

Implementing Gloves Off in Critical Care

**Dr. Sam Clark
ST8 Intensive Care Medicine
Lead for PPE Work Stream
(ICS ESWG)**

X @clark_samr



@ics_updates



@ics_updates




/intensivecaresociety



/intensive-care-society

Gloves Off in critical care



Intensive Care Society

GLOVES OFF

in critical care

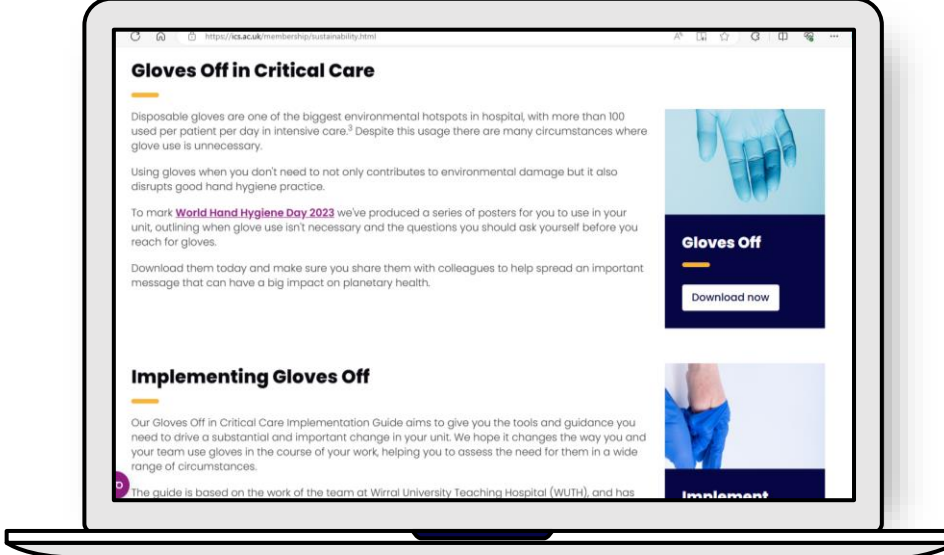

An implementation guide

This guide is based closely the Keep it Simple Without Gloves project and supplementary implementation guide by Dr Sam Clark and the team at Wirral University Teaching Hospital (WUTH). It recounts the methods used by the team in their highly successful campaign to reduce unnecessary glove use at WUTH.

It is a guide for anyone looking to implement Gloves Off in Critical Care, Keep it Simple Without Gloves, or a similar change project, with a degree of success like that experienced by the WUTH team. You can find out more about the campaign at Wirral University Teaching Hospitals NHS Foundation Trust at the end of this document.

You can also find more information about our sustainability work, including Gloves Off in Critical Care, at ics.ac.uk/sustainability.

Endorsed by



Gloves Off in Critical Care

Disposable gloves are one of the biggest environmental hotspots in hospital, with more than 100 used per patient per day in intensive care.² Despite this usage there are many circumstances where glove use is unnecessary.

Using gloves when you don't need to not only contributes to environmental damage but it also disrupts good hand hygiene practice.

To mark **World Hand Hygiene Day 2023** we've produced a series of posters for you to use in your unit, outlining when glove use isn't necessary and the questions you should ask yourself before you reach for gloves.

Download them today and make sure you share them with colleagues to help spread an important message that can have a big impact on planetary health.

Gloves Off

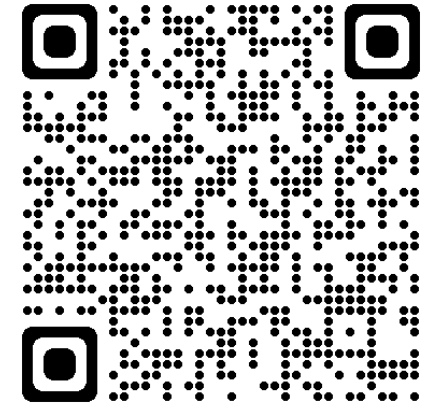
Download now

Implementing Gloves Off

Our **Gloves Off in Critical Care Implementation Guide** aims to give you the tools and guidance you need to drive a substantial and important change in your unit. We hope it changes the way you and your team use gloves in the course of your work, helping you to assess the need for them in a wide range of circumstances.

