



Legionella Policy

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1. INTRODUCTION

ECCH accepts its responsibilities under the Health and Safety at Work Act 1974 and the Control of Substances Hazardous to Health Regulations 2002 to take all reasonable precautions to prevent or control the harmful effects of contaminated water (i.e. legionella) to staff, patients, visitors and any other persons working at or using its premises.

2. PURPOSE:

The purpose of this policy is to provide and maintain safe and healthy conditions, equipment and systems for all staff and visitors and to provide such resource, information, training and supervision as they need for this purpose. ECCH aims to do all that is reasonably practicable to manage potable water and Legionella and to follow the steps laid out in the policy.

The policy has been formally approved by ECCH and the organisation will do all that is reasonably practicable to comply with its requirements.

3. SCOPE:

The policy covers all ECCH owned, leased or informally occupied premises, which can be solely occupied or shared with other organisations. Where properties are not fully owned by ECCH, each of the other organisations will be formally advised of ECCH's limits of responsibility and will be provided with sufficient and reasonable advice to ensure that the building owner or landlord maintains compliant systems.

4. DEFINITIONS

The following definitions are intended to provide a brief explanation of the various terms used within this policy.

Term	Definition
Policy	A policy is a formal written statement detailing an enforceable set of principles or rules. Policies set the boundaries within which we operate. They also reflect the philosophy of our organisation.
Legionnaires' disease	Legionnaires' disease, also known as legionellosis or Legion Fever, is a form of atypical pneumonia caused by any type of Legionella bacteria. Over 90% of cases of Legionnaires' disease is caused by Legionella pneumophila. Other causative species include L.longbeachae, L.feeleii, L.micdadei and L. anisa. These species cause a less severe

	<p>infection known as Pontiac Fever, which resembles acute influenza. These bacterial species can be water-borne or present in soil, whereas <i>L.pneumophila</i> has only been found in aquatic systems, where it is symbiotically present in aquatic-borne amoebae. It thrives in temperatures of 35°C (95°F). During infection, the bacterium invades macrophages and lung epithelial cells and reproduces within the infected cells. Some people are at higher risk, including:</p> <ul style="list-style-type: none"> • People over 50 years of age • Smokers and heavy drinkers • People suffering from chronic respiratory or kidney disease • Anyone with an impaired immune system <p>The bacterium <i>Legionella Pneumophila</i> and related bacteria are common in natural water sources such as rivers, lakes and reservoirs, but usually in low numbers. If conditions are favourable, the bacteria may grow, increasing the risks of Legionnaires' disease.</p>
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5. RESPONSIBILITIES

Duty Holder

The Chief Executive of ECCH has overall accountability for all aspects of the safety and quality of water supplies with the organisation (Duty Holder within the meaning of the Health & Safety at Work Act 1974).

The Chief Executive has nominated the Head of Estates and Facilities to carry out the specific responsibility for the quality of water supplies within the organisation.

The Head of Estates and Facilities has responsibility to the Chief Executive for ensuring robust arrangements are in place to maintain the quality of water supplies within the organisation.

The Head of Estates and Facilities has been appointed by ECCH as the Responsible Person (*Legionella*) and will be given the resources (time, staff and funds) to discharge these duties.

Responsible Person

The Head of Estates and Facilities will act as the Responsible Person and has appointed a Deputy to who delegated responsibilities may be given. In the absence of the

Head of Estates and Facilities.

The Responsible Person will be required to liaise closely with other professionals in various disciplines. This individual's role, in association with Estates and Facilities staff and specialist consultants, involves:

- Advising on potential areas of risk and identifying where systems do not comply with guidance;
- Advising on the necessary continuous procedures and actions for the prevention of Legionella;
- Monitoring the implementation and efficacy of these procedures and actions;
- Approving and identifying any changes to those procedures and/or actions;
- Maintaining and co-ordinating adequate records;
- Identifying appropriate and ongoing training for all relevant staff.

Deputy Responsible Person

The Deputy Responsible Person will act for the Responsible Person in their absence and will carry out delegated responsibilities.

Infection Prevention and Control Committee (IPACC)

This Policy should be distributed to the Infection Prevention & Control Committee, and they should have oversight of any amendments to the policy. An annual report will be provided to IPACC.

