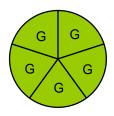
Internal Audit



Hospital Laundry

August 2017

Report Assessment



This report has been prepared solely for internal use as part of NHS Lothian's internal audit service. No part of this report should be made available, quoted or copied to any external party without Internal Audit's prior consent.

Contents

Introduction	1
Executive Summary	2
Management Action Plan	
Appendix 1 - Definition of Ratings	11



Introduction

Laundry services for all of NHS Lothian are provided from St John's Hospital in Livingston. In addition to hospitals and some health centres, laundry services are provided to the Scottish Ambulance Service under a service level agreement.

As well as following internal NHS Lothian procedures, the laundry needs to comply with national requirements. In addition to Health & Safety regulations, the laundry needs to operate in accordance with NHS Scotland's Hospital Laundry Arrangements for Used & Infected Linen (HGS (95) 18).

The laundry has been accredited under ISO 9001 (Quality Management) and ISO 14000/14001 (Environmental Standards & Systems) and receives an ISO audit each year.

Scope

The objective of the audit was to evaluate the adequacy and effectiveness of internal controls over the laundry service.

Acknowledgements

We would like to thank all staff consulted during this review for their assistance and cooperation.



Executive Summary

Conclusion

Efficient work is performed by the Laundry to clean and deliver linen to users within the organisation in a timely manner. However, there were incidents noted in Datix where linen has been provided to users which has been unclean or stained. In addition, although planned preventive maintenance of laundry equipment and systems has been performed in a timely manner for mechanical items, only a very small percentage of electrical maintenance work has been performed during 2016-17. Finally, Laundry staff had only an average 42% compliance rate for mandatory training.

Summary of Findings

The table below summarises our assessment of the adequacy and effectiveness of the controls in place to meet each of the objectives agreed for this audit. Definitions of the ratings applied to each action are set out in Appendix 1.

No.	Control Objective	Control	Numb	er of actions	by action i	ating
		objective assessment	Critical	Significant	Important	Minor
1	Linen is washed to the correct standard.	Green			1	
2	Items are not lost during the laundry process.	Green				
3	Cleaned items are returned within acceptable timeframes.	Green				
4	Cleaning materials and equipment are securely stored and maintained correctly.	Green		1		
5	Laundry staff are not injured or put at risk.	Green		1		
6	Income for services provided outwith NHS Lothian is optimised.	Green				1



Control Objective Ratings

Action Ratings	Definition
Red	Fundamental absence or failure of controls requiring immediate attention (60 points and above)
Amber	Control objective not achieved - controls in place are inadequate or ineffective (21 – 59 points)
Green	Control objective achieved – no major weaknesses in controls but may be scope for improvement (20 points or less)

Main findings

Linen is consistently provided to the correct location by the Laundry. A review of Datix for the period 1 May 2016 to 15 June 2017 showed that there was only one incident of clothing not being returned to the correct location, and it could not be determined whether the fault lay with the Laundry or not.

For generic linen items, which are not required to be returned to particular locations or people, sufficient stock is held by users to offset any delays in receiving deliveries from the Laundry. With regard to the return of linen to specific people or locations, e.g. patients, there have been no incidents noted on Datix to indicate that the process is too slow.

We identified two significant issues for improvement during the review:

- a review of the planned preventive maintenance (PPM) work performed during financial year 2016 17 showed that 1,812 of the planned 1,936 mechanical PPM tasks were performed (93.6%). However, only 4 of the planned 228 electrical PPM tasks were performed (1.8%).
- a review of mandatory training compliance for the 80 Laundry staff showed that, only 21% were compliant with their healthcare associated infection training, 54% with health and safety training, 63% with manual handling training, and 31% with fire training.

Further details of these significant points, one important point, and one minor point are set out in the Management Action Plan.



Management Action Plan

Control objective 1: Linen is washed to the correct standard.

