




LAUNDRY & LINEN POLICY

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POLICY LEAD	Head of PFI and Commercial Services	
POLICY AUTHOR (if different from above)	Senior Contracts and Commercial Services Manager, Estates & Facilities Senior Facilities Manager, SSL	
Exec Sign Off Signature (Electronic)		
Disclosable under Freedom of Information Act 2000	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.

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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 Details of individual delegated responsibilities are highlighted in section 4 of the Policy, and include responsibilities for the following Trust staff:

- Chief Executive
- Executive Director of Nursing
- Executive Director of Operations
- Executive Director of Resources
- Director of Infrastructure and Asset Management
- Deputy Director of Estates and Facilities
- Trust Estates and Facilities Department
- Trust Estates and Facilities lead managers for laundry and linen
- All managers, supervisors and staff within Trust Estates and Facilities and PFI Provider's managers, supervisors and staff who have responsibilities for laundry and linen
- Housekeepers
- Infection Prevention and Control Team
- Clinical managers Matrons
- Ward and Team Managers
- All staff

2.3 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.

- 2.4 Advice regarding implementation, operational requirements, record keeping etc. will be provided by Estates and Facilities Management.
- 2.5 This Policy must be utilised in conjunction with the Trust Laundry and Linen “Procedures” documentation, relevant to the specific area of the Trust.
- 2.6 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 alginate bag** and then place into a red plastic bag. **Red Alginate bags can be obtained from the Estates and Facilities Department**
- iv) **Rejected linen** - If this should occur put reject linen into a separate Green Polythene 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 laundry 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 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.

3.3.3 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.

3.3.4 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 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 ward or department, either by the Portering Service or directly by the Laundry 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.

- 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.

- iv) In the event of there being no clean laundry available on the ward, ward staff should liaise with the Estates and Facilities Department.

Out Of Hours: staff should liaise with the Portering Department/Trust's Facilities Services Provider for items from the local emergency linen cupboard.

- v) 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 the Portering Department/Trust's 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 red 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 red 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 [Laundry providers Name]
- vi) Ward/Unit staff will record all “Special Items” sent from their area.
- vii) Linen room/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. **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 Trusts 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 Trust's Procurement Department.

3.10 Procedure for 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 on 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 infection is clear, 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. If the cover is the patient's own then it should be sent as a Special Item to the Laundry Provider.
- 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.

- V. In all cases pillowcases should be sent to the Trust's Laundry Provider for laundering on a regular basis each week and replaced with a clean pillowcase.

3.11 Procedure for the Use of Red Alginate Water Soluble 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).

3.12 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)

3.13 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

3.14 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.

3.15 Training

- 3.15.1 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
Chief Executive	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.	
Executive Director of Nursing	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.	
Executive Director of Operations	<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"> • To ensure that staff undertake statutory and mandatory training in infection prevention and control in accordance with the Trust Training Policy. • 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. • 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. <p>This responsibility is discharged through the Associate Directors of Operations to the Clinical Managers to Ward and Departmental Managers</p>	

Post(s)	Responsibilities	Ref
<p>Executive Director of Resources</p>	<p>The Executive Director of Resources has responsibility for ensuring that the Trust Estates & Facilities Department (via In-House or PFI/Contracted delivery) provides compliant Laundry services in compliance with the ‘Health and Social Care Act 2008, Code of Practice on the Prevention and Control of Infections and related guidance” (DOH, December 2010). And HTM 01-04</p> <ul style="list-style-type: none"> • Ensuring the Estates & Facilities Services (In-House and PFI/Contracted) have sufficient resources to provide compliant Laundry services. <p>The responsibility is discharged through the Director of Infrastructure & Asset Management.</p>	
<p>Director of Infrastructure & Asset Management</p>	<p>The Director of Infrastructure & Asset Management has responsibility for ensuring the Trust Estates & 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"> • Ensuring the Trust Board is made aware of any issues which may affect the standards of Laundry in the patient environment. <p>This responsibility is discharged through the Deputy Director Estates & Facilities.</p>	
<p>Deputy Director Estates & Facilities</p>	<p>The Deputy Director Estates & Facilities has responsibility for ensuring that the Trust has systems in place which comply with the “Health and Social Care Act 2008 Code of Practice on the prevention and control of infections and related guidance” (DOH December 2010) 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"> • Ensuring the Trust Board is made aware of any issues which may affect the standards of Laundry and Linen in the patient environment. <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>	
<p>Trust Estates & Facilities Department</p>	<p>The Trust Estates & Facilities Department is responsible for</p> <ul style="list-style-type: none"> • 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 	

