

Glove Use in Care

What types of gloves are used in care?

Gloves used in care are defined as single use disposable gloves and are used during medical procedures or provision of care. These include:

- Examination/medical gloves (non-sterile, non-powdered):
 - Nitrile – safest practice
 - Latex - Under WH&S (2011) regulations should only be used when no safer alternative exists. Allergy risks must be identified, assessed and controlled
- Sterile surgical gloves with specific characteristics of thickness, elasticity, strength (latex, nitrile, polyisoprene, or neoprene)

Why are gloves worn?

Gloves are used to:

- Protect health care workers (HCWs) from exposure to blood, body substances, mucous membranes, and non-intact skin.
- Reduce the risk of spreading infectious organisms between individuals, equipment and the environment.
- Reduce the risk of HCW exposure to hazardous substances and chemicals
- Reduce the risk of contamination of sterile items during aseptic technique – sterile gloves

Facts about glove and protection

- Gloves can carry and spread infectious organisms.
- Gloves must NOT be cleaned with alcohol-based hand rub – they are single use
- Gloves do not guarantee full protection due to potential microscopic defects or contamination during removal.
- Gloves are not a substitute for hand hygiene. In some situations, hand hygiene alone may be safer or more appropriate.
- Hand hygiene must always be performed before putting on gloves and after taking them off.
- Gloves must be removed after each task or activity.
- Cuts or breaks on hands should be covered with an occlusive dressing before gloving.

When gloves are used in Care

Gloves ARE used when performing the following tasks

Exposure type	Example
Direct resident/individual	Choice: Nitrile or Latex: Note: those with latex allergies must always wear nitrile gloves

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	<ul style="list-style-type: none"> ➤ if the HCW or resident/individual skin is NOT intact (e.g. through eczema, or cracked or dry skin) ➤ During all activities that may involve exposure to blood and all other body substances (excluding sweat) including contact with mucous membranes and non-intact skin. ➤ When in contact with contaminated items (waste, soiled) body substances) linen, used bed pan/urinals) and surfaces ➤ When attending to reusable equipment and general spills <p>Choice: Nitrile gloves:</p> <ul style="list-style-type: none"> ➤ When providing care for all resident/individual requiring transmission precautions. ➤ When area/facility is in outbreak ➤ When handling potential or confirmed infectious equipment/items ➤ When attending infectious cleaning/spills <p>Choice: Nitrile gloves (colour purple recommended):</p> <ul style="list-style-type: none"> ➤ During activities that involve exposure to blood and body substances of resident/individual on cytotoxic medications ➤ When in contact with cytotoxic contaminated items (waste, soiled (contaminated with body substances) linen, used bed pan/urinals, incontinence aids, med cups/equipment) <p>Choice: Sterile gloves:</p> <ul style="list-style-type: none"> ➤ For medical procedures where an aseptic technique is required (e.g. sterile wound care and invasive device insertion).
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When gloves should not be used in care

Gloves are NOT used when performing the following tasks (except when required for transmission precautions or if blood or body substance exposure is anticipated):

Exposure type	Example
Direct resident/individual	<ul style="list-style-type: none"> ➤ Taking observations i.e. temperature, pulse, BP ➤ SC and IM injections ➤ Applying non-invasive ventilation or oxygen equipment ➤ Providing care (bathing, dressing, feeding, tidying/bed making) where there is no contact with blood or body substances ➤ Transporting a resident/individual

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Indirect resident/individual	<ul style="list-style-type: none">➤ Using the telephone➤ Completing documentationGiving oral medication (unless cytotoxic/harmful)➤ Making clean bed or tidying room➤ Distributing or collecting resident/individual meals or meal trays➤ Moving resident/individual furniture/items
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When to change gloves in care

- After contact with blood or another body substances mucous membranes or non-intact skin has ended.
- When moving from one body site to another site on the same resident/individual.
- After each resident/individual care task is completed
- If gloves are damaged
- When hands become sweaty, to reduce the risk of dermatitis.

Note: The same pair of gloves must NOT be worn for the care of more than one resident/individual or activity.

Overuse of gloves can:

- Increase HCW skin irritation or dermatitis
- Waste resources and raise costs
- Work against sustainability measures
- Result in missed hand hygiene opportunities

Hand hygiene is always required with glove use:

- Hand hygiene must be performed before and after wearing gloves.
- When indicated by the 5 Moments for Hand Hygiene.

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Glove examples:

		Nitrile examination gloves
		Latex examination gloves
		Sterile surgical gloves

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Technique for donning and removing non-sterile examination gloves

When the hand hygiene indication occurs before a contact requiring glove use, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water.

