



HOMES AND SENIORS SERVICES

POLICY & PROCEDURE NUMBER: 2.19

DEPARTMENT: *Infection Control*

SUBJECT: PPE - *Gloves*

APPROVAL DATE: April 2004

REVISION DATE: April 2007

REVISION DATE: March 2016; Dec. 2020, November 2022

REVIEW DATE: March 2017; Nov 2018; Dec 2019

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PURPOSE/POLICY:

A point of care risk assessment must be completed prior to contact with any resident and resident environment.

Gloves must be worn when it is anticipated that the hands will be in contact with mucous membranes, non-intact skin, tissue, blood, body fluids, secretions, excretions, or equipment and environmental surfaces contaminated with the above.

Gloves are not required for routine health care activities in which contact is limited to intact skin of the resident, and no assessed risk (e.g. taking blood pressure, pulse, bathing and dressing the resident). Compliance with hand hygiene should always be the first consideration.

Indiscriminate or improper gloves use has been linked to the transmission of pathogens. Gloves are task specific and single use for the task. Re-use of gloves has been associated with transmission of methicillin-resistant *Staphylococcus aureus* (MRSA) and Gram-negative bacilli.

PROCEDURE:

Appropriate Glove Use:

- Select glove appropriate to task. It is important to assess and select the best glove for a given task. Selection of gloves should be based on a risk assessment of: the type of setting; the task that is to be performed (e.g. invasive or non-invasive); the likelihood of exposure to body substances; cytotoxic exposure; sterile vs nonsterile procedure, the anticipated length of use; and the amount of stress on the glove.
- Wear the correct size of gloves.
- Gloves should be put on immediately before the activity for which they are indicated.
- Clean hands before putting on gloves.
- Gloves must be removed and discarded immediately after the activity for which they were used.
- Hand hygiene must be performed immediately after glove removal.
- Change or remove gloves after touching contaminated site and before touching a clean site or the environment
- Do not wash gloves or use alcohol-based hand rub on them.
- Gloves should be removed after use and should never be worn between residents.
- Do not double glove for routine care.



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Gloves and Hand Hygiene:

Gloves are not completely free of leaks (micro-tears can be present) and hands may become contaminated when removing gloves, hands must be cleaned before putting on gloves, after glove removal Gloves must be removed immediately and discarded into a waste receptacle after the activity for which they were used and before exiting a resident environment.

Change gloves and perform hand hygiene between procedures on the same resident.

Wearing gloves does not replace the need to perform proper hand hygiene.

Gloves may be adversely affected by petroleum-based hand lotions or creams.

To reduce hand irritation related to gloves:

- Wear gloves for as short a time as possible
- Ensure hands are ***clean and dry*** before putting on gloves
- Ensure gloves are intact and clean and dry inside
- Wear the correct size of gloves

References:

Provincial Infectious Diseases Advisory Committee (PIDAC) Routine Practices and Additional Precautions in All Health Care Settings, 3rd edition, Ministry of Health and Long-Term Care, November 2012

Ontario Agency for Health Protection and Promotion (Public Health Ontario). Recommendations for the prevention, detection and management of occupational dermatitis in health care settings. Toronto, ON: Queen's Printer for Ontario; 2019.