

Linen and Curtain Policy	Type: Policy Register No: 08021 Status: Public
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Developed in response to:	HTM 01-04
Contributes to CQC Core Standard number:	Regulation 15 - Premises and equipment

Consulted With	Post/Committee/Group	Date
Lyn Hinton	Director of Nursing	October 2017
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Author/Contact for Information	Georgina McTaggart, Quality Monitoring Officer
Policy to be followed by (target staff)	All staff & Trust users
Distribution Method	Intranet & Website
Related Trust Policies (to be read in conjunction with)	Standard Infection Precautions Outbreak Policy Waste Management Policy Cleaning Policy Dress Code and Uniform Policy Anti-ligature Policy MEHT Heatwave plan (V5.0; 2016)

Document Review History

Version No	Authored/Reviewed by	Active Date
1.0 Formal Review	Jo Mitchell	20th March 2008
2.0 Formal Review	Ricky Cichon	22nd July 2010
3.0 Formal Review	Jim Dorrian	23 August 2012
4.0 Formal Review	Andy Wright	23 October 2014
5.0 Formal Review	Georgina McTaggart, Quality Monitoring Officer	20 March 2018
5.1 Addendum to policy to updated information on curtain changing schedules.	Georgina Sawyer, Business Support and Contracts Coordinator	14 May 2018
6.0	Georgina McTaggart, Quality Monitoring Officer	23 rd July 2018

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1.0 Purpose

- 1.1 To ensure patients maintain their privacy and dignity rights by providing suitably sized and appropriate clothing items and curtains.
- 1.2 To meet infection prevention requirements and prevent contamination by ensuring that bed linen and curtains are changed appropriately in accordance with Trust infection prevention policies.
- 1.3 To provide guidance for the safe handling, disinfection and disposal of all used linen and curtains in accordance with NHS Choice Framework for local policy and procedures 01-04 – Decontamination on linen of social care: Social Care, also known as “HTM 01-04”.
- 1.4 To provide guidelines for accessing linen and curtains at all times.
- 1.5 To provide guidelines for staff with purchasing responsibilities.

2.0 Policy Statement

- 2.1 All patients should be provided with appropriate and good quality bed linen and clothing items as required in accordance with infection control standards. In addition, all curtains, both at windows and bed spaces, should be of good quality, clean and matching in styles and colour.
- 2.2 The Trust has an obligation under the Health & Safety at Work Act to take steps to prevent the risk of infection to staff handling and laundering linen in compliance with the NNS Choice Framework for local policy and procedures 01-04 – Decontamination of linen for social care: Social Care
- 2.3 The Trust is required to deal with the potential for harm to staff and damage to linen by a failure to separate sharps from dirty linen before it is placed in to laundry bags.
- 2.4 The Trust is required to ensure that it only purchases a curtain that complies with the Furniture and Furnishings (Fire Safety) Regulations 1988 (as amended in 1989, 1993 and 2010).

3.0 Definitions

Linen	Articles and garments made form linen or similar textile, such as cotton or manmade fibres, provided by the Linen Provider.
Clean Linen	Linen items that are new, have been processed or are otherwise clean and have not yet been used for patient care.
Infected Linen	All linen which is: <ul style="list-style-type: none">• Contaminated with excreta, blood or body fluids, or• Contaminated linen from an infectious patient who is known, or clinically suspected, to be infectious (for example salmonella, hepatitis A, B or C, open pulmonary tuberculosis, HIV).
Soiled Linen	Used Linen not classified as Infected Linen.

Rejected Linen	<p>Linen that is deemed “not fit for purpose” before patient used. Examples of linen “not fit for purpose” are as follows:</p> <ul style="list-style-type: none"> • Tears or holes • Stains visible before patient use • Faded or worn fabric • Damage items (such as patient gowns missing ties) • Excessive creasing
Emergency Supplies	<p>The stock of linen required to service the needs of the Trust (i.e. in an out of hours capacity or major incident). There are 2 types of emergency linen supplies:</p> <ul style="list-style-type: none"> • Out of Hours Stock- Linen • Contingency Stock- Linen
Shelf level	<p>The agreed level of linen required for each individual ward/dept. This is assessed on a regular basis and reviewed annually to ensure that the level of linen provided is reflective of the ward/dept. need</p>
Curtains	<p>Including launder privacy curtains, disposable curtains and shower curtains.</p>
Return to Sender	<p>Linen items that are Trust owned (such as curtains) or patient owned.</p>
Scrubs	<p>Specialist clothing supplied by the linen provider and worn by theatre and other designated department staff.</p>
Key Performance Indicators (KPI)	<p>Agreed contractual and operational performance, identifying responsibilities of the Trust and Linen Provider</p>