1.1: Linen provided by the Laundry is not always clean

Important

Observation and Risk:

Laundry staff are required to check that linen being returned to staff and patients is both clean and free from stains. However, a review of Datix for the period 1 May 2016 to 15 June 2017 showed that there were instances of linen being returned while being unclean or stained. The first incident in the sample period was noted on Datix on 24 June 2016. Although Laundry managers and supervisors reminded staff to properly check linen, there were 7 further instances during the sample period.

In addition, managers should respond to any incidents reported on Datix by taking action as required and then noting that on Datix, before closing the incident. However, of the 8 key incidents reported on Datix for the Laundry for the period 1 May 2016 to 15 June 2017, 2 (25%) had no corresponding statement of action taken by the Laundry to rectify the issues.

If linen returned to users is not clean or stained then there is a risk of infection, or that the linen will be unusable.

Recommendation:

Laundry managers should remind staff of their responsibility to properly check linen before it is returned to users and, if that is not effective, to take further more effective action to resolve the problem.

For Datix incidents Laundry managers should always record the action taken to resolve any problems before closing the incident.

Management Response: Accepted.

Management Action: All laundry staff were reminded of their responsibilities regarding this at a meeting, held in Partnership, on Friday 28th July 2017. The recommendation regarding completion of Datix forms will be followed with immediate effect.

Responsibility: Laundry Manager Target date: Immediate



Control objective 2: Items are not lost during the laundry process.

We identified no significant issues in relation to this control objective.

The majority of the linen cleaned by the Laundry is generic, and does not need to be returned to an individual person or ward. Other items are required to be returned to specific locations or people, for example patients' clothing, which is done through placing linen back in the boxes which are each marked with the ward name.

A review of Datix for the period 1 May 2016 to 15 June 2017 showed that there was only one incident of clothing not being returned to the correct location, and it could not be determined whether the fault lay with the Laundry or not.

Control objective 3: Cleaned items are returned within acceptable timeframes.

We identified no significant issues in relation to this control objective.

No timescale is set by Laundry on how quickly it must return items to users. For generic items, which are not required to be returned to particular locations or people, this is not an issue as sufficient stock is held by users to offset any delays in receiving deliveries from the Laundry.

With regard to the return of clean linen to specific people or locations, e.g. patients, there have been no incidents noted on Datix to indicate that the process is too slow.



Control objective 4: Cleaning materials and equipment are stored and maintained correctly.

4.1: Planned preventive maintenance does not always occur with the required frequency

Significant

Observation and Risk:

The Laundry is housed in a large building at St. John's Hospital, and contains a number of complex machines. Planned preventive maintenance (PPM) of the machinery, electrical systems, and the building itself is performed by NHS Lothian's Estates Department and also by external firms.

A review of the PPM work performed during financial year 2016 – 17 showed that 1,812 of the planned 1,936 mechanical PPM tasks were performed (93.6%). However, only 4 of the planned 228 electrical PPM tasks were performed (1.8%). In discussion with staff from Estates and the Laundry, it was stated that there have been difficulties in recruiting sufficient staff to perform the work.

In addition, the Estates Department does not provide the Laundry with regular reports detailing whether the PPM work is being performed as planned.

If PPM work is not performed as planned, and reports on PPM compliance are not provided to the Laundry, there is a risk that machinery or electrical systems will fail or be dangerous to staff.

Recommendation:

All planned preventive maintenance (PPM) of the Laundry's machinery and electrical systems should be performed in a timely manner.

Estates should provide the Laundry with a quarterly report showing whether PPM work is being performed as planned.

Management Response: For several months the Estates Department at SJH has been experiencing staff shortages, particularly for electricians and has struggled to attract suitably experienced/qualified candidates. At present there are 3 vacancies and suitable applicants are in the process of being invited for interview. This shortage has resulted in both ad-hoc and planned maintenance tasks being risk managed with priority being given to clinical and business critical systems across the SJH site. Within the laundry Electrical Installation Condition Report (EICR) and Emergency lighting PPM has been outsourced to a contractor, whenever suitable access can be arranged these tasks will be completed. Portable Appliance testing within the laundry area is now complete. Ad-hoc tasks are prioritised as appropriate.

