




# LAUNDRY & LINEN POLICY

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<b>EXECUTIVE DIRECTOR</b>	Executive Director of Finance	
<b>POLICY LEAD</b>	Head of PFI and Commercial Services	
<b>POLICY AUTHOR</b> (if different from above)	Senior Contracts and Commercial Services Manager, Estates & Facilities Senior Facilities Manager, SSL	
<b>Exec Sign Off Signature (Electronic)</b>		
<b>Disclosure under the freedom of information Act 2000</b>	Yes	

## POLICY CONTEXT

This Policy is written with reference to the DOH Health Technical Memorandum (HTM) 01-04 Decontamination of Linen for Health and Social Care. Its overall objective is to provide Trust Staff and Service Providers with the relevant guidance so that they can protect themselves and patients from risks posed by handling used, soiled and infected linen.

## POLICY REQUIREMENT

This Policy and Procedures herein set out requirements for all Linen and Laundry activities from ward to laundry including;

Trust and Service Providers

- Categorisation and segregation of linen
- Handling and storage of clean (unused) linen
- Dealing with used/soiled/fouled/infected/infested linen and sending to laundry
- Laundering of patients clothing
- Duvets and pillows
- Standardisation of purchasing and replacing ward Based Washing machines  
Laundry Contractors
- Categorisation and segregation of linen
- Transportation of clean linen used/soiled/fouled/infected/infested linen
- Handling, processing, and storage of linen.

## Change Record

Date	Version	Author (Name & Role)	Reasons for review / Changes incorporated	Ratifying Committee
Dec24	8	Lee Gough (Head of Facilities Management)	3 Yearly Review	CGC

### CONTENTS

<b>1</b>	<b>INTRODUCTION .....</b>	<b>3</b>
	1.1 Rationale	3
	1.2 Scope	3
	1.3 Principles	3
<b>2</b>	<b>POLICY .....</b>	<b>4</b>
<b>3</b>	<b>PROCEDURE.....</b>	<b>5</b>
	3.1 Use of Duvets and Pillows	5
	3.2 Categorisation and Segregation of Linen and Laundry	5
	3.3 Procedure for Unused, Clean Linen	6
	3.3.1 Storage	
	3.3.2 Protocol for Trolley Storage of Clean Linen in Wards	
	3.3.3 Handling Clean Linen	
	3.3.4 Clean Linen Supplies	
	3.4 Procedure for Handling Bed Linen	8
	3.5 Procedure for Handling Used Linen	8
	3.6 Sending "Special Items" to the Laundry from Wards & Departments	9
	3.7 Procedure for Laundering Patients Clothing (by Patients/Carer/ Relative)	10
	3.8 Procedure for Laundering Patients Clothing (by Ward Staff)	10
	3.9 Procedure for replacing/purchasing ward washing machines	11
	3.10 Procedure for the Use of Red Alginate Water Soluble bags	12
	3.11 Quality Monitoring	12
	3.12 Technical Standards	13
	3.13 Quality Standards	13
	3.14 Training	13
<b>4</b>	<b>RESPONSIBILITIES.....</b>	<b>14</b>
<b>5</b>	<b>DEVELOPMENT AND CONSULTATION PROCESS.....</b>	<b>20</b>
<b>6</b>	<b>REFERENCE DOCUMENTS .....</b>	<b>24</b>
<b>7</b>	<b>BIBLIOGRAPHY .....</b>	<b>24</b>
<b>8</b>	<b>GLOSSARY.....</b>	<b>24</b>
<b>9</b>	<b>AUDIT AND ASSURANCE .....</b>	<b>25</b>
<b>10</b>	<b>APPENDICES .....</b>	<b>25</b>

# 1 INTRODUCTION

## 1.1 Rationale

1.1.1 Both hospital and Contracted laundry staff deal with used, soiled and infected linen numerous times each day. DOH HTM 01-04 provides the minimum standards and guidance for hospital staff governing the colour coding of linen bags and their responsibilities relating to the storage and handling of clean linen and the handling of used, soiled and infected linen. It also provides guidance on the responsibilities of the laundry staff.

1.1.2 This Policy is written with reference to the DOH HTM 01-04 “Decontamination of Linen for Health and Social Care”. Its overall objective is to provide Trust Staff and Service Providers with the relevant guidance so that they can protect themselves and patients from risks posed by handling used, soiled and infected linen.

## 1.2 Scope

1.2.1 This Policy applies equally to staff in a permanent, temporary, voluntary or contractor roles acting for or on behalf of Birmingham and Solihull Mental Health NHS Foundation Trust.

1.2.2 This Policy and Procedures herein set out requirements for all Linen and Laundry activities from ward to laundry; including;

i) Trust and Service Providers

- Categorisation and segregation of linen
- Handling and storage of clean (unused) linen
- Dealing with used/soiled/fouled/infected/infested linen and sending to laundry
- Laundering of patients clothing
- Duvets and pillows

ii) Laundry Contractors

- Categorisation and segregation of linen
- Transportation of clean linen used/soiled/fouled/infected/infested linen
- Handling, processing and storage of linen.

## 1.3 Principles

1.3.1 Correct categorisation, handling, transportation and processing of linen can help to reduce the risk of cross infection.

1.3.2 The Policy’s specific objectives are;

- i) To set out laundry & linen Policy and procedures that all Trust Staff are required to comply with.

- ii) To set out laundry & linen Policy and Procedures that all Service Providers to the Trust (and any sub-contractors of these Service Providers) are required to comply with.
- iii) To establish laundry and linen standards that are required to be incorporated into all new capital and other developments for the Trust's In-patient Services.
- iv) To provide a framework and requirements for the auditing of compliance with this Policy and its Procedures.
- v) To set out the roles and responsibilities of Trust Staff and its Service Providers and sub-contractors and any associated training required.
- vi) To set out provisions for review of this Policy and its Procedures.

## **2 POLICY**

- 2.1** Staff must have received appropriate instruction and training and be familiar with the operational requirements of this Policy, including the requirements of the "Procedures" section relevant to their area of responsibility.
- 2.2** Estates and Facilities Managers, in conjunction with the Trust Infection Prevention and Control Team, are responsible for reviewing and updating this Policy. The outcomes of each review and associated draft amendments will be submitted to the Trust Infection Prevention and Control Team in the first instance.
- 2.3** Advice regarding implementation, operational requirements, record keeping etc. will be provided by SSL's Estates and Facilities Management team or SSL's PFI Monitoring team.
- 2.4** This Policy must be utilised in conjunction with the Trust Laundry and Linen "Procedures" documentation, relevant to the specific area of the Trust.
- 2.5** Steps to Recovery units must, when using linen that is not sent to the Laundry Provider, set up a local written protocol that reflects the Trust Linen and Laundry Policy

**All staff who handle linen must follow standard Infection control precautions e.g., gloves, aprons, hand washing (refer to Trust Standard precautions and hand hygiene procedures).**

## **3 PROCEDURE**

### **3.1 Use of Duvets and Pillows**

- I. It is the Trust Policy to use sheets and blankets hired and washed by its Laundry Provider on all beds in short stay wards. Other bed covers such as Duvets may be used in long stay and rehabilitation units or if there is a clinical reason. The patient will keep the same duvet throughout their stay and this duvet **MUST** be disposed of when that patient is discharged and a new duvet will be used for any new admission.

- II. In cases of infection the duvet must be replaced with sheets and blankets and the duvet must be disposed of in accordance with the Trust Waste Strategy, Policy and Procedures. When the patient is no longer infectious (if in doubt liaise with Infection Prevention Team), the patient must be issued with a new duvet and the use of sheets and blankets can be stopped.
- III. In all cases where duvets are used, the duvet covers must be washed by the Trust's Laundry Provider at all times and treated the same as sheets, pillowcases and towels.
- IV. Wards should only order waterproof pillows from NHS Supplies. These should be wipeable and must be cleaned when visibly dirty and between each patient use with detergent wipes. Where there is a known infection the pillow should be decontaminated with "Chlor-clean" solution. Pillows must also be inspected for rips, tears and damaged seams (please refer to Trust decontamination policy for specific guidance).

