

Laundry, Mattresses, Pillows and Fire Evacuation Sheets; Handling, Decontamination and Disposal Protocol.

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RELATED TRUST POLICIES

Infection Control Policy

Dress Code and Uniform Policy for All Employees

Executive Summary

This protocol provides information on the correct processes for handling, storing, washing (laundering) and disposal of laundry, as well as the decontamination, checking and disposal of mattresses. It also contains relevant information on ski sheets for patient evacuation.

It applies to all Healthcare Workers, staff, contractors and volunteers in the Trust who wear, handle, store, decontaminate and dispose of uniforms, laundry, mattresses or ski sheets.

This protocol is an appendix to the Infection Control Policy. Refer to the Infection Control Policy for information on the criteria, responsibilities and systems required to prevent and control Healthcare Associated Infections (HCAIs).

1. Introduction

Both laundry and mattresses may become contaminated with micro-organisms from patients with infection or when soiled by blood, excreta or other body fluids. It is essential that processes are in place for appropriate handling, storage, decontamination and disposal of these items to ensure that cross infection does not occur.

2. Laundry and Uniforms

2.1 The Laundering Process

The laundering process decontaminates items by a combination of detergent, dilution, mechanical action and temperature. All parts of the load must have sufficient time to reach an adequate temperature. A wash of 60 degrees for 10 minutes removes almost all micro-organisms. A wash at a lower temperature, down to 30°C will eliminate MRSA and most other micro-organisms. Micro-organisms that remain after washing may also be destroyed by tumble drying and/or ironing.

Laundries that process hospital linen must comply with Department of Health Guidelines (1995). Laundry staff that sort linen may be protected from exposure to hazardous linen by appropriate segregation of potentially contaminated laundry. To prevent injury to laundry staff and damage to machines, sharps, dentures, bedpans, instruments, etc must be removed prior to sending items to the laundry.

2.2 Ward-based Washing Machines and Tumble Dryers.

Whenever possible patient or client personal clothing should be given to relatives or carers to wash at home. All such linen should be placed in plastic bags and relatives/carers informed of any soiling.

Personal clothing (including compression socks and stump shrinkers) that cannot be laundered at home may be sent for laundering via the contracted Linen and Laundry

Infection Control Policy 2011; Appendix D, Laundry and Mattresses Protocol

supplier. Local laundering on wards should only be necessary in Paediatrics and Community settings e.g. Gwynne Holford ward. Please refer to local protocols.

Washing machines must be appropriately situated in a dedicated room away from patients, food or play areas, so as to reduce the risk of cross-contamination. The room should have a utility sink, a separate clinical hand wash basin and impermeable floor surface. Instructions on how to use the washing machine and tumble dryer must be clearly displayed in laundry areas.

Where a washing machine is installed a tumble dryer should also be provided. The tumble dryer must be externally exhausted. Laundry must not be left to air dry.

The installation or replacement of washing machines and tumble dryers must be discussed with and agreed by the Infection Control Team. Domestic specification laundry machines are not suitable for the healthcare setting. All machinery must be ordered in line with Procurement guidelines and as per HSG (95) 18 guidelines. They must be to a commercial specification with a sluice and hot wash cycle (65°C for ten minutes or 70°C for three minutes)

Check washing instructions before laundering and do not over-fill washing machine. Foul or infected linen must **not** be pre-washed by hand to remove gross soil; the sluice cycle should be used prior to a hot wash. Linen that cannot withstand high temperatures may be disinfected by adding hypochlorite (150ppm) to the final rinse or dry cleaned if not washable.

The washing machine and dryer must have an annual maintenance schedule agreed with the Estates department to ensure appropriate planned preventative maintenance and correct functioning. Records of checks should be kept. They should also be cleaned regularly, in accordance with manufacturer's instructions.

These machines are provided for the sole use of patients to launder their personal items. Hospital linen, uniforms or equipment must not be laundered or dried in ward based machines. These items must be laundered via the Trust's Linen and Laundry contract or at home.

