

Linen and Laundry Management Policy

This policy identifies the key processes and protocols for the management of linen and laundry.

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Name of Author:	Reviewed by Claire King infection prevention & control nurse	
Name of responsible Committee:	Infection Prevention and Control Assurance Group	
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Type of Policy	Clinical ✓	Non-Clinical
Which Relevant CQC Fundamental Standards?	Safety, Premises and equipment	

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Version control and summary of changes

Version number	Date	Comments (Description change and amendments)
Version 1	August 2009	Policy review – Amalgamation of: Infection Control Guidelines for the Management of laundry and linen. Reviewed to meet NHSLA requirements. Reviewed to meet The Health and Social Care Act (2008)
Version 2	April 2012	Circulated for consultation to all members of the Infection Control Committee
Version 3	January 2014	Reviewed to ensure continuing compliance with the Health & Social Care act (2008) and NHSLA requirements.
Version 4	May 2017	Policy reviews as above
Version 5	December 2019	Policy reviewed and no significant changes References updated
Version 6	February 2020	Policy updates as policy expiring
Version 7	January 2023	Policy reviewed and updating in line with current guidance

For further information contact:

Infection Prevention and Control Team 0116 2951668

Definitions that apply to this policy

Personal Protective Equipment (PPE)	Specialized clothing or equipment worn by employees for protection against health and safety hazards and includes gloves, aprons, gowns, masks, and eye protection.
Standard Precautions	Precautions designed preventing the transmission of blood – borne diseases such as human immunodeficiency virus, hepatitis B, and other blood borne pathogens when first aid or health care is provided. The precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection
Linen	Linen includes all textiles used in hospitals and community settings, including blankets, pillowcases, mattress covers, bed sheets, towels and curtains.
Laundry Services	Laundry & linen services provided by the Trust laundry contract.
Clean Laundry	Items of linen that are new or have not been used.
Soiled/foul linen	Soiled/Infected linen is linen which is soiled with blood, faeces or any other body fluid from any patient. All laundry used by a patient with a known infection (whether soiled or not).

1.0 Purpose of the policy

The aim of this policy is to ensure that all staff employed by Leicestershire Partnership Trust (LPT) are aware of the appropriate steps they need to undertake to ensure the safety of all patients and colleagues in accordance with the Health & Social Care Act (2015).

2.0 Summary and key points

This policy has been developed to give clear guidance to staff in relation to the procedure for the management of laundry and linen used within LPT services. It describes the process for ensuring the delivery of effective infection prevention and control management of laundry and linen within all LPT settings. It forms part of the organisation's compliance with the Health & Social Care Act (2015).

Contaminated laundry may present a health and safety hazard to portering staff during transport and to laundry staff handling unprocessed laundry. Therefore, within hospitals responsibility rests with all staff in wards and departments to ensure that used linen is presented for collection in the safest possible manner, and potential infection resulting from contamination is avoided as far as possible. However, management must adopt procedures to ensure that patients, visitors, and staff are not put at risk from used and infected linen and that soiled linen is collected from wards/departments in an effective and timely manner.

3.0 Introduction

The Linen and Laundry policy applies to all staff employed by LPT in a wide range of teams and services operating from a number of properties over a large geographical area making up the overall estate.

The provision of healthcare carries with it inherent risks to the health care worker.

The document ensures that all staff are aware of their responsibilities in regard to safe practice and to promote effective evidence-based patient care which is in accordance with revised national and local guidelines when handling linen or laundry.

4.0 Safe Management of Linen

Healthcare Laundry must be managed and segregated in accordance with HTM 01 – 04 which categorises laundry as follows:

4.1 Used linen (previously known as soiled/fouled linen):

- Ensure a dedicated laundry receptacle is available as close as possible to the point of use for immediate linen deposit.
- Must be placed in an impermeable bag immediately on removal from the bed or before leaving a clinical department.

4.2 Infectious linen (this mainly applies to healthcare linen)

Infectious linen includes linen that has been used by a patient who is known or suspected to be infectious and/or linen that is contaminated with blood and/or other body fluids e.g., faeces:

- Infectious linen must not be sorted but should be sealed in a water-soluble bag, which is then placed in an impermeable bag immediately on removal from the bed/chair etc. and secured before it is transported to the waste disposal room.
- Infectious linen bags/receptacles must be tagged (e.g., Hospital ward/care area) and dated.
- Used/infected linen must be stored in a designated, safe, lockable area whilst waiting for collection.
- All linen that is deemed unfit for re-use, e.g., torn or heavily contaminated should be categorized at the point of use and returned to the laundry for disposal.

