



Water Safety Policy

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Water Safety Plan (WSP) Part 2.1

WSP Part 3.1

WSP Part 4.1.1

WSP Part 4.1.2

WSP Part 4.1.3

WSP Part 4.2.2

WSP Part 4.2.2.1

WSP Part 5.1

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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 and other waterborne pathogens.

1.0 Policy statement

- 1.1 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.
- 1.2 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.
- 1.3 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.
- 1.4 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.
- 1.5 The Head of Facilities Management has been appointed by the Chief Executive as the Responsible Person [Water]. This Policy is issued and maintained by the Responsible Person [Water] on behalf of Trust.
- 1.6 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.
- 1.7 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 and visitors [Trust owned and occupied, including those properties which Trust may occupy under lease].
- 1.8 The management of water safety will be a continual commitment by Trust involving regular Water Safety Group (WSG) meetings, and a commitment to a risk assessment programme.
- 1.9 Water Safety for the Trust shall be supported with adequate resources and suitably qualified, trained and competent staff to ensure the successful implementation of Water Safety Plan [WSP].

2.0 Introduction

- 2.1 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 bacteria of a respirable size.
- 2.2 Legionella bacteria are likely to be present in domestic 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 within the systems' remains stagnant (i.e. in 'dead legs' or when the system or outlets are not in use for a period of time) and bio-film can develop within the distribution pipework. This bio-film provides nutrients, protection from temperature and biocides and encourages proliferation of the bacteria. Legionella proliferation is primarily suppressed by controlling the water temperature, by ensuring the system and its components remain clean and by ensuring the flow of water through the system is consistent.
- 2.3 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.
- 2.4 HTM 04-01 Safe Water In Healthcare Premises provides advice and guidance regarding the installation and management of water systems within the NHS, however it must be recognised that the Yorkshire Ambulance Trust estate is not typical of other healthcare estates in that its properties are not visited or occupied 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

- 3.1.1 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
- 3.1.2 To set out a clear framework to protect all staff, patients and visitors by minimisation of the risks associated with legionellosis
- 3.1.3 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
- 3.1.4 To enable staff to understand their responsibilities in relation to this Policy document and associated WSP documentation
- 3.1.5 To detail arrangements for ensuring this Policy is monitored and reviewed to reflect current legislation and guidance
- 3.1.6 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.

- 3.1.7 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

- 3.2.1 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.
- 3.2.2 The Policy applies to all service users, visitors and staff associated with the Trust [including premises where they work that are owned and occupied, including those properties which the Trust may occupy under lease] and should be read and implemented whenever water related risk management advice is required.

3.3 Water Safety Plan [WSP]

- 3.3.1 A WSP has been defined by British Standards in their BS8680 document as:

“A strategic plan which defines and documents the arrangements that are required for the safe use and management of all water systems together with all associated systems and equipment, within each building or estate to prevent harm arising from all forms of exposure.”

- 3.3.2 A WSP is made up of a suite of documents, a model of which is available on the Trust Intranet. This governance Policy is the management element of the WSP,

4.0 Roles and Responsibilities

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 reasonably 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 Facilities Management.

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 Quality, Governance and Performance Assurance may also be involved in strategic risk management of Legionellosis where required.

Designated Person

The Assoc. Director of Fleet, Estates & Facilities is the Designated Person.

They are appointed in writing by the Duty Holder.

The DP will provide the informed position at board level. They are responsible for the organisational arrangements [strategic leadership, direction and overview] which will ensure that compliance with regulatory standards is achieved [including proposed developments that take account of impact on water safety]. Any management issues [including water system issues] are to be reported to the Board having been resourced and solved. Whilst they will not have technical or operational duties, they will be supported in the role by a Trust management structure that delivers governance, assurance and compliance.

The Trust may consider that there are advantages in having the Water Safety Group chaired by the Designated Person, having executive responsibilities and the ability to exchange information to and from Board level, while ensuring that all disciplines (beyond Estates/Facilities dept. functions) fulfil their particular responsibilities (such as flushing and cleaning procedures).

Responsible Person [Water]

The Head of Facilities Management is the Responsible Person [Water] [RP [W]]. They are appointed in writing by the DP.

