Linen & Laundry Policy
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<th>October 2014</th>
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</tr>
<tr>
<td>Author:</td>
<td>Karen Robertson, Head of Facilities</td>
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<td>Ian Armstrong, Facilities Manager</td>
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<td>Directorate:</td>
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**Approval Route**

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<tr>
<td>Environment Group</td>
<td>26 November 2014</td>
</tr>
<tr>
<td>Infection Control Committee</td>
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**Links or overlaps with other policies:**

**Amendment History**

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1 Introduction

This document sets out South Devon Healthcare NHS Foundation Trust and Torbay and Southern Devon Health and Care Trust system for the management of Laundry and Linen. It provides a robust framework to ensure a consistent approach across the whole organisation and covers the general principles of the handling and usage of linen together with a guide to when items of linen should be sent for laundering.

2 Purpose

The purpose of this document is to ensure the linen and laundry service operates efficiently and effectively to reduce the risk of hospital acquired infections, to maintain patient and staff comfort and to manage the service within limited resources.

The fundamental requirements of this policy for the supply of a linen and laundry service are to comply with Department of Health Guidance CfPP 01-04, published in July 2014, which amalgamated earlier versions of laundry guidance and superseded HSG(95) 18

Implementation of this policy will ensure that:

3 Responsibilities

3.1 Head of Facilities

Overall compliance responsibility

3.2 Facilities Manager

To attend monthly/quarterly meetings with contractors and highlight any performance issues monitor compliance against this policy.

3.3 Role of Trust Staff

All staff are responsible for ‘bagging’ and storing used linen in the correct manner in line with this policy.

3.2 Linen Services Staff

The Linen Services staff are responsible for providing clean linen to all wards and departments

3.3 Porters

The Porters are responsible for collecting used linen from all areas, as long as it has been bagged and closed correctly.

3.4 Facilities Management Team, Infection Control Department, Matrons

Line managers of linen staff, facilities staff, porters and nursing staff (i.e. all staff who ‘bag’ used linen) are responsible for ensuring their staff are aware of and compliant with the Laundry Policy on appointment to the Trust.
4 General Principles – all types of linen

All used linen must be placed in an appropriate colour coded bag according to the colour coding chart displayed in every sluice, (please refer to appendix A)

Used linen must always be bagged at the bedside never carried through the ward to the sluice.

Skip bags must never be more than 2/3 full.

Used linen handling must conform to the specifications of CfPP 01-04 as outlined in this policy.

Staff must ensure they wear personal protective equipment when dealing with used linen.

Staff must always wash their hands after dealing with used linen and/ or after removing personal protective equipment.

Staff must ensure that items such as needles, syringes, instruments and other foreign objects are not placed in laundry bags.

No purchase of washing machines will take place without formal agreement by the Infection Control Team and Facilities Management Team

Only linen items that withstand the intensive laundry process may be purchased

All dirty linen must be sent to the external contractor for laundering.

All Trust owned items of linen, including curtains, must be clearly labelled.

Breaches to this policy must be recorded and communicated via the Incident Reporting process

5 Normal/ Used Linen

Normal/ used linen must be placed in a white bag and secured. The bag must not be filled to more than 2/3 full, (please see appendix A).

Supplies of bags will be available in all areas where linen is used.

Plastic aprons must be worn whilst handling normal/ used linen.

Hands must be washed after disposing of linen and after removing apron.

6 Fouled/ Infected Linen

This is linen that has either been contaminated by blood or any other body fluids or linen from suspected or known infectious patients. If unsure, please seek advice from Infection Control.

Fouled/ infected linen must be placed in a water soluble bag, tied and placed in a red linen bag and secured. The bag must not be filled to more than 2/3 full, (please see appendix A).

Supplies of both water soluble bags and red bags will be available in all areas where linen is used.
Plastic aprons and gloves must be worn whilst handling fouled/infected linen.

Hands must be washed after disposing of linen and after removing aprons and gloves.

7 Theatre Linen

Theatre drapes and gowns must be placed in a green skip bag and secured. The bag must not be filled to more than 2/3 full, (please see appendix B).

Pillowcases, sheets, blankets, canvasses and scrub suits must be placed in white skip bags and secured. The bag must not be more than 2/3rds full, (please see appendix B).

Fouled/infected pillowcases, sheets, blankets and scrub suits must be placed in a water soluble bag, tied and placed in a red linen skip and secured. The bag must not be filled to more than 2/3 full, (please see appendix B).

Supplies of water soluble, green, red and white bags will be available in all Theatres.

Plastic aprons and gloves must be worn whilst handling Theatre linen.

Hands must be washed after disposing of linen and after removing gloves and aprons.

