

<b>Document Title:</b>	<b>THEATRE LATEX OPERATIONAL POLICY</b>		
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<b>Document type:</b> (Policy/ Guideline/ SOP)	Guideline	<b>To be followed by:</b> (Target Staff)	All Theatre staff
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<b>Contributes to HSC Act 2008</b> (Regulated Activities) Regulations 2014(Part 3); and CQC Regulations 2009 (Part 4) <b>CQC Fundamental Standards of Quality and Safety:</b>			9,11
<b>Issuing Division/Directorate:</b>	Anaesthetics and Theatres		
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<b>Consulted With:</b>	<b>Post/ Approval Committee/ Group:</b>	<b>Date:</b>
Victoria Baster	Associate Director of Nursing.	2 <sup>nd</sup> April 2019
Steve Lewis	Health & Safety Manager	
Kim Hillman	Head of Procurement	
Tom Gudde	Service Manager, Anaesthetics, Theatres and ITU	
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<b>Related Trust Policies</b> (to be read in conjunction with)	04089 Prevention and Management of Latex Allergy in Healthcare Workers 11023 Control of Substances Hazardous to Health (COSHH) Policy
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<b>Document Review History:</b>			
<b>Version No:</b>	<b>Authored/Reviewer:</b>	<b>Summary of amendments/ Record documents superseded by:</b>	<b>Issue Date:</b>
1.0	Julie Slater		5 <sup>th</sup> February 2016
2.0	Julie Slater	Full review	25 <sup>th</sup> April 2019

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## **1.0 Purpose**

- 1.1 Gloves containing latex are used within the theatre department.
- 1.2 The Trust has a duty of care to act in the best interests of its patients.
- 1.3 The purpose of this policy is to ensure that all staff are aware of the procedure for managing a patient in theatres identified as having a latex allergy.
- 1.4 Patients identified as having a latex allergy on entering the theatre department must be protected from products that contain latex. Sterile gloves are the most usual source.
- 1.5 Prevention and Management of Latex Allergy in Healthcare Workers; register number 04089 must also be referred to.

## **2.0 Scope**

- 2.1 This policy applies to all patients that are passing through the theatre or day surgery department that may be exposed to the personal protective equipment that is provided.

## **3.0 Definition**

- 3.1 Natural rubber latex (NRL) is the milky sap of the commercial rubber tree *Hevea Brasiliensis*. The proteins in latex can result in a range of mild to life threatening reactions.
- 3.2 Allergy is defined as “any immunological reaction to a foreign substance that produces detrimental consequences to the body.”
- 3.3 Sensitisation is the process of the body producing specific antibodies in response to repeated exposure to a specific antigen.
- 3.4 “Latex-free” is the term used to describe products that are not manufactured from NRL.
- 3.5 “Latex-safe” is the term used to describe an environment that minimises the risk of a reaction occurring in sensitised or allergic individuals. This is achieved by removing the NRL products that are most likely to cause a reaction (sterile and non-sterile gloves).

## **4.0 Allergic Responses**

- 4.1 Hypersensitivity is a type of inappropriate or excessive response of the immune system. In most cases sensitivity develops over a longer period of exposure but once the sensitivity has developed it is irreversible.
- 4.2 Further exposure will increase the severity of the symptoms and eventually even fleeting contact could produce a life threatening response.
- 4.3 Type 1 hypersensitivity (immediate type) reactions are immediate mediated by IgE antibodies to Latex, characterised by urticarial, conjunctivitis, rhinitis, asthma and occasionally anaphylaxis that can be life threatening.
- 4.4 Type 1V hypersensitivity (delayed type) reactions are characterised by an eczematous rash- allergic contact dermatitis, often developing hours after exposure; they may be due to latex proteins or, much more commonly, other chemical additives used in the NRL processing.
- 4.5 Treatment would be in response to the type of rash that is presented. This is not an allergic reaction, it is a reaction to the latex product that has come into contact with the patients skin.

## **5.0 Staff and Training**

- 5.1 Theatre staff are required to have mandatory training as per ISO 9001:2015 and competency will be assessed as part of local induction. Staff training is delivered in house. Patient care and treatment training includes management of patients presenting with a reaction to latex.
- 5.2 Staff will be accompanied by a mentor until they have provided documented evidence of competence.
- 5.3 Staff are obliged to report any known allergies that they may have to the employer and this would be reported to Occupational Health.
- 5.4 Staff should be familiar with the Trust's COSHH Policy (Register number 11023)

## **6.0 Procedure**

- 6.1 To ensure that patients that have been identified as having a latex allergy type 1 are managed appropriately, they must be first on the operating list.
- 6.2 Patients with type 1 sensitivity should be identified at pre-assessment and this should already be documented. If such a patient has not had their sensitivity identified prior to coming to theatre then they must be returned to the ward and the theatre allowed to rest for 30 minutes. The operating theatre has 25 air changes per hour so 30 minutes is enough to remove any latex particles within theatre

(Validated against Health Technical Memorandum 03-01: Specialised ventilation for healthcare premises). Once the theatre has been rested, the patient can be returned to the allocated theatre for their procedure.

6.3 In the event of an emergency patient being admitted for surgery, the team admitting the patient would advise the Anaesthetist of any known allergies on admission. If the patient is a type 1 latex allergy then a decision on the patient's management would be made by the anaesthetic and surgical team.

