Public – To be published on the Trust external website

Wound Glue Procedure

Ref: CLIN-0094-002-v2

Status: Approved
Document type: Procedure
Overarching Policy: Tissue Viability Policy

Contents

1 Introduction

Topical Cyanoacrylate Adhesives (TCAs) are becoming more commonly used for non-invasive closure of minor skin wounds, reducing the need for the more traditional methods of sutures, staples or strips. TCAs are often the preferred method of closure for simple, low tension, low flexion wounds due to ease of use, speed of action and good patient compliance.

Tees, Esk and Wear Valleys (TEWV) NHS Foundation Trust provides care to a diverse range of service users across several specialties and localities, all of whom require varying degrees of need and support. As reiterated by NHS England, 2019 [online], care provision is variable, with some groups of people continuing to experience inequalities. TEWV NHS Foundation Trust is therefore fully committed to ensuring that patients receive care that is individualised, holistic and evidence based, and that fair and equal treatment is offered to all. No one should have a poorer service or a lesser experience because of their differences. It is in keeping with this principle that this procedure has been written.

This procedure reflects the Trust's strategic direction of travel, Our Journey to Change, by supporting its values and goals. Living our values is integral to the care we deliver. We will show respect to patients by actively listening to their concerns and acting upon them. We will ensure we are always compassionate, kind and supportive. We will be open and honest in our conversations, always receptive (listening) to how much information a person may want, and in what kind of format.

This procedure also supports the Trust's strategic goals. It is important that we work closely with the person so that the experience can be as good as it possibly can be, working to ensure the person has as much choice and control as possible. We will work closely with our Trust colleagues, so they feel supported in working with the person.

2 Purpose

Following this procedure will help the Trust to:

- Ensure that wound glue is applied appropriately, safely and effectively following training in wound care and the application of wound glue.
- Ensure that registered healthcare professionals adhere to professional code of practice and clinical competence is maintained.
- Ensure that nursing support staff seek support from the registered healthcare professional before application of wound glue.

3 Who this procedure applies to

This procedure applies to all registered healthcare professionals and nursing support staff working within TEWV NHS Foundation Trust who have a responsibility to assess, treat and manage wounds.

Staff must have undertaken wound care training and wound glue training by the Tissue Viability Team.

It is the individual staff member's responsibility to determine as to whether they have the knowledge and skills to confidently perform this procedure unsupervised.

If the procedure has not been performed within a period of 6 months, we would advise the staff member to contact the Tissue Viability Team to request refresher training.

Consideration has also been given to those who may be affected by this guideline to ensure that the document content aligns to the Trust's values, so that people who may be affected are treated with compassion, respect and responsibility.

4 Related documents

This procedure describes what you need to do to implement the policy section of the Tissue Viability Policy.

The Tissue Viability Policy defines the roles, responsibilities and interventions which you must read, understand and be trained in before carrying out the procedures described in this document.

This procedure also refers to:

- Consent to Examination or Treatment Policy
- Hand Hygiene Procedure
- Mental Capacity Act 2005 Policy
- Tissue Viability Policy
- Waste Management Policy

5 Use of Wound Glue

5.1 LiquiBand Optima

The only wound glue that TEWV NHS Foundation Trust use is LiquiBand Optima skin glue and only registered healthcare professionals who have received training on wound care and wound glue application are to use this product.

- Designed for use on clean, fresh wounds with easily apposable edges
- Contains a sterile blend of 90% butyl and 10% octyl cyanoacrylate
- Acts as a water-resistant barrier
- Pre-assembled with an integrated flow control precision tip which complies with aseptic non-touch technique
- Maximum bonding strength is achieved in 10-20 seconds
- Can be applied without anaesthetic
- The glue will naturally slough off within 5-10 days
- Equivalent cosmetic result to sutures

LiquiBand Optima is recommended to be stored at ambient conditions (5 degrees C- 25 degrees C). Do not use beyond expiry date stated on the packaging. Ambient storage should be away from moisture, direct heat and direct light. LiquiBand Optima is supplied sterile, do not use if packaging is damaged or open.