**NB Pillows with a detachable waterproof cover must not be used in any circumstance.**

**NB In all cases pillowcases should be sent to the Trust's Laundry Provider for laundering.**

### 3.2 Categorisation and Segregation of Linen and Laundry

Linen Segregation - Trust Soiled Linen Instructions

- i) **Colour coding charts** should be displayed prominently in all areas.
- ii) **Used and Soiled linen (not infected)** - Place all soiled linen into white Polythene bags at the bedside - Except for infected linen.
- iii) **Infected linen** – At the bedside first put infected linen (i.e. Contaminated with blood/bodily fluids/urine/faeces or from any isolation Area) into a **plastic red fully dissolvable alginate bag** and then place into a white plastic bag. **Red Alginate fully dissolvable bags can be obtained from the Estates and Facilities Department or Amey Helpdesk.**
- iv) **Rejected linen** - If this should occur put reject linen into a separate pink potato starch bag with a piece of paper briefly explaining the issues and stick a label on the outside of the bag marked '**F.A.O. Name of Laundry Supplier**', and return with the rest of the soiled laundry. All rejected linen is inspected on return and replaced on the next delivery.

### 3.3 Procedure for Unused Clean Linen

#### 3.3.1 Storage

- i) Clean linen must be stored in a separate area away from used linen and protected from dust. Where possible, this should be in a separate area designated for this purpose with the door closed and locked.
- ii) If a Ward/Department does not have a clean linen storage room, a linen storage cage can be used for storing clean linen. However clean linen must be kept covered and this must not be kept in a patient, or open area.

### **3.3.2 Protocol for the movement of Clean Linen**

- (i) All clean laundry will be placed into cages with a cage cover before transporting.
- (ii) Any vehicles used for the transportation of clean laundry will ensure that there is no cross contamination with any dirty laundry.
- (iii) All vehicles will be washed down daily.

### **3.3.3 Protocol for the movement of Used Linen**

- (i) All used linen transported by the PFI service provider will be transported in separate vehicles to the clean linen

All PFI provider vehicles transporting used linen will be washed down after each delivery.

### **3.3.4 Protocol for Trolley Storage of Clean Linen in Wards**

- i) The trolley should be in good condition.
- ii) The trolley should be visibly clean at all times (no dust on ledges or wheels etc.).
- iii) Trolleys should be clean washed with detergent and water and thoroughly dried at least weekly.
- iv) Linen on the trolley should be covered.
- v) Stocks of linen held on trolley should be sufficient for one 24-hour period only.
- vi) The trolley holding the clean linen should be kept in a clean, locked room suitable for this purpose.

### **3.3.5 Handling Clean Linen**

- i) Ward/Department staff must ensure that:
  - a) Hands are decontaminated prior to handling clean laundry
  - b) Clean linen is not sorted on the floor
  - c) Any item trailing or falling on the floor is returned to the laundry for re-laundering.
  - d) Only sufficient clean linen for immediate use should be stored in patient areas.
  - e) Linen is not moved backwards and forwards between store cupboards and patient areas.

- f) Linen should not be stored anywhere other than appropriate store cupboards, unused bedrooms should not be used for the storage of laundry and linen.

### 3.3.6 Clean Linen Supplies

- i) Delivery days and amounts of linen will be agreed with each ward/ department. This will be set up as a Standing Order and the amounts and delivery days will remain in place until a request for change by the ward/ department is made.

Any request for a change in standing order for an increase or decrease in amount of clean linen delivered or for a change in the number of delivery days should be communicated by the ward/department to the Estates & Facilities Department/PFI Facilities department who will action any change and inform the laundry provider to implement the changes. These changes will continue until any subsequent request is made to the Estates & Facilities Department.

- ii) Clean linen will be delivered and used linen collected from the back door/loading bay, either by the Portering Service, directly by the Laundry Provider or PFI Facilities Provider.
- iii) Clean linen should be moved as soon as possible after delivery to the ward/ department clean linen store to avoid the linen becoming soiled.
- iv) It is the responsibility of the Nursing Teams on the North sites to ensure clean linen is put away as soon as possible on delivery to the ward.
- ii) Facilities Staff/Trust's PFI Facilities Provider must ensure that:
- Clean laundry is kept covered until it is sorted prior to delivery and during transport to the wards.
  - Hands are washed before handling clean laundry.
  - Clean laundry is handled as little as possible.
  - Clean laundry is not directly in contact with the floor of the roller cage.
  - All trolleys that are used to collect used linen from the wards have been cleaned before using with clean linen.
- v) In the event of there being no clean laundry available on the ward, ward staff should liaise with SSL's Estates and Facilities Department/SSL PFI Monitoring team and Amey helpdesk.  
**Out Of Hours:** staff should liaise with the Portering Department/ Amey Helpdesk for items from the local emergency linen cupboard.
- vi) In the event of there being an incident (e.g. fire, flood) where emergency stocks of linen are required the senior nurse on site/ward should liaise

with SSL's Facilities team/ PFI Facilities Services Provider for approval to access local emergency linen stocks.

### **3.4 Procedure for Handling Bed Linen**

- ii) Correct bed making involves the separation of clean and dirty linen to avoid contamination
- iii) The linen bag should be at the bedside. Never carry an armful of used, soiled, fouled, infected or infested linen to elsewhere in the ward.
- iv) Plastic aprons and disposable gloves should be worn whenever any soiled, fouled, infected or infested laundry is handled.
- v) Thorough hand washing is essential after removing gloves and aprons.
- vi) Used Linen bags should be no more than 2/3 (two thirds) full.
- vii) The correct coloured bag should be used for the category of linen being handled.
- viii) Colour coding charts should be displayed prominently in all areas.

### **3.5 Procedure for Handling Used Linen**

- i) All used linen must be handled carefully to avoid dispersal of dust and organisms which may contaminate the environment and clothing
- ii) Gloves and aprons must be worn when dealing with used (soiled or fouled) and infected or infested linen.
- iii) Facial Protection must be worn if there is a risk of splash i.e. visors and masks.
- iv) Exposed open skin lesions must be covered with a waterproof dressing at all times.
- v) Correctly colour coded linen bags must be available at point of use so that all used linen can be directly placed into these.
- vi) All used linen must be segregated correctly
- vii) All linen bags must be securely fastened before being sent to the laundry.
- viii) When red water-soluble alginate liners are used for heavily soiled/fouled linen and/or infected linen, the red water-soluble liners must be sealed straight away and placed inside the outer white bag.
- ix) All used and infected linen must be stored under secure conditions prior to being sent to the laundry. This should be out of sight to patients and visitors to the area.



- x) Erroneous items (for example, sharps, incontinent pads etc.,) **must not** be mixed in with the laundry.
- xi) Hands must be decontaminated correctly according to the hand hygiene and glove use procedure after handling any used, soiled, fouled, infected or infested linen.
- xii) A poster summarising the correct segregation of linen and colour coding of bags must be displayed in a prominent position in every ward and clinical department.
- xiii) Heavily fouled linen has the potential to cause splash to the laundry worker so must be placed in a red water-soluble (alginate) bag before placing in a white bag.
- xiv) Always use the correct coloured plastic bag.
- xv) Please see procedure 3.11 for using water soluble bags.
- xvi) Please use correct property bags for patients' property.
- xvii) Always take linen skip /bag according to local protocol to bedside to avoid contamination of uniform/ work wear.
- xviii) Do not shake used linen into the environment.

### 3.6 Sending “Special Items” to the Laundry from Wards and Departments

- i) “Special Items” are defined as all items other than linen, towels, nightclothes, and clothing, which require laundering between patient uses. E.G Hoist Slings.
- ii) All “Special Items” must be labelled (ward/clinic/department and hospital name) using a permanent marker if possible.
- iii) Porters will not accept items, which are not clearly labelled as above or are in unlabelled bags.
- iv) All “Special Items” should be placed in a blue laundry bag (as per laundry segregation colour coding chart).
- v) This blue laundry bag should be taken to the dirty linen store or put in a white linen bag and labelled FOA [Oxwash]
- vi) Ward/Unit staff will record all “Special Items” sent from their area.
- vii) Ward staff/Housekeepers will record all “Special Items” as they are returned clean from laundry.
- viii) Member of staff at ward/department/clinic will be asked to sign to say clean item has been returned.

**Please note:**

- a) When purchasing “Special Items”, always check the decontamination instructions.

