Water Management Policy

Policy for the Safe and Compliant Management and ‘Safe Operation’ of Water Systems & Other Micro-biological Associated Risk

<table>
<thead>
<tr>
<th>Author:</th>
<th>Head of Technical Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsible Lead Executive Director:</td>
<td>Director, Planning, Property and Performance</td>
</tr>
<tr>
<td>Endorsing Body:</td>
<td>NHSL Infection Control Committee (LICC)</td>
</tr>
<tr>
<td>Implementation Date:</td>
<td>June 2019</td>
</tr>
<tr>
<td>Version Number:</td>
<td>4</td>
</tr>
<tr>
<td>Review Date:</td>
<td>June 2021</td>
</tr>
<tr>
<td>Designated Person</td>
<td>Director PSSD</td>
</tr>
</tbody>
</table>
CONTENTS
i) Consultation and Distribution Record 3
ii) Change Record 4
1 Introduction 5
2. Aims, Purpose and Outcomes 5
2.1 Aims 5
2.2 Purpose 5
3. Scope 6
3.1 Who is the Policy intended to Benefit or Affect 6
3.2 Who are the Stakeholders 6
4. Principal Content 6
4.1 Background 6
4.1.1 Legionella 6
4.1.2 Other Waterborne Pathogens 7
4.1.3 Safe Hot Water Temperatures 7
4.2 Policy Statement 8
4.3 Objectives 8
4.4 Assessment of Risk 9
4.5 Risk Control Measures 9
4.6 Training and Competence 9
4.7 Record Management 9
4.8 Reporting Structure 10
4.9 Suspected Outbreak 10
4.10 Policy Development & Consultation 10
4.11 Implementation 10
5. Roles and Responsibilities 11
5.1 Accountabilities and Responsibilities 11
5.1.1 The Chief Executive (Duty Holder) 11
5.1.2 The Executive Director (Deputy Duty Holder) 11
5.1.3 The Director PSSD (Designated Person) 11
5.1.4 The Deputy Director PSSD (Operations) (Responsible Person) 11
5.1.5 The Authorising Engineer (Water) 11
5.1.6 The Head of Maintenance (Deputy Responsible Person) (Water) 11
5.1.7 Lead Infection Control Doctor 12
5.1.8 Maintenance Manager (Authorised Person) (Water) 12
6. Resource Implications 12
7. Communication Plan 12
Extended by Corporate Policies team until June 2022 – COVID 19

Water Management Policy

CONTENTS

8. Quality Improvement – Monitoring and Review 12
   8.1 Monitoring 12
   8.2 Audit 13
   8.3 Review 13


10. Summary or Frequently Asked Questions (FAQs) 13

11. References 14

Appendix 1 Management and appointments Structure for the Management of Water Systems 15
Appendix 2 Escalation and Communication Structure for the Identification of a Potential Hazard 16
Appendix 3 Clinical and Corporate Governance 17

CONSULTATION AND DISTRIBUTION RECORD

Contributing Author: Head of Technical Services

Consultation Process / Stakeholders:

- Executive Director, Planning, Property and Performance Deputy Duty Holder Water Safety
- Executive Director of NMAHPs
- Medical Director
- Lanarkshire Infection Control Committee (LICC)
- Lanarkshire Water Safety Group (WSG)
- Decontamination Environmental Monitoring Group (DEMG)
- Infection Control Doctor
- Health & Safety SALUS
- Authorising Engineer (Water)
- Head of Infection Prevention and Control (IPC)
- Director of PSSD (Designated Person)
- Deputy Director PSSD (Operations) (Responsible Person Water)
- Deputy Director PSSD (Projects & Assurance)
- Head of Maintenance Services (Deputy Responsible Person Water)
- Consultant Public Health Medicine (CPHM)

Distribution:

- General Managers
- Operational Managers
- All staff through FirstPort – NHSL Web Portal
## CHANGE RECORD