4.0 Roles & Responsibilities

- 4.1 Whilst all members of staff have a responsibility for ensuring that the Trust at all times provides appropriate and good quality bed linen and clothing items, the following individuals have specific responsibility in relation to ensuring these provisions are met.
- 4.2 **Estates & Facilities Site Manager** is responsible for:
- Ensuring robust systems, processes and adequate resources are in place to provide sufficient bed linen and curtains of good quality
- 4.3 Director of Nursing is responsible for:
- Agreeing any changes of practice in the use of linen such as bed making procedures
 - Agreeing types and curtain styles, all in line with current British Standards
 - Ensuring that appropriate linen procedures are followed by all clinical staff
- 4.4 **Lead Nurses/Matrons** are responsible for:
- Ensuring all Ward/Departmental Managers & Ward Sisters/Charge Nurse in their areas are aware of and understand the Linen and Curtain Policy and that it is implemented into practice locally and within their areas of responsibility.
 - Investigating failures to comply with the Linen and Curtain Policy and ensure corrective action is taken to prevent a recurrence.
- 4.5 **Trust Authorised Officer** is responsible for:
- Managing the linen contract, review and produce performance reports regarding contractual and operational performance, highlighting KPI failures.

- Meeting with the Linen provider on a regular basis to review and investigate escalated contractual and operational issues.
- Establishment and on-going review of the Linen and Curtain Policy
- Approving changes to ward linen shelf levels and initiating appropriate action as part of the key performance indicators (KPI) for the Trust's Linen & Laundry Services specification.

4.6 **Linen Provider Site Manager/Supervisor** is responsible for:

- Managing an on-site team to deliver and collect linen in accordance with specified service level agreements
- Informing the Trust authorised officer of any problems in the delivery of the linen service on a daily basis

4.7 **Domestic staff** are responsible for:

- Changing curtains in accordance with the Cleaning and Infection Prevention policies.
- Maintain the Patient Clothing Service as outlined in section

4.8 **Ward/Departmental Managers & Ward Sisters/Charge Nurse** are responsible for:

- Ensuring all staff in their areas are aware of and understand the Linen and Curtain Policy and that it is implemented into practice locally and within their areas of responsibility ensuring all staff are aware of and comply with the policy
- Ensure that linen used is fit for purpose and that any items that are not, are returned to the linen provider using the correct reject system in place
- Identify linen quantities required for their area and agree any changes with the Hotel Services Manager
- Ensure that items that belong to their area are laundered through the personal bundle system appropriately to avoid loss as referred to in Section 9.

4.9 **The Procurement Department** is responsible for ensuring that:

- Only the curtain specifications as agreed by the Director of Nursing are purchased
- Only fire retardant curtains are purchased as set out in BS5667
- Escalating any requests for items outside of this specification to the Hotel Services Manager

4.10 **Infection Prevention Team** will work closely with the Trust authorised officer to:

- Provide advice on new products and laundering procedures
- Provide advice and be consulted on all matters related to linen contracts and curtain changing frequencies
- Provide appropriate infection prevention training to Trust staff

4.11 **All staff** have a legal obligation to:

- Take necessary measures to prevent the risk of infection of all linen (both clean & dirty)
- Ensure that only linen of a good quality is used for patients, following the correct and that the procedures for the use of clean linen, and handling and storage of soiled linen within this policy

5.0 Patient Privacy and Dignity

5.1 Every effort should be made by the Trust to ensure that patient's privacy and dignity rights are met whilst under the Trust's care.

5.2 There are a number of linen items, including bed linen and patient clothing that are

designed for specific sizes and purposes.

- 5.3 Staff must ensure that the appropriate items are used at all times to ensure patients have dignity.