#### 6.4 **Preparation of the Theatre**

- All equipment and disposable items used for cleaning theatres must be latex free, including gloves worn by the domestic staff;
- Remove all unnecessary equipment and materials from the room;
- Ensure that the Theatre is damp dusted using Tristel solution in accordance with manufacturer's guidelines.

### 7.0 **Duties and Responsibilities**

#### 7.1 **The Pre-assessment Team**

- To identify the patients type 1 latex allergy on the pre assessment documentation;
- Inform the anaesthetist and the theatre department in advance of the patient's admission;
- Record the allergy in the patient's medical record.

#### 7.2 **The Waiting List Staff**

- Ensure this information is input onto Theatreman.

#### 7.3 **The Theatre Manager**

- The theatre manager is responsible for ensuring that all staff are aware of the risks associated with natural rubber latex and the need to report any adverse staff reactions promptly to the Occupational Health Department;
- To ensure that latex gloves and equipment are only used where risk assessment indicates that there is no alternative;
- To ensure that during local induction training and information is given with regard to latex sensitisation;
- To ensure that there are sufficient supplies of alternative latex free gloves for staff and that these are stored separately and away from gloves containing latex.

## 7.4 Staff Responsibilities

- To always use the appropriate gloves or personal protective equipment for the task in question;
- Latex gloves are the preferred choice of most operating surgeons;
- Staff are responsible for ensuring that latex gloves are stored in a separate area, away from latex free products;
- To ensure that if a patient is identified as latex sensitive then the correct precautions are undertaken;
- All unnecessary equipment is removed from the operating theatre including all gloves. Only latex free non sterile gloves to remain in the theatre;
- In the event that the patient is identified as type 1 latex sensitivity, the operating theatre must be rested for 30 minutes once all unnecessary equipment has been removed;
- Staff are expected to wear tie hats (not elasticated);
- Latex free gowns only are worn;
- Risk assessment is undertaken for all patients, by ensuring that the WHO Check (World Health Organisation Safe Surgery Checklist) is undertaken with the team prior to any operating list commencing. If any patient is identified as having a latex allergy at this point then patients will be managed according to the type of sensitivity that is reported;
- Staff are required to report a patient with a latex allergy type 1 to the band 7 responsible for their department;
- The theatre procurement team are informed if a patient is identified as having a latex allergy and they ensure at this point that a further check is undertaken with the suppliers of the products that are required to ensure that they are latex free;
- All staff that work within the anaesthetic and theatre department and day surgery are aware of the Trust policy that is applicable to themselves as care providers;
- Anaphylactic shock is managed by the anaesthetics team and there is written protocol in each anaesthetic room. Patients that develop a latex allergy type 1 within theatre will be treated according to this protocol.

## 7.5 Theatre Procurement Team

- Theatre procurement is responsible for ensuring that where possible only latex free products are procured for use within the department;
- The procurement team within the Trust are responsible for ensuring that where possible only latex free items are supplied to the hospital. In the event that a product contains latex then the Health and Safety advisor must be notified immediately and a full risk assessment completed.

## 8.0 Risk Reporting

- 8.1 If a patient arrives without their allergy status assessed prior to coming to theatre and then discloses a latex sensitivity, they will be returned to the ward until a full assessment has been made. During this time there is a risk to the patient and Datix

web should be completed and assigned to the department that is responsible for the patient's admission and preoperative care.

## **9.0 Monitoring**

- 9.1 Compliance with the policy will be reviewed by the Risk Management Group for Anaesthetics and Theatres. Risk events are monitored at the monthly Theatre Governance meetings.
- 9.2 All patients that are on the elective operating list are assessed for allergies at the patient's pre-assessment appointment.
- 9.3 Emergency patients are assessed on admission and their allergy status documented as part of their admission and patients with a latex allergy are pre-assessed by the anaesthetist, who informs the theatre team.
- 9.4 The Health and Safety committee will be informed if products that contain latex are required for use within the Anaesthetic and Theatre and Day Surgery department

## **10.0 Equality Impact Assessment**

- 10.1 Mid Essex Hospital Services NHS Trust is committed to the provision of a service that is fair, accessible and meets the needs of all individuals.  
(Refer to Appendix 1)

## **11.0 References**

The Newcastle Upon Tyne NHS Hospitals Foundation Trust (2015) Latex Operational Policy.

Health and Safety Executive (2002) Control of Substances Hazardous to Health (COSHH) Regulations 2002

Department of Health (2007) Heating and Ventilation Systems. Health Technical Memorandum 03-01: Specialised ventilation for healthcare premises. Part A: Design and Validation. Norwich: The Stationery Office.



## Appendix A: Preliminary Equality Analysis

This assessment relates to: Theatre Latex Operational Policy (15030)

A change in a service to patients		A change to an existing policy	<b>X</b>	A change to the way staff work	
A new policy		Something else (please give details)			
Questions			Answers		
1. What are you proposing to change?			Full Review		
2. Why are you making this change? (What will the change achieve?)			3 year review		
3. Who benefits from this change and how?			Patients and clinicians		
4. Is anyone likely to suffer any negative impact as a result of this change? If no, please record reasons here and sign and date this assessment. If yes, please complete a full EIA.			No		
5. a) Will you be undertaking any consultation as part of this change? b) If so, with whom?			Refer to pages 1 and 2		

Preliminary analysis completed by:

<b>Name</b>	Julie Slater	<b>Job Title</b>	SSR Governance Lead Anaesthetic and Theatres	<b>Date</b>	April 2019
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