The guide is based on the work of the team at Wirral University Teaching Hospital (WUTH), and has

Implement



@ics_updates



@ics_updates



/intensivecaresociety



/intensive-care-society

Experience

NHS
Wirral University Teaching Hospital
NHS Foundation Trust

keep it simple
without gloves

It is not always safer to wear gloves when delivering patient care

Only wearing gloves when needed is safer.

Please feel free to talk to us about this if you have any questions.

Find out more
Scan me

together we will



NHS
Liverpool University Hospitals
NHS Foundation Trust

Gloves and aprons off when...

 <p>Touching a patient when there is no risk of contact with bodily fluids</p>	 <p>Pushing a chair, trolley, bed or mobilising a patient</p>	 <p>Using a computer, mobile device or telephone</p>	 <p>Assisting with feeding</p>	 <p>Making and handing out drinks</p>
 <p>Dispensing and administering medication</p>	 <p>Undertaking observations</p>	 <p>Handing out and collecting meal trays</p>	 <p>Undertaking intentional rounding or administration work</p>	 <p>Completing documentation at the bedside</p>

Look after yourself and your patients:

- The most effective way to prevent infection is to observe the WHO five moments of hand hygiene.
- Wearing gloves when not necessary can result in higher rates of transmission of infection.

Scan the QR code to find out more

SCAN ME!