Post(s)	Responsibilities	Ref
Trust Estates & Facilities Department	<ul style="list-style-type: none"> • 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 & Linen Services. • Ensuring contractor's compliance is continually monitored. • Liaising with manufacturers of Trust laundry equipment to ensure fitness for purpose. • Responsible for the maintenance and calibration of Trust laundry equipment to ensure correct temperatures are achieved and equipment is in full working order. • Responsible for auditing the maintenance and calibration of Trust laundry equipment and maintaining records of such. 	
Estates & Facilities Department Lead Managers Laundry and Linen	<p>The Estates & 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> <ul style="list-style-type: none"> • Development, agreement and implementation of Operational Laundry Plans for all wards and departments (including standards, tasks, frequencies, time-spans and schedules as well as monitoring and audit arrangements). • Planning of Laundry Services for new projects. • Negotiation and agreement of any contracts for Laundry. & Linen • Any proposed Laundry service reviews or changes. • 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). • Providing reports to Clinical Managers, Matrons and Infection Prevention and Control Team, regarding Facilities monitoring and audits of Laundry Service. • Providing information to support Lead Nurses, Matrons and Unit Managers' reports and responses on Laundry. 	
All managers, supervisors and staff within the Estates &	<ul style="list-style-type: none"> • All managers, supervisors and staff within the Estates & Facilities Department and PFI Provider's managers, supervisors and staff who have responsibilities for Laundry and Linen 	

Post(s)	Responsibilities	Ref
Facilities Department and PFI Provider's managers, supervisors and staff who have responsibilities for cleaning	<p>have current job descriptions that clearly set out their roles and responsibilities for Laundry and Linen.</p> <ul style="list-style-type: none"> • 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 • Have a duty of care to comply with their training and the designated method statements for Laundry and linen. • 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). • Ensure staffing levels and the requirements of the Trust laundry and Linen Policy are met in order to provide an effective Laundry Service. • Ensure only appropriately trained staff are used for Laundry and Linen related tasks. • 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. • All staff are aware of this Policy (and Procedures herein) and the relevant Infection Control Policies and their location 	
Housekeepers	<ul style="list-style-type: none"> • 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. • Monitoring of environmental Laundry and Linen standards. • Maintaining Laundry and Linen records. • Report any issues relating to Laundry and Linen. • 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. 	
Infection Prevention & Control Team	<ul style="list-style-type: none"> • 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. • Liaise regularly with the Nursing and Domestic teams in order to ensure that required standards of infection prevention & control are being achieved and maintained. 	

Post(s)	Responsibilities	Ref
	<ul style="list-style-type: none"> • Provide advice on any guidance or legislation that is issued in relation to infection prevention & control (of which Laundry and Linen is one element). • Provide information regarding infection rates. • 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 	
Clinical Managers	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	
Matrons	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.	
Ward and Team Managers	<p>All Ward/Departmental Managers are responsible for ensuring that:</p> <ul style="list-style-type: none"> • All staff are aware of this Policy (and Procedures herein) and the relevant Infection Control Policies and their location. • 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 relevant/mandatory training that is applicable to grade/job. • All staff complies with this Policy (and Procedures herein). • Any discrepancy from this Policy is discussed with the Infection Control team so that any further education and training need can be identified. 	
All staff	<ul style="list-style-type: none"> • 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. • To report any breaches in laundry and linen standards to the Facilities/Domestic Managers and Unit Managers. 	
	<p>The Trust's Laundry Provider is required to comply with;</p> <ul style="list-style-type: none"> • this Policy and the Procedures herein • HTM 01-04 • the Trust's Infection Control Policies 	

