Correct use of gloves and how to protect the skin

The latest guidance and resources from the RCN on appropriate glove use

Essential information
Hand hygiene is an essential part of safe nursing care. Wearing gloves is part of good hand hygiene, but inappropriate use of gloves can lead to work-related contact dermatitis on nurses’ hands.

Damaged or non-intact skin puts the patient and the health worker at risk because it prevents effective hand hygiene. Approximately 1,000 healthcare workers develop work-related contact dermatitis every year in England, Scotland and Wales, according to the Health and Safety Executive.

What’s new
The RCN is highlighting correct use of gloves and how to protect the skin, to help nurses avoid painfully sore skin on their hands. The college has produced a number of publications, including a leaflet and a poster, released to coincide with an approved hand cream for use at work, either an individual supply in a tube or in a pump dispenser in the clinical environment.

‘Keep an eye out for the early warning signs of dryness, redness, itchiness and cracks appearing and seek advice from your occupational health provider or GP if you notice symptoms.’

Kim Sunley, RCN national officer for health and safety, working environment

‘Nurses top the list of professionals who suffer from work-related dermatitis of the hands.

‘The condition often leads to nursing staff being unable to work in a clinical area because cracked and weeping skin is an infection risk to both patients and themselves.

‘Nurses need to protect their hands in and out of work. The importance of using moisturisers cannot be overstated, so nurses should moisturise as often as they can when off work, wear warm gloves if outside in the cold and household gloves when using cleaning products at home.

‘When at work follow correct hand hygiene procedures and moisturise as often as possible, ideally between hand washes, when going for a break and at the end of your shift.

‘Employers should provide an approved hand cream for use at work, either an individual supply in a tube or in a pump dispenser in the clinical environment.

‘Keep an eye out for the early warning signs of dryness, redness, itchiness and cracks appearing and seek advice from your occupational health provider or GP if you notice symptoms.’
with its glove awareness week earlier this year.

Work-related contact dermatitis can be caused by frequent exposure to water, cleaning agents and overuse or underuse of gloves.

Inappropriate glove use, such as changing gloves insufficiently frequently, can also prevent effective hand hygiene and can put patients at risk of infection.

The RCN says gloves should be used when a nurse is in contact with blood or other fluid, non-intact skin or mucous membranes.

Gloves should also be worn when using substances that are chemical hazards, such as disinfectants, preserving agents or cytotoxic drugs.

The gloves should only be put on when the hands are thoroughly dry, after washing or using alcohol rub. They should be removed when the nurse is no longer in contact with blood or body fluids, non-intact skin, mucous membranes or hazardous chemicals, or as soon as they are suspected of being damaged.

Nurses should ensure they have good hand hygiene and drying techniques, the RCN says. It recommends avoiding direct contact between unprotected hands and hazardous substances, and regularly applying hand moisturiser.

Nurses should check regularly for the first signs of itchy, dry or red skin.

Implications for nurses

» Gloves are not a substitute for hand hygiene
» Always wet your hands thoroughly before applying soap
» Wash hands with soap and water when visibly dirty or obviously soiled with blood or other body fluids
» Wash hands with soap and water where alcohol hand rubs are known to be less effective, such as when caring for patients with known or suspected Clostridium difficile or norovirus infections.

» Wash hands with soap and water if alcohol-based hand rub is unavailable. Hand wipes may be helpful in community settings
» Use an alcohol-based hand rub as the preferred means of routine hand hygiene in all other clinical situations

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