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A = Approved D = Draft

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<b>Section</b>	<b>Contents</b>	<b>Page No.</b>
	Staff Summary	3
1.0	Policy statement	3
2.0	Introduction	2
3.0	Purpose/Scope	4
4.0	Process	5
5.0	Planned Preventative Maintenance (PPM) Schedule	10
6.0	Control Methods	10
7.0	Action in the Event of a Suspected Outbreak or Incident	10
8.0	Training expectations for staff	10
9.0	Implementation Plan	11
10.0	Monitoring compliance with this Policy	11
11.0	Development process	11
12.0	Equality impact assessment	11
13.0	Dissemination and implementation arrangements	11
14.0	Process for monitoring compliance and effectiveness	12
15.0	Management plan	14
16.0	Auditing	15
17.0	Risk Assessments & Drawings	15
18.0	Training & Competence	18
19.0	Record Keeping	20
20.0	Review and revision arrangements	21
21.0	REFERENCES	22

## Staff Summary

Yorkshire Ambulance Service NHS Trust (YAS) recognises it has statutory responsibilities as an employer and a healthcare provider under the Health and Safety at Work Act, the Management of Health and Safety at Work Regulation and the Control of Substances Hazardous to Health Regulations. The intention is to use the requirements of these regulations as a minimum standard for the prevention of bacteria growth within its buildings and building services and to prevent visitors and staff being exposed to Legionella bacteria.

### 1.0 Policy statement

The Yorkshire Ambulance Service NHS Trust [hereinafter referred to as the “Trust”] has a duty of care to patients, visitors and staff to ensure a safe and appropriate environment for healthcare.

The Trust accepts its responsibility under the Health and Safety at Work etc. Act 1974 and the Control of Substances Hazardous to Health Regulations 2002 [as amended], to take all reasonable precautions to prevent, control and guard against the harmful effects of Legionellosis to visitors, staff and other persons working at or using its premises.

The Chief Executive and the Board carry ultimate responsibility for a safe and secure healthcare environment. Aspects of that responsibility have been assigned / delegated to other appointed individuals within the Trust, these are defined under “Roles and Responsibility” section of this Policy document.

The Trust’s Board of Directors are responsible for ensuring overall operational control is in place., it is the Responsible Person’s responsibility to ensure implementation of operational control.

The Head of Facilities has been appointed by the Chief Executive as the Responsible Person [Water]. This Policy is issued and maintained by Responsible Person [Water] on behalf of Trust.

This Policy is formally accepted by the Chief Executive and approved by the Board of Directors. The Chief Executive will do all that is reasonably practicable to comply with its requirements, and will make the necessary resources available

This Policy and associated Water Safety Plan [WSP] documentation applies to all Trust employees [including those managed by a third party] and premises where they work [Trust owned and occupied, including those properties which Trust may occupy under lease].

The management of water safety will be a continual commitment by Trust involving regular management and progress meetings, and a commitment to a risk assessment programme.

Legionella Pneumophila and other bacteria can cause an infection known as Legionellosis. Legionnaire’s disease is a pneumonia that principally affects those who are susceptible, due to age, illness, immunosuppression, smoking, etc, and may be fatal. However it is a significant health issue for anyone who is exposed to the spores of the bacteria.

### 2.0 Introduction

Legionella pneumophila and other bacteria can cause an infection known as Legionellosis. Legionnaires’ disease is a primary pneumonia that principally affects

those who are susceptible, due to age, illness, immunosuppression, smoking, etc., and may be fatal. However, it is a significant health issue for anyone who is exposed to the spores of the bacteria.

Legionella bacteria are present in water systems and do not pose a significant health concern if the appropriate control measures are in place and maintained. The risk from Legionella bacteria increases if the water in the systems is stagnant (i.e. in 'dead legs' or when the system is not in use for a period of time) and bio-film can develop on the inside of the water pipes. This bio-film provides nutrients, protection from temperature and biocides and encourages proliferation of the bacteria. Legionella proliferation can be suppressed by controlling the water temperature and by keeping the flow of water through the system consistent.