NHS
Liverpool Heart and Chest Hospital
NHS Foundation Trust

NHS
Alder Hey Children's
NHS Foundation Trust

 **Intensive Care Society**
Sustainability Project



@ics_updates



@ics_updates

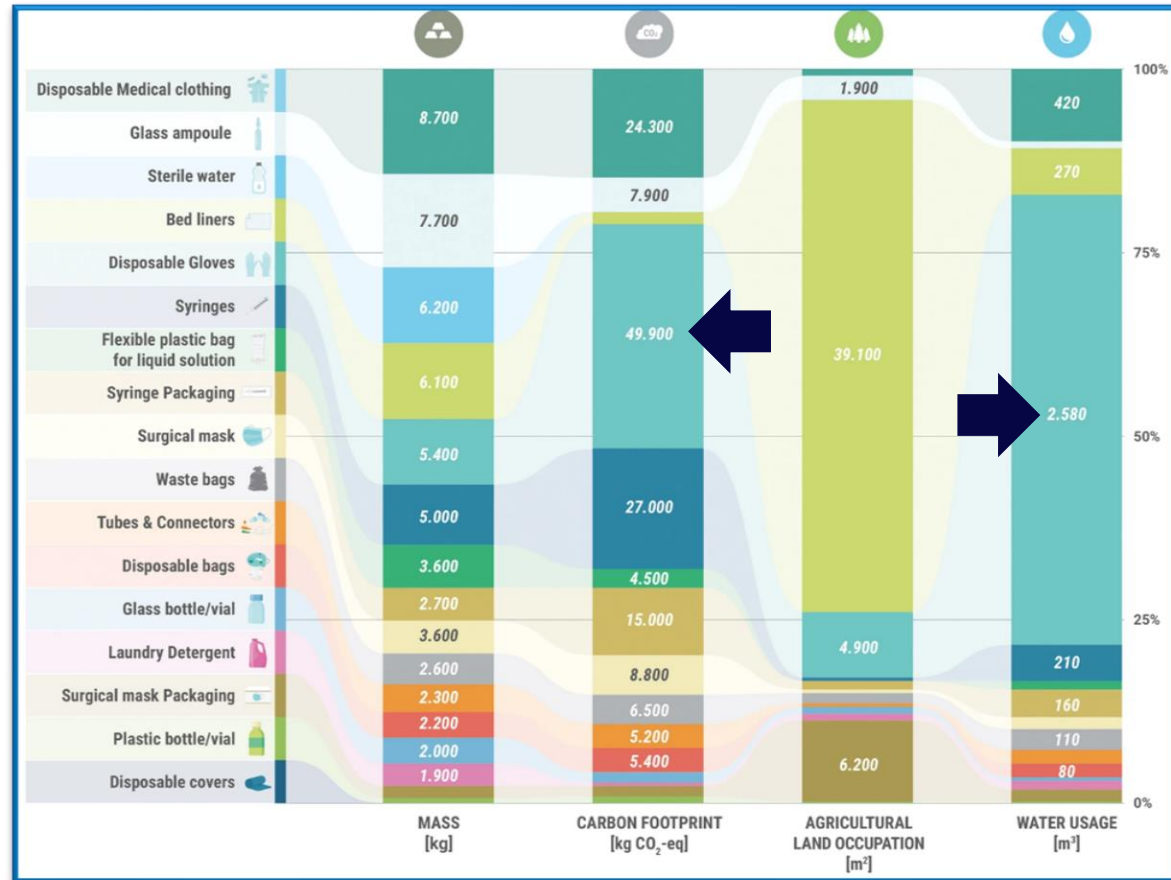


/intensivecaresociety



/intensive-care-society

Why gloves?

