

## Laundry Guidelines for Safe Storage, Handling and Disposal of Used and Infected Laundry

Author:	Jane Balderson
Owner:	Infection Prevention Team
Version:	6
Approved by:	Hospital Infection Prevention and Control Group
Date approved:	September 2015
Review date:	September 2018

## Version History Log

This area should detail the version history for this document. It should detail the key elements of the changes to the versions.

Version	Date Approved	Version Author	Status & Location	Details of Significant Changes
5	Sep 15	Jane Balderson	Infection Prevention Nurse	Change of management of soiled linen
6	Oct 15	Jane Balderson	Infection Prevention Nurse	Rewording of definitions Addition of the use of linen tape monitoring

## Contents

Section	Heading	Page
1	<a href="#"><u>Introduction</u></a>	
2	<a href="#"><u>Scope</u></a>	
3	<a href="#"><u>Detail</u></a>	
4	<a href="#"><u>Accountability</u></a>	
5	<a href="#"><u>Dissemination and Implementation</u></a>	
6	<a href="#"><u>Monitoring and Auditing</u></a>	
7	<a href="#"><u>Consultation</u></a>	
8	<a href="#"><u>Supportive Evidence</u></a>	
9	<a href="#"><u>Appendices</u></a>	
Appendix 1 Appendix 2		

## 1) Introduction

These guidelines outline the procedures and Infection Prevention practices for the safe handling and disposal of used and infected linen. It is to be used and referenced by all staff involved in handling and disposal of linen.

## 2) Scope

These guidelines apply to all staff handling linen

## 3) Detail

See appendices

## 4) Accountability

All healthcare professionals and volunteers are responsible and accountable to the Chief Executive for the correct implementation of these guidelines.

Professional staff are accountable according to their professional code of conduct.

## 5) Dissemination and Implementation

These guidelines will be disseminated through the Consultants; Clinical Directors; Directorate Manager; Matrons; and Ward Managers via emails and meetings.

## 6) Monitoring and Auditing

Minimum Requirements	Monitoring	Responsibility for monitoring	Frequency	Reported to
a. Safe management of clean and used linen	Environment audits	Matrons	Monthly	Directorates where issues raised
b. Appropriate use of infected linen tape	Spot check audits	Infection Prevention Nurse	Bi-annual	Directorates where issues raised

## 7) Consultation

The Stakeholder is the Hospital Infection Prevention Committee

## 8) Supportive Evidence

Choice Framework for local Policy and Procedures (CFPP) 01-04  
Decontamination of linen for health and social care: Management  
and provision (Department of Health) 2013 -  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/148536/CFPP\\_01-04\\_Mgmt\\_and\\_provision\\_Final.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/148536/CFPP_01-04_Mgmt_and_provision_Final.pdf)

National specifications for cleanliness in the NHS (2007)  
<http://www.nrls.npsa.nhs.uk/resources/?EntryId45=59818>

## **9) Appendices**

Appendix 1 – [Definitions](#)

Appendix 2 – [Storage of clean linen](#)

Appendix 3 – [Linen disposal](#)

Appendix 4 – [Curtains](#)

Appendix 5 – [Personal/ patients' own contaminated linen](#)

## Appendix 1 – Definitions

Linen: Refers to all articles for laundering

Used linen: Refers to linen which has been used but remains dry and uncontaminated.

Soiled linen: Refers to linen which is contaminated with blood or body fluids but the patient is not known to be, or suspected of being infectious

Infected: Includes linen -

- Where patient has diarrhoea
- Where the patient is known to be or suspected of being infectious
- Contaminated with blood or body fluids from patients with blood-borne viruses

## Appendix 2 – Storage of clean linen

For enquiries regarding distribution and collection of linen please contact the Linen & Grounds Distribution Manager.

Effective management of linen should ensure that there is minimal or no excess linen left on the ward each day.

When the linen is restocked daily, any unused linen should be placed where it can be used first, to ensure stock rotation.

Do not take excessive amounts of linen into an isolation room/cohort area as any unused linen must be treated as contaminated and disposed of accordingly.

Any linen in the emergency linen cupboard must come direct from the laundry and must not be topped up with unused linen from other wards.

Clean linen **must** be:

- Stored in a designated, clean, dust-free, closed cupboard to prevent airborne contamination or on a dedicated fully enclosed mobile linen trolley.
- Stored off the floor.
- Segregated from used / soiled linen.

Clean linen **must not** be:

- Stored in areas such as the sluice or in bathrooms.

- Decanted onto open trolleys unless for immediate use.

### **Appendix 3 - Linen Disposal**

If there is exposure of clean linen to **any** infectious agent then it must be disposed of as contaminated linen.

Patient's linen should be changed when soiled and as a minimum weekly. In cases of infection such as *Clostridium difficile*/MRSA /TB etc. linen must be changed when soiled and as a minimum daily.

When handling used or soiled linen, Health Care Workers (HCW) must wear aprons; gloves must be used if there is a risk of exposure to body fluids. Hands should be cleaned with disinfectant gel before handling clean linen, and soap and water and disinfectant gel after disposal of used linen.

Bags must not be overfilled to facilitate secure closure.

#### **i. Used or soiled linen**

Used or soiled linen must be placed into a white plastic (non-soluble and non-permeable) bag and tied securely.

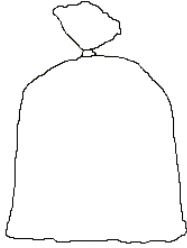
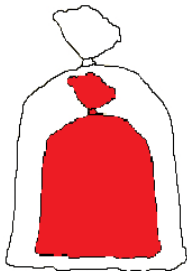
#### **ii. Infected linen**

Infected linen should be placed in a red hot water soluble plastic bag and then into a white outer plastic (non-soluble and non-permeable).

The bag must be sealed at the neck with tape that indicates the linen is infected.

#### **iii. Pillows**

Pillows are usually not laundered therefore all pillows must be covered with an impervious waterproof cover. If the pillow itself becomes soiled it must be discarded.

Used, soiled and foul linen	All used or soiled linen.  Soiled linen can be contaminated with blood or body fluids where the patient is not known to be, or suspected of being infectious	White polythene bags	
Infected linen	Infected linen that is used or soiled from <ul style="list-style-type: none"> <li>• patients known to be or suspected of being infectious</li> <li>• patients with diarrhoea</li> <li>• patients known to have a blood borne virus</li> </ul>	Red hot water soluble bag inside a white polythene bag  For infected linen the outer bag must be tied and secured around the neck of the bag with tape which indicates 'Infected linen'	

*Adapted from the Synergy bagging policy flyer*

#### **Appendix 4 - Curtains**

Curtain changing is undertaken in line with the national specifications for cleanliness at the following frequencies.

They must be changed when soiled or contaminated following contact with an infected patient.

	Cubicle Curtain Change frequency	Window Curtain Change frequency
Disposable curtains	3 monthly	
Very High Risk Area	4 monthly	yearly
High Risk Area	6 monthly	yearly
Significant Risk Area	12 monthly	yearly
Low Risk Area		two yearly



## **Appendix 5 - Procedure for sending patients' contaminated linen to laundry**

- Email (York) or telephone (Scarborough) Linen Environment Team Leader with patient details, ward, and list of personal property that needs to be laundered. Specify any specialist treatment required for laundering the items.
- Place the items into a red soluble laundry bag and secure in a white outer plastic bag (non soluble and non-permeable).
- Arrange collection of the property from the ward with the Linen Environment Team Leader
- Clean laundry will be returned to the ward. This will take a few days.