Service Managers

Service Managers will adhere to the procedures set out in this Policy. They will ensure good communications within their service so that all staff are aware of their risk registers and associated action plans. They will ensure that staff members within the team are suitable trained in the understanding of legionella at a level appropriate to the role held.

ECCH Employees – Are responsible for the implementation of this policy and following the requirements of the policy: For the purposes of this policy, 'Employees' include ECCH's staff, Board, Executive and Non-Executive Members (including Co-Opted Members) and Honorary Members to the Board.

Chief Executive of ECCH – Overall responsibility for the enforcement of this policy lies with the Chief Executive of ECCH

ECCH Managers – Line managers at all levels have a responsibility to ensure that an adequate system of internal control exists within their areas of responsibility and that controls operate effectively. The responsibility for the prevention and detection of bribery therefore primarily rests with managers but requires the co-operation of all employees.

6. POLICY STATEMENT

ECCH is committed to managing, auditing, and monitoring the services' regulatory and legal compliance including the CQC's Essential Standards of Quality & Safety and other appropriate Health and Safety Regulations.

Public Service Values

High standards of corporate and personal conduct, based on the recognition that patients come first, have been a requirement throughout the NHS since its inception. The fundamental public service values are:

Accountability

Everything done by those who work in ECCH must be able to stand the tests of parliamentary scrutiny, public judgements on property and professional codes of conduct.

Probity

Absolute honesty and integrity should be exercised in dealing with NHS patients, assets, employees, suppliers and customers.

Openness

ECCH's actions should be sufficiently public and transparent to promote confidence between ECCH and its patients, our employees and the public.

Selflessness

should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family or their friends.

Integrity

Should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties

Objectivity

should, in carrying out public business, (including making public appointments, appointments, awarding contracts, or recommending individuals for rewards and benefits), make choices on merit.

Accountability

are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

Openness

should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest demands.

Honesty

have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

Routine Control Actions Item	Task	Frequency
Whole Site	Risk assessment carried out by competent person and report made. It should be reviewed if any significant changes are made to the plant or pipe work.	Every 2 years
Showers and spray outlets	The outlets need to be flushed on a weekly basis to prevent stagnation in the supply pipework.	Weekly
Shower heads /spray nozzles	Dismantle, clean and de-scale all showerheads and spray nozzles to minimise the risk of colonisation by Legionella	Quarterly
Hot & cold water outlets	The outlets should be flushed weekly to prevent stagnation in the supply pipework. This role is to be carried out by domestic staff on site. They will be required to run the taps or shower heads for a minimum of 2 minutes and recorded on the appropriate paperwork provided by the Legionella Management Committee and held on site for a 5 year period.	Weekly
	Temperatures at sentinel outlets and 10% of remaining taps shall be checked on a monthly basis ensuring all taps have the temperatures tested and recorded in the Legionella Management Plan over a 12 month period.	Monthly

<p>Control:</p> <p>Hot outlet of supply to TMV >50°C after one minute running.</p> <p>Cold outlet <20°C after two minutes running.</p>	
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7. PROCEDURE

ECCH commissions a service with a hard facilities management (FM) services provider to support the delivery of its obligations in this area. The water testing regime is undertaken by this service provider in accordance with Legionnaires' Disease, the control of legionella bacteria in water systems (L8) Approved Code of Practice and Guidance. They hold all testing records electronically and hard copies are retained in folders on each site and these are available on request. Where ECCH is the tenant, the Landlord has the obligation to carry out water testing in accordance with Legionnaires' Disease, the control of legionella bacteria in water system (L8) Approved Code of Practice and Guidance. They hold all testing records centrally and hard copies are retained on each site these are available on request.

7.1 Management

Overarching management of L8 issues is conducted via the ECCH L8 Management Group. This group will provide a forum for discussion and for sharing information, and will include a representative from Estates and Facilities, Infection Control and all Landlords. Meetings will be held four times a year (see *Appendix 1 – Terms of Reference*). The group has responsibility for periodic review of the documentation and effectiveness of maintenance procedures set within the SLA.

The minutes from the meeting will be shared with the Infection Prevention and Control Committee and will be shared with Quality Committee. This process assures the Duty Holder of the L8 management process. These minutes will be made available to Integrated Governance Committee.

