate the hazard or redesign the activity before proceeding. A Safe Work Method Statement (SWMS) or higher-level authorisation is required.
3H	Review and approve additional controls before task starts. Senior supervisor sign-off needed.
2M	Ensure all nominated controls are in place and effective. Proceed with caution; monitor conditions.
1L	Proceed, following standard operating procedures. Monitor and keep records.

Consequence Scale:			
Consequence	People (injury/illness)	Project / Assets	Compliance / Reputation
Catastrophic	Fatality or permanent total disability	project shutdown	Significant regulator intervention; criminal prosecution
Major	Serious injury/illness (hospital > 5 days)	critical delay	Improvement notice; major media coverage
Moderate	Medical-treatment injury; lost-time > 1 day	moderate delay	Minor breach; adverse client comment
Minor	First-aid only, no lost time	negligible delay	Isolated non-conformance
Insignificant	No injury	no schedule impact	Deviation caught and corrected on site

Notes on Hierarchy of Controls:
Remember to apply controls in the preferred order shown by the coloured pyramid:

1. **Eliminate**
2. **Substitute**
3. **Isolate**
4. **Engineering**
5. **Administrative**
6. **PPE**

Always document **why** a lower-order control is accepted if elimination or substitution is not reasonably practicable.

aligned with Safe Work Australia's Managing the risk of fatigue at work (2023) and ISO 45001:2018 clauses 6–8.

JOB STEP	POTENTIAL HAZARDS	IR	CONTROL MEASURES	RR
SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK
1. Governance, Policy And Legislative Compliance	<ul style="list-style-type: none"> Absence of a documented sharps handling and disposal policy aligned with WHS Act 2011 and relevant state/territory regulations (including public health and environmental legislation) Sharps risk controls not incorporated into the organisation's overall WHS management system and risk register Lack of clear assignment of roles, responsibilities and authority for managing sharps risks (PCBUs, officers, workers, contractors) Inadequate consultation with Health and Safety Representatives (HSRs) and workers regarding sharps hazards and control measures Failure to review and update sharps-related procedures following legislative changes, incidents, audits or changes in work practices Inconsistent standards across sites leading to variable risk controls for handling and disposal of sharps and sharp waste 	High	<ul style="list-style-type: none"> Develop, approve and implement a formal Sharps Handling And Disposal Policy that references the WHS Act 2011, WHS Regulations, relevant Codes of Practice, and applicable environmental and public health legislation Integrate sharps risk management into the organisation's WHS management system, including hazard identification, risk assessment, control implementation, monitoring and review processes Define and document governance structures for sharps management (e.g. WHS committee oversight, clinical governance where relevant, and line management accountability for implementation) Clearly allocate and document responsibilities for sharps risk management in position descriptions, contracts and induction material for employees, labour hire and contractors Establish formal consultation mechanisms (HSR meetings, toolbox talks, safety forums) that specifically address sharps-related hazards, incidents, and proposed changes in controls Implement a scheduled review cycle (e.g. annually or after significant incidents) for all sharps-related policies and procedures, with version control and documented approvals Standardise minimum sharps requirements across sites (e.g. obligatory use of compliant sharps containers, signage, reporting requirements), while allowing for site-specific risk addenda where needed Ensure procurement and contract management processes require compliance with organisational sharps policies and applicable legislation for all contractors and waste service providers 	Medium
2. Sharps Procurement, Design And Equipment Selection	<ul style="list-style-type: none"> Procurement of sharps and sharp devices (e.g. needles, scalpels, lancets, glass ampoules) without considering safer design or safety-engineered features Lack of organisational standards for approved sharps containers and packaging for sharps waste Use of non-compliant, makeshift or damaged sharps containers (e.g. generic plastic bottles) increasing risk of puncture and sharps exposure Inadequate planning for supply, placement and capacity of sharps containers, causing overfilling or ad hoc storage of sharp waste 	High	<ul style="list-style-type: none"> Establish a procurement standard mandating the consideration and preference for safety-engineered sharps devices (e.g. retractable needles, safety lancets, needleless systems) where reasonably practicable Develop a register of approved sharps devices and containers that meet Australian standards and relevant state/territory requirements for clinical and sharp waste Specify minimum performance and design criteria for sharps containers (e.g. puncture resistance, tamper resistance, secure lids, fill-lines, appropriate size and mounting options) in procurement documentation Integrate WHS review into procurement processes so that any new or changed sharps products are subject to risk assessment, product evaluation and, where appropriate, trial and worker consultation Standardise labelling, colour-coding and signage requirements for sharps containers and sharp waste packaging across the organisation, consistent with relevant Australian standards and guidelines Ensure contracts with suppliers include obligations to provide safety data, product information, and training resources for any new sharps devices introduced 	Medium