2.3 Safe Handling and Storage of Linen

- Wear plastic apron (but not gloves) during bed-making and when handling used linen.
- In addition to a plastic apron, wear gloves when handling soiled linen that is visibly contaminated with blood, body fluids or faeces.
- Used clothes and linen must be segregated in appropriate colour coded bags.
- Remove sharps, instruments, dentures, etc prior to sending items to the laundry.
- Take a linen skip to the patient's bedside. Do **not** walk with used/soiled linen from the bedside to the skip.
- Foul or infected linen must be bagged immediately and stored in designated area e.g. sluice, if available.
- Hold linen away from the body to prevent contamination of uniform.
- Do not shake linen, to prevent dispersal of skin scales.
- Tie when 2/3 full. Do not overfill so that linen is overflowing, as this increases environmental contamination.
- Wash and dry hands after handling linen.
- Store clean linen on shelves in a clean, designated cupboard
- Linen left out on trolleys on the ward must be covered to protect it from dust and contamination

2.4 Uniforms and Workwear

Uniforms worn by staff in clinical areas may become contaminated by a range of pathogens, especially after contact with body fluids, infected wounds or burns. The front of the uniform is the most likely part to become contaminated and the risk can be reduced by the appropriate use of plastic aprons. A clean uniform must be worn every day by those having direct contact with patients. Change uniform if it becomes visibly contaminated; keep a spare uniform at work, if possible, in a clean plastic bag.

Scrub suits, white coats and laboratory coats must be laundered via the hospital laundry contract. In order to prevent injury to staff and damage to the machines it is important that name badges, pens, pencils, scissors, instruments and other sharp items are removed

Infection Control Policy 2011; Appendix D, Laundry and Mattresses Protocol

before sending clothing items to the laundry. See diagram 1 for correct disposal of scrub suits / uniforms at SGH . (page 23)

There is currently no provision for laundering of other uniforms by the Trust. Uniforms and clothing worn at work should be laundered at home at the hottest temperature suitable for the fabric.

The washing temperature should be considered by the Trust when purchasing new uniforms. Uniforms should be able to withstand washing temperatures of 60° C.

Do not overload the washing machine, so that there is maximum dilution. Wash heavily soiled items separately, to prevent possible cross contamination and to allow the uniform to be washed at the highest recommended temperature. Washing machines should be regularly cleaned and serviced in accordance with the manufacturer's instructions.

2.5 Curtains

Curtains must be changed when visibly soiled, after discharge/transfer of patients with particular infections and as per local planned routine change. Linen curtains must be placed in purple bags prior to being sent to the laundry.

For QMH use white bags, see appendix D

Disposable curtains to be discarded in the waste stream as advised by the Waste Managers

3. Hospital Mattresses

Hospital mattresses are equipped with a waterproof and fire retardant cover. However as mattresses age, the waterproofing layer on the cover wears out and/or may be perforated due to misuse. It is therefore, important, to remove mattresses with defective covers from use as they can harbour pathogenic organisms and can pose an increased fire hazard. It is also necessary to remove mattresses from use where the foam core has degraded, as they become extremely uncomfortable and interfere with patients' sleep.

3.1 Mattress Cleaning on the Ward

3.1.1 Foam Mattresses

- In-between patients, if the patient had no infection and there is no visible soil, mattresses must be washed with detergent wipes.
- In-between patients, if the patient had an infection or there is contamination with body fluids or faeces the mattress must be cleaned with a 0.1 % sodium hypochlorite solution (i.e. Chlor-Clean)
- If the mattress is contaminated with blood the area must first be cleaned with a 1% sodium hypochlorite solution (i.e. Milton **OR** HazTab granules. **Do not mix these agents**) and then the whole mattress wiped over with a detergent wipe.

