

Linen Services Policy

Issue Date	Review Date	Version
February 2019	February 2024	10

Purpose

To ensure compliance with HTM-01-04 Decontamination of linen for health and social care and in so doing to:-

- Reduce the risk of hospital acquired infection due to the handling of contaminated linen
- Reduce the risk of inoculation injuries associated with the handling of linen
- Meet patient expectations in regards to the standard of linen provided

Who should read this document?

This document is applicable to all staff including Ministry of Defence (MOD) personnel, contractors, those employed on a fixed term contract, honorary contract, agency and locum staff, students affiliated to educational establishments and volunteers.

Key Messages

- Clean linen must be protected from contamination at all stages of delivery, storage and handling
- Clean linen should be stored in a dedicated room or trolley well away from used or infected linen
- Linen storage areas should be used solely for clean linen and other clean items associated with the linen service
- Linen should be rotated frequently and not be stored for prolonged periods of time
- Linen storage areas should be subject to daily cleaning and be deep cleaned as part of the ward/department deep cleaning programme
- Linen items found to be damaged, torn or stained should be returned to the Linen Room Level 2 for return to the Laundry
- Clean linen should not be left out uncovered in clinical areas if not required
- All linen, whether clean or used should be handled with minimal agitation to minimise airborne environmental contamination by micro-organisms and there-by risk of cross infection
- Ensure that extraneous objects such as pillows, gloves, patients personal belongings, clinical equipment, mobile phones/bleeps etc are not gathered up with used linen and placed in laundry bags
- Comply with the laundry colour code system detailed in Section 5
- ALWAYS ensure that soiled, foul, infested and high risk infected linen is placed in a water soluble bag prior to placing in the appropriate coloured, disposable plastic laundry bag.
- Disposable plastic laundry bags should NEVER be filled over 2/3rds full
- Bags of laundry should be taken directly to the waste hub and placed on the cage provided.
- Linen cages provided by the Laundry should NOT be used for any other purpose other than the delivery, transportation and collection of linen
- Disposable curtains are advocated in clinical areas. All curtains should be changed/laundried on a scheduled basis according to the risk category of the area, when visibly soiled or potentially contaminated.
- Laundry facilities must not be provided in ward or department areas without suitable and sufficient risk assessment to ensure compliance with current national guidance i.e. HTM 01-04 and without the approval of Infection Prevention & Control
- External providers of linen and laundry services to the trust must be evaluated and selected with reference to their compliance with BS EN 14065 or EQR (Essential Quality Requirements) and progress to BP (Best Practice) as detailed in current national guidance i.e. HTM 01-04

Core accountabilities	
Owner	Service Lead for Hotel Services - Facilities
Review	Cleanliness Assurance Group
Ratification	Director of Nursing/Chief Nurse
Dissemination (Raising Awareness)	Service Lead for Hotel Services - Facilities
Compliance	HTM-01-04 Decontamination of linen for health and social care. The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections CQC Essential Standards of Quality & Safety

Links to other policies and procedures

Version History

1	August 1998	
2	April 1999	
3	August 2002	
4		
5	July 2006	
6	June 2008	
7	May 2010	
8	May 2012	Update of version 7 of the Linen Services Guidelines
9	November 2013	Update of Version 8 as a result of new guidance CfPP 01-04 Decontamination of linen for health
10	February 2019	Agreed an approved at Infection Control Committee

The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on Trust Documents. Larger text, Braille and Audio versions can be made available upon request.

Contents

Section	Description	Page
1	Introduction	4
2	Purpose, including legal or regulatory background	4
3	Definitions	4
4	Duties	5
5	Main Body of Policy	6
6	Overall Responsibility for the Document	10
7	Consultation and Ratification	10
8	Dissemination and Implementation	10
9	Monitoring Compliance and Effectiveness	11
10	References and Associated Documentation	11
Appendix 1	Dissemination Plan and Review Checklist	12
Appendix 2	Equality Impact Assessment	13
Appendix 3	Contact Numbers and Details	15
Appendix 4	Storage, Handling and Disposal of Linen Audit Form	16

1 Introduction

Patients have a right to expect care to be provided in a clean and safe environment that is fit for purpose and based on national best practice. This includes the range of support services such as the provision of a linen and laundry service that reduces the risk of cross-infection and enhances patient experience.

