



Public – To be published on the Trust external website

Wound Glue Procedure

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Overarching policy: Tissue Viability Policy

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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.

This procedure reflects the Trust's strategic direction of travel, Our Journey to Change, by supporting its values and goals:

To co-create a great experience for our patients, carers and families, so you will experience:

- **Outstanding** and compassionate care, all of the time.
- **Access** to the care that is right for you.
- **Support** to achieve your goals.
- **Choice** and control.

To co-create a great experience for our colleagues, so you will be:

- **Proud**, because your work is meaningful.
- **Involved** in decisions that affect you.
- **Well led** and managed.
- That your workplace is **fit for purpose**.

To be a great partner, so we will:

- Have a **shared understanding** of the needs and the strengths of our communities
- Be **working innovatively** across organisational boundaries to improve services.
- Be **widely recognised** for what we have achieved together.

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

3 Who this procedure applies to

This procedure applies to all registered healthcare professionals 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.



Respect

- Listening
- Inclusive
- Working in partnership



Compassion

- Kind
- Supportive
- Recognising and Celebrating



Responsibility

- Honest
- Learning
- Ambitious

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:-

- ✓ Disposal of Clinical Waste Procedure
- ✓ Hand Hygiene Procedure
- ✓ Consent to Examination of Treatment Policy
- ✓ Mental Capacity Act 2005 Policy
- ✓ Tissue Viability 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 appposable 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

- 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
- Wounds that are easily apposed (bring together) 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
- 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



All wounds to the neck, face, head, hands, feet and genitalia MUST be transferred to the local Acute Trust Emergency Department.

5.4 Procedure

LiquiBand Optima must only be used for wound closure by a trained registered healthcare professional. The staff **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.

5.4.1 Assessment for suitability

Prior to the use of wound glue to close a wound, the wound **must** be assessed by a registered healthcare professional, 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.

5.4.2 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

5.4.3 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.

5.4.4 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).

5.4.5 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: tevv.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.

6 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.

7 How this procedure will be implemented

<ul style="list-style-type: none"> This procedure will be published on the Trust's intranet and external website.
<ul style="list-style-type: none"> Line managers will disseminate this procedure to all Trust employees through a line management briefing.
<ul style="list-style-type: none"> Each team/ward manager will ensure that staffs training needs are met in accordance with the Trust's training needs analysis.
<ul style="list-style-type: none"> Each healthcare professional is responsible for their own professional development and an individual's needs should be addressed through appraisal and training needs analysis.
<ul style="list-style-type: none"> 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.

7.1 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)

8 How the implementation of this procedure will be monitored

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	Annually/Tissue Viability Team	IPC/Physical Health Group in absence of Physical Health and Wellbeing Group

9 References

Advanced Medical Solutions (2018) LiquiBand Optima [online]
<http://www.liquiband.com/downloads/uk/LiquiBand-Optima-Product-Factsheet.pdf>
 [Accessed 4th August 2021]

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 September 2021]

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 4th August 2021]

10 Document control (external)

To be recorded on the policy register by Policy Coordinator

Date of approval:	05 October 2021	
Next review date:	05 October 2024	
This document replaces:	N/A - new document	
This document was approved by:	Name of committee/group	Date
	IPC/PH virtual meeting	05 October 2021
This document was ratified by:	Name of committee/group	Date
	n/a	
An equality analysis was completed on this document on:	23/09/2021	
Document type	Public	
FOI Clause (Private documents only)	N/A	

Change record

Version	Date	Amendment details	Status
1	05 Oct 2021	New document	approved

Appendix 1 - Equality Analysis Screening Form

Please note; The Equality Analysis Policy and Equality Analysis Guidance can be found on the policy pages of the intranet

Name of Service area, Directorate/Department i.e. substance misuse, corporate, finance etc.	Nursing and Governance/Physical Healthcare			
Policy (document/service) name	Wound Glue Procedure			
Is the area being assessed a...	Policy/Strategy		Service/Business plan	Project
	Procedure/Guidance		√	Code of practice
	Other – Please state			
Geographical area covered	Trust wide			
Aims and objectives	<ul style="list-style-type: none"> • 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 			
Start date of Equality Analysis Screening (This is the date you are asked to write or review the document/service etc.)	23/09/2021			
End date of Equality Analysis Screening (This is when you have completed the equality analysis and it is ready to go to EMT to be approved)	23/09/2021			

You must contact the EDHR team if you identify a negative impact - email tevv.eandd@nhs.net

1. Who does the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?

Trust, staff and patients.

2. Will the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups below?

Race (including Gypsy and Traveller)	No	Disability (includes physical, learning, mental health, sensory and medical disabilities)	No	Sex (Men, women and gender neutral etc.)	No
Gender reassignment (Transgender and gender identity)	No	Sexual Orientation (Lesbian, Gay, Bisexual and Heterosexual etc.)	No	Age (includes, young people, older people – people of all ages)	No
Religion or Belief (includes faith groups, atheism and philosophical belief's)	No	Pregnancy and Maternity (includes pregnancy, women who are breastfeeding and women on maternity leave)	No	Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners)	No

No – The Procedure will not impact negatively on any of the protected characteristic groups.
The positive impacts of the procedure are: Service users receive safe, effective and appropriate wound care and interventions.

<p>3. Have you considered other sources of information such as; legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.? If 'No', why not?</p>	<p>Yes</p>	<p>√</p>	<p>No</p>	
<p>Sources of Information may include:</p> <ul style="list-style-type: none"> • Feedback from equality bodies, Care Quality Commission, Equality and Human Rights Commission, etc. • Investigation findings • Trust Strategic Direction • Data collection/analysis • National Guidance/Reports 	<ul style="list-style-type: none"> • Staff grievances • Media • Community Consultation/Consultation Groups • Internal Consultation • Research • Other (Please state below) 			
<p>4. Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the following protected groups?: Race, Disability, Sex, Gender reassignment (Trans), Sexual Orientation (LGB), Religion or Belief, Age, Pregnancy and Maternity or Marriage and Civil Partnership</p>				
<p>Yes – Please describe the engagement and involvement that has taken place</p>				
<p>This procedure will be reviewed by the Trust Physical Healthcare Practitioners and be discussed at the IPC/Physical Health Group prior to approval.</p>				
<p>No – Please describe future plans that you may have to engage and involve people from different groups</p>				

5. As part of this equality analysis have any training needs/service needs been identified?					
Yes	Registered healthcare professionals must undertake wound care training which will incorporate training on the use of wound glue.				
A training need has been identified for;					
Trust staff	Yes	Service users	No	Contractors or other outside agencies	No
Make sure that you have checked the information and that you are comfortable that additional evidence can provided if you are required to do so					

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	

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
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 document 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	