3.1.2 Pressure Relieving Mattresses

- On delivery from contractor at Dawes House, in the Community
 - Unwrap mattress and check mattress for cleanliness and odour. Inform supplier of any defects immediately
- In-between patients, if there is no infection or visible soil, mattresses must be cleaned with detergent wipes.
 - At SGH the pressure relieving mattress coordinator (**bleep 6681**) should then be informed that the mattress is available for use.
 - At Dawes House clean as above and place in outer bag prior to collection. Person-in-charge to contact Medequip to arrange collection urgently.
 - At Offender healthcare arrange collection via Head of Healthcare
 - Mattresses in patient's own homes are on loan via WICES follow local collection arrangements after cleaning as above

- See 3.3 re disposal

- In-between patients if the patient had an infection or there is contamination with body fluids or faeces the mattress must be cleaned with a 0.1 % sodium hypochlorite solution (i.e. Chlor-Clean) At SGH the pressure relieving mattress coordinator (**bleep 6681**) should then be informed that the mattress is available for use. At QMH, Dawes House, Offender healthcare label item as having been cleaned and inform person in charge or manager about collection.

- If the mattress is contaminated with blood the area must first be cleaned with a 1% sodium hypochlorite solution (i.e. Milton **OR** HazTab granules. **Do not mix these agents**) and then the whole mattress wiped over with a detergent wipe.

Mattresses with pumps marked 'Please remove this mattress for cleaning' **must not** be used under any circumstances. They should be set aside and the Pressure Relieving Mattress Coordinator Informed (bleep 6681).

Pressure relieving mattresses **must not** be left on floors in public access areas including corridors

3.2 Mattress Checking

3.2.1 Hospital Mattress Checks

At SGH these will be carried out by the **Hospital Equipment Team**;

- all mattresses checked annually as part of the bed maintenance programme
- all mattresses checked on beds undergoing repair or being stored in the bed store.

In CSW the annual checks will be carried out by the Infection Control link staff with support from the IC nurses at QMH, Dawes House and Offender healthcare.

Infection Control Policy 2011; Appendix D, Laundry and Mattresses Protocol

In addition to the annual inspection carried out by the Hospital Equipment Team **Nursing staff** are required to carry out an external and internal examination of mattresses **between patients**. Any defects at SGH must be reported to the Hospital Equipment Team (bleep 7367) for immediate replacement.

For CSW: Report any defects at QMH to the business manager, at Dawes House to the housekeeper or in their absence the person-in –charge and to the healthcare lead at Offender Healthcare.

For patients at home inform the CTL Community services who will arrange collection. See checking procedure below.

Mattresses and Handling of Linen are also checked annually as part of the annual environmental audit using the Department of Health Infection Control Nurses' Association Environmental audit tools.

3.2.2 Checking procedure

Mattress checks will consist of the following:

- external examination of cover for stains and tears;
- internal examination of cover for stains, (unzip cover and check inside)
- examination of the foam core for stains and degradation (unzip cover and check inside. Cover does not need to be removed.)

Mattresses which are stained in any way, have torn or perforated covers or have a dip in the middle will be condemned. This will be indicated by the word '*condemned*' written on them in large letters with indelible pen.

Mattresses marked 'Condemned' must not be used under any circumstances.

3.3 Mattress Disposal

Contaminated mattresses (visible staining of cover or foam core)

At SGH contaminated mattresses will be placed in yellow plastic 'contaminated mattress' bags and tied off. They will be disposed of as soon as practicable in line with the Waste Management Policy 2010, via the Waste Manager.

At QMH contaminated mattresses will be identified and placed in yellow plastic 'contaminated mattress' bags and tied off. They will be disposed of as soon as practicable in line with the Waste Management Policy 2010, via the Sodexo manager extn 6110.

At Offender healthcare contaminated mattresses will be identified and disposed of via the Health and Safety manager, custodial staff.

Non-contaminated mattresses (no visible staining on any part of the mattress)

At SGH these will initially be stored by the Hospital Equipment Team and disposed of via the Waste Manager as appropriate. At QMH the Sodexo manager will arrange temporary storage. At Dawes House space the person-in-charge will arrange urgent collection.