Post(s)	Responsibilities	Ref
<p>Laundry Provider</p>	<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	August 2021									
Number of versions produced for consultation	One									
Committees or meetings where this policy was formally discussed										
Clinical Governance Committee										
Infection Prevention Partnership Committee	October 2021									
Where else presented	Summary of feedback	Actions / Response								
Email (04/08/2021)	<p>Angela Bridges, Health and Safety Manager, BSMHFT</p> <p>Page 9 3.5 Procedure for used linen xv) Please see procedure 3..2.iii for using water soluble bags.</p> <p>Feedback Should this be 3.11?</p>	<p>Action Taken Changed to 3.11</p>								
Email (25/08/2021)	<p>Dr Gemma Winzor, Consultant Microbiologist, Heart of England NHS Foundation Trust</p> <p>Page 5 3.1 (ii) <i>“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 infection is clear, the patient must be issued with a new duvet and the use of sheets and blankets can be stopped.”</i></p> <p>Feedback Comment: 25/08/2021 - I think this is too vague. Could it state “When the patient is no longer infectious (if in doubt liaise with IC),....”</p> <hr/> <p>Page 13 3.13 (2) <i>“Wash performance records as required by Section 3 of the Contract requirements. Additionally, a periodic check may be made by using test pieces for soil removal.</i></p> <p>The minimum acceptable level for test results will be:- EMPA Test pieces</p> <table style="width: 100%; border: none;"> <tr> <td>Soil Removal Bleaching ability</td> <td style="text-align: right;">75%</td> </tr> <tr> <td>Particulate Soil</td> <td style="text-align: right;">45%</td> </tr> <tr> <td>Hydrophilic Soil</td> <td style="text-align: right;">40%</td> </tr> <tr> <td>Blood</td> <td style="text-align: right;">40%</td> </tr> </table>	Soil Removal Bleaching ability	75%	Particulate Soil	45%	Hydrophilic Soil	40%	Blood	40%	<p>Action – Text amended When the patient is no longer <u>infectious (if in doubt liaise with Infection Prevention Team)</u>, the patient must be issued with a new duvet and the use of sheets and blankets can be stopped.</p>
Soil Removal Bleaching ability	75%									
Particulate Soil	45%									
Hydrophilic Soil	40%									
Blood	40%									

	<p><i>These test pieces will be processed in the normal process for draw sheets”</i></p> <p>Feedback Comment: 25/08/2021 - Can I please ask where these standards have come from? I cannot find anything in the HTM regarding this.</p> <hr/> <p>Page 20 6 – Reference documents ii. “The Health and Social Care Act 2008 Code of Practice the Prevention and Control of Infections and Related Guidance” (Department of Health 2010).</p> <p>Feedback Comment 25/08/2021 Updated in 2016.</p> <p>Page 22 Appendix 1 “EXCEPT 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 BAG AND THEN PLACE INTO A WHITE PLASTIC BAG”.</p> <p>Feedback Comment: 25/08/2021 - This section is very contradictory and doesn’t make sense to me. “Except for infected linen”...”First put infected linen....” Contradictory.</p> <hr/> <p>Page 27 Appendix 3 - 5.3 Infected linen which must not be laundered includes category A pathogens referred to in the Howie Code of Practice, e.g. Lassa Fever, Viral Haemorrhagic Disease and Crutzfeld-Jacob disease</p> <p>Feedback Comment 25/08/2021 I am unable to find an extensive list of Category A pathogens as listed in the original Howie Code. These either need to be listed extensively here, or perhaps use the HSE ACDP Category 4 pathogens and add CJD. https://www.hse.gov.uk/pubns/web09.pdf</p> <hr/> <p>Page 27 Appendix 3 - 7.1 Those with septic lesions on the hands or arms must not be permitted to handle clean linen supplies until the condition has resolved.</p>	<p>Action taken: Section removed from Laundry and Linen Policy.</p> <hr/> <p>Action taken: Guidance updated in July 2015. Reference updated to show 2015. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/449049/Code_of_practice_280715_acc.pdf</p> <hr/> <p>Action taken: Removed the word ‘except’</p> <hr/> <p>Action taken: 5.3 Updated to: 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, Ebola and Crutzfeld-Jacob disease. Reference updated at section 5, item 13.</p> <hr/> <p>Action taken:</p>
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	<p>Feedback Comment 25/08/2021 Change 'septic' to 'infective'.</p> <p>Page 30 Type of finish required – White Coats</p> <p>Feedback Comment 25/08/2021 Are these still in use?</p>	<p>Septic changed to infective in policy.</p> <p>Action taken: White coats are used in catering department. Item kept in policy.</p>
Email (09/09/2021)	<p>Lee Gough, Head of Facilities Management, SSL</p> <p>Page 13 3. The documented system must be incorporated into BS EN ISO 9001:2000 and BSEN 14065 and must include:-</p> <p>Feedback Comment 09/09/2021 Technical standards are outdated i.e. ISO9001:2000 is 2015 I think, BSEN 14065 is 2016</p>	<p>Action taken ISO 9001: 2008 – Amended in Laundry and Linen policy to “ISO 9001” (As amended). Standard is featured in Laundry and Linen Contract.</p> <p>BS EN 14065 standard featured in Laundry and Linen contract and is written as BS EN 14065 (As amended) – Kept in Laundry and Linen Policy.</p>
During consultation (09/09/2021)	<p>Louise Angel, Senior Facilities Manager, SSL</p> <p>Page 2 Index - 3.4 Procedure for Handling Linen</p> <p>Feedback comment: Should state “Procedure for Handling Bed Linen”</p> <hr/> <p>Page 10 3.1.1 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).</p> <p>Feedback Comment – 09/09/2021 Remove number 3.1.1 to avoid confusion</p> <hr/> <p>Page 13 3.14 2. Procedures for documentation of laundered items delivered and assurance that each area receives requirements as detailed in Schedule 3.</p> <p>Feedback comment 09/09/2021 Incorrect Schedule number</p> <hr/> <p>Page 22 Illustration for infected linen</p> <p>Feedback Comment 09/09/2021 Update illustration for infected linen</p> <hr/> <p>Page 23</p>	<p>Action taken: Updated on page 2 and page 8</p> <hr/> <p>Action taken: Removed number 3.1.1</p> <hr/> <p>Action taken: Updated Schedule 3 to Schedule 5.</p> <hr/> <p>Action taken: Updated illustration</p> <hr/> <p>Action taken:</p>

