



### **Community Infection Prevention and Control Policies for Care Home settings**

# Laundry including uniforms

**CH 14** 

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### LAUNDRY INCLUDING UNIFORMS

### 1. Introduction

An adequate laundry service must be available in order to provide care that is both safe for staff and residents. Linen used in care homes can become soiled with blood, faeces and other body fluids containing micro-organisms. Therefore, when handling used, soiled, fouled and infected linen, it is essential that care is taken to prevent the spread of infection.

All linen used should be washed appropriately ensuring the correct temperature is achieved to destroy micro-organisms. Failure to achieve this has resulted in outbreaks of infection notably with spore-forming bacteria such as *Bacillus cereus*. Micro-organisms that remain after washing are usually destroyed by tumble drying and ironing.

#### 2. Linen classifications

It is the responsibility of the person handling linen to ensure that it is segregated appropriately.

#### STANDARD PROCESS – white bag

#### Soiled and fouled linen and clothing

This definition applies to all used linen and linen which may be contaminated by body fluids or blood. It does **not** apply to:

- Linen from infectious residents
- Those suspected of being infectious
- Linen from residents with diarrhoea
- Linen contaminated with blood or body fluids from residents with bloodborne viruses
- Linen from a residents with a known or suspected infection, e.g. varicella zoster (shingles)

Soiled and fouled linen and clothing should be placed in a white bag. Soiled and fouled items should first be placed into a water soluble (alginate) bag, sealed/tied and then placed inside a white impermeable (plastic) bag or white fabric bag (it is best practice to use impermeable bags rather than fabric) or a designated lidded solid (plastic) laundry bin. The lidded bin should be cleaned and disinfected inside and out after removing the bag.

Heavily soiled items should have, where possible, any solids removed before being placed into the water soluble bag. In larger premises, residents' clothing may sometimes be bagged separately to bed linen.

#### ENHANCED PROCESS – red bag

#### Infected linen and clothing

This definition applies to:

- Linen from infectious residents
- Those suspected of being infectious
- Linen from residents with diarrhoea
- Linen contaminated with blood or body fluids from residents with bloodborne viruses
- Linen from a resident with a known or suspected infection, e.g. varicella zoster (shingles)

Items of infected linen and clothing should first be placed into a red water soluble (alginate) bag, sealed/tied and then placed inside a white impermeable (plastic) bag or fabric bag (it is best practice to use impermeable bags rather than fabric), or a designated lidded solid (plastic) laundry bin, which is labelled as 'Infectious linen'. If a fabric bag is used it should be labelled stating 'Infectious linen' and laundered after each use. The lidded bin should be cleaned and disinfected inside and out after removing the red bag.

# 3. Handling of linen (used, soiled, fouled and infected)

All dirty linen should be handled with care and attention paid to the potential spread of infection. Residents and staff must not be put at risk during the handling, disposal and transportation of dirty linen.

- Staff should ensure cuts and grazes are covered with a waterproof plaster when handling all linen.
- A disposable apron and gloves should be worn when handling used, soiled, fouled or infected linen.
- Linen should be removed from a resident's bed with care and placed in the appropriate bag, not placed on the floor. Care should be taken to prevent unnecessary shaking of linen as this will increase the number of bacteria in the air. The exposure of susceptible wounds should be avoided within 15-30 minutes of bed making.
- Linen must be segregated correctly (see section 2 above) and placed in the correct bag before transport to the laundry area.
- Laundry bags should be sealed/tied securely and be no more than 2/3 full before transportation to the laundry.
- Laundry staff should not open water soluble bags, the bag should be placed directly in the washing machine.

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- After handling used, soiled, fouled or infected linen and removing gloves, hands must be washed thoroughly.
- Where possible, a laundry skip should be used for the segregation of linen and transportation to the laundry area.
- If fabric laundry bags are used rather than non-permeable (plastic) bags, they should be laundered with the contents of the bag. If plastic bags are used, they should be disposed of as offensive waste if no known or suspected infection, or infected waste if a known or suspected infection.
- Duvets should be washed whenever visibly soiled, at least every three months and between use on different residents.
- Duvets with a PVC cover should be cleaned whenever visibly soiled, at least every three months and between residents, with detergent and warm water or machine washed as per manufacturer's instructions.

#### 4. Laundering resident's own clothing

- To prevent contamination of hands, the sink and surrounding environment, resident's clothes that are soiled, fouled or infected should not be sluiced by hand, a washing machine sluice cycle should be used.
- Resident's own clothes should be laundered on the highest temperature possible for the item or as recommended by the manufacturer.

