BCP screen shots for NIHR report

The SCIN Study Online Intervention

Please select the option below that best describes you. This will make sure you see relevant content

- I have consented to take part in the SCIN study
- I haven’t been asked to take part in the SCIN study
- I was asked to take part in the SCIN study, but decided not to

*If you cannot remember whether or not you have consented to participate in the SCIN study, please contact the SCIN team on the email at the bottom of this page.

Note: Please complete the programme in one sitting. It should take you no longer than 20 minutes. If you are unable to complete the programme in one sitting, you can log back in at a later time but will need to start from the beginning again.

Welcome to the SCIN study online intervention

This online intervention aims to support ICU nurses to protect themselves from hand dermatitis

Questions? Comments? Problems? Contact us: SCINfeedback@nhi.org.uk
Welcome to the SCIN study online intervention

This resource has been developed as part of a study aiming to reduce hand dermatitis among ICU nurses.

- It’s been developed by a team of experts in occupational health, skin care and infection control, including:
  - Dr Ira Madan – consultant occupational physician
  - Dr John English- consultant in occupational dermatology
  - Prof Barry Cookson – expert in microbiology and infection control, former Director of the Laboratory of Healthcare Associated Infection at the Health Protection Agency
- This visit to the website should take you no more than 20 minutes

What is hand dermatitis?

- Dermatitis is a skin condition caused by contact with a substance that irritates the skin.

  - Key symptoms are:
    - Dryness
    - Itching
    - Redness on the hands

  - Which can develop into:
    - Flaking
    - Scaling
    - Cracks
    - Swelling
    - Blisters
Why are ICU nurses at high risk of hand dermatitis?

- Providing critical care requires frequent and repeated hand cleansing, often with soap and water rather than hand rubs.
- Repeated contact with irritant substances, such as soap, and repeated contact with water both prevent the skin barrier working as well as it should.
- This can lead to inflammation, or dermatitis.
- Given how often they have to clean their hands, ICU nurses are at much more risk of developing hand dermatitis than most other nurses.

Why all ICU nurses are at risk of hand dermatitis

- Repeated contact with irritants leads to micro (invisible) damage to the skin.
- Repeated micro damage builds up over the years until finally the skin can take no more and erupts into visible dermatitis.
- Therefore, even nurses who have practiced for years without getting hand dermatitis still need to take steps to protect themselves.
What are the consequences of hand dermatitis for nurses?

- Hand dermatitis can affect infection control
  - Broken and inflamed skin is more likely to be colonised by pathogens
  - Nurses with hand dermatitis could unknowingly transmit these pathogens to the patients they're caring for
  - The pathogens could also lead to the nurses getting infected dermatitis

- Hand dermatitis is unsightly, itchy and painful
- In bad cases, dermatitis can make it hard for nurses to continue working as they can’t perform the necessary hand hygiene tasks
- One staff nurse at Guy’s and St Thomas’ NHS Foundation Trust told us:
  - “My hand dermatitis got so bad I thought that if it got any worse I would have to question my career in nursing. I never realised how debilitating the condition could be, and I don’t think others do until they are affected.”
Effective strategies for preventing hand dermatitis

- There are various factors that influence your chances of getting hand dermatitis:
  - Using moisturising hand cream
  - Appropriate use of hand rubs and hand washing
  - Using gloves appropriately
  - Taking action when you see early signs of hand dermatitis

Moisturising hand cream – the benefits

- Regular use of moisturising hand cream benefits:
  - You
    - It’s proven to protect nurses from hand dermatitis
    - Hands feel more comfortable and look less rough
    - It will help you avoid developing dermatitis so severe that you have to take time off work
  - Infection control
    - Healthy skin is less likely to harbour pathogens
Click on “find out more” for the questions you’re interested in, to see more detail of the answers:

- **How often do I need to use the hand cream?**
  - At least five times a day.....
  - Find out more

- **How do I avoid the cream making my hands feel greasy?**
  - Use a 6p sized blob and.....
  - Find out more

- **Could the hand cream itself be an infection control risk?**
  - Not if it’s in a dispenser.....
  - Find out more

- **After using the cream, my skin feels a bit damp. Might bacteria grow on it?**
  - Not according to experts in infection control...
  - Find out more

---

**Do I have time for this?**

We know how busy ICU nurses are. That is why...

- Find out more

---

**Getting into the hand cream habit**

- Research shows that the most common reason nurses don’t follow hand care advice at work is because they’re too busy thinking about other things they need to do and so simply forget
- You are more likely to get round to using hand cream if you make a decision about the time and place you will do so
- For best protection against dermatitis, you need to use hand cream at the start and end of your shift, and when you go on breaks
- Let’s start by thinking about the beginning and end of your shift. We want you to plan to use hand cream as you enter and leave the ICU

**Do you normally go past a hand cream dispenser as you enter or leave the ICU?**

- Yes
- No

---

Questions? Concerns? Problems? Contact us: NHTHelp@nhs.net.uk
Getting into the hand cream habit

Your hand cream plan

If I’m about to start or end my shift, and I go past the hand cream dispenser, then I’ll use the cream on my hands

Read your plan three times to yourself. This helps make using the cream a habit

Now, think about what you do just before you go on your breaks

- Is there a hand cream dispenser where you usually clean your hands before going on a break?
  - ☐ Yes
  - ☐ No

Questions? Comments? Problems? Contact us: MODHandHealth@nhs.uk

Getting into the hand cream habit

Your plan

If I’m about to go on my break, and have cleaned my hands, then I’ll use the hand cream from the dispenser