5.2 Indications

Wound glue can be used on:

- Wounds that are less than 6 hours old (if any uncertainty regarding timing then do not glue)
- Simple, superficial lacerations (less than 5 cm in length)
- Wounds that are clean, free from debris with no signs of infection
- Wound edges that come together neatly (are apposed) without leaving any space
- Wounds that are not subject to excessive tension, flexion or wetting

LiquiBand Optima barrier is waterproof, therefore patients can shower without compromising the wound closure, however they should not take a bath or go swimming as this may adversely affect the wound closure.

5.3 Contraindications

- Jagged, uneven lacerations (unapposed)
- Bites, punctures or crush wounds
- Wounds that appear infected or are at risk of infection due to cause and/or debris
- Wounds older than 6 hours
- Wounds on axillae and perineum (high moisture areas)
- Single use device, do not use on multiple patients
- Do not apply to blood vessels, nerve tissue or mucous membranes (e.g. inside the mouth)
- Patients with a known sensitivity to cyanoacrylate or formaldehyde

Wound glue CANNOT be used on wounds to the neck, face, head, hands, feet and genitalia and MUST be transferred to the local Acute Trust Emergency Department.

6 Procedure

LiquiBand Optima must only be used for wound closure by a trained registered healthcare professional or nursing support staff who **must** have undertaken face to face training prior to using LiquiBand on any wound. An instructional video can be used as an update for staff who have already undertaken the face to face training.

6.1 Assessment for suitability

Prior to the use of wound glue to close a wound, the wound **must** be assessed by a registered healthcare professional or nursing support staff, who has undertaken wound care and wound glue training whilst taking into consideration the indications and contraindications outlined in **Sections 5.2 and 5.3.**

Reasonable adjustments must be made to support patients in the application of wound glue, and also to help patients to understand the information and advice given to them.

It is also important to acknowledge the patients personal preferences and wishes. Wherever possible these preferences need to be taken into account to promote collaborative decision making, privacy and dignity, and also to prevent the breach of iatrogenic harm.

Further information can be obtained from the Consent to Examination or Treatment Policy and the Privacy and Dignity Policy, both of which are available via the Trust intranet.

6.2 Equipment

The following equipment is required when using tissue adhesive to close a wound:

- Facilities for hand washing
- A sterile surface/trolley (to be decontaminated pre and post procedure using Clinell wipes)
- A sterile dressing pack including personal protective equipment (PPE)
- Sterile gauze
- Normasol sachet for wound irrigation
- Single use LiquiBand Optima tube
- Facilities for clinical waste

6.3 Pre application

- Explain procedure to patient and gain consent. If the patient does not have capacity then staff should complete a MCA 1 and MCA 2 and discuss as part of a best interests decision (see Consent to Examination or Treatment Policy and Mental Capacity Act 2005 Policy for further guidance)
- Wash hands thoroughly (see Hand Hygiene Procedure for further guidance)
- Irrigate the wound with Normasol
- Dry thoroughly with sterile gauze

It is essential to stop and control any bleeding by applying pressure to the wound with sterile gauze prior to the application of the wound glue.
If bleeding continues, then the patient MUST be transferred to the local Acute Trust Emergency Department.

6.4 Application

- Remove the LiquiBand Optima from its packet using aseptic non-touch technique (see Tissue Viability Policy for further guidance on aseptic technique)
- Hold the tube upright and squeeze the applicator wings until a cracking sound is heard (this is the adhesive being released from its sterile component)
- Invert the tip and gently squeeze wings to prime and when the transparent dome tip fills with adhesive LiquiBand Optima is ready to use
- Close the wound edges and hold together using aseptic technique
- Apply a thin, equal layer of LiquiBand Optima over the full length of the closed wound
- Hold the wound closed for a minimum of 10 seconds while adhesive takes effect. Avoid applying excessive amounts of LiquiBand Optima as this can lead to reduced flexibility at the wound edges and reduce the strength of the closure
- No dressing is required, but a dressing may be required to prevent picking of the glue.

Glue must not be placed inside the wound as this will impair healing and may lead to wound dehiscence (opening).