5.0 Handling of linen

It is the responsibility of the person disposing of the linen to ensure that it is segregated appropriately.

All linen must be handled with care to minimize transmission of micro-organisms.

Plastic disposable aprons must therefore be worn when there is potential risk of contamination of the uniform/clothing i.e., when making and changing beds.

Gloves do not need to be worn when handling linen unless soiled with blood or other body fluids.

Linen should be placed directly into the appropriate laundry bag on removal from the bed/patient.

Linen should not be placed on the floor or transported around a ward/area unless within an appropriately colour coded linen bag.

Hands must be washed immediately following the handling of any linen and after removal of disposable gloves and apron that has been used when handling soiled/infected linen.

Extreme care must be taken to separate all extraneous items (i.e., needles, dressings, or personal items etc.) from linen before it is placed in laundry bags. Such items are potentially dangerous to staff when in transport and during the laundry process and may also damage laundry equipment.

To avoid possibility of spillage of used linen, bags must never be more than two thirds full and must be securely tied. These principles are to be applied to handling of linen within all healthcare settings.

5.1 Frequency of linen change

Bed linen or clothing must be changed and laundered between patients. The frequency of changing will depend on the individual case i.e., daily for patients nursed in isolation, immediately if fouled/soiled.

All linen that falls within the soiled/infected category must be placed within a red soluble alginate bag, inside a white plastic laundry bag. The soluble bag must be placed directly into the washing machine to prevent any cross-infection to staff or the environment, see appendix 1.

5.2 Dirty linen is all used linen other than that listed above.

All linen that falls into this category must be placed within a white plastic laundry bag.

The above categorisation applies when either items are laundered by Trust's laundry service provider or by care staff in home/ward areas.

5.3 Bed linen/heat resistant items

These items must, where possible, be processed through a cycle of 71 degrees C (for not less than 3 minutes) or 65 degrees C (for not less than 10 minutes). For washing machines of conventional or domestic design (not an industrial type) at least 4 minutes mixing time must be added to these cycle times. Care should also be given to not overfill the washing machine drum. Select the nearest cycle available on a domestic washing machine to match the above.

Personal items

All personal laundry should be given to relatives, if possible, in appropriate bags to launder (Appendix 1). If the laundry is from **a patient with a suspected or known infection**, then staff are required to give relatives correct advice regarding handling and washing these items.

All personal items of clothing not able to be taken home by visitors or relatives should be laundered on site if possible.

Such items must be bagged before being transported to the laundry area. If no on-site laundry facilities available patients clothing may be sent to the Trust laundry service provider. All items must be clearly marked with the patients name and location. If any garments have detachable belts this should also be clearly labelled.

Manual sluicing, soaking or hand washing of soiled items must never be carried out.

A sluice cycle or cold pre-wash must be used for all soiled items, any solid matter, i.e., faeces, must be removed prior to this.

Heat labile items.

Should be washed on the hottest cycle possible for that item. Each patient's heat labile items must be washed separately, and this includes hoist slings. Alternatively disposable items such as hoist slings may be used.

5.4 Uniforms and workwear

Uniforms must be changed daily. If a uniform is heavily contaminated it must be changed as soon as possible.

Uniforms must be laundered at the highest temperature the fabric allows and at a minimum of 40 degrees centigrade, dried quickly, or tumble-dried and ironed with a hot iron.

If a laundry service is available, it should include items such as uniforms scrubs and all.

items to be laundered by this method must be clearly marked with the trust name and labelled with the ward/area and site. The laundry will not take responsibility for items sent which are unmarked.

5.5 Curtains and soft furnishings

Curtains in clinical areas must be laundered as a minimum six monthly, and immediately if soiled, and when removed during a deep/terminal clean. Any curtains purchased for clinical areas must not be dry clean only and should be able to withstand thermal disinfection temperatures as a minimum.

All curtains and soft furnishings must be approved by the Infection Prevention and control team. Purchasing of such items must be carried out via the procurement process. This includes items purchased for therapeutic use or from charitable funds to ensure that they meet the minimum safety standards for use in healthcare.

Alternatively disposable curtains should be considered. If curtains are being sent to the Trust's laundry service these should be placed in a brown Ellis bag and labelled (Appendix 1)

Curtains should always be changed following a post infection clean whether visibly soiled or not, they should then be placed in a red alginate bag before being placed in a brown Ellis bag and labelled.

Within clinical areas soft furnishings such as chairs etc., must be purchased with water repellent upholstery. Any stained, soiled, or ripped chairs which cannot be effectively cleaned should be discarded as soon as possible and replaced with appropriately covered chairs. Disposal of these items must meet the trusts requirements as identified in the waste policy.

