

## WATER SAFETY POLICY

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Bodies consulted:	EMT, Estates staff
Approved by:	Board of Directors
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Lead Manager:	Director of Estates, Facilities & Capital Projects
Lead Director:	Deputy Chief Executive
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## CONTENTS

Section		Page
1	Introduction	
2	Purpose	
	Scope	
3	Definitions	
4	Duties and Responsibilities	
7	Procedures	
8	Training	
9	Monitoring	
10	References	
11	Associated documentation	
Appendix	Equality statement	

## 1. Introduction

- 1.1. The Tavistock and Portman NHS Foundation Trust (the “Trust”) is committed to maintaining the highest standards of water safety in order to minimise the risk of causing a water related infection to a patient, student, visitor or member of staff.
- 1.2. The Trust recognises that it has a statutory duty under the Health and Safety at Work Act etc. 1974 (“Act”) and the Health & Safety Executive (HSE) ACOP L8 to adequately manage the water services under its control.
- 1.3. The Trust also recognises the need for co-operation and a collaborative approach to water safety and the need to work with employees and the statutory authorities to define robust procedures that ensures the water safety of staff and users.

## 2. Purpose

- 2.1. The Trust is committed to providing and maintaining an adequate level of water safety for all people who may be affected by its activities.
- 2.2. Implementation of the policy will ensure:
  - The Trust complies with relevant legislation and wherever possible promote best practise in relation to water safety.
  - Hazards are identified, assess the water risks and where possible remove, control or prevent re-occurrence of risks.
  - Availability of appropriate (internal and external) resources to implement this policy effectively.
  - Employees, students, patients, contractors and visitors (together “Users”) are adequately informed of the identified risks and where appropriate receive instruction, training and supervision.
  - Effective communication and consultation of water safety issues through effective risk assessment.
  - A suitable maintenance and monitoring Scheme of Control is implemented, maintained and kept up to date.
  - Regular monitoring and review of compliance with this policy is undertaken with the objective of providing continual improvement.

### 3. Scope

3.1. The Trust will ensure, as far as is reasonably practical, that no Users are exposed to the potential risks posed by water.

3.2. The Trust will comply with:

- Health and Safety at Work etc Act 1974 (“Act”)
- Management of Health and Safety at Work Regulations 1999
- Health & Safety Commission Approved Code of Practice & Guidance - The Control of Legionella bacteria in water systems (L8) 4th Edition 2013
- Control of Substances Hazardous to Health Regulations (COSHH) 2002

3.3. The requirements will be met by following the guidance provided in:

- The Public Health (Infectious Diseases) Regulations 1988
- The Water Supply (Water fittings) Regulations 1999
- The Water Supply (Water Quality) Regulations 2000
- HTM 04-01: Safe Water in Healthcare Premises - Parts A, B & C 2016

3.4. The Trust will ensure that all relevant staff or contractors involved in the design, installation and maintenance of water related services and issues will be competent to carry out the tasks. All necessary resources will be made available to ensure the correct design, construction, supply and use of equipment and maintenance is carried out.

3.5. This policy applies to all buildings where the Trust has responsibility for water safety and where patients, students, visitors, employees, contractors and members of the public attend. This may include the whole of a building or parts of premises where the Trust is a tenant or acts as the landlord.

3.6. Where the Trust is a tenant or acts as the landlord of premises, this policy will apply to the areas for which water safety responsibility imposes requirements on the Trust, and the Trust will ensure such areas of responsibility and any joint requirements are clearly established.

### 4. Definitions

4.1. **Legionella risk assessment** is the process of identifying Legionella related hazards and evaluating the risk to patients, students, visitors and staff, taking into account the adequacy of the control measures in place and implementing further controls if necessary.

4.2. **Legionella Management Scheme of Control** is the maintenance and monitoring programme in place to help control the risk of Legionella and other waterborne infections, from the water services.

- 4.3. Health Technical Memoranda which give comprehensive advice and guidance in the design, installation and operation of water services in healthcare properties. HTM04-01 is the HTM relevant to the Trust.