4. Pillows

Pillows should be sealed in an impermeable cover. Pillows must be cleaned whenever visibly soiled and between each patient. Routine cleaning of pillows should be carried out with detergent and warm water/ detergent wipes. If the pillow is contaminated with blood the area must first be cleaned with a 1% sodium hypochlorite solution (i.e. Milton **OR** HazTab granules. **Do not mix these agents**) and then the whole sheet wiped over with a detergent wipe.

Pillows that have been used by patients with a known or suspected infection should be decontaminated by wiping with Chlor-clean.

Pillows must be checked regularly to ensure the covers are intact. Pillows with a damaged or missing impermeable cover must be disposed of.

5 Fire Evacuation Sheets

5.1 Fire Evacuation Sheet Cleaning and Checking

- In-between patients, if the patient had no infection and there is no visible soil, fire evacuation sheets must be cleaned with detergent wipes.
- In-between patients, if the patient had an infection or there is contamination with body fluids or faeces the fire evacuation sheet must be cleaned with a 0.1 % sodium hypochlorite solution (i.e. Chlor-Clean)
- If the fire evacuation sheet is contaminated with blood the area must first be cleaned with a 1% sodium hypochlorite solution (i.e. Milton **OR** HazTab granules. **Do not mix these agents**) and then the whole sheet wiped over with a detergent wipe.

[Fire evacuation sheet must be placed flat upon the bed underneath the mattress and any associated equipment and linen. (See appendix B)]

[The buckles must be in placed in the pockets on the fire evacuation sheet provided, so that they are easy to locate if required and do not cause any discomfort to the patient when not in use. The sheet should be secured onto the mattress using the loops provided.]

Nursing staff are required to carry out an examination of fire evacuation sheets **between patients** while undertaking the mattress examination; on receipt of a new sheet; when making up a bed and after use. Any defects e.g. tears, broken buckles, missing buckles etc. must be reported to the Fire Officer on X0656 or fireofficer@stgeorges.nhs.uk for immediate replacement.

6 References

J. Wilson (2006) *Infection Control in Clinical Practice* 3rd edition, Bailliere Tindall, Elsevier.

Department of Health, (2010) *Uniforms and Workwear; Guidance on uniform and workwear for NHS employees*. NHS.

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_114751 (Accessed 5th August 2010)

Department of Health (1995) *HSG (95) 18 Hospital Laundry Arrangements for Used and Infected Linen*. London: DH. Available from:

http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4012310.pdf . (Accessed 5th August 2010)

Gray D, Campbell M (1994). A randomised clinical trial of two types of foam mattress. *Journal of Tissue Viability*, 4 (4): 128 - 132.

Infection Control Nurses Association (2004). *Audit tools for monitoring infection control standards*. ICNA Available from: <http://www.ips.uk.net> (Accessed 5th August 2010)

Appendix A - Guidance for Use of Washing Machine and Tumble Dryer

- These machines are for use by patients only.
- Patients must wash only their own clothes not mix loads with other patients.
- Items should be washed and dried in accordance with the manufacturer's instructions.
- Use the highest temperature the fabric can withstand.
- Do not overload the machine.
- Use the right amount of detergent and fabric conditioner.
- Wash and dry hands after handling used items.
- After washing, items must be dried as quickly as possible, using a tumble drier, and not left hanging.
- After washing and drying all items must be removed from the laundry area.