It is not possible to contract Legionnaires' disease by drinking or bathing in contaminated water and the disease cannot easily be transferred from person to person. The spores of the bacteria typically need to be airborne (as an aerosol) and breathed in to cause the pneumonia associated with Legionnaires disease.

HTM 04-01 Safe Water In Healthcare Premises gives advice and guidance about the installation and management of water systems within the NHS, however it must be recognised that the Yorkshire Ambulance Trust estate is different from the estate considered in the drafting of that suite of documents. The trust estate is not 'healthcare' estate, in that it is not visited by patients. The requirements of the trust therefore fall much more in keeping within the Approved Code of Practice L8, as published by the Health and Safety Executive, that requires certain duties of an employer. This is therefore referred to within the scope of this Policy.

### **3.0 Purpose/Scope**

#### **3.1 Purpose**

This Policy shall ensure the following are in place to safeguard all patients, visitors, staff and assets in order to prevent and reduce harm or loss;

To set out a clear framework to protect all staff, patients and visitors by minimisation of the risks associated with legionellosis;

To identifying the correct practice for managing water risk systems so far as is reasonably practicable for staff to implement based upon nationally accepted guidance;

To enable staff to understand their responsibilities in relation to this Policy document and associated WSP documentation;

To detail arrangements for ensuring this Policy is monitored and reviewed to reflect current legislation and guidance;

To detail the process for version control to ensure persons who require it, have access to the most current version of the document. Ensuring arrangements are in place for archiving revised policies.

This Policy shall be supported with adequate resources and suitably qualified, trained and competent staff to ensure the successful implementation of the Policy and associated WSP documents.

## **3.2 Scope**

This Policy sets out the management approach to be adopted by the Trust for providing and maintaining safe water systems and preventing infection from Trust water systems.

The Policy applies to all service users, visitors and staff associated with the Trust and should be read and implemented whenever water related risk management advice is required.

## **4.0 Process**

### **4.1 The Chief Executive and Board**

While ultimate responsibility is vested in the Trust Board, executive responsibility is delegated to the Chief Executive for managing health and safety. Compliance with this guidance will be achieved by:

- Systematic identification and assessment of risk.
- Allocating appropriate resources to achieve reduction in risk, so far as is reasonable practicable.
- Implementation of effective control measures.

The Health and Safety Executive Approved Code of Practice (L8) requires that an individual should be appointed as being responsible for over-seeing the assessment and on-going management of risks associated with Legionellosis. The appointed Responsible Person [Water] is the Head of Estates and Facilities.

### **4.2 Duties**

#### **Management Responsibility**

Those persons with key management responsibilities are detailed below and their communication pathways and other relevant supporting staff are represented in below.

All relevant persons shall fully appreciate the actual and potential risks from Legionellosis and the concept of risk management. Although compliance with the WSP tasks may be delegated to staff, or undertaken by contractors, accountability cannot be delegated.

Any person intending to fulfil any of the staff functions specified below should be able to prove that they possess sufficient skills, knowledge and experience to be able to perform safely the designated task(s).

#### **Duty Holder**

The Chief Executive is the statutory Duty Holder. The Duty Holder has overall accountability for Health & Safety within the Trust, including all aspects of water safety and the quality of water supplies.

The Executive Director of Standards and Compliance may also be involved in strategic risk management of Legionellosis where required.

## Responsible Person [Water]

The Responsible Person [RP] [Water] will provide the informed position at Board level through updates by exception and via regular updates to Estates Management Group, which is a formal meeting held with the organisation's governance structure. They are responsible for the organisational arrangements [strategic leadership, direction and overview] which will ensure that compliance with standards is achieved [including proposed developments take account of impact on water safety]. Any management issues [including water system issues] are/have been reported to Board having being resourced and solved.

To facilitate this role, the Responsible Person [Water] will be required to liaise closely with other professionals in various disciplines; as such will be supported by the Facilities Manager, Facilities Officers and the Authorising Engineer [Water] to ensure suitable provision to maintain the service.