	<p><u>Feedback comment 09/092021</u> Insert linen segregation colour coding</p>	<p>Inserted contractor's "Textile Bagging Policy"</p>
<p>PDMG (30/09/2021)</p>	<p>Policy Development Management Group</p> <p><u>Page 5</u> 2.6 NAIPS units must, when using linen that is not sent to the Laundry Provider.</p> <p><u>Feedback comment 30/09/2021</u> Change 'NAIPS' to 'Steps to Recovery'</p>	<p><u>Action taken:</u> Changed NAIPS to 'Steps to Recovery'</p>
	<p><u>Page 13</u> HTM 05-04</p> <p><u>Feedback comment</u> Include Firecode – fire safety in the NHS Health Technical Memorandum 05-03:</p>	<p><u>Action taken</u> Included HTM 05-03 in section 3.13 and in section 8 – References.</p>
	<p><u>Page 21</u> Reference Documents</p> <p><u>Feedback comment 30/09/2021</u> Remove roman numerals</p>	<p><u>Action taken:</u> Removed roman numerals</p>
	<p><u>Page 21</u> Reference Documents</p> <p><u>Feedback comment 30/09/2021</u> Insert Hyperlinks to reference documents</p>	<p><u>Action taken</u> Hyperlinks inserted.</p>
	<p><u>Page 21</u> Reference Documents</p> <p><u>Feedback comment 30/09/2021</u> Change Reference 4 . "National Specifications for Cleanliness in the NHS" (National Patient Safety Agency) 2007, to "National Standards of Healthcare Cleanliness 2021" (April 2021)</p>	<p><u>Action taken</u> New reference updated and hyperlink inserted.</p>
	<p><u>Page 21</u> Reference documents</p> <p><u>Feedback comment 30/09/2021</u> Include BS EN ISO 9001 in section</p>	<p>-----</p> <p><u>Action taken:</u> Included in Section 8. Reference document with accompanying hyperlink.</p>
	<p><u>Page 37</u> Appendix 9 - Equality Analysis Screening Form</p> <p><u>Feedback comment 30/09/2021</u> Move Equality Analysis Screening Form from Appendix 9 to Appendix 1</p>	<p><u>Action taken:</u> Equality Analysis Screening Form now Appendix 1 in the policy.</p>

6. REFERENCE DOCUMENTS

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

The Health and Social Care Act 2008 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

DoH HTM 05-03 “Firecode – Fire Safety in the NHS” (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 – see Appendix 2
“IPCT”	(Trust) Infection Prevention & Control Team
“IPPC”	(Trust) Infection Prevention Partnership Committee
“LINEN”	Refers to all articles that need laundering

“SLA”	Service Level Agreement
“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
Laundry & Linen provides compliance with Section 4	Head of PFI and Commercial Services	Audit Pro-Forma	Annually	IPPC
Quality of linen provided (Section 3.11)	Head of PFI and Commercial Services	Audit Pro-Forma	Quarterly	IPPC
Monitoring of Quality	Head of PFI and Commercial Services	Audit Pro-Forma	Monthly	IPPC
Monitoring of Technical Standards	As Above	Audit Pro-Forma	Annually	IPPC
Monitoring of (linen) rejects	As Above	Audit Pro-Forma	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>

