Occupational Dermatitis: Protecting Employees' Skin at Work

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Why Occupational Dermatitis Matters

Occupational dermatitis is inflammation of the skin caused by contact with substances or conditions at work. It shows up as redness, dryness, itching, scaling, blistering and cracking, most often on the hands, wrists and forearms. In mild cases it is uncomfortable; in severe cases the pain and cracking make it hard to grip tools, wash or sleep, and some workers end up leaving the trade they trained for.

There are two distinct mechanisms, and the difference matters for prevention. Irritant contact dermatitis is caused by direct damage to the skin barrier, either from a single strong exposure or, far more commonly, from repeated contact with milder substances, including detergents, solvents and plain water when hands are wet for long periods. Allergic contact dermatitis develops when a person becomes sensitised to a specific substance, such as a resin, rubber accelerator, colourant or metal salt. Once someone is sensitised, even a tiny trace can trigger a reaction, and that sensitivity is usually permanent, so prevention has to come before sensitisation happens, not after.

Who Is Most at Risk

Some trades see dermatitis far more often because of the materials and processes involved, and new starters and apprentices are often hit hardest because their skin has not yet had any protective routine built around it.

- **Cleaners and facilities staff:** detergents, disinfectants and constant wet work
- **Catering and food production staff:** wet work, foodstuffs, and frequent handwashing with cleaning products
- **Hairdressers and barbers:** shampoos, colourants, bleaches and perm solutions, with many apprentices developing problems in their first year or two
- **Construction workers:** wet cement, which is both irritant and strongly sensitising, along with epoxy resins, solvents and dusts
- **Mechanics and engineers:** oils, greases, metalworking fluids and degreasing solvents
- **Healthcare and care workers:** frequent handwashing, alcohol gels and prolonged glove wear

Businesses in construction and in care homes are among those where the condition is a regular concern, partly because of the substances involved and partly because staff turnover can mean skin care habits have to be retaught to new people.

The Legal Duty Under COSHH

Because the substances involved are hazardous to health, the Control of Substances Hazardous to Health Regulations 2002 (COSHH) apply directly. Employers must assess the risk from any substance that could cause dermatitis, put in place controls proportionate to that risk, and review them regularly, not just once when the assessment was first written. The Management of Health and Safety at Work Regulations 1999 also require a suitable and sufficient risk assessment covering all significant health risks, skin damage included.

Responsibility sits with the employer, but it is shared in practice. Managers and supervisors must make sure the controls in the assessment, such as gloves, barrier creams or task rotation, are actually available and used day to day, not just listed on paper. Workers have duties too. Under the Health and Safety at Work etc. Act 1974 they must take reasonable care of themselves and others and co-operate with their employer, which in practice means using the controls and protective equipment provided and reporting problems, including early skin symptoms, rather than carrying on and hoping they settle down.

Review the assessment whenever the process, substance or quantity changes, at an interval that matches the level of risk, and sooner if someone reports a skin problem the current controls failed to prevent. If you are not sure your assessments reflect what happens on the shop floor, an independent audit is often the quickest way to find out; our auditing and inspection service looks at the gap between the paperwork and the practice.

Prevention: Avoid, Protect, Check

Avoid contact where possible

The strongest control is not touching the substance at all. Ask whether a less hazardous product can be substituted, whether a splash-free dispensing method or applicator could replace bare-handed mixing, or whether a process can be enclosed. Reducing the frequency and duration of wet

work matters just as much as the chemicals involved, so rotate tasks so that no one person has wet hands for the whole shift.

Protect the skin that is exposed

Where contact cannot be designed out, gloves are usually the next line of defence, but the detail is where many workplaces go wrong. The glove material has to resist the specific substance in use, which the safety data sheet and the manufacturer's chemical resistance chart will confirm; a glove that is fine for one solvent can fail within minutes against another. Replace gloves before they degrade, wear them on clean, dry skin, and do not reuse gloves designed for single use across a shift. Pre-work creams can make washing easier but are never a substitute for gloves, while after-work moisturising creams help the skin barrier recover and should be provided as standard, not treated as an optional extra.

Check for early signs before they become chronic

Dermatitis caught early, while it is still mild, usually clears up once exposure stops; left alone, it can become chronic and much harder to resolve. Where there is a foreseeable risk, build in regular skin checks: workers looking at their own hands and being encouraged to report dryness, redness or itching without fear of blame, backed up by periodic checks from a trained supervisor. For higher-risk exposures, such as regular contact with known sensitisers, health surveillance by an occupational health provider may be a legal requirement under COSHH.

Health Surveillance and Keeping Records

Where health surveillance is required, COSHH requires the employer to keep a health record for each person under surveillance, for at least 40 years from the date of the last entry. Alongside this, keep a simple log of reported skin problems, the action taken, and any changes made to controls as a result. The log shows that your assessment is a living document rather than a filing exercise, and it often reveals patterns, such as a particular product or task causing repeated reports, long before anyone would spot the trend from memory.

A common gap is a COSHH assessment that identifies dermatitis as a risk, lists gloves as the control, and then never checks whether the right gloves are in stock in the right sizes. Another is relying entirely on workers to self-report, which tends to under-report problems because people assume mild irritation is just part of the job. Both are easy to fix once someone is made responsible for checking.

Building It Into Routine, Not a One-Off Campaign

Skin care only sticks when it is part of everyday working life rather than a poster that goes up once a year. That means gloves in the sizes people need, washing facilities with warm water and a mild soap rather than a harsh solvent-based scrub, moisturiser kept by the sinks, and supervisors who ask about hands as regularly as they ask about machine guards or housekeeping. A short toolbox talk each spring and autumn keeps the subject live without it feeling like a lecture.

Training the people who write and review your COSHH assessments helps too. Our COSHH

Awareness course gives them a practical grounding in assessing and controlling substances hazardous to health.

Getting Your Skin Risk Controls Right

Occupational dermatitis is largely preventable once the right substitution, protection and monitoring steps are in place and followed day to day. The businesses that get it wrong are rarely those with no risk assessment at all; they are the ones whose assessment was written once, filed away, and never tested against what actually happens at the sink or the workbench.

Integral Safety helps businesses across Leicestershire and the wider East Midlands get their COSHH assessments working in practice through our health and safety consultancy service. If your skin risk controls need an honest second look, get in touch with our East Midlands team to arrange a review.

Talk to Integral Safety Ltd

We are health and safety consultants based in Coalville, Leicestershire, working with businesses across the East Midlands. If anything in this guide applies to your workplace, we can help.

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This guide is general information about UK health and safety law and practice, correct as at 11 November 2026. It is not advice on your particular circumstances. The latest version is at https://integralsafetyltd.co.uk/blog/occupational-dermatitis-protecting-employees-skin-at-work.