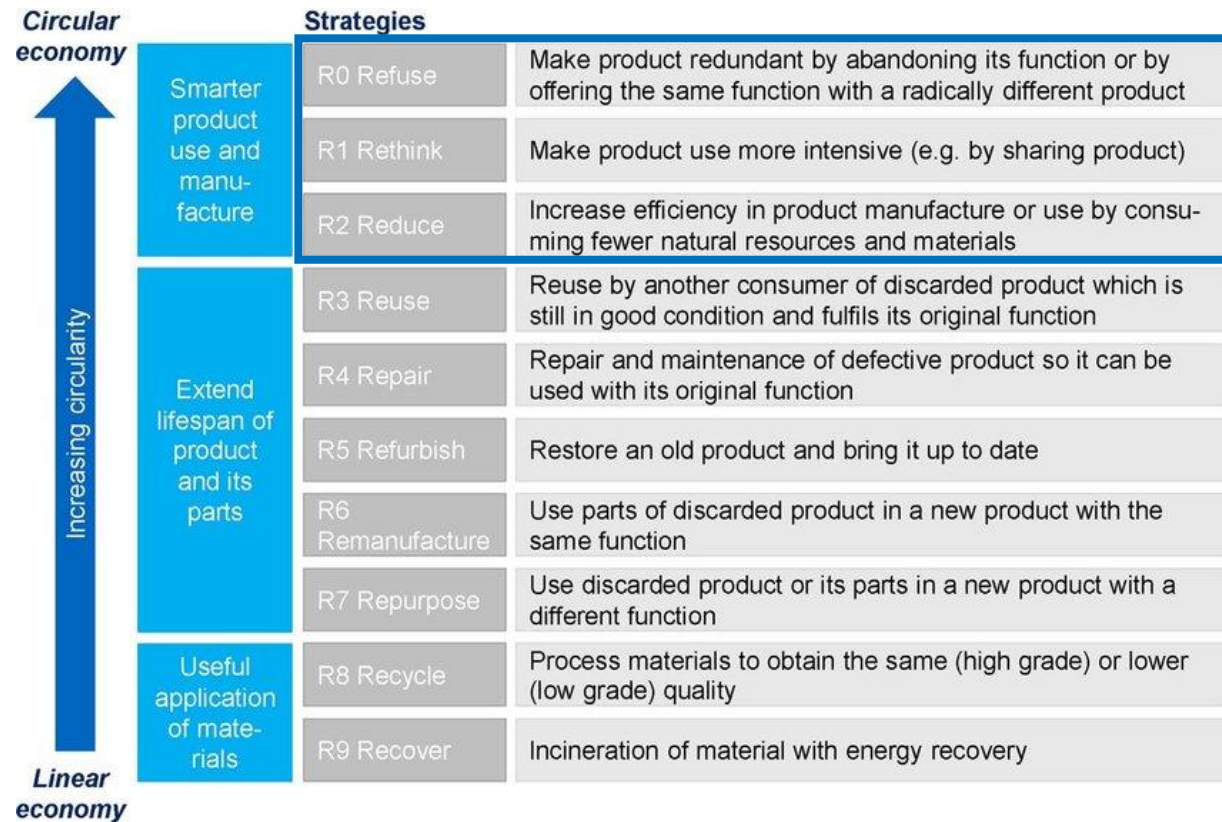


The largest contributor to carbon footprint and water usage was **disposable gloves**

Hunfield et al, 2022



Why gloves?



Increasing circularity

Potting et al, 2017



@ics_updates



@ics_updates



/intensivecaresociety



/intensive-care-society

Guidance is clear



The Royal Marsden Manual of
Clinical and Cancer Nursing Procedures

Journal of Hospital Infection 86S1 (2014) S1-S70



epic3: National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England

H.P. Loveday^{a*}, J.A. Wilson^a, R.J. Pratt^a, M. Golsorkhi^a, A. Tingle^a, A. Bak^a, J. Browne^a, J. Prieto^b, M. Wilcox^c

^a Richard Wells Research Centre, College of Nursing, Midwifery and Healthcare, University of West London (London).

^b Faculty of Health Sciences, University of Southampton (Southampton).

^c Microbiology and Infection Control, Leeds Teaching Hospitals and University of Leeds (Leeds).



@ics_updates



@ics_updates



/intensivecaresociety



/intensive-care-society



Use a model for improvement



NHS Change Model
NHS England, 2022



Sus-QI Framework
Centre for Sustainable Health Care



@ics_updates



@ics_updates



/intensivecaresociety



/intensive-care-society



Involve

Patient Facing Colleagues

Housekeeping
Technical
Pharmacy
AHPs

HCA/ CSW
Nursing
Medical

Visiting teams

Executive Team

Chief Nurses
Medical Directors
Finance Officer

Trust Operations

Procurement
Facilities
Communications

Unit Leadership

Clinical lead
IPC leads
Matron
Educators

Link nurses:
- IPC
- Sustainability

Clinical Governance

IPCT & Directors
Sustainability
Improvement

Other Teams

IV access
Nutrition
Clinical skills
Occ. Health



@ics_updates



@ics_updates



/intensivecaresociety




/intensive-care-society



Measure


Original Article

 Journal of Infection Prevention

The misuse and overuse of non-sterile gloves: application of an audit tool to define the problem

Jennie Wilson¹, Jacqui Prieto², Julie Singleton³, Vivienne O'Connor³, Siobhan Lynam¹ and Heather Loveday¹

Journal of Infection Prevention
2015, Vol. 16(1) 24-31
DOI: 10.1177/1757177414558673
© The Author(s) 2015
Reprints and permissions:
sagepub.co.uk/journalsPermissions.nav
jip.sagepub.com



 Liverpool University Hospitals
NHS Foundation Trust

Glove use audit tool

A. Observation

1. **Date** _____ **Location (Hospital & Ward/Area)** _____

2. **Job role of person performing task**

<input type="checkbox"/> Consultant	<input type="checkbox"/> Band 6+ nurse	<input type="checkbox"/> Pharmacist	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Specialty doctor	<input type="checkbox"/> Band 5 nurse	<input type="checkbox"/> Physiotherapist	
<input type="checkbox"/> Doctor in training	<input type="checkbox"/> Student nurse	<input type="checkbox"/> Dietician	
<input type="checkbox"/> Fellow/ Trust grade	<input type="checkbox"/> CSW	<input type="checkbox"/> SLT	
<input type="checkbox"/> Student doctor	<input type="checkbox"/> Domestic		