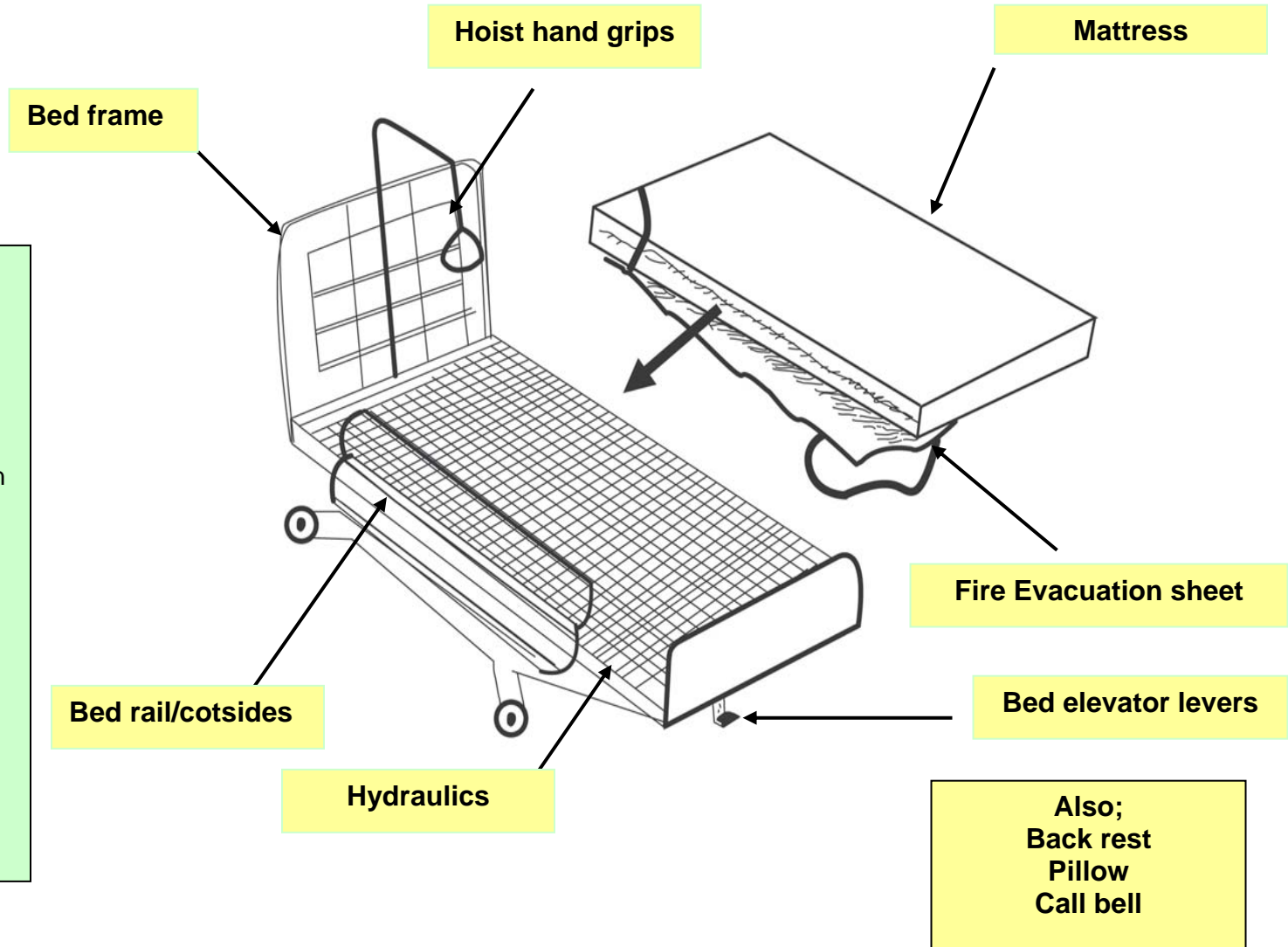
Cleaning and Disinfection of Beds and Mattresses.

Appendix B

Beds are intricate pieces of equipment that comprise several different components; it is essential that all the components are cleaned and/or disinfected according to Trust procedure.

- If NO infection control risks; clean the bed and associated equipment with detergent wipe
- Where there has been an infection control risk, bed and associated equipment must be disinfected with Chlor-clean.

Moving parts and electrical motors must NEVER be washed with water or detergent wipe.