8 Patients’ Personal Clothing

The Trust does not offer a laundry service for patients’ personal clothing. All staff responsible for admitting patients must emphasise this, including to patients admitted from residential homes.

Where relatives/friends or carers are laundering soiled items of patient clothing, the items should be placed in a water soluble bag, tied and placed into another bag. It is very important that relatives are advised that the water soluble bag and clothing should be placed in the washing machine intact.

Aprons must be worn whilst handling normal/used patients’ clothing and apron and gloves must be worn whilst handling fouled/infected patients’ clothing.

Hands must be washed after disposing of patients’ clothing and after removing aprons and gloves.

9 Return to Sender (RTS)

All RTS items are owned by the Trust and are not part of the general linen hire pool. Therefore, failure to identify these items before use may result in a delay or possible loss of items to your ward or department.

All Trust owned items to be sent to the external contractor for laundering must be labelled prior to use.

Normal/used items, except curtains, will be placed in a blue bag and secured. The bag must not be more than 2/3 full, (please see appendix A).

Fouled/infected items will be placed in a water soluble bag, tied and placed inside a blue linen bag and secured. The bag should not be filled to more than 2/3 full.
Complete a RTS docket detailing information of items in the bag together with the amount, retain 2 copies and place the rest of the docket inside the document wallet. Remove all of the backing from the document wallet and stick to bag. The bag must not be more than 2/3 full, (please see appendix C).

Curtains, normal/used must be placed in a brown linen bag and secured. The bag must not be filled to more than 2/3 full, (please see appendix A)

Curtains that are fouled/infected must be placed in a water soluble bag, tied and placed inside a brown linen bag and secured. The bag should not be more than 2/3 full.

A docket must also be completed for curtains as detailed above.

10 **Rejected Linen**

Linen that is not suitable for patient use, i.e. damaged, torn or stained, must be placed in clear bags and secured, (please see appendix A).

Supplies of clear skip bags will be available in all areas where linen is used.

11 **Uniforms**

There is a limited laundry service for staff uniforms and the Trusts Uniform and Dress Code Policy recommends staff launder their uniform at home and states:

*The following guidance should be followed when washing uniforms in the home environment:*

*Soiled uniforms should be taken home in plastic bags and washed in an automatic washing machine within 1-2 days of wearing.*

*Wash uniforms separately from other items at a recommended temperature of at least 60°C.*

*Where possible they should then be dried quickly, tumble dried and ironed. They should not be bleached.*

If Staff uniforms are to be sent to the external contractor for laundering, the uniforms must be labelled in the first instance. Any unmarked/poorly marked uniforms are unlikely to be returned by the laundry contractor.

Normal/used uniforms must be placed in a blue bag and secured. The bag must not be filled to more than 2/3 full, (please see appendix A).

Fouled/infected uniforms will be placed in a water soluble bag, tied and placed inside a blue linen bag and secured. The bag should not be filled to more than 2/3 full.

Complete a docket (as above) detailing information of items in bag together with the amount, retain 1 copy and place the rest of the docket inside the document wallet. Remove all of the backing from the document wallet and stick to the bag. The bag must not be filled to more than 2/3 full, (please see appendix C).

Users of pooled scrub suits provided by the laundry contractor follow steps 5 and 6.
Uniforms, other than scrub suits provided by the laundry contractor, which have been visibly contaminated with any amount of blood or other body fluids must be changed immediately. Procedure for fouled/infected uniforms (above) must be followed.

12 Oven Gloves & Cloths

Facilities staff are responsible for bagging oven gloves and cloths.

13 Linen Usage

The following section provides guidance for staff and indicates when linen should be sent for washing.

13.1 Sheets/ Pillowcases/ Blankets

The above items must be changed when:

- A new patient is placed in a bed
- The linen is soiled/wet
- Every day, i.e. the used top sheet is transferred to the mattress, on the following day the mattress sheet will be bagged (as per appendix A); therefore, no sheet will be used for more than 2 days.

13.2 Towels

The above item must be changed:

- Daily if used
- If soiled/wet

13.3 Patient Gowns

The above item must be changed:

- After each patient
- If soiled/wet

13.4 Slide Sheets

The above item must be changed:

- Between new patients
- When soiled/wet

13.5 Patient Hoist Slings (send to laundry as RTS item as per appendix c)

The above item must be changed:

- After patient use
• When soiled/wet

13.6 Canvasses

The above item must be changed:
• After each patient

13.7 Scrub Suits

The above item must be changed:
• Daily
• When soiled/wet

14 Curtains

For all patient areas curtains (either fabric or disposable) used within bays and other areas, are to be changed by recommended frequency basis or on obvious contamination or when an outbreak or terminal clean, has taken place.

Shower curtains must be laundered monthly or on obvious contamination. If disposable shower curtains are used then these are to be changed monthly or when soiled/infected clean has taken place.