6.0 Accessing, Delivery & Storage of Clean Linen & Curtains

- 6.1 Each ward or department that require linen must have an agreed shelf level, which is agreed through the Ward Sister or Departmental Manager and the Trust authorised officer.
- 6.2 It is recognised that additional linen will be required from time to time in order to cope with infections on wards etc. and requests should be made in line with the Linen Procedure as outlined in Appendix 1.
- 6.3 It is recognised that additional linen will be required for bariatric patients admitted on wards. Should patients require bariatric gowns the ward should request this in line with the Linen Procedure as outlined in Appendix 1.
- 6.4 It is also recognised that daily stock levels might need to be changed on a permanent basis. Requests for permanent changes in levels should be made in line with the Linen Procedure as outlined in Appendix 1.
- 6.5 Linen is delivered to wards and departments Monday to Saturday by the Linen provider within a 2hr timeframe of the agreed ward/dept. delivery time as detailed in the KPI agreement. Actual delivery times are recorded inside the Linen store room/trolley and will be available for any staff member to review the delivery as seen in Appendix 2.
- 6.6 Clean linen will be delivered to and stored on wards and departments in identified facilities such as a store room, cupboard or trolley. These storage facilities must not be used to store any items other than clean linen. Linen must be kept off floors at all times the facilities must be kept clean and tidy to ensure easy and quick access at all times.
- 6.7 It is recognised that additional linens may be required when the linen room is closed. An emergency stock of linen, identified as the Out of Hours Linen is available. Wards and departments can request Out of Hours linen by contacting the Helpdesk on ext.6000, as outlined in Appendix 1. The Helpdesk will allocate the request to the portering team, whom will access the Out of Hours Linen stock and deliver the requested linen to the ward/dept.
- 6.8 Emergency services are not permitted to utilise the on-site linen stock in the Emergency Department to replenish the linen on the ambulance. Emergency Services must maintain their own supply of linen for ambulances.

7.0 Bed Making

- 7.1 In order to assist in the attempt to reduce the possibility of contamination and cross infection, beds must be changed as outlined in Appendix 1:
- All linen items must be changed when a new patient is admitted.
 - All linen items must be changed if the patient has been identified to have infections.
 - The freshen-up procedure must be used in conjunction with a complete bed linen change, as outlined in the diagram in Appendix 1.

8.0 Reject Linen Items

- 8.1 Some items of linen may be deemed not “fit for purpose” before they have been used and therefore must be rejected by placing the rejected linen in the appropriate colour coded reject bag (brown) as outlined in Appendix 1. Linen item must be rejected for the following reasons:
- Tears or holes in the fabric
 - Stains visible before patient use
 - Faded or worn fabric
 - Damage to the items (such as patient gowns missing ties)
 - Excessive creasing
- 8.2 Rejected linen must not be placed through the normal laundering process; the item not “fit for purpose” will not be taken out of the system and will be laundered. This will also incur additional expenditure to the Trust.
- 8.3 Rejected linen must not be placed through the Waste Streams (clinical or domestic waste). All linen items must be processed using the correct bagging procedure as outlined in Appendix 1.

9.0 Laundering Linen and Curtains

- 9.1 Used linen must be segregated accordingly using appropriate colour coded bags as outlined in Appendix 1. Bags should be securely fastened and should never be more than 2/3 full to conform to manual handling recommendations.
- 9.2 Storage rooms are provided throughout the Trust for the storage of dirty linen awaiting collection. These must be used at all times. Dirty linen should not be stored in corridors or anywhere other than inside a designated disposal room in accordance with the Trust’s Waste Management Policy.
- 9.3 Only linen must be sent to the laundry in accordance with the Trust Waste Management Policy and Handling and Disposal of Sharps Policy.
- 9.4 Infected or heavily soiled linen must be disposed of in a water soluble red bag on the removal from the bed or the patient. This water soluble red bag should then be placed into a white coloured bag. Heavily soiled or infected linen for personal bundles should follow the same procedure and be placed in a water soluble red bag and then into purple bag as outlined in Appendix 1.
- 9.5 Used linen should be handled and bagged in such a way as to protect patients and staff from risk of contamination or injury and to avoid damage to laundry machinery.
- 9.6 Infected or heavily soiled linen must not be placed through the Waste Streams (clinical or domestic waste). All linen items must be processed using the correct bagging procedure as outlined in Appendix 1.
- 9.7 Linen must not be placed through the Waste Streams (clinical or domestic waste). All linen items must be processed using the correct bagging procedure as outlined in Appendix 1.

