



Linen Management Procedure

1. Guiding Principles

Effective: 25 February 2022

This procedure details the expected standard for the handling, transportation, and storage of clean and soiled linen at WACHS Health Services. Where a Laundry Service Agreement exists with an independent body the following principles should be included, and any exceptions be agreed and documented to eliminate the risk of transmission of infection.

2. Procedure

2.1 Clean linen

Clean linen must be delivered and stored in a manner that minimises infection transmission risks to both staff and patients. The following principles apply to the management of clean linen.

All clean linen must be:

- Delivered to clinical areas on a clean, covered trolley to prevent contamination
- Stored in a clean and dry place that prevents contamination by aerosols, dust, moisture and vermin, and is separate from used / soiled linen, such as a dedicated linen cupboard or an enclosed mobile linen trolley. The door of the cupboard should be closed and / or the mobile linen trolley cover should be kept closed to prevent contamination when not being accessed
- Segregated from used / soiled linen during both transport and storage
- Not stored in unsuitable areas e.g. the sluice room, patient bathrooms, in bed spaces, corridors or on the floor
- Handled minimally to reduce contamination
- Stored in a manner that facilitates stock rotation.

2.2 Used / Soiled linen

The following principles apply to management of used / soiled linen:

- Used / soiled linen should be handled as little as possible and handled with care, to avoid the dispersal of microorganisms into the environment and to avoid contact with staff clothing
- Standard precautions apply when handling used / soiled linen. Appropriate personal protective equipment (PPE) must be worn when handling used / soiled linen to reduce risk of exposure to blood and body substances
- Used / soiled linen should be bagged in a linen skip at the point of use. Do not place used / soiled linen on the floor or other surfaces such as lockers or tabletops to reduce risk of contamination
- Linen heavily soiled with body substances or other fluids that have a potential to leak should be placed into leak-proof bags before being placed into the usual fabric linen bag
- Care should be taken to ensure that sharps and other objects are not disposed of into linen skips

- Do not shake linen to prevent environmental contamination with microorganisms
- Do not overfill linen bags i.e. $\frac{3}{4}$ full or no more than 15kg.
- Linen skips must be stored separately from clean linen in areas specifically designated for soiled linen
- Used linen must not be rinsed or sorted in patient-care areas or washed in domestic washing machines unless there is a need to launder individual personal patient laundry, which must be undertaken as per section 6
- All linen bags should be tied secured before transporting
- Any vehicle used for the transport of soiled linen should be cleaned after use
- Hand hygiene is to be performed after handling used / soiled linen.

2.3 Patient bed linen

Patient bed linen must be changed according to the patient's condition and in line with the following guidelines:

- Patient / family will be asked daily if they would like their linen changed
- In acute care settings the patient's linen should be changed at a minimum of every second day
- In non-acute settings, such as rehabilitation and Mental Health, the frequency of linen changes is generally as requested by the patient however, the patient's linen should be changed at a minimum of twice a week
- The changing of linen immediately once soiled
- Daily changing of linen for patients colonised with Multi Resistant Organisms (MRO) or on transmission-based precautions
- Daily linen change is required for patients with wounds producing exudate.

2.4 Cytotoxic linen

Linen grossly contaminated with cytotoxic drugs or cytotoxic contaminated body substances is to be placed in a purple cytotoxic waste bag and disposed of in a cytotoxic waste bin. Grossly contaminated linen is not to be laundered and is to be incinerated as per other cytotoxic waste.

It is acceptable to launder linen used by a patient under cytotoxic precautions if the linen is minimally contaminated or there is no visible soiling. Cytotoxic used linen such as patient bed linen, towels or gowns are to be handled with appropriate PPE (minimum of an apron and gloves) and double bagged. First in a specially marked dissolvable bag and then in a labelled impervious bag that is identified as hazardous. This ensures the contents are laundered separately from other items.

Any cytotoxic laundry is to be washed separately and without handling (such as sorting) at the longest running cycle capacity for two wash and rinse cycles. Laundry can then be combined with other non-contaminated items for further laundry procedures.

Washable items such as the patient's own clothing must be double bagged, labelled as cytotoxic waste and sent home with the patient's carer for laundering as soon as possible. Patients, family, and carers must be advised to handle the contaminated items while wearing two pair of disposable gloves. Follow the link provided below to eviQ resource Chemotherapy Safety at Home: <https://www.eviq.org.au/patients-and-carers/patient-information-sheets/3095-chemotherapy-safety-at-home> for safe home laundering instructions.