3. **Location of task performed**

<input type="checkbox"/> Clean utility	<input type="checkbox"/> Sluice	<input type="checkbox"/> Side room	<input type="checkbox"/> Other: _____
		<input type="checkbox"/> Outside side room	
<input type="checkbox"/> Under isolation precautions	<input type="checkbox"/> Bed space		

4. **Sequence of items/ objects touched in this episode of care with points of hand hygiene/ glove use**
Use to categorise the risk of cross-contamination in one or more of 'My 5 moments of hand hygiene' at end of the observation



@ics_updates



@ics_updates



/intensivecaresociety



/intensive-care-society



Our baseline findings



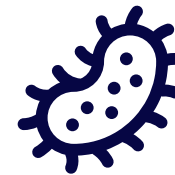
	Before at WUTH
Gloves worn when not necessary	73%



	Before at LUHFT	Trust wide
Gloves worn when not necessary	60.4%	73%



Hands not washed after gloves off	87%
Cross contamination events	91%



Hands not washed after gloves off	50%	51%
Cross contamination events	98%	83%



@ics_updates



@ics_updates



/intensivecaresociety



/intensive-care-society

Roadmap to change



@ics_updates



@ics_updates



/intensivecaresociety



/intensive-care-society

Guidance

Before you reach for gloves, stop and ask 'Am I at Risk?'

The risks requiring you to wear gloves are:

- If direct contact with blood, bodily fluids, mucous membranes, or non-intact skin is likely.
- If contact with chemical hazards or harmful drugs is likely.
- If caring for a patient requiring specific IPC transmission-based precautions.

For most other tasks, gloves are not necessary and can result in more harm.

Look after yourself and your patients:

- The most effective way to prevent infection is to observe the WHO five moments of hand hygiene.
- Wearing gloves when not necessary can result in higher rates of transmission of infection.



@ics_updates



@ics_updates



/intensivecaresociety



/intensive-care-society

When preparing and administering medicines, gloves are generally not required

Medicines that might be harmful and require you to wear gloves include:

- Cytotoxic medicines (i.e. chemotherapy).
- Mono-clonal antibodies (names end in '-mab').
- Immunotherapy agents (names end in '-ib').
- Medicine containing creams (such as antibiotic creams).
- Hormones/hormone modulating medicines.

You might also wear gloves if:

- Irritant injectable medicines (such as those with extremes of pH).
- You have a severe allergy to the medicine.
- You are pregnant (due to lack of robust data for most drugs).

Look after yourself and your patients

- If you are unsure whether the drug you are giving is harmful, please speak to the pharmacy or medical teams.
- Ensure that you clean your hands before and after handling medicines.



@ics_updates



@ics_updates



/intensivecaresociety



/intensive-care-society

##

A red number denotes where Key-parts or Key-sites need protecting

Preparation zone



1 Disinfect hands with alcohol hand rub or soap & water



2 Disinfect tray using a disinfectant wipe[§] - creating a **General Aseptic Field**



3 Gather equipment place around tray



4 Disinfect hands with alcohol hand rub or soap & water*



5 Apply non-sterile gloves if required* & disposable apron if required

***Gloves are generally not required**
Wear gloves if direct contact with blood, bodily fluids, mucous membranes, or non-intact skin is likely.
Injectable medicines that might be harmful and require you wear gloves include cytotoxic medicines and monoclonal antibodies.



6 Prepare medicines protecting **Key-Parts** with non-touch technique (NTT) & **Micro Critical Aseptic Fields**



7 Remove gloves followed by apron (if either worn) & immediately disinfect hands with alcohol hand rub or soap & water

Prepare patient
Assess vascular access device is appropriate and suitable for IV administration, and expose ready for use

Patient zone



8 Disinfect hands with alcohol hand rub or soap & water



9 Apply non-sterile gloves if required* & disposable apron if required



10 Scrub the IV hub (Needle free connector)

'Scrub The Hub'

- Use a 2% chlorhexidine/ 70% alcohol wipe[§]
- Open the wipe fully & use NTT
- Scrub the hub tip for 15 seconds, creating friction using different areas of the wipe
- Allow to dry completely before use



11 Flush device, administer drug or attach infusion using NTT protecting **Key-parts**. Flush after administration of drug.



