University Hospitals of North Midlands NHS Trust

# Policy No. HS08
# Policy to Minimise and Manage the Health Risk of Using Products Containing Natural Rubber Latex (NRL)



**The following personnel have direct roles and responsibilities in the implementation of this policy:**

- **All individuals employed by the Trust, including contractors, voluntary workers, students, locum and agency staff**

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|---|---|
| **Version:** | **6** |
| **Ratified By:** | **Quality and Safety Forum** |
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| **Trust Contact:** | **Trust Health & Safety Manager** |
| **Executive Lead:** | **Medical Director** |

## Version Control Schedule

| Final Version | Issue Date | Comments |
|---|---|---|
| 1 | October 2006 | Policy developed |
| 2 | June 2009 | Policy reviewed |
| 3 | February 2013 | Policy reviewed, no significant changes made |
| 4 | February 2013 | |
| 5 | April 2015 | Policy was adopted by County Hospital in July 2014, minor name changes only with current revision. Appendix 4 and 5 has been removed as the Trust has adopted the Team Prevent skin questionnaire |
| 6 | June 2018 | Minor changes in references to other policies. |

# *Statement on Trust Policies*

**Staff Side and Trade Unions**
The University Hospitals of North Midlands NHS Trust is committed to ensuring that, as far as is reasonably practicable, the way in which we provide services to the public and the way in which we treat our staff reflects their individual needs and does not discriminate against individuals or groups on any grounds.

**Equality and Diversity**
The University Hospitals of North Midlands aims to promote equality and diversity and value the benefits this brings. It is our aim to ensure that all staff feel valued and have a fair and equitable quality of working life.

**Equality Impact Assessment**
The organisation aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. The Equality Impact Assessment tool is designed to help you consider the needs and assess the impact of your policy.

**Information Governance**
Any Trust policy which impacts on or involves the use and disclosure of personal information (patient or employee) must make reference to and ensure that the content of the policy is comparable with the relevant statutory or legal requirement and ethical standards

**Data Protection Bill, General Data Protection Regulations (GDPR) and the NHS Code of Confidentiality**
GDPR replaces the EU Data Protection Directive of 1995 and supersedes the law of member states that were developed in compliance with the Data Protection Directive 95/45/EC. Its purpose is to protect the "right and freedom" of natural persons (i.e. livening individuals) and to ensure that personal data is not processed without their knowledge, and, wherever possible, that it is processed with their consent.

Processing includes holding, obtaining, recording, using and disclosing of information and applies to all forms of media, including paper and images. It applies to confidential patient information but is far wider in its scope, e.g. it also covers personal records

Whiles GDPR applies to both patient and employee information, the Confidentiality Code of Practice (COP) applies only to patient information. The COP incorporates, the requirements of GDPR and other relevant legislations together with the recommendations of the Caldicott report and medical ethics considerations, in some cases extending statutory requirements and provides detailed specific guidance.

**Freedom of Information Act 2000**
The Freedom of Information Act 2000 (FOIA) is an Act which makes legal provision and creates a legal gateway and timetable for the disclosure, to the public, of the **majority** of corporate information held (but not necessarily created) by this Trust. The Trust has a legal responsibility to proactively provide a large amount of information to the public and to pro-actively respond to specific requests for information. Information will not be disclosed when the Trust can claim legal exemption. Any non-disclosure must be conveyed in writing; quoting the relevant exemption together with signposting to internal and external methods of compliant. Locally, guidance on the DPA, FOIA and COP can be obtained from the Information Governance Manager or the Caldicott Guardian.

**Mental Capacity Act**

Any Trust policy which may affect a person who may lack capacity should comply with the requirements of the Mental Capacity Act 2005 (MCA)

The MCA and its associated Code of Practice provides the framework for making decisions on behalf of individuals who lack the mental capacity to do these acts or make these decisions for themselves.

Everyone working with and/or caring for adults who lack capacity, whether they are dealing with everyday matters or life-changing events in the lives of people who lack capacity must comply with the Act.

In a day to day context mental capacity includes making decisions or taking actions affecting daily life – when to get up, what to wear, what to eat etc. In a legal context it refers to a person's ability to do something, including making a decision, which may have legal consequences for the person lacking capacity, or for other people.

The Code provides guidance to all those working with and/or caring for adults who lack capacity, including family members, professionals and carers. It describes their responsibilities when acting or making decisions with, or on behalf of, individuals who lack the capacity to do this for themselves. In particular, it focuses on those who will have a duty of care to a person lacking capacity and explains how the legal rules set out in the Act will work in practice.