The RP [Water] will be the informed link at Board level as such they shall:

- Immediately inform the Board if any suspected legionella, outbreak / incidents occurs, as well as taking an active role in any investigations;
- Ensure this Policy is reviewed, ratified and implemented;
- Be professionally and operationally responsible for water quality;
- Budgeting – overall and single items limits;
- Accountability and responsibility.
- Issue, maintain and update this Policy document with assistance from Authorising Engineer[Water];
- Approve any changes to the WSP [technical & operational procedures];
- Be responsible for the development & implementation of the WSP, ensuring the WSP is compliant with ACoP L8 [including HSG274 Parts 2 & 3];
- Advise on the necessary continuing procedures and actions for the prevention or control of legionellosis;
- Co-ordinate with Infection Control lead and the Authorising Engineer [Water] for help, advice and in response to any investigation arising for non-compliant issues and for the ongoing development of the Estate;
- Ensuring that all control schemes handed over to the Operational Estates Department are appropriately documented, commissioned and signed off in accordance with the WSP;
- Chair the Compliance and Risk Working Group meetings;
- Monitor the implementation and efficacy of this Policy and the associated WSP;
- Assist with annual management audits completed by the Authorising Engineer[Water];
- Carry out the necessary actions defined in the WSP should an outbreak situation associated with legionellosis be suspected or confirmed;
- Liaise with 3rd parties external to the Trust on assurance matters
- Attend updated management training at least every three years, or sooner if determined by the training needs analysis.

## Facilities Manager

The Facilities Manager will deputise in the absence of the RP [Water] and will act on their behalf.

The Facilities Manager will provide the Responsible Person [Water] with information on the status of service. To remain informed, the Facilities Manager will be supported by the Facilities Officers and the Authorised Engineer [Water] as well as other professionals.

The Facilities Manager shall:

- Be responsible for the development & implementation of the WSP. Ensuring the WSP is compliant with ACoP L8 [including HSG274 Parts 2 & 3];
- Inform the RP [Water], Authorising Engineer [Water] and other parties as required of all positive water sample results and the associated action being taken to resolve them;
- Co-ordinate with the Authorising Engineer [Water] for help, advice and in response to any investigation arising for non-compliant issues and for the ongoing development of the Estate;
- Shall attend the Compliance and Risk Working Group meetings;
- Commission additional surveys [including pipework] in response to risk assessment recommendations, sampling issues [positive results] or other observed faults / conditions reported. The issue of orders / job tickets for remedial works [in response to the additional survey findings] to the appointed contractor;
- Ensure the Trust records management system is maintained, complete and operational. As well as ensuring drawings / plans / schematics are maintained, updated, produced of all the Trust water systems / buildings where a change has occurred;
- Manage refurbishment works [major or minor] in accordance with the WSP;
- Review & maintain the Planned Preventative Maintenance [PPM] schedules to ensure they are correctly defined in the WSP;
- Ensure that any non-complaint occurrences / issues reported from the appointed contractor / Trust staff re PPM tasks are actioned;
- Issue Permits to Work and other appropriate documentation as required to by Trust staff or approved contractors. With approved contractors ensuring their competence has been checked;
- Ensure the external consultants & contractors are suitably qualified & competent;
- Be responsible for leading on the explanation to users on the function of risk systems and organise adequate information and training to support those systems;
- Arrange and review water risk assessments for the Trust water systems / buildings, as defined in this Policy;
- Agree the risk minimisation scheme with the appointed risk assessment contractor;



- Ensure that all incidents are reported accordingly for positive water sample results and failures in the management systems;
- Assist with annual management audits completed by the Authorising Engineer [Water];
- Carry out the necessary actions should an outbreak situation associated with legionellosis be suspected or confirmed;
- Routinely reviewing the training needs analysis, with suitable training being delivered where required. They will also receive updated management training at least every three years, or sooner if determined by the training needs analysis.
- The Facilities Manager also delegates the day to day management to the Facilities Officers [Maintenance]
- Ensure that appropriate Trust maintenance staff and contractors Competent Persons remain suitably trained and competent.
- Ensuring that all planned and reactive sampling activities are carried out in accordance with the WSP and that results are reviewed, escalated to the RP [Water] and actioned [where necessary in a timely and professional manner] in accordance with the WSP;
- Liaising with the water undertaker and ensure that equipment that is permanently connected to the water supply is properly installed;
- Attend updated management training at least every three years, or sooner if determined by the training needs analysis.

