	Document Name:	Policy for Laundry
	Document Number:	DUHS / REG/ SOP / 01

DOW UNIVERSITY OF HEALTH SCIENCES

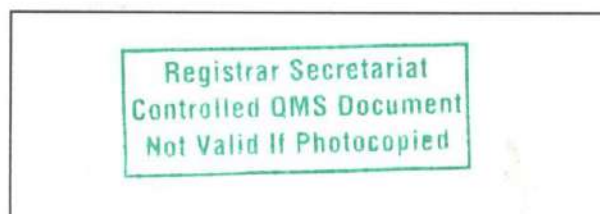


STANDARD OPERATING PROCEDURE

Policy for Laundry

(CLAUSE 1.1 OF ISO 9001:2008)

	NAME	DESIGNATION	SIGNATURE	DATE
PREPARED BY:	Dr. Shobha Luxmi	Asst. Professor	<i>Shobha Luxmi</i>	2-8-19
REVIEWED BY:	Ms. Sanam Soomro	Director, QEC-DUHS	<i>Sanam Soomro</i>	2-8-19
APPROVED BY:	Dr. Zamaz Wahid	Pro Vice Chancellor-DUHS	<i>Zamaz Wahid</i>	05-08-19
REVISION NO.:		00		
DATE OF LAST REVISION:		0		
DATE OF ISSUE:				





Document Name:

Policy for Laundry

Document Number:

DUHS / REG / SOP / 01

1. PURPOSE

The purpose of this policy is to set out the procedures which must be taken to minimise the risk of infection by making staff aware of the correct procedures for categorisation, segregation, transportation and handling of linen so that the risk of potential cross-infection is minimised.

2. Procedure

The risk of infection from used linen is minimal provided that it is handled, transported and decontaminated in a safe manner. The high temperature of the water, the laundry detergent and the laundering process physically removes and destroys most microorganisms. Any organism remaining is likely to be destroyed by further processes of tumble drying and ironing.

Standard Precautions which apply to the management of laundry and linen are:

- **Hand hygiene**- carried out following the handling of used laundry and linen and prior to handling clean linen.
- **Personal protective equipment**- worn when anticipated contact with laundry and linen soiled with blood or body fluids occurs
- **Maintaining a clean, safe environment**- by handling, transporting and processing used and soiled linen in a manner that prevents contact with skin and mucous membranes, staff clothing and avoids transfer of micro-organisms to other residents/clients and the environment.
- **Prevention of exposures to staff with body fluids**- by ensuring that sluice soiled laundry or linen items soiled with blood or body fluids are placed in red bags and handled with standard precautions always.

3. Categories of hospital linen

1. Clean and unused linen: Linen that has not been used since it was last laundered.
2. Used linen: All used linen not classified as contaminated.
3. Contaminated linen: a) Soiled with body fluids including urine / blood / vomit / faeces b) Known infected linen

4. SCOPE


This policy is applicable to all staff and managers / supervisors of staff who in the course of their work will be involved in the handling, transportation, labelling, washing and processing of linen and, where applicable, patients clothing.

5. Segregation of Linen:

It is the responsibility of the person disposing of the linen to ensure that it is segregated appropriately. All linen may be segregated into the following three categories:

- Clean / Unused Linen
- Dirty / Used Linen
- Soiled / Infected Linen

5.1 Clean / Unused Linen:

	Document Name:	Policy for Laundry
	Document Number:	DUHS / REG / SOP / 01

Clean linen must be in a state of good repair, as tearing or roughness can damage the patient's skin. The condition of the linen in use should be monitored by the laundry workers and by staff. Linen should also be free from stains and excessive creasing and should be acceptable to both patients and staff.

5.2 Handling of Clean Linen:

Once laundry has been decontaminated, every effort must be made to maintain its quality and cleanliness.

5.3 Delivery:

Laundry should be delivered to the wards/departments in clean covered containers. Clean laundry should not be transported in containers used for used / soiled laundry.

5.4 Storage:

All clean linen **must** be:

- stored in a clean, closed cupboard (either a dedicated linen cupboard or dedicated, fully enclosed mobile linen trolley).
- stored off the floor
- stored with the linen cupboard/trolley doors closed to prevent airborne contamination
- stored in a clean, dust free environment
- segregated from used / soiled linen.

Clean linen **must not** be stored in unsuitable areas e.g. the sluice, bathrooms, in bed spaces or in corridors.