Read your plan three times to yourself. This helps make using the cream a habit

Questions? Comments? Problems? Contact us: MODHandHealth@nhs.uk
Gloves and dermatitis

- Many ICU tasks require nurses to wear gloves for infection control purposes
- This makes it difficult to reduce the amount of time you wear gloves for
- Unfortunately, wearing gloves increases your risk of hand dermatitis by disrupting how your skin naturally stays healthy

Gloves and dermatitis

**How does wearing gloves increase dermatitis risk?**

- Dermatitis risk increases when the underlying tissues of the skin get dehydrated
- Your skin retains water thanks to substances called natural moisturising factors
- Gloves prevent sweat evaporating, making the skin soggy
- When the skin’s soggy, the body makes fewer natural moisturising factors
- Having fewer natural moisturising factors means that your skin’s ability to retain water in the underlying tissues is reduced
- Your skin gets dehydrated more easily, increasing dermatitis risk
Gloves and dermatitis

So, what can you do?

- Make sure you take gloves off at the first moment it's appropriate to do so
- Use hand cream regularly to balance out the effects of gloves on your skin’s natural ability to moisturise itself

Hand rubs, hand washing and hand care

- Your decisions about whether to use hand rubs or to wash your hands with soap must always be in line with your workplace’s infection control policy
- However, some nurses think hand rubs are worse for their hands than washing them with soap and water
- This can lead to them washing their hands even when using hand rubs would be okay from an infection control point of view
Evidence shows that hand washing is worse for the skin than hand rubs

- Soap is alkaline. The epidermis (top layer) of the skin is slightly acidic, which helps neutralise micro-organisms that are usually alkaline in nature

- If the skin is repeatedly washed with alkaline soaps, then its pH balance gets disturbed. This reduces its protection

- Therefore, hand washing with soap is worse for your hands than using hand rubs

In contrast to the damaging effects of soap, all hand rubs used in the NHS contain moisturisers, so they have a moisturising effect

- Important! To get this benefit, the rub must be rubbed into the hands until dry

- If hand rubs sting your hands that is an early sign of skin damage
  - Try using extra moisturising hand cream for the next week and see if the stinging's reduced
  - If extra hand cream doesn't help, you should consider seeking advice from occupational health
Hand dermatitis symptoms? Talk to your occupational health (OH) department

- It’s good practice to check your hands at least once a month for the signs of dermatitis:
  - Redness
  - Scaling/flaking
  - Blistering
  - Weeping
  - Cracking
  - Swelling
- Hands with dermatitis can feel itchy, tight or painful
- If you get any of these symptoms for more than a couple of days, it would be a good idea to seek support from your OH department

Hand dermatitis symptoms? Talk to your occupational health (OH) department

- Your OH service wants to prevent the serious consequences of hand dermatitis for nurses
  - “The sooner nurses consult us, the sooner we can put a plan in action to get their symptoms under control. The longer a nurse puts up with dermatitis symptoms before coming to see us, the more difficult it is to treat.”

Ira Medan, consultant occupational physician, Guy’s and St Thomas’ NHS Trust
Why go to occupational health if you think you might have hand dermatitis?

Some people are concerned that more senior staff may view visiting OH negatively

- Senior staff we spoke to said that, actually, they’re more likely to view seeking help for hand dermatitis positively
- Not only does it reduce the possibility that you have to take time off sick, but it is taking responsibility for your own wellbeing and promoting good infection control
- Consult HR or your union if you feel that you’re being unduly pressured not to visit OH by someone you work with

You’ll get support to prevent your condition becoming more serious

- OH can arrange treatment and, if necessary, arrange for a temporary change in your duties
- You may avoid having to be signed off sick or taken off working in clinical areas

By consulting occupational health, you not only help yourself, but help other nurses

- It’s only if nurses consult OH, that the department can get a full picture of how frequently nurses develop hand dermatitis
- Having a full picture means that occupational health can work to identify and reduce the causes of dermatitis in your workplace
Contacting occupational health

It might take a little time and effort to get an OH appointment

- However, it is much better to spend this time now than have to take time away from clinical work because your hand dermatitis symptoms have become very severe

To find the contact details for your occupational health department, please select the relevant employer from this list opposite and click the 'Next' button.

Please select

Your occupational health department’s contact details are:

Guy’s and St Thomas NHS Foundation Trust
Occupational Health Service
The Education Centre
75-79 York Rd
Waterloo
SE1 7EH
020 7188 4152

NOTE: You could save this number to your phone, so it’s handy if you need it.
Checking for dermatitis

You’re more likely to remember to check for symptoms each month if you pick a specific, easy to remember day to do this on.

Which day will you check on?
- First day of the month
- Last day of the month
- Pay day

What to look for
- Redness, cracking, scaling, flaking
- Blisters, swelling and weeping
- Are the symptoms getting worse?

Your plan

If it is the first day of the month, then I will check my hands for dermatitis symptoms.

Read your plan three times to yourself. This helps make checking a habit.
You have now reached the end of today's session

If you'd like to read any of the sections again, please click on the list below:

- Hand cream
- Gloves
- Hand rubs, hand washing and hand care
- Checking for hand dermatitis symptoms
- About this website

To save a record of your plans and exit the programme, please click on the 'Next' button below

Thank you for completing the SCIN study online intervention

We'll email you shortly to check how you're getting on