## 5. Duties and Responsibilities

### **Board of Directors**

- 5.1. The Board of Directors has the responsibility for demonstrating commitment to all matters relating to water safety.

### **Chief Executive**

- 5.2. The Chief Executive will, on behalf of the Board of Directors, ensure that the relevant legislation and codes of practice (as per 2.2 and 2.3 above) are complied with, along with the implementation of this policy, in all premises for which the Trust has the responsibility for water safety.

### **Director of Estates, Facilities and Capital Projects**

- 5.3. The Chief Executive discharges the day to day operational responsibility for water safety through the Director of Estates, Facilities and Capital Projects ("Estates Director"). The Estates Director is the designated Senior Operational Water Safety Manager and is responsible for ensuring that:

- This policy is being implemented, on a day to day basis, by the Head of Estates & Facilities Management (Designated Authorised Person Water)
- The Head of Estates & Facilities Management has the necessary resource to fully implement this policy
- An Annual Audit is undertaken and any actions implemented
- The Board receives appropriate reporting on all water hygiene related issues.

### **Director of Estates, Facilities Management & Capital Projects (Designated Senior Operational Water Safety Manager)**

- 5.4. The Estates Director manages the strategic development and implementation of corporate water safety risks and will also act as the Designated Senior Operational Water Safety Manager.

- 5.5. They are tasked with developing and managing the Water Safety Management System and will be responsible for:

- Ensuring this policy is properly implemented
- Ensure the Head of Estates & Facilities Management has the necessary resource to fully implement this policy
- Ensuring all new works and projects are fully compliant with statutory and guidance requirements
- Reporting any significant matters on water hygiene to the Board
- Attend the Water Safety Group Meetings

## **Head of Estates & Facilities Management (Designated Authorised Person Water)**

5.6. The Head of Estates & Facilities Management will be accountable to the Designated Senior Operational Water Safety Manager for matters of water safety. They will be responsible for:

- Day to day implementation of the water safety policy
- Determining and implementing any internal and/or external resourcing required to fully discharge their duties
- Advising on the mandatory training objectives for staff, which is appropriate to the personnel, the areas in which they work and the activities involved in their work. They will also monitor the delivery of such training
- Ensuring Legionella Risk Assessments are undertaken in line with this policy and that remedial actions are planned and completed in line with the assessments action plans
- Liaise closely with the Trust's Authorising Engineer (Water)
- Liaising with the Estates Director or their nominated works officer on schemes undertaken directly under their control to ensure that overall Trust objectives are accommodated in the design and execution of works, and if necessary, seeking advice from the Authorising Engineer (Water)
- Preparing reports for the Estates Director on matters arising in respect of water safety management within the Trust
- Chair the Water Safety Group Meetings

## **Authorising Engineer (Water)**

5.7. The Trust will ensure that a competent, independent Authorising Engineer (Water) is appointed. This will be a specialist water consultant, with sufficient experience, knowledge and expertise. They will:

- Advise on the interpretation and application of water safety legislation and guidance.
- Complete an annual compliance status audit.
- Attend two Trust Water Safety Group Meetings per year
- Provide phone and email support as required

## **Water Hygiene Contractor**

5.8. The Water Hygiene Contractor will:

- Complete the Trust's Water Management Scheme of Control
- Provide water services site log books and update after each service and monitoring visit
- Liaise closely with the Trust Designated Authorised Person Water and report any issues or out of range findings in line with the scheme of control requirements

## **Estates & Facilities Management Staff ("E&F")**

5.9. Under the instruction from the Trust Designated Authorised Person Water E&F staff will flush the highlighted infrequently used outlets to the agreed Trust regime and document the flushing on the Trust forms.

## **All other employees**

- 5.10. All staff employed by the Trust and those who are self-employed or employed by others occupying Trust premises are legally responsible for their own safety and other persons who may be affected by their actions.
- 5.11. All staff are responsible for ensuring any duties allocated to them by their employer are performed or complied with.

