Notice to staff using a paper copy of this guidance

The policies and procedures page of Intranet holds the most recent version of this guidance. Staff must ensure they are using the most recent guidance.

Author: Acting Manager Infection Prevention & Control Team

Asset Number: 201
## Document Purpose and Description

The purpose of the policy is to inform staff regarding safe handling and management of linen.

## Author

Acting Manager Infection Prevention & Control Team

## Ratification Date and Group


## Publication Date

10th July 2014

## Review Date and Frequency of Review

2 years after publication, or earlier if there is a change in evidence.

## Disposal Date

The Policy Ratification Group will retain an e-signed copy for the archive in accordance with the Retention and Disposal Schedule, all copies must be destroyed when replaced by a new version or withdrawn from circulation.

## Job Title of Person Responsible for Review

Acting Manager Infection Prevention & Control Team

## Target Audience

All staff who work in Livewell SOuthwest in clinical areas

## Circulation List

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Please note if this document is needed in other formats or languages please ask the document author to arrange this.

## Consultation Process

LSW Infection prevention & Control Committee

## Equality Analysis Checklist completed

Yes

## References/Source

NHS Executive. Hospital Laundry Arrangement for used and Infected Linen-NHS Executive HSG (95) 18 (April 1995)

Policy for the Management of the Infected Patient in Hospital Disinfection and Cleaning Policy

## Associated Documentation

NHSLA1.2.8&2.2.8

Standards for Better Health C4(a) Hygiene Code
<table>
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Linen Policy

1 Introduction

1.1 This policy provides guidance in correct linen handling and management so that the risk of transmission of infection is minimised.

2 Purpose

This policy details a linen-handling system designed to:

1. Reduce the risk of hospital-acquired infection due to the handling of contaminated linen.
2. Reduce the risk of inoculation injuries associated with the handling of linen.
3. Comply with current recommendations for the handling of hospital linen (1).
4. Provide guidance on the handling of patients personal laundry in circumstances where:
   a. There is no family/carer support network available.
   b. The patient’s family/carer is unable to assist with personal laundry requirements.
   c. Service users manage their own laundry.

3 Duties and Responsibilities

3.1 The Chief Executive is ultimately responsible for infection prevention and control and the content of all Policies and their implementation. The Chief Executive delegates the day to day responsibility of implementation of the policies to the Director of Infection Prevention and Control (DIPC) and the Infection Prevention and Control Team (IPCT).

3.2 The Directors are responsible for identifying, producing and implementing Livewell SOuthwest Policies relevant to their area.

3.3 The Locality Managers will support and enable operational Clinical Leads and Managers to fulfil their responsibilities and ensure the effective implementation of this Policy within their speciality.

3.4 The Modern Matron/Clinical Lead is responsible for ensuring that the development of local procedures / documentation doesn’t duplicate work and that implementation is achievable.

3.5 All staff, both clinical and non clinical have a responsibility for ensuring they have read, understood and adhere to local Protocols and Policies.

3.6 Infection Prevention and Control Team are responsible for ensuring that latest guidance is available and included in training programmes/audits.

3.7 Ward managers/team leaders are responsible for ensuring that good practice
4 **Handling of linen**

4.1 **Colour Code Classification for Laundry**

<table>
<thead>
<tr>
<th>Colour</th>
<th>Description</th>
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<tbody>
<tr>
<td>WHITE</td>
<td>Used Linen</td>
</tr>
<tr>
<td>RED</td>
<td>Infected, Soiled or Fouled</td>
</tr>
<tr>
<td>GREEN</td>
<td>Theatre Linen in some settings</td>
</tr>
<tr>
<td>BLUE</td>
<td>Curtains</td>
</tr>
<tr>
<td>GREY</td>
<td>Estates Department</td>
</tr>
</tbody>
</table>

NB Green plastic bags are available for patient's laundry.

It is the responsibility of all staff to comply with the colour code system and ensure that all bags are tied and safe to handle. Care should be taken to prevent sharp instruments (needles, safety pins, etc.) or any non-linen items being sent to the laundry. Failure to do so will put others at risk.

Linen skip bags should be **NO MORE THAN TWO THIRDS FULL** for manual handling and occupational health reasons.

4.2 **LINEN**

a) **Used (non-fouled)**

Linen used but not fouled with bodily fluids. This linen must be placed into a WHITE linen bag.

b) **Used (Soiled and Foul)**

Linen soiled by vomit, faeces, urine, blood, pus and other bodily fluids must be placed into a hot water soluble bag and then into a RED linen bag. If insufficient red bags are available soiled and foul linen should be placed in a hot water soluble bag and then in a white linen bag.

c) **Used (Theatres)**

Linen should all be disposed of according to Operating Theatre Procedures, placed into a hot water soluble bag and then into a GREEN bag. If insufficient green bags are available soiled and foul linen should be placed in a hot water soluble bag and then in a white linen bag If insufficient red bags are available soiled and foul linen should be placed in a hot water soluble bag and then in a white linen bag.
d) High Risk (Infected)

Linen used by patients already subject to infectious precautions (strict and standard isolation) as defined in the Infection Control Policy for the Management of the Infected Patient in Hospital (2), must be placed into a hot water soluble bag and then into a RED linen bag.