**The Health Act: Code of Practice for the Prevention and Control of Health Care Associated Infections**
The purpose of the Code is to help NHS bodies plan and implement how they can prevent and control HCAI. It sets out criteria by which managers of NHS organisations are to ensure that patients are cared for in a clean, safe environment, where the risk of HCAI is kept as low as possible. Failure to observe the Code may either result in an Improvement Notice being issued by the Care Quality Commission, or in the Trust being reported for significant failings and placed on 'Special Measures'.

The Code relates to healthcare provided by all NHS bodies. Each NHS body is expected to have systems in place sufficient to comply with the relevant provisions of the Code, so as to minimise the risk of HCAI to patients, staff and visitors.
The Trust Board must have an agreement outlining its collective responsibility for minimising the risks of infection and the general means by which it prevents and controls such risks.

Effective prevention and control of HCAI must be embedded into everyday practice and applied consistently by all staff.

**Human Rights**
The Trust is committed to the principles contained in the Human Rights Act. We aim to ensure that our employment policies protect the rights and interests of our staff and ensure that they are treated in a fair, dignified and equitable way when employed at the Trust.

**Sustainable Development**
The University Hospitals of North Midlands NHS Trust (UHNM) is committed to demonstrating leadership in sustainability and has a Trust Board approved Sustainable Development Management Plan (SDMP): Our 2020 Vision: Our Sustainable Future which sets out the route to developing a world-class healthcare system that is financially, socially and environmentally sustainable.

There are three 'Key Priorities' to aim for by 2020. With the help of employees, key partners and other stakeholders the trust will embed opportunities to:

1. Reduce our environmental impact, associated carbon emissions and benefit from a healthier environment;
2. Improve the resilience of our services and built environment as a result of severe environmental and climatic changes;
3. Embed sustainable models of care and support our local community to be well-connected, healthy, resilient, independent and managing their lives in a positive way.

The SWITCH campaign is designed to achieve these priorities. It is relevant to all departments and all members of staff. The focus is on using resources sustainably in order to provide better patient care, improve health and our working environment.

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## 1. INTRODUCTION

The Health and Safety at Work etc Act 1974, the Management of Health & Safety at Work Regulations 1999, and the Control of Substances Hazardous to Health Regulations 2002 require that employers and employees assess risks to health and take positive measures to promote health, safety and wellbeing at work.

The aim of the Policy is to ensure that all staff are aware of the potential problem of latex hypersensitivity and that the Trust takes measures to identify latex sensitive individuals and acts to safeguard latex sensitive individuals against allergic reactions to latex.

Over the last 20 years the health risks associated with exposure to natural rubber latex (NRL) have been increasingly recognised. The development of allergy to NRL is associated with a range of reactions including skin rashes, 'hay-fever' like symptoms and asthma through to anaphylaxis which although extremely rare, has resulted in fatalities.

Allergy to NRL is a concern for Trust staff who will be exposed to products containing NRL in the course of their work, and for patients who may be exposed during treatment.

This policy has been formulated to minimise and manage the health risks associated with NRL and supports other policies, in particular the Health & Safety Policy (HS01), COSHH Policy (HS20), Infection Prevention Q&A Manual (IP01b) and Policy and Procedures for Reporting Adverse Incidents (RM07).

## 2. POLICY STATEMENT

The University Hospitals of North Midlands NHS Trust's Health and Safety Policy defines the means by which the Trust will plan and execute the assessment and control of health and safety risks, and monitor and review progress to that end.

This policy defines the specific organisational arrangements through which the Trust will reduce the risk of staff or patients developing NRL allergy, and ensure safe employment or treatment for those who become sensitised.

The purpose of this policy is to detail the responsibilities of all staff in ensuring the effective management of NRL risks.

The policy is supported by specific protocols relating to the management of staff or patients with known or suspected latex allergy, and for the management of patients considered to be at increased risk.

## 3. SCOPE

This policy applies to all personnel employed by University Hospitals of North Midlands NHS Trust, and makes clear the responsibilities of Individuals, Supervisors, Managers, Medical Staff and Directors in relation to health and safety issues. It applies with equal force to permanent, agency, temporary and locum staff, and also must be brought to the attention of contractors.

## 4. DEFINITIONS

| Term | Definition |
|---|---|
| Latex allergy | Is a medical term encompassing a range of allergic reactions to natural rubber latex.<br><br>The proteins in the latex, which can also become air borne, can cause problems in vulnerable people such as breathing problems and contact dermatitis. |
| Natural rubber latex (NRL) | Is a cloudy white liquid, similar in appearance to cow's milk, collected by cutting a thin strip of bark from the tree and allowing the latex to exude into a collecting vessel. |

Information on *Products that may contain Latex* is included as Appendix 1 and *General Information on Latex Allergy* is attached as Appendix 2.