To facilitate their role, the RP[W] will be required to liaise closely with other professionals in various disciplines. The RP[W] will be supported by the Designated Person [DP], the Authorised Person(s) [Water] i.e. Facilities Managers, the Authorising Engineer [Water] and the Infection Prevention and Control Lead amongst others, to ensure suitable provision to maintain the service.

The RP [Water] 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 Water Safety 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.

Water Safety Group

The WSG is a multidisciplinary group formed to oversee the commissioning, development, implementation and review of the WSP. The aim of the WSG is to ensure the safety of all water used by staff and visitors, to minimise the risk of infection associated with waterborne pathogens. It provides a forum in which people with a range of competencies can be 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.

Authorised Person [Water]

The Facilities Managers are the Authorised Person[s] [Water]. They will be appointed by the RP. The AP's[W] will deputise in the absence of the RP[W] 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[s] will be supported by the Facilities Officers and the Authorised Engineer [Water] as well as other professionals.

The Facilities Manager[s] shall:

- Attend the WSG meetings;
- Be responsible for the development and implementation of the WSP parts 3-6
- Inform the RP[W], the Infection Prevention and Control Lead and Consultant Microbiologist, and Authorising Engineer [Water] of all positive water sample results and the associated action being taken to resolve them;
- Co-ordinate with Competent Persons / Appointed maintenance contractor, Infection Prevention and Control Lead and the Authorising Engineer [Water] for help, advice and in response to any investigation arising for non-compliant issues;
- Review risk assessments and commission additional assessments, including any additional surveys in response to risk assessment recommendations, sampling issues [positive results] or other observed faults/conditions reported;

- Implement the agreed risk minimisation schemes/action plans and update the WSG on status of completion;
- Ensure drawings/plans/schematics are maintained, updated, produced of all Trust water systems/buildings where a change has occurred;
- Issue of works orders/requisitions for remedial works to relevant approved contractor/s and / or consultants;
- Assist/manage refurbishment works [major or minor] outside the scope of Capital Projects in accordance with the WSP;
- Ensuring contractor PPMs undertaken etc Review and maintain the Planned Preventative Maintenance [PPM] schedules to ensure they include all risk systems/asset types [identified from risk assessments] and have been correctly defined in the WSP;
- Ensure that any non-compliant occurrences/issues reported are actioned in accordance with the WSP with evidence of actions taken;
- Ensure that Incident reporting is completed in full and using DATIX as necessary;
- Complete verification audits on system performance monitoring records, to provide quarterly assurance to the WSG on the level of performance of the control strategies;
- Assist with annual management audits completed by the Authorising Engineer [Water];
- Ensure the Trust records management system is operational and systematically maintained;
- Carry out the necessary actions defined in the WSP should an outbreak situation associated with waterborne pathogens be suspected or confirmed;
- Ensure that Competent Person[s] [Water] remain suitably trained and validated;
- Ensure the external consultants and contractors are suitably qualified and competent [as defined in 'Competence']. Evidence shall be held in the form of training and qualifications for staff [applicable to the services they are undertaking] and ideally membership to Water Safe and Legionella Control Association [LCA] for companies;
- Liaise with the water undertaker and ensure that all 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/Managers 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 Head of Safety/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 waterborne pathogens;
- Attend updated management training as determined by the training needs analysis.
- Will advise if circumstances change within any properties that might affect legionellosis risk;
- Attend the Water Safety Group [WSG] meetings;
- Provide microbiological support with sample results;
- Advise if circumstances change within any department/area that might affect waterborne pathogen proliferation;

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 Water Safety Group [WSG];
- Deliver training based on training needs analysis.

Compliance Officer

The Compliance Officer shall:

- Attend the WSG meetings;
- Review and identify changes needed to applicable sections of the WSP;
- Assist with management audits and records verifications;
- Ensure records management system is maintained, complete and operational;
- Review and maintain the Planned Preventative Maintenance [PPM] schedules to ensure they are correctly defined;
- Attend updated management training at least every three years, or sooner if determined by the training needs analysis;
- Ensure evidence of 3rd party compliance is obtained and reviewed accordingly.