<table>
<thead>
<tr>
<th>Date</th>
<th>Author</th>
<th>Change</th>
<th>Version No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>20/10/15</td>
<td>Head of Technical Services</td>
<td>Changed Review Date on Title page and Section 10.3 Review</td>
<td>2</td>
</tr>
<tr>
<td>20/10/15</td>
<td>Head of Technical Services</td>
<td>Appendix 2- Escalation and Communication Structure for the Identification of a Potential Hazard. Added Assistant Maintenance Manager to structure.</td>
<td>2</td>
</tr>
<tr>
<td>20/10/15</td>
<td>Head of Technical Services</td>
<td>Appendix 1-Management and Appointment Structure for the Management of Water Systems. Added Assistant Maintenance Manager to structure.</td>
<td>2</td>
</tr>
<tr>
<td>24/06/17</td>
<td>Head of Technical Services</td>
<td>Updated Title page, Sect 2 Purpose &amp; Aims, Sect 3 Scope, Sect 4.2 Other Waterborne Pathogens, Sect 5 Accountabilities &amp; Responsibilities (Job Titles) Section 6 The Policy Sect 6.1 Inserted word “Contractor”, Sect 6.2 removed phrase “hot and cold” Sect 6.4 Updated Risk Control Measures Sect 6.5 Inserted word “will”</td>
<td>3</td>
</tr>
<tr>
<td>24/06/17</td>
<td>Head of Technical Services</td>
<td>Sect 7 Policy Development &amp; Consultation updated Job Titles</td>
<td>3</td>
</tr>
<tr>
<td>24/06/17</td>
<td>Head of Technical Services</td>
<td>Sect 10 Assurance and Compliance updated</td>
<td>3</td>
</tr>
<tr>
<td>24/06/17</td>
<td>Head of Technical Services</td>
<td>Removed Term of Reference from the Policy, this will maintained separately</td>
<td>3</td>
</tr>
<tr>
<td>30/05/18</td>
<td>Risk Department</td>
<td>GDPR statement added into section 3 and updated name of Current Data Protection legislation Act</td>
<td>3</td>
</tr>
<tr>
<td>07/05/19</td>
<td>Head of Technical Services</td>
<td>Updated Title page, Sect 2.1 Aims inserted words contaminants and systems; Sect 2.2 Purpose inserted sentence “control of legionella and other microorganisms in water systems” Sect 3.2 inserted “contractors” Updated Sect 4.1.3 inserted Hot water temperatures above 60°C are required to reduce the opportunity for the growth of Legionella and other microorganisms.” And inserted “where required hot water outlets will be protected by a Type 3” and TMV/TMT. Updated Sect 6 Resource Implications and Sect 9 EDIA</td>
<td>4</td>
</tr>
<tr>
<td>28/05/2020</td>
<td>K. Torrance</td>
<td>Extended until June 2022 (COVID-19)</td>
<td>4</td>
</tr>
</tbody>
</table>
1. Introduction

The development, construction, installation and maintenance of hot and cold water supply systems are vital for public health. Healthcare premises are dependent upon water to maintain hygiene and a comfortable environment for patients and staff, and for clinical and surgical care.

This policy gives guidance to NHS Lanarkshire (NHSL) management, maintenance managers, operational managers and service managers and operational staff on the legal requirements, design applications, maintenance and operation of hot and cold water supply, storage and distribution systems in all types of healthcare premises. It is equally applicable to both new and existing sites and is a source of reference for design teams and consultants.

2. Aims, Purpose and Outcomes

2.1. Aims

The aim of this policy is to, where possible, promote conditions which remove or control all potential sources of seeding, growth and spread of legionella bacteria and other microbiological contaminants in the water distribution systems and supply. Where this cannot be reasonably achieved, steps will be taken to reduce the risk to the lowest practicable level.

This will achieved by utilising a risk assessment process and from this, defining the appropriate control measures that should be implemented. Finally, the effectiveness of these control measures will be checked and recorded.

This policy therefore:

a. Describes the general management, organisation and arrangements required to enable the safe design, installation, maintenance and operation of watersupplys;

b. highlights the safe use of water quality controls;

c. provides guidance on the implementation of these arrangements to enable compliance with SHTM 04-01, L8 and HSG 274 parts 2 and 3 documents;

d. ensure the proper care and maintenance of the NHSL water supply services, in the interest of patients, visitors, employees, and other persons who may be affected.