**It is essential that all new items of equipment are assessed to ensure that adequate cleaning, disinfection and/or sterilization can be carried out between patient uses, prior to their purchase. (Please refer to Trust Decontamination policy section 3.7 decontamination considerations prior to purchase).**

### **3.7 Procedure for Laundering Patients Clothing (by Patient, Carer/ Relative)**

**The responsibility for the laundering of personal items of clothing remains, as far as possible, the responsibility of the patient/carer/relative.**

- i) An information leaflet for patients, relatives and carers regarding laundering of patient's own clothing is shown in Appendix 7. It can also be found on the Trust's intranet.
- ii) The ward staff will use appropriate bagging for patients own clothing.
- iii) Patients may undertake the laundering of their own clothing in the laundry facilities on the ward (under the supervision of ward staff) (subject to IV) below).
- iv) Infected clothing can only be washed in washing machines that comply fully with HTM 01-94. **If in doubt clarification should be obtained from Estates and Facilities.**

If a fully compliant washing machine is not available on the ward, then infected clothing should be sent to the Trust's contracted Laundry Provider. Marked as Special Items

- v) If a Carer/Relative wishes to take the infected clothing away to wash, then they should be given and instructed to follow the guidance notes found in Appendix 8.

### **3.8 Procedure for Laundering Patients' Clothing (by Ward Staff)**

It is Trust Policy that wherever possible patients' own clothing is taken for laundering by relatives or carers. Where this is not possible, the following procedures must be followed;

- i. Infected items should only be washed in a washing machine that complies fully with HTM01-04. **If in doubt clarification should be obtained from Estates and Facilities.**
- ii. If the washing machine does not comply fully with CFFP 01-04 then the infected items must be sent in the correctly coloured bags to the Trust's contracted Laundry provider
- iii. Infected clothing must be placed in the correctly colour coded (red) alginate water soluble bag and placed in a separate Red Plastic laundry bag with the patients name and ward clearly printed on a note attached securely to the outside of the Red Plastic laundry bag. The outer bag

should be placed in the designated store for collection by porters or the laundry contractor's staff.

- iv. For Out of hours on the North sites, Ward staff will take down dirty linen bags directly to the dirty linen stores ready for collection.
- v. **See Section 3.2.iii** for how to obtain supplies of red alginate bag liners and red laundry bags.

**NB under no circumstances should a public Laundrette be used to wash patient clothes if a patient has/had or is suspected of having/had an infection.**

### **3.9 Procedure for Replacing/Purchasing Ward Based Washing Machines**

Any replacement machines **must** be ordered either through the BSOL Procurement Department for Trust owned buildings or via the Trust's PFI Partners in PFI owned buildings.

**NB under no circumstances should any washing machine be ordered direct by the Ward or Department. Any questions should be directed to the BSOL Procurement Department.**

### **3.10 Procedure for the Use of Red Alginate Water Fully dissolvable Bags**

This Procedure is to be used in all situations where fouled, heavily soiled, or infected linen is generated.

- i) Place the infected/fouled/heavily soiled linen inside the red alginate water soluble bag.
- ii) Items that are soaking wet should be wrapped inside drier dirty laundry.
- iii) Do not overfill the water soluble bag.
- iv) Seal the water soluble bag using pink neck tie – **DO NOT KNOT THE BAG**
- v) Place the filled water soluble bag inside a WHITE Plastic Laundry bag.
- vi) Close the White Plastic Laundry bag.
- vii) Infected "Linen" label, where appropriate, should be tied to the top of the White Plastic Laundry bag.
- viii) Filled bags should not be allowed to get wet during storage or transit.

#### **Please Note;**

- a) Refer to Section 3.2 and Appendix 1 "Linen Segregation Colour Coding".
- b) Supplies of red alginate bags and White, Pink and Blue plastic laundry bags can be obtained from the Estates & Facilities Department/Facilities

Services Provider (who will obtain these from the contracted Laundry Provider).

### **3.11 Quality Monitoring**

- i) The Trust will carry out regular monitoring of the quality and procedures of the Trust's Laundry Provider.
- ii) The Quality Monitoring standards are set out in Appendix 6 of this Policy.
- iii) The Trust's Laundry contractor is required to have comprehensive quality control systems throughout the processing areas and must be accredited with BS EN ISO 9001 (as amended) & BS EN 14065 (as amended)

### **3.12 Technical Standards**

1. The Contractor shall institute and maintain a properly documented system acceptable to the Trust to ensure that all the Contract requirements are maintained.
2. The documented system must be incorporated into BS EN ISO 9001 (as amended) and BS EN 14065 (as amended) and must include:-
  - Procedures for ensuring full compliance with the detailed requirements of HTM01–04.
  - Procedures for ensuring full compliance with the detailed requirements of HTM 05-03

### **3.13 Quantity Standards**

1. The Contractor shall institute and maintain a properly documented system acceptable to the Trust to ensure that Contract quantities are maintained.
2. The documented system must be incorporated into BS EN ISO 9001 (as amended) and BS EN 14065 (as amended) and include:-
  - Procedures for documentation of laundered items delivered and assurance that each area receives requirements as detailed in Schedule 5.
  - Procedures for charging the Trust for articles processed and procedures for analysis of the service by article type and user level.
  - Procedures for articles which have been rejected and require replacement either by the contractor or the Trust (whichever is applicable).
  - A detailed analysis of the annual linen stock count.

Both the technical and quantity standards are so fundamental to the operation of the Service that any failures not immediately rectified will lead to Contract termination.

### 3.14 Training

Ward and Department Managers are responsible for ensuring that their staff are fully familiarised and instructed in the requirements of this Policy (and Procedures herein).

## 4 RESPONSIBILITIES

Post(s)	Responsibilities	Ref
<b>Chief Executive</b>	The Chief Executive has ultimate responsibility for ensuring compliance by the Trust and its Service Providers and sub-contractors with this Policy (and Procedures herein) and for ensuring adequate linen and laundering service provision to meet with the Trust's Infection Control Policies and HTM 01-04.	
<b>Executive Director of Nursing</b>	The Executive Director of Nursing undertakes the role of 'Director of infection Prevention and control They are responsible for overseeing the Infection Prevention Partnership Committee work programme which includes receiving quarterly reports on standards and implementation of policies relating to cleanliness, laundry & linen and decontamination.	

Post(s)	Responsibilities	Ref
<p><b>Executive Director of Operations</b></p>	<p>The Executive Director of Operations has responsibility to provide resources for laundry and linen activities to be undertaken and ensuring any breaches in hygiene standards are addressed through line management arrangements.</p> <ul style="list-style-type: none"> <li>• To ensure that staff undertake statutory and mandatory training in infection prevention and control in accordance with the Trust Training Policy.</li> <li>• To ensure that staff who are not managed by the Estates and Facilities directorate who have responsibility for laundry and linen have this detailed in job descriptions and that appropriate level of training is provided and that supervisory arrangements with the Trust Estates and Facilities team are in place to monitor standards.</li> <li>• To undertake investigations in relation to complaints of laundry and linen standards or whereby in adherence to standards have been identified in Serious Incidents relating to the management of infectious conditions.</li> </ul> <p>This responsibility is discharged through the Associate Directors of Operations to the Clinical Managers to Ward and Departmental Managers</p>	
<p><b>Executive Director of Resources</b></p>	<p>The Executive Director of Resources has responsibility for ensuring that the Trust Estates &amp; Facilities Department (via In-House or PFI/Contracted delivery) provides compliant Laundry services in compliance with the ‘Health and Social Care Act 2012, Code of Practice on the Prevention and Control of Infections and related guidance’ (DOH, December 2015). And HTM 01-04</p> <ul style="list-style-type: none"> <li>• Ensuring the Estates &amp; Facilities Services (In-House and PFI/Contracted) have sufficient resources to provide compliant Laundry services.</li> </ul> <p>The responsibility is discharged through the Director of Infrastructure &amp; Asset Management.</p>	

