Winnipeg Regional Office régional de la Health Authority santé de Winnipeg Caring for Health À l'écoute de notre santé	REGIONAL PROGRAM Applicable to all sites and facilities where the WRHA Programs / Services are delivered		
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POLICY	Approval Signature:	Section:	
	Original signed by M. Sussman	HUMAN RESOURCES	
	Date: August 2016	Supercedes: New	

1.0 **PURPOSE:**

- 1.1 To minimize occupational risks associated with Latex exposure among Staff that are sensitized or at risk of becoming sensitized to Natural Rubber Latex protein.
- 1.2 To support efforts to achieve a Latex-Safe Environment for Staff.

2.0 **DEFINITIONS:**

- 2.1 <u>Allergic Contact Dermatitis</u>: A skin reaction to the chemical additives used during the manufacturing process. Signs are skin rashes similar to that of poison ivy, including blisters, which develop 24 to 48 hours after contact. This reaction predisposes individuals to develop serious life-threatening allergic reaction (e.g., anaphylaxis).
- 2.2 <u>Injury/Near Miss: as it relates to a worker, an injury or an opportunity to improve safety and health based on a condition or incident with potential for more serious consequences.</u>
- 2.3 <u>Irritant Contact Dermatitis: A form of skin reaction that is not a true allergy; characterized by irritation caused by wearing rubber gloves or exposure to the powder inside them. Signs and symptoms include dry, itchy, irritated areas, usually on the hands.</u>
- 2.4 <u>Latex:</u> A term used to describe products made using Natural Rubber Latex process or dry rubber Latex process. "Latex" in this policy refers to the subtypes of Latex that are known to cause an allergic response:
 - Natural Rubber Latex is a sensitizer found in medical supplies such as some surgical
 or exam gloves, blood pressure cuffs, catheters, oxygen masks, tubing, elastic wrap,
 etc. Natural Rubber Latex can cause an immune response in humans after initial
 exposure, leading to development of allergic reactions if re-exposed at a later time.
 Rarely, some people who are sensitive to Latex also may react to other rubber
 products such as erasers, rubber toy parts, rubber bands, rubber in medical devices and
 rubber in the elastic in clothing, etc.

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- <u>Dry Natural Rubber Hardened Rubber</u>, which can be found in athletic shoes, tires and rubber balls, does not cause Latex Allergy in most people.
- 2.5 <u>Latex Allergy (Latex Allergic)</u>: A sensitized response to Latex protein from natural rubber sources. Latex allergic is anyone who has experienced a reaction to Latex or Latex-containing products. Latex antigens may be transmitted by direct contact with rubber/Latex products and/or by airborne routes. Latex Allergy may result from reaction to rubber additives, producing typically a rash at site of contact.
- 2.6 <u>Latex Reaction</u>: a local or systemic allergic response that occurs with exposure to Latex products. Can include skin redness, skin rash or hives, breathing difficulties, anxiety, rapid heart rate, swelling of lips and throat, shock, or cardiac arrest. Reaction can occur within minutes.
- 2.7 <u>Latex Safe Environment</u>: A term used to describe an environment that minimizes the risk of a Latex Reaction occurring in sensitized or allergic individuals. This is achieved by either removing, when there is an alternate substitute, or reducing inventory of Natural Rubber Latex products that are most likely to cause a reaction.
- 2.8 <u>Mode of Occupational Exposure</u>: involves contact with Latex protein through direct skin contact (e.g., gloves, tape), by vein (e.g., by injecting products stored or drawn up through rubber stoppers on medication vials or through injection ports on IV tubing), or by inhalation (breathing in glove powder that's in the air), mouth/lips/lining of stomach and intestines (e.g., by eating food that was handled with Latex gloves), or tissue contact (via Latex in products that are Sharps or potential Sharps).
- 2.9 <u>Patient</u>: Any individual receiving healthcare provided by a WRHA facility, program or funded site regardless of whether they are referred to as Patient, client or resident.
- 2.10 <u>Sharps</u>: any item that has sharp point(s) or cutting edge(s) capable to cause injury that can penetrate, puncture, pierce or cut skin when handled.
- 2.11 <u>Staff</u>: All persons employed by the WRHA facilities, or WRHA funded facilities, as well as members of the medical staff, volunteers, board members, students and others associated through contracts.
 - <u>Direct Care Staff</u>: All Staff that comes in contact with Patients, Patient care environment, Patient care equipment, and blood or body fluids. This includes but not limited to physicians, nurses, Allied Health (occupational therapist, respiratory therapist, physiotherapist, speech language pathologist, dietitian, pharmacist, laboratory and diagnostic imaging technologists, etc.), and support services (health care aides, home support workers, housekeeping, porters, transfer personnel, specific volunteers, unit clerks, and others as deemed appropriate by each site/area/program).
 - Non Direct Care Staff: All Staff that does not have direct contact with Patients, Patient care environment, Patient care equipment and blood and body fluids. This also includes corporate sites/areas.

