



London Ambulance Service **NHS**  
NHS Trust

## Latex Policy

## DOCUMENT PROFILE and CONTROL.

**Purpose of the document** Outlines the Trust's commitment to ensure the risks, to both staff and patients, associated with latex allergy are adequately controlled.

**Sponsor Department:** Health, Safety & Risk

**Author/Reviewer:** Senior Health & Safety Advisor. To be reviewed by February 2011.

**Document Status:** Final

<b>Amendment History</b>			
Date	*Version	Author/Contributor	Amendment Details
09/06	1	Claire Thomas	
12/07	2	John Selby	Minor changes

**\*Version Control Note:** All documents in development are indicated by minor versions i.e. 0.1; 0.2 etc. The first version of a document to be approved for release is given major version 1.0. Upon review the first version of a revised document is given the designation 1.1, the second 1.2 etc. until the revised version is approved, whereupon it becomes version 2.0. The system continues in numerical order each time a document is reviewed and approved.

<b>For Approval By:</b>	<b>Date Approved</b>	<b>Version</b>
Infection Control Steering Group	13/12/07	2.0
Clinical Governance Committee	4/2/08	2.0
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Trust Board		2.0

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The Pulse	11/03/08	Victoria Smith	GDU

<b>Links to Related documents or references providing additional information</b>		
<b>Ref. No.</b>	<b>Title</b>	<b>Version</b>
HS/011	Incident Reporting Procedure	
LA52	Incident Report Form	
OP/028	Procedure for Specific named Patient Protocols	
	Health & Safety at Work etc Act (1974)	
	Control of Substances Hazardous to Health Regulations	

Document Status: This is a controlled record as are the document(s) to which it relates. Whilst all or any part of it may be printed, the electronic version maintained in P&P-File remains the controlled master copy. Any printed copies are not controlled nor substantive.

## **1. Introduction**

London Ambulance Service NHS Trust (LAS) has responsibilities under the Health and Safety at Work etc. Act (1974) to protect employees from exposure to health hazards whilst at work. As an employer, the trust also has a duty under the Control of Substances Hazardous to Health Regulations (COSHH) (revised 2002) to carry out a suitable and sufficient assessment of any health risk present in work activities involving substances hazardous to health. The Trust also has a duty of care to persons other than employees to ensure they are not exposed to any risks whilst being treated, or as a result of the Trust's activities.

London Ambulance Service NHS Trust recognises that exposure to latex must be adequately controlled. This policy outlines the Trust's commitment to address the risks associated with latex allergy, and will be supported by specific protocols relating to the management of staff or patients with known or suspected latex allergy. The Trust will also continue to further educate staff in the correct use of latex products through its general communication and education channels.

## **2. Latex**

Natural Rubber Latex (NRL) is used in a wide range of products and equipment used in healthcare. It is a natural product which offers a combination of qualities such as strength and sensitivity, allows dexterity and also provides a protective barrier against infection. Although NRL has many benefits, it can cause reactions in people who become sensitised to it.

NRL proteins enter the body in different ways such as via skin, mucous membranes and lungs which can set up an allergic response which worsens on repeated exposure. Latex sensitivity can lead to a variety of allergic reactions ranging from mild skin irritation to anaphylactic shock. Three types of sensitivity have been identified:

- i) Irritation
- ii) Delayed hypersensitivity
- iii) Immediate hypersensitivity

## **3. Responsibilities**

### **3.1 Director of Human Resources and Organisational Development**

The Director of Human Resources and Organisational Development (HR-OD) is responsible for delegation and implementation of the policy.

### 3.2 Management Responsibilities

Managers will ensure that:

- Risk assessments are undertaken to identify the action/control required. Specific individual risk assessments will be required when staff or patients are identified as allergic to NRL.
- They are familiar with the Trust's latex policy, guidance and any related treatment protocol with regard to latex allergy.
- Receive and disseminate information, investigate and initiate appropriate action in the management of latex allergy.
- All untoward incidents relating to latex or latex allergy are registered and investigated in line with the Trust's incident reporting procedure.
- A proactive approach is taken to identify possible latex allergy issues with staff, referring them to the Trust's occupational health providers.
- Store rooms and ambulances are actively checked for consumables with a latex content. Records of this activity must be retained.
- Awareness of latex sensitivity is raised amongst staff.
- The policy's implementation is monitored and reviewed.

### 3.3 Employee Responsibilities Include:

- Complying with this policy and following any other associated protocols / procedures / safe systems of work.
- Reporting any concerns with the use / exposure to NRL to their line manager and occupational health providers.
- Reporting all recognised incidents connected to latex allergy to their line manager and recording the incident on a LA52 form.
- Ensuring risks of exposure are kept to minimum, by using only authorised equipment and consumables in accordance with LAS procedures.

### 3.4 **Corporate Logistics Managers Responsibilities Include:**

- The monitoring of all products which potentially have NRL present in them through liaison with suppliers and manufacturers. Where it is reasonable to do so, the logistics and purchasing department will seek to purchase latex-free equipment where these are available, thereby reducing the number of products containing NRL and therefore the risks to staff and patients.
- Keeping a data-base of all approved latex free equipment (and cross referenced to the consumables catalogue) that will be maintained, updated and made available to all staff.

## 4. **Identifying and Protecting Patients**

4.1 Patients who identify themselves as latex allergy sufferers, or present with signs and symptoms of latex allergy, and / or anaphylactic shock are to be treated as per the current JRCALC National Clinical Guidelines.

4.2 Those patients who identify themselves to the service as latex / NRL allergy sufferers can be offered Patient Specific Protocols (PSP) via the Medical Directorate under the auspices of the PSP Policy – OP 028.

4.3 Latex free equipment

- All operational vehicles carry Nitrile disposable medical examination gloves.
- All operational vehicles carry disposable latex-free kits for use with patients identified as NRL allergic.
- When purchasing new equipment, consideration will be given to latex-free alternatives where it is reasonable to do so.

## 5. **Identifying and Protecting Staff**

5.1 Occupational Health

- All appropriate staff joining the Trust will undergo confidential pre-employment health screening by the occupational health service provider to identify allergy to NRL. Appropriate guidance and advice will be given to individual members of staff and management.

- Staff reporting any symptoms or health concerns related to the use or exposure to NRL products will be referred to occupational health for further assessment and advice. Occupational health will provide advice and guidance on any necessary measures to be taken to ensure that the working environment is safe for the continuing employment of the affected member of staff. Occupational Health will inform the director of HR of any serious latex allergies identified in staff following a thorough assessment

## **5.2 Glove policy**

- The Trust will provide Nitrile disposable examination gloves on all operational vehicles for staff use.
- Any deviation from this must be related to risk assessment and Occupational Health advice.

## **6. Monitoring**

- The implementation and effectiveness of this policy will be monitored through the infection Control Steering Group.

## **7. Review**

- This policy will be reviewed every three years or sooner in the event of significant changes.

<b>IMPLEMENTATION PLAN TEMPLATE</b>		
		Notes
<b>Intended Audience</b>	All staff	Indicate whether the document applies to all staff or certain sections of staff
<b>Dissemination</b>	The Pulse	Detail where document is to be made available e.g. on The Pulse and the LAS Website
<b>Communications</b>	Routine Information Bulletin (RIB)	Indicate how staff will be informed of the document and made aware of its contents
<b>Training</b>		If training is required indicate how this will be provided to relevant staff
<b>Monitoring</b>	To be monitored through the Infection Control Steering Group	If a policy/procedure or similar document indicate how adherence to the content will be monitored, i.e., through Internal Audit; Committee; quality checks.