Name of Policy:	Linen Processes, includes Contracted Services	
Policy Number:	3364-109-EQP-802	THE UNIVERSITY OF TOLEBO MEDICAL CENTER
Department:	Infection Control Chief of Staff Hospital Administration	
Approving Officer:	Chair, Infection Control Committee Chief of Staff Chief Medical Officer	
Responsible Agent:	Infection Preventionist	
Scope:	The University of Toledo Medical Center and its Medical Staff	Effective Date: 12/1/2022 Initial Effective Date: 7/1991
New polic	y proposal Minor/technical re	evision of existing policy

(A) Policy Statement

The following policy outlines the procedures to ensure safe and effective handling of clean and contaminated linen and to ensure contracted linen services comply with the institutional requirements.

(B) Purpose of Policy

To ensure safe and effective handling of clean and contaminated linen by establishing procedures based on scientifically based recommendations.

To ensure linen supplied to UT Medical Center (UTMC) has been prepared according to guidelines approved through the Infection Control Committee, based on scientific findings and recommendations from the Center for Disease Control (CDC) and Health Care Laundry Accreditation Council (HLAC).

(C) Procedure

(1) Contract Linen Services

- (a) Bulk linen will be transported to UTMC in a clean cart with clean plastic cover.
- (b) The truck used for transport will be cleaned after transporting dirty loads.
- (c) Verification of appropriate linen processes will be completed by an annual inspection.
- (d) Report of verification of the inspection will be made to the Infection Control and Safety Committees.
- (e) The contract laundry service will provide written documentation of wash formulas, water temperature and chemicals used, which will be maintained in the Linen Service Office.
- (f) UTMC Linen Service will visually inspect linens received for appearance, folding and proper sorting.
- (g) The linen service provider and the UTMC Linen Service will correspond regarding breaches of established policies related to linens received and sent.

(2) Linen Room Personnel

- (a) All linen room personnel will receive training on linen procedures and infection prevention and control issues surrounding linen handling at the time of hire and annually thereafter.
- (b) Infection Control issues will include, but not be limited to:
 - (i) Personal Protective Equipment (PPE)

- (ii) Bloodborne Pathogen Exposure Control Plan
- (iii) Handwashing
- (iv) Procedures to follow after a sharps or mucous membrane exposure

(3) Clean Linen

Appropriate amounts of linen will be delivered to individual units by clean covered laundry carts from the linen room on a daily basis, or as needed.

(4) Soiled Linen

- (a) Linen has not been implicated in the transmission of disease during transport and handling and is washed in high temperature heat with chemicals that destroy bacteria, fungi and viruses. No sorting or rinsing of soiled linen will occur in patient care areas.
- (b) All soiled linen will be bagged at the point of use. Bags are not to be overfilled. Bags are to be closed and placed in soiled cart when ¾ full.
- (c) All linen, including isolation linen is to be contained in a plastic bag.
- (d) All linen is to be handled according to standard precautions.
- (e) Linen service will pick up soiled linen twice a day, or as needed.
- (f) Appropriate PPE will be worn by linen service personnel.
- (g) Hands will be washed after removing gloves and handling soiled linen, linen bags and the soiled transport cart.
- (h) Linen contaminated with brain tissue, corneal tissue or spinal fluid from a patient known to have a neurologically degenerative prion disease (e.g., CJD) should be handled with extreme caution and clearly marked. The Infection Prevention and Control Department or Safety and Health Department should be contacted before removing these items from the patient room.

(5) Scrubs and Uniforms

- (a) Hospital Administration, with information provided by Infection Prevention and Control, will designate employees who will be provided hospital-laundered scrubs.
- (b) Employees who are not provided hospital laundered scrubs must ensure personally owned scrubs are laundered at home each time prior to presenting for their shift.
- (c) Employees who wear hospital-owned scrubs will not take these scrubs out of the facility, wear to other facilities, or take home to launder. Hospital-owned scrubs are to be laundered after each use and when contaminated.
- (d) Hospital-laundered scrubs will be made available to employees in the event their personal clothing becomes visibly contaminated with blood or body fluid during the course of their shift.
 - (i) The hospital will launder the employee's contaminated clothing according to UTMC Bloodborne Pathogens standard at no cost to the employee
- (e) UTMC will not launder any clothing requiring dry cleaning in order to prevent damage to employee clothing.
- (f) Employees are required to follow the UTMC dress code and department requirements when selecting clothing to be worn on the job.
- (g) Handwashing will occur after handling soiled scrubs.

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References:

Association for Professionals in Infection Control and Epidemiology (APIC). Laundry, Patient Linens, Textiles, and Uniforms, *APIC Text of Infection Control and Epidemiology*. 4th Ed. 111.1-111.8.

Association of periOperative Registered Nurses (AORN). Guidelines for Perioperative Practice, 2021. Guideline for Surgical Attire 1017-1021.

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UTMC Bloodborne Pathogens Exposure Control Plan. https://www.utoledo.edu/policies/utmc/infection_control/

Approved by:		Review/Revision Date:
		1/83
		8/89
/s/	11/28/2022	8/90
Michael Ellis, MD	Date	9/93
Chair, Infection Control Committee		2/94
		5/99
		4/02
/s/	12/01/2022	03/21/2005
Andrew Casabianca, MD	Date	03/26/2007
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		11/20/2011
		07/16/2014
/s/	11/28/2022	06/30/2017
Michael Ellis, MD	Date	08/11/2020
Chief Medical Officer		11/17/2022
Review/Revision Completed By: Infection Control Committee		
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