### **Trust Maintenance Staff & Appointed Contractors**

The Trust has a mixed environment with their own trades staff and external contractors, both of which are used to execute the tasks required within the WSP.

#### **All staff and contractors will ensure they:**

- Provide the skilled installation and/or maintenance of water risk systems;
- Conduct all of their water system related tasks in accordance with the WSP & PPM system, they shall complete all required records;
- Only use WRAS approved materials when working on water systems;
- Employ their highest standard quality of work;
- Maintain good hygiene practices with tools, equipment, components/accessories to be used on water systems thus preventing contamination of water systems and outlets;
- Report any defects, suspicions or concerns regarding the design, condition, operation or performance of water systems that might increase the risk waterborne pathogen proliferation;
- Ensure good personal hygiene [including clothing and foot ware] practices [reporting any recent communicable illness to Facilities Officers/Manager before commencing any work on water systems;

- Attend updated training at least every three years, or sooner if determined by the training needs analysis.

### **Infection Control Lead**

The Lead Nurse Infection Prevention & Control is the Infection Control Lead.

The Infection Control Lead shall:

- Support & advise Trust staff on the continuing procedure for the prevention and/or control of Legionellosis;
- Attend updated management training as determined by the training needs analysis.
- Will advise if circumstances change within any properties that might affect legionellosis risk;
- 

### **Authorising Engineer [Water]**

The Authorising Engineer [Water] [hereinafter referred to as AE [Water]] will remain independent of the Trust and remain independent of providing remedial services. The AE [Water] will be appointed by the Responsible Person [Water].

The AE [Water] shall:-

- Advise & support the RP [Water], Facilities Manager and Officers re positive water sample results as well non-compliant issues identified through PPM tasks and what actions can be taken to resolve them;
- Undertaken annual management audits;
- Monitor performance through routine records audits;
- Review and identify changes needed to this Policy and associated WSP documents;
- Assist with risk assessment reviews;
- Attend the Compliance and Risk Working Group [CRWG] meetings as required;
- Deliver training based on needs analysis.

### **All Employees**

Employee responsibilities under the Health and Safety at Work Act clearly state that there is a duty on all employees to report hazards. This includes biological hazards and therefore risks of Legionella. Staff are required to report to the Estates & Facilities Department immediately if they notice the following:

- Loss of temperature in the hot water system
- Any loss of pressure in either the hot water or cold water systems
- Any suspected cases of Legionnaires disease.
- A basin or shower that is infrequently used.

ALL areas are monitored monthly on a contracted basis and water sampling will be carried out if abnormal readings are experienced or concerns raised.

All showers are run daily by the site domestic cleaners.

## **5.0 Planned Preventative Maintenance (PPM) Schedule**

A Planned Preventative Maintenance (PPM) schedule has been produced identifying the frequency of tasks and records are kept on file by the Facilities Manager for a period of at least five years.

Any abnormal test results are notified to the Facilities Manager immediately.

## **6.0 Control Methods**

The Trust has adopted Control Methods to reduce the proliferation of Legionella which include maintaining Domestic Hot Water (DHW) and cold water supplies at appropriate temperatures, removal of dead legs and modifications to area where growth may occur and annual inspections of water tanks.

## **7.0 Action in the Event of a Suspected Outbreak or Incident.**

In the event of a suspected outbreak or incident of legionella an incident report will be submitted on Datix.

The Responsible Person [Water] will coordinate the investigation into a suspected outbreak or incident and will ensure the local authority and the HSE are informed, if relevant. If appropriate the RP [Water] may convene an Incident Control Team (ICT).

The ICT shall meet as necessary with others as appropriate to co-ordinate investigation of the problem and progress any necessary action. Minutes are to be kept and a log of actions taken and results of tests and Inspections are to be recorded. Photographic record is to be kept where appropriate.

Legionnaire's disease is a notifiable disease in England and cases of Legionellosis are also notifiable under the Reporting of Injuries Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

The Health and Safety Executive may be involved in the investigation of an outbreak.

The results of any investigation undertaken by the incident control team shall be discussed at the strategic Health and Safety Committee.