6.5 Post application

Dispose of any clinical waste appropriately (further information can be obtained from the Waste Management Policy which is available via the Trust intranet)

Provide and support the patient with post procedure guidance:

- Avoid touching the glue for 24 hours
- Avoid picking/pulling at the dried glue
- LiquiBand Optima barrier is waterproof, therefore patients can shower without compromising the wound closure however should not take a bath or swim as this may adversely affect the wound closure
- Avoid use of lotions or creams to the glued area for the first 5 days
- Avoid wearing tight clothing over the glued area to avoid rubbing for the first five days

If there are any concerns regarding a wound after gluing, then a referral should be made to the Tissue Viability Team (via email: tewv.tissueviability@nhs.net). Alternatively, if there is immediate staff concern, the patient should be transferred to the local Acute Trust Emergency Department.

Concerns may include (but are not limited to):

- Delayed wound healing
- Wound deterioration (increase in size/depth, change in tissue type)
- Wound dehiscence (opening)
- Signs of infection (e.g. swelling, reddening to skin, heat to surrounding skin, increase in pain, increase in exudate, patient appearing generally unwell)

Further information regarding wound healing can be obtained from Tissue Viability Policy which is available via the Trust intranet.

7 Definitions

Term	Definition
Apposed Wound	• A wound that has had its wound edges brought together.
Wound Dehiscence	• A partial or total separation of previously approximated wound edges.

8 How this procedure will be implemented

- This procedure will be published on the Trust's intranet and external website.
- Line managers will disseminate this procedure to all Trust employees through a line management briefing.
- Each team/ward manager will ensure that staffs training needs are met in accordance with the Trust's training needs analysis.
- Each healthcare professional is responsible for their own professional development and an individual's needs should be addressed through appraisal and training needs analysis.
- An education programme, which incorporates wound care and the application of wound glue, is available for all registered healthcare professionals. Staff to contact the Tissue Viability Team if required.

8.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
Physical Healthcare Practitioners	Face to face	60 minutes	Once only

Registered Healthcare Professionals	Face to face as part of WREN programme	60 minutes	Once only (bespoke update training available if required)
Nursing Support Staff	Face to face as part of WREN programme	60 minutes	Once only (bespoke update training available if required)

9 How the implementation of this procedure will be monitored

Number	Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	Clinical Audit of ESR training records for staff who have completed the WREN programme	Frequency =Annually Responsible = Tissue Viability Team	The Fundamental Standards of Holistic Care, Clinical Advisory Group

10 References

Advanced Medical Solutions (2018) LiquiBand Optima [online]
http://www.liquiband.com/downloads/uk/LiquiBand-Optima-Product-Factsheet.pdf
[Accessed 23rd February 2024]

NHS England (2019) The NHS Long Term Plan (LTP) [online]
https://www.longtermplan.nhs.uk/wp-content/uploads/2019/08/nhs-long-term-plan-version-1.2.pdf
[Accessed 23rd February 2024]

NHS (2021) How do I care for a wound treated with skin glue? [online]
https://www.nhs.uk/common-health-questions/accidents-first-aid-and-treatments/how-do-i-care-for-a-wound-treated-with-skin-glue/
[Accessed 23rd February 2024]

11 Document control (external)

To be recorded on the policy register by Policy Coordinator

Required information type	Information
Date of approval	02 April 2024
Next review date	02 April 2027
This document replaces	CLIN-0094-002-v1 Wound Glue Procedure
This document was approved by	The Fundamental Standards of Holistic Care Clinical Advisory Group
This document was approved	02 April 2024
This document was ratified by	n/a
This document was ratified	n/a
An equality analysis was completed on this policy on	23 February 2024
Document type	Public

Change record

Version	Date	Amendment details	Status
2	02 April 2024	Full review of Procedure undertaken. Update of references, 'who this procedure applies to' section and 'related documents' section.	Approved