Laundry and its products should preserve the patient dignity, promote patient care and be appropriate to the patient group, gender, clinical status, religion and beliefs.

Laundry to be provided and used by care providers should be fit for purpose. It should:-

- Be laundered by a laundry provider whose service meets the Essential Quality Requirements (EQR) as laid down in national guidance HTM 01-04 Decontamination of linen for health and social care
- Look visibly clean
- Be of the right material
- Not be damaged or discoloured.

2 Purpose

The purpose of this document is to ensure compliance with HTM 01-04 Decontamination of linen for health and social care which supersedes the document CfPP-01-04 Choice Framework for Local Policy and procedures and the previous HSG (95)18 – Guidelines for processing healthcare textiles.

The purpose of HTM 01-04 is to provide a structure that will enable local decision making regarding the management, use and decontamination of healthcare and social care linen.

Compliance with HTM 01-04 is intended to:-

- Reduce the risk of hospital acquired infection due to the handling of contaminated linen
- Reduce the risk of inoculation injuries associated with the handling of linen
- Meet patient expectations in regards to the standard of linen provided
- Ensure patient safety and enhanced outcomes.

This document applies to all areas of the trust where linen is used and should be read by all staff who work and handle linen in these areas.

3 Definitions

EQR – Essential Quality Requirements for the purposes of the HTM 01-04 guidance is a term that encompasses all existing statutory and regulatory requirements.

BP – Best Practice.

4 Duties

Chief Executive

The Chief Executive is responsible for the allocation of resources and the appointment of suitably qualified personnel to manage the laundry contract and linen service.

Head of Facilities

The Head of Facilities has overall responsibility for the management of the external Laundry contract and the provision of the linen service on site.

Service Lead – Hotel Services

The Service Lead – Hotel Services is responsible for the operational management of the external laundry contract and the provision of the linen service on site. The Service Lead has responsibility for ensuring that the facilities and procedures carried out in the central Linen Room, whether provided by contracted or trust staff comply with national guidance.

Facilities Support Managers

The Facilities Support Managers assist with the day to day liaison with the external Laundry provider and the personnel responsible for the management and operation of the linen service on site. This role includes responsibility for monitoring and auditing all aspects of the linen service and liaison with the linen users.

Matrons/Ward Managers

Matrons & Ward/Department Managers are responsible for ensuring that adequate stock of linen is ordered for the areas under their control and that all linen provided is stored and handled safely in accordance with national guidance and local procedures. This includes the correct and safe handling of used linen.

Users

The User is defined as any member of staff who handles hospital provided linen in the course of their duties. The User is responsible for complying with the relevant key messages listed on Page 1 of this document.

Infection Prevention & Control Team

The Infection Prevention & Control Team are responsible for:-

- Reviewing and approving this document
- Providing advice when evaluating tenders and awarding new contracts for the provision of Laundry services
- Approving requests for ward/department based laundry facilities
- Monitoring compliance with this document as part of their programme of auditing Infection Control standards.

Hotel Services provider

The Hotel Services provider (whether contractor or in-house) is responsible for the provision of portering and housekeeping services and is therefore responsible for the picking/packing, internal distribution and packing away of the clean linen deliveries. The portering service is also responsible for the collection and transportation of used linen from waste disposal areas to the central collection point. Housekeeper responsibilities include

ensuring the linen storage areas are kept clean and dust free and assist the ward staff to manage the linen stocks safely and appropriately.

The Hotel Services provider (whether contractor or in-house) is responsible for laundering the mops and cloths used as part of the cleaning service in a dedicated on-site mop laundry and for ensuring that all aspects of this facility comply with the EQR of HTM 01-04 - Decontamination of linen for health & social care.