POLICY:

3.1 All Staff shall adhere to policy and procedures to achieve a Latex Safe Environment for Staff members who are Latex Allergic. Staff shall follow any additional procedures, guidelines and risk reduction strategies that are necessary for their areas of work and responsibility.

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- 3.2 Latex Allergic Staff shall be encouraged to declare the nature and extent of Latex Allergy at entry to the workplace to their manager and/or during the initial occupational safety and health screening appointment.
- 3.3 Staff shall inform employers and the Occupational & Environmental Safety and Health Department (OESH) about Latex Allergy that develops after entering the workplace.
- 3.4 The Occupational & Environmental Safety and Health Department shall work in collaboration with the manager or designate in the areas where Latex Allergic Staff work to reduce the possibility of Latex Reactions due to each applicable Mode of Occupational Exposure.
- 3.5 As it is not possible to absolutely guarantee a Latex-Safe Environment, Staff with Latex Allergy shall maintain, in close proximity, personal supplies necessary to manage a serious allergic reaction as prescribed by a healthcare provider.
- 3.6 Confirmed or suspected Latex Allergy experienced by Staff shall be reported through existing Injury Near Miss reporting mechanisms, as those injuries/near misses may inform efforts to improve controls for other Staff.
- 3.7 Staff shall use only facility-approved equipment and supplies.
- 3.8 Staff with Allergic Contact Dermatitis shall avoid exposure to Latex supplies, particularly gloves, because those Staff risk developing a serious allergic reaction (e.g., anaphylaxis) at a later date. Staff with Irritant Contact Dermatitis should avoid exposure to Latex supplies, especially gloves, to reduce the risk of developing Latex Allergy.
- 3.9 Products that are not made with Natural Rubber Latex, where reasonably practical and possible, shall be procured and made readily available to Staff. This applies to medical equipment, devices, supplies, and clothing as well as to general purpose supplies not directly involved in the care of Patients (e.g., office supplies; chairs; capital equipment, etc.).
- 3.10 The employer shall obtain, where possible, documentation from the vendor indicating if the supplies being procured contain Latex or the potential presence of Latex. This includes supplies made available for the purpose of trial or evaluation.
- 3.11 A manager shall endeavor to provide continuing educational programs about Latex-related occupational risk reduction.

4.0 **PROCEDURE:**

Avoid the hazard and where the hazard cannot be avoided, reduce the risk associated with Latex exposure as described in the Latex Exposure Safe Work Procedure available: http://www.wrha.mb.ca/professionals/safety/policies_section12.php

5.0 **REFERENCES**:

- 5.1 University Hospital of South Manchester. Policy on Latex Allergy. September 2012 Available: http://www.uhsm.nhs.uk/AboutUs/Policies/Latex%20Allergy%20Policy%20V2.00.pdf Last accessed December 23, 2014.
- 5.2 Feidhmeannacht na Seirbhise Slainte Health Service Executive. Policy on the Prevention and Management of Latex Allergy. June 2011. Available:

 http://www.hse.ie/eng/staff/Resources/hrppg/Policy_on_Prevention_and_Management_of_Latex_Allergy.pdf Last accessed December 23, 2014.

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- Power S, Gallagher J, Meaney S. Quality of life in health care workers with latex allergy. Occupational Medicine 2010;60:62-65.
- 5.4 National Institute for Occupational Safety and Health (US). Preventing Allergic Reactions to Natural Rubber Latex in the Workplace. Department of Health and Human Services (NIOSH). 1998; Publication No. 97-135.

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