15 Items unsuitable for laundering

Pillows are made with a washable cover and should be wiped clean with a disposable detergent wipe between each patient use and/or if soiled within inpatient areas. For out-patient areas the plastic pillow case is covered by paper roll between patients, the pillow should be cleaned at the beginning and end of the session.
Any pillows that are contaminated/damaged by body fluids cannot be washed. Dispose of as appropriate waste.

DO NOT SEND PILLOWS TO THE LAUNDRY

16 Storage areas and Handling clean linen

• Clean linen must be stored in a designated area, e.g. linen cupboard. It must not be stored in the clinical area if possible, on the floor, in bath/wet rooms or on trolleys which go into dirty areas e.g. the sluice, due to the risk of contamination from skin scales or bacterial spores e.g. Clostridium difficile. It must be protected from dirt, dust and water contamination
• Storage areas should be dedicated areas designed for the purpose and not used for other activities.
• Appropriately designed to prevent damage to linen and to allow for rotation of stocks.
• Equipped with shelving that can be easily cleaned and allow free movement of air around the stored linen above floor level away from direct light and water in a secure dry environment.
• Linen stocks should be appropriate to the required level, and removed temporarily to facilitate through cleaning of the storage area and shelving locally agreed cleaning frequencies.

17  Transport of Linen
• Any trolley used to transport linen must be clean and free of dust and dirt, covered with a washable or disposable cover. If trolleys are enclosed with lockable doors, covers are not required.
• Bags should not be overfilled, be of an acceptable weight and must be securely fastened before being sent to the laundry. Care should be taken to prevent linen or foul seepage (body fluids or blood) escaping from laundry bags and contaminating other items or staff.
• All reusable transport containers, cages and the inside hold area of transport vehicles must be decontaminated on a daily basis and between uses if used to transport clean linen after transporting used or infectious linen.
• There must be a physical barrier between clean and used or infectious linen when carried on a vehicle at the same time. No bag of linen that is not securely fastened should be placed in a vehicle.
• Cages for clean linen in transit from the laundry contractor should be covered with washable or disposable covers.

18  Mop laundering on site
There may be a requirement for a laundering mop on site and the following procedure must be followed:
• machines capable of thermal disinfection, (the disinfection cycle shall be considered satisfactory when the water temperature has been raised to 65°C and held at this temperature for a period of not less than 10 minutes or at a temperature of 71°C for a period of not less than 3 minutes. During the period of thermal disinfection of the rinse stages, it is essential that the machine cage/drum rotates to ensure that all surfaces are in contact with high temperature liquids. The disinfection process should be controlled by a timer.
• Laundry facilities should be clearly separate from clinical treatment and publicly accessible areas. This implies the use of a separate facility/room or rooms for the accommodation of laundering facilities. In these facilities the room(s) should be used for this purpose only and access should accordingly be restricted to those staff performing laundering duties.
• Consideration of other methods to include contract Mop hire.
19 Failure of Normal Service

Please refer to appendix D for contingency plans for:

- Failure of laundry facility
- Adverse Weather
- Major Incident

20 Monitoring, Audit and Review Procedures

The service provided will be in accordance with the standards specified and will meet the KPI’s set out in the contract. To be monitored by named staff using the Key performance indicator as Appendix 6.

21 Appendices

Appendix 1 – Categorisation and segregation of linen
Appendix 2 – Berendsen Soiled Linen Bagging Policy
Appendix 3 – Berendsen RTS & Curtain Bagging Method
Appendix 4 – Scrubs Clothing
Appendix 5 – Laundry Monitoring Template
Appendix 6 – Escalation numbers for Berendsen
**Appendix 1 – Categorisation and segregation of linen**

It is the responsibility of the person disposing of the linen to ensure that it is segregated appropriately. All linen can be categorised into the following three groups:

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Clean/ Unused Linen</strong></td>
<td>Any linen that has not been used since it was last laundered. Clean linen must be in a good state of repair, as tearing or roughness can damage the patient’s skin. The condition of linen in use should be monitored by the laundry contractor and by All staff. If linen is taken into an isolation room and not used, the linen must be treated as infected and laundered prior to further use as it may be potentially contaminated by the environment.</td>
</tr>
<tr>
<td><strong>Soiled/Infected Linen</strong></td>
<td>This is any used linen which is soiled with blood or any other body fluid; and all linen used by a patient even with a known infection. All soiled / infected linen must be placed in a soluble alginate (RED) bag, inside the correct laundry bag. The soluble bag must be placed directly into the washing machine to minimise contact and prevent transmission of infection to laundry staff or contamination of the environment. The outer plastic bag should be disposed of as clinical waste</td>
</tr>
<tr>
<td><strong>Used Linen</strong></td>
<td>All used linen other than that listed above falls within this category must be placed within a white plastic laundry bag. Other than Curtains RTS (return to sender, Trust own items) and Rejected items. Bags containing used laundry must be stored in a secure area, away from public access whilst awaiting collection. NB: Manual soaking/washing of soiled items must never be carried out. A sluice cycle or cold pre-wash must be used for all soiled items.</td>
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Appendix 2 – Berendsen Soiled Linen Bagging Policy