I. HOW TO DON GLOVES:



1. Take out a glove from its original box



2. Touch only a restricted surface of the glove corresponding to the wrist (at the top edge of the cuff)



3. Don the first glove



4. Take the second glove with the bare hand and touch only a restricted surface of glove corresponding to the wrist

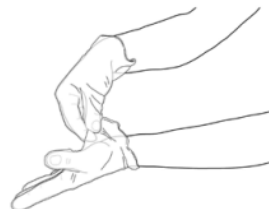


5. To avoid touching the skin of the forearm with the gloved hand, turn the external surface of the glove to be donned on the folded fingers of the gloved hand, thus permitting to glove the second hand

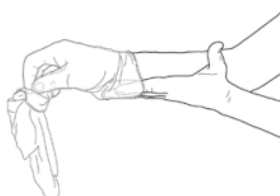


6. Once gloved, hands should not touch anything else that is not defined by indications and conditions for glove use

II. HOW TO REMOVE GLOVES:



1. Pinch one glove at the wrist level to remove it, without touching the skin of the forearm, and peel away from the hand, thus allowing the glove to turn inside out



2. Hold the removed glove in the gloved hand and slide the fingers of the ungloved hand inside between the glove and the wrist. Remove the second glove by rolling it down the hand and fold into the first glove



3. Discard the removed gloves

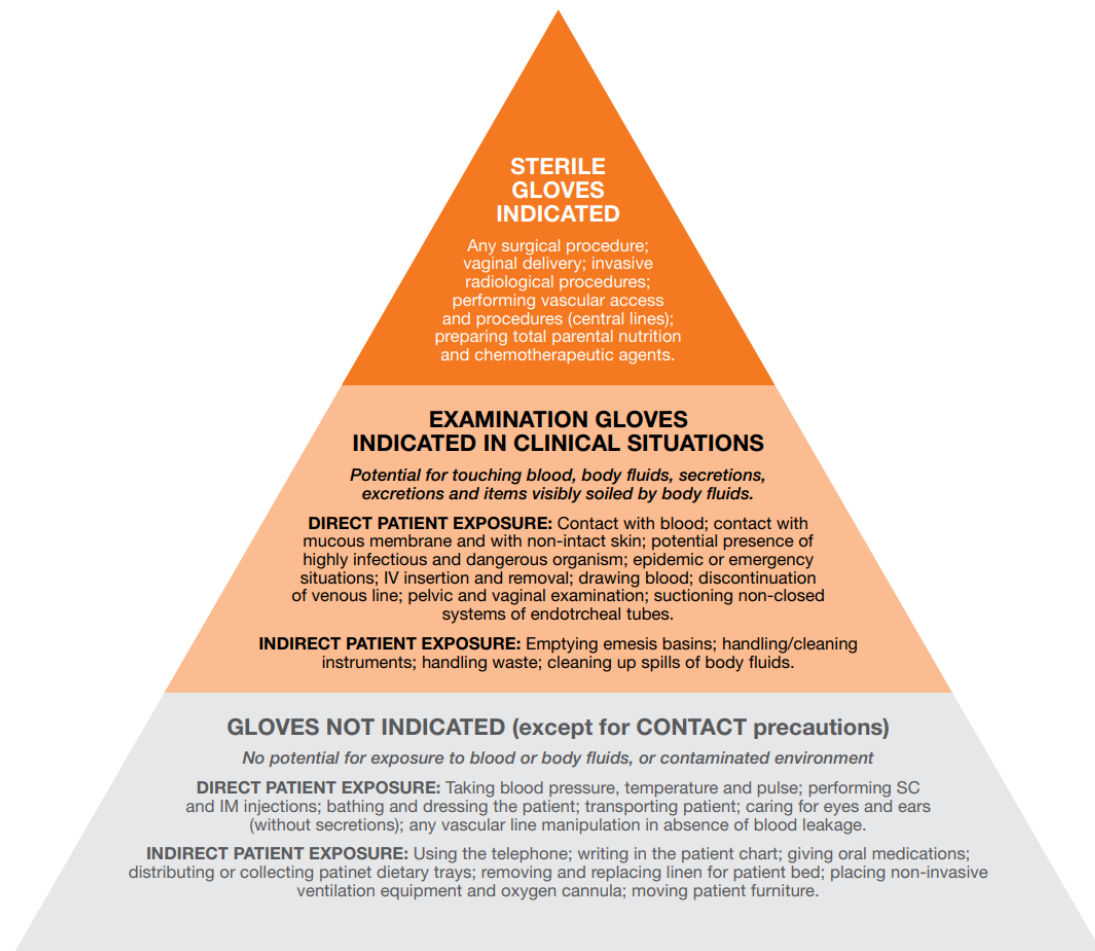
4. Then, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water

WHO. (n.d). Glove Use Information Leaflet. [https://cdn.who.int/media/docs/default-source/integrated-health-services-\(ihs\)/infection-prevention-and-control/hand-hygiene/tools/glove-use-information-leaflet.pdf?sfvrsn=13670aa_10](https://cdn.who.int/media/docs/default-source/integrated-health-services-(ihs)/infection-prevention-and-control/hand-hygiene/tools/glove-use-information-leaflet.pdf?sfvrsn=13670aa_10)

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The Glove Pyramid – to aid decision making on when to wear (and not wear) gloves

Gloves must be worn according to **STANDARD** and **CONTACT PRECAUTIONS**. The pyramid details some clinical examples in which gloves are not indicated, and others in which examination or sterile gloves are indicated. Hand hygiene should be performed when appropriate regardless of indications for glove use.



WHO. (n.d). Glove Use Information Leaflet. [https://cdn.who.int/media/docs/default-source/integrated-health-services-\(ihs\)/infection-prevention-and-control/hand-hygiene/tools/glove-use-information-leaflet.pdf?sfvrsn=13670aa_10](https://cdn.who.int/media/docs/default-source/integrated-health-services-(ihs)/infection-prevention-and-control/hand-hygiene/tools/glove-use-information-leaflet.pdf?sfvrsn=13670aa_10)

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