10.0 Return to Sender Procedure: Laundering Curtains and Personal Items (Trust

owned items or Patient items)

- 10.1 In order to ensure that Trust owned items (such as curtains) and personal items are returned directly to the ward or domestics department, it is imperative that these items are laundered via the Return to Sender Procedure as outlined in Appendix 1.
- 10.2 Any items to be laundered that need to be returned to a ward or department must be placed in a purple bag and have a completed Return to Sender ticket included. The ticket details must contain the following information:
 - The date the items were placed in the purple bag
 - The item descriptions (for example, curtains, tunic etc)
 - The quantities of the items contained in the purple bag
 - The name of the department, ward and/or persons the items are to be returned to
- 10.3 The white copy of the ticket should be kept on the ward/dept. for recording and tracking purposes. The blue and pink copies of the ticket must be placed inside the bag with the linen. Linen porters will not collect Return to Sender items without a ticket present and completed fully. If Return to Sender items are sent without a ticket, there is a significant risk of item loss to the owner.
- 10.4 The purple laundering bag should then be placed at the designated dirty linen store for collection separate from the main soiled linen. Linen porters will not collect any Return to Sender items without the bagging procedure being correctly followed. If Trust owned or patient items are not put in the correct purple bag, there is a significant risk of item loss to the owner.
- 10.5 Reusable slings should also be laundered through this process. When completing the ticket, the item must be recorded as returned to the Manual Handling Department.
- 10.6 All linen items that are processed using the Return to Sender Procedure are sent and laundered at the owners own risk, due to the high laundering temperatures. Owners must be made aware of this risk before completing the process.
- 10.7 Return to Sender items are agreed to be processed within 72hrs of receipt of the items in the linen room. Once the items have been received, the on-site linen management will record the items being sent for laundering and will track the progress of the item until it is returned to the site.

11.0 Laundering and Disinfection Process

- 11.1 The laundering process must have a disinfection cycle in which the temperature of the load is maintained at 65°C (150°F) for not less than 10 minutes or preferably at 71°C (160°F) for not less than 3 minutes. With both options, “mixing time” of between 4 and 8 minutes must be added depending on degree of loading.
- 11.2 For items that are not design to laundered at high temperature and the chemical disinfection process, this process must still satisfy the requirements in the section ‘Disinfection of linen’ set out NHS standard HTM 01-04.
- 11.3 All washing machines must comply with the recommended and relevant criteria defined in HTM 01-04. Laundering machinery should have the specified programming ability and accurate heat sensors to meet the required disinfection standards. Industrial machines having the capability to meet these requirements must be used. Wash temperatures should be subject to a monitoring system and heat sensing systems should be tested

and calibrated at six weekly intervals. Records should be kept of six weekly testing and calibration. All domestic type washing machines must not be used for any laundering.

- 11.4 All linen items, including Scrubs, must be laundered through the linen provider laundering process. Linen items must not be removed from the hospital site.

12.0 Clean and New Curtains

- 12.1 The Trust has agreed a standardised curtain throughout its premises to promote a professional image whilst allowing a more simple method for the curtain changing programme.
- 12.2 A standardised curtain has been agreed with the Director of Nursing which meets fire retardant standards and ability to wash in accordance with regulations outlined in HTM 01-04. Any new curtains to be purchased must comply with this standard. Any changes to the use and type of curtain must be approved by the Director of Nursing.
- 12.3 Paediatric wards are exempt from the standardised curtain in order to provide a child friendly environment.
- 12.4 Disposable curtains are used in A&E, Theatres, including Endoscopy, Burns and ITU only and purchased directly by each area.
- 12.5 Some wards keep their own clean stock of curtains within their Linen Store Room, whilst others keep their stock in Domestic's curtain store due to a lack of space.
- 12.6 In accordance with the national specifications for cleanliness in the NHS, curtains/blinds should be visibly clean with no blood and body substances, dust, dirt, debris, stains or spillages.
- 12.7 Curtains must be changed immediately when visibly soiled and during a terminal clean, or as part of the Curtain Change Programme as outlined below:

Very High Risk Areas	Change four monthly
High Risk Areas	Change six-monthly
Significant Risks and Low Risk Areas	Change 12-monthly

- 12.8 Curtain changes are recorded on a Log held in the Domestic Team Leaders office and the change is indicated as either an ad hoc or a programmed change. Curtains that are sent to through the Return to Sender Procedure are logged in the linen room as per the process identified in section 10.0 of this policy.
- 12.9 Shower Curtains are replaced on a monthly basis.

13.0 Patient Clothing

- 13.1 A small selection of patient clothing and footwear is stored and accessed by the Domestic team for use when patients are discharged without any available clothing to wear when leaving the hospital.
- 13.2 Types, sizes and colours cannot be guaranteed to be in stock and not all items will be new.
- 13.3 These items can be accessed via the Domestic Team, by contacting the Domestic Team Leader on Bleep #6555 2800. The Domestic Team Leader will attend the ward/dept. to

identify the patient need and deliver the patient clothing.

14.0 Baby Linen

- 14.1 A separate laundry procedure has been set up for baby linen as these items are not suitable to be laundered via the linen provider due to the high laundering temperatures and washing procedures.
- 14.2 The baby linen items that can be laundered via this route are listed in Appendix 4. Any items sent to the linen provider in error may not be returned to the Trust.
- 14.3 Any items requiring laundry must be placed in clear bags supplied by Domestic Services.
- 14.4 The form at Appendix 4 must be completed and be placed inside each bag that is sent for laundry. A copy of this form must be kept by the Ward / Department.
- 14.5 Items must be left for collection in the dirty utility room. The current locations are:
- 14.6 Neo-Natal, Ante-Natal, and Maternity & Paediatric Wards.
- 14.7 Items will then be collected by on a daily basis (Mon –Sun) between 4am -5am.
- 14.8 Items will turnaround in 72hrs and be redelivered back in a clear bag into the clean linen areas in each Ward / Department. The original form completed will be sent back with clean linen.
- 14.9 Any new baby linen items being purchased must be approved by Hotel Services to ensure they can be laundered to achieve requirements set out in section 13.10 of this policy.
- 14.10 Any inappropriate items found within dirty laundry on the list as per Appendix 4 will be reported and returned back to the Ward / Departments
- 14.11 These items are laundered using a chemical disinfection process that satisfies the requirements in the section 'Disinfection of linen' set out in HTM 01-04.

15.0 Scrubs

- 15.1 Special clothing (e.g. theatre scrub suits, disposable headwear and specialised footwear) is issued, in line with infection prevention, for particular areas due to the nature of the work and should not be substituted with other items. There are three colours of scrubs that are used to identify different departments;
 - Cobalt (dark blue) scrubs are used in theatre departments (main theatres, PFI theatres), X-ray departments, Day Stay Unit, St. Andrews Out-Patients, Cardio department, Pain Clinic, and Urology department only.
 - Ceil (light blue) scrubs are used in Burns ITU department, Endoscopy department and Maternity department only.
 - Raspberry (dark pink) scrubs are used in HSDU.
- 15.2 Scrubs are not identified as a uniform, and therefore must be treated as a linen item. The scrubs must be laundered using the laundry and disinfection process as stated in section 10, and in accordance with HMT 01-04.
- 15.3 Scrubs can only be worn in designated areas while wearing disposable overcoats. Scrub suits may be worn within the main hospital building only (Zones A, B, C, D, & E). It is not

acceptable to wear soiled Scrubs or soiled footwear. Hats or masks must not be worn in public areas. Scrubs must not be removed from the hospital grounds.

- 15.4 In accordance with the MEHT Heatwave plan (V5.0; 2016), it may be necessary to provide emergency scrubs to designated wards and departments as a proposed action following a heatwave alert. The Heatwave plan will be triggered by the Emergency Planning Officer, and will provide details of actions required regarding emergency scrubs (locations, duration of need etc.).

