

Public Health Wales,  
Office of the Chief Executive,  
2 Capital Quarter,  
Tyndall Street,  
Cardiff,  
CF10 4BZ.

**Chemical, Explosive and  
Microbiological Hazards  
Division**

**Dr Holly Dove  
HM Specialist Inspector**

HSE Microbiology and  
Biotechnology Unit  
7 & 8 Wellington Place  
Leeds  
LS1 4AP

Tel: 07789913995  
[Holly.dove@hse.gov.uk](mailto:Holly.dove@hse.gov.uk)

Reference 4852995/HD/1

2<sup>nd</sup> December 2025

Principal Inspector:  
Dr Keith Stephenson

For the attention of Dr Tracey Cooper OBE, Chief Executive of Public Health Wales.

Dear Dr Cooper,

### **HEALTH AND SAFETY AT WORK ETC. ACT 1974 AND ASSOCIATED REGULATIONS**

1. I am writing following my investigation of a Dangerous Occurrence in the Microbiology department at Singleton hospital that was reported to the HSE under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).
2. An employee of Public Health Wales was processing a blood culture sample in the containment level (CL) 3 laboratory in the Microbiology department of Singleton hospital when they sustained a needlestick injury to their hand. The needle with which they were injured was contaminated with blood from a Hepatitis C virus (HCV) positive patient who also had a *Staphylococcus aureus* infection. This was a dangerous occurrence as HCV is a hazard group (HG) 3 pathogen capable of causing liver damage and can be transmitted through exposure to contaminated blood.
3. My investigation involved examining the potential root cause for the exposure of the employee to the contaminated blood via needlestick. I examined the processes and procedures in place at the time they were injured and I carried out an onsite visit on the 25<sup>th</sup> November 2025, where I held discussions with members of Microbiology management, Public Health Wales Health and Safety, the injured employee and others that work in Microbiology.
4. I found that the root cause of the injury in this case was a poor ergonomic set up for those working with high risk samples in the CL3 laboratory microbiological safety cabinet (MSC) which lead to overbalancing when reaching to dispose of the needle used to vent the blood culture bottle. At the time of my visit to Singleton Hospital, in November 2025, the poor ergonomics had been addressed with a reassessment of the set up at the MSC including

removal of items which impeded appropriate chair placement and provision of a footrest for those using the MSC. In addition guidance which had been circulated to staff had been issued regarding appropriate set up of the MSC for safe working.

5. However my discussions regarding the management of sharps in processes undertaken in the microbiology department identified several matters that fell below the minimum legal requirements, and which must be addressed to ensure compliance with current Health and Safety legislation.
6. This letter is intended to notify you of those matters. You are required to provide a written response to this letter by Friday 6<sup>th</sup> March 2026. Please send the response by email to [Holly.Dove@hse.gov.uk](mailto:Holly.Dove@hse.gov.uk).

### **MANAGEMENT OF ACTIVITIES INVOLVING SHARPS CONTAMINATED WITH HG3 PATHOGENS**

7. During my investigation I was told that several of the activities that involve manipulating high risk samples that could contain HG3 pathogens, transmitted by the blood borne route, involved the use of sharps, including the venting of positive blood culture bottles and use of glass slides for microscopic identification of pathogens. During this investigation a re-sheathing event of a needle occurred and a safer sharp was identified for the activity of venting blood culture bottles by the department. I found there was a lack of coordinated management of the risk posed by sharps in the high risk environment of the CL3 laboratory through both inadequate risk assessment and a lack of assurance of staff competency to handle sharps safely.
8. Regulation 6 (1) of the Control of Substances Hazardous to Health (COSHH) Regulations 2002 (as amended) states an employer shall not carry out work which is liable to expose any employees to any substance hazardous to health unless he has – (a) made a suitable and sufficient assessment of the risk created by that work to the health of those employees and of the steps that need to be taken to meet the requirements of these Regulations; and (b) implemented the steps referred to in sub-paragraph (a).
9. I reviewed several risk assessments associated with the activities involving high risk samples and sharps, including the whole workplace risk assessment, the CL3 laboratory risk assessment and the blood cultures processing risk assessment. Sharps were clearly identified as a hazard in all these risk assessments however the control measures detailed for mitigation of this hazard was not suitable or sufficient. One of the control measures linked to the sharps hazard in all these risk assessments was the identification that there was a process to deal with a sharps injury, which is not actually a control measure but rather an emergency response once something has gone wrong. Control measures such as not re-sheathing needles, identification of the safest sharp to minimise contact with a dangerous sharp and the use of forceps to pick up broken glass were not detailed.
10. By failing to identify appropriate control measures in risk assessments there is a risk that staff do not identify all the ways they can protect themselves from harm when undertaking activities with potentially contaminated sharps putting them at risk.

**To comply with COSHH Regulation 6 (1) you must:**

**Action 1: Revise your risk assessments that involved the use of sharps in the context of high risk pathogens that could be transmitted by the blood borne route to ensure all appropriate control measures are recorded. You should ensure that revised risk assessments are read by all staff who undertake these activities.**

**In your written response you must describe how the above has been achieved.**

11. Regulation 13 (3)(a) of the Management of Health and Safety at Work (MHSAW) Regulations 1999, requires that every employer shall ensure that his employees are provided with adequate health and safety training and that this be repeated periodically where appropriate.
12. During the inspection we discussed training and competency of staff who work with sharps in the CL3 laboratory where high risk samples are manipulated. Whilst the safe use of sharps was discussed in the initial training of staff no repeated assurance of competency with regards to safe handling of sharps potentially contaminated by HG3 pathogens is formally undertaken. Competency assessments which staff undertake periodically on processes did not include discussion or observation of safe sharps usage.
13. The failure to re-enforce the safe use of sharps message during competency reassessments could lead to this message being diluted over time with staff, putting them at risk of unsafe sharps practice including the re-sheathing of needles.

**To comply with the MHSAW Regulation 13 (3)(a) you must:**

**Action 2: Devise and implement a mechanism to ensure you have the assurance that staff are competent in the safe use of sharps with high risk samples that could be transmitted by a sharps injury.**

**In your written response you should describe how the above actions have been achieved.**

14. Under Section 28(8) of the Health and Safety at Work Act 1974, I am required to bring factual information on the above matters to the attention of employees. To meet this requirement, I have therefore sent a copy of this letter to Joanna Kronka (Trade Union representative for Public Health Wales).

Yours Faithfully

A handwritten signature in black ink, appearing to read 'H. Dove', is written over a light blue circular stamp.

**Dr Holly Dove**

**HM Specialist Inspector**

cc Keith Stephenson (HSE), Michelle Peters (Network Manager of Health and Safety for Microbiology), Louise Stone (Interim Bacteriology Operations Manager at Singleton Hospital), Joanna Kronda (TU representative).

## **PRIVACY INFORMATION**

HSE staff will process your data as part of our work primarily for the purpose of inspections and investigations, interventions and assessments in support of law enforcement. Please see <https://www.hse.gov.uk/help/privacy.htm> for more details.