Training

Relevant training courses will be provided to ensure that relevant staffs are apprised of new developments in respect of Legionella management.

Record Keeping

To ensure precautions continue to be carried out, and that adequate information is available for checking what is done in practice, a record should be kept and maintained for at least five years, showing the information as specified in the Approved Code of Practice (ACOP) in the retention schedule.

Flushing

Tap flushing is undertaken by ECCH's domestic services team. This regime is duly documented and a manual record is held on site, and a copy being forwarded to the Estates and Facilities Team for audit purposes. Where domestic services are provided by a contractor, ECCH must seek assurance that the contractors staff are carrying out tap flushing and maintaining records, which will need remain on site for 5 years.

Legionella Sampling

Testing for Legionella shall be carried out in accordance with the requirements of *HTM 04-01 Part B Operational Management*.

Maintenance

The hard FM services provider, on behalf of ECCH, will:

- Consider the efficacy of all contractors employed by the hard FM provider, commissioned on Legionella Management & Control and Safe Hot Water Management related projects.
- Monitor the efficacy of all training programmes implemented for associated staff employed by the hard FM provider.
- Maintain a uniform Potable Water and Legionella Management & Control Programme across ECCH.
- Assist Public Health England to implement all necessary contingency procedures in full consultation of Infection Prevention Control Team.

Major Cleaning and Disinfection

In addition to the routine maintenance outlined above, it may also be necessary to instruct a major clean and disinfection.

Domestic hot and cold water can harbour Legionella particularly in areas of fouling, stagnation and in the ferric sludge that collects at the bottom of calorifiers and storage cisterns. It is therefore important that these are kept clean and free from sludge by periodic flushing to deprive the bacteria of nutrient medium.

When carrying out remedial treatment, an independent specialist should be appointed to either witness operations or carry out the operations and confirm their satisfactory completion and recording and compliance with BS6700.

Water systems should be cleaned and disinfected before being taken into service and if any one of the following occurs:

- A routine inspection identifies the need;
- Following substantial alteration or entrance of the system for maintenance;
- An outbreak, suspected outbreak, or Legionella positive test result.

There are two main options for the eradication of Legionella in hot water systems, chlorination or pasteurisation. Pasteurisation may not be as effective as chlorination and so its use is recommended as an initial remedial action prior to full chlorination.

Chlorination

Chlorination should be carried out in accordance with BS6700 specification for the design, installation, testing and maintenance of services supplying water for domestic use and their curtilage. Where a hot water system is to be disinfected by this procedure, the system must be allowed to cool prior to chlorination and the system must be vented adequately. For pressurised systems, specialist advice must be sought.

All visible dirt and debris shall be removed from the water cistern. The cistern and distributing pipes shall be filled with clean water and then drained until empty of all water. The cistern shall then be filled with water again and the supply closed. A measured quantity of sodium hypochlorite solution of known strength shall be added to the water in the cistern to give a free residual chlorine concentration of 50 mg/L in the water. The cistern shall be left to stand for 1 hour. Then each draw-off fitting shall be successively opened working progressively away from the cistern. Each tap and draw-off fitting shall be closed when the water discharged begins to smell of chlorine. The cistern shall not be allowed to become empty during this operation; if necessary, it shall be refilled and chlorinated as above. The cistern and pipes shall then remain charged for a further 1-hour.

The tap furthest from the cistern shall be opened and the level of free residual chlorine in the water discharge from the tap shall be measured. If the concentration of free residual chlorine is less than 30 mg/L the disinfection process shall be repeated.

Pasteurisation

Having ensured that the Calorifier is vented, increase the temperature in the calorifier so that it is above 60 degrees centigrade. Draw water through the drain cock at a pasteurising temperature of 55 degrees centigrade to 60 degrees centigrade for two minutes (preferably longer). Hold the calorifier at temperature for 1 hour then, starting with the furthest outlet away, draw hot water through each tap and appliance sequentially at a pasteurising temperature. If the calorifier cannot produce water at the correct temperature, the procedure must be repeated.

If the hot water is at a pasteurising temperature initially, but the recovery of the calorifier is insufficient to maintain the water temperature, the procedure must be stopped, the calorifier held above 60 degrees centigrade for a further 1 hour and the procedure re-started at the outlets, which have not been pasteurised. For the procedure to be effective, all parts of the system must reach a pasteurising temperature.