Linen contaminated with cytotoxic waste must be placed into a hot water soluble bag and then into a RED linen bag.

e) Infested (e.g. Scabies)

Linen must be placed into a hot water soluble bag and then into a RED linen bag clearly marked “Infested Linen”.

f) Patients Own Laundry

When dealing with a patient’s own “soiled” clothing, i.e. covered in urine, vomit, faeces, blood or other bodily fluid, EITHER:

a) Place clothing in a water-soluble bag and then in a green patient laundry bag. Hand the bag of clothing to the relatives with instructions to place the inner water soluble bag and contents in their domestic washing machine. Relatives/carers should be advised to set the washing machine at the temperature required to dissolve the bag (60 degrees) and that failure to do so may resulting in clogging of the machine.

b) Consider disposal as clinical waste of soiled, foul or infected linen after discussion and documentation of said conversation with:

- The patient, if he/she is capable of giving informed verbal consent.
- The patients next of kin, carer or power of attorney whichever is the most appropriate, if it is not possible to gain informed consent directly from the patient.
- In the absence of both of the above, disposal on clinical risk grounds must be recorded in the patient’s clinical record.

or

- If the patient DOES NOT HAVE ANY RELATIVES or carers then used clothes/and in exceptional circumstances patients own bed linen may be put in a green patient’s laundry bag and sent to the Hospital Laundrette on those sites that have commercial style washing and drying facilities.

- For heavily soiled, foul or infected linen ward staff should consider disposing of the item as clinical waste because if the item is laundered at a high temperature to achieve disinfection the garment may be damaged and if laundered at a low temperature disinfection may not be achieved.

OR for units without commercial style laundry facilities
If the patient does not have any relatives, then used clothes may be washed in domestic machines if available on the wards, providing that there is access to a tumble drier and the machine is regularly serviced through a maintenance contract with the Estates Department. This also applies to delicate items of clothing that belong to the ward. Soiled, foul or infected linen should not be washed in ward washing machines, but should be disposed of as clinical waste. No other items of linen should be washed in ward washing machines. Washing soiled clothes using normal domestic cycles (~40°C) may leave residual organic matter and washing at higher temperatures will damage most items of clothing.

Clinical areas wishing to purchase a washing machine should seek advice from the Hotel Services and the Infection Prevention and Control Team and be purchased through the Procurement and Logistics Department.

4.3 Laundering Hospital Nightwear

4.3.1 Hospital nightwear (i.e. not patients own) – there is agreement that these items should be sent to the onsite laundry facility from the Local Care Centre/ Mount Gould site wards in a labelled green bag that includes a water soluble bag if the garment is soiled.

4.4 Mental Health Units/CAHMS

4.4.1 In some units patients manage their own laundry as part of their rehabilitation programme, or units have purchased their own bed linen. The policy regarding infected/foul linen must be followed and where deviations occur they must be made in agreement with the IPCT.

4.5 General Guidance for handling clean and used linen

4.5.1 Linen must be transported from the clean linen store to the clinical areas in cages.

4.5.2 Linen skip bags containing clean linen must not be stored on the floor. Clean linen must be unpacked and stored on shelves in a dedicated clean linen trolley or cupboard. In Livewell SSouthwest the Housekeepers are responsible for ensuring the linen trolley cupboard is kept clean and tidy.

4.5.3 Clean empty linen skip bags should be stored with the clean linen: not in the sluice.

4.5.4 Bed making and curtain changes must avoid coinciding with wound care activities, where these cannot be performed in a dedicated treatment area and meal times.

4.5.5 Linen should be loaded onto trolleys for use in peak bed-making times. Stacks of linen should not be carried around the clinical area.

4.5.6 Trolleys used to hold linen during peak bed making activity in the clinical area should:
a. Be cleaned on all surfaces and undersides with detergent before and after use.

b. Ensure the clean linen is covered to avoid airborne contamination.

c. Be stocked to ensure non-linen consumables (e.g. patient personal hygiene items are not in direct contact with the clean linen).

d. Should have as much linen as actually required to avoid clean linen becoming contaminated. Any unused linen must be treated as contaminated and not returned to the clean linen store.

e. Take the linen skip secured to a skip trolley (and water soluble bag when relevant) to the immediate point of use. This will enable linen which is in need of laundering to be placed directly into it. Used linen in need of laundering MUST NOT be placed on the floor, other surface or carried through the clinical area to a centralised skip point. Double skip trolleys should NOT have soiled and clean laundry side-by-side.

f. Appropriate personal protective equipment (e.g. gloves and plastic apron) should be worn when handling linen which is infected, infested and/or contaminated with any form of bodily fluid: e.g. blood, urine, faeces, vomit, sweat, pus, and wound exudates. Hands must be washed with soap and water after removal of gloves.

g. Following a patient’s discharge, clean linen should only be taken to the bed space once the used linen has been removed and the bed space has received the appropriate clean. (see the policies for Managing the Infected patient and Disinfection and Cleaning).