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<th>Soiled Linen</th>
<th>Rejected Linen Only</th>
<th>Curtains</th>
<th>RTS</th>
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<td>Used bed linen/laundry must be placed in a white laundry bag.</td>
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<tr>
<td>White Soiled Bag</td>
<td>Pink Bag</td>
<td>Brown Bag</td>
<td>Blue Bag</td>
</tr>
<tr>
<td>[Diagram: Sunlight]</td>
<td>[Diagram: Sunlight]</td>
<td>[Diagram: Sunlight]</td>
<td>[Diagram: Sunlight]</td>
</tr>
</tbody>
</table>

Used soiled bed linen / laundry (bodily fluids: vomit, faeces, Blood, urine) must be placed in a Soluble Inner inside a WHITE BAG.

ALL laundry from infectious areas must be placed in Soluble Inner bag then inside their relevant colour bags.

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<th>Infected Curtains</th>
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<td>White Bag &amp; Soluble Inner</td>
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<td>[Diagram: Sunlight]</td>
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This bagging policy immediately supersedes all previous linen bagging policies in adherence with DoH document CFPP01:04.
Appendix 3 – Berendsen RTS & Curtain Bagging Method

R.T.S. (Return To Sender) Bagging Method to include Curtains

1.) Please complete the 3 page docket and tear off the bottom blue copy for your own safekeeping. Please make sure the docket and the ITEMS being sent are clearly marked with the Hospital name and Ward.

2.) Tear off the White copy and place inside a Blue/Brown soiled linen bag.

3.) Put the remaining Pink copy inside the Document Wallet, Peel the back off the sticky wallet and stick to the side of the soiled Bag.

RTS Docket

Document Wallet

Blue RTS Soiled Bag.

Brown Curtain Bag

Red soluble bag for infection contamination.
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<th>DESCRIPTION</th>
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<tr>
<td>Endoscopy</td>
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<tr>
<td>Infection / closed wards if consider to</td>
<td>RASPBERRY</td>
<td>An Agreed level of stock should be held onsite in various sizes. These are to be kept in clear bags tied and dated for stock rotation identification</td>
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<tr>
<td>be in the areas for more than one hour</td>
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<tr>
<td>to either clean / work related.</td>
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<tr>
<td>Note: this colour is not to be used in</td>
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<td>other areas due to the relationship to</td>
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<td>reduce cross contamination.</td>
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<tr>
<td>General use not to replace uniform.</td>
<td>BLUE</td>
<td>An Agreed stock should be held onsite to cover unforeseen circumstances. These are to be kept in clear bags tied and dated for stock rotation identification</td>
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## Appendix 5 – Laundry Monitoring Template

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**TOTAL**                  | 0 0 0 0 0 0 0 0 0

**PLEASE FAX REJECT FORM TO 01626 882 993**
Operational

1) Caroline Furzeland – Service Clerk 07:30 hrs - 16:00 hrs Mon-Fri
T: 01626 882 992
F: 01626 882 993
E: newtonabbot.service@berendsen.co.uk

2) Sasha Dench – Admin & Internal Service Manager 07:30 hrs - 16:00 hrs Mon-Fri
T: 01626 882 992
M: 07920 568 637
F: 01626 882 993
E: sasha.dench@berendsen.co.uk

3) Dan Tout – Relationship Manager (Anytime if problems arise)
T: 01626 882 992
M: 07967 623 498
F: 01626 882 993
E: Dan.Tout@berendsen.co.uk

4) Yvonne Sheldon – Lead Production Manager
T: 01626 882 992
M: 07500794659
F: 01626 882 993
E: yvonne.sheldon@berendsen.co.uk

5) Craig Jamieson – General Manager
M: 07971 116612
E: craig.jamieson@berendsen.co.uk

Transport

1) Simon Denison – Transport Manager (Anytime if problems arise)
M: 07584 680358
F: 01626 882993
E: simon.denison@berendsen.co.uk

2) Grant Fuller – Transport Supervisor
M: 07584 680357
F: 01626 882 993
E: simon.denison@berendsen.co.uk

Invoicing/Credit Notes

1) Sasha Dench – Admin & Internal Service Manager 07:30 hrs - 16:00 hrs Mon-Fri
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M: 07920 568 637
F: 01626 882993
E: sasha.dench@berendsen.co.uk