Appendix C: Linen Briefing Pack SGH (for QMH see Appendix D, for Dawes House and Offenderhealthcare see Appendix E)

In Partnership with



LINEN BRIEFING PACK

CONTACT NUMBERS

Sunlight Contract Manager and Linen Distribution Staff:

Linen Room Lanesborough Wing, Ground Floor

– Ext 1201/ bleep 6273

Linen Room Atkinson Morley Wing, Lower Ground Floor – Ext 4434

DUTY HOURS

Lanesborough / St James / Knightsbridge Wings

0700 – 1500 Monday to Friday

0700 – 1200 Saturdays/Sunday/Bank Holidays

Atkinson Morleys Wing

0700 – 1500 Monday to Friday

0700 – 1200 Saturday

No Service Sundays

Out of Hours Emergency Linen Procedure

If you experience a shortage of linen after 3.00pm weekdays or at the weekend, an emergency stock is available via the Porter Service on ext. 2134.

Segregation of Linen

When bagging soiled linen please adhere to the following coloured bags:

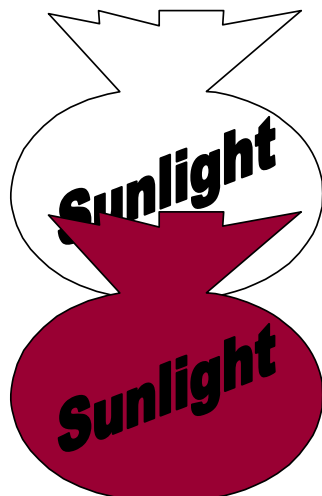
WHITE - Regular (dry) soiled linen (sheets, towels, blankets, scrub suits etc.)

RED - Fouled or infected, double bagged first with white Sunlight bags and the red Sunlight outer bag.

BLUE - Trust owned items e.g. slings (These items must be marked with the ward and hospital name). Infected Trust owned items place in a red bag then a blue bag.

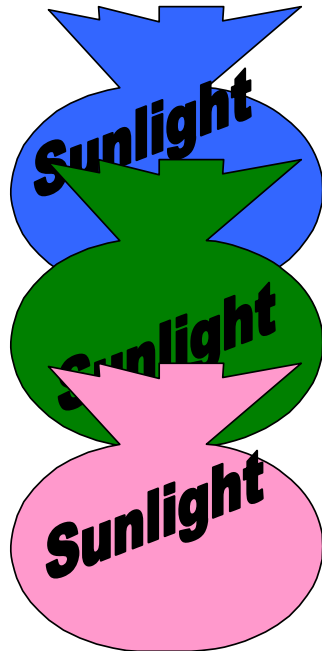
GREEN - Theatre soiled item of linen.

PINK - Rejected Linen that cannot be used on your Ward/Department MUST be put inside the Pink bag for the Sunlight Staff to collect so that your Department can get a credit.



USED LINEN
(I.E. SHEETS, BLANKETS P/CASES, TOWELS, ETC)

FOUL/INFECTED LINEN
(I.E. CONTAMINATED WITH BLOOD, BODILY FLUIDS, URINE, FAECES) OR FROM ISOLATION



TRUST OWN GOODS

Must have Ward name and hospital name

THEATRE LINEN USE ONLY

REJECTED LINEN

Any linen that is delivered by Sunlight that is unsuitable for patient use must be placed in the rejected linen bag and this linen will be credited back to your department.

Please do not fill the plastic bags more than 2/3 full as it makes them heavy to lift and difficult to tie at the neck.

HOWEVER FOUL OR DAMAGED THE LINEN MAY BE PLEASE DO NOT THROW ANYTHING AWAY.

UNDER NO CIRCUMSTANCES SHOULD LINEN BE CUT OR PLACED INTO YELLOW CLINICAL WASTE BAGS.

ALL LINEN MUST BE RETURNED TO SUNLIGHT AS ANY LOSSES WILL BE CHARGED TO THE TRUST



Do not place linen in domestic or clinical waste bags, as shown above. This will cause service issues at the laundry; all linen must be bagged appropriately in accordance with the soiled linen bagging procedure.