Post(s)	Responsibilities	Ref
<b>SSL Operations Director</b>	<p>SSL’s Operations Director has responsibility for ensuring the Trust Estates &amp; Facilities Department (via In-House or PFI/contracted delivery) delivers (and has sufficient resources to deliver) compliant Laundry.</p> <ul style="list-style-type: none"> <li>Ensuring the Trust Board is made aware of any issues which may affect the standards of Laundry in the patient environment.</li> </ul> <p>This responsibility is discharged through the Deputy Director Estates &amp; Facilities.</p>	
<b>SSL Head of Facilities Management / PFI departments</b>	<p>SSL’s Head Of Departments have responsibility for ensuring that the Trust has systems in place which comply with the “Health and Social Care Act 2012 Code of Practice on the prevention and control of infections and related guidance” (DOH December 2015) and HTM01-04 and other guidance with regard to the provision of clean Laundry and Linen – including but not limited to;</p> <ul style="list-style-type: none"> <li>Ensuring the Trust Board is made aware of any issues which may affect the standards of Laundry and Linen in the patient environment.</li> </ul> <p>To be aware of their own role and responsibilities with regard to Laundry and Linen with a view to minimising the risk of infection in accordance current legislation and best practice guidance.</p>	
<b>SSL’s Estates &amp; Facilities Department/PFI Monitoring team</b>	<p>SSL’s Estates &amp; Facilities Department is responsible for</p> <ul style="list-style-type: none"> <li>The management of in-house and outsourced Linen and Laundry Services and for ensuring these comply with this Policy (and Procedures herein) and the Trust Infection Control Policies and HTM 01-04</li> <li>Compliance with; this Policy (and Procedures herein) and HTM 01-04 and the Trust’s Infection Control Policies is written into all contracts for Laundry &amp; Linen Services.</li> <li>Ensuring contractor’s compliance is continually monitored.</li> <li>Liaising with manufacturers of Trust laundry equipment to ensure fitness for purpose.</li> <li>Responsible for the maintenance and calibration of Trust laundry equipment to ensure correct temperatures are achieved and equipment is in full working order.</li> <li>Responsible for auditing the maintenance and calibration of Trust laundry equipment and maintaining records of such.</li> </ul>	
<b>SSL’s Estates &amp; Facilities Department Lead Managers for Laundry and Linen</b>	<p>The Estates &amp; Facilities Department lead managers for Laundry and Linen will fully involve the Executive Director of Quality, Improvement and Patient Experience and Lead Nurses, Matrons, Unit Managers and the IPCT in all aspects of the Laundry services (in-house and contracted) including (but not limited to);</p>	

Post(s)	Responsibilities	Ref
	<ul style="list-style-type: none"> <li>• Development, agreement and implementation of Operational Laundry Plans for all wards and departments (including standards, tasks, frequencies, timespans and schedules as well as monitoring and audit arrangements).</li> <li>• Planning of Laundry Services for new projects.</li> <li>• Negotiation and agreement of any contracts for Laundry. &amp; Linen</li> <li>• Any proposed Laundry service reviews or changes.</li> <li>• Supporting Matrons and Unit Managers in all aspects of maintaining, monitoring, auditing and reporting on Laundry and Linen, including; Liaising with Matrons and Unit Managers in respect of all monitoring and audits of Laundry undertaken by Domestic Supervisors, Monitoring Officers and Contract Officers and Managers (in-house and PFI/contracted).</li> <li>• Providing reports to Clinical Managers, Matrons and Infection Prevention and Control Team, regarding Facilities monitoring and audits of Laundry Service.</li> <li>• Providing information to support Lead Nurses, Matrons and Unit Managers' reports and responses on Laundry.</li> </ul>	
<p><b>All managers, supervisors and staff within the Estates &amp; SSL's Facilities Department and PFI Provider's managers, supervisors and staff who have responsibilities for cleaning</b></p>	<ul style="list-style-type: none"> <li>• All managers, supervisors and staff within the Estates &amp; Facilities Department and PFI Provider's managers, supervisors and staff who have responsibilities for Laundry and Linen have current job descriptions that clearly set out their roles and responsibilities for Laundry and Linen.</li> <li>• Ensure the Laundry and Linen Service is carried out in accordance with national (NHS) guidance and Trust Infection Prevention and Control Policy and procedures and HTM 01-04</li> <li>• Have a duty of care to comply with their training and the designated method statements for Laundry and linen.</li> <li>• Ensure Laundry and Linen procedures are carried out in such a way to protect the health and safety of the staff involved and other occupants of the building(s).</li> <li>• Ensure staffing levels and the requirements of the Trust laundry and Linen Policy are met in order to provide an effective Laundry Service.</li> <li>• Ensure only appropriately trained staff are used for Laundry and Linen related tasks.</li> <li>• To be aware of their own role and responsibilities with regard to Laundry and Linen with a view to minimising the risk of infection in accordance current legislation and best practice guidance.</li> </ul>	



Post(s)	Responsibilities	Ref
	<ul style="list-style-type: none"> <li>All staff are aware of this Policy (and Procedures herein) and the relevant Infection Control Policies and their location</li> </ul>	
<b>Housekeepers</b>	<ul style="list-style-type: none"> <li>All Housekeepers who have responsibilities for Laundry and Linen will have current job descriptions that clearly set out their roles and responsibilities for Laundry and Linen.</li> <li>Monitoring of environmental Laundry and Linen standards.</li> <li>Maintaining Laundry and Linen records.</li> <li>Report any issues relating to Laundry and Linen.</li> <li>To be aware of their own role and responsibilities with regard to Laundry and Linen with a view to minimising the risk of infection in accordance current legislation and best practice guidance.</li> </ul>	
<b>Infection Prevention &amp; Control Team</b>	<ul style="list-style-type: none"> <li>Providing training and advice regarding the measures required to minimise the risk of infection and for the monitoring the effectiveness of the implementation of these measures.</li> <li>Liaise regularly with the Nursing and Domestic teams in order to ensure that required standards of infection prevention &amp; control are being achieved and maintained.</li> <li>Provide advice on any guidance or legislation that is issued in relation to infection prevention &amp; control (of which Laundry and Linen is one element).</li> <li>Provide information regarding infection rates.</li> <li>To be aware of their own role and responsibilities with regard to Laundry and Linen with a view to minimising the risk of infection in accordance current legislation and best practice guidance</li> </ul>	
<b>Clinical Managers</b>	To ensure Laundry and Linen is monitored by Matrons and any breaches or concerns regarding Laundry and Linen are reported to the Facilities Managers and included in their quarterly surveillance reports to Infection Prevention Partnership Committee	
<b>Matrons</b>	To act upon any complaints of Laundry and Linen standards and work with Facilities Managers to ensure that any action plans relating to Laundry and Linen standards are met and reporting non-compliance to the Clinical Managers and Infection Prevention and Control Team.	
<b>Ward and Team Managers</b>	<p>All Ward/Departmental Managers are responsible for ensuring that:</p> <ul style="list-style-type: none"> <li>All staff are aware of this Policy (and Procedures herein) and the relevant Infection Control Policies and their location.</li> <li>All staff complete Infection control eLearning as part of Trust Induction for an introduction to infection control within the Trust and that this is followed by the</li> </ul>	

Post(s)	Responsibilities	Ref
	<p>relevant/mandatory training that is applicable to grade/job.</p> <ul style="list-style-type: none"> <li>All staff complies with this Policy (and Procedures herein).</li> <li>Any discrepancy from this Policy is discussed with the Infection Control team so that any further education and training need can be identified.</li> </ul>	
<b>All staff</b>	<ul style="list-style-type: none"> <li>To be aware of their own role and responsibilities with regard to laundry and linen with a view to minimising the risk of infection in accordance current legislation and best practice guidance.</li> <li>To report any breaches in laundry and linen standards to the Facilities/Domestic Managers and Unit Managers.</li> </ul>	
<b>Laundry Provider</b>	<p>The Trust's Laundry Provider is required to comply with;</p> <ul style="list-style-type: none"> <li>this Policy and the Procedures herein</li> <li>HTM 01-04</li> <li>the Trust's Infection Control Policies</li> </ul> <p>The Disinfection Procedures for Linen required of the Trust's Laundry Provider are set out in Appendix 3 of this Policy.</p> <p>The Standards of Finish required of the Trust's Laundry Provider are set out in Appendix 4 of this Policy.</p> <p>The Disinfection Procedures for the Trust's Laundry Providers vehicles are set out in Appendix 3 of this Policy.</p> <p>The Technical Standards required of the Trust's Laundry Provider are set out in section 3.13 of this Policy.</p>	