16.0 Risk of Ligature

- 16.1 A ligature is any piece of clothing or cordage, or any item that can be tied or fastened around the neck, which could be utilised, as a tie or noose for the purpose of self-harm by strangulation or hanging when tied to an object. This can include linen items, such as strips of clothing or bedding, or ties from patient gowns.
- 16.2 In order to reduce the risk of ligature, all staff must comply with the Anti-ligature Policy.

17.0 Training

- 17.1 Linen procedures are included in the Infection Prevention mandatory and corporate induction sessions.
- 17.2 Local induction also includes laundering processes.

18.0 Auditing & Monitoring

- 18.1 Both Trust and Linen provider will inspect the quality of linen provided, including delivery levels and times.
- 18.2 Contract performance meetings will take place monthly with the Hotel Services Manager and Linen provider.
- 18.3 Staff at ward and department level are responsible for alerting Hotel Services if they experience shortages of linen or quality issues i.e. staining, torn at any time.
- 18.4 Any inappropriate items found within dirty laundry such as equipment or sharps will be reported and investigated through the Trust incident reporting system

19.0 Communications and Implementation

- 19.1 This policy will be issued to the following staff groups to disseminate and ensure their staff are made aware of the policy:
- Ward Sisters/Charge nurse – issue to relevant nursing staff within their ward
 - Departmental Managers - issue to relevant staff within their department
 - Heads of Nursing and Lead Nurses
 - Trust Authorised Officer- responsible for monitoring of contractual and operational performance.
- 19.2 The guideline will also be available on the Intranet and website.

20.0 Equality and Diversity

20.1 The Trust is committed to the provision of a service that is fair, accessible and meets the needs of all individuals. The Trust aims to ensure its policies and procedures promote equality both as a provider of services and as an employer. The Trust's Equality Impact Assessment has been completed in developing this document (as seen in Appendix 3), to consider the impact of the policy on the range of people it may affect, and to identify any inequalities.

21.0 Linen Services & Contact Details

Trust Authorised Officer (Quality Monitoring Officer)	ext. 5979 Email: linen.enquiries@meht.nhs.uk
Linen Provider Site Management	ext. 6474 or bleep #6400 540
Help Desk (out of hours requests)	ext. 6000 (24/7)
Domestic Services (for patient clothing)	Bleep #6555 2800

Bed Making Procedure

The following procedure should be followed when making a bed for a patient:

- A complete bed change is required every two days (change all items).
- A freshen up change can be completed in-between complete changes:
 - ✓ Change top pillowcase if visibly soiled or stained
 - ✓ Change the bottom sheet- use current top sheet (if not soiled or stained) as bottom sheet and change top sheet
 - ✓ **Change any item if soiled or stained**
 - ✗ **To ensure appropriate infection control - DO NOT flap/billow the sheets when changing the beds. This is a risk for Infection Prevention.**
- Patient's positive of infection **MUST** receive a complete bed changed every day.
- Soiled linen **MUST** be placed into a **WHITE** plastic bag and left in the collection location on the Ward/Dept.
- Linen items **infected** with bodily fluids **MUST** be placed into a **RED** water soluble bag prior to placing into a **WHITE** plastic bag.



Rejection Procedure for Substandard Linen

Any item of linen that has not yet been used and is not fit for purpose should be rejected.

Items of linen can be rejected for the following reasons:

- ✓ Staining (prior to use)
- ✓ Tears and holes
- ✓ Damage to the item (i.e. gowns missing ties, PJ fasteners not closing etc.)
- ✓ Excessive creasing

Place rejected linen items into a **BROWN** plastic bag and leave on the floor of the disposal hold next to the linen bin.

These items will be removed from the system, and the Trust will not be charged for any items rejected.

- ✗ **DO NOT place rejected items into the white bags for soiled collection-** the Trust is charged for laundering substandard linen, and the item will remain in the system.
- ✗ **DO NOT dispose of rejected items in Domestic Waste -** If linen is disposed of in domestic waste the Trust will pay for the item, but also pay for its disposal.