## **8.0 Training expectations for staff**

Training required to fulfil this policy will be provided in accordance with YAS Estates Department Training Needs Analysis. Management of training will be in accordance with YAS Support for Learning and Development Policy.

## **9.0 Implementation Plan**

The latest approved version of this Policy will be posted on the Trust Intranet site for all members of staff to view. New members of staff will be signposted to how to find and access this guidance during Trust Induction'

## **10.0 Monitoring compliance with this Policy**

This policy will be monitored by the Responsible Person and reviewed annually or sooner if circumstances deem it necessary.

## **11.0 Development process**

### **Identification of need**

To meet the requirements of ACoP L8 and associated guidance documents, this Policy and the associated WSP.

Consultation and Communication with Stakeholders

The organisation recognises that policies need to be developed in consultation and communication with a range of stakeholders:

- Responsible Person [Water];
- Deputy Responsible Person [Water];
- Infection Control Officer [Water];
- Infection Control Lead;
- Authorised Person [Water];
- Authorised Engineer [Water].

## **12.0 Equality impact assessment**

The Trust aims to ensure its policies promote equality both as a provider of services and as an employer. This policy has met the Equality Impact Assessment (EIA) requirements.

## **13.0 Dissemination and implementation arrangements**

### **13.1 Dissemination**

This Policy document is available in a read-only format via the document store on the Trust intranet for staff to access. As the Policy is reviewed, any updated copy of the Policy shall replace the existing Policy hosted on Trust intranet. Any changes to this document must be implemented only with the authority of the Responsible Person [Water].

### **13.2 Implementation**

Support and advice to assist in the implementation of this document is available from the:

1. Responsible Person [Water];

2. Facilities Manager;
3. Authorising Engineer [Water].

## 14.0 Process for monitoring compliance and effectiveness

### Monitoring Compliance

Arrangements in place for ensuring and monitoring compliance within this Policy and associated WSP are achieved through reviewing and auditing as defined in the table below:

Element of Written Scheme	When	How	Who	Reports to	Deficiencies / gaps / recommendations and actions
Policy	Annually	Audit/review	RP [Water] AE [Water]	C&RW G	Review, update, sign off and send for ratification
WSP	Annually	Audit/review	RP [Water] AE [Water]	C&RW G	Review, update, sign off and adopted by C&RWG
Incident Reports	Quarterly	Review	Facilities Manager	C&RW G	Review, update, sign off
Audit - Management	Annually	Audit	RP [Water] AE [Water]	C&RW G	Ensure the Trust remains compliant. Recommendations on to Water Issues Log.
Audit – Records & Performance	Monthly & Quarterly	Audit	Facilities Manager	C&RW G	Ensure the Trust remains compliant. Recommendations on to Water Issues Log.
Risk Assessments [Inc. schematics]	Monthly & Quarterly	Audit/review	Facilities Manager	C&RW G	Ensure risk assessments remain current.
RA Action Plans	Monthly & Quarterly	Audit/review	Facilities Manager	C&RW G	Ensure actions arising from C&RWG and annual audits are complete.
Training Matrix	Quarterly	Review	Facilities Manager	C&RW G	Ensure each person involved with ensuring water safety remains up to date with training.

## **Effectiveness**

Effectiveness of compliance is detailed at the Compliance & Risk Working Group meetings. The WSP is based on external standards [see section 10 References].

## 15.0 Management plan

### Compliance & Risk Working Group [C&RWG]

To comply with the HCAI Code of Practice recommendation that management and monitoring arrangements are need to be in place, the Trust has an established Compliance & Risk Working Group [C&RWG] and Water Safety Plan [WSP].

The aim of the C&RWG is to ensure the safety of all water used by patients / residents, staff and visitors, and to minimise the risk of infection associated with legionellosis.

The C&RWG is multi-disciplinary group and is a forum in which people with a range of competencies through the Trust are brought together to share responsibility and take collective ownership for ensuring it identifies water-related hazards, assesses risks, identifies and monitors control measures and develops incident protocols.

As such, membership to the C&RWG broadly includes those:

- Who are familiar with all water systems and associated equipment in the building(s) and the factors that may increase risk of infection from Legionella, P. aeruginosa and other legionellosis (that is, the materials and components, the types of use and modes of exposure, together with the susceptibility to infection of those likely to be exposed);
- Who have knowledge of the particular vulnerabilities of the at-risk population within the facility;
- Representatives from areas where water may be used in medical treatments or where exposure to aerosols may take place.