## 5. RESPONSIBILITIES

To supplement the Trust's Health & Safety Policy, the following objectives in relation to managing the risk from NRL are:

- To meet the standards required by current legislation, relating to control of hazardous substances in the workplace.

- To work towards the elimination of health risks associated with work related activities involving NRL products, by eliminating it in certain in areas, and controlling the risk in others

These objectives will be reflected in the personal objectives set and agreed by staff members.

### 5.1 Chief Executive / Executive Director of Human Resources

The Chief Executive is ultimately responsible for safety throughout the Trust and is accountable to the Board. It is his duty, with on-going responsibility for delivery through the Medical Director so far as is reasonably practicable, to ensure the development of and compliance with this policy.

The delegated authority for co-ordinating and monitoring implementation of this policy and the associated protocols/procedures will lay with the Clinical Governance Board though the reporting mechanism from the Trust Health & Safety Committee.

### 5.2 Executive Directors / Divisional Senior Management Teams/ Heads of Central Functions

The Senior Management Teams have responsibility for ensuring that risks associated with NRL allergy to patients and staff are managed in accordance with this policy and the associated protocols/procedures.

### 5.3 Ward/Departmental Managers and Person's In Charge (including Consultants)

Line managers are responsible for:

- Ensuring that general NRL risk assessment is undertaken with regard to work and clinical activities within their areas of responsibility. Specific individual risk assessment will be required where patients or staff are identified as allergic to NRL.

- Identifying and implementing any action/control required following the NRL risk assessment
- Ensuring that staff have a proactive approach to recognising latex related health problems and appropriately referring staff to the Occupational Health Department.
- Ensuring that staff are given adequate information, instruction and training to enable them to manage NRL allergy and comply with this policy, including the need for reporting
- Reporting NRL allergic reactions suffered by patients via the DATIX adverse incident reporting mechanism in line with Policy RM07
- Symptoms suggestive of NRL allergy in staff are referred to the Occupational Health Department. In particular for managers with clinical responsibility:
- To ensure that an allergy history is taken from all patients on admission or prior to the performance of procedures involving the use of latex in any form. If the patient is at risk of developing latex sensitivity, measures must be taken to reduce or eliminate exposure to latex during their admission or the procedure. If the patient is already sensitised to latex, all measures must be taken to eliminate exposure to latex from their environment and from any equipment used. The health care records of all latex-sensitive patients must be clearly labelled. Inside the front cover of the health care records is an allergy space, "sensitive to latex". The identification of latex sensitive patients should extend to the information included on investigation request cards and in the allergy box on prescription charts.

### 5.4 Responsibilities of Specialist Functions

**Health & Safety Department**

- To provide advice to managers developing protocols/procedures/safe systems of work relating to NRL allergic patients and staff

**Occupational Health Department**

- To ensure that an appropriate level of health surveillance is provided for staff exposed to NRL
- To provide training on staff-related latex allergy issues for managers, and relevant divisional staff
- To facilitate investigation of staff suspected of having NRL allergy
- To ensure staff (or prospective staff) with NRL allergy and their managers, are advised of any necessary adjustments or restrictions to their work activities, using an evidence and risk assessment based approach
- To provide guidance to staff and managers on suitable and safe working environments for NRL sensitised employees
- To provide statistical and other relevant information concerning NRL allergy in staff to the Health and Safety Committee, whilst maintaining individual confidentiality
- To undertake pre-employment screening to identify staff who will be working in clinical areas, who may have pre-existing allergies, with subsequent advise to management

**Supplies Department**

- To monitor all products which have the potential to contain NRL by liaising with manufacturers and advise management of their findings
- To advise on the availability of alternative products

### 5.5 Individual Responsibilities

- Having been provided with information, instruction and training, staff will comply with this policy and follow the associated protocols/procedures/safe systems of work for their area(s) of work and responsibility.
- Staff are strongly advised to report possible NRL allergy symptoms to the Occupational Health Department.
- Staff should check latex content in all resuscitation equipment before use.

## 6. EDUCATION AND TRAINING

To comply with the general duty to provide such information, instruction, training and supervision as is necessary to ensure, so far as is reasonably practicable, the health, safety and welfare of staff, training and advice on Latex use and management will be provided as follows:

- At corporate and local induction
- Through the Health & Safety and Occupational Health Departments
- Within Health & Safety Management training
- When training needs are identified by line managers through risk assessment

All training should be recorded within the personal staff record, ideally within ESR.