INCREASE IN LINEN STOCK LEVELS

All requests to increase current linen levels must be put in writing via email to Andrea Wright, Assistant General Manager or Catherine Leak, Assistant Facilities Manager. Departmental budget code must be included as this will be recharged.

TOPPING UP SERVICE

Infection Control Policy 2010; Appendix D, Laundry and Mattresses Protocol

Linen distribution staff delivers linen to all wards six / seven times a week, Monday to Saturday / Sunday and every Bank Holiday.

It is not necessary to stock pile linen for the weekend as there will be a delivery

Quantities are based on the needs of the individual ward/clinical areas.

Plastic bags will be supplied to your linen cupboard and replenished by your Sunlight linen distributor.

MARKING TRUST OWNED ITEMS

It is vital that all Trusts owned items which require laundering (i.e. curtains, slings, hoists, slides & gloves) are marked with the ward / department and hospital name. The Sewing Room staff will mark them for you if you contact them.

Trust Owned Items / Personal Parcel System

1. All Trust owned items to be sent to the laundry in a blue bag.
2. The item should be marked with the ward or department and hospital name.
3. The personal parcel card provided with the blue bag must be completed with all items listed under the articles column. This card must be placed inside the blue bag and taken to the linen room.
 - Ward staff must leave their blue bags (slings/hoists) within their linen rooms for linen distribution staff to collect.
 - Alternatively ward staff can personally deliver their blue bag to the linen room.
4. Once checked by the linen staff within the linen room, the parcels are then the responsibility of Sunlight Services.

5. Linen staff complete a log book of what items have been sent by the Trust prior to them sending them to the laundry.
6. Any loses or damages will be replaced or repaired.
7. All items sent via ward areas will be returned back to the ward area by the linen distribution team. Staff at ward level will be required to sign for each delivery to verify that the items have been returned.
8. Items such as white coats and uniforms must be collected from the Linen Room,
9. There is a 7 to 10 day turnaround time for return of items.

CURTAIN LAUNDERING PROCEDURE

For all non AMW wards and clinics staff should contact the Mitie Helpdesk on Ext: 4000.

For Atkinson Morley Wing, ward staff should contact Ext: 4434 or Bleep number 6273.

PILLOWS

Any requests for additional pillows must be undertaken in the morning on ext: 1201 for St. George's main site & Ext: 4434 for AMW.

However if you require further stock out of hours, please contact the Porters Lodge Ext: 2134.

QUALITY MONITORING

Linen quality is randomly monitored on a daily basis by the linen room staff. The quality control of linen is carried out at Sunlight Services, Brixton. The Sunlight Manager will complete a quality questionnaire periodically, using a formatted questionnaire, to ensure all users are receiving a satisfactory linen service

LINEN REJECTION

If you find an item which is unacceptable, please place in a Pink (plastic) bag in the linen cupboard and the item will be replaced free of charge by your linen distributor.

UNDER NO CIRCUMSTANCES SHOULD LINEN BE THROWN AWAY

DO'S & DON'T'S

DO'S

- When making beds, ward staff are encouraged to “top and tail” beds, unless patients are incontinent or the sheets are fouled. Linen should be used wisely.
- Ward staff are to make sure all personal ward items are marked with the ward name and the hospital name.
- Please ensure your linen cupboard is tidy at all times. This will speed up the linen service deliveries.
- Please ensure any linen concerns are put in writing to the Contract Manager and Assistant General Manager or Assistant Facilities Manager.

DONT'S

- Linen must not be used to mop up wet floors, as stains cannot be removed.
- Linen is for patient use only and must not be used as a covering for equipment, windows etc.
- Hoarding of linen is forbidden as this hampers the efforts of the linen staff when establishing linen levels.

Infection Control Policy 2010; Appendix D, Laundry and Mattresses Protocol

- All linen is the property of Sunlight Service and must remain on St George's Hospital site.
- Please refrain from filling up the linen cupboards with “other” items, as this will impact on the linen service.
- Please refrain from allowing patients to go home with Sunlight linen property.

