

GLOVES OFF!

Clean hands.
Safe for all

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GLOVES and Sustainability



Internationally between 1 – 5% of carbon emissions are attributed to healthcare

The carbon footprint of a single glove is 34g of CO₂ emissions

A single ward at the JHH utilises 30 000 non-sterile gloves a month, 360 000 a year

This is equivalent to driving around Australia six times



GLOVES and Infection Prevention and Control



- Gloves do not provide complete protection against hand contamination
- Glove use is widely accepted to be associated with poor hand hygiene compliance

Studies show

- hand hygiene compliance as low as 41% when gloves are utilised
- 49% of healthcare workers do not perform hand hygiene when removing gloves
- 37% of glove usage leads to cross contamination with healthcare workers touching multiple surfaces whilst wearing the same gloves.

Project Aim

01



Improve hand
hygiene compliance

02



Improve healthcare
worker risk
assessment
confidence and
understanding

03



Reduce un-
necessary use of
non-sterile gloves

04



Design and deliver a
quality improvement
package which can
be used by other
wards and across
HNE

GLOVES OFF, *clean hands, safe for all*

Quality improvement program



PILOT WARDS H3 AND J3 ACUTE SURGICAL WARDS JOHN HUNTER HOSPITAL

BASELINE MEASURES PRE EDUCATION AUDITS, DATA COLLECTION AND STAFF SURVEY

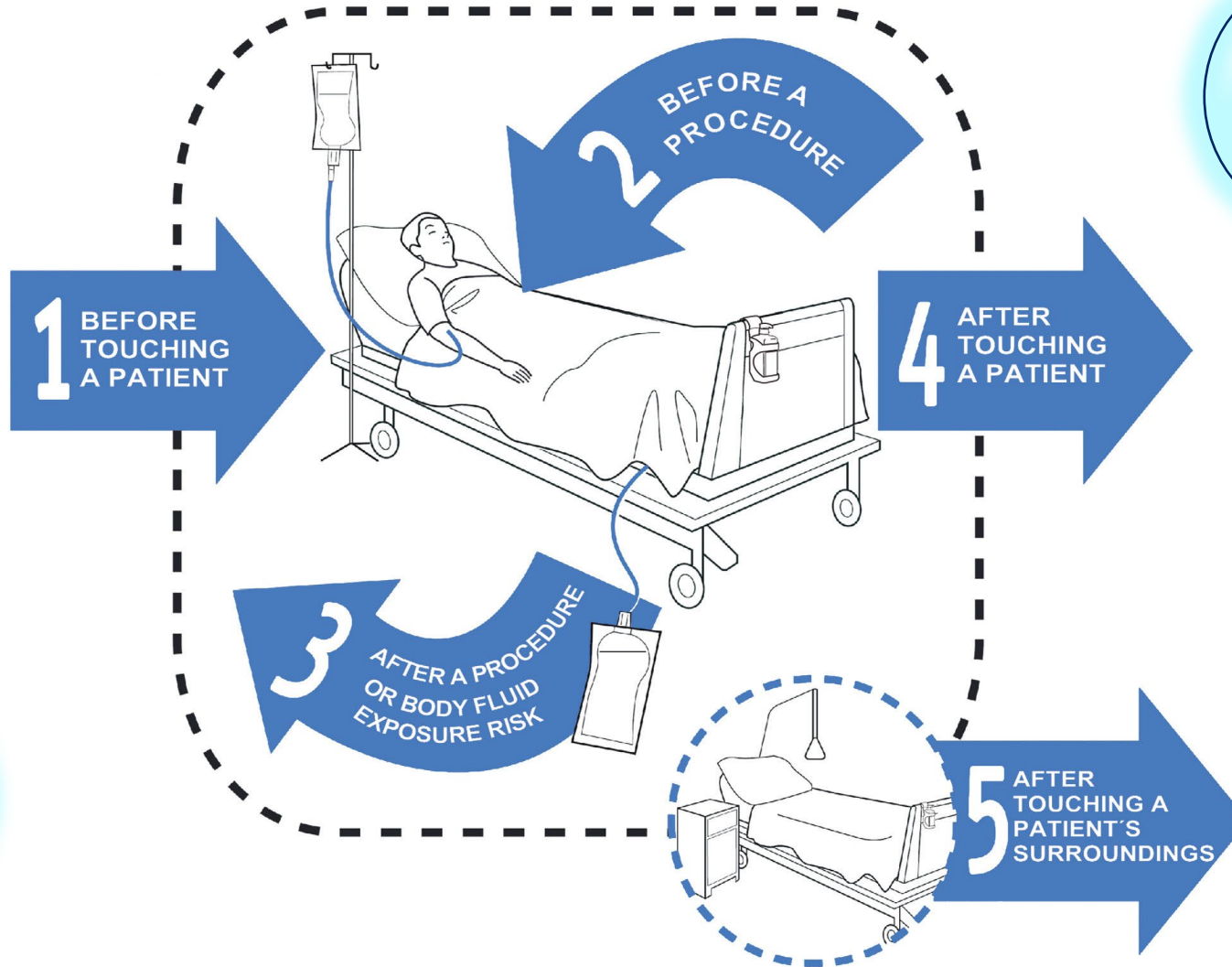
EDUCATION

POST EDUCATION AUDIT

EVALUATION

DEVELOP ROADMAP FOR BROADER JHH ROLL OUT AND DISTRICT PARTICIPATION

5 moments of hand hygiene



Pilot ward pre intervention audits