5 Main Body of Policy

Key Element - Compliance with national guidance HTM 01-04 Decontamination of linen for health & social care.

External providers of linen and laundry services to the trust must be evaluated and selected with reference to their compliance with BSN EN 14065 or EQR and ability to progress to BP as detailed in current national guidance i.e. HTM 01-04.

Laundry facilities i.e. washing machines and dryers **must not** be provided in ward or department areas without suitable and sufficient risk assessment to ensure compliance with current national guidance i.e. HTM 01-04 and without the approval of Infection Prevention & Control.

5.1 Categories of Linen

Hospital Linen is considered in the following categories:-

a. Used Linen (non-fouled)

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

b. Used Linen (Soiled & Foul)

Linen used and soiled by bodily fluids. This linen must be placed into a hot water soluble bag and then into a RED disposable plastic laundry bag. It is imperative the linen is contained within a hot water soluble bag prior to placing in the laundry bag.

c. Infectious Linen

Linen used by patients already subject to infectious precautions (Standard, Droplet or Respiratory isolation) must be placed in a hot water soluble bag and then into a RED disposable plastic laundry bag. It is imperative the linen is contained within a hot water soluble bag prior to placing in the laundry bag.

d. Used (Theatres)

Linen should be disposed of according to Operating Theatre Procedures, placed in a water soluble bag and then into a GREEN disposable plastic laundry bag. If a GREEN laundry bag is not available, a WHITE laundry bag may be used. Linen must be placed in a hot water soluble bag prior to placing in the laundry bag if it is categorised as soiled, foul or infectious. See b and c above.

e. Infested (e.g. Scabies)

Linen must be placed in a water soluble bag and then into a RED disposable plastic laundry bag clearly marked as “Infested Linen”. If a RED laundry bag is not available, a WHITE laundry bag clearly marked as “Infested Linen” may be used but it is imperative the linen is contained within a water soluble bag prior to placing in the laundry bag.

5.2 General Guidance for protecting clean linen from contamination

- Clean linen must be protected from contamination at all stages of delivery, storage and handling.
- Ideally, clean linen should be stored in a dedicated room. If stored in a dedicated trolley, it should be located well away from any used or infected linen skips and a cover should be provided which should be replaced after each visit to the linen trolley.
- Linen bags containing clean linen must not be stored on the floor.
- Clean linen storage areas should be used solely for clean linen and other clean items associated with the linen service. Clean linen should be stored neatly on shelves
- Clean linen should be rotated frequently and not be stored for prolonged periods of time.
- Clean linen storage areas should be subject to daily cleaning and be deep cleaned as part of the ward/department deep cleaning programme.
- Trolleys used to hold linen during peak bed-making activity in the clinical area should:-
 - Be cleaned on all surfaces and undersides with detergent before and after use
 - Ensure clean linen is covered to avoid airborne contamination
 - Be stocked to ensure other non-linen consumables such as personal hygiene items are not in direct contact with clean linen
 - Have any unused linen treated as contaminated and not returned to the clean linen store or trolley.
- Rolls of colour coded, disposable plastic laundry bags should be stored with the clean linen and not in the sluice.
- Following a patient’s discharge, clean linen should only be taken to the bed space once the used linen has been removed and the bed space has received the appropriate clean.