2.2. Purpose

The implementation and monitoring of this policy will ensure that the NHSL water and air management systems protect patients, visitors, staff and the local community from exposure to risk. The key objectives of this policy are to:

□ Identify and appoint responsible officers for the control of Legionella and the management of water systems;

□ describe the duties / responsibilities of all NHS Lanarkshire staff;

□ describe the process for Legionella risk assessments;

□ define specific operational procedures ensuring the integrity of water and air management systems;

□ describe the risk reduction programme;

□ establish the specification for the design of new facilities, refurbishments and service or environmental modifications and adjustments;
3. Scope

The Healthcare Quality Assurance and Improvement Committee (HQAIC) retain overall corporate management responsibility for the Control of Legionella within NHSL and this policy document, the vehicle through which this is implemented, is managed and maintained on their behalf by the Water Safety Group.

This Policy applies to all NHSL premises and to all employees and contractors involved in the management, design, upgrading, refurbishment, extension and maintenance of the water systems and associated plant, equipment and drainage, where water may present a risk from legionella bacteria, or other water-borne pathogens. The Property and Support Services Division (PSSD) has the operational responsibility for the management and maintenance of the water distribution and supply systems within the NHSL.

The policy extends to any NHSL work activity or premises where water is used or where there is a means of creating and transmitting water aerosols which may be inhaled, thereby creating a reasonably foreseeable risk of exposure to legionella and other elements (bacteria).

3.1. Who is the Policy intended to Benefit or Affect?

NHSL staff, patients, visitors and the local community

3.2. Who are the Stakeholders?

NHSL staff, service users, carers, contractors and partner agencies

“NHS Lanarkshire take care to ensure your personal information is only accessible to authorised people. Our staff have a legal and contractual duty to keep personal health information secure, and confidential. In order to find out more about Data Protection legislation and how we process your information, please visit the Data Protection legislation Notice on our website at www.nhslanarkshire.scot.nhs.uk or ask a member of staff for a copy of our current Data Protection legislation Notice.”

4. Principal Content

4.1. Background

4.1.1. Legionella

Duties relating to risk assessment fall under the Health and Safety at Work Act 1974 (HSW Act) and the Management of Health and Safety at Work Regulations and extend to risks from Legionella as a result of work activities. In addition, all harmful microorganisms are subject to the Control of Substances Hazardous to Health Regulations (COSHH), and accordingly, require an assessment, to prevent, or adequately control exposure under these regulations should be completed.

More specifically the COSHH Regulations provide a framework of actions designed to control the risk from a range of hazardous substances including biological agents. The essential elements of COSHH are:

a) risk assessment and reassessment where conditions are known to change;

b) prevention of exposure or substitution with a less hazardous substance if this is possible, or substitution of a process or method with a less hazardous one;
c) control of exposure where prevention or substitution is not reasonably practicable;

d) maintenance, examination and testing of control measures, e.g. automatic dosing equipment for delivery of biocides and other treatment chemicals;

e) provision of information, instruction and training for employees; and

f) persons who work in an environment controlled by an air conditioning system or in premises served by a hot and cold water system

g) persons who might be exposed to aerosols which might contain viable organisms e.g. showers; and

h) keep appropriate records.

Further duties and responsibilities fall under the Safety Representatives and Safety Committees Regulations, the Health and Safety (Consultation with Employees) Regulations and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). Also The Control of Legionella Bacteria in Water Systems (L8), approved code of practice (ACOP) along with the associated guidance documents: HSG 274 parts 2 and 3 provides a basic framework for preventing further outbreaks of the disease, giving advice on the requirements of HSW Act.

It places responsibility on employers and others to:

□ Identify and assess risks of Legionellosis;

□ avoid the use of systems that give rise to a reasonably foreseeable risk of legionellosis or where this is not reasonably practicable;

□ implement and manage the scheme of precautions including the appointment of a person, or persons, to take managerial responsibility and to provide supervision; and

□ keep appropriate records.