## 7. MONITORING

Monitoring of the effectiveness of this policy is the responsibility of the Health & Safety Co-ordinator. This will be undertaken on annual basis through a review of adverse incidents that involved the use of latex. The findings will be reported to the Health & Safety Committee, along with an action plan to address any deficiencies which may be identified.

In addition, any individual identified with a latex sensitivity is recorded within the RIDDOR Annual Report, which is reported to the Health & Safety Committee.

## 8. REVIEW

This policy will be reviewed and updated in line with any changes to legislation and a formal review will take place every three years.

# APPENDIX 1 - PRODUCTS THAT MAY CONTAIN LATEX

The list below provides guidance on products commonly used in healthcare. The list is not exclusive or exhaustive. Further advice on the extent of risk should be sought from NHS supplies, Occupational Health, Pharmacy or directly from the Customer Service Department at the product manufacturers.

## *MEDICAL EQUIPMENT WHICH MAY CONTAIN LATEX*

- Sterile and non-sterile disposable gloves
- Adhesive plaster e.g. Elastoplast
- Electrode pads – the glue may contain latex
- Skin traction apparatus
- Tourniquets
- Oxygen and facemasks – the elastic tape contains latex
- Sphygmomanometer cuffs – protect the arm with light cotton bandage before the cuff is applied
- Stethoscope tubing and earpieces
- Airways
- Endotracheal Tubes
- Some local anaesthetic cartridges contain latex
- Multidose injection vials may have a latex rubber port
- Intravenous giving sets – may have latex at the injection port
- Syringes – the “plunger” may be made from latex
- Urinary catheters – the sample port contains latex
- Enema catheters
- Wound drains
- Wheelchairs – components of wheelchairs and tyres contain rubber latex
- Reflex hammer
- Ostomy pouches
- Suction tubing
- Anaesthetic masks

## *ITEMS AROUND THE HOME WHICH MAY CONTAIN LATEX*

- Balloons and balloon powder
- Tyres
- Adhesive plaster and glues
- Condoms and diaphragm contraceptives – Durex has a produced a latex free condom, Avanti
- Some stretch textiles – Lycra does not contain latex
- Knicker elastic
- Cosmetics
- Rubber gloves
- Sports equipment
- Carpeting
- Telephone leads
- Extension cords
- Rubber shoes and boots
- Swimming hat and goggles
- Hot water bottles
- Some shower curtains
- Components of wheelchairs
- Door and window insulation
- Diving masks and equipment
- Suspenders
- Latex mattresses and pillows

- Rubber steering wheel covers
- Bicycle/motor bite handle grips
- Rubber bands and erasers

# APPENDIX 2 - GENERAL INFORMATION ABOUT LATEX ALLERGY

## *WHAT IS LATEX?*

Natural rubber latex is a natural substance produced by the *Hevea Brasiliensis* (rubber) tree. It is used in thousands of household, industrial and medical products. Natural rubber latex is composed of many different types of natural proteins. A number of chemicals are added during processing, most of which are removed in the washing processes during the final production of a latex product.

## *WHAT IS AN ALLERGIC REACTION?*

An allergic reaction is an acquired, abnormal response of the body's immune system to a substance (called an allergen) that does not normally cause a reaction.

## *WHAT ARE LATEX ALLERGIES?*

Latex is harmless to most people. However, for some, like other things in nature – shellfish, bee stings, peanuts, venom, dairy products – latex can cause health problems. There are two types of allergic reactions. One to the latex protein, a natural component of rubber (Type 1 reaction), and the other to the chemicals used in processing natural rubber products (Type 4 reaction).

## *HOW DO LATEX ALLERGIES DEVELOP?*

An allergy occurs when the body's immune system becomes sensitised to the allergens found in products made from natural rubber latex or to the added chemicals. During a sensitisation period, which may last from a few weeks to years, the immune system develops antibodies or sensitised cells. Once the body learns to recognise the allergen, exposure will always cause a response of the immune system and symptoms of allergy unless the body develops tolerance. It is not yet known whether tolerance can be produced to natural rubber latex. It does not occur to rubber chemical sensitivity.

## *WHAT ARE THE SYMPTOMS OF RUBBER ALLERGIES?*

The two different types of allergen in natural rubber latex products cause different reactions.