12 Dispose of sharps & equipment



13 Remove gloves followed by apron (if either worn) & then immediately ...



14 Disinfect hands with alcohol hand rub or soap & water*

Decontamination zone



15 Disinfect tray using a disinfectant wipe[§]



16 Disinfect hands with alcohol hand rub or soap & water*

[§]Some brands/ types of disinfectant wipes may require gloves to be worn when using. *After using disinfectant wipes without gloves, we recommend disinfecting hands with soap & water.

This guideline is for use on Aintree Critical Care Unit as part of the Gloves off campaign pilot.

July 2023

Apply the same risk assessment to tasks requiring ANTT



@ics_updates



@ics_updates



/intensivecaresociety



/intensive-care-society

Follow-up Results



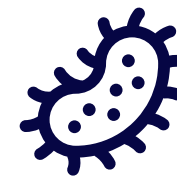
	Before at WUTH	After at WUTH
Gloves worn when not necessary	73%	53%



	Before at LUHFT	After at LUHFT
Gloves worn when not necessary	60.4%	33%



Hands not washed after gloves off	87%	26%
Cross contamination events	91%	58%



Hands not washed after gloves off	50%	18%
Cross contamination events	98%	77%



@ics_updates



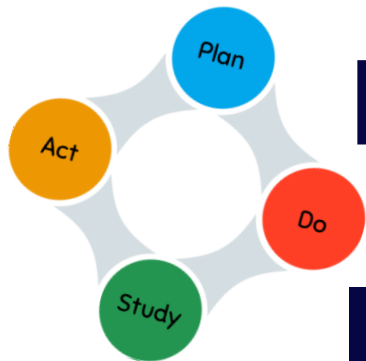
@ics_updates



/intensivecaresociety



/intensive-care-society



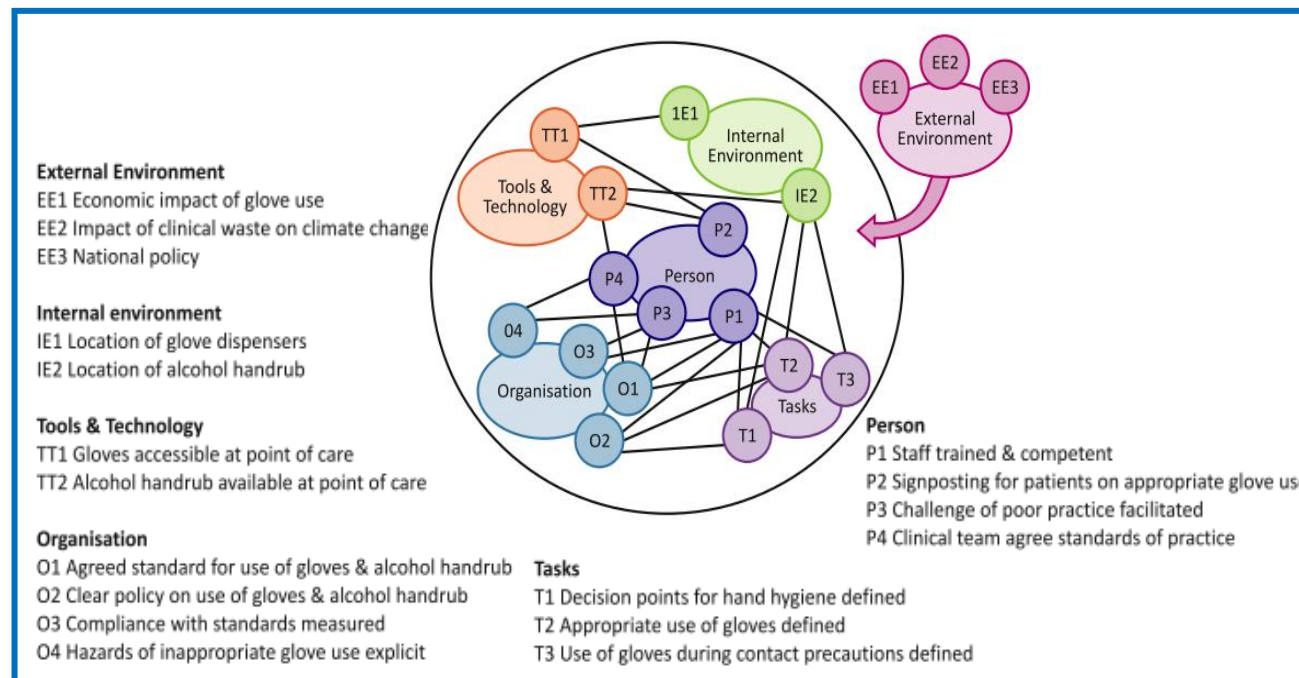
Next steps for Gloves Off

Further improvements

- Education
- ABHR, surface wipes
- Waste management
- Disposable aprons

Sustaining improvement

- Concerns & misconceptions
- Audit schedule
- University links
- Sustainable procurement



Wilson et al, 2017

Sustainability in governance

SPIN - CM
 Sustainable Practice and Innovation in ICU Network
 Find us on X @SusPIN_CM
 Supported by **AERSEY** Intensive Care Alliance
 Cheshire & Mersey
 Endorsed by **CHS** Cheshire & Mersey Adult Critical Care Network



@ics_updates



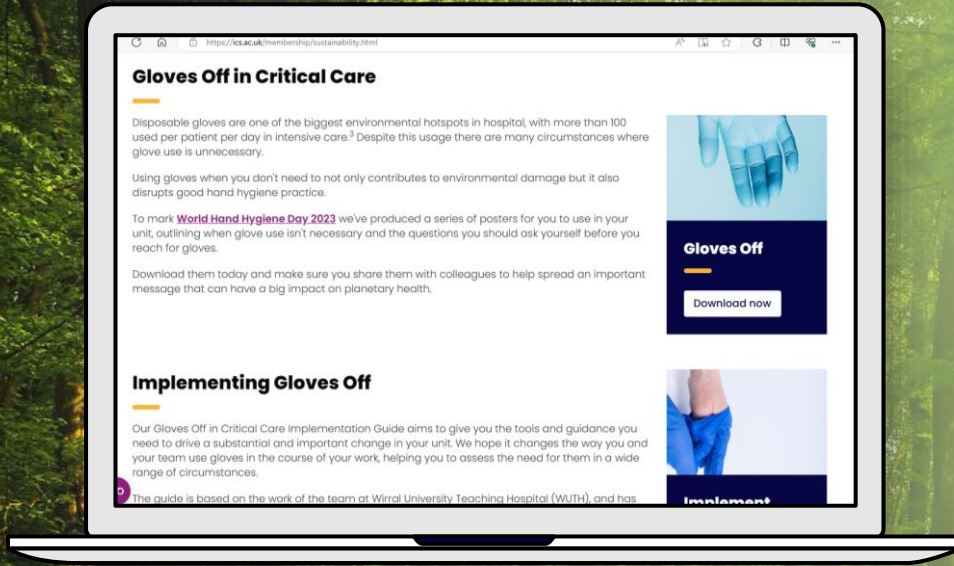
@ics_updates



/intensivecaresociety



/intensive-care-society



SPIN_CM
**Sustainable Practice &
Innovation in ICU Network –
Cheshire & Mersey**

**Email: spin@mersey.icu
X @SusPIN_CM**

Dr. Sam Clark
ST8 Intensive Care Medicine
Lead for PPE Work Stream
(ICS ESWG)

**Email: sam.clark6@nhs.net
X @clark_samr**



@ics_updates



@ics_updates



/intensivecaresociety



/intensive-care-society