4.1.2. Other Waterborne Pathogens

Other waterborne pathogens such as Pseudomonas aeruginosa, where the risk has been identified, require to be managed in line with SHTM 04-01, the Critical Control Points identified by Health Protection Scotland in CEL08 (2013). This will also apply to areas identified by the NHS Lanarkshire Consultant Microbiologist. These areas and associated precautions must be written into local Maintenance/Hotel Services Management procedures.

4.1.3. Safe Hot Water Temperatures

Hot water temperatures above 60°C are required to reduce the opportunity for the growth of Legionella and other microorganisms. It is therefore essential to maintain this temperature within the hot water circulating system.

High water temperatures present a scalding risk to all service users. Those with increased risk from scalding/burning include:

□ Children, the elderly;

those with

□ mental illness;

□ learning disability;

□ reduced mobility;

□ visually impaired;

□ reduced sensitivity to temperature; and those

□ who cannot react appropriately, or quickly enough, to prevent injury.
The people listed above may be in hospitals, care homes and social services premises (i.e. health and social care establishments). The risk of scalding/burning should be assessed in all healthcare premises. NHSL considers where required hot water outlets will be protected by a Type 3 (D08 NHS Model Specification Thermostatic Mixing Valve (TMV/TMT)), where reasonably practicable except in areas deemed to require higher temperatures e.g. restricted utility areas.

The Thermostatic Mixing Valve (TMV) and Thermostatic Mixing Tap (TMT) will be maintained, serviced and tested in accordance with the manufacturer’s instructions and the code of practice. Comprehensive records of installation, commissioning and servicing will be kept to ensure all data is available for future reference.

4.2. Policy Statement

NHSL recognises a duty to take all reasonable measures necessary to prevent the exposure of patients, visitors, staff and the local community to risks associated with the operation of water system and or air handling systems.

4.3. Objectives

To provide guidance to ensure that all appropriate steps are taken to comply with the duty to manage all NHSL water systems in compliance with legislative approved codes of practice, guidance and relevant standards.

To ensure procedures are implemented that provide safe, reliable hot and cold water supply, storage and distribution systems.

To prevent exposure by identifying conditions within the water systems that encourage proliferation of bacteria and where exposure to sprays or fine droplets of water may be present.

To have systems in place to assess, manage, monitor, review and document all potential hazards related to water systems as part of a robust management system.

Ensuring the Chief Executive (The Duty Holder) is aware of the policy and is familiar with the devolved responsibilities, duties and relevant procedures.

4.4. Assessment of Risk

The risk associated with Legionella is included and defined within the Maintenance Services Department Risk Register and a site wide Legionella risk assessment is commissioned every two years. The assessment grades water systems as part of a risk based methodology and any risks identified in the assessment will be communicated and / or managed by the Maintenance Services Department as part of an on-going improvement action plan.

The assessment will include:

- the identification, location and condition of all water systems highlighting issues that may present a hazard;
- the potential for aerosols to be produced;
- water temperature observations highlighting readings which may cause proliferation of bacterial growth;
- operational characteristics which may lead to increased risk;
- the effectiveness of the current risk reduction procedures;
- the competency of staff involved in the risk reduction process including identification of any training requirements;
- details of the management personnel who play an active role in the risk reduction process; and
identification of the roles and responsibilities of all of those included in the risk reduction process.

The potential risk associated with new developments, refurbishments and service reconfiguration will be considered and addressed by design / planning leads in consultation with the Responsible Person (Water).

Departmental managers must use the Computer Aid Facilities Management (CAFM) system to inform the Maintenance Services Department when water services are infrequently or no longer used and where changes or adaptations to water services, fixtures and fittings are required. The Maintenance Services Department will assess the associated risks and implement the necessary control measures to manage the identified risks.

4.5. Risk Control Measures

Risk control measures will be documented in the Water Management Regime maintained by the Maintenance Services Department. The Water Management Regime identifies specific water management tasks to be completed on associated equipment. The schedule of work, identification of who is responsible for carrying out the various tasks and frequency rates of the specific water management tasks are pre-set and are automatically generated by the PSSD Computer Aid Facilities Management system (CAFM).