Pillows and duvets must be covered with a plastic waterproof material and be heat sealed to form a protective covering with no openings. If the integrity of the waterproof cover is compromised, soiled, or stained it must be discarded immediately.

6.0 on site Laundry

Whilst the preferred option is for all linen and laundry to be managed through a dedicated registered laundry provider for healthcare, there may be times when this is not possible and onsite laundering may need to take place. Any on site laundry must be situated within a designated room that is used for laundry purposes only. All on site facilities must have the following available:

- Separate washing machine and dryer (commercial WRAS approved) with a planned maintenance package.
- Hand wash basin with liquid soap and paper towel dispenser
- Disposable gloves and aprons
- Segregated area for dirty linen and linen skips
- Segregated area for temporary clean linen storage
- Waterproof dressings available to cover any cuts and sores on the hands.

- A separate ironing area must be available away from used linen.

The design of the laundry facility must allow for a flow of items from the dirty to clean area.

All washing machines and dryers must be subjected to a planned program of service and maintenance at least annually.

Laundry sent to off-site premises

The transportation of laundry and the laundry process must be monitored, including site visits (annually) to ensure compliance with good practice and HTM 01-04:2013. Contractors must comply with all elements of HTM 01-04:2013 and BS EN 14065:2002 and it is important that potential contractor's premises, processes and procedures are audited prior to decisions being made.

7.0 Storage of linen

Clean/unused linen

- Personal patient clothing awaiting collection should not be stored in the same room as clean/unused linen.
- All clean linen must be stored off the floor in an allocated clean environment namely a cupboard away from used/soiled linen, dust, and pests.
- Linen cupboard doors must be kept closed to prevent contamination.
- If taken into an isolation room and not used, the linen must be considered to be used and therefore laundered as infected linen before reuse.
- Clean linen must be in a good state of repair free from stains, holes, and any tears.
- Any shelving in the linen store must be capable of being wiped down/cleaned.
- Piles of clean linen must not be stored/located in open areas i.e wards, lockers, at any time. This prevents cross contamination of linen and inappropriate re-laundering linen.

Used linen.

- All linen bags must be stored in a secure area away from the public access whilst awaiting collection.
- Linen trolleys, where used, must be cleaned daily in line with the cleaning and decontamination policy to prevent build-up of dirt and dust and to prevent potential cross contamination.

Use of linen outpatient/clinics

Fabric sheets should not be used in outpatient/clinic areas where disposable alternatives should be used i.e., couch roll which must be changed between patients.

8.0 Items of linen that must not be sent to laundry.

Items of linen used by patients with the following confirmed or suspected infections must not be sent to laundry:

- Anthrax
- Lassa fever/other viral hemorrhagic fever
- Plague
- Rabies

All items of linen used in the above categories must be dealt whilst wearing gloves and aprons, double bagged and in sealed, hazardous waste bags with 'For incineration only' clearly marked on the bag and staff should arrange for immediate disposal from the ward/area.

If further advice is needed in regard to the above, please contact the Consultant Microbiologist at Leicester Royal Infirmary on 03003031573 or the Leicester Partnership Trust infection control team via switchboard.

9.0References and bibliography

LPT policies via intranet

Ayliffe GAJ et al (1992) *Control of Hospital Infection- a practical handbook*. London: Chapman and Hall.

Department of Health: *The Health and Social Care Act, Code of Practice for health and social care on the prevention and control of infections and related guidance* (2015)

NHS Executive (1995) *Hospital Laundry Arrangements for used and infected linen* – HSG (95) 18 London: NHSE

NHS National infection prevention and control manual for England, 14 April 2022

Department of Health (2013) *Choice framework for local policy and procedures 01-04 - Decontamination of linen for health and social care: Guidance for linen processors implementing BS EN 14065*

NHS National infection prevention and control manual for England, 14th April 2022



HTM 01 - 04 - COLOUR CODING TEXTILE BAGGING POLICY

Linen Hire Items



White Elis Bag

Rejected Linen



Rejected/Returned
Items Only
Pink Elis Bag

Infected Linen
Hire Items



Dissolvable Red Bag
Inside White Elis Bag

Infected Hospital
Owned Items



Dissolvable Red Bag
Inside Blue Elis Bag

Customer Owned
Items (RTS)



Blue Elis Bag

Surgeons Gowns,
Theatre Drapes



Green Elis Bag

Infected Surgeons
Gowns, Theatre
Drapes



Dissolvable Red Bag
Inside Green Elis Bag

Curtains



Brown Elis Bag

Infected Curtains



Dissolvable Red Bag
Inside Brown Elis Bag

This supersedes all previous linen bagging policies, in adherence to Department of Health guidelines HTM 01-04.