Management Action: Estates management will continue to process the recruitment of additional staff. Estates will provide laundry management with quarterly Departmental Analysis report from BackTraqFM system identifying the status of both ad-hoc and planned maintenance tasks. Any omitted safety critical tasks will be discussed with laundry



management and where applicable a contingency agreed.

Responsibility: Area Manager HardFM, West
Lothian

Target date: 02/10/2017



Control objective 5: Laundry staff are not injured or put at risk.

5.1: Mandatory staff training is not always being performed with the required frequency

Significant

Observation and Risk:

Laundry staff, like other staff within the organisation, have to perform regular mandatory training. Some training courses are conducted on computer, while others are performed through presentations. Staff must undetake each training course periodically in order to remain compliant.

However, a review of training compliance for the 80 Laundry staff showed that:

- Healthcare associated infection training 17 were compliant (21.3%)
- Health and safety training 43 were compliant (53.8%)
- Manual handling training 50 were compliant (62.5%)
- Fire training 25 were compliant (31.3%).

In addition, management maintain a spreadsheet showing what machines and processes each staff member is competent to operate. However, 17 (21%) of the 80 Laundry staff do not have their competencies stated. Also, the spreadsheet does not show when it was last updated.

If staff do not receive mandatory training with the required frequency there is an increased risk of injury or poor work performance.

Recommendation:

Laundry staff should perform their mandatory training with the required frequency. In addition, the spreadsheet showing the competencies of individual staff members should be completed and state the date of most recent revision.

Management Response: Accepted.

Management Action: As most laundry staff do not access computers at work this training has to be carried out face to face. Arranging attendance at such sessions at suitable times is proving to be difficult but we have been in contact with James McCaffrey to rectify the situation. The spreadsheet is in the process of being updated at the moment.

Specifically in regards to training:

- Healthcare associated infection training will be provided through face to face sessions and will be completed by 31 December 2017.
- Health and Safety training will be provided through face to face sessions and will be completed by 30 November 2017
- Manual handling training will be provided through face to face sessions and will be completed by 31 January 2018



Fire training will be provided through face to face sessions and will be completed by 31
December 2017.

Responsibility: Laundry Manager

Target date: All complete by 31
January 2018



Control objective 6: Income for services provided outwith NHS Lothian is optimised.

6.1: Invoicing of the Scottish Ambulance Service has not been performed for some time

Minor

Observation and Risk:

The Laundry cleans linen for the Scottish Ambulance Service and invoices them for this service each month, with the usual monthly charge being approximately £2,350.

However, the Laundry has not invoiced the Scottish Ambulance Service since December 2016 due to a staff member at the Laundry being on long-term sickness absence.

The reliance on one key member of staff to perform invoicing duties increases the risk that the Laundry does not invoice the Scottish Ambulance Service each month and that NHS Lothian do not receive income as quickly as possible.

Recommendation:

The Laundry should invoice the Scottish Ambulance Service each month in a timely manner. In addition, a process should be introduced which ensures that invoices are issued even in the event of staff absences.

Management Response: Accepted.

Management Action: The Scottish ambulance Service has now been invoiced for the outstanding income. Laundry managers are currently being shown how to carry out this function to avoid this happening again in future.

Responsibility: n/a – completed. **Target date:** Immediate.



Appendix 1 - Definition of Ratings

Management Action Ratings

Action Ratings	Definition
Critical	The issue has a material effect upon the wider organisation – 60 points
Significant	The issue is material for the subject under review – 20 points
Important	The issue is relevant for the subject under review – 10 points
Minor	This issue is a housekeeping point for the subject under review – 5 points

Control Objective Ratings

Action Ratings	Definition
Red	Fundamental absence or failure of controls requiring immediate attention (60 points and above)
Amber	Control objective not achieved - controls in place are inadequate or ineffective (21 – 59 points)
Green	Control objective achieved – no major weaknesses in controls but may be scope for improvement (20 points or less)