Both chlorination and pasteurisation should be carried out only when the building and all relevant systems are under the full control of the operating contractor/Independent Specialist, who should ensure compliance with the Health and Safety at Work Act 1974 and the COSHH regulations.

Remedial actions

If there is any doubt whatsoever about how to achieve the eradication, specialist assistance must be sought. Once the eradication procedure has been completed, the system is put back into service. Seven days later, further samples must be taken to confirm the effectiveness of the procedures.

7.2 In the case of an outbreak

Action to be taken in the case of a Legionella Positive Test result:

For an infection with Legionella to occur three factors must be satisfied:

- The organism must be present
- The organism must be dispersed into the air within a fine aerosol
- A susceptible individual must inhale the infected aerosol

ACTION ONE

As soon as a Legionella-positive analysis is notified, and the source identified the patient should endeavour to control one or more of the factors above.

ACTION TWO

Inform the Responsible Person within ECCH and the Landlord organisation.

ACTION THREE

Undertake remedial action as described in the section above detailing major cleaning and disinfection. A suitably qualified member of staff or an appointed specialist should supervise.

Action to be taken in the event of a suspected outbreak of Legionnaires' Disease at an ECCH Site

ACTION ONE

Assume that any aerosol-producing water source could be responsible and take such steps to prevent any further risk of exposure. It will be necessary to inform the operatives carrying this out to ensure compliance with the provisions of the Health and Safety at Work Act 1974, COSHH Regulations and the Approved Code of Practice and Guidance (L8).

ACTION TWO

Inform the Responsible Person within ECCH. The Responsible Person should liaise with the Infection Control Lead. ECCH has responsibility for co-ordination of the investigation of outbreaks. The Health Protection Agency (HPA) and Communicable Disease Surveillance Centre (CDSC) of the HPA may also be called in for support.

ACTION THREE

The Responsible person will ask an appointed independent specialist to arrange for an investigation into the systems to identify any contaminated water source, which may be implicated, and to seek other relevant advice. Any investigation undertaken must be strictly in line with any course of action and instruction issued by the ECCH (action two above).

Course of Action if an outbreak of Legionnaires' disease is suspected

Contact United Kingdom Health Security Agency (UKHSA) in a timely fashion and consult with Lead and IPACC and where necessary the Health and Safety, Security and Resilience Manger.

Water Systems Temporarily out of Use (For seven days or longer)

It will be the responsibility of the Manager of the department occupying an area to inform relevant parties if any rooms or buildings are taken out of use. For buildings managed by others they should inform the Estates and Facilities Department within their organisation,

Water Systems Permanently out of Use (For periods exceeding sixty days)

Water systems which are no longer required should be removed. Notification of these systems should be made, in the first instance to the Estates and Facilities Helpdesk - ESTATESANDFACILITIESHELP@ecchcic.nhs.uk.

The ECCH Estates and Facilities Department will then liaise with the relevant host organisation to instruct this work. Systems which may be re-used some time in the future are to be disconnected back at the running part of the main and left drained down with their pipe work ends securely capped.

8. MONITORING AND REVIEW

The Infection Prevention and Control Committee will review and approve this policy. The Health & Safety Committee will receive the policy for information.

9. REFERENCES

In implementing this policy, ECCH and the hard services provider will use the documents listed below as a general source of practical guidance:

- BS 1710: 2014 Specification for identification of pipeline services
- BS 8558:2011 Specification for the design, installation, testing and maintenance of services supplying water for domestic use within buildings and their curtilages
- BS 7942: 2011 Thermostatic mixing valves for use in care establishments. Requirements and test methods
- BS EN 806-2: 2005 Specification for installations inside buildings conveying water for human consumption
- Control of Substances Hazardous to Health Regulations 2002
- Health and Safety at Work Act 1974
- HGN "Safe" hot water and surface temperatures 1998
- HSG 274 Legionella Technical Guidance:
- HTM 04-01 'The control of Legionella hygiene, "safe" hot water, cold water and drinking water systems: Part A design, installations, and testing
- HTM 04-01 'The control of Legionella hygiene, "safe" hot water, cold water and drinking water systems: Part B Operational Management
- HTM 04-01 'The control of Legionella hygiene, "safe" hot water, cold water and drinking water systems: Addendum Pseudomonas aeruginosa
- HTM 03-01 Specialised ventilation for healthcare premises
- Legionnaires' disease, the control of legionella bacteria in water system (L8) Approved Code of Practice and Guidance 4th edition 2013
- HTM2015 Ventilation in Healthcare Premises
- HTM2027 Hot and cold-water supply storage and mains service