The Responsible Person (Water) or Deputy will appoint after assessment by the Authorising Engineer (Water) the Authorised Persons – Legionella and their Deputy. The appointments will be confirmed in writing.

The Authorised Persons will manage the delivery of the tasks and duties described within the Water Management Procedures and will maintain accurate and comprehensive records of all work undertaken whilst managing water systems. Any identified risks will be immediately reported back to the Responsible Person (Water) and the manager responsible for Infection Prevention and Control.

4.6. Training and Competence

Training will be supplied by an approved accredited supplier. Additionally the Authorising Engineer (Water) support and advise on the training within NHSL.

The training provided and any competency assessment will reflect the level of responsibility and involvement with Legionella risk assessments, risk prevention and day to day management of water systems. Staff training and competency records are kept and updated as part of NHSL policy.

4.7. Record Management

Identified risks are logged and managed as part of the Maintenance Services risk management process in line with the procedures set out by the NHSL Risk Management.

External assessment reports and associated documents are maintained by the Maintenance Services Department. All recommendations are reviewed and assessed for the purpose of implementation.

Work completed by maintenance staff is recorded on the CAFM system and descriptions of tasks are contained within the Preventative Planned Maintenance procedures and scheduling regime. Records should be kept for at least five years.

Work completed on the water system by maintenance staff, and/or NHSL contractors in accordance with the Water Supply (Water Fittings) Regulations will
be fully documented by the person completing the work. These records must then be given to the Authorised Person.

4.8. Reporting Structures

The required management structure and the necessary appointments to support the communication route and management of the NHSL Water Systems are shown in Appendix 1.

In the event of an identified potential hazard there is a defined NHSL structure to ensure that the relevant departments can effectively investigate and manage the situation. The communication links within the structure are shown in Appendix 2.

The continuous monitoring of the effectiveness of policy and the management procedures for the management of water systems is assessed by the NHSL Water Safety Group. The reporting structure to Clinical and Corporate Governance is shown in Appendix 3.

PFI/Hubeo communication and reporting involves the Special Purposes Vehicle (SPV) and the FM Provider, this is defined and lined in red within Appendix 2.

4.9. Suspected Legionella Outbreak

Confirmed and suspected cases of legionnaire’s disease possibly acquired in healthcare premises will be managed in line with the National Infection Prevention and Control Manual and investigated by the specifically set up problem assessment group (PAG) who will identify and facilitate the remedy of the potential source(s) of infection.

Suspicion of nosocomial legionnaires’ disease will trigger investigation by the Incident Management Team (IMT) and will be reported urgently and in the first instance to the Infection Control Doctor (ICD) during working hours or Consultant Microbiologist on call who will inform the duty CPHM.

Subsequent investigations will be carried out by the NHS Lanarkshire IMT coordinated by the Infection Control Doctor (ICD)/ Consultant in Public Health Medicine (CPHM).

4.10. Policy Development & Consultation

Development of the policy has been undertaken by the General Manager Property and Support Services Division in consultation with the Head of Infection Prevention and Control, Senior Infection Control Nurse/Infection Control Doctor (ICD), Consultant in Public Health Medicine (CPHM) and Lanarkshire Infection Control Committee.

4.11. Implementation

Following endorsement by Lanarkshire Infection Control Committee (LICC) the policy will be displayed on the NHSL’s intranet (Firstport). The raising of Policy awareness will be carried out via induction and mandatory training, Risk Management, Occupational Health & Safety, Divisional Management Team.
5. Roles and Responsibilities

All NHSL staff, suppliers and contractors who have any involvement in the use, supply or servicing of the water systems have a responsibility for complying with the organisation’s arrangements for safe water management, including the implementation of local management controls. In order to comply with this policy, all staff, suppliers and contractors must be aware of the lines of communication and levels of responsibility, which exist to ensure that all matters of safe water management are dealt with effectively.

5.1. Accountabilities and Responsibilities

5.1.1. The Chief Executive (Duty Holder) is responsible for the NHSL wide implementation of this policy, ensuring that sufficient resources are available to maintain and manage the safe operation of the NHSL water systems.