**Type 1:** This type of reaction is rare and is caused by latex protein contact. Symptoms appear almost immediately and include reddening, wheal and flare of the skins. This may be accompanied by rhinitis, conjunctivitis (watery and inflamed nose and eyes) and asthma-like symptoms. In some cases, anaphylaxis may occur when there is a fall in blood pressure, shock and difficulty breathing. Anaphylaxis could lead to death if untreated.

**Type 4:** This is caused by allergy to chemicals used to process the rubber. Up to 48 hours after contact with the allergen, the skin may become itchy, red and inflamed and start to blister.

## *WHO IS AT RISK FROM DEVELOPING LATEX ALLERGY?*

Groups of people most likely to become sensitised are:

- Healthcare workers
- Patients who have had multiple operations, in particular children and spina bifida patients.
- Patients who have had multiple examinations by healthcare workers wearing latex gloves e.g. those with dental or gynaecological problems.
- Patients with atopic eczema, asthma or hay fever are more likely to develop this type of sensitivity.

One cause of developing latex sensitivity has been attributed o the regular use of **Powdered Latex Gloves** (Medical Devices Agency DB9601, Latex Sensitisation in the Healthcare Setting – Use of Latex Gloves). The latex protein binds itself to the glove powder, which can be transmitted through direct contact or as an airborne allergen, which may affect the user, the patient and anyone else in the vicinity.

### *HOW DO I MINIMISE THE RISK OF BECOMING ALLERGIC TO LATEX?*

Latex allergies are rare, affecting approximately 1-3% of the population. Those most at risk from developing the allergy need to minimise exposure to the extractable latex protein. For healthcare workers, this means using high quality latex glove, which has most of the proteins removed during the manufacturing process. In addition, to eradicate the risk of inhalation, healthcare workers should used cornstarch powder free medical gloves.

### *I HAVE A SKIN CONDIITON, IS IT AN ALLERGY TO LATEX?*

Probably not. Most skin conditions are an irritant reaction, caused by substances like detergents rather than allergies. An irritant reaction is characterised by a dry and itchy rash and usually disappears once contact with the degreasing agent or solvent is discontinued. It can also occur as a result of sweating inside the rubber or other types of protective glove. If, however, you have experienced any of the symptoms of allergy you will need to see your GP who may refer you for tests.

### *IF I HAVE AN ALLERGY CAN I USE LATEX PRODUCTS?*

If you are specifically diagnosed as latex allergic you should avoid all products containing natural rubber latex. If you are being examined in a medical environment, the most important measure is to prevent anyone wearing natural rubber latex medical gloves for examining you, especially if there is to be contact with mucous membranes.

Around the home there are also a variety of everyday items containing rubber such as washing-up gloves, swimming caps, goggles, baby's dummies, bath mats, garden hoses and the soles of slippers and training shoes.

### *THE LATEX ALLERGY SUPPORT GROUP*

The group has three aims:

- To raise awareness of latex allergy amongst the public and in particular healthcare workers
- To provide a national support network for those affected by latex allergy
- To push for investigation into the increased incidences of the allergy, the identification of "at risk" groups and the prevention of unnecessary contact with know sensitising agents.

For further details of the activities of the group and membership, write to:

The Latex Allergy Support Group
PO Box 27
Filey
YO14 9YH
Website: www.lasg.co.uk Helpline: 07071 225838 19.00hrs – 22.00h

## APPENDIX 3 - DEPARTMENTAL CHECK LIST FOR THE AVOIDANCE AND MANAGEMENT OF LATEX ALLERGY

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|---|---|
| **DEPARTMENT/WARD** | |

### QUESTIONS

| | | |
|---|---|---|
| 1. | Are all employees aware of the contents of the latex policy? | Y/N |
| 2. | Has a suitable and sufficient risk assessment been carried out? | Y/N |
| 3. | Have non-latex products replaced all latex products wherever possible? | Y/N |
| 4. | Can you readily ID all remaining latex products? (please list) | Y/N |
| 5. | Is there a departmental procedure for the management of latex sensitive patients? | Y/N |
| 6. | Are non-latex products available for use if such a patient is admitted? | Y/N |
| 7. | Are employees aware of the procedure? | Y/N |
| 8. | Are gloves used in accordance with the glove usage protocol? | Y/N |
| 9. | Have all employees in the department that have contact with latex completed the Employee Latex Risk Assessment? | Y/N |
| 10. | Are employees aware of signs and symptoms of sensitivity/ allergy to latex etc? | Y/N |

### REMARKS / ACTION POINTS

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| | |
|---|---|
| **NAME OF ASSESSOR** | |
| **SIGNATURE** | |
| **DATE** | |