Appendix 2

PRIVACY IMPACT ASSESSMENT SCREENING

<p>Privacy impact assessment (PIAs) are a tool which can help organisations identify the most effective way to comply with their data protection obligations and meet individual's expectations of privacy. The first step in the PIA process is identifying the need for an assessment.</p> <p>The following screening questions will help decide whether a PIA is necessary. Answering 'yes' to any of these questions is an indication that a PIA would be a useful exercise and requires senior management support, at this stage the Head of Data Privacy must be involved.</p>			
Name of Document:	Linen and laundry management policy		
Completed by:	Claire King		
Job title	Infection Prevention and Control Nurse	Date	25-01-2023
			Yes / No
1. Will the process described in the document involve the collection of new information about individuals? This is information in excess of what is required to carry out the process described within the document.			No
2. Will the process described in the document compel individuals to provide information about themselves? This is information in excess of what is required to carry out the process described within the document.			No
3. Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information as part of the process described in this document?			No
4. Are you using information about individuals for a purpose it is not currently used for, or in a way it is not currently used?			No
5. Does the process outlined in this document involve the use of new technology which might be perceived as being privacy intrusive? For example, the use of biometrics.			No
6. Will the process outlined in this document result in decisions being made or action taken against individuals in ways which can have a significant impact on them?			No
7. As part of the process outlined in this document, is the information about individuals of a kind particularly likely to raise privacy concerns or expectations? For examples, health records, criminal records or other information that people would consider to be particularly private.			No
8. Will the process require you to contact individuals in ways which they may find intrusive?			no
<p>If the answer to any of these questions is 'Yes' please contact the Head of Data Privacy Tel: 0116 2950997 Mobile: 07825 947786 Lpt-dataprivacy@leicspart.secure.nhs.uk In this case, ratification of a procedural document will not take place until approved by the Head of Data Privacy.</p>			
IG Manager approval name:			
Date of approval			

Acknowledgement: Princess Alexandra Hospital NHS Trust

Appendix 3

Section 1			
Name of activity/proposal		Linen & Laundry management policy	
Date Screening commenced		January 2023	
Directorate / Service carrying out the assessment		Infection, prevention, and control committee	
Name and role of person undertaking this Due Regard (Equality Analysis)		Claire King Infection, prevention, and control nurse.	
Give an overview of the aims, objectives, and purpose of the proposal:			
AIMS: The purpose of this policy is to ensure that all staff (Clinical and non-clinical and both directly and non-directly employed) have clear guidance in relation to the procedures in the management of linen and Laundry in accordance with national and local standards for the prevention and control of infection.			
OBJECTIVES: The objective of the policy is to provide the organisations 'expected' standards of the management of linen and laundry in line with the National standards for the prevention and control of infection			
Section 2			
Protected Characteristic	If the proposal/s have a positive or negative impact please give brief details		
Age	No Impact expected		
Disability	No Impact expected		
Gender reassignment	No Impact expected		
Marriage & Civil Partnership	No impact expected.		
Pregnancy & Maternity	No Impact expected		
Race	No Impact expected		
Religion and Belief	No impact expected		
Sex	No impact expected		
Sexual Orientation	No Impact expected		
Other equality groups?	No Impact expected		
Section 3			
Does this activity propose major changes in terms of scale or significance for LPT? For example, is there a clear indication that, although the proposal is minor it is likely to have a major affect for people from an equality group/s? Please <u>tick</u> appropriate box below.			
Yes		No	
High risk: Complete a full EIA starting click here to proceed to Part B		Low risk: Go to Section 4.	X
Section 4			
If this proposal is low risk please give evidence or justification for how you reached this decision:			
Signed by reviewer/assessor	Claire King	Date	25-01-2023
<i>Sign off that this proposal is low risk and does not require a full Equality Analysis</i>			
Head of Service Signed		Date	

Appendix 4

Key individuals involved in developing the document

Name	Designation
Amanda Hemsley	Lead Infection Prevention and Control Nurse
Laura Brown	Senior Infection Prevention and Control Nurse
Claire King	Infection Prevention and Control Nurse
Faith Tipper	Infection Prevention and Control Nurse
Debra Davis	Infection Prevention and control Nurse

Circulated to the following individuals for comment

Name	Designation
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Emma Wallis	Associate director of nursing & Professional practice
Claire Armitage	Lead nurse for community AMH
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Alison O'Donnell	Interim head of learning & development
Kam Palin	Occupational health nurse
Tejas Khatau	Lead pharmacist FYPC
Jane Martin	Deputy head of nursing DMH
Katie Willetts	Senior nurse, specialist nursing FYPC
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