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	<ul style="list-style-type: none"> • Purchase of products with poorly designed packaging that increases risk of cuts or puncture during initial opening or repacking • Inconsistent labelling or colour-coding of sharps containers and sharp waste packaging, causing confusion and incorrect disposal 		<ul style="list-style-type: none"> • Plan and document minimum container-to-user ratios and container placement criteria (e.g. point-of-use accessibility, height, stability, distance from public areas) to minimise manual handling and handling of uncontained sharps • Introduce a formal approval process for any deviation from the approved sharps and container list, including documented risk assessment and senior management sign-off 	
3. Systems For Handling, Packing And Disposal Of Sharps Waste	<ul style="list-style-type: none"> • Lack of a clearly documented procedure for safe handling, packing and disposal of sharps and sharp waste across all work areas • Inconsistent practices in dealing with used needles, blades and other sharps, leading to ad hoc handling and increased risk of needlestick injuries or cuts • Improper segregation of sharps from general waste, recyclable waste or clinical waste streams, leading to sharps ending up in inappropriate receptacle • Overfilled, unsecured or incorrectly closed sharps containers increasing the chance of sharps protruding or spilling during handling and transport • Inadequate systems for collection, internal transfer, storage and external disposal of sharps waste, including unclear responsibilities and schedules • Uncontrolled handling of sharps during packing for transport (e.g. consolidation of containers, manual sorting, handling of loose sharps) • Lack of clear arrangements and documentation with licensed waste contractors for collection, transport and final disposal of sharps waste 	High	<ul style="list-style-type: none"> • Develop and implement standard operating procedure (SOP) for sharps handling, segregation, packing, labelling, internal transfer, interim storage and final disposal, applicable to all relevant work areas • Mandate the immediate placement of sharps into approved sharps containers at point of use, with a strict prohibition on re-capping or manual manipulation where not clinically justified and risk assessed • Define and communicate waste segregation rules so that sharps and sharp waste are never mixed with general or recyclable streams, and ensure that all bins are clearly labelled and colour coded • Implement a system to monitor and enforce container fill limits (e.g. not exceeding indicated fill line), including documented responsibilities for checking and sealing containers when full • Establish documented internal collection and transport arrangements (e.g. designated personnel, frequency, trolleys, secure routes) for sealed sharps containers to central storage areas • Develop criteria for interim storage areas (e.g. restricted access, signage, secondary containment, ventilation) and document these within the WHS and facilities management systems • Formalise contracts with licensed waste contractors, ensuring they are approved to handle sharps and clinical waste and are required to provide compliance documentation (e.g. waste tracking, certificates of disposal) • Introduce periodic audits of waste handling practices and storage areas (e.g. bin inspections, container integrity checks, segregation compliance) with corrective actions tracked to closure • Ensure contingency procedures exist for managing damaged or leaking containers, unknown or illicit sharps, and bulk or unexpected sharps waste (e.g. from clean-ups or special campaigns) 	Medium
4. Training, Competency And Supervision	<ul style="list-style-type: none"> • Workers, students, volunteers and contractors handling sharps without adequate induction, competency-based training or supervision • Limited understanding of the risks of skin piercing by sharps, including 	High	[REDACTED]	Medium