UNIFORM SCRUB SUIT LOCKER SERVICE

All pockets must be checked before placing into the soiled locker in your changing rooms.

Under no circumstances should the labels be cut out as these indicate the sizes

No scrubs should be placed into any Sunlight bags

Any Scrubs that are damaged is the cost of the Department.

Please ensure that all items (sharps / pens / I.D. badges etc.) are removed before sending to the laundry.



Diagram 1

Please place all used uniforms in the locker provided in the changing rooms

DON'TS



Do **not** place Uniform scrub suits (with logo) into the Sunlight linen bags. Please call the linen room if the locker is full.

Do **not** cut the labels out or tear the uniforms. Please remember to remove all items from pockets as Sunlight staff do not check pockets before washing. Items such as pens, sharp items, & sweets have all been found during the washing process.



APPENDIX D

**User Guide
Linen Services - QMH**

Helpful numbers and contact personnel

Help Desk Ext. 6100
24 hour Service

Out of hours emergency linen procedure

In the event of an emergency the following procedure should be followed by Wards & Departments requesting linen out of hours.
Call 6100

Contract monitoring

Weekly audits of a whole range of performance indicators including delivery times, quantity delivered, whiteness, compliance with thermal disinfection guidance etc.
Quality audits with Ward / Departmental Manager.
Monthly, quarterly and annual contract monitoring meetings.

Rejected linen procedure

If you receive clean linen which is unusable due to damage or staining.
DO NOT place into a soiled linen bag. Call helpdesk on 6100

Laundering of uniforms

Place soiled uniform / white coats / scrub suits into blue plastic bags. The exception to this is Day Case Unit and theatre laundry which need to go in a green bag.

Procedure for all "return to sender" (RTS) items

RTS items are Trust owned items e.g. uniforms, hoist slings.

Prior to usage and laundering at RTS items must have a completed laundry slip detailing the hospital, ward / department and date. This slip is in triplicate and one copy must be retained by sender, 1 copy to go with the laundry items and the other slip to be given to the laundry porter on collection of items, or via helpdesk.

Please ensure that the address states Queen Mary's Hospital, **ROEHAMPTON**
Failure to comply with this request may result in loss of items.

Place soiled items into a blue (green if day case unit or theatre) plastic laundry bag, which are located in the departmental linen room or on request from helpdesk.
Place the bag of soiled linen in normal collection area.

Laundered items will be returned directly to individual Wards and Departments, as detailed on label.
For further advice on this service please call helpdesk on 6100

Linen levels

Linen is provided to individual Wards and Departments on a pre-agreed amount, this includes bags for soiled linen. All queries relating to your individual Ward / Department linen levels should be made in the first instance to the helpdesk

Health & Safety

Only fill bags two-thirds full unless they contain wet soiled linen in which case the bag should only be half filled or to a weight that is safe to lift. (Maximum 16kg)

Complaints & Service issues

All complaints or service issues should be brought to the attention of the helpdesk.

Colour coded bag procedure for soiled linen – Fill bags two-third full and secure at the top by tying a knot

RED BAG
& soluble bag



Infected and heavily soiled linen. MUST BE DOUBLE BAGGED

Blue BAG



Return to sender items.
Uniforms

GREEN BAG



Day Case unit and minor ops laundry

WHITE BAG



All other Linen

Appendix E: Linen Information for Dawes House

Linen services at Dawes House are provided by Sunlight (0207 733 3482). The service manager is available via 07827 879302.

Staff should inform the housekeeper or the person-in-charge if there are any problems with the linen services. The contract is managed by John Welsh, SSP (South West London Shared Services Partnership).

Appendix F: Linen information for Offender Healthcare HMPW

Linen services for Offenderhealthcare are provided by Elmleigh prison laundry. The linen services for the main prison are managed separately at a different site. Extra supplies of linen are available via the Ministry of Justice for example during outbreaks of infection. Queries should be addressed via the prison laundry on 0208 588 4194.