## 5. DEVELOPMENT AND CONSULTATION PROCESS

Consultation summary		
Date policy issued for consultation	December 2024	
Number of versions produced for consultation	One	
Committees or meetings where this policy was formally discussed		
Clinical Governance Committee		
Infection Prevention Partnership Committee		
Where else presented	Summary of feedback	Actions / Response
PDMG	EQIA could do with some further work as it has been left blank in some places.	Updated
PDMG	repetitions/duplications in the policy, it lists responsibilities in the first section and again in section 4 so we don't need them there	Updated

	twice so if section 4 could be left in and the other taken out that would make more sense.	
PDMG	in the pillows section twice where it talks above detachable waterproof covers, it doesn't sound very clear here that it should be non-detachable waterproof covers so could this section be clearer and keep it in one place rather than duplicating it in another section.	Updated
	on the audit and assurance section is quite long, are these all-formal audits, AJ asked if Lee could double check with the IPC team and ask if all these audits are taking place and to see if it can be stripped down a bit to what we actually need as this section is very long and seems unachievable in its current state	Updated

## 6. REFERENCE DOCUMENTS

**DOH HTM 01-04 “Decontamination of Linen for Health and Social Care**

**The Health and Social Care Act 2012 Code of Practice the Prevention and Control of Infections and Related Guidance (Department of Health, updated 2015).**

**Care Quality Commission - Guidance About Compliance – Essential Standards of Quality and Safety, Outcome 8: Cleanliness & Infection Control (March 2010)**

**National Standards of Healthcare Cleanliness (NHS England, April 2021)**

**Clean, safe care – Reducing Infections and Saving Lives (DOH 2008).  
Improving Cleanliness and Infection Control (DOH 2007).**

**Essence of Care – Benchmarks for the Care Environment (DOH 2010).**

NPSA Safer Practice Notice 15 “Colour coding hospital cleaning materials and equipment” (10 January 2007).

**Supplementary Procedure – Annex B Decontamination Policy.**

**BSMHFT Infection Prevention and Control Overarching Policy.**

**BSMHFT Waste Disposal Policy.**

**HSE Biological agents – The principles, design, and operation of Containment Level 4 facilities (Hazard Group 4 Pathogens) (2005)**

**BS ISO 9001 Quality Management**

**Health Technical Memorandum 05-03: Operational provisions Part C  
– Textiles and furnishings (June 2007)**

**7. BIBLIOGRAPHY**

As above.

**8. GLOSSARY**

“BSMHFT”	Birmingham and Solihull Mental Health NHS Foundation Trust
“INFECTED/INFESTED LINEN”	Refers to all linen from patients with a known or suspected infection/infestation – <b>see Appendix 2</b>
“IPCT”	(Trust) Infection Prevention & Control Team
“IPPC”	(Trust) Infection Prevention Partnership Committee
“LINEN”	Refers to all articles that need laundering
“SLA”	Service Level Agreement
“SSL”	Summerhill Services Limited – wholly owned subsidiary.
“Trust”	Birmingham and Solihull Mental Health NHS Foundation Trust
“USED LINEN”	Refers to all linen that has been used. For example sheets, blankets, nightwear etc.
“USED (FOULED) LINEN”	Refers to any linen that has been heavily soiled by blood and bodily fluids.
“USED (SOILED)”	Refers to all linen that has been used but that is lightly soiled. For example lightly soiled sheets, blankets, nightwear etc. that would not cause any risk of splash to the laundry worker.

**9. AUDIT AND ASSURANCE**

Element to be monitored	Lead	Tool	Freq	Reporting Arrangements
Quality of linen provided	Senior Contract & Commercial Services Manager & Senior Facilities Managers	Audit Pro-Forma KPI data from provider	Quarterly	IPPC
Monitoring of Quality	Senior Contract & Commercial Services Manager & Senior Facilities Managers	Audit Pro-Forma KPI data from provider	Monthly	IPPC
Monitoring of Technical Standards	Senior Contract & Commercial	Audit Pro-Forma	Annually	IPPC

	Services Manager & Senior Facilities Managers	KPI data from provider		
Monitoring of (linen) rejects	Senior Contract & Commercial Services Manager & Senior Facilities Managers	Audit Pro-Forma KPI data from provider	Quarterly	IPPC

## 10. APPENDICES

- APPENDIX 1** Equality Analysis Screening Form
- APPENDIX 2** Linen Segregation Colour Coding
- APPENDIX 3** Infected/Infested Linen
- APPENDIX 4** Disinfection Laundry Procedures (Based on CFFP 01-04)
- APPENDIX 5** Type of Finish Required
- APPENDIX 6** Cleansing & Disinfection of Vehicles Used for Transporting Linen (Incorporated in CFFP 01-04)
- APPENDIX 7** Quality Inspection Pro-Forma
- APPENDIX 8** Guidance to Patient/Carer/Relative for Washing Patient's Own Clothing
- APPENDIX 9** Guidance to Carer/Relative for Laundering Soiled/ Infected Patient's Own Clothing

### Equality Analysis Screening Form

A word version of this document can be found on the HR support pages on Connect

<http://connect/corporate/humanresources/managementsupport/Pages/default.aspx>

<b>Title of Policy</b>	<b>Laundry and Linen Policy</b>		
<b>Person Completing this policy</b>	Lee Gough	<b>Role or title</b>	Head Of Facilities Management
<b>Division</b>	Estates and Facilities	<b>Service Area</b>	Trust wide
<b>Date Started</b>	01/12/2024	<b>Date completed</b>	01/12/2024
<b>Main purpose and aims of the policy and how it fits in with the wider strategic aims and objectives of the organisation.</b>			
This Policy is written with reference to the DOH Health Technical Memorandum (HTM) 01-04 Decontamination of Linen for Health and Social Care. Its overall objective is to provide Trust Staff and Service Providers with the relevant guidance so that they can protect themselves and patients from risks posed by handling used, soiled and infected linen.			
<b>Who will benefit from the policy?</b>			
Trust Staff, Service Users and Carers and Laundry Staff			
<b>Does the policy affect service users, employees or the wider community?</b> <i>Add any data you have on the groups affected split by Protected characteristic in the boxes below. Highlight how you have used the data to reduce any noted inequalities going forward</i>			
This Policies overall objective is to provide Trust Staff and Service Providers with the relevant guidance so that they can protect themselves and patients from risks posed by handling used, soiled and infected linen.			
<b>Does the policy significantly affect service delivery, business processes or policy?</b> <i>How will these reduce inequality?</i>			
No			

<b>Does it involve a significant commitment of resources? How will these reduce inequality?</b>				
Resource in place				
<b>Does the policy relate to an area where there are known inequalities? (e.g. seclusion, accessibility, recruitment &amp; progression)</b>				
No				
<b>Impacts on different Personal Protected Characteristics – Helpful Questions:</b>				
<i>Does this policy promote equality of opportunity? Eliminate discrimination? Eliminate harassment? Eliminate victimisation?</i>			<i>Promote good community relations? Promote positive attitudes towards disabled people? Consider more favourable treatment of disabled people? Promote involvement and consultation? Protect and promote human rights?</i>	
<b>Please click in the relevant impact box and include relevant data</b>				
<b>Personal Protected Characteristic</b>	<b>No/Minimum Impact</b>	<b>Negative Impact</b>	<b>Positive Impact</b>	<b>Please list details or evidence of why there might be a positive, negative or no impact on protected characteristics.</b>
<b>Age</b>	✓			It is anticipated that age will not have a negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner irrespective of their age.
Including children and people over 65 Is it easy for someone of any age to find out about your service or access your policy? Are you able to justify the legal or lawful reasons when your service excludes certain age groups				
<b>Disability</b>	✓			It is anticipated that disability will not have a negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner

				irrespective of their disability. Reasonable adjustments will be made to staff members who declare their disability.
Including those with physical or sensory impairments, those with learning disabilities and those with mental health issues Do you currently monitor who has a disability so that you know how well your service is being used by people with a disability? Are you making reasonable adjustment to meet the needs of the staff, service users, carers and families?				
<b>Gender</b>	✓			It is anticipated that gender will not have a negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner irrespective of their gender.
This can include male and female or someone who has completed the gender reassignment process from one sex to another Do you have flexible working arrangements for either sex? Is it easier for either men or women to access your policy?				
<b>Marriage or Civil Partnerships</b>	✓			It is anticipated that being married or in a civil partnership will not have a negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner irrespective of their relationship status.
People who are in a Civil Partnerships must be treated equally to married couples on a wide range of legal matters Are the documents and information provided for your service reflecting the appropriate terminology for marriage and civil partnerships?				
<b>Pregnancy or Maternity</b>	✓			It is anticipated that pregnancy will not have a negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner irrespective of them being pregnant Reasonable adjustments will be made to staff members who declare their pregnancy.
This includes women having a baby and women just after they have had a baby Does your service accommodate the needs of expectant and post natal mothers both as staff and service users? Can your service treat staff and patients with dignity and respect relation in to pregnancy and maternity?				