5.3 General guidance for handling used linen

- The appropriate colour coded plastic disposable laundry bag secured to the skip holder (and water soluble bag when relevant) should be taken to the immediate point of use in order for the used linen to be placed directly in the bag. Used linen **MUST NOT** be placed on the floor, other surface or carried through the clinical area.
- Appropriate PPE (e.g. gloves and apron) should be worn when handling linen which is infested, from an infected patient or contaminated with bodily fluids e.g. blood, urine, faeces, vomit, sweat, pus or wound exudates. Hands must be washed when gloves are removed.
- All used linen should be handled with minimal agitation to minimise airborne environmental contamination by micro-organisms and there-by risk of cross infection. Remove one item at a time using a layered folding technique.
- A complete bed change of linen on a daily basis is recommended for patients who have:-
 - Diarrhoea and/or vomiting
 - Has been identified as either infected, colonised or at risk of incubating, or shedding a micro-organism resistant to a wide range of antibiotics.
- ALWAYS ensure that soiled, foul, infested and high risk infected linen is placed in a water soluble bag prior to placing in a red plastic disposable laundry bag. Care should be taken not to soil the outside of the hot water soluble bag or laundry bag as these are the surfaces that will come into contact with staff who further process the linen.
- Excessively wet items of linen should be wrapped in dry linen such as a blanket to absorb the moisture prior to placing in a hot water soluble bag.
- Hot water soluble bags are the universal protection for staff handling soiled and fouled, infectious, and infested linen. Hot water soluble bags are also colour coded with a pink stripe running through the bag. If a RED laundry bag is unavailable, the laundry will accept the items in a WHITE laundry bag as long as the linen is contained within a hot water soluble bag so that the linen can be identified as a potential risk.
- Grossly contaminated linen should be sent to the Laundry as above. The Laundry will determine whether to destroy it.
- Bags of laundry should be taken directly to the waste hub and placed on the cage provided. Bags of laundry should not be stored on cages in the sluice unless instructed to do so by Infection Prevention & Control as part of the required control measures in a Closed Ward situation.
- Linen cages provided by the Laundry should NOT be used for any other purpose other than the delivery, transportation and collection of linen.

5.4 General guidance for ensuring patient linen is fit for purpose

- Linen items found to be damaged, torn or stained should be returned to the Linen Room Level 2 for return to the Laundry.
- Linen provided for patients comfort and well-being, should not be used for any other purposes e.g. mopping up water spillages/floods etc.

5.5 General guidance for Health & Safety

- Ensure that extraneous objects such as sharps, pillows, gloves, continence pads, patients' personal belongings, clinical equipment, mobile phones/bleeps etc are not gathered up with used linen and placed in linen bags. These items can cause injury to laundry workers, serious damage to laundry equipment, cause major breakdown and result in disruption to the provision of clean linen to the hospital.
- In order to reduce the risk of manual handling injuries, laundry bags should NEVER be filled over 2/3rds full.

5.6 Curtains

- The use of disposable curtains in all clinical areas is advocated.
- Curtains should be changed/laundered on a scheduled basis according to the risk category designated to the ward or department:
 - Very High Risk Every 4 months
 - High Risk Every 6 months
 - Significant Risk Annually.
- In between times, curtains should be changed when visibly soiled or potentially contaminated. Contamination may have occurred if a patient has diarrhoea and/or vomiting, or has been identified as either infected, colonised or at risk of incubating, or shedding a micro-organism with a resistance to a wide range of antibiotics.
- Contaminated disposable curtains should be disposed of as clinical waste.

5.7 Patients' personal laundry

When dealing with patients' own personal laundry/soiled clothing i.e. covered in urine, vomit, faeces, blood or other bodily fluid, place clothing into a plastic "Patients Property" bag. Hand the bag of clothing to the patient's relative or carer with instructions to place the contents in their domestic washing machine.

It should be noted that the Trust does not advocate or have access to washing machines for the purposes of laundering patient clothing that can reach thermal disinfection temperatures. Washing soiled clothes using normal domestic cycles may leave organic matter and washing at higher temperatures may damage most items of clothing.

Alternatively, consider disposal as clinical waste of any soiled, foul or infected clothes after discussion and documentation of said conversation with:-

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

6 Overall Responsibility for the Document

This policy will be owned and reviewed by the Cleanliness Assurance Group.

7 Consultation and Ratification

The design and process of review and revision of this policy will comply with The Development and Management of Formal Documents.