#### 5. Uniforms and workwear

- Uniforms and workwear worn by staff when carrying out their duties should be clean and fit for purpose.
- Uniforms and workwear should specifically support good hand hygiene.
- Always use personal protective equipment to prevent contamination of uniforms.
- Soiled uniforms and workwear should be taken home in a plastic bag and laundered separately from other clothing on a hot wash cycle at the highest temperature that the fabric will tolerate.
- Garments should be dried thoroughly. Tumble drying or ironing will further reduce the small number of microbes present after washing.
- Use a clean plastic bag to transport laundered uniforms to work.
- Footwear must be well maintained, visibly clean, non-slip and support and cover the entire foot to avoid contamination with blood or body fluids or potential injury from sharps.

### 6. Clean linen

- Linen should be fit for purpose, look clean and should not be damaged or discoloured.
- Clean linen and clothing should not be stored in the laundry room.
- Clean linen should be stored in a clean designated room/cupboard not used for other activities. The room/cupboard should be equipped with wipeable shelving that can be easily cleaned and allow free movement of air around the stored linen.
- Linen should be stored above floor level, away from direct sunlight and water, in a dry cool environment.
- The linen room/cupboard should have doors that are kept closed to prevent contamination of the linen.
- Clean linen must be monitored to ensure it is in a good state of repair.

### 7. Frequency of laundering

- Linen and resident's clothing should be laundered whenever visibly soiled, or at least weekly.
- Communal hoist slings should be laundered between use on different residents.
- Hoist slings designated to a resident should be laundered regularly (frequency will depend on use and resident) and whenever visibly soiled.

### 8. Laundry temperatures – thermal disinfection

Washing processes should have a disinfection cycle in which the temperature in the load is maintained at either:

- 65°C for not less than 10 minutes, or
- 71°C for not less than 3 minutes

With both options, 'mixing time' must be added to ensure heat penetration and effective disinfection.

For machines of conventional domestic design and a low degree of loading, e.g. below 0.056 kg/litre, 4 minutes should be added to these times to allow for mixing time. A sluice cycle must be available on machines used in smaller provider units for dealing with foul/infected linen.

### 9. Requirements for laundry facilities

A designated separate room should be used for laundering of linen and the room should not be used for any other purpose. Industrial washing machines and tumble dryers rather than household ones should be used in care home premises, to ensure correct thermal disinfection of linen and provide evidence of temperature compliance.

- The room should have a dirty to clean work flow system, so that clean and soiled/fouled linen are physically separated throughout the process.
- Washing machines should be of an industrial type and have a sluice cycle for fouled linen and hot wash cycles (see Section 8 for correct temperature requirement). They should be professionally installed and maintained.
- An industrial dryer should be used that is regularly maintained to dry all clothing and linen.
- Appropriate personal protective equipment and eye protection should be available for staff.
- The room should have a hand wash basin with elbow operated mixer taps, no plug or overflow, wall mounted liquid soap dispenser with disposable cartridges and paper towels.
- Foot operated lidded waste bins, colour coded for domestic, offensive or infectious waste, should be available for the disposal of waste including impermeable waste bags.
- Heavily soiled items should have a pre-wash/sluice cycle selected.

Under no circumstances should a manual sluice facility or sluicing sink be used or situated in the laundry room.

# 10. Infection Prevention and Control resources, education and training

The Community Infection Prevention and Control (IPC) Team have produced a wide range of innovative educational and IPC resources designed to assist your Care Home in achieving compliance with the *Health and Social Care Act* 2008 and CQC registration requirements.

These resources are either free to download from the website or available at a minimal cost covering administration and printing:

- Over 25 IPC Policy documents for Care Home settings
- 'Preventing Infection Workbook: Guidance for Care Homes'

- 'IPC CQC Inspection Preparation Pack for Care Homes'
- IPC audit tools, posters, leaflets and factsheets
- 'IPC Bulletin for Care Homes'

In addition, we hold educational study events in North Yorkshire and can arrange bespoke training packages and 'Mock IPC CQC Inspections'. Prices vary depending on your requirements and location.

Further information on these high quality evidence-based resources is available at <u>www.infectionpreventioncontrol.co.uk</u>.

### 11. References

Department of Health (2015) The Health and Social Act 2008: Code of Practice for the prevention and control of infections and related guidance

Department of Health (2013) 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) Choice Framework for local Policy and Procedures (CFPP) 01-04 Decontamination of linen for health and social care: Social care

Health Protection Agency (2013) *Prevention and control of infection in care homes – an information resource* 

NHS England and NHS Improvement (March 2019) Standard infection control precautions: national hand hygiene and personal protective equipment policy