

# Best Practice Guidelines - Storing and Handling Clean Linen in Healthcare Facilities

**Target Audience:** All employees who handle clean linen in a healthcare facility.

**Purpose:** To ensure healthcare linen remains hygienically clean prior to use.



Version Control History			
Version	Date	Author	Comment/Status
Final v1.0	Sept 3, 2017	R Graham	EVS language updated
1.1	Feb 20, 2018	R Graham	Additional input provided by Pat Bleakley re: On-premise laundry requirements.

## Definitions

- Exchange-cart (aka: Highway cart)

Carts used by K-Bro to deliver clean linen to use-area departments at some fixed frequency - normally daily.



- POU/Point-of-use cart (aka: Server Cart)

Carts which serve as a storage/staging cart between the K-Bro exchange-cart and patient room. They are typically referred to as a Lakeside brand cart, server cart, or MIP cart.



## Introduction

K-Bro Linen Systems provides the laundry and linen services used by this facility. This includes bedding, patient wear, staff uniforms, cubicle/privacy curtains, and other laundered items. K-Bro operates modern central laundries across Canada including a state-of-the-art facility in Burnaby to meet the needs of the four Lower Mainland health authorities. K-Bro is certified by the Healthcare Laundry Accreditation Council “HLAC” and the clean linen provided by K-Bro meets the defined standard of ‘Hygienically Clean’.

**It is possible for linen to become contaminated without appearing visibly soiled. Therefore once the hygienically clean linen provided by K-Bro arrives at the healthcare facility, it is essential that every effort is taken to avoid inadvertent contamination prior to use. Contaminated linen can serve as a vector for drug resistant organisms and other harmful pathogens thereby spreading hospital acquired infections. It is the responsibility of everyone who handles clean linen or is responsible for its storage within the facility to ensure compliance to these guidelines within their department.**

Drawing on advice and recommendations from respected agencies such as ALM (Association for Linen Management), ANSI/AAMI, CDCP, HLAC (Hospital Laundry Accreditation Council), OSHA, TRSA (Textile Rental Services Association) and others, the following guidelines/policies are intended to maximize the safety of our healthcare environments and benefit patient care outcomes. The health authority and K-Bro are highly motivated to achieve these goals and seek broad stakeholder compliance.

**Storage & Handling Procedures | Hospital Receiving Dock to Use-area**  
**Specific Target Audience – Hospital based K-Bro employees**

1. Prior to unloading clean linen carts from the K-Bro truck or trailer, all employees involved must perform hand hygiene using ABHR (alcohol-based hand rub), the preferred method unless hands are visibly soiled in which case hand-washing with soap and water must take place.
2. Where the receiving dock is outdoors, carts should be moved indoors as quickly as possible.
3. All linen carts arriving from K-Bro will be of the fully enclosed type with doors, or covered with a plastic or reusable cover. Doors should remain closed or covers in place until the cart is delivered to its final use-area destination.
4. Any linen that falls off the clean linen carts while on the truck or being delivered to the final use-area is considered contaminated and must be deposited into a 'soiled laundry' bag for reprocessing. *[note: if this happens frequently, contact the appropriate K-Bro customer service manager for corrective action]*
5. When moving carts, they should always be pulled rather than pushed to avoid blind-spot collisions. When manually towing multiple carts, no more than two should be towed at once.
6. Once carts are delivered to their final use-area destination, the doors (on fully enclosed carts) should remain closed. Where the cart is non-enclosed, the plastic cover should be removed and placed on the returning exchange-cart. Likewise, the doors on fully-enclosed carts being returned must be closed before transporting through hospital. *[note: K-Bro has committed to continual replacement of open carts with enclosed carts]*

Storage & Handling Procedures | Hospital Linen Room & On-Premise Laundries  
Specific Target Audience – Hospital based K-Bro employees

1. The doors to the linen room must be kept closed when not in use. Where the linen room is located in the vicinity of the loading dock, every effort must be made to keep linen room doors closed when loading dock doors are open, to prevent airborne contamination from outside.
2. The linen room must be cleaned and disinfected by Environmental Services “EVS” per the specifications and frequency established with EVS providers. It must be free of dirt, vermin, obvious moisture contamination including visible staining of ceiling tiles, and lint must be kept to a minimum.
3. No soiled linen shall be stored in the clean linen room.
4. Clean linen may be transferred to stationary storage shelving or carts providing:
  - a. It is cleaned and disinfected with an approved disinfectant before use;
  - b. They are constructed from plastic, stainless or coated steel, or other suitable non-porous material;
  - c. They are fully enclosed or covered with a cover made from nylon or other durable material to prevent contamination from dust/debris and harmful pathogens. The cover should have a throw-back flap on the front to enable easy access.
  - d. The bottom shelf is a minimum of 20cm from the floor to facilitate proper floor cleaning by EVS.
5. Twice per year at scheduled six month intervals, all linen room stock should be depleted and used leaving the storage shelves empty before restocking. They should then be thoroughly washed, disinfected, and dried by linen room employees following proper hospital cleaning protocols.
6. All employees must perform hand hygiene and wear a clean blue Precaution Gown when transferring clean linen from cart to storage unit to prevent transference of pathogens and other flora and fauna from their arms and/or uniform to the clean linen. The gown should be removed immediately after handling clean linen to prevent cross-contamination from other surfaces. Hand hygiene must be repeated.
7. All linen delivered from the linen room to elsewhere in the facility must be done using an enclosed cart of with linen covered.
8. Linen room staff shall participate in any hand hygiene audits performed by the health authority.
9. No food or beverages are to be consumed in linen rooms.
10. Access to linen rooms must be limited to authorized personnel only.

11. Damp textiles create an opportunity for bacteria growth and spontaneous combustion/fire under certain conditions. Therefore no wash load should be started near the end of the operating day which cannot be fully completed through the wash and dry process. All washers and dryers must be left empty at the end of the operating day.
12. Chemical pails/drums should be stored in a secondary containment system while in use to contain liquids in the event of damage to the pail/drum.

### Storage Precaution | All Departments

#### Specific Target Audience – All department managers

1. During the planning stage of a new healthcare facility, architectural engineers design specific rooms for storage of clean and soiled laundry. The HVAC in rooms assigned for storage of soiled laundry is designed to maintain negative air pressure, typically achieve a minimum of 10 air exchanges per hour, and exhaust to the outdoors. Conversely, clean linen rooms are designed with positive air pressure and fewer air exchanges. As the needs within the facility evolve over many years, it isn't uncommon for various rooms to be repurposed. However it is critical that where soiled laundry is concerned, it must not be stored in a room not originally designed for soiled laundry without the necessary modifications to the HVAC system in that room as this can create cross-contamination. The Engineering/ Facilities Management Department should be consulted.
2. Access to storage rooms holding clean linen must be restricted to authorized personnel.
3. Moisture/humidity levels should be monitored by FMO.

### Storage and Handling Procedures – Clinical/Patient Environment

#### Specific Target Audience – Clinical staff, Nurses, Caregivers, EVS staff

1. Anyone handling clean linen should perform hand hygiene immediately prior to prevent contamination of linen.
2. Linen should be carried slightly away from the body to avoid cross-contamination.
3. Any linen dropped on the floor should be treated as soiled laundry and deposited into a soiled laundry bag.
4. Nothing should be added to a K-Bro exchange-cart. This includes linen already removed, linen from any other source including other linen carts, pillows, med/surg supplies, etc.
5. The POU cart should be kept covered. Storing excess clean linen in patient rooms should be avoided. Once clean linen enters a patient room, it shall be considered reserved only for use by the current patient(s) within that room. Any linen not used by

that patient(s) must be considered contaminated and treated as soiled laundry. Essentially, once linen enters a patient room, it should only exit that room in a soiled laundry bag.

6. All linen carried into a patient room should only be placed on a clean and disinfected surface if not immediately used.
7. Following the isolation or discharge cleaning of a bed, staff should ensure the bed is completely dry of disinfectant prior to making the bed.