- Management of Health and Safety at Work Regulations 2002, Regulation 6
- NHS Model Hospital - Engineering specifications D 08 Thermostatic mixing valves (Healthcare premises)
- Standards for Better Health Department of Health
- Public Health (Infectious Diseases) Regulations 1988
- Water Supply (Water Fittings) Regulations 1999
- Water Supply (Water Quality) Regulations 2000

10. MONITORING AND REVIEW

This document will be reviewed by the Audit Committee, annually or sooner if changes in legislation occur or new best practice evidence becomes available.

11. AUTHOR: Head of Estates

12. APPENDICES

13. EQUALITY & DIVERSITY IMPACT ASSESSMENT

In reviewing this policy, the HR Policy Group considered, as a minimum, the following questions:

- Are the aims of this policy clear?
- Are responsibilities clearly identified?
- Has the policy been reviewed to ascertain any potential discrimination?
- Are there any specific groups impacted upon?
- Is this impact positive or negative?
- Could any impact constitute unlawful discrimination?
- Are communication proposals adequate?
- Does training need to be given? If so, is this planned?

Adverse impact has been considered for age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, sexual orientation.

Blank version of the full Equality & Diversity Impact assessment can be found here:

http://eccho/Home/FormsGuidance.aspx?udt_575_param_index=E&udt_575_param_page=2

14. DOCUMENT CONTROL

Version Date	Version No.	Author/ Reviewer	Comments
November 2019	2	Head of Estates/Virtual IPAC meeting	
April 2023	3	Head of Estates/Virtual IPAC meeting	

DOCUMENT CONTROL SHEET

Name of Document:	Legionella Policy
Version:	4
File Location / Document Name:	ECCHO / Legionella Policy
Date Of This Version:	March 2024
Produced By (Designation):	Head of Estates
Reviewed By:	I.P.A.C.
Synopsis And Outcomes Of Consultation Undertaken:	N/A
Synopsis And Outcomes Of Equality and Diversity Impact Assessment:	None
Ratified By (Committee):-	Health and Safety
Date Ratified:	
Distribute To:	Publish on ECCHO
Date Due For Review:	April 2025
Enquiries To:	Head of Estates
Approved by Appropriate Group/Committee Approved by Policy Group Presented to IGC for information	<input type="checkbox"/> Date: <input type="checkbox"/> Date: <input type="checkbox"/> Date:

15. Appendix A –

ECCH L8 Management Group – Terms of Reference

CONSTITUTION

The purpose of the Legionella Management Group is to ensure that East Coast Community Healthcare CIC (ECCH) has focus on maintaining adequate and safe workplaces and environments for staff, patients and anyone else on our premises.

Minutes of these meetings will be circulated to all group members and sent for review to the Infection Prevention and Control Committee (IPACC) and made available to the Integrated Governance Committee (IGC).

SPECIFIC AREAS OF RESPONSIBILITY

The Legionella Management Group will provide a forum where staff and managers come together to focus on maintaining a suitable workplace and environment for staff, patients, and anyone else on our premises through:

1. Reviewing working processes of the buildings.
2. Identifying site issues, agreeing action plans with timescales and reviewing progress.
3. Providing updates on previously reported issues.
4. Examining local trends in incident reporting.
5. Feeding back with comments from occupier groups and service users.
6. Coordinating appropriate training.
7. Coordinating equipment testing.
8. When required, the setting up of the Legionella Action Committee.

MEMBERSHIP

The Legionella Management Group will comprise the following representatives.

a. Operational Management:

- i. Head of Estates and Facilities
- ii. Operational Managers from Estates and Facilities
- iii. Infection Control Specialist

b. Representatives from hard facilities management providers and Landlords

Where necessary, other specialist advisers may be co-opted to support the work of the Group as and when deemed appropriate.