2.5 Infection Prevention and Control

- Instruction must be given to laundry staff to report all infections such as gastroenteritis, dermatitis, pustules, skin lesions, and boils to their manager and seek immediate medical attention. HCWs should not come to work if they have signs or symptoms of a communicable disease. Refer to the WACHS [Infection Prevention and Control - Patient management and healthcare worker exclusion periods Policy](#)
- Laundry staff to be aware of their Hepatitis B immune status
- Alcohol based hand rub should be readily accessible for staff to promote regular hand hygiene
- PPE that prevents fluid penetration (fluid repellent gown / apron and disposable gloves) should be readily available for use when handling soiled linen
- Staff movement from areas where soiled linen is handled to where clean linen is processed should be minimised. If this movement is necessary, staff must change their outer protective clothing, e.g. gowns or aprons and gloves, and perform hand hygiene before touching clean linen.

2.6 Cleaning and maintenance requirements

2.6.1 Health Service Laundry

Commercial washing machines must be cleaned and maintained in accordance with the manufacturer's instructions for use / specifications.

The following routine cleaning and maintenance programs must be documented, audited, and available for inspection:

- A documented / titrated / serviced chemical dispensing process approved by the chemical manufacturer
- A maintenance program for all laundry equipment
- A cleaning program for each work and rest area including furniture and equipment
- A schedule for cleaning overhead and hard-to-reach areas
- A pest control program.

2.6.2 Health Service domestic washing machine

Domestic Washing machines must be maintained in accordance with the manufacturer's specifications to prevent build-up of biofilm, mould, and mildew. As such there must be a documented unit-based protocol specifying:

- a. The persons responsible for the regular cleaning and maintenance of the machine.
- b. The schedule for cleaning and maintenance of the internal aspects in accordance with the machine specifications e.g. lint filter, dispenser. These must be documented on the schedule and may be subject to audit.

2.7 Patient personal laundry items

Laundering of patient's personal items is not to be encouraged and should ONLY be performed if all other options for laundering of the item/s have been exhausted (i.e. utilising family members to take personal items home for laundering). Domestic type washing machines must only be used for a patient's personal items (not other linen). Washing must involve the use of an appropriate detergent and hot water.

NOTE: Please ensure ONLY one patient's items are washed at a time. Clothes dryers should be used for drying where possible.

Refer to WACHS [Guidelines for use of a Domestic washing machine to launder patient's clothing within a Health Service](#)

2.8 Use of Health Service laundry for patient's personal clothing

- If patient clothing has been contaminated with blood or body substances, the Health Service laundry is preferred to be used
- A discussion with the Health Service laundry provider should outline the process for laundering and returning patient's personal laundry to the facility, if / when required
- Health Service staff should ensure the clothing is placed in a soluble seamed bag, and sent to the hospital laundry
- Protective masks and eyewear should not be required if handling effectively bagged / sealed laundry
- Laundry workers should place the soluble seamed bag into the washer to avoid handling the soiled linen
- Hand Hygiene is to be performed immediately after handling any linen bags with soap and water or alcohol-based hand sanitiser
- Standard laundry practices are to be adhered to following the processes outlined above.

2.9 Personal laundry for patients with suspect or confirmed transmissible diseases

When a patient is in isolation for a suspect or confirmed transmissible disease (including COVID-19) they are to be:

- Encouraged to wear Health Service clothing that can be laundered by the Health Service laundry
- Encouraged to permit any personal clothing worn to be sent to the Health Service laundry to be laundered, with consideration given to the possibility that some articles of clothing may not be returned in the same condition or not at all.

2.10 Use of a Health Service domestic washing machine

Refer to WACHS [Guidelines for use of a Domestic washing machine to launder patient's clothing within a Health Service](#).

If there is a need for a suspected or confirmed COVID-19 patient's laundry to be laundered in a Health Service domestic washing machine, the following processes must be adhered to by Health Service staff:

- Transport clothing to the laundry area in a sealed soluble seamed bag and place the bag into the machine
- Only 1 patient's laundry is to be washed at a time in a separate cycle
- A hot wash is preferred, using standard laundry detergents, in a load that is not more than half full
- Maximum temperatures the fabric can tolerate and/or the washing machine can accommodate should be adhered to. Hand Hygiene must be performed after commencing the wash cycle
- After the cycle is finished, remove the residual from the soluble bag and dispose of into general waste

- The washing machine drum, controls / door are to be cleaned and disinfected with a detergent / disinfectant wipe
- The clothing should be tumble-dried using the warmest temperatures recommended on the clothing label as this process can reduce the bacterial load significantly.

2.11 Family Members wishing to take clothing home to launder for a patient that has a suspect or confirmed transmissible disease

All linen should be laundered at the Health Service laundering facility or on site and not taken home for laundering by relatives to reduce the risk of transmission of infection.