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	<p>transmission of blood-borne diseases and other infections</p> <ul style="list-style-type: none"> • Incorrect or unsafe techniques for dealing with sharps, packing sharp objects and disposing of sharp waste due to informal or inconsistent instruction • Lack of refresher training leading to complacency and drift from safe systems of work over time • Supervisors not adequately trained to monitor sharps-related practices or to intervene when unsafe behaviours are observed • Non-clinical or ancillary staff (e.g. cleaners, maintenance, waste handlers) exposed to sharps hazards without tailored training for their roles 		[REDACTED]	
5. Incident Management, Reporting And Investigation	<ul style="list-style-type: none"> • Under-reporting of needle stick and sharps-related incidents due to fear, stigma, lack of understanding or complex reporting systems • Delayed response to sharps exposure incidents, leading to missed opportunities for timely medical assessment and prophylaxis • Inadequate investigation of sharps incidents resulting in repeat events and failure to identify systemic issues • Poor communication of learnings from incidents and near misses across the organisation • Lack of clarity on when sharps incidents are notifiable to regulators or other external bodies • Inadequate record keeping of exposure incidents, treatments and follow-up, impacting long-term health monitoring and legal defensibility 	High	[REDACTED]	Low

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			[REDACTED]	
6. Health Monitoring, Vaccination And Occupational Hygiene	<ul style="list-style-type: none"> Workers handling sharps or sharp waste not being assessed for suitability for tasks with potential blood-borne pathogen exposure Inadequate vaccination programs (e.g. hepatitis B) for workers at risk of sharps injuries Lack of access to appropriate personal protective equipment (PPE) or unclear requirements for its use during handling and disposal of sharps Insufficient occupational hygiene controls for managing contamination risks associated with blood and body substances on sharps Inadequate confidential records and follow-up systems for workers who sustain sharps injuries or exposures Failure to consider vulnerable workers (e.g. immunocompromised, pregnant, inexperienced) when assigning tasks involving sharps 	High	[REDACTED]	Medium
7. Contractor, Visitor And Public Interface Management	<ul style="list-style-type: none"> Contractors (e.g. cleaners, waste transport providers, maintenance workers) exposed to sharps hazards without integration into the organisation's sharps management systems Visitors, clients or members of the public encountering improperly managed sharps or sharps containers in accessible areas Poor coordination of responsibilities between host organisation and 	Medium	[REDACTED]	Low

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	<p>contractors for dealing with sharps finds and sharps waste disposal</p> <ul style="list-style-type: none"> • Inadequate control of areas where illicit or unexpected sharps may be present (e.g. public toilets, car parks, grounds), increasing risk to staff and public • Lack of communication of sharps risks and required behaviours to visiting clinicians, students or other professionals using the site • Failure to manage community expectations and complaints regarding sharps found on or near organisational premises 		[REDACTED]	
8. Environmental, Storage And Security Controls	<ul style="list-style-type: none"> • Improper storage of sharps containers and sharp waste leading to leakage, spills, unauthorised access or environmental contamination • Fire, flood or other emergency events compromising sharps waste storage areas and creating uncontrolled exposure risks • Unauthorised access to sharps containers by students, visitors children or members of the public • Sharps containers placed in unstable, high-traffic or poorly lit locations increasing likelihood of tipping, dropping or accidental contact • Failure to manage temperature, ventilation or secondary containment where required for sharps storage, especially large volumes of waste • Inadequate signage and labelling in storage and disposal areas leading to confusion and incorrect handling by staff or contractors 	Medium	[REDACTED]	Low
9. Continuous Improvement, Audit	<ul style="list-style-type: none"> • Lack of measurable performance indicators for sharps safety, resulting in 	Medium	[REDACTED]	Low

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And Performance Monitoring	<p>poor oversight by management and officers</p> <ul style="list-style-type: none"> • Failure to conduct regular audits of sharps handling and disposal systems, allowing unsafe practices to become normalised • Inadequate analysis of incident data, inspection findings and worker feedback, leading to missed opportunities to improve systems • No structured process to test the effectiveness of changes made following incidents or audits • Limited management review of sharps-related WHS performance, reducing accountability and resourcing for improvements 		<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>	

SAMPLE

EMERGENCY RESPONSE – CALL 000 FOR EMERGENCIES

Ensure to have an Emergency Management Plan in place as well as adequate numbers of trained first aid staff with easy access to fully stocked first aid kits, rescue equipment, material safety data sheets, adequate access to emergency communication equipment and fire-fighting equipment suitable for all classes of fire and ignition sources.