Health & Safety Manager

The Health & Safety Manager shall:

- Attend the WSG meetings;
- Review and identify changes needed to applicable sections of the WSP;
- Ensure their team follows this governance Policy;
- Lead the reporting of incidents to the HSE and act as key liaison with the HSE during any visits;
- Attend updated management training at least every three years, or sooner if determined by the training needs analysis.

Head of Property & Projects

The Head of Capital Projects reports directly to Designated Person.

The Head of Capital Projects shall:

- Attend the WSG and inform the group members at the earliest possible opportunity, where new premises or existing premises are to be altered or refurbished so water hygiene requirements can be assessed in the planning stages by the WSG;
- Ensure the external consultants and contractors are suitably qualified, trained and competent before the commencement of any project. Evidence shall be held in the form of training and qualifications for staff [applicable to the services they are undertaking] and membership to WaterSafe and Legionella Control Association [LCA] for companies;
- Ensure all projects involve the retention of designers, consultants and contractors' post-handover with a 'soft landings' arrangements. This will allow

any defects or performance issues to be investigated and resolved, thereby ensuring these situations can aid and improve future designs;

- Ensure risk assessments are undertaken at each stage of a project and are presented to the WSG for review. As a minimum, they shall be completed for all projects before commencement and once the system is operational;
- Manage those Project Managers from the Capital Projects Team who are leading on refurbishment works [major or minor] or new development works to ensure they are completed in accordance with the WSP;
- Ensure their team follows all applicable sections of the WSP;
- Ensure that the design of new and refurbished water systems follows the latest regulations, standards, guidance and Trust WSP;
- Ensure all commissioning, handover records, O&M manuals, risk assessments including evidenced records are received on completion of a project;
- Immediately investigate any reported defects, suspicions or concerns regarding the design, condition, operation or performance of water systems that might increase the risk of waterborne pathogen proliferation. These shall also be reported to the RP[W];
- Inform the RP[W], IPCL, AE[W], AP[W] of all positive water sample results and the associated action being taken to resolve identified defects;
- Be responsible for ensuring the design requirements of the project are met;
- Be responsible for leading on the explanation to users on the function of installed water risk systems and organise adequate information and training to support those systems;
- Routinely review the training needs analysis of the Capital Project Team, and ensure suitable training is being delivered where required;
- Receive updated training on the WSP and the latest guidance at least every three years or sooner as determined by the training needs analysis.

Ancillary Services Manager

The Ancillary Services Manager reports directly to AVP & Ancillary Manager

The Fleet Ancillary Services Manager shall:

- Attend the WSG meetings;
- Ensure their teams follow the applicable sections of the WSP;
- Ensure the daily running of outlets as part of the cleaning process, this operation assists with water use and turnover;
- Report any outlets which cannot be accessed, or closed off areas, to the AP[W]'s;
- Ensure the collation of flushing regime records and ensure these records have been scanned and saved to the Trust's document management system;
- Report any defects, suspicions or concerns regarding the design, condition, operation or performance of water systems that might increase the risk waterborne pathogen proliferation to the RP[W];

- Ensure members of their team are aware of good personal hygiene [including clothing and footwear] practices and the need to report any recent communicable illness;
- Routinely review the training needs analysis for the Ancillary Services Team, and ensure suitable training is being delivered where required;
- Receive updated training in the WSP and the latest guidance at least every three years or sooner as determined by the training needs analysis.

Ancillary Services Team

It is expected that the Ancillary Services Team will complete daily cleaning of outlets in accordance with of the National Cleaning Standards. This daily operation assists with water use and turnover. Staff will also assist with the flushing of known little used outlets and be appropriately trained in the tasks they undertake.

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 from Legionella and other waterborne pathogens. 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

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

5.2 Any abnormal test results are notified to the Facilities Managers immediately.

6.0 Control Methods

6.1 The Trust has adopted Control Methods to reduce the proliferation of Legionella and other waterborne pathogens 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.

- 7.1 In the event of a suspected outbreak or incident of Legionellosis an incident report will be submitted on Datix.
- 7.2 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 the Incident Control Team (ICT).