The review period for this document is set as default of five years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be reviewed by the Cleanliness Assurance Group and ratified by the Director of Nursing/Chief Nurse

Non-significant amendments to this document may be made, under delegated authority from the Director of Nursing/Chief Nurse, by the nominated owner. These must be ratified by the Director of Nursing/Chief Nurse.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes.

8 Dissemination and Implementation

Following approval and ratification, this policy will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Formal Documents.

The document owner will be responsible for agreeing the training requirements associated with the newly ratified document with the named Director and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

9 Monitoring Compliance and Effectiveness

- Compliance with HTM 01-04 and local procedures will be monitored by the Facilities department using the audit tool included at Appendix 4.
- Results from audits will be reported to the relevant Ward/Dept Manager for rectification and action planning.

- Audit performance will be reported to the Cleanliness Assurance Group who will monitor progress of any resulting action plan. The Cleanliness Assurance Group reports performance to the Infection Prevention & Control Sub-Committee
- Audits may also be carried out by Infection Prevention & Control as part of their audit programme to monitor infection control standards
- Cleanliness of ward/department linen rooms may also be monitored as part of a joint cleanliness audit programme

10 References and Associated Documentation

- HTM 01-04 – Decontamination of linen for health and social care
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/148538/CFPP_01-04_Social_care_Final.pdf
- HSG (95)18 – Guidelines for processing healthcare textiles
- Infection Prevention & Control Manual Contents
<G:\DocumentLibrary\UHPT Trust Documents\Infection Control\IC Manual Contents - February 2018.pdf>

Dissemination Plan			
Document Title	Linen Services Policy		
Date Finalised	1/11/13		
Previous Documents			
Action to retrieve old copies	Archived by Trust Document Controller		
Dissemination Plan			
Recipient(s)	When	How	Responsibility
All Trust staff		Vital Signs	Information Governance Team

Review Checklist		
Title	Is the title clear and unambiguous?	Yes
	Is it clear whether the document is a policy, procedure, protocol, framework, APN or SOP?	Yes
	Does the style & format comply?	Yes
Rationale	Are reasons for development of the document stated?	Yes
Development Process	Is the method described in brief?	Yes
	Are people involved in the development identified?	Yes
	Has a reasonable attempt has been made to ensure relevant expertise has been used?	Yes
	Is there evidence of consultation with stakeholders and users?	Yes
Content	Is the objective of the document clear?	Yes
	Is the target population clear and unambiguous?	Yes
	Are the intended outcomes described?	Yes
	Are the statements clear and unambiguous?	Yes
Evidence Base	Is the type of evidence to support the document identified explicitly?	Yes
	Are key references cited and in full?	Yes
	Are supporting documents referenced?	Yes
Approval	Does the document identify which committee/group will review it?	Yes
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	Yes
	Does the document identify which Executive Director will ratify it?	Yes
Dissemination & Implementation	Is there an outline/plan to identify how this will be done?	Yes
	Does the plan include the necessary training/support to ensure compliance?	Yes
Document Control	Does the document identify where it will be held?	Yes
	Have archiving arrangements for superseded documents been addressed?	Yes
Monitoring Compliance & Effectiveness	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Yes
	Is there a plan to review or audit compliance with the document?	Yes
Review Date	Is the review date identified?	Yes
	Is the frequency of review identified? If so is it acceptable?	Yes
Overall Responsibility	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Yes

Core Information	
Date	29/10/13
Title	Linen Services Policy
What are the aims, objectives & projected outcomes?	<p>To ensure compliance with HTM-01-04 Decontamination of linen for health and social care and in so doing to:-</p> <ul style="list-style-type: none"> • Reduce the risk of hospital acquired infection due to the handling of contaminated linen • Reduce the risk of inoculation injuries associated with the handling of linen • Meet patient expectations in regards to the standard of linen provided
Scope of the assessment	
This assessment will highlight any areas of inequality with the implementation of this policy	
Collecting data	
Race	This document has no impact on this area
Religion	This document has no impact on this area
Disability	This document has no impact on this area
Sex	This document has no impact on this area
Gender Identity	This document has no impact on this area
Sexual Orientation	This document has no impact on this area
Age	This document has no impact on this area
Socio-Economic	This document has no impact on this area
Human Rights	This document has no impact on this area
What are the overall trends/patterns in the above data?	N/A
Specific issues and data gaps that may need to be addressed through consultation or further research	N/A