#### The C&RWG undertakes:

- The commissioning, development & implementation of the WSP.
- The provision of advice on the remedial action required when water systems or outlets are found to be contaminated and the risk to staff is increased.
- Decision making on the safety and integrity of the water systems and associated equipment that use water to which staff and visitors could be exposed do not go ahead without being agreed by the C&RWG. This includes consultations relating to decisions on the procurement, design, installation and commissioning of water services, equipment and associated treatment processes [includes seeking assurance should be sought from the manufacturer regarding safety for service-users].

The ToR defines:

The purpose of the C&RWG;

Membership of the C&RWG;

Frequency of meetings, Quorate arrangements along with agenda;

Objective of the C&RWG;

Reporting arrangements.

The C&RWG has clearly identified lines of accountability / communication pathways [see 8.0 Communication Pathways] up to the CEO and board. The roles and responsibilities of these members are defined within this Policy. Only members of the C&RWG shall receive meeting meetings, unless they are unable to attend when it is expected they will inform the Chair person and detail a nominated deputy to attend the C&RWG in their place.

## **16.0 Auditing**

A programme of auditing the written scheme elements is defined in Section 12.0 'Monitoring Compliance & Effectiveness'. This will inform the organisation's assurance framework.

Monitoring the performance of a contractor should be completed either by Facilities Manager or AE [Water]. The use of another contractor to monitor the performance of the first contractor should be avoided as this could lead to a conflict of interest.

An annual water risk management audit is undertaken by the AE [Water] with assistance from the RP [Water] and Facilities Manager in order to ascertain the effectiveness of the broad management arrangements. The methodology for audit may vary from year-to-year in order to ensure a fresh outlook on each occasion. The audit report includes recommendations for improvement and forms part of the Legionellosis risk management system.

Nominally, performance monitoring will be completed by the Facilities Manager/Officers to establish the degree of compliance of records present and accuracy of the records.

## **17.0 Risk Assessments & Drawings.**

### **Water Risk Assessments**

The Facilities Manager will ensure that suitable and sufficient risk assessments are up to date and valid and are commissioned when needed [see criteria below]. The risk assessment must be completed in accordance with:

1. ACOP L8 [fourth edition] 2013;
2. HSG274 [Parts 2 & 3] [as applicable];
3. BS8580:2010.
4. HGN "Safe" Hot water and Surface Temperatures';

The Trust requires the risk assessment to be completed by a competent person, the Facilities Manager shall ensure the assessor is competent [this may include the need for formal interview with examples of risk assessment reports and projects they have been involved with] and independent of supplying any ongoing remedial work.

Accreditation to UKAS to ISO/ISE 17020:2012 and membership to the Legionella Control Association [LCA] is one means of ensuring competence.



The risk assessor(s) shall be given access to competent assistance from the Trust. This may be in the form of:

- engineering and building expertise;
- as-fitted drawings and schematic diagrams;
- clinical expertise;
- knowledge of building occupancy;
- bespoke equipment plus policies, procedures and any protocols (for example cleaning of wash-hand basins and disposal of clinical effluent etc.).

The risk assessment shall:

- Encompass all buildings and all water systems;
- Identify and evaluate potential sources of risk;
- Include an assessment of occupant vulnerability;
- Use an established risk scoring matrix;
- Include an assessment of engineering, considering correct design [inherent risk and actual risk], installation, commissioning, maintenance, verification and effectiveness as a control measure;
- Include a review of schematics of hot and cold water systems to check they are up to date and the existence of water connections to outside services is checked;
- An assessment of underused outlets and flushing regimes;
- Include information on Scalding risk;
- The unnecessary use of non WRAS or WRc approved materials [i.e. Flexi hoses];
- Review monitoring, sampling and testing records.