<b>Race or Ethnicity</b>	✓			It is anticipated that race or ethnicity will not have a negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner irrespective of their race or ethnicity.
Including Gypsy or Roma people, Irish people, those of mixed heritage, asylum seekers and refugees What training does staff have to respond to the cultural needs of different ethnic groups? What arrangements are in place to communicate with people who do not have English as a first language?				
<b>Religion or Belief</b>	✓			It is anticipated that religion or belief will not have a negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner irrespective of their religion or belief.
Including humanists and non-believers Is there easy access to a prayer or quiet room to your service delivery area? When organising events – Do you take necessary steps to make sure that spiritual requirements are met?				
<b>Sexual Orientation</b>	✓			It is anticipated that sexual orientation will not have a negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner irrespective of their sexual orientation.
Including gay men, lesbians and bisexual people Does your service use visual images that could be people from any background or are the images mainly heterosexual couples? Does staff in your workplace feel comfortable about being 'out' or would office culture make them feel this might not be a good idea?				
<b>Transgender or Gender Reassignment</b>	✓			It is anticipated that being transgender or having gender reassignment will not have a negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner irrespective of them being transgender or having gender reassignment.
This will include people who are in the process of or in a care pathway changing from one gender to another				

Have you considered the possible needs of transgender staff and service users in the development of your policy or service?				
<b>Human Rights</b>	✓			<p>This policy is written to promote equality and remove any discrimination to ensure that everyone can fulfil their full potential within a Trust that is inclusive, compassionate, and committed. This is keeping in line with our Trust values, the NHS People’s Plan commitment to equality, diversity and inclusion and reflects the provisions of the Equality Act 2010.</p> <p>This policy applies to <b>all</b>, including applicants applying for a job, staff including agency, bank and volunteers, services users and carers, visitors, stakeholders, an any other third-party organisations who work in partnership with the Trust.</p>
Affecting someone’s right to Life, Dignity and Respect? Caring for other people or protecting them from danger? The detention of an individual inadvertently or placing someone in a humiliating situation or position?				
<b>If a negative or disproportionate impact has been identified in any of the key areas would this difference be illegal / unlawful? I.e. Would it be discriminatory under anti-discrimination legislation. (The Equality Act 2010, Human Rights Act 1998)</b>				
	<b>Yes</b>	<b>No</b>		
<b>What do you consider the level of negative impact to be?</b>	<b>High Impact</b>	<b>Medium Impact</b>	<b>Low Impact</b>	<b>No Impact</b>
				✓
If the impact could be discriminatory in law, please contact the <b>Equality and Diversity Lead</b> immediately to determine the next course of action. If the negative impact is high a Full Equality Analysis will be required.				

If you are unsure how to answer the above questions, or if you have assessed the impact as medium, please seek further guidance from the **Equality and Diversity Lead** before proceeding.

If the policy does not have a negative impact or the impact is considered low, reasonable or justifiable, then please complete the rest of the form below with any required redial actions, and forward to the **Equality and Diversity Lead**.

**Action Planning:**

How could you minimise or remove any negative impact identified even if this is of low significance?

The consultation process will be undertaken in liaison with HR, control of infection and any other stakeholders as appropriate, to ensure the process gives adequate consideration to any equality issues that are identified.

How will any impact or planned actions be monitored and reviewed?

Consultation will allow staff to raise concerns and submit flexible working applications accordance. The process will be governed by the Trusts control of infection committee.

How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic.

All staff will be treated equitably throughout the consultation process. The process will be transparent and open; support will be arranged in liaison with HR as appropriate.

Please save and keep one copy and then send a copy with a copy of the policy to the Senior Equality and Diversity Lead at [bsmhft.edi.queries@nhs.net](mailto:bsmhft.edi.queries@nhs.net). The results will then be published on the Trust's website. Please ensure that any resulting actions are incorporated into Divisional or Service planning and monitored on a regular basis

## LINEN SEGREGATION COLOUR CODING

### OXWASH LAUNDRY SOILED LINEN INSTRUCTIONS

PLACE ALL SOILED LINEN INTO WHITE PLASTIC BAGS.

USED LINEN  
(bedsheets, towels, scrubs etc)



White plastic bag

### FOR INFECTED LINEN

FIRST PUT INFECTED LINEN (i.e. CONTAMINATED WITH BLOOD/ BODILY FLUIDS/ URINE/ FAECES OR FROM ANY ISOLATION WARD) INTO A **PLASTIC RED ALGINATE dissolvable please BAG** AND THEN PLACE INTO A WHITE PLASTIC BAG.

FOUL & INFECTED LINEN  
(items contaminated with bodily fluids, blood, gastrointestinal liquids etc)



Red alginate bag inside a white plastic bag

**ALGINATE BAG  
CONTAINING  
INFECTED LINEN**

### FOR ANY REJECTED LINEN

If this should occur

PUT REJECT LINEN INTO A SEPARATE PINK PLASTIC BAG with a piece of paper briefly explaining the issues AND STICK A LABEL ON THE OUTSIDE OF THE BAG MARKED

**F.A.O. 'Oxwash**

AND RETURN WITH THE REST OF THE SOILED LAUNDRY

ALL REJECTED LAUNDRY IS INSPECTED ON RETURN AND REPLACED ON THE NEXT DELIVERY.

### FOR HOSPITAL OWNED ITEMS.

PUT ITEMS INTO A BLUE PLASTIC LAUNDRY BAG. If items are infected place in RED DISOLVABLE BAG THEN PLACE IN BLUE PLASTIC BAG

**CUSTOMERS OWN LINEN**  
(lab coats, curtains, clothing etc)



Sky Blue Reusable Zipper Bags.  
All items must be labelled with the Owner,  
Department and Building.  
Use red alginate bag inside blue bag if  
items Foul & Infected

## LINEN SEGREGATION COLOUR CODING

**Oxwash**



### Colour coding of laundry bags

**USED LINEN**  
(bedsheets, towels, scrubs etc)



White plastic recyclable bag

**FOUL & INFECTED LINEN**  
(items contaminated with bodily fluids, blood, gastrointestinal liquids etc)



Red alginate bag inside a white plastic bag

**REJECTED LINEN**  
(items torn, stained or unfit for use)



Pink plastic bag.

Ensure reject submission with team lead or on Oxwash platform.

**CUSTOMERS OWN LINEN**  
(lab coats, curtains, clothing etc)



Sky Blue Reusable Zipper Bags.

All items must be labelled with the Owner, Department and Building.

Use red alginate bag inside blue bag if items Foul & Infected

**Please ensure all bags are tied closed as otherwise they will not be collected.**

**ALL linen must be returned to Oxwash and never discarded or recycled ourselves.**

CCLB v1.3

**INFECTED/INFESTED LINEN**

This category includes all linen from patients with a known or suspected Infection/infestation. Examples are given in the Table below

<b>EXAMPLES</b>	
<b>INFECTED</b>	<p>Clostridium difficile</p> <p>Diarrhoea and/or vomiting (of known and unknown cause)</p> <p>Typhoid and Paratyphoid fever</p> <p>MRSA</p> <p>Glycopeptide resistant Enterococcus (GRE, VRE)</p> <p>Mycobacterial infection</p> <p>Chicken pox and shingles</p> <p>Linen contaminated with blood or body fluids</p> <p>Any other infection on the instruction of the Infection Prevention Team <i>“or as highlighted on the Notifications of infectious diseases (NOIDs) weekly letter from Gov.uk”</i></p>
<b>INFESTED</b>	<p>Lice</p> <p>Fleas</p> <p>Scabies</p>

**DISINFECTION LAUNDRY PROCEDURES (BASED ON HTM 01-04)**

**1. INTRODUCTION**

This schedule sets out the process and procedures to be followed by contractors undertaking hospital laundry work.