The Chief Executive shall delegate the responsibility for the overseeing the safe operation of the water systems to the Executive Director Strategic Planning & Performance (Deputy Duty Holder).

5.1.2. The Executive Director (Deputy Duty Holder); Director of Planning, Property and Performance is responsible on behalf of the Duty Holder, for overseeing the safe operation and management of the water systems and setting the strategic direction of the NHSL Board to ensure compliance with legislation and mandate.

5.1.3. The Director PSSD (Designated Person) will on behalf of the Duty Holder manage the operational areas of the safe operation and management of the water systems, chairing the Water Safety Group and directing the strategic requirements defined by the Duty Holders.

5.1.4. The Deputy Director PSSD (Operations) (Responsible Person) will be appointed as the Responsible Person Water by the Designated Person. This person has the day-to-day responsibility for controlling and managing any identified risk associated with the safe operation and management of the water systems and is the operational lead of the Water Safety Group.

5.1.5. The Authorising Engineer (Water) will be appointed by the Director PSSD (Designated Person Water). This person will acts as an independent professional advisor to the NHSL Board, to ensure that the organisation provides a safe operation and manages the services in accordance with the ACOP L8, HSG 274 parts 2 and 3 and the appropriate SHTM guidance and other Legislative/SGHD publications.

The Authorising Engineer (Water) acts as an assessor, making recommendations to the Duty Holder on the appointment of the Designated Person, Responsible Person, Deputy Responsible Person, Authorised Persons and Competent Persons, liaising with the Designated Person. Additionally the Authorising Engineer (Water) may attend where required the NHSL Water Safety Group meetings, and will monitor the performance of the service and provide an annual report to the NHS Board’s Designated Person.

5.1.6. The Head of Maintenance Services, Deputy Responsible Person (Water) will be appointed by the Responsible Person. This role will manage day-to-day maintenance operations, liaising with other services in areas such as HAI-Scribe, minor and major works and planned/reactive and corrective maintenance.
5.1.7. Lead Infection Control Doctor is a member of both the Water Safety Group and Lanarkshire Infection Control Committee (LICC). The Doctor will advise on related infection control policy and water quality issues.

All policies written by the Water Safety Group must be endorsed by the LICC.

5.1.8. Maintenance Manager Authorised Person (Water) reporting to the Responsible Person (Water) as well as being responsible for the day to day safe operation and management of the water systems within his area, this individual is appointed in writing as the single person with sole responsibility for the Written Schemes (Operational Maintenance Plans) for the individual water systems under his/her control.

Directors, General Managers, Head of Localities, Clinical Managers, Maintenance and Domestic Managers and other assigned persons are responsible for the implementation of this policy and procedure within their respective sites. They must inform the Director for PSSD and Deputy Director PSSD (Operations) (Responsible Person Water) / Head of Maintenance (Deputy Responsible Person Water) of any suspected breach of this policy and complete an incident report. Appendix 1 refers to the structure and persons involved in the implementation and operation of this policy.

All personnel involved in commissioning new buildings, major refurbishment, upgrades, department closures or re-commissioning which involves the introduction of new water services, disruption and cutting into water services must fully comply with this policy at all stages of the project/contract.

6. Resource Implications

This policy is primarily related to the maintenance, management and the safe operation of the NHSL water systems. Failure to meet regulatory standards could lead to imposition of financial penalties, patient harm and reputational damage.

7. Communication Plan

The policy will be communicated as follows:

- The interpreting and translating page on Firstport
- This Policy will be launched using the weekly staff briefing and will be a standing agenda item at all LICC and Water Safety Group meetings
- This policy will also be discussed at the appropriate management team meetings and local partnership forum
- Regular reminders in the staff briefing and toolbox talks
- All Senior managers will be briefed on the policy

8. Quality Improvement – Monitoring and Review

8.1. Monitoring

Arrangements for monitoring the effectiveness of this policy and compliance with SHTM 04-01, ACOP L8 and HSG 274 parts 2 and 3 for each site shall be put into place by the Deputy Responsible Person/Heads of Maintenance Services.