The assessment of risk is an ongoing process, and as such the Facilities Manager should ensure the risk assessments are regularly reviewed and updated [see Appendix 1 – Risk Assessment Review Schedule and Risk Assessment Need Notification], specifically when:

- a change to the water system or its use;
- a change to the use of the building where the system is installed;
- new information available about risks or control measures;
- the results of checks indicating that control measures are no longer effective;
- changes to key personnel;
- a case of legionnaires' disease/Legionellosis associated with the system.

The Trust will support this risk assessment process by giving guidance on any specific clinical risks where it is deemed appropriate.

The Facilities Manager will communicate the latest risk assessment report and minimisation scheme actions at the WSG. The WSG will consider the overall recommendations in context of Trust Risk Register.

For those properties which are not owned by the Trust, only occupied by Trust staff, Facilities staff will request evidence from the Duty Holder for that property that water safety risk is being proactively managed

## **Drawings**

As-fitted drawings shall identify all key components in the installation, i.e. water meters, cisterns, filters, calorifiers, water heaters, isolation valves. These drawings should be kept up to date. These drawings will help inform the risk assessment and are necessary to perform adequate temperature control checks and will be valuable for identifying potential problems with poor temperatures.

Schematic drawings are not formal technical drawings, they are intended to be easy to read without specialist training / experience. They provide the reader with an idea of layout and position of components and connections. These drawings should be kept up to date. These drawings assist with the risk assessment process.

## **Risk Minimisation Scheme**

The risk assessment shall form the basis of a risk minimisation scheme describing the particular means by which the risk from exposure to legionella bacteria is to be minimised so far as is reasonably practicable. The remedial actions within the associated risk minimisation schemes shall be reasonably practicable and prioritised on the basis of risk, cost and difficulty. The risk minimisation scheme shall be approved by the C&RWG

## **18.0 Training & Competence**

### **18.1 Training**

The WSG will review training needs analysis at each meeting and implement a training programme to ensure all those defined in the control strategy have received appropriate information, instruction and training to undertake their associated duties. Records of training and attendance of appropriate training shall be kept. Refresher training shall be given dependent on review of training needs analysis.

Competence of staff and contractors shall be assessed according to their role and duties. To ensure competence has been assessed it will be viewed in context with the individual's experience, knowledge and background.

Where allocated tasks are being given to others, then supervisors / managers / operatives need to have received adequate training in respect to role, duties, water hygiene and control strategies.

To ensure the delivery of safe wholesome water at all outlets and preventing contamination [which may lead to healthcare-associated infections] the Trust shall implement a water safety training scheme. The Trust recognises that individuals are aware of their duty to protect the health of patients, staff and visitors and that they are responsible for ensuring that they inform their line manager if they come into contact with any disease that has the potential to cause harm. Water safety training will cover an appreciation of practices that can affect water hygiene/safety, outlet cleanliness and patient safety. Those working on water systems [including outlets] will receive training in the need for good hygiene and how to prevent contamination of water supplies and outlets. Those responsible for housekeeping tasks such as outlet flushing and cleaning of outlets shall also be trained and competence assessed in respect to their role and how to prevent contamination of water supplies.

The water safety training should encompass the following elements:

- Trust governance arrangements in relation to water hygiene and safety;
- Trust Water Safety Policy & WSP [procedures in relation to the management and provision of water hygiene and safety];
- Legionellosis and its consequences;
- Trust control strategies and how a water distribution systems, water outlets, components and any associated equipment can become contaminated;
- Roles & responsibilities of individuals to prevent the contamination of the water distribution system and water outlets and assisting in ensuring control measures in place are effective;
- How the safety of water can be maintained by good hygiene practices [personal hygiene along with dealing with clothing, footwear, cleaning equipment/materials, tools and storage when considering water hygiene];
- When not to work with water intended for domestic purposes;
- Components/accessories (taps, TMVs);
- Disinfection and cleaning equipment/ materials;

## 18.2 Competence

The Trust uses specialist contractors to undertake aspects of the operation, maintenance and control measures. While these contractors have legal responsibilities, the ultimate responsibility for the safe operation rests with Trust's Duty holder.

Employing contractors or consultants does not absolve Trust Duty holder of responsibility for ensuring that control procedures are carried out to the standard required to prevent the proliferation of legionella bacteria within Trust water systems.