3. Definitions

Clean Linen	Linen complying with the requirements of AS/NZS 4146:2000 – Laundry Practice.
Cytotoxic contaminated linen	Linen or clothing which has been contaminated with cytotoxic drugs or cytotoxic contaminated body substances, including urine, faeces, vomitus, bile, and fluids drained from body cavities.
Used Linen	Refers to linen used for any purpose irrespective of state of soiling. i.e. may appear visibly clean but will be managed as soiled.
Soiled Linen	Refers to visibly soiled linen e.g. contaminated with blood or other body fluids such as urine, vomit or faeces.

4. Roles and Responsibilities

Accountability for all aspects of the hospital laundry services including cleaning, maintenance and compliance with key laundry processes and defined indicators e.g. temperature compliance and chemical usage lies with management. Roles and responsibilities for compliance at each site are to be designated by Operations Manager.

5. Compliance

Compliance against this procedure will be evaluated with routine incident reporting processes and annual evaluation.

- Health facilities with an in-house laundry service must complete an annual Laundry Practices Audit
- Health Services with domestic washing machines and dryers must be audited on a 6 monthly basis and reports sent to the Operations Manager and the Infection Prevention and Control / Standard 3 Committee
- The responsibility of addressing any identified audit actions should be allocated by the relevant Department Manager / Operations Manager.

Failure to comply with this procedure may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

6. Records Management

Support services or hotel services manager as delegated by Operations Manager to maintain copies of cleaning, maintenance, and audit records.

All WACHS corporate records must be stored in the approved Electronic Documents and Records Management System.

[Records Management Policy](#)

7. Evaluation

Annual Laundry Practices Audit results / actions to be addressed are to be tabled at Regional Infection Prevention and Control Committee / Standard 3 committee. As relevant, audit results should also be tabled at the WACHS Infection Prevention and Control Committee.

Review records annually, inspecting cleaning records, testing records, and maintenance records.

8. Standards

[National Safety and Quality Health Service Standards](#) - 3.01; 3.02; 3.03; 3.04; 3.06; 3.07; 3.08; 3.09; 3.10; 3.13; 3.14

Australian/New Zealand Standard on Laundry Practice - AS/NZS 4146:2000

9. Legislation

[Occupational Safety and Health Act 1984](#)

[Occupational Safety and Health Regulations 1996](#)

10. References

- [Australian Guidelines for the Prevention and Control of Infection in Healthcare, Canberra: National Health and Medical Research Council \(2019\).](#)
- Codes of practice for public healthcare operated laundries and linen services (2012). Australian Healthcare Laundry & Linen Services Association. Accessed 21/05/2021 from <http://laundryanddrycleaning.com.au/wp-content/uploads/2015/05/Laundry-Standards-Codes-of-Practice-2012.pdf>
- [Cytotoxic drugs and related waste-risk management](#), New South Wales Government (July 2017).
- Fiona Stanley Fremantle Hospital Group Linen Management
- [Guide to handling cytotoxic drugs and related waste](#), Office of Industrial Relations, Workplace Health and Safety Queensland (2017).
- [Royal Perth Bentley Group Linen Management Policy](#)

- [Safe handling and waste management of hazardous drugs](#), New South Wales Government, eviQ (4 Dec 2019).
- Standards Australia/ Standards New Zealand 4146:2000. Laundry Practice. Standards Australia International Ltd.
- [WACHS TeleChemotherapy Procedure](#) source documents (hyperlinked to associated web pages where applicable).

11. Related Forms

WACHS [Safety Risk Report Form \(SRRF\)](#)

12. Related Policy Documents

WACHS [Hand Hygiene Policy](#)

WACHS [Infection Prevention and Control Policy](#)

WACHS [Occupational Safety and Health Policy](#)

WACHS [Personal Protective Equipment \(PPE\) Procedure](#)

WACHS [TeleChemotherapy Procedure](#)

WACHS [Waste Management Policy](#)

WACHS [Guidelines for use of a Domestic washing machine to launder patient's clothing within a Health Service.V1](#)

13. Related WA Health System Policies

[WA Department of Health Coronavirus Disease - 2019 \(COVID-19\) Infection Prevention and Control in Western Australian Healthcare Facilities](#)

14. Policy Framework

[Public Health](#)

15. Appendices

Appendix 1: [Annual Laundry Practices Audit](#)

Appendix 2: [Annual Laundry Practices Audit Improvement Action Plan](#)

**This document can be made available in alternative formats
on request for a person with a disability**

Contact:	Clinical Nurse Consultant, Infection Prevention and Control		
Directorate:	Nursing and Midwifery	EDRMS Record #	ED-CO-21-422605
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Appendix 1: Annual Laundry Practices Audit

The focus of Linen Management Practices auditing is to assess and ensure compliance with AS/NZS 4146:2000 Laundry Practice; Australian Guidelines for the Prevention and Control of Infection in Healthcare 2019; *Occupational Safety and Health Act 1984*; *Occupational Safety and Health Regulations 1996*.