LEGISLATIVE REFERENCES

RELEVANT LEGISLATION AND CODES OF PRACTICE. DELETE THE LEGISLATIVE REFERENCES FOR ANY STATE THAT ARE NOT APPLICABLE

Queensland & Australian Capital Territory

Work Health and Safety Act 2011
 Work Health and Safety Regulations 2011
 Legislation QLD: <https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws>
 Codes of Practice QLD: <https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice>
 Legislation ACT: <https://www.worksafe.act.gov.au/laws-and-compliance/acts-and-regulations>
 Codes of Practice ACT: <https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice>

Victoria

Occupational Health and Safety Act 2004
 Occupational Health and Safety Regulations 2017
 Legislation VIC: <https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and-regulations>
 Codes of Practice VIC: <https://www.worksafe.vic.gov.au/compliance-codes-and-codes-practice>

New South Wales

Work Health and Safety Act 2011
 Work Health and Safety Regulations 2025
 Legislation NSW: <https://www.safework.nsw.gov.au/legal-obligations/legislation>
 Codes of Practice NSW: <https://www.safework.nsw.gov.au/resource-library/list-codes-of-practice>

Western Australia

Work Health and Safety Act 2020
 Work Health and Safety Regulations 2022
 Legislation Western Australia: <https://www.commerce.wa.gov.au/worksafe/legislation>
 Codes of Practice WA: <https://www.commerce.wa.gov.au/worksafe/codes-practice>

Northern Territory

Work Health and Safety (National Uniform Legislation) Act 2011
 Work Health and Safety (National Uniform Legislation) Regulation 2011
 Legislation NT: <https://worksafe.nt.gov.au/laws-and-compliance/workplace-safety-laws>
 Codes of Practice NT: <https://worksafe.nt.gov.au/laws-and-compliance/codes-of-practice>

Safe Work Australia Links

Law and Regulation (All States): <https://www.safeworkaustralia.gov.au/law-and-regulation>
 Model Codes of Practice: <https://www.safeworkaustralia.gov.au/resources-publications/model-codes-of-practice>

South Australia

Work Health and Safety Act 2012 (SA)
 Work Health and Safety Regulations 2012 (SA)
 Legislation for SA: <https://www.safework.sa.gov.au/resources/legislation>
 Codes of Practice for SA: <https://www.safework.sa.gov.au/workplaces/codes-of-practice#COPs>

Model Codes of Practice

- Managing noise and preventing hearing loss at work
- Confined spaces
- Labelling of workplace hazardous chemicals
- Managing risks of hazardous chemicals in the workplace
- Welding processes
- First aid in the workplace
- Managing the risk of falls at workplaces
- Hazardous manual tasks
- Managing the risk of falls in housing construction
- Managing electrical risks in the workplace
- Demolition work
- Excavation work
- Work health and safety consultation, cooperation and coordination
- Managing the work environment and facilities
- How to manage work health and safety risks
- Managing risks of plant in the workplace
- Construction work

Tasmania

Work Health and Safety Act 2012
 Work Health and Safety (Transitional and Consequential Provisions) Act 2012
 Work Health and Safety Regulations 2012
 Work Health and Safety (Transitional) Regulations 2012
 Legislation for TAS: <https://worksafe.tas.gov.au/topics/laws-and-compliance/acts-and-regulations>
 Codes of Practice for TAS: <https://worksafe.tas.gov.au/topics/laws-and-compliance/codes-of-practice>

Details of permits, licenses or access required by regulatory bodies (add or delete as required):

- Permits from local council
- Authorisation to commence work
- Any required documents.