Title of Proposal	Laundry and Linen Policy			
Person Completing this proposal	Huw Price	Role or title	Senior Contracts and Commercial Services Manager	
Division	Estates and Facilities	Service Area	Trust wide	
Date Started	10/08/2018	Date completed	10/08/2018	
Main purpose and aims of the proposal and how it fits in with the wider strategic aims and objectives of the organisation.				
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.				
Who will benefit from the proposal?				
Trust Staff, Service Users and Carers and Laundry Staff				
Impacts on different Personal Protected Characteristics – Helpful Questions:				
<i>Does this proposal 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>		
Please click in the relevant impact box or leave blank if you feel there is no particular impact.				
Personal Protected Characteristic	No/Minimum Impact	Negative Impact	Positive Impact	Please list details or evidence of why there might be a positive, negative or no impact on protected characteristics.
Age	x			

Including children and people over 65 Is it easy for someone of any age to find out about your service or access your proposal? Are you able to justify the legal or lawful reasons when your service excludes certain age groups				
Disability	x			
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?				
Gender	x			
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 proposal?				
Marriage or Civil Partnerships	x			
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?				
Pregnancy or Maternity	x			
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?				
Race or Ethnicity	x			
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?				
Religion or Belief	x			
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?				
Sexual Orientation	x			
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?				
Transgender or Gender Reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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 proposal or service?				
Human Rights	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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?				
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)				
	Yes	No		
What do you consider the level of negative impact to be?	High Impact	Medium Impact	Low Impact	No Impact
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If the impact could be discriminatory in law, please contact the Equality and Diversity Lead 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 proposal 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?				
There are no impacts as this is a policy that deals with cleaning, decontaminating and providing flat linen to wards				

How will any impact or planned actions be monitored and reviewed?
N/A
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.
N/A
Please save and keep one copy and then send a copy with a copy of the proposal to the Senior Equality and Diversity Lead at hr.support@bsmhft.nhs.uk . 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.

Full Equality Analysis Form

Title of Proposal	Laundry and Linen Policy		
Person Completing this proposal	Huw Price	Role or title	Senior Contracts and Commercial Services Manager
Division/Department	Estates and Facilities	Service Area	Trust Wide
Date Started	10/08/2018	Date completed	10/08/2018
Looking back at the screening tool, in what areas are there concerns that the proposal treats groups differently, unfairly or disproportionately as a result of their personal protected characteristics?			
None			
Summarise the likely negative impacts		Summarise the likely positive impact	
none		none	
What previous or planned consultation or research on this proposal has taken place with groups from different sections of the community?			
		Please provide list of groups consulted.	Summary of consultation / research carried out or planned. If already carried out, what does it tell you about the negative impact?

Group(s) (Community, service user, stakeholders or carers)		N/a		
Staff Group(s)		Out to consultation through the usual process		
What up-to-date information or data is available about the different groups the proposal may have a negative impact on?				
N/A				
Are there any gaps in your previous or planned consultations, research or information? If so are there any other experts, groups that could be contacted to get further views or evidence?				
Yes		No	x	
If yes please list below				
As a result of this Full Equality Analysis and consultation, what changes need to be made to the proposal? (You may wish to put this information into an action plan and attach to the proposal)				
none				
Will any negative impact now be:				
Low:	N/a	Legal:	N/A	Justifiable: N/A
Will the changes made ensure that any negative impact is lawful or justifiable?				
Have you established a monitoring system and review process to assess the successful implementation of the proposal? Please explain how this will be done below.				
See Policy re audit				
Action Planning: How could you minimise or remove any negative impact identified even if this is of low significance?				

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

Please save and keep one copy and then send a copy with a copy of the proposal to the Senior Equality and Diversity Lead at hr.support@bsmhft.nhs.uk. 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