## **6. Procedures**

- 6.1. Key to ensuring a high standard of water hygiene safety is the introduction of a robust monitoring Scheme of Control along with a current water safety policy.
- 6.2. Specific management roles and responsibilities should be allocated to staff that have the relevant competencies.
- 6.3. Specifications for water safety in upgraded, refurbished and new-builds must follow the Trust's Procedures. The Designated Senior Operational Water Safety Manager will need to be aware of all work that may impact on water safety including maintenance activities.
- 6.4. Records will be kept of all maintenance and monitoring activities and regular audits will be undertaken. The results of these audits will be discussed at the Trust's Water Safety Group.

## **7. Training**

- 7.1. The Chief Executive will ensure there is adequate resource available for a robust training programme with a three yearly refresher frequency.
- 7.2. The designated Senior Operational Water Safety Manager and Designated Authorised Person Water will complete and pass an accredited Responsible Persons course on water hygiene.
- 7.3. All other staff members involved in water hygiene management will have appropriate Water Hygiene General Awareness training.

## **8. Monitoring and review**

- 8.1. The contents of this policy will be reviewed on an annual basis to ensure that it remains compliant and relevant. Any changes necessary as a result of new legislation will be made as soon as practically possible.
- 8.2. Trust compliance with this policy will be carried out by regular audit. This may be by way of internal or external audits. All identified deficiencies will be tracked until completion and results of these audits will be discussed at the various committee meetings.
- 8.3. An annual audit will be undertaken by the Authorising Engineer (Water) delivered to the Designated Authorised Person (Water) and the Water Safety Group.

## 9. References

- Health & Safety Executive Approved Code of Practice 2013 - The Control of Legionella bacteria in water systems (L8)
- Health & Safety Executive Guidance (HSG 274 Parts 2 and 3)
- HTM 04-01: Safe Water in Healthcare Premises - Parts A, B & C 2016
- Health and Safety at Work etc., Act 1974
- Management of Health and Safety at Work Regulations 1999
- Control of Substances Hazardous to Health Regulations 2002, Regulation 6 (COSHH)
- The Public Health (Infectious Diseases) Regulations 1988
- The Water Supply (Water fittings) Regulations 1999
- The Water Supply (Water Quality) Regulations 2000
- Requirements for building services used in Healthcare Premises (2011)

## 10. Associated Documentation

- Health and Safety Policy



# Equality Impact Assessment

<b>Completed by</b>	<b>Alessandro Ruggeri</b>
<b>Position</b>	<b>Head of Estates and Facilities Management</b>
<b>Date</b>	<b>29 August 2018</b>

The following questions determine whether analysis is needed	Yes	No
Is it likely to affect people with particular protected characteristics differently?		X
Is it a major policy, significantly affecting how Trust services are delivered?		X
Will the policy have a significant effect on how partner organisations operate in terms of equality?		X
Does the policy relate to functions that have been identified through engagement as being important to people with particular protected characteristics?		X
Does the policy relate to an area with known inequalities?		X
Does the policy relate to any equality objectives that have been set by the Trust?		X
Other?		X

If the answer to *all* of these questions was no, then the assessment is complete.

If the answer to *any* of the questions was yes, then undertake the following analysis:

	Yes	No	Comment
Do policy outcomes and service take-up differ between people with different protected characteristics?			
What are the key findings of any engagement you have undertaken?			
If there is a greater effect on one group, is that consistent with the policy aims?			
If the policy has negative effects on people sharing particular characteristics, what steps can be taken to mitigate these effects?			
Will the policy deliver practical benefits for certain groups?			
Does the policy miss opportunities to advance equality of opportunity and foster good relations?			
Do other policies need to change to enable this policy to be effective?			
Additional comments			

If one or more answers are yes, then the policy may unlawful under the Equality Act 2010 –seek advice from Human Resources (for staff related policies) or the Trust’s Equalities Lead (for all other policies).