Appendix 1 - Equality Impact Assessment Screening Form

Please note: The Equality Impact Assessment Policy and Equality Impact Assessment Guidance can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	Nursing and Governance/ Tissue Viability Service
Title	Wound Glue Procedure
Type	Procedure/guidance
Geographical area covered	Trust-wide
Aims and objectives	• Ensure that wound glue is applied appropriately, safely and effectively following training in wound care and the application of wound glue. • Ensure that registered healthcare professionals adhere to professional code of practice and clinical competence is maintained. • Ensure that nursing support staff seek support from the registered healthcare professional before application of wound glue.
Start date of Equality Analysis Screening	23 February 2024
End date of Equality Analysis Screening	23 February 2024

Section 2	Impacts
Who does the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	Trust staff and patients
Will the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?	• **Race** (including Gypsy and Traveller) **NO** • **Disability** (includes physical, learning, mental health, sensory and medical disabilities) **NO** • **Sex** (Men and women) **NO** • **Gender reassignment** (Transgender and gender identity) **NO** • **Sexual Orientation** (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) **NO** • **Age** (includes, young people, older people – people of all ages) **NO** • **Religion or Belief** (includes faith groups, atheism and philosophical beliefs) **NO** • **Pregnancy and Maternity** (includes pregnancy, women / people who are breastfeeding, women / people accessing perinatal services, women / people on maternity leave) **NO** • **Marriage and Civil Partnership** (includes opposite and same sex couples who are married or civil partners) **NO** • **Armed Forces** (includes serving armed forces personnel, reservists, veterans and their families) **NO** • **Human Rights Implications NO** (Human Rights - easy read)
Describe any negative impacts / Human Rights Implications	This procedure will not negatively impact upon any of the protected characteristic groups.
Describe any positive impacts / Human Rights Implications	Service users receive safe, effective and appropriate wound care and interventions

Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	See appendix 9 for references used within document
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Yes
If you answered Yes above, describe the engagement and involvement that has taken place	This procedure has been discussed with the Fundamental Standards of Holistic Care Clinical Advisory Group who support patients from a range of protected characteristics on a daily basis.
If you answered No above, describe future plans that you may have to engage and involve people from different groups	N/A

Section 4	Training needs
As part of this equality impact assessment have any training needs/service needs been identified?	Yes
Describe any training needs for Trust staff	Registered healthcare professionals and nursing support staff must undertake wound care training which will incorporate training on the use of wound glue.
Describe any training needs for patients	N/A
Describe any training needs for contractors or other outside agencies	N/A

Check the information you have provided and ensure additional evidence can be provided if asked.

Appendix 2 – Approval checklist

Title of document being reviewed:	Yes / No / Not applicable	Comments
1. Title		
Is the title clear and unambiguous?	Yes	
Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2. Rationale		
Are reasons for development of the document stated?	Yes	
3. Development Process		
Are people involved in the development identified?	Yes	
Has relevant expertise has been sought/used?	Yes	
Is there evidence of consultation with stakeholders and users?	Yes	
Have any related documents or documents that are impacted by this change been identified and updated?	Yes	
4. Content		
Is the objective of the document clear?	Yes	
Is the target population clear and unambiguous?	Yes	
Are the intended outcomes described?	Yes	
Are the statements clear and unambiguous?	Yes	
5. Evidence Base		
Is the type of evidence to support the document identified explicitly?	Yes	
Are key references cited?	Yes	
Are supporting documents referenced?	Yes	

6. Training		
Have training needs been considered?	Yes	
Are training needs included in the document?	Yes	
7. Implementation and monitoring		
Does the document identify how it will be implemented and monitored?	Yes	
8. Equality analysis		
Has an equality analysis been completed for the document?	Yes	
Have Equality and Diversity reviewed and approved the equality analysis?	Yes	
9. Approval		
Does the document identify which committee/group will approve it?	Yes	
10. Publication		
Has the policy been reviewed for harm?	Yes	
Does the document identify whether it is private or public?	Yes	
If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	N/A	
11. Accessibility (See intranet accessibility page for more information)		
Have you run the Microsoft Word Accessibility Checker? (Under the review tab, 'check accessibility'. You must remove all errors)	Yes	
Do all pictures and tables have meaningful alternative text?	Yes	
Do all hyperlinks have a meaningful description? (do not use something generic like 'click here')	Yes	