5.5 Dirty / Used Linen:

Linen which is used but dry: Dirty / Used linen **must not have been:**

- visibly soiled with blood or bodily fluids
- used on source-isolated patients.

Dirty / Used linen should be placed directly into a clear plastic laundry bag.


- Linen bags should be no more than 2/3 full.

5.6 Soiled / Infected Linen:

Any used linen that is soiled with blood or any other body fluid or any linen used by a patient with a known infection (whether soiled or not).

This includes patients with or suspected:

- MRSA
- Extended Spectrum beta-lactamase (ESBL) or Carbapenemase producing organisms
- Human Immunodeficiency Virus (HIV)
- Hepatitis A, B or C
- Draining Tuberculosis (TB) lesions and open pulmonary TB
- Enteric Fever

	Document Name:	Policy for Laundry
	Document Number:	DUHS / REG / SOP / 01

- Dysentery (Shigella spp)
- Salmonella
- Norovirus
- Clostridium difficile
- Chickenpox
- Head or body lice, scabies
- Other notifiable diseases

Soiled / Infected linen should be placed directly into a RED bag and secured and a biohazard sticker should be placed on it.

- Linen bags should be no more than 2/3 full
- Never rinse or sluice contaminated laundry
- Dirty or soiled linen bags should be stored in 'dirty' linen areas and not on floors or obstructing public thoroughfares or the ward/department environment.

5.7 Theatre Linen:

- Dirty / Used Operating Theatre staff clothing should be placed into a GREEN plastic laundry bag
- Soiled / Infected Operating Theatre linen and staff clothing should be placed into a red bag
- Care should be taken to ensure that theatre instruments and sharps are not accidentally disposed of in linen.

5.8 Patient's Personal Laundry:

- Patients / Relatives / Carers should be encouraged to wash personal laundry at home
- Many micro-organisms will be physically removed from linen by detergent and water, and most are destroyed by a high temperature wash. Any remaining micro-organisms are likely to be destroyed by tumble drying and ironing
- Patient's personal laundry should be placed in a clear plastic bag. The clear plastic bag should then be placed into a patient's property bag to protect the patient's dignity
- Persons handling the laundry must be advised to wash their hands after handling the pre-washed laundry
- Relatives / carers must be advised before they take home personal laundry if it is heavily contaminated.

6. Laundry which would remain hazardous following normal processing or for which additional precautions are required:

Laundry thought to be contaminated with any of the following micro-organisms must be placed in the hazardous waste in double bags and incinerated and **not** sent to the laundry



Document Name:	Policy for Laundry
Document Number:	DUHS / REG / SOP / 01

service. Advice should be requested from the Infection Prevention Team.

- Viral Haemorrhagic Fevers

7 Linen Unfit for Use

Linen deemed not fit for purpose (heavily stained, torn, rough) should be placed in a separate rejected Item bag, labelled as 'unfit for use' and returned to the hospital laundry contractor .

8. General Principles:

These general principles should be adhered to when handling all linen and laundry.

8.1 Handling Linen:

All dirty linen must be handled with care, to minimise transmission of micro-organisms via dust and skin scales.

- All dirty linen must be placed carefully and directly into the appropriate laundry bag on removal from the bed or patient. Bags should be no more than two-thirds filled
- **Used linen should not be carried to avoid contamination of uniforms**
- Dirty linen must never be transported around the care environment unless within an appropriately colour coded linen bag
- Vigorous, enthusiastic bed stripping and changing of curtains is microbiologically hazardous as large numbers of organisms (mainly skin flora) are dispersed. Care should be taken to minimise contamination of equipment and the near patient environment
- **Do not place used linen on the floor** or any other surfaces e.g. a locker/table top
- When beds or curtains are changed all open wounds/drains etc need to be temporarily covered during linen changes.
- Do not shake linen into the environment
- Do not change linen during wound dressings in the same area
- **Use PPE when handling dirty linen.**

Care must be taken to ensure that **no sharps** or non-laundry items are included with dirty linen before it is placed ready for laundering. Such items are potentially dangerous to staff handling the laundry.

9. Curtains:

- Curtains require washing when visibly dirty, or at least every six months.
- Curtains should be routinely changed when discharging or transferring a patient with a known transmissible infection from the area or during outbreaks

Removal and changing of curtains results in aerosolisation of ingrained organisms which may be harmful to patients and contaminate the near patient environment. For this reason curtains should not be changed at key times e.g. during wound dressing changes.