Date of Review:	Auditor:	
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A. PHYSICAL ENVIRONMENT and EQUIPMENT		<input checked="" type="checkbox"/> yes	<input checked="" type="checkbox"/> no
1	Adequate storage is available for all associated equipment?		
2	Floor is free from obstructions and is slip resistant (particularly in the soiled linen area) with no broken surfaces to allow for repeated and easy cleaning and or disinfection as required?		
3	Exits are clear of obstructions?		
4	Staff rooms and eating areas are maintained in a clean and hygienic state?		
5	Compliance certification displayed on each machine?		
6	Weigh scales are available to weigh soiled linen loads and the scales are regularly calibrated?		
7	The temperature of ironing roller beds is maintained at appropriate temperatures and calibrated regularly?		
8	Wash formula records are available which specify details or type of linen, maximum wash load, wash process, and origin of linen?		
9	The area that the cleaning compounds are fed from is bunded (to protect the environment by providing a secondary containment system) or a drain is located nearby?		
10	Lines are secure and sealed to prevent any spillage – no signs of corrosion?		
11	Are all current chemicals listed on a chemical register and SDS (Safety Data Sheets) available for all chemicals in use?		
12	Benches are impervious and water resistant?		
13	Pest control program is in place?		
14	There are enough power points available?		
15	Power leads are not cracked or frayed?		
16	Adequate working space and lighting exist to perform tasks in a safe manner?		
Subtotal			

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B. HANDLING, TRANSPORT, STORAGE		
1	Clear delineation between clean and soiled linen storage areas is evident – i.e. separated by physical barriers or at least 2 metres distance?	
2	Staff movement between clean and soiled linen zones is minimised through workplace instruction or facility design?	
3	Appropriate PPE is worn when handling soiled linen?	
4	Clean linen is stored in a clean dry place that prevents contamination by aerosols, dust, moisture, and vermin?	
5	Clean linen to be returned to wards / units is covered to prevent contamination during transport?	
6	Mobile trolleys are of a design that enable easy cleaning?	
7	Laundry bags are free from defects such as holes or tears?	
8	Dissolvable/soluble linen bags are utilised to contain “wet” linen, heavily contaminated with blood or body fluids and for potentially infectious linen?	
Subtotal		
C. CLEANING AND DISINFECTION		
1	All walls, ceilings, and exposed pipe work are clean and free from lint, dust, and dirt?	
2	A schedule is available to ensure cleaning is undertaken in overhead and hard to reach areas?	
3	A schedule is available and demonstrates regular cleaning and maintenance of washing/drying machines?	
Subtotal		
D. STANDARD PRECAUTIONS		
1	Staff are aware of the correct procedure for disposing of any sharps found in laundry?	
2	Sharps containers are available and less than ¾ full?	
3	Staff are aware of the correct procedure following a blood/body fluid exposure?	
4	Are appropriate spill kits available?	
5	Hand hygiene products (including hand wash solution and hand towels and alcohol-based hand hygiene products) are available at every hand basin and in other relevant areas within the laundry?	
6	Staff are aware to not come to work if unwell?	
7	Staff are aware of their Hepatitis B immune status and other relevant vaccination status?	
Subtotal		

E. LEARNING FRAMEWORK			
1	Staff have completed Infection Prevention & Control Orientation Module (CICB EL2.) View L&D records?		
2	Staff have completed Annual Hand Hygiene eLearning (CICHH EL2). View L&D records?		
3	All staff have completed personal protective equipment training. View L&D records?		
Subtotal			

Section	Title	Possible Score	Score Achieved	Percentage Achieved
A	Physical Environment and Equipment	16		
B	Handling, Transport, Storage	8		
C	Cleaning and Disinfection	3		
D	Standard precautions	7		
E	Learning Framework	3		
		37		

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Appendix 2: Annual Laundry Practices Audit Improvement Action Plan

- Identify risks/ issues from the Laundry Practice Audit below, along with your proposed response.
- It is the responsibility of the local Laundry manager to ensure identified issues are resolved in a timely fashion.
- Document mitigation and prevention steps for identified risks. Escalate to local risk/ issues register as required.

Action #	Risk/ Issue Identified	Action/s planned	Responsible person	Monitoring/ date for completion

Send completed Audit and Improvement Action Plan to: Infection Control • Laundry Manager • Operations Manager

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