The two pilot wards were audited for glove usage during the month of June

Of the
239
moments audited

60%
of observed
glove use was
not required

75%
of missed hand
hygiene moments
were associated with
unnecessary glove
use

When are non-sterile gloves required?



Anticipating direct contact with non-intact skin, or mucous membrane



Anticipating direct contact with blood, body substances, secretions or excretions



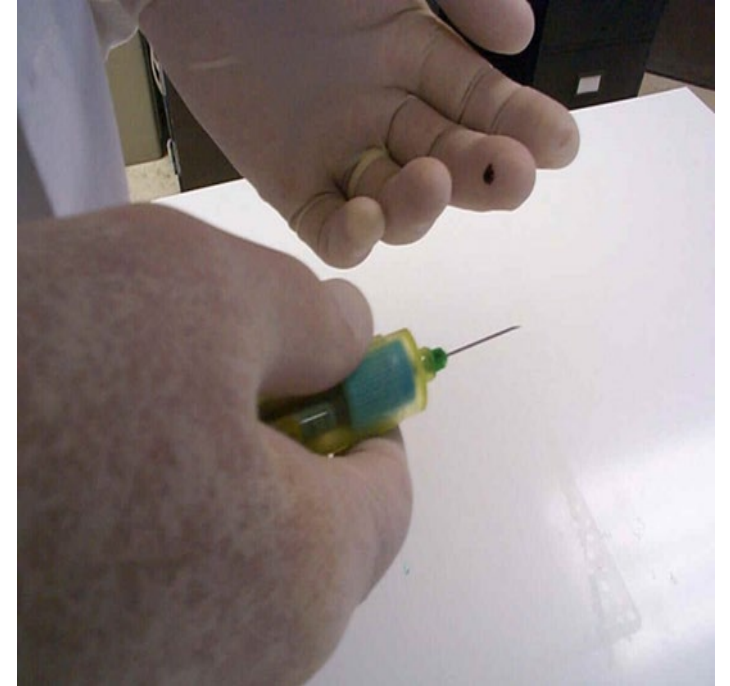
Handling or touching visibly or potentially contaminated patient-care equipment, and environmental surfaces



Physical contact with clinical waste, eg dressings or contaminated linen / clothing



Blood glucose and haemoglobin monitoring



When are non-sterile gloves required?



Intravenous cannula insertion



Performing an invasive procedure, venepuncture or a finger or heel prick.



Urinary catheter care



Routine intra-oral dental procedures



Assisting with toileting



Handling cytotoxic medications (purple gloves)

When are non-sterile Gloves not needed?



Direct physical contact with intact skin



Activities of daily living, eg washing



Routine observations (eg blood pressure measurement)



Performing subcutaneous, intramuscular, or intradermal injections



Accessing cannula / IV line using aseptic non-touch technique

When should gloves be changed ?



Between episodes of care for different patients

During care of the same patient after each episode of individual care if moving from a contaminated body site to another site. Work from clean to dirty site.

If gloves become torn or punctured



Questions?

References



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