h. Bed linen should be stripped one item at a time. Use a layered folding technique with minimal agitation. This will reduce airborne transmission of micro-organisms and minimise the risk of contaminating adjacent bed spaces and other items temporarily in the area; open drug trolleys and patients’ food items. If other equipment is used to ‘hold’ the linen when stripping the bed (e.g. chairs), then care must be taken that this equipment is clean before use.

i. A complete bed change of linen on a daily basis is recommended if a patient has:

- Diarrhoea and/or vomiting.
- Has been identified as either infected, colonised or at risk of incubating, or shedding, a micro-organism with a resistance to a wide range of antibiotics.

j. Hot-water soluble bags should be stored in original packaging and not loose as this will affect their efficiency.
k. Care must be taken not to soil the outside of the hot water soluble bag or
the linen bag, as these are surfaces that will come into contact with staff
that further process the laundry.

l. Bags or any linen that are damaged or have tears should not be used;
they should be sent back to the laundry at Exeter.

m. The hot water soluble bag is the universal protection for staff handling
infected, infested and high risk linen. Water soluble bags are also colour
coded with a pink stripe running through the bag. If a red skip is
unavailable the laundry will accept the linen in an alternative colour skip
provided so the linen can be identified as a potential risk. Staff should
initially aim to request RED skip bags from the Head Porter via the
switchboard.

n. Excessively wet laundry items should be wrapped in dry linen, such as a
blanket, to absorb the moisture prior to placing in a hot water soluble bag.

o. Grossly contaminated linen should be sent to the laundry as above.
Laundry staff will determine whether to destroy it.

p. Once two thirds full, skip bags must be taken directly to the designated
cage stored in the designated collection point: not stored in the
ward/department or sluice. Skip bags should never be carried or dragged
to the collection point, but wheeled on the skip trolley. Used linen must
not, at any time be stored or placed on the floor within the ward area. In
areas that do not have laundry cages then dirty laundry skips can be
stored in the outer ‘porch’ of the sluice awaiting collection.

q. Although fouled, infected and infested linen is transported in sealed bags,
porters and those transporting the bags should minimise handling of the
bags, i.e. handle only when loading and unloading onto transporting
vehicles. Porters should ensure hands are washed after
handling/transporting dirty linen bags.

4.6 Curtains and Screens

4.6.1 Curtains and screens should be laundered/ decontaminated on a
scheduled basis that is agreed in each area with the Matrons/team leads
and Hotel Services and the schedule is documented. In between times
curtains/screens should be changed/decontaminated when visibly soiled
or potentially contaminated. Contamination may have occurred if a
patient has diarrhoea/ and or vomiting, or has been identified as either
infected, colonised or at risk of incubating, or shedding, a micro-organism
with a resistance to a wide range of antibiotics.

4.7 Transporting of linen around Livewell SOutwest sites

4.7.1 Linen must be transported in cages. The transport vehicle must be fit for
purpose i.e. is clean. The inside of the van must be cleaned with
detergent and water at least weekly and immediately if there is there is
any spillage. Designated transport for dirty and clean linen around the site must be upheld by the head porter.

4.8 Linen storage

4.8.1 Linen storage both clean and dirty facilities at the LCC must be cleaned at least weekly or more frequently if any spillages occur with detergent and water. Linen must be stored in cages and NOT on the floor. Portering staff have access to hand washing facilities in the basement following handling of linen bags.

5 Monitoring Compliance and Effectiveness

Compliance with this policy will be monitored by the IPCT in their audit cycle which has been agreed by the Infection Control Committee for Livewell SOuthwest.

- The infection prevention and control team produce an annual audit plan for the provider services at Livewell SOuthwest.
- It is the responsibility of the IPCT to ensure audits are carried out professionally and any deficits highlighted to the ward manager or the designated manager at the time of the audit. All ward managers, matrons will be sent a report within 48 hours and have a two week period to respond.
- The IPCT will use an audit tool for safe handling of linen.
- The frequency of audit for the linen service policy will be annually unless an area fails to meet the standard and requires additional support.
- If the standard fails to be met then the manager will be required to produce an action plan, a subsequent audit will be carried out both by the Infection Prevention and Control team and the manager of the unit within 3 months.

All policies are required to be electronically signed by the Lead Director. Proof of the e-signature is stored in the policies database.

The Lead Director approves this document and any attached appendices. For operational policies this will be the Locality Manager.

Signed: Director of Professional Practice, Quality and Safety.

Date: 10 July 2014
Appendix A

CONTACT NUMBERS

Linen Services

<table>
<thead>
<tr>
<th>Duty Laundry Manager (Exeter)</th>
<th>(01392) 403071</th>
<th>Short Code #6578</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head Porter</td>
<td>Mobile; 07798776050 or Via Mount Gould Switch Board</td>
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Emergency linen stores Plymouth LSW (Out of hours only)

Telephone Mount Gould Hospital Switchboard 0

Acknowledgment to Plymouth Hospitals NHS Trust