- 7.3 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.
- 7.4 Legionnaires' 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).
- 7.5 The Health and Safety Executive [HSE] and or the Care Quality Commission [CQC] may be involved in the investigation of an outbreak.
- 7.6 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

- 8.1 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

- 9.1 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.'
- 9.2 Support and advice to assist in the implementation of this document is available from the:
 - Responsible Person [Water]
 - Authorised Persons [Water]
 - Authorising Engineer [Water].

10.0 Development process

10.1 Identification of need

- 10.1.1 To meet the requirements of ACoP L8 and associated guidance documents, this Policy and the associated WSP.
- 10.1.2 Consultation and Communication with Stakeholders
- 10.1.3 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 Lead;
 - Authorised Engineer (Water)

11.0 Dissemination

- 11.1 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].

12.0 Process for monitoring compliance and effectiveness with this policy

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

12.1 Effectiveness

12.1.1 The effectiveness of compliance is detailed at the Compliance & Risk Working Group meetings. The WSP is based on external standards [see section 18 References].

13.0 Management plan

13.1 Water Safety Group (WSG)

13.1.1 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 Ware Safety Group [WSG] and Water Safety Plan [WSP].

13.1.2 The aim of the WSG 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.

13.1.3 The WSG 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 WSG 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.

13.2 The WSG 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 WSG. 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]

13.3 The ToR defines:

- The purpose of the WSG;
- Membership of the WSG;
- Frequency of meetings, Quorate arrangements along with agenda;
- Objective of the WSG;
- Reporting arrangements.

13.4 The WSG has clearly identified lines of accountability / communication pathways up to the CEO and board. The roles and responsibilities of these members are defined within this Policy. Only members of the WSG shall receive meeting invitations, unless they are unable to attend when it is expected they will inform the Chair person and

detail a nominated deputy to attend the WSG in their place.

14.0 Auditing

- 14.1 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.
- 14.2 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.
- 14.3 An annual water risk management audit is undertaken by 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.
- 14.4 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.

15.0 Risk Assessments & Drawings.

15.1 Water Risk Assessments

- 15.1.1 The Head of Facilities Management 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:

- ACOP L8 [fourth edition] 2013;
- HSG274 [Parts 2 & 3] [as applicable];
- BS8580:2019.
- HGN "Safe" Hot water and Surface Temperatures';

The Trust requires the risk assessment to be completed by a competent person, the Head of Facilities Management 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.

- 15.1.2 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.).

15.1.3 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.

15.1.4 The assessment of risk is an ongoing process, and as such the Head of Facilities Management 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.

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

15.1.6 The Head of Facilities Management will communicate the latest risk assessment report and minimisation scheme actions at the WSG. The W

15.1.7 SG will consider the overall recommendations in context of Trust Risk Register

15.1.8 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

15.2 Drawings

15.2.1 As-fitted drawings shall identify all key components in the installation, i.e. water meters, cisterns, filters, calorifiers, water heaters, and isolation valves. These drawings should be kept up to date, where possible. 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.

15.2.2 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.

15.3 Risk Minimisation Scheme

15.3.1 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 WSG.

16.0 Training & Competence

16.1 Training

- 16.1.1 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.
- 16.1.2 The 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.
- 16.1.3 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.
- 16.1.4 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.
- 16.1.5 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.
- 16.1.6 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 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;

16.2 Competence

- 16.2.1 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.
- 16.2.2 Employing contractors or consultants does not absolve Trust Duty holders 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.
- 16.2.3 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.
- 16.2.4 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.
- 16.2.5 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.
- 16.2.6 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.
- 16.2.7 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 [authorized through the Water Supply (Water Fittings) Regulations 1999].
- 16.2.8 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 defense for property owners who are challenged by a water undertaker enforcing the Water Supply (Water Fittings) Regulations 1999 or during legal proceedings.

17.0 Record Keeping

- 17.1 All records shall be readily available on site, in an appropriate format, for use by any member of the WSG or outside organisations. Electronic data management tools may be utilised to facilitate the intelligent use of data for the WSG to easily monitor trends and analyze chemical and microbiological parameters.
- 17.2 Records should be kept for at least five years.

- 17.3 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.
- 17.4 Any commissioning data should also be kept with these manuals.
- 17.5 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.

18.0 **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