**2. CATEGORIES OF LINEN**

2.1 Hospital bedding can form a large reservoir of certain pathogenic bacteria, compliance with suitable handling and disinfection procedures are therefore essential. All used linen has to be handled several times between leaving the patient's bedside and disinfection by washing. To ensure such linen is handled safely and efficiently it is necessary to categorise types of used linen and to identify handling procedures for each category.

2.2 Hospitals may sort dirty linen into several different categories for operational convenience. However this schedule is concerned only with categorisation of linen according to infection risk. In this respect linen will be considered to fall into one of three categories i.e. soiled, fouled and infected and heat labile.

**3. DISINFECTION OF SOILED LINEN**

3.1 This category amounts for the vast amount of used linen from hospitals. For transportation soiled linen will be placed into bags in accordance with schedule 5 of this contract. Bags will be securely fastened before being sent to the laundry.

3.2 The washing process will adhere to the disinfection standards outlined in the HTM01-04 guidance and in compliance with EN14065 certification. Processes for disinfection could include but are not limited to thermal, chemothermal or radiological disinfection. Thermal methods include a disinfecting stage in which the washload temperature is maintained at 150°F (65°C) for ten minutes or 160°F (71°C) for three minutes. A disinfection measure of at least a log5 reduction in bacterial CFU is required on all soiled healthcare items.

3.3 Continuous washing machines and other machines of new design which incorporate novel washing process will be considered individually to determine satisfactory disinfection conditions for each type and to ensure that there is no possibility of recontamination after the disinfection stage. The special requirements for continuous batch washing machines are set out in paragraph 8 of the schedule.

- 3.4 All washing machines should be fitted with accurate thermometers of which sensing elements are correctly placed to register the true wash temperature i.e. the temperature of the wash water in contact with the load, and the thermometers should be checked monthly and appropriate records maintained.
- 3.5 All washing machines should be dosed automatically by dosing equipment calibrated regularly to ensure consistent addition of chemistry into the wash process. This is especially important in chemothermal and chemical disinfection processes
- 3.6 The purchase of fabrics that are not compatible with the above disinfection processes should not be purchased

#### **4. DISINFECTION OF HEAT LABILE LINEN**

- 4.1 Heat labile materials e.g. patients clothing manufactured from knitted polyester etc., needs to be washed at low temperatures (40°C) to avoid shrinkage. Tumble dryers and calendars should be avoided wherever possible. Under these operational conditions thermal disinfection is inappropriate and bacteria can multiply.
- 4.2 Disinfection with chemicals at low temperature is possible, but these agents especially active oxygen (ozone), hypochlorite's and peracetic acids (PAA), may be inactivated by soap or soiling. However in clean conditions hypochlorite's are active in concentrations low enough not to damage the fabric.
- 4.3 Heat labile materials will be disinfected by the addition of sodium hypochlorite and/or peracetic acid of at least 150ppm Cl<sup>-</sup> and >75 ppm PAA into the wash process. Ozone may be used where the concentration throughout the main wash phase is maintained at no less than 5 ppm. to the penultimate rinse. The rinse will be of five minute duration and sufficient sodium hypochlorite will be added to achieve a solution of 150ppm available chlorine. Ozone

#### **5. DISINFECTION OF FOULED AND INFECTED/HIGHLY INFECTED LINEN**

- 5.1 This linen requires special handling as it originates from patients having communicable infections. Most infected linen can be treated satisfactorily by laundering without undue risk, whilst other kinds of infected linen e.g. Lassa fever, anthrax etc., must be autoclaved or destroyed by incineration on the advice of the Trust Infection Control Team (IPCT) and out of hours the duty Consultant Microbiologist.
- 5.2 Infected linen which can be laundered satisfactorily includes:-
  - Enteric Fever
  - Dysentery
  - Open Pulmonary TB
  - Blood borne viruses, Hepatitis, B,C and HIV



- Any other infection allocated to this group by Infection Control Staff/ Consultant Medical Staff.
- 5.3 Infected linen which must not be laundered includes category A pathogens referred to in HSE *“Biological agents – The Principles, design and operations of Containment Level 4 Facilities”* e.g. Lassa virus and Crutzfeld-Jacob disease.
- 5.4 Infected linen which can be disinfected by laundering (listed in Para 5.2) must be handled as set out in section 3.2.iii of this policy .
- 5.5 Laundries handling hospital linen must have a designated area for handling infected linen and a designated machine where all highly infected linen must be processed. Under no circumstances should linen of this type be sent for laundering to third party providers.
- 5.6 The recommendations on the washing process for soiled linen regarding the thermal disinfection stage also applies to the process for fouled and infected linen as outlined above in section 3.2 of this policy. For example for thermal disinfection, Generally for processing infected linen it is necessary to provide as the first part of the washing process a sluice cycle, at a temperature below 100°F (37.8°C), to remove soiled faecal soiling and blood stains. The process usually follows with two wash cycles, the first at about 140°F (60°C) and the second at either (65°C) for 10 minutes or (71°C) for not less than 3 minutes. The washing stage is completed with either two or three rinses as necessary, to reduce the residual alkalinity remaining in the textile. A fabric conditioner can be added at this stage. Disinfection no matter the methodology should yield no less than a log5 reduction in CFU as per the HTM01-04 guidance.

## 6. DESIGN FEATURES TO REDUCE CROSS CONTAMINATION

- 6.1 Effluent drains from washer extractors, tipping washer and tunnel washers processing infected linen must be sealed from the machine dump outlet to the drain, to prevent cross infection. Also if the machines dump into an open sump or pit immediately below the machine drain valve this should be covered to prevent the risk of the spread of bacteria by the aerosol effect when the water is dumped from the machine.

## 7. PROTECTION OF LAUNDRY WORKERS

- 7.1 Infectious conditions amongst laundry workers should be reported. Those with gastro-intestinal illness should not be permitted to work while symptoms persist. Those with infective lesions on the hands or arms must not be permitted to handle clean linen supplies until the condition has resolved. All cuts and abrasions of the hands should be protected while at work.

- 7.2 All staff handling dirty linen should wear appropriate protective clothing which must be removed before going to the canteen, staff common rooms, outside the laundry or entering clean areas within the laundry. Gloves and a protective gown must be worn when sorting soiled linen. Fouled and infected linen should not be sorted and should remain in red alginate bags entering the wash process..
- 7.3 The Trust will reserve the right to question the employment of any individual on health grounds.

## **8. BATCH CONTINUOUS WASHING MACHINE**

8.1 All batch continuous washers used for processing hospital work forming part of this contract must be fitted with the necessary apparatus to ensure work being processed is not re-contaminated during the rinse stages of the wash process. To satisfy this requirement rinse sections must be thermally or chemically disinfected before production commences each working day. Third parties should adhere to their EN14065 compliance handbooks at all times and maintain HTM01-04 protocols.

8.2 Thermal Disinfection Guidance:

8.2.1 The apparatus used to thermally disinfect rinse sections of the bath continuous washing machine must be interlocked with temperature control and the normal running control of the machine in order to prevent the machine being set to work before thermal disinfection of the cool stages of the machine have been satisfactorily completed to comply with HTM01-04 and adhere to the EN14065 handbook

- 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 ten minutes, or a temperature of 71°C for a period of no less than 3 minutes. During this period the wash cage shall be revolved through 360 degrees so that all surfaces in contact with the linen are chemically thermally disinfected.
- The disinfection process should be controlled and verified using methods outlined in the HTM01-04 approved by the EN14064 standard. These could include but are not limited to DES or PES controller testing and those outlined in BS EN
- ISO 14698-1.

8.3 Due to the growth of bacteria which has been found to take place overnight, it will be necessary to run out all linen from the batch continuous washing machine at the end of the day to avoid re-infection. For operations that run 24 hours a day this is not necessary. The adequacy of disinfection procedures will also be considered in the following ancillary areas:

- Tanks which are used to collect water for re-use within the batch continuous washer, from the extraction device of conveyor leading

from the washer to the extractor.

- If the installation of a heat exchanger in the recovered water system is envisaged, special consideration to thermal disinfection needs must be given.