Return to Sender Procedure- Trust owned items and Patient Laundry

Personal items can be laundered by Berendsen. Personal items are Trust owned items (e.g. Slings/Curtains), but can also be personal clothing from patients. These are called Return to Sender Items. The following procedure must be followed in order to complete a Return to Sender Item:



- Personal items will not be removed if not accompanied with a fully completed ticket.
- Bags and tickets can be found in the Ward/Dept. Linen Room. Additional bags and tickets can be requested by contacting the Site Linen Room.
- Linen items **infected** with bodily fluids **MUST** be placed into a **RED** water soluble bag prior to placing into a purple plastic bag
- Personal items are laundered at owners risk due to high temperature laundering. Please advise owners of this risk.

Contact Information and Escalation

Issues and Queries	Contact	Contact Number	Availability
General Linen Enquires: <ul style="list-style-type: none"> • Requiring additional linen or bags (in hours) • Request review of numbers of linen for delivery • Information etc. 	Linen Room	Linen Room Ext: 6474 Mobile: 07920 789 615 Bleep: #64000 540	Mon-Fri: 07:00 – 15:00 Sat: 08:00 – 12:00 Sun: Closed
Escalations: <ul style="list-style-type: none"> • not received a linen delivery • soiled linen not collected • unable to gain response from linen room • any other questions/queries relating to linen 	Estates & Facilities Management	Ext: 5979 Email: linen.enquiries@meht.nhs.uk	Mon-Fri: 08:00-16:00
Out of Hours linen requests.	MEHT Helpdesk	Ext: 6000	Out of Hours

Clean Linen Delivery - Ward Record Sheet

Ward/Dept. Name:	
Month/Year:	

Agreed Delivery Service			Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Delivery Timeframe:	Monday-Friday	Saturday						
			Delivery Time	Delivery Time	Delivery Time	Delivery Time	Delivery Time	Delivery Time
Items	Quantity to be Delivered		Comments (i.e. record if items are not delivered according to the Agreed Delivery Service- items, quantities etc)					
Plastic Bags White								
Plastic Bags Purple								
Plastic Bags Brown								
Bags Water Soluble								
Thermal Blanket								
Pillowcase								
Patient Modesty Gown								
Top Sheet Single								
Bath Towel								
Nightdress Pink								
Pyjama Trousers Green								
Pyjama Top Green								

Equality Impact Assessment (EIA)
Linen and Curtain Policy

Equality or human rights concern.	Does this item have any differential impact on the equality groups listed?	How is this impact being addressed?
Gender	Yes	Curtains are provided to promote privacy and dignity for patients. Patient clothing is also provided for both sexes.
Race and ethnicity	No	N/A
Disability	Yes	Curtains and blinds provided are designed to ensure all users can easily draw them. Curtains are designed to avoid any discomfort to the visually impaired.
Religion, faith and belief	Yes	The Trust's curtain designs are provided to avoid any offence to any patient, staff or visitor. Patient clothing is provided to ensure patients are covered.
Sexual orientation	No	N/A
Age	Yes	The Trust provides individual designs for both adults and children.
Transgender people	Yes	Patient clothing is also provided for all gender types.
Social class	No	N/A
Carers	No	N/A

Date of assessment: 26th February 2018

Names of Assessor: Georgina Sawyer, Business Support & Contracts Co-ordinator

<u>LAUNDRY SERVICE</u>				
DATE _____				
HOSPITAL _____				
NAME _____				
DEPARTMENT _____				
ARTICLES	NO. SENT	CHECK IN	CHECK OUT	OFFICE USE ONLY
Baby Gowns				
Sheets				
Blankets				
Covers				
Bibs				
Muslins				
Quilt Covers				
Baby Hats				
Baby Clothing				
Other (please specify)				
<p>COMPLETE ALL DETAILS REQUIRED ACCURATELY USING INK AND BLOCK CAPITALS, ANY NOTED VARIANCES BY CK GROUP WILL BE AMENDED AND CONSIDERED FINAL.</p> <p>ENSURE ALL ITEMS HAVE YOUR NAME & HOSPITAL PERMANENT LABEL ATTACHED AS SOMETIMES THE TEMPORARY LAUNDRY LABELS MAY BECOME SEPARATED DURING PROCESSING & THIS WILL ENABLE US TO SEND ITEMS DIRECTLY BACK TO YOUR LINEN ROOM.</p>				