Involving and consulting stakeholders				
Internal involvement and consultation	Infection Prevention & Control , Matrons			
External involvement and consultation				
Impact Assessment				
Overall assessment and analysis of the evidence	This assessment has shown that there is no impact on race or disability groups			
Action Plan				
Action	Owner	Risks	Completion Date	Progress update

CONTACT NUMBERS & DETAILS

Royal Devon & Exeter Laundry Services Manager	01392 403079 or 403071 Short Code #6578	
Royal Devon & Exeter Laundry Services (Out of Hours)	01392 411611	(RD&E Main Switchboard) Ask for Laundry Duty Manager
Service Lead – Hotel Services	Ext. 39734	
Facilities Support Manager	Ext. 39735	
Linen Room Level 2	Ext. 52416	
Helpdesk	Ext. 32300	

Linen Room Level 2 (Derriford Hospital)

The Linen Room on Level 2 receives all clean linen deliveries from the Laundry contractor and is in operation daily in order to pick and pack ward and department linen deliveries.

The Linen Room is staffed between the hours of:-

Monday – Friday 06.00-14.00 hours

Saturday/Sunday 06.00-14.00 hours

Outside the above hours, all requests for additional linen should be made through the Helpdesk, Ext 32300.

Out of hours, access to the Linen Room is restricted to porters or to staff accompanied by a member of the portering team since stock control is paramount to ensure the resource is sufficient for the demands of the site.

Emergency Linen Requirements

In the event of a Major Incident, a dedicated stock of essential linen is stored in the Emergency Linen Cupboard on Level 2. If there is insufficient stock in the central Linen Room and access to the emergency stock is required, a key to the cupboard is kept in the Major Incident pack.

Storage, Handling & Disposal of Linen

Compliance with HTM 01-04

Standard: Linen is stored and handled appropriately to prevent re-contamination and cross infection

Date: Ward: Auditors:

	Ward Management of Linen	Yes	No	N/A	Comments/Actions required
1	There is a designated area/trolley for clean linen which is separated from used linen				
2	Linen storage area is used solely for clean linen and other clean articles associated with the linen service				
3	Linen storage area is maintained in good condition and is readily cleansable.				
4	Linen storage area/trolley is tidy, clean and free from dust				
5	Swab tests undertaken of linen storage surfaces return results < 1500				
6	All clean linen has been stored safely in the designated area				
7	Clean linen is stored off the floor				
8	Clean linen is free from stains (random check)				
9	The ward has acceptable levels of clean linen stock capable of being rotated between deliveries				

10	Clean linen is not left out unprotected in ward area following bed making				
11	Red skips and water soluble bags are available for foul and infected linen				
12	Gloves and apron are being worn when handling used linen				
13	Soiled linen skips are less than 2/3 full and are capable of being secured				
14	Soiled linen skips are stored correctly pending disposal				
	TOTALS				
	Wards with washing machine facilities	Yes	No	N/A	Comments/Actions Required
15	Ward based washing machines are used only with agreement of IPCT				
16	Washing/drying equipment is situated in an appropriate designated area				
17	There is evidence that the equipment is checked and maintained on a pre-planned programme				
18	The washing equipment includes suitable programmes to ensure thermal disinfection				
19	Written guidance on use of equipment and procedures to be followed is on display or easily available				

20	The written procedures ensure dirty and clean linen is segregated and cannot come into contact				
21	Swab tests undertaken of laundry facility surfaces return results < 1500				
22	Hand washing facilities are available in the laundry room				
23	All staff required to operate the washing/drying equipment have received training and records are available				
	TOTALS				