Those who appoint specialist contractors [RP/Facilities Manager] shall make reasonable enquiries to satisfy themselves of the competence of contractors in the area of work before they enter into contracts for the treatment, monitoring, and cleaning of the water systems, and other aspects of water treatment and control.

The Trust shall be satisfied that any contractors employed are competent to carry out the required tasks and that the tasks are carried out to the required standards. The contractor should inform the Facilities Manager of any risks identified and how the system can be operated and maintained safely.

The Legionella Control Association's "A Recommended Code of Conduct for Service Providers" provides an illustration of the levels of service to be expected from service providers.

This Code of Conduct does not have legal status but may give guidance to those who appoint special contractors about the standards of service they should expect to receive from service providers who abide by the Code.

Only installers with the appropriate qualifications, regulatory knowledge and competence shall be used to install and maintain water installations. Water Safe register holds details from all seven Approved Contractors' Schemes for businesses that have registered plumbing installers [authorised through the Water Supply (Water Fittings) Regulations 1999].

The Trust recognises the benefits of using an Approved Contractor is they can carry out some work without the need to provide advanced notification to the water undertaker, and their work will be certified upon completion. A "work completed" certificate issued by a Water Safe recognised plumber provides a defence for property owners who are challenged by a water undertaker enforcing the Water Supply (Water Fittings) Regulations 1999 or during legal proceedings.

## **19.0 Record Keeping**

All records shall be readily available on site, in an appropriate format, for use by any member of the C&RWG or outside organisations. Electronic data management tools may be utilised to facilitate the intelligent use of data for the C&RWG to easily monitor trends and analyse chemical and microbiological parameters.

Records should be kept for at least five years.

Comprehensive operational manuals for all items of plant that include requirements for servicing, maintenance tasks and frequencies of inspection should be readily available on site.

Any commissioning data should also be kept with these manuals.

Asset registers should be established and should be designed to provide the following information:

- an inventory of plant and water- associated equipment;
- a basis for identifying plant details;
- a basis for recording the maintenance requirements;
- a basis for recording and accessing information associated with maintenance;
- a basis for accounting to establish depreciation and the provision needed for plant replacement;
- information for insurance purposes.

## 20.0 Review and revision arrangements

### Process for Reviewing this Policy

The review period for this document will be **24** months, unless otherwise indicated by change in national guidance or as a result of the risk incident reporting system.

#### Version Control

This document has been revised from its previous format and is a later version. Details of version control can be found on page 1.

#### Archiving

The Responsible Person [Water] for the Trust will be responsible for document control including the recording, storing and controlling of current procedural documents and archiving.

Record	Retention Period
This Policy and WSP	Throughout the period for which they remain current and for at least two further years.
Risk assessments	
Risk minimisation scheme and details of its implementation	
Monitoring, inspection, test and check results, including details of the state of operation of the system	At least five years

## 21.0 REFERENCES

- Health Technical Memorandum 04-01: The control of Legionella, hygiene, 'safe' hot water, cold water and drinking water systems. Parts A, B & C: 2016 and Supplement 2015.
- Health Technical Memorandum 03-01: Specialised ventilation for healthcare premises. Parts A and B: 2006
- Approved Code of Practice, Legionnaires' disease: the control of Legionella bacteria in water systems. [L8] 2013 – 4th Edition. HSG274 Parts 2 & 3.
- The Health and Safety at Work etc. Act: 1974
- The Management of Health and Safety at Work Regulations: 1999
- The Water Supply [Water Fittings] Regulations: 1999
- The Water Supply [Water Quality] Regulations: 2010
- The Control of Substances Hazardous to Health Regulations: 2002
- The Building Regulations: 1992
- BS 8580:2010 – Risk Assessments for legionella control.
- BS 8558:2015 - Installation, testing and maintenance of services supplying water for domestic use within buildings and their curtilages specification
- BS EN 806. Parts 1 to 5. Specifications for installations inside buildings conveying water for human consumption.
- BS 7592:2008 - Description: Sampling for Legionella bacteria in water systems. Code of practice
- Water Regulations Advisory Scheme [WRAS] Water Regulations Guide: 2004
- Water Regulations Advisory Scheme [WRAS] Water Fittings and Materials Guide: 2005