Where monitoring identifies deficiencies, recommendations and action plans will be developed and any required changes implemented accordingly. The results of each monitoring exercise and progress on these actions will be reported to the Water Management Safety Group.
Water Management Policy

To ensure the water management policy is being applied appropriately the water management regime is reviewed and monitored operationally by the SCART Manager. Checks will be carried out by;

- Compliance audits of documentation maintained by the Authorised Person;
- compliance audits to ensure water outlets are as described in the water management procedures;
- checks to ensure that the monthly reports are being used to inform Maintenance Services when services are underutilised, relocated, altered or discontinued; and
- Reviews carried out on regular basis by the Authorised Persons.

Non-compliance issues and associated risks will be reported by Maintenance Services to the Water Management Safety Group.

8.2. Audit

The NHSL Water Safety Group shall ensure that an annual legionella audit is carried out on the water management arrangements for each hospital site. The scope of the audit will be agreed by the NHSL Water Safety Group.

NHSL Authorising Engineer is commissioned under SHTM04-01 Part B to carry out the annual audit.

8.3. Review

The NHSL Water Safety Group will carry out an annual review of the Property and Support Services Division management arrangements and make recommendations, where appropriate, to further develop the Water Management Strategy, and to facilitate continual improvement and good practice. The outcome of the review will be presented to the LICC.

The NHSL Water Safety Group will review this Policy every 2 years, or when circumstances dictate.

9. Equality and Diversity Impact Assessment

This policy meets NHS Lanarkshire’s EDIA. Document B has been completed and a copy has been sent to hina.sheikh@lanarkshire.scot.nhs.uk

(Tick box)

10. Summary or Frequently Asked Questions (FAQs)

There is no requirement for an FAQ’s list to be read in conjunction with this Policy.
11. References

a. Health and Safety at Work etc Act, 1974
b. The Management of Health and Safety at Work Regulations,
c. Control of Substances Hazardous to Health (COSHH) Regulations,
d. Public Health (Infectious Diseases) Regulations,
e. Water Supply (Water Quality) Regulations,
f. The Health and Safety Commission’s Approved Code of Practice and guidance ACOP L8, Legionnaires' disease. The control of legionella bacteria in water systems and the associated documents HSG 274 parts 1, 2 and 3
g. Food Safety Act, 1990
h. Water Supply (Water Fittings) Regulations,
i. British Standard BS8558; Guide to design, installation, testing and maintenance of services supplying water for domestic use within building and their curtilages,
j. British Standard BS806; Specification for installation inside buildings conveying water for human consumption,
k. British Standard BS1710; Specification for identification of pipelines and services,
l. British Standard BS8580; Risk assessment for legionella control,
m. National Infection Prevention Control Manual Health Protection Scotland
n. NHSL Control of Infection Manual
o. SHTM 04-01 Water safety for healthcare premises
p. SHTM 03-01 Ventilation for healthcare premises
q. CEL 08 (2013) Water sources and potential infection risk to patients in high risk units – revised guidance
r. Health Protection Network Scottish Guidance: Guideline on the management of Legionella cases, incidents, outbreaks and clusters in the community 2014.
Appendix 1
Management and Appointment Structure for the Management of Water Systems
Appendix 2
Escalation and Communication Structure for the Identification of a Potential Hazard

Chief Executive – Duty Holder

Executive Director Planning, Property & Performance – Duty Deputy

Director PSSD - Designated Person

Deputy Director PSSD (Operations) Responsible Person Water

Head of Maintenance Services Deputy Responsible Person Water

Maintenance Managers Authorised Person (Water)

Asst. Maintenance Managers Authorised Person (Water)

Competent Persons – Maintenance Technicians, Contractors, Tradespersons etc

PFI/PPPSPV/FM Provider

Infection Control Doctor

Consultant Public Health Medicine

Executive Medical Director

PFI/PPP/Hubco Contract Manager
Appendix 3
Clinical Corporate Governance

Corporate Management Team (CMT)

Healthcare Quality Assurance and Improvement Committee (HQAIC)

Lanarkshire Infection Control Committee (LICC)

Lanarkshire Water Safety Group (WSG)

Maintenance Services Department