ELIS LAUNDRY SOILED LINEN INSTRUCTIONS

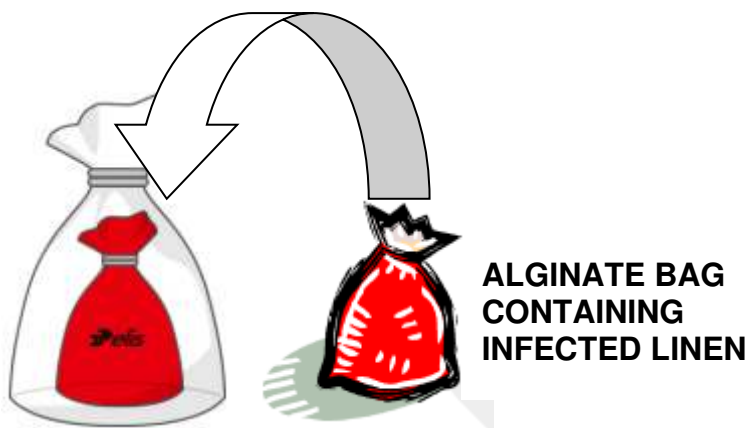
PLACE **ALL** SOILED LINEN INTO WHITE PLASTIC BAGS.

**USED LINEN HIRE
ITEMS**
E.g. Sheets, Pillowcases,
Towels, Night Wear etc



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 BAG** AND THEN PLACE INTO A WHITE PLASTIC BAG.



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. 'Name of Laundry Supplier'

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

**INFECTED HOSPITAL
OWNED ITEMS**



LINEN SEGREGATION COLOUR CODING

TEXTILE BAGGING POLICY

This bagging policy ensures compliance to Department of Health HTM 01-04 Decontamination of linen and social care.



HTM 01-04 - COLOUR CODING TEXTILE BAGGING POLICY



INFECTED/INFESTED LINEN

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

EXAMPLES	
INFECTED	<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</p>
INFESTED	<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 include a disinfecting stage in which the load temperature is maintained at 150°F (65°C) for ten minutes or 160°F (71°C) for three minutes. For machines of conventional design and low degree of loading (below 4.5lb per cubic feet) four minutes should be added to these times to allow for mixing. For machines with a heavy degree of loading 4.5lb per cubic foot it is necessary to add up to eight minutes (ref. HM(71) 49 Para 9).

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 The purchase of fabrics which will not withstand the above temperature should be avoided where possible.

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 hypochlorite's, 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 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.

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.
- 5.6 The recommendations on the washing process for soiled linen regarding the thermal disinfection stage also apply to the process for fouled and infected linen. 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.

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 A tuberculin test should be carried out for those who have not had satisfactory BCG vaccination or positive tuberculin test previously. All negative reactors must be offered BCG vaccination. All employees should be offered Polio and Tetanus immunisation. Female employees of child bearing age who are likely to come into contact with patients should be advised regarding immunisation against Rubella (German Measles) with screening and immunisation being offered to those considered to be at risk.

- 7.3 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 must be worn when sorting soiled linen. Fouled and infected linen should not be sorted.
- 7.4 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 recontaminated during the rinse stages of the wash process. To satisfy this requirement rinse sections must be thermally disinfected before production commences each working day.
- 8.2 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.
- All sections of the machine, following the high temperatures sections, which do not reach a minimum temperature of 65°C, shall receive a thermal disinfection cycle.
 - 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 thermally disinfected. The disinfection process should be controlled by a timer.
 - A timer shall also be incorporated into the control system to override the necessity to proceed through the thermal disinfection of the cool stages of the machine if the machine is stopped for short periods during the day. This timer shall be so interconnected that if the machine is shut down for a period of 3 hours or more the cool stage thermal disinfection cycle will proceed and at the same time “lock out” the washing controls. The “lock out” shall include any mechanical device, interlocked with the washing cycle or not, for feeding work into the machine.

- It is expected that the cool stage, disinfection cycle will be initiated by a single button operation and that the cycling of any steam and or water control valves, necessary to raise the temperature disinfection shall be automatic in operation. The incorporation of hand operated valves in this system is not acceptable.

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. 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.

Articles	Calendar	Fully dried & folded	Press	Steam form or tunnel
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			X	X
White Coats			X	X
Barrier Gowns (Ctn)	X			
Barrier Gowns (Poly)		X		
Dressing Gowns		X		
X-Ray Gowns (Ctn)	X			
Night Gowns		X		
Surgeon Gowns			X	
Patient O.P Gowns (Ctn)	X			
Patient O.P Gowns (Polycn)		X		
Pyjama Tops				X
Pyjama Bottoms				X
Stretcher Canvasses		X		
Personal Day Clothing			X	X
Scrub Suit Bottoms			X	X
Scrub Suit Tops			X	X
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			

Note

If a tenderer wishes to provide an alternative type of finish for any classification, the benefits should be clearly identified in their submission.

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

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

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.