**APPENDIX 5**

**TYPE OF FINISH REQUIRED by laundry provider this is a generic list not all items will be required by the Trust.**

<b>Articles</b>	<b>Calendar</b>	<b>Fully dried &amp; folded</b>
Counterpanes	X	
Sheets – Bed	X	
Sheets – Draw	X	
Sheets - Cot	X	
Cuddlies/ Flannelette Sheets	X	X
Pillow Cases	X	
Bath Towels		X
Hand Towels		X
Blankets		X
Bags Red		X
Laundry Hampers & Bags		X
Bags White		X
Uniforms		
White Coats		
Barrier Gowns (Ctn)	X	
Barrier Gowns (Poly)		X
Dressing Gowns		X
X-Ray Gowns (Ctn)	X	
Night Gowns		X
Surgeon Gowns		
Patient O.P Gowns (Ctn)	X	
Patient O.P Gowns (Polycn)		X
Pyjama Tops		
Pyjama Bottoms		
Stretcher Canvasses		X
Personal Day Clothing		
Scrub Suit Bottoms		
Scrub Suit Tops		
Drapes		X
Duvet Covers	X	
Bath Mats		X
Nappies		X
Vests		X
Ladies/Gents Pants		X
Baby Wraps (Ctn)	X	
Baby Wraps (Polycn)		X
Curtains	X	

## **CLEANSING AND DISINFECTION OF VEHICLES USED FOR TRANSPORTING LINEN (INCORPORATED IN CFFP 01-04)**

This section gives the general requirements of the Trust in respect of cleaning and disinfecting vehicles used for transport of clean laundry; at contract stage the wording of the schedule may be adjusted to reflect any further detailed arrangements which may be agreed with the successful tenderer.

Any interpretation of these requirements or further questions should be clarified by contact with the Trust's Control of Infection Officer.

### **1. If separate vehicles are designated exclusively and permanently for clean and dirty (i.e. soiled and/or fouled/infected) articles:**

1.1 The clean vehicles should be cleansed using a method which the Company would normally employ for its vehicles, provided that the procedure and frequency is notified to and agreed by the Trust's Infection Prevention and Control Team.

1.2 The dirty vehicles; the area for the carriage of linen must be cleaned at least weekly using anionic detergent with particular attention paid to the floor. On any occasion on which there has been spillage of foul/infected linen, or evidence suggesting such, the vehicle should be cleansed using an approved detergent sanitizer.

### **2. If vehicles are used to carry both clean and soiled and/or infected articles, BUT NOT AT THE SAME TIME:**

2.1 The vehicles must be cleansed after each usage for soiled and/or fouled/infected articles, and before use for clean linen, using an anionic detergent with particular attention being paid to the floor; and in any case at least weekly.

2.2 On any occasion on which there has been spillage of foul/infected linen, or evidence suggesting such, the vehicle should be cleansed using an approved detergent sanitizer.

2.3 'Normal' cleansing methods (see 4.1 above) should be used where the vehicle is used for longer periods solely for clean linen.

### **3. If both clean and soiled or fouled/infected linen are to be carried in the same van AT THE SAME TIME.**

3.1 There must be effective separation of the two areas within the van. This may be either by permanent physical division of the van or by the use of Polythene waterproof Covers to cover the cages containing the soiled and foul/ infected linen, approved by the Control of Infection Officer.

3.2 The clean area should be cleansed using a method which the Company would normally employ for its vehicles, provided that the procedure and frequency is notified to and agreed by the Trust's Infection Prevention and Control Team.

3.3 **The dirty area** or containers must be cleansed on a daily basis using anionic detergent.

#### **4. Transport/disinfection of vehicles used for transporting clean articles**

The manner of Disinfection of vehicles used for the transportation of clean articles from the Laundry to the Trust site must be approved by the Trust's Infection Prevention and Control Team.

4.1 The Trust's Infection Prevention and Control Team may re-specify the manner in which vehicles are disinfected during the contract period as required.

4.2 The Contractor is required to allow access at all times to the Trust's Infection Prevention and Control Team at each Laundry site or sites at which the Trust's linen is being processed to audit controls and procedures used within.

4.3 Whenever dirty articles have been conveyed the interior should be scrupulously cleaned including the floor and all sides using a pressure spray with an approved disinfectant. In any event this should be carried out on a daily basis.

4.4 Dirty articles and clean articles should never be carried in the same vehicle at the same time, unless effectively separated by a water proof partition or barrier.

4.5 The Contractor is responsible for loading and unloading at each delivery and/or collection point.

**The above items may be delegated to the Trust's Contract Monitoring Team to carry out on behalf of the Trust's Infection Prevention and Control Team.**

4.6 The vehicles to be used in the provision of the service shall be subject to inspection by the Trust's Contract Monitoring Team.

**QUALITY INSPECTION PRO FORMA**

<b>ITEM</b>	<b>SHEETS</b>	<b>DRAW SHEETS</b>	<b>PILLOW CASES</b>	<b>UNIFORMS</b>	<b>COUNTER-PANES</b>	<b>TOTAL QUANTITY</b>
<b>Quantity</b>						
<b>Elements</b>						
<b>Creasing</b>						
<b>Wrinkling</b>						
<b>Dimensional Distortion</b>						
<b>Residual Moisture Retention</b>						
<b>Folding</b>						
<b>Damage</b>						
<b>No. of Failures</b>						
<b>% of Total</b>						

**Note:**

The above Pro-forma illustrates the monitoring principle. The Trust reserves the right to extend the range of items monitored (e.g. towels etc.) at any time during the contract period in the light of operational experience. Any addition will be added accordingly.

**GUIDANCE TO PATIENT/CARER/RELATIVE FOR WASHING  
PATIENT'S OWN CLOTHING**

Dear Patient/Relative/Carer

The responsibility for laundering of Patient's Personal Clothing is the responsibility of the Patient/Relative/Carer whenever possible.

The Ward Staff will use appropriate bags for Patient's Own clothing and place this in the Patient's bag.

Patients may undertake the laundering of their own clothing in the Laundry facilities on the Ward (under supervision of the ward staff). Infected or potentially infected clothing cannot be washed on the Ward.

The Carer/Relative may wish to take the clothing away to be washed and this should be carried out with the clothes within the bag they were placed in by Ward Staff.

Once laundered, the clothing can be returned to the patient.

If the clothing is thought to be infected, then the procedure outlined in Appendix 8 should be followed carefully.

If the potentially infected clothing cannot be washed by a carer/relative then it must be sent to the Trusts Contracted laundry provider in the appropriate bags as outlined in the Laundry Policy.



**GUIDANCE TO CARER/RELATIVE FOR LAUNDERING SOILED/  
INFECTED PATIENT'S OWN CLOTHING**

Dear Carer/Relative

The responsibility for the laundering of personal items of clothing remains the responsibility of the patient / relative / friend.

Patients may undertake the laundering of their own clothing in the Laundry facilities on the Ward (under supervision of the ward staff).

The Trust acknowledges that at times there may be contaminated items i.e. from patients with MRSA or *Clostridium difficile* or soiled items that need laundering. Staff, however are not able to 'sluice' or wash these items safely within the Trust. The purpose of this guidance is to assist you in the safe handling and laundering of these items.

All items of patients clothing from an 'infected' patient or that have been contaminated will be placed in a water soluble bag inside a patient property bag. The bag will be named and dated if it contains items of clothing that have been soiled.

The bag will then be placed either in the patients locker or kept in the sluice if heavily soiled.

The water soluble bag has a strip that dissolves in domestic washing machines at normal temperatures allowing the bag to open and release the clothes. Once the cycle has finished, the bag can then be removed. The bag should not be placed in tumble driers.

Although soiled/ infected clothing has been identified as a source of infection, the risk of spread of disease is low if handled correctly.

- The water soluble bag should be handled as little as possible and placed directly into the washing machine using Marigold/rubber gloves. If you do not have gloves available, please ask a member of nursing staff who will give you some disposable gloves.
- These items of clothing should be washed separately from other Household clothing items.
- If possible a pre wash cycle should be used first.
- Clothing should be washed at the hottest temperature that the clothing will withstand, using detergent.
- Clothing should be thoroughly dried ideally in a tumble dryer, where possible, and then ironed.
- Wash hands after handling soiled clothing
- If Marigold gloves are used, wash them and keep the gloves for handling your relatives clothing or use a fresh pair of disposal gloves each time.

If you do not wish to take the clothing home to wash then it will be sent to the Trust's Contracted Laundry Provider for washing. It should be pointed out that the Contracted Laundry wash at very high temperatures and delicate items may be damaged by the process.