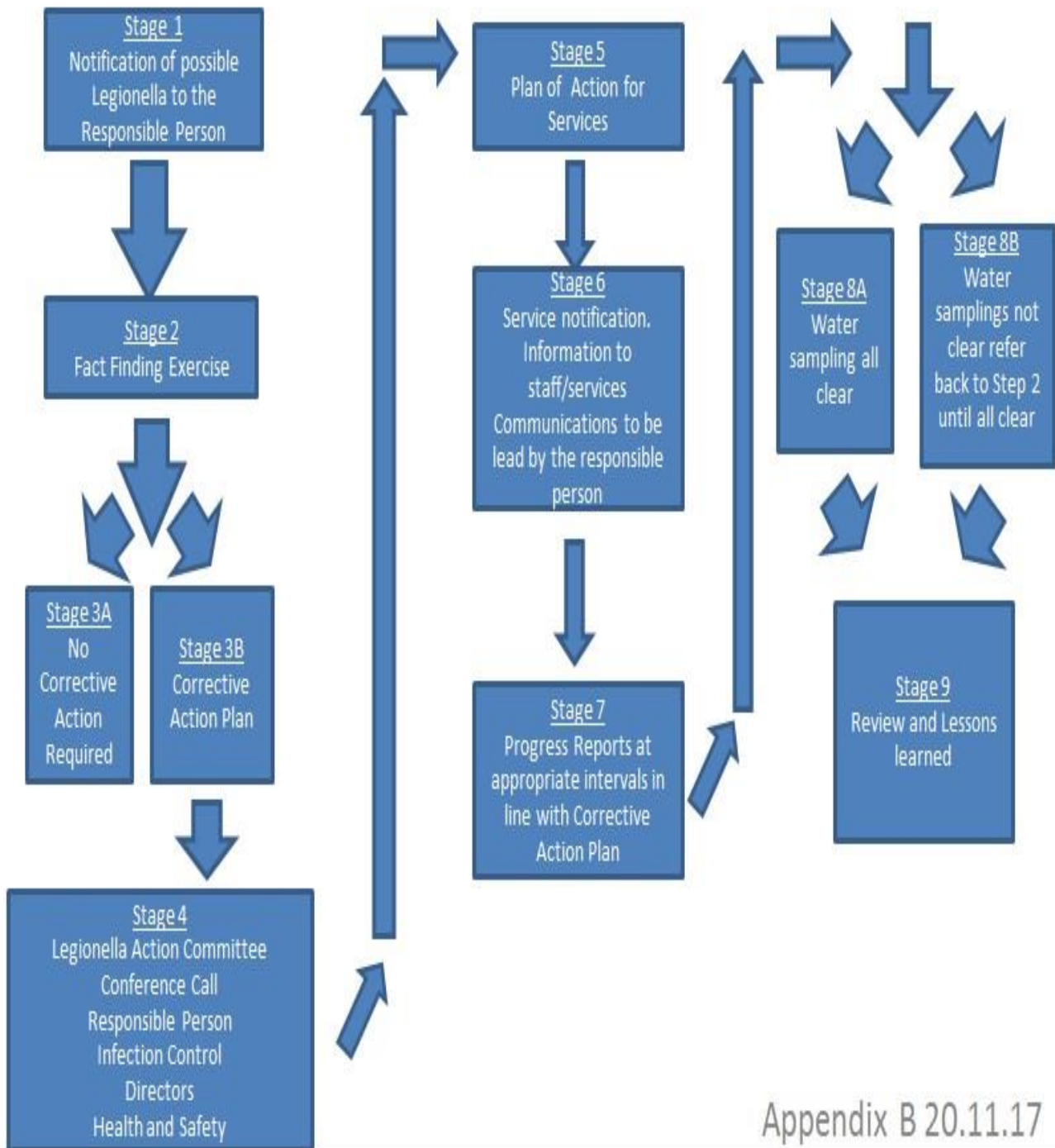
A quorum will be at least one member of the Estates Operational Team, a member of the IPACC team and a representative from external organisations.

FREQUENCY OF MEETINGS

The Legionella Management Group will meet four times a year; the dates of these meetings will be agreed with IPACC to occur approximately two weeks before IPACC meetings.

16. Appendix B: Legionella Flow Chart

Legionella Flowchart



Appendix B 20.11.17