

MENTAL HEALTH SERVICE BUSINESS RULE SESLHDBR/055

| Name | Infection Control: Mental Health Service Inpatient Washing Machine |
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| What it is | This is a business rule to ensure safe infection control and management of Mental Health Service (MHS) inpatient washing machines. Its purpose is to assist with the safe washing of inpatient personal items. |
| Risk Rating | Medium Review Date May 2024 |
| Who it applies to | This business rule applies to all Mental Health Service (MHS) staff involved in the washing of inpatient personal items and infection control handling of MHS inpatient washing machines. |
| What to do | MHS staff involved in the handling and transport of consumers' soiled personal items should be fully vaccinated in accordance with NSW Health PD2020 017 Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases. Laundry and washing machine areas should be access controlled (i.e. locked when not in use and supervised when in use). The layout should be designed to prevent clean laundry from being contaminated by soiled laundry or other matter/items (including equipment). Instructions should be displayed to ensure that consumers proactively report to staff all infections (such as gastroenteritis, dermatitis, pustules and skin lesions) prior to use of the washing machine. Hand hygiene must be performed prior to handling consumers' personal items, in accordance with SESLHDPR/343 Bare Below the Elbows- Hand Hygiene. Personal Protective Equipment or PPE (gloves at a minimum, plus aprons if the clothing is heavily soiled or consumers have an infectious condition such as scabies) should be worn prior to handling soiled personal items. Consumers' soiled personal items must be handled as little as possible and with minimal agitation to decrease contamination of the air. Consumers' soiled personal items identified for washing must be free of sharps and other objects. MHS inpatient washing machines must be used for consumers' personal items only. The consumption of food and drink is to be confined to appropriate areas, external to the laundry. |

Revision No: 3 TRIM No: T15/18571 Date: May 2021 Page 1 of 3

| | In appropriate inpatient environments (e.g. Rehabilitation), consumers are to be provided with information about the |
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| | safe operation of the washing machine, so they may use it. |
| | A separate load must be used for each consumer's soiled |
| | personal items, using appropriate detergent and hot water. Washing machine bowls must be wiped clean with neutral |
| | detergent after each load. |
| | Following washing, clothes should be dried promptly in a |
| | clothes dryer. |
| | Hand hygiene must be performed after handling consumers' personal items. |
| | Staff using the facility must be trained in using the |
| | machines and associated consumables such as |
| | detergents, including being aware of Material Safety Data Sheets (MSDS). |
| | Laundry instructions should include specific detail on the quantity of detergent to be used. |
| | All items are to be washed at as high a temperature as the fabric will tolerate. |
| | Staff are to ensure all cleaning agents are handled, stored |
| | and managed in accordance with relevant MSDS and SESLHD policies. |
| Compliance evaluation | A regular washing machine equipment cleaning and |
| | laundry inspection program should be implemented as |
| | part of the routine schedule of cleaning for inpatient areas. |
| | A regular washing machine maintenance program should |
| | be implemented to ensure the consistency of the wash program and wash temperature. The Laundry Practice |
| | Standard AS/NZS 4146:2000 states "soiled linen that is to |
| | be thermally disinfected shall be washed so that the |
| | temperature of the load is maintained at a minimum of |
| | 65°C for not less than 10 minutes or at a minimum of 71°C |
| | for not less than 3 minutes" (pages 22-23). |
| | An annual Laundry Infection Prevention and Control Audit Tool is to be completed. |
| How to use it | This business rule is to be referred to by all mental health staff |
| | when they are involved in the washing of inpatient personal |
| | items and infection control handling of MHS inpatient washing |
| | machines. |
| Why the rule is | The risk of disease transmission from consumers' soiled |
| necessary | personal items is negligible. However, employees involved in |
| | the handling of consumers used personal items and the |
| | handling of washing machines should comply with this rule to prevent occupational exposure, contamination of clothing and |
| | transfer of micro-organisms to other people and environments. |
| Who is responsible | Responsible staff include all MHS employees involved in the |
| - | washing of inpatient personal items and infection control |
| | handling of MHS inpatient washing machines. |
| Ministry of Health/ | NSW Ministry of Health |
| SESLHD reference | PD2017 013 Infection Prevention and Control Policy PD2000 017 Occupation of American Access of Control Policy |
| | PD2020_017 Occupational Assessment, Screening and |

Revision No: 3 TRIM No: T15/18571 Date: May 2021 Page 2 of 3

| | Vaccination Against Specified Infectious Diseases | | |
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| | SESLHD References | | |
| | SESLHDPR/343 Bare Below the Elbows- Hand Hygiene | | |
| | Other References | | |
| | Australian/New Zealand Standard: Laundry Practice AS/NZS 4146:2000 | | |
| | National Safety and Quality Health Service (NSQHS) | | |
| | Standard 3. Preventing and Controlling Healthcare | | |
| | Associated Infections (3.5, 3.15) | | |
| Executive Sponsor | Dr Nick Babidge , Clinical Director, MHS SESLHD | | |
| Author | Joanne Rogerson, Clinical Nurse Manager, MHS SESLHD | | |

Revision and Approval History

| Date | Revision Number | Author and Approval |
|---------------|--------------------|--|
| August 2011 | 0 | Original draft by Angela Karooz, SESLHD MHS Risk Manager. Spelling/grammar edits by Evelyn Chandler, TSH MHS Clinical Operations Manager. Revisions to include information about Personal Protective Equipment by Julie Gallard and Giulietta Pontivivo, POWH Infection Control Consultants. |
| November 2011 | 0 | Approved by SESLHD MHS Clinical Council. |
| November 2014 | 1 | Scheduled review. Edited and reformatted by Victoria Civils-Wood, SESLHD MHS Policy and Document Development Officer. Annual audit tool added after consultation with the Centre for Hospital Epidemiology and Staff Services (CHESS). |
| March 2015 | 1 | Endorsed by SESLHD MHS District Document Development and Control Committee (DDDCC), with temperature requirements to be confirmed. |
| April 2015 | 1 | Temperature requirements confirmed with District Infection Control team. |
| May 2015 | 1 | Endorsed by SESLHD MHS Clinical Council. |
| June 2018 | 2 | Schedule review. Initial review by SESLHD MHS Policy and Document Development Officer, Trinh Huynh. Consulted with Infection Control, Kate Clezy. Final review completed by Clinical Nurse Manager, Angela Karooz. |
| July 2018 | 2 | Endorsed by DDDCC. Endorsed by MHS Clinical Council. |
| August 2018 | 2 | Processed and published by District Executive Services. |
| April 2021 | 3 | Routine review commenced Appendix A removed. No other changes identified. |
| May 2021 | 3.1 | Endorsed SESLHD MHS Document Development & Control Committee Endorsed SESLHD MHS Clinical Council |

Revision No: 